

# Toward Competency-Based Best Practices in Teaching and Learning: The Global Health Starter Kit

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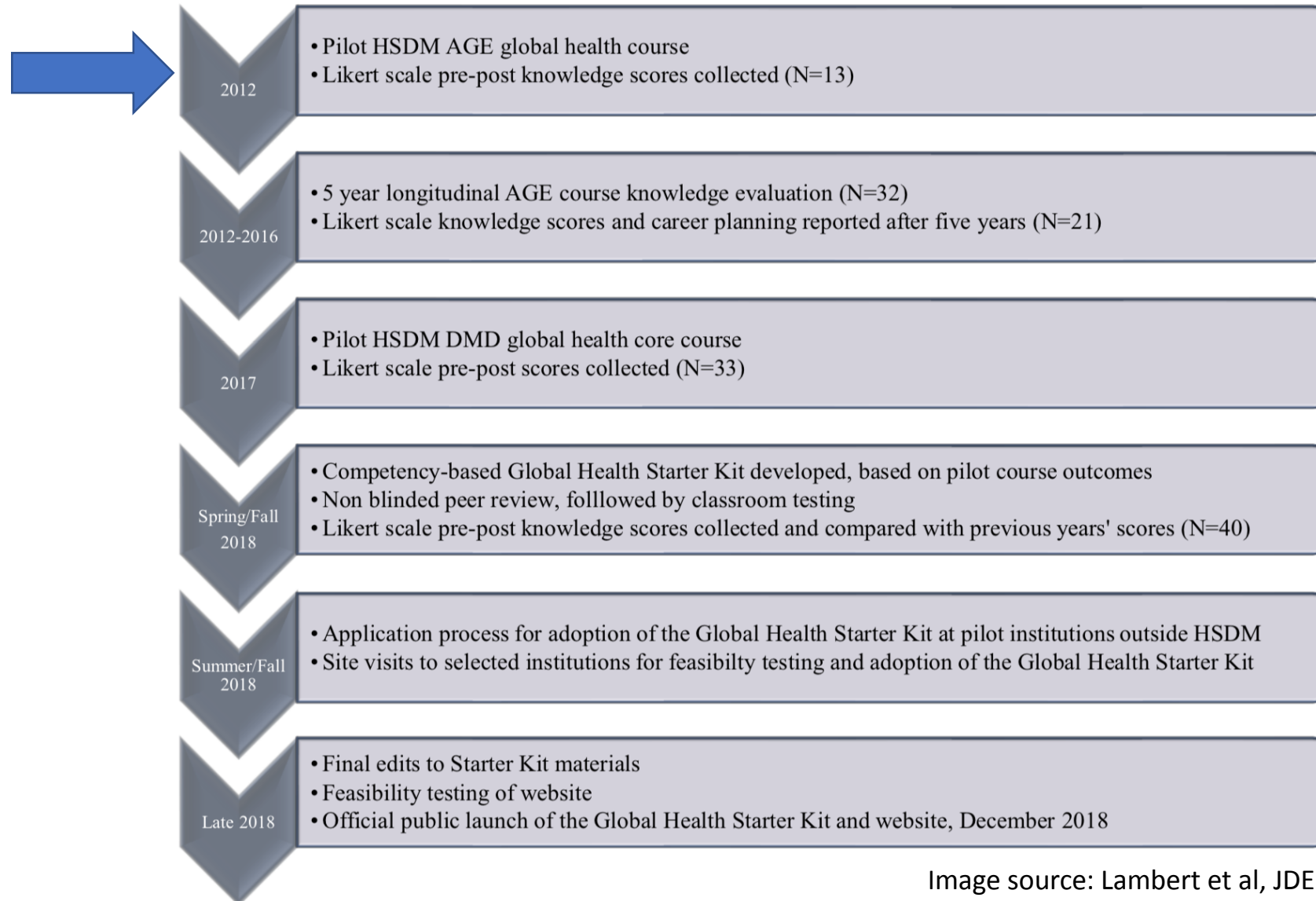
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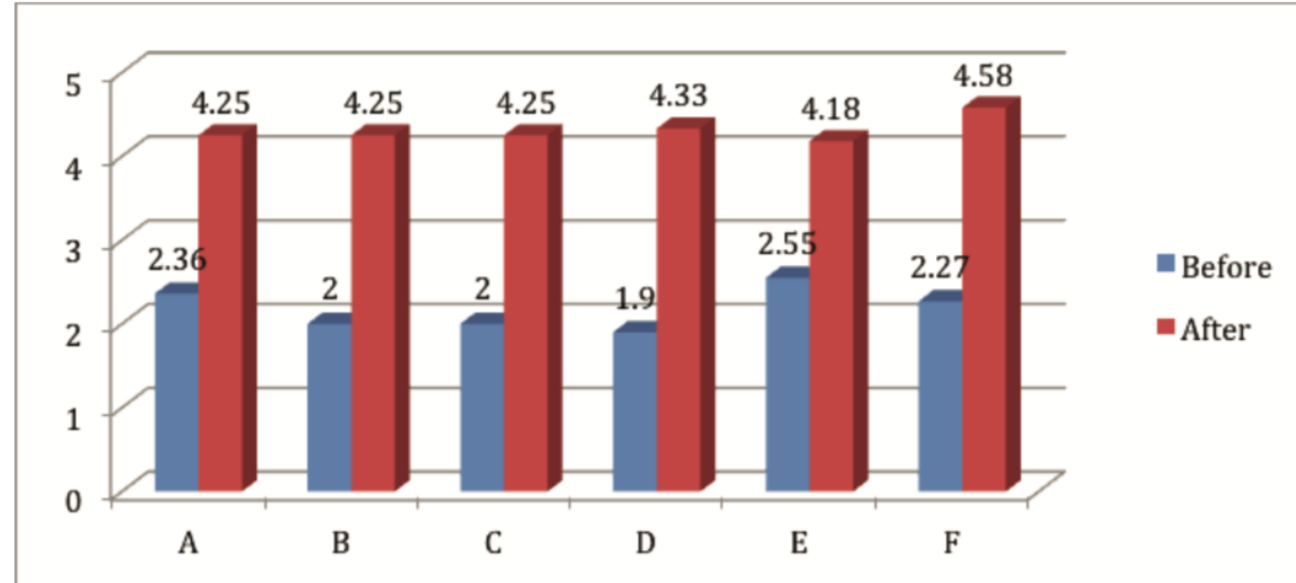


# Global Health Starter Kit timeline





# Global Health Starter Kit timeline



**Figure 2. Students' perceptions of their global oral health knowledge before and after taking the course (N=13; average scores on scale of 1=very poor, 2=poor, 3=fair/moderate, 4=good, 5=excellent)**

Categories of global oral health knowledge measured in assessment:

A=Global burden of oral disease

B=Global population trends, theories, and the relationship to oral health

C=Global disease patterns, theories, and the relationship to oral health

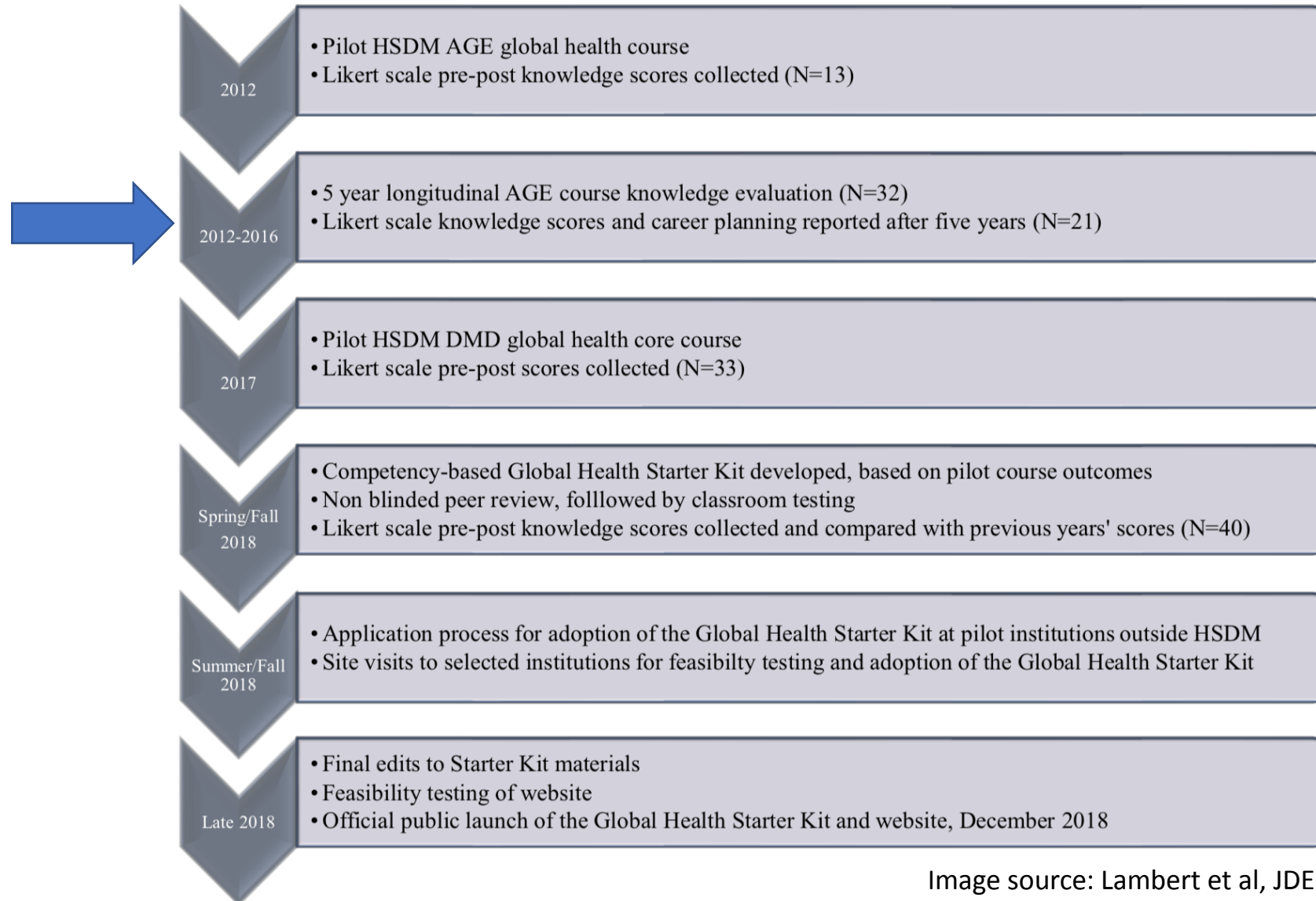
D=Concepts in global oral health research

E=Global oral health organizations

F=The role of primary care in global oral health

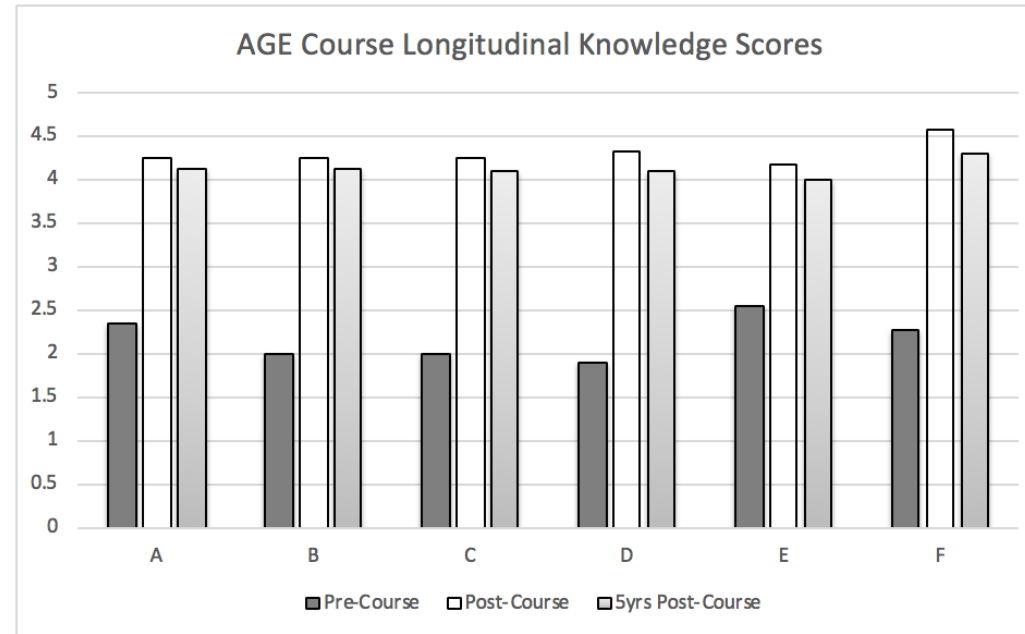


# Global Health Starter Kit timeline





# Global Health Starter Kit timeline



Student perceptions of their knowledge before and after taking the AGE global health course, N=32, compared with self-reported combined 5 years post-course knowledge scores, N=21 (average scores, 1=very poor, 2=poor, 3=fair/moderate, 4=good, 5=excellent)

A=Global burden of oral disease

B=Global population trends, theories, and the relationship to oral health

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# Global Health Starter Kit timeline

**Student-reported impact of course on participation in aspects of global health practice and aspects of enrollees' career planning**

<i>Likert Scale</i>	<i>1 (none)</i>	<i>2 (a little)</i>	<i>3 (some)</i>	<i>4 (a lot)</i>	<i>5 (a tremendous amount)</i>
<b><i>Aspect of global health practice</i></b>					
Collaborating with health professionals both within and beyond dentistry	0	2	1	9	6
Collaborating with non-health professionals (non-clinicians)	1	3	2	7	3
Providing clinical care to vulnerable/underserved populations	1	1	4	4	8
Providing services other than direct patient care to vulnerable/underserved communities and/or populations	0	2	5	4	6
Engaging in any policy work or advising	1	2	6	4	5
Securing funding to improve the health of communities	2	2	7	7	1
Working with governments or NGOs to improve the health of communities	1	4	6	2	6
<b><i>Aspect of enrollees' career planning</i></b>					
Refining career goals	0	3	10	3	5
Deciding what to do after completion of training	5	3	6	4	3
Considering career plans not previously contemplated	2	5	5	6	3
Developing relationships with global health professionals and mentors	1	2	5	7	6
Current career or program choices	4	5	4	3	5



# Global Health Starter Kit timeline

## **Competency-based Global Health Education** (Consortium of Universities for Global Health, Global Oral Health Interest Group)

### *Global Dental Education*

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## **A Competency Matrix for Global Oral Health**

**Habib Benzian, PhD; John S. Greenspan, PhD; Jane Barrow, MS; Jeffrey W. Hutter, DMD; Peter M. Loomer, PhD; Nicole Stauf, MA; Dorothy A. Perry, PhD**

*Abstract:* The Lancet Commission on Education of Health Professions for the needs and challenges of the 21st century to improve health status makes recommendations for including core global health competency groups of the public who are relevant to oral health in a global context from various professional backgrounds developed global oral health dental students, residents/trainee specialists (or equivalent), and dentists, and dental therapists (or the equivalent); Group 3 was health professional nurse practitioners, and pharmacists; and Group 4 was non-health professional decision makers, key opinion leaders, and health and consumer advocate target groups are presented in a matrix. The suggested competency matrix in society have potentially crucial roles in the prevention, control, and

### *Global Dental Education*

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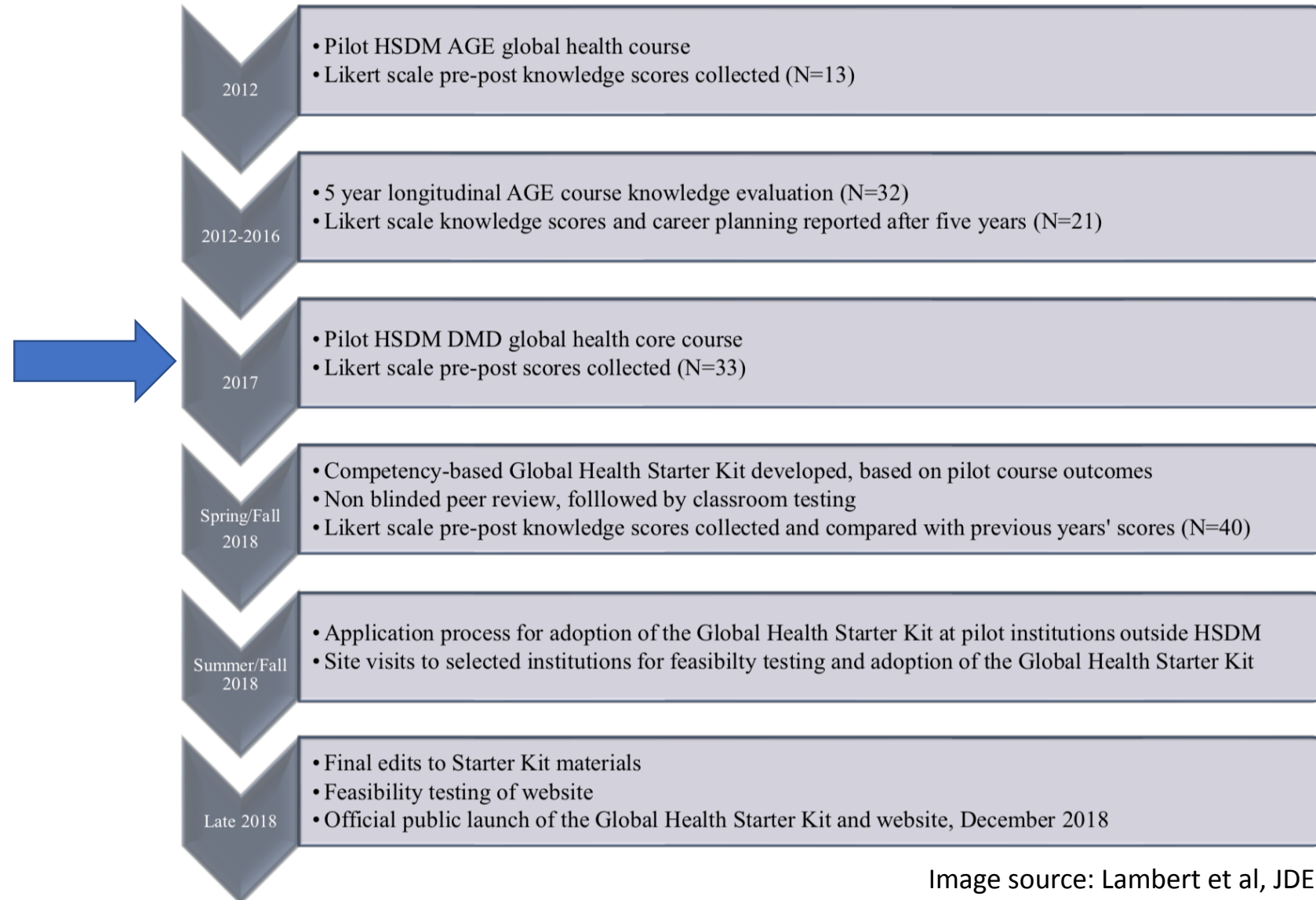
## **Going Global: Toward Competency-Based Best Practices for Global Health in Dental Education**

**Brittany Seymour, DDS, MPH; Elizabeth Shick, DDS, MPH; Benjamin W. Chaffee, DDS, MPH, PhD; Habib Benzian, DDS, MScDPH, PhD**

*Abstract:* The Global Oral Health Interest Group of the Consortium of Universities for Global Health (GOHIG-CUGH) published recommended competencies to support development of competency-based global health education in dental schools. However, there has been no comprehensive, systematically derived, or broadly accepted framework for creating and delivering competency-based global health education to dental students. This article describes the results of a collaborative workshop held at the 2016 American Dental Education Association (ADEA) Annual Session & Exhibition designed to build on the GOHIG-CUGH competencies and start to develop systematic approaches for their practical application. Workshop organizers developed a preliminary theoretical framework for guiding the development of global health in dental education, grounded in published research.



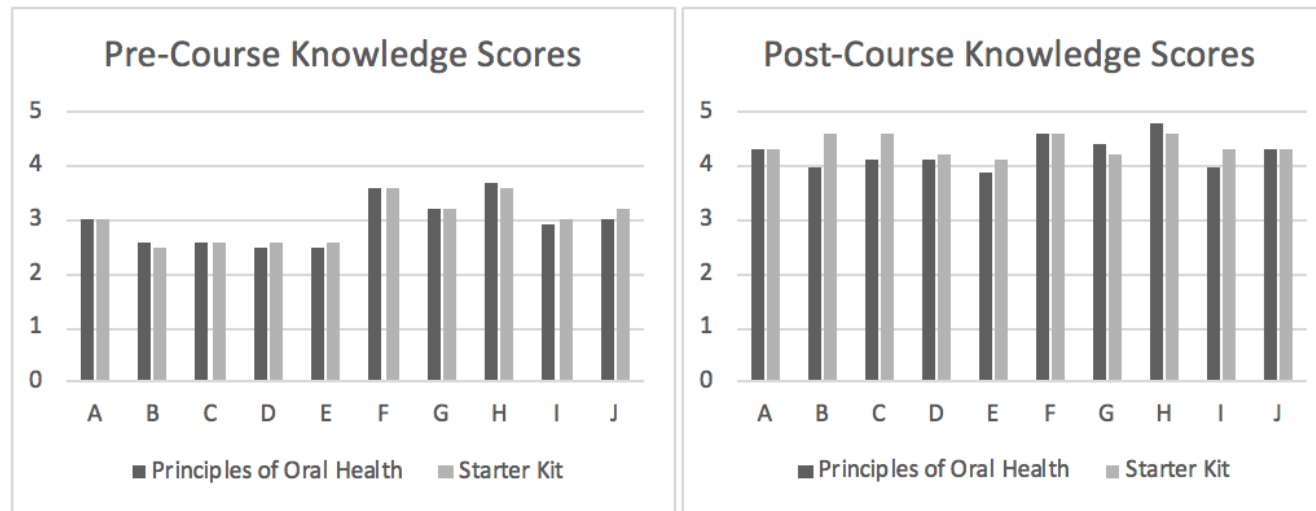
# Global Health Starter Kit timeline







# Global Health Starter Kit timeline



Student perceptions of their knowledge before and after taking the original DMD global health course (N=33), compared with the DMD Global Health Starter Kit (N=30). (average scores, 1=very poor, 2=poor, 3=fair/moderate, 4=good, 5=excellent)

A=Global burden of oral disease, risks, and preventive strategies at the population level

B=Global population trends, theories, and the relationship to oral health

C=Global disease patterns, theories, and the relationship to oral health

D=Concepts in global oral health research

E=Global oral health organizations

F=The role of primary care in global oral health

G=Health systems and their impact on health and health equity

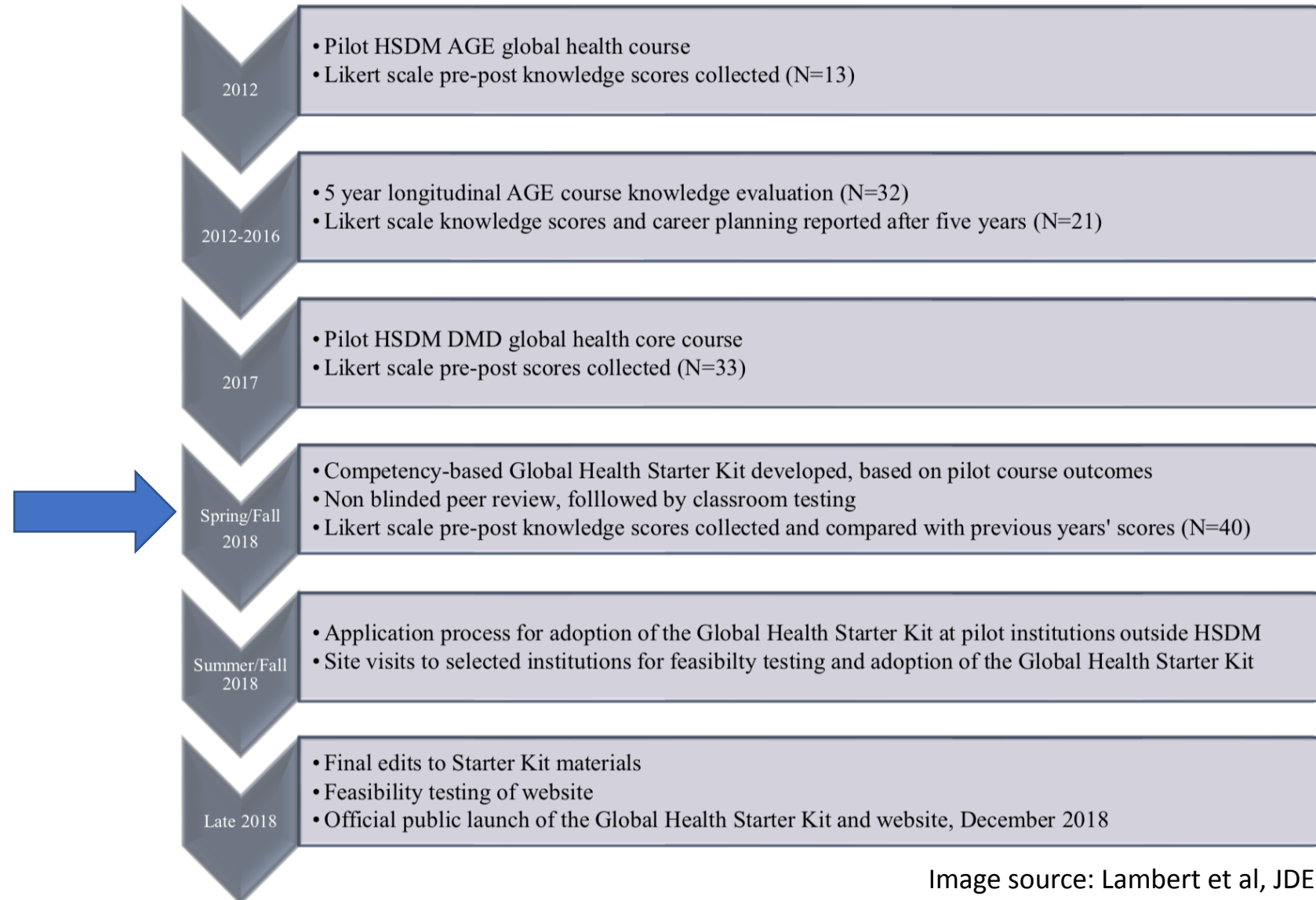
H= Social determinants of health, oral health and health disparities

I= Health care policies and their impact on the oral health of populations

J=Professionalism (ethics) in the global setting



# Global Health Starter Kit timeline



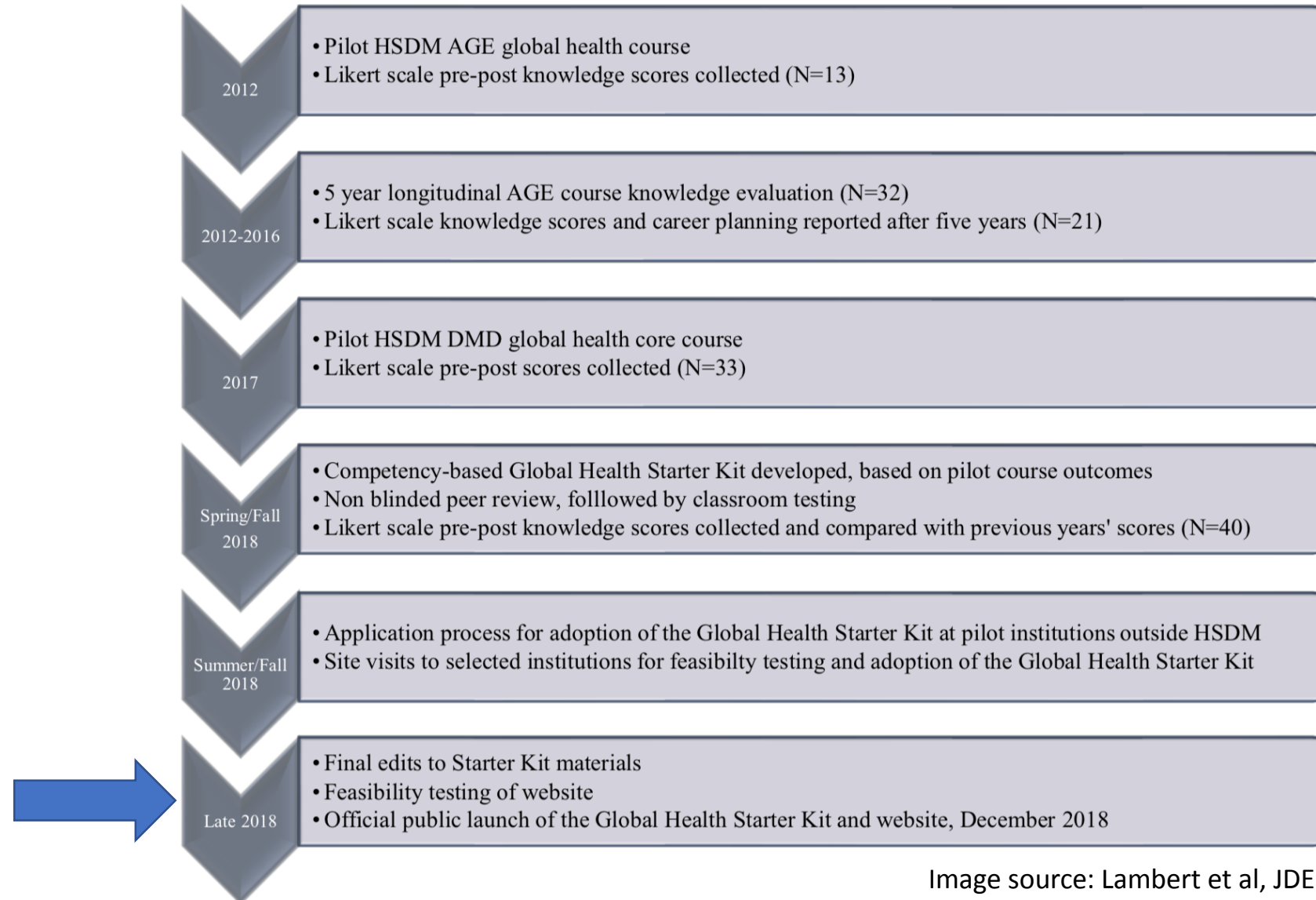


# Global Health Starter Kit timeline

Location	Target Audience	Existing Program or Curriculum	Planned Use for GHSK
US dental school	Pre doc dental students	GH research electives	Selective course, IPE
US dental school	Pre doc dental students	Public and community health curriculum	Flipped classroom and enhanced community health course
US dental hygiene program	Dental hygiene students	Clinical service learning program	Educational framework for clinical service trip
US dental school	Pre doc dental students	Student GH study club	Self guided exercise
LMIC dental school	Pre doc dental students	Public health curriculum	New PH course due to curricular reform
LMIC dental school	Pre doc dental students	Social dentistry program	Pre-requisite for field course



# Global Health Starter Kit timeline





# The Global Health Starter Kit

▶ Overview

▼ Administrative Offices

▶ Office of Administration and Finance

Office of Clinical Affairs & Operations

▶ Office of Dental Education

Office of Development and Alumni Relations

▶ Office of Diversity and Inclusion

▼ Office of Global and Community Health

▶ Community Health

▼ Global Health

Past International Projects

▼ Global Health Starter Kit

Module 1: Global Trends

## Global Health Starter Kit

Welcome to the Global Health Starter Kit, a competency-based global health 'starter' curriculum designed for dental educators and students. This curriculum is free and available for anyone to use and is organized into two versions. The first version contains materials for educators and teachers, and the second version contains materials for students and self-guided learning. This Starter Kit consists of five modules: 1) Global Trends, 2) Global Goals, 3) Back to Basics- Primary Care, 4) Social Determinants and Risks, and 5) Ethics and Sustainability. Please enjoy the video below to learn more about the Global Health Starter Kit. Thank you for your interest and enjoy!



Introduction to the Global Health Starter Kit

[hsdm.harvard.edu/global-health-starter-kit](https://hsdm.harvard.edu/global-health-starter-kit)



# The Global Health Starter Kit

Office of Development and Alumni Relations

▸ Office of Diversity and Inclusion

▾ Office of Global and Community Health

▸ Community Health

▾ Global Health

Past International Projects

▾ Global Health Starter Kit

Module 1: Global Trends

Module 2: Global Goals

Module 3: Back to Basics Primary Care

Module 4: Social Determinants and Risks

Module 5: Ethics and Sustainability

## "Module 1: Global Trends" Instructor Materials

▾ Module 1 Instructor Materials

[Instructor Guide](#)

[Instructor Notes](#)

[Instructor Presentation](#)

[Video Transcript](#)

▸ Module 1 Instructor Video

## "Module 1: Global Trends" Learner Materials

▾ Module 1 Learner Materials

[Learner Guide](#)

[Learner Notes and References](#)

[Video Transcript](#)

*Please note: As mentioned in the For the Learner Video, a supplemental video is included with this Module for your enjoyment.*

▸ Module 1 Learner Video

▸ Supplemental Video

▸ Supplemental Video



# THANK YOU!

*Brittany Seymour, DDS, MPH*

[Brittany\\_Seymour@hsdm.harvard.edu](mailto:Brittany_Seymour@hsdm.harvard.edu)

*I wish to acknowledge the following:*

*Jane Barrow, HSDM Office of Global and Community Health, and Department of Oral Health Policy and Epidemiology.*

*The Consortium of Universities for Global Health's Global Oral Health Interest Group*

*Funding for the project "Toward Competency-Based Best Practices for Global Health in Dental Education: A Global Health Starter Kit" was provided by a Consortium of Universities for Global Health Dr. Thomas Hall Global Health Education Grant and the International College of Dentists USA Section Foundation.*

*Funding for the Global Health Learning Helix was provided by the Abundance Foundation*

*Inter American Center for Global Health*

*Amy Yu and Frederick Lambert, RAs*

# Linking the **Starter Kit** to field based learning



CENTRO INTERAMERICANO PARA LA SALUD GLOBAL  
INTERAMERICAN CENTER FOR GLOBAL HEALTH

Carlos A. Faerron Guzmán, M.D., M.Sc.





**One-week experiential field course in rural Costa Rica**

**Co-designed and co-facilitated by HSDM and CISG faculty**

**HSDM and UCR dental students (taught in English)**

**Builds on the Starter Kit (required for all participants)**



**INNOVATION**



**ACTION/  
RESEARCH**



**COLLABORATIVE  
DEVELOPMENT**



**HEALTH  
EQUITY**



**COMMUNITY  
INCLUSION**



**TRANSFORMATIVE  
LEARNING**

**CISG**



# WHAT WE DO

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## OUR ROLE:

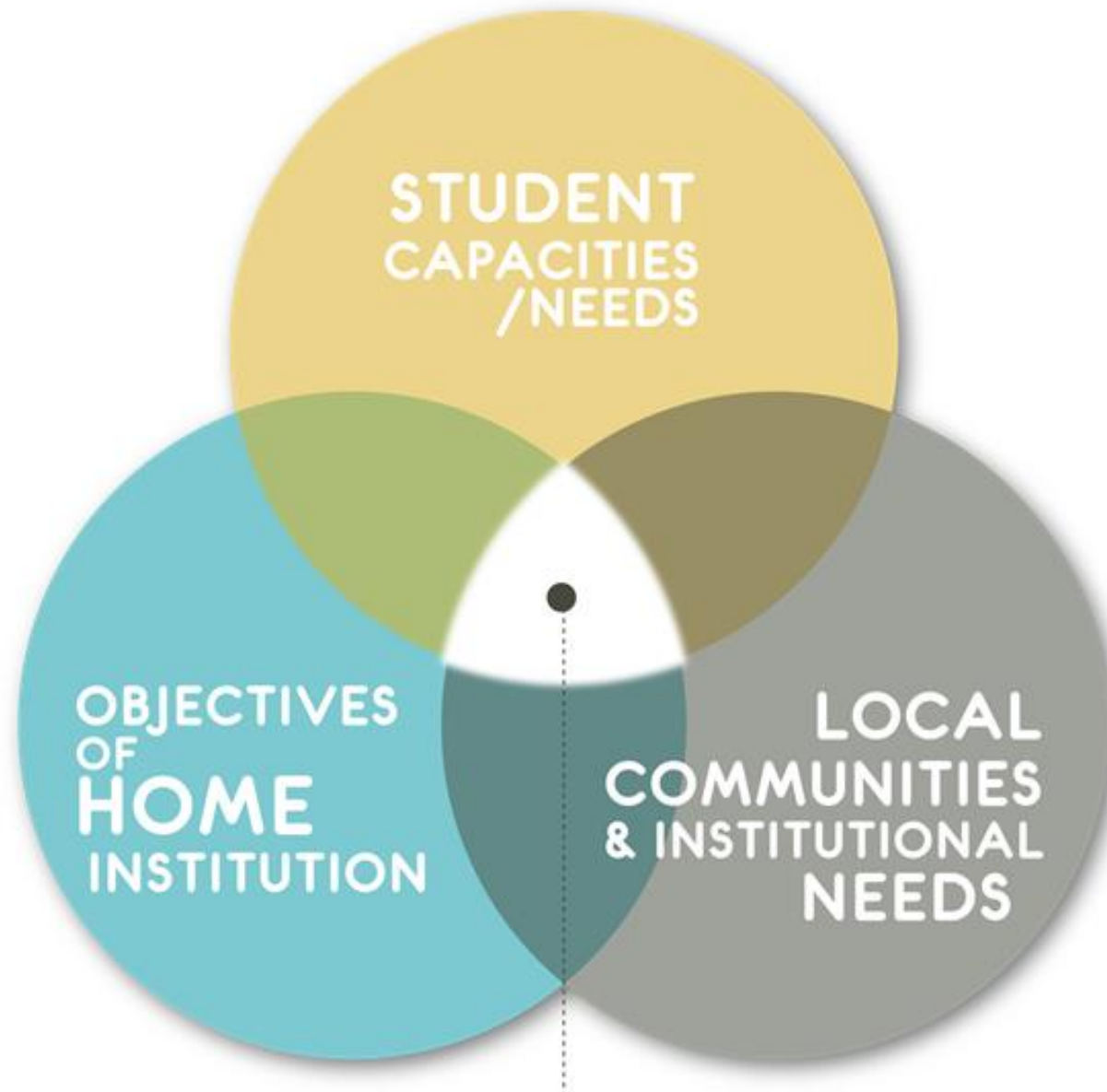
Our primary role is serving as an academic interface to create ethical and transformative global health educational programming with our institutional partners.

We also provide a platform for universities, students, researchers, and global health practitioners to come together and collaborate with local organizations and communities in the southern region of Costa Rica.

# + OUR — ACADEMIC MODEL

- ✔ **IMMERSIVE LEARNING:** We believe in learning through doing. The field is our classroom. Students are taken into the communities to work collaboratively toward inclusive, ethical, and sustainable health solutions.
- ✔ **GOING UPSTREAM:** We analyze health challenges comprehensively; starting from their structural causes, ensuring that our students fully understand the multi-layered nature of global health.

- ✔ **TAILORED PROGRAMS:** Our programs match students to their current training level, guaranteeing that objectives are met.
- ✔ **ETHICAL PROGRAMS:** The paternalistic roots of global health often lead to power imbalances that may generate program failure and poor health outcomes. We teach students how to interact in ethical ways with local communities and organizations to further health.
- ✔ **PARTICIPATORY LEARNING STRATEGIES:** Students are encouraged to explore and experience global health through active participation and interaction with local organizations and communities.
- ✔ **COMPETENCY BASED MODEL:** Our students will gain the competencies required to become part of a new generation of global health practitioners. Our programs are aligned with the AAPH and CUGH competency model.



EXPERIENTIAL LEARNING  
OPPORTUNITIES

# WHEN CONSIDERING DEVELOPING EXPERIENTIAL LEARNING

## **3 matrixes:**

- Learning outcomes/competencies vs experiential learning objectives
- Objectives vs activities
- Assessments vs objectives

**Table 1. Competency matrix domains for global oral health**

Number	Domain
<b>1.</b>	<b>Knowledge</b>
1.1.	Oral health and oral diseases
1.2.	Risk factors and determinants
<b>2.</b>	<b>Skills and abilities</b>
2.1.	Disease prevention and health promotion
2.2.	Disease management
2.3.	Advocacy
2.4.	Research, monitoring, and evaluation
<b>3.</b>	<b>Supporting competencies and principles</b>
3.1.	Interprofessional/intersectoral competencies
3.2.	Cultural and social competencies
3.3.	Professional ethics

**Table 3. Global oral health competencies relevant for dental students**

Competencies Relevant for Dental Students

- 1.1.1. Explain the global burden of oral diseases with regard to prevalence, distribution, and the relationship among oral disease, population trends, and global disease patterns.
- 1.1.2. Understand the essential facts about the etiology of main oral conditions and their symptoms and signs.
- 1.1.3. Describe the impact of oral diseases on well-being and quality of life, as well as its social and economic impact.
- 1.1.4. Identify and assess relevant oral health information and make sound decisions (oral health literacy).
- 1.2.1. Identify and describe common risk factors of oral diseases.
- 1.2.2. Identify and describe common (social) determinants of oral disease.
- 1.2.3. Identify and describe reciprocal links among oral disease, systemic diseases, and general health.
- 2.1.1. Conduct an assessment to define oral health needs of the population.
- 2.1.2. Understand and apply health promotion and risk reduction strategies (such as healthy eating, cessation of tobacco, and reduction of harmful alcohol use).
- 2.1.3. Promote general oral hygiene knowledge and skills, including toothbrushing twice a day with fluoride toothpaste and cleaning between the teeth.
- 2.1.4. Promote and apply other appropriate fluoride interventions.
- 2.1.5. Identify patient populations at increased risk for oral diseases and ensure regular attendance through oral health professionals.
- 2.1.6. Promote essential oral health knowledge and skills for expectant mothers and parents to enable appropriate self-care and care for their children.
- 2.1.7. Educate, counsel, recognize, and act on the links between oral health/disease and systemic health/disease.
- 2.2.1. Understand the burden and distribution of oral and associated diseases in specific community and country.
- 2.2.2. Understand and be familiar with the health care system in the community/country.
- 2.2.3. Identify barriers to access and use of health and oral health services (e.g., affordability, lack of insurance or providers, cultural and geographic issues); facilitate solutions to overcome them.
- 2.3.1. Advocate for relevant strategies to prevent and reduce risk factors based on an advocacy strategy to identify, mobilize, and connect relevant stakeholders/actors.
- 2.3.2. Identify and advocate to address specific oral health needs, and reduce inequities and health care system deficits.
- 2.3.3. Understand and utilize political processes as well as roles/functions of national/international stakeholders (e.g., use global and national policy frameworks to guide local action).
- 2.3.4. Translate research data into meaningful information tailored for communication and advocacy with specific target audiences.
- 2.4.1. Identify and assess the range of global oral health research questions.
- 2.4.2. Be able to design effective and appropriate survey tools/data collection methods.
- 2.4.3. Collect, evaluate, translate, and disseminate data.
- 2.4.4. Monitor and evaluate actions taken to ensure transparency, effectiveness, and impact.
- 3.1.1. Demonstrate an interdisciplinary, team-oriented, integrated, and multilevel approach to patient-centered health and oral health care.
- 3.1.2. Recognize the different roles and responsibilities of medical and non-medical professionals in oral health promotion, disease prevention, and, if applicable, treatment, care, and referral.
- 3.1.3. Recognize the areas of specialization in medicine and dentistry.
- 3.2.1. Demonstrate ethically and culturally competent actions, and show awareness and respect in community settings, customs, differences in values, opinions and practices, cultural norms, and medical cultures (local perceptions of oral health care, attitudes toward dental health, oral care, and seeking professional care).
- 3.2.2. Demonstrate responsive and respectful communication with patients and families, within the oral health team and with other health professions colleagues.
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- 3.3.1. Demonstrate professionalism, providing service delivery according to appropriate level of training and ability and representing the profession of dentistry in a responsible manner.
- 3.3.2. Demonstrate leadership in providing information, education, and planning for oral health to non-dental professionals and community members.

Source: Benzian H, Greenspan JS, Barrow J, et al. A competency matrix for global oral health. J Dent Educ 2015;79(4):353-61.

# PROGRAM OBJECTIVES

By the end of this course, the student will be able to:

1. Appraise the complex relationships between health, development, politics, the environment, and the socio-cultural context.
2. Outline health needs and inequities among communities in southern Costa Rica.
3. Distinguish the similarities and differences in health systems, with a focus between Costa Rica and the U.S.A.
4. Analyze the challenges in achieving universal health coverage.
5. Recognize the diverse set of actors and stakeholders related to a variety of global health issues.
6. Correlate the changing demographic, nutritional, and epidemiological profile of LMIC and its relationship with health and health systems.
7. Assess opportunities and challenges for professional practice in the field of global health practice.



**Table 3. Global oral health competencies relevant for dental students**

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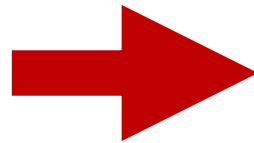
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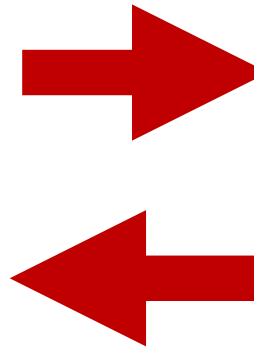
# CONTENT OVERVIEW

UNIT	Topic	Case Study/Field Visit
1	Understanding health systems in context: The Costa Rican Social Security Fund <ul style="list-style-type: none"> <li>• Achieving universal health care: challenges and opportunities</li> <li>• Comparative aspects of health systems</li> <li>• Integrating oral health in primary care</li> </ul>	The EBAIS system in Costa Rica
2	Global health governance: perspectives from the ground <ul style="list-style-type: none"> <li>• Leveraging cross-sectoral partnerships to tackle complex challenges</li> <li>• Trans-border health challenges</li> <li>• Migration and health</li> </ul>	Rio Sereno Costa Rica and Panama Border Health Post
3	Systems thinking approach to the determinants of health <ul style="list-style-type: none"> <li>• Structural violence and indigenous communities</li> <li>• Sexual and reproductive health issues in southern Costa Rica</li> </ul>	<u>Boruca</u> Indigenous Community
4	Determinants of health focus: culture and health <ul style="list-style-type: none"> <li>• Intercultural approaches to healthcare delivery</li> <li>• Challenges in intercultural contexts</li> </ul>	La Casona Indigenous Community
5	Dealing with the triple-burden: globalization and the epidemiological, nutritional, and demographic transitions <ul style="list-style-type: none"> <li>• Ecosystem transformations and the impact on health</li> <li>• Shifting diets, chronic diseases, and oral health</li> </ul>	La Cuesta Community and Ministry of Health regional offices.
6	Ethics in global health delivery and research: best practices in participatory approaches. <ul style="list-style-type: none"> <li>• Incorporating community members in global health work</li> <li>• Challenges in participatory approaches</li> </ul>	Oral Health Protection Program for Indigenous Population of <u>Coto Brus</u>

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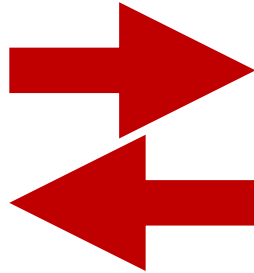


## CONTENT OVERVIEW

UNIT	Topic	Case Visit	Study/Field
1	Understanding health systems in context: The Costa Rican Social Security Fund <ul style="list-style-type: none"> <li>• Achieving universal health care: challenges and opportunities</li> <li>• Comparative aspects of health systems</li> <li>• Integrating oral health in primary care</li> </ul>	The EB AIS system in Costa Rica	
2	Global health governance: perspectives from the ground <ul style="list-style-type: none"> <li>• Leveraging cross-sectoral partnerships to tackle complex challenges</li> <li>• Trans-border health challenges</li> <li>• Migration and health</li> </ul>	Rio Sereno Costa Rica and Panama Border Health Post	
3	Systems thinking approach to the determinants of health <ul style="list-style-type: none"> <li>• Structural violence and indigenous communities</li> <li>• Sexual and reproductive health issues in southern Costa Rica</li> </ul>	Boruca	Indigenous Community
4	Determinants of health focus: culture and health <ul style="list-style-type: none"> <li>• Intercultural approaches to healthcare delivery</li> <li>• Challenges in intercultural contexts</li> </ul>	La Casona	Indigenous Community
5	Dealing with the triple-burden: globalization and the epidemiological, nutritional, and demographic transitions <ul style="list-style-type: none"> <li>• Ecosystem transformations and the impact on health</li> <li>• Shifting diets, chronic diseases, and oral health</li> </ul>	La Cuesta Community and Ministry of Health regional offices.	
6	Ethics in global health delivery and research: best practices in participatory approaches. <ul style="list-style-type: none"> <li>• Incorporating community members in global health work</li> <li>• Challenges in participatory approaches</li> </ul>	Oral Health Protection Program for Indigenous Population of Coto Brus	

**Table 1. Competency matrix domains for global oral health**

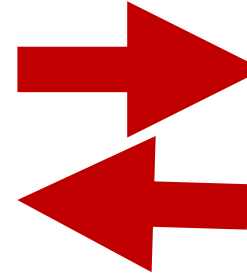
Number	Domain
<b>1.</b>	<b>Knowledge</b>
1.1.	Oral health and oral diseases
1.2.	Risk factors and determinants
<b>2.</b>	<b>Skills and abilities</b>
2.1.	Disease prevention and health promotion
2.2.	Disease management
2.3.	Advocacy
2.4.	Research, monitoring, and evaluation
<b>3.</b>	<b>Supporting competencies and principles</b>
3.1.	Interprofessional/intersectoral competencies
3.2.	Cultural and social competencies
3.3.	Professional ethics



## PROGRAM OBJECTIVES

By the end of this course, the student will be able to:

1. Appraise the complex relationships between health, development, politics, the environment, and the socio-cultural context.
2. Outline health needs and inequities among communities in southern Costa Rica.
3. Distinguish the similarities and differences in health systems, with a focus between Costa Rica and the U.S.A.
4. Analyze the challenges in achieving universal health coverage.
5. Recognize the diverse set of actors and stakeholders related to a variety of global health issues.
6. Correlate the changing demographic, nutritional, and epidemiological profile of LMIC and its relationship with health and health systems.
7. Assess opportunities and challenges for professional practice in the field of global health practice.

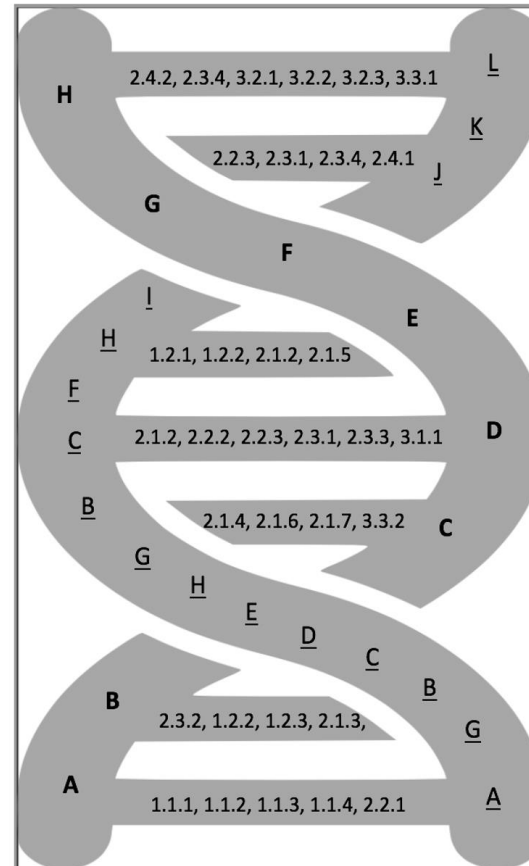


## CONTENT OVERVIEW

UNIT	Topic	Case Study/Field Visit
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# Global Health Learning Helix

The **Learning Helix** is about redundancy and iteration for optimal educational outcomes



**Didactic**  
(August 2017-  
March 2018)

**Experiential**  
(March 2018)

Content delivered, based on competency-based learning

objectives:

- A. Global population trends and theories and the relationship to oral health
- B. Global disease patterns and theories and the relationship to oral health
- C. Global oral health organizations (type, role, mission, function)
- D. Oral disease risks and preventive strategies at the population level
- E. Health care policies and their impact on the oral health of populations
- F. Health systems and their impact on health and health equity
- G. The integration of primary care and oral health
- H. Social determinants of health, oral health and health

# TEACHING AND LEARNING STRATEGIES

- **Multi-formatted experience-based learning**
- **Collaborative learning environment that takes into consideration previous achieved learning outcomes**
- **Participatory methodologies**
  - **Field visits and key stakeholder interviews to observe and document key elements of global health.**
  - **In-class discussion of readings, and workshops to stimulate alternative ideas, and approaches.**
  - **Case study analysis and presentation on critical issues on global health to exemplify global health in context.**







Ebois La Casona  
Kräkö Jue JukribTa  
Ngäbe Buklekwe Tö NeTe





**CISG**

CENTRO INTERAMERICANO PARA LA SALUD GLOBAL  
INTERAMERICAN CENTER FOR GLOBAL HEALTH



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## "Module 4: Social Determinants and Risks" Learner Materials

▶ Module 4 Learner Materials

▶ Module 4 Learner Video

▶ Supplemental Video

### Meet Joe Example



## "Module 4: Social Determinants and Risks" Learner Materials

### ▼ Module 4 Learner Materials

[Learner Guide](#)

[Learner Notes](#)

[Learner Preparation](#)

[Video Transcript](#)

*Please note: As mentioned in the For the Learner Video, a supplemental video is included with this Module for your enjoyment*

▶ Module 4 Learner Video

▶ Supplemental Video

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## **Module 4: Social Determinants and Risks**

### **PLEASE READ ALL INFORMATION AND INSTRUCTIONS**

#### **How to Prepare:**

Please plan for approximately three hours to complete Module 3. This includes three pre-readings, watching the video, and noting your answers to questions posed throughout the video. (Please note, one of the readings is longer than usual, please plan accordingly.)

#### **What to Know:**

Pay attention to the Learning Objectives of the module, as well as Key Messages outlined throughout the video and questions I pose along the way. These together indicate the take-home concepts you should master for this module.

## Pre-readings:

- World Health Organization. Closing the gap in a generation: health equity through action on the social determinants of health. COMMISSION ON SOCIAL DETERMINANTS OF HEALTH | FINAL REPORT – EXECUTIVE SUMMARY ONLY. 2008  
[http://apps.who.int/iris/bitstream/10665/43943/1/9789241563703\\_eng.pdf](http://apps.who.int/iris/bitstream/10665/43943/1/9789241563703_eng.pdf)
- Sumner A. Global Poverty and the New Bottom Billion: What if Three-Quarters of the World's Poor Live in Middle-Income Countries? Institute of Developmental Studies. September 2010;1-43. Accessed on October 3, 2018 at: <https://onlinelibrary.wiley.com/doi/epdf/10.1111/j.2040-0209.2010.00349.2.x>.
- Watt RG. Social determinants of oral health inequalities: implications for action. Community Dent Oral Epidemiol 2012; 40 (Suppl. 2): 44–48.  
<https://onlinelibrary.wiley.com/doi/pdf/10.1111/j.1600-0528.2012.00719.x>

## Pre-class Video:

After completing the readings, please watch the Module 4: Social Determinants and Risks pre-class video. Please refer to the video notes supplement document to support your learning and viewing.



The process of creating and designing this module took place in the following order:  
 Competencies → Learning Objectives → Evaluation Metric → Content → Pedagogy → Evaluation Measure

<b>Module</b>	<b>Themes</b>	<b>Related Competencies</b>	<b>Collaborating Author</b> (with Brittany Seymour- project PI)
4	Social determinants for health and disease worldwide	1.2.1, 1.2.2, 2.1.2, 2.1.5, 2.2.3, 2.3.1	<p><u>Jennifer Kasper, MD, MPH</u>            Assistant Professor            Department of Social Medicine            Harvard Medical School            Chair, Global and Community Health Committee            HMS Scholars in Medicine Program</p> <p><u>Karen Sokal-Gutierrez MD, MPH</u>            Clinical Professor            Pediatrics            UC Berkeley-UCSF Joint Medical Program</p>

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**Related competencies:**

1.2.1. Identify and describe common risk factors of oral diseases.

1.2.2. Identify and describe common (social) determinants of oral disease.

2.1.2. Understand and apply health promotion and risk reduction strategies (such as health eating, cessation of tobacco, and reduction of harmful alcohol use).

2.1.5. Identify patient populations at increased risk for oral diseases and ensure regular attendance through oral health professionals.

2.2.3. Identify barriers to access and use of health and oral health services (e.g., affordability, lack of insurance or providers, cultural and geographic issues); facilitate solutions to overcome them.

2.3.1. Advocate for relevant strategies to prevent and reduce risk factors based on an advocacy strategy to identify, mobilize, and connect relevant stakeholders/actors.

**Learning objectives:**

- Define the social determinants of health
- Describe the social gradient in health
- Explain the concept of the 'bottom billion,' their indicators and characteristics
- Define the Biomedical Model and Sociocultural Models for health and discuss the advantages and disadvantages of each

▼ Module 4 Learner Video



What should Joe do?





## The Social Determinants of Health

Income and resource distribution

Physical environment and housing

Access to health services

Education

Employment and working conditions

Food insecurity

Social inclusion and support

Race, gender, age, culture

...more

## "Module 4: Social Determinants and Risks" Learner Materials

### ▼ Module 4 Learner Materials

[Learner Guide](#)

[Learner Notes](#)

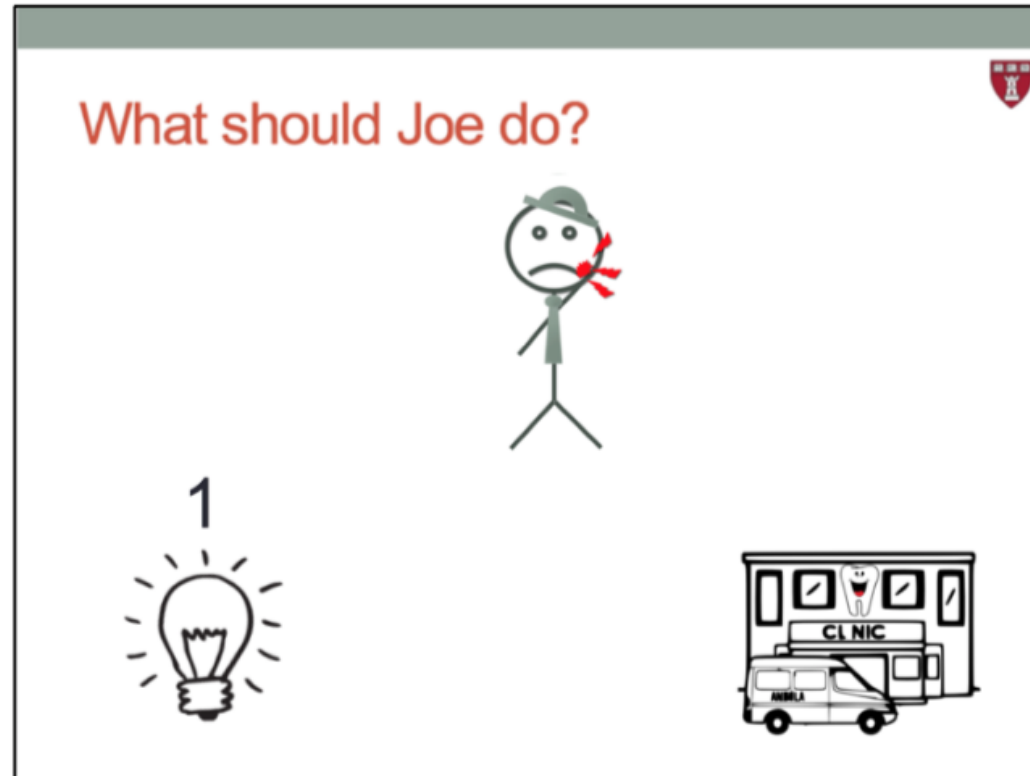
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▶ Supplemental Video



First, before anything else can happen, Joe needs to *decide* to go to the dentist. And it's not even that simple. How does Joe make this decision, what factors influence this decision?

- 1) Deciding to seek appropriate care
  - Cultural beliefs
  - Health/oral health literacy
  - Ability to take time off to go
  - Recognizing a need to go
  - Other pressing priorities
  - Finances

## **Global Health Starter Kit Modules**

[Module 1: Global Trends](#)

[Module 2: Global Goals](#)

[Module 3: Back-to-Basics Primary Care](#)

[Module 4: Social Determinants and Risks](#)

[Module 5: Ethics and Sustainability](#)

[Starter Kit FAQ](#)

# Toward Competency-Based Best Practices in Teaching and Learning: The Global Health Starter Kit

## Q&A

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