

**MC790: Global Maternal and Child Health
Syllabus
Spring 2006**

Time: Tuesday 2:30-5:00 pm

Location: T-113East

Course description

This course is jointly offered by the MCH and IH Departments and is open to all students. The course addresses a number of public health challenges that have a significant impact on the health of women and children, often the most vulnerable when resources are limited in communities and nations. It applies comparative methods of inquiry to understand these issues as they occur and are managed in countries across the income and development spectrum.

The two overarching goals of the course are: 1) to introduce students – both those with and without significant MCH experience internationally—to a way of thinking globally and comparatively about health problems, their biological and social determinants, and strategies to address them within the field of maternal and child health; and 2) to apply comparative analysis to a series of issue-oriented country and regional studies in order to deepen understanding of public health challenges and alternative solutions within local contexts.

Course objectives

Knowledge-based:

1. Articulate the importance of a global approach to women and children's health in the context of globalization, economic development, and health challenges that cross national boundaries and affect people differentially according to gender, geography, social and economic status, and race.
2. Identify and critically examine the tension between philosophies that drive health agendas and interventions—those that are disease - specific and those that target broad social change.
3. Identify the major governmental and non-governmental players --nationally and internationally-- who make health policy and understand the relative impact of science, advocacy, politics and moral persuasion in health policy decision-making.
4. Increase knowledge about key issues pertinent to the health of women, infants, children, and adolescents throughout the world in light of the impact of global and national political economies, culture, social relations, the environment, health service infrastructures and public health policies.
5. Increase knowledge about alternative program and policy strategies used to address these issues in specific regional, national, and local contexts.
6. Appreciate the complexity of local contexts—villages, towns, cities, districts, provinces, and countries—and the importance of understanding them before applying nationally- and globally-defined interventions or policies.
7. Identify major MCH health indicators and appreciate the challenges of measurement and monitoring in diverse environments.

Skill-based:

8. Apply the methods of comparative inquiry to examine differences in how a specific MCH-related problem is measured and manifest in at least two countries or regions.
9. Adapt an existing or apply a new program or policy strategy to each of the two countries or regions, based on a comparison of the contextual factors in each country as well as larger global influences.
10. Improve ability to critically assess the quality of data available to measure a problem or evaluate an intervention in countries along the continuum of development.
11. Develop appropriate alternative strategies to collect data in resource-limited settings.

Course Co-directors

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Format

The course is co-taught, allowing for diverse expertise and perspectives across the wide range of issues and regions of the world covered. Drs. McCloskey (MCH) and Thea are course co-directors and will provide continuity and coherence across all units. The course will combine lecture, discussion, and class exercises. Emphasis is on shared learning in the classroom, with *heavy reliance on students' interaction with the reading material before and during class*, based on discussion/reflection questions posted in advance on the course web site.

Guest Lecturers: Guest lecturers are invited periodically to bring to the class their hands-on experience on the topic and in the countries used for the comparative studies. The guest lecturers will be (class in parentheses):

- **Jonathon Simon**, ScD, MPH, Dept of IH, BUSPH (class 2)
- **Eugene Declercq**, PhD, MBA, Dept of MCH, BUSPH (class 3)
- **Monica Onyango**, CNM, MPH Dept of IH, BUSPH (class 6)
- **Deborah Maine**, DrPH, Dept of IH, BUSPH (class 8)
- **Kojo Yeboah-Antwi**, MD, Dept of IH, BUSPH (Class 10)
- **David Hamer**, MD Dept of IH, BUSPH (class 11)

Course Info website

The class has an associated Course Info website that can be accessed at: <http://courseinfo.bu.edu/courses/> . It includes both class materials and a number of external internet links to further information – an increasingly important source in international studies. During the course of the semester, if you find interesting links that might be useful to the class as a whole, please send them to Drs. Thea and McCloskey. We will add them to the web site.

Requirements

1. *Class attendance and participation in discussion and class exercises.* As stated above, all classes will include full class or small group discussions and some will include structured small group exercises. **Students are expected to prepare for class by reading all required articles/materials.** For some classes, discussion/reflection questions will be posted on *CourseInfo* and students should make notes on these questions in advance. Learning for all of us will be enriched by careful preparation and active participation on the part of students and faculty.
2. *One unit-based short writing assignment.* There are “unit questions” for each one of the four units. **Each student is required to respond to the questions for one of the units only. Responses should be no more than 3 double spaced pages and should be turned in on the dates shown on the course schedule.** The purpose of these assignments is to help students reflect on key issues raised during the unit, synthesize selected readings and class material and practice applying comparative inquiry to cross national issues.
3. *Section I and final paper.* Each student will choose an MCH-related issue and research the topic **in two countries** based on available published literature and on-line documents. *It is therefore important to choose a topic based on your own interest and on information available.* Topics and countries should be discussed with a faculty member and turned in for approval during Class 3 (**January 31**). Approvals or suggested revisions will be returned during Class 4 (**February 7**). We strongly encourage each student to meet with at least one faculty member about his/her paper topic before this time and to continue to be in conversation about it throughout the term.

The purpose of the paper is to examine the problem/issue as it is manifest in both countries in light of economic, political, cultural, social factors and the health service infrastructure in each, and to critically assess the appropriateness of a major program or policy strategy used (either in one of the countries or recommended by an international organization) in both settings. It will require you to apply the methods of comparative inquiry taught in class. The paper should be 10-12 double spaced pages (1 inch margins all around and font no smaller than Arial 11 or Times New Roman 12) and be structured as follows:

Section IA: Description of the issue/problem in each country

--Nature and scope of problem

--Type of data available to measure and monitor the problem

Section IB: Contextual factors relevant to the problem in each country and at global level

--political, economic, social, cultural, religious

--health service infrastructure and public health policies

Section IIA: Description of a major policy or programmatic strategy used to

address the problem/issue (This can be a strategy used in one or both of the countries or one that is recommended by an international organization, such as the WHO)

Section IIB: Critical assessment of whether or not (and why/why not) the strategy is appropriate in each of the two countries. This section should draw on the contextual analysis in Section I and findings program or policy evaluations, as available.

Sections IA and IB must be turned in on **March 21** to be reviewed and graded by faculty to assure that the student is “on the right track” and to allow faculty to give mid-course help and direction. Section I papers will be returned by **April 4th** and the final paper is due on **May 2**. During classes 14 and 15 (**May 2 and 9**), students will talk informally about the process and findings of their research during a guided class discussion. This will be part of the course synthesis and wrap up.

Grading

Class participation	15%
Unit writing assignment	20%
Section I	15%
Final paper	50%
Total	100%

Policy on Academic Misconduct

Trust between teacher and student is essential to a successful learning environment. Cheating and plagiarism represent not only a serious violation of academic ethics, they also represent a breach of that essential trust.

All students are expected to adhere to the “Standards of Academic Honesty and Disciplinary Procedures of the Boston University School of Public Health”. (Full text in BUSPH Student Handbook, pp. 35 and summarized on the school web site:

http://www.bu.edu/dbin/sph/academics/registrar/policies/academic_misconduct.php)

As stated, academic misconduct includes cheating on exams; plagiarism; submitting the same work in more than one course without written explicit consent of all instructors; misrepresentation or falsification of data; and allowing another student to represent your work as his or her own or representing the work of another student as your own.

Plagiarism: Any representation of the work of another as his or her own constitutes plagiarism. This includes copying or substantially restating the work of another person in any written or oral work without citing the source, or collaborating with another person in an academic endeavor without acknowledging that person’s contribution. Specific examples of plagiarism include but are not limited to:

copying word-for-word from printed or on-line material without the use of quotation marks and appropriate attribution of the source and accurate citation;

Changing a word or two in a sentence and copying the remaining language;

Copying so many words or ideas from a source that it makes up the majority of your work, whether you give credit or not;

failure to cite another author when using his or her ideas and/or paraphrasing his or her language; and

allowing another individual to write portions of an academic assignment without acknowledging their contribution.

- We recognize that there are differences in academic standards and enforcement procedures across cultures and countries; however, these are the rules of this institution for all students. They are uniformly and strictly enforced. ***Students in MC790 who are found to have committed plagiarism will:***
 - receive failing grade for assignment, and
 - be called to review with the professor and Chair of the MCH Department.
- Charges of academic misconduct may then be brought to the attention of the Associate Dean, Leonard Glantz, who will decide upon an appropriate action. *“A student who is found guilty of academic misconduct may be subject to disciplinary action, up to and including dismissal from the School.”* --“Standards of Academic Honesty and Disciplinary Procedures of the BUSPH”
- Academic misconduct in any form may result in a final grade of F for the course. **Ignorance is NOT an excuse.**

**Spring 2006
Course Schedule**

Class	Date	Topic	Faculty
Unit I: Background and Methods			
1	Jan 17	1a: Introductions and Course Overview 1b. Global MCH Priorities: Who decides, how and why?	LM, DT, Jonathon Simon
2	Jan 24	2a. Economic Development and Health: Case Studies 2b. Global MCH and Globalization: Past, Present and Future 2c. Course Assignment Review	DT, LM
3	Jan 31	Modeling the Art and Science of Comparative Inquiry: The Case of Birth <i>Topics and countries for paper due</i>	LM, Gene Declercq
Unit II: Reproductive and Sexual Health			
4	Feb 7	From Population Control to Reproductive Health and Gender Equity: Evolution of Policies and Programs <i>Topics/countries approved</i> <i>Unit 1 Short Writing Assignment Due</i>	LM
5	Feb 14	China's One/Two Child Policy: Demographic Success and Gender Failure (or Not)?	LM
	Feb 21	NO CLASS	
6	Feb 28	The Local and the Global in the Making of Abortion Policy: The Case of Kenya	LM, Monica Onyango
	March 7	SPRING VACATION—NO CLASS	
Unit III: Safe Motherhood and Infant Health			
7	March 14	HIV and Breastfeeding: A Study of Competing Risks <i>Unit II Writing Assignment Due</i>	DT
8	March 21	Maternal Mortality: Intervention Strategies, Debates, and Evaluation Section I Papers Due	LM, Deborah Maine
9	March 28	Adolescent Sexuality and Childbearing: Girls in Transition, Policies at Odds	LM
Unit IV: Child Health			
10	April 4	Neonatal Mortality and Childhood Illness: Community-based Prevention <i>Unit III Short Writing Assignment Due</i> Section I Papers Returned	DT
11	April 11	11a: Immunization in the Prevention of Childhood Disease 11b: Acute Respiratory Infection in Children – Research to Policy	DT
12	April 18	The Package of Services for Child Health: Integrated Management of Childhood Illness (IMCI)	DT, Kojo Yeboah Antwi
13	April 25	13a. Malnutrition and Micronutrient Deficiencies in Childhood 13b. The Nutrition Transition and Childhood Obesity	DT, David Hamer
14	May 2	Course Wrap -up and Discussion of Papers <i>Unit IV Short Writing Assignment Due</i> <i>Final Paper Due</i>	LM, DT
15	May 9	Discussion of Papers (Cont.)	DT, LM

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Spring 2006**

**READING LIST
(⌘ = Available online)**

UNIT I: BACKGROUND AND METHODS

Class 1: Introduction

1a. Introductions and Course Overview

1b. Global MCH Priorities: Who Decides, How and Why?

Frenk J and Gomez-Dantes O. Globalization and the challenges to health systems. *Health Affairs* 2002; 21, 3: 60-165.

Reichenbach L. The politics of priority setting for reproductive health: breast and cervical cancer in Ghana. *Reproductive Health Matters*. 2002 Nov; 10 (20):47-58.

Optional [For those with little or no background in international health organizations]:

Walt G. Global Cooperation in International Public Health. In: MH Merson, RE Black, AJ Mills, eds. *International Public Health Diseases, Programs, Systems, and Policies*. Gaithersberg, Maryland: Aspen, 2001, pp. 667-699.

Class 2:

2a. Economic Development and Health: Case Studies

2b. Global MCH and Globalization: Past, Present and Future

Bangser M. Policy Environments: Macroeconomics, Programming and Participation. (ch. 10) In: G Sen, A George, and P Ostlin. *Engendering International Health: The Challenge of Equity*. Cambridge, MA: Massachusetts Institute of Technology, 2002: 259-280.

On Reserve:

Friedman TL. While I was Sleeping (Chapter 1) In: *The World is Flat*. Farrar, Straus and Giroux, 2005, pp. 2-47.

Class 3: The Art and Science of Comparative Inquiry: Birthing Systems Across Cultures

Declercq E, & Viisainen K. The Politics of Numbers: The Promise and Frustration of Cross-National analysis. In: Devries R, Benoit C, Van Tellingen E, Wrede S., eds. *Birth by Design*. London: Routledge Press, 2001. pp. 267-279.

OECD. 1994. The Reform of Health Care: A Comparative Analysis of Seventeen OECD Countries. *Health Policy Studies*, No. 5, Paris: OECD. Chapters 1-2, pp. 11-14. [pp. 15-27 provided for additional background and is optional.]

Jordan B. The cross-cultural comparison of birthing systems. In: B. Jordan, (eds.) *Birth in Four Cultures*. 4th ed. Prospect Heights, ILL: Waveland Press, 1993, pp. 46-90. Read pp. 46-54 (overview) and then choose one of the dimensions Jordan analyzes, from among "Preparation," "Attendants," "Birth Territory," "Medication," "Technology" or "Locus of Decision-Making," and read that section.

PEW Global Attitudes Project: Summary Report. "Views of a Changing World 2003 War With Iraq Further Divides Global Publics, pg. 1-17.

⌘Nolte E, McKee M. Measuring the health of nations: analysis of mortality amenable to health care. *BMJ* 2003; 327: 1129-1133. **Available online** (*Medical Library E-Journals*)

Optional:

Nations MK and Amaral ML. Flesh, blood, souls and households: Cultural validity in mortality inquiry. *Medical Anthropology Quarterly* 1991; 5:204-220

UNIT II: REPRODUCTIVE HEALTH AND GENDER EQUITY

Class 4: From Population Control to Reproductive Health and Gender Equity: Evolution of Programs and Policies

Cottingham J and Myntti C. Reproductive Health: Conceptual Mapping and Evidence. In: G Sen, A George, and P Ostlin, (eds.) *Engendering International Health: The Challenge of Equity*. Cambridge, MA: Massachusetts Institute of Technology, 2002, pp. 83-109.

Hartmann B. Security and Survival (chapter 1) In: *Reproductive Rights and Wrongs: the Global Politics of Population Control*. Cambridge MA: South End Press, 1995, pp. 3-12.

⌘Senanayake P and Hamm S. Sexual and reproductive health funding: donors and restrictions. *Lancet* 2004; 363, 70: **Available online** (*Medical Library E-Journals*)

Seltzer JR. The Origins and Evolution of Family Planning Programs in Developing Countries. (Chapters 1 and 2). *Population Matters*, Santa Monica CA: RAND, 2002, pp. 1-44.

Class 5: China's One Child Policy: Demographic Success and Gender Failure (or Not)?

⌘Attane I. China's family planning policy: An overview of its past and future. *Studies in Family Planning* 2002; 33, 1:103-114. **Available online** (*Medical Library E-Journals*)

⌘Chen K. China's growth places strains on a family's ties. *Wall Street Journal*, April 13, 2005, pg. A1 and A15. **Available online** (*Library E-Journals/Newspapers find Wall Street Journal click then narrow your search by date then by title*) .

⌘Qin P, Mortensen PB. Specific characteristics of suicide in China. *Acta Psychiatr Scand* 2001; 103:117-121. **Available online** (*Medical Library E-Journal, Blackwell Publisher website*)

Fong V. China's one-child policy and the empowerment of urban daughters. *American Anthropologist* 2002; 104, 4:1098-1109.

Hartmann B. China—"Gold babies" and disappearing girls (Chapter 9) In: B. Hartmann (ed.) *Reproductive Rights and Wrongs: The Global Politics of Population Control*. Boston: South End Press, 1995, pps. 157-170.

Class 6: The Local and the Global in the Making of Abortion Policy

⌘Anonymous. Undermining international family planning programmes. [Editorial] *Lancet* 2002; **359:9306**. **Available online** (*Medical Library E-Journals*)

⌘Berer M. Making abortions safe: A matter of good public health policy and practice. *Bull of the WHO* 2000; 78, 5: 580-591. **Available online** (*website WHO world health org. in search box type the article name*)

⌘Cohen SA. U.S. global reproductive health policy: Isolationist approach in an interdependent world. *The Guttmacher Report on Public Policy*, August 2004: 7-9. **(posted as PDF on CourseInfo: Course documents/class 6/on-line readings.)**

Qmbaka KN. Alternative access to abortion services under restrictive law: The Kenyan experience. In: *Advocating for Abortion Access*. Johannesburg: School of Public Health, University of the Witwatersrand, Women's Health Project, 2001, pp. 171–191.

UNIT III: SAFE MOTHERHOOD AND INFANCY

Class 7: HIV and Breastfeeding: A Study of Competing Risks

⌘Abdool Karim AS, Abdool Karim Q, Adhikari M, Cassol S, et al. Vertical HIV transmission in South Africa: Translating research into policy and practice. *Lancet* 2002; 359, 9311:992-3. **Available online** (*Medical Library E-Journals*)

⌘Coutsoudis A, Coovadia H, Pillay K, and Kuhn L. Are HIV-infected women who breastfeed at increased risk of mortality? [Letter] *AIDS* 2001;15,5:653-655. **Available online** (*Medical Library E-Journals*)

⌘Coutsoudis A, Goga AE, Rollins N and Coovadia HM on behalf of the Child Health Group. Free formula milk for infants of HIV-infected women: Blessing or curse? *Health Policy and Planning* 2002; 17, 2: 154-160. **Available online** (*Medical Library E-Journals*)

⌘Nduati R, Richardson BA, John G, Mbori-Ngacha D, Mwatha A, Ndinya-Achola, Bwayo J, Onyango FE, Kreiss J. Effect of breastfeeding on mortality among HIV-1 infected women: A randomized trial. *Lancet* 2001; 357:1651-1655. **Available online** (*Medical Library E-Journals*)

Coutsoudis A, Pillay K, Kuhn L, Spooner E, Tsai WY, Coovadia HM; South African Vitamin A Study Group. Method of feeding and transmission of HIV-1 from mothers to children by 15 months of age: Prospective cohort study from Durban, South Africa. *AIDS*. 2001;15, 3 :379-87.

Class 8: Maternal Mortality: Intervention Strategies, Debates, and Evaluation

⌘Gill Z and J Ahmed. Experience from Bangladesh: Implementing emergency obstetric care as part of the reproductive health agenda. *Intl J of Gyn and Ob* 2004; 85, 2:S213-20. **Available on line** (*Medical Library E-Journals*)

Graham WJ, Bell JS, Bullough CH. Can skilled attendance at delivery reduce maternal mortality in developing countries? *Studies in Health Services Organization and Policy* 2001; 17:97-129.

⌘Maine D, Paxton A, Bailey P, Patterson, G. Research note: Estimating maternal deaths averted: A field-based methodology. *Intl. J of Gyn and Obst* 2005; 89:218-220. **Available online** (*Medical Library E-Journal Elsevier Science Direct*)

⌘Maine D, Rosenfield A. The safe motherhood initiative: Why has it stalled? *AJPH* 1999; 89, 4: 480-482 **Available online.** (*Medical Library Medline/Ovid*)

Pathmanathan I, Liljestrand J, Martins J, Rajapaksa L, Lissner C, de Sliva A, Selvaraju S, Singh P. Investing in Maternal Health—Learning from Malaysia and Sri Lanka. The World Bank, Washington DC, USA, 2003. Overview: pp. 1-21.

⌘Ronsmans C, Vanneste AM, Chakraborty J, van Ginneken J. Decline in maternal mortality in Matlab, Bangladesh: A cautionary tale. *Lancet* 1997; 350: 1810-14 **Available online** (*Medical Library E-Journals*)

Wardlaw T, Maine D. Process Indicators for Maternal Mortality Programmes. In: M Berer and TKS Ravindran (eds.) *Safe Motherhood Initiatives: Critical Issues*. Reproductive Health Matters 1999: 24-30.

⌘Save the Children. 2004. State of the World's Mothers, 2004. *Appendix. The Complete Mother's Index and Country ranking* Available in May, 2004 from Save the Children at: **Available online** (<http://search.savethechildren.org>)

Class 9: Adolescent Sexuality and Childbearing: Girls in Transition, Policies at Odds

⌘Furstenberg FF Jr. When will teenage childbearing become a problem? The implications of Western experience for developing countries. *Studies in Family Planning* 1998; 29(2):246-53. **Posted as PDF on Course Info: course documents/class 9/online readings.)**

⌘Mathur S; Mehta M; Malhotra A. Youth reproductive health in Nepal: Is participation the answer? Washington, D.C., International Center for Research on Women [ICRW], 2004 January, 75 pgs. **Available online** (http://catalog.icrw.org/docs/nepal_0104.pdf)

⌘Rebouças L. Brazil confronts adolescent sexual health issues. Washington, D.C., Population Reference Bureau [PRB], 2002 Oct. 7 p. **Available online** (*Use "Google" to search by key words followed by site:prb.org.*)

⌘Santelli J, Ott MA, Lyon M, Rogers J, Summers D. and Schleifer R. Abstinence and abstinence-only education: A review of U.S. policies and programs. *J Adol Hlth* 2006; 38: 72-81 [Review Article]. **Available online** (*Medical Library E-Journals*)

Class 10: Neonatal Mortality and Childhood Illness: Community-based Strategies for Prevention

⌘Bang AT, Bang RA, Baitule SB, Reddy MH and Deshmukh MD. Effect of home-based neonatal care and management of sepsis on neonatal mortality: Field trial in rural India. *Lancet* 1999; 354, 9194:1955-196. **Available online** (*Medical Library E-Journals*)

⌘Black RE, Morris SS, Bryce J. Where and why are 10 million children dying every year? *Lancet* 2003; Jun 28; 361(9376):2226-34. Review **Available online**. (*Medical Library E-Journals*)

⌘Jones G, Steketee RW, Black RE, Bhutta ZA, Morris SS; Bellagio Child Survival Study Group. How many child deaths can we prevent this year? *Lancet* 2003; Jul 5; 362 (9377):65-71. Review **Available online** (*Medical Library E-Journals*)

⌘Sazawal, S. & Black, R. Effect of pneumonia case management on mortality in neonates, infants, and pre-school children: a meta-analysis of community-based trials. *Lancet Infectious Diseases* 2003; 3, 9:547-56 Review. **Available online** (*Medical Library E-Journals*)

Darmstadt GL, Costello A, Lawn J. Advancing the state of the world's newborns. *Bull World Health Organ* 2003a; 81: 224-5.

Mcelroy, P D. et al. All-Cause Mortality Among Young Children In Western Kenya.VI: The Asembo Bay Cohort Project. *Am J Trop Med Hyg* 64 (1, 2)S, 2001, pp. 18–27.

⌘Schellenberg, J.A. et al. Inequities among the very poor: Health care for children in rural southern Tanzania. *Lancet* 2003; 361 (9357): 561-6. **Available online** (*Medical Library E-Journals*)

Class 11a: Immunization

Nelsen, K. *Infectious Disease Epidemiology*, 2001, Aspen Publishers, Inc. – Chapter 10 “Vaccines – Past, Present, and Future”, pp 255-282.

⌘Feikin DR, et al. Rapid assessment tool for Haemophilus influenzae type b disease in developing countries. *Emerg Infect Dis*. 2004 Jul; 10 (7):1270-6. **Available online** (<http://www.cdc.gov/ncidod/eid/vol10no7/03-0737.htm>)

⌘Achievements in Public Health, 1900-1999 Impact of Vaccines Universally Recommended for Children -- United States, 1990-1998. *MMWR* April 02, 1999 / 48(12): 243-248. **Available online** (<http://www.cdc.gov/mmwr/preview/mmwrhtml/00056803.htm>)

⌘Glass RI et al. The Future Of Rotavirus Vaccines: A Major Setback Leads To New Opportunities. *Lancet* 2004; 363: 1547–50 **Available online** (*Medical Library E-Journals*)

11b: Acute Respiratory Infection

⌘ Adegbola et al. Elimination of Haemophilus influenzae type b (Hib) disease from The Gambia after the introduction of routine immunization with a Hib conjugate vaccine: a prospective study. *Lancet* 2005 Jul 9-15; 366 (9480):144-50. **Available online** (*Medical Library E-Journals*)

Mulholland K. Global burden of acute respiratory infections in children: implications for interventions. *Pediatric Pulmonology*. 2003 Dec; 36(6):469-74

Class 12: The Package of Services for Child Health: Integrated Management of Childhood Illness (IMCI)

Lambrechts T, Bryce J, Orinda V. Integrated Management of Childhood Illness: A summary of first experiences. *Bulletin of the World Health Organization* 1999; 77, 7:582-94.

Reingold AL, Phares CR. Infectious Diseases: Childhood Vaccine Preventable diseases: the Expanded Program of Immunizations. In: Merson MH, Black RE, Mills AJ, Eds. *International Public Health Diseases, Programs, Systems, and Policies*. Gaithersburg, Maryland: Aspen, 2001:141-151.

⌘WHO (Child and Adolescent Health and Development) (1 page synopsis) (Accessed March 12, 2003). **Available online** (www.who.int/child-adolescent-health/integr.htm) (Click on publications. In the search results, type in the name, date & year.)

Class 13a: Malnutrition and Micronutrient Deficiencies in Childhood

Darnton-Hill I, Darnton-Hill I, Nalubola R. Fortification strategies to meet micronutrient needs: successes and failures. *Proc Nutr Soc* 2002; 61,2: 231-41.

de Pee S, Bloem MW, Satoto, Yip R, Sukaton A, Tjiong R, Shrimpton R, Muhilal, Kodyat B. Impact of a social marketing campaign promoting dark-green leafy vegetables and eggs in central Java, Indonesia. *Int J Vitam Nutr Res* 1998; 8, 6:389-98.

Sanghvi, TG, Murray, J. Improving child health through nutrition: the Nutrition Minimum Package. Arlington, VA: Basic Support for Institutionalizing Child Survival (BASICS) Project for the U.S. Agency for International Development (USAID), 1997.

Tontisirin, K and Bhattacharjee, L. Global burden of malnutrition and infection in childhood. In: *Nutrition, Immunity and Infection in Infants and Children*, edited by Robert M. Suskind and Kraisid Tontisirin. Nestle Nutrition Workshop Series, Pediatric Program, Vol. 45. pg. 1-22; Nestec Ltd., Vevey/ Lippincott Williams and Wilkins, Philadelphia, 2001.

Class 13b: The Nutrition Transition and Childhood Obesity

Popkin, Barry M. The nutrition transition and its health implications in lower-income countries. *Public Health Nutr* 1998; 1,1:5-21. Review.

⌘Wang Y. Cross-national comparison of childhood obesity: the epidemic and the relationship between obesity and socioeconomic status. *Int J Epidemiol* 2001; 30, 5: 1129-36. **Available online** (<http://ije.oxfordjournals.org/cgi/reprint/30/5/1129>)