

ASSIGNMENTS

General

SUPPLEMENTAL READINGS:

The Medical Care System, page 25

REPRINT:

Health-Policy Directions for the 1970's,
page 27

Specific

TEST ITEM MISSED	STUDY
1-2	Supplemental reading, paragraph 1
3	Supplemental reading, paragraphs 2-4
4	Supplemental reading, paragraph 4
5	Supplemental reading, paragraph 5

DIAGNOSTIC POST-TEST

1. List the three basic resources of the medical care system.
 - (a)
 - (b)
 - (c)

2. List the three levels of medical care services.
 - (a)
 - (b)
 - (c)

3. Match types of health insurance programs with their characteristics. Place the number of the appropriate program opposite each characteristic. Some characteristics may apply to more than one program.

<u>Characteristics</u>	<u>Insurance Programs</u>
<input type="checkbox"/> Government sponsored	1. Medicare
<input type="checkbox"/> Independent health insurance	2. Blue Shield
<input type="checkbox"/> 90 days hospitalization	3. Medicaid
<input type="checkbox"/> Means test for medical indigency	4. Health maintenance organizations
<input type="checkbox"/> Limited risk	5. Blue Cross
<input type="checkbox"/> Provider-sponsored hospital insurance	6. Commercial health care programs
<input type="checkbox"/> Physicians and facilities available to members of group	
<input type="checkbox"/> Physicians have reserved right to charge more	
<input type="checkbox"/> For those who are medically indigent	
<input type="checkbox"/> Service benefits	
<input type="checkbox"/> Fixed dollar per day	
<input type="checkbox"/> Indemnity benefits	
<input type="checkbox"/> Started by American Hospital Association	
<input type="checkbox"/> Financed through state-federal matching funds	
<input type="checkbox"/> Provider-sponsored physician's care insurance	
<input type="checkbox"/> 100 days extended care	

4. List the health care programs provided by the Social Security Acts of 1935 and 1965 and the recipients of each program.

1935: _____

(a)

(b)

(c)

(d)

1965: _____

(a)

(a)

5. Diagram the basic medical care systems and give some explanation as to how it works in the United States.

POST-TEST KEY

1. (a) Biomedical knowledge
 - (b) Facilities and equipment
 - (c) Health manpower

2. (a) Primary: prevention
 - (b) Secondary: treatment
 - (c) Tertiary: rehabilitation

3. 1 Government sponsored
 - 4 Independent health insurance
 - 1 90 days hospitalization
 - 3 Means test for medical indigency
 - 6 Limited risk
 - 5 Provider-sponsored hospital insurance
 - 4 Physicians and facilities available to members of group
 - 2 Physicians have reserved right to charge more
 - 3 For those that are medically indigent
 - 2, 5 Service benefits
 - 6 Fixed dollar per day
 - 6 Indemnity benefits
 - 5 Started by American Hospital Association
 - 3 Financed through state-federal matching funds
 - 2 Provider-sponsored physician's care insurance
 - 1 100 days extended care

4. 1935: Medical care for those who qualified for assistance programs

- (a) Old age assistance
- (b) Aid to the blind
- (c) Aid to families with dependent children
- (d) Aid to the totally and permanently disabled

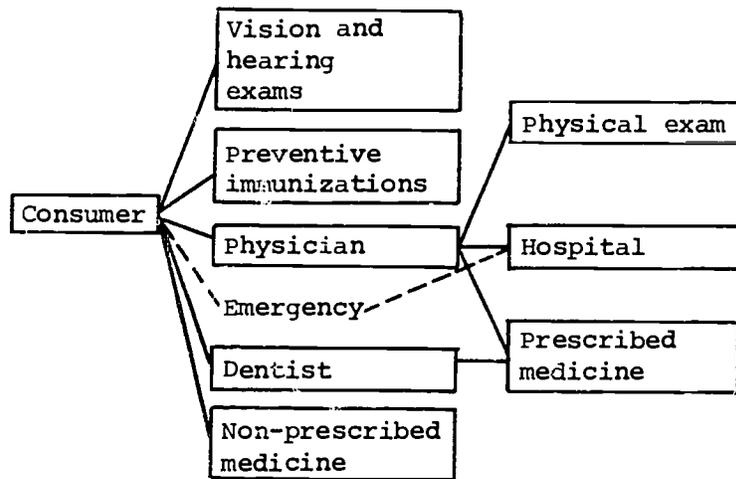
1965: Medicare

- (a) Hospitalization for everyone 65 years of age or older

Medicaid

- (a) Medical care for the medically indigent

5.



The medical care system is private in nature. The physician is the key to entrance into the medical care system. Physicians admit all patients into hospitals with the exception of cases of emergency. The physician writes all prescriptions.

(continued on next page)

5. The consumer may be able to get some vision and hearing examinations, preventive immunizations, non-prescribed medicines, and the service of a dentist without going through a physician.

* * *

USING COMMUNITY HEALTH SERVICES

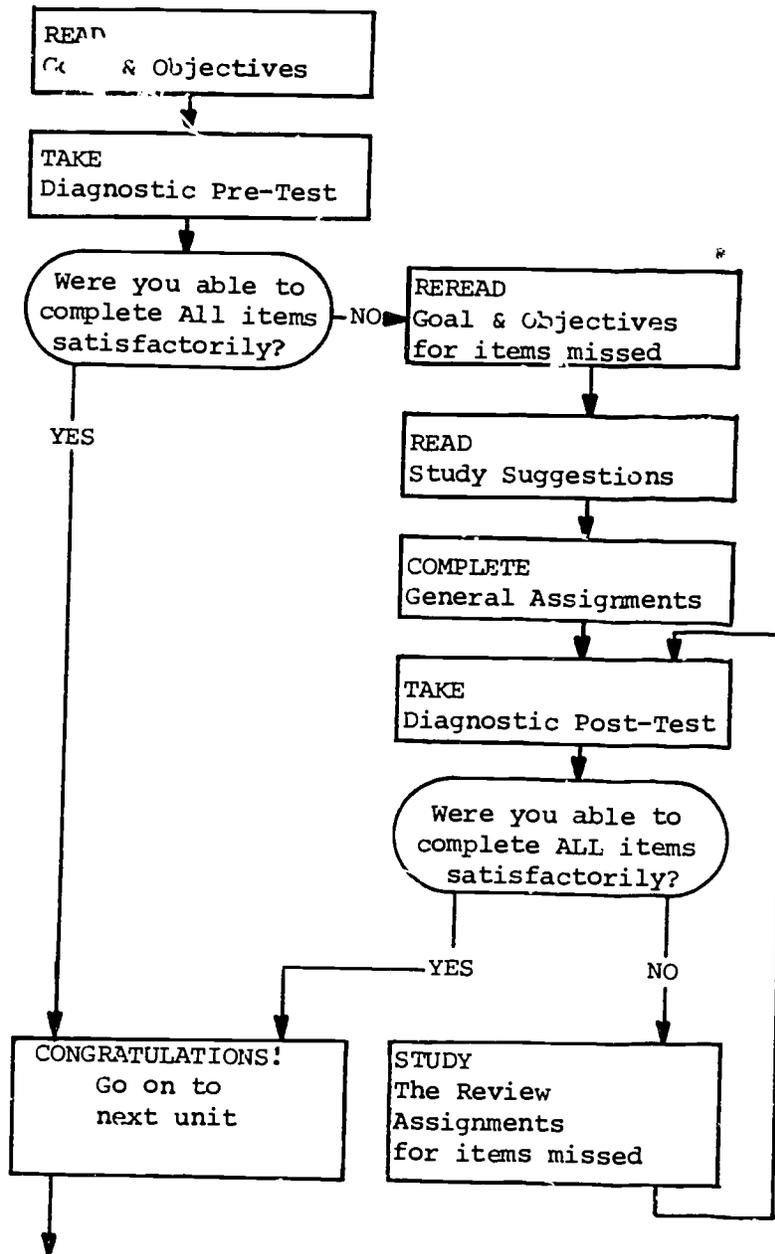
Unit Ten

INTRODUCTION

One of the primary goals of health education is to close the gap between scientific medical knowledge and existing health practices. It is a well-known fact that people still believe in superstition and old wives tales concerning medical treatment. Many times what is learned in the research laboratory is not put into use until many years later because of the human tendency to continue using familiar health practices. It is the underprivileged or deprived segments of society who find it most difficult to change. This group is referred to as the hard-to-reach. In order to reach people with the latest scientific medical knowledge and make it possible for them to learn good health habits, health educators must understand values and how they motivate people. Religious beliefs and one's personal family have a very great influence on health behavior.

Success in public health education requires teamwork between all of the medical professionals and the consumers of health services. A health educator must understand health agency programs and services and how to motivate people to use these services at the appropriate time and in the appropriate manner. Therefore, health educators must understand human behavior and how it is influenced.

STUDY MAP



GOAL

Become familiar with the types of programs and agencies that are available for assisting individuals with health needs and directing them to the appropriate community health services.

OBJECTIVES

1. You will list the three factors that determine the level of community health or public health at any point in time.
2. You will list the six factors that determine the makeup of a public health program.
3. You will list the three basic factors which usually determine eligibility for health services.
4. You will list the usual sources for health services information.
5. You will list the basic steps involved in getting people with health needs to the agency rendering the needed service.

DIAGNOSTIC PRE-TEST

1. List the three factors that determine the level of health a community enjoys at any point in time.

(a)

(b)

(c)

2. In the following list of statements, place a check by those which help to determine the makeup of a public health program. Leave blank any statements that are not relevant.

- Morbidity rate
- Needs and wants of the people - how they accept the program
- Crude death rate
- Religious beliefs of the people
- Hospitals
- Legal requirements
- Scientific knowledge available
- Accessibility to the problem
- Size of public health staff
- Cost
- Wishes of health personnel - professional societies, service clubs, and voluntary agencies

3. List the three basic factors which usually determine eligibility for health services.

(a)

(b)

(c)

4. What are the three most likely sources you could refer a person to who was seeking health services information?

(a)

(b)

(c)

5. Assume that you are working in a health referral agency. Place a check by the five basic steps that you would follow in referring an individual with a health problem to the agency rendering the needed service. Leave blank those statements that would not be appropriate to a referral agency.

- Define the problem. What specifically is needed or wanted?
- Have a diagnosis made of the health problem.
- Ascertain all pertinent information about the problem. What other assistance is the client now receiving or has he received in the past?
- Determine the cost of the service.
- Screen the client to determine if he really has a health problem.
- Select the right agency or solution.
- Evaluate the success of referrals. Did the client carry through on the referral or recommendation for treatment?
- Determine the death rate relative to the health problem.
- Maintain a current file of community resources.

PRE-TEST KEY

1. (a) Disease - nature and severity
 - (b) Theories as to cause, treatment, and control
 - (c) Prevailing social, theologic, economic, and political ideologies

2. Morbidity rate
 - Needs and wants of the people - how they accept the program
 - Crude death rate
 - Religious belief of the people
 - Hospitals
 - Legal requirements
 - Scientific knowledge available
 - Accessibility to the problem
 - Size of public health staff
 - Cost
 - Wishes of health personnel - professional societies, service clubs, and voluntary agencies

(no errors allowed)

3. (a) Residency
 - (b) Religious affiliation
 - (c) Financial eligibility

4. (a) An information and referral agency
 - (b) The local health department
 - (c) Any health agency

5. Define the problem.
 Have a diagnosis made of the health program.
 Ascertain all pertinent information about the problem.
 Determine the cost of the service.
 Screen the client to determine if he really has a health problem.
 Select the right agency or solution.
 Evaluate the success of referrals.
 Determine the death rate relative to the health problem.
 Maintain a current file of community resources.

(no errors allowed)

STUDY SUGGESTIONS

All five objectives in Unit Ten require you to memorize material and recall or recognize it on the Credit Exam. Here again, you should use the Goal and Objectives to identify what it is you need to learn. After reading the General Assignments, use the Diagnostic Post-Test to check your mastery of the material. If you miss items on the test, consult the Review Assignments and restudy for the items you missed until you can pass the test.

ASSIGNMENTS

General

TEXTBOOK:

- Chapter 10
- Chapter 11
- Chapter 12

SUPPLEMENTAL READINGS:

Using Community Health Services, page 39

Review

TEST ITEM MISSED	STUDY
1	Supplemental reading, paragraph 1
2	Supplemental reading, paragraph 2
3	Textbook, pages 356-357
4	Supplemental reading, paragraph 3
5	Textbook, pages 359-360

DIAGNOSTIC POST-TEST

1. List the three factors that determine the level of health a community enjoys at any point in time.

(a)

(b)

(c)

2. In the following list of statements, place a check by those which help to determine the makeup of a public health program. Leave blank any statements that are not relevant.

- Size of public health staff
- Legal requirements
- Scientific knowledge available
- Religious beliefs of the people
- Crude death rate
- Needs and wants of the people - how they accept the program
- Wishes of health personnel - professional societies, service clubs, and voluntary agencies
- Cost
- Accessibility to the program
- Morbidity rate

3. List the three basic factors which usually determine eligibility for health services.

(a)

(b)

(c)

4. What are the three most likely sources you could refer a person to who was seeking health services information?

(a)

(b)

(c)

5. Assume that you are working in a health referral agency. Place a check by the five basic steps that you would follow in referring an individual with a health problem to the agency rendering the needed service. Leave blank those statements that would not be appropriate to a referral agency.

- Determine the cost of the service.
- Determine the death rate relative to the health problem.
- Select the right agency or solution.
- Have a diagnosis made of the health problem.
- Maintain a current file of community resources.
- Define the problem. What specifically is needed or wanted?
- Ascertain all pertinent information about the problem. What other assistance is the client now receiving or has he received in the past?
- Evaluate the success of referrals. Did the client carry through on the referral or recommendation for treatment.
- Screen people to determine if they really have a health problem.

POST-TEST KEY

1. (a) Disease - nature and severity
(b) Theories as to cause, treatment, and control
(c) Prevailing social, theologic, economic, and political ideologies

2. Size of public health staff
 Legal requirements
 Scientific knowledge available
 Religious beliefs of the people
 Crude death rate
 Needs and wants of the people - how they accept the program
 Wishes of health personnel - professional societies, service clubs, and voluntary agencies
 Cost
 Accessibility to the program
 Morbidity rate

(no errors allowed)

3. (a) Residency
(b) Religious affiliation
(c) Financial eligibility

4. (a) An information and referral agency
(b) The local health department
(c) Any health agency

5. Determine the cost of the service.
 Determine death rate relative to the health problem.
 Select the right agency or solution.
 Have a diagnosis made of the health problem.
 Maintain a current file of community resources.
 Define the problem.
 Ascertain all pertinent information about the problem.
 Evaluate the success of referrals.
 Screen the client to determine if he really has a health problem.

COMMUNITY HEALTH

Student Manual

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CENTRAL MICHIGAN UNIVERSITY**

216

7

COMMUNITY HEALTH
STUDENT MANUAL

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217

2

CONTENTS

USE OF STUDENT MANUAL	1
COURSE DESCRIPTION	2
NATURE OF THE COURSE	3
COURSE ORGANIZATION	6
INSTRUCTIONAL RESOURCES	9
INSTRUCTIONAL STRATEGIES	10
EXAMINATION PROCEDURES	13
GRADES AND GRADING	14
TIME LIMITS	15
HELP!	16
BACKTALK	17
AFTERWORD	18
ACKNOWLEDGEMENTS	19

USE OF STUDENT MANUAL

Is your first inclination to skim this manual quickly and get on to the content of the course? If it is, don't. This manual contains information essential to your success in the course.

Even in a typical course there is a need for you to know such things as grading policies, when tests are to be taken, and what material is to be covered. Such information is necessary for this course also, but more is needed because it is structured quite differently from typical university courses. In addition to reading assignments, the instructor has provided a study map, a general goal and instructional objectives, self-diagnostic tests and study suggestions. The reading assignments themselves provide more information than those you may have used before.

All of these can be a substantial aid to you if used correctly. A section on each of them has been included in the Instructional Strategies part of this manual. Please read this manual carefully and thoroughly so you will know how the course works and what you are expected to do.

COURSE DESCRIPTION

This three credit-hour course in community health is the study of organizations providing communities with health services and the methods they employ. More specifically, it is a survey of the basic community health problems (mental health, communicable diseases, accidents, environmental conditions, and chronic diseases) which have broad socio-economic implications, and the efforts engaged in by official (governmental) and voluntary (nongovernmental) agencies at the national, state, and local levels to prevent and control those problems, while promoting positive health practices.

The emphasis is on public health as a profession and the health-related activities which affect the quality of life that a community can provide for its residents. The ultimate goal of this course is to help students realize that a community's health is only as good as the health of the individuals who live in the community, and that to be truly effective, community health programs must deal with and provide for real people.

A review of the major standard texts in the field reveals that the authors perceive the content of a course in community health differently. Although many of the topics found in this course of study can be identified in most standard texts on community health, no one text includes them all. Accordingly, this course includes a book of supplemental readings in addition to the textbook. The major topics covered in this course are: major health problems in the United States, the need for community health, the historical development of preventative medicine and public health, official and voluntary agencies responsible for health protection, the local health department, comprehensive health planning, epidemiology, or the disease process, and the medical care system.

NATURE OF THE COURSE

This course is a study of the individuals and organizations dedicated to helping people attain optimum levels of health and well-being. It focuses on official agencies based in law and financed by taxes, as well as on voluntary agencies composed of private citizens interested in promoting the physical, emotional, and social health of the community. In order for you to understand the complex ramifications of community health, you must become acquainted with the programs of health agencies and the methods they use to promote healthful living, prevent disabilities, correct remediable defects, treat illness, and rehabilitate the handicapped.

You will become familiar with the leading causes of mortality (the proportion of deaths to population) and morbidity (the relative incidence of disease), as well as with changes in population, and social and economic conditions. The major health problems resulting in illness, disability and death are reviewed: chronic and degenerative diseases, communicable diseases, environmental problems, mental illness and accidents. The causes, treatment, and prevention of each is considered briefly.

You will look at the historical development of scientific medical knowledge and the technological advancements which have made it possible for man to improve his physical and mental well-being. These developments have led to the recognition of public health as a professional field. You will also consider the social conditions which breed disease and the legislation which provides funds to combat death and sickness.

A study of community health must also cover the organization and function of government agencies at the federal, state, and local levels. The interrelations of health and welfare departments are examined and their combined efforts analyzed in terms of their effectiveness in meeting health needs. Their sources of funds and primary expenditures are reviewed. Some attention will be given

to the influence of the Constitution on health programs at the state and local levels.

The local health department and its programs are studied in detail. The roles of the staff members, i.e., public health officer, public health nurse, sanitarian, and health educator, are examined in relation to each of its major programs: (1) recording vital and other health statistics, (2) environmental health, (3) communicable disease control, (4) maternal and child health, (5) chronic disease control and adult health, (6) laboratory services, and (7) health education. Methods and materials used in health education are also discussed.

The course covers the elements of demographic data, or census information, and where such information may be found. You will learn what vital statistics are and what computations are necessary to produce statistical measures such as distributions, averages, rates, and ratios. Demographic data and vital statistics are tools of public health, and how they are used in planning, research, and general surveillance of the health status of the population is covered in this course.

The course discusses voluntary agencies which are unique to this country. Their origins, philosophy, and goals are presented at length. The different forms of financial support, i.e., endowments, donations, campaign subscriptions, patient fees, membership dues, or contracts, are compared and the resulting programs and delivery of health services discussed. The operation of international agencies concerned with worldwide health problems is also studied.

Comprehensive health planning is a new and innovative approach to meeting the health needs of a community on a priority basis. This course will examine the steps involved in the planning process in an attempt to provide you with an appreciation of the need for a goal-oriented approach to better health. The objective is to point out the shortcomings of services that arise out of meeting crises. Also stressed is the need for health planners to work cooperatively with those who are responsible for making political, economic, and educational plans for the community.

You will consider epidemiology as a body of knowledge and as a method of investigating the health-disease process. You will review the principles and procedures which characterize scientific investigation. The relationships of a host organism and a disease-causing agent, and their influence on the infection process, and steps for eradication of disease problems are examined in detail.

The course will survey the medical care system--organizations which provide health services for treating the sick. You will study factors which have led to greater involvement of the government in providing medical care as well as methods of financing medical care. The different medical professions involved in rendering medical care are reviewed briefly.

The course concludes with a brief look at the role of referral systems in ensuring the best use of community health services by referring clients to appropriate health agencies.

COURSE ORGANIZATION

This course is divided into ten units. Each unit covers one topic and is designed to help you accomplish one instructional goal. The titles and goals for each unit are listed below.

Unit One Major Health Problems in the United States

The goal of this unit is to become aware of the major causes of illness, disability, and death; their prevalence and trends.

Unit Two Historical Development of Preventative Medicine and Public Health

The goal of this unit is to become acquainted with the history of health care, the changes in our way of life that have affected recent procedures in health care, and the types of agencies and services available today.

Unit Three Organization of Federal, State and Local Government Agencies

The goal of this unit is to become familiar with agencies at the federal, state and local levels which are engaged in solving health problems.

Unit Four The Local Health Department

The goal of this unit is to understand the role of the local health department in promoting, protecting, and controlling the health of the community.

Unit Five The Tools of Public Health

The goal of this unit is to understand the components of demographic data and vital statistics and their usefulness in planning and evaluating public health programs.

Unit Six Voluntary Health Agencies

The goal of this unit is to become familiar with the organization of voluntary agencies and the role they have in maintaining, protecting, and promoting community health.

Unit Seven Comprehensive Health Planning

The goal of this unit is to understand the planning process and the fact that all factions of the community must be involved in order to meet health needs and to assure the most effective use of facilities and services.

Unit Eight Epidemiology - The Disease Process

The goal of this unit is to understand the historical background in the development of disease and the factors involved which determine whether a condition or disease will spread or become acute or chronic and how it can be prevented, controlled, or eliminated.

Unit Nine The Medical Care System

The goal of this unit is to become familiar with the organization of both the public and private sectors of the medical care system.

Unit Ten

Using Community Health Services

The goal of this unit is to become familiar with the types of programs and agencies that are available for assisting individuals with health needs and directing them to the appropriate community health services.

INSTRUCTIONAL RESOURCES

Four types of materials are provided for you as instructional resources.

Student Manual

This is the book you are reading now. It contains information on the scope and sequence of the course, how to use the Unit Study Guides, examination procedures and grading, time limits for completing the course and how to get help when you need it.

Unit Study Guides

This book provides you with information about the topics you will study, the objectives you should attain, reading assignments and how to study efficiently. It also contains self-diagnostic tests for you to use to check your knowledge of the material covered in each unit.

Textbook

Henkel, Barbara. Community Health. Boston: Allyn and Bacon, 1970.

Supplemental Readings

This book contains supplemental readings of two types: journal reprints and informative articles written by the author of the course to cover material not included in the textbook.

INSTRUCTIONAL STRATEGIES

If you were to take this course on a university campus, you would likely be meeting with an instructor two or three times a week in class periods. He would give assignments, offer suggestions for study, and lecture over important material not covered in the textbook. In this off-campus self-instructional course, you will not be meeting with an instructor in class. The things normally provided in class are going to be provided by the Unit Study Guides. So, let's look closely at each of the sections in the Unit Study Guides and how each one will be helpful to you in your study of this course. For each unit the study guide provides an introduction, a study map, a goal and instructional objectives, self-diagnostic tests, study suggestions and assignments.

Introduction

Before starting each unit, you will want to turn to the study guide for a brief introduction to the material the unit will cover. It will provide a brief overview and help you understand why it is important to study the material in the unit.

Study Map

The study map outlines, in graphic form, the most efficient way to work through each unit. It tells you when and how to use the self-diagnostic tests to greatest advantage, and takes you step-by-step through the unit.

Goal and Objectives

The goal should communicate to you in broad terms a general statement of what you are expected to learn in a unit. The performance objectives describe exactly what you are expected to know or do upon completion of the unit. It is these competencies that the tests will measure. The objectives answer the question: "What

should I really concentrate on?" and therefore they are a valuable study aid.

Diagnostic Pre-Test

Two diagnostic tests (with answer keys) are provided for each unit: a Diagnostic Pre-Test and a Post-Test. They may be used by you to determine how well you know the material in the unit. Both of these tests are very similar to the test you will take for credit, and if you can pass them you will be able to pass the Credit Exam.

The Diagnostic Pre-Test may be used to check your knowledge of the material to be studied in a unit before you begin work on that unit. You may already know a good deal about a unit before you start and may not need to study the material covered in that unit. If, after looking at the objectives for a unit, you feel that this is the case, take the Diagnostic Pre-Test and make sure. If you pass the Pre-Test, you already know the material covered in that unit and may feel comfortable about going on to the next unit. You will be graded on how well you perform on the Credit Exam, not on whether you have studied the material.

There are other ways in which the Diagnostic Pre-Test can be used. It can serve to indicate to you just what material you will be required to know. In addition, if you have taken the Pre-Test before working through a unit, you will see the difference between your Pre-Test and Post-Test scores and will know how much you have learned.

Study Suggestions

This section contains information on how the subject matter in the unit will be tested and suggestions on how to study the material. In some units the same subject matter may be tested in different ways and this section will explain the way in which this will be done.

Assignments

There are two types of reading assignments for this course: general and review. The General Assignments list all the reading assignments you should do for a unit. The Review Assignments refer you to the portions of the General Assignment which you should restudy if you miss questions on the Diagnostic Post-Test. The Review Assignments for a unit list, for each test question, the pages in the text or the paragraphs in the supplemental reading which contain the material you must know to answer that question.

Diagnostic Post-Test

A Diagnostic Post-Test is provided in each unit for you to use to check your mastery of the material covered in that unit. Take the Post-Test after you have worked through the unit and you feel you have mastered the material outlined in the objectives for that unit. Check your answers with the key, and if you pass the test, go on to the next unit. If you miss items on the Post-Test, restudy the material indicated in the Review Assignments for the questions you missed and take the test again. When you can successfully answer all the questions on the test, go on to the next unit.

Summary

As you start each unit, read the introduction for the unit, and then the goal and objectives. If you think you already know the material covered in the unit, try the Diagnostic Pre-Test. If you do need to study the material, read the Study Suggestions and work through the General Assignment. After you study the assignment, take the Diagnostic Post-Test. Use the Review Assignments to help you restudy any material you may have missed on the test. When you can pass the Post-Test, go on to the next unit. These steps are summarized for you in the Study Map at the beginning of each unit.

EXAMINATION PROCEDURES

Since your final grade will be determined by your performance on the examinations, it is important you understand how these credit examinations are carried out.

You are required to take three short answer examinations. They are:

<u>Exam</u>	<u>Units Covered</u>
1	One through Four
2	Five through Seven
3	Eight through Ten

Procedures

You have contracted the time, date, and place the exams will be given. If you cannot take an exam on the scheduled date, you should contact the proctor, reschedule the exam, and submit a Change of Exam Schedule to the IPCD office in Mt. Pleasant, MI, 48859.

GRADES AND GRADING

Since no classroom or "class" exists for this course, your grade is based on attainment of course objectives, not on a normal learning curve for some group. Each examination will be assigned a raw score and a percentage score. The final course grade will be determined by adding the raw scores of all three exams and deriving the percentage of all correct items for all possible items. Letter grades will then be assigned in accordance with the following grade scale:

90% to 100%	= A
80% to 89%	= B
70% to 79%	= C
60% to 69%	= D
59% or lower	= E

After you have completed an exam, the proctor will provide you with a copy. It will show the questions you answered incorrectly, permitting you to grade yourself. Each exam question will be cross referenced to the unit's learning objective so that you will be able to restudy the objectives you missed.

The graded examinations will generally be returned to you within 10 days after the completed exams have been received by the Institute.

If you have questions concerning examination or grading procedures, contact the Institute at (517) 774-3865.

TIME LIMITS

It is recommended that this course be completed in twelve weeks or less. This will require perseverance and considerable work, but the overall learning experience will be more desirable if the course is completed in a concentrated time period.

If you wish to complete all the course requirements in less time, you are encouraged to do so. There is no minimum time period.

In the event everything is not completed within the time specified in your Learning Package Contract, you will receive an incomplete grade. This incomplete can be made up by completing all the course requirements. However, if you do not complete the course within a period of twelve months and wish to continue, you will be required to register for the course again.

HELP!

What do you do if you need help?

If you have a problem related to course work, contact your instructor. If your question relates to missing materials, lost exam, inability to take an examination at a scheduled time, or any question about the administrative nature of the course, contact the Institute.

If at any time you cannot contact your instructor after repeated efforts, contact the Institute either by mail or phone.

When you call the Institute, your questions will be dealt with quickly if you

1. give your name and identify yourself as an IPCD student
2. state that you have a problem or question relating to the Community Health course.

It may occasionally take some time to locate the person who can answer your question, but we will honestly try to answer all questions in the same day.

If, even after we've tried to solve your problem, you feel you still don't have the answer, tell us so. Let us try again.

The telephone number of the Institute is (517) 774-3865.

↓ ↓

BACKTALK

Enclosed in the manila envelope of "Additional Materials" is a Course Evaluation Opinionnaire that is to be filled out by students using this instructional package. The information that you provide to the author and course designers helps to develop instructional packages which are better designed, are more effective forms of instruction, and which will ultimately serve the educational needs of students better.

The Course Evaluation Opinionnaire consists of two parts-- a set of specific questions related to various aspects of this instructional package, and a separate sheet for personal reactions, opinions, constructive criticisms, etc. formed in your own words.

Make no mistake! This, as other instructional packages, will be revised and improved by the comments provided by you and other students. Help us out.

AFTERWORD

As a student of this course, you will spend considerable time and effort toward achieving new knowledge, skills, and competence. Your "learning effort" is just beginning. Our "teaching effort" has been going on for sometime and has produced this package of learning materials.

In this course you will never have to "psyche-out" the instructor. The objectives tell you very precisely what you will be expected to learn. Nor will you be surprised by some unexpected or tricky questions because, logically, the test questions are directly related to the stated objectives.

When you take the Credit Exams (which determine your grade), you should know pretty well how you are going to do on those examinations. We have included for each unit, not one, but two self-diagnostic tests that allow you to check your own exam readiness.

As teachers of this course, we have earnestly tried to select and create the best possible resources and activities to help you learn effectively, efficiently, and without any compromise of academic standards.

To make certain, we have had real students, like yourself, try out this course. These students have spotted errors and helped us to smooth out the rough spots. Most of their suggestions have been used. (In fact, this course is the product of several earlier prototype versions.)

Of course, teaching and learning is a cooperative enterprise. Teacher and student must both do their jobs. We feel certain that most students giving reasonable effort to this course will be successful. We want you to be successful too.

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