

Department of Community Health Sciences - Population & Public Health (PPH) specialization  
PPH Candidacy Reading List

Effective: September 2022  
Date for review: August 2025

**PREAMBLE:** To help strengthen and improve coherence of the Population & Public Health (PPH) graduate specialization, a core PPH reading list was developed. The list includes 20 entries that are considered to be core to PPH and which distinguish PPH from other graduate specializations in Community Health Sciences; that is, a population-level perspective as it pertains to research, interventions, equity, etc.

The list was developed through an extensive process that included discussion by core PPH faculty members and PPH student representatives and a series of surveys to solicit additional entries and to narrow the list to a total of 20. This process was most recently undertaken during 2022 and the resulting list (below) is effective September 2022.

**INSTRUCTIONS:** From the list of 20 entries below (ordered alphabetically), PhD students in PPH must select 15 entries for inclusion in their candidacy reading list, with the remaining readings to be tailored to the student's candidacy areas.

**CONTACT:** Any questions or concerns about this process may be directed to Lindsay McLaren ([lmclaren@ucalgary.ca](mailto:lmclaren@ucalgary.ca))

1. Bauer, G. R. Incorporating intersectionality theory into population health research methodology: Challenges and the potential to advance health equity. *Social Science & Medicine* 2014; 110:10-17.
2. Frohlich KL, Potvin L. The Inequality Paradox: The Population Approach and Vulnerable Populations. *American Journal of Public Health* 2008; 98(2):216-21 **and** McLaren L, McIntyre L, Kirkpatrick S. Rose's population strategy of prevention need not increase social inequalities in health. *International Journal of Epidemiology* 2010; (2):372-377 **and** Frohlich KL, Potvin L. Commentary: structure or agency? The importance of both for addressing social inequalities in health. *International Journal of Epidemiology* 2010; 39(2): 378-379
3. Graham H. Tackling Inequalities in Health in England: Remedying Health Disadvantages, Narrowing Health Gaps or Reducing Health Gradients? *Journal of Social Policy* 2004; 33(01):115-131.
4. Harper S, King NB, Meersman SC, Reichman ME, Breen N, Lynch J. Implicit value judgments in the measurement of health inequalities. *Milbank Quarterly* 2010; 88(1):4-29.
5. Hawe P, Potvin L. What is population health intervention research? *Canadian Journal of Public Health* 2009; 100(1):Suppl I8-14.

6. Heidari S. Missing in Action: Sex- and Gender-based Analysis (SGBA) in Public Health (Chapter 2). In: Gahagan J & Bryson MK (Eds), Sex- and Gender-Based Analysis in Public Health. Springer, Cham. 2021, p. 11-26  
([https://link.springer.com/chapter/10.1007/978-3-030-71929-6\\_2](https://link.springer.com/chapter/10.1007/978-3-030-71929-6_2))
7. Katz AS, Hardy BJ, Firestone M, Lofters A, Morton-Ninomiya ME. Vagueness, power and public health: Use of 'vulnerable' in public health literature. *Critical Public Health* 2020; 30(5):601-611.
8. Krieger N. Theories for social epidemiology in the 21st century: an ecosocial perspective. *International journal of epidemiology* 2001; 30(4):668-677.
9. Labonte R, Stuckler D. The rise of neoliberalism: how bad economics imperils health and what to do about it. *J Epidemiol Community Health* 2016; 70(3):312-8.
10. Lewis D, Williams L, Jones R. A radical revision of the public health response to environmental crisis in a warming world: contributions of Indigenous knowledge and Indigenous feminist perspectives. *Can J Public Health* 2020;111:897-900, **and** Richardson L., Crawford A. COVID-19 and the decolonization of Indigenous public health. *Canadian Medical Association Journal* 2020; 192(38):E1098-E1100.
11. Lupton D. Risk as moral danger: the social and political functions of risk discourse in public health. *International Journal of Health Services* 1993; 23(3):425-435.
12. McLaren L, Hawe P. Ecological perspectives in health research. *Journal of Epidemiology and Community Health* 2005; 59(1):6-14.
13. Mykhalovskiy E, Frohlich KL, Poland B, Di Ruggiero E, Rock MJ, Comer L. Critical social science with public health: Agonism, critique and engagement. *Critical Public Health* 2019; 29(5):522-533.
14. NCCHPP / Marjorie Macdonald, 2014. Introduction to Public Health Ethics: 1. Background (<https://ccnpps-ncchpp.ca/introduction-to-public-health-ethics-1-background/>); 2. Philosophical and Theoretical Foundations (<https://ccnpps-ncchpp.ca/introduction-to-public-health-ethics-2-philosophical-and-theoretical-foundations/>); and 3. Frameworks (<https://ccnpps-ncchpp.ca/introduction-to-public-health-ethics-3-frameworks-for-public-health-ethics/>)
15. Phelan JC, Link GB, Tehranifar P. Social Conditions as Fundamental Causes of Health Inequalities: Theory, Evidence, and Policy Implications. *Journal of Health and Social behavior* 2010; 51(suppl): S28-S40.
16. Rose G. Sick individuals and sick populations. *International Journal of Epidemiology*. 2001; 30(3):427-32. [originally published in 1985 in *Int J Epidemiol*].
17. Whitehead, M. A typology of actions to tackle social inequalities in health. *Journal of Epidemiology and Community Health* 2007; 61(6): 473-478.

18. Williams DR, Lawrence JA, Davis BA. Racism and health: evidence and needed research. *Annual Reviews of Public Health* 2019; 40:105-125.
19. World Health Organization 2010. A conceptual framework for action on the social determinants of health: Social Determinants of Health Discussion. Geneva, Switzerland.
20. World Health Organization: Documents: Ottawa charter for health promotion (June 16, 2012); Milestones in health promotion: statements from global conferences (Nov 4, 2009) and Potvin L, Jones CM. Twenty-five years after the Ottawa Charter: the critical role of health promotion for public health. *Canadian Journal of Public Health* 2011; 102(4):244-8.