

Basic Philosophy of Medicine & Health Services

Ahmet SALTIK, MD

Professor of Public Health

LLM; in Health Law

BSc; Public Administration & Political Sciences



Many mental health conditions can be effectively treated at relatively low cost, yet the gap between people needing care and those with access to care remains substantial. Effective treatment coverage remains extremely low.

**Phase 1 lecture, 2024 - 2025
academic year, Fall semester
27th Sept. 2024, Ankara - TURKIYE**

www.ahmetsaltik.net

Learning Objectives

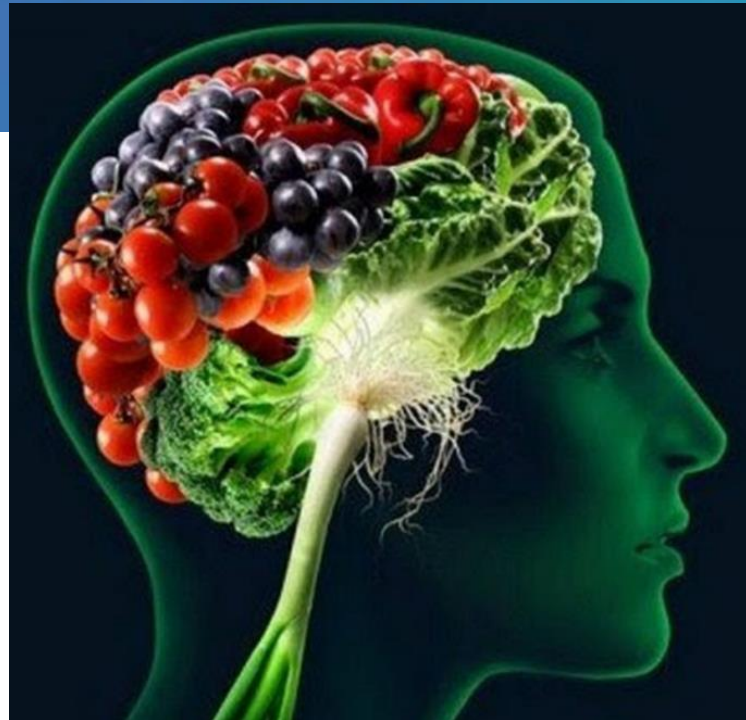
After 2 hours lecture, you will be able to

- **explain** the basic philosophy of medicine and its public health mission
- **describe** the role of the health services in public health practice
- also **explain** main mission and basic philosophy of health services both individual & community
- **understand** mandatory mission of medicine and health services are protecting and promoting **community health** and creating a welfare society..



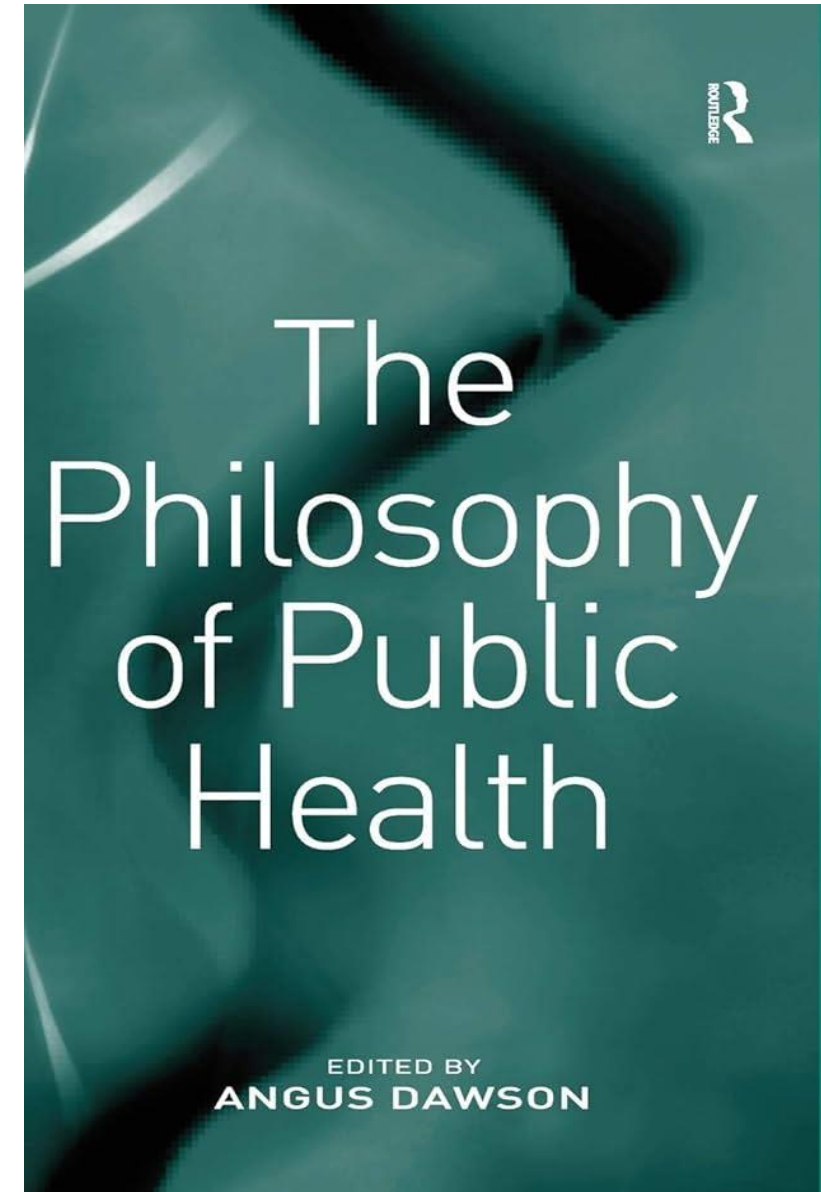
The basic philosophy of medicine and public health

PUBLIC HEALTH DEPENDS ON WINNING OVER HEARTS AND MINDS. IT'S NOT ENOUGH TO JUST HAVE A GOOD POLICY, YOU HAVE TO CONVINCe PEOPLE TO ACTUALLY FOLLOW IT.



The basic philosophy of medicine and public health

- ❑ **The basic philosophy of medicine and public health** is the study of the
 - *fundamental principles,*
 - *concepts,*
 - *values,*
 - *and methods that underlie the theory and practice of medicine and public health.*
- ❑ It is **an interdisciplinary field** that draws from various disciplines such as biology, psychology, sociology, ethics, history, and philosophy.



General Remarks / Main domains

1. Foundations of scientific knowledge (*Epistemologic basis*)
 - biological & life sciences
 - concepts of health and disease
2. Social & Behavioral sciences
3. Basic Biostatistics & Epidemiology
4. Medical Humanities / Fine Arts & Medicine
5. Conceptualization of Medicine & Health services as the main tools of a welfare society



What is Health??

- *Health is a state of complete*
- *physical,*
 - *mental and*
 - *social well-being*
- and **not merely** the absence of disease or infirmity.*



World Health Organization as a specialized agency within the terms of Article 57 of the Charter of the United Nations. The objective of the **WHO** shall be the attainment by all peoples of the highest possible level of **health**.

Constitution of the World
Health Organization



Constitution of the WHO (*World Health Organization*)

Definition of Public Health



“The science and art of preventing disease, prolonging life, and promoting health through the organized efforts and informed choices of society, organizations, public and private communities, and individuals.” —by *CEA Winslow / US Physician*

*Prof. Dr. CEA Winslow,
founder of modern
Public Health Sciences*



Winslow CEA. The untilled field of public health. *Mod Med* 1920;2:183–91.

Constitution of WHO (*World Health Organization*) : Principles-1

WHO remains firmly committed to the principles set out in the preamble to the Constitution



- **Definition :** *Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.*
- The enjoyment of the *highest attainable standard of health* is one of the *fundamental rights of every human being* without distinction of race, religion, political belief, economic or social condition.
- The **health of all peoples** is fundamental to the attainment of **peace** and security and is dependent on the fullest co-operation of individuals and States.
- The achievement of any State in the *promotion and protection* of health is of value to all.

Constitution of WHO (*World Health Organization*) : Principles-2

WHO remains firmly committed to the principles set out in the preamble to the Constitution

9 core pieces of public health content

- ❖ Unequal development in different countries in the promotion of health and control of diseases, especially communicable disease, is a ***common danger***.
- ❖ Healthy development of the **child** is of basic importance; the ability to live harmoniously in a changing total environment is essential to such development.
- ❖ The extension to all peoples of the benefits of medical, psychological and related knowledge is essential to the ***fullest attainment of health***.
- ❖ **Informed opinion** / consent and active co-operation on the part of the public are of the utmost importance in the improvement of the health of the people.
- ❖ **Governments have a responsibility for the health** of their peoples which can be fulfilled only by the ***provision of adequate health and social measures***.

**"We now live in a nation where
doctors destroy health,
lawyers destroy justice,
universities destroy knowledge,
governments destroy freedom,
the press destroys information,
religion destroys morals,
and our banks
destroy the economy."**

- Chris Hedges



Sustainability the Musical

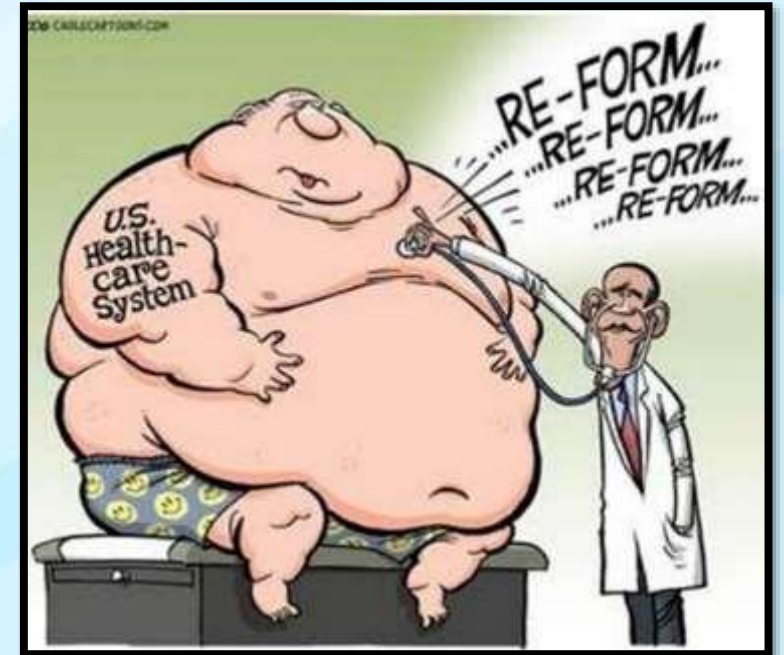


A Public Health Approach



The public health approach

involves defining and measuring the problem, determining the cause or risk factors for the problem, determining how to prevent or ameliorate the problem, and implementing effective strategies on a larger scale and evaluating the impact.

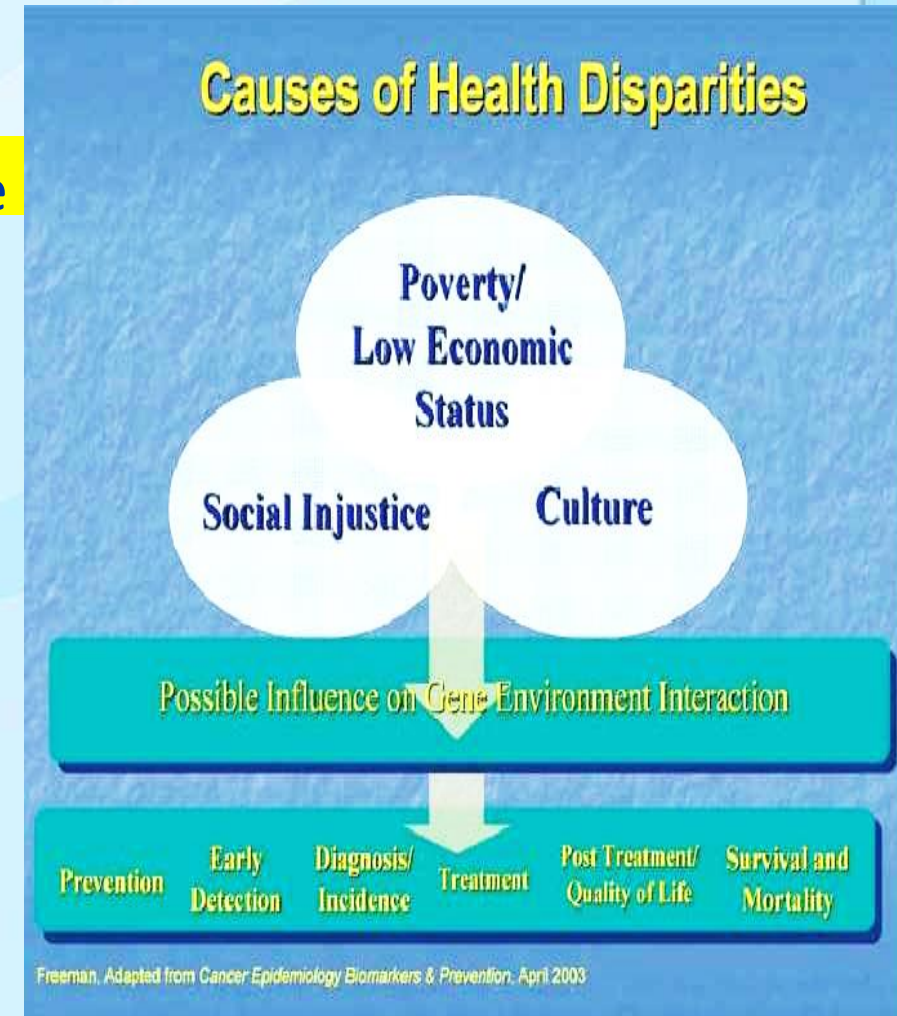


*Reducing and eliminating disparities in health is a matter of life and death. Each year in the US, thousands of individuals **die unnecessarily** from easily preventable diseases and conditions.*

Am J Public Health. 2008 March; 98(3): 400–403. doi: 10.2105/AJPH.2007.123919

PUBLIC HEALTH CONTENT-1

1. PH history, **philosophy**, core values, concepts, functions
2. PH data collection, use, analysis & importance of **evidence based** approaches (*EBM : Evidence Based Medicine*)
3. Population health & basic approaches & interventions to identify & address populations' health problems
4. **Science of human health** and disease, including *promotion & protection* across life course
5. Socio-economic, behavioral, biological, environmental & other factors, **health disparities / inequalities**



PUBLIC HEALTH CONTENT-2

6. Project implementation, planning, assessment & evaluation circuits
7. Characteristics & organization of **Turkish health system** & differences between systems in other countries
8. Legal, ethical, economic & regulatory dimensions & roles of the different government agencies & branches
9. Public health-specific communication, technical and professional writing, use of mass media & electronic technology

*It is specific to the health society that all 4 domains of the **health system** - **personal health, public health, medical health and the health market**- expand. In all **4 dimensions health** is presented as do-able: through **behaviors**, through **governmental measures**, through **medical interventions** and through **products and services**.*

*Health Promotion International, Volume 22,
Issue 2, June 2007, Pages 89–91,
<https://doi.org/10.1093/heapro/dam014>*

Serving People

Managing Behavioral Health Issues

■ **Crisis services**

- *Inpatient care / services*
- *Outpatient care / services*
- *School-based services*
- *Partial Hospital services*
- *Supported Housing services*
- *Supported Employment services*
- *Case Management services*
- *Pharmacy / Drugs services*
- *Transportation services*
- *Research, Prevention and Training*
- *Education, Referral services*
- *Patient Advocacy and Supports*

- ✓ *Vulnerable to violence*
- ✓ **Poverty and desperate results**
- ✓ *Stigma(tisation)*
- ✓ *Lack of good diagnostic tools*
- ✓ *Lack of effective treatments*
- ✓ *Lack of safe housing - nutrition*
- ✓ *Lack of community supports*
- ✓ *Lack of employment opportunities*
- ✓ *Cut-offs from friends, spouses and intimate partners, confidantes*
- ✓ *Interruption of educational and professional opportunities*

Serving People Managing Behavioral Health Issues

How Can You Be Successful?

- ❑ *Empathize*
- ❑ *Listen*
- ❑ *Learn*
- ❑ *Ask*
- ❑ *Act*
- ❑ *Good luck!*



200 “*Homo eliticus*” =
2 billion “*homo insectus*” (!?)



Non-governmental Organization Examples

Organization Type	Examples
Professional membership organizations	Turkish Public Health Association (HASUDER), TMA, TDA, TPA
Associations related to a specific health concern	Turkish Physicians for the Prevention of Nuclear War (NUSED - IPPNW)
Organizations of citizens focused on health concerns	Consumers' Rights Association
Foundations that support health projects and influence public policy development	Ankara University Foundation Vehbi Koc Foundation

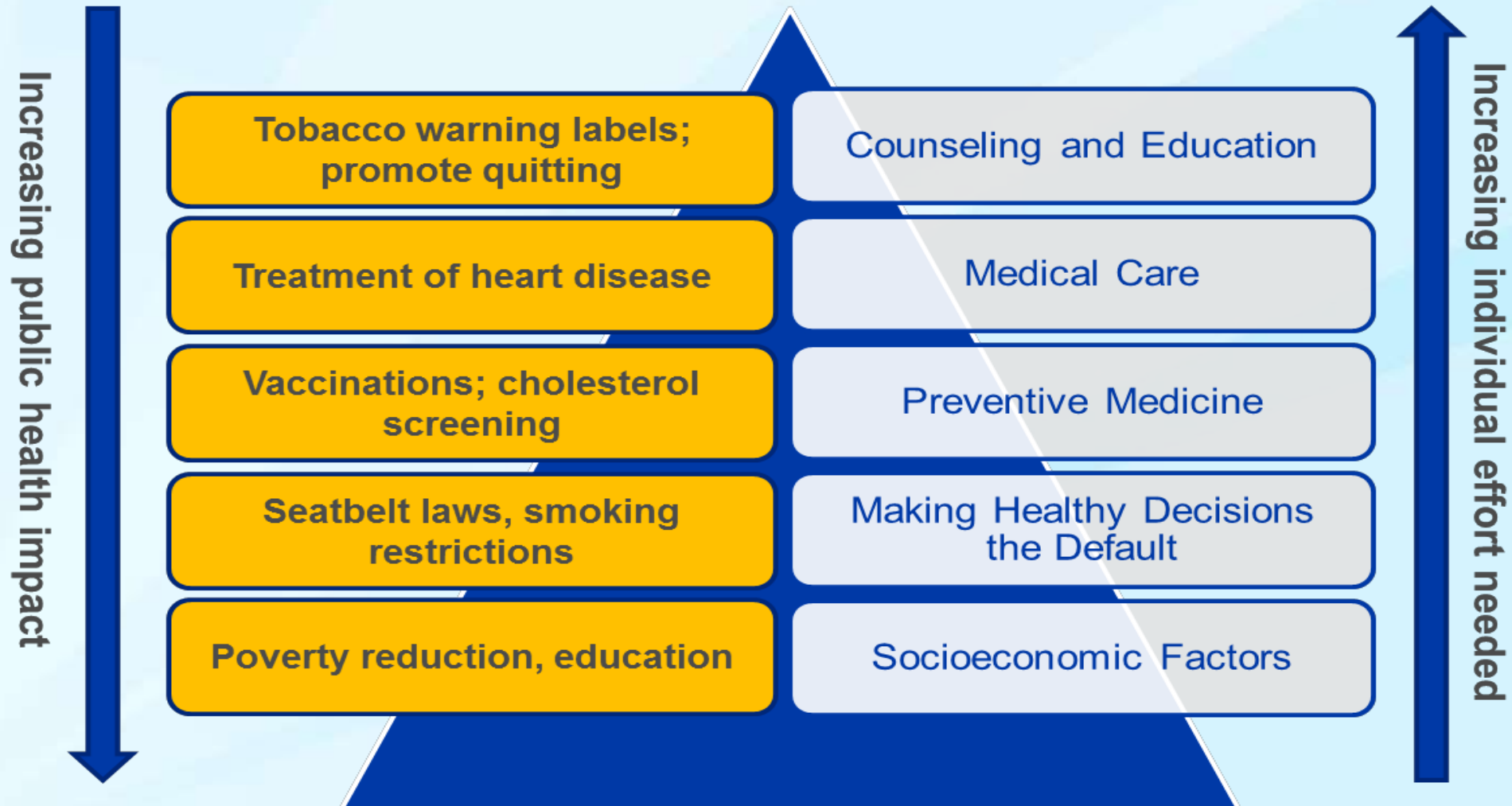
Health Determinants



- Genes and biology
- Health behaviors
- Social or societal characteristics (#1 : **Poverty!**)
- Health services or medical care



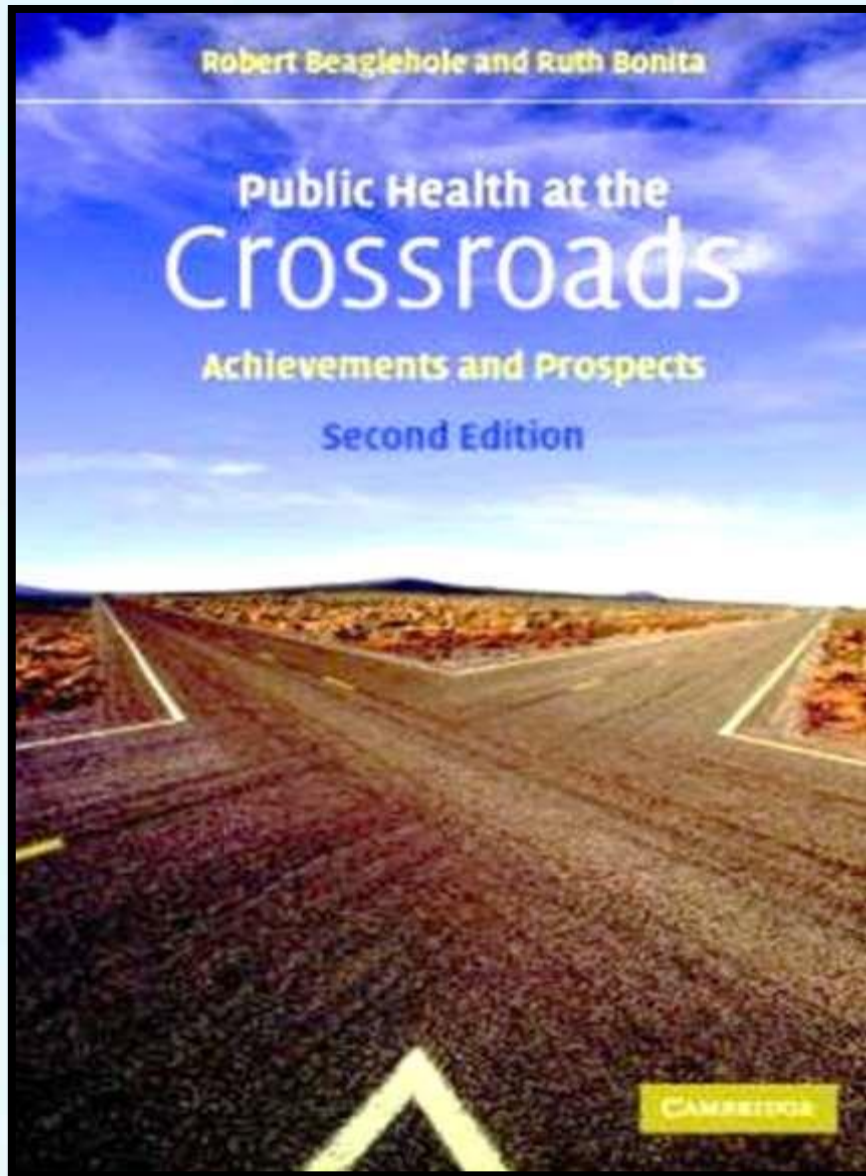
Health Impact Pyramid



Frieden TR. Framework for public health action: the health impact pyramid. Am J Public Health 2010;100:590–5.

'Least developed countries' pose the next big globalisation challenge..





*«...health
should be
at the heart
of the
global
development
agenda..»*

Prof. Beaglehole & Bonita

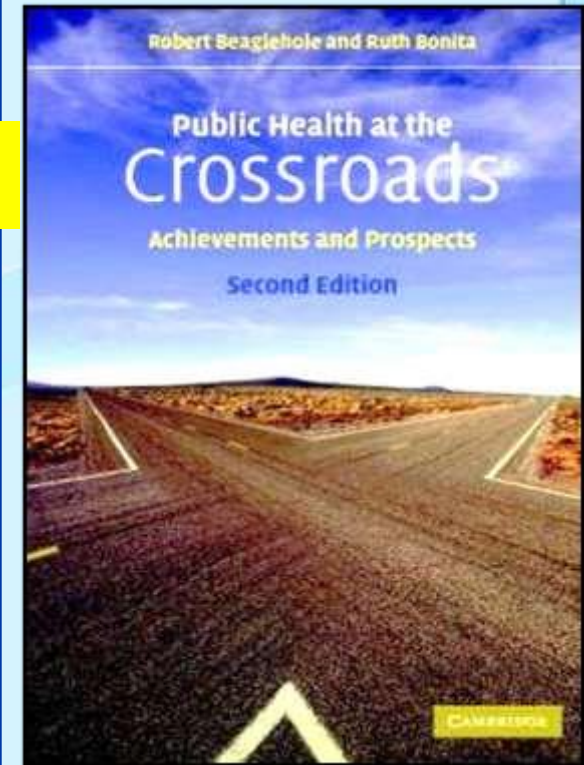
***Out of sight ..
Girls in mining!***



Public Health at the Crossroads : Achievements and Prospects

□ *This book is an introduction to public health as a discipline and a critique of its recent development. Identifying poverty as the greatest continuing threat to health worldwide, it reviews epidemiological, demographic and public health trends internationally and argues that the prospects for public health will improve only if health in a broad sense becomes a central concern of the policy-making process.*

Prof. Beaglehole R, Prof. Bonita R. Both from the World Health Org. Geneva, 2004



Dr. Tedros Adhanom Ghebreyesus, Director-General of WHO

Human Rights Day

10th December 2017

We have a long way to go until everyone – no matter who they are, where they live, or how much money they have – has access to these basic human rights.

The central principle of the *2030 Agenda for **Sustainable Development*** is to ensure that no one is left behind.

I call on all countries to respect and protect human rights in health – in their laws, their health policies and programmes. We must all work together to combat inequalities and discriminatory practices so that everyone can enjoy the benefits of good health, no matter their age, sex, race, religion, health status, disability, sexual orientation, gender identity or migration status.

Your health your right!





WHAT DO YOU NEED TO GET, BE AND STAY
HEALTHY?

CAN YOU GET HELP FROM A WELL-TRAINED HEALTH WORKER?



CAN YOU GET TREATMENT THAT HELPS YOU GET BETTER, AND IS SAFE?



CAN YOU GET THE MEDICINES AND OTHER HEALTH PRODUCTS YOU NEED?



WHO WILL PAY FOR IT?



ARE THERE POLICIES IN PLACE TO MAKE QUALITY SERVICES AVAILABLE TO EVERYONE, EVERY TIME?



DOES YOUR GOVERNMENT HAVE THE INFORMATION IT NEEDS TO MAKE THE RIGHT DECISIONS ABOUT THE WHOLE SYSTEM?



THE WORLD HEALTH ORGANIZATION IS WORKING AROUND THE WORLD SO THAT ALL PEOPLE AND COMMUNITIES RECEIVE THE QUALITY SERVICES THEY NEED, AND ARE PROTECTED FROM HEALTH THREATS, WITHOUT SUFFERING FINANCIAL HARDSHIP.

THAT'S WHAT WE CALL
UNIVERSAL HEALTH COVERAGE

WWW.WHO.INT/UHC

HEALTH FOR ALL

UNIVERSAL HEALTH COVERAGE: EVERYONE, EVERYWHERE

World Health Organization

HEALTH FOR ALL

TIME TO SPEAK UP ABOUT YOUR HEALTH NEEDS: ARE THEY COVERED?

World Health Organization

<http://ahmetsaltik.net/2018/04/08/world-health-day-7-april-2018/>

An apple a day keeps
the doctor away.
An orange a day keeps
the postman away.
Basically if you throw fruit
at people they go away.



Your health your right! :

Dr. Tedros Adhanom Ghebreyesus,

Director-General of WHO / *Human Rights Day*, 10th December 2017

Half the world lacks access to essential health services

- At least half of the world's population cannot obtain essential health services, according to a new report from the World Bank and WHO.

- ***And each year, large numbers of households are being pushed into poverty*** because they must pay for health care out of their own pockets.

- Currently, 800 million people spend at least 10% of their household budgets on health expenses for themselves, a sick child or other family member.

- <https://youtu.be/C1bljISMIto?t=20>

• [News release](#)

• [Fact sheet](#)



Dr. Tedros Adhanom Ghebreyesus, Director-General of WHO

Human Rights Day

10th December 2017

“The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition.”

Almost 70 years after these words were adopted in the *Constitution of the World Health Organization*, they are more powerful and relevant than ever.

Since day one, the right to health has been central to WHO’s identity and mandate.

It is at the heart of my top priority: **universal health coverage**.

The right to health for all people means that everyone should have access to the health services they need, when and where they need them, without suffering financial hardship. **Your health, your right!**



Dr. Tedros Adhanom Ghebreyesus, Director-General of WHO

Human Rights Day

10th December 2017

«..**No one should get sick and die just because they are poor,**

or because they cannot access the health services they need.

Good health is also clearly determined by other basic human rights including access to safe drinking water and sanitation, nutritious foods, adequate housing, education and safe working conditions.

The right to health also means that everyone should be entitled to control their own health and body, including having access to sexual and reproductive information and services, free from violence and discrimination.»

Your health your right!



Dr. Tedros Adhanom Ghebreyesus, Director-General of WHO

Human Rights Day

10th December 2017

Everyone has the right to ***privacy*** and to be treated with respect and **dignity**.

Nobody should be subjected to medical experimentation, forced medical examination or given treatment without informed consent.

That's why WHO promotes the idea of ***people-centered care***; it is the embodiment of ***human rights*** in the practice of care.

When people are marginalized or face **stigma** or **discrimination**, their physical and mental health suffers. Discrimination in health care is unacceptable and is a major barrier to development.

But when people are given the opportunity to be active participants in their own care, instead of passive recipients, their human rights respected, the outcomes are better and health systems become more efficient.


Your health your right !




Dr. Tedros Adhanom Ghebreyesus, Director-General of WHO

Human Rights Day , 10th December 2017


HOW DO GAPS IN HEALTH SERVICES AFFECT PEOPLE?



MORE THAN **1 BILLION PEOPLE** live with uncontrolled hypertension;



MORE THAN **200 MILLION WOMEN** lack adequate access to family planning services;



NEARLY **20 MILLION INFANTS** don't receive three essential immunizations.

Healthcare costs are pushing millions into extreme poverty. This outrage must end!

World Health Organization
WORLD BANK GROUP

"It is completely unacceptable that at least half the world still lacks coverage for the most essential health services."

Dr. Tedros Adhanom Ghebreyesus,
Director-General
of WHO

Human Rights Day
10th Decemb. 2017

No one should have to choose between death and financial hardship.

But the shocking truth is that this is a reality for millions of people every year.

~~New data~~ reveal that at least half of the world's 7.3 billion people still do not have access to **essential health services**, such as having a skilled birth attendant, vaccinations for children or treatment for HIV.

Your immune system
is very weak..
body temperature is high,
under stress..
must end fossil fuels usage,
decrease production &
consumption,
abolish discrimination
between the poor & the rich
and, stop wars..



(cartoon by Behiç Ak, Cumhuriyet, 23.10.18)

A SEVERE THREAT TO HEALTH?

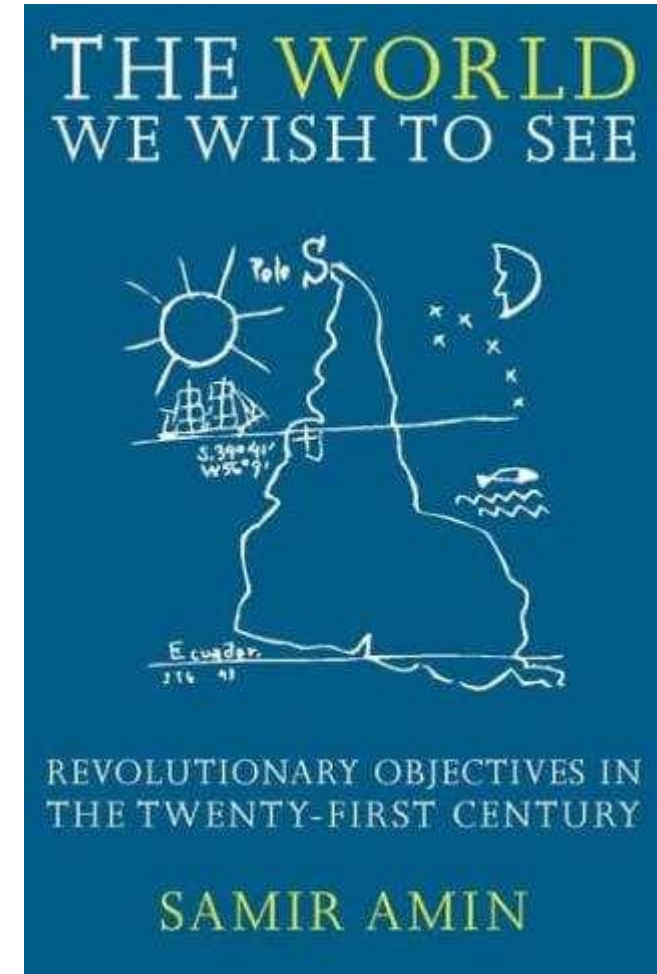
*'All the indications are that the current forms of **globalisation** are making the world a safe place for unfettered market liberalism and the consequent, **growth of inequities**. This **economic globalisation** is posing **severe threats** to both people's health and the health of the planet.'*

Prof. Fran Baum,
Flinders University, Australia (2001)

The World We Wish to See: *Revolutionary Objectives in the 21st Century*

Throughout the last century, great revolutions, the socialist and communist internationals, and national liberation movements presented a serious challenge to **global capital**. Neoliberalism and the U.S. drive for **military hegemony** have given birth to **new political and social movements** and new attempts at international organization, such as the **World Social Forum**.

Prof. S. Amin calls for a new global movement, **“an internationalism of peoples”**



The World Health Report 2010

Health systems financing : the path to universal coverage

Good health is essential to human welfare and to sustained economic and social development.

WHO's Member States have set themselves the target of developing their *health financing systems to ensure that* **all people can use health services,**

while being protected against financial hardship associated with paying for them.



Public Health Strategies in the 3rd Millennium

Box 2. Public Health Strategies for the 21st Century

1. Relentlessly prioritize actions to do what matters most to the health of populations.
2. Engage the mechanisms that explain how core foundational structures produce population health.
3. Move from government-dominated public health to multisectorial public health.
4. Formally adopt the Universal Declaration of Human Rights as the Code of Public Health Ethics.

Dr. Tedros Adhanom Ghebreyesus, Director-General of WHO

Human Rights Day

10th December 2017

THE RIGHT TO HEALTH MEANS
ACCESS TO
UNIVERSAL HEALTH COVERAGE
THAT IS



**Health is a fundamental
human right!**

“The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition.”

Human Rights Day 2017

Statement by Dr. Tedros Adhanom Ghebreyesus,
WHO Director-General, 10th December 2017

<http://www.who.int/mediacentre/news/statements/fundamental-human-right>

Dr. Tedros Adhanom Ghebreyesus, Director-General of WHO

Human Rights Day

10th December 2017

Mind the tipping point

100 million people

fall into extreme poverty
each year due to health
expenses

WHO _____ :

*Half the world lacks
access to essential
health services, 100
million still pushed
into extreme
poverty because of
health expenses..*



www.who.int

**Health is a fundamental
human right!**

“Are you protected?”

Inequalities in health services are seen
not just between, but also within countries:
national averages can mask low levels
of health service coverage in
disadvantaged population groups.”

Human Rights Day 2017

Statement by Dr. Tedros Adhanom
Ghebreyesus, WHO Director-General
10th December 2017

<http://www.who.int/mediacentre/news/releases/2017/half-lacks...>

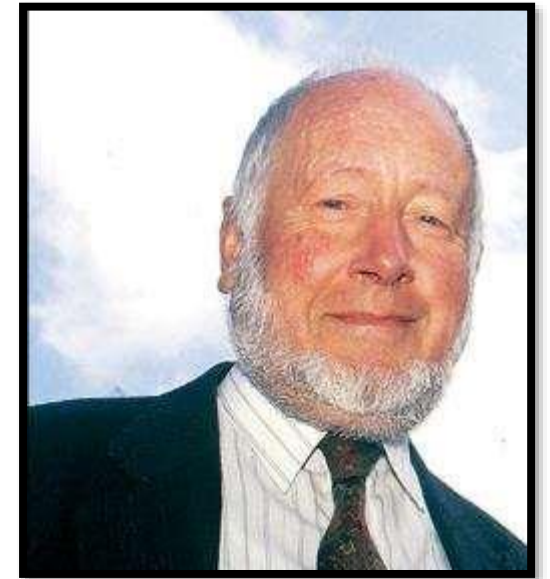
Dr. Julian Tudor Hart : «inverse care law»

The law, he wrote;

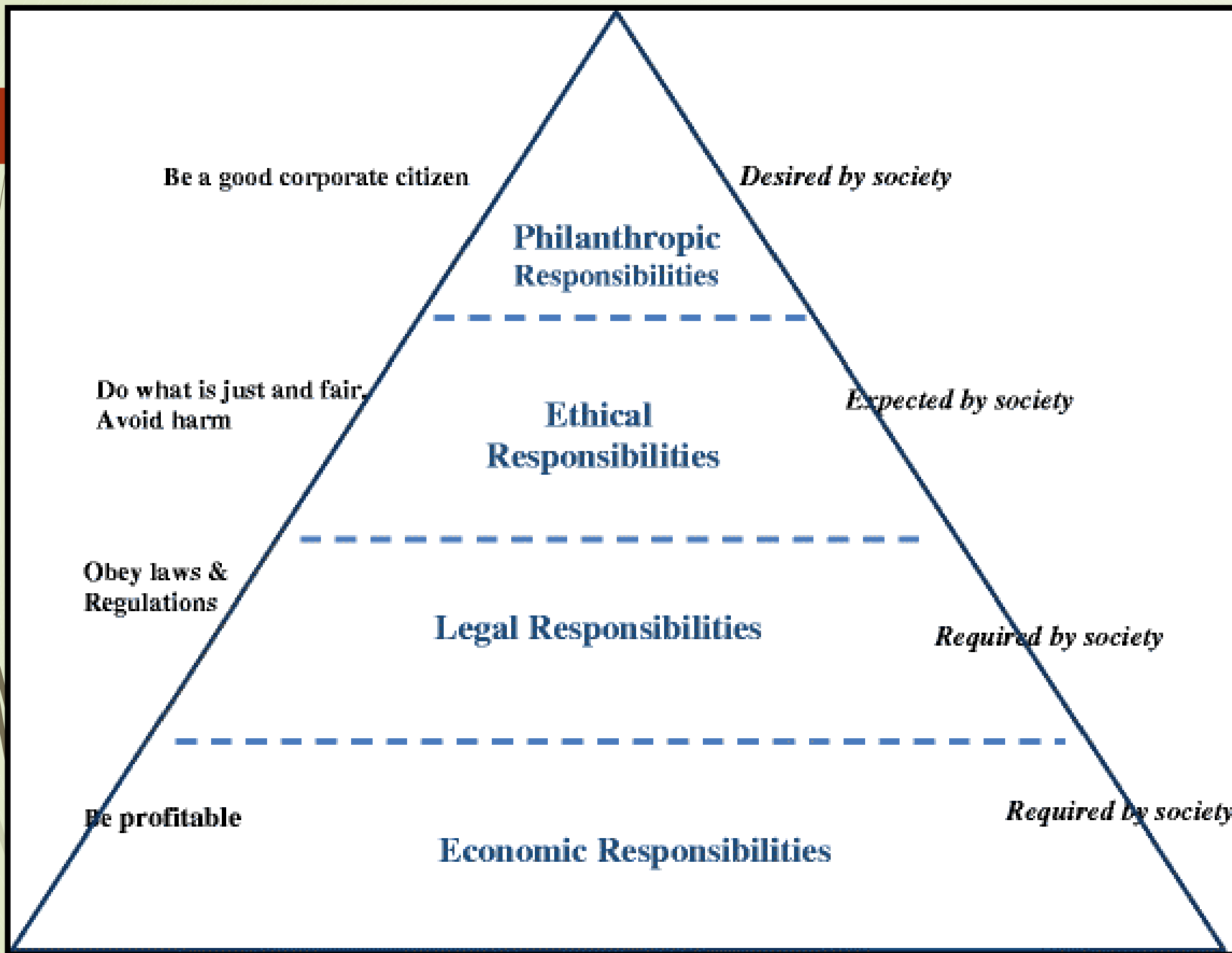
- “Operates more completely where medical care is most exposed to market forces, and less so where such exposure is reduced.

➤ ***The market distribution of medical care is a primitive and historically outdated social form.***

- **Dr. Julian Tudor Hart** is best known as the author of the ***inverse care law***:
- “The availability of good medical care tends to vary inversely with the need for it in the population served.”



[GEOFF WATTS](#)
[THE LANCET, VOLUME](#)
[392, ISSUE 10144, P276,](#)
[JULY 28, 2018](#)
[DOI:HTTPS://DOI.ORG/10.](#)
[1016/S0140-6736\(18\)](#)
[31660-X.](#)



**A competent
physician
must absolutely
reach to the top
level of her / his
Philanthropic
Responsibilities..**

Medical Ethics V Public Health Ethics

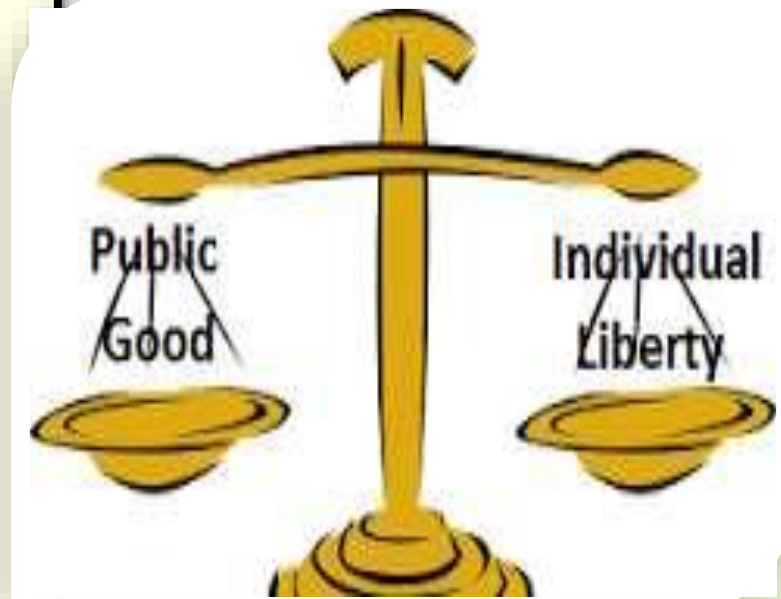
Medical Ethics vs. Public Health Ethics

Medical Ethics

- ◆ Individuals
- ◆ Autonomy
- ◆ Beneficence
the
number
- ◆ Non-maleficence
- ◆ Social justice

Public Health Ethics

- Populations
- Democratic input
- Greatest good for
the
greatest
- Benefit-risk analyses
- Social justice



Medical Ethics & Public Health Ethics

Factors affecting public health ethics

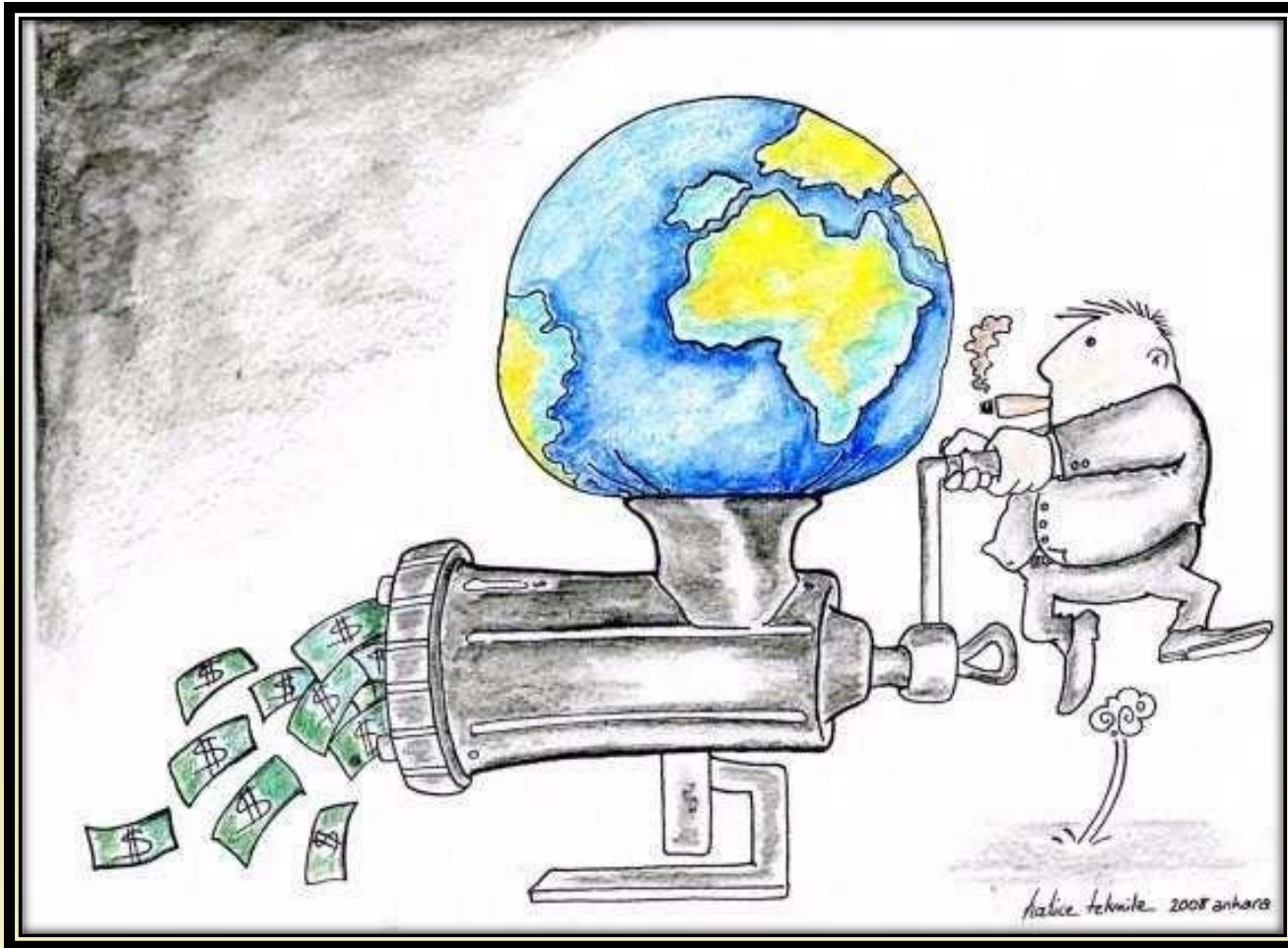


Community protection
"Nanny State"
(pasteurized milk,
fortified bread,)



Individual rights (travel)
Personal lifestyle choices (eat,
drink, smoke?)
Business profits





Communicable Diseases : Support comprehensive sexual health education in schools, which can reduce rates of sexually transmitted disease-STD (as well as teen pregnancy). Keep yourself and your families immunized against vaccine-preventable diseases, get your flu shot!

We believe everyone deserves to live a healthier, longer life. Through science-based knowledge and partnerships, we motivate, engage and enable people and organizations to build sustainable cultures of health.

You're The Cure advocates influence decision makers and promote changes to laws and government policies that move us closer to building lives free of so many diseases ill health.

Communicable Diseases

*Learn about ways to prevent disease transmission **Wash your hands**. Know your HIV status. Call on employers to support and provide sick leave so sick workers can care for themselves and avoid spreading disease (**COVID-19!** & etc.) to others.*

Victims of COVID-19 in New York streets; due to lack of social security and right to health



April 2020, New York

Over some 10 millions of poor American people mostly the **Black, Hispanic and Indians** are in lack of health rights. Health system is almost entirely privatised and they have no access without pocket payment. Here is the stigmatic result.. The Poor are as helpless as **street dogs** and dying collectively. US is the #1 country in terms of patient incidence and fatality rate without any rival with a huge distance..

HEALTH is a basic human right but not a commodity / good to be purchased.

QUICK REMINDERS-1

The basic philosophy of medicine and public health aims to answer following questions:

1. The nature and definition of health and disease:

- What does it mean to be **healthy** or **diseased**?
- *How do we measure and classify health and disease?*
- What are the biological, psychological, social, and environmental factors that affect health and disease?

2. The goals and values of medicine and public health:

- What are the main purposes and objectives of medicine and public health?
- *How do they relate to each other?*
- What are the **ethical principles and norms** that guide medical and public health practice?

QUICK REMINDERS-2

3. The methods and evidence of medicine and public health:

- How do we acquire and evaluate knowledge and information in medicine and public health?
- *What are the standards and criteria of scientific **validity**, **reliability**, and **relevance**?*
- How do we deal with **uncertainty**, complexity, and diversity in medical and public health research?

4. The role and responsibility of the physician and the public health professional:

- What are the duties and obligations of the physician and the public health professional towards their patients, communities, and society?
- *How do they balance their autonomy, competence, and accountability?*
- How do they communicate and collaborate with each other and with other stakeholders?

QUICK REMINDERS-3

5. The global and local dimensions of medicine and public health:

- How do global and local factors affect medicine and public health?
- *How do they create opportunities or challenges for cooperation or competition among countries or regions?*
- How do they generate disparities or inequalities in health outcomes or determinants?
- *How do they require adaptation or innovation in medical and public health practice?*

6. The future prospects and directions of medicine and public health:

- What are the current trends and emerging issues in medicine and public health?
- *What are the potential benefits or risks of new technologies or interventions in medicine and public health?*
- What are the possible scenarios or visions for the future of medicine and public health?

QUICK REMINDERS-4

7. The social and cultural context of medicine and public health:

- How do social and cultural factors influence medicine and public health?
- How do they shape our understanding, perception, attitude, behavior, expectation, demand, satisfaction, etc. towards health and disease?
- How do they affect our access to and utilization of medical and public health services?

8. The historical and philosophical development of medicine and public health:

- How did medicine and public health evolve over time?
- *What were the major milestones, achievements, failures, controversies, etc. in their history?*
- What were the main philosophical influences, perspectives, paradigms, theories, etc. that shaped their development?

QUICK REMINDERS-5

9- The global and local dimensions of medicine and public health:

- *How do global and local factors affect medicine and public health?*
- How do they create opportunities or challenges for cooperation or competition among countries or regions?
- *How do they generate disparities or inequalities in health outcomes or determinants?*
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10. The future prospects and directions of medicine and public health:

- What are the current trends and emerging issues in medicine and public health?
- *What are the potential benefits or risks of new technologies or interventions in medicine and public health?*
- What are the possible scenarios or visions for the future of medicine and public health?

Course Summary

During this course, you have learned
the Basic Philosophy of Medicine and Health Services to;

- ***Realise the Essential function of Medicine & Health Services***
- describe the ***purpose of public health***
- define ***key terms*** used in public health
- recognize the ***core public health functions and services***
- describe the role of different stakeholders in the field of public health
- list some ***determinants of health***
- recognize how ***individual determinants*** of health affect population health



Let's check Learning Objectives

During this course, you have learned to;

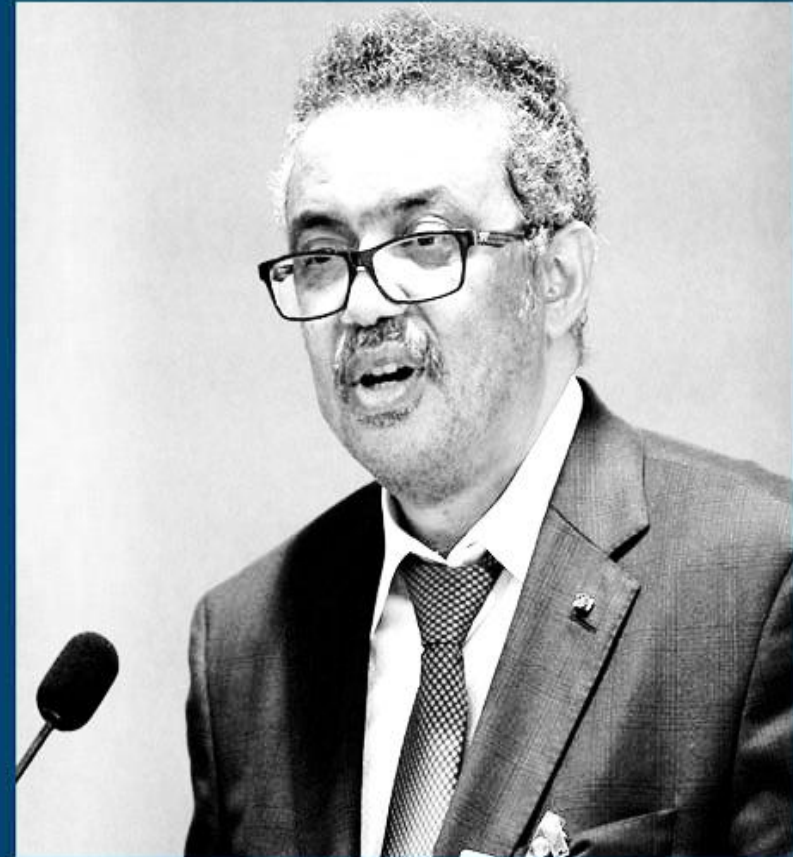
- Explain the importance of medicine to the **public health mission** describe the role of the health services in public health achievement
- Emphasize the crucial target of medicine and health services for accomplishment of healthy individuals and a population all over the World via a **public health approach..**



“

**THIS IS A TIME FOR
FACTS, NOT FEAR. THIS IS
A TIME FOR RATIONALITY,
NOT RUMOURS. THIS IS A
TIME FOR SOLIDARITY,
NOT STIGMA.**

**DR TEDROS ADHANOM GHEBREYESUS
WHO DIRECTOR-GENERAL**



#ONEWORLDPROTECTED

Resources and Additional Reading

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**Any
QUESTIONS?
or
COMMENTS??**

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Ahmet SALTIK
Professor of Public Health
MD, LLM, BSc

Slides available at :
www.ahmetsaltik.net
profsaltik@gmail.com



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for joining..***