



PubH 6000-001

Topics: Urban Health & Social Policy

Spring 2018

Credits:	2
Meeting Days:	Monday
Meeting Time:	10:10-12:05, 1 hour, 55 minutes
Meeting Place:	Mayo 1250
Instructor:	Dr. Theresa L. Osypuk, SD SM
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E-mail:	tosypuk@umn.edu (email contact preferred, including to schedule meetings)
Office Hours:	TBD

This course fulfills a requirement for the Health Equity Minor open to all University of Minnesota graduate students. For more information on the minor and a full list of requirements, please visit <http://www.sph.umn.edu/academics/ic/minor/health-equity/>

I. Course Description

This graduate level course will offer an overview of the health and demography of populations in urban areas as well as an overview of social and economic policies that are not focused explicitly on health, but which nonetheless may improve population health and address population health disparities. The course is designed for MPH students, doctoral level public health students, as well as for other interested graduate students (e.g. those in the population studies minor, in social sciences or in public policy degree programs), who have an interest in prevention or social policy.

The course will apply a social epidemiologic, interdisciplinary perspective to understand urban health, including the demography of urban populations (by key social strata), issues with which urban areas struggle (including concentration of poverty, residential segregation, educational inequality, unemployment), the health patterns of urban populations, theories guiding urban health and social epidemiology scholarship, and social and economic policies across different sectors with evidence to reduce health disparities and improve health in urban areas (a so-called “health in all policies” approach).

Brief Background. Urban health is an important focus of public health and social epidemiology scholarship, a focus that has increased in recent years. First, urban areas are important demographically; 81% of the US population lives in urbanized areas, with disproportionately larger shares of racial/ethnic minority groups and lower income households. Cities are also growing worldwide. Second, big cities allocate substantial resources to improve the wellbeing of their most disadvantaged citizens, and have sufficient governance and infrastructure to implement influential social and economic policies. Third, enacting policies in the largest

cities in the country influences very large numbers of residents, compared to policies implemented rural areas, which would have a much more diffuse effect.

II. Course Prerequisites

Graduate matriculation; some background or coursework in social factors or social determinants of health is preferred.

III. Course Goals and Objectives

At the conclusion of this course it is expected that students will be able to:

- Describe the demographic patterns of urbanized residents
- Explain theories and evidence from multiple disciplines on how city living affects health
- Identify the social and economic determinants of urban health residents including socioeconomic status, race/ethnicity, age, residential segregation, concentrated poverty, neighborhood context; moreover, distinguish these from other determinants of health (including genetic, behavioral, biological)
- Frame meaningful research questions for how cities affect health and how to intervene to improve population health in urban areas
- Apply social epidemiology frameworks to understand concrete, feasible solutions for addressing social and economic health inequalities in urban areas.
- Articulate social and economic policies, and the sectors responsible for these policies, which may address urban health.

IV. Methods of Instruction and Work Expectations

This is a didactic course, with lectures and structured, instructor-led discussion of the weekly reading material.

V. Course Text and Readings

There is no single textbook required for this course. The readings consist of articles and book chapters, retrieved via the Moodle course website.

VI. Course Outline/Weekly Schedule

Outline: Schedule at a glance

Class #	Date	Topic
1	Jan 22	Urban Health
2	Jan 29	Social Epidemiology Frameworks
3	Feb 5	Urban Poverty
4	Feb 12	Neighborhoods and Neighborhood Revitalization
5	Feb 19	Residential Segregation & Desegregation Policy
6	Feb 26	Violence, Crime, and Policing
7	Mar 5	Affordable Housing Policy
	<i>Mar 12</i>	<i>SPRING BREAK – NO CLASS</i>
8	Mar 19	Transportation
9	Mar 26	Immigrants & Immigration Policy
10	Apr 2	Employment Policy
11	Apr 9	Income Policy
12	Apr 16	Early Childhood Education
13	Apr 23	Education
14	Apr 30	Future Directions and Class presentations

Class by Class Reading List

Class 1

Urban Health

- Vlahov D, Gibble E, Freudenberg N, Galea S. (2004) Cities and health: History, approaches, and key questions. *Academic Medicine*. 79:1133-1138.
http://deepblue.lib.umich.edu/bitstream/handle/2027.42/40305/Vlahov_Cities?sequence=2
- Galea S, Freudenberg N, Vlahov D. (2005) Cities and population health. *Social Science & Medicine* 2005;60:1017-1033.

Class 2

Social Epidemiology Frameworks

- Krieger N. (2001). Theories for social epidemiology in the 21st century: An ecosocial perspective. *International Journal of Epidemiology*. 30:668-677.
- Phelan JC, Link BG, Tehranifar P. (2010). Social conditions as fundamental causes of health inequalities: Theory, evidence, and policy implications. *Journal of Health & Social Behavior*. 51(S):S28–S40.
- Rose G. (1985). Sick individuals and sick populations. *International Journal of Epidemiology*. 14(1):32-38.
- Geronimus AT. (2000). To mitigate, resist, or undo: Addressing structural influences on the health of urban populations. *American Journal of Public Health*. 90:867-872.

Class 3

Urban Poverty

- Wilson WJ. (1991). Studying inner-city social dislocations: The challenge of public agenda research: 1990 Presidential Address. *American Sociological Review*. 56(1):1-14.
- Cassidy J. (2006) Relatively deprived: How poor is poor? *The New Yorker*, April 3, 2006.
http://www.newyorker.com/archive/2006/04/03/060403fa_fact
- Paul Jargowsky (2015). Issue Brief. Architecture Of Segregation: Civil Unrest, the Concentration of Poverty, and Public Policy. | August 9, 2015. The Century Foundation. <https://tcf.org/content/report/architecture-of-segregation/>
- H. Luke Shaefer and Kathryn Edin. (2013). Rising Extreme Poverty in the United States and the Response of Federal Means-Tested Transfer Programs. *Social Service Review*, Vol. 87, No. 2 (June 2013), pp. 250-268
http://www.jstor.org/stable/10.1086/671012?seq=1#page_scan_tab_contents
- Emily Badger. (2017) Does 'Wrong Mind-Set' Cause Poverty or Vice Versa? *The New York Times*. Upshot. MAY 30, 2017. <https://www.nytimes.com/2017/05/30/upshot/ben-carsons-thinking-and-how-poverty-affects-your-state-of-mind.html>

Class 4

Neighborhoods and Neighborhood Revitalization

- Paula Braveman, Catherine Cubbin, Susan Egerter, Veronica Pedregon. (2011). Issue Brief #8: Neighborhoods and Health. Exploring the social determinants of health series. Robert Wood Johnson Foundation Health. http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2011/rwjf70450
- Hanson D. Assessing the Harlem Children's Zone. *Center for Policy Innovation*: The Heritage Foundation, 2013. http://s3.amazonaws.com/thf_media/2013/pdf/CPI_DP_08.pdf
- Keene DE, Geronimus AT. (2011). "Weathering" HOPE VI: The importance of evaluating the population health impact of public housing demolition and displacement. *Journal of Urban Health*. 88:417-435.
- Tamara Dubowitz, Madhumita Ghosh-Dastidar, Deborah Cohen, et al. (2015) A New Supermarket in a Food Desert: Is Better Health in Store? RAND Research Brief. RAND Corporation. Document Number: RB-9874. https://www.rand.org/content/dam/rand/pubs/research_briefs/RB9800/RB9874/RAND_RB9874.pdf

Class 5

Residential Segregation & Desegregation Policy

Logan JR, Stults BJ. The persistence of segregation in the metropolis: New findings from the 2010 census. (2011) <http://www.s4.brown.edu/us2010/Data/Report/report2.pdf> . Census Brief prepared for Project US2010 <http://www.s4.brown.edu/us2010> . Providence, RI: Brown University, 2011:25 pp.

Kramer MR, Hogue CR. (2009). Is segregation bad for your health? *Epidemiologic Reviews*. 31:178–194.

Myron Orfield. Why are the Twin Cities so Segregated? Institute on Metropolitan Opportunity, University of Minnesota Law School March 2015.
<https://www.minnpost.com/sites/default/files/attachments/WhyAretheTwinCitiesSoSegregated22615.pdf>

Tegeler and Hilton, 2017. Disrupting the Reciprocal Relationship Between Housing and School Segregation. A Shared Future: Fostering Communities of Inclusion in an Era of Inequality, Harvard Joint Center for Housing Studies. Working Paper. <http://jchs.harvard.edu/research/publications/shared-future-disrupting-reciprocal-relationship-between-housing-and-school>

Class 6

Violence, Crime, and Policing

Guest Lecture: David Jones, Northeastern University School of Criminology and Criminal Justice

Shepherd JP, Sumner SA. (2017) Policing and Public Health—Strategies for Collaboration. *JAMA*.317(15):1525–1526. doi:10.1001/jama.2017.1854

Leovy, Jill, author. (2015). *Ghettoside: A True Story of Murder in America*. Chapter 1, pp. 3-12. New York: Spiegel & Grau,

Jack R. Greene, Christian Mouhanna, Sema A. Taheri, David Squier Jones (2016). “Improving Police Legitimacy by Measuring All That Matters: Reflections from the United States and France”, in Mathieu Deflem (ed.) *The Politics of Policing: Between Force and Legitimacy (Sociology of Crime, Law and Deviance, Volume 21)* Emerald Group Publishing Limited, pp.153 – 172.

James A. Densley and David Squier Jones (2015). Black lives lost: a genocide from within. Why are we silent on the issue of black people killing black people? *Star Tribune*, June 14, 2015.
<http://www.startribune.com/black-lives-lost-a-genocide-from-within/307309321/>

Class 7

Affordable Housing Policy

Pollack, C. E., Johnson Thornton, R. L., & DeLuca, S. (2014). Housing for Health: Targeting housing mobility vouchers to help families with children. *JAMA Pediatrics*, 168(8), 695–696.
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4264631/pdf/nihms643691.pdf>

Ludwig J, Sanbonmatsu L, Gennetian L, et al. (2011). Neighborhoods, obesity, and diabetes: A randomized social experiment. *New England Journal of Medicine*. 365(16):1509-1519.

Rebecca Casciano, Douglas S.Massey (2012). Neighborhood disorder and anxiety symptoms: New evidence from a quasi-experimental study. *Health and Place*; 18:180–190.

Furman Center For Real Estate & Urban Policy and Moelis Institute For Affordable Housing Policy, New York University (2013) Should the next mayor provide a rental subsidy for moderate and middle-income households? #NYChousing | 10 Issues For NYC’s Next Mayor. Policy Brief.
http://furmancenter.org/files/publications/FurmanCenterNYChousing10issues_5_Aug2013.pdf

SPRING BREAK

Class 8

Transportation Policy

Guest Lecture: Kathleen Call, UMN, Division of Health Policy, School of Public Health

TOOL: Improving Health in the United States: The role of health impact assessment. (2011) Report in Brief. National Academy of Sciences. <http://dels.nas.edu/resources/static-assets/materials-based-on-reports/reports-in-brief/Health-Impact-Assessment-Report-Brief-Final.pdf>

Malekafzali, S., & Bergstrom, D. (2012). Healthy Corridor for All: A Community Health Impact Assessment of Transit-Oriented Development Policy in Saint Paul, Minnesota
http://www.policylink.org/sites/default/files/HEALTHYCORRIDOR_SUMMARY_FINAL_20120111.PDF

Singleton, P.A., Clifton, K.J. (2017). Considering health in US metropolitan long-range transportation plans: A review of guidance statements and performance measures. *Transport Policy* 57:79-89

Class 9

Immigrants & Immigration Policy

Theresa L. Osypuk, Alvaro Alonso, Lisa M. Bates. (2015) "Understanding the healthy immigrant effect and cardiovascular disease: looking to big data and beyond." *Circulation*. Oct 20;132(16):1522-4. doi: 10.1161/CIRCULATIONAHA.115.018707
<http://circ.ahajournals.org.ezp3.lib.umn.edu/content/132/16/1522.extract>

Novak, Geronimus, Martinez-Cardoso. (2017) Change in birth outcomes among infants born to Latina mothers after a major immigration raid. *International Journal of Epidemiology*. 46(3):839-849
<http://phasocal.org/wp-content/uploads/2017/01/International-Epidemiology-Birth-Outcomes-and-Immigration-dyw346.pdf>

Atheendar S Venkataramani, Sachin J Shah, Rourke O'Brien, Ichiro Kawachi, Alexander C Tsai (2017). Health consequences of the US Deferred Action for Childhood Arrivals (DACA) immigration programme: a quasi-experimental study, *The Lancet Public Health*; 2(4): e175-e181.

TOOL: HEDA: Conducting a Health Equity Data Analysis. A Guide For Local Health Departments In Minnesota. Version 2. May 2017. Minnesota Department of Health. Minnesota Center for Health Statistics.
<http://www.health.state.mn.us/divs/chs/healthequity/guide/healthequitydataguideV2.0-final.pdf>

Class 10

Employment Policy

Heymann SJ, Gerecke M, Chaussard M. (2010). Paid health and family leave: The Canadian experience in the global context. *Canadian Journal of Public Health*. 101:S9-S15.

Cylus J, Glymour MM, Avendano M. (2014). Do generous unemployment benefit programs reduce suicide rates? A state fixed-effect analysis covering 1968–2008. *American Journal of Epidemiology*. 180:45-52.

Ayala L, Rodríguez M (2013). Health-related effects of welfare-to-work policies. *Social Science & Medicine*, Sep;93:103-12.

Class 11

Income Policy

Tsao T-Y, Konty KJ, Van Wye G, et al. (2016) Estimating Potential Reductions in Premature Mortality in New York City From Raising the Minimum Wage to \$15. *American Journal of Public Health*. 106(6):1036-1041. doi:10.2105/AJPH.2016.303188.

Rehkopf DH, Strully KW, Dow WH. (2014). The short-term impacts of earned income tax credit disbursement on health. *International Journal of Epidemiology*. 43:1884-1894.

Ranganathan M, Lagarde M. (2012). Promoting healthy behaviours and improving health outcomes in low and middle income countries: A review of the impact of conditional cash transfer programmes. *Preventive Medicine*. 55, Supplement:S95-S105.

Class 12

Preschool and Early Child Education

Clyde Hertzman (2012). Putting the concept of biological embedding in historical perspective. Proceedings of the National Academy of Sciences of the United States of America. 109 (Supplement 2: Biological Embedding of Early Social Adversity: October 16, 2012), pp. 17160-17167.

<http://www.jstor.org.ezp2.lib.umn.edu/stable/pdf/41763507.pdf?acceptTC=true>

James Heckman. The Case for Investing in Disadvantaged Young Children. Big Ideas for Children: Investing in Our Nation's Future. First Focus. Washington, DC. Pp. 49-58.

<https://heckmanequation.org/assets/2017/01/Heckman20Investing20in20Young20Children.pdf>

<https://firstfocus.org/wp-content/uploads/2014/06/Big-Ideas-2008.pdf>

TOOL: Joshi PK, Geronimo K, Romano B, et al. (2014). Integrating racial/ethnic equity into policy assessments to improve child health. *Health Affairs*. 33:2222-2229.

Class 13

Primary, Secondary, and Tertiary Education

Guest Lecture: Maria Glymour, Professor, University of California San Francisco.

Susan Egerter, Paula Braveman, Tabashir Sadegh-Nobari, Rebecca Grossman-Kahn, Mercedes Dekker (2011). Education and Health. Issue Brief #5: Exploring the Social Determinants of Health. Robert Wood Johnson Foundation. https://www.rwjf.org/content/dam/farm/reports/issue_briefs/2011/rwjf70447

M M Glymour, I Kawachi, C S Jencks and L F Berkman (2008). Does childhood schooling affect old age memory or mental status? Using state schooling laws as natural experiments. *Journal of Epidemiology and Community Health*; 62(6): 532-537.

<http://www.jstor.org.ezp2.lib.umn.edu/stable/pdf/40665594.pdf?acceptTC=true>

Olshansky SJ, Antonucci T, Berkman L, Binstock RH, Boersch-Supan A, Cacioppo JT, Carnes BA, Carstensen LL, Fried LP, Goldman DP, Jackson J, Kohli M, Rother J, Zheng Y, Rowe J (2012) Differences In Life Expectancy Due To Race And Educational Differences Are Widening, And Many May Not Catch Up. *Health Affairs* 31 (8):1803-1813.

Class 14

Future Directions

Hearne S, Castrucci BC, Leider JP, et al. (2015). The future of urban health: Needs, barriers, opportunities, and policy advancement at large urban health departments. *Journal of Public Health Management & Practice*. 21:S4-S13.

Starfield B, Birn AE. (2007). Income redistribution is not enough: income inequality, social welfare programs, and achieving equity in health. *Journal of Epidemiology & Community Health*. 61(12):1038-1041.

Zinzi D Bailey, Nancy Krieger, Madina Agénor, Jasmine Graves, Natalia Linos and Mary T Bassett (2017). Structural racism and health inequities in the USA: evidence and interventions. *The Lancet*, 389, (10077):1453-1463 (date: 2017-04-08).

VII. Evaluation and Grading

Summary

Reflection papers	20%
Policy Brief	35%
Sharing a news article and lead discussion in class	15%
Comment on 2 others' news articles across the semester	10%
Brief in-class presentation of policy brief contours	5%
In-class discussion of assigned readings	10%
Class Attendance	5%

Reflection papers based on weekly readings (20%). Students will sign up for (at the beginning of the semester), write, and submit a 1 ½ to 2-page integrative reflection (single spaced, 1" margins) for two of the class sessions, (2 reflections total, covering 2 classes weeks 3-13, worth 10% each) based on the weekly readings. The reflection should address (a) raising questions, criticisms, and issues that the readings have stimulated about the topic (*integrated across readings*), and (b) the last one-quarter to one-third of a page should be devoted to approximately 5-7 *integrative* discussion questions you propose based on the readings (bullet points are fine for the questions). ***The reflections are due by 3pm on the day before the class meets (3pm Sundays), and will be submitted via the course website on Moodle.*** The file name and text both need to include the student's last name, and week number, and topic. When referring to a specific article in the reflection, please use the author-date style (e.g., Osypuk et al. 2015). If the reference is one of the main readings that week, there is no need to include it on a reference list. Format: single-spaced, typed, 12-point Times Roman font with 1-inch margins.

Sharing a news article and leading discussion in class (15%). Students will sign up at the beginning of the semester to find one appropriate article taken from the news for one week of the course, post the article on Moodle for other students to read and comment (by starting the discussion board thread by the Wednesday before class), and lead a discussion in class. Depending on the size of the class, students may be paired with one other student, to jointly complete the assignment as a team. ***Students will post the article on Moodle 5 days before class (it is due the Wednesday before the class it's to be discussed).*** ***Students will lead a 30-minute discussion in class based on that article.*** The selected article must be taken from the popular news (newspaper, magazine, blog) related to the topic discussed that week, and must provide an example of a program, intervention, or policy that has the potential to address the topic discussed that week. Note: the article does not have to address health explicitly. The students responsible for that week must engage the class in at least 25 minutes of discussion or activity, with AT MOST a 5-minute summary of the article. Students must hand in materials that they use to guide the activity (including any summary slides, list of questions, or activity directions) as evidence of preparation for the activity, on moodle. NOTE: Students are also responsible for reading the student-posted article each week before class.

Comment on 2 others' news articles (10%). Students will comment on at least 2 news articles posted by other people, using the Moodle discussion board feature. ***The comment needs to be posted by the evening the day before class (Sunday night) at 11:59pm.*** Each "comment" must be approximately a paragraph long, e.g. at least 3-4 sentences, to comment substantively on how the article relates to other readings or ideas introduced that week or in prior weeks. At the end of the semester, each student will report what and when they commented on at least 2 other articles on the Moodle discussion board. Specifically, at the end of the semester (***due the last day that class meets, Monday April 30***) students will submit a SHORT word document that documents their 2 posts, including: listing each time they commented, including the exact date they posted, the week's topic addressed, and they will copy from Moodle and paste their post/comments into the document.

Urban Health Social Policy Brief (35%). Students will hand in a Policy Brief that is 3 pages or less, between 1000-1500 words, that is designed (e.g. with visuals, infographics, headers, text, layout, and color) to address a specific policy issue related to the focus of this course. ***The brief is due on the last day of instruction for the semester (Friday May 4), 11:55pm.***

Policy Brief Structure: Each brief will focus on a topic that is related to an urban health issue, focuses on one social determinant or social disparity in urban health, and one social or economic policy that has the potential to address that health issue/disparity in urban areas. The brief will cite and briefly summarize the

evidence base for the recommended policy, and should be targeted to a lay, advocate, or policy maker audience. The final brief must be uploaded to Moodle as a Word or PDF document, and must include this information at the top of page 1 of the Brief: Title, Student Author Name, Date. Whimsical titles are encouraged. A limited number of references must be used to support factual statements, as well as to support the argument throughout the paper in each of the sections discussed above. The reference list must be listed at the end of the paper, recommended to be smaller font, and take up about half a page. The brief layout must use 1/2 -inch margins and a 12-point font such as Ariel or Times Roman. Resources to guide the writing of the Brief will be distributed in class.

Presentation of Policy Brief Contours (5%). Students will give a brief presentation summarizing their final policy brief **on the last day of class**, meaning the student will broadly introduce the contours of the brief (as described for the structure of the paper above), and the conclusion or take-home-message. The length of this brief presentation will be clarified by the instructor during class, but is estimated to be only 3-5 minutes (short).

Preparation and participation for in-class discussion (10%). This course consists of lectures and discussion sessions, and student participation in both parts is essential for course success. *Readings.* You are expected to complete the required reading **prior** to class. **Please note the readings listed for the first class are to be read before the first day of class.** This portion of the grade will be based on participation in class discussion, based on having read the material ahead of time. It will also be assessed by an unannounced brief in-class assessment.

Class attendance (5%). Grade will be based on attendance (including punctuality), for each class.

Assignments and Due Dates: All assignments are due on the assignment due date, described above. Only if absolutely necessary, prior to the due date, a student may request an extension with a reasonable explanation. However extensions are given at the instructor's discretion. It is also at the instructor's discretion to permit tardy assignments if the student provides no advance notice. Please note that written work may be significantly marked down for tardiness, improper formatting, grammatical and spelling errors, or sloppiness.

Final Course Grades will be assigned based on the numeric distribution below

A = 94.0 – 100%
A- = 90.0 – 93.9%
B+ = 87.0 – 89.9%
B = 84.0 – 86.9%
B- = 80.0 – 83.9%
C+ = 77.0 – 79.9%
C = 74.0-76.9%
C- = 70.0 – 73.9%
D+ = 67.0 – 69.9%
D = 64.0 – 66.9%
D- = 60.0 – 63.9%
F = <60%

The University utilizes plus and minus grading on a 4.000 cumulative grade point scale in accordance with the following:

- A 4.000 - Represents achievement that is outstanding relative to the level necessary to meet course requirements
- A- 3.667
- B+ 3.333

- B 3.000 - Represents achievement that is significantly above the level necessary to meet course requirements
- B- 2.667
- C+ 2.333
- C 2.000 - Represents achievement that meets the course requirements in every respect
- C- 1.667
- D+ 1.333
- D 1.000 - Represents achievement that is worthy of credit even though it fails to meet fully the course requirements
- S Represents achievement that is satisfactory, which is equivalent to a C- or better.

For additional information, please refer to:

<http://policy.umn.edu/Policies/Education/Education/GRADINGTRANSCRIPTS.html>.

Course Evaluation

The SPH will collect student course evaluations electronically using a software system called CourseEval: www.sph.umn.edu/courseeval. The system will send email notifications to students when they can access and complete their course evaluations. Students who complete their course evaluations promptly will be able to access their final grades just as soon as the faculty member renders the grade in SPHGrades: www.sph.umn.edu/grades. All students will have access to their final grades through OneStop two weeks after the last day of the semester regardless of whether they completed their course evaluation or not. Student feedback on course content and faculty teaching skills are an important means for improving our work. Please take the time to complete a course evaluation for each of the courses for which you are registered.

Incomplete Contracts

A grade of incomplete "I" shall be assigned at the discretion of the instructor when, due to extraordinary circumstances (e.g., documented illness or hospitalization, death in family, etc.), the student was prevented from completing the work of the course on time. The assignment of an "I" requires that a contract be initiated and completed by the student before the last official day of class, and signed by both the student and instructor. If an incomplete is deemed appropriate by the instructor, the student in consultation with the instructor, will specify the time and manner in which the student will complete course requirements. Extension for completion of the work will not exceed one year (or earlier if designated by the student's college). For more information and to initiate an incomplete contract, students should go to SPHGrades at: www.sph.umn.edu/grades.

University of Minnesota Uniform Grading and Transcript Policy

A link to the policy can be found at onestop.umn.edu.

VIII. Other Course Information and Policies

Grade Option Change (if applicable):

For full-semester courses, students may change their grade option, if applicable, through the second week of the semester. Grade option change deadlines for other terms (i.e. summer and half-semester courses) can be found at onestop.umn.edu.

Course Withdrawal:

Students should refer to the Refund and Drop/Add Deadlines for the particular term at onestop.umn.edu for information and deadlines for withdrawing from a course. As a courtesy, students should notify their instructor and, if applicable, advisor of their intent to withdraw.

Students wishing to withdraw from a course after the noted final deadline for a particular term must contact the School of Public Health Office of Admissions and Student Resources at sph-ssc@umn.edu for further information.

Student Conduct Code:

The University seeks an environment that promotes academic achievement and integrity, that is protective of free inquiry, and that serves the educational mission of the University. Similarly, the University seeks a community that is free from violence, threats, and intimidation; that is respectful of the rights, opportunities, and welfare of students, faculty, staff, and guests of the University; and that does not threaten the physical or mental health or safety of members of the University community.

As a student at the University you are expected adhere to Board of Regents Policy: *Student Conduct Code*. To review the Student Conduct Code, please see:

http://regents.umn.edu/sites/default/files/policies/Student_Conduct_Code.pdf.

Note that the conduct code specifically addresses disruptive classroom conduct, which means "engaging in behavior that substantially or repeatedly interrupts either the instructor's ability to teach or student learning. The classroom extends to any setting where a student is engaged in work toward academic credit or satisfaction of program-based requirements or related activities."

Use of Personal Electronic Devices in the Classroom:

Using personal electronic devices in the classroom setting can hinder instruction and learning, not only for the student using the device but also for other students in the class. To this end, the University establishes the right of each faculty member to determine if and how personal electronic devices are allowed to be used in the classroom. For complete information, please reference:

<http://policy.umn.edu/Policies/Education/Education/STUDENTRESP.html>.

Scholastic Dishonesty:

You are expected to do your own academic work and cite sources as necessary. Failing to do so is scholastic dishonesty. Scholastic dishonesty means plagiarizing; cheating on assignments or examinations; engaging in unauthorized collaboration on academic work; taking, acquiring, or using test materials without faculty permission; submitting false or incomplete records of academic achievement; acting alone or in cooperation with another to falsify records or to obtain dishonestly grades, honors, awards, or professional endorsement; altering, forging, or misusing a University academic record; or fabricating or falsifying data, research procedures, or data analysis. (Student Conduct Code:

http://regents.umn.edu/sites/default/files/policies/Student_Conduct_Code.pdf) If it is determined that a student has cheated, he or she may be given an "F" or an "N" for the course, and may face additional sanctions from the University. For additional information, please see:

<http://policy.umn.edu/Policies/Education/Education/INSTRUCTORRESP.html>.

The Office for Community Standards has compiled a useful list of Frequently Asked Questions pertaining to scholastic dishonesty <https://communitystandards.umn.edu>. If you have additional questions, please clarify with your instructor for the course. Your instructor can respond to your specific questions regarding what would constitute scholastic dishonesty in the context of a particular class-e.g., whether collaboration on assignments is permitted, requirements and methods for citing sources, if electronic aids are permitted or prohibited during an exam.

Makeup Work for Legitimate Absences:

Students will not be penalized for absence during the semester due to unavoidable or legitimate circumstances. Such circumstances include verified illness, participation in intercollegiate athletic events, subpoenas, jury duty, military service, bereavement, and religious observances. Such circumstances do not include voting in local, state, or national elections. For complete information, please see:

<http://policy.umn.edu/Policies/Education/Education/MAKEUPWORK.html>.

Appropriate Student Use of Class Notes and Course Materials:

Taking notes is a means of recording information but more importantly of personally absorbing and integrating the educational experience. However, broadly disseminating class notes beyond the classroom community or accepting compensation for taking and distributing classroom notes undermines instructor interests in their intellectual work product while not substantially furthering instructor and student interests in effective learning. Such actions violate shared norms and standards of the academic community. For additional information, please see: <http://policy.umn.edu/Policies/Education/Education/STUDENTRESP.html>.

Sexual Harassment:

"Sexual harassment" means unwelcome sexual advances, requests for sexual favors, and/or other verbal or physical conduct of a sexual nature. Such conduct has the purpose or effect of unreasonably interfering with an individual's work or academic performance or creating an intimidating, hostile, or offensive working or academic environment in any University activity or program. Such behavior is not acceptable in the University setting. For additional information, please consult Board of Regents Policy:

<http://regents.umn.edu/sites/default/files/policies/SexHarassment.pdf>

Equity, Diversity, Equal Opportunity, and Affirmative Action:

The University will provide equal access to and opportunity in its programs and facilities, without regard to race, color, creed, religion, national origin, gender, age, marital status, disability, public assistance status, veteran status, sexual orientation, gender identity, or gender expression. For more information, please consult Board of Regents Policy:

http://regents.umn.edu/sites/default/files/policies/Equity_Diversity_EO_AA.pdf.

Disability Accommodations:

The University of Minnesota is committed to providing equitable access to learning opportunities for all students. The Disability Resource Center Student Services is the campus office that collaborates with students who have disabilities to provide and/or arrange reasonable accommodations.

If you have, or think you may have, a disability (e.g., mental health, attentional, learning, chronic health, sensory, or physical), please contact DRC at 612-626-1333 or drc@umn.edu to arrange a confidential discussion regarding equitable access and reasonable accommodations.

If you are registered with DS and have a current letter requesting reasonable accommodations, please contact your instructor as early in the semester as possible to discuss how the accommodations will be applied in the course.

For more information, please see the DS website, <https://diversity.umn.edu/disability/>.

Mental Health and Stress Management:

As a student you may experience a range of issues that can cause barriers to learning, such as strained relationships, increased anxiety, alcohol/drug problems, feeling down, difficulty concentrating and/or lack of motivation. These mental health concerns or stressful events may lead to diminished academic performance and may reduce your ability to participate in daily activities. University of Minnesota services are available to assist you. You can learn more about the broad range of confidential mental health services available on campus via the Student Mental Health Website: <http://www.mentalhealth.umn.edu>.

The Office of Student Affairs at the University of Minnesota:

The Office for Student Affairs provides services, programs, and facilities that advance student success, inspire students to make life-long positive contributions to society, promote an inclusive environment, and enrich the University of Minnesota community.

Units within the Office for Student Affairs include, the Aurora Center for Advocacy & Education, Boynton Health Service, Central Career Initiatives (CCE, CDes, CFANS), Leadership Education and Development – Undergraduate Programs (LEAD-UP), the Office for Fraternity and Sorority Life, the Office for Community Standards, the Office for Student Engagement, the Parent Program, Recreational Sports, Student and Community Relations, the Student Conflict Resolution Center, the Student Parent HELP Center, Student Unions & Activities, University Counseling & Consulting Services, and University Student Legal Service.

For more information, please see the Office of Student Affairs at <https://osa.umn.edu/>.

Academic Freedom and Responsibility: *for courses that do not involve students in research:*

Academic freedom is a cornerstone of the University. Within the scope and content of the course as defined by the instructor, it includes the freedom to discuss relevant matters in the classroom. Along with this freedom comes responsibility. Students are encouraged to develop the capacity for critical judgment and to engage in a sustained and independent search for truth. Students are free to take reasoned exception to the views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.*

OR:

Academic Freedom and Responsibility, for courses that involve students in research

Academic freedom is a cornerstone of the University. Within the scope and content of the course as defined by the instructor, it includes the freedom to discuss relevant matters in the classroom and conduct relevant research. Along with this freedom comes responsibility. Students are encouraged to develop the capacity for critical judgment and to engage in a sustained and independent search for truth. Students are free to take reasoned exception to the views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.* When conducting research, pertinent institutional approvals must be obtained and the research must be consistent with University policies.

Reports of concerns about academic freedom are taken seriously, and there are individuals and offices available for help. Contact the instructor, the Department Chair, your adviser, the associate dean of the college, (Dr Kristin Anderson, SPH Dean of Student Affairs), or the Vice Provost for Faculty and Academic Affairs in the Office of the Provost.

** Language adapted from the American Association of University Professors "Joint Statement on Rights and Freedoms of Students".*

Student Academic Success Services (SASS): <http://www.sass.umn.edu>:

Students who wish to improve their academic performance may find assistance from Student Academic Support Services. While tutoring and advising are not offered, SASS provides resources such as individual consultations, workshops, and self-help materials.

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