

# School of Public Health

## Syllabus and Course Information



### PubH 6606

Child Health: Issues, Programs, and Policies

Spring 2018

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Credits:	2
Meeting Days:	Online (Content cycles on a weekly basis, Monday-Sunday)
Meeting Time:	Online
Meeting Place:	Online
Instructor:	Ellen W. Demerath, PhD
Office Address:	West Bank Office Building, Room 455
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Office Hours:	By appointment
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### I. Course Description

This course will provide a survey of the major causes of child morbidity and mortality in the United States and around the world, and current strategies for intervention. The course has two major conceptual foci. First, while child mortality has declined greatly over the past 50 years, profound *social and economic inequalities* in child health remain; this course will examine their social determinants (including poverty, lack of education, place of residence, and various forms of discrimination). A second emphasis in the course is on a *developmental and life course perspective*, highlighting that numerous environmental exposures (nutrition, pollutants, stress, parenting styles) have particularly large and lasting effects when those exposures occur at critical periods of development. Following the introduction of these concepts, the course will be structured around *phases of child development (fetal life, infancy, childhood, adolescence)*, highlighting some specific *health conditions and environmental factors relevant to those phases*, including maternal tobacco and alcohol use during pregnancy, neonatal mortality, breastfeeding, child cognitive development, autism and ADHD, early puberty, adolescent risk-taking behavior, immigration, and others.

This course fulfills the Maternal-Child Health MPH program “scientific basis of MCH” requirement. The course therefore delivers the above content and simultaneously trains students to be able to update their knowledge over time and to disseminate that knowledge using the concepts in the course. This is accomplished with the following assignments: 1) training to identify high quality sources of information and new research on child health prevalence, disparities, determinants, and consequences; 2) training to extract relevant information from research papers and high quality reports on child health; 3) training to summarize, synthesize, and communicate scientific information on child health in written and verbal forms; and 4) training to produce a conceptual model linking child health determinants with child health outcomes using a developmental and life course epidemiological framework.

## II. Course Prerequisites

There are no prerequisites for this course; however, it is a graduate course designed for Maternal-Child Health MPH students. Other graduate degree students are welcome. Undergraduate and non-degree students must contact the Instructor to discuss suitability of the course prior to registration.

## III. Course Goals and Objectives

At the end of this course, you will:

- Know the prevalence, disparities, determinants and consequences of the major pediatric diseases and health concerns in the United States and in the world
- Know the major health issues pertinent to each stage of child growth and development from conception through adolescence
- Identify high quality sources of information on a child health topic (data sources and research literature)
- Read and extract pertinent information from the child health literature and data sources
- Summarize and synthesize research evidence on a child health topic in written form
- Apply a life course epidemiology framework for child health using a conceptual model linking child health determinants and outcomes
- Communicate the public health significance, prevalence, disparities, determinants and life course epidemiological implications for a child health condition using standard visual and audio presentation methods (Slide Show with VoiceThread)

## IV. Methods of Instruction and Work Expectations

- The Moodle site contains learning activities (lectures, readings, links to other useful sites) and an opportunity for students to ask and participate in discussion with the rest of the class and the instructor. The Moodle site also includes completion dates for lectures, discussion contributions, and written assignments.
- Deadlines for assignments are listed in this syllabus and on the Moodle site. If you anticipate any difficulty meeting a deadline (due to a family emergency, documented illness, or attendance at a professional conference), arrangements must be made with your instructor in advance of the actual due date to receive full credit for the assignment.
- Expected effort: The University's policy on work expectation is a ratio of 1:3 or that a single credit assumes three hours of work per week. The course has been designed with this expectation in mind (e.g., 6 hours per week of work). However, some weeks may require more time and other weeks less.
- Questions about Course Maternal and Assignments. Please do not hesitate to email the instructor if you have questions. If you wish an in-person meeting, please email the instructor to set up an appointment.

### Assignments that Require VoiceThread

VoiceThread is web-based tool (accessed through Moodle at the U) used to create online presentations that can include a variety of media such as PowerPoint slides, audio narration, images, video from your webcam, etc. You can share a link to your presentations with others.

VoiceThread will be used for two assignments in this course:

- Assignment 7: A Causal (Conceptual) Model for your Project
- Assignment 8: Final Project

You will create a VoiceThread presentation, copy the link to it, and then paste the link into a discussion forum on the Moodle site (that is how you will share it with your classmates). To use VoiceThread you will need a computer with a microphone or an iOS device with the VoiceThread App. All of the instructions you need are in the VoiceThread Instruction Guide provided on the Moodle site. It is recommended that you get up to speed with VoiceThread as soon as possible.

## About Small Groups

**All assignments and discussion questions in the course are completed independently.** The small groups only apply to posting and responding within the discussion forums. You have been assigned to a small group of either 4 or 5 classmates. When you post your initial response to the discussion forums and then respond to your classmates, the Moodle site is set up so that you can only post and respond *within your small groups*. You are encouraged to *view* the responses of all the small groups in the course, but you can only post/respond within your small group. You will be in the same small groups throughout the course for all discussion forums.

- The exceptions to this are Assignment 7 and Assignment 8, where you provide feedback on your classmates' VoiceThread presentations. You are required to respond to the presentations of 4 classmates - 2 of your small group members and 2 from outside your small group.

## Policy for late assignments

Failure to submit an assignment without prior permission of the instructor by the due date will result in a late penalty of 20% of points per day. If an assignment is not submitted within one week following the original due date, no credit will be given. Permission to turn work in late without penalty will be granted only for very serious personal reasons (e.g., medical emergency, death in family, etc.) Please plan accordingly.

## V. Required Course Texts

- Kuo et al. *Child Health: A Population Perspective*. Oxford University Press, 2015. ISBN: 780199309375
- Berk and Meyers (2015) *Infants, Children, and Adolescents*, 8<sup>th</sup> Edition. ISBN:100134130146 (selected chapters)

**Other assigned readings are listed below. Links to other assigned readings are available on the Moodle site via the Library eReserves links.**

## VI. Course Outline/Weekly Schedule

Week	Lectures	Readings	Assignments & Due Dates
1 Jan 16 - 21  <b>Lesson 1 -</b> Course Orientation and the History of Child Health	<ul style="list-style-type: none"> <li>What is Child Health? (~12 minutes)</li> <li>Historical Perspectives on Children, Child Health, and Child Health Policy (~40 minutes)</li> </ul>	Textbooks <ul style="list-style-type: none"> <li>Kuo: <i>Child Health: A Population Perspective</i> - Introduction, Chapter 1</li> <li>Berk and Meyers: <i>Infants, Children, and Adolescents</i>, 8th Ed. - Chapter 1</li> </ul>	<ul style="list-style-type: none"> <li><b>Discussion 1: Small Group Introductions</b> (initial post due Thurs 1/18 and responses due Sun 1/21)</li> <li><b>Assignment 1: Star Tribune</b> (due Sun 1/21)</li> <li>Review all course assignments and requirements</li> <li>Begin exploring VoiceThread</li> </ul>
2 Jan 22 - 28  <b>Lesson 2</b> Child Health Issues: United States and Global	<ul style="list-style-type: none"> <li>Child Health Status: United States (~21 minutes)</li> <li>Child Health Status: Global (~19 minutes)</li> </ul>	Textbook <ul style="list-style-type: none"> <li>Kuo: <i>Child Health: A Population Perspective</i> - Chapter 2, Chapter 7</li> </ul> Library eReserves <ul style="list-style-type: none"> <li>Child Health USA 2014 (pages 4-17): U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. <i>Child Health USA 2014</i>. Rockville, Maryland: U.S. Department of Health and Human Services, 2015.</li> <li>WHO Fact Sheets:               <ul style="list-style-type: none"> <li><a href="#">Child Mortality</a></li> <li><a href="#">Diarrhea</a></li> <li><a href="#">Pneumonia</a></li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li><b>Assignment 2: Choose a Topic to Research for Your Final Project</b> (due Sun 1/28)</li> </ul>
3	<ul style="list-style-type: none"> <li>Social/Environmenta</li> </ul>	Textbook	<ul style="list-style-type: none"> <li><b>Assignment 3: Racial/Ethnic</b></li> </ul>

Jan 29 - Feb 4 <b>Lesson 3-</b> Social Determinants Child Health and Child Health Equity	I Determinants I (Child Poverty and the Measurement of Inequality) (~16 minutes) • Social/Environmental Determinants II (Effects on Child Health) (~28 minutes)	• Kuo: Child Health: A Population Perspective - Chapter 4 Library eReserves • WHO (2015) Monitoring Inequality: An Essential Step for Achieving Health Equity. • E. Bendavid. Changes in Child Mortality Over Time Across the Wealth Gradient in Less-Developed Countries. Pediatrics 2014;134:e1551–e1559. • Jiang et al. (2017) Basic Facts about Low-Income Children: Children under 18 years, 2015. National Center for Children in Poverty.	<b>and Time Trends in Child Poverty and Insurance</b> (due Sun 2/4)
4 Feb 5- Feb 11 <b>Lesson 4 -</b> Child Health within a Developmental Perspective	• Child Development I: Nature and Nurture (~25 minutes) • Child Development II: The Microsystem (Parents and School) (~23 minutes)	Textbooks • Kuo: Child Health: A Population Perspective - Chapter 3 • Berk & Meyers: Infants, Children, and Adolescents, 8th Ed. - Chapter 2 Library eReserves • Groom A Elliott HR, Embleton ND, and Relton CL. Epigenetics and child health: Basic concepts. Arch Dis Child 2011 96: 863-869.	• <b>Discussion 2: Nature and Nurture</b> (initial post due Thurs 2/8, responses due Sun 2/11) • <i>Small groups</i>
5 Feb 12 - 18 <b>Lesson 5 -</b> Child Health within a Life Course Perspective	• The Life Course Perspective I: Key Concepts (~26 minutes) • The Life Course Perspective II: Examples and Challenges for Maternal Child Health (~27 minutes)	Textbook • Kuo: Child Health: A Population Perspective - Chapter 5, Chapter 9 Library eReserves • Kuh et al. (2003). Life course epidemiology D Kuh, Y Ben-Shlomo, J Lynch, J Hallqvist, C Power. J Epidemiol Community Health; 57:778–783 • Roseboom TJ, van der Meulen JH, Ravelli AC, Osmond C, Barker DJ, Bleker OP. Effects of prenatal exposure to the Dutch famine on adult disease in later life: an overview. Twin Res. 2001 Oct;4(5):293-8.	• <b>Quiz 1: Life Course Epidemiology Concepts</b> (due Sun 2/18)
6 Feb 19 – Feb 25 <b>Lesson 6 -</b> Prenatal Development and Key Health Issues	• Prenatal Development and Teratogenic Exposures (~24 minutes) • Prenatal Chemical Exposures and Protective Factors (~14 minutes) • <b>From the Field:</b> Examining In-utero Exposures (audio, 6:31) by Wendy Hellerstedt, MPH, PhD	Textbook Berk & Meyers: Infants, Children, and Adolescents, 8th Ed. - Chapter 3 (pp. 95-117) Library eReserves • Bellinger, D. (2013). Prenatal Exposures to Environmental Chemicals and Children's Neurodevelopment: An Update David C Bellinger, Boston Children's Hospital, Harvard Medical School, Harvard School of Public Health, Boston, MA, USA. Saf Health Work 2013;4:1-11	• <b>Discussion 3: Fetal Alcohol Spectrum Disorder</b> (initial post due Thurs 2/22, responses due Sun 2/25) • <i>Small groups</i>
7 Feb 26 – Mar 4 <b>Lesson 7 –</b> Neonatal and Early Postnatal Health Outcomes and Prevention Strategies	• Neonatal and Early Postnatal Outcomes (~19 minutes) • Interventions to Prevent Neonatal and Infant Morbidity and Mortality (~27 minutes) • <b>From the Field:</b> Preterm Birth and Low Birth Weight (audio, 2:54) by	• Berk & Meyers: Infants, Children, and Adolescents, 8th Ed. - Chapter 4 (pp. 134-155) Library Reserves • Child Health USA 2014 (pages 18-40): U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. Child Health USA 2014. Rockville, Maryland: U.S. Department of Health and Human Services, 2015.	• <b>Assignment 4: Social Determinants and Biological/Etiologic Factors in the Child Health Condition or Disease you have chosen for your Final Project</b> (due Sun 3/4)

	Mark Bergeron, MD, MPH	March of Dimes, PMNCH, Save the Children, WHO. Born Too Soon: The Global Action Report on Preterm Birth. Eds CP Howson, MV Kinney, JE Lawn. World Health Organization. Geneva, 2012. <a href="http://apps.who.int/iris/bitstream/10665/44864/1/9789241503433_eng.pdf?ua=1">http://apps.who.int/iris/bitstream/10665/44864/1/9789241503433_eng.pdf?ua=1</a>	
8 Mar 5 - 11  <b>Lesson 8 - Infant Development : The Brain and the Environment</b>	<ul style="list-style-type: none"> <li>• Infant Growth and Brain Development and Their Measurement (~24 minutes)</li> <li>• The Importance of Environmental Influences on Infant Development (~29 minutes)</li> </ul>	Textbook <ul style="list-style-type: none"> <li>• Berk &amp; Meyers: Infants, Children, and Adolescents, 8th Ed. - Chapter 5 (pp. 158-176), Chapter 6 (pp. 222-230), and Chapter 7 (pp. 261-275)</li> </ul> Library eReserves <ul style="list-style-type: none"> <li>• Child Health USA 2014 (pages 41-49; and 78-83): U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. Child Health USA 2014. Rockville, Maryland: U.S. Department of Health and Human Services, 2015.</li> </ul> Additional Information: <a href="#">Minnesota Department of Health Family Home Visiting Program</a> .	<ul style="list-style-type: none"> <li>• <b>Assignment 5: Family Home Visiting Program</b> (due Sun 3/11)</li> </ul>
Mar 12 - 18  <b>SPRING BREAK</b>			
9 Mar 19 – 25  <b>Lesson 9 – Enhancing Infant and Early Childhood Health: Breastfeeding and Immunization Promotion</b>	<ul style="list-style-type: none"> <li>• Infant and Early Childhood Immunizations (~30 minutes)</li> <li>• Breastfeeding and "Lactational" Programming (~31 minutes)</li> <li>• <b>From the Field:</b> Challenges Facing Vaccine-Preventable Diseases in the 21st Century (audio, 4:10) by Nicole Basta, PhD, MPhil</li> </ul>	Library Reserves <ul style="list-style-type: none"> <li>• Maglione MA, Das L, Raaen L, Smith A, Chari R, Newberry S, Shanman R, Perry T, Goetz MB, Gidengil C. Safety of vaccines used for routine immunization of U.S. children: a systematic review. Pediatrics. 2014 Aug;134(2):325-37.</li> <li>• <a href="#">WHO Fact Sheet: Infant and Child Feeding</a></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Discussion 4: Immunization</b> (initial post due Thurs 3/22, responses due Sun 3/25) <ul style="list-style-type: none"> <li>• <i>Small groups</i></li> </ul> </li> </ul>
10 Mar 26 – Apr 1  <b>Lesson 10 - Early Childhood Development and Key Health Issues</b>	<ul style="list-style-type: none"> <li>• Early Childhood Development: Physical, Cognitive, and Emotional (~37 minutes)</li> <li>• Adverse Childhood Experiences, Toxic Stress, and Health: Prevalence, Health Effects, and Prevention (~24 minutes)</li> <li>• <b>From the Field:</b> Adverse Childhood Experiences (audio, 2:26) by Susan Mason, PhD, MPH</li> </ul>	Textbook <ul style="list-style-type: none"> <li>• Berk &amp; Meyers: Infants, Children, and Adolescents, 8th Ed. - Chapter 8 (pp. 284-301), Chapter 10 (pp. 392-399)</li> </ul> Library eReserves <ul style="list-style-type: none"> <li>• Child Health USA 2014 (read pages 97-110): U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. Child Health USA 2014. Rockville, Maryland: U.S. Department of Health and Human Services, 2015.</li> <li>• Prendergast AJ, Essajee S, Penazzato M. HIV and the Millennium Development Goals. Arch Dis Child. 2015 Feb;100 Suppl 1:S48-52.</li> <li>• Odgers CL and Jaffe SR. Routine versus catastrophic influences on the developing child. Annu. Rev. Public Health 2013. 34:29–48.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Discussion 5: Childhood Adversity and Life Expectancy</b> (initial post due Thurs 3/29, responses due Sun 4/1) <ul style="list-style-type: none"> <li>• <i>Small groups</i></li> </ul> </li> </ul>

<p>11 Apr 2 - 8</p> <p><b>Lesson 11 - School-age Child Development and Key Health Issues</b></p>	<ul style="list-style-type: none"> <li>Developmental Disabilities Diagnosed in Early Childhood: CSHCN Including ADHD and Autism (~30 minutes)</li> <li>Childhood Obesity: Definitions, Health Effects, and Prevalence (~11 minutes)</li> <li>Childhood Obesity: Etiology. Is It Just Energy Balance? (~18 minutes)</li> <li><b>From the Field:</b> Child Obesity and Nutrition (audio, 6:02) by Claudia Fox, MD, MPH, FAAP</li> </ul>	<p>Textbook</p> <ul style="list-style-type: none"> <li>Berk &amp; Meyers: Infants, Children, and Adolescents, 8th Ed. - Chapter 11 (pp. 404-419), Chapter 13 (pp. 507-513)</li> </ul> <p>Library eReserves</p> <ul style="list-style-type: none"> <li>Boyle CA, Boulet S, Schieve LA, Cohen RA, Blumberg SJ, Yeargin-Allsopp M, Visser S, Kogan MD. Trends in the prevalence of developmental disabilities in US children, 1997-2008. Pediatrics. 2011 Jun;127(6):1034-42.</li> <li>School Health Guidelines to Promote Healthy Eating and Physical Activity: Executive Summary.</li> <li>School-Based Obesity Prevention Strategies for State Policymakers.</li> <li>Child Health USA 2014 (read pages 41-49): U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. Child Health USA 2014. Rockville, Maryland: U.S. Department of Health and Human Services, 2015.</li> </ul>	<ul style="list-style-type: none"> <li><b>Assignment 6: Child Health Intervention Programs</b> (due Sun 4/8)</li> </ul>
<p>12 Apr 9 - 15</p> <p><b>Lesson 12 - Adolescent Development and Key Health Issues</b></p>	<ul style="list-style-type: none"> <li>Adolescent Development, Judgment, Risk Behaviors, and Injury (~16 minutes)</li> <li>Causes and Consequences of Early Pubertal Development (~26 minutes)</li> <li><b>From the Field:</b> Adolescent Sleep (audio, 4:06) by Rachel Widome, PhD, MHS</li> <li><b>From the Field:</b> Adolescent Sexual Health, Risk Taking (audio, 3:35 by Sonya Brady, PhD)</li> </ul>	<p>Textbook</p> <ul style="list-style-type: none"> <li>Berk &amp; Meyers: Infants, Children, and Adolescents, 8th Ed. - Chapter 14 (pp. 518-551), Chapter 16 (pp. 617-625)</li> </ul> <p>Library eReserves</p> <ul style="list-style-type: none"> <li>Child Health USA 2014 (read pages 50-72): U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. Child Health USA 2014. Rockville, Maryland: U.S. Department of Health and Human Services, 2015.</li> <li>National Sleep Foundation (2000) Adolescent Sleep Needs and Patterns: Research Report and Resource Guide.</li> <li>Minnesota Center for Health Statistics. Minnesota Student Survey 1992-2013 Trends. Minnesota Department of Health, 2015.</li> </ul>	<ul style="list-style-type: none"> <li><b>Assignment 7: Create a Conceptual / Causal Model using VoiceThread</b> (due Sun 4/15)</li> <li>Instruction guide is on the Moodle site, copy the link to your presentation, and post the link to the Discussion Forum on the Moodle site. Provide constructive feedback on four of your classmates' presentations (2 in your small groups and 2 outside of your small groups).</li> </ul>
<p>13 Apr 16 - Apr 22</p> <p><b>Lesson 13 - Pre-Adolescent and Adolescent Risk Behaviors and the Primordial Prevention of Chronic Disease</b></p>	<ul style="list-style-type: none"> <li>Opportunities for Cancer Prevention in Youth (~20 minutes)</li> <li><b>From the field:</b> DeAnn Lazovitch; Tanning Bed Usage and Melanoma Risk</li> <li><b>From the Field:</b> Youth Violence Prevention (audio, 5:13) by Iris Borowsky, MD, PhD</li> </ul>	<p>Library Reserves</p> <ul style="list-style-type: none"> <li>U.S. Department of Health and Human Services. E-Cigarette Use Among Youth and Young Adults: A Report of the Surgeon General—Executive Summary. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2016.</li> <li>Thomas TL, Strickland O, Diclemente R, Higgins M. An opportunity for cancer prevention during preadolescence and adolescence: stopping human papillomavirus (HPV)-related cancer through HPV vaccination. Journal of Adolescent Health 2013;52(5S):S60–S68.</li> </ul> <p>Additional Information to review:  <a href="#">E_Cigarette Use Among Youth and Young Adults</a>  <a href="#">Cancer Prevention Among Youth</a></p>	<ul style="list-style-type: none"> <li><b>Quiz #2: Adolescent Health</b> (due Sun 4/22)</li> </ul>

<p>14 Apr 23 – 29</p> <p><b>Lesson 14:-</b> Immigration, Migration, and Child Health; Course Summary</p>	<ul style="list-style-type: none"> <li>Immigrant, Migrant, and Refugee Child Health, and Course Summary (~34 minutes)</li> </ul>	<p>Textbook</p> <ul style="list-style-type: none"> <li>Kuo: Child Health: A Population Perspective - Chapter 6</li> </ul> <p>Library eReserves</p> <ul style="list-style-type: none"> <li>Fazel M, Reed RV, Panter-Brick C, Stein A. Mental health of displaced and refugee children resettled in high-income countries: risk and protective factors. Lancet 2012; 379: 266–82.</li> <li>Rethinking MCH: The Life Course Model as an Organizing Framework Concept Paper U.S. Department of Health and Human Services Health Resources and Services Administration Maternal and Child Health Bureau November, 2010 Version 1.1</li> <li>Shonkoff JP. 2012. Leveraging the biology of adversity to address the roots of disparities in health and development. Proc. Natl. Acad. Sci. USA 109(Suppl. 2):17302–7.</li> </ul>	<ul style="list-style-type: none"> <li><b>Discussion 6: Intergenerational impact of immigration policy Discussion</b> (due Sun 4/29) <ul style="list-style-type: none"> <li>Small groups</li> </ul> </li> </ul>
<p>15 Apr 30 - May 6 Final Project Presentations</p>			<ul style="list-style-type: none"> <li><b>Assignment 8: Final Project presentation using VoiceThread</b> (due Thurs 5/3, responses due Sun 5/6)</li> <li>Instruction guide is on the Moodle site, copy the link to your presentation, and post the link to the Discussion Forum on the Moodle site. Provide constructive feedback on four of your classmates' presentations (2 in your small groups and 2 outside of your small groups).</li> </ul>

**VII. Course Assignments – Brief description and due dates are listed in the Course Schedule above.** Complete description and requirements for each assignment are found in the Moodle site under each Assignment link.

**VIII. Evaluation and Grading**

<b>Assignment</b>	<b>Point Values</b>
<b>Discussion Forums</b>	<b>60 total</b>
• Lesson 1 Discussion: Small Group Introductions	10
• Lesson 4 Discussion: Nature and Nurture	10
• Lesson 6 Discussion: Fetal Alcohol Exposure	10
• Lesson 9 Discussion: Immunization	10
• Lesson 10 Discussion: Childhood Adversity	10
• Lesson 14 Discussion: Immigration	10
<b>Quizzes</b>	<b>60 total</b>
• Quiz 1: Lesson 5: Life Course and Epidemiology Concepts	30
• Quiz 2: Lesson 13: Child and Adolescent Health	30
<b>Assessments/Assignments</b>	<b>205 total</b>
• Assignment 1: Star Tribune article	5
• Assignment 2: Choose a Research Topic	20
• Assignment 3: Trends in Child Poverty	20
• Assignment 4: Social and Biological Determinants	30
• Assignment 5: Family Home Visiting Program	30
• Assignment 6: Child Health Intervention Programs	40
• Assignment 7: Conceptual/Causal Model	20
• Assignment 8: Final Project Presentation	40
<b>TOTAL POINTS</b>	<b>325 points</b>



**Grading Criteria: A/F**

Grades (A-F) will be assigned on the basis of the following distribution of grades:

Highest	Lowest	Letter
100.00 %	93.00 %	A
92.99 %	90.00 %	A-
89.99 %	87.00 %	B+
86.99 %	83.00 %	B
82.99 %	80.00 %	B-
79.99 %	77.00 %	C+
76.99 %	73.00 %	C
72.99 %	70.00 %	C-
69.99 %	67.00 %	D+
66.99 %	60.00 %	D
59.99 %	0.00 %	F

**Course Evaluation**

SPH collects student course evaluations electronically using a software system called CourseEval: [www.sph.umn.edu/courseeval](http://www.sph.umn.edu/courseeval). The system sends 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](http://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 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](http://www.sph.umn.edu/grades).

**University of Minnesota Uniform Grading and Transcript Policy**

A link to the policy can be found at <http://onestop.umn.edu>

## **IX. 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](http://onestop.umn.edu).

### **Course Withdrawal**

Students should refer to the Refund and Drop/Add Deadlines for the particular term at [onestop.umn.edu](http://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](mailto: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](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."

### **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](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 Student Conduct and Academic Integrity has compiled a useful list of Frequently Asked Questions pertaining to scholastic dishonesty: <http://www1.umn.edu/oscai/integrity/student/index.html>. 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](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. Disability Services (DS) 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 DS at 612-626-1333 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, and 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>.

### **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.\*

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, or the Vice Provost for Faculty and Academic Affairs in the Office of the Provost. [Customize with names and contact information as appropriate for the course/college/campus.]

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