



## Health, Culture, and Community

ANTH 3050 (4 credits/ 60 class hours)

International Honors Program  
Health and Community: Globalization, Culture, and Care

**PLEASE NOTE: This syllabus is representative of a typical term. Because courses develop and change over time to take advantage of unique learning opportunities, actual course content varies from semester to semester. In addition, considerations of student safety may change some course content.**

### Course Description:

This course will examine the anthropology of health, culture and community from a comprehensive *sociocultural* perspective, rather than a strictly *physical or biological* perspective. Our aim is to provide an introduction to the major theoretical orientations and themes informing contemporary socio-cultural and medical anthropology. The general focus will be on how we might best frame concepts of health/well-being, disease/illness, and medicine/healing as objects of cultural analysis at the intersection of social, economic, and political powers. We will look at basic human concerns of security, identity, dignity, recognition and justice through the framework of cultural analysis—asking how we reproduce a broader ideology and reflect power structures that perpetuate inequalities on an individual and institutional scale?

We wish to consider the cross-cultural study of the myriad social determinants of health and disease from cultural, political, economic, and historical perspectives. We will examine local constructions of illness and disease, including: rituals, techniques, and systems of healing; cultural notions of the human body and its physical and psychic manifestations; and the complex presentations of human suffering and affliction. We will seek alternative understandings of illness and disease, and approach diagnosis, treatment and healing from the radical premise of an epistemological openness based on intercultural comparison and context. For example: biomedicine, or what is commonly referred to as clinical medicine, will be treated as one system among many effective systems of medical knowledge. Whereas, *ethno* medicine, more commonly referred to as traditional medicine and healing—will be treated as a comparable and even a complementary system to biomedicine. We will be able to end the IHP program with a better understanding of the definitions, disparities and modalities of illness and health and the ability to interpret and convey health outcomes based on in-country analysis.

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## Learning Outcomes:

The *Health, Culture, and Community* course comprises 60 class hours of instruction (4 credits). The aim of the course is to introduce students to the discipline of medical anthropology, and the contribution that it makes to research and practice in public health. At its conclusion, students will be able to:

- Recognize the value of anthropology in understanding medicine and healing
- Discuss the ways in which ideas regarding health, illness, and treatment are socially constructed
- Understand and apply concepts of intersectionality and structural violence
- Understand how social, economic, and political power affect health outcomes
- Analyze biomedicine as a cultural system
- Break down academic journal articles and ethnographies into main theoretical points

## Course Schedule, Themes, and Readings:

Week	Topic	Readings	Country
HCC-1	Introduction: Understanding intersectionalities and Looking inward before looking outward	<p><b><u>Required Readings:</u></b></p> <ul style="list-style-type: none"> <li>• Farmer, Paul. 2003. <i>Pathologies of Power: Health, Human Rights, and the New War on the Poor</i>. Berkeley: University of California Press. Chp 1.</li> <li>• Miner, Horace. 1956. Body Ritual among the Nacirema. <i>American Anthropologist</i> 58: 503-507.</li> </ul> <p><b><u>Suggested Readings:</u></b></p> <ul style="list-style-type: none"> <li>• Baer, Hans A., Singer, Merrill, and Ida Susser. (2003). "Medical Anthropology: Central Concepts and Development." In <i>Medical Anthropology and the World System</i>. Westport, Connecticut: Praeger, pp. 1-29.</li> <li>• James, Craig and Kitty Corbett. 2009. Anthropology and Global Health. <i>Annual Reviews in Anthropology</i> 38:167-83.</li> </ul>	USA

HCC-2	Able and Disabled Bodies	<p><b><u>Required Readings:</u></b></p> <ul style="list-style-type: none"> <li>• Gammeltoft, Tine. 2014. <i>Haunting Images: A Cultural Account of Selective Reproduction in Vietnam</i>. Berkeley: The University of California Press. Chapter 5 (excerpt) &amp; Chapter 6.</li> </ul> <p><b><u>Suggested Reading:</u></b></p> <ul style="list-style-type: none"> <li>• Livingston, Julie. 2005. <i>Debility and the Moral Imagination in Botswana</i>. Bloomington: Indiana University Press. Chapter 1.</li> <li>• Davis, Lennard, Ed. 2006. <i>The Disability Studies Reader</i>.</li> </ul>	
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		Chapters 14 & 16.	
HCC-3	Conflicts and Convergence: Ethnomedicine, Religious Healing, and Biomedicine	<p><b>Required Reading:</b></p> <ul style="list-style-type: none"> <li>Fadiman, Anne. 1997. <i>The Spirit Catches You and You Fall Down</i>. New York: Farrar, Straus, and Giroux. Chapters 1, 3, &amp; 18.</li> <li>Singer, Merrill and Hans Baer. 2012. <i>Medical Pluralism in the Contemporary World</i>. In <i>Introducing Medical Anthropology: A Discipline in Action</i>. Lanham, MD: AltaMira Press, pp. 143-174.</li> </ul> <p><b>Suggested Reading:</b></p> <ul style="list-style-type: none"> <li>TICAH Report- Sharing Our Learning, Strengthening Positive Living: The Africa- Asia InterAction on AIDS (2009)</li> </ul>	Vietnam
HCC-4	The Body Politic, the Physical Body and Eugenics Politics	<p><b>Required Readings:</b></p> <ul style="list-style-type: none"> <li>Gammeltoft, Tine. 2014. <i>Haunting Images: A Cultural Account of Selective Reproduction in Vietnam</i>. Berkeley: The University of California Press. Chp 1.</li> </ul> <p style="text-align: center;"><b>AND</b></p> <ul style="list-style-type: none"> <li>Kluchin, Rebecca. 2011. <i>Fit to Be Tied: Sterilization and Reproductive Rights in America</i>. New Jersey: Rutgers University Press. Introduction.</li> </ul> <p style="text-align: center;"><b>OR!!</b></p> <ul style="list-style-type: none"> <li>Davis, Lennard, Ed. 2006. <i>The Disability Studies Reader</i>. Chapters 7 &amp; 8, pp. 93-116.</li> </ul> <p><b>Suggested Reading:</b></p> <ul style="list-style-type: none"> <li>UNDP, USAID (2014). <i>Being LGBT in Asia: Viet Nam Country Report</i>. Bangkok</li> <li>Loyd, J. M. (2014). <i>Health rights are civil rights</i>. University of Minnesota Press. Chp 6</li> </ul>	
HCC-5	Race, Class, and the Political Economy of Health	<p><b>Required Readings:</b></p> <ul style="list-style-type: none"> <li>Lane, Sandra. 2008. Chapter 7: Missing Fathers. In <i>Why Are Our Babies Dying</i>. Boulder, CO: Paradigm Publishers. P149-172</li> <li>Hunter, Mark. 2007. The changing political economy of sex in South Africa: the significance of unemployment and inequalities to the scale of the AIDS pandemic. <i>Social Science and Medicine</i> 64(3): 689-700.</li> <li>Fassin, Didier and Helen Schneider. 2003. The politics of AIDS in South Africa: Beyond the controversies. <i>BMJ</i>, 326: 495-7.</li> </ul> <p><b>Suggested Reading:</b></p> <ul style="list-style-type: none"> <li>Pfeiffer, James and Rachel Chapman. 2010. <i>Anthropological</i></li> </ul>	South Africa

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		Perspectives on Structural Adjustment and Public Health. Annual Reviews in Anthropology 39: 149-65	
HCC-6	Sexuality, Sexual Orientation, and Gender	<p><b>Required Readings:</b></p> <ul style="list-style-type: none"> <li>• Epprecht, Marc. Heterosexual Africa?: The History of an Idea from the Age of Exploration to the Age of AIDS. Ohio University Press, 2008. CHP two. "The ethnography of African Straightness." P 34-64</li> <li>• Muholi, Zanele. "Thinking through lesbian rape." <i>Agenda</i> 18.61 (2004): 116-125.</li> <li>• Epprecht, Marc. "Sexual minorities, human rights and public health strategies in Africa." <i>African Affairs</i> 111.443 (2012): 223-243.</li> </ul> <p><b>Suggested Reading:</b></p> <ul style="list-style-type: none"> <li>• Rabie, Francois, and Elmién Lesch. "I am like a woman': constructions of sexuality among gay men in a low-income South African community." <i>Culture, health &amp; sexuality</i> 11.7 (2009): 717-729.</li> <li>• ACHPR Transgender And Intersex Shadow Report April 2016. Prepared By The Legal Resources Centre, Iranti-Org And Gender Dynamix, <a href="http://genderdynamix.org.za/documents/achpr-transgender-and-intersex-shadow-report-april-2016/">http://genderdynamix.org.za/documents/achpr-transgender-and-intersex-shadow-report-april-2016/</a></li> </ul>	
HCC-7	Why traditional medicine? Medical pluralism and the modernity of "tradition".	<p><b>Required Reading</b></p> <ul style="list-style-type: none"> <li>• Levine, Susan. (2012). Testing knowledge: legitimacy, healing and medicine in South Africa. In Levine, Susan (ed.) <i>Medicine and the Politics of Knowledge</i>. Cape Town: HSRC Press, pp. 55-78.</li> <li>• Green, Lesley. (2012). Beyond South Africa's indigenous knowledge – science wars. <i>South African Journal of Science</i>, 108 (7/8):1-10.</li> </ul> <p><b>Suggested Reading</b></p> <ul style="list-style-type: none"> <li>• Flint, K. (2001). Competition, race, and professionalization: African healers and white medical practitioners in Natal, South Africa in the early twentieth century. <i>Social History of Medicine</i> 14(2): 199-221.</li> <li>• Ciekawy, Diane and Geschiere, P. (1998). Containing witchcraft: conflicting scenarios in postcolonial Africa. <i>African Studies Review</i> 41(3): 1-14.</li> </ul>	

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		<ul style="list-style-type: none"> <li>• Agrawal, A. (1995). Dismantling the divide between indigenous and scientific knowledge. <i>Development and Change</i>, 26: 413-439.</li> </ul>	
HCC-8	Trauma, Violence, and Mental Health	<p><b>Required Readings:</b></p> <ul style="list-style-type: none"> <li>• Robben, A. C. (2005). Political violence and trauma in Argentina. University of Pennsylvania Press. <i>Conclusion: The Spirals of Violence and Trauma</i>. p 341-59</li> <li>• Fullilove, M. T. (1996). Psychiatric implications of displacement: Contributions from the psychology of place. <i>The American Journal of Psychiatry</i>, 153(12), 1516.</li> </ul> <p><b>Suggested Reading:</b></p> <ul style="list-style-type: none"> <li>• Biehl, Joao. 2004. Life of the Mind: The interface of psychopharmaceuticals, domestic economies, and social abandonment. <i>American Ethnologist</i> 41(4): 475-496.</li> </ul>	Argentina
HCC-9	The Anthropology of Reproduction and Motherhood	<p><b>Required Readings:</b></p> <ul style="list-style-type: none"> <li>• Martin, Emily. 1991. The Egg and the Sperm: How Science has Constructed a Romance Based on Stereotypical Male-Female Roles. <i>Signs</i> 16(2): 485-501.</li> <li>• Morgan, Lynn. 2015. Reproductive Rights or Reproductive Justice? Lessons from Argentina. <i>Health and Human Rights</i> 17(1). P 136-147.</li> </ul> <p><b>Suggested Reading:</b></p> <ul style="list-style-type: none"> <li>• Inhorn, Marcia C. 2006. Defining Women's Health: A Dozen Messages from More than 150 Ethnographies. <i>Medical Anthropology Quarterly</i> 20(3): 345-378.</li> <li>• Park, Shelley M. <i>Mothering queerly, queering motherhood: Resisting monomaterialism in adoptive, lesbian, blended, and polygamous families</i>. SUNY Press, 2013. Chp 3 Queer Orphans and Their Neoliberal Saviors: Racialized Intimacy in Adoption pp. 85-118</li> </ul>	
HCC-10	Resistance: People lead organizing for healthy neighborhoods and healthy communities	<p><b>Required Readings:</b></p> <ul style="list-style-type: none"> <li>• Auyero J, Swistun D. 2009. Flammable: Environmental Suffering in an Argentine Shantytown. New York: Oxford University Press, pp. 21-27.</li> <li>• Nelson, Alondra. <i>Body and soul: The Black Panther Party and the fight against medical discrimination</i>. U of Minnesota Press, 2011. Chapter 2-Origins of BP Party Health Activism, p 49-74 &amp; Chp 3The People's Free Medical Clinic. P 75-144.</li> </ul> <p><b>Suggested Reading:</b></p> <ul style="list-style-type: none"> <li>• Auyero J, Swistun D. 2007. Confused because exposed: Towards an ethnography of environmental suffering. <i>Ethnography</i> 8(2): 123-144.</li> </ul>	

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		<ul style="list-style-type: none"> <li>• McCoy, Terrence. 2015. Freddie Gray's Life a Study on The Effects of Lead Paint on Poor Blacks. The Washington Post, 29 April.</li> <li>• Lloyd, J. M. (2014). <i>Health rights are civil rights</i>. University of Minnesota Press. Chp 7</li> </ul>	
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**Evaluation and Grading Criteria:**

Assignments should be typed in electronic format, saved on a USB flash drive, and submitted to the Faculty or Fellow. Please refer to the policy on technology in the IHP Student Handbook for more information. Please include your name on the **flash drive itself, every page of the assignment (use the header function)**, as well as in the **file name**.

The following is a brief overview of assignment topics. More detailed instructions and assessment criteria will be provided to students in separate handouts over the course of the term. It should also be noted that due to occasional in-country circumstances beyond our control, I reserve the right to adapt the syllabus details and organization, if necessary. **Assignments are subject to change and will be discussed in class. All assignments are to be 1.5-spaced with one-inch margins in 11 point Times New Roman font. PLEASE SUBMIT ALL ASSIGNMENTS AS A MICROSOFT WORD FILE as PDF files are more difficult to comment on and annotate.**

**HCC assignments are typically due 3-5 days before Case Study Presentations; see country calendar and speak with professor for exact due dates.**

Evaluation Criteria	Due Date	Points
Participation: Reading Questions, Professor Lunch, Class Engagement	Throughout semester	20
Preceding Lecture Presentation	Throughout semester	10
Comparative Analysis Paper I		10
Comparative Analysis Paper II		20
Comparative Analysis Paper III		20
Comparative Analysis Paper IV		20
<b>Total</b>		<b>100%</b>

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## **I. Participation: (20 points)**

**Reading Questions (8 points)** Students should come to each class with 3-5 discussion questions about the assigned readings. These can be clarification questions, critiques of the readings, or question or discussion prompts linking together key ideas from the readings with other experiences/topics covered throughout the weeks activities (i.e. material from other courses, guest lectures, personal experiences, etc.). Questions will serve to support classroom discussion and student engagement and will be turned in during each session. The professor will provide a worksheet upon which to complete the assignment. The worksheet for the first class will not be graded. Students are required to submit 8 worksheets over the remaining 9 classes. Worksheets will be graded as either 1- completed or 0-not completed. If completed work is not meeting the professor's standards, verbal feedback will be provided as necessary

**Professor Lunch/coffee (3 points)** In advance of each session, small groups of 2-3 students will arrange with the professor to meet for lunch, coffee or something similar. In preparation for the meeting, students should read all required and suggested readings for the upcoming session and be prepared to discuss, ask questions and provide feed-back for class preparation. These sessions will provide opportunities for small group interaction with the professor outside of the classroom setting. Further, students will work along with the professor to design/influence the content and delivery of the upcoming session. Points will be allocated based on student preparation for and engagement with the conversation.

**Class Engagement (9 points)** Students are expected to attend each session having read the required texts, and actively participate in classroom activities. This includes active listening, taking notes, asking questions, contributing to discussions, etc. After each session, engagement will be assessed (0, 0.5, 1). The highest 9 scores will count towards student grades.

## **II. Preceding Lecture Presentation (10 points)**

For eight of the ten classes, groups of 3-4 students will sign-up ahead of time to begin one class with a ten minute group presentation of key theoretical and thematic points that they took away from the previous HCC lecture, readings and class discussion. In order to do this, students must have taken notes on lectures, class discussion, and all of the previous week's readings, both required and suggested. Although the previous HCC class and readings should be the focus, students are encouraged to tease out threads they might feel have run throughout all previous HCC and RM classes. The aim of this is for students to take an active, collaborative lead in fostering a sense of continuity across classes that are often quite spread out in time and space. Every student in every group is expected to make some vocal contribution to each presentation.

Prior to the assigned presentation day, students are welcome to review presentation content with faculty for approval, as available. Keep in mind our calendars are tight, so schedule well in advance if you want to meet with the professor. In discussion with faculty, students will be given the opportunity to suggest theoretical and thematic linkages that they would like to see drawn across the current and previous class. They can also suggest areas and themes from the previous lecture that they feel need clarification or review. Presentations will be marked in terms of group preparedness, organization and methodology, content, clarity of presentation, and time usage.

**III. Comparative Analysis Paper I (10%):** During the second week in Washington DC, each student will turn in their first Comparative Analysis Paper, a shorter version of the papers you will write in countries 2-4. In approximately 700 - 1,000 words, this paper will relate the class' readings and topics directly to the local reality, as perceived and understood through country field program visits, lectures, field research, and projects. Students should compare the knowledge they had at the beginning of the program with the knowledge gained. In this paper you will think about what you've learned in your first two weeks in Washington DC compared to what you knew before coming on program, filtered through the lens of the material from our first HCC class.

**IV -VI. Three Comparative Analysis Papers (60%):** Each student will write one Comparative Analysis paper in

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countries 2-4 (three in all), comparing the country the student is in currently in with a previous country with through the lens of one class theme (see table below). The respective synthesis should be between 1,000 - 1,250 words. Students will compare, analyze, and synthesize local realities in the two places. Students should also integrate their experiences on-the-ground into their theoretical understandings of the texts, drawing from the country field program visits, lectures, field research, home stay observations, and projects.

For example, for the third comparative analysis paper, a student may wish to compare the integration of ethno-medical healing into biomedical healthcare in Hanoi versus Cape Town, drawing from the texts assigned in class, field visits, guest lectures, and interviews conducted for a case study. Be careful, this paper is not a summary of your related activities; rather, it is a thoughtful analysis of your experiences using the lens (es) provided to you from the sets of texts and resources from the lectures.

### **Paper Topics/Lenses**

**\*Note: You may not repeat a topic nor choose a topic we have not yet covered in class. \***

- Able and Disabled Bodies
- Conflicts and Convergence: Ethnomedicine, Religious Healing, and Biomedicine
- The Body Politic, the Physical Body and Eugenics Politics
- Race, Class, and the Political Economy of Health
- Sexuality, Sexual Orientation, and Gender
- Trauma, Violence, and Mental Health
- The Anthropology of Reproduction and Motherhood
- Resistance: People lead organizing for healthy neighborhoods and healthy communities

### **Grading Scale**

*Note: Grades will be rounded up at .5 and above  
(i.e. a 93.5 would round to 94 and result in an A. 93.4 would result in an A-.)*

94-100%	A	Excellent
90-93%	A-	
87-89%	B+	
84-86%	B	Above Average
80-83%	B-	
77-79%	C+	
74-76%	C	Average
70-73%	C-	
67-69%	D+	
64-66%	D	Below Average
Below 64	F	Fail

### **Expectations and Policies**

#### **Class preparation:**

This program is built upon the strong belief that your experiences result in deep insights and powerful learning. Course assignments are created to facilitate learning opportunities and experiences. Dialogue in class about these insights and participation in these activities is critical. For this reason, your participation is very important. As a learning community, each one of us will influence the learning environment. Please take responsibility for your role in this environment and come to class prepared and ready to engage with others in a positive and thought-provoking manner.

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**Attendance & Participation:**

IHP is an experiential learning program. You have to show up to have the experience. As such, attendance and participation is a minimum expectation, not generally to be rewarded with class credit. Students are expected to attend all classes, guest lectures, and field activities unless they have a medical excuse that has been communicated and approved of by IHP staff, faculty, or fellow. The Fellow will act as a TA for the class and will keep attendance. *Missing one class means a small makeup assignment (as determined by the faculty), missing two classes means a sizable makeup assignment; missing three classes means a grade reduction of 2% of the total course grade.* Keep in mind that IHP is an experiential program, and has academic requirements to attend class meetings and field activities. Failure to attend classes or field activities means that a student may not be eligible for credit from their universities, or could result in program dismissal.

**Policy on deadlines:**

Coursework assignments are due on the deadlines indicated in the assignment handouts. Work is due at the start of the day on which it is due, either during the Person of the Day (POD) announcements, or at the beginning of class. Unexcused late work will result in the lowering of the student's grade one full step per day (for example, a B will drop to a B-). No exceptions will be permitted; extensions are not given unless there are *exceptional* circumstances. Exact deadlines for assignments will be confirmed in class. *Keep an additional copy of all work you turn in*, so as to avoid unexpected disaster and significant inconvenience for all parties involved; this may mean photocopying or scanning any handwritten assignments. Assignments that are not easily legible will be returned ungraded.

**Technology in the classroom:**

Electronic devices are critical tools for learning and communication, but our IHP courses prioritize engaged conversations unhindered by personal electronic devices. *Students, faculty, and visitors are expected to keep cell phones, laptop computers, and other devices out of sight, sound, and mind during class sessions*—except under extenuating circumstances that have been discussed in advance with the faculty member.

**Academic integrity:**

Academic dishonesty is the failure to maintain academic integrity. It includes, but is not limited to, obtaining or giving unauthorized aid on an examination, having unauthorized prior knowledge of the content of an examination, doing work for another student, having work done by another person for the student, and plagiarism. Academic dishonesty can result in severe academic penalty, including failure of the course and/or dismissal from the institution/program.

Plagiarism is the presentation of another person's ideas or product as one's own. Examples of plagiarism are: copying verbatim and without attribution all or parts of another's written work; using phrases, charts, figures, illustrations, computer programs, websites without citing the source; paraphrasing ideas, conclusions or research without citing the source; and using all or part of a literary plot, poem, film, musical score, computer program, websites or other artistic product without attributing the work to its creator. Students can avoid unintentional plagiarism by carefully following accepted scholarly practices. Notes taken for papers and research projects should accurately record sources of material to cited, quoted, paraphrased or summarized, and research or critical papers should acknowledge these sources in references or by use of footnotes.

Violations of IHP/SIT Study Abroad's academic integrity policy are handled as violations of the student code of conduct, and will result in disciplinary action. Please discuss this with me if you have any questions.

**Please refer to the SIT Study Abroad Student Handbook** for policies on academic integrity, ethics, warning and probation, diversity and disability, sexual harassment, and the academic appeals process.

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IHP - Health and Community: Health, Culture, and Community  
**Presentation**

**Group:** \_\_\_\_\_

	<b>F</b>	<b>D</b>	<b>C</b>	<b>B</b>	<b>A</b>
<b>Group preparedness</b>	Presentation poorly planned, lack of sufficient preparation time very evident.	Presentation deficient in preparedness, members show uncertainty with some key points.	Presentation shows limited preparation time, but members comfortable with material.	Presentation responsibilities well distributed, and all members well prepared albeit with limited uncertainty.	Presentation shows very cohesive and comprehensive preparation time, all members exhibit strong certainty in roles.
<b>Activity (if applicable)</b>	Activity Disorganized, lacks creativity, and inhibits an understanding of group's ideas.	Activity lacks organization, creativity, and does not connect to key ideas or themes.	Activity is somewhat organized, but clear ideas are difficult to discern.	Activity is organized, but lacks creativity and does not address a complete variety of ideas. Key themes from the readings are present.	Activity is creative, addresses a number of different topics from the text, and presents a clear discussion of further paths of inquiry.
<b>Content</b>	Content focus is unclear, and with little or no relevancy to the study theme.	Content insufficiently analyzed, and lack of in-depth analysis is evident.	Content adequately analyzed and discussed, but conclusions and further directions are not well thought out.	Content is analyzed and discussed well, but falls short of considering further directions.	Content is very clearly presented, and reveals important insights and proposals for new theme directions.
<b>Clarity and Creativity of presentation</b>	Presentation is poorly designed, and does not effectively present ideas.	Presentation is not effective at communication of key ideas, but has some elements of creativity.	Presentation is somewhat effective at communication of key ideas, but is not organized or clear.	Presentation is effective at communication of key ideas, but lacks Some creativity.	Presentation is engaging and creative. Presentation effectively communicates major key points. Teamwork is evident.
<b>Time usage</b>	Presentation ran significantly over time or under time allotted, and either way was insufficient for adequately covering material.	Presentation time insufficient for adequate coverage of all relevant material.	Presentation needed to be markedly hurried in order to stay within a reasonable range of the time allotted, and concluded irregularly.	Presentation covered all relative material, but allotted time was exceeded to a minor but significant degree.	Presentation succeeds in covering all relevant issues within, or very closely approximating, allotted time period.

**Comments:**

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**Final Grade:**

IHP - Health and Community: Health, Culture, and Community  
**Comparative Analysis Paper**

**Name:**

<b>Criterion</b>	<b>Standards</b>
<b>Responsiveness to topics</b>	A - Strongly addresses the topics, and responds very effectively to all aspects of the assignment. B - Clearly addresses the topics, but may respond to some aspects more comprehensively or effectively than others. C - Adequately addresses the topics, but may omit relevant and pertinent aspects. D - Indicates confusion about the topics and overall assignment, or significantly neglects important aspects. F - Suggests an inability to comprehend the assignment, or to respond meaningfully to the topics.
<b>Communication of ideas</b>	A - Explores relevant issues through strong analyses of data/experience; goes significantly beyond the simple or obvious. B - Shows good depth and complexity of thought. C - May treat the topics simplistically or repetitively; doesn't demonstrate sufficient analysis of data and/or experience. D - Lacks focus, demonstrates confused or simplistic thinking, or fails to adequately communicate ideas. F - Unfocused, illogical, incoherent or disorganized.
<b>Organization and clarity of expression</b>	A - Very coherently organized, with ideas/statements consistently supported by strong reasons or examples. B - Well organized and developed, with frequently appropriate reasons or examples. C - Adequately organized and developed; generally supports ideas/statements with appropriate reasons or examples. D - Poorly organized and/or undeveloped; lacks support from data and/or experience. F - Undeveloped; provides little or no relevant support or rationale.
<b>Control of mechanics (sentence structure, grammar, spelling, etc.)</b>	A - Overall, completely or reasonably free from errors in mechanics, usage, and sentence structure. B - May have occasional errors in mechanics, usage, and sentence structure. C - May have recurring errors, but generally demonstrates control of mechanics, usage, and sentence structure. D - Often marred by an accumulation of errors in mechanics, usage, and sentence structure. F - Serious and persistent errors in word choice, mechanics, usage, and sentence structure.
<b>Word count</b>	A - Word count minimum/maximum range reasonably met. F - Word count minimum/maximum range not reasonably met.

**Comments:**

**Final Grade:**

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