



Public Health: From Biology to Policy

(IPBH3505 / 4 credits / 60 class hours)

International Honors Program

IHP Health and Community

Track 2 - HCC

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.

Course Description

In this course, students will learn about public health across four countries with an emphasis on exploring determinants of health including social, cultural, political, and economic factors. This course will actively examine how public health practitioners work to identify and respond to public health challenges building on local community strengths, while carrying out the three core functions of public health: assessment, program/policy development, and evaluation. To understand the applied nature of the discipline, students will examine resources, barriers and facilitators, and measurable outcomes that contribute to the efficacy of public health interventions. Moreover, students will come to understand the relationship between biology and policy, the process of moving from data to actionable intervention, and the potentially positive and negative consequences of small and large-scale public health programs and policies.

By learning with local public health experts in each country, the class will explore various questions, threaded throughout the semester, including: What are the major determinants of health in each local context? How are interventions designed and implemented in those contexts? What are the critical disease concerns in each context and how does the prevalence of disease vary in different segments of society? What are health disparities? How can we explain why some members of society are healthy and others are less so? What are some effective interventions, programs, or policies that have improved health outcomes in these contexts? What can be done to reduce health status inequities between communities and nations?

Learning Outcomes

The *Public Health* course comprises 60 class hours of instruction and field experience (4 credits). Upon completion of the course, students will be able to:

- Characterize the core and crosscutting functions of public health in promoting individual and population health.
- Articulate the major components of health care systems in program countries.
- Identify social, environmental, and other major determinants of health.
- Understand the relationship of the biological sciences to the development and implementation of public health programs and policy.
- Recognize the role of public health interventions in improving health outcomes, as well as barriers and complications to implementation.
- Recognize the roles that governmental, private, and non-profit stakeholders play in the assessment, development, and evaluation of public health policies, programs, and interventions.
- Understand how all of these powers work together to help or hinder health equity.

Materials

All course readings will be electronically available via the course Dropbox site. Hard copy country-specific course readings will be distributed in-country, except in the case of the USA where the readings were sent to you as part of your pre-departure assignments. An electronic course reader for the first session will be outlined below. Students are responsible for downloading these materials and can print them at their own discretion.

Methodology

This course is organized into an introduction and four modules. In each module you will have assignments given and graded by the faculty responsible for teaching that segment of the PH class. The collection of your PH assignments will become your "PH Portfolio" and will be the basis for the final Comparative Module four assignment given and graded by the Program Director.

There will be two types of assignments for this class: (1) one assignment of approximately 1,000 words, recurring in each country, generally submitted by the second week of the country program, (2) one larger assignment of approximately 1,250 words, specific to each country, that will take the form of a paper, project, or activity submitted towards the end of the country program.

NB: All work for this course will be handed in electronically on the flash drives provided. This collective work will become the PH Portfolio for the final Comparative Module assignment.

Assignments

Assignments (except for hard copy assignments) should be submitted via the course's flash drive. The flash drive should contain 4 country folders to classify assignments. Please do not create any subfolders inside the country folders and do not password protect your documents. Students may never use email to submit assignments, per SIT IT Policy.

PLEASE SUBMIT ALL ASSIGNMENTS AS A MICROSOFT WORD FILE to allow for in-document comments. All assignments are to be double spaced with one-inch margins in 11 Times New Roman font. The American Psychological Association (APA) referencing style is preferred.

When using APA format, follow the author-date method of in-text citation. This means that the author's last name and the year of publication for the source should appear in the text, for example, (Jones, 1998), and a complete reference should appear in the reference list at the end of the paper. If you are referring to an idea from another work but not directly quoting the material, or making reference to an entire book, article or other work, you only have to make reference to the author and year of publication and not the page number in your in-text reference. All sources that are cited in the text must appear in the reference list at the end of the paper.

The flash drive should be labeled with the student's code name (tape and sharpies are provided). Code names are set up at the launch in DC. You will keep the same code name throughout the semester. IF FACULTY CANNOT IDENTIFY WHOSE FLASH DRIVE IT IS BEFORE OPENING IT, THEY WILL CONSIDER THE ASSIGNMENT NOT HANDED IN. You may not turn in your work on someone else's flash drive—be prepared to replace the flash drive provided if it is lost or broken.

Please include your code name on every page of the assignment itself in the header, and the file name should have the following naming convention:

CodeName_Country_NameOfAssignment.doc

e.g. Basil_Vietnam_MappingHealthcareSystem.doc

For hard copy assignments, submit the original. KEEP A COPY OF ALL WORK YOU TURN IN ON YOUR COMPUTER, so as to avoid unexpected disaster and significant inconvenience for all parties involved; this may mean scanning or photographing any hard copy assignments (and keeping a copy in .jpg or .pdf). Assignments that are not easily legible will be returned ungraded.

See end of syllabus for late work and make-up assignments policies.

Evaluation and Grading Criteria

Assignment	Points
Launch Module: Mapping the Healthcare System USA; Neighborhood Activity	0
Mapping the Healthcare System Vietnam	10
Country Module 1: Assignment #1	20
Mapping the Healthcare System South Africa	10
Country Module 2: Assignment #2	20
Mapping the Healthcare System Argentina	10
Country Module 3: Assignment #3	20
Comparative Module 4: Critical Comparative Portfolio Analysis	10
Total Possible	100

Grading Scale					
94-100%	A	Excellent	74-76%	C	Average
90-93%	A-		70-73%	C-	
87-89%	B+		67-69%	D+	
84-86%	B	Above Average	64-66%	D	Below Average
80-83%	B-		below 64	F	Fail
77-79%	C+				
Note: Where decimal points are used in grading, below 0.5 will be rounded down, while 0.5 and above will be rounded up. For example, 93.4 will be an A-, while 93.5 will be an A.					

Course Schedule

This course is organized into an introduction class and four subsequent modules. See the program calendar for corresponding dates of class sessions.

Course Introduction: Washington, DC, USA Lectures and Readings

Session	Lecture Topic	Key Concept	Reading
PH 1	Intro: Debriefing basic concepts from the readings	Social Determinants of Health	Course reader (sent pre-launch as part of the pre-departure readings)

Field Activities and Guest lectures associated with this Country Module:

ACA Guest Lecture, Determinants of Health Guest Lecture, Neighborhood Day, Case Study Day, Immigrant Health Guest Lecture

Public Health Course Readings:

The Course Reader is distributed prior to the program and assigned as part of pre-departure assignments. The reader is comprised of no-cost open-source documents available online. (Students must download the readings on their own.) We will not provide hard copies of these web resources, but you may print them on your own. The readings will provide an overview of fundamental Public Health concepts and inform material introduced by local faculty in each country. Be prepared to discuss the course readings in the first Public Health class at the launch.

1. What is Public Health? (Click through all of drop-down menus)
<http://www.aspph.org/discover/>
2. Braveman, P. & Gruskin, S. (2003). Defining equity and health. *Journal of Epidemiological Community Health*, 57, 4, 254-8.
<http://jech.bmj.com/content/57/4/254.full.pdf+html>
3. Mechanic, D. (2002). Disadvantage, inequality, and social policy. *Health Affairs*, 21, 2, 48-59.
<http://content.healthaffairs.org/content/21/2/48.long>
4. The United States Government Global Health Initiative Strategy Document 2010
Report by the WHO Commission on the Social Determinants of Health (pgs. 1-23)
http://whqlibdoc.who.int/publications/2008/9789241563703_eng.pdf?ua=1
5. Global Health Watch 1 (open source documents at <https://www.ghwatch.org/>)
Specific readings and web addresses below. NOTE: These are important but long. You need to skim for the big ideas and not get caught up reading for detail.
 - a. Introduction (pgs. 1-7)
<https://www.ghwatch.org/sites/www.ghwatch.org/files/Intro.pdf>
 - b. Health Care Systems and Approaches to Health Care (pgs. 55-94)
<https://www.ghwatch.org/sites/www.ghwatch.org/files/B1.pdf>
 - c. The Wider Health Context: Water (pg. 207-221)
<https://www.ghwatch.org/sites/www.ghwatch.org/files/D2.pdf>
 - d. The Wider Health Context: Food (pgs. 225-235)
<https://www.ghwatch.org/sites/www.ghwatch.org/files/D3.pdf>
 - e. The Wider Health Context: Education (pgs. 239-249)
<https://www.ghwatch.org/sites/www.ghwatch.org/files/D4.pdf>

Assignments:

Mapping the Healthcare System USA:

This Mapping the Healthcare System assignment will repeat in each country. Continue to refer back to this page for directions and the grading rubric. This is thus a building assignment—be as detailed as you can in each country context. At the US program launch, we will review this assignment and practice it together.

By the end of the second week of each country program, you will be expected to understand and be able to describe the basics of how the country's healthcare system is organized, and how this shapes people's access to prevention and care. In about 1,000 words, you will map the healthcare system, explain some of the strengths and weaknesses, and address implications and relations to your case study topic. You do not need to have all case study connections fully fleshed out, but you should have some meaningful connections, and you may also include some of the questions you may have. You may also include a visual representation (table, map, or other graphics) and this can take up the space of no more than 200 of the 1,000-word requirement. In order to do this assignment well, you will need to be engaged in lectures, seek out information, talk with people, and be observant to learn about the healthcare system in each country context.

The faculty and staff will assist you should you have questions about this assignment as you progress through the semester. It should be evident that your understanding of healthcare systems develops and becomes more sophisticated over the course of the semester. These assignments, along with your module assignments listed in the rest of the syllabus, will become part of your overall portfolio of PH assignments that you will use for your Module 4 assignment at the end of the semester.

Grading Rubric

Except for in the US where the assignment is ungraded, the assignment will be graded as achieving one of these grades consisting of an A, A-, B, or no credit. This is a simplified grading system, designed for a quicker turn around by the professor to get your papers back to you. Consider this as a version of a "credit/no credit" assignment, in which there is a graduated expression of how well the "credit" has been achieved.

0 Points- No credit	8.5	9.0	9.5 or 10 points
<p>Does not make a meaningful attempt at addressing the assignment;</p> <p>Has multiple inaccuracies and/or needs supporting details;</p> <p>Supporting ideas and context are provided superficially but not accurate or are not 'unpacked' or examined;</p> <p>Limited or no connections to case studies are made;</p> <p>Paper is not poorly written or falls far short of the word requirement.</p>	<p>A reasonable description however has factual errors;</p> <p>Needs more accurate and necessary details;</p> <p>Ideas/examples are not well 'unpacked' or contextualized;</p> <p>Connections to the case study topic need to be made more clearly (questions will still remain about this, but those questions can be identified in the paper);</p> <p>Paper is acceptably written but not done well or does not meet the word requirement.</p>	<p>A reasonably thorough description with few significant factual errors;</p> <p>Provides some accurate and necessary details;</p> <p>Ideas/examples could be more 'unpacked' and properly contextualized;</p> <p>Connections to the case study topic are clearly made but not as well thought out (questions will still remain about this, but those questions can be identified in the paper);</p> <p>Paper is well-written and meets the word requirement.</p>	<p>A clear and thorough description with few significant factual errors;</p> <p>Provides accurate and necessary details;</p> <p>Ideas/examples are 'unpacked' and well contextualized;</p> <p>Connections to the case study topic are clearly and thoughtfully made (questions will still remain about this, but those questions can be identified in the paper);</p> <p>Paper is well-written and meets the word requirement.</p> <p>In addition to the above, a 10-point paper is excellent, has a little something extra that sets it apart, and shows effort beyond the basic requirements.</p>

Country Module One: Hanoi, Vietnam

Lectures and Readings

<i>Session</i>	<i>Lecture Topic</i>	<i>Key Concept</i>	<i>Reading</i>
PH2	Vietnam's health care and typical public health issues	Intro to key concepts as they relate to Vietnam: nutrition, infectious diseases, environmental health and disability	Niemi, M. et al. (2001). Growing Healthy –A review of Vietnam's Health Sector, p 5-32. Hanoi: World Bank. Vuong D.A. (2011). Mental health in Vietnam: Burden of disease and availability of services. <i>Asian J Psychiatr</i> , 4, 65-70.
PH3	Disability, challenges, and the national responses	Disability, traditional beliefs, agent orange, mental health	USAID Public Version Health and Disability Assessment Report in Vietnam, pp. 19-23. Dwernychuk, L.W. et al. (2002). Dioxin reservoirs in southern Vietnam – A legacy of Agent Orange. <i>Chemosphere</i> , 47, 117- 120, 132-133.
PH4	Mother and child health issues and current solutions	m-health (mobile health), health equity, maternal and infant mortality, reproductive health	Monitoring The Situation of Women and Children. Vietnam multiple indicator cluster survey 2011. Final Report, pp. 3-5, pp. 20-24. Ngo, A.D. & Hill P.S. (2011). The use of reproductive healthcare at commune health stations in a changing health system in Vietnam. <i>BMC Health Services Research</i> , 11, 1-9.

Field Activities and Guest Lectures associated with this Country Module:

PH2: Neighborhood Day; National Traditional Medicine Hospital/Department of Traditional Medicine Visit

PH3: District Health Centre Visit

PH4: H'mong Village Visit, Home Stay Observation and Interview

Assignments:

Mapping the Healthcare System Vietnam:

In light of your observations, lectures and readings, map out the Vietnamese healthcare system and draw connections to your case study topic. See full instructions listed under Mapping the Healthcare System USA (p.4).

Country Module Assignment #1: Essay on children's health

Essay: Discuss and analyze a Vietnamese children's typical public health issue that you learned and observed from class and guest lectures, site visits, home stay as well as other field activities and program components. What is the main cause of that? How is it compared to your country?

- Imagine that you would have a chance to meet up with the families having the identified problem, what would you recommend them?
- Summarize and discuss your identified issue in about 700-800 words, and your recommendations in 350-450 words. Your total writing should be around 5 pages. Your essay must include the following points:
- Clearly distinguish the typical public health issue you observed
- Succinctly explain the main cause of the issue. Be thorough in your explanation but do not worry about being overly detailed

- Compare the situation to one in your country and propose a recommendation to a family that you meet up to help with the issue. Explain the rationale behind your recommendation. Why will this work in this particular community?
- Discuss the different actors that may be involved in carrying out your hypothetical intervention. Why is their participation crucial to the success of the intervention?

Country Module Assignment #1: Grading Rubric

Points	0-12	13-14	15-16	17-18	19-20
Observations	Description of observations are lacking, no evidence to the issue	Some descriptions of observations is present, no evidence to the issue	Describes observations, but not succinctly, evidence is not persuasive	Observations are present and descriptive, evidence is persuasive	Observations are richly, concisely described, evidence is persuasive
Analysis	Overall analysis is weak and limited to cursory conclusions, no reference to PH	Some analyses and some references to PH	Good analysis but some references to PH	Good analysis and good references to PH	Excellent analysis to draw insightful conclusions
Recommendation	Recommendation is weak or none	There are some recommendations	Recommendation but not appropriate to the context/local	Good and appropriate recommendations	Excellent recommendations
Components	Assignment was turned in late or is missing most parts	Assignment is missing analysis and recommendation	Assignment is missing one part	Assignment addresses all parts	Assignment strongly fulfills all parts

Country Module Two: Cape Town, South Africa

Lectures and Readings

<i>Session</i>	<i>Lecture Topic</i>	<i>Key Concept</i>	<i>Reading</i>
PH5	Overview of South Africa's Burden of Disease & Key Determinants of Health	Quadruple Burden of Disease and Determinants of Health	Mayosi, Bongani M., et al. 2012. "Health in South Africa: changes and challenges since 2009." <i>The Lancet</i> , 380.9858. Pp. 2029-2043.
PH6	South Africa's Health System: Past and Present	Health System in Transition; Public Health and Human Rights in South Africa.	London, Himonga, et al. 2015. "Social solidarity and the right to health: essential elements for people-centred health systems." <i>Health Policy and Planning</i> , 30(7). Pp. 938-945. Coovadia, Hoosen, et al. 2009. "The health and health system of South Africa: historical roots of current public health challenges." <i>The Lancet</i> , 374.9692. Pp. 817-834.
PH7	Changing Landscapes of Care	Inter-sectoral collaboration in care, the challenges in offering comprehensive treatment to communities in underserved areas. Develop an understanding of how patients manage TB and HIV treatment in complex systems of care.	Biehl, J. Petryna, A. 2014. "Peopling Global Health." <i>Saude Soc.</i> 23(2). Pp. 376-389. <u>Recommended:</u> Whyte, S. R., et al. 2013. "Therapeutic Clientship: Belonging in Uganda's Projectified Landscape of AIDS Care." In J. Biehl & Petryna, A. (Eds.) <i>When People Come First Critical Studies in Global Health</i> . Princeton University Press. Pp. 140-165.

Field Activities Associated with this Country Module:

PH5: All field activities address some dimension of health in South Africa, but in the first weeks I think that the most relevant activities will be the guest lectures on the history of SA, the neighbourhood day, as well as the site visit to Lwandle and Khayelitsha, the Mosque site visit, lecture given by the paramedic and the district 6 Museum

PH6: Lectures that give a historical overview of the SA health system, and general South African history. The site visits and lectures (with NGO day for example).

PH7: All programmatic elements that explore individual/community-level health concerns; but the time in Khayelitsha and Lwandle Migrant Labour Museum, Clinic visits and Refugee and Asylum Seeking field visit will be most useful.

Assignments:

Mapping the Healthcare System South Africa:

In light of your observations, lectures and readings, map out the South African healthcare system and draw connections to your case study topic. See full instructions listed under Mapping the Healthcare System USA (p.4).

Country Module Assignment #2: Public Health Conference: Conference Paper or Poster

In PH6 you will be given a summary of a proposed public health conference in South Africa with several possible conference sessions to which you can submit a paper or poster. You will be asked to submit an

abstract with a conference paper or abstract with conference poster to one of the proposed sessions. You will be asked to demonstrate what you have learned in the local communities where you will spend time, choose one health condition to explore in more detail. In developing your conference proceeding, you might consider exploring the following questions, as well as the ways that they might intersect:

- How do your homestay family members and others explain what caused this condition?
- How is/was this condition experienced over time?
- Which social determinants of health contribute to the experience and treatment of this condition?
- What were some of the key factors that shaped the experience of this condition (e.g. Having access to sufficient information, having social support etc.)?
- What was the course of treatment for this condition?
- Which health care providers were consulted?
- Who else was included in the treatment process (e.g. Family, friends, community members, the state)?
- Which facilities and treatment regimens were accessed?

This assignment is comprised of two related components: an abstract (max. 300 words) that summarizes your overall paper or poster. The second part of the assignment is either a paper that adds detail to your abstract (at least 1,000 words), or if you prefer to present your ideas visually, you may choose to make a conference poster to present your work. Your poster can be any size but all elements should be clearly visible.

Country Module Assignment #2: Grading Rubric

Points	0-12	13-14	15-16	17-18	19-20
Conference Poster	Did not identify a relevant health condition/ treatment choices/ progression/ decisions	Conference proceeding of the condition and its treatment is unclear and confusing	Conference proceeding clear, yet unsophisticated. Makes some connections between experience of the condition, treatment options and actors.	Conference proceeding demonstrates appreciation of relevant elements that shape experience/ treatment of condition.	Conference proceeding demonstrates appreciation of relevant elements that shape experience/ treatment of condition, as well as connections between these elements.
Integrates program Components	Does not cite evidence from program components	Integrates minimal evidence from program components	Integrates limited evidence from program components	Utilizes evidence from program components, but not exceptionally well	Utilizes strong and insightful evidence in both the map and the explanation
Writing Style	Writing style is not comprehensible. A number of spelling and grammar mistakes are present	Writing style is confusing and mistakes are present	Writing style is straightforward and not compelling. Some mistakes may be present	Writing style is fluid, language is somewhat compelling. No mistakes present	Writing style includes compelling language, no spelling/ grammar errors present
Components	Assignment was turned in late or is missing most components	Assignment is missing several components	Assignment is missing some components	Assignment addresses all components	Assignment strongly fulfills all components outlined in prompt

Country Module Three: Buenos Aires, Argentina

Lectures and Readings

<i>Session</i>	<i>Lecture Topic</i>	<i>Key Concept</i>	<i>Reading</i>
PH8	Argentina's health system	Argentina's tripartite health system and the right to health in the context of the introduction of "universal health coverage".	Penchaszadeh V, Leone F, Rovere M. 2010. "The health system in Argentina: an unequal struggle between equity and the market." <i>IJPH</i> , 7(4). Pp. 350-357. Heredia N, Laurell AC, Feo O, Noronha J, González-Guzmán R, Torres-Tovar M. 2015. "The right to health: what model for Latin America?" <i>Lancet</i> , 385(9975). Pp. 34-7.
PH9	Argentina's health profile	A brief overview of Argentina's health profile, analyzing major causes of morbidity and mortality within the context of the social determinants of health and equity in health.	Fleischer N, Diez Roux A, Alazraqui M, Spinelli H, De Maio F. 2011. "Socioeconomic gradients in chronic disease risk factors in middle-income countries: evidence of effect modification by urbanicity in Argentina." <i>American Journal of Public Health</i> , 101(2). Pp. 294-301. Leguizamón A. 2016. "Environmental injustice in Argentina: struggles against genetically modified soy." <i>Journal of Agrarian Change</i> , 16(4). Pp. 684-692.
PH10	Argentina's health workforce	Argentina's health workforce and its challenges (tertiary and university education, decentralization, faulty regulation, geographical imbalances, economics) within the greater context of the Argentine health system.	Dussault G, Franceschini M. 2006. "Not enough there, too many here: understanding geographical imbalances in the distribution of the health workforce." <i>Human Resources for Health</i> , 4(12). Borracci RA, Arribalzaga EB, Couto JL, Dvorkin M, Ahuad Guerrero RA, Fernandez C, Ferreira LN. 2015. "Factors affecting willingness to practice medicine in underserved areas: a survey of Argentine medical students." <i>Rural and Remote Health</i> , 15(4), 3485.

Field Activities and Guest lectures associated with this Country Module:

PH8: Case studies activities, visit to PHC centers, rural visit, informal settlement visit

PH9: Case studies activities, visit to PHC centers, neighborhood day, informal settlement visit, rural visit

PH10: Rural visit, visit to PHC center, health workers' panel

Assignments:

Mapping the Healthcare System Argentina:

In light of your observations, lectures and readings, map out the Argentinian healthcare system and draw connections to your case study topic. See full instructions listed under Mapping the Healthcare System USA (p.4).

Country Module Assignment #3: Universal Health Coverage in Argentina

Argentina's health system is undergoing reform, with the implementation of Universal Health Coverage (UHC). In doing so, it joins a regional and global trend. Building on the "mapping the healthcare system Argentina" assignment, submit an essay, of no more than 1500 words, in which you describe and discuss

this reform with the help of material from readings, lectures and other program activities. The essay should cover the following points:

- A very brief summary of the “mapping the healthcare system Argentina” assignment
- A description of the World Health Organization’s UHC proposal, in the context of the debate surrounding it in Latin America
- An analysis of UHC in Argentina based on one (or more) dimensions of public health e.g. the right to health, accessibility, comprehensiveness of care, health prevention and promotion
- A final reflection about the Argentine health system

Additionally, you can draw on the following sources:

- The WHO’s page on UHC (http://www.who.int/healthsystems/universal_health_coverage/en/)
- The Lancet’s series on UHC in Latin America (<http://www.thelancet.com/series/latin-america-UHC>)
- International and local media sources like The Buenos Herald, The Bubble, The Argentina Independent, etc.

Country Module Assignment #3: Grading Rubric

Points	0-12	13-14	15-16	17-18	19-20
Relevance of content	Answer is not relevant	Answer is unclear and confusing	Answer is relevant, yet unsophisticated	Answer is relevant, and demonstrates an adequate understanding of PH course content	Answer is relevant, and demonstrates a deep understanding of PH course content
Integration of other program components	Does not integrate evidence from program components	Integrates minimal evidence from program components	Integrates limited evidence from program components	Utilizes evidence from program components, but not exceptionally well in answering the prompt	Utilizes strong and insightful evidence from program components in answering the prompt
Final reflection	Does not provide a final reflection	Final reflection is unclear and confusing	Final reflection is clear, yet not relevant	Final reflection is clear and relevant, and demonstrates an adequate understanding of the health system	Final reflection is clear and relevant, and demonstrates a deep understanding of the health system
Components and Writing Style	Assignment was turned in late or is missing most components; a number of spelling and grammar mistakes are present	Assignment is missing several components; style is confusing and mistakes are present	Assignment is missing some components; style is straightforward and not compelling. Some mistakes may be present	Assignment addresses most components; style is fluid, language is somewhat compelling. No significant mistakes present	Assignment strongly fulfills all components outlined in prompt; style includes compelling language, no significant errors present

Comparative Module Four: Buenos Aires, Argentina

Lectures and Readings

Session	Lecture Topic	Key Concept	Reading
GH11	Discussion on the comparative aspects of the PH and GH class experiences	Arc of personal learning across the PH and GH classes	None

Assignment: PH/GH Comparative Auto-Ethnography, Individual Self-Assessment of Learning

This assignment is shared between the PH and GH classes and is worth 10 points in each class (total of 20 points, evenly distributed between the two classes).

For this assignment you will complete three steps:

1. Review your PH and GH work for the semester
2. Complete an Individual Self-Assessment Rubric
3. Write a narrative learning analysis to demonstrate the merit of your self-assessment

Helpful Hints:

This assignment is meant to get you reflecting and thinking—not to do new research. Just build on what you have. The only new writing you will do is your responses to the questions in Step Three. Don't make this harder than it needs to be! Have a little fun with it!

****NB*** All work (grading rubric, writing, and artifacts) should be submitted as ONE Word Doc or PDF file of a reasonable size. You can use an app like "PDF Compressor" to make your file size smaller, if needed.*

Step One: Review your PH and GH work for the semester

Step One is a comparative, reflective activity, it has no written component. Compile, compare, and reflect upon the PH and GH portfolios of assignments you have built throughout the course of the semester. The idea is to review your work with an eye towards developing a more holistic sense of your learning across the two classes and the four countries—to get you thinking about your own work, analyzing your experiences, and strategizing how you will assess and demonstrate your learning in steps two and three.

Questions you may ask yourself when reviewing your work include:

1. How do the portfolios of assignments demonstrate your learning?
2. What has changed in your understanding of public health, globalization, everyday experiences of health, wellbeing, disease, or illness?
3. What interplay have you noticed between public health and globalization?
4. What connections have you been able to make between local experiences and national or global policies/trends?
5. Have you noticed that your own work took on a certain theme or interest?
6. What are you passionate about and how has that impacted your foci this semester?

Step Two: Complete an Individual Self-Assessment Rubric

You will assess your reflexivity and overall intellectual engagement, the ways in which you have made connections between public health and globalization, and how you have integrated class content and your experiences in all four countries into your learning process.

Copy and complete this individual self-assessment rubric. In "Step Three" you will offer a comparative analysis of your work across the semester to demonstrate the merit of your self-assessment. As long as

the narrative you offer in Step Three supports the grade you give yourself on this rubric, *YOU WILL RECEIVE THE GRADE YOU ASSIGN YOURSELF.*

Critical Comparative Portfolio Analysis Grading Rubric/Worksheet

Directions: Each row addresses a learning objective to be assessed in this assignment. For each row, consider the grading rubric and the qualities associated with each point value. In the last column of the rubric worksheet, give yourself the points you feel are fair and accurate for that row. Then add the values in the last column to calculate your overall score for the assignment. Note: there is a total of 20 points available.

Points	0-3	3-4	4-5	5-6	YOUR GRADE
Reflexivity and Intellectual Engagement	Student does not reflect on own experiences as learning develops	Student minimally reflects on learning, does not develop lines of inquiry across the semester	Student reflects on own learning meaningfully, makes an attempt at developing lines of inquiry across the semester	Student reflects on own learning in critical and creative ways, develops clear lines of inquiry across the semester	
Retrospectively integrate PH and GH course materials to demonstrate interplay of concepts, and real life impact	Cannot demonstrate interplay of PH and GH concepts, or real life impact	Can minimally demonstrate interplay of PH and GH concepts, make some attempts to show how these concepts translate to real life impact	Can meaningfully demonstrate interplay of PH and GH concepts to show a few examples of how these concepts translate to real life impact	Can deeply demonstrate interplay of PH and GH concepts to show well developed understanding of how concepts translate to real life impact	
Integrate GH and PH with overall IHP learning to demonstrate comparisons among countries and disciplines	Cannot demonstrate comparisons relevant to PH or GH among different countries and disciplines	Can minimally demonstrate comparisons relevant to PH or GH among different countries and disciplines	Can meaningfully demonstrate comparisons relevant to PH or GH among different countries and disciplines with a few compelling examples	Can demonstrate thoughtful, organized comparisons relevant to PH or GH among different countries and disciplines with compelling or creative examples	
Effort	Give yourself up to 2 points for effort.				
ADD YOUR POINTS AND GIVE YOURSELF A FINAL GRADE					

Step Three: Write a narrative learning analyses to demonstrate the merit of your self-assessment

Respond to each prompt. You may either answer them one at a time or as a single flowing narrative. Your total response to Step Three should be no more than 1500 words, **plus** artifacts or copies of assignments as required by the prompt. You must submit artifacts.

Helpful Hints:

For questions 2 and 3, choose assignments you have produced this semester and other artifacts (items, photos, or other items that you have collected along the way) and organize them so that they tell a story of your learning.

For questions 2 and 3, include a snapshot of your portfolio assignments or artifacts (or a copy/paste of your assignment/writing) so I can see the items you reference when I read your analysis. Remember: Don't make this harder than it needs to be! Have a little fun with it!

1. Be reflective—what have you learned by comparing public health and globalization across the semester? How has your learning in the PH and GH classes contributed to a more sophisticated understanding of how public health and globalization are related? Where does this learning leave you in your personal sensibilities about the critical issues in both public health and globalization?
2. Select 2 portfolio assignments from each of your PH and GH portfolios (total of 4 assignments you completed) that demonstrate your intellectual engagement and integration of the content of these classes into a broader set of interrelated ideas. The assignments you choose should allow you to build out an analysis that incorporates comparisons between countries, as well as comparisons between the two classes and perspectives taught in each class. The goal is to demonstrate that you have developed an understanding of how public health and globalization are interrelated and mutually impactful. Include a snapshot of your portfolio assignments or a copy/paste of writing so I can see the assignments when I read your analysis.
3. Select 2 or 3 “artifacts” that are meaningful to you – these should be items that specifically relate to your journey of learning about and understanding of the interplay between public health and globalization in the countries we have visited. These “artifacts” can be photographs that you have taken, pieces of personal writing, or other items you have collected along the way. These are not full portfolio entries, but could be excerpts from your classwork. Include a snapshot of your artifacts or a copy/paste of writing so I can see the artifacts when I read your analysis. Analyze the artifacts to show how they offer a narrative of reflective learning across the semester. For example, you may include three photos you took that represent how macro forces of globalization play out in everyday experiences of health... or you may include a photo of a train ticket and a bit from a journal entry to demonstrate how one particular excursion encapsulates your learning or inspired it. The goal here is to show integrated, holistic learning that draws on your classes, but also your semester experience at large.

Expectations and Policies

Participation

IHP is an experiential learning program. You have to show up to have the experience. As such, 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 by IHP staff, faculty, or fellow. 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. An example make-up assignment for missing a class could be a short summary of the required and suggested readings for the day's class. 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.

Late Work

All work for this class must be submitted by the end of the 3rd week of each country program to allow time for the local faculty to grade the assignment and return it before students leave the country. Any grade disputes must be settled before the program leaves the country, no exceptions. Exact deadlines for assignments will be confirmed in class. 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. Late work will only be accepted with the consent of the instructor *prior* to the deadline and will result in a lowering of the grade one full step (for example, from a B to a B-) per day, as per SIT's policy. Due to the nature of the Country Module structure, late work will be difficult to manage—so work hard to be on time.

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 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 or that the electronic device is part of a specific workshop. As is always the case, students with accommodations through SIT are welcome to use technology as is appropriate.

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.

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; 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 cited, quoted,

paraphrased, or summarized, and research or critical papers should acknowledge these sources in footnotes or by use of footnotes.

Violations of SIT Study Abroad academic integrity policy are handled as violations of the student code of conduct and will result in disciplinary action. Please discuss this with your traveling faculty if you have questions.

General Considerations

- Show up prepared. Be on time, have your readings completed and points in mind for discussion or clarification. Complying with these elements raises the level of class discussion for everyone.
- Have assignments completed on schedule, printed, and done accordingly to the specified requirements. This will help ensure that your assignments are returned in a timely manner.
- Ask questions in class. Engage the lecturer. These are often very busy professionals who are doing us an honor by coming to speak.
- Comply with academic integrity policies (no plagiarism or cheating, nothing unethical).
- Respect differences of opinion (classmates', lecturers, local constituents engaged with on the visits). You are not expected to agree with everything you hear, but you are expected to listen across difference and consider other perspectives with respect.

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.

NB: The instructors retain the right to change the syllabus as needed. Given the flexible field program, changes may occur that are beyond our control.