

## International Honors Program IHP Health and Community Track 2

### **Public Health: From Biology to Policy** (IPBH3505 / 4 credits / 60 class hours)

*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**

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. You may opt in or out of getting hard copies.

## Methodology

This course is organized into an introduction and four modules. You will have local faculty in each program location who will teach the classes for module delivered in that country program. Your local faculty will give and grade the assignments for their module. All local faculty have collaborated and normed assignment expectations, rubrics, and grading. The collection of your GH assignments will become your “GH 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 via Moodle. 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 Moodle site. Assignments are due the day assigned, uploaded to Moodle. Grades will be returned via Moodle as well.

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.

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

Name\_Country\_NameOfAssignment.doc  
 e.g. Josslyn\_South Africa\_MappingHealthcareSystem.doc

For hard copy assignments, you may be asked to submit the original. KEEP A DIGITAL 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

<u>Assignment</u>	<u>Points</u>
Launch Module: Mapping the Healthcare System USA; Neighborhood Activity	0
Mapping the Healthcare System Vietnam	10
Country Module Assignment Vietnam	20
Mapping the Healthcare System South Africa	10
Country Module Assignment South Africa	20
Mapping the Healthcare System Argentina	10
Country Module Assignment Argentina	20
Comparative Module: Critical Comparative Portfolio Analysis	10
Total Possible	100

<b>Grading Scale</b>					
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+				
<b>Note:</b> 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 I	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, DC Health Disparities Guest Lecture, Neighborhood Day, Case Study Day, Health Care Center Site Visits*

#### 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.

#### Required

1. What is Public Health? (Click through all of drop-down menus to review)  
<http://www.aspph.org/discover/>
2. Braveman, P. and Gruskin, S. 2003. Defining equity and health. *Journal of Epidemiological Community Health*. Apr; 57(4):254-8.  
<http://jech.bmj.com/content/57/4/254.full.pdf+html>
3. *Global Health Watch* (open source documents) 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! Seriously—just skim!
  - a. Review the Global Health Watch Homepage  
<https://www.ghwatch.org/about.html>
  - b. Click here to see GHW 4—choose one article per section to explore  
<https://www.ghwatch.org/node/45484.html>

#### 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 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.

This assignment will contain a visual plus about 1,000 written words. You will demonstrate your knowledge in three steps:

1. Draw a map that shows an overview of the public health care system.
2. In about 700-800 words, you will narrate your map of the healthcare system, explain some of the strengths and challenges. Show that you have a clear concept of the major parts of the system.
3. Address one of these two aspects in your final 200-300 words:

- a. 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.
- b. Describe other systems and networks of care that complement or fill in gaps of the formal Public Health system.

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 these grades consisting of an A, A-, B, or no credit. This is a simplified grading system, designed to assure that you do a minimum of B level work on these fundamental assignments. 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.

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

## Country Module: Hanoi, Vietnam

### Lectures and Readings

Session	Lecture Topic	Key Concept	Reading
PH2	Vietnam's health care and typical public health issues	"Three Profiles" Aging, Mental Health, and Injury	MOH. Annual Health Review 2016. pp. 66-69; 97-99.  Cohen E. (2016). Prevention strategies and mental health in Vietnam. <i>Journal of Social Sciences and Humanities</i> . 2(5): 508-518.  Le N.D.T. et al. (2019). Evaluation of an integrated multisector campaign to increase child helmet use in Vietnam. <i>Inj Prev</i> . 25(3): 206–210.
PH3	Disability, challenges, and the national responses	Disability, traditional beliefs, stigma and policy response	Palmer M, Groce N, Mont D, Nguyen OH, Mitra S (2015) The Economic Lives of People with Disabilities in Vietnam. <i>PLoS ONE</i> 10(7): e0133623. doi:10.1371/journal.pone.0133623  Institute for Studies of Society, Economic and Environment. Ending Stigma: Assessment from the Perspectives of People with Disabilities. Ha Noi 2017. pp. 10-17.  Lena M. Banks, Matthew Walsham, Hoang Van Minh, Vu Duy Kien, Vu Quynh Mai, Tran Thu Ngan, Bui Bich Phuong, Dang Ha Son, Nguyen Bao Ngoc, Doan Thi Thuy Duong, Karl Blanchet & Hannah Kuper (2018). <i>Disability-inclusive social protection in Vietnam: A national overview with a case study from Cam Le district</i> . International Centre for Evidence in Disability Research Report: London, UK. pp 16-28.
PH4	Mother and child health issues and current solutions	Maternal and child mortality, nutrition, equity, and reproductive health	Monitoring The Situation of Women and Children. Vietnam multiple indicator cluster <a href="#">survey 2014</a> . Final Report, pp. 3-6, pp. 20-23.  The Situation Analysis of Children in Vietnam 2016. Ha Noi 2017, pp. 98-100; 102-105, and 113-118.

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 Vietnam

##### 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? What is working well in Vietnam to address this issue? What is a challenge to resolve this issue?

Recognizing the limits of your knowledge base, and using your intellectual imagination, also consider what an intervention might look like:

- 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**

<b>Points</b>	<b>0-12</b>	<b>13-14</b>	<b>15-16</b>	<b>17-18</b>	<b>19-20</b>
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: Cape Town, South Africa

### Lectures and Readings

Session	Lecture Topic	Key Concept	Reading
PH5 (2 hours)	Overview of South Africa's public health system, and profile of the country's Burden of Disease	quadruple burden of disease, access to public health system, social determinants of health in South African context	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; formalization of traditional healthcare system	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.  <u>Recommended:</u> Mathee, A., 2011. Environment and health in South Africa: Gains, losses, and opportunities. 32(S1): S37-S43.
PH7	Changing Landscapes of Care	National Health Insurance, private healthcare in South Africa & private/public partnerships, community engagement and community-based care workers	Colvin, C.J. & Swartz, A., 2015. Extension agents or agents of change? K. Maes, ed. <i>Annals of Anthropological Practice</i> , 39(1), pp.29-41.  Versfeld, A. et al., 2018. Empathic response and no need for perfection: reflections on harm reduction engagement in South Africa. <i>Critical Public Health</i> , 28(3), pp.329-339.

#### Field Activities Associated with this Country Module:

*PH5:* All programmatic elements that explore the current health system and burden of disease; most relevant are Neighborhood Day, the First Thousand Days guest lecture, the clinic visit with Sister Patel, the panel on TB care,

*PH6:* Lectures that give a historical overview of the SA health system, and general South African history. This includes the history lectures on pre-colonial history & colonial history, and history from 1948-present, District Six Museum visit, the lectures on African religion and healing systems, Lwandle Labour Museum

*PH7:* Elements that explore the changing relations between state and non-state actors in public health, including field visits with NGOs, the Treatment Action Campaign, and Community Health Workers

### 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 South Africa  
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 South Africa: Grading Rubric**

<b>Points</b>	<b>0-12</b>	<b>13-14</b>	<b>15-16</b>	<b>17-18</b>	<b>19-20</b>
<b>Conference Poster</b>	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, 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.
<b>Integrates program Components</b>	Does not cite evidence from program components	Integrates minimal evidence from program components	Integrates limited evidence from program components	Uses evidence from program components, but not exceptionally well	Utilizes strong and insightful evidence in both the map and the explanation
<b>Writing Style</b>	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
<b>Components</b>	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: Buenos Aires, Argentina

### Lectures and Readings

Session	Lecture Topic	Key Concept	Reading
PH8	Argentina's health system	Tripartite health system; right to health; decentralization; primary healthcare	<p>Required: 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.</p> <p>Recommended: 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.</p>
PH9	Health inequalities in Argentina: the case of metropolitan Buenos Aires	Health inequalities; spatial inequality; urbanization	<p>Required: Forster T et al. 2019. "Globalization and health equity: The impact of structural adjustment programs on developing countries". <i>Social Science &amp; Medicine</i>. [Epub ahead of print]</p> <p>Saccomano C. 2015. "Inequality in Buenos Aires and the causes of spatial segregation: Two sides of the same coin". <i>Institut Barcelona d' Estudis Internacionals</i>. 20 pp.</p> <p>Recommended: Bilal U et al. 2019. "Inequalities in life expectancy in six large Latin American cities from the SALURBAL study: an ecological analysis". <i>Lancet Planet Health</i>, 3. Pp. e503–10</p> <p>Diez Roux AV, Franklin TG, Alazraqui M, Spinelli H. 2007. "Intraurban variations in adult mortality in a large Latin American city". <i>Journal of Urban Health: Bulletin of the New York Academy of Medicine</i>, 84(3). Pp. 319-333.</p>
PH10	Argentina's health profile: malnutrition from a food sovereignty perspective	Food sovereignty; food security; Big Food; double burden of malnutrition; genetically modified soy model	<p>Stuckler D, Nestle M. 2012. "Big Food, Food Systems, and Global Health". <i>PLoS Med</i>, 9(6). Pp. e1001242</p> <p>Leguizamón A. 2016. "Environmental injustice in Argentina: struggles against genetically modified soy." <i>Journal of Agrarian Change</i>, 16(4). Pp. 684–692.</p>

*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 Argentina**  
**Argentina’s contribution to the “perfect health system”**

Based on the idea of Mark Britnell’s book “In search of the perfect health system”, write an essay, of no more than 1500 words, in which you identify what Argentina’s health system could contribute to the “perfect health system”. In doing so, make sure to include the following points:

- A clear identification of which feature of the health system you’ve chosen, such as a core principle e.g. universality, a key component e.g. health workforce or a specific health policy e.g. elderly care.
- A description of the feature identified, clearly explaining its comparative strength and highlighting any existing tensions.
- An analysis of the broader underlying social issues which could help to explain the strength of the feature you’ve chosen.
- The establishment of connections to other program components.
- A conclusion in which you share your personal impressions of the feature, in the context of your Public Health program experience.

**Country Module Assignment Argentina: Grading Rubric**

<b>Points</b>	<b>0-12</b>	<b>13-14</b>	<b>15-16</b>	<b>17-18</b>	<b>19-20</b>
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
Identification, description and analysis of health system feature	No health system feature is identified; description and analysis aren’t comprehensible	Health system feature is not clearly identified; poor or confusing description and analysis	Health system feature is clearly identified; description and analysis are unsophisticated	Health system feature is clearly identified; description and analysis demonstrate an adequate understanding of PH course content	Health system feature is clearly identified; description and analysis demonstrate a deep and insightful 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
Writing Style	Writing style isn’t 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 are present	Writing style includes compelling language, no spelling/grammar errors present

## Comparative Module: Buenos Aires, Argentina

### Lectures and Readings

Session	Lecture Topic	Key Concept	Reading
PH11	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 analyses 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.**

**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.

### 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
<b>Reflexivity and Intellectual Engagement</b>	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	
<b>Retrospectively integrate PH and GH course materials to demonstrate interplay of concepts, and real life impact</b>	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	
<b>Integrate GH and PH with overall IHP learning to demonstrate comparisons among countries and disciplines</b>	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	
<b>Effort</b>	Give yourself up to 2 points for effort.				
<b>ADD YOUR POINTS AND GIVE YOURSELF A FINAL GRADE</b>					

## **Expectations and Policies**

### **Class preparation**

This program is built upon the conviction that experiences result in deep insights and powerful learning. Course assignments are created to facilitate such first-hand learning opportunities. Dialogue in class about these insights and participation in these activities is critical. For this reason, your participation is required. As a learning community, each one of us influences 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.

### **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.* There will be times when technology is needed for presentations or projects. Faculty will advise students of these times. Of course, students with accommodations are always welcome to have the technology needed.

### **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 of 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.* 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.

### **Materials**

All course readings will be electronically available from the first week. Hard copy of required course readings will be distributed once you arrive in each country, except in the case of the USA where the readings were sent to you as part of your pre-departure assignments. Students are responsible for downloading these materials and can print the optional readings at their own discretion. You may opt in or out of getting hard copies.

### **Policy on deadlines**

Unless otherwise noted, coursework assignments are due on the day of the deadlines via Moodle (or on paper for a few assignments). Unexcused late work will result in a lower grade one full level per day (for example, a B will drop to a B-). No exceptions will be permitted; extensions are not given unless there are necessary circumstances. Exact deadlines for assignments will be confirmed by the instructor and provided to students at the start of each country program.

*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 taking photos or scanning any handwritten assignments. Assignments that are not easily legible will be returned ungraded.*

### **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 faculty if you have any questions.

**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 Program Director or 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.***