



University of Maryland College Park School of Public Health Department of Kinesiology



<http://www.sph.umd.edu/KNES/>

KNES 400 – The Foundations of Public Health in Kinesiology

Semester: Spring 2016
Classroom and Time: ARM 0131, Mon & Wed, 11:00am-11:50am
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Course Context: While there is growing recognition that physical activity is beneficial to one's overall health – both physical and mental - there is also an awareness of the difficulty that many people face when trying to achieve adequate levels of movement in their daily lives. Increasingly, we understand that although education and individual motivation are important, these individual factors are by no means the only determinants of physical activity. Rather, a host of environmental, social, cultural and political determinants must be addressed if we wish to bring physical activity to the lives of the Americans, including groups that face particular physical activity/movement barriers (e.g., people on low income, people with disabilities, LGBT populations, to name a few).

Course Description: This course provides students with a broad introduction to the core principles and goals of public health from a kinesiological perspective. Topics to be addressed include: history of public health and physical activity; basic principles of the epidemiology of physical activity; correlates and determinants of physical activity and health across the socio ecological model; public health policy development aimed at encouraging regular physical activity; social justice and physical activity; the basic design, implementation and evaluation of community level physical activity interventions; the impact of social, political and economic contexts on health, as well as the creation of health disparities; the impact of the built environment on physical activity and health; and the significance of health systems and health policy on the physical activity and health of populations. Exploration of these topics within the context of kinesiology will provide students with a more nuanced understanding of the relation of physical activity to public health, health disparities, and the prevention and treatment of chronic disease.

Course Pre- and Co-requisites:

Required: KNES 287, KNES 360

Course Learning Objectives:

Upon completing this course, the student will be able to:

1. Define public health, including its key goals and objectives, and differentiate it from biomedicine
2. Identify key periods/trends in the history of public health practice, placing these trends in the wider social and political context in which they occur
3. Describe correlates of physical activity (and health) across the socio-ecological model
4. Discuss and analyze physical activity from a social justice perspective
5. Discuss how public policy can impact physical activity rates and health – both positively and negatively
6. Critically analyze the concept of ‘lifestyle’ as it relates to population health
7. Explain the main goals of physical activity epidemiology as well as associated statistics, including rates, risk factors, risk ratios, association and causation
8. Describe the broad applicability of epidemiologic methods to clinical science and public policy, and identify the strengths and weaknesses of epidemiology in these contexts
9. Describe key ethical issues that arise in the context of public health and physical activity
10. Identify the main elements of public health interventions (assessment, intervention design and implementation, evaluation), and explain the difference between community-based and community development/organizing approaches, especially as they pertain to physical activity research.
11. Evaluate a range of physical activity interventions in terms of strengths, weaknesses and future possibilities
12. Analyze the relationship between physical activity and a health issue and/or population, including a consideration of the physiological, psychological, social and political dimensions that underlie the relationship

Kinesiology Competencies Addressed in this Course:

The following competencies for the Kinesiology program are addressed in this course:

1. Students will interpret, synthesize, and critically analyze research underlying the kinesiological dimensions of physical activity and health.
2. Students will develop principled reasoning skills necessary to apply and extend kinesiology knowledge to address problems that are relevant to physical activity and the health of diverse populations.
3. Students will integrate, interrogate, and communicate the connection between the scholarship of kinesiology and the goals of public health.

Required Texts and Other Readings:

Required: All readings will be provided on Canvas (through ELMS)

Additional Materials Required: Computer access to Canvas

Course Requirements:

Lectures/Readings: Although the weekly lectures will be related to the assigned readings and/or video, the lectures are far more than an overview of these items. In many cases, the readings/video will act as

a supplement to the lecture material, but will not be the focus of the lecture itself. For this reason, attending lectures **and** doing the readings/viewing videos are crucial for success in the course. You will be tested on lecture and reading/viewing material in the quizzes and final exam, and this material will also be relevant to the assignments. All readings will be posted online, and videos will be available for viewing online (often through the UMD library system). Please note that **key readings and documentaries will have reading/viewing prompts** that are intended to help you to focus upon the important aspects, and make connections across the course material.

PowerPoint slides are only part of the lecture, and it is my expectation that you will be at the lecture and taking notes (or listening) so as to supplement the PowerPoint slides. **PowerPoint slides will be made available the morning of the lecture**. I highly recommend that after each class, you review the notes taken in class in relation to the PowerPoint slides. This is a good habit to get into and this short review after lecture will help to ensure you understand the material, and help you keep up with the Key Concept (see below).

Key Concepts: Each week, I will provide a handful of **key concepts**. You should be able to define and apply these concepts to the issues discussed in class. THESE KEY CONCEPTS WILL INFORM THE QUIZZES AND THE FINAL EXAM, and so I highly encourage you to keep up with them throughout the semester and, if you are having difficulty, ask for assistance, especially in lecture, discussion section or during office hours. The TA's and I prefer to discuss key concepts in person as opposed to via email, as this results in a better level of understanding on your part and is a more efficient use of our time.

Weekly Quizzes: The beginning of lecture on Monday will be set aside for a weekly quiz (with the exception of Weeks 1, 2 and 13). **The quizzes will be given throughout the semester in lieu of a midterm**. Each quiz will focus upon material from the previous week (unless otherwise specified) and questions may come from lecture material, key concepts, and readings/documentaries (with a focus on reading prompts). In the first five minutes of class, you will be told the focus of the quiz and will be provided with some prompts that you can discuss with your classmates in order to prepare for the quiz. You will then be given 5-10 minutes to write the quiz (depending on the quiz for that day). Quizzes will be graded via peer-review in Discussion Section that same week, which will allow for you to develop a deeper understanding of the quiz material as well as receive feedback on your level of comprehension of key concepts/ideas in a timely manner. Each quiz will be worth 2%, and although 12 quizzes will be given throughout the semester, your top 10 quiz grades will be counted.

Make-up quizzes will NOT be given unless: (1) a medical note is provided **within one week of the missed quiz**; or (2) you miss the quiz due to a university-sponsored event in which case you **MUST** provide documentation at **least one week in advance of the quiz, and make alternate arrangements to write it**.

If you miss a quiz and do not have medical or university documentation, DO NOT send an email to me or the TA's to explain why you missed the quiz and/or to ask for a make-up quiz. Given that there are 12 quizzes scheduled and only 10 will count towards your grade, you can miss 2 quizzes without penalty, if you so choose.

Participation Grade (Total 15%): A portion of your final grade will be based upon your attendance at and participation in both Lecture and Discussion Section.

Lecture (5%): On Wednesday lectures, you should get in the habit of picking up an index card/piece of paper on your way into the lecture hall (from the TA's). At some point in lecture, you will be asked (often in groups) to discuss an idea/issue and provide some written bullet points of your discussion **on**

your own index card/piece of paper that will be handed in at the end of lecture. Your answers will not be graded, but rather they will provide me with feedback on how/if you are engaging with course content, and they will also go towards your participation grade. **If you are late to class (i.e., arrive after 11am) you WILL NOT receive an index card/piece of paper to fill out from the TA.** You can use your own piece of paper but will only receive partial points.

Discussion Section (10%): Please note that you will not be awarded the full participation grades by merely attending Discussion Section. Rather, your level of interest, preparation and participation will be noted and you will receive a grade accordingly. Disruptive behavior in Discussion Section (i.e., side conversations not related to the discussion, especially when the TA is trying to convey information to the rest of the class) will result in the deduction of points.

Documentary Reflections (10%): Throughout the course, you will be required to watch a range of documentary films, and will be asked to provide written reflections on three of them (you will be given specific prompts). The reflections are to be posted online via Canvas on the stated due date. Your grade for this portion will be the average of your **two** best reflections.

Major Grading Assignments:

Final exam (10% total): The final exam will be based on lecture material, readings/documentaries, and key concepts. The final exam is considered a major grading assignment and will be cumulative.

Assignments (45% total): There are two major assignments in the course. An overview of each assignment is provided below. This information is also posted in the “Assignments” section of CANVAS, along with grading rubrics and the various Discussion Section worksheets/handouts relevant to the assignments.

ASSIGNMENT 1: Determinants of Physical Activity for a Specified Population (20%) (addresses Kinesiology Competencies 1 & 2)

Synopsis: For this assignment, you will be required to select a population that experiences a health disparity and/or faces particular challenges to engaging in physical activity. Drawing upon peer reviewed journal articles, identify and discuss determinants of physical activity behaviors at four levels of the socio-ecological model.

Instructions: The paper should be approximately 4-6 pages in length (double-spaced), or 1000-1500 words, not including references. It should consist of the following sections: Introduction, Main Body, Conclusion. At least **four peer reviewed journal items should be cited (in APA format)** and my lectures may NOT be cited (my lectures are informed by peer reviewed articles, and so if you wish to cite an idea from lecture, you need to track down the journal article – typically listed on my slides - and cite this source). More information about each section is provided below, with additional detail to be posted on Canvas, along with grading rubric and relevant Discussion Section worksheets. Please note that there will be writing workshops in Discussion Section in Weeks 5 & 7, one to assist you with planning your paper and the other focusing on proper citation style. You will not be required to bring anything to Discussion Section for these workshops, although a laptop in Week 5 will be helpful.

Introduction (~1/2 to 1 page): Clearly identify the population of focus and, citing epidemiological data, identify the health disparity (incidence or prevalence) that exists within this population and/or identify

the prevalence of physical activity within this population. I encourage you to discuss your population of focus with your TA prior to starting any in-depth work on the assignment.

Main body (~3-4 pages): Explore determinants of physical activity for this population, focusing on at least four levels of the socio-ecological model. Be sure to provide an adequate explanation of each determinant (cite evidence to support your explanation).

Conclusion (~1/2 – 1 page): Based upon your examination of PA determinants for the population, how best might one intervene in order to increase physical activity in this population and why do you feel this is the best approach?

ASSIGNMENT 2: Assessment of a Public Health Program/Intervention (25%)

Synopsis: For this assignment, you will select a public health intervention or program on a topic, population or issue that you find to be of particular interest, and examine the various aspects of this intervention. I encourage you to consider choosing an intervention that aligns with the population you focused upon for Assignment 1. After providing a brief introduction of the intervention and examining relevant literature to further contextualize it, you will provide more specific details of the intervention or program, assess its strengths, weakness, and conclude with ways it might be improved. The overarching aim of the assignment is for you to learn more about how public health interventions or programs function at the same time that you apply concepts from the course (including at least one social theory) to both situate and critically examine such interventions/programs.

***When selecting an intervention:**

- You can (but do not have to) focus on one of the intervention examples discussed in the course.
- It can be a formal 'intervention' (with control and intervention groups) or a more informal program. Moreover, it can be in the earlier (effectiveness) testing phase or widespread dissemination stage whereby distributed (translated) to various community contexts. However, a key selection criteria is that enough information must be available so that you can address assignment requirements
- Intervention/program can be currently in use or can be a past intervention
- If you are unsure if your intervention is appropriate, please ask - and sooner rather than later!
- YOU CANNOT MAKE UP YOUR OWN INTERVENTION

Instructions: The paper should be approximately **7-9 pages** (double-spaced), not including references. It should consist of the following sections: Introduction, Program Description, Assessment, Conclusion and References. You must refer to a **minimum of 6 peer reviewed journal articles** for this project. If you choose the same population that you focused on for assignment 1, you can use some of the same reference. My lectures may NOT be cited (my lectures are informed by peer reviewed articles, and so if you wish to cite an idea from lecture, you need to track down the journal article – typically listed on my slides - and cite this source). More detail on each section is provided below, with more detailed instructions on Canvas, as well as grading rubric and relevant Discussion Section worksheets. Note that there will be a series of workshops in Discussion Section (weeks 10-12) in which you will be asked to bring in drafts of your assignment in various stages (e.g., initial idea, draft of intro and intervention description, etc) so that you can workshop it with peers.

Introduction of Intervention/Issue (~ 1 page): State your intervention/program of focus, with a brief description of its overall aim/goal (i.e., what problem or issue does it attempt to address and how?). Explain layout of remainder of paper.

Program Description (~ 2 pages): In this section you must provide a description of the intervention. This should include (at a minimum) the following: Basic description (i.e., Who does it target? What is involved? What are its specific goals and aims? What stakeholders are involved? Funders? Other details you deem important?); What type of intervention? (e.g., informational, behavioral/social, environment/policy or a combo thereof?); Does it appear to be based on any specific theories? Levels of SEM that it attempts to target?

Assessment (~ 3-4 pages): This will entail a thoughtful assessment of the intervention in which you consider the possible determinants of PA for the population of focus for each level of the SEM, and think about how the intervention addressed these determinants (or not). Within this will be a discussion of the various strengths and weaknesses of the intervention. Be sure to explain WHY these are strengths and weaknesses. You should include concepts and ideas discussed in class, where appropriate, and at least one of the social theories or concepts (e.g., habitus, intersectionality, political economy of health; structural discrimination) discussed in class should be applied in your discussion for full points.

Conclusion (~1-2 pages): Summary of key points and how intervention could be extended and/or improved upon.

Course Policies:

Email – The Official University Correspondence:

Verify your email address by going to www.my.umd.edu.

All enrolled students are provided access to the University's email system and an email account. *All official University email communication will be sent to this email address* (or an alternate address if provided by the student). Email has been adopted as the primary means for sending official communications to students, so email must be checked on a regular basis. Academic advisors, faculty, and campus administrative offices use email to communicate important and time-sensitive notices.

Students are responsible for keeping their email address up to date or for redirecting or forwarding email to another address. Failure to check email, errors in forwarding email, and returned email (from "full mailbox" or "unknown user" errors for example), will not excuse a student from missing University announcement, messages, deadlines, etc. Email addresses can be quickly and easily updated at www.my.umd.edu or in-person at the Student Service Counter on the first floor of the Mitchell Building.

For technical support for University email: www.helpdesk.umd.edu or call 301-405-1400.

CORRESPONDENCE with INSTRUCTOR: If you have a question about the course, please inquire with your TA first. If you need to speak with me about a personal matter, please email me and set up a time to speak or come to my office hours. Please correspond with me through the CANVAS system, and not my UMD email account. I only check (and respond to) email once per day (typically in the late afternoon) and not on the weekends. Therefore, if you have a question, do not wait until the last minute to ask. Also, if you have a question about a concept or idea

from class that requires some amount of explanation, I will ask that you come and speak with me or the TA in person as writing an answer via email is not the most efficient use of our time.

Absence Policy:

In accordance with University policy if you are absent for a single (1) lecture due to illness or some form of personal or family emergency, this absence will be considered “excused” and the instructor will accept a note from you attesting to the date of the illness/incident, along with an acknowledgement that the information is true. Please note that if you miss one of the quizzes due to this illness or personal/family emergency, you will not be allowed to make-up the quiz unless you provide a medical note (or other acceptable documentation) within a week’s time. Because we count only 10 of the possible 12 quiz grades, you actually are allowed 2 ‘excused’ absences in this course with regard to the quizzes, and you are not required to notify us of your absence.

Multiple or prolonged absences, and absences that prevent attendance at a major scheduled grading event (like an exam) will require written documentation from an appropriate health care provider/organization. The University Health Center or health care provider shall verify dates of treatment and indicate the dates the student was unable to meet academic responsibilities.

Students who will miss a Major Scheduled Grading Event (i.e., assignments 1 or 2, and the final) due any University excused absence **must provide appropriate documentation and make alternative arrangements at least 1 week in advance.**

A link to pull information on the new policy covering absences from class can be found at <http://www.president.umd.edu/policies/v100g.html>

Late work and Missed Exams / Assignments:

All assignments should be submitted online by the due date (and time). Late assignments will be accepted with a 10% per day penalty.

The **major grading event** in the course is the **final exam**, and it must be attended on the assigned date. For university-excused absences (e.g., illness, university-sponsored event), you must provide proper documentation (e.g., note from health care provider; sports coach) and notify me one week in advance, and a make-up exam will be scheduled. If an emergency occurred that prevented you from attending, you must notify me as soon as possible about the situation and provide proper documentation in order to discuss the possibility of sitting the exam.

Grade Grievance: If a student feels that an assignment or exam has been graded unfairly, s/he is required to submit (in writing) an explanation of his/her **specific** concern (i.e., provide detail as to what is the source of dissatisfaction). Upon receiving this, **the entire assignment and/or exam will be re-graded.**

Classroom etiquette: Please come to discussion sections prepared to share your ideas and opinions in a respectful manner, as well as listen to the ideas of others in an open and respectful way. Laptops are allowed in the classroom but please refrain from engaging in activities that are not directly related to class content and discussions. Texting during lecture or discussion section is not allowed. You will be asked to put your phone away or leave the room.

Course Evaluations

The University, the School of Public Health, and the Department of Kinesiology are committed to the use of student course evaluations for improving the student experience, course and curriculum delivery, and faculty instruction. Your evaluations help instructors improve their courses; help deans and department chairs decide on merit pay for faculty, renewal of contracts, and support tenure and promotion decisions; and help current and future students decide on classes. **The system (www.CourseEvalUM.umd.edu) will open approximately 10 days before the last day of class and closes before the beginning of final exams.**

Available Support Services:

Canvas : <http://www.sph.umd.edu/canvas/students.html>

OIT Helpdesk: <http://www.helpdesk.umd.edu/>

Library - <http://www.lib.umd.edu/MCK/>

Library KNES 400 - <http://lib.guides.umd.edu/KNES400>

Grading Procedures:

Grade breakdown:

Weekly quizzes: 20% (10 quizzes at 2% each)

Final exam: 10%

Assignment 1: 20%

Assignment 2: 25%

Documentary Reflections: 10% (2 reflections at 5% each)

Participation Grade: 15% (5% in lecture participation and 10% discussion section participation)

GRADING POLICY:

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|-------------------------|---------------------------|---------------------------|-----------------------|--------------------|
| A = 90.0% - 100% | B = 80.0% - 89.99% | C = 70.0% - 79.99% | D = 60 -69.99% | F = <60% |
|-------------------------|---------------------------|---------------------------|-----------------------|--------------------|

Course Outline / Course Calendar: Reading Assignments (and materials) are available on Canvas. While these readings are complementary to the lectures, exam questions will incorporate these texts. Changes may be made to this schedule depending on the pace of the course.

| UNIT I: Determinants of Health and PA | | | | |
|--|-------------|-------------|---|--|
| SUB-UNIT | Week | Date | Session/Topic | Discussion Section |
| I. Introduction to Public Health | WK 1 | Jan 25 | Session 1 – Cancelled due to snow | WK 1 – No section |
| | | Jan 27 | Session 2 – Introduction | |
| | WK 2 | Feb 1 | Session 3 – Public Health, past and present | WK 2 – Introductions |
| | | Feb 3 | Session 4 – Epidemiology: What is it & how is it relevant to PA & Public Health? | |
| | WK 3 | Feb 8 | Session 5 – Expanding Epidemiology (I): What are some of the critiques/issues? (Quiz 1) | WK 3 – Grade Quiz 1 - Socio-ecological model and determinants of health |
| | | Feb 10 | Session 6 – Epidemiology (II): Social determinants of health ** Unnatural Causes Reflection (due online by noon on Saturday, Feb 13) | |
| II. Determinants of Physical Activity | WK 4 | Feb 15 | Session 7 – Intra- and Inter-personal Determinants of PA (I): Behavioral Models (Quiz 2) | WK 4 – Grade Quiz 2 - Discussion of agency/limits of behavioral models |
| | | Feb 17 | Session 8 – Intra- and Inter-personal Determinants of PA (II): Adding complexity - Habitus and Concerted Cultivation | |
| | WK 5 | Feb 22 | Session 9 – Built Environment as a Determinant of PA (I) – Introductory concepts (Quiz 3) | WK 5 – Grade Quiz 3 - Writing Workshop I (Planning your paper)- |
| | | Feb 24 | Session 10 – Built Environment as a determinant of PA (II) – Guest Lecture | |
| | WK 6 | Feb 29 | Session 11 – Built Environment as a Determinant of PA (III): Env't, Health & PA (Quiz 4) | WK 6 – Grade Quiz 4 - Writing Workshop II (Citations) |
| | | Mar 2 | Session 12 – Policy and PA (I): Neighborhood Segregation & PA **The House We Live In Reflection (due online by noon on Saturday, March 5) | |

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| | WK 7 | Mar 7 | Session 13 – Policy and PA (II): Neoliberalism and Health (Quiz 5) | WK 7 – Grade Quiz 5 - Discussion of Neoliberalism |
| | | Mar 9 | Session 14 – Policy and PA (III): Privatization of Parks and Recreation | |
| Spring Break | | | | |
| UNIT II – Physical Activity and Public Health ‘In Action’ | | | | |
| <i>TRANSITION: Intro to interv’n & eval’n</i> | WK 8 | Mar 21 | Session 15 – Issues in Intervention and Evaluation (Quiz 6) | WK 8 – Grade Quiz 6 - Top down/bottom up case study |
| III. Places and Spaces of PA Interventions | | Mar 23 | Session 16 - Beauty Salons, Barber Shops & Health in the African American community Assignment 1 (Due online start of lecture) | |
| | WK 9 | Mar 28 | Session 17 – Third Spaces, Soccer Fields & Latino Health (Quiz 7) | WK 9 – Grade Quiz 7 - TBD |
| | | Mar 30 | Session 18 – Prisons and Yoga ** House I Live In (Due online by noon Saturday April 2) | |
| | WK 10 | Apr 4 | Session 19 – Schools & the Privatization of Physical Education - Let’s Move Case Study (Quiz 8) | WK 10 – Grade Quiz 8 - Workshop possible interventions for Assignment 2 |
| | | Apr 6 | Session 20 – Outdoor Therapy, Mental Health and Exercise Referrals | |
| IV. Populations/ Identities and PA Interventions | WK 11 | Apr 11 | Session 21 – Aging Baby Boomers and Gray Power: Possibilities and Challenges (Quiz 9) | WK 11 – Grade Quiz 9 Tips on how to conduct analysis for Assignment 2 |
| | | Apr 13 | Session 22 – Disability and PA | |
| | WK 12 | Apr 18 | Session 23 – Men, Masculinity & Health: From Movember to the Scottish Premier League (Quiz 10) | WK 12 – Grade Quiz 10 Bring in Draft of Intro, Intervention Description and Discussion |
| Apr 20 | | Session 24 – Pregnant Women and PA | | |
| V. Thinking Critically – Alternative Understandings of PA and Health | WK 13 | Apr 25 | Session 25 – LGBT sport and activism (Quiz 11) | WK 13 – Grade Quiz 11 TBD |
| | | Apr 27 | Session 26 - Questioning the Dominant Obesity Discourse and the Stigmatization of Obese Bodies FINAL PAPER (Due online start of lecture) | |
| | WK 14 | May 2 | Session 27 – M-health and surveillance society (Quiz 12) | WK 14 – Grade Quiz 12 Final Exam review |
| May 4 | | Session 28 – Rethinking Diabetes in the AI/AN Population | | |

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| | WK 15 | May 9 | Session 29 – Review (Q&A) | N/A |
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Red lettering denotes graded assignment

Blue lettering denotes 'homework' that you should bring with you to Discussion Section

Note: Numbers in brackets after learning objectives show linkage between material covered in each session and the numbered program competencies shown at the beginning of this syllabus.

| Session Outline | |
|---|--------------------|
| Session 1 | Mon, Jan 25 |
| Topic: Cancelled due to snow | |
| Session 2 | Wed, Jan 27 |
| Topic: Introduction - Course Overview/Policies | |
| Learning Objectives for Session [1,2,3] | |
| <ul style="list-style-type: none"> • Define public health, including central goals and objectives, and differentiate it from biomedicine • Begin to identify interconnections between the field of Kinesiology and Public Health • Discuss possible explanations for disparities in health and physical activity patterns across populations • Review (and comprehend) the various class policies | |
| Required readings: N/A | |
| Recommended reading: N/A | |
| Session 3 | Mon, Feb 1 |
| Topic: Public Health, past and present | |
| Learning Objectives for Session [1,2,3] | |
| <ul style="list-style-type: none"> • Identify key periods/trends in the history of public health practice • Identify the ongoing debate about the reasons underlying patterns of ill health (and health disparities) | |
| Required reading: | |
| Brandt, A., & Gardner, M. (2000). Antagonism and accommodation: Interpreting the relationship between public health and medicine in the United States during the 20 th century. <i>American Journal of Public Health, 90</i> , 707-15. | |
| Recommended: | |
| Krieger, N., & Birn, A. (1998). A vision of social justice as the foundation of Public Health: Commemorating 150 years of the spirit of 1848. <i>American Public Health Journal, 88</i> (11), 1603-6. | |
| Session 4 | Wed, Feb 3 |
| Topic: Epidemiology – What is it and how is it relevant to PA and Public Health? | |
| Learning Objectives for Session [1,2,3] | |
| <ul style="list-style-type: none"> • Describe the evolution of epidemiology in public health, with a particular focus on the rise of physical activity epidemiology • Identify the main goals of epidemiology (of physical activity) • Define and differentiate the terms incidence, prevalence, risk ratios | |
| Required readings: | |
| Dishman, R. et al. (2013). Origins of physical activity epidemiology. In R. Dishman et al. (Authors), <i>Physical activity epidemiology (pp. 4-9 only)</i> . Champaign, IL: Human Kinetics. | |
| Recommended reading: | |

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| <p>Pearce, N. (1996). Traditional epidemiology, modern epidemiology and public health. <i>American Journal of Public Health</i>, 86, 678-83.</p> <p>Additional readings: Kohl, H., & Murray, T. (2012). Integrating public health and kinesiology. In H. Khol & T. Murray (Authors), <i>Foundations of physical activity and public health</i> (pp. 43-54). Champaign, IL: Human Kinetics. Thurston, M. (2014). 'Epidemiology' in M. Thurston (author), <i>Key themes in public health</i> (pp. 50-55). London & New York: Routledge.</p> <p>Discussion Section: Introductions</p> |
| <p>Session 5 Mon, Feb 8</p> |
| <p>Topic: Expanding Epidemiology (I): What are some of the critiques/issues? Learning Objectives for Session [1,2,3]</p> <ul style="list-style-type: none"> • Identify critiques/shortcomings of chronic disease epidemiology • Discuss the difference between association and causation <p>Required readings: Susser, M., & Susser, E. (1996). Choosing a future for epidemiology: I. Eras and paradigms. <i>American Journal of Public Health</i>, 86, 668-673 (*read only from start until middle of pg. 671). Taubes, G. (1995). Epidemiology faces its limits. <i>Science</i>, 269(5221), pp. 164-5 & 167-9.</p> <p>Recommended: Dishman, R. et al. (2013). Concepts and methods in PA epidemiology. In R. Dishman et al. (Authors), <i>Physical activity epidemiology</i> (pp. 17-36). Champaign, IL: Human Kinetics.</p> <p>Additional readings: Thurston, M. (2014). 'Epidemiology' in M. Thurston (author), <i>Key themes in public health</i> (pp. 50-55). London & New York: Routledge. Thurston, M. (2014). 'Causality' in M. Thurston (author), <i>Key themes in public health</i> (pp. 16-20). London & New York: Routledge.</p> <p>Assignments: Quiz 1</p> |
| <p>Session 6 Wed, Feb 10</p> |
| <p>Topic: Expanding Epidemiology (II): Social determinants of health Learning Objectives for Session [1,2,3]</p> <ul style="list-style-type: none"> • Understand where SDoH perspective 'fits' within wider trends in history of PH with regards to understanding what causes patterns of health and disease amongst the population <p>Required readings/viewings: Lee, R., & Cubbin, C. (2009). Striding toward social justice: The ecologic milieu of physical activity. <i>Exercise Sport Science Reviews</i>, 37(1), 10-17. (up to 'recommendations' only); Watch <i>Unnatural Causes – In sickness and in wealth</i> (available through Films@UM (in UMD library system)</p> <p>Recommended readings: Thurston, M. (2014). 'Place,' In <i>Key themes in public health</i> (pp. 124-7). London and New York: Routledge. Thurston, M. (2014). 'Determinants of health.' In M. Thurston (author), <i>Key themes in public health</i> (pp. 38-bottom 39 only). London and New York: Routledge.</p> <p>Assignments: * Unnatural Causes Reflection (due online by noon on Saturday Feb 13th) Discussion Section: Grade Quiz 1; Socio-ecological model and determinants of health</p> |
| <p>Session 7 Mon, Feb 15</p> |
| <p>Topic: Intra- and Inter-personal Determinants of PA (I): Behavioral Models Learning Objectives for Session [1,2,3]</p> |

- Discuss how the socio-ecological model can be used to think more expansively about determinants of physical activity
- Identify key intra- and interpersonal correlates of physical activity (and health)
- Discuss behavioral theories that provide insight into the mechanisms underlying the relationship between intra- and interpersonal factors and physical activity

Required and reading:

Grim, M., & Pazmino--Cevallos, M. (2007). Using social cognitive theory in physical education: An example of the translation of research into practice. *VAHPERD Journal*, 29(1).

Recommended reading:

Thurston, M. (2014). 'Behavior Change' in M. Thurston (author), *Key themes in public health* (pp. 12-16). London & New York: Routledge.

Chrisman, S. et al. (2013). Qualitative study of barriers to concussive symptoms reporting in high school athletics. *Journal of Adolescent Health*, 52, 330-5.

Assignment: Quiz 2

Session 8

Wed, Feb 17

Topic: Intra- and Inter-personal Determinants of PA (II): Adding complexity - Habitus and Concerted Cultivation

- Identify limitations of behavioral theories
- To define the concept of habitus
- To explore how social position relates to habitus, and how both are manifested in lifestyle choices, including physical activity/leisure
- To complicate the notion of 'agency'

Required reading:

Wagg, S. et al. (year). 'Habitus,' in *Key concepts sports studies* (pp. 102-7). Los Angeles and London: Sage.

Farrell, H. (September 23, 2015). Why are working class kids less likely to get elite jobs? They study too hard at college. *The Washington Post* online. Accessed on September 24, 2015 at

http://www.washingtonpost.com/blogs/monkey-cage/wp/2015/09/23/why-are-working-class-kids-less-likely-to-get-elite-jobs-they-study-too-hard-at-college/?tid=pm_pop_b

Recommended reading:

Stephens, N. et al. (2009). Why did they 'choose' to stay? Perspectives of Hurricane Katrina observers and survivors. *Psychological Science*, 20(7), 878-886.

Discussion Section: Grade Quiz 2; Discussion of agency/limits of behavioral models

Session 9

Mon, Feb 22

Topic: Built Environment as a Determinant of PA (I) – Introductory concepts

Learning Objectives for Session [1,2,3]

- Identify factors linked to low levels of walking/walkability in US society (focus on role of the built environment)
- Describe terminology/concepts pertaining to built environment and physical activity
- Begin to identify possible solutions to alter the built environment – and the need to incorporate other disciplines such as urban planners

Required reading:

Lee, R., McAlexander, K., & Banda, J. (2011). Chapter 4: The built environment. In R. Lee et al. (authors), *Reversing the obesogenic environment* (pp. 47-60). Champaign, Illinois: Human Kinetics.

Suggested reading:

Spielberg, F. (1989). The traditional neighborhood development: How will traffic engineers respond? *ITE Journal*, September, 17-8.

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| <p>Oatman-Stanford, H. (2014). Murder machines: Why cars will kill 30,000 Americans this year. <i>Collectors Weekly</i>. Accessed at: http://www.collectorsweekly.com/articles/murder-machines/</p> <p>Assignment: Quiz 3</p> | |
| Session 10 | Wed, Feb 24 |
| <p>Topic: Built Environment as a Determinant of PA (II) – Guest Lecture</p> <p>Learning Objectives for Session [1,2,3]</p> <ul style="list-style-type: none"> • Describe terminology/concepts pertaining to built environment and physical activity • Discuss research relating to physical activity and the built environment <p>Required reading: TBD</p> <p>Discussion Section: Grade Quiz 3; Writing Workshop I (Planning your paper)</p> | |
| Session 11 | Mon, Feb 29 |
| <p>Topic: Built Environment as a Determinant of PA (III): Env't, Health & PA</p> <p>Learning Objectives for Session [1,2,3]</p> <ul style="list-style-type: none"> • Define the urban-suburban paradox as it relates to physical activity opportunities • Explore the role of 'place' as it relates to health and physical activity opportunities • Identify how the concept of Deprivation Amplification relates to physical activity <p>Required reading: Lee, R., & Cubbin, C. (2009). Striding toward social justice: The ecologic milieu of physical activity. <i>Exercise Sport Science Reviews</i>, 37(1), pp. 10-17 (up to 'recommendations' only).</p> <p>Assignments – Quiz 4</p> | |
| Session 12 | Wed, March 2 |
| <p>Topic: Policy and PA (I): Neighborhood Segregation & PA</p> <p>Learning Objectives for Session [1,2,3]</p> <ul style="list-style-type: none"> • Identify how the concept of Environmental Justice relates to physical activity • Identify how the concept of Deprivation Amplification relates to physical activity • Define Structural Racism and identify various policies (official and unofficial) that contributed to neighborhood segregation • Describe the lasting impact that public policy can have on population health, as well as physical activity opportunities <p>Required viewing: Watch: <i>Race, the power of an illusion – 'The House we Live In'</i> available through UMD library online. I recommend watching the entire 45 minute segment, but <u>if pressed for time you can start watching at Scene 9 (23min, 49sec) until the end</u></p> <p>*Highly recommended reading/listening: Wiltse, J. (2014). The black-white swimming disparity in America: A deadly legacy of swimming pool discrimination. <i>Journal of Sport and Social Issues</i>, 38(4), 366-89. Martin, R. (2008). Racial history of America swimming pools. 10 min podcast available at: http://www.npr.org/templates/story/story.php?storyId=90213675</p> <p>Additional readings: Taylor, W. et al. (2007). Environmental justice: A framework for collaboration between the public health and parks and recreation fields to study disparities in physical activity. <i>Journal of Physical Activity & Health</i>, 4(Supp1), S50-63. Macintyre, S. (2007). Deprivation amplification revisited; or, is it always true that poorer places have poorer access to resources for healthy diets and physical activity? <i>International Journal of Behavioral Nutrition and Physical Activity</i>. doi:10.1186/1479-5868-4-32</p> | |

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| <p>Vicino, J. (2008). Chapter 2: Suburban Frontier – Crabgrass memories. In J. Vicino (Author), <i>Transforming race and class in suburbia</i> (pp. 20-43). Hampshire, England: Palgrave Macmillan.</p> <p>Assignment: *<i>The House We Live In Reflection</i> (due online by noon on Saturday March 5)</p> <p>Discussion Section: Grade Quiz 4; Writing Workshop II (Citations)</p> | |
| Session 13 | Mon, March 7 |
| <p>Topic: Policy and PA (II): Neoliberalism and Healthism</p> <p>Learning Objectives for Session [1,2,3]</p> <ul style="list-style-type: none"> • Discuss how political ideology impacts the way a society distributes its resources (structural determinants of health) • Define neo-liberalism, including data suggesting how neoliberal social policies shape population health outcomes • Explore neoliberal policy in relation to the US health care system • Explore how public policy can impact physical activity rates and health • Discuss the connections between neoliberalism and the ideology of healthism <p>Required readings:</p> <p>Martinez, E. and García, A. (2000). What is “Neo-Liberalism?” A Brief Definition. New York: The New Press.</p> <p>Recommended readings:</p> <p>Navarro, V. (2007). Neoliberalism as a class ideology; or, the political causes of the growth of inequalities. <i>International Journal of Health Services</i>, 37(1), from p. 47- top of 54 only.</p> <p>Gaffney, AW. (April 15, 2014). The neoliberal turn in American healthcare. <i>Jacobin magazine</i>. Available online: https://www.jacobinmag.com/2014/04/the-neoliberal-turn-in-american-health-care/</p> <p>Recommended viewing and listening:</p> <p>Watch <i>Inequality for All</i> (streaming available through Canvas)</p> <p>www.podsocs.com/podcast/health-inequalities/ (<i>Health inequalitites: In conversation with Dennis Raphael</i>)</p> <p>Watch - <i>Park Avenue: Money, power and the American dream</i> (http://topdocumentaryfilms.com/park-avenue-money-power-american-dream/)</p> <p>Assignments: Quiz 5</p> | |
| Session 14 | Wed, March 9 |
| <p>Topic: Policy and PA (III): Privatization of Parks and Recreation</p> <p>Learning Objectives for Session [1,2,3]</p> <ul style="list-style-type: none"> • Explore how neoliberalism has impacted parks and recreation (from national to urban scales), and identify both opportunities and challenges • Explore how public policy can impact physical activity rates and health • Revisit the concept of Deprivation Amplification in relation to urban parks in the context of neoliberalism <p>Required reading:</p> <p>More, T. (2005). From public to private: Five concepts of park management and their consequences. <i>The George Wright Forum</i>, 22(2), 12- 20.</p> <p>Discussion Section: Grade Quiz 5 - Discussion of Neoliberalism</p> | |
| Session 15 | Mon, March 21 |
| <p>Topic: Issues in interventions and Evaluation</p> <p>Learning Objectives for Session [1,2,3]</p> <ul style="list-style-type: none"> • Identify main categories of PA interventions • Identify the differences between interventions and programs | |

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| <ul style="list-style-type: none"> • Identify the key elements of public health interventions and programs (assessment, intervention design and implementation, evaluation). • Identify and discuss issues/challenges specific to PA interventions/programs <p>Required readings: Laverack, G. (2004). Chapter 5: Addressing the tensions in health promotion programming. In G. Laverack (Author), <i>Health promotion practice: Power and empowerment</i> (pp. 58-72). London: Sage Publications.</p> <p>Recommended: Wallerstein, N. (2002). Empowerment to reduce health disparities. <i>Scandinavian Journal of Public Health</i>, 30, 72-7. Labonte, R. and Robertson, A. (1996). Delivering the goods, showing our stuff: The case for a constructivist paradigm for health promotion research and practice. <i>Health Education Quarterly</i>, 23(4), 431-447.</p> <p>Assignments: Quiz 6</p> |
| <p>Session 16 Wed, March 23</p> |
| <p>Topic: Places and Spaces of Interventions: Beauty Salons, Barber Shops & Health in the African American community</p> <p>Learning Objectives for Session [1,2,3]</p> <ul style="list-style-type: none"> • Differentiate between Cognitive Behavioral theories of health and a Political Economy of Health framework, and explain how they can be brought together to create a culturally sensitive health intervention • Evaluate Beauty Salons and Barber Shops as sites of intervention in the African American community (strengths, weaknesses and future possibilities) • Analyze the physiological, psychological, social and political dimensions that underlie such an intervention <p>Required readings: Linnan, L., & Feruson, Y. (2007). Beauty Salons: A promising health promotion setting for reaching and promoting health among African American women. <i>Health Education & Behavior</i>, 34(3), 517-30.</p> <p>Additional: Armstrong, K. (2013). Correlates and predictors of Black women’s physical activity: Afrocentric insights. <i>Journal of Black Studies</i>, 44(6), 627-45. Sellers, R., et al., (1998). Multidimensional Model of Racial Identify: A reconceptualization of African American racial identity. <i>Personality and Social Psychology Review</i>, 2(1), 18-39. Bowleg, L. (2012). The problem with the phrase women and minorities: Intersectionality – an important theoretical framework for public health. <i>American Journal of Public Health</i>, 102, 1267-73.</p> <p>Assignments: Assignment 1 (Due online start of lecture)</p> <p>Discussion Section: Grade Quiz 6; Top down/bottom up case study</p> |
| <p>Session 17 Mon, March 28</p> |
| <p>Topic: Places and Spaces of Interventions: Third Spaces, Soccer Fields & Latino Health</p> <p>Learning Objectives for Session [1,2,3]</p> <ul style="list-style-type: none"> • Define the concept of the ‘Healthy Immigrant Paradox’ (in the Latino community) • Explore the concept of a ‘Third Space’ • Evaluate Soccer Fields as sites of intervention in the Latino community (strengths, weaknesses and future possibilities) <p>Required reading/viewing: <i>Becoming American</i> (available through UMD library system)</p> <p>Recommended:</p> |

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| Rhodes, S., et al. (2006). Using CBPR to develop an intervention to reduce HIV and STD infections among Latino Men. <i>AIDS Education and Prevention</i> , 18(5), 375-389. | |
| Price, M., and C. Whitworth. (2004). Soccer and Latino cultural space: metropolitan Washington fútbol leagues. In D. Arreola (Ed.), <i>Hispanic spaces, Latino places</i> (pp. 167-86). Austin, TX: University of Texas Press. | |
| Assignments: Quiz 7 | |
| Session 18 | Wed, March 30 |
| Topic: Places and Spaces of Interventions: Prisons and Yoga | |
| Learning Objectives for Session [1,2,3] | |
| <ul style="list-style-type: none"> • Evaluate the prison as a site of a physical activity intervention (strengths, weaknesses and future possibilities) • Analyze the physiological, psychological, social and political dimensions that underlie yoga as a mode of intervention in prisons • Apply social theory of the body and power (surveillance and discipline) to come to a more nuanced understanding of prison as a site of punishment and reform/rehabilitation | |
| Required viewing: | |
| Watch: <i>The House I live In</i> (streamed through Canvas site) | |
| Recommended: | |
| Hartmann, D. & Wheelock, D. (2002). Sport as prevention? CURA, Summer 2002. (http://www.cura.umn.edu (Links to an external site.)/ (Links to an external site) | |
| Pitter, R., & Andrews, D. (1997). Serving America's underserved youth: Reflections on sport and recreation in an emerging social problems industry. <i>Quest</i> , 49, 85-99. | |
| Assignments – ** House I Live In Reflection (Due online by noon on Saturday, April 2) | |
| Discussion Section: Grade Quiz 7; TBD | |
| Session 19 | Mon, April 4 |
| Topic: Places and Spaces of Interventions: Schools & the Privatization of Physical Education - Let's Move Case Study | |
| Learning Objectives for Session [1,2,3] | |
| <ul style="list-style-type: none"> • TBA | |
| Required reading: | |
| Jette, S., Bhagat, K., & Andrews, D. (2014). Let's Move! as national biopedagogy. <i>Sport, Education and Society</i> | |
| Assignments – Quiz 8 | |
| Session 20 | Wed, April 6 |
| Topic: Places and Spaces of Interventions: Outdoor Therapy, Mental Health and Exercise Referrals | |
| Learning Objectives for Session [1,2,3]: | |
| TBD | |
| Required reading: | |
| TBD | |
| Discussion Section: Quiz 8; Workshop possible interventions for Assignment 2 | |
| Session 21 | Mon, April 11 |
| Topic: Populations, Identities, and PA Interventions: Aging Baby Boomers and Gray Power - Possibilities and Challenges | |
| Learning Objectives for Session [1,2,3] | |
| <ul style="list-style-type: none"> • Explore the key challenges that the rapidly aging population presents to the health community • Define the concept 'age-ism' as well as its relevance to the health promotion community | |

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| <ul style="list-style-type: none"> • Define ‘Aging in Place’ as a health intervention for the aging population (strengths, weaknesses and future possibilities) • Analyze the physiological, psychological, social and political dimensions that underlie interventions for the aging population <p>Required readings: Bridges, A., et al. (2013). Home sweet home. Interprofessional team helps older adults age in place, <i>OT Practice</i>.</p> <p>Recommended: Szanton et al. (2011). Community aging in place, advancing better living for elders. A bio-behavioral-environmental intervention to improve function and health-related quality of life in disabled older individuals. <i>Journal of American Geriatric Society</i>, 59(12), 2314-20.</p> <p>Assignment: Quiz 9</p> |
| <p>Session 22 Wed, April 13</p> |
| <p>Topic: Populations, Identities, and PA Interventions: Disability and PA</p> <p>Learning Objectives for Session [1,2,3]</p> <ul style="list-style-type: none"> • Differentiate between the terms disability and impairment • Examine and evaluate physical activity interventions for the disabled population (strengths, weaknesses and future possibilities) • Analyze the physiological, psychological, social and political dimensions that underlie interventions for the disabled population <p>Required readings: TBD</p> <p>Discussion Section: Grade Quiz 9; Tips on how to conduct analysis for Assignment 2</p> |
| <p>Session 23 Mon, April 18</p> |
| <p>Topic: Populations, Identities, and PA Interventions: Men, Masculinity & Health: From Movember to the Scottish Premier League</p> <p>Learning Objectives for Session [1,2,3]</p> <ul style="list-style-type: none"> • Differentiate between (and define) different frameworks for defining and understanding gender (biological essentialism and social constructionism) • Identify key themes in research examining how men tend to understand health and health promotion • Evaluate a physical activity intervention for men (strengths, weaknesses and future possibilities) • Analyze the physiological, psychological, social and political dimensions that underlie interventions for men <p>Required readings: Fleming, P. J., Lee, J. G., & Dworkin, S. L. (2014). “Real men don't”: Constructions of masculinity and inadvertent harm in public health interventions. <i>American Journal of Public Health</i>, 104(6), 1029-1035</p> <p>Recommended: Hunt, K. et al. (2013). “You’ve got to walk before you run”: Positive evaluations of a walking program as part of a gender-sensitized, weight management program delivered to men through professional football clubs. <i>Health Psychology</i>, 32(1), 57-65. O’Brien, R., Hunt, K., & Hart, G. (2005). ‘It's caveman stuff, but that is to a certain extent how guys still operate’: Men's accounts of masculinity and help seeking. <i>Social science & medicine</i>, 61(3), 503-516.</p> <p>Assignment: Quiz 10</p> |
| <p>Session 24 Wed, April 20</p> |

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| <p>Topic: Populations, Identities, and PA Interventions – Pregnant women and PA</p> <p>Learning Objectives for Session [1,2,3]</p> <ul style="list-style-type: none"> Identify health disparities within the LGBT community as well as some of the factors thought to underpin these disparities Discuss some of the challenges of creating inclusive health interventions and policies for the LGBT community given the complexity of identity (and identity politics) within this community Evaluate physical activity interventions for the LGBT population (strengths, weaknesses and future possibilities) <p>Required readings: TBD</p> <p>Discussion Section: Grade Quiz 10; Bring in Draft of Intro, Intervention Description and Discussion</p> | |
| Session 25 | Mon, April 25 |
| <p>Topic: Populations, Identities, and PA Interventions – LGBT population</p> <p>Learning Objectives for Session [1,2,3]</p> <ul style="list-style-type: none"> Identify health disparities within the LGBT community as well as some of the factors thought to underpin these disparities Discuss some of the challenges of creating inclusive health interventions and policies for the LGBT community given the complexity of identity (and identity politics) within this community Evaluate physical activity interventions for the LGBT population (strengths, weaknesses and future possibilities) <p>Required readings: TBD</p> <p>Assignment: Quiz 11</p> | |
| Session 26 | Wed, April 27 |
| <p>Topic: Thinking Critically - Questioning the Dominant Obesity Discourse and the Stigmatization of Obese Bodies</p> <p>Learning Objectives for Session [1,2,3]</p> <ul style="list-style-type: none"> Identify the key components of the Weight-Based paradigm of health, and explore research that calls into question the often taken-for-granted idea that weight loss leads to better health Discuss the concept of obesity stigma, including reasons for its prevalence in Western society <p>Required Kolata, G. (2007). 'The fat wars' in G. Kolata (Author), <i>Rethinking thin</i> (pp. 184-218). New York: Picador</p> <p>Recommended readings Taubes, G. (Sept 2007). The scientist and the stairmaster. New Yorker magazine. http://nymag.com/news/sports/38001/ Apple, S. (Aug 19, 2014). All you can eat. Wired magazine. Accessed Aug 23 2014 at: http://www.wired.com/2014/08/what-makes-us-fat/</p> <p>Assignments: FINAL PAPER (Due online start of lecture)</p> <p>Discussion Section: Grade Quiz 11; TBD</p> | |
| Session 27 | Mon, May 2 |
| <p>Topic: M-health (virtual spaces and health)</p> <p>Learning Objectives for Session [1,2,3]</p> <ul style="list-style-type: none"> Define the terms M-health and E-health Identify and discuss the strengths, challenges and future possibilities of M-health. Apply the concept of biopower to M-health interventions <p>Required reading: Lupton, D. (2012). M-health and health promotion: The digital cyborg and surveillance society. <i>Social</i></p> | |

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| <i>Theory & Health</i> , 10, 229–244. | |
| Assignment: Quiz 12 | |
| Session 28 | Wed, May 4 |
| Topic: Thinking Critically - Rethinking Diabetes in the AI/AN Population | |
| Learning Objectives for Session [1,2,3] | |
| <ul style="list-style-type: none"> • Identify the prevalence and incidence of diabetes in the AI/AN population (that makes diabetes a health disparity in this community) • Explore the range of factors that might underlie this health disparity, with an emphasis on social and structural factors • Identify the importance of implementing community-led solutions to address this health disparity in the AI/AN population. | |
| Required readings: | |
| Watch <i>Unnatural Causes: Bad Sugar</i> (available through Films@UM) | |
| Discussion Section – Grade Quiz 12; Final Exam review | |
| Session 29 | Mon, May 9 |
| Topic: Final Exam Q&A | |

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- **FABRICATION:** intentional and unauthorized falsification or invention of any information or citation in an academic exercise.
- **FACILITATING ACADEMIC DISHONESTY:** intentionally or knowingly helping or attempting to help another to violate any provision of this code.
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