

## PUBH 6078

### Public Health Policy as a Prevention Strategy

Fall 2019

## COURSE & CONTACT INFORMATION

**Credits:** 2

**Meeting Day(s):** Tuesday, Thursday

**Meeting Time:** 3:35-5:30 PM

**Meeting Place:** Weaver-Densford Hall W2-110

**Instructor:** Toben F. Nelson

**Email:** [tfnelson@umn.edu](mailto:tfnelson@umn.edu)

Please use PubH 6078 in the Subject line for prompt attention. Responses within 24 hours.

**Office Phone:** 612-626-9791

**Office Hours:** By appointment. Use Google Calendar

**Office Location:** West Bank Office Building, Room 391

## COURSE DESCRIPTION

This course will introduce students to a prevention policy framework; will present the philosophical, ethical, economic, political and efficacy rationale for this approach to prevention; will contrast policy approaches to prevention with individual-based approaches; and will present examples of different policy mechanisms. This course provides an overview of a policy adoption and implementation model, including a discussion of factors to consider when developing policies and key components of policy implementation. This course will include lectures, large and small group discussions, and small-group activities. This course is an intervention course for CHP students and meets the advocacy competency requirement for MCH students.

## COURSE PREREQUISITES

None

## COURSE GOALS & OBJECTIVES

As a result of this course, students will be able to:

1. Demonstrate a critical understanding of the basic philosophy and assumptions of prevention policy;
2. Discuss the importance of the epidemiological basis for public health policies;
3. Describe a policy adoption and implementation model;
4. Describe factors to consider for policy development and adoption;
5. Describe important implementation components;
6. Critically discuss a range of policy types and mechanisms;
7. Apply the elements of prevention policy models developed in the course to other problems in public health;
8. Identify a range of roles that public health professionals can play in prevention policy;
9. Be able to describe these course concepts to a broad audience.

## METHODS OF INSTRUCTION AND WORK EXPECTATIONS

### Course Workload Expectations

PubH 6078 is a 2 credit course offered during the first half of the Fall Semester. The University expects that for each credit, you will spend three hours per week attending class or comparable online activity, reading, studying, completing assignments, etc. over the

course of a 15-week term. This course requires approximately 90 hours of effort for the term in order to earn an average grade. In an average week for this course, the expectation is that students will spend approximately 4 hours in class and 8 hours outside of class, although some weeks may require more and some weeks may require less.

Students are expected to attend each class period and participate in discussions and activities.

The course will use a combination of lecture, discussion and small group activities to encourage broad participation.

### **Learning Community**

School of Public Health courses ask students to discuss frameworks, theory, policy, and more, often in the context of past and current events and policy debates. Many of our courses also ask students to work in teams or discussion groups. We do not come to our courses with identical backgrounds and experiences and building on what we already know about collaborating, listening, and engaging is critical to successful professional, academic, and scientific engagement with topics.

In this course, students are expected to engage with each other in respectful and thoughtful ways.

In group work, this can mean:

- Setting expectations with your groups about communication and response time during the first week of the semester (or as soon as groups are assigned) and contacting the instructor if scheduling problems cannot be overcome.
- Setting clear deadlines and holding yourself and each other accountable.
- Determining the roles group members need to fulfill to successfully complete the project on time.
- Developing a rapport prior to beginning the project (what prior experience are you bringing to the project, what are your strengths as they apply to the project, what do you like to work on?)

In group discussion, this can mean:

- Respecting the identities and experiences of your classmates.
- Avoid broad statements and generalizations. Group discussions are another form of academic communication and responses to instructor questions in a group discussion are evaluated. Apply the same rigor to crafting discussion posts as you would for a paper.
- Consider your tone and language, especially when communicating in text format, as the lack of other cues can lead to misinterpretation.

Like other work in the course, all student-to-student communication is covered by the Student Conduct Code (<https://z.umn.edu/studentconduct>).

## **COURSE TEXT & READINGS**

### Required Text

Hemenway D. *While We Were Sleeping: Success Stories in Injury and Violence Prevention*. University of California Press, 2009.  
Available new or used in soft cover and ebook through various online book sellers (Amazon, Barnes & Noble, University of California Press)

All other readings are available through the course website. Additional readings may be occasionally added.

COURSE OUTLINE/WEEKLY SCHEDULE

Date	Topic	Readings	Assignments
Week 1 Tuesday September 3	Introduction to the course; Introduction to policy as a prevention strategy	<ul style="list-style-type: none"> <li>CDC Definition of Policy (<a href="http://www.cdc.gov/policy/analysis/process/docs/policyDefinition.pdf">http://www.cdc.gov/policy/analysis/process/docs/policyDefinition.pdf</a>)</li> <li>CDC Policy Process (<a href="http://www.cdc.gov/policy/analysis/process/docs/CDCPolicyProcess.pdf">http://www.cdc.gov/policy/analysis/process/docs/CDCPolicyProcess.pdf</a>)</li> <li>CDC's Policy Analysis Framework (<a href="http://www.cdc.gov/policy/analysis/process/docs/CDCPolicyAnalyticalFramework.pdf">http://www.cdc.gov/policy/analysis/process/docs/CDCPolicyAnalyticalFramework.pdf</a>)</li> <li>Achievements in Public Health, 1900-1999: Changes in the Public Health System <a href="https://www.cdc.gov/mmwr/preview/mmwrhtml/mm4850a1.htm">https://www.cdc.gov/mmwr/preview/mmwrhtml/mm4850a1.htm</a></li> </ul>	
Week 1 Thursday September 5	Political, philosophical and economic basis for prevention policy.	<ul style="list-style-type: none"> <li>Siegal G, Siegal N, Bonnie RJ. An account of collective actions in public health. <i>Am J Public Health</i> 99(9): 1583-187, 2009.</li> <li>Fineberg HV. The paradox of disease prevention celebrated in principle, resisted in practice. <i>JAMA</i>, 310(1):85-90, 2013.</li> <li>Chokshi DA, Stine NW. Reconsidering the politics of public health. <i>JAMA</i> 310(10):1025-1026, 2013.</li> <li>OECD/WHO (2015), <i>Promoting Health, Preventing Disease: The Economic Case</i>, Open University Press - McGraw-Hill, Buckingham, <a href="https://doi.org/10.1787/9780335262274-en">https://doi.org/10.1787/9780335262274-en</a>. <ul style="list-style-type: none"> <li>Chapter 1. An economic approach. pp. 6-15.</li> </ul> </li> <li>Galea S. Fairness and Public Health. Dean's Note. Boston University School of Public Health. Trustees of Boston University. April 2017. Available online at: <a href="http://www.bu.edu/sph/2017/04/16/fairness-and-public-health/">http://www.bu.edu/sph/2017/04/16/fairness-and-public-health/</a></li> <li>Galea S. How We Define "Freedom" Matters For Our Health. Dean's Note. Boston University School of Public Health. Trustees of Boston University. October 2018. Available online at: <a href="https://www.bu.edu/sph/2018/10/19/how-we-define-freedom-matters-for-our-health/">https://www.bu.edu/sph/2018/10/19/how-we-define-freedom-matters-for-our-health/</a></li> </ul>	<ul style="list-style-type: none"> <li>Reflection paper</li> </ul>
Week 2 Tuesday September 10	Epidemiological basis for prevention policies	<ul style="list-style-type: none"> <li>Rose G. Sick Individuals and Sick Populations. <i>Int J Epidemiol</i> 30:427-432, 2001.</li> <li>Hemenway D. Three Common Beliefs that are Impediments to Injury Prevention. <i>Inj Prev</i> 19:290-293, 2013.</li> <li>Benach J, Malmusi D, Yasui Y, Martinez JM, Muntaner C. Beyond Rose's Strategies: A Typology of Scenarios of Policy Impact on Population Health and Health Inequalities. <i>Int J Health Services</i> 41(1):1-9, 2011.</li> <li>Hemenway D. While We Were Sleeping: Success Stories in Injury and Violence Prevention. 2009. University of California Press, <ul style="list-style-type: none"> <li>Introduction</li> <li>Models for Injury Prevention.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Reflection paper</li> <li>Assignment #1: Define Problem and Justify Policy Approach</li> </ul>
Week 2 Thursday September 12	Identifying the appropriate level of policy change and agenda setting	<ul style="list-style-type: none"> <li>Pertschuk M, Hobart R, Paloma M, Larkin MA, Balbach ED. (2013). Grassroots Movement Building and preemption in the Campaign for Residential Fire Sprinklers. <i>American Journal of Public Health</i>, 103(10), 1780–1787. <a href="http://doi.org/10.2105/AJPH.2013.301317">http://doi.org/10.2105/AJPH.2013.301317</a></li> <li>Public Health Law Center at Mitchell Hamline School of Law. Preemption in Public Health. Available online at: <a href="http://www.publichealthlawcenter.org/topics/other-public-health-law/preemption-public-health">http://www.publichealthlawcenter.org/topics/other-public-health-law/preemption-public-health</a></li> <li>Centers for Disease Control and Prevention. <i>Executive Orders and Emergency Declarations for the West Nile Virus: Applying Lessons from Past Outbreaks to Zika</i>. Available online at: <a href="https://www.cdc.gov/phlp/docs/zika-brief.pdf">https://www.cdc.gov/phlp/docs/zika-brief.pdf</a></li> <li>World Health Organization. <i>Protocol to Eliminate Illicit Trade of Tobacco</i>. WHO Framework Convention on Tobacco Control. (Browse Preamble and TOC) Available online at: <a href="http://apps.who.int/iris/bitstream/10665/80873/1/9789241505246_eng.pdf?ua=1&amp;ua=1">http://apps.who.int/iris/bitstream/10665/80873/1/9789241505246_eng.pdf?ua=1&amp;ua=1</a></li> <li>Centers for Disease Control and Prevention. <i>Healthy Communities: What local governments can do to reduce and prevent obesity</i>. Available online at: <a href="https://www.cdc.gov/obesity/downloads/CDC_Healthy_Communities.pdf">https://www.cdc.gov/obesity/downloads/CDC_Healthy_Communities.pdf</a> or <a href="https://www.cdc.gov/obesity/resources/strategies-guidelines.html">https://www.cdc.gov/obesity/resources/strategies-guidelines.html</a></li> </ul>	<ul style="list-style-type: none"> <li>Reflection paper</li> </ul>

Week 3 Tuesday September 17	Mechanism for change: economic availability	<ul style="list-style-type: none"> <li>Braveman PA, Cubbin C, Egerter S, Williams DR, Pamuk E. 2010. Socioeconomic disparities in health in the United States: what the patterns tell us. <i>Am. J. Public Health</i> 100(Suppl. 1):S186–96</li> <li>Pomeranz J. Advanced policy options to regulate sugar-sweetened beverages to support public health. <i>Journal of Public Health Policy</i>. 2011 August 33:75-88</li> <li>World Health Organization. WHO report on the global tobacco epidemic 2015: raising taxes on tobacco. World Health Organization, 2015. Available online at: <a href="http://www.who.int/tobacco/global_report/2015/report/en/">http://www.who.int/tobacco/global_report/2015/report/en/</a> <ul style="list-style-type: none"> <li>Read pp. 16-45.</li> </ul> </li> <li>Muhammad A, D'Souza A, Meade B, Micha R, Mozaffarian D. The Influence of Income and Prices on Global Dietary Patterns by Country, Age, and Gender, ERR-225, U.S. Department of Agriculture, Economic Research Service, February 2017. Available online at: <a href="https://www.ers.usda.gov/webdocs/publications/82545/err-225.pdf?v=42796">https://www.ers.usda.gov/webdocs/publications/82545/err-225.pdf?v=42796</a> <ul style="list-style-type: none"> <li>Read Summary, pp 1-5; 25-26.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Reflection paper</li> <li>Assignment #2: Analyze Policy Level Options</li> </ul>
Week 3 Thursday September 19	Mechanism for change: safer products & equipment	<ul style="list-style-type: none"> <li>Pacula RL, Kilmer B, Wagenaar AC, Frank J, Chaloupka FJ, Caulkins JP. Developing public health regulations for marijuana: lessons from alcohol and tobacco. <i>Journal Information</i> 104(6), 1021-1028, 2014.</li> <li>Hemenway D. <i>While We Were Sleeping: Success Stories in Injury and Violence Prevention</i>. 2009. University of California Press, <ul style="list-style-type: none"> <li>Chapter 1: Car</li> <li>Chapter 4: Play.</li> <li>Chapter 6: Violence</li> </ul> </li> <li>Albaum M. <i>Safety Sells: Market Forces and Regulation in the Development of Airbags</i> Martin Albaum and the Insurance Institute for Highway Safety, 2005. Available online at: <a href="https://www.iihs.org/media/186adabe-9ef4-479c-ad37-36b9f0e7fca1/Ka0wWQ/Albaum_Safety_Sells.pdf">https://www.iihs.org/media/186adabe-9ef4-479c-ad37-36b9f0e7fca1/Ka0wWQ/Albaum_Safety_Sells.pdf</a> <ul style="list-style-type: none"> <li>Forward</li> <li>Chapter 7</li> </ul> </li> <li>Maruchek A, Greis N, Mena C, Cai L. Product safety and security in the global supply chain: Issues, challenges and research opportunities. <i>Journal of Operations Management</i> 29(7): 707-720, 2011.</li> </ul>	<ul style="list-style-type: none"> <li>Reflection paper</li> </ul>
Week 4 Tuesday September 24	Mechanism for change: advertising and marketing	<ul style="list-style-type: none"> <li>Petticrew M, Shemilt I, Lorenc T, et al Alcohol advertising and public health: systems perspectives versus narrow perspectives <i>J Epidemiol Community Health</i> 2017;71:308-312.</li> <li>World Health Organization. WHO report on the global tobacco epidemic 2015: raising taxes on tobacco. World Health Organization, 2015. Available online at: <a href="http://www.who.int/tobacco/global_report/2015/report/en/">http://www.who.int/tobacco/global_report/2015/report/en/</a> <ul style="list-style-type: none"> <li>Read pp. 66-77</li> </ul> </li> <li>Karamanidou C, Dimopoulos k. Greek health professionals' perceptions of the HPV vaccine, state policy recommendations and their own role with regards to communication of relevant health information. <i>BMC Public Health</i> 16(1): 467, 2016.</li> </ul>	<ul style="list-style-type: none"> <li>Reflection paper</li> </ul>
Week 4 Thursday September 26 <i>Guest Instructor: Dr. Traci Toomey</i>	Mechanism for change: legal and physical availability	<ul style="list-style-type: none"> <li>Toomey TL, Nelson TF, Lenk KM. The Age-21 Legal Drinking Age: A Case Study Linking Past and Current Debates. <i>Addiction</i>, 104(12):1958-1965, 2009.</li> <li>Blocker, JS. Did Prohibition Really Work: Alcohol Prohibition as a Public Health Innovation. <i>Am J Public Health</i>, 96:233-243, 2006.</li> </ul>	<ul style="list-style-type: none"> <li>Reflection paper</li> </ul>

Week 5 Tuesday October 1	Roles that industries play in health and policy	<ul style="list-style-type: none"> <li>Jahiel RI, Babor TF. Industrial epidemics, public health advocacy and the alcohol industry: lessons from other fields. <i>Addiction</i>, 102, 1335-1339, 2007.</li> <li>Moodie AR. What public health practitioners need to know about unhealthy industry tactics. 1047-1049, 2017.</li> <li>Brennan TA, Schroeder SA. Ending sales of tobacco products in pharmacies. <i>JAMA</i> 311(11): 1105-1106, 2014.</li> </ul>	<ul style="list-style-type: none"> <li>Reflection paper</li> <li>Assignment #3: Describe Policy Mechanism and Justification for Your Policy Solution</li> </ul>
Week 5 Thursday October 3	Identifying key components of policies and basics of policy adoption	<ul style="list-style-type: none"> <li>The Strategic Alliance for Healthy Food and Activity Environment (<a href="https://www.preventioninstitute.org/sites/default/files/publications/Sharing%20Our%20Story.pdf">https://www.preventioninstitute.org/sites/default/files/publications/Sharing%20Our%20Story.pdf</a>)</li> <li>A Holistic Approach to Community Development in Minneapolis-St. Paul (<a href="https://www.youtube.com/watch?v=A7Byp685uVs&amp;feature=youtu.be">https://www.youtube.com/watch?v=A7Byp685uVs&amp;feature=youtu.be</a>)</li> <li>Erickson DJ, Lenk KM, Toomey TL, Nelson TF, Jones-Webb R, Mosher JF. Measuring the strength of state-level alcohol control policies. <i>World Medical &amp; Health Policy</i>, 6(3):171-186, 2014.</li> </ul> <p>Recommended:</p> <ul style="list-style-type: none"> <li>Developing Effective Coalitions : An Eight Step Guide (<a href="https://www.preventioninstitute.org/sites/default/files/publications/Developing%20Effective%20Coalitions%20-%20An%20Eight%20Step%20Guide.pdf">https://www.preventioninstitute.org/sites/default/files/publications/Developing%20Effective%20Coalitions%20-%20An%20Eight%20Step%20Guide.pdf</a>)</li> </ul>	<ul style="list-style-type: none"> <li>Reflection paper</li> </ul>
Week 6 Tuesday October 8	Policy Implementation, awareness and enforcement	<ul style="list-style-type: none"> <li>Jones-Webb R, Nelson TF, McKee P, Toomey T. An implementation model to increase the effectiveness of alcohol control policies. <i>American Journal of Health Promotion</i>, 28(5):328-335, 2014.</li> <li>Gertson LN. Public Policy Making, Chapter 5: Implementation: Converting Policy Commitments Into Practice, pp. 94-118. M.E. Sharpe: New York, 2004.</li> <li>Plotkin BJ, Kimball AM. Designing an international policy and legal framework for the control of emerging infectious diseases: first steps. <i>Emerg Infect Dis.</i> 1997;3(1):1-9.</li> </ul>	<ul style="list-style-type: none"> <li>Reflection paper</li> <li>Assignment #4: Draft Talking Points</li> </ul>
Week 6 Thursday October 10	Monitoring and evaluation and peer review	<ul style="list-style-type: none"> <li>Using Evaluation to Inform CDC's Policy Process <a href="https://www.cdc.gov/policy/analysis/process/docs/usingevaluationtoinformcdcspolicyprocess.pdf">https://www.cdc.gov/policy/analysis/process/docs/usingevaluationtoinformcdcspolicyprocess.pdf</a> <ul style="list-style-type: none"> <li>Overview of Policy Evaluation (<a href="https://www.cdc.gov/injury/pdfs/policy/Brief%201-a.pdf">https://www.cdc.gov/injury/pdfs/policy/Brief%201-a.pdf</a>)</li> </ul> </li> <li>Hemenway, D. How to find nothing. <i>Journal of Public Health Policy.</i> 2009; 30:260-68.</li> </ul>	<ul style="list-style-type: none"> <li>Reflection paper</li> </ul>
Week 7 Tuesday October 15	Institutionalization, multi-policy approach	<ul style="list-style-type: none"> <li>Levy DT, Boyle RG, Abrams DB. The role of public policies in reducing smoking. The Minnesota SimSmoke Tobacco Policy Model. <i>Am J Prev Med</i> 43(5S3):S179-S186, 2012.</li> <li>Center for Tobacco Products, Consumer Fact Sheet: Overview of the Family Smoking Prevention and Tobacco Control Act. Available at: <a href="https://www.fda.gov/tobacco-products/rules-regulations-and-guidance/family-smoking-prevention-and-tobacco-control-act-overview">https://www.fda.gov/tobacco-products/rules-regulations-and-guidance/family-smoking-prevention-and-tobacco-control-act-overview</a></li> <li>Increasing Physical Activity: Built Environment Approaches. Prevention Guide Fact Sheet: <a href="https://www.thecommunityguide.org/sites/default/files/assets/OnePager-Physical-Activity-built-environments.pdf">https://www.thecommunityguide.org/sites/default/files/assets/OnePager-Physical-Activity-built-environments.pdf</a></li> <li>Mozaffarian D, Hemenway D, Ludwig DS. Curbing gun violence: lessons from public health successes. <i>JAMA.</i> 309(6):551-552, 2013.</li> </ul>	<ul style="list-style-type: none"> <li>Reflection paper</li> <li>Assignment #5 Proposed Implementation Plan</li> </ul>
Week 7 Thursday October 17	Workshop		<ul style="list-style-type: none"> <li>Assignment #6: Peer review of talking points</li> </ul>

Monday  
October 21

- Assignment  
#7: Executive  
Summary of  
Policy  
Proposal and  
Implementation  
Plan to  
Address  
Targeted  
Problem

# ASSIGNMENTS, EVALUATION & GRADING

## Types of Assignments

You are expected to fully participate in the course, including attending class and joining class discussions about materials covered in the readings and lectures.

There are two types of assignments. A general description of the reflections and each required assignment appears below; full descriptions of each, along with grading criteria, are available on the course website. Both A-F and S-N grading options are available. Plus/minus grades may be given. Points for the course are distributed as follows:

- 20 points for reflections (2 points each),
- 80 points for assignments.

**Reflections.** You are expected to complete reflections of the required readings for 10 class periods. There are 12 opportunities to earn points for reflection papers. The reflection paper is a short (1/2 - 1 page) writing exercise that is intended to help you organize your thoughts, raise questions, allow you to engage with the reading, and prepare for class discussion. It should not be a summary of the article, but rather should be your reactions to some aspects of the assigned readings. The reflection can include the major points that sparked your interest, what you agree or disagree with, and why. It can also include how the reading may (or may not) fit with your topic of interest, or be used to identify questions the readings raise for you. The reflection paper should be written using full sentences, and not bullet points. Bring a copy of your reflection paper to class and use it to guide questions and discussion points during class. Each reflection paper is worth 2 points. The reflection papers are due at class time on the day they are due. You can earn a total of 20 points for reflection papers.

**Assignments.** You will also be expected to complete 7 assignments.

Select a public health problem and related *prevention* policy of interest to you to focus on across the following assignments (see full descriptions of each assignment on the course website). The problem/policy could be defined at the local, state, or federal level. Talk to the instructor if you are having difficulty finding a topic. Submit all assignments on the course website.

**Assignment #1: Define a Problem and Justify Policy Approach.** Write a brief memo describing a public health problem you will address and justify why a policy approach is necessary or appropriate for reducing that problem. **(15 points)**

**Assignment #2: Analyze Policy Level Options.** Write a brief note indicating possible policies at different levels and the likely policy you will focus on. **(5 points)**

**Assignment #3: Describe Policy Mechanism & Justification for Your Policy Solution.** Complete a brief worksheet describing the mechanism of how your policy will address your targeted problem and justifying why a policy approach should be used to address the problem. **(15 points)**

**Assignment #4: Draft Talking Points.** Draft 3 brief talking points you would use to help advocate for your policy proposal with elected officials. **(5 Points)**

**Assignment #5: Proposed Implementation Plan.** Complete a brief worksheet describing key components of your proposed policy as well as key elements of an implementation plan. **(15 points)**

**Assignment #6: Peer Review of Talking Points.** Complete a written review of assigned draft talking points of a member of your peer review group. **(5 points)**

**Assignment #7: Executive Summary of Policy Proposal and Implementation Plan.** Write a brief executive summary of the public health problem you plan to address, the proposed policy, key components of the policy, proposed implementation plan, and final talking points. **(20 points)**



### Grading Scale

The University uses plus and minus grading on a 4.000 cumulative grade point scale in accordance with the following, and you can expect the grade lines to be drawn as follows:

% In Class	Grade	GPA
93 - 100%	A	4.000
90 - 92%	A-	3.667
87 - 89%	B+	3.333
83 - 86%	B	3.000
80 - 82%	B-	2.667
77 - 79%	C+	2.333
73 - 76%	C	2.000
70 - 72%	C-	1.667
67 - 69%	D+	1.333
63 - 66%	D	1.000
< 62%	F	

- A = achievement that is outstanding relative to the level necessary to meet course requirements.
- B = achievement that is significantly above the level necessary to meet course requirements.
- C = achievement that meets the course requirements in every respect.
- D = achievement that is worthy of credit even though it fails to meet fully the course requirements.
- F = failure because work was either (1) completed but at a level of achievement that is not worthy of credit or (2) was not completed and there was no agreement between the instructor and the student that the student would be awarded an I (Incomplete).
- S = achievement that is satisfactory, which is equivalent to a C- or better
- N = achievement that is not satisfactory and signifies that the work was either 1) completed but at a level that is not worthy of credit, or 2) not completed and there was no agreement between the instructor and student that the student would receive an I (Incomplete).

For additional information, please refer to: <http://policy.umn.edu/Policies/Education/Education/GRADINGTRANSCRIPTS.html>.

Evaluation/Grading Policy	Evaluation/Grading Policy Description
<b>Scholastic Dishonesty, Plagiarism, Cheating, etc.</b>	<p>You are expected to do your own academic work and cite sources as necessary. Failing to do so is scholastic dishonesty. Scholastic dishonesty means plagiarizing; cheating on assignments or examinations; engaging in unauthorized collaboration on academic work; taking, acquiring, or using test materials without faculty permission; submitting false or incomplete records of academic achievement; acting alone or in cooperation with another to falsify records or to obtain dishonestly grades, honors, awards, or professional endorsement; altering, forging, or misusing a University academic record; or fabricating or falsifying data, research procedures, or data analysis (As defined in the Student Conduct Code). For additional information, please see <a href="https://z.umn.edu/dishonesty">https://z.umn.edu/dishonesty</a></p> <p>The Office for Student Conduct and Academic Integrity has compiled a useful list of Frequently Asked Questions pertaining to scholastic dishonesty: <a href="https://z.umn.edu/integrity">https://z.umn.edu/integrity</a>.</p> <p>If you have additional questions, please clarify with your instructor. Your instructor can respond to your specific questions regarding what would constitute scholastic dishonesty in the context of a particular class-e.g., whether collaboration on assignments is permitted, requirements and methods for citing sources, if electronic aids are permitted or prohibited during an exam.</p> <p>Indiana University offers a clear description of plagiarism and an online quiz to check your understanding (<a href="http://z.umn.edu/iuplagiarism">http://z.umn.edu/iuplagiarism</a>).</p>
<b>Late Assignments</b>	Not accepted
<b>Attendance Requirements</b>	Students are expected to attend all class sessions.
<b>Extra Credit</b>	No extra credit available

## SPH AND UNIVERSITY POLICIES & RESOURCES

The School of Public Health maintains up-to-date information about resources available to students, as well as formal course policies, on our website at [www.sph.umn.edu/student-policies/](http://www.sph.umn.edu/student-policies/). Students are expected to read and understand all policy information available at this link and are encouraged to make use of the resources available.

The University of Minnesota has official policies, including but not limited to the following:

- Grade definitions
- Scholastic dishonesty
- Makeup work for legitimate absences
- Student conduct code
- Sexual harassment, sexual assault, stalking and relationship violence
- Equity, diversity, equal employment opportunity, and affirmative action
- Disability services
- Academic freedom and responsibility

Resources available for students include:

- Confidential mental health services
- Disability accommodations
- Housing and financial instability resources
- Technology help
- Academic support