

## **PubH 7200-001**

### **Global Health in a Local Context: An experiential course on the social determinants, community engagement, and social action in Minnesota Fall 2016**

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<b>Credits:</b>	<b>3.0 credit</b>
<b>Course Number:</b>	<b>PubH 7200 - 001</b>
<b>Meeting Days:</b>	<b>Immersion Initiation: September 17, 2016</b> <b>Weekly Meetings: September 7-December 14, 2016</b> <b>Course Conclusion: December 17, 2016</b>
<b>Meeting Time:</b>	<b>Immersion Initiation: 8am – 5pm</b> <b>Weekly Meetings: Wednesday’s, 5:30 pm – 8:30 pm</b> <b>Immersion Closing: 8am – 5pm</b>
<b>Meeting Place:</b>	<b>Community Sites and Home Classroom at UMN</b>
<b>Instructor(s):</b>	<b>Michael Westerhaus MD, MA</b> <b>Adjunct Professor, School of Public Health</b> <b>Assistant Professor, Medical School, Department of Medicine</b> <b>Community Faculty (multiple TBD)</b>
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#### **I. Course Description**

The University of Minnesota’s Center for Global Health and Social Responsibility (CGHSR) in partnership with the organization SocMed is pleased to offer, *Global Health in a Local Context: Social Determinants, Community Engagement, and Social Action in Minnesota*, a new course in the Fall semester of 2016. This course will immerse students in the study of health equity, the social determinants of health, global health in a local setting, and community-based healthcare. The course curriculum will be modeled on the dynamic SocMed curriculum currently utilized annually in Uganda and Haiti ([www.socmedglobal.org](http://www.socmedglobal.org)), which offers a highly experiential, interdisciplinary, and inter-professional study of these topics.

These topics will be examined through the lens of social medicine, a discipline with a rich and storied history of efforts to address the social determinants of health. Social medicine has been identified by some as a particularly salient approach to engage the current collection of problems encompassed by global health. The practice of

social medicine integrates the voice and decision-making power of individuals, families and communities, is multidisciplinary and multi-sectoral in its approach, ensures an equity agenda, is guided by the local context to inform global policy, and assures a deep understanding of the social determinants of health and social science towards making an immediate difference in the health and lives of individuals. Successfully drawing upon the rich history of social medicine to tackle contemporary global and community health problems requires that the next generation of health professionals reinvigorate and re-imagine the principles and practice of global health and social medicine in partnership with patients and communities.

*Global Health in a Local Context* will merge unique pedagogical approaches including community engagement; classroom-based presentations and discussions; group and individual reflection; theater, film, and other art forms; and prioritization of narrative to understand patient, community, and health professional experiences. The curriculum promotes a biosocial approach to health and illness, thereby drawing on the disciplines of anthropology, sociology, economics, history, public policy, biomedicine, public health, and the arts. These approaches create an innovative and interactive learning environment in which students participate as both learners and teachers to advance the entire class' understanding of the interactions between the biology of disease and the myriad social, cultural, economic, political, and historical factors that influence illness presentation and social experience of health and well-being.

In order to examine the social determinants of health, this course will engage with local context through in-depth study of particular historical, political, and cultural narratives important to the locale, in this case Minnesota. The course curriculum places considerable importance on building partnerships and encouraging students to reflect upon their personal experiences with power, privilege, race, class, and gender as central to effective partnership building in the health professions and health-related fields. In the spirit of *praxis* (a model of education that combines critical reflection with action) these components of the course give students the opportunity to discern their role as health professionals concerned about health equity and justice through facilitated, in-depth conversations with core faculty, community members, and student colleagues.

## II. Course Prerequisites

Open to all UMN graduate and professional students (post-baccalaureate). The course is also open to a select number of members of the Twin Cities community with interest and appropriate training.

All participants must obtain instructor approval in order to register. Once you receive instructor approval, you will be given a permission number to register in OneStop (if applicable). Please visit CGHSR's website (<http://globalhealthcenter.umn.edu/education/global-local>) to download the application to receive instructor approval.

## III. Course Goals and Objectives

Following this course, students will be able to:

1. Analyze and articulate the social determinants of health that influence health outcomes amongst different communities in the Twin Cities
2. Differentiate behavioral, societal/cultural, and structural etiologies of health outcomes and explain how and why these etiologies are at times conflated
3. Evaluate various models of health intervention to respond to health disparities in Minnesota
4. Engage in critical self-reflection on one's personal relationship with social inequities and one's future role in responding to inequity
5. Demonstrate the ability to engage in deep listening, perform a root-cause analysis, participate in constructive dialogue, and generate a strategy to act for social change
6. Utilize an established network of diverse peers, faculty, and community members to dialogue on health challenges and solution

## IV. Methods of Instruction and Work Expectations

The course content structure will be divided into the following interwoven parts:

- **Part 1** – Social Determinants of Health: Accounting for Local and Global Context
- **Part 2** – Health Interventions: Paradigms of Charity, Development, and Social Justice

- **Part 3** – Core Issues in Social Medicine: Primary Health Care, Community Health Workers, Health and Human Rights, and Health Financing
- **Part 4** – Making Social Medicine Visible: Writing, Narrative Medicine, Photography, Research, and Political Engagement

This course content will be delivered through numerous pedagogical approaches including community engagement; classroom-based presentations and discussions; group and individual reflection; theater, film, and other art forms; and prioritization of story-telling narrative to understand individual, community, and health professional experiences. A combination of UMN-based and community-based faculty will facilitate the learning experience. Many aspects of the course will happen off-campus in a variety of community settings, such as the Center for International Health, the Center for Social Healing, the Minnesota Department of Health, and the Community University Health Care Center.

This unique course structure derives from a philosophical commitment to:

- **Praxis** – inspired by Paulo Freire, we believe that constant interplay between reflection and action generates critical analysis of the world and deepens our ability to effectively respond;
- **Partnership** – community-building amongst individuals with varied demographic backgrounds offers the most innovative and just means of moving towards health equity;
- **Personal** – who we are and where we come from matter deeply in health delivery. Critical self-awareness enhances our ability to undo harmful structural and societal factors of which we are all part.

We will be starting and closing the course with more intensive sessions (2 days at the beginning and 1 day at the end), allowing for a richer engagement with each other and communities to facilitate the unfolding of these dynamics in the course.

## V. Course Text and Readings

Prior to the course, we recommend that all students read:

1. Farmer, Paul. 2003. *Pathologies of Power: Health, Human Rights, and the New War on the Poor*. Berkeley: University of California Press.

Course sessions will draw on the following body of literature (others will likely be added by the time the course commences):

1. Porter, Dorothy. 2006. "How Did Social Medicine Evolve, and Where Is It Heading?" *PLoS Medicine* 3(10): e399.
2. Farmer P, Kim J, Kleinman A, Basilio M. *Reimagining Global Health*. Berkeley: University of California Press; 2013
3. Freire P. *Pedagogy Of The Oppressed*. New York: Continuum; 2000
4. Virchow R. Report on the Typhus Epidemic in Upper Silesia. *Am J Public Health*. 2006;96(12):2102-2105. doi:10.2105/ajph.96.12.2102
5. Commission on the Social Determinants of Health. *Closing the gap in a generation. Health equity through action on the social determinants of health*. Geneva. World Health Organisation. 2008. [http://www.who.int/social\\_determinants/final\\_report/csdh\\_finalreport\\_2008.pdf](http://www.who.int/social_determinants/final_report/csdh_finalreport_2008.pdf)
6. Foucault, Michel., 1973. *The Birth of the Clinic: An Archaeology of Medical Perception*. Tavistock Publications, pp 3-4.
7. Roberts, Maya. 2006. "Duffle Bag Medicine." *JAMA* 295: 1491-1492.
8. Kleinman, Arthur. 2010. "Four Social Theories for Global Health." *Lancet* 375: 1518-1519.
9. Okuonzi, Sam. 2004. "Dying for economic growth? Evidence of a flawed economic policy in Uganda." *Lancet* (364): 1632-37.
10. Keshavjee, Salmaan. 2014. "Epilogue: Reframing the Moral Dimensions of Engagement," In: *Blind Spot: How Neoliberalism Infiltrated Global Health*. University of California Press, pp. 136-144.
11. Minnesota Department of Health. 2014. Advancing Health Equity in Minnesota: Report to the Legislature. [http://www.health.state.mn.us/divs/chs/healthequity/ahe\\_leg\\_report\\_020414.pdf](http://www.health.state.mn.us/divs/chs/healthequity/ahe_leg_report_020414.pdf)
12. Farmer, Paul. 1995. "Medicine and Social Justice." *America* 173(2):13-17.

13. Kleinman, Arthur and Benson, Peter. "Anthropology in the Clinic: The Problem of Cultural Competency and How to Fix It." *PLoS Medicine* Oct 2006 3(10): 1673-1676.
14. McEwen, Bruce. 1998. "Protective and Damaging Effects of Stress Mediators." *NEJM* 338(3): 171-179.
15. Cueto, Marcos. 2004. "The Origins of Primary Health Care and Selective Primary Health Care." *American Journal of Public Health* 94(11): 1864-74.
16. Coates, Ta-Nehisi. 2015. "The Black Family in the Age of Mass Incarceration." *The Atlantic*. October 2015.
17. Declaration of Alma-Ata. 1978.
18. United Nations. 1948. "UN Declaration of Human Rights." On-line at: <http://www.un.org/Overview/rights.html>
19. Bleiker, Roland and Kay, Amy. 2007. "Representing HIV/AIDS in Africa: Pluralist Photography and Local Empowerment." *International Studies Quarterly* 51(4): 1003-1006.
20. Pérez, Leda, and Martinez, Jacqueline. 2008. "Community Health Workers: Social Justice and Policy Advocates for Community Health and Well-Being." *Am J Public Health* 98: 11-14.
21. Aviv, Rachel. 2015. "The Refugee Dilemma." *The New Yorker*. December 7, 2015.

## VI. Course Outline/Weekly Schedule

Hours	Activity	Location
<b>September 17<sup>th</sup>, 2016</b>		
8 hours	<ul style="list-style-type: none"> <li>- Introduction to Social Determinants of Health, Social Medicine and Health Equity</li> <li>- The Context of Health Inequities in Minnesota</li> <li>- Our Stories: Who Are We and Where do We Come From</li> <li>- Culture, Health, and Healing</li> <li>- Pathologies of Power Discussion</li> <li>- Films: <i>Unnatural Causes</i> and <i>The Danger of a Single Story</i></li> </ul>	All locations TBD (will involve combination of community sites and classroom at UMN, but no matter where class is held, it will be 3 hours of instruction time)
<b>Week 1 (September 7<sup>th</sup>)</b>		
3 hours	<ul style="list-style-type: none"> <li>- Community Engagement: Insiders and Outsiders</li> <li>- Perception and the Conceptualization of Health Problems and Assets</li> <li>- Introduction to Group work/Advocacy Project/Class as Advocacy</li> </ul>	
<b>Week 2 (September 14<sup>th</sup>)</b>		
3 hours	<ul style="list-style-type: none"> <li>- Global Health Social Theories</li> <li>- Connecting the Local and The Global: Refugee and Immigrant Health in Minnesota (follow family for 3 months and observe their story unfold through deep listening using StoryCorps model)</li> <li>- Film: <i>American Heart</i></li> </ul>	
<b>Week 3 (September 21<sup>st</sup>)</b>		
3 hours	<ul style="list-style-type: none"> <li>- Race and Racism as a Structural Determinant of Health</li> <li>- Allostatic Load Theory</li> <li>- Privilege Walk</li> <li>- Introduction to Social Movements and Advocacy</li> <li>- Film: <i>Eyes on the Prize</i></li> </ul>	
<b>Week 4 (September 28<sup>th</sup>)</b>		
3 hours	<ul style="list-style-type: none"> <li>- Attending to History: Structural Violence and the</li> </ul>	

	<p>American Indian Experience</p> <ul style="list-style-type: none"> <li>- Colonialism and Medicine: Viewing the “Other”</li> <li>- Community Partner Walk (student pairs partner with community members for a “tour”)</li> </ul>	
<b>Week 5 (October 5<sup>th</sup>)</b>		
3 hours	<ul style="list-style-type: none"> <li>- Neoliberalism and Global/Community Health</li> <li>- Asking Why: Performing a Root Cause Analysis</li> <li>- Alma Atta, the Bamako Initiative, and the World Trade Organization</li> <li>- Film: <i>Life and Debt</i></li> </ul>	
<b>Week 6 (October 12<sup>th</sup>)</b>		
3 hours	<ul style="list-style-type: none"> <li>- The Politics of Food, Diabetes, and Obesity</li> <li>- Listening for the Social Determinants of Health: Deep Listening and Mini-Ethnography</li> <li>- Narrative Medicine for All Professions</li> </ul>	
<b>Week 7 (October 19<sup>th</sup>)</b>		
3 hours	<ul style="list-style-type: none"> <li>- Global Health on the Move: Charity, Development, and Social Justice</li> <li>- Gender, Sexuality, and Health Equity</li> </ul>	
<b>Week 8 (October 26<sup>th</sup>)</b>		
3 hours	<ul style="list-style-type: none"> <li>- Group Project Presentations &amp; Project Selection</li> <li>- Moving Towards Equity in Minnesota</li> </ul>	
<b>Week 9 (November 2<sup>nd</sup>)</b>		
3 hours	<ul style="list-style-type: none"> <li>- Health Financing: Health as Human Right or Commodity?</li> </ul>	
<b>Week 10 (November 9<sup>th</sup>)</b>		
3 hours	<ul style="list-style-type: none"> <li>- Community Health Workers in Action in Minnesota</li> <li>- Partners in Health: Pragmatic Solidarity and Approach to Care</li> </ul>	
<b>Week 11 (November 16<sup>th</sup>)</b>		
3 hours	<ul style="list-style-type: none"> <li>- Constructive Dialogue</li> <li>- Decision-making, Power, and Accountability in Community-Based Work</li> </ul>	
<b>Week 12 (November 23<sup>rd</sup>)</b>		
3 hours	<ul style="list-style-type: none"> <li>- Community-Based Participatory Action Research</li> <li>- Map Your Neighborhood/Get to Know Your Neighbors</li> <li>- Assets Based Approach</li> </ul>	
<b>Week 13 (November 30<sup>th</sup>)</b>		
3 hours	<ul style="list-style-type: none"> <li>- Capturing Community Experience: Deep listening and Imagery</li> <li>- Biosocial Understandings: Bringing in the Social Sciences</li> </ul>	
<b>Week 14 (December 7<sup>th</sup>)</b>		
3 hours	<ul style="list-style-type: none"> <li>- Primary Care as a Social Change Strategy</li> <li>- Global Health Delivery – Primary Care Case</li> <li>- Multicultural Care Models</li> <li>- Assumptions and Racism in Care Delivery</li> </ul>	

<b>Week 15 (December 14<sup>th</sup>)</b>		
3 hours	<ul style="list-style-type: none"> <li>- Narrating Transition: Stories of Refugee Resettlement (share stories of resettlement and meal together)</li> <li>- Multidisciplinary and Inter-professional Care Models</li> <li>- The Ethics of Action and Moral Frameworks: Why We Do What We Do and How We are Going to Do It</li> <li>- Discerning Intentional Careers: Panel and One-on-One Consultations</li> </ul>	
<b>December 17<sup>th</sup>, 2016 - Closing</b>		
8 hours	<ul style="list-style-type: none"> <li>- Evaluation</li> <li>- Community Meal: What We've Learned</li> <li>- Group Presentations</li> <li>- Where Do We Go From Here: Staying Engaged, Maintaining Energy, and Harboring Optimism</li> </ul>	

## VII. Evaluation and Grading

This course can be taken for a letter grade or as a Pass / Fail (S/N) course. Students will be evaluated on the following:

- a. **Class Participation (20%)**  
You will earn participation credit through full attendance, being on time, participating regularly in class discussions and activities, bringing course readings into discussion, acting courteously towards others, and through following directions. Being respectful of different learning styles, we are mindful to not distribute participation points solely on how often you speak in class but rather the quality of your engagement.
- b. **Team-based Global Health Delivery Case-Study (15%)**  
Groups will be presented with a case-study related to the delivery of primary care in the Twin Cities. Each group will be given one week to respond to the case by developing an innovative model of response to the problem posed. Evaluation will be based upon group communication, integration of concepts discussed in class into the model posed, and creativity of the model developed.
- c. **Listening and Storytelling Project (25%)**  
Each student will participate in a unique project related to listening and storytelling. This project will involve learning from a person with refugee status living in Minnesota and gathering him/story over the course of the semester. Near the end of the course, the student will present his/her interpretation of the story both to the class and to individual followed during the course. Evaluation will be based upon the student's ability to demonstrate deep listening, ability to identify the impact of the social determinants of health on the person's life, demonstrating respect for the individual followed, and the ability to creatively share the individual's story with the class.
- d. **Team-based Advocacy Project (25%)**  
The purpose of this group project is to give you an opportunity to constructively and collaboratively apply some of the concepts, tools, and insights of social medicine into an action-related project. Specifically, you will develop a health advocacy project that builds on themes from the class and provides an opportunity for continued partnership with the community. Carrying out the group work successfully will involve strong interpersonal communication, mastery of concepts related to social medicine, and analytical skills to examine social problems that could be addressed in a new advocacy campaign and/or already ongoing campaign to which students could contribute.
- e. **Final Exam (15%)**  
A multiple choice/short-answer exam will be given at the end of class. The purpose of the exam is to evaluate your acquisition of the body of knowledge associated with social medicine.

A 4.000 - Represents achievement that is outstanding relative to the level necessary to meet course requirements

A- 3.667

B+ 3.333

B 3.000 - Represents achievement that is significantly above the level necessary to meet course requirements

B- 2.667

C+ 2.333

C 2.000 - Represents achievement that meets the course requirements in every respect

C- 1.667

D+ 1.333

D 1.000 - Represents achievement that is worthy of credit even though it fails to meet fully the course requirements

S Represents achievement that is satisfactory, which is equivalent to a C- or better.

**For additional information, please refer to:**

<http://policy.umn.edu/Policies/Education/Education/GRADINGTRANSCRIPTS.html>.

### **Course Evaluation**

The SPH will collect student course evaluations electronically using a software system called CoursEval: [www.sph.umn.edu/courseval](http://www.sph.umn.edu/courseval). The system will send email notifications to students when they can access and complete their course evaluations. Students who complete their course evaluations promptly will be able to access their final grades just as soon as the faculty member renders the grade in SPHGrades: [www.sph.umn.edu/grades](http://www.sph.umn.edu/grades). All students will have access to their final grades through OneStop two weeks after the last day of the semester regardless of whether they completed their course evaluation or not. Student feedback on course content and faculty teaching skills are an important means for improving our work. Please take the time to complete a course evaluation for each of the courses for which you are registered.

### **Incomplete Contracts**

A grade of incomplete "I" shall be assigned at the discretion of the instructor when, due to extraordinary circumstances (e.g., documented illness or hospitalization, death in family, etc.), the student was prevented from completing the work of the course on time. The assignment of an "I" requires that a contract be initiated and completed by the student before the last official day of class, and signed by both the student and instructor. If an incomplete is deemed appropriate by the instructor, the student in consultation with the instructor, will specify the time and manner in which the student will complete course requirements. Extension for completion of the work will not exceed one year (or earlier if designated by the student's college). For more information and to initiate an incomplete contract, students should go to SPHGrades at: [www.sph.umn.edu/grades](http://www.sph.umn.edu/grades).

**University of Minnesota Uniform Grading and Transcript Policy** - A link to the policy can be found at [onestop.umn.edu](http://onestop.umn.edu).

## **VIII. Other Course Information and Policies**

### **Grade Option Change** (if applicable)

For full-semester courses, students may change their grade option, if applicable, through the second week of the semester. Grade option change deadlines for other terms (i.e. summer and half-semester courses) can be found at [onestop.umn.edu](http://onestop.umn.edu).

### **Course Withdrawal**

Students should refer to the Refund and Drop/Add Deadlines for the particular term at [onestop.umn.edu](http://onestop.umn.edu) for information and deadlines for withdrawing from a course. As a courtesy, students should notify their instructor and, if applicable, advisor of their intent to withdraw.

Students wishing to withdraw from a course after the noted final deadline for a particular term must contact the School of Public Health Office of Admissions and Student Resources at [sph-ssc@umn.edu](mailto:sph-ssc@umn.edu) for further information.

### **Student Conduct Code**

The University seeks an environment that promotes academic achievement and integrity, that is protective of free inquiry, and that serves the educational mission of the University. Similarly, the University seeks a community that is free from violence, threats, and intimidation; that is respectful of the rights, opportunities, and welfare of students, faculty, staff, and guests of the University; and that does not threaten the physical or mental health or safety of members of the University community.

As a student at the University you are expected adhere to Board of Regents Policy: *Student Conduct Code*. To review the Student Conduct Code, please see:

[http://regents.umn.edu/sites/default/files/policies/Student\\_Conduct\\_Code.pdf](http://regents.umn.edu/sites/default/files/policies/Student_Conduct_Code.pdf).

Note that the conduct code specifically addresses disruptive classroom conduct, which means "engaging in behavior that substantially or repeatedly interrupts either the instructor's ability to teach or student learning. The classroom extends to any setting where a student is engaged in work toward academic credit or satisfaction of program-based requirements or related activities."

### **Use of Personal Electronic Devices in the Classroom**

Using personal electronic devices in the classroom setting can hinder instruction and learning, not only for the student using the device but also for other students in the class. To this end, the University establishes the right of each faculty member to determine if and how personal electronic devices are allowed to be used in the classroom. For complete information, please reference:

<http://policy.umn.edu/Policies/Education/Education/STUDENTRESP.html>.

### **Scholastic Dishonesty**

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. (Student Conduct Code:

[http://regents.umn.edu/sites/default/files/policies/Student\\_Conduct\\_Code.pdf](http://regents.umn.edu/sites/default/files/policies/Student_Conduct_Code.pdf)) If it is determined that a student has cheated, he or she may be given an "F" or an "N" for the course, and may face additional sanctions from the University. For additional information, please see:

<http://policy.umn.edu/Policies/Education/Education/INSTRUCTORRESP.html>.

The Office for Student Conduct and Academic Integrity has compiled a useful list of Frequently Asked Questions pertaining to scholastic dishonesty: <http://www1.umn.edu/oscai/integrity/student/index.html>. If you have additional questions, please clarify with your instructor for the course. 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.

### **Makeup Work for Legitimate Absences**

Students will not be penalized for absence during the semester due to unavoidable or legitimate circumstances. Such circumstances include verified illness, participation in intercollegiate athletic events, subpoenas, jury duty, military service, bereavement, and religious observances. Such circumstances do not include voting in local, state, or national elections. For complete information, please see:

<http://policy.umn.edu/Policies/Education/Education/MAKEUPWORK.html>.

### **Appropriate Student Use of Class Notes and Course Materials**

Taking notes is a means of recording information but more importantly of personally absorbing and integrating the educational experience. However, broadly disseminating class notes beyond the classroom community or accepting compensation for taking and distributing classroom notes undermines instructor interests in their intellectual work product while not substantially furthering instructor and student interests in effective learning. Such actions violate shared norms and standards of the academic community. For additional information, please see: <http://policy.umn.edu/Policies/Education/Education/STUDENTRESP.html>.

### **Sexual Harassment**

"Sexual harassment" means unwelcome sexual advances, requests for sexual favors, and/or other verbal or physical conduct of a sexual nature. Such conduct has the purpose or effect of unreasonably interfering with an individual's work or academic performance or creating an intimidating, hostile, or offensive working or academic environment in any University activity or program. Such behavior is not acceptable in the University setting. For additional information, please consult Board of Regents Policy: <http://regents.umn.edu/sites/default/files/policies/SexHarassment.pdf>

### **Equity, Diversity, Equal Opportunity, and Affirmative Action**

The University will provide equal access to and opportunity in its programs and facilities, without regard to race, color, creed, religion, national origin, gender, age, marital status, disability, public assistance status, veteran status, sexual orientation, gender identity, or gender expression. For more information, please consult Board of Regents Policy: [http://regents.umn.edu/sites/default/files/policies/Equity\\_Diversity\\_EO\\_AA.pdf](http://regents.umn.edu/sites/default/files/policies/Equity_Diversity_EO_AA.pdf).

### **Disability Accommodations**

The University of Minnesota is committed to providing equitable access to learning opportunities for all students. Disability Services (DS) is the campus office that collaborates with students who have disabilities to provide and/or arrange reasonable accommodations.

If you have, or think you may have, a disability (e.g., mental health, attentional, learning, chronic health, sensory, or physical), please contact DS at 612-626-1333 to arrange a confidential discussion regarding equitable access and reasonable accommodations.

If you are registered with DS and have a current letter requesting reasonable accommodations, please contact your instructor as early in the semester as possible to discuss how the accommodations will be applied in the course.

For more information, please see the DS website, <https://diversity.umn.edu/disability/>.

### **Mental Health and Stress Management**

As a student you may experience a range of issues that can cause barriers to learning, such as strained relationships, increased anxiety, alcohol/drug problems, feeling down, difficulty concentrating and/or lack of motivation. These mental health concerns or stressful events may lead to diminished academic performance and may reduce your ability to participate in daily activities. University of Minnesota services are available to assist you. You can learn more about the broad range of confidential mental health services available on campus via the Student Mental Health Website: <http://www.mentalhealth.umn.edu>.

### **The Office of Student Affairs at the University of Minnesota**

The Office for Student Affairs provides services, programs, and facilities that advance student success, inspire students to make life-long positive contributions to society, promote an inclusive environment, and enrich the University of Minnesota community.

Units within the Office for Student Affairs include, the Aurora Center for Advocacy & Education, Boynton Health Service, Central Career Initiatives (CCE, CDes, CFANS), Leadership Education and Development –Undergraduate Programs (LEAD-UP), the Office for Fraternity and Sorority Life, the Office for Student Conduct and Academic Integrity, the Office for Student Engagement, the Parent Program, Recreational Sports, Student and Community Relations, the Student Conflict Resolution Center, the Student Parent HELP Center, Student Unions & Activities, University Counseling & Consulting Services, and University Student Legal Service.

For more information, please see the Office of Student Affairs at <http://www.osa.umn.edu/index.html>.

### **Academic Freedom and Responsibility: for courses that do not involve students in research**

Academic freedom is a cornerstone of the University. Within the scope and content of the course as defined by the instructor, it includes the freedom to discuss relevant matters in the classroom. Along with this freedom comes responsibility. Students are encouraged to develop the capacity for critical judgment and to engage in a sustained and independent search for truth. Students are free to take reasoned exception to the views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.\*

Reports of concerns about academic freedom are taken seriously, and there are individuals and offices available for help. Contact the instructor, the Department Chair, your adviser, the associate dean of the college, or the Vice Provost for Faculty and Academic Affairs in the Office of the Provost.

**OR:**

**Academic Freedom and Responsibility, for courses that involve students in research**

Academic freedom is a cornerstone of the University. Within the scope and content of the course as defined by the instructor, it includes the freedom to discuss relevant matters in the classroom and conduct relevant research. Along with this freedom comes responsibility. Students are encouraged to develop the capacity for critical judgment and to engage in a sustained and independent search for truth. Students are free to take reasoned exception to the views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.\* When conducting research, pertinent institutional approvals must be obtained and the research must be consistent with University policies.

Reports of concerns about academic freedom are taken seriously, and there are individuals and offices available for help. Contact the instructor, the Department Chair, your adviser, the associate dean of the college, or the Vice Provost for Faculty and Academic Affairs in the Office of the Provost.

\* Language adapted from the American Association of University Professors "Joint Statement on Rights and Freedoms of Students".

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