1. Course Information

This is an interdisciplinary course about creating healthier places and reducing health disparities. The course contextualizes issues at the intersection of planning and public health such as physical activity, food systems, housing affordability, and social inclusion, and it raises questions about how policy and planning influence the distribution of hazardous and protective environments.

The first part of the course focuses on social determinants of health (e.g. conditions such as poverty, segregation, social networks) and how they relate to place. In this part of the course we employ ideas about geography of risk and the social-ecological model of health behavior to examine differences in health status across populations.

The second part of the course focuses on the relationship between place and health outcomes, and considers the both the methods for and the evidence linking built and social environments to chronic disease, injury, violence, and mental health.

The third part of the course presents emerging ideas in policy and practice, including methods of community health assessment, comparative effectiveness, participatory planning, and cultural competence.

This is a graduate-level seminar with no prerequisites. It is designed to include students from multiple disciplines. Students should be ready to engage with concepts and methods from a variety of disciplines, including public health, epidemiology, social work, city planning, political science, sociology, public policy, statistics, geography, and economics.
# Schedule

<table>
<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Topic</th>
<th>Application</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>Introduction and current state of practice</td>
<td>What is at stake in planning for healthy communities?</td>
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<tr>
<td></td>
<td></td>
<td><strong>Part 1: Social (economic, political) determinants of health and place</strong></td>
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<tr>
<td>2</td>
<td></td>
<td>Social determinants of health and the role of place among them</td>
<td>Neighborhoods and social capital</td>
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<tr>
<td>3</td>
<td></td>
<td>Geography of health risks and protective environments</td>
<td>Climate change</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>Policy I (Demand): Built environment and behavior</td>
<td>Transportation</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>Policy II (Supply): Scale of intervention</td>
<td>Food systems and environmental justice</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Part 2: Health outcomes and place</strong></td>
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<tr>
<td>6</td>
<td></td>
<td>Violence prevention</td>
<td>Parks and open space</td>
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<td>7</td>
<td></td>
<td>Chronic disease</td>
<td>Physical activity</td>
</tr>
<tr>
<td>8</td>
<td></td>
<td>Injury prevention</td>
<td>Social movements</td>
</tr>
<tr>
<td>9</td>
<td></td>
<td>Mental health, stress</td>
<td>Housing</td>
</tr>
<tr>
<td>10</td>
<td></td>
<td>NO CLASS – SPRING BREAK</td>
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<tr>
<td></td>
<td></td>
<td><strong>Part 3: Practice and policy</strong></td>
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<tr>
<td>11</td>
<td></td>
<td>Presentation of findings from interviews</td>
<td>Professional practice</td>
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<tr>
<td>12</td>
<td></td>
<td>Assessment techniques</td>
<td>Environment and development</td>
</tr>
<tr>
<td>13</td>
<td></td>
<td>Evaluation</td>
<td>Youth and community resources</td>
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<tr>
<td>14</td>
<td></td>
<td>Participatory planning</td>
<td>Rural and small communities</td>
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<tr>
<td>15</td>
<td></td>
<td>Cultural competence</td>
<td>Reflective practice</td>
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<tr>
<td>16</td>
<td></td>
<td>Presentations</td>
<td></td>
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</tbody>
</table>
Course Format, Requirements, and Expectations

Class meetings center on discussion of readings and assignments, in-class exercises, and occasional guest speakers.

Students are expected to attend every class and to complete all reading assignments before class. Most course materials will be available electronically. Occasionally, additional materials will be handed out in class.

Participation is a key ingredient for a successful class. Participation should be professional at all times. Our class sessions are equivalent to a professional meeting. This means that each student should attend every class, arrive on time, be prepared to engage the topic and other members of the class, have agency within the group, respect fellow members of the class, and use professional and inclusive language.

Most students will be more expert in certain areas than in others because of disciplinary backgrounds and prior experience, but everyone has a lot to learn from one another. Students should prepare to share both their questions and their knowledge with the class to facilitate peer instruction. Additional readings, meetings with subject-matter experts, or meetings with the instructor during office hours may also help students become more proficient in topics outside of their home discipline.

Students are expected to integrate information from lectures, readings, discussions, and exercises into their assignments. Some class time may be spent discussing assignments.

Because this course complements the Health Impact Assessment studio organized with the Tri-County Health Department, some class time may be spent on joint projects.

Communication

Unless otherwise noted, we will use Canvas for all official course communication and it is the responsibility of each student to use Canvas settings that enable reliable communication. For example, this may mean selecting a personal e-mail address as the default in Canvas. Canvas may be used for making course announcements, changing the schedule, returning graded assignments, personal communication, or other course-related business.

Learning Objectives

After completing this course, students will be knowledgeable about the intersection of public health, people, place, and policy.

Per the Planning Accreditation Board’s educational outcomes criteria, the course has the following learning objectives:
1. Governance and Participation: Appreciation of the roles of officials, stakeholders, and community members in planned change – particularly the interdisciplinary nature of healthy communities planning.

2. Quantitative and Qualitative Methods: Data collection, analysis and modeling tools for forecasting, policy analysis, and design of projects and plans – particularly the data needs and analytical techniques for local-scale population health analysis.


4. Plan Creation and Implementation: Integrative tools useful for sound plan formulation, adoption, implementation, and enforcement – particularly with respect to public health components.

5. Leadership: Tools for strategic decision-making, team building, and organizational/community motivation – particularly leadership in bringing public health to planning-related policy agendas.

**Grading Policy**

Grades will be based on the following (see the descriptions and rubrics below):

<table>
<thead>
<tr>
<th>Date Due</th>
<th>Assignment</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Each class</td>
<td>Attendance and engagement</td>
<td>28</td>
</tr>
<tr>
<td>One time</td>
<td>Facilitation and Jeopardy game</td>
<td>22</td>
</tr>
<tr>
<td></td>
<td>Comparative analysis of plans</td>
<td>40</td>
</tr>
<tr>
<td></td>
<td>Interview the expert</td>
<td>40</td>
</tr>
<tr>
<td></td>
<td>Knowledge gap project</td>
<td>70</td>
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<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>200</strong></td>
</tr>
</tbody>
</table>

Final grades will be based on the total number of points earned:

- 200-180 points = A/A-
- 160-180 points = B-/B/B+
- 140-160 points = C-/C/C+
- ≤ 140 points = D or below

All assignments, unless otherwise noted, must be submitted in PDF format on Canvas by 14:00 on the due date. Please compile multiple pieces of an assignment into a single PDF. Each student should be familiar with Canvas’s assignment submission procedures.
Grading will be based primarily on the quality and depth of the work presented, but organization, composition, and presentation (editing, spell checking) will also be taken into account. For group assignments, the grade will also reflect the number of persons working on the project (i.e., a team of three will be expected to produce a commensurately more detailed and sophisticated analysis than that produced by a team of two).

Students are expected to turn in both graded and ungraded assignments on time (see schedule). Out of respect and fairness for all members of the class, extensions will be granted only in the case of an actual emergency. Late assignments (those for which an extension has not been granted) lose up to five points per day.

**Academic Honesty**

Education at the University of Colorado Denver and in the College of Architecture and Planning (CAP) depends on honesty and integrity, as well as appropriate conduct. CAP students are required to follow the Student Code of Conduct and the Honor Code. Please refer to the following link for details.


All University and College policy, as well as common sense, regarding academic honesty applies in this course. Plagiarism and cheating are not tolerated and will be handled through the University’s official process. When working in a group, it is the responsibility of everyone in the group to maintain the norms of academic integrity.

Students may do joint work with other courses only with the permission of all instructors and when the work is suitable for the topic and the course.

**Accommodations**

Any student who needs or may need accommodations due to a disability should speak with the instructors as soon as possible, and should also contact the Disability Resources and Services Office on campus to arrange accommodations.

See:http://www.ucdenver.edu/student-services/resources/disability-resources-services/accommodations/Pages/accommodations.aspx

**2. Assignments**

The assignments are designed to give students experience analyzing various aspects of healthy communities planning, and to prepare students to participate in a cross-disciplinary practice environment.
Most of the assignments will be exchanged with a partner for thoughtful review and comment. Each author is also a reader. This process of reviewing other students’ work supports knowledge exchange, and enriches learning.

**ASSIGNMENT 1: Participation**

**Due: At each class meeting**

The objective of this assignment, which is ongoing throughout the semester, is to use the time in class to practice thinking and working collectively. Working as a collective is a critical skill, and practice helps to develop this skill.

Participation should be professional at all times. Our class sessions are equivalent to a professional meeting. This means that each student should attend every class session, arrive on time, be prepared to engage the topic and other members of the class, have agency within the group, respect fellow members of the class, and use professional and inclusive language.

Students should bring copies of each week’s readings and their notes from the readings to class.

Student grades for participation are based on three elements:

1. Attendance;
2. Active participation (see description); and
3. Leading discussion (see description) and preparing an accompanying Jeopardy game board (see description) for one week’s class (may be done in teams depending on the number of people in the class – work will be distributed fairly).

**Elements of active participation:**


- Preparation: Demonstrate being prepared for seminar by taking notes, bringing notes and copies of the readings to class, researching unfamiliar or interesting topics found in the readings, and setting an intention for the meeting.
- Engagement: Actively engage with other members of the class in respectful and inclusive discussion.
- Initiative: Ask questions during discussion that focus, clarify, and summarize what the group is talking about.
- Response: Respond to questions and discussion points in ways that build knowledge and comprehension, and that apply ideas from the readings.
- Discussion: Active participation extends the discussion with peers and reflects higher order thinking skills (analysis, synthesis, etc.).

**Elements of seminar facilitation:**
Facilitation Skills: Facilitators ask questions and use strategies that draw out knowledge of theory/experience; facilitators are knowledgeable and offer correction and guidance when necessary.

Organization: Seminar is structured in a clear and logical sequence.

Originality: Visual and written aids are interesting, innovative/creative and helpful.

Engagement: Facilitators generate a high degree of student interest; respectful and inclusive; all students encouraged to participate.

Discussion: Discussion is focused, relevant and engaging; theory (readings) related to experience; applications and implications clear and accurate.

Consider using structured facilitation techniques, such as:
http://tep.uoregon.edu/services/newsletter/year95-96/issue30/nominal.html

or
http://faculty.washington.edu/mpurcell/598syllabuss05.htm (toward the bottom of the page, search for “discussion facilitation”)

**Jeopardy Game Assignment (part of discussion facilitation and participation)**

Each week, beginning the second week of class, the groups responsible for facilitating class discussion will prepare a Jeopardy game board with questions (“answers”) about the week’s topic. More information about how to do this is included below. The discussion facilitators will lead the class through the game as a warm-up exercise prior to discussion.

The Jeopardy game assignment achieves three goals:

1. At the beginning of class we use an easy warm-up exercise to ease us into the heavier work of discussion. This Jeopardy game will be our warm-up exercise.

2. The Transportation Research Board Health and Transportation Subcommittee (TRB H+T) will lead a workshop about Health Impact Assessment for Small and Rural Communities in Vermont in summer 2014, and TRB H+T will use a Jeopardy game to gently introduce public health ideas to a transportation engineering audience. The Jeopardy game boards that the class creates will be the foundation for the TRB H+T workshop (everyone will be credited with authorship, let me know if you might be able to/would like to attend this workshop).

3. The Tri-County Health Department (TCHD, a sponsor of this course) is leading the development of regional capacity in Health Impact Assessment. This means introducing healthy communities planning topics to a broad range of audiences, and, similar to the Vermont workshop, using an interactive game is a good way to accomplish this. Thus, the class’s game boards will also be used to develop a version
How to prepare a Jeopardy game board for class:

Working with a partner/group, use the Jeopardy game template to create a game board based on the week’s readings and related topics. The game may also include some categories or questions (“answers”) for topics covered in previous weeks (i.e., the game can be cumulative).

Link to game template: https://www.dropbox.com/s/8kkqe1o8etjkvhi/health_jeopardy.ppt
And sound files:
https://www.dropbox.com/s/b3njy0b7jogsfjh/jeopardy_think_music.mp3
https://www.dropbox.com/s/bjrlguxrtfur71y/Jeopardy-daily2x.mp3
https://www.dropbox.com/s/d9auctj9bwv01xr/Jeopardy-final-reveal.mp3

Create a single game board with six categories of questions (“answers”) and five levels for each category (30 cells total). Within each category, the questions should become increasingly difficult, but they should all be simple, straightforward questions. The goal is not to baffle the players, but to reveal new information about health and place to an audience without much prior knowledge about the topic. The questions should have only one answer; they should ask people to recall information, not give opinions, synthesize information, or evaluate alternatives. Questions should be fun and creative! They can use images, sounds, etc.

Use the information in the readings to build questions and answers to populate the game board. Feel free to work outside of the readings and use information from agency websites, grey literature, and popular sources (as long as the information is accurate and on topic).

The Internet offers some websites about creating Jeopardy games that might be helpful:
http://www.d.umn.edu/~hrallis/courses/5413su04/assignments/game.html

The class will play the game and offer suggestions for refining the questions (“answers”). Because the game exercises lower-order thinking (according to Bloom’s taxonomy), after playing we will be ready to move on to higher-order thinking to deepen our understanding of a topic, learn to apply it in different contexts, critique it, and create new knowledge that builds on it.

Bloom’s taxonomy:

Bring an electronic copy of the game to class and install it on the classroom computer before the beginning of class to allow time for troubleshooting. After class, make any
adjustments to the game and upload a copy (all necessary files) to Canvas by the end of the day.

### Grading Rubric: Participation

<table>
<thead>
<tr>
<th></th>
<th>Excellent</th>
<th>Fair</th>
<th>Poor</th>
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</thead>
<tbody>
<tr>
<td>Attending class sessions, 14 total, 1 point each</td>
<td>Can be relied on to be present and prepared (14 points)</td>
<td>Misses class or is unprepared up to two times (12-13 points)</td>
<td>Is late, absent, and unprepared more than two times (≤ 11 points)</td>
</tr>
<tr>
<td>Active participation in class exercises and discussion, 14 total, 1 point each</td>
<td>Participates in all of the reading response exercises and discussions (14 points)</td>
<td>Occasionally does not participate in the reading exercise or discussion (12-13 points)</td>
<td>Does not participate in the reading exercise or discussion more than a few times (≤ 11 points)</td>
</tr>
<tr>
<td>Leading discussion and creating the session’s Jeopardy game, 22 points</td>
<td>Super fun Jeopardy game. Creative and effective (22 points)</td>
<td>Mostly fun Jeopardy game. Not very creative, but mostly effective (20-21 points)</td>
<td>Game was missing some important elements to achieve fun and be effective (≤ 19 points)</td>
</tr>
</tbody>
</table>

**Total** 50 points  42-49 points  ≤ 41 points

**ASSIGNMENT 2: Comparative Study of Plans**

The goal of this assignment is to understand the current state of healthy communities planning practice as evidenced by its plans. This assignment familiarizes students with different types of community health plans and the institutional contexts in which they are created.

In this assignment, each student will select and make a comparative analysis of three unique plans:

- A municipal/regional comprehensive plan or sustainability plan;
- A county public health plan; and
- A community-based or neighborhood health plan.

The three plans do not need to be from the same place.

In a 2,000-word analytical memo, each student should: (1) summarize the key public health topics included in the plans as well as gaps in the topics; (2) explain the data and capacity (e.g., expertise, methodologies, participation) needed to carry out such a planning effort, or lack of data and limitations to capacity; (3) discuss any similarities or differences in what the plans seek to accomplish and how they seek to accomplish it; and (4) articulate what models
or assumptions these plans make about the relationship between people, place, public health, and policy.

The memo should begin with an introductory/summary paragraph that introduces the three plans, and should provide citations for the plans at the end (citations are not included in the word count).

**Reader-Author Responses**

A draft of the memo is due to the reader on February 5th. The reader should not proofread or edit the memo. The reader should provide written feedback to the author (no more than one-page, single-spaced) that answers the following questions: (1) what words or phrases stand out (may annotate the draft); (2) what is the author trying to say; (3) what is the “story” of your reading? The reader’s feedback to the author is due on February 12th. The author should submit this feedback with the final assignment on February 19th. We will discuss the assignments in class on the 19th, but we will not use Power Point to make presentations.

**Sources for Plans**

The American Planning Association conducted a study of public health elements and concerns in comprehensive and sustainability plans, and their list of plans is available here:


See also:

- County Health Rankings, [http://www.countyhealthrankings.org/app/home](http://www.countyhealthrankings.org/app/home)
- Middle Tennessee Transportation and Health Study: [http://www.middletnstudy.com/About.aspx](http://www.middletnstudy.com/About.aspx)

<table>
<thead>
<tr>
<th>Grading Rubric: Study of Plans</th>
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<tbody>
<tr>
<td>Excellent</td>
</tr>
<tr>
<td>Analysis of plans</td>
</tr>
<tr>
<td>------------------</td>
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<tr>
<td>Reflection on current state of practice</td>
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<tr>
<td>Communication and style</td>
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<td>Reader response and revision</td>
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<tr>
<td>Total</td>
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**ASSIGNMENT 3: Interview the Expert**

The goal of this assignment is to understand healthy communities planning from the perspective of a person who works in this field. The interviews will provide insight into some of the exciting practices developing in the field, and some of the constraints and conflicts that practitioners encounter. The interviews will be discussed during class on April 19th as a transition to learning about the practice of planning for community health.

In this assignment, each student will identify an expert practitioner working on an aspect of healthy communities planning. This expert practitioner may work in any institutional context: government, consulting, nonprofit, community, academia, etc. This person is an expert because he or she has a deep and rich understanding of the issues at stake in linking people, place, public health, and policy.

**Background Research and Draft Questions**

The assignment has two parts. After identifying an interview subject and arranging an interview (about 30-60 minutes, depending on the interviewee’s availability), each student will carry out background research about the interviewee and his or her area of expertise to help prepare a set of interview questions. To guide the development of interview questions, state what you want to learn from this expert. This “interview theme” should be stated in 50 words or fewer.

The brief background memo (no more than 1,000 words), the 50-word interview theme, and a set of interview questions (three main open-ended questions with probes, for example) are
due to the reader on March 5th. The reader’s responses to the author are due on March 12th. For this assignment, the reader should comment on the background research and questions and identify ways to improve the link the interview questions with the interview theme.

Please seek out information about qualitative interviewing in preparation. For example: http://www.jhsph.edu/research/centers-and-institutes/center-for-refugee-and-disaster-response/publications_tools/publications/_pdf/pr_section_3.PDF

**Conducting the Interview**

To arrange the interview, contact your interviewee and explain who you are, your request for and interview, and the purpose of the interview.

Be on time to the interview, and before beginning, explain to the interviewee (again) the purpose of the interview and what to expect. Also, tell the interviewee that he or she can refuse to answer any question and can stop the interview at any time.

Please ask your interviewee if you may contact him or her at a later date for any follow up questions. The Department of Planning and Design is improving its website, and is looking for examples of student work to include online. These interviews would be good material for the website. If your interview is selected to include online, we would like to ask your permission, and the interviewee’s permission, to use it online.

You may record the interview if you would like to. Be sure to ask for permission from the interviewee if you elect to do this.

**Interview Write-Up and Presentation**

The final deliverable is a transcript (or notes) of the interview, including the interview questions and the interviewee’s responses. This is an example of an interview transcript from The New York Times:

http://www.nytimes.com/2013/08/18/magazine/snowden-maass-transcript.html?_r=0

Include in the final submission the background research, interview guide, 50-word interview theme, your reader’s comments on the submission, and a reflection on what you learned from the interview (no more than one page, single-spaced).

During class, each student will discuss his or her interview, and what was learned.

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<tr>
<th>Grading Rubric: Interview the Expert</th>
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<tbody>
<tr>
<td></td>
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<tr>
<td><strong>Interview focus and preparation</strong></td>
</tr>
<tr>
<td>Excellent</td>
</tr>
<tr>
<td>Fair</td>
</tr>
<tr>
<td>Poor</td>
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</table>

<table>
<thead>
<tr>
<th>Interview focus and preparation</th>
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</thead>
<tbody>
<tr>
<td>The background research, theme, and questions are cohesive</td>
</tr>
<tr>
<td>The topic may be interesting, but the approach needed</td>
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<tr>
<td>The preparation was not adequate (≤ 11 points)</td>
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</table>
# ASSIGNMENT 4: Knowledge Gap Project

Based on the two previous assignments and materials discussed in class, gaps in knowledge about the relationships between people, place, public health, and policy will be evident. The goal of this assignment is to identify one such gap, and provide original research to begin to fill it.

## Knowledge Gap and Research Question

The first step in the assignment is to identify the gap in knowledge and develop a research question that addresses this gap. Because this is a course project, not a dissertation, select a research question that can be answered with the time and energy resources that you realistically have. You may select any style of research or creative work that you think will develop your skills and be appropriate for discovering knowledge to fill the knowledge gap you identified.

In a memo to your reader, state the gap in knowledge in one sentence. In another, single sentence state why it is important to address this gap in knowledge. Then, state your research question in 50 words or less. Finally, outline three things that you will do to answer your question, including any literature that you will review, any data that you will analyze, and how you will analyze these data. This memo is due to the reader on March 12th.

Each reader should provide feedback to the author that focuses and clarifies the research question, and strengthens the link between the question, methods, and the gap the author seeks to address. The reader’s feedback to the author is due on March 19th.

## Research and Final Deliverable

<table>
<thead>
<tr>
<th>(15 points)</th>
<th>more focus (12-14 points)</th>
<th>Reflection is not effective (≤ 11 points)</th>
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</thead>
<tbody>
<tr>
<td>Effectiveness of interview</td>
<td>Reflection teaches us specific things about practice that relate to the class (15 points)</td>
<td>Reflection is vague and not clearly linked to class, but it is reflective (12-14 points)</td>
</tr>
<tr>
<td>Demonstration of professionalism</td>
<td>Approach to the interview process is clear, complete, and responsible (5 points)</td>
<td>Approach to the interview process needed more care (3-4 points)</td>
</tr>
<tr>
<td>Reader response and revision</td>
<td>Useful and thorough comments and revisions (5 points)</td>
<td>Satisfies the assignment, but is not very helpful (3-4 points)</td>
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<tr>
<td>Total</td>
<td>40 points</td>
<td>32-39 points</td>
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</table>
The final deliverable is an analytical memo no longer than 3,000 words that explains the motivation for the selection of the particular research question, outlines findings from existing literature, discusses the data and methods used to conduct this new study, describes the results of the study, and discusses the results (i.e., whether this study addressed the knowledge gap and what additional information one would need to do so).

In the final submission, include the final memo, preparatory materials, and reader’s response.

Data Resources

Health outcomes data available from the Colorado Department of Public Health and Environment website. These data include surveys from the CDC’s Behavioral Risk Factor Surveillance System (BRFSS), among other local health data.

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<tr>
<th>Grading Rubric: Knowledge Gap Project</th>
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<tr>
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<td></td>
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<tr>
<td>Research question and hypothesis are well defined 25</td>
</tr>
<tr>
<td>Conclusions supported by the data and analysis</td>
</tr>
<tr>
<td>Communication and style</td>
</tr>
<tr>
<td>Reader response and revision</td>
</tr>
<tr>
<td>Total</td>
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</table>

4. Readings

WEEK 1. Introduction, current state of practice, and what is at stake

   http://www.rwjf.org/content/dam/farm/reports/reports/2013/rwjf406474.
Optional background readings about public health, planning, and policy:


**WEEK 2. Social determinants of health and the role of place among them**


Optional readings:


**WEEK 3. Geography of health risks and protective environments**

Optional readings:


WEEK 4. Policy I (Demand): Built environment and behavior


Optional readings:


WEEK 5. Policy II (Supply): Scale of intervention and intergovernmental policy

Optional readings:


WEEK 6. Violence prevention


Optional readings:


WEEK 7. Chronic disease prevention


WEEK 8. Injury prevention


Optional readings:


WEEK 9. Mental health and stress


Optional readings:


WEEK 10. NO CLASS—SPRING BREAK

WEEK 11. In-class discussion of interview assignment

WEEK 12. Assessment techniques


Optional readings:


**WEEK 13. Evaluation and comparative effectiveness**


Optional readings:


**WEEK 14. Participatory planning**


Participatory Assessment of Major Barriers to Health Care Access and Use.” *Qualitative Health Research,* 18:633-646.

Optional readings:


**WEEK 15. Cultural competence**


Optional readings:


**WEEK 16. Final presentations**