



Course title:	Integrated Healthcare Policies and Services
Course #/term:	SW 637-012, Winter 2021,
Time and place:	Monday's 9am-12pm Virtually: On-line
Credit hours:	3
Prerequisites:	--
Instructor:	Julie D. Cushman, LMSW, ACSW, CAADC (Address me as Julie)
Pronouns:	She/her/hers
Contact info:	Email: jcushman@umich.edu Phone: 734-845-0867 You may expect a response within 24-48 hours.
Office:	N/A
Office hours:	Monday's 1-5; Tuesday's 12-1:30 and by appointment (on-line video, phone)

The Online Classroom

Definitions

Online Synchronous = "Same time-different place"

We are all accessing the same platform(s) at the same time and—to the extent possible—we are interacting with each other verbally, visually, in chats, and/or in collaborative spaces (like Bluejeans, Zoom, Google Drive, Canvas, etc.).

Online Asynchronous = "Different time-different place" or "On-demand"

Students access and engage with the content and assignments at whatever time works best for them. For many, this is indistinguishable from what we traditionally think of as "homework." Or preparing for the upcoming class session

In this course, there will be a blend of:

- Online synchronous class time
- Online synchronous group time, generally during scheduled class hours
- Asynchronous group time (shared documents, texts, emails, etc.)
- Asynchronous individual time (reading; watching; listening & discussion or collaborative docs.

The online classroom poses special opportunities and challenges for each of us. It is my goal to be flexible and responsive to each student's unique needs. At the same time, my experience is that the more **interactive and engaged** we are when we are synchronous, the more we can all learn and the more relevant this course will be for you. Not everyone will have the capacity to have video and audio on for the full synchronous class times and group times, but **I urge you to consider enabling audio and video as much as possible when we are together, and especially in small groups.**

Credit for the above goes to Katie Doyle-Clinical Faculty

1. Course Statement

Course description and content

a. This course will examine the integration of policies, financing, organization and delivery of physical health and behavioral health (mental health and substance abuse) care services and programs for adults, youth, and children. The primary focus of study will be the U.S. healthcare system, with international comparisons, including promotion, prevention, treatment and rehabilitation services in primary care, acute care, chronic care, and long-term care settings. The evolution of the integration of primary care and behavioral health care services will constitute the focus of our policy analysis. Historical and contemporary policy issues and trends, including ethical dilemmas, controversies, marginalized and stigmatized populations, social movements and the role of the Patient Protection and Affordable Care Act (ACA) as they affect access to care and health care quality will be discussed. Strategies for influencing policies and programs, inequities and disparities in care and the impact of key diversity dimensions such as ability, age, income, class, color, culture, ethnicity, family structure, sex, sexual orientation, gender identity, gender expression, marital status, national origin, race, religion and spirituality on health care, will be examined. Opportunities for direct involvement by students in the political and organizational processes used to influence policy and delivery systems will be encouraged. The course reflects the values of the profession and focuses on the role of the social worker as "social policy practitioner" in promoting the maintenance or attainment of optimal physical and mental health, recovery and wellness and social and economic justice.

b. Course objectives and competencies

Upon successful completion of this course, students will be better able to:

1. Describe the evolution, organization, and distribution of health care services in the U.S., including gaps and excesses, and inequities in access and quality of care, including physical and behavioral health services.
2. Identify the strengths and limitations of the U.S. healthcare system compared with health care systems in other countries and directions for needed change.
3. Describe financing mechanisms for health care services, including physical and behavioral health care, and the impact of these mechanisms on equity, access and successful integration of services.
4. Describe evidence-based models for health care delivery including integrated physical and behavioral health care services in a variety of settings and addressing a variety of populations.
5. Describe disparities in health care in the U.S., their sources, and systemic strategies for intervention.
6. Identify the role of government in healthcare policy and in planning, organizing, and delivering health and behavioral health services, including advocating for systems change.
7. Identify, describe and discuss the key elements of the Affordable Care Act, and assess progress toward implementation at the federal and state levels.

8. Discuss current ethical issues and controversies and apply ethical principles and decision-making in health care.
9. Identify the role of social work in policy development, services planning and delivery of health care and behavioral health care services.
10. Discuss innovative approaches to improving health care access, quality and delivery, particularly addressed to eliminating health care inequities.

c. Course design:

This class will strive to foster a learning environment where each student can reflect critically on sources of power and mechanisms of oppression and privilege, construct a framework for justice, and examine sources of their beliefs and perspectives that helps to understand historical and modern health care systems and policies and how these influence access and care.

This course will work to create a climate that supports critical analyses, mutual learning, engaging within and across differences and examining sources of power and knowledge. It involves lectures, video, and participation in experiential activities. Additionally, this course will provide a forum to critically examine how health policy and care impact our multiple status locations, and shape our beliefs, assumptions, behaviors, and life experiences. Special attention will also be given knowledge about health equity and policy change, and principles of community advocacy.

Teamwork and collaboration is a central focus of the course design. To mirror the partnerships that social workers participate in at micro, mezzo and macro levels, students will have the experience to collaborate on teams, give and receive constructive feedback, and contribute to and manage complex projects, and navigate relationships with colleagues. Students will have the opportunity to simulate collaboration as part of a care team, part of an advocacy organization, and part of a research team or think tank.

The class will be very hands-on and will also utilize innovative resources in teaching content, including MOOCs, online training, webinars, videos, and simulations. Skills will be learned, practiced, and applied in class-based and project-based experiences.

Additionally, this course is an advanced level course with adult learners. Thus, the expectation is that students take charge of their own learning, their own participation, and their support for the learning of their colleagues in the classroom. The class will consist of a combination of mini-lectures and direct application of skills in small groups or pairs to take theory to the level of community change. Students must come prepared to fully engage in order to get the most out of this class. Everyone in the classroom has expertise and experience to offer into the learning space. Thus, students will be asked to bring and share examples and root the larger theories of change in their own background and experience.

I rely on you (as adult learners) to set your own learning goals.

1. Your learning will be directly correlated with the effort you expend in taking responsibility for your own goals and agendas.

2. We will discuss many of the readings, podcast, videos in class and/or through discussions (on canvas or Google docs), but I will not review them all in class, although I will look for evidence that you have done all the readings in your assignments, discussions, and class activities.

You need to take responsibility for letting me know if some discussion of a topic, concept, framework would be useful or interesting, and let me know if you have a question or are not sure you see the relevance of something.

Synchronous class: Each week we will have synchronous (live) class time ranging from 90-120 minutes. However, to optimize our time together, acknowledge our (limited) attention spans, and to follow online teaching best practices, I will strive to keep lecture short and have various activities to apply the lecture topics and increase your skills.

Asynchronous class: In addition to our limited synchronous time together, you are expected to engage in our course content via our Canvas modules, discussion boards and other course assignments each week (can be found on course schedule in the third column titled **Asynchronous work & assignments Due I** highly encourage you to keep pace week by week with the asynchronous materials (including group work). This will keep you on track.

d. Curricular themes

Theme Relation to Multiculturalism & Diversity

Multiculturalism and Diversity issues will be integrated throughout the course and prominent in content and assignments related to health care disparities. The course will address a range of diversity dimensions (including ability, age, class, color, culture, ethnicity, family structure, gender (including gender identity and gender expression), sex and sexual orientation, marital status, national origin, race, and religion or spirituality).

Theme Relation to Social Justice

Social Justice and Social Change will be addressed throughout the course, including content on equity, quality and access, ethical issues in healthcare, and the role of social work in promoting social justice and social change in the healthcare system.

Theme Relation to Promotion, Prevention, Treatment & Rehabilitation

Promotion, Prevention, Treatment, and Rehabilitation will be addressed through content on the organization of health care services, allocation of resources, ethical issues in healthcare, the delivery of preventive, primary, acute, chronic and long-term care and care for people with disabilities and in the scope of policies and services addressed in health care reform efforts.

Theme Relation to Behavioral and Social Science Research

Behavioral and Social Science Research will be presented throughout the course and will include findings from medical sociology, geography and anthropology; political science, health care economics and health psychology; social work, public health, nursing and medicine.

e. Relationship to social work ethics and values

The course reflects the values of the profession and focuses on the role of the social worker as "social policy practitioner" in promoting the maintenance or attainment of optimal physical and mental health, recovery and wellness and social and economic justice.

f. Intensive focus on Privilege, Oppression, Diversity and Social Justice (PODS)

This course integrates PODS content and skills with a special emphasis on the identification of practice, theories and/or policies that promote health equity, illuminate injustices and are consistent with scientific and professional knowledge. Through the use of a variety of instructional methods, this course will support students developing a vision of health equity and policy change, quality care and access, ethical issues in healthcare, and the role of social work in promoting social justice and social change in the healthcare system.

g. Anti-Oppression Statement: As a community, we encourage each other to critically examine issues related to power, privilege, and oppression. These issues; therefore, are integrated into each classroom experience. As a result, there will be class discussions that may be difficult or challenging. In order to have the most supportive environment possible, we must all commit ourselves to fostering an inclusive, anti-oppressive space in which each person takes responsibility for their own language, actions and interactions. It is important that we listen to each other about how our words and actions are affecting one another and the learning environment. We share the task of negotiating the dual priorities of authentic free speech and active regard for one another, being open to diverse perspectives and ideas. We recognize that microaggressions happen; however, overt slurs in relation to race, age, ethnicity, gender, gender identity, gender expression, sexual orientation, religion/world view, immigration status, size, nationality, dis/ability, marital status, political affiliation, or any other identities, will be addressed directly. Throughout the course, we will negotiate other guidelines about class discussions.

2. Class Requirements

a. Text and class materials

This class does not require a physical text. All readings, media, and handouts from recent social science/medical journals and pertinent news articles and/or social media publications, blogs,

short videos, and other sources will be distributed to students via Canvas. This course will also include supplemental videos and social media use to enhance and support your learning experience. All items will be posted to Canvas, we are all responsible to check Canvas regularly throughout the week for updates to course materials and discussion boards.

How I organize the CANVAS site: When you sign onto the course site, the front page gives you a brief welcome to the course and my contact information. I organize the course using modules-one module for each class session (labeled with the week number, date of the session-ex/ Week 1: 8/31) and the weeks topic. In each weeks module there are pages that tell you what to read, listen to, watch, , optional sources, required discussions, activities to be done during the week and uploads of the PPT and any resources or supplemental materials/handouts for that class session.

All assignments will be in the assignment tab and unless otherwise noted are to be submitted to Canvas by 11:59pm on the day they are due.

Coming prepared to class:

To fully engage in the course topic and become a competent and skilled social work practitioner, it is expected that students will complete all required asynchronous work (readings, podcasts, videos, TED talks, homework assignments). Much of your learning will come from discussion (during the on-line classes or canvas discussion board) around the asynchronous work, lectures and activities and student presentations. As such, it is important that students in this class come prepared to critically express and exchange ideas related to the topics discussed. This will require both reflection on your part, prior to entering class, and critical analysis for ideas and perspectives different from your own while in class. Please keep in mind that effective advocacy (a cornerstone of social work practice) requires the ability to understand and appreciate opposing perspectives and competing self-interests. I ask that students refrain from doing non-course activities when we are on-line so you can more fully participate in discussion around the material.

b. Class schedule – subject to change

Session + Date	Topics Covered	Read/Watch/Listen – To be done prior to class	Asynchronous work & assignments Due
Week 1 1/25/21	Course overview, Terminology, Social Workers as Policy Practitioners and Social Work	<ul style="list-style-type: none"> Pawar P. (2019) Social Work and Social Policy Practice: Imperatives for Political Engagement. <i>The International Journal of Community and Social Development</i>. 1(1): 15-27. 	Discussion board: KWT Activity

	Ethics in Health Care	<ul style="list-style-type: none"> • Janssen S. (2016). Moral Distress in Social Work Practice-When Workplace and Conscience Collide. <i>Social Work Today</i>, 16(3): 18-20 • Brink S. (2020, December). A Million Dollar Prize for A Doc Who Believes in ‘Accompaniment’’. NPR: • Reamer, F. (2018). Ethical Issues in Integrated Health Care: Implications for Social Workers. <i>Health and Social Work</i>, 43(2): 118-124 • NASW Code of Ethics- Ethical Standards: 8-24 Standards 1, 5.02 and 6-can skim the rest. 	
Week 2 2/1/21	History and Organization of U.S. Healthcare System, Affordable Care Act Impact	<p>Read</p> <ul style="list-style-type: none"> • Community Mental Health Landscape Analysis. CHRT.org • Baum, N., Rheingans, C., and Udow-Phillips, M. The Impact of the ACA on Community Mental Health and Substance Abuse: Experience in 3 Great Lakes States. July 2017. Center for Healthcare Research & Transformation. Ann Arbor, MI. • Gorin, S. & Moniz C. (2019) Health and mental health policy past, present, and future. In Reisch, M (Ed.), Social policy and social justice: Meeting the challenges of a diverse society. (pp 411-438). • Cognella. Oberlander, J. (2019). Unfinished Journey: The Struggle over Universal Health Insurance in the United States. In. Oberlander,et. al. eds. The Social Medicine Reader, Volume II, Third Edition (p. 305-313). Duke University Press. 	Individual Group Preparation form-submit to canvas.
Week 3 2/8/21	Financing of Health and BH Services	<p>Read</p> <ul style="list-style-type: none"> • https://chrt.sites.uofmhosting.net/wp-content/uploads/2017/08/Impact-of-the-ACA-on-Community-Mental-Health-and-Substance-Abuse-Services_final-8_15_17-1-1.pdf • Berwick DM. The Toxic Politics of Health Care. JAMA. 2013;310(18):1921–1922. • Shrank, W. H., Keyser, D. J., & Lovelace, J. G. (2018). Redistributing investment in health and social services—the evolving role of managed care. <i>Jama</i>, 320(21), 2197-2198. • Cattel, D., Eijkenaar, F., & Schut, F. T. (2020). Valuebased provider payment: towards a theoretically 	Newsorthy Article presentation

		<p>preferred design. Health Economics, Policy and Law, 15(1), 94-112.</p> <p>Watch</p> <ul style="list-style-type: none"> • TED Talk: Why the Economics of Healthcare Will Never Be the Same https://www.youtube.com/watch?v=HRboT_SsxP8 	
Week 4 2/15/21	Integrated health at policy and practitioner levels	<p>Read</p> <ul style="list-style-type: none"> • Hoge M.A., Morris J.A., Laraia M., Pomerantz A., & Farley, T. (2014). Core Competencies for Integrated Behavioral Health and Primary Care. Washington, DC: SAMHSA - HRSA Center for Integrated Health Solutions. • Thomas-Hankel & Shulman (2017). Screening for SDoH in populations with complex needs: Implementation Considerations. Advancing innovations in health care delivery for low-income Americans www.chcs.org • Stanhope Chapter 16 Matthews, E.B., Little V., Clemens, B., & Rutigliano, J. (2018). Health information technology. In V. Stanhope & S. Lala Ashenberg Straussner (Eds.), Social work & integrated health care: From policy to practice (pp. 251-266). New York, NY: Oxford University Press <p>Watch</p> <ul style="list-style-type: none"> • Mental Health, Substance Abuse & Primary Care: Bridging Gaps in Access. https://www.youtube.com/watch?v=6dpU_JiBWp4 	Part 1: Policy Analysis Proposal Due
Week 5 2/22/21	Integrated health models	<p>Read</p> <ul style="list-style-type: none"> • Advisory Committee on Training in Primary Care Medicine and Dentistry, Health Resources Care Training Needs. (2019). 14th report to the Secretary of the U.S. Department of Health and Human Services and to Congress • Heath B, Wise Romero P, and Reynolds K. A Standard Framework for Levels of Integrated Healthcare. Washington, D.C. SAMHSA-HRSA Center for Integrated Health Solutions. March 2013 	Newsworthy Article presentation
Week 6 3/1/21	Workforce in Integrated Health	<p>Read</p> <ul style="list-style-type: none"> • de Saxe Zerden, Lisa, Lombardi, Brianna M, & Richman, Erica L. (2019). Social workers on the interprofessional integrated team: Elements of team integration and barriers to practice. Journal of interprofessional education 	Newsworthy Article presentation

		<p>& practice, 17, 100286</p> <ul style="list-style-type: none"> • Kwan, Bethany M, Valeras, Aimee B, Levey, Shandra Brown, Nease, Donald E, & Talen, Mary E. (2015). An Evidence Roadmap for Implementation of Integrated Behavioral Health under the Affordable Care Act. <i>AIMS public health</i>, 2(4), 691–717. Journal Article, United States: AIMS Press • Miller, J.J., Lianekhammy J., Pope N, Lee J, Grise-Owens (2017). Self-care among healthcare social workers: An exploratory study. <i>Social Work Health Care</i>. 56(10):865-883. 	
Week 7 3/8/21	Integrated population health management	<p>Read</p> <ul style="list-style-type: none"> • Jellinek, Michael. (2017). A Path Beyond Advocacy to Improve Mental Health Services for Children and Families: <i>Population Health Management</i>. <i>JAMA pediatrics</i>, 171(7), 615–616. • Bowling, J., Baldwin, A., & Schnarrs, P. W. (2019). Influences of health care access on resilience building among transgender and gender non-binary individuals. <i>International Journal of Transgenderism</i>, 1-13. 	<p>Part 2: Policy Analysis Presentation Due (select groups)</p> <p>Newsworthy Article presentation</p>
Week 8 3/15/21	Disparities deep-dive building on what was described in the very first class and each class since then, SDoH, ACEs/trauma, social worker self-care.	<p>Read</p> <ul style="list-style-type: none"> • Jonathan M. Metzler and Dorothy E. Robert (2019). Structural Competency Meets Structural Racism: Race, Politics, and the Structure of Medical Knowledge. In. Oberlander, et. al. eds. <i>The Social Medicine Reader, Volume II, Third Edition</i> (p. 170-187). Duke University Press. • Moniz Chapters 10 & 11 Moniz, C. (2019). Analyzing the problem: Disparities in health for people of color. In C.D., Moniz & Gorin, S.H. (fifth eds.) <i>Health care policy and practice: A biopsychosocial perspective</i> (pp. 204-242). New York & London Routledge. 	<p>Part 2: Policy Analysis Presentation Due (select groups)</p> <p>Peer/self-evaluation & Self-reflexivity Due</p> <p>Newsworthy Article presentation</p>
Week 9 3/22/21	Health Care Delivery - Governmental and Private	<ul style="list-style-type: none"> • Peikes, D., Taylor, E. F., O'Malley, A. S., & Rich, E. C. (2020). The Changing Landscape Of Primary Care: Effects Of The ACA And Other Efforts Over The Past Decade: A description of primary care delivery system reform models developed and tested over the past decade by the Center for Medicare and Medicaid Innovation, 	<p>Peer/self-evaluation & Self-reflexivity Due</p> <p>Newsworthy Article presentation</p>

		<p>which was created by the Affordable Care Act. Health Affairs, 39(3), 421-428.</p> <ul style="list-style-type: none"> Community Catalyst. (2019). Advancing Health Justice: Building a health system that works for everyone. Boston, MA: Sherry, S. & Miller, M. 	
<p>Week 10 3/29/21</p>	<p>Public Health</p>	<p>Read</p> <ul style="list-style-type: none"> Budd, Jobie, Miller, Benjamin S, Manning, Erin M, Lampos, Vasileios, Zhuang, Mengdie, Edelstein, Michael, Rees, Geraint, et al. (2020). Digital technologies in the public-health response to COVID-19. <i>Nature medicine</i>, 26(8), 1183–1192. Research Support, Non-U.S. Gov't, United States: Nature Publishing Group. Tabak, R. G., Eyster, A. A., Dodson, E. A., & Brownson, R. C. (2015). Accessing evidence to inform public health policy: a study to enhance advocacy. <i>Public health</i>, 129(6), 698-704. Oliver, K., Lorenc, T., Tinkler, J., & Bonell, C. (2019). Understanding the unintended consequences of public health policies: the views of policymakers and evaluators. <i>BMC Public Health</i>, 19(1), 1-9. 	<p>Part 3: Policy Brief Due</p>
<p>Week 11 4/5/21</p>	<p>Special Topics: (1) Crisis Services (2) Pharma industry, vaccines</p>	<p>Read</p> <ul style="list-style-type: none"> SAMHSA - National Guidelines for Behavioral Health Crisis Care Substance Abuse and Mental Health Services Administration (SAMHSA). National Guidelines for Behavioral Health Crisis Care, Best Practice Toolkit. Published 2020. Paltiel, A. D., Zheng, A., & Schwartz, J. L. (2021). Speed versus efficacy: quantifying potential tradeoffs in COVID19 vaccine deployment. <i>Annals of Internal Medicine</i>. Hanna J. (2019 July) Vertical Integration in Health Care: The Next Stairway to Heaven? <i>Pharmacy Times</i>. <p>Discussion board readings: assign students to read one Limaye N., (2020 Feb). Data Integration - Changing the Pharma and Healthcare Landscape. <i>Technology Networks</i>. https://www.technologynetworks.com/biopharma/articles/data-integration-changing-the-pharma-and-healthcare-landscape-331373</p> <p>Hirsch, B., Balu S., and Schulman K. (2014) The Impact of Speciality Pharmaceuticals as Drivers of Health Care Costs.</p>	<p>Discussion Board: Focus on Pharma</p> <p>Newsworthy Article presentation</p>

		<p><i>Health Affairs</i> 30(10): Speciality Pharmaceutical Spending & Policy. pp.1-17</p> <p>Veleva R., Cue B., and Todorova S. (2018). Benchmarking Green Chemistry Adoption by the Global Pharmaceutical Supply Chain. <i>201ACS Sustainable Chemistry & Engineering</i> 6 (1), 2-14 DOI: 10.1021/acssuschemeng.7b02277</p> <p>Big Pharma vs. Integrated Medicine. <i>Integrated Medicine Solutions</i>. https://integrativemedicinepa.com/big-pharma#:~:text=The%20pharmaceutical%20industry%20(big%20pharma,patented)%20drug%20which%20alleviates%20symptoms.&text=The%20ongoing%20goal%20of%20integrative,utilizing%20natural%20therapies%20and%20supplements.</p>	
<p>Week 12 4/12/21</p>	<p>Special Topics: (1) International Comparisons (2) Long-Term and Palliative Care</p>	<ul style="list-style-type: none"> • Tikkanen, R & Abrams, M.K. (2020). U.S. health care from a global perspective, 2019: Higher spending, worse outcomes? Commonwealth Fund. • Kim, Farmer, Porter. (2013). Redefining Global Health Care Delivery. <i>Lancet</i> 2013: 1060-69. • Basilico et. al. (2013). A Movement for Global Health Equity? In <i>Reimagining global health : an introduction</i>. California series in public anthropology ; 26. • Farmer, Paul, Kim, Jim Yong, Kleinman, Arthur, & Basilico, Matthew (Eds.). Berkeley: University of California Press. pp 340- 53. Patel, Farmer (2020). The Moral Case for Global Mental Health Delivery. <i>The Lancet</i> vol. 395, Jan 11, 2020. pp108-9. • Rosa et. al. (2020). The Global Nursing Workforce: Realising Universal Palliative Care. <i>The Lancet</i> Vol 8, March 2020 • Barr, D. A. (2016). Chapter Eleven: Long Term Care. In <i>Introduction to U.S. health policy: The organization, financing & delivery of health care in America</i>, 4th Ed. (pp. 235-247). Baltimore, MD: Johns Hopkins University Press. 	<p>Part 4: Policy Brief Advocacy Application Due</p> <p>Newsworthy Article presentation</p>
<p>Week 13 4/19/21</p>	<p>Future of integrated health</p>	<ul style="list-style-type: none"> • Iyengar, K., Mabrouk, A., Jain, V. K., Venkatesan, A., & Vaishya, R. (2020). Learning opportunities from COVID19 and future effects on health care system. <i>Diabetes & metabolic syndrome</i>, 14(5), 943–946. 	<p>Peer/self-evaluation & Self-reflexivity Due</p>

	https://doi.org/10.1016/j.dsx.2020.06.036 <ul style="list-style-type: none"> Oliver, K., Lorenc, T., Tinkler, J., & Bonell, C. (2019). Understanding the unintended consequences of public health policies: the views of policymakers and evaluators. BMC public health, 19(1), 1-9. 	Newsworthy Article presentation
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c. Assignments: There are graded assignments for this course, (see table below) and various group and individual homework assignments along with the expectation of class attendance, participation, and engagement. (described below in the assignments table) and which is 15% of your grade. A brief description of each assignment and tentative due dates follows. A more detailed description of each assignment will be posted on canvas: 1) In the assignments tab and discussed in class. These due dates have been noted on the class schedule in **Bold** letters.

Assignment	Due Date	Percentage
Attendance/Participation/Engagement Includes attending class sessions and engaging with the content during class and on Canvas, discussion board, homework, asynchronous work, participation, and page views on Canvas.	On-going and as assigned throughout the semester	15%
Newsworthy Healthcare Article & Presentation	As assigned: 2/8, 2/22, 3/1 3/8, 3/15. 3/22, 4/5, 4/12, 4/19	10%
Health Policy Analysis Group Project (Policy Analysis) <u>Part 1</u> : Policy Analysis Proposal <u>Part 2</u> : Policy Analysis Presentation <u>Part 3</u> : Policy Brief <u>Part 4</u> : Policy Brief Advocacy Application	Due 2/15/20 Due 3/8/21 & 3/15/21 Due: 3/29/21 Due: 4/12/21 or 4/19/21	Part 1: 10% Part 2: 20% Part 3: 20% Part 4: 15%
2 Peer/self-evaluation & Self-reflexivity	1. 3/15/21 + 3/22/21 2. 4/19/21	10% (5% each)

Assignments are focused on course learning and evaluation competency skills development specific to the course objectives. As integrated health policy and care are implemented through collaborative internal teams and/or external community partners, you will have some assignments working with a team. For some assignments you will have the choice to work individually or in a group. You will see this in the brief descriptions below and in the detailed assignment description posted on Canvas.

There will assignments involving exercises/study questions on the course material to be done during the week. These assignments have been designed to assist you in learning the course

content and in doing your assignments. They are tools to help you, thus the focus in feedback is not so much on the content, but on the effort made to do the assignment. They are part of your participation and engagement grade.

Submission of Assignments

All assignments must be submitted online via Canvas before or by 11:59pm on the day it is due as indicated on the syllabus. If you are unable to submit online for any reason, email the professor your assignment directly. If you do not contact the professor to explain that Canvas is not working, and do not email the assignment, your assignment will be considered late.

Newsworthy Healthcare Article & Presentation (Group of 2)- due date to be assigned. (2/8, 2/22-3/22, 4/5-4/19 (10%))

This assignment will give you the opportunity to see the impact of Healthcare policies and link what is being taught in the classroom to the outside world. You will read a newsworthy article from a newspaper, magazine, web news, etc, discuss what you have learned with the class and hand in a 2–3-page paper discussing how the article links to policy, relates to PODS and your course learning. You are asked to send me the article **no later than the week before the date you have been assigned** so that the article can be shared with your peers.

Health Policy Analysis Group Project

The class will be divided into teams for developing a four-part health policy analysis and advocacy application, throughout the semester. The purpose of this assignment is to identify and understand the historical and current context that shapes policy development, implementation, and evaluation. As integrated health policy and care are implemented through collaborative internal teams and/or external community partners, group work is a foundational component focus of this assignment. Teams are expected to meet outside of synchronous class time; however, the instructor will provide time following our synchronous class lectures/discussion whenever possible.

As the teams are assigned, the teams should decide on a project timeline and which activities are done collectively and which activities will be divided up and integrated later. This is completely open to interpretation and the interest areas of the group. Since this class and the field of integrated health heavily relies on group and team collaboration, participation includes your contribution to a positive and constructive team learning environment and experience.

Part 1: Policy Analysis Proposal/Framing the Issue: (Group) Due 2/15/21 (10%)

Your team must submit a 2-page proposal of your team's selected topic area and policy focus (with 3-6 references). This proposal must identify the health care or policy problem (unethical care, discrimination, program effectiveness, funding mechanisms, etc), select a specific health

policy (existing or proposed), and identify the target population the policy was developed to impact.

Part 2: Policy Analysis Presentation and Discussion: (Group) Due 3/8/21 + 3/15/21 (20%)

For this assignment, each team will explore, in-depth, the historical and current context shaping the policy, what US and societal values influence this policy, identify the benefits and gaps of the policy. This includes the process of briefly describing the scope of the problem, major cause(s) and consequences. By the end of the presentation, everyone should have a basic understanding of the issue being explored, the policy selected to address it and the scope of the policy's impact on its intended population from a diversity, equity, and inclusion lens.

Presentations may not be longer than 15 minutes and then there is 15 minutes for discussion – come prepared with three discussion questions to ask the class. There should be a visual component (poster, PowerPoint, Prezi, etc.), and all images should include a description for accessibility. Visual representation should include the context that they were obtained (name of commercial/movie, topic of a billboard, artist, or physical location of artwork). The last screen of the presentation should include a reference list. The team will work with facilities staff to arrange any audio-visual needs, if necessary. For this assignment we might record presentation and then watch them asynchronously before the class in which we will discuss them.

Part 3: Policy Brief: (Individual or Group) Due 3/29/21 (20%)

This assignment is to continue to explore a health policy topic incorporating various perspectives and using this information to convey recommendations for next steps. The policy brief is a written document that describes the issue the policy attempts to address, background related to the issue, information that informs the issue (this may include current law, debate about the issue, data about the issue), policy options for addressing the issue, and your team's recommended policy solution. This assignment also requires a form of community engagement that involves identifying an organization/stakeholder already involved in addressing the policy problem you have been analyzing. This may include key informant interview or researching gray literature from an organization working on the policy to get a better understanding of current policy efforts.

Policy briefs should be created with the target audience being an “on the fence policy-maker.” Briefs should be no longer than 8 pages (not including citations) and your team is highly encouraged to use a creative method of content delivery (graphs, tables, figures, and other visuals).

Please Note- if you will do this individually please let me know so we can discuss different focus so that you are not turning in the same or very similar policy brief.

Part 4: Advocacy Application of Policy Brief: (Individual or Group) Due 4/12/21 or 4/19/21 13 (15%)

This last part of the policy analysis assignment is focused on the application of putting theory into practice. You/your team will select one option below or please notify your instructor if you would like to choose a different/creative advocacy strategy for this assignment. Using the information and work you have completed thus far from Parts I, II, & III, you/your team will apply that knowledge to a form of advocacy practice that will be dependent upon your policy analysis topic area (organizational, local, state, federal, etc). The advocacy strategy you choose should be based upon what makes the most sense for your topic area and policy recommendation. For example, if you have been examining an organizational policy, a letter to a public official would not make sense for this assignment. You/your team may or may not implement your advocacy strategy, however, you are encouraged to make it as realistic as possible.

Please Note- if you will do this individually please let me know so we can discuss different option so that you are not turning in the same option as another teammate.

A. Advocacy Letter Writing: Writing letters to public officials and organizations is a common form of political action for both clients and social workers. Clients telling their personal stories put a “face” on a problem. Social workers and other professionals attempt to influence policy by not only telling their client’s stories but also by adding “facts and figures” about the problem or issue.

Relevant Field Educational Agreement (s):

- I will identify and evaluate relevant social policies that impact service delivery and access to services relevant to my agency.
- I will utilize critical thinking skills to analyze and advocate for policies that promote human rights and social justice for all, and discuss regularly in supervision with my field instructor.

Prepare a letter to an elected official regarding your chosen policy issue. You are not required to actually send the letter; however, it must demonstrate the appropriate format and content. In the letter, explain how you want the legislator to vote on the position and why. Your letter should include reference to the policy, facts and figures regarding the policy from reputable sources.

This letter should be no more than one page, single spaced. Use this resource to help guide you: <https://ctb.ku.edu/en/table-of-contents/advocacy/direct-action/letters-to-elected-officials/main> (Links to an external site.)

Attach a reference list of your resources in APA style. To be taken seriously, advocacy letters to the media and elected officials must be well-organized and written with excellent grammar and spelling.

B. Infographic: “Infographics have an emotional power because they can show you an idea — or a relationship, or how something works — very quickly. People respond to that. A persuasive infographic surprises the viewer. It moves them in some way and makes them want to

keep looking at it or show it to other people (Ovans, 2014).” Review (Ovans, 2014) to further understand the importance and power of infographics: <https://hbr.org/2014/04/what-makes-the-best-infographics-so-convincing>

Relevant Field Educational Agreement (s):

- I will identify and evaluate relevant social policies that impact service delivery and access to services relevant to my agency.
- I will utilize critical thinking skills to analyze and advocate for policies that promote human rights and social justice for all, and discuss regularly in supervision with my field instructor.

For this assignment you will create a one page infographic on a policy that you are interested in. Many students have used Canva in the past for this assignment; however, you can also use any software that you feel most comfortable using. You will not be graded per say on your graphic design skills but on your ability to convey the importance of your policy issue.

1. It is clear to the viewer what your policy is?
2. Does your infographic share important statistics or information that is relevant to your policy?
3. Would the viewer be able to interpret the importance of the issue at hand (i.e. is language persuasive and relates to social work values and ethics)?

C. Mock Testimony (organization, city, state, federal): A succinct testimony provides information about the scope of the issue, existing policy, policy alternatives/current efforts (including key points from key informant interview).

1. Introduction: Who you are and why you are there to testify. Explain to people why they should pay attention.
2. Summarize policy main points: A succinct presentation of the policy’s main points that provides information about the scope of the issue, existing policy, policy alternatives/current efforts (including key points from key informant interview).
3. Description of Policy Recommendations: Persuasively present your selected policy recommendation/solution and provide supporting evidence on why it’s the most desirable.
4. Social Work Practice Implications: Using the NASW Code of Ethics, identify what social work values are embedded in this policy recommendation and what are the implications for social work practice.
5. Wrap Up: Succinctly summarize the main points of your presentation.
6. If opportunity is available, present at relevant entity

D. Create an organizational Committee:

Based on your analysis of the organizational policy, would creating an internal committee be an advocacy strategy that can be implemented to address any gaps or issues. Here are things to consider in developing a committee:

1. The scope of the committee: Are you going to focus on getting to the agency by car or bus or will you also include telehealth services? I.e. access to telephone or computer?

Would it be best to include all or separate telehealth services from accessibility by car or bus?

2. The expectations of the committee: How many people? How often will you meet? Is this a volunteer committee or will you be asking individuals from the executive committee to participate?
3. Goals of the committee? 1 or 2 goals. Please identify.
4. Deliverables of the committee: What information will you share with the broader agency?
5. Resources and budget of the committee: Do you need additional funds to run the committee or access to budgets or records.
6. Governance or human resources of the committee: Who is in charge? How will you vote? Who will you report to and how often. Is this a ad hoc committee or a permanent committee?

Peer/self-evaluation & Self-reflexivity (Individual) Due 3/15/21 + 3/22/21; 4/19/21

There are two parts to this assignment.

- a. Student will complete the Self and Peer Assessment once/twice (depending on if worked as a group for Part 3 and Part 4 of the policy group project). during the semester that indicates how well the team worked together, and if each member contributed in a valuable way to the project. These assessments will inform the participation grade for the course.
- b. Twice during the semester, in addition to the self and peer assessment you will share your responses to the readings, activities, videos, course content, reflecting, personal values, ethics, perspectives, biases and reactions to engaging with different identity groups, individuals, and potential clients, as well as different frameworks, interventions, and theories.

The purpose of this assignment is for students to share their responses to the readings, activities, videos, course content, reflecting, personal values, ethics, perspectives, biases, and reactions to engaging with different identity groups, individuals, and potential clients, as well as different frameworks, interventions, and theories. You will write a journal entry two times during the semester in reaction to readings, activities, videos, course content and discussions. Each entry is to be self-reflective, written in first person and articulate your responses to the class and its content. I want to see you acknowledge your own concerns, biases, privileges, fears, the moments that have made you feel angry/confused/guilt, and the existential questions that have arisen. I do not want to see a summary of what you have learned. In short, I am interested in learning how this material/experience is impacting you emotionally and existentially and am less interested in learning that you can repeat what you have read or heard.

- d. **Attendance, Participation and Engagement:** Reference link to the general Policy on Class attendance in the MSW Student Guide is- <https://ssw.umich.edu/msw-student-guide/section/1.09.00/17/policy-on-class-attendance>.

Specific to this course, class attendance, participation and engagement are very important in this class and is 15% of the final grade. Attendance, participation and how engaged you are will be monitored throughout the semester. Students are expected to attend and to be prepared to take part in each class session. This includes completing assigned reading, being prepared to facilitate discussion on reading(s), homework and/or assigned activities (such as exercise handouts, assessments/tools, case studies, etc) prior to class, to reference for informed class participation, attending class on time. If you have difficulties participating in discussion for linguistic, cultural, or other reasons, let's discuss them individually and we will explore ways in which you may become a more active participant in class. Class attendance is important for you to keep up with course work. If, for any reason, I have concerns about your participation or attendance, I will discuss my concerns with you in a timely fashion.

It is expected that students will attend **all classes, for the entire identified time** however, you are granted two absences for legitimate and/or special reasons. Legitimate absences include those due to health problems that can be documented, unanticipated family emergencies and observance of religious holy days. Excused absences will only be granted with documentation (i.e. a doctor's note or other proof of an emergency situation and/or my *prior* approval). Missing three classes will reduce your final grade; one-half grade (e.g. an A would be reduced to an A-) and each additional absence will reduce your final grade an additional half grade. Excessive absences (more than 3) may result in failure of the course. If students miss more than 2 class sessions, they must schedule a meeting with the instructor (possibly with their advisor) to discuss their attendance and a plan of action to not miss anymore classes.

Coming to or leaving class mid-way is considered an absence. When we are on-line please use your cameras during activities and discussions so we can get to know each other. As adult learners, I expect you to make appropriate decisions about attending class, this includes coming to class late and leaving class mid-way. Any absences or tardiness should be discussed directly with the instructor and it is the student's responsibility to obtain any notes, materials, handouts, or exercises from the missed session from one of your classmates and make arrangements to complete class work, which is missed.

Please be cognizant of the disruptive nature of coming to class late. If you are delayed, please enter the classroom as quietly as possible and wait until break to catch up with what is going on. Your participation grade includes ability to discuss ideas with colleagues in a respectful manner, engage in reflective learning, and the sharing of your experiences, current events or literature specific to the material being discussed and demonstration that required readings, modules, homework and other (survey's, vignettes) class learning have been completed by sharing and asking relevant questions in class. I encourage you to be actively present during class, students not participating and/or who are using electronic devices not related to class activities will see the impact in their grade.

Assessment of your participation does not depend solely on the quantity of your involvement in class discussion and class exercises, but also on the quality of your contributions.

Use the following criteria for assessing your participation in class.

- Frequency of participation in class: Student initiates contributions in class session, however, quality of comments is weighted over quantity. Student responds actively when invited by the instructor to contribute. Student does not comment overzealously or to the exclusion of other learners.
- Quality of comments: Comments are always insightful & constructive. Student uses appropriate terminology when referring to individuals, communities, and cultural contexts. Comments are balanced between general impressions, opinions & specific, thoughtful criticisms, or contributions. Evidence is used to support arguments when possible. Comments are informative and relevant to the discussion at hand. They often build on or respond to the observations of others, make links to prior classes, or draw on materials and lessons from other courses.
- Listening Skills: Student listens attentively when others present materials and perspectives and contribute comments that build on others' remarks. Student expresses disagreement in a professional and respectful manner.

e. Grading

It is important to keep in mind that *you are not your grade!* Students come to graduate school with a wide range of academic experiences and preparedness. Thinking and writing about complex issues and abstract concepts can be very challenging for many students. If you are satisfied with the level of effort you have invested in the course, and you earn a grade of B or better, I hope you will feel very good about your performance.

Excellent Work

Excellent work is work that is above course expectations. Grades in the 94 to 100 range constitute an A which translates to a 4.0. Grades in the 91 to 93 range constitutes an A minus which translates to a 3.7. Students display excellent work (*beyond course expectations*) in several ways: evidence that additional readings, beyond what is assigned, have been completed and integrated into written or in class presentations/participation; superior written work; evidence of critical thinking; demonstration of advanced practice skills applied to practice; and creativity and innovation in conceptual as well as practice-related thinking are frequently seen in the student's work.

Good Work

Good work is work that meets course expectations. Grades in the 88 to 90 range constitute a B plus which translates to a 3.3. Grades in the 84 to 87 range constitute a B which translate to a 3.0. Grades in the 81 to 83 range constitute a B minus which translates to a 2.7. Students display good work in several ways: basic mastery of course material is evident in written or

in class presentations/participation; solid development of practice skills fitting with concentration-year expertise is evident; and creativity and innovation are noted but to a lesser degree and less frequently than that in the “excellent” category.

Work Minimally Meets Course Expectations

Marginal work is work that meets minimal course expectations. Grades in the 78 to 80 range constitutes a C plus which translates to a 2.3. Grades in the 74 to 77 range constitute a C which translates to a 2.0. Grades in the 71 to 73 range constitute a C minus which translates to a 1.7. Students display marginal work in several ways: through evidence that course readings have not been covered, as observed in written or in class presentations/participation; conceptual confusion and difficulty with critical thinking are evident in written and verbal work; and through work that lacks an integration of theory and practice.

Failing Work

Grades in the 0 to 70 range constitute an F which translates to a 0.0
 Student demonstrates poor or unacceptable work during the course in several ways: inadequate understanding of course content, poor quality written work, plagiarism, and poor or unethical demonstration of practice skills.

Assessment Classification	Range	Grade	Grade Point
Excellent Work	94-100	A	4.0
(above course expectations)	91-93	A -	3.7
Good Work	88-90	B+	3.3
(meets course expectations)	84-87	B	3.0
	81-83	B-	2.7
Poor Work	78-80	C +	2.3
(meets minimal course expectations)	74-77	C	2.0
	71-73	C -	1.7
Failing Work	70-0	F	0.0

More information on MSW Student Guide policies on [Grades in Academic Courses and in Field Instruction](#) as well as [Student Grievance procedures](#) and the [policy for grading in special circumstances](#). Here are some resources around [testing and grading from CRLT](#).

Expectations for assignments

- Written assignments should demonstrate your ability to apply and integrate course material and to communicate using a professional style. Professional communication is coherent, concise, and comprehensive, and includes correct spelling, grammar, punctuation, sentence construction, paragraph construction and referencing.
- **All papers are to have a cover page**, reference page and any needed appendices. Be sure to use APA format (6th Edition) and be sure to cite when it is required and have correct citations in a reference page. (if you do not meet the required minimum number of sources, your paper will be returned to you not read and you will be asked to submit with the correct required sources)

- All papers must be typewritten and double-spaced using a 12-point font and one-inch margins. Use APA* 6th Edition for your papers, including proper headings and citations. Failure to follow APA guidelines for referencing and for headings will result in a lower grade. *APA formatting*: Review the [MLibrary APA Citation Guide](#) as needed. [The Purdue Owl website is another helpful resource for assistance with APA formatting.](#)
- Use the outline format in the assignment description, using headings appropriate to APA format.
- I am looking for clarity and degree of understanding conveyed, key points being discussed, integration of relevant literature, pertaining to the assignment and your own assessment/critique for the assignment.
- You do need to stay within the page limits for all assignments (They are stated on each assignment description). You want to state concisely what you are saying. Summarizing from literature into your own words and the use of appendices will help with this.
- I am also looking at sensitivity and attention to dimensions of diversity (ability, age, class, color, culture, ethnicity, family structure, gender [including gender identity and gender expression], marital status, national origin, race, religion or spirituality, sex, and sexual orientation) and life cycle considerations and the degree to which you display critical analysis of the assignment.
- You are responsible for always making and keeping a copy of each assignment prior to turning it in.

Evaluation Criteria and Procedures: General evaluation criteria (special elements will also be delineated for particular assignments):

- Demonstrate understanding of and ability/apply knowledge clearly related to the assignment.
- Systematic & logical presentation of arguments, with appropriate documentation.
- Appropriate use of evidence, use of relevant literature and concepts, with citations.
- Scope of concepts used degree of integration across topics, levels, and different readings.
- Clarity of presentation. Originality.
- Attention to diversity and social justice issues across different populations and situations.

I expect that in all written work you will adhere to the following NASW editorial policy: In the interest of accurate and unbiased communication, NASW subscribes to a belief in the importance of avoiding language that might imply sexual, ethnic, or other kinds of discrimination, stereotyping, or bias. NASW is committed to the fair and equal treatment of individuals and groups, and material submitted should not promote stereotypic or discriminatory attitudes and assumptions about people. (*Health and Social Work, 11:3*, Summer 1986.) or <http://www.socialworkers.org/pubs/code/default.asp>

Deadline Expectations: All assignments are due at the beginning of class on the dates specified. Incomplete grades are assigned only through negotiation with me and that negotiation must

occur before the assignment's due date. Unless an extension contract has been arranged between a student and me, **before the due date of the assignment**, any assignment that is not completed on the due date will be assigned 0 points. **All** assignments for this course must be completed and handed in to the instructor to successfully complete the course.

Both content and format will be considered in assigning grades. Though content is more heavily weighted in grade assignment, format, and presentation are also important. The course is challenging and demanding. Grading will be rigorous but fair. Final grades will be determined by multiplying the worth of each assignment, by the grade points on the 4 point grade system. The numerical scores for each assignment will be summed.

I understand that the assessments of your work are subjective in nature and I strive to reduce that subjectivity. I grade based on the assignment outline that you have received, I use a template within which I set my expectations for the assignment. I compare your submissions to that template, not to one another.

I suggest that you have someone who is unfamiliar with your subject read your paper before you turn it in. An outside reader can tell you if your writing is not clear, if you omitted a word or phrase, or if you used the wrong word. Spell checkers and grammar checkers are useful tools, but not as reliable as a human reader.

If you read my comments to you and believe that I have erred, please discuss your findings with me within one week of getting your assignment/paper back. It may be that you do not understand what I have told you, or that I have made a mistake. In either case, I am certain that the situation will be rectified; either you will better understand what I want you to know, or I will correct my error.

Additional Course Information and resources

a. Teaching Philosophy, More about the Course and Expectations

I use a learner-centered philosophy in which there is the development of reciprocity, cooperation and open discussion among students and myself. I encourage active learning, give prompt feedback; communicate high expectations and respect diverse talents, interests, and ways of learning. The emphasis is to create an empowering environment in which all participants can be active and self-directed learners in an atmosphere that allows for people's diversity, uniqueness and strengths and learning from each other's different perspectives and experiences. I believe that learning does not just happen once a week in the classroom and make myself readily available to students outside the classroom. I put an emphasis on bringing the outside world into the classroom, by keeping up to date and knowledgeable on the course content as well as sharing my experiences from working in a non-profit and being a part of the community.

My approach to teaching is that I value and appreciate each student as individuals and their interests specific to the course and share aspects of my professional experience to clarify the course content. I emphasize the importance of not just learning the material, but for students to be able to critically analyze what they are learning from their perspective and thus encourage the sharing of their thoughts and ideas.

Course Conduct

This class adheres to the following Ground Rules for the Class:

1. Our primary commitment is to learn - from the instructor, from each other, from materials and from our work. We acknowledge differences among us in skills, interests, values, scholarly orientations, and experience.
2. We acknowledge that one of the meanings of societal oppression and discrimination is that we have been systematically taught misinformation about our own groups and especially members of devalued groups and populations of color. The same is true for sexism, ageism, sexual orientation, and other isms. We are taught misinformation about ourselves and others regarding forms of difference and discrimination and acknowledge that racism, sexism, homophobia, and other forms of discrimination exist and are likely to surface from time to time and it is our responsibility to actively address this through dialogue.
3. We cannot be blamed for the misinformation that we have heard but we will be held responsible for repeating misinformation after we have learned otherwise.
4. We will assume that people are always doing the best they can, both to learn material and to behave in socially just and honest ways.
5. We will actively pursue opportunities to learn about our own groups and those of others *yet* will not enter or invade others' privacy when unwanted.
6. We can have an obligation to actively counter the myths and stereotypes about our own groups and other groups so that we can break down the walls, which prohibit group cooperation and group gain.
7. We want to create a safe atmosphere for open discussion. Thus, at times, members of the class may wish to make a comment that they do not want repeated outside the classroom. If so, the person will preface the remarks with a request and the class will agree not to repeat the remarks.
8. As a diverse group of learners, material may be presented or discussed that “triggers” a prior personal and potentially painful, negative, or traumatic memory. While “trigger warnings” will be encouraged during this course, please speak and listen to the instructor and class colleagues under the assumption that there is no ill-intent to harm, “trigger” or purposely offend someone due to certain language, images, or content.
9. Students are expected to engage in an open and respectful dialogue, use the classroom environment as practice for professional interactions with clients and colleagues, and maintain civility in in-class, online, e-mail, video, and all other forms of communication with both the instructor and class colleagues. Inappropriate behaviors regarding any of the aforementioned contexts could result in a loss of participation/engagement points.

f. Other Policies

Class Recording and Course Materials

Audio and video recording of in-class lectures and discussions is prohibited without the advance written permission of the instructor. Students with an approved accommodation from the Office of Services for Students with Disabilities permitting the recording of class meetings must present documentation to the instructor in advance of any recording being done. The instructor reserves the right to disallow recording for a portion of any class time where privacy is a special concern. If the instructor chooses to record a class, they will decide which classes, if any, are recorded, what portion of each class is recorded, and whether a recording is made available on the course management website. On days when classes are recorded, students will be notified a recording is occurring. Class recordings and course materials may not be reproduced, sold, published or distributed to others, in whole or in part, without the written consent of the instructor.

COVID-19 Statement

For the safety of all students, faculty, and staff on campus, it is important for each of us to be mindful of safety measures that have been put in place for our protection. By returning to campus, you have acknowledged your responsibility for protecting the collective health of our community. Your participation in this course on an in-person/hybrid basis is conditional upon your adherence to all safety measures mandated by the state of Michigan and the University, including maintaining physical distancing of six feet from others, and properly wearing a face covering in class. Other applicable safety measures may be described in the Wolverine Culture of Care and the University's Face Covering Policy for COVID-19. Your ability to participate in this course in-person/hybrid may be impacted by failure to comply with campus safety measures. Individuals seeking to request an accommodation related to the face covering requirement under the Americans with Disabilities Act should contact the Office for Institutional Equity. If you are unable or unwilling to adhere to these safety measures while in a face-to-face class setting, you will be required to participate on a remote basis. I also encourage you to review the Statement of Student Rights and Responsibilities and the COVID-related Addendum to the Statement of Student Rights and Responsibilities.

Health-Related Class Absences

Please evaluate your own health status regularly and refrain from attending class and coming to campus if you are ill. You are encouraged to seek appropriate medical attention for treatment. School of Social Work students who miss class due to illness of any kind will be given opportunities to access course materials online or provided with alternative learning opportunities. Please notify me by email about your absence as soon as practical, so that I can make accommodations. Please note that documentation (a doctor's note) for medical excuses is not required.

Inclusivity Policy

Social and economic justice is one of the key themes of social work practice, research, and education. As a social work community, we must encourage each other to critically examine issues related to power, privilege, and oppression. As a result, there will be class discussions, activities, or assignments that may be difficult or challenging. In order to have the most supportive environment possible, we must all commit ourselves to fostering an inclusive, anti-oppressive space in which each person takes responsibility for their own language, actions and interactions. It is important that we actively *listen* to each other about how our words and actions are affecting one another and the learning environment, knowing the impact is more important than intent. It can be difficult to navigate the dual priorities of supporting authentic free speech, and holding active regard for one another being open to diverse perspectives and ideas. I recognize that microaggressions happen (by all of us, to all of us); however, overt slurs in relation to race, sex, age, ethnicity, gender, gender identity, gender expression, sexual orientation, religion/world view, immigration status, size, nationality, dis/ability status, marital status, political affiliation, or any other identities, will be addressed directly. Throughout the course, we will negotiate other guidelines about class discussions. Please bring your best selves to our classroom space.

Additional School and University policies, information and resources are available here: <https://ssw.umich.edu/standard-policies-information-resources>. They include:

- *Safety and emergency preparedness*
- *Mental health and well-being*
- *Teaching evaluations*
- *Proper use of names and pronouns*
- *Accommodations for students with disabilities*
- *Religious/spiritual observances*
- *Military deployment*
- *Writing skills and expectations*
- *Academic integrity and plagiarism*