

# GSD 5330 HEALTHY PLACES 2015 SYLLABUS DRAFT



Photo: Ann Forsyth

Fall 2015, Location: Gund 517; Time: F 9-12  
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## 1. BASIC TIMETABLE

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Class sessions by week	Assignments due at the start of class
1: Health and Environments; Health Assessment Overview	
2: Health Assessment Training 1	
3: Health and Place Intersections: Exposures, Connections, Behavior Supports, and Diverse Groups	1: Topic Summary
4: Health Assessment Training 2	2: HIA Critique
5: Data Collection and Analysis/Assessment; Conceptual Models	3: HIA Screening and Scoping
6: Participatory Assessment Models	4: Observation/data collection
7: Evaluation and Monitoring	5: Health Assessment Draft Chapter
8: [ACSP conference] Review and Revise Papers	(Revised draft ready to send out to workshop participants; along with overview of process and other documents)
9: HIA Communication and Implementation	
10: HIA Workshop	
11: Workshop Results	6: Workshop Participation and Reflection
12: Reflection; HIA and Other Approaches to Linking Health, Planning, and Design	
13/14: No GSD classes	7: Collective HIA Report Due Tuesday, November 24

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## 2. COURSE AIMS

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### OVERVIEW

This class uses a health impact assessment as a lens for understanding the connections between health and places. Health impact assessment is not one technique but rather a bundle of tools used to assess projects, plans, policies, programs, and places. These include both technical and participatory approaches, some short and focused and others lengthy and elaborate. Their aim is to foster health strengths and mitigate health problems. The major assignment for the class is to collaboratively conduct such an assessment and many class sessions help students in that exercise. This year's project is to assess the Harvard Kennedy School.

In undertaking the health assessment students will also reflect on some larger questions. Can the way places are planned and designed improve health? What are the key health issues that should concern those in planning and related fields? Does the work of incorporating health issues into planning and design processes always add value? What is the relationship between the different approaches to incorporating health into planning and design practice: health assessments, built projects, regulations and policies, interagency coordination, and programs to change how places are used?

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### COURSE GOALS AND OUTCOMES

The course aims to demonstrate how to use the tools of urban planning and allied professions to promote better health.

By the end of the course a student will be able to:

1. Recognize key concepts and debates pertaining to the relationship between health and places.
2. Appreciate the many determinants of health including, but not limited to, built environments.
3. Understand, analyze, and evaluate research related to health and places.
4. Comprehend the potentials and limitations of using research to create evidence-based interventions.
5. Appreciate the roles of different disciplines, and of local knowledge, in working on issues connecting health and places.
6. Identify points of leverage in designing and regulating the physical built environment, creating policies related to how it is used, and developing programs set in the built environment.
7. Use a number of tools for assessing how environments promote or undermine health and for creating healthier places.

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### 3. LOGISTICS

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#### READINGS

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Required readings will be available online and in the library, including some online books.

The **main text for the class**:

- Kemm, J. 2013. *Health Impact Assessment: Past Achievement, Current Understanding, and Future Progress* is a networked resource available when you SIGN IN to the library at: [http://nrs.harvard.edu/urn-3:hul.ebook:OSOPUB\\_13654175](http://nrs.harvard.edu/urn-3:hul.ebook:OSOPUB_13654175)

Two more general books are **recommended**. They are available online in second hand and in eBook editions for about \$5 each and are worth it as investments:

- Booth, Wayne, Gregory G. Colomb, and Joseph M. Williams. 2008. *The Craft of Research*. Chicago: University of Chicago Press. Recommended.
- Turabian, Kate. 2007. *A Manual for Writers of Research Papers, Theses, and Dissertations*. Chicago: University of Chicago Press. Recommended.

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#### OTHER

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##### CONTACTING THE INSTRUCTOR

I have lots of office hours in 309 Gund—about -3-4 times as many as is typical. To sign up for office hours go to <http://annforsyth.net/>, click on the “office hours” link on the top right, and follow the instructions. You can also just turn up at office hours but may need to wait. If you just pop by outside office hours I’m typically busy with other work and will just ask you to sign up for the next available slot.

There is a great deal of advice for students at <http://annforsyth.net/for-students/>. It may answer your question.

##### ACADEMIC INTEGRITY

You are expected to adhere to high standards of academic integrity as outlined in university policy: <http://courses.dce.harvard.edu/~phils4/honesty.html>. Pay particular attention to the resources on plagiarism at the bottom.

### ACCOMMODATIONS FOR STUDENTS WITH DISABILITIES

Students needing academic adjustments or accommodations because of a documented disability must present their Faculty Letter from the Accessible Education Office (AEO) and speak with me (Ann) by the end of the second week of the term. Failure to do so may result in my inability to respond in a timely manner. All discussions will remain confidential, although faculty members are invited to contact AEO to discuss appropriate implementation.

### TECHNOLOGY IN THE CLASSROOM

I do not grade participation, only outputs, but when you are in the classroom you are expected to be fully present. For that reason anyone who wishes to use an electronic device during class time (apart from specific collaborative working time for the HIA) will need to meet with me outside of class and explain why it is absolutely necessary. Such devices include phones, laptops, tablets, and other gadgets capable of connecting to the internet or phone system. Unless you have explicit permission from me you will need to turn off and store such devices.

To learn more about why this is useful please see Professor Stephen Chew's five terrific short videos on metacognition: <http://www.samford.edu/how-to-study/>. This article is also useful: <http://m.theatlantic.com/technology/archive/2014/05/to-remember-a-lecture-better-take-notes-by-hand/361478/>

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## 4. COURSE REQUIREMENTS AND GRADING SUMMARY

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### ASSIGNMENTS

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There are two components to grading, listed here and explained in detail at the end of the syllabus. They are due at the **beginning of class** on the course web site.

First the best four of the five small assignments worth 15% each for a total of 100% (assignments 1, 2, 3, 4, and 6). Second the report draft and final each worth 20% (assignments 5 and 7).

1: Topic Summary

2: HIA Critique

3: HIA Screening and Scoping

4: Observation/data collection

Report 5: Health Assessment Draft Chapter

6: Workshop Participation and Reflection

Report 7: Collective HIA Report due Tuesday, November 24

There are also **weekly readings and you are expected to do them before class**. They will help you and we will discuss them. **However, some are long—in those cases read the introduction and conclusion and skim the rest.**

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### CLASS CASE: HARVARD KENNEDY SCHOOL

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This year the class will perform a health assessment of the Harvard Kennedy School. The school has recently completed a sustainability plan and this document points to the need to understand more about health and wellness. Our project can help implement that idea. The class will also interact with Harvard's Office for Sustainability.

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### HIA COMMUNICATIONS

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Communications with the client need to be focused through a point person on or side (the TA and course assistant) and theirs. In return they have promised to provide contacts and other resources.

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### TIMELINESS

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**Short illnesses, family events, etc. should be dealt with using the flexibility of being able to drop paper grades for short assignments.** That is, assume you will be sick some time; an illness of a day or two is not an excuse for a late paper. Those with religious holidays that make it impossible to hand in something need to inform Ann Forsyth in writing at least a week in advance. If you do have a significant illness that incapacitates you for **several weeks** you need to inform Ann Forsyth ASAP and provide appropriate documentation from a medical professional.

*For the report late submissions are docked marks on the following schedule:* 1 hour late -5%; up to 5 hours late -10%; up to 24 hours late -15%; up to 48 hours late -20%; and 10% for every day or part of a day after that.

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### WHAT ANN PROMISES IN RETURN

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If students do the work described in this syllabus in a timely manner, I promise return work promptly with comments, or rather I will return marked up grade sheets. I will also give you opportunities for feedback about the course including a mid-semester evaluation. I will share the results of the evaluation with you.

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## 5. TENTATIVE COURSE SCHEDULE

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### WEEK 1, SEPT 4: 1: HEALTH AND ENVIRONMENTS; HEALTH ASSESSMENT OVERVIEW

#### Topics:

- Course introduction
- What is good health? Determinants and theories
- Planning and public health 101
- HIA overview
- **HIA:** Overview of project

#### Background:

- Sloan, D.C. 2006. From congestion to sprawl: Planning and health in historical context. *Journal of the American Planning Association* 72, 1: 10-18.
- CDC. 1999. Achievements in Public Health, 1900-1999: Changes in the Public Health System. *Morbidity and Mortality Weekly Report* [http://www.mchd.com/data\\_reports/ph\\_top10.htm](http://www.mchd.com/data_reports/ph_top10.htm).

### WEEK 2, SEPT 11: HEALTH ASSESSMENT TRAINING 1

#### Topics:

- Interactive introduction to health assessment processes
- Screening, scoping, and desktop (checklists)
- Rapid HIA
- Intermediate HIA
- Related tools
- **HIA:** Assignment introduction, allocate topics for initial review

**Speakers:** Harvard Kennedy School and Sustainability Office Representatives

#### Readings:

- American Planning Association and National Association of County and City Health Officials. 2012. *Planning for Healthy Places with Health Impact Assessments*. <http://advance.captus.com/planning/hia2/home.aspx>. Do the whole training. It is free.

- Kemm, J. 2013. *Health Impact Assessment: Past Achievement, Current Understanding, and Future Progress*. Chapter 2 (on screening and scoping): [http://nrs.harvard.edu/urn-3:hul.ebook:OSOPUB\\_13654175](http://nrs.harvard.edu/urn-3:hul.ebook:OSOPUB_13654175).
- Harvard University Sustainability. 2015. Harvard Sustainability Plan. <http://green.harvard.edu/commitment/our-plan>
- HIA Connect. 2007. Health Impact Assessment: A Practical Guide. [http://hiaconnect.edu.au/wp-content/uploads/2012/05/Health\\_Impact\\_Assessment\\_A\\_Practical\\_Guide.pdf](http://hiaconnect.edu.au/wp-content/uploads/2012/05/Health_Impact_Assessment_A_Practical_Guide.pdf).

### WEEK 3, SEPT 18: HEALTH AND PLACE INTERSECTIONS: EXPOSURES, CONNECTIONS, BEHAVIOR SUPPORTS, AND DIVERSE GROUPS

#### Assignment 1: Topic Summary

##### Topics:

- **Mini presentations:** Students share the results of Assignment 1 in a short presentation (time depending on the size of the class)

Air Quality	Water Quality	Food Options
Climate Change	Access to Community	Mental Health
Disasters	Resources	Physical Activity
Housing	Social Capital/Networks	Safety (accidents, crime)
Noise	Mobility and Universal	Vulnerable Groups
Toxics	Design	

- Evidence based practice related to urban areas
- Place, space, health, association, and causality (maps and causal diagrams)
- **HIA:** Topical emphases for the HIA; HIA project planning; HIA review allocation; requests for more topical knowledge

##### Readings:

- Health and Places Initiative. 2015. Research Briefs: <http://research.gsd.harvard.edu/hapi/research-briefs/> (**skim**)
- CDC. 2015. Healthy Community Design Topics. <http://www.cdc.gov/healthyplaces/default.htm> (**skim**)
- NSW Health. 2009. Healthy Urban Development Checklist. <http://www.health.nsw.gov.au/urbanhealth/Publications/healthy-urban-dev-check.pdf><http://www.health.nsw.gov.au/urbanhealth/Publications/healthy-urban-dev-check.pdf> (**skim**)
- Krizek K., Forsyth A., Shively Slotterback C. 2009. Is There a Role for Evidence-Based Practice in Urban Planning and Policy? *Journal of Planning Theory and Practice* 10, 4: 455–474.

### WEEK 4, SEPT 25: HEALTH ASSESSMENT TRAINING 2

#### Assignment 2: HIA Critique

##### Topics:

- **Discussion:** HIA critiques—show and tell
- HIA training continued
- Using checklists as guides
- Plan assessment methods
- **Review:** Additional materials on key topics
- **HIA:** HIA screening and scoping check in; project planning

**Speakers:** Emily Salomon and Laura Smead

##### Readings:

- U.S. Environmental Protection Agency. 2013. A Review of Health Impact Assessments in the U.S. <http://www2.epa.gov/sites/production/files/2015-03/documents/review-hia.pdf> (**skim**)

- Health and Places Initiative. 2015. Health assessment tools: <http://research.gsd.harvard.edu/hapi/health-impact-assessment-tools/>
- Ricklin, A., et al. 2012. Healthy Planning. Chicago: American Planning Association. <https://www.planning.org/research/publichealth/pdf/evaluationreport.pdf>

## **WEEK 5, OCT 2: DATA COLLECTION AND ANALYSIS/ASSESSMENT; CONCEPTUAL MODELS**

### **Assignment 3: HIA Screening and Scoping**

#### **Topics:**

- **Discussion:** HIA Screening and Scoping—collective brainstorming & show and tell
- Data collection and analysis
- Mixed method approaches
- **HIA:** Check in about progress

#### **Readings:**

- Kemm, J. 2013. *Health Impact Assessment: Past Achievement, Current Understanding, and Future Progress*. Chapters 3, and 4 (on qualitative and quantitative data): [http://nrs.harvard.edu/urn-3:hul.ebook:OSOPUB\\_13654175](http://nrs.harvard.edu/urn-3:hul.ebook:OSOPUB_13654175).

## **WEEK 6, OCT 9 PARTICIPATORY ASSESSMENT MODELS; RECOMMENDATIONS**

### **Assignment 4: HIA Observation/data collection**

#### **Topics:**

- **Discussion:** Observation lessons & show and tell
- Range of participatory methods for problem identification, data collection, analysis, and recommendations
- Visual methods
- Vulnerable groups
- Participation in a context of conflict
- **HIA:** Recalibrating in terms of participation
- **Speaker:** Anna Ricklin, Healthy Communities, American Planning Association

#### **Readings:**

- Participation Compass. 2015. <http://participationcompass.org/>
- Community Planning. 2015. Methods. [http://www.communityplanning.net/methods/methods\\_a-z.php](http://www.communityplanning.net/methods/methods_a-z.php)
- Kemm, J. 2013. *Health Impact Assessment: Past Achievement, Current Understanding, and Future Progress*. Chapter 5 (on recommendation and reporting): [http://nrs.harvard.edu/urn-3:hul.ebook:OSOPUB\\_13654175](http://nrs.harvard.edu/urn-3:hul.ebook:OSOPUB_13654175).

## **WEEK 7, OCT 16: EVALUATION AND MONITORING**

### **Assignment 5: Health Assessment Draft Chapter**

#### **Topics:**

- **Discussion:** Major findings to date in draft reports
- Process, output/impact, and outcome evaluations
- Monitoring and surveillance systems
- How to evaluate something that doesn't happen
- Does anyone really do this?
- **HIA:** Integrating realistic monitoring and evaluation

#### **Readings:**

- Cunningham R., Signal L, and Bowers S. 2010. *Evaluating Health Impact Assessments in New Zealand*. A report for the Ministry of health: <https://www.health.govt.nz/system/files/documents/publications/evaluating-hias.pdf>

- Healthy Universities. 2015. Evaluating a Healthy University Initiative. <http://www.healthyuniversities.ac.uk/evaluating-healthy-universities.php?s=203&subs=63>
- Kemm, J. 2013. *Health Impact Assessment: Past Achievement, Current Understanding, and Future Progress*. Chapter 7 (on evaluation): [http://nrs.harvard.edu/urn-3:hul.ebook:OSOPUB\\_13654175](http://nrs.harvard.edu/urn-3:hul.ebook:OSOPUB_13654175).

### **WEEK 8, OCT 23 [ACSP]: REVIEW AND REVISE PAPERS**

#### **Topics:**

- Discuss and revise draft chapters
- Review and compile background report for workshop participants using revised chapters

### **WEEK 9, OCT 30: HIA COMMUNICATION AND IMPLEMENTATION**

#### **Topics:**

- HIA audiences and stakeholders
- HIA document formats—stand-alone report, poster, brief mention in plan
- HIA modes of implementation—awareness raising, changes to proposals and plans, changes to existing places/policies/programs
- **HIA:** Workshop run through

#### **Readings:**

- Ison E. 2013. Health impact assessment in a network of European cities. *Journal of Urban Health* 90, s1: 105-115: <http://www.ncbi.nlm.nih.gov/pubmed/22644328>.
- Kemm, J. 2013. *Health Impact Assessment: Past Achievement, Current Understanding, and Future Progress*. Chapter 24 (on HIA in Canada): [http://nrs.harvard.edu/urn-3:hul.ebook:OSOPUB\\_13654175](http://nrs.harvard.edu/urn-3:hul.ebook:OSOPUB_13654175).

### **WEEK 10, NOV 6: TOOLS 3: HIA WORKSHOP (MAY BE ANOTHER DAY)**

#### **Topics:**

- Health impact assessment workshop

### **WEEK 11, NOV 13: WORKSHOP RESULTS**

#### **Assignment 6: Workshop Reflection**

#### **Topics:**

- **Discussion:** HIA findings, strengths, and gaps; implications for final report; ethical values
- **HIA:** coordinating recommendations; taking them one step further

#### **Readings:**

- Kemm, J. 2013. *Health Impact Assessment: Past Achievement, Current Understanding, and Future Progress*. Chapter 6 (on ethics and values in HIA): [http://nrs.harvard.edu/urn-3:hul.ebook:OSOPUB\\_13654175](http://nrs.harvard.edu/urn-3:hul.ebook:OSOPUB_13654175).

### **WEEK 12, NOV 20: REFLECTION; HIA AND OTHER APPROACHES TO LINKING HEALTH, PLANNING, AND DESIGN**

#### **Assignment 7: Collective HIA Report (due Tuesday, November 24)**

#### **Topics:**

- HIA in context
- Other collaborative approaches e.g. Healthy cities, Health in all Policies
- **HIA:** Final report activities

#### **Readings:**

- Kemm, J. 2013. *Health Impact Assessment: Past Achievement, Current Understanding, and Future Progress*. Chapter 29 (HIA in developing countries): [http://nrs.harvard.edu/urn-3:hul.ebook:OSOPUB\\_13654175](http://nrs.harvard.edu/urn-3:hul.ebook:OSOPUB_13654175).



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## 6. ASSIGNMENTS

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Note: All assignments except the last one will be shared with other students.

### 1: TOPIC SUMMARY

#### BIG IDEA

There are many connections between health and place. The class can collaboratively work to create useful overviews for the whole class to draw on.

#### EXERCISE

- The class will divide up topics related to health along the lines of the following:

Air Quality	Water Quality	Food Options
Climate Change	Access to Community	Mental Health
Disasters	Resources	Physical Activity
Housing	Social Capital/Networks	Safety (accidents, crime)
Noise	Mobility and Universal	Vulnerable Groups
Toxics	Design	

- Prepare a brief commentary of 3 to 4 pages explaining:
  - The main connections between health and place and the topic, particularly those relevant to the scale of the HIA project
  - What is well established and what is still uncertain or being investigated
  - Resources for finding out more about the topic (web sites, key articles)
- Create it in a format to be shared by the group.

#### RESOURCES

- Health and Places Initiative. 2015. Research Briefs. <http://research.gsd.harvard.edu/hapi/research/research-briefs/>
- CDC. 2015. Healthy Community Design Topics. <http://www.cdc.gov/healthyplaces/default.htm>
- Google scholar and Hollis +

### 2: HIA CRITIQUE

#### BIG IDEA

Health impact assessments are varied. This assignment involves reviewing and critiquing examples.

#### EXERCISE

- Find an existing HIA that is interesting.
- Review it in 3 to 4 pages. What is its main focus? What health issues does it deal with? What methods does it use? Who was involved? What does it do well? What might be lacking?
- If possible create a diagram of the argument in the HIA—what are the important health determinants, pathways, and outcomes?

#### RESOURCES

- Examples of HIAs, and links to web sites with more examples, can be found at <http://research.gsd.harvard.edu/hapi/resources/examples/health-impact-assessments/>
- Also see <http://www.who.int/hia/examples/en/>

### 3: HIA SCREENING AND SCOPING

#### BIG IDEA

Screening to see if an HIA is worth doing, and scoping out the topics, are both typical early stages in an HIA. This will provide the class with experience using some common types of tools.

### EXERCISE

- Use standard HIA screening and scoping tools to assess the likely issues in the HIA. Such tools will be presented in class but you need to both screen and scope whether that means one or two tools. Hand in the completed tools and bring an example to class.
- Reflect in 1-2 pages on how useful such tools are as well as their strengths and weaknesses.

### RESOURCES

- Examples of HIAs, and links to web sites with more examples, can be found at <http://research.gsd.harvard.edu/hapi/resources/examples/health-impact-assessments/>. Look particularly in the section on “General HIA Resources”.

## 4: OBSERVATION/DATA COLLECTION

### BIG IDEA

The class will collaborate in collecting observational and other data and reflecting on their use.

### EXERCISE

- Spend 2 hours observing a place related to the health assessment. Photograph it and place at least three captioned photos in the assignment.
  - Consider a range of topics including air quality, accessibility, noise, water quality, social connections, accessibility of services, housing, safety, vulnerable groups, etc. **For each topic** note what you **can observe** and what you **can't know** through observation. Feel free to use simple equipment like a phone based noise meter.
- Students will brainstorm sources of information divide up finding them e.g. health content in social media from HKS; finding historic and contemporary maps; existing surveys; etc.
- Write a 1-page summary of your observations and another 1 page for the other data, to share with other students.
- Compare the two approaches in 1 pages of text and **additional** illustrations.
  - What did you learn?
  - What are the strengths and weaknesses of the approaches?

### RESOURCES

- Health Impact Assessment. 2015. HIA Training Resources. <http://www.ph.ucla.edu/hs/health-impact/training.htm> Scroll down for HIA screening and scoping tools.
- HIA Connect. 2007. Health Impact Assessment: A Practical Guide. [http://hiaconnect.edu.au/wp-content/uploads/2012/05/Health\\_Impact\\_Assessment\\_A\\_Practical\\_Guide.pdf](http://hiaconnect.edu.au/wp-content/uploads/2012/05/Health_Impact_Assessment_A_Practical_Guide.pdf). Has examples.

## 5: HEALTH ASSESSMENT DRAFT CHAPTER

### BIG IDEA

The class will collaborate in creating a health assessment of a place. This part of the assignment is for a specific chapter of the report focused on a relevant health topic. The draft due week 7 will be reviewed by other students and a revised draft presented on week 8. That draft will be used as part of the background for the Health Assessment Workshop in week 10 and revised again into the final report.

### EXERCISE

- The format will depend on the number of students but, basically:
  - The class will generate a list of health issues to investigate
  - Each student or pair of students will collect data on one topic (e.g. via interviews and focus groups, observations, analyses of surveys, reviews of documents, etc.), and
  - Each student will write an initial draft of 8-12 pages (though you might also collaborate on a longer piece). Students will be given a template so that the papers can be easily collected

- into a single report to disseminate to key policy-makers. It is a bit longer because the template takes space and you will need to have illustrations and other representations of data. You also essentially just get to revise it for assignment 7 (though that also involves combining with other documents).
- These papers should link to the wider literature through specific citations.
  - The paper should identify strengths, problems, and areas for potential intervention.

## **6: WORKSHOP PARTICIPATION AND REFLECTION**

### **BIG IDEA**

The workshop format has strengths and challenges. Students will reflect on these.

### **EXERCISE**

Students will each perform a role organizing and running an HIA workshop for 6 to 30 participants. Students will also each write a 2-3 page paper reflecting on:

- The implications of the workshop for the HIA itself (content), and
- On the larger question of the balance between more participatory and more technical approaches to HIA including issues such as how the needs of vulnerable groups are best incorporated into health assessment processes.

I imagine some of this paper will be recycled into the final report but some of it should be a more straightforward reflection.

## **7: COLLECTIVE HIA REPORT DUE TUESDAY, NOVEMBER 24**

### **BIG IDEA**

This exercise is to reflect on the workshop and combine that reflection, and a revised version of the background report, into a final document.

### **EXERCISE**

The HIAs from the last two years of the class (for the GSD and the Divinity School) are available here: [http://research.gsd.harvard.edu/hapi/files/2015/03/GSD\\_5330\\_HDS-HEalthAssessment-2014-FINAL.pdf](http://research.gsd.harvard.edu/hapi/files/2015/03/GSD_5330_HDS-HEalthAssessment-2014-FINAL.pdf)  
[http://research.gsd.harvard.edu/hapi/files/2014/11/GSD5330\\_HIA-of-GSD\\_2013-Final.pdf](http://research.gsd.harvard.edu/hapi/files/2014/11/GSD5330_HIA-of-GSD_2013-Final.pdf) Notes  
Note that these were not the main focus of the class and students prepared the chapters and Prof. Forsyth and a research assistant created the introduction and compiled the report.

This year the students will do this compilation—so it will be more sophisticated and beautiful! The document will contain an executive summary, introduction, revised chapters, explanation of the workshop process, and reference list. It will be useable by the client. Each chapter will reflect the results of the class—linking to other chapters and reflecting the workshop.

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## **CRUCIAL ADVICE ON GRADES AND PRODUCING QUALITY WORK**

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### **GRADING NUMBERS**

The GSD uses an unusual grading approach: The grade of "Pass" is the standard mark for recognizing satisfactory work. "Distinction" and "High Pass" are reserved for work of clearly exceptional merit. "Low Pass" indicates a performance that, although deficient in some respects, meets minimal course standards" (<http://www.gsd.harvard.edu/#/gsd-resources/registrar/grading/grades.html>). To make it easier for students to track their progress I will assign numerical grades that can then be converted to the GSD system.

- High pass 90%+
- Pass 75%+
- Low pass 65%+

Remember you drop your worst grades.

### GRADING CRITERIA

I typically grade in two ways. First I check you did all parts of the assignment using criteria taken directly from the assignment descriptions—if it's a bullet, it will be an item I look for though I may combine some bullets in actual grading (some are really steps along the way to a larger product).

Second I assess how well you completed the work using the matrix below.

	<b>Very good (High Pass)</b>	<b>Good (Pass)</b>	<b>OK (Low Pass)</b>	<b>Needs Work (Not passing)</b>
Overall	Hits on almost all of basic content (what this is depends on the assignment) + Memorable	Hits on almost all of the basic content + Writing Interesting to read	Hits on some basic content	Hits on a small amount of basic content (one item) and/or Numerous digressions/errors
Argument	Argument is coherent, well organized, interesting, well qualified, with adequate evidence, and memorable—engages the reader with a lively mind	Argument is coherent, well organized, interesting, well qualified, with adequate evidence	Argument is fairly coherent and well organized with some evidence and qualifications	Some confusion/vagueness/parts that don't make sense/missed the point
Sources	Sources are cited (using author/date page); used critically*	Sources are cited; some are used critically	Some sources are missing	Sources are not cited
Writing	Writing/graphics largely free from errors	Perhaps some writing errors, but none critical for comprehension	More than a few writing errors that may impede comprehension	Many careless writing errors that may impede comprehension
Graphics and layout	Easy to read fonts. Graphics that are legible and convey information well. Layout that is striking and imaginative	Easy to read fonts. Graphics that are legible and convey information well.	Adequate font size or shape. Adequate graphics though there may be weaknesses in content and/or execution	Tiny and hard to read fonts; graphics that are either difficult to understand or do not convey useful information

\*Critical use of sources reflects consciousness of the sources of evidence and methods used in the source and whether they can answer a question appropriately.

This link is also helpful in providing a more global view of grading:  
<http://isites.harvard.edu/fs/html/icb.topic58474/GradingPapers.html>

### FONTS AND LAYOUT

I have set page limits not word limits for this class. I don't care about the line spacing but text should typically be no smaller than Arial 10pt or Times Roman 11pt. You might use something smaller for a label. You need to provide adequate margins to allow easy comprehension and to provide space for comments in grading. Do not put too many characters on a line. Typically comprehension is easier with ragged layouts—that is don't line up both sides of text but let the spacing between characters fall more naturally. Also, remember that faculty are typically older than you and our eyesight is often worse—it's a real strain to read tiny fonts and your materials will be treated much less sympathetically if they are hard to read.

### WRITING INSTRUCTIONS

I advise students to do one of the following activities before handing in any project: (a) put the piece aside for at least a few hours and then go back and edit it for clarity, or (b) get a sympathetic friend to edit it for clarity, or (c) read it out loud and change any sentences that don't make sense. I do this in my own work as a consideration to those who are reading it (and a few things still slip through)!

Where you cite sources you should use the author-date-page or parenthetical reference/reference list style of citation generally used in the social sciences. For example in the text you list only the author, date and page e.g. (Goldsmith 1994, 3). You then list the full details for the source alphabetically by author's name in a reference list at the end. If you cite a web site in a short paper, I need the full URL.

All quotes quoted directly should include the page number in the citation e.g. (Goldsmith 1994, 3). Also cite with a page number all ideas not quoted directly but coming from a specific part of a document. Only when you refer very generally to an entire work should you merely cite the author and date, for example, (Marris 1987).

For more information see a style manual such as Kate Turabian's (2007) *A Manual for Writers of Research Papers, Theses, and Dissertations* (Chicago: University of Chicago Press) although you should note that she shows two kinds of citation (footnote and bibliography, and parenthetical reference/reference list) and it is the second of these that I prefer.

I am very concerned that findings are based explicitly on evidence. You will receive a low grade if you fail to cite sources or if they are not listed systematically in the reference list. More about evidence is explained in Booth et al.'s (2008) *Craft of Research* (Chicago: University of Chicago Press).

### ACADEMIC HONESTY

Please be familiar with Harvard's web site on plagiarism:

<http://isites.harvard.edu/icb/icb.do?keyword=k70847&pageid=icb.page342054>. It is inappropriate to use any form of plagiarism. The GSD's own library has a useful web site as well:

<http://guides.library.harvard.edu/gsd/write>

In addition if you wish to use work that overlaps with another class you can do so only if you have **written** permission from me. This will reflect an **in-person discussion** where we figure out how your work can reflect an equivalent effort to other students doing the same assignment.

If you need to use a copy editor to improve your writing, that is fine. However, they should be copy editing not writing the paper. Please let me know if you are using such a service. I won't grade you down for it but it will help my understanding of your work.

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### ADDITIONAL READINGS

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APA Planning and Community Health Research Center:

<https://www.planning.org/nationalcenters/health/>

Black J., & Acingo J. 2008. Neighborhoods and obesity. *Nutrition Reviews* 66, 1, 2-20.

Dannenberg AL et al. (eds.), *Making Healthy Places: Designing and Building for Health, Well-being, and Sustainability*. Washington DC: Island Press.

Design for Health. 2009. Comprehensive Plan Review Checklists.

<http://designforhealth.net/resources/legacy/checklists/>

Devlin A.S., & Arneill A.B. 2003. Health care environments and patient outcomes: a review of the literature. *Environment and Behavior* 35: 665-694.

- Ellen, I.G., Mijanovich, T. and Dillman, K. 2001. Neighborhood effects on health: exploring the links and assessing the evidence. *Journal of Urban Affairs* 23, 3-4: 391-408.
- European Portal for Action on Health Inequalities. 2013. Health in All Policies (HAiP): [http://www.health-inequalities.eu/HEALTHYQUITY/EN/policies/health\\_in\\_all\\_policies/](http://www.health-inequalities.eu/HEALTHYQUITY/EN/policies/health_in_all_policies/)
- Feng, J., Glass T., Curriero F.C., Stewart W.F., & Schwartz B.S. 2010. The built environment and obesity: a systematic review of the epidemiologic evidence. *Health and Place* 16, 175-190.
- Forsyth, A. Schively Slotterback, C. and Krizek, K. 2010. Health impact assessment for planners: what tools are useful? *Journal of Planning Literature* 24, 3: 231-245.
- Kawachi, I. 2002. What is social epidemiology? *Social Science and Medicine* 54: 1739-1741.
- National Research Council (US) Committee on Health Impact Assessment. 2011. Improving Health in the United States: The Role of Health Impact Assessment. Washington DC: National Academies Press. <http://www.ncbi.nlm.nih.gov/books/NBK83546/>
- NSW Health. 2009. Healthy Urban Development Checklist. [http://www.health.nsw.gov.au/pubs/2010/pdf/hud\\_checklist.pdf](http://www.health.nsw.gov.au/pubs/2010/pdf/hud_checklist.pdf)
- Sobal J. & Wansink B. 2007. Kitchenscapes, tablesapes, platescapes, and foodscapes: influences of microscale built environments on food intake. *Environment and Behavior* 39: 124-142.
- Vlahov, D., Bouford, J.I., Pearson, C., Norris, L. eds. 2010. *Urban Health: Global Perspectives*. San Francisco: Jossey-Bass.
- National Crime Prevention Council (Singapore). 2003. Crime Prevention through Environmental Design <http://www.ncpc.gov.sg/pdf/CPTED%20Guidebook.pdf>
- WHO. 2015. Health Impact Assessment (HIA) Short Guides. <http://www.who.int/hia/about/guides/en/>