

**Semester at Sea, Course Syllabus  
Colorado State University, Academic Partner**

**Voyage:** Fall 2017  
**Discipline:** Sociology  
**Course Number and Title:** SOC 344 Health, Medicine, and Society  
**Division:** Upper  
**Faculty Name:** Dr. Jaime LLambías-Wolff  
**Semester Credit Hours:** 3

**Meeting:** B Day 1230-1350, Adlon

**Prerequisites:** One (1) introductory sociology course

### **COURSE DESCRIPTION**

It appears that everybody knows about health issues, thus the concept of health is very familiar to us. However many have never thought precisely what it really means and how health relates to society. Health is a complex subject that requires intensive and extensive interdisciplinary study - which synthesizes theories, methodologies and findings from multiple disciplines - to develop understandings that encompass the global, the local and the intersectional. The course explores health and illness in the broadest possible context, covers the social, economic and environmental factors of health and discusses the constructions of health definitions and the health-illness process. In doing so, it looks beyond the normal limits of biomedicine to a much wider set of questions that engage social, cultural, political and moral aspects of human experience.

This course is divided in **four** sections. **Section One: *The study of Health and Society***, discusses Concepts and Definitions of Health, Illness, diseases and medicine, Sociological Perspectives to the study of Health and Illness, Social Production of Health, Limits of Modern Medicine, Epidemiology and Health, Interdisciplinary Research on Health and Medicine. **Section Two: *The Political Economy of Health***, analyses what is Political Economy of Health, Social and Economic Factors and the Health Illness Process, Health Economic Growth and Environmental Sustainability, the Biomedical Model and the Medical Industrial Complex. **Section Three: *Comparative Health Systems in the Global World***, covers the Major Global Health Influences and Determinants, Global Health Policies, Health Systems: concepts, comparisons and global challenges, and Health Systems reforms around the world. Finally, **Section Four: *Health Challenges for the Future***, discusses Critical Health issues in the developing world and emerging societies, Health and the Environment, Demographic and Epidemiological transitions, Traditional and Alternatives practices medicine, Health: Challenges and Opportunities, Health and the Environment, and New Health paradigms.

## LEARNING OBJECTIVES

By the end of this class students should have acquired and be able to:

- Enhance understanding of the health and illness issues beyond the normal limits of biomedicine to a much wider set of questions that engage social, cultural, political and moral aspects of human experience.
- Appreciate the particularities of health issues in relation to the populations visited during the voyage and critically assess their health determinants.
- Think critically through an interdisciplinary approach to health issues by understanding health and their relationship to social, cultural, historical, political, economic and environmental influences.
- Bring together theories and findings from a number of disciplines, most notably sociology, political economy, cultural anthropology and social history.

Students are also prepared to analyze, discuss and communicate complicated and sometimes contradictory scholarly ideas and arguments about health in written and spoken form.

Students will be able to use experiential learning to foster an understanding of how theories and knowledge about health directly apply to daily life and the social and economic realities of people.

The reading material, films, research and fieldwork will offer students a lively and self-motivated view of health issues as they observe and comprehend it throughout the different destinations of the Semester at Sea Program. We will explore health issues through assigned readings, written work, a voyage journal, lectures, critical analysis, audio-visual material, discussions and group presentations.

## REQUIRED TEXTBOOKS

The reading material includes articles from Scholarly Journals. The articles and files focus on specific country issues, visited during the voyage. In terms of pedagogical tools, the chapters of textbooks target mostly conceptual and theoretical concerns, while articles cover particular specific research topics in the visited countries. **Articles and files will be available at the ship's intranet via the electronic course folders in a PDF format.**

## TOPICAL OUTLINE AND READINGS

Depart Bremerhaven, Germany – September 09

B1 – September 12

## Introduction, overview of the course

### SECTION 1: THE STUDY OF HEALTH AND SOCIETY

- Concepts and definitions of health
- Illness, diseases and medicine
- Sociological Perspectives to the study of health and Illness
- Social Production of Health
- Limits of Modern Medicine
- Epidemiology and Health
- Interdisciplinary research on health and society
- Health Issues in visiting countries: Spain (Barcelona)

**Driving Questions:** How can we define health and why we have different understandings about the concept of health? What is the health-illness process? What are the main health determinants? Can we assume that the Western view of health has fundamental limitations? Why is it fundamental to have an interdisciplinary approach to understand health and health-illness process?

#### B2 – September 14

1. Health Care in Catalunya, PDF File; pages: 1-10.
2. SPAIN, World Health Organization, Statistical Profile, PDF File; pgs: 1-3. (Available on OwnCloud)

#### Barcelona and Valencia, Spain – September 15-18

#### B3 – September 20

3. SCHAEFER T, Richard, Sociology: A Brief Introduction: No.15: Health and the Environment: Culture and Health, Sociological Perspectives on Health and Illness, & Social Epidemiology and Health; New York, McGraw-Hill Education, 12th edition, 2016; pages: 355-363.
4. NORDENFELT, Lennart (2007), Medicine, Health Care and Philosophy, “The Concepts of Health and Illness Revisited”, No.10; pages: 5-10.

#### B4 – September 22

5. LONGINO Charles, F. Jr., (1998), Journal of Health & Social Policy, Vol. 9, No. 4, “The Limits of Modern Medicine: Paradigm Strain and Social Policy”; pages: 101-116.

6. GHANA, World Health Organization, Statistical Profile, PDF File, pgs: 1-3. (Available on OwnCloud)

### **No Class – Study Day- September 23**

### **B5 – September 25**

7. HAYDEN, Patrick, Review of International Studies (2012), No. 38, “The Human Right to Health and the Struggle for Recognition”; pages: 569–588.
8. LEVIN, Betty and BROWNER, C., Social Science and Medicine (2005), No. 61, (4), “The Social Production of Health: Critical contributions from evolutionary, biological, and cultural anthropology”; pages: 745-750.

### **Tema and Takoradi, Ghana – September 27-30**

### **SECTION 2: THE POLITICAL ECONOMY OF HEALTH**

- What is the political economy of health
- Social and economic factors and the health illness process
- Health Economic Growth and Environmental Sustainability
- The Biomedical Model
- The Medical Industrial complex
- Health Issues in visiting countries: Ghana (Tema), South Africa (Cape Town)

**Driving Questions:** What is it that we understand as the political economy of health? Is health a social, political or economic issue or a more neutral concept related to science and medicine? What are the principal social and economic factors related to the health illness-process? What theoretical perspectives can be used to critically analyze the Biomedical Model? Is there a relationship between the biomedical model, philosophy and science? Which model provides the best generalization to health, illness and disease? How pharmaceutical companies and medical technologies influence the way we understand health and medicine?

### **B6 – October 01**

9. ZAKIYA, Afia S., Development in Practice No. 24. (5-6), “Centering African culture in water, sanitation and hygiene development praxis in Ghana: A case for endogenous development”, (August 18, 2014); pages: 699-713.

### **No Class—Study Day- October 02**

#### **B7 – October 04**

10. PETERSEN, Leif M; CHARMAN, Andrew J E; MOLL, Eugene J; COLLINS, Ray J; HOCKINGS, Marc T., Society and Natural Resources No. 27 (3), “Bush Doctors and Wild Medicine”: The Scale of Trade in Cape Town’s Informal Economy of Wild-Harvested Medicine and Traditional Healing”, (March 2014); pages: 315-336.

#### **B8 – October 06**

11. MBATHA, Blessing, African Journal of AIDS Research, No. 13.3, “Obstacles to HIV prevention, treatment and care in selected public universities in South Africa”, (July 3, 2014); pages: 237-246.
12. SOUTH AFRICA, World Health Organization, Statistical Profile, PDF File, pages: 1-3. (Available on OwnCloud)

#### **Cape Town, South Africa – October 7-12**

#### **B9 – October 14**

13. BOROWY, Iris, Journal of the History of Medicine, Vol. 68, “Global Health and Development: Conceptualizing Health between Economic Growth and Environmental Sustainability”, (2013); pages: 451-485.

#### **No class—Study Day- October 16**

#### **B10 – October 17**

14. BROWN, Patrick & CALNAN, Michael, Health, No.16.1, “Braving a faceless new world? Conceptualizing trust in the pharmaceutical industry and its products”, (2012); pages: 57-75.

#### **B11 – October 20**

15. RAMTOHUL, Ramola, Agenda 78: “Trade Liberalisation and Feminisation of Poverty: The Mauritian Scenario”, (2008); pages: 55-67.
- 15.A MAURITIUS. World Health Organization, Statistical Profile. (Added)  
(Available on OwnCloud)

#### **Port Louis, Mauritius – October 19**

### **SECTION 3: COMPARATIVE HEALTH SYSTEMS IN THE GLOBAL WORLD**

- Major global health influences and determinants
- Global Health Policies
- Health systems: concepts, comparisons and global challenges
- Health systems reforms around the world
- Health issues in visiting countries: Mauritius (Port Louis), India (Cochin), Viet Nam (Ho Chi Minh), Myanmar (Yangon), China (Shanghai), South Africa (Cape Town).

**Driving Questions:** What is a health system? What are the major global health influences and determinants? What can we learn about the different health systems? What are the connections between a health system, economics and politics? Is it possible to steer away from the effects of globalization and industrialization with respect to health care systems? How can people be sustainably involved in the decision making process on health policies and programs that affect them?

**No Classes – Study Day, October 22**

**B12 – October 23**

16. INDIA, World Health Organization, Statistical Profile, PDF File, pages: 1-3. (Available on OwnCloud)
17. MORRIS, E. Opler, "The Cultural Definition of Illness in Village India," Human Organization, 22, No.1, 32-35, 1963, Sociological Abstracts pg. 32

**Cochin, India – October 25-30**

❖ **Field Work – October 26**

**No Classes – Study Day-October 31**

**B13 – November 01**

❖ **Midterm quiz**

**B14 – November 03**

18. GRUNDY, John; ANNEAR, Peter; AHMED, Shakil; BIGGS, Beverley-Ann, Social Science & Medicine, Vol. 107, "Adapting to social and political transitions - The influence of history on health policy formation in the Republic of the Union of Myanmar (Burma)", (April 2014); pages: 179-188.
19. MYANMAR, World Health Organization, Statistical Profile, PDF File, pages: 1-3. (Available on OwnCloud)

## Yangon, Myanmar – November 04-08

### B15 – November 10

20. JOHNSON, J. & STOSKOPF, C., (Editors), Comparative Health Systems: Global Perspectives, Jones & Bartlett Publishers, 2010, Chap.1, Introduction to Health Systems; pages: 3-16.
21. TAT, Sonny & BARR, Donald, Social Science & Medicine, Vol.62.5, “Healthcare in the New Vietnam: Comparing Patients' Satisfaction with Outpatient Care in a Traditional Neighborhood Clinic and a New, Western-Style Clinic in Ho Chi Minh City”, (March 2006); pages: 1229-1236.

### No Class—Study Day-November 11

### B16 – November 13

22. VIET NAM, World Health Organization, Statistical Profile, PDF File, pages: 1-3. (Available on OwnCloud)

## Ho Chi Minh City, Vietnam – November 14-18

### B17 – November 20

23. JOHNSON, J. & STOSKOPF, C., (Editors), Comparative Health Systems: Global Perspectives, Jones & Bartlett Publishers, 2010, Chap 2, “Global Health and Disease”; pages: 17-40.

### No Classes – Study Day-November 21

### B18 – November 23

24. DUMMER, Trevor & COOK, Ian, Social Science & Medicine (0277-9536), Vol.67, iss.4 (2008), “Health in China and India: A cross-country comparison in a context of rapid globalization”; pages: 590-605.
25. CHINA, World Health Organization, Statistical Profile, PDF File, pages: 1-3. (Available on OwnCloud)

## Shanghai, China – November 24-29

### SECTION 4: HEALTH CHALLENGES FOR THE FUTURE

- Critical Health issues in the developing world and emerging societies
- Demographic and epidemiological transitions
- Traditional and alternative practices in medicine

- Health: Challenges and Opportunities
- Health and the Environment
- New Health paradigms
- Health Issues in visiting countries: China (Shanghai), Japan (Kobe), Honolulu (Hawaii).

**Driving Questions:** Which are the main critical health issues in the developing world or emerging societies? Why epidemiological and demographic transitions are critically important to understand the main health challenges for the future? How deeply rooted is the dominant biomedical health paradigm? Is a pluralistic or inter/trans disciplinary paradigm emerging in public and collective health? Are researchers beginning to incorporate previous aspects of health and healing practices in modern day health care? Why are some people skeptical of alternative practices and what needs to be done to inform the public on the available routes to better health care?

#### **B19 – December 01**

26. PENG, Ito, Social Policy & Administration, Vol. 50.2, “Testing the Limits of Welfare State Changes: The Slow-moving Immigration Policy Reform in Japan”, (Mar 2016); pages: 278-295.
27. JAPAN, World Health Organization, Statistical Profile, PDF File, pgs: 1-3. (Available on OwnCloud)

#### **Kobe, Japan – December 2-6**

#### **B20 – December 09**

28. SCHAEFER T, Richard, Sociology: a brief introduction, Vol.15, Health and the Environment: Sociological Perspectives on the Environment, Environmental Problems & Social Policy and the Environment, New York, McGraw-Hill Education, 12th edition, 2016; pages: 376-386

#### **B21 – December 10**

29. ENGEL, G.L., The need for a new medical model: a challenge for biomedicine. *In* D.F. Marks (Ed.), The Health Psychology Reader. London, England, Sage Publication (2002); pages: 50-65.

#### **B22 – December 12**

30. LLAMBIAS-WOLFF, Jaime, “Global Critical Health Issues: Alternative responses”, The Global Studies Journal, Vol. 4, Common Ground Publishing LLC, Champaign, Illinois, USA, (2012); pages: 49-58.



**B23 – December 14**

31. JOHNSON, J. & STOSKOPF, C. (Editors), Comparative Health Systems: Global Perspectives, Jones & Bartlett Publishers, 2010, Chap 23, “Comparative Global Challenges and Opportunities; pages: 403-414.

**B24 – December 17**

32. USA, World Health Organization, Statistical Profile, PDF File, pages: 1-3.  
(Available on OwnCloud)

**Honolulu, Hawaii – December 16**

**No Class – Study Day –December 19**

**B25 – December 20**

**Exam Day**

**San Diego, California – December 23**

## COURSE REQUIREMENTS - ASSIGNMENTS (SUMMARY)

Note: Please read carefully the additional instructions for each of these assignments

	ASSIGNMENTS	Value
1	Field Work Assignment (Team of two students)	20%
2	<p><b>Independent Field Assignment (Voyage Journal Report)</b> (Team of two students)</p> <p>On the <u>third day</u> following the sailing off of a visited port, you will be required to submit a 500 words structured Voyage Journal Report (VJR)</p> <p>There are ten (10) Port cities to be visited (excluding Bremenhaven and San Diego). You are required to submit a total of <u>seven (7)</u> VJR. A penalty will apply to each missing report. Two of these reports, randomly chosen, will be given a grade.</p>	20%
3	<p><b>Critical Reading Assignments</b></p> <p>According to the reading schedule <u>AND the specific reading list for these assignments</u>, you are required to submit seven (7) Reading Assignments. A penalty will apply to each missing assignment. Only <b>one (1)</b> of these assignments, randomly chosen, will be given a grade. You will be given a bonus for each additional Critical Reading Assignment submitted.</p> <p>Each of the seven Critical Reading Assignments must cover the following items: A) Keywords B) Main arguments; C) Your critical analysis and opinions; and D) Questions for further inquiry.</p>	20%
4	<p><b>Presentation of Critical Reading Assignment and Panel Discussion</b> (Team of two students)</p> <p>Each team of two (2) students will present a reading during the voyage, according to a presentation schedule. Each presentation will have the same structure as the Critical Reading Assignment, and will be presented on PowerPoint format. You will have 8 minutes to briefly – but fully - cover the material and 22 minutes to animate a dynamic discussion.</p> <p>This teamwork presentation cannot be one of the seven Critical Reading Assignments submitted, as described in the previous point.</p>	10%
5	<p><b>Quizzes</b></p> <p>There will be <b>2 quizzes</b> to assess your understanding of key material covered in class and course readings. These quizzes will be ONLY from a</p>	15%

	<u>specific reading list.</u>	
<b>6</b>	<b>Participation</b> Attendance (5%) and active participation (10%) will constitute your final participation grade in the course.	<b>15%</b>

**Note: No handwritten assignments are allowed.**

### **1. FIELD WORK CLASS AND ASSIGNMENT (Cochin)**

Semester at Sea field experiences allow for an unparalleled opportunity to compare, contrast, and synthesize the different cultures and countries encountered over the course of the voyage. In addition to the one field class, students will complete independent field assignments that span multiple countries.

**Field Class attendance is mandatory for all students enrolled in this course. Do not book individual travel plans or a Semester at Sea sponsored trip on the day of your field class.** Field Classes constitute at least 20% of the contact hours for each course.

#### **Field Class and Assignment**

The Field Class for this course will take place on Wednesday, 27 September, in Cochin, India.

Class Title: India's Ayurveda Health

#### **Background:**

India's state of Kerala, where Cochin (or Kochi) is located, is the centre of the practice, teaching and training of Ayurveda medicine (also called Ayurvedic). Ayurveda is one of the world's oldest medical systems. It originated in India and has evolved there over thousands of years. The term "Ayurveda" combines the Sanskrit words *ayur* (life) and *veda* (science or knowledge). Ayurveda means "the science of life."

The aim of Ayurveda medicine is to integrate and balance the body, mind, and spirit. This is believed to help prevent illness and promote wellness. Ayurveda medicine uses a variety of products and techniques to cleanse the body and restore balance.

Ayurveda medicine continues to be practiced in India, where nearly 80 percent of the population uses it exclusively or combined with conventional (Western) medicine.

In the United States, Ayurveda medicine is considered complementary and alternative medicine (CAM). According to the 2007 National Health Interview Survey, which included a comprehensive survey of CAM used by Americans, some 200,000

U.S. adults used Ayurveda medicine in the previous year.

**Field Class Learning Objectives:**

1. To expose students to alternative medicine and to have a first-hand practical experience with millennial health practices.
2. To appreciate and stimulate pluralism and diversity in the understanding of the health-illness process and in alternative care practices.

**Activity:**

First: Read carefully the country file for India. During the morning we will visit an Ayurveda health center, hospital or college affiliated to Kerala University of Health Sciences to observe, understand, discuss and familiarize us with Ayurveda medicine. We will interact with health personnel and eventually patients.

In the afternoon we will collectively discuss, analyze and compare our views. The last part of the fieldwork will be allocated to teamwork (2 students), where you will work with a partner to prepare an analytical *Further Inquiry Proposal (FIP)*.

**Assignment:**

This 1500-words *Further Inquiry Proposal* must include the following:

- 250 words: three (3) inquiry objectives that you find important for further learning about Ayurveda medicine (*The objectives are the concrete and specific issues you would like to study. Be very specific.*)
- 250-words: a set of five (5) relevant questions related to your inquiry objectives.
- 750-words rationale/justification of your objectives and questions.
- 250-words on the following question: *what did you learn from the experience?*

Format: The submitted 1500-words Report needs to be typed on Arial 12, double space. The cover page includes course number and title, students names, work title, and dates.

**2. INDEPENDENT FIELD ASSIGNMENT** (Team of 2 students)

Semester at Sea field experiences allow for an unparalleled opportunity to compare, contrast, and synthesize the different cultures and countries encountered over the course of the voyage. In addition to the one field class, students will complete independent field assignments that span multiple countries.

On the third day following the sailing off of a visited port, each team of two students is required to submit a 500-words structured *Voyage Journal Report (VJR)*

There are ten (10) Port cities to be visited (excluding Bremenhaven and San Diego). You are required to submit a total of seven (7) VJR. A penalty will apply to each missing report. Two of these reports, randomly chosen, will be given a grade.

The purpose of the field assignment is to conduct a non-participant observation exercise, where you will observe the subjects of your study without taking an active part in the situation under scrutiny. To avoid a biased perception you will observe a number of similar situations, over a period of time.

Logistic and methodology:

- You have freedom to pick and change partner for each assignment, but each student needs to complete 7 VJRs.
- Before arriving to port you will use the SAS library, the course readings, the country files' links, the country files (on the ship intranet) to read on each visiting country, take notes and prepare the exercise you would like to conduct.
- The work needs to be previously structured, and completed in a manner that will facilitate analysis and discussion.
- You will list four (4) health issues (examples: social determinants, health and economics, health and politics, health attitudes and behaviours, accessibility to health care, environmental health, pharmaceuticals, health and mass media, private health care, generational and gender differences to health, etc.) which you would like to observe in the country.
- For each of these 4 issues, prepare a draft of your expected observation results.
- Following the non-participant observations, you will write your VJR. This report will include 400 words critical analysis of the issues observed, comparing your pre-judgments and the post experience observation. Venture on what you have observed with your team partner. You will conclude with a 100 words conclusion summarizing what did you learn from your experience.
- The originality of your work will also be a matter of evaluation.

Format: The submitted 500-words work needs to be typed on Arial 12, double space. The cover page includes course number and title, students names, work title, and dates.

Tips on Taking Field notes:

- ✓ Be discreet and do not invade privacy by taking photographs.
- ✓ Record or write down your notes on a small pocket notebook (paper).
- ✓ Transcript notes to your pad or computer as soon as possible.
- ✓ Do not minimize the importance of the observational situation, feelings, questions and opinions.
- ✓ Keep the analysis for later.



**3. CRITICAL READING ASSIGNMENT (Example only)**

Maximum: two pages. **No handwritten work is accepted**

<b>Course#: SOC 344</b>	Student name:
-------------------------	---------------

Circle your reading Number: <b>4, 5, 7, 8, 9, 10, 11, 13, 14, 15, 17, 18, 21, 24 &amp; 26</b>
---

<b>Ref.#</b> BRUNN, H., and ELVERDAM, B., <i>Anthropology &amp; Medicine</i> , Vol. 13:3, 'Los Naturistas – Healers Who Integrate Traditional and Biomedical Explanations in Their Treatment in the Bolivian Health Care System', (2006); pages: 273-283.
--

<b>Keywords</b>		
<b>1.</b> Medical pluralism	<b>2.</b> Los Naturistas	<b>3.</b> Urban Bolivia
<b>4.</b> Indian, Mestizo, white	<b>5.</b> Traditional vs. biomedicine	<b>6.</b> Explanatory models

<b>Main arguments and debatable issues</b>
<p><b>Main Arguments:</b> The Naturistas represent the Mestizo population of Bolivia; they believe in the Andean tradition that a person's health is determined by the 'hotness', 'coldness', 'dryness' or 'dampness' of his/her body, which is affected by the environment. The Naturistas incorporate <u>both</u> traditional and modern techniques in order to ensure that a patient receives appropriate care.</p> <p>.....</p>

<b>Personal analysis and opinions ....</b>

<b>My questions for further inquiry</b>
<p>What are the advantages and disadvantages of pluralistic medical care and how would your response change if practices from different sectors were combined rather than divided?</p> <p>.....</p>
<p>Would we incorporate aboriginal health practices as a 'traditional' method or use those of other ethnic groups who have immigrated to this country?</p>

Is it possible that with the rise of 'Western' diseases, such as coronary heart disease and leukemia, the Naturistas would have needed 'Western' medical care even if they did not agree with it?

#### **4. PRESENTATION OF CRITICAL READING ASSIGNMENT AND PANEL DISCUSSION (Team of 2 students)**

Total allocated time: 30 minutes. The team of 2 students are required the following:

- a) Choose a presentation date related to one selected reading (see reading list) and prepare a PowerPoint.
- b) Prepare and present a PowerPoint presentation: Brief summary of the chosen Reading: (Only 8 minutes will be allowed for Presentation time).
- c) Organizes two discussions panels. Each student (of the team) will be responsible for leading a group of 15 students in a discussion of the assigned readings for a maximum of 20 minutes.
- d) Bring forward a number of questions and issues arising from the article and submit to class for open discussion.
- e) Conclude, presenting your points for further inquiry and criticism (2-3 minutes).

##### **Important Notes:**

- 1. Students will be evaluated according to their capacity to briefly but thoroughly present the work and to stimulate a rich and dynamic panel discussion.
- 2. The scheduled Presentations and Panel discussions will be defined at the beginning of the course and will be determined for the whole duration of the voyage.
- 3. Students who are absent or who come unprepared on the day they are slated to present and lead the panel will receive a grade of zero on the assignment.
- 4. Digitally save your presentation as follows: (Course Number. Subject. Last Names)  
ex.: SOC344. Traditional.Health.Africa.Wong&Miller.

#### **5. QUIZZES:**

(2) QUIZZES will be held ONLY on the following readings: No 3, 20, 23, 28, 29 & 31

#### **6. PARTICIPATION**



Students are expected not only to attend but also to **truly participate** in class and Panels. Participation represents an important percentage (**15%**) of the final grade. Commitment, preparation and active participation are important ingredients for a shared learning experience. Questions are always welcome.

Note: Please do not misunderstand the concepts of **Attendance and Participation**. **Attendance is mandatory**. Students are expected to attend **ALL** classes, arrive on time and leave at the end of class time. Attending classes does not mean that you are necessarily an active student and that you will receive a good participation grade.

## **METHODS OF EVALUATION / GRADING SCALE**

The following Grading Scale is utilized for student evaluation. Pass/Fail is not an option for Semester at Sea coursework. Note that C-, D+ and D- grades are also not assigned on Semester at Sea in accordance with the grading system at Colorado State University (the SAS partner institution).

Pluses and minuses are awarded as follows on a 100% scale:

<b>Excellent</b>	<b>Good</b>	<b>Satisfactory/Poor</b>	<b>Failing</b>
97-100% (A+)	87-90% (B+)	77-80% (C+)	Less than 60%
93-97% (A)	83-87% (B)	70-77% (C)	F
90-93% (A-)	80-83% (B-)	60-70% (D)	

## **ATTENDANCE/ENGAGEMENT IN THE ACADEMIC PROGRAM**

Attendance in all Semester at Sea classes, including the Field Class, are mandatory. Students must inform prior to any justified absence (ex. health problem).

## **LEARNING ACCOMMODATIONS**

Semester at Sea provides academic accommodations for students with diagnosed learning disabilities, in accordance with ADA guidelines. Students who will need accommodations in a class, should contact ISE to discuss their individual needs. Any accommodation must be discussed in a timely manner prior to implementation.

A memo from the student's home institution verifying the accommodations received on their home campus is required before any accommodation is provided on the ship. Students must submit this verification of accommodations to [academic@isevoyages.org](mailto:academic@isevoyages.org) as soon as possible, but no later than two months prior to the voyage.

## **STUDENT CONDUCT CODE**

The foundation of a university is truth and knowledge, each of which relies in a

fundamental manner upon academic integrity and is diminished significantly by academic misconduct. Academic integrity is conceptualized as doing and taking credit for one's own work. A pervasive attitude promoting academic integrity enhances the sense of community and adds value to the educational process. All within the University are affected by the cooperative commitment to academic integrity. All Semester at Sea courses adhere to this Academic Integrity Policy and Student Conduct Code.

During the first week of the voyage all students should submit a hand written declaration with the following honor pledge: *"I will NOT use or receive any unauthorized assistance for my Semester at Sea assignments". Course Title and number. Student name and signature*

### **Classroom Etiquette**

Please do your part to maintain a healthy, mature learning environment. This includes refraining from disruptive and disrespectful behavior such as all cell phone and internet use, sleeping, consuming food or drink that might be noisy or messy, working on assignments for other classes, chatting with classmates of topic, and coming and going during class. Arrive always on time and let me know if you need to leave early. Arriving late or leaving class will lose attendance credit.