

GGR433 Built Environment and Health

Winter 2016 Course Syllabus- Student Ver. (rev. Dec 28/15)

Administrative Details

Course Name: GGR433 36 S Built Environment and Health

Time: Thursday 12-3

Location: BF 315 (Bancroft Building, 4 Bancroft Ave.)

Instructor: Pamela Kaufman, Assistant Professor, Dalla Lana School of Public Health, University of Toronto

Office Hours: After class or by appointment

Email: p.kaufman@utoronto.ca

Telephone: 416-978-8137

Office: Health Sciences Building, 155 College St., Rm. 536 (entre via suite 530)

Teaching Assistant: Katie Hayes

Office Hours: After class or by appointment

Email: katie.hayes@mail.utoronto.ca

Course Description

Exclusions: GGR400H1 (2012-13)

Prerequisites: 10.0 FCE's

Recommended Preparation: 1.0 FCE in Geography (SOC SCI/BR=3)

Distribution Requirement Status: This is a Social Science course

Breadth Requirement: Society and its Institutions (3)

Overview: Linking across fields that include public health, geography and planning, this course examines the growing evidence and ways in which human health is affected by the spatial distribution and design of the built environment in which we live, work and play. More specifically, this course considers how various planning and development decisions impact individual and population health, particularly in relation to chronic diseases, injuries and mental health.

Learning Outcomes: By the end of this course, students will be able to:

1. Identify examples of interactions between the built environment and the health of individuals and populations, at the local, regional, provincial and national levels
2. Critically examine issues in the built environment that have an impact on health at the local and global level
3. Identify tools and best practices that promote healthier communities

4. Identify the benefits and challenges of cross-disciplinary collaboration to identify problems and develop, implement and evaluate solutions to built environment influences on health
5. Integrate current evidence regarding the impacts of the built environment on health with information and perspectives from other courses and/or personal experiences
6. Apply lessons from planning and public health research to current and future problems related to the built environment and health

Structure: This course emphasizes participation, critical thinking and communication. Class sessions are structured to include some topics being introduced by the instructor or guest speaker and **seminar style discussions**, where students are expected to complete the readings before class and actively participate in discussion during the session.

About Your Instructor: I am an Assistant Professor in the Dalla Lana School of Public Health at the University of Toronto, and a Scientist and Senior Project lead with the Ontario Tobacco Research Unit (OTRU) and the Social and Epidemiological Research Department at the Centre for Addiction and Mental Health. My academic training is in anthropology, landscape architecture and environmental design. For the past 10 years, I have engaged in a program of research addressing physical and social environment factors that affect the development and implementation of public health policies, and the beneficial effects and unintended consequences of such policies. I have a particular interest in the synergistic relationships between the built environment and health, and am excited about exploring with students how planning and development decisions impact population and individual health.

Student learning will also be facilitated by other academics, professionals and practitioners, who will bring first-hand experience working, studying and influencing decisions to create built environments that have a positive influence on health.

Expectations: You can expect that I will show up at each class prepared to facilitate your learning. As students, you are expected to show up at each class familiar with the readings and background material, and prepared to actively engage in lively discussion. This course expects you to bring critical thinking and thoughtful reflection to discussions about how knowledge gained through the course readings and lectures can be applied to solve real-world problems. You are encouraged to integrate evidence on the impacts of the built environment on health with your own academic and personal experiences, such as learning from other classes, and reflections about the neighbourhoods that you grew up in or are currently living within.

Required Texts and Readings: A variety of formats will be used to facilitate your learning, including guest lectures, videos/films and scholarly readings. A list of required readings for each class is provided in the week-by-week activity breakdown. The full citations and links will be provided in a separate document on Blackboard. Readings include journal articles and chapters from the following text: Andrew L. Dannenberg, Howard Frumkin, Richard J. Jackson (eds). 2011. Making Healthy Places: Designing and building for health, well-being, and sustainability. Island Press. Washington, D.C.

An electronic version of the text is available (pdf or epub format) free of charge through the University of Toronto Library via a direct link through your UofT student registration:

<http://go.utlib.ca/cat/9543440>

Journal articles are also available through the University of Toronto Library via direct link through your UofT student registration (a reading list with links will be provided in a separate document and posted on Blackboard).

Course Requirements and Grading

Assignment (mark)	Total Weight	Max. Length	Due Date
A1. Attendance and Contribution a) Attendance (5%) b) Contribution to discussion (10%)	15%		12 weeks attendance and contribution
A2. Individual Weekly Logs a) 8 Weekly logs (24%) b) 1 Log presentation (6%)	30%	Each log should be no more than 500 words (about 1 page) Presentation should be no more than 5 minutes long	Entries to be submitted every Thursday by 12 am (midnight) from Jan 28 to Mar 24
A3. Group Neighbourhood Case Study a) Proposal (5%) b) Final report (20%) c) Presentation (5%)	30%	a) 1,000 words (about 2 pages) b) 5,000 words (about 10 pages) c) 10 min	a) February 4 b) March 24 c) March 31 or April 7
A4. Individual Briefing Note (25%)	25%	1,000 words (about 2 pages)	February 25

Assignments are more fully described on pages 10-13 of this outline

Drop date: March 13, 2015

Course/Departmental/Divisional Policies

Submission Methods: All assignments are to be submitted electronically through **Turnitin** unless otherwise noted by the instructor.

Normally, students will be required to submit their course essays to Turnitin.com for a review of textual similarity and detection of possible plagiarism. In doing so, students will allow their essays to be included as source documents in the Turnitin.com reference database, where they will be used solely for the purpose of detecting plagiarism. The terms that apply to the University's use of the Turnitin.com service are described on the Turnitin.com web site.

Students may opt out of submitting their assignments through Turnitin. If Turnitin is not used, students may be required to demonstrate originality of their work by providing draft versions of essays or copies of background notes. Students must notify the instructor to discuss alternate methods of submission if they will not be using Turnitin.

Deadlines for Assignment Submissions: All assignments are to be submitted on the designated due date. Assignments submitted late will be penalized by **2% per day (including weekend days)** reduction in the total mark. **No assignments will be accepted more than one week after the due date** unless the student has obtained prior permission from the instructor in the case of documented illness or other extenuating circumstances.

Missed Deadlines: For illness or other non-medical emergencies that affect your ability to complete coursework, you must provide the instructor with appropriate documentation. For missed work, contact the instructor as soon as possible – and no later than one-week after the original due date. For medical exemptions, only an official U of T medical certificate will be accepted (available online at <http://www.illnessverification.utoronto.ca>). For non-medical documentation please see: <http://www.artsci.utoronto.ca/current/petitions/process#documentation>. Please consult your college registrar if you are having serious difficulties during the term that prevent you from completing your course work. They may be able to provide a letter documenting your situation. Be aware that submitting a note that has been altered or obtained under false pretenses is considered a very serious offence by the University.

Academic Integrity: Plagiarism is an academic offense at the University of Toronto. Plagiarism is quoting (or paraphrasing) the work of an author (including the work of fellow students) without a proper citation. Quotation marks are required when using an author's words. Students also should not be submitting any academic work for which credit has previously been obtained or is being sought, without first discussing with the instructor. Please consult the "Rules and Regulations" section of the Arts and Science Calendar (http://www.artsandscience.utoronto.ca/ofr/calendar/Rules_&_Regulations.html) for further information, and check 'How not to plagiarize' at <http://life.utoronto.ca/get-smarter/academic-honesty/> or <http://www.writing.utoronto.ca/advice/using-sources/how-not-to-plagiarize>.

Accessibility Needs: The University of Toronto is committed to accessibility. If you require accommodations for a disability, or have any accessibility concerns about the course, the classroom or course materials, please contact Accessibility Services as soon as possible: disability.services@utoronto.ca or <http://studentlife.utoronto.ca/accessibility>

Accommodations for Religious Observances: The University welcomes and includes students, staff and faculty from a wide range of backgrounds, cultural traditions and spiritual beliefs. It is the policy of the University to arrange reasonable accommodation of the needs of students who observe religious holy days other than those already accommodated by ordinary scheduling and statutory holidays. Please note that it is the student's responsibility to alert teaching staff in a timely fashion to upcoming religious observances and anticipated absences. For more information on the applicable policies:

<http://www.viceprovoststudents.utoronto.ca/publicationsandpolicies/guidelines/religiousobservances.htm>

Copyright in Instructional Settings: If a student wishes to tape-record, photograph, video-record or otherwise reproduce lecture presentations, course notes or other similar materials provided by instructors, he or she must obtain the instructor's consent beforehand.

On the Library: University of Toronto Libraries provide access to a vast collection of online and print resources to faculty, staff, and students. Research help is available by phone, e-mail, chat, and in-person. For more detail see <http://onesearch.library.utoronto.ca/>

Note: The contents of this summary may change

Detailed Course Description:

From zoning laws developed more than a century ago to prevent the spread of diseases, the built environment has been invariably linked to the health of individuals as well as entire populations. Over time, these concepts diverged into the distinct disciplines of public health and planning. In recent years, there has been renewed interest in the association between the built environment and many non-infectious diseases, including obesity, diabetes, cardiovascular and respiratory diseases, cancer and injuries. However, few planning and public health professionals are equipped with the knowledge and skills to communicate and work collaboratively to create healthy communities. Linking across fields that include public health, geography and planning, this course allows students to explore the growing evidence and ways in which human health is affected by the spatial distribution and design of the built environment in which we live, work and play. More specifically, the course will explore how various planning and development decisions impact population and individual health, particularly in relation to chronic diseases and injuries.

Based on a model curriculum developed by instructors of planning and public health,¹ the curriculum for GGR433 addresses the following three areas:

1. **Planning and Public Health Foundations:** To provide students with an overview of the fields of planning and public health, from their origins to present. Students will gain foundational knowledge about the core values and histories of planning and public health, how they evolved to the present day, and theories on the relationship between the built environment and health.
2. **Health Issues Related to the Built Environment:** To provide students with knowledge about how the built environment influences health related behaviours such as physical activity, access to

¹ Botchwey N, Hobson S, Dannenberg A, Mumford K, Contant C, McMillan T, Jackson R, Lopez R, Winkle C. A Model Curriculum for a Course on Built Environment and Public Health: Training for an Interdisciplinary Workforce. *American Journal of Preventive Medicine* 2009; 36 (2S): S63-S71.

healthy food, water and clean air; and the implications for major health issues such as injury, obesity, diabetes and mental health. Students will also consider the socioeconomic and cultural dimensions of vulnerable populations, and concerns about health equity.

3. Designing the Built Environment for Health: To provide students with knowledge about how planning and public health tools developed and used by architects, urban planners, public health professionals, sociologists and anthropologists can be used to address the health impacts of the built environment. Students will be able to identify contemporary features of the built environment and how they contribute and detract from individual and population health. Students will learn about the role of policies and practices on the health of individuals and populations from the local to global level and gain greater awareness of how the built environment impacts the choices that people make in their day-to-day lives, and the importance of ethical considerations in decision-making. Students will also consider future challenges for healthy built environments such as environmental sustainability.

Throughout the course, students will engage in critical thinking, application of knowledge to solve real-world problems, and thoughtful reflection. Students are encouraged to integrate evidence on the impacts of the built environment on health with their own academic and personal experiences. In doing so, students will contemplate their future role as citizens, academics and professionals in improving outcomes for a healthier world.

Course Schedule:

Session/Date	Topic	Readings
Planning and Public Health Foundations		
1. Jan 14	An Introduction to the Built Environment and Health	1. Course Syllabus
2. Jan 21	Built Environments and Social Determinants of Health <ul style="list-style-type: none"> • Introduction to weekly logs and presentation sign-up • Introduction of Neighbourhood Case Study Project 	1. Sloane DC. (2006) From congestion to sprawl: Planning and health in historical context. <i>Journal of the American Planning Association</i> . 72(1): 10-18. http://simplelink.library.utoronto.ca/ur l.cfm/460612 2. Corburn J. (2004) Confronting the challenges in reconnecting urban planning and public health. <i>American Journal of Public Health</i> . 94(4): 541-546. http://simplelink.library.utoronto.ca/ur l.cfm/460609

		3. Dannenberg et al. (2011) Chapter 1. An Introduction to Healthy Places
Health Issues Related to the Built Environment		
3. Jan 28	<p>Access to Healthy Food</p> <ul style="list-style-type: none"> Finalize neighbourhood case study groups Weekly log presentations 	<ol style="list-style-type: none"> 1. Lovasi GS, Hutson MA, Guerra M, Neckerman KM. (2009) Built environment and obesity in disadvantaged populations. <i>Epidemiologic Reviews</i>. 31(1): 7-20. http://simplelink.library.utoronto.ca/ur l.cfm/412279 2. Dannenberg et al. (2011) Chapter 3. Food Environments 3. Toronto Public Health. (2010) Cultivating Food Connections: Toward a Healthy and Sustainable Food System for Toronto. Toronto Public Health. May 2010. (pages 1-25) http://www.toronto.ca/health/food_co nnections_report.pdf
4. Feb 4	<p>Active Transportation and Public Health</p> <ul style="list-style-type: none"> Introduce Briefing Note assignment Group Project proposals due Weekly log presentations 	<ol style="list-style-type: none"> 1. Dannenberg et al. (2011) Chapter 2. Community Design for Physical Activity 2. Brennan-Ramirez LK, Hoehner CM, Brownson RC, Cook R, Orleans CT, Hollander M, Barker DC, Bors P, Ewing R, Killingsworth R, Petersmarck K, Schmid T, Wilkinson W. (2006) Indicators of activity-friendly communities: An evidence-based consensus process. <i>American Journal of Preventive Medicine</i>. 31(6): 515-524. http://simplelink.library.utoronto.ca/ur l.cfm/460565 3. Glazier RH, Creatore MI, Weyman JT, Fazli G, Matheson FI, et al. (2014) Density, Destinations or Both? A Comparison of Measures of Walkability in Relation to Transportation Behaviors, Obesity and Diabetes in Toronto, Canada. <i>PLoS ONE</i> 9(1): e85295. http://simplelink.library.utoronto.ca/ur l.cfm/460566
5. Feb 11	<p>Vulnerable Populations: Injury Prevention, Aging and Mental Health</p> <ul style="list-style-type: none"> Weekly log presentations 	<ol style="list-style-type: none"> 1. Dannenberg et al. (2011) Chapter 9. Vulnerable Populations and the Built Environment. 2. Lum JM, Springer JH. (2004). The aging

		<p>experience of Chinese and Caribbean seniors. <i>Policy Matters</i>. 8 (July). Joint Centre of Excellence for Research in Immigration and Settlement. http://go.utlib.ca/cat/9034795</p> <p>3. Evans G. (2003) The built environment and mental health. <i>Journal of Urban Health</i>. 80(4): 536-555. http://link.springer.com.myaccess.library.utoronto.ca/article/10.1093%2Fjurb-an%2Fjt063</p>
6. Feb 25	<p>Social Capital and Community Engagement in Planning and Design</p> <ul style="list-style-type: none"> • Weekly log presentations 	<p>1. Dannenberg et al. (2011) Chapter 8. Social Capital and Community Design.</p> <p>2. Leyden KM. (2003) Social capital and the built environment: The importance of walkable neighborhoods. <i>American Journal of Public Health</i>. 93(9): 1546–1551. http://simplelink.library.utoronto.ca/url.cfm/460569</p> <p>3. Dannenberg et al. (2011) Chapter 19. Community Engagement in Design and Planning.</p>
Feb 15-20: Reading Week- no classes!		
Designing the Built Environment for Health		
7. Mar 3	<p>Tools and Approaches for Creating Healthy Communities</p> <ul style="list-style-type: none"> • Briefing Notes Due • Weekly log presentations 	<p>1. Dannenberg et al. (2011) Chapter 18. Policy and Legislation for Healthy Places</p> <p>2. Geller A. (2003) Smart growth: a prescription for livable cities. <i>American Journal of Public Health</i>. 93(9): 1410-1415. http://simplelink.library.utoronto.ca/url.cfm/331077</p> <p>3. Ulmer JM, Chapman JE, Kershaw M, Campbell M, Frank LD. (2015) Application of an evidence-based tool to evaluate health impacts of changes to the built environment. <i>Canadian Journal of Public Health</i>. 106(1): eS26-32. http://search.proquest.com.myaccess.library.utoronto.ca/docview/1655119465?pq-origsite=summon&accountid=14771</p>

<p>8. Mar 10</p>	<p>Creating Healthy Communities: Regent Park</p> <ul style="list-style-type: none"> • Weekly log presentations 	<ol style="list-style-type: none"> 1. Dannenberg et al. (2011) Chapter 20. Measuring, Assessing and Certifying Healthy Places. 2. Krieger N, Northridge ME, Gruskin S, Quinn M, Kriebel D, Davey-Smith G, Bassett M, Rehkopf D, Miller K, and the HIA “promise and pitfalls” conference group. (2003). Assessing health impact assessment: multi-disciplinary and international perspectives. <i>Journal of Epidemiology and Community Health</i>. 57:659-662. http://jech.bmj.com/content/57/9/659.short 3. Lees E, Redman H. (2009) Bringing health to the planning table: A profile of promising practices in Canada and abroad. http://www.phac-aspc.gc.ca/publicat/2009/be-eb/pdf/be-eb-eng.pdf
<p>9. Mar 17</p>	<p>Behavioural Choices and the Built Environment</p> <ul style="list-style-type: none"> • Weekly log presentations 	<ol style="list-style-type: none"> 1. Dannenberg et al. (2011) Chapter 17. Behavioral Choices and the Built Environment 2. Toronto Public Health. (2012) The walkable city: Neighbourhood design and preferences, travel choices and health. April 2012. (pages 1-30) http://go.utlib.ca/cat/8861485 3. Frank LD, Kershaw SE, Chapman JE, Campbell M, Swinkels H. (2015) The unmet demand for walkability: Disparities between preferences and actual choices for residential environments in Toronto and Vancouver. <i>Canadian Journal of Public Health</i>. 106(1): eS12-20. http://search.proquest.com.myaccess.library.utoronto.ca/docview/1655119319?pq-origsite=summon&accountid=14771
<p>10. Mar 24</p>	<p>Resiliency, Global Health and Built Environments of the Future</p> <ul style="list-style-type: none"> • Neighbourhood Case Study Report due • Weekly log presentations 	<ol style="list-style-type: none"> 1. Dannenberg et al. (2011) Chapter 16. Resiliency to Disasters 2. Bourque F & Cunsolo Willox A (2014). Climate change: The next challenge for public mental health? <i>International Review of Psychiatry</i>, 26(4), 415-422

		http://www.lamentfortheland.ca/wp-content/uploads/2014/09/Bourque-Cunsolo-Willox-IRP.pdf 3. Dannenberg et al. (2011) Chapter 24. Built Environments of the Future
11. Mar 31	Student Case Study Group Presentations	Groups 1-4
12. Apr 7	Student Case Study Group Presentations	Groups 5-8

Assignments- Detailed Description

Evaluation

As the University of Toronto's Faculty of Arts and Science Grading Policy states (at <http://www.writing.utoronto.ca/advice/general/grading-policy>), the various possible grades are defined as follows:

A (80 - 100%) Excellent: Strong evidence of original thinking; good organization; capacity to analyze and synthesize; superior grasp of subject matter with sound critical evaluations; evidence of extensive knowledge base.

B (70-79%) Good: Evidence of grasp of subject matter, some evidence of critical capacity and analytic ability; reasonable understanding of relevant issues; evidence of familiarity with literature

C (60-69%) Adequate: Student who is profiting from the university experience; understanding of the subject matter and ability to develop solutions to simple problems in the material.

D (50-59%) Marginal: Some evidence of familiarity with the subject matter and some evidence that critical and analytic skills have been developed.

F (0-49%) Inadequate: Little evidence of even superficial understanding of subject matter; weakness in critical and analytic skills; limited or irrelevant use of literature.

A1- Attendance and Contribution– 15%

15% of the final grade will be comprised of class attendance (5%) and contribution to class learning and discussion (10%). As much of this course is carried out in a seminar format, students are expected to actively engage in critical thinking and thoughtful reflection about how knowledge can be applied to identify, describe and solve real-world problems. Students are encouraged to integrate evidence about the impacts of the built environment on health gained from required readings, guest presentations and other course materials, with their own academic and personal experiences. Thus, it is essential that students read the required materials as part of their preparation for weekly class discussion.

A2- Built Environment and Health Logs and Presentation- 30%, due Thursday at 12 am (midnight) starting January 28 and ending March 24

Students will produce 8 weekly logs from January 28 (week 3) to March 24 (week 10). For each of the logs, students will discuss a topic being discussed in class that week. Students should refer to at least 2 of the readings assigned that week, and discuss how the topic and readings relate to the built environment and health. References to readings or other sources of information are required as needed. Students are encouraged to also reflect on their own lived or academic experience as it relates to the topic. Each log will be no more than 500 words (about 1 page, 12 point font), and must be

submitted to Turnitin on the Thursday of the relevant week, by 12 am (midnight). All together, the logs are worth 24% of the final grade.

Each log must:

- Clearly identify the topic area and why you chose to discuss it
- Briefly discuss the topic within the context of perspectives or approaches from at least 2 of the weekly readings
- Include your own reflections on the topic and readings
- Reference the use of literature or other materials used in your log

Each student is required to provide one brief verbal summary (3-5 min) of one of their weekly logs. This is a casual verbal summary- no slides or other visuals are permitted. Each student will draw to select a presentation date at the beginning of the term. The log presentation is worth 6% of the final grade.

A3 – Local Neighbourhood Case Study (groups of 3-4)- 30%

Groups of students (**assigned by the instructor**) will choose a neighbourhood case study (to be further defined during the 2nd week of the course). Using knowledge gained from class sessions and readings, each group will analyze their case study to identify elements of the built environment that: promote or discourage physical activity, make the neighbourhood safe or unsafe, inviting or hostile, or make good public spaces. Groups will also identify planning tools or policies that are being used or could be used to influence healthy behaviours or deter unhealthy behaviours.

Each group of students will need to:

- Identify and define a neighbourhood case study
- Visit the neighbourhood to get a sense of how its built environment works and makes you feel (*Please stay safe and walk in groups during daylight hours*). Think about your personal reactions to being in the neighbourhood spaces. Do you feel content? Safe? Anxious? Would you feel comfortable walking regularly through the neighbourhood? Are there destinations that you would walk to?
- Apply some of the concepts of the course to the neighbourhood being examined, such as, but not limited to: physical activity, transportation, food access, injury risk, mental health, vulnerable populations, access to nature, and discuss how they might impact individual or population health.
- ***Safety guidelines: Only walk your neighbourhoods during daylight, in groups for two or more and avoid locations that are deemed to be risky. We will discuss this further as a class.***

The Neighbourhood case study project is to be submitted and graded in three stages:

1. **Proposal (5%), due February 4:** Each group will provide one proposal document of no more than 1,000 words (about 2 pages, 12 point font) on February 4. The proposal should include: title, neighbourhood to be examined (boundaries, brief description), purpose of the project, your biggest issue(s) or question(s) within the neighbourhood that you propose to address, draft schedule of tasks to complete the project, proposed outline/major sections, and any resources that you plan to use (e.g., journal articles, reports). Each proposal must have a cover page with the names of all the group members, the course name and assignment, title, and date of submission (not included in the word/page limit).

2. **Case Study Report (20%), due March 24:** Each group will submit one final project report of no more than 5,000 words (about 10 pages, 12 point font) on March 24. Tables, charts, lists, bibliographic references and graphics/images may be included and will not be counted as part of the 10 pages. Each report must have a cover page with the names of all the group members, the course name and assignment, title, and date of submission (not included in word/page limit). The report will be evaluated on the following criteria:
 - Demonstrates understanding of the exercise
 - Demonstrates knowledge of the subject with explanations and elaboration
 - Applies concepts learned in class and readings
 - Includes complete references where needed, in a consistent and logical referencing system
 - Format is consistent throughout (headings, captions)
 - Figures and tables are presented logically to reinforce text
 - Pages are numbered
 - Demonstrates a collective group effort (students should be able to tell what they contributed to if asked)

3. **Presentation (5%), due March 31 or April 7:** Student groups will deliver a 10-minute presentation on either March 31 or April 7 (date to be determined by instructor). The presentation will provide an overview of their neighbourhood project, findings and recommendations. All group members should participate in the presentation. Presentations should demonstrate understanding and knowledge of the neighbourhood and related issues, and show original thought and creativity. Slides and/or other visuals may be included. Following each presentation, the presenters will answer any questions and lead a 5-10 minute class discussion.

A4 – Briefing Notes– 25%, due March 3

Many public and private sector organizations require Briefing Notes for decision-makers who are too busy to research pressing issues themselves but who nonetheless need relevant information and analysis, succinctly presented, on a timely basis. Each student will prepare one Briefing Note on an issue of their choice that addressed the relationship between the built environment and human health. Briefing Notes should be written for government decision-makers at the local level (e.g., a manager within Toronto City Planning, or the local Medical Officer of Health), or at the provincial level (e.g., Ontario Minister of Health). It is important to have a critical perspective and balanced approach when writing Briefing Notes. Editorial commentaries and advocacy positions are strongly discouraged.

The briefing note is due on March 3 and is worth 25% of your final grade. The Briefing Note should be no more than 1,000 words (about 2 pages, 12 point font), not including references or title page. This will require some out of class research to gather background data- much of which can be done on the Internet. Please use complete references where needed, in a consistent and logical referencing system. While the format may vary, Briefing Notes typically include the following:

1. **Issue statement:** What is the policy issue (i.e., the problem that needs to be solved by government)?
2. **Background:** Why is it an issue? Who is affected? What legislation/regulations/programs have to be taken into account? Which groups have an active interest in this issue and what are their views?
3. **Analysis:** What are the main options for addressing this issue? What are the pros and cons (costs and benefits) of each option?

4. **Recommendation:** Which option do you recommend? Why?
5. **References:** Cite the sources of key arguments and evidence.

The Briefing Note must:

- Have a cover page with your name, the course name and assignment, title, and date of submission (not included in the word/page count)
- Be spell-checked and proofread
- Include headings and sub-headings where appropriate
- Present references in a standard format (references are not included in the word/page count)
- Have pages numbered
- “bullet points” must provide adequate explanation of each point (i.e., a “laundry list” without adequate explanation is not acceptable).

Some tips on writing briefing notes are attached. See also *How to Write a Briefing Note* by Susan Doyle.
<http://web.uvic.ca/%7Esdoyle/E302/Notes/WritingBriefingNotes.html>