

PSYD33H3F L002 Current Topics in Clinical Psychology Topic: Mobile Technology in Mental Health Research Class Time and Location: Mondays 3:00-5:00pm, HL 008

Instructor:

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Office Hours:

Mondays 1:30-2:30pm, Room SW132H (enter through SW132E)
Other times by appointment.

Course Overview: Believe it or not, your smartphone will be an important part of assessing and treating mental disorders in the near future. Researchers are using mobile sensing technology to continuously track and estimate people's mental health, helping clinicians and researchers understand more about different conditions and symptom dimensions. The insight garnered by these applications could be used to develop "just-in-time" interventions, delivered through an individual's smartphone. This course provides an introduction to research design and methods for non-invasive mental health monitoring using smartphones, wearable sensors, and social media. Students will learn about ecological momentary assessment approaches and their integration and advancement with smartphone mobile sensing technology. Students will gain a practical understanding of mobile monitoring approaches as they relate to mental health, including the delivery of mobile health (mHealth) interventions. Topics include estimating mental health correlates using technology, basic issues in smartphone application design and development, emerging issues in mental health, and learning to write research designs and proposals. The course assumes a background in abnormal psychology.

Course Objectives: Using readings, activities, lectures, and assignments, I hope that by the end of this course, you will:

- have a basic understanding of mobile technology and its applications to mental health
- be able to generate and test hypotheses related to issues in mental health
- write, explain, and disseminate research findings to a general audience
- · understand issues related to mobile data collection, including ethics, inferences, and limitations

Course Web Site: A Quercus web site will be devoted to the course. The syllabus, related course material, and various assignments will be posted through the class website. Course reading links will be posted to the website. There is no textbook for the course.

Prerequisites: [PSYB07H3 or STAB22H3/23H3] and PSYB32H3 and [0.5 credit C-level in PSY courses]. Exclusion: PSY440H.

Expectations: You are expected to: (a) come to class regularly, participate in class discussions and assignments; (b) complete all assignments on time; and (c) be ready to engage in the design and hypothesis testing of a real mHealth project with your classmates. You are expected to complete reading assignments *before* class meets. During class, I encourage you to ask questions about concepts that are unclear or share examples that you think are relevant to the lecture. Outside of class, I encourage you to take advantage of office hours (or by appointment) to discuss any questions/concerns, or to discuss notes you have obtained from a classmate after missing class. E-mail is the best way to contact me outside of class.

EVALUATION AND ASSESSMENT:

Method of Evaluation	Weight
A. Reflection Papers: submit 4 in total in relation to one or more readings	12.5%
B. Reading Presentation and Facilitation of Discussion	20%
C. Midterm Group Project: worksheet, presentation, and research proposal	20%
D. Final Individual Project: worksheet and literature review	30%
E. Participation & Attendance	17.5%

A. Reflection Papers

Students will write four response papers that *reflect* (i.e., *not summarize*) one or more readings or a class discussion. Each reading response is worth 10 points with due dates spread out over the term. Reflection papers will be no more than 2 pages (double-spaced) and reflect *your original thoughts* regarding questions, implications, a theory's strengths or weaknesses, weaknesses in research methodology, comparison of ideas between articles, or other thoughts about any of the readings for a week. Grading will be based on depth of thought, originality, and writing style (marked out of 10). The instructor recommends completing these as early as possible because you'll be working on your individual project during the last month of the course. You are welcome to submit a reflection on the same week you are giving a presentation on the readings (see below). A late penalty of 1 point per day out of 10 will be applied if reflections are submitted late and submissions more than one week late will not be accepted.

B. Presentation of Readings/Facilitating Discussion

On most weeks, the first hour will be set aside to present the readings that were assigned. Two-to-three students will prepare a 45-minute presentation based on readings from one of the weeks listed below (a sign-up sheet will be passed around). Each of us will play a role in these presentations:

Presenter Role: Presenters will be responsible for summarizing the readings for the class and facilitating class discussion. Presenters must bring in at least one additional piece of material to make their presentations more engaging, such as news report, demos of different technology apps, websites, or research tools, videos, and/or another piece of interest that relates to the week's topic. The instructor is more than happy to provide feedback on planned activities and can also photocopy materials, post links, be part of a role-play scenario, etc. Note that the main goal of the presentation is to engage the rest of the class in the reading materials and subject matter. To do so, you will have to determine what are the best aspects of the articles to present. Sometimes a paper is more technical/engineering focused and you might want to present more on the techniques employed. Other times you'll want to focus on the results and clinical implications. Grading will be based on ability to summarize important parts of the readings, preparedness and clarity, discussion of implications and limitations of each study, and the ability to facilitate class discussion (40 points total).

Audience Role: The rest of the class will help facilitate discussion. To do this, the instructor will create 4 reading groups responsible for 1 reading each (you'll see below there are 4 readings per week). You will be responsible for reading your assigned reading and coming up with at least 1 question or discussion point about that article. These questions will be posted on our discussion board so that we can use them to facilitate discussion in class. These question submissions will be counted towards your Participation grade.

Instructor Role: I will serve as the moderator and choose student posted questions and provide questions/commentary of my own.

C. Midterm Group Project

Can mobile apps really improve our mental health in a short amount of time? We're going to test out this idea using a class-wide experiment. The most popular mental health/wellness apps (e.g., Calm, Headspace, Pacifica, InsightTimer, Am) generally focus on the acquisition and practice of mindfulness meditation techniques. Almost all of them suggest that we can become more mindful in a short amount of time, which in turn, can help us improve our well-being. To test if this is really the case, all of us will complete several baseline measures involving possible targets of the apps (e.g., stress, mindfulness, personality). Then, groups of students (4-5 students per group) will download the specific apps of interest and monitor their use and complete exercises for 3 weeks. We'll then take the same baseline measures again after 3 weeks and see if our results match out predictions and whether there are any app differences. Note: All data will be sent to and anonymized by the instructor which will then be made into a workable dataset for data analysis. This data will not be submitted for any type of publication and will never be stored with your names.

Working in your groups (based on your app choice), you will be tasked with submitting a group-based experimental report (no more than 15 pages of main text) consisting of an Introduction (with hypotheses), Methods, Results, Proposed Extension to the project, Implications, and References sections. Groups will present their individual results and proposed extension of their experiment in class before the project is due so that they can receive feedback and suggestions.

Although members of each team will receive the same grade, I will use my judgment if it appears that individual students have not equally contributed. I will provide you with a Group Project Research Worksheet that you will use to plan your project and divide up different roles (i.e., statistics, writing, literature search). The In-Class Presentation is expected to last approximately 20 minutes, and should cover some relevant background (i.e., the focus of your project and why this is important), hypotheses, proposed methods/results, and potential implications/limitations (each group member is expected to present some aspect of the talk). All group project components will be penalized 5 points for every day they are late, and assignments more than one week late will not be accepted.

The point breakdown of the group project will be as follows: Research Prep Worksheet and Project Outline (20 points), Group Project Paper (70 points), Presentation (40 points), and Peer Review Ratings (averaged, 20 points).

D. Individual Project

The end of term individual project involves studying a particular mental health condition or symptom dimension in more depth, eventually cumulating in a literature review that comments on the state of the literature incorporating technology into this condition/symptom and a discussion of future directions. Each student will start by selecting a topic and conducting a literature review on the use of technology within their chosen condition. Using this information, you will determine what research exists in three main areas (e.g., mobile sensing, social media, and interventions; though you can also expand these areas) and provide a review and commentary on the future integration of technology (or next steps) in research on your chosen condition/dimension.

Literature Review: Students will first be tasked with selecting a condition that they would like to study further using mobile health methods. Examples of mental health conditions include: Major Depressive Disorder, Persistent Depressive Disorder (Dysthymia), Bipolar Disorder (I or II), Social Anxiety Disorder, Posttraumatic Stress Disorder, Generalized Anxiety Disorder, Autism Spectrum Disorders, Eating Disorders (Anorexia, Bulimia, Binge Eating), Borderline Personality Disorder, Alcohol Abuse/Dependence, and Schizophrenia. Students can also consider disorders that affect children, dimensions of mental illness (e.g., affective instability, mania, compulsive behaviors, psychopathy), and conditions that are highly comorbid with mental disorders may also be suitable (e.g., obesity, traumatic brain injury, diabetes), but please consult with the instructor to ensure adequate mental health applications. The goal is to have as many different topics as possible to increase the diversity of the assignments. (Note: Based on previous course offerings, students have recommended avoiding OCD and ADHD because of limited research.)

Worksheet: Each student will complete a worksheet designed to help you integrate your literature findings thus far and start structuring the literature review for your condition/dimension of interest. This worksheet will be due before your final assignment, to allow for both instructor and peer review feedback.

Final Paper: Your paper (15 pages double spaced, not including references) will consist of the following components: (a) critical literature review of your mental health topic, using any research involving applications of mobile technology or technology in general; and (b) an integrated commentary whereby you suggest future opportunities for research involving mobile technology/technology in general within your mental health topic (e.g., ways that GPS/location information can further our understanding of alcohol use disorder). As a general guideline, roughly 70% (e.g., 10-12 pages) should be devoted to the literature review, whereas the other half should be devoted to the commentary and future directions (e.g., 3-5 pages), including what issues mobile technology can help address and how these methods could contribute to our understanding and/or treatment of that disorder. It is expected that you will have at least 12 primary research references in your final report (i.e., not reviews or web-sourced references).

The point breakdown of the individual project will be as follows: Paper (70 points), Worksheet (20 points), Peer-review ratings (averaged, 20 points). Each portion of the final assignment will be penalized 5 points for every day it is late, and components more than one week late will not be accepted.

E. Participation/Attendance: The instructor will keep track of attendance and participation. Students should plan to attend all classes and discuss absences with the instructor. Participation could mean participating in class or outside of class (e.g., coming to office hours, discussions before/after class, emails, discussion board postings, etc.). Students will

also be asked to read (at least) one reading per week and submit questions for discussion on Quercus. At other times, students will provide peer review ratings during presentations, which will help provide additional feedback to presenters.

Pass/Fail: If you are taking the course on the Credit/No Credit option, you must receive at least a "C-" to receive credit for the course. This option must be elected during the Add period.

COURSE SCHEDULE

Note: The schedule is subject to change; however, the instructor will consult with students should important changes to schedule be required.

Date/ Class	Topic and Readings	Assignments & Activities
Jan. 7 #1	Introduction to mobile sensing, part 1: Overview Background Readings: A summary will be presented in class with additional content. 1. Mohr, Zhang, & Schueller (2017). Personal sensing: Understanding mental health using ubiquitous sensors and machine learning. Annu. Rev. Clin. Psychol. 13, 11.1–11.25. 2. Onnela & Rauch (2016). Harnessing smartphone-based digital phenotyping to enhance behavioural and mental health. Neuropsychopharmacology, 41, 1691-1696. 3. Singh et al. (2016). Many mobile health apps target high-need, high-cost populations, but gaps remain. Health Affairs, 35, 12, 2310-2318. 4. Lui, Marcus, & Barry (2017). Evidence-based apps? A review of mental health mobile applications in a psychotherapy context. Professional Psychology: Research and Practice, 48(3), 199-210.	Introductions Review syllabus Students rank their week to present readings (1st & 2nd choice; Google form)
Jan. 14 #2	 Introduction to mobile sensing, part 2: Methods, research design, ethics <i>Background Readings: A summary will be presented in class with additional content.</i> Wenze & Miller (2010). Use of ecological momentary assessment in mood disorders research. <i>Clin. Psychol. Rev., 30,</i> 794-804. Cuthbert & Insel (2013). Towards the future of psychiatric diagnosis: The seven pillars of RDoc. <i>BMC Medicine,</i> 11, e126. Luxton, Kayl, & Mishkind (2012). MHealth data security: The need for HIPAA-compliant standardization. <i>Telemedicine and eHealth, 18,</i> 284-288. Krontiris, Langheinrich, & Shilton (August 2014). Trust and privacy in mobile experience sharing: Future challenges and avenues for research. <i>IEEE Communications Magazine</i>. 	Re-Introductions, finalize class list & week to present readings Activity on ethical considerations for psychologists. Students form groups for group assignment; assignment of apps; complete baseline questionnaires
Jan. 21 #3	Using mobile technology to make inferences about mental health, part 1: Mood/Depression/Anxiety 1. Rohani et al. (2018). Correlations between objective behavioral features collected from mobile and wearable devices and depressed mood symptoms in patients with affective disorders: Systematic review. JMIR mHealth and uHealth, 6, e165. 2. Wang et al. (2017). StudentLife: Using smartphones to assess mental health and academic performance of college students. In J.M. Rehg et al. (Eds). Mobile Health. (Book Chapter) 3. Chow et al. (2017). Using mobile sensing to test clinical models of depression, social anxiety, state affect, and social isolation among college students. JMIR, 19, e62.	Reading Presentation & Question Submission Have at least 1 reflection finished by Jan 21st EOD. Groups to start Project Prep Worksheet. Brainstorm around extension of the current study.

	4. Daros et al. (under review). Impact of social anxiety and social context on college students' emotion regulation strategy use: An experience sampling study. (Instructor will upload).	
	Using mobile technology to make inferences about mental health, part 2: Anxiety/Schizophrenia/Bipolar Disorder	Reading Presentation & Question Submission
I-	1. Place et al. (2017). Behavioral indicators on a mobile sensing platform predict clinically validated psychiatric symptoms of mood and anxiety disorders. <i>JMIR</i> , 19, e75.	Continued activities supporting the group project. Groups will have
Jan. 28 #4	2. Faurholt-Jepsen et al. (2016). Voice analysis as an objective state marker in bipolar disorder. Translational Psychiatry, 6, e856. (compares manic to depressed states).	time to discuss projects. Activity around sensors and
	3. Faurholt-Jepsen et al. (2018). Objective smartphone data as a potential diagnostic marker of bipolar disorder. <i>Australian & New Zealand Journal of Psychiatry</i> , 0004867418808900.	mental health symptoms.
	4. Wang et al. (September 2017). Predicting symptom trajectories of schizophrenia using mobile sensing. <i>Proceedings of the ACM on Interactive, Mobile, Wearable and Ubiquitous Technologies, Vol. 1, No. 3, Article 110.</i>	
	Using mobile technology to make inferences about mental health, part 3: Sleep/Eating/Substance Use Disorders	Reading Presentation & Question Submission
	1. Abdulla et al. (2017). Circadian computing: sensing, modeling, and maintaining biological rhythms. In J.M. Rehg et al. (Eds). <i>Mobile Health</i> (Book Chapter).	Have at least 2 reflections finished by Feb. 4 th EOD.
Feb. 4 #5	2. Thomas, Essa, & Abowd (2015). A practical approach for recognizing eating moments with wrist-mounted inertial sensing. UbiComp '15 September 7-11, 2015 Osaka Japan.	Finalize data set, provide link to class. Demo
	3. Rahman, Czerwinksi, Gilad-Bachrach, & Johns (2016). Predicting "About-to-Eat" Moments for Just-in-Time Eating Intervention. <i>Digital Health Conference Paper</i> .	statistical analyses.
	4. Cole et al. (2017). Detecting smoking events using accelerometer data from smartwatch technology: Validation study. <i>JMIR mHealth and uHealth</i> , 5(12), e189.	
Feb. 11 #6	Group project presentations (max. 6 groups; max. 20 minutes each). Group project due on February 20th end of day (11:59pm).	Peer feedback form for group presentations completed online.
Feb. 18	Family Day/Reading Week (no class)	
	Using social media to make inferences about mental health, part 1:	Reading Presentation & Question Submission
	1. Marino, Gini, Vieno, & Spada (2018). The associations between problematic Facebook use, psychological distress and well-being among adolescents and young adults: A systematic review and meta-analysis. <i>Journal of Affective Disorders</i> , 226, 274-281.	Demo on analyzing your own Facebook/Instagram data.
Feb. 25 #7	2. Al-Mosaiwi & Johnstone (2018). In an absolute state: Elevated use of absolutist words is a marker specific to anxiety, depression, and suicidal ideation. <i>Clin Psychol Sci, 6,</i> 529-542.	Introduction to individual project. Sign up list. Search
	3. Reece & Danforth (2017). Instagram photos reveal predictive markers of depression. <i>EPJ Data Science, 6,</i> e15.	strategies for literature review and outline of the project.
	4. McClellan et al. (2017). Using social media to monitor mental health discussions - evidence from Twitter. <i>Journal of the American Medical Informatics Association</i> , 24(3), 2017, 496–502.	p. 93000
Mar.	Using social media to make inferences about mental health, part 2:	Reading Presentation & Question Submission

#8	1. Holland & Tiggemann (2017). "Strong beats skinny every time": Disordered eating and compulsive exercise in women who post fitspiration on Instagram. <i>International Journal of Eating Disorders</i> , 50, 76-79.	Have at least 3 reflections finished by Mar. 4 th EOD.
	 Twenge, Joiner, Rogers & Martin (2018). Increases in depressive symptoms, suicide-related outcomes, and suicide rates among US adolescents after 2010 and links to increased new media screen time. Clinical Psychological Science, 6, 3-17. De Choudhury, Gamon, Counts, & Horvitz (2013). Predicting depression via social media. Proceedings from the 7th International AAAI Conference on Weblogs and Social Media. 	Midterm course feedback completed online.
	4. De Choudhury et al. (2016). Discovering shifts to suicidal ideation from mental health content in social media. <i>CHI 2016 Conference Paper, May 07-12, 2016, San Jose, CA</i> .	
Mar. 11 #9	Guest Speakers day Demos of different web- and app-based tools (Beacon, Baycrest, CAMH, etc.).	Question submissions by students (voluntary)
	Designing interventions for mobile delivery, part 1: 1. Stolz et al. (2018). A mobile app for social anxiety disorder: A three-arm randomized controlled trial comparing mobile and PC-based guided self-help interventions. <i>Journal of consulting and clinical psychology</i> , 86(6), 493.	Reading Presentation & Question Submission Have all 4 reflections finished by Mar. 18th EOD.
Mar. 18 #10	 Hébert et al. (2018). An ecological momentary intervention for smoking cessation: The associations of just-in-time, tailored messages with lapse risk factors. <i>Addictive Behaviors</i>, 78, 30-35. Werner-Seidler et al. (2017). Smartphone app for adolescents with sleep disturbance: Development of the sleep ninja. <i>JMIR Mental Health</i>, 4, e28. 	
	4. Franklin et al. (2016). A brief mobile app reduces nonsuicidal and suicidal self-injury: Evidence from three randomized controlled trials. <i>Journal of Consulting and Clinical Psychology, 84</i> , 6, 544-557.	
Mar. 25 #11	Designing interventions for mobile delivery, part 2: 1. Mohr et al. (2017). IntelliCare: An eclectic, skills-based app suite for the treatment of depression and anxiety. <i>JMIR</i> , 19(1).	Reading Presentation & Question Submission Individual Project
	2. Schroeder et al. (2018). Pocket skills: A conversational mobile web app to support dialectical behavior therapy. <i>In Proceedings of the 2018 CHI Conference on Human Factors in Computing Systems</i> (p. 398). 2018 ACM Conference.	Worksheets due by class. Peer feedback forms for worksheets completed online during class.
	 Pulantara, Parmanto, & Germain (2018). Development of a just-in-time adaptive mHealth investigation for insomnia: Usability study. <i>JMIR Human Factors</i>, 5(2), e21. Watanabe et al. (2017). Pokémon GO and psychological distress, physical complaints, and work performance among adult workers: A retrospective cohort study. <i>Scientific Reports</i>, 7, e10758. 	omme during cluss.
Apr. 1 #12	Final thoughts and reflection on the course. Individual project consultations. Individual projects due April 5th, end of day (11:59pm).	Course Evaluations

Other interesting articles that didn't make the cut, but you might find interesting:

Costa, Adams, Jung, Guimbetiere, & Choudhury (2016). EmotionCheck: Leveraging bodily signals and false feedback to regulate our emotions. *In Proceedings of the 2016 ACM International Joint Conference on Pervasive and Ubiquitous Computing.*

Hao et al. (2017). StressHacker: Towards Practical Stress Monitoring in the Wild with Smartwatches. *In AMIA Annual Symposium Proceedings (Vol. 2017, p. 830). American Medical Informatics Association.*

Boukhechba, M., Chow, P., Fua, K., Teachman, B. A., & Barnes, L. E. (2018). Predicting Social Anxiety from Global Positioning System Traces of College Students: Feasibility Study. *JMIR mental health*, *5*(3).

Mantani et al. (2017). Smartphone cognitive behavioral therapy as an adjunct to pharmacotherapy for refractory depression: randomized controlled trial. *JMIR*, 19(11).

COURSE POLICIES AND RESOURCES:

Note on Course Communication: Course announcements will be made through Quercus. Students are responsible for monitoring the course website regularly for important announcements and updates. Class emails will also be sent through Quercus; please make sure your listed email address is correct. Students may also ask questions on the discussion board on the course website. I encourage other students to provide potential answers or comments.

Diversity, Respect, and Confidentiality: During the course of the semester, students and instructors may present differing opinions that involve disclosure of information. All students will treat each other with respect regardless of opinions or personal feelings (note: disagreements are allowed, as long as they are voiced in a way that shows appreciation for others' viewpoints and experiences). Diversity is not limited to race, ethnicity and culture, but also includes regionalism, religious, economic, political, educational, and sexual orientation, among other differences.

Missed Term Work due to Medical Illness or Other Emergency: All students citing a documented reason for missed term work must submit their request for accommodations within three (3) business days of the deadline for the missed work.

Students must submit **BOTH** of the following:

- (1.) A completed Request for Missed Term Work Accommodations form (http://uoft.me/PSY-MTW), and
- (2.) **Appropriate documentation** to verify your illness or emergency, as described below.

Appropriate documentation:

For missed **ASSIGNMENTS** due to **ILLNESS**:

• Submit the Request for Missed Term Work Accommodations form (http://uoft.me/PSY-MTW), along with a hardcopy of the Self-Declaration of Student Illness Form (uoft.me/PSY-self-declare-form).

For missed term tests or assignments in **OTHER CIRCUMSTANCES**:

Submit the Request for Missed Term Work Accommodations form (http://uoft.me/PSY-MTW), along with:

- In the case of a death of a family member or friend, please provide a copy of a death certificate.
- In the case of a **disability-related concern**, if your desired accommodation is within the scope of your Accommodation Letter, please attach a copy of your letter. If your desired accommodation is outside the scope of your Accommodation Letter (ex. if your letter says "extensions of up to 7 days" but you need more time than that) you will need to meet with your consultant at AccessAbility Services and have them email Keely Hicks (keely.hicks@utoronto.ca) detailing the accommodations required.
- For U of T Varsity athletic commitments, an email from your coach or varsity administrator should be sent directly to Keely Hicks (keely.hicks@utoronto.ca) well in advance of the missed work, detailing the dates and nature of the commitment.
- For religious accommodations, please email (keely.hicks@utoronto.ca) well in advance of the missed work.

Documents covering the following situations are NOT acceptable: medical prescriptions, personal travel, weddings/personal/work commitments.

Procedure:

Submit your (1.) <u>request form</u> and (2.) <u>medical/self-declaration/other documents in person <u>WITHIN 3 BUSINESS DAYS</u> of the missed term test or assignment.</u>

Submit to: Keely Hicks, Room SW420B, Monday – Friday, 9 AM – 4 PM

Exceptions to the documentation deadline will only be made under exceptional circumstances. If you are unable to meet this deadline, you must email Keely Hicks (keely.hicks@utoronto.ca) within the three business day window to explain when you will be able to bring your documents in person. Attach scans of your documentation.

Within approximately one week, you will receive an email response from your instructor detailing the accommodations to be made (if any). You are responsible for checking your official U of T email and Quercus course announcements daily, as accommodations may be time-critical.

Completion of this form does NOT guarantee that accommodations will be made. The course instructor reserves the right to decide what accommodations (if any) will be made. Failure to adhere to any aspect of this policy may result in a denial of your request for accommodation.

Instructors cannot accept term work after April 12, 2019. Beyond this date, you would need to file a petition with the Registrar's Office to have your term work accepted (https://www.utsc.utoronto.ca/registrar/term-work).

Note that this policy applies only to missed assignments and term tests.

Accessibility Needs: Students with diverse learning styles and needs are welcome in this course. In particular, if you have a disability/health consideration that may require accommodations, please feel free to approach me and/or Accessibility Services at (416) 287-7560; http://www.utsc.utoronto.ca/~ability/. We will work together to ensure you can achieve your learning goals in this course. Enquiries will remain confidential.

Writing: As a student here at the University of Toronto, you are expected to write well. The university provides its students with a number of resources to help them achieve this. For more information on campus writing centres and writing courses, please visit: https://www.utsc.utoronto.ca/twc/writing-support

Academic Integrity and Plagiarism: Academic integrity is essential to the pursuit of learning and scholarship in a university, and to ensuring that a degree from the University of Toronto is a strong signal of each student's individual academic achievement. As a result, the University treats cases of cheating and plagiarism very seriously. The University of Toronto's Code of Behaviour on Academic Matters (http://www.governingcouncil.utoronto.ca/policies/behaveac.htm) outlines the behaviours that constitute academic dishonesty and the processes for addressing academic offences. These include but are not limited to: using or possessing unauthorized aids; looking at someone else's answers during an exam or test; misrepresenting your identity; falsifying documents or grades; falsifying or altering any documentation required by the University (e.g., doctor's notes); obtaining or providing unauthorized assistance on any assignment.

All suspected cases of academic dishonesty will be investigated following procedures outlined in the Code of Behaviour on Academic Matters. If you have questions or concerns about what constitutes appropriate academic behaviour or appropriate research and citation methods, you are expected to seek out additional information on academic integrity from your instructor or from other institutional resources (www.utoronto.ca/academicintegrity).

Copyright in Instructional Settings: If a student wishes to tape-record, photograph, video-record lectures, this is allowed for the private use by students and not for the sake of distribution or sale of these mediums, which is not permitted through the instructional copyright policy. Reproducing lectures, course notes/slides, or other similar materials provided by instructors, is also not permitted for the intention of distribution or sale of materials for this course. This includes posting lecture slides to Facebook or other social media websites.

Other Resources:

Campus Life and Student Resources (https://www.utsc.utoronto.ca/currentstudents)

Academic Support at UTSC (https://www.utsc.utoronto.ca/currentstudents/academic-support)

Health and Wellness Centre, Personal Counselling (https://www.utsc.utoronto.ca/hwc/health-wellness-centre)