IDS 2935 (section 2SB1): Global patterns of sexually transmitted infections

Instructor: Dr. Gabriela Hamerlinck

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Office: Geography 3 Office hours*:	122 Monday 3:00 pm – 4:00 pm Tuesday 11:00 am – 1:00 pm Wednesday 1:00 pm – 4:00 pm Or by appointment (please email to schedule)
Class meetings: Meeting location:	Tues Period 4 and Thurs Period 4-5 Tuesday 10:40 am – 11:30 am Anderson Hall 0019 Thursday 10:40 am – 12:35 pm Weimer Hall 1076

Course Description

This is a 3 credit-hour course focused on the geography of sexually transmitted infections (STIs). The course will begin with an overview on the types of bacteria and viruses transmitted sexually and discuss the geographic patterns of these organisms. Many bacterial STIs can be treated with antimicrobial drugs, though some bacteria are becoming drug resistant. Viral STIs cannot be treated with antimicrobials, although a human papilloma virus (HPV) vaccine is now available. There are discrete geographic patterns to these sexually transmitted pathogens. Often, STIs are heavily stigmatized, and because sexual behavior is involved, often misunderstood by the public. Additionally, culture plays a major role in STI control, prevention, and transmission. Groups such as the Gates Foundation have initiated global challenges to design new condoms to promote wider use worldwide, because many cultures don't use condoms. These behavioral decisions are influenced by culture and religion, and STI reduction cannot be achieved without an understanding of these culture/behavior interactions. This course will examine several important bacterial and viral STIs and their control strategies and how culture impacts control or prevention strategies. Sexual behavior, culture, and religion are complex topics and this course aims to introduce these topics through the lens of medical geography and examine how these interactions lead to changing geographic patterns of STIs around the world.

In this course, students will be expected to (course objectives):

- 1) Define sexually transmitted infections and understand what pathogens can be transmitted during sex
- 2) Compare and contrast bacterial and viral STIs and how their biology affects control strategies
- 3) Understand the role of personal behavior and regional culture/religion in preventing or promoting STI persistence

- 4) Describe how stigmatism at the national, regional, or local level can affect STI reporting and future intervention
- 5) Discuss the role of education in STI prevention
- 6) Critically examine how STI outbreaks lead to major epidemics, such as HIV
- 7) Examine how pathogens such as Zika and Ebola may become STIs and how prevention differs from other STIs
- 8) Think critically about STIs in culture and public health

What are the Objectives of Quest 2 (Q2)? Grounded in the modes of inquiry and analysis characteristic of the social and/or biophysical sciences, Quest 2 courses invite students to address pressing questions facing human society and the planet—questions that outstrip the boundaries of any one discipline and that represent the kind of open-ended, complex issues they will face as critical, creative, and thoughtful adults navigating a complex and interconnected world.

What are the Objectives of Gen Ed Biological Sciences (B) Classes? Biological science courses provide instruction in the basic concepts, theories and terms of the scientific method in the context of the life sciences. Courses focus on major scientific developments and their impacts on society, science and the environment, and the relevant processes that govern biological systems. Students will formulate empirically-testable hypotheses derived from the study of living things, apply logical reasoning skills through scientific criticism and argument, and apply techniques of discovery and critical thinking to evaluate outcomes of experiments.

What are the Objectives of Gen Ed International (N) Classes? The N designation is always used in conjunction with another program area. International courses promote the development of students' global and intercultural awareness. Students examine the cultural, economic, geographic, historical, political, and/or social experiences and processes that characterize the contemporary world, and thereby comprehend the trends, challenges, and opportunities that affect communities around the world. Students analyze and reflect on the ways in which cultural, economic, political, and/or social systems and beliefs mediate their own and other people's understanding of an increasingly connected world.

THESE QUEST AND SUBJECT AREA OBJECTIVES WILL BE ACCOMPLISHED THROUGH:

• Exposing students to global concepts linking society, culture, behavior, biology through studying sexually transmitted infections – throughout the course, students will explore the geographic and cultural context of sexually transmitted infections.

• Evaluating and critiquing personal beliefs and behaviors, current challenges of sexually transmitted infections, and potential scientific and societal solutions for reducing and preventing sexually transmitted infections.

• Enhancing critical communication skills by presenting project results via multiple modalities, including written reports, poster presentations, student-led activities, and group seminar-style presentations.

AT THE END OF THIS COURSE, STUDENTS WILL BE ASSESSED ON Q2, B, AND N LEARNING OUTCOMES IN FOUR AREAS: CONTENT, CRITICAL THINKING, COMMUNICATION, AND CONNECTION

1) CONTENT SLOS:

Gen Ed B: Students demonstrate competence in the terminology, concepts, methodologies and theories used within the subject areas

Gen Ed N: Identify, describe, and explain the historical, cultural, economic, political, and/or social experiences and processes that characterize the contemporary world.

Quest 2: Identify, describe, and explain the cross-disciplinary dimensions of a pressing societal issue or challenge as represented by the social sciences and/or biophysical sciences incorporated into the course.

This Course:

• AT THE END OF THE COURSE, STUDENTS WILL BE ABLE TO... EXPLAIN fundamental concepts relating to the scientific method and experimentation, patterns of sexually transmitted infections, and societal perceptions of sexually transmitted infections and how to prevent and reduce.

• ACHIEVEMENT OF THIS LEARNING OUTCOME WILL BE ASSESSED THROUGH: four multiple choice and short answer quizzes (fact checks), discussion and review of primary literature and case-studies pertaining to core course themes, and a field research experience essay.

2) CRITICAL THINKING SLOS:

Gen Ed B: Students carefully and logically analyze information from multiple perspectives and develop reasoned solutions to problems within the subject area.

Gen Ed N: Analyze and reflect on the ways in which cultural, economic, political, and/or social systems and beliefs mediate understandings of an increasingly connected contemporary world. This course will explore these ideas by examining the pathogens that cause sexually transmitted infections and the cultural/behavioral practices that can assist or setback prevention, and the economic and political systems where these prevention methods are employed. Quest 2: Critically analyze quantitative or qualitative data appropriate for informing an approach, policy, or praxis that addresses some dimension of an important societal issue or challenge.

AT THE END OF THE COURSE, STUDENTS WILL BE ABLE TO... ANALYZE AND INTERPRET the intersection of society's perception of sexually transmitted infections, including what pathogens (bacteria and viruses) cause them, access to prevention (methods and cultural practices) and how the intersection of culture and biology can be studied through an examination of STIs; SYNTHESIZE course lectures and activities to develop a understanding of what is required to prevent and reduce the global burden of sexually transmitted infections and the political and social means required to reduce STI stigma.

ACHIEVEMENT OF THESE LEARNING OUTCOMES WILL BE ASSESSED THROUGH: discussion, a position piece on STI transmission and prevention, and group discussions on STI biology and culture.

3) COMMUNICATION SLOS:

Gen Ed B: Students clearly and effectively communicate knowledge, ideas, and reasoning in written or oral forms appropriate to the subject area. Specifically, communicate scientific knowledge, thoughts, and reasoning clearly and effectively as related to sexually transmitted infections, differentiating between bacterial and viral infections and implications for control and prevention. Gen Ed N: Communicate knowledge, thoughts, and reasoning clearly and effectively as they relate to the biology and cultural practices related to sexually transmitted infections globally. Quest 2: Develop and present, in terms accessible to an educated public, clear and effective responses to proposed approaches, policies, or practices that address important societal issues or challenges. In this course these concepts will be applied to sexually transmitted infections and their prevention.

AT THE END OF THE COURSE, STUDENTS WILL BE ABLE TO.... DEVELOP AND PRESENT novel solutions for real-world problems; EXPLAIN key scientific findings in written, oral, and visual formats

ACHIEVEMENT OF THESE LEARNING OUTCOMES WILL BE ASSESSED THROUGH: a written report as position piece, an oral presentation or group discussions, and course exams.

4) Connection SLOs:

Gen Ed B: n/a Gen Ed N: n/a Quest 2: Connect course content with critical reflection on their intellectual, personal, and professional development at UF and beyond

AT THE END OF THE COURSE, STUDENTS WILL BE ABLE TO... ARTICULATE AND CRITIQUE their own personal beliefs and behaviors related to sexually transmitted infections and their prevention • ACHIEVEMENT OF THESE LEARNING OUTCOMES WILL BE ASSESSED THROUGH: class discussion, group projects (in-class) and exams

Prerequisite

None.

Student Evaluation

This course will use a variety of methods to evaluate student performance. For all graded work in the course, *rubrics are provided ahead of grading through the online system* (currently Canvas) – rubrics divide up assignments into specific points for specific tasks.

- <u>Quizzes</u> on course content knowledge (25 pts each x 7 = 150 pts; can drop one quiz score; assigned via Canvas)
- <u>Mid-term exam</u> on course content mixed multiple choice, short answer, fill in the blank (100 pts).
- In-class activities and homework students will receive reading material or concepts ahead of class or at the start of class and work in small groups or independently to review and discuss. Students will be asked to write about or orally answer critical thinking questions relating course skills to activities. For example, students may discuss the early days of the HIV epidemic and compare it to the ongoing Ebola outbreaks, where sexual transmission has been confirmed. Students will relate knowledge from lectures and readings on viral STIs and think about how HIV and Ebola differ and then how the future of Ebola may manifest if sexual transmission becomes a larger part of transmission. Points are awarded for attending and directly participating in the activity (13 points), preparedness showing proof of knowledge of materials assigned ahead of class (7 points), and written or oral presenting (15 points). Students will be graded on each activity, but the goal of each activity is to learn through student led interactions. As part of this, each activity will have a rubric. Rubrics will be online in Canvas and students will know which rubric was assigned and how points were assigned. (35 points each x 12 = 245 pts)
- <u>Writing assignment</u> Position piece on STI control relating culture, biology, geography, and prevention. Students will draft a short and concise essay describing an STI and relating transmission and prevention to biology and culture, identifying opportunities to improve education or physical control (e.g. condom use) to reduce STI incidence in the future. The points for this project are divided between:
 - Selecting a topic (5)
 - Knowledge and synthesizing materials from primary sources (25), identifying the problem and defining strategies to improve/reduce STI rates (25),
 - Linking culture and biology (10 points)
 - Proper formatting (20).
 - The remaining points are related to self-reflection (20). Specifically, students need to demonstrate the ability to reflect their own cultural experiences to those identified within the position pieces.

The goal of self-reflection in this context is to identify similarities and differences in culture or ecology relative to student experience. This is designed to have students compare local culture or biology to the global context. The paper will be framed as an essay with sub-headings. All students will submit a final essay. Students will identify their topic by *week 6 of the semester*, students can request input or revision from *weeks 8 – 14 of the semester*. The instructor will provide feedback (track changes or comments until 1 week prior to submission to increase iterations in drafts. Students should prepare a paper of approximately 2500 words or narrative to complete the goals. Final papers will be graded, iterations with the instructor ahead of last week before due will be evaluated, but not assigned points – this process will indicate if students are on track for high marks. (105 points)

- <u>Oral presentation/mixed media</u> Students will be asked to develop a digital poster (presented on digital monitors and/or Canvas) or mixed media (YouTube-style video) outlining the challenges and opportunities for solutions from the final paper. Students will be given the opportunity to choose a media type and format their findings from the written essay. Posters should be formatted as a visual display that captures a non-academic audience and portrays the cultures or societal challenges and presents methods for tackling the STI with prevention or education. Regardless of media format, students will be graded on
 - Knowledge of the STI and control issues 20 pts,
 - Captivating format (visual poster or short video) 10 points,
 - Clear explanation of the control means (education, vaccine, or prophylaxis)
 5 points,
 - Clear presentation for any audience 5 points.
 - The remaining points (10) are for linking the context of the presentation from local to global.

As the course is designed with an international or global designation, students are asked to place their experiences with culture and biology into a global context within the presentation. Students should be able to demonstrate knowledge of how social, cultural, and ecological differences around the world impact disease transmission and prevention/control. (50 pts)

Total points in class = 650

Grading Policy

This course will employ the A – E grading scale, with $95\geq A$, 90-94 A-, 86-89 B+, 83-85 B, 80-82 B-, 76-79 C+, 73-75 C, 72-70 C-, 68-69 D+, 63-65 D, 59-62 D-, <59 E. https://catalog.ufl.edu/UGRD/academic-regulations/grades-grading-policies/

Text

This course has a reading list updated regularly and PDFs of all readings are provided ahead of time by the instructor either on Canvas or in class.

Class attendance, make-up exams, and late work

Requirements for class attendance and make-up exams, assignments, and other work in this course are consistent with university policies that can be found at: <u>https://catalog.ufl.edu/ugrad/current/regulations/info/attendance.aspx</u>

Students with disabilities

Students requesting classroom accommodation must first register with the Dean of Students Office. The Dean of Students Office will provide documentation to the student who must then provide this documentation to the Instructor when requesting accommodation.

For more information visit: <u>http://www.dso.ufl.edu/drc/</u>

UF grading policies

Please see the UF Registrar's grading policies for current guidelines not discussed in class.

http://www.registrar.ufl.edu/catalog/policies/regulationgrades.html

Honor Code

Students are expected to abide by the UF honor code and ethical conduct, listed on the following website: <u>http://www.dso.ufl.edu/stg/</u>

Health and Wellness and Academic Resources

Please be aware that the University Counseling Center (392-1575), the Student Health Care Center (392-1161) and Student Mental Health (392-1171) can assist students as they work through personal, academic and social issues. Please take care of your health and watch for flu symptoms. Provide advance notice and obtain documentation for excused absences where possible.

U Matter, We Care

Your well-being is important to the University of Florida. The U Matter, We Care initiative is committed to creating a culture of care on our campus by encouraging members of our community to look out for one another and to reach out for help if a member of our community is in need. If you or a friend is in distress, please contact umatter@ufl.edu so that the U Matter, We Care Team can reach out to the student in distress. A nighttime and weekend crisis counselor is available by phone at 352-392-1575. The U Matter, We Care Team can help connect students to the many other helping resources available including, but not limited to, Victim Advocates, Housing staff, and the Counseling and Wellness Center. Please remember that asking for help is a sign of strength. In case of emergency, call 911.

Student Health Care Center: Call 352-392-1161 for 24/7 information to help you find the care you need, or <u>visit the Student Health Care Center website</u>.

University Police Department: <u>Visit UF Police Department website</u> or call 352-392-1111 (or 9-1-1 for emergencies).

UF Health Shands Emergency Room / Trauma Center: For immediate medical care call 352-733-0111 or go to the emergency room at 1515 SW Archer Road,

Gainesville, FL 32608; <u>Visit the UF Health Emergency Room and Trauma Center</u> website.

E-learning technical support: Contact the <u>UF Computing Help Desk</u> at 352-392-4357 or via e-mail at <u>helpdesk@ufl.edu</u>.

<u>Career Connections Center</u>: Reitz Union Suite 1300, 352-392-1601. Career assistance and counseling services.

Library Support: Various ways to receive assistance with respect to using the libraries or finding resources.

Teaching Center: Broward Hall, 352-392-2010 or to make an appointment 352-392-6420. General study skills and tutoring.

Writing Studio: 2215 Turlington Hall, 352-846-1138. Help brainstorming, formatting, and writing papers.

Student Complaints On-Campus: <u>Visit the Student Honor Code and</u> <u>Student Conduct Code webpage for more information</u>.

On-Line Students Complaints: <u>View the Distance Learning Student</u> <u>Complaint Process</u>.

Course evaluation

Students are expected to provide professional and respectful feedback on the quality of instruction in this course by completing course evaluations online via GatorEvals. Guidance on how to give feedback in a professional and respectful manner is available at https://gatorevals.aa.ufl.edu/students/ Students will be notified when the evaluation period opens, and can complete evaluations through the email they receive from GatorEvals, in their Canvas course menu under GatorEvals, or via https://ufl.bluera.com/ufl/Summaries of course evaluation results are available to students at https://gatorevals.aa.ufl.edu/publicresults/.

Weekly schedule, readings, and due dates

The weekly schedule provides due dates, exam dates, quiz dates, case study dates, and readings. Please note, readings includes actual readings, such as distilled information from public health resources, such as the US CDC to provide students concise information on each sexually transmitted disease we will study or discuss, and several peer reviewed papers (those that have rigorous review and editing process ahead of publication from profession equivalents). Additionally, students are provided with and asked to watch several videos ahead of or after lectures. These videos, such as Ted Talks or YouTube discussions are meant to provide context and content for discussion. As the course is international. these materials provide comparisons of different cultures. biological/ecological settings, and religious practices that may all impact sexually transmitted infection distribution and control. Readings and media are provided as links within the syllabus weekly schedule and via Canvas modules specific to the week and topic. Students should plan to read at least one public health source per class and one paper per week. When multiple papers are available, the instructor will put these into context for students. The module will identify supplemental readings from primary readings.

The course is designed to introduce STIs by type, bacterial or virus first, to organize the course by STIs with treatment (bacterial) and prevention (viruses). Once students understand these differences, we will discuss different individual diseases in the early weeks and move into comparisons in latter weeks. As we discuss diseases, we will continually return to how global patterns are formed by local patterns of context, biology, culture, and how these influence transmission and control. This will setup a dynamic where students can frame global patterns to their own experience. Students are expected to engage in class, as evident by the point breakdown. To do this, students should plan to read or watch media ahead of class or after, as appropriate.

WEEK	Tuesday	Tuesday Reading and videos	Thursday	Thursday Reading and videos
1	Introduction to medical geography and STIs	None	Bacterial STIs	Explore the CDC STI/STD webpages (https://www.cdc.gov/std/) Explore the WHO STI/STD webpages (https://www.who.int/news-room/fact- sheets/detail/sexually-transmitted-infections- (stis))
2	Bacterial STI control (antibiotics and condoms) (Quiz 1)	Read Mayaud and Mabey 2004 Read Tien et al. 2019	Gonorrhea – then and now and what next – drug resistance (Activity 1)	Explore the CDC gonococcal isolate surveillance project webpage <u>https://www.cdc.gov/std/gisp/default.htm</u>
3	Viral STIs	Read Gottlieb et al. 2016	Viral STI control (condoms and vaccines) (Quiz 2)	Explore <u>https://www.cdc.gov/condomeffectiveness/index.</u> <u>html</u> (read about male and female condoms) Read Chaturvedi et al. 2018
4	Chlamydia – changings patterns of a common STI (Activity 2)	Read Menon-Johansson et al. 2006	HIV: history of a global epidemic	Read Thrasher 2019 Read Ur-Rehman & Abi-Habib 2019 Watch Dr. Hans Rosling's 2009 Ted Talk (10 mins): https://www.gapminder.org/videos/ted-talk- 2009-hans-rosling-hiv-facts/
5	HIV country-by- country – It is not an African problem, but a problem in Africa	Read Madiba & Nwgenya 2016.	Movie day! "And The Band Played On" (140 mins) (Homework 1)	
6	Patterns of HIV spread	Read Doolittle et al. 2014 Read Medved Kendrick 2017	HIV – Culture, religion, and HIV: how do you stop and epidemic (Activity 3)	Read Bwayo et al. 1994 Read Ramjee and Gouws 2002 Explore CDC webpage on HIV in sex workers <u>https://www.cdc.gov/hiv/group/sexworkers.html</u>
7	HPV: the first viral STI with a working vaccine (Quiz 3)	Explore CDC HPV Fact Sheet: https://www.cdc.gov/std/hpv/def ault.htm Read Bodson et al. 2017	Culture, religion, and cancer: STI stigma versus cancer prevention (Activity 4)	Read Walters 2019 Read Grandahl et al. 2018

8	Wildlife STIs (Animals get them too) (Quiz 4)	Read Bossart et al. 2008 Read Naucke & Lorentz 2012 Read Arantes et al. 2009	Treating and Tracking Animal STIs (Activity 5)	None
9	EXAM REVIEW	During Class, we will review materials covered on Exam 1 and answer questions	EXAM	None
10	STIs in the Media	Read Cooper Robbins et al. 2012 Read Quintero Johnson et al. 2011	Fair representation of STI facts? (Activity 6)	None
11	Culture and condoms: porn star outbreaks and control measures (Quiz 5)	Watch (9 mins) https://www.youtube.com/watch ?v=3YMKEocwqXo Watch (4 mins) https://www.ted.com/talks/amy I ockwood selling condoms in the congo#t-233140 Read Goldstein et al. 2011	Sexual education as prevention (Activity 7)	Read Helweg-Larsen & Collins 1994 Explore Gates Foundation Grand Challenge <u>https://gcgh.grandchallenges.org/challenge/devel</u> <u>op-next-generation-condom-round-11</u> and <u>https://gcgh.grandchallenges.org/challenge/devel</u> <u>op-next-generation-condom-round-12</u> (look at the awarded grants)
12	Guest Speaker (Homework 2)		No class - Holiday	
13	Social media as a tool for dissemination (Position Piece due)	Read Habel et al. 2015 Read Pedrana et al. 2014	How to talk about STIs without Twitter trolls (Activity 8)	Watch (8 mins) https://www.youtube.com/watch?v=H3n8K9b37K <u>C</u>
14	Future of Ebola as an STI? (Quiz 6)	Explore CDC Bushmeat webpage https://www.cdc.gov/importation /bushmeat.html Explore CDC Ebola webpage https://www.cdc.gov/vhf/ebola/a bout.html Read Mate et al. 2015 Watch (8 mins) https://youtu.be/6Af6b_wyiwl	No Class – Thanksgiving break	None
15	Evaluating the potential risk and disease burden of	Watch (14 mins) https://youtu.be/MG1A_s3wH6s	Zika – Mosquito control and condoms? (Quiz 7)	Read Hills et al. 2016 Read Oster et al. 2016

16	Evaluating the potential risk and disease burden of Zika as a STI	Watch <u>https://pbswisconsin.org/watch/u</u> <u>niversity-place/university-place-</u> aids-zika/ (55 mins)	No Class – Reading Days	
	Ebola as a STI (Multimedia presentation due) (Activity 9)			

Reading List (subject to change)

All materials will be provided on Canvas.

Week 1	Required	Explore the CDC STI/STD webpages (<u>https://www.cdc.gov/std/</u>) Explore the WHO STI/STD webpages (<u>https://www.who.int/news-room/fact-sheets/detail/sexually-transmitted-infections-(stis)</u>)
Week 2	Required	Read Mayaud, P., & Mabey, D. (2004). Approaches to the control of sexually transmitted infections in developing countries: old problems and modern challenges. Sexually Transmitted Infections. 80:174-182. Read Tien, V., Punjabi, C., Holubar, M.K. (2020). Antimicrobial resistance in sexually transmitted infections. Journal of Travel Medicine, 27:taz101, https://doi.org/10.1093/jtm/taz101 Explore CDC Gonococcal Isolate Surveillance Project https://www.cdc.gov/std/gisp/default.htm
	Optional	Read Mabey, D. (2010). Epidemiology of STIs: worldwide. <i>Medicine</i> 38: 216-219.
Week 3	Required	 Read Gottlieb, S.L., Deal, C.D., Giersing, B., Rees, H., Bolan, G., Johnston, C., & Moorthy, V.S. (2016). The global roadmap for advancing development of vaccines against sexually transmitted infections: update and next steps. <i>Vaccine</i>, <i>34</i>(26): 2939-2947. Explore https://www.cdc.gov/condomeffectiveness/index.html (read about male and female condoms) Read Chaturvedi, A.K., Graubard, B.I., Broutian, T., Pickard, R.K., Tong, Z.Y., Xiao, W., & Gillison, M.L. (2018). Effect of prophylactic human papillomavirus (HPV) vaccination on oral HPV infections among young adults in the United States. <i>Journal of Clinical Oncology</i>, <i>36</i>(3): 262.
	Optional	Read Gottlieb, S.L., Low, N., Newman, L.M., Bolan, G., Kamb, M., & Broutet, N. (2014). Toward global prevention of sexually transmitted infections (STIs): the need for STI vaccines. <i>Vaccine</i> , <i>32</i> (14): 1527-1535.
3	Required	Read Menon-Johansson A.S., McNaught, F., Mandalia S., & Sullivan, A.K. (2006). Texting decreases the time to treatment for genital <i>Chlamydia trachomatis</i> infection. <i>Sexually Transmitted Infections</i> , 82: 49-51.

		Read Thresher S.W. (2010) 1111/ Is Coming to Durol America. The New York Times 27 (Vislad have
		Read Thrasher, S.W. (2019). H.I.V. Is Coming to Rural America. <i>The New York Times</i> , 27. (linked here:
		https://www.nytimes.com/2019/12/01/opinion/hiv-aids-rural-america.html)
		Read Ur-Rehman, Z., & Abi-Habib, M. (2019). Panic in Pakistani City After 900 Children Test Positive for H.I.V. <i>The New York Times</i> , 10.
		(linked here: https://www.nytimes.com/2019/10/26/world/asia/hiv-aids-pakistan-ratodero.html)
		Watch Dr. Hans Rosling of GapMinder.org present a 2009 Ted Talk that describes the HIV epidemic and walks the audience through data
		gathered from UNAIDS and the WHO. The clip is 10 minutes long and can be found here: https://www.gapminder.org/videos/ted-talk-
		2009-hans-rosling-hiv-facts/
	Optional	Read (fact sheet) <u>https://www.cdc.gov/std/chlamydia/default.htm</u>
	Required	Watch "And The Band Played On" (140 minutes; link to UF Library mp4 and transcript files provided on Canvas)
ы		Read Madiba, S. & Ngwenya, N. (2017) Cultural practices, gender inequality and inconsistent condom use increase vulnerability to HIV
a X		infection: narratives from married and cohabiting women in rural communities in Mpumalanga province, South Africa. Global Health
Week		Action, 10:sup2, DOI: 10.1080/16549716.2017.1341597
-	Optional	Read Fauk NK, Merry MS, Sigilipoe MA, Putra S, Mwanri L (2017). Culture, social networks and HIV vulnerability among men who have
		sex with men in Indonesia. PLoS ONE, 12(6): e0178736.
	Required	Read Doolittle, B.R., Justice, A.C. & Fiellin, D.A. (2014). Religion, Spirituality, and HIV Clinical Outcomes: A Systematic Review of the
		Literature. AIDS Behavior, 22: 1792–1801.
		Read Medved Kendrick, H. (2017) Are religion and spirituality barriers or facilitators to treatment for HIV: a systematic review of the
		literature. AIDS Care, 29:1, 1-13.
		Read Bwayo, J., Plummer, F., Omari, M., & Kreiss, J. (1994). Human Immunodeficiency Virus Infection in Long-Distance Truck Drivers in
		East Africa. Archives of Internal Medicine, 154(12):1391–1396.
Week 6		Read Ramjee, G., & Gouws, E. (2002). Prevalence of HIV among truck drivers visiting sex workers in KwaZulu-Natal, South Africa. Sexually
Vee		transmitted diseases, 29(1), 44-49.
>		Explore CDC webpage on HIV in sex workers https://www.cdc.gov/hiv/group/sexworkers.html
	Optional	Read Pan, S.W., Zhang, Z., Li, D., Carpiano, R.M., Schechter, M.T., Ruan, Y., & Spittal, P.M. (2016). Religion and HIV sexual risk among
	-	men who have sex with men in China. JAIDS Journal of Acquired Immune Deficiency Syndromes, 73(4), 463-474.
		Read Brower, A., Okwumabua, O., Massengill, C., Muenks, Q., Vanderloo, P., Duster, M., & Kurth, K. (2007). Investigation of the spread
		of Brucella canis via the US interstate dog trade. International Journal of Infectious Diseases, 11(5), 454-458.
	Required	Read Bodson, J., Wilson, A., Warner, E.L., Kepka, D. (2017). Religion and HPV vaccine-related awareness, knowledge, and receipt among
		insured women aged 18-26 in Utah. PLoS ONE, 12(8): e0183725.
		Read Walters, E. (2019). Texas almost mandated an HPV vaccine before politics got in the way. Now, the state has one of the country's
k 7		highest rates of cervical cancer. The Texas Tribune. (linked here: https://www.texastribune.org/2019/08/12/texas-low-rate-hpv-
Week		vaccination-keeping-cervical-cancer-rates-high/)
5		Read Grandahl, M., Chun Paek, S., Grisurapong, S., Sherer, P., Tyden, T., & Lundberg, P. (2018). Parents' knowledge, beliefs, and
		acceptance of the HPV vaccination in relation to their socio-demographics and religious beliefs: A cross-sectional study in Thailand. <i>PloS</i>
		ONE, 13(2), e0193054.
L		0/12, 13(2), 00133037.

	Optional	Read Liddon, N., Hood, J., Wynn, B.A., & Markowitz, L.E. (2010). Acceptability of human papillomavirus vaccine for males: a review of the			
		literature. Journal of Adolescent Health, 46(2), 113-123.			
		Read Fu, L.Y., Bonhomme, L.A., Cooper, S.C., Joseph, J.G., & Zimet, G.D. (2014). Educational interventions to increase HPV vaccination			
		acceptance: a systematic review. Vaccine, 32(17), 1901-1920.			
		Explore CDC HPV vaccine recommendations https://www.cdc.gov/mmwr/volumes/65/wr/mm6549a5.htm			
	Required	Read Bossart, G.D., Romano, T.A., Peden-Adams, M., Rice, C.D., Fair, P.A., Goldstein, J.D., & Reif, J.S. (2008). Hematological,			
		biochemical, and immunological findings in Atlantic bottlenose dolphins (tursiops truncatus) with orogenital papillomas. Aquatic			
8		Mammals, 34(2), 166-177.			
Week		Read Naucke, T.J., & Lorentz, S. (2012). First report of venereal and vertical transmission of canine leishmaniosis from naturally infected			
Š		dogs in Germany. Parasites & Vectors, 5, 67.			
		Read Arantes, T.P., Lopes, W.D.Z., Ferreira, R.M., Pieroni, J.S.P., Pinto, V.M., Sakamoto, C.A., & da Costa, A.J. (2009). Toxoplasma gondii:			
		Evidence for the transmission by semen in dogs. Experimental parasitology, 123(2), 190-194.			
Wee	Week 9: No readings (exam week)				
10	Required	Read Cooper Robbins, S.C., Pang, C., & Leask, J. (2012). Australian newspaper coverage of human papillomavirus vaccination, October			
к 1		2006–December 2009. Journal of health communication, 17(2), 149-159.			
Week		Read Quintero Johnson, J., Sionean, C., & Scott, A.M. (2011). Exploring the presentation of news information about the HPV vaccine: a			
5		content analysis of a representative sample of US newspaper articles. <i>Health communication</i> , 26(6), 491-501.			
	Required	Watch <u>https://www.youtube.com/watch?v=3YMKEocwqXo</u> (9 mins)			
		Watch https://www.ted.com/talks/amy_lockwood_selling_condoms_in_the_congo#t-233140 Ted Talk (4 mins)			
		Read Goldstein, B.Y., Steinberg, J K., Aynalem, G., & Kerndt, P.R. (2011). High chlamydia and gonorrhea incidence and reinfection among			
11		performers in the adult film industry. Sexually transmitted diseases, 38(7), 644-648.			
Week		Read Helweg-Larsen, M., & Collins, B.E. (1994). The UCLA multidimensional condom attitudes scale: documenting the complex			
Ňe		determinants of condom use in college students. <i>Health Psychology</i> , 13(3), 224.			
-		Explore Gates Foundation Grand Challenge https://gcgh.grandchallenges.org/challenge/develop-next-generation-condom-round-11 and			
		https://gcgh.grandchallenges.org/challenge/develop-next-generation-condom-round-12 (look at the awarded grants)			
	Optional	Read The County of Los Angeles Safer Sex In the Adult Film Industry Act ("Measure B")			
Wee	k 12: Guest s	peaker and holiday – no readings			

k 13	Required	Read Habel, M.A., Haderxhanaj, L., Hogben, M., Eastman-Mueller, H., Chesson, H., & Roberts, C.M. (2015). Does your college campus GYT? Evaluating the effect of a social marketing campaign designed to raise STI awareness and encourage testing. <i>Cases in public health communication and marketing</i> , <i>8</i> , 51.
Week		Read Pedrana, A.E., Hellard, M.E., Higgs, P., Asselin, J., Batrouney, C., & Stoovè, M. (2014). No drama: key elements to the success of an HIV/STI-prevention mass-media campaign. <i>Qualitative health research</i> , 24(5), 695-705.
		Watch https://www.youtube.com/watch?v=H3n8K9b37Kc Ted Talk (8 mins)
	Required	Explore CDC Bushmeat webpage https://www.cdc.gov/importation/bushmeat.html
ы		Read Mate, S.E., Kugelman, J.R., Nyenswah, T.G., Ladner, J.T., Wiley, M.R., Cordier-Lassalle, T., & Shinde, S.A. (2015). Molecular
& 1		evidence of sexual transmission of Ebola virus. New England Journal of Medicine, 373(25), 2448-2454.
14		Watch <u>https://youtu.be/6Af6b_wyiwl</u> Ted Talk (8 mins)
		Watch https://youtu.be/MG1A_s3wH6s Ted Talk (14_mins)
Weeks	Optional	Watch https://youtu.be/INV76YfqMdc Ebola genomes (4 mins)
5		Read Luo, D., Zheng, R., Wang, D., Zhang, X., Yin, Y., Wang, K., & Wang, W. (2019). Effect of sexual transmission on the West Africa Ebola outbreak in 2014: a mathematical modelling study. <i>Scientific reports</i> , 9(1), 1-11.
	Required	Read Hills, S.L., Russell, K., Hennessey, M., & Mead, P. (2016). Transmission of Zika Virus Through Sexual Contact with Travelers to
16		Areas of Ongoing Transmission — Continental United States, 2016. MMWR Morbidity and Mortality Weekly Report, 65: 215–216.
Week		Read Oster, A.M., Russell, K., Stryker, J.E., & Brooks, J.T. (2016). Update: Interim Guidance for Prevention of Sexual Transmission of
Ň		Zika Virus — United States, 2016. MMWR Morbidity and Mortality Weekly Report, 65: 323–325.
		Watch https://pbswisconsin.org/watch/university-place/university-place-aids-zika/ Public lecture (55 mins)