Course Title: SW 635: HIV/AIDS: Programs, Policies and Services

Fall 2001
Fridays 9-12
Room 2816 SSW
Class Number: #11069

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3780 SSW
734-763-5990
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Office Hours: By Appt. Only

Course Description:
This course will acquaint students with the basic facts about AIDS (acquired immunodeficiency syndrome), sensitize students to the multitude of public health, social policy and social service delivery issues that AIDS presents. Students will be sensitized to the special challenges AIDS presents for social work practice, offer students an opportunity to explore their own beliefs, values, and approaches to the issues raised by AIDS, and to enable students to gain facility in accessing and assessing the fast-appearing, voluminous materials appearing on the topic.

Five Course Projects:

<table>
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<tr>
<th>Project Description</th>
<th>Percent of Grade</th>
<th>Due Date</th>
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</table>
  - 5 pages, double spaced, excluding references, tables, and figures                | 5%               | Presentation and group discussion, October 12, 2001 |
| One 20-25 item on-line quiz (multiple choice)                                        | 10%              | October 19, 2001                |
| Discovery and Presentation of original and creative prevention or treatment program anywhere in the world  
  - Instructor approval (1-2 page or webpage) by October 5  
  - PowerPoint presentation (15 slides max)                                           | 10%              | November 9, 2001               |
| Construction of HIV/AIDS Geomapping Project  
  - presentation of pandemic plus contextual data, locations of care systems, etc (US state, county or region; any region in world)  
  - Instructor approval by October 12                                                | 40%              | Nov. 30, with Presentations 12/7 |
| Development of a Title IV quality assurance mechanism for state of Michigan, Region I | 35%              | Nov. 30, with Presentations 12/7 |
Format of papers

All papers must be typewritten and double-spaced using a 12 point font and one inch margins. Use APA for your papers, including proper headings and citations. All papers are graded anonymously. With each paper submission, include a title page without your name on it, and provide a separate duplicate title page with your name. Only after I have read and graded all the papers, will I determine which paper belongs to whom.

General Expectations for Written Work
In all written work that students will adhere to the following NASW editorial policy: In the interest of accurate and unbiased communication, the NASW publications program subscribe to a belief in the importance of avoiding language that might imply sexual, ethnic, or other kinds of discrimination, stereotyping, or bias. NASW is committed to the fair and equal treatment of individuals and groups, and material submitted should not promote stereotypic or discriminatory attitudes and assumptions about people. (Health and Social Work, 11:3, Summer 1986.)

Plagiarism – not referencing another’s words or ideas – is a violation of academic integrity and will be grounds for failure on an assignment. In addition, papers or journal entries which are completed for another course are not acceptable and will be assigned 0 points. Please refer to page 50 of your Student Guide to the Master’s in Social Work Degree Program 2000-2002 for further discussion of plagiarism.

All assignments are due only on the dates specified. Incomplete grades are assigned only through negotiation with me and that negotiation must occur before the paper’s due date. Unless an extension contract has been arranged between a student and me, any assignment that is not completed on the due dates will be assigned 0 points.

Grading
Each assignment will be given a letter grade. The criteria for each grade are as follows:

- **A** or **A-** Mastery of subject content, demonstration of critical analysis, creativity and/or complexity in completion of assignment. The difference between A and A- is based on the degree to which these skills are demonstrated.
- **B+** Mastery of subject content beyond expected competency, but has not demonstrated additional critical analysis, creativity or complexity in the completion of the assignment.
- **B** Mastery of subject content at level of expected competency – meets course expectations
- **B-** Less than adequate competency, but demonstrates student learning and potential for mastery of subject content.
- **C** or **C-** Demonstrates a minimal understanding of subject content. Significant areas needing improvement to meet course requirements.
- **E** Student has failed to demonstrate minimal understanding of subject content.

Both content and format will be considered in assigning grades. Though content is more heavily weighed in grade assignment, format, and presentation are also important. Failure to follow APA guidelines for referencing and for headings will result in a lower grade. For assistance with writing, you may go to the Writing Workshop, 1139 Angell Hall, (734) 764-0429.

Before you begin working on class assignments, please read the section in your Student guide to the master’s in Social Work Degree Program 2000-2001 titled Writing Term papers and Research papers at the University of Michigan by Professor Sherrie A. Kossoudji (pp. 54-67)

I suggest that you have someone who is unfamiliar with your subject read your paper before you turn it in. An outside reader can tell you if your writing is not clear, if you omitted a word or phrase, or if you used the wrong word. Spell checkers and grammar checkers are useful tools, but not as reliable as a human reader

Grading Scale:
The course is very challenging and demanding. Grading will be rigorous but fair. Grades are determined by academic performance, not effort. The grading scale is as follows:

\[
\begin{array}{|c|c|c|c|}
\hline
B - & = & 76-79 & C+ & = & 72-75 & C & = & 70-71 & < 70 & = & \text{not passing} \\
\hline
\end{array}
\]

I need to include here a word about grading. I understand that the assessments of your work are subjective in nature and I strive to reduce that subjectivity in two ways. First, as noted above all papers will be graded anonymously. Second, based on the assignment outline that you have received, I use a template within which I set my expectations for the assignment. I compare your submissions to that template, not to one another.

If you read my comments to you and believe that I have erred, please discuss your findings with me within one week of getting your assignment/paper back. It may be that you do not understand what I have told you, or that I have made a mistake. In either case, I am certain that the situation will be rectified; either you will better understand what I want you to know, or I will correct my error.

Texts:
- Recommended: Tarantolla and Mann (1996). AIDS in the world II.

2. Course Content:
Specifically, students will receive information on the history of national and international responses to sexually transmitted diseases, epidemiology of HIV infection and AIDS, HIV antibody testing and counseling, social policy implications of HIV infection and AIDS, treatment and prevention of HIV/AIDS. There will be a focus upon community responses and the psychological and sociological implications of working with the spectrum of persons infected and affected by HIV/AIDS.
3. **Course Objectives:**
This course will facilitate enhancement of practical knowledge, skills, abilities, and values in persons with HIV/AIDS spectrum disease and their significant others. Upon completing this course, students will be able to:

1. **Describe the historical and current incidence and prevalence of HIV/AIDS worldwide, with a focus upon the United States and particularly among African-Americans, Latinos, Native Americans and Asian Pacific Islanders. The course will also focus upon women, children, gay males, and injection drug users.**

2. **Understand the nature of the disease, differential exposure among population groups, and describe strategies for prevention and treatment at micro and macro levels.**

3. **Apply a conceptual framework for understanding HIV/AIDS as a social and physical disease through examining appropriate theoretical perspectives and differential community responses.**

4. **Analyze and describe the impact of particular social policies and resources guiding HIV-related comprehensive care and coordination of comprehensive service delivery systems. The impact of such legislative actions as partner notification, intentional infection of others, and the duty to warn (Tarasoff decision) upon social service delivery will be examined.**

5. **Understand the psychological dynamics present for HIV/AIDS infected clients, families, and significant others and society as a whole.**

6. **Discuss the demands and limitations of working with a range of persons with HIV infection, including chronically and terminally ill persons and to assist in the assessment of the psychological and emotional impact that these demands may have on their professional functioning.**

7. **Discuss typical ethical concerns related to HIV/AIDS programs, policies, and services.**

5. **Relationship to Four Curricular Themes:**

1. **Multiculturalism and Diversity:** Students will develop the capacity to identify ways in which gender, race, ethnicity, social class, age and other forms of social stratification and disenfranchisement influence and are impacted by HIV/AIDS related policies, programs and services.

2. **Social Change and Social Justice:** The ability to assess analytically practice, programs and policy related to HIV/AIDS is necessary if the social work profession, by virtue of practice, is to play an important role in shaping the outcome of ongoing
HIV/AIDS related practice, program and policy debates to reflect issues in social change and justice. This course provides students with the capacity to understand and influence the role evaluation plays in the formation and implementation of HIV/AIDS related practice, policy and program development.

3. **Promotion and Prevention:** Too often, programs, practices and policies in mental health are implemented in reaction to an issue, not proactively, due to changing social, economic and political circumstances and influences. Prevention and promotion activities are difficult to evaluate and therefore raise special challenges in evaluating HIV/AIDS related practices, programs and policies. It is important to expose students to evaluation techniques such as social impact analysis, single case analysis and survival analysis that they can use to analyze and evaluate HIV/AIDS related promotion and prevention activities encountered in the course of their professional activities.

4. **Social Science:** Evaluation methods in HIV/AIDS can range from rigorous applications of social science research methodologies to expedient techniques that may be more subjective and less reliable. Neither approach is necessarily appropriate. Social workers need to be able to identify the methods that are most rigorous, yet feasible given the evaluation needs. This course provides students with the capacity to understand and influence the role evaluation plays in the formation and implementation of HIV/AIDS related practice, policy and program development.

6. **Relationship of this Course to Social Work Ethics and Values:** Ethical standards of social work practice (NASW Code of Ethics) will be used to review issues commonly confronted in the development and provision of policy, programs and services addressing people living with HIV/AIDS. The ethical themes of autonomy, beneficence, nonmaleficence, fidelity and justice will be particularly emphasized and discussed.

**Attendance:**
You are expected to attend and to be prepared to take part in each class session. Attendance is important for you to keep up with course work. Missing three classes will reduce your final grade, one-half grade (e.g. an A would be reduced to an A-) and each additional absence will reduce your final grade an additional half grade. As adult learners, I expect you to make appropriate decisions about attending class. Please notify me as soon as possible if you must miss class and it is your responsibility to obtain any notes, materials, handouts or exercises from the missed session from one of your classmates.

Please be cognizant of the disruptive nature of coming to class late. If you are delayed, please enter the classroom as quietly as possible and wait until break to catch up with what is going on. I will leave handouts by the door of the classroom so you may pick them up when you enter.

There are six graded assignments for this course. A brief description of each assignment and tentative due dates follows. A more detailed description of each
assignment will be handed out in class. These due dates have been noted on the class schedule in **Bold** letters.

8. **Housekeeping**

**Electronic Devices**

In consideration of your classmates, and due to their disruptive nature, I request that all students turn off all telephones and pagers while you are in my class. This is your time and I want you to be able to protect it. I prefer that you receive no messages during class time, however, if you must be on call for an emergency, please let your home or office knows that you are only available for emergencies that no one else can handle. If you must carry a pager, please set it to vibrate only.

**Special Circumstances:**
If there are any circumstances that require that I and/or the class adapt to your special needs, please consult with me.

**Religious Observances:**
Please notify me if religious observances conflict with class or due dates for assignments so we can make appropriate arrangements.
Multi-media Teaching Materials for HIV/AIDS

Video resources on health, shaman, etc.
www.filmaker.com

“The Way Home: Women Talking about Race, Gender and Class in America”
A film recommended to create open dialogue around these issues
www.newday.com
To order a copy
Orders@newday.com

Databases

AAMC CurricMIT (password required, call x42532)
http://www.aamc.org/meded/curric/start.htm

eHRAF
can be accessed via GALEN II at
http://www.library.ucsf.edu/db/ehraf.html

The eHRAF Collection of Ethnography, published by Human Relations Area Files, is a full-text, (covering topics including medical research, hospitals and clinics, theories of disease, reproduction, illness, human biology, and demography) fully indexed database of information on various cultures and societies, including cultural approaches to health and medicine. While it focuses on pre-industrial cultures from around the world and North American immigrant groups, all major areas of the world are represented.

GenderWatch
can be accessed via GALEN II at
http://www.library.ucsf.edu/db/gender.html

GenderWatch is a database of full-text publications and abstracts that focuses on the impact of gender across a broad spectrum of subject areas, including the health sciences, education, public policy, and women’s studies. GenderWatch offers in-depth coverage of subjects such as childbirth, birth control, aging, body image, eating disorders, and societal roles. Featured publications include academic and scholarly journals, magazines, newspapers, newsletters, books, conference proceedings, and government, n-g-o, and special reports.

Academic Universe (Lexis-Nexis Database)
can be accessed via GALEN II at http://www.library.ucsf.edu/db/academic.html

Academic Universe contains diverse information resources specifically directed toward the academic environment. It provides access to the full text and abstracts of nearly 6,000 titles in news, business, legal, and medical and health information, including: foreign and U.S. newspapers and magazines- industry, market, medical, and health news- company information, patents, and trade journals law reviews and federal and state case law - biographical information

CogNet
can be accessed via GALEN II at
http://www.library.ucsf.edu/db/cognet.html
A brain and cognitive science community, MIT CogNet's services include: a searchable, full-text library with a growing collection of books, journals, and reference works; an academic almanac of cognitive science programs; HotScience editorials by scientists on groundbreaking or controversial aspects of new research; job listings, candidate profiles, as well as other career information; publisher collections; CV and bibliographic utilities; virtual poster sessions; threaded discussion groups; a seminar manager with information about current seminars and lecture series at participating academic institutions; and community member profiles.

Research & Other Publications

Surgeon General Report
http://www.surgeongeneral.gov/cmh/childreport

National survey of Teens on HIV/AIDS
Http://www.kff.org/content/2000/3092/Teensurveyonhiv.pdf

The Role of the Pediatrician in Prevention and Intervention
http://www.aap.org/policy/re0031.html

Practice Guide for the Treatment of Patients with HIV/AIDS
http://www.psych.org/clin_res/hivaidscfm

Spiritual Wellness for Clients with HIV/AIDS-Review of Counseling Issues
http://www.counseling.org/members/journals/jcd_spring99.pdf

Medical Management of HIV –Psychiatric Disorders
Http://hopkins-aids.edu/publications/book/ch7_1.html

E-mail Newsletters & Journals

HIV/AIDS and Mental Health
http://www.athealth.com/Practitioner/Newsletter

Journal of Counseling and Development
http://www.counseling.org/members/journals

Sage Publications
http://www.sagepub.co.uk

Health Related Websites

The Body
www.thebody.com

Be sure to check The Body daily for the latest news on HIV/AIDS.
http://www.thebody.com/whatsnew.html

Andrew T. Pavia, M.D. discusses 48-week safety and efficacy results from a phase II study of a new once-daily HIV-1 protease inhibitor.
Some people with high-risk behavior do not get infected with HIV. Pablo Tebas, M.D. looks at this interesting study.

Benjamin Young, M.D. examines a similar study.

Paul E. Sax, M.D. discusses a study that finds thalidomide can boost HIV- and CMV-specific CD8 T-cell responses.

For full coverage, click here.

Increasing Your Quality of Life

Health Activists

Women are still largely unable to find straight answers to gender-specific medication concerns, and researchers have yet to prioritize the studies that would fill this knowledge gap. Thank God for women's health activists who are busy trying to change this. Some notes on their current activities and what you can do.

Starting Treatment?

How to make decisions about HIV therapy, a guide from Project Inform.

Committing to Treatment

Susan Rodriguez living with HIV, a breast cancer survivor and mother of three children discusses her decision to begin treatment, in Community Research Initiative on AIDS.

Approved Antiviral List

New, easy-to-understand listing of currently approved antivirals now available from New Mexico AIDS InfoNet.

New HIV Treatment Philosophy

When Dr. Anthony Fauci, head of NIAID, gave a plenary speech at the DurbanAIDS conference and said, "...prolonged courses of continuous HAART are not an option..." he sounded the death knell for the "Hit Hard, Hit Early" treatment approach. Activist Mark Milano looks back at 2000 and the changes in treatment philosophy.

Hep C Alternative Treatment

The U.S. National Center for Complementary and Alternative Medicine looks at alternative treatment for hepatitis C, including milk thistle, and herbs that may ease interferon's effects.

Bactrim Facts

New fact sheet now available on Bactrim (TMP/SMX) from New Mexico AIDS InfoNet.
IV Drugs, HIV, and Hep C "I suppose I could say I was surprised when they told me I tested HIV positive, but I would be lying. It was practically inevitable, considering my lifestyle." Women Alive treatment advocate, Mae Kimbrough, takes a look at HIV, IV drug users, and hepatitis C.
http://www.thebody.com/wa/fall_winter00/hepc.html

Prevention Conference
The 2001 National HIV Prevention Conference will be held this year in Atlanta on August 12-15, 2001. Abstracts are now being accepted.
http://www.thebody.com/cdc/conference.html

AIDS Stats
Read the latest statistics on HIV/AIDS in the U.S. and around the world, from the U.S. National Institutes of Health.
http://www.thebody.com/niaid/hiv_stat.html

Youth and HIV
According to a new report by the U.S. Centers for Disease Control and Prevention (CDC), half of all new infections are believed to still occur in people below age 25.
http://www.thebody.com/siecus/prevention.html

FDA Meeting on CMV Treatment
Notice of FDA advisory committee meeting to discuss data related to the safety and effectiveness of valganciclovir hydrochloride 450 mg tablets, proposed for the treatment of cytomegalovirus (CMV) retinitis in patients with AIDS.
http://www.thebody.com/fda/cmv_meeting.html

Antibiotic Resistance
What is antibiotic resistance? Why is it a problem? Get the lowdown from Women Alive.
http://www.thebody.com/wa/fall_winter00/antibiotic.html

Vaccine Study Results
David Gold of the International AIDS Vaccine Initiative (IAVI) looks at the recent study that shows that monkeys immunized with a DNA vaccine and Interleukin-2 (IL-2) fused to an immunoglobulin molecule (Ig) appear to be protected against simian AIDS.
http://www.thebody.com/tag/jan01/simian.html

Halt on Vitamin B-12 Injection
The Food and Drug Administration (FDA) is urging individuals, health care organizations, and medical product distributors to stop dispensing and/or distributing certain injectable medications marketed by Phyne Pharmaceuticals. This includes, for example, Vitamin B-12 (Cyanocobolamin) and Echinacea Homeopathic Injection.
http://www.thebody.com/fda/recall.html

Web Highlights
A Selection of Top HIV/AIDS Stories From Across the Internet
The pills identification test: A tool to assess adherence to antiretroviral therapy A research letter from the Journal of American Medical Association (registration required)

Non-Candida albicans strains show less susceptibility to fluconazole in HIV-infected women From Reuters Health (February 2, 2001)

Gilead Science's investigational HIV drug available via expanded access From Reuters Health (January 31, 2001)

HIV/AIDS.doc
10/11/01
Quality-of-life benefits of aggressive therapy are unclear with advanced AIDS From Reuters Health (January 31, 2001)

Cardiovascular disease risk markedly elevated in HIV-infected patients with lipodystrophy From Reuters Health (January 30, 2001)

Safe dose established for new anti-HIV drug, setting stage for larger trial From Reuters Health (January 30, 2001)

Fusion inhibitors show promise in reducing HIV viral levels
From Reuters Health (January 29, 2001)

HIV/AIDS Treatment Information Service (ATIS): Treatment Guidelines

Organizations

AAMC
http://www.aamc.org

American Psychiatric Association
http://www.psych.org

The Kaiser Family Foundation
http://www.kff.org

American Academy of Pediatrics
http://www.aap.org

Johns Hopkins University
http://hopkins-aids.edu

UCSF AIDS Health Project
http://www.ucsf-ahp.org

National Institute of Mental Health
http://www.athealth.com/consumer/disorders

National Association of Community Health Centers (NACHC)
http://www.nachc.com

Bureau of Primary Health Care (BPHC)
http://bphc.hrsa.dhhs.gov

AMSA
http://www.amsa.org

Medical Education
CURRICULUM

AAMC CurricMIT (password required, call x42532)
http://www.aamc.org/meded/curric/start.htm

Techniques for Teaching HIV Counseling – An Intensive Experiential Model
http://www.counseling.org/members/journals/icd_spring99.pdf
Face to Face: A Guide to AIDS Counseling the HIV-Positive Client
http://www.ucsf-ahp.org

Leadership Skills and Training
http://www.amsa.org/programs/gpit/leadership.htm

SYLLABI
Women and Gender-related Courses
http://www.umbc.edu/cwit/syllabi.html

CUTURAL COMPETENCE
Cultural Competency in Medicine
http://www.amsa.org/programs/gpit/cultural.htm

Women’s Health
http://www.amsa.org/programs/gpit/women.html

The Delivery of Urban vs. Rural Health Care
http://www.amsa.org/programs/gpit/ruralurban.htm

Health Care for the Homeless
http://www.amsa.org/programs/gpit/homeless.htm

MISCELLANEOUS
Academic Medicine and Managed Care: An Uncertain Future
http://www.amsa.org/programs/gpit/acadmed.htm

Child Abuse and Neglect
http://www.amsa.org/programs/gpit/child.htm

Childhood and Adult Immunizations: Model for Preventive Health
http://www.amsa.org/programs/gpit/immunize.htm

Clinical Ethics in a Generalist’s Practice
http://www.amsa.org/programs/gpit/ethics.html

COMPLEMENTARY AND ALTERNATIVE MEDICINE
AMSA
http://www.amsa.org/programs/gpit/compmed.htm

Guide to Acupuncture
Check out this guide to acupuncture from the U.S. National Center for Complementary and Alternative Medicine. 
http://www.thebody.com/nccam/acupuncture/contents.html

Johns Hopkins University 
http://hopkins-aids.edu/educational/education.html
### Course At A Glance: Fall 2001

*Note: Computer Classroom from 10-12pm in September (14,28), October (5,19,26) and November (2,16,30)*

<table>
<thead>
<tr>
<th>Date</th>
<th>Content</th>
<th>AIDS in the World II</th>
<th>AIDS 2001</th>
<th>Other Activities</th>
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<tbody>
<tr>
<td>September 7</td>
<td>✓ Introduction to course website (coursertools)</td>
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<td>Preface and Introduction; Ch. 1; Ch. 7 (all pages)</td>
<td>Importance of geography and physical space in policy development and analysis: basic introduction to Spatial Analysis and GIS;</td>
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<td></td>
<td>✓ HIV Virology, Clinical Course</td>
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<td>✓ Creation of Health Policy: The Basics</td>
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<td>✓ AIDS as moral, public health, and medical issues</td>
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<td>✓ Basic Intro to Mapping and GIS</td>
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<td>✓ Discussion of Title IV QA Project</td>
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<td>✓ Prevalence of HIV infections, AIDS Cases and Deaths among select groups in the US and Worldwide</td>
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<tr>
<td></td>
<td>✓ Prevalence of HIV infections, AIDS Cases and Deaths among women, children and youth in the US and Worldwide</td>
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<td>✓ Introduction to AIDS Industries</td>
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<td>September 21</td>
<td>✓ Medical Treatments</td>
<td>Chs. 35,36,37,</td>
<td>Ch. 13, Ch. 2</td>
<td>Applying Mann/Tarantolla's Categorization response to HIV/AIDS Class Activity: Impact of GIS: San Francisco's Pandemic and the (geomapped) service response</td>
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<td>✓ The Origins of HIV/AIDS and the global politics of HIV/AIDS: Impacts from the Durban 2000 International Conference: Mr. Mbeki's curious stance</td>
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<td>✓ Understanding the Response to HIV/AIDS: Industrial and Developing Societies</td>
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<td>o What can be learned from industrial societies</td>
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<td>o What can be learned from developing societies</td>
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<td></td>
<td>✓ AIDS and Society: Knowledge, attitudes and behavior</td>
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<tr>
<td>Date</td>
<td>Summary</td>
<td>Chapters/Readings</td>
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| September 28 | - Biological Characteristics of HIV  
- Anti-HIV Therapy  
- Social Work Creation of Policy: National and International Perspectives | Ch. 3: pp 60-64; pp. 73 (2nd col) - 77; study figs. 3-2, 3-4, and 3-8 skim pp. 68-73, and skip everything else.  
Ch. 4: pp 79-103, table 1 (p. 84), skip figs. 4-4 and 4-5.  
Ch. 9: pp. 305-315.  
ArcView: displaying themes, and working with tables, and editing shapefiles |
| October 5  | One page concept paper for C.P. Due  
- D. S. dollars, and treatment:  
- Brazil's solution to high medication prices.  
- South Africa, India and the Pharmaceutical Industry  
- Why drugs are so expensive: The Claritin Effect | Chs. 7,8  
Ch. 4, pp. 104-119  
Detroit Visit: Title IV DMC |
| October 12 | Instructor approval for HIV/AIDS geomapping project  
- Immunology of HIV/AIDS  
- Opportunistic Infections and Cancers Associated with HIV/Disease/AIDS  
Ch. 5: pp. 125-129, 134-138, 143; Table 5-1, Sidebar 5.1, Skim pp 144-150, skip everything else.  
Ch. 6: pp. 153-158, 170-171, Table 6-2; skim everything else. |
| October 19 | Quiz Day!!  
- Treatment Strategies in the US and worldwide: the intersection of morality, money, and power:  
- Where sanity reigns for prevention and treatment in developing societies: Brazil, Thailand, Botswana | Chs. 10,11,12,  
- Changing Detroit's Drug Paraphenalia Ordinance [Syringe Exchange Policy]  
- Guest Presenter: George Gaines, former Deputy Director, Detroit Health Department  
- Syringe Exchange - International Perspectives and Strategies  
ArcView: Creating, Editing Shapefiles, Analyzing Themes. |
<table>
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<tr>
<th>Date</th>
<th>Topic</th>
<th>Reading Material</th>
<th>Guest Presenter/Notes</th>
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<tbody>
<tr>
<td>October 26</td>
<td>Where should we be going?</td>
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<td>Kofi Annan and the UN Response to HIV/AIDS: General Assembly Conference June 25-27, 2001</td>
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<td>Social Work Creation of Policy: Pat Priebe, Children's Immune Disorder, Permanency Planning and Standby Guardianship</td>
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<td>November 2</td>
<td>Where will we be going? How will we get there?</td>
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<td>Corporate responses to HIV/AIDS: The Case of Coca-Cola and AngloGold Ltd.</td>
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<td>Can we combine prevention and treatment approaches?</td>
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<td>November 9</td>
<td>Where will we be going? How will we get there?</td>
<td></td>
<td>Social Work Implementation of Policy: Case Management</td>
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<td>November 16</td>
<td>Monitoring our progress Due</td>
<td></td>
<td>主要和次要预防策略:预防和治疗策略的合并，增强依从性和目标人群（老年人、同性恋群体、跨性别）</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>以及MPOWER</td>
</tr>
<tr>
<td>November 23</td>
<td>New Thanksgiving Holiday</td>
<td></td>
<td>新的和未来的方法</td>
</tr>
<tr>
<td>November 30</td>
<td>Predicting Response: The New Waves of AIDS for the 21st Century: China, India, Cambodia, Russia and Myanmar</td>
<td></td>
<td>GIS: Future applications</td>
</tr>
<tr>
<td>December 7</td>
<td>Towards a finer world: sane responses to future (stigmatized) pandemics</td>
<td></td>
<td>Guest Speaker: Dr. Timothy Johnson</td>
</tr>
</tbody>
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