MCMASTER UNIVERSITY Department of Health, Aging & Society HLTH AGE 4D03E: WINTER 2015

Health in Cross Cultural and International Perspectives

Dr. James Gillett, Office: KTH 225, ext. 22741, gillett@mcmaster.ca Time: Tuesday 7:00 – 10:00 pm Room: BSB B138

COURSE OBJECTIVES: This course introduces students to debates surrounding One Health — the idea that to achieve health it is necessary to take into consideration the interdependence between humans, animals and the environment. While not a new concept, One Health is gaining momentum as a framework for understanding and responding to health issues on a number of levels. Of particular interest is the implication and applicability of a One Health framework to a cross cultural and international perspective. The tendency in research and policy is to concentrate on cross cultural research on health by only looking at human health rather than on the intersection between the human, non-human and environmental. Drawing on literature in the social sciences on animal studies, we will explore the theoretical foundations for the concept of One Health and several case studies in cross cultural and international contexts. Further to this, we will explore as a class in more depth case studies of One Health in Action. A key objective for students is to actively engage in a new perspective in health studies — One Health — that moves beyond humanist perspective and to apply it cross culturally and internationally.

REQUIRED TEXTS:

There is no text in this course. Readings for each week are provided in the schedule below and available through the McMaster library system.

COURSE STRUCTURE:

Each class will consist of a lecture, class presentations group work and discussions. In the first class students will be divided into eight to ten groups and asked to take up a One Health Case Study that is geographically specific. Each group is responsible for bringing to the discussion the perspective of their case study and location as it is taken up in the literature in health studies broadly defined. In class presentations, each group on their designated week will present a supplemental reading from health studies literature that is connected to the course readings for that week. As part of the discussion, members of the other groups are responsible for asking questions and contributing based on their own case studies.

EVALUATION:

All written assignments need to be: double spaced with one inch borders in 12 pitch font. Please include a list of references and a title page that includes your name, ID number and date. Please use APA style or another standardized style found in a scholarly journal.

Presentations (25%): For each class students in each group will find a supplemental article (or book chapter) based on their readings of the course material for that week. Member or members of the group will present a brief summary of the article and discuss its relationship to the theme for that week. The informal presentations are mandatory and will be marked pass or fail. For inadequate or missed presentations, members of the group can submit a two page written summary. Full marks will be given once groups have submitted or presented an adequate presentation or summary for each week.

Written Assignments (75%): Students will write two critical analysis papers. The first (worth 30%; due February 10th; five to six pages) describes the basic tenets of a One Health perspective and its relevancy cross culturally and internationally. In the second (worth 45%; due March 31st; ten to fifteen pages) students will draw on course material – lectures, discussions, articles, presentations – to analyze the contribution that a One Health perspective makes to understanding and responding to a cross cultural and international health crises or problem.

The instructor and university reserve the right to modify elements of the course during the term. The university may change the dates and deadlines for any or all courses in extreme circumstances. If either type of modification becomes necessary, reasonable notice and communication with the students will be given with explanation and the opportunity to comment on changes. It is the responsibility of the student to check his/her McMaster email and course websites weekly during the term and to note any changes.

ACADEMIC HONESTY: You are expected to exhibit honesty and use ethical behaviour in all aspects of the learning process. Academic credentials you earn are rooted in principles of honesty and academic integrity.

Academic dishonesty is to knowingly act or fail to act in a way that results or could result in unearned academic credit or advantage. This behaviour can result in serious consequences, e.g. the grade of zero on an assignment, loss of credit with a notation on the transcript (notation reads: "Grade of F assigned for academic dishonesty"), and/or suspension or expulsion from the university.

It is your responsibility to understand what constitutes academic dishonesty. For information on the various types of academic dishonesty please refer to the Academic Integrity Policy, located at http://www.mcmaster.ca/academicintegrity

The following illustrates only three forms of academic dishonesty:

- 1. Plagiarism, e.g. the submission of work that is not one's own or for which other credit has been obtained.
- 2. Improper collaboration in group work.
- 3. Copying or using unauthorized aids in tests and examinations.

Jan 6 th	Overview	No Readings
Jan 13 th	Posthumanism and Health Studies	Haraway, D. (2006). Encounters with companion species: entangling dogs, baboons, philosophers, and biologists. Configurations, 14(1), 97-114.
		Rock, M. J., Degeling, C., & Blue, G. (2014). Toward stronger theory in critical public health: insights from debates surrounding posthumanism. Critical Public Health, 24(3), 337-348.
Jan 20 th	One Health: Key Concepts	Zinsstag, J., Mackenzie, J. S., Jeggo, M., Heymann, D. L., Patz, J. A., & Daszak, P. (2012). Mainstreaming one health. EcoHealth, 1-4.
	, same, par	Zinsstag, J., Schelling, E., Waltner-Toews, D., & Tanner, M. (2011). From "one medicine" to "one health" and systemic approaches to health and well-being. Preventive veterinary medicine, 101(3), 148-156.

		Rock, M., Buntain, B. J., Hatfield, J. M., & Hallgrímsson, B. (2009). Animal–human connections, "one health," and the syndemic approach to prevention. Social Science & Medicine, 68(6), 991-995.
Jan 27 th	Zoonotic Diseases	Smith, J., Taylor, E. M., & Kingsley, P. (2014). One World-One Health and neglected zoonotic disease: Elimination, emergence and emergency in Uganda. Social Science & Medicine.
		Coker, R., Rushton, J., Mounier-Jack, S., Karimuribo, E., Lutumba, P., Kambarage, D., & Rweyemamu, M. (2011). Towards a conceptual framework to support one-health research for policy on emerging zoonoses. The Lancet infectious diseases, 11(4), 326-331.
Feb 3 rd	Human Companion Animal Bond	Day, M. J. (2011). One health: the importance of companion animal vector-borne diseases. Parasit Vectors, 4, 49.
		Woldehanna, S., & Zimicki, S. (2014). An expanded one health model: Integrating social science and one health to inform study of the human-animal interface. Social Science & Medicine.
Feb 10 th	Integrated Medicine Assign Due	Dhama, K., Chakraborty, S., Kapoor, S., Tiwari, R., Kumar, A., Deb, R., & Natesan, K. (2013). One world, one health-veterinary perspectives. Adv. Anim. Vet. Sci, 1(1), 5-13.
		Kahn, L. H. (2006). Confronting zoonoses, linking human and veterinary medicine. Emerging infectious diseases, 12(4), 556.
Feb 17 th		Reading Week
Feb 24 th	Global Development	Godfroid, J., Al Dahouk, S., Pappas, G., Roth, F., Matope, G., Muma, J., & Skjerve, E. (2013). A "One Health" surveillance and control of brucellosis in developing countries: moving away from improvisation. Comparative immunology, microbiology and infectious diseases, 36(3), 241-248.
		Gebreyes, W. A., Dupouy-Camet, J., Newport, M. J., Oliveira, C. J., Schlesinger, L. S., Saif, Y. M., & King, L. J. (2014). The Global One Health Paradigm: Challenges and Opportunities for Tackling Infectious Diseases at the Human, Animal, and Environment Interface in Low-Resource Settings. PLoS neglected tropical diseases, 8(11), e3257.
Mar 3 rd	Wild Animals and Diseases	Jerolmack, C. (2013). Who's worried about turkeys? How 'organisational silos' impede zoonotic disease surveillance. Sociology of health & illness, 35(2), 200-212.
		Bogich, T. L., Chunara, R., Scales, D., Chan, E., Pinheiro, L. C., Chmura, A. A., & Brownstein, J. S. (2012). Preventing pandemics via international development: a systems approach. PLoS medicine, 9(12), e1001354.
Mar 10 th	Uses of Animals	Halsby, K. D., Walsh, A. L., Campbell, C., Hewitt, K., & Morgan, D. (2014). Healthy Animals, Healthy People: Zoonosis Risk from Animal Contact in Pet Shops, a Systematic Review of the Literature. PloS one, 9(2), e89309.
		Woldehanna, S., & Zimicki, S. (2014). An expanded one health model: Integrating social science and one health to inform study of the human-animal interface. Social Science & Medicine.
Mar 17 th	Viruses	Hinchliffe, S., Allen, J., Lavau, S., Bingham, N., & Carter, S. (2013). Biosecurity and the topologies of infected life: from borderlines to borderlands. Transactions of the Institute of

		British Geographers, 38(4), 531-543.
		Blue, G., & Rock, M. (2010). Trans-biopolitics: Complexity in interspecies relations. Health:, 1363459310376299.
		Langdridge, D., & Flowers, P. (2013). Living with the 'Enemy': HIV and Inter-species Relating. Sociology, 47(4), 827-840.
Mar 24 th	Response to Epidemics	Ear, S. (2012). Swine flu: Mexico's handling of A/H1N1 in comparative perspective. Politics and the Life Sciences, 31(1), 52-67.
	Epidemics	Stephen, C., Artsob, H., Bowie, W. R., Drebot, M., Fraser, E., Leighton, T., & Patrick, D. (2005). Perspectives on emerging zoonotic disease research and capacity building in Canada. The Canadian Veterinary Journal, 46(1), 65.
Mar 31 st	Conclusion	Law, J., & Mol, A. (2008). Globalisation in practice: on the politics of boiling pigswill. Geoforum, 39(1), 133-143.
	Assign Due	Nading, A. M. (2013). Humans, Animals, and Health: From Ecology to Entanglement. Environment and Society: Advances in Research, 4(1), 60-78.
Apr 7 th	Optional Review	No Readings

FACULTY OF SOCIAL SCIENCES E-MAIL COMMUNICATION POLICY: Effective September 1, 2010, it is the policy of the Faculty of Social Sciences that all e-mail communication sent from students to instructors (including TAs), and from students to staff, must originate from the student's own McMaster University e-mail account. This policy protects confidentiality and confirms the identity of the student. It is the student's responsibility to ensure that communication is sent to the university from a McMaster account. If an instructor becomes aware that a communication has come from an alternate address, the instructor may not reply at his or her discretion. Email Forwarding in MUGSI:

http://www.mcmaster.ca/uts/support/email/emailforward.htm

ACADEMIC ACCOMMODATION OF STUDENTS WITH DISABILITIES:

Students who require academic accommodation must contact Student Accessibility Services (SAS) to make arrangements with a Program Coordinator. Academic accommodations must be arranged for each term of study. Student Accessibility Services can be contacted by phone 905-525-9140 ext. 28652 or e-mail sas@mcmaster.ca. For further information, consult McMaster University's Policy for Academic Accommodation of Students with Disabilities: http://www.mcmaster.ca/policy/Students-AcademicStudies/AcademicAccommodation-StudentsWithDisabilities.pdf

If you require this information in an alternate/accessible format, please contact the Department of Health, Aging & Society at 905-525-9140 ext. 27227.