

GEORGE MASON UNIVERSITY
College of Health and Human Services
Department of Global and Community Health

GCH 602-001
CRN: 74121

Global Health Issues Related to Violence
FALL 2009

First day of class: Tuesday September 1
Last day of class: December 15

Venue: Innovation Hall #203

Instructor: Carlos E. Sluzki, MD, Professor, DGCH/CHHS
e-mail: csluzki@gmu.edu
Instructor's office: Robinson B 419 (Instructor is available every Tuesday from 9 AM on, and as needed by appointment)

Placement in Curriculum: Any graduate program at HHS, and any program at Mason with equivalent level and permission of instructor.

Catalog Description: This course explores violence and its impact on health, with a multi-cultural, world-wide lens. It examines biological, psychological and social determinants of violence. The epidemiology of violence is examined with special attention to collective violence, youth violence, abuse and neglect of children and the elderly, intimate partners, sexual violence, self-directed violence, and trans-generational violence. Preventive approaches attempted to help reduce the prevalence of violence are addressed.

Course Objectives: At the end of the course students will be able to:

1. Discuss the impact of violence on health throughout the world.
2. Specify types of violence that may be dominant in different areas of the world.
3. Identify major contributing factors to violence.
4. Discuss the research literature that explores the key risk factors for violence.
5. Evaluate levels of risk of violence in vulnerable populations.
6. Contrast the effect of short and long term effects of violence in victims, witnesses and perpetrators.
7. Specify the key components of Post-Traumatic Stress Disorders and discuss critically their impact on health.
8. Describe types of interventions, practices and policies aimed at detecting, preventing and reducing violence, and their relative effectiveness.

Teaching Methods and Strategies:

Lectures, discussions, student presentations, group projects, and written assignments.
Occasional guest lecturers.

Grades:

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| 1. Pertinent and informed participation in class | 40% |
| 2. Short assigned essays throughout the course on themes discussed in class, demonstrating sound tracking of themes and reasoning. | 20% |
| 3. Final assignment. Will be discussed in class | 40% |

Evaluation Methods:

Participation will be evaluated by evidence of keeping up with the readings,(including providing summaries of readings when appropriate), and active and pertinent participation in the discussions.

Essays will be evaluated by the tracking of themes, reasoning, and sound use of references. Students will have their final essay returned to them within 2 weeks, with notations and comments by the instructor. The students will have then the opportunity to re-write and re-submit their essay within 10 days. Final assignments will be evaluated by the above, plus the industriousness and feasibility of the project, the appropriateness of its research methodology, and when pertinent, the analysis of the results.

Required Text:

World Health Organization (2002). World Report on Violence and Health. Geneva, WHO.

Optional additional texts:

Hodgkinson PE & Stewart, M (1998): Coping with Catastrophe: A Handbook of Post-Disaster Psychosocial Aftercare. NY, Routledge.

Boyd Webb, N (Ed. (2004): Mass Trauma and Violence: Helping Families and Children Cope. NY, Guilford

Note: In addition, the students may have access to a substantial archive of recent articles and books on the subject, available via Aladin or other accessible e-library site, via e-reserve or at the professor's office. The specific reference is listed below, tied to subjects. (Editorials orient to other articles, in addition to summarizing them. If chosen, a further exploration of its references is recommended)

TOPICAL OUTLINE & ARTICLES ON RESERVE (they are recommended in addition to, nor replacing, the main text)

- 9-1 I. Orientation about this course –re essays, references, access to bibliography, access to instructor.
- Violence: An Introduction
- *Krug EG, Mercy JA, Dahlberg, LL et al (2002): *The world report on violence and health. The Lancet 360:1083-1088*
 - *Editorial (2002): *Treating violence as a public health perspective. BMJ: 352:726-727 (Oct 5)*
- 9-8 II. Neurobiology and social psychology of violence + Typologies of violence
- *Sluzki, CE: *Toward a general model of family and political victimization. Psychiatry, 56: 178-187, 1993.*
 - *Sluzki CE (1997): *Rekindling the experience of freedom: From the collective to the personal...and back. Human Systems 8(3-4):225-238*
 - *Summerfield D (2001): *The invention of PTSD and the social usefulness of a psychiatric category. British Journal of Psychiatry 322:95-98*
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- 9-15 III.. Self-directed violence + Youth violence
- *Gratz KL (2006): *Risk factors for deliberate self-harm among female college students... Amer J Orthopsychiatry 2006(76): 238-250*

- *Barclay L (2007): Bullying and Victimization in childhood linked to psychiatric disorders in early adulthood. Medscape Medical News, August 2007*
- **Connors D et al (2006): Juvenile maladaptive aggression: A review of Prevention,, Treatment, and Service configuration, and a proposed research agenda. J.Clin Psychiat 67(5):808-820*

9-22 IV. Violence by intimate partners + Abuse of the elderly and of handicapped

- **Taket A, Wathen CN & MacMillan H (2004): Should health professionals screen all women for domestic violence? (a debate). PLoS Med 1(1) 1-6*
- **Solberg KE (2009): Killed in the name of honor. The Lancet (Editorial), 373 (9679): 1933-34*

9-29 V. Child abuse and neglect + The issue of repressed memory

- **Shin Kim Y et al. (2006): School bullying and youth violence. Arch Gen Psychiatry 63:1035-1041*
- **Murray L & Burnham, G (2009): Understanding childhood sexual abuse in Africa. The Lancet, 373(9679): 1924-26*
- **Heim, C et al (2000) Pituitary –Adrenal and autonomic responses to stress in woman after sexual and physical abuse in Childhood. JAMA 284:592597*
- **Wright L: Remembering Satan-Part II New Yorker 5/24/93*
- **Otnow Lewis, D et al. (1997) : Objective documentation of child abuse and dissociation in 12 murderers with dissociative identity disorders. Am J Psychiat, 151(12): 1703-1710*

10-6 VI. Cults/sects

- *A variety of books on on sects and related subjects are available for student (two week) loan from CS's office.*

10-13 VII. Sexual violence, female circumcision

- ** Editorial (2009): Rape in war is common, devastating and too often ignored. PLoS Medicine Vol 1, 0001-3, January 2009-08-24Toubia N (1995): Female circumcision as a public health issue. N Eng J Med 332(3):1880-99*

10-20 VIII. (GUEST FACULTY) Collective violence: Wars old and new + Terrorism

- *Howard, M.(2002): The Invention of Peace: Reflections on War and International Order. Yale UP. (**Extraordinary book!** Short and wise... and inexpensive. Highly recommended!)*
- **Kron, S & Mendlovic, S (2002): Mental Health Consequences of Bioterrorism. Israeli Medical Association Journal 4:514-527*

10-27 IX. Terrorism (cont.) Genocide & Political oppression. Concentration camps, extreme prisons

- *Pumla Gobodo-Madikizela (2004) A Human Being Died That Night: A South African Woman Confronts the Legacy of Apartheid (Paperback). Mariner (**short book**. Merits being read!)*
- **Wood N (1992): The Hardened Skin of Memory. Readings 4-7*

- *Pham, PN, Weinstein, HM & Longman, T (2004): Trauma and PTSD symptoms in Rwanda. JAMA 292(602-612
- Willis, BM & Levy BS (2000): Recognizing the public health impact of genocide. JAMA, 284: 612-614
- *De Jong, JT et al (2001): Lifetime events and PTSD in 4 post-conflict settings. JAMA, 286:555-562

11-3 X. The “torture” issue. Victims of torture.

- *Berliner P., Nikkelsen E.M., Bovbjerg, A., Wiking, M. (2004). Psychotherapy treatment of torture survivors. International Journal of Psychosocial Rehabilitation. 8, 85-96.
- *Piwowarezyk, L; Moreno, Jm & Grodin, M/ (2000): Health care of torture survivors. JAMA 284:539-541

11-10 XI. Refugees, IDPs,

- Sluzki, CE: “Short term heaven, long term limbo: A visit to a refugee camp in Rwanda” Global Studies Review, 2(1):4-5, 2006
- *Salama P. Spiegel P, Brennan R (2001): No less vulnerable: The internally displaced in humanitarian emergencies. The Lancet; 357:1430-1431
- *Blanch A (2008): Transcending Violence: Emerging models for trauma healing in refugee communities. Draft: National Center for Trauma Informed Care.

11-17 XII. Human trafficking + Preventive interventions and community action

- *Davidson JRT (2002): Surviving disaster: What comes after trauma? BJP 181:36-368
- *Gutlove P(1999) Health as a bridge to Peace. (manuscript presented at the Global Symposium on Violence and Health, Kobe, Japan)
- *Van Emmerik, AAP et al (2002): Single session debriefing after psychological trauma: A meta-analysis. The Lancet 360:766-71

11-24 (THANKSGIVING RECESS)

12-1 XIII. Wrap up + Students Presentations

12-8 XIV. Student Presentations

12-15 XV (Last day of class) Students presentations; loose ends, course evaluation, closure.

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IMPORTANT REMINDERS

Academic Honesty: George Mason University operates under an honor system, which is published in the University Catalog and deals specifically with cheating, attempted cheating, plagiarism, lying, and stealing. Please familiarize yourself with the honor code, especially the statement on plagiarism (<http://www.gmu.edu/facstaff/handbook/aD.html>). Violation of this code may have severe consequences in the student’s academic standing. If you have questions about

when the contributions of others to your work must be acknowledged and appropriate ways to cite those contributions, please talk with the professor. Essays/monographs may be randomly scanned with plagiarism-detecting software.

Students with Disabilities: All students with questions or concerns about this class are encouraged to set up a time to meet with the professor, preferably during the first 2 weeks of the semester. Any student with a documented disability or other condition that may affect academic performance should: 1) make sure this documentation is on file with the Office of Disability Services (SUB I, Rm. 211; 993-2474; www.gmu.edu/student/ods) to determine the accommodations you might need.

Grading System:

Letter Grade	Grade Points
A	4.00
A-	3.67
B+	3.33
B	3.00
C	2.00
F	0.00

Plus and minus grades are used inside the range of satisfactory performance. Grades below B are unsatisfactory and consist of two categories: C (unsatisfactory, passing) and F (unsatisfactory, failing).

Incomplete Letter Grade. For causes beyond reasonable control, a student may be unable to complete a course or course assignment on schedule. In such cases, the instructor may assign a temporary grade of Incomplete (IN). Graduate students have only nine weeks to complete work in a course in which they received a grade of IN. If the student fails to complete all requirements in time for the instructor to assign a regular grade by the end of the ninth week of classes of the next semester (excluding Summer Term), the mark of IN is changed by the Office of the Registrar to F. The student is responsible for submitting work to the instructor with sufficient time allowed for its evaluation. As long as the mark of IN remains on the transcript, it is treated as an unsatisfactory grade and may contribute to dismissal.

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