

The exam will consist of approximately multiple choice questions, identification terms, possibly a short essay. The exam will weigh lectures and readings with equal importance. (Lectures include the videos.) Exam Date November 12th at 12:00 P.M.

Videos

“The Female Face of HIV/AIDS-Malawi”

- discrimination against HIV+ women in society
- societally women generally remain faithful to their husbands while the men have numerous girlfriends, women contract HIV without having multiple partners. Rooted in lack of sexual rights for women which is culturally embedded
- women are the primary ones facing discrimination while men are the cause of the spread
- woman's garden was taken from her because she is expected to die soon
- due to increasing presence of ARVs, HIV+ individuals can live normally
- stigma that HIV positivity and productive-ness cannot go hand in hand, everyone thinks that if you are HIV+ then you can no longer do anything.
- men are against condom use and HIV testing because it admits that they could have contracted HIV
- also many women turn to prostitution bc of lack of job opportunities, this can also lead to AIDs transmission

<http://www.documentaryfilms.net/index.php/the-female-face-of-aids-crisis-in-malawi/>

“Cocaine Unwrapped”

- Cocaine is a drug of affluence derived from the coca leaf which has been a part of South American culture dating back to Incan times. The coca leaf in its natural state is non-addictive and is not harmful to the human body. (WHO)
- Demand for cocaine in wealthy countries (predom. *US* and *Western Europe*)(There are **11 Million** western consumers of) is having immense human, financial, and social costs in the countries that supply the coca plant
- Buying cocaine fuels this industry full of exploitation, violence, and addiction
- Colombia-aggressive supply-side approach in eradicating coca fields.
 - Manual eradication-farmers are held at gunpoint as they watch a police team uproot their source of food security
 - Aerial eradication-fumigation of fields of coca not only kill the coca plots but also plants in the surrounding area. Women's papaya and banana plots. Brought poverty, contamination of water sources, and disease to rural colombian areas which has contributed to the internal displacement of 5M people
 - >**prime example of the interrelation of drugs and food security/global health/IDPs**
- Criminalization of the coca leaf because some of it is diverted to cocaine production
 - similar to declaring grapes or sugar cane illegal bc they are used to make alcohol
- Increasing demand for the drug in the west has undermined efforts made by the 'Colombian government to eradicate production

“Trouble the Water”

- _____ -The city of New Orleans issued a mandatory evacuation of the city without providing busses or public transport to get its people out of the line of danger
- the affluent were able to evacuate while the impoverished were left
 - public sentiment of a lack of concern
 - no rescue efforts after levees broke for many days
 - 1,833 fatalities (mostly elderly)
 - 1 million displaced people
 - \$100 billion in damages
 - \$1 billion in foreign assistance
 - Population drop from 1.4 million to 1 million but currently rising back to 1.4
 - # of businesses in New Orleans is not as high as pre-disaster, but number of restaurants has exceeded previous amount
 - Had no food or water after 100 hours, no rescue, all emergency lines ignored their plea for help, the empty naval base refused to house people who were in desperate need of housing.

Questions to consider:

What does it mean to say that N/S gaps in health and mortality are merging? > what does N/S stand for? North-South. but what does it mean then? North-South gaps? The Epidemiological Transition- causes of death for people in the Global South are becoming more similar to those in the Global North, population structures are looking more similar to those of affluent countries.

Causes of Death more similar:

- standard of living is improving/life expectancy rising
- immunizations are being brought to the developing countries
- germ theory (what is germ theory?) > Yes what is it? that to some extent germs are good so your body will know how to fight it. (for ex. washing hand every second can do the opposite effect). Or that diseases are spread via germs?
- infant mortality is decreasing

With exception of HIV/AIDS, deaths from IPDs (Infectious and Parasitic Diseases) declining

Average global life expectancy: 71

- Monaco: 89
- Japan:85
- US: 79 (ranked 53rd)
- Afghanistan, Chad, South Africa: 50

Deaths linked to cancer and heart disease increase (as percentage)

Emerging crisis of bacterial infections in MDCs (MORE developed countries) due to growing ineffectiveness of antibiotics (29,000 deaths in US in 2012)

*****Moving from “diseases of poverty” (AIDS[exception], ebola, waterborne diseases) to “diseases of affluence” (cancer, heart disease, tobacco related deaths, and diabetes)

- diseases of affluence are often degenerative/linked to the fact that MDCs more often have more older people/elderly populations

How has the AIDS epidemic affected population age-sex structures?

- populations that are affected by the aids epidemic are going to be vastly affected by the aids epidemic. their pyramids are going to shrink immensely.
- HIV/AIDS affects more than 30 million people, 70% of all cases in Africa.
- prevalent in people ages 18-44
- **it destroys productive citizens, mothers die leaving children alone which increases crime and social problems.
 - women are most affected
 - takes women out of workforce due to illness
- education suffers because teachers die
- military is weakened

Why is HIV/AIDS so prevalent in sub-Saharan Africa? (Consider gender roles as one factor.)

- Lower male circumcision rates
- Unsafe sexual behavior/low condom use(this may be the gender roles the question suggests, men usually dominate the relationships and women don't have the option to practice safe sex even if they want to, men are able to have mistresses/girlfriends and the wife has no say in the matter. Men don't keep track of partners then suffer consequences)
- High amount of sex workers because they cannot find employment. This leads to the further spread of the disease.
- women don't know they have sexual violence rights, high rate of rape, low condom usage (esp S.A.)
- children receive HIV from their mothers during birth when the mothers are tested positive
- 14% of adults (14-49) are HIV positive (in all of sub saharan africa?) yes.
- 60% of new transmissions are to women
- circumcision showed a 50% reduction in HIV/AIDS transmissions
- Traditional methods of using powders for dry sex which causes more abrasion (rubbing/scraping which causes cuts)cuts in the vagina because of the friction which leads to an easier transmission of the disease.
- poor government policy (like in S.Africa).

Explain the connection between poverty and life expectancy.

- high correlation with poverty and low life expectancy
- Extreme poverty almost always includes lack of clean water which leads to health problems/death
 - lack of access to health care, nutritious food, when disasters hit they are more vulnerable
 - lack of literacy and education lowers life expectancy
 - increased income raises life expectancy. they have the money and resources to stay healthy and alive
 - high correlation between poverty and rural living situations where getting to a health care provider is difficult or near impossible
 - malnutrition leads to vulnerability multiplied