

**COLLEGE OF PUBLIC HEALTH & HEALTH PROFESSIONS  
PHC 7038 PSYCHIATRIC EPIDEMIOLOGY**

**SPRING 2026 FULL SEMESTER**

**SECTIONS**            **19809 – in person**  
                              **14101 – CPE only online synchronous**  
                              **14100 – online other**

**MONDAY PERIOD 6 - 8 (12:50 PM - 3:50 PM)**

**ROOM # C2-033 Communicore**

**(behind Panda, and facing Sun Terrace)**

Please see CANVAS page for Zoom information and recordings.

**Instructor Information**

Associate Professor Catherine Woodstock Striley, PhD, MSW, MPE  
Department of Epidemiology  
College of Public Health and Health Professions  
College of Medicine

Clinical and Translational Research Building

**2004 Mowry Road, Room 4237**

Gainesville FL 32610

Phone: 352-273-5359

Fax: 352-273-5365

Mobile: 314-761-5984

cstriley@ufl.edu

Office Hours: **Mondays 4pm:** Via Zoom or by arrangement with the instructor.

Evening and Saturday hours are available.

Join Zoom Meeting

<https://ufl.zoom.us/j/93437778168?pwd=rqCvR0iSRWztdNgvOfrNPwb6lRoKoE.1>

Meeting ID: 934 3777 8168

Passcode: 169910

One tap mobile

+13052241968,,93437778168# US

**Course Overview or Purpose**

This advanced epidemiology methods course in Psychiatric Epidemiology will cover concepts, history, measures, methods and analytic techniques to study the risks, prevalence and incidence, course, comorbidities and consequences of major mental disorders (mood and anxiety disorders, schizophrenia, personality disorders, alcohol and drug abuse and dependence). Psychiatric

epidemiology studies in general and specific populations internationally will be discussed for their methods, measures and findings. Students will be required to further their own research projects as part of the class.

### **Relation to Program Outcomes**

This course is one of several epidemiology courses that can be taken to meet the advanced methods requirement in the PhD in epidemiology curriculum. Advanced courses help to meet the student outcome of becoming an independent researcher.

**Prerequisites** Epidemiology Methods I and II or permission of the instructor.

### **Course Objectives and/or Goals**

Upon successful completion of the course, students should be able to

1. Define and describe recent trends in psychiatric epidemiology, including the emergence of transdiagnostic approaches and computational psychiatry.
2. Design a descriptive psychiatric epidemiologic study including choosing and justifying methods and assessment.
3. Discuss the epidemiology of at least two common major psychiatric disorders.
4. Discriminate between DSM systems of diagnosis and common research measures.
5. Formulate an impact statement for a research project clarifying the importance of the psychiatric epidemiology question to the field of epidemiology, public health and/or medical care.

### **Course Materials**

#### **Required for Reference (Available in most libraries)**

Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision (DSM-5-TR®) Washington, D.C.: American Psychiatric Association, 2022. UF Health Science Library, Reserves, (RESV) and Library West. Reference (3rd Floor); WM 15 D536 2022

You may also use DSM-5, 2013. Available in the UF Libraries and on line through the library:

1. eBook: Full Text Online. Diagnostic and statistical manual of mental disorders: DSM-5 (0-89042-554-X, 978-0-89042-554-1), 5th ed. / American Psychiatric Association. In PsychiatryOnline Premium Package.
2. In-Library Use, RC455.2.C4 D536 2013, UF LEGAL INFORMATION CENTER - Reference
3. 2-Hour Loan, RC455.2 .C4 D536 2013, UF EDUCATION LIBRARY - Reserve
4. In-Library Use, RC455.2.C4 D54 2013, UF LIBRARY WEST: - Reference Desk (2nd Floor).

All other Course Material will be available on the course page in Canvas.

Readings will appear next to the date assigned, below.

Instructional materials for this course consist of only those materials specifically reviewed, selected, and assigned by the instructor(s). The instructor(s) is only responsible for these instructional materials.

#### **Recommended for Further Study**

Keyes KM & Galeo S. *Population Health Science*. New York: Oxford University Press, 2016.

Saunders JB, Conigrave KM, Latt NC, Nutt DJ, Marshall EJ, Ling W, Higuchi S. *Addiction Medicine*. Second Ed. Oxford, UK: Oxford University Press, 2016.

Streiner DL, Norman GR & Cairney J. *Health Measurement Scales: A Practical Guide to their Development and Use*. Oxford, UK: Oxford University Press, 2015.

Susser E, Schwartz S, Morabia A, & Bromet EJ. *Psychiatric Epidemiology*. New York: Oxford University Press; 2006.

Tsaung MT, Tohen M. *Textbook in Psychiatric Epidemiology (2<sup>nd</sup> Ed.)*. New York: Wiley-Liss; 2002.

Nunnally JC, Bernstein IH. *Psychometric Theory (3<sup>rd</sup> Ed)*. New York: McGraw Hill, 1994.

The NIH Toolbox for Assessment of Neurological and Behavioral Function  
<http://www.healthmeasures.net/explore-measurement-systems/nih-toolbox>

## **Instructional Methods**

### **On Campus Face-to-Face**

This course will provide a blended approach of face-to-face instructional sessions and online sessions to accomplish the student learning objectives of this course; register for the appropriate method (face-to-face, online synchronous or asynchronous). Most students will receive instruction in the classroom.

**Face-to-Face Sessions will end before the 3:50 class ending time. Online material, discussions and group exercises will be used for instruction during the final hour of class time.**

**Please bring a computer or tablet with online capability to the classroom for exercises. Please let me know if you do not want to be videoed to share through our zoom meetings.**

### **Online Synchronous Sessions**

Our class sessions may be audio-visually recorded for students in the class to refer back to and for enrolled students unable to attend synchronously to receive instruction. Students who participate in the classroom, with their camera engaged, or utilize a profile image are agreeing to have their video or image recorded. *If you are unwilling to consent to have your profile or video image recorded, be sure to keep your camera off and do not use a profile image.* Likewise, students who unmute during class and participate orally are agreeing to have their voices recorded. If you are not willing to consent to have your voice recorded during class, you will need to keep your mute button activated and communicate exclusively using the "chat" feature, which allows students to type questions and comments live.

This course utilizes lectures, discussions, chats, group work and other assignments, including readings, to meet course objectives. If you are registering for online course completion, be aware that group work will still be assigned with needed technology to facilitate the interaction.

### **Recording Within the Course:**

Students are allowed to record video or audio of class lectures. However, the purposes for which these recordings may be used are strictly controlled. The only allowable purposes are (1) for personal educational use, (2) in connection with a complaint to the university, or (3) as evidence in, or in preparation for, a criminal or civil proceeding. *All other purposes are prohibited. Specifically, students may not publish recorded lectures without the written consent of the instructor.*

A “class lecture” is an educational presentation intended to inform or teach enrolled students about a particular subject, including any instructor-led discussions that form part of the presentation, and delivered by any instructor hired or appointed by the University, or by a guest instructor, as part of a University of Florida course. *A class lecture does not include lab sessions, student presentations, clinical presentations such as patient history, academic exercises involving solely student participation, assessments (quizzes, tests, exams), field trips, private conversations between students in the class or between a student and the faculty or lecturer during a class session.*

Publication without permission of the instructor is prohibited. To “publish” means to share, transmit, circulate, distribute, or provide access to a recording, regardless of format or medium, to another person (or persons), including but not limited to another student within the same class section. Additionally, a recording, or transcript of a recording, is considered published if it is posted on or uploaded to, in whole or in part, any media platform, including but not limited to social media, book, magazine, newspaper, leaflet, or third party note/tutoring services. A student who publishes a recording without written consent may be subject to a civil cause of action instituted by a person injured by the publication and/or discipline under UF Regulation 4.040 Student Honor Code and Student Conduct Code.

**(For more on students expectations, see below).**

### **Course Requirements/Evaluation/Grading**

Letter Grade.

### **ASSIGNMENTS**

<b>#</b>	<b>Assignment</b>	<b>Date Due</b>	<b>Criteria for Grading</b>	<b>Pts</b>
1	Individual postings comprising an online discussion Example, Discussion on alcohol use disorder in the DSM 5	<b>Varies</b>	Students will be graded on the quality and quantity of their postings related to classroom discussions and instructor-initiated prompts.	27
2	During all classes, students will participate in group assignments. During or after class time, students will work in a group to (for instance) (a) choose a best research	<b>Varies</b>	Students will be graded on the quality of their participation and subsequent	10

	question, (b) sampling strategy, (c) measure or (d) strategy to advance the field. 5 points for participation in each activity.		posting/presentation. Each session will contribute 2.5 points to the total.	
3	Epidemiology Paper: 2 - 4 page paper clearly defining a major mental health or substance abuse disorder using diagnostic criteria and detailing its epidemiology based on the literature, including onset, duration, and course if treated or untreated. Public health consequences of disorder must also be addressed.	<b>Due February 17<sup>th</sup> at noon</b>	Clear presentation, and concise writing.	15
4	Measurement Paper: 2 - 5 page paper critically analyzing the ways the chosen disorder has been measured. This is NOT a paper on the DSM or ICD; measures must be selected that purport to accurately capture a psychiatric disorder (not just general symptoms) and at least 2 measures should be contrasted for burden on respondent, language and construction, reliability, and validity. Check the <a href="https://www.phenxtoolkit.org/toolkit">https://www.phenxtoolkit.org/toolkit</a> for applicable measures recommended for use by NIH.	<b>Due March 3rd at noon</b>	Grading metric will be provided in class.	10
5	Study Presentation. Students will present the study design, sample, measures and analytic strategy for one psychiatric epidemiology publication from 2015 or later.	<b>Student choice of class session</b>	Presentation skill and content. Grading metric will be provided in class.	13
6	Student Final Paper. Students are responsible for preparing a final paper of up to 20 double-spaced pages with at least 10 references from the scholarly literature. While the content of the paper may vary by whatever is the relevant “next step” for the student’s progress in their degree, each paper must focus on (a) at least one psychiatric disorder or diagnostically relevant symptom of a disorder; and contain (b) information on the public health impact and significance of the disorder on a specific population, and (c) a methodology and analysis using a review process or statistical technique. This may be a literature review if the methodology is provided; it may also be a review of programs or interventions. Carefully specify inclusion criteria, review criteria, and present appropriate tables. Students may choose to discuss the topic with the professor by week 10, and/or to hand in a draft for the professor’s consideration of appropriateness by the 12 <sup>th</sup> week of class.	<b>Due April 26<sup>th</sup> at 12 midnight</b>	Grading metric online under assignments.	25

Extra Credit	Points worth up to 5% of the grade will be given for excellence in contribution (critical thinking, starting a discussion, probing topic, etc.) to the classroom discussions	None	Quality of and timing of comments made in the classroom. High quality comments will spur other discussion and clarification of lecture.	5 extra credit
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Percentage or points earned in class	93%-100%	90%-92%	87%-89%	83%-86%	80%-82%	77%-79%	73%-76%	70%-72%	67%-69%	63%-66%	60%-62%	Below 60%
Letter Grade equivalent	A	A-	B+	B	B-	C+	C	C-	D+	D	D-	E

Letter Grade	A	A-	B+	B	B-	C+	C	C-	D+	D	D-	E	WF	I	NG	S-U
Grade Points	4.0	3.67	3.33	3.0	2.67	2.33	2.0	1.67	1.33	1.0	0.67	0.0	0.0	0.0	0.0	0.0

For greater detail on the meaning of letter grades and university policies related to them, see the Registrar's Grade Policy regulations at <http://www.registrar.ufl.edu/catalog/policies/regulationgrades.html>

### **Topical Outline**

Readings, topics and class start and end time subject to instructor change – with notification to students.

Week Date	Topic(s)	Reading or Instructional Material	Assignment Due
1 1/15	Psychiatric Epidemiology: Past, Present, Future	<p>Lovell AM. The World Health Organization and the contested beginnings of psychiatric epidemiology as an international discipline: one rope, many strands. <i>Inter J of Epi.</i> 2014; i6-i18. <a href="https://doi:10.1093/ije/dyu125">https://doi:10.1093/ije/dyu125</a></p> <p>Grotzinger AD, Werme J, Peyrot WJ, et al. Mapping the genetic landscape across 14 psychiatric disorders. <i>Nature.</i> Published online December 10, 2025. <a href="https://doi:10.1038/s41586-025-09820-3">https://doi:10.1038/s41586-025-09820-3</a></p> <p>For extra reading: The WPA-Lancet Psychiatry Commission. On the Future of Psychiatry. <i>Lancet Psychiatry.</i> 2017;4:775-818. (Very long reading).</p>	1 after class session
2 1/22	Landmarks in	Kessler RC, McGonagle KA, Zhao S, Nelson CB, Hughes M, Eshleman S, Wittchen HU, Kendler KS. Lifetime and	1 after class; 2 reading

	Psychiatric Epidemiology	<p>12-month prevalence of DSM-III-R psychiatric disorders in the United States: results from the National Comorbidity Survey. <i>Arch Gen Psychiatry</i>. 1994;51:8-19. <a href="https://doi:10.1001/archpsyc.1994.03950010008002">https://doi:10.1001/archpsyc.1994.03950010008002</a></p> <p>Demazeux S. From the Midtown Manhattan Study to the Epidemiologic Catchment Area Study: the advent of mechanical objectivity in psychiatry. <i>Hist Psychiatry</i>. 2024;35(1):46-61. <a href="https://doi:10.1177/0957154X231212098">https://doi:10.1177/0957154X231212098</a></p> <p>Chou SP, Huang B, Goldstein R, Grant BF. Temporal associations between physical illnesses and mental disorders--results from the Wave 2 National Epidemiologic Survey on Alcohol and Related Conditions (NESARC). <i>Compr Psychiatry</i>. 2013;54(6):627-638. <a href="https://doi:10.1016/j.comppsy.2012.12.020">https://doi:10.1016/j.comppsy.2012.12.020</a></p>	
3 1/29	Diagnostic Systems, including DSM and ICD	<p>Gaebel W, Zielasek J, Reed GM. Mental and behavioural disorders in the ICD-11: concepts, methodologies, and current status. <i>Zaburzenia psychiczne i behawioralne w ICD-11: koncepcje, metodologie oraz obecny status. Psychiatr Pol</i>. 2017;51(2):169-195. <a href="https://doi:10.12740/PP/69660">https://doi:10.12740/PP/69660</a></p> <p>Regier DA, Narrow WE, Kuhl EA, Kupfer DJ. The conceptual development of DSM-V. <i>Am J Psychiatry</i>. 2009;166(6):645-650. <a href="https://doi:10.1176/appi.ajp.2009.09020279">https://doi:10.1176/appi.ajp.2009.09020279</a></p> <p>For extra reading: Keeley JW, Reed GM, Roberts MC, et al. Developing a science of clinical utility in diagnostic classification systems. Field study strategies for ICD-11 Mental and Behavioral Disorders. <i>American Psychologist</i>. 2016; 71(1): 3-16. <a href="https://doi:10.1037/a0039972">https://doi:10.1037/a0039972</a></p>	1, 5 if scheduled
4 2/5 ONLINE ONLY!	Alternative Diagnostic Systems	<p>Clark LA, Cuthbert B, Lewis-Fernández R, Narrow WE, Reed GM. Three Approaches to Understanding and Classifying Mental Disorder: ICD-11, DSM-5, and the National Institute of Mental Health's Research Domain Criteria (RDoC). <i>Psychol Sci Public Interest</i>. 2017 Sep;18(2):72-145. doi: 10.1177/1529100617727266. <a href="http://journals.sagepub.com/doi/pdf/10.1177/1529100617727266">http://journals.sagepub.com/doi/pdf/10.1177/1529100617727266</a></p> <p>Conway CC, Forbes MK, Forbush KT, Fried EI, Hallquist MN, Kotov R, et al. A Hierarchical Taxonomy of Psychopathology Can Transform Mental Health Research. <i>Perspect Psychol Sci</i>. 2019 May;14(3):419-436. <a href="https://doi:10.1177/1745691618810696">https://doi:10.1177/1745691618810696</a></p>	1; 5 if scheduled

		<p>For extra reading: Degenhardt L, Linskey M, Coffey C, Patton G. ‘Diagnostic orphans’ among young adult cannabis users: persons who report dependence symptoms but do not meet diagnostic criteria  Drug and Alcohol Dependence 2002; 67(2):205-212  <a href="https://doi.org/10.1016/S0376-8716(02)00064-9">https://doi.org/10.1016/S0376-8716(02)00064-9</a></p> <p>CLASS EXERCISE: WRITING DIET</p>	
5 2/12	Conceptualizing and Measuring Psychopathology	<p>Eaton WW., Hall ALF, Macdonald R., &amp; Mckibben J. Case identification in psychiatric epidemiology: A review. <i>International Review of Psychiatry</i>. 2007; 19(5): 497–507.  <a href="https://doi.org/10.1080/09540260701564906">https://doi.org/10.1080/09540260701564906</a><a href="https://www.tandfonline.com/doi/abs/10.1080/09540260701564906">https://www.tandfonline.com/doi/abs/10.1080/09540260701564906</a></p> <p>For extra reading: Assessment Measures and Cultural Formulation. In: <i>DSM-5</i>. 5th ed. Washington, D.C.: American Psychiatric Association; 2013: 733 – 760.</p> <p>For extra reading: Streiner D, Norman GR, Cairney J. <i>Health Measurement Scales: A Practical Guide to their Development and Use</i>. 5<sup>th</sup> Ed. Chapter 4: Scaling Responses, pp. 38-73. Cambridge: Oxford University Press. 2015.</p>	1, 3 due, 5 if scheduled
6 2/19	Methods for Psychiatric Epidemiology Study: Stigma	<p>Pachankis JE, Hatzenbuehler ML, Wang K et al. The Burden of Stigma on Health and Well-Being: A Taxonomy of Concealment, Course, Disruptiveness, Aesthetics, Origin, and Peril Across 93 Stigmas. <i>Personality and Social Psychology Bulletin</i>. 2018;44(4):451-474.  <a href="https://doi.org/10.1177/0146167217741313">https://doi.org/10.1177/0146167217741313</a></p> <p>Welsing PM, Rengerink KO, Collier S et al., Series: Pragmatic Trials and Real World Evidence: Paper 6. Outcome measures in the real world. <i>Journal of Clinical Epidemiology</i> 90 (2017):99-107.  <a href="https://doi.org/10.1016/j.jclinepi.2016.12.022">https:// DOI:10.1016/j.jclinepi.2016.12.022</a></p>	1, 5 if scheduled
7 2/26	Methods in Psychiatric Epidemiology and Stigma	<p>Lesko CR, Hutton HE, Fojo AT, Shen NM, Moore RD, Chander G. Depression and HIV viral nonsuppression among people engaged in HIV care in an urban clinic, 2014-2019. <i>AIDS</i>. 2021;35(12):2017-2024.  <a href="https://doi.org/10.1097/QAD.0000000000003005">https://doi.org/10.1097/QAD.0000000000003005</a></p> <p>Lesko CR, Fox MP, Edwards JK. A Framework for Descriptive Epidemiology. <i>Am J Epidemiol</i>. 2022;191(12):2063-2070. <a href="https://doi.org/10.1093/aje/kwac115">https://doi.org/10.1093/aje/kwac115</a></p>	1; 4 due; 5 if scheduled

		For extra reading: Fox MP, Murray EJ, Lesko CR, Sealy-Jefferson S. On the Need to Revitalize Descriptive Epidemiology. <i>Am J Epidemiol.</i> 2022;191(7):1174-1179. <a href="https://doi:10.1093/aje/kwac056">https://doi:10.1093/aje/kwac056</a>	
8 3/14	Personality Disorders	<p>First MB, Gaebel W, Maj M, Stein DJ, Kogan CS, Saunders JB, Poznyak VB, Gureje O, Lewis-Fernández R, Maercker A, Brewin CR, Cloitre M, Claudino A, Pike KM, Baird G, Skuse D, Krueger RB, Briken P, Burke JD, Lochman JE, Evans SC, Woods DW, Reed GM. An organization- and category-level comparison of diagnostic requirements for mental disorders in ICD-11 and DSM-5. <i>World Psychiatry.</i> 2021 Feb;20(1):34-51. PMID: 33432742; PMCID: PMC7801846. <a href="https://onlinelibrary.wiley.com/doi/10.1002/wps.20825">https://onlinelibrary.wiley.com/doi/10.1002/wps.20825</a></p> <p>Wright AGC, Hopwood CJ. Integrating and distinguishing personality and psychopathology. <i>J Pers.</i> 2022;90(1):5-19. <a href="https://doi:10.1111/jopy.12671">https://doi:10.1111/jopy.12671</a></p> <p>For extra reading: Simms LJ. Consensus building and clinical translation: The path to an impactful and evidence-based personality disorder classification system. <i>Personality and Mental Health.</i> 2021;15: 3–7. Published online in Wiley Online Library (wileyonlinelibrary.com) <a href="https://doi:10.1002/pmh.1504">https://doi:10.1002/pmh.1504</a></p>	2 after class, 5 if scheduled
9 3/12	Mood Disorders and Anxiety Disorders  DAGs	<p>Murphy JM, Laird NM, Monson RR, Sobol AM, Leighton AH. A 40-year perspective on the prevalence of depression: The Stirling County study. <i>Arch Gen Psychiatry.</i> March 2000; 57(3) : 209-215. <a href="https://DOI:10.1001/archpsyc.57.3.209">https://DOI:10.1001/archpsyc.57.3.209</a></p> <p>Bromet E, Andrade LH, Hwang I, Sampson NA, Alonso J, de Girolamo G, de Graaf R, Demyttenaere K, Hu C, Iwata N, Karam AN, Kaur J, Kostyuchenko S, Lépine JP, Levinson D, Matschinger H, Mora ME, Browne MO, Posada-Villa J, Viana MC, Williams DR, Kessler RC. Cross-national epidemiology of DSM-IV major depressive episode. <i>BMC Med.</i> July 2011;9:90. <a href="https://doi:2010.1186/1741-7015-9-90">https://doi:2010.1186/1741-7015-9-90</a> (Skim and read tables).</p> <p>Jiang T, Smith ML, Street AE, et al. A comorbid mental disorder paradox: Using causal diagrams to understand associations between posttraumatic stress disorder and suicide. <i>Psychol Trauma.</i> 2021;13(7):725-729. <a href="https://doi:10.1037/tra0001033">https://doi:10.1037/tra0001033</a></p> <p>Cuijpers P, Miguel C, Harrer M, et al. Cognitive behavior therapy vs. control conditions, other psychotherapies,</p>	2 after in-class time, 5 if scheduled

		<p>pharmacotherapies and combined treatment for depression: a comprehensive meta-analysis including 409 trials with 52,702 patients. <i>World Psychiatry</i>. 2023;22(1):105-115.  <a href="https://doi:10.1002/wps.21069">https://doi:10.1002/wps.21069</a></p>	
<b>Spring Break</b>			
10 4/2	<p>Alcohol and Drug Use Disorders</p> <p>GUEST LECTURE:  Matthew Ellis, PhD, MSE, Ass't Professor of Psychiatry, WUSM  <a href="https://psychiatry.wustl.edu/people/matthew-ellis-phd-mpe/">https://psychiatry.wustl.edu/people/matthew-ellis-phd-mpe/</a></p>	<p>Fitzgerald ND, Liu Y, Wang A, et al. Sequencing hour-level temporal patterns of polysubstance use among persons who use cocaine, alcohol, and cannabis: A back-translational approach. <i>Drug Alcohol Depend</i>. 2024;258:111272.  <a href="https://doi:10.1016/j.drugalcdep.2024.111272">https://doi:10.1016/j.drugalcdep.2024.111272</a></p> <p>Keyes KM, Miech R. Age, period, and cohort effects in heavy episodic drinking in the US from 1985 to 2009. <i>Drug Alcohol Depend</i>. 2013;132(1-2):140-148.  <a href="https://doi:10.1016/j.drugalcdep.2013.01.019">https://doi:10.1016/j.drugalcdep.2013.01.019</a></p> <p>Methods: Cottler LB, Compton WM, Brown L, Shell A, et al. The Discrepancy Interview Protocol: A method for evaluating and interpreting discordant survey responses. <i>International Journal of Methods in Psychiatric Research</i>. Oct 1994;Vol 4(3):173-182.  <a href="https://onlinelibrary.wiley.com/doi/10.1111/j.1360-0443.2009.02649.x">https://onlinelibrary.wiley.com/doi/10.1111/j.1360-0443.2009.02649.x</a></p>	2; 5 if scheduled

11 4/9	Social Problems, Stress and Psychopathology	<p>Cacioppo JT, Cacioppo S, Capitanio JP, Cole SW. The neuroendocrinology of social isolation. <i>Annu Rev Psychol.</i> 2015;66:733-767. <a href="https://doi:10.1146/annurev-psych-010814-01524">https://doi:10.1146/annurev-psych-010814-01524</a></p> <p>Rnic K, Santee AC, Hoffmeister JA et al. The vicious cycle of psychopathology and stressful life events: A meta-analytic review testing the stress generation model. <i>Psychological Bulletin.</i> 2023;149(5-6):330-369. <a href="https://doi.org/10.1037/bul0000390">https://doi.org/10.1037/bul0000390</a></p> <p>Rosenblau G, Frolichs K, Korn CW. A neuro-computational social learning framework to facilitate transdiagnostic classification and treatment across psychiatric disorders. <i>Neurosci Biobehav Rev.</i> 2023;149:105181. <a href="https://doi:10.1016/j.neubiorev.2023.105181">https://doi:10.1016/j.neubiorev.2023.105181</a></p> <p>De Panfilis C, Lis S. Difficulties in updating social information in personality disorders: A commentary on the article by Rosenblau et al. <i>Neurosci Biobehav Rev.</i> 2023;153:105387. <a href="https://doi:10.1016/j.neubiorev.2023.105387">https://doi:10.1016/j.neubiorev.2023.105387</a></p>	5 (if scheduled)
12 4/14	Psychotic Disorders	<p>Maj M, van Os J, De Hert M, Gaebel W, Galderisi S, Green MF, Guloksuz S, Harvey PD, Jones PB, Malaspina D, McGorry P, Miettunen J, Murray RM, Nuechterlein KH, Peralta V, Thornicroft G, van Winkel R, Ventura J. The clinical characterization of the patient with primary psychosis aimed at personalization of management. <i>World Psychiatry.</i> 2021 Feb;20(1):4-33. doi: 10.1002/wps.20809. PMID: 33432763; PMCID: PMC7801854. <a href="https://pmc.ncbi.nlm.nih.gov/articles/PMC7801854/">https://pmc.ncbi.nlm.nih.gov/articles/PMC7801854/</a></p> <p>Methods: Haan M &amp; Oongena Y. Chapter 27 - Tailored and targeted designs for hard-to-survey populations, In: Tourangeau R, Edwards B, Johnson TP, Wolter KM, Bates N. Eds. <i>Hard-to-Survey Populations</i>, pp. 555-574. Cambridge University Press, 2014. Book DOI: <a href="http://dx.doi.org/10.1017/CBO9781139381635">http://dx.doi.org/10.1017/CBO9781139381635</a></p>	1; 5 if scheduled)
13 4/16	Important Contemporary Issues (a: vaccines for SUD; b: food and behavioral addictions; c:	<p>Kosten TR. Vaccines as Immunotherapies for Substance Use Disorders. <i>Am J Psychiatry.</i> 2024 May 1;181(5):362-371. doi: 10.1176/appi.ajp.20230828. PMID: 38706331.</p> <p>Krupa H, Gearhardt AN, Lewandowski A, Avena NM. Food Addiction. <i>Brain Sciences.</i> 2024; 14(10):952. <a href="https://doi.org/10.3390/brainsci14100952">https://doi.org/10.3390/brainsci14100952</a></p>	1, 7 due on Canvas by April 26

	Conspiracy theories; Gaming and Gambling	Holovda B. Understanding and Evaluating Conspiracy Theories: A Primer for the General and Forensic Psychiatrist. <i>Psychiatric Times</i> . 2024; 41(11) <a href="#">Understanding and Evaluating Conspiracy Theories: A Primer for the General and Forensic Psychiatrist</a>  Fontaine M, Lemerancier C, Bonnaire C, et al. Gambling and Aging: An Overview of a Risky Behavior. <i>Behav Sci (Basel)</i> . 2023;13(6):437. Published 2023 May 23. doi:10.3390/bs13060437 <a href="https://pmc.ncbi.nlm.nih.gov/articles/PMC10295151/">https://pmc.ncbi.nlm.nih.gov/articles/PMC10295151/</a>	
FOR FURTHER INFORMATION – NO CLASS DATE	Translational Research  Professional Development	Sunderji N, Nicholas Angl E, Polaha J, Gao C. Why and how to use patient-oriented research to promote translational research. <i>Fam Syst Health</i> . 2019;37(1):1-9. <a href="https://doi:10.1037/fsh0000405">https://doi:10.1037/fsh0000405</a>  Wilkins CH, Miller ST, Richmond AN, Carrasquillo O. Community-Engaged Research - Essential to Addressing Health Inequities. <i>N Engl J Med</i> . 2023;389(21):1928-1931. <a href="https://doi:10.1056/NEJMp2307774">https://doi:10.1056/NEJMp2307774</a>	OPTIONAL MATERIAL

**STUDENT EXPECTATIONS, ROLES, AND OPPORTUNITIES FOR INPUT**

**Policy Related to Class Attendance**

Absences must be conveyed to the course instructor in advance whenever possible, or on the day of the absence for illness or emergency. Students are expected to attend and be prepared to participate in all class sessions. Personal issues concerning class attendance or fulfillment of course requirements will be handled individually.

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:  
<https://catalog.ufl.edu/ugrad/current/regulations/info/attendance.aspx>

According to the UF Graduate School Catalog (link below) “In general, acceptable reasons for absences from class include illness, serious family emergencies, special curricular requirements, military obligation, severe weather conditions, religious holidays, and participation in official University activities. Absences from class for court-imposed legal obligations (e.g., jury duty or subpoena) must be excused. Other reasons also may be approved.” For more information on UF’s attendance policy, visit  
<https://catalog.ufl.edu/ugrad/current/regulations/info/attendance.aspx>.

**Policy Related to Make-up Exams or Other Work**

Instructors set the specific attendance policies for their courses. Students enrolled in a course are responsible for satisfying all academic objectives as defined by the instructor.

Make-up work will be allowed on an individual basis after an excused absence (see above)  
Students should consult with the professor for new deadlines for assignments. Please consult the university guidelines for more information on makeup policies:

<https://catalog.ufl.edu/ugrad/current/regulations/info/attendance.aspx>.

### **Statement of University's Honesty Policy** **University of Florida Academic Honesty Statements**

Students are expected to act in accordance with the University of Florida policy on academic integrity. As a student at the University of Florida, you have committed yourself to uphold the Honor Code, which includes the following pledge:

**“We, the members of the University of Florida community, pledge to hold ourselves and our peers to the highest standards of honesty and integrity.”**

You are expected to exhibit behavior consistent with this commitment to the UF academic community, and on all work submitted for credit at the University of Florida, the following pledge is either required or implied:

**“On my honor, I have neither given nor received unauthorized aid in doing this assignment.”**

It is your individual responsibility to know and comply with all university policies and procedures regarding academic integrity and the Student Honor Code. Violations of the Honor Code at the University of Florida will not be tolerated. Violations will be reported to the Dean of Students Office for consideration of disciplinary action. For additional information regarding Academic Integrity, please see Student Conduct and Honor Code or the Graduate Student Website for additional details:

<https://www.dso.ufl.edu/sccr/process/student-conduct-honor-code/>

<http://gradschool.ufl.edu/students/introduction.html>

Please remember cheating, lying, misrepresentation, or plagiarism in any form is unacceptable and inexcusable behavior.

### **Citations and Plagiarism**

The two key purposes of citation are to: 1) give appropriate credit to the authors of information, research findings, and/or ideas (and avoid plagiarism), and 2) facilitate access by your readers to the sources you use in your research.

**Quotations:** When directly quoting an outside source, the borrowed text, regardless of the amount, must be surrounded by quotation marks or block quoted. Quoted text over two lines in length should be single-spaced and indented beyond the normal margins. Every quote must include a source—the author, title, volume, page numbers, etc.—whether an internal reference, footnote, or endnote is used in conjunction with a bibliography page. NOTE: graduate students in epidemiology seldom use quotes in papers.

**Paraphrasing or Citing an Idea:** When summarizing an outside source in your own words or citing another person's ideas, quotation marks are not necessary, but the source must be included. This includes, but is not confined to, personal communications from other students,

faculty members, experts in the field, summarized ideas from published or unpublished resource, and primary methods derived from published or unpublished sources. Use the general concept of “when in doubt – cite.”

Plagiarism is a serious violation of the academic honesty policy of the College. If a student plagiarizes others’ material or ideas, UF Policies on Honesty and honor code violations, noted above, will be followed. NOTE: AI provides multiple methods to check for plagiarism, and students can use Turnitin to check their own work before handing it in. Plagiarism will not be tolerated. This includes self-plagiarism of papers prepared to meet other requirements.

The three keys of acceptable citation practice are: 1) thoroughness, 2) accuracy, and 3) consistency. In other words, be sure to fully cite all sources used (thoroughness), be accurate in the citation information provided, and be consistent in the citation style you adopt. **PLEASE note that citations in this field should include classic material as well as recent work.** All references should include the following elements: 1) last names along with first and middle initials; 2) full title of reference; 3) name of journal or book; 4) publication city, publisher, volume, and date; and 5) page numbers referenced. When citing information from the Internet, include the WWW address at the end, with the “access date” (i.e., when you obtained the information), just as you would list the document number and date for all public documents. When citing ideas or words from an individual that are not published, you can write “personal communication” along with the person’s name and date of communication.

**American Medical Association (AMA) or American Psychological Association (APA) styles of citation are preferred by this professor.**

### **Class Demeanor Expected by the Professor/ Communication Expectations**

As an online, virtual and/or in-person classroom of scholars, the instructor will treat students with respect and expect respect in return. The classroom climate will be supportive, encouraging and open. To this end, no one should be taking calls or texts or using their laptops for other purposes than taking notes while the class is in session, except in the case of emergency. Electronic items must be turned off if they appear to detract from classroom discussion and attention. Please listen attentively; participation is required. When opinions differ, please listen first, and then prepare to comment. Please give the same consideration to all on-line comments. First consider what was said. Wait before you reply; then reply when you can do so respectfully and with full consideration to the thoughts and feelings of your peers. If you feel you have been treated disrespectfully by any member of the scholastic community involved in this course, please bring this to the instructor’s attention privately for remediation.

### **Food and Demeanor**

Class sessions occur during the noon hour. Eating and drinking in the classroom is acceptable unless the rules of the physical location prohibit it.

### **Professionalism and Epidemics or Pandemics**

As students pursuing a path in the health professions or public health, it is crucial to demonstrate professional behaviors that reflect integrity and commitment to the health of patients, fellow health professionals, and to populations we serve. To accomplish this, a strong responsibility for

the well-being of others must be evident in our decisions, along with accountability for our actions. Professionalism in the health disciplines requires adherence to high standards of conduct that begin long before graduation. This is particularly true during times of health emergencies such as the COVID pandemic, given our professional habits can have a direct impact upon the health of persons entrusted to us.

If you are not vaccinated, get vaccinated. Please call your primary care provider if you are ill and need immediate care or the UF Student Health Care Center at 352-392-1161.

### **Policy Related to Guests Attending Class**

Only registered students are permitted to attend class. However, we recognize that students who are caretakers may face occasional unexpected challenges creating attendance barriers. Therefore, by exception, a department chair or his or her designee (e.g., instructors) may grant a student permission to bring a guest(s) for a total of two class sessions per semester. This is two sessions total across all courses. No further extensions will be granted. Please note that guests are **not** permitted to attend either cadaver or wet labs. Students are responsible for course material regardless of attendance. For additional information, please review the Classroom Guests of Students policy in its entirety. Link to full policy:

<http://facstaff.phhp.ufl.edu/services/resourceguide/getstarted.htm>

### **Online Faculty Course Evaluation Process**

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/public-results/>.

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## **SUPPORT SERVICES**

### **Accommodations for Students with Disabilities**

If you require classroom accommodation because of a disability, it is strongly recommended you register with the Dean of Students Office <http://www.dso.ufl.edu> within the first week of class or as soon as you believe you might be eligible for accommodations. The Dean of Students Office will provide documentation of accommodations to you, which you must then give to me as the instructor of the course to receive accommodations. Please do this as soon as possible after you receive the letter. Students with disabilities should follow this procedure as early as possible in the semester. The College is committed to providing reasonable accommodations to assist students in their coursework.

### **Importance of Self-Care**

The University of Florida community is committed to and cares about all students. You deserve the proper time and attention needed to support your mental health and are encouraged to

practice self-care to help you remain focused and engaged. This might mean eating well, getting enough sleep, exercise, meditation, etc. College life can be overwhelming at times but know that you are not alone if you're feeling stressed. For many of us, we may be experiencing multiple stressors (e.g., school, work, family, systems of oppression, relationship concerns, etc.) that may cause additional stress. Please remember to practice self-care and reach out for support if and when you need it. You can visit the UF Counseling & Wellness Center (CWC) to find resources related to health and well-being, managing crisis, coping with stress/anxiety, strengthening resiliency through skill-building, and more at [counseling.ufl.edu](https://counseling.ufl.edu). Or call them directly at 352-392-1575 to schedule a brief consultation appointment.

### **Mental Health & Wellness**

The University of Florida community is committed to and cares about all students and provides campus resources to help you to maintain your safety, health, and well-being. We understand that as a student you may experience a range of issues that can cause barriers to learning, such as strained relationships, increased anxiety, alcohol/drug concerns, depression, difficulty concentrating and/or lack of motivation. These stressful moments can impact academic performance or reduce your ability to engage. The UF Counseling & Wellness Center (CWC) offers services to assist you with addressing these or ANY other concerns you may be experiencing. If you or someone you know are suffering from any challenges, you should reach out for support. You can seek confidential mental health support through the CWC by contacting them at 352-392-1575 for a brief consultation. You can also learn about available CWC resources to sustain your mental health, such as crisis support, skill-building workshops, online self-guided therapy programs, group services, short-term individual counseling, and more by visiting the CWC website: [counseling.ufl.edu](https://counseling.ufl.edu).

### **Counseling and Student Health**

Students sometimes experience stress from academic expectations and/or personal and interpersonal issues that may interfere with their academic performance. If you find yourself facing issues that have the potential to or are already negatively affecting your coursework, you are encouraged to talk with an instructor and/or seek help through University resources available to you.

- U Matter, We Care: If you or someone you know is in distress, please contact [umatter@ufl.edu](mailto:umatter@ufl.edu), 352-392-1575, or visit U Matter, We Care website to refer or report a concern and a team member will reach out to the student in distress.
- Counseling and Wellness Center: Visit the Counseling and Wellness Center website or call 352-392-1575 for information on crisis services as well as non-crisis services.
- Student Health Care Center: Call 352-392-1161 for 24/7 information to help you find the care you need, or visit the Student Health Care Center website.
- University Police Department: Visit UF Police Department website 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; Visit the UF Health Emergency Room and Trauma Center website.

- GatorWell Health Promotion Services: For prevention services focused on optimal wellbeing, including Wellness Coaching for Academic Success, visit the GatorWell website or call 352-2734450.
- Crisis intervention is always available 24/7 from Alachua County Crisis Center: (352) 264-6789  
<http://www.alachuacounty.us/DEPTS/CSS/CRISISCENTER/Pages/CrisisCenter.aspx>

For off-campus students, please contact the professor for assistance with locating appropriate resources.

Do not wait until you reach a crisis to come in and talk with us. We have helped many students through stressful situations impacting their academic performance. You are not alone so do not be afraid to ask for assistance.

**In case of emergency, contact Gainesville or your Police Department by dialing 911.**

### **Inclusive Learning Environment**

Public health and health professions are based on the belief in human dignity and on respect for the individual. As we share our personal beliefs inside or outside of the classroom, it is always with the understanding that we value and respect diversity of background, experience, and opinion, where every individual feels valued. We believe in, and promote, openness and tolerance of differences in ethnicity and culture, and we respect differing personal, spiritual, religious and political values. We further believe that celebrating such diversity enriches the quality of the educational experiences we provide our students and enhances our own personal and professional relationships. We embrace The University of Florida's Non-Discrimination Policy, which reads, "The University shall actively promote equal opportunity policies and practices conforming to laws against discrimination. The University is committed to non-discrimination with respect to race, creed, color, religion, age, disability, sex, sexual orientation, gender identity and expression, marital status, national origin, political opinions or affiliations, genetic information and veteran status as protected under the Vietnam Era Veterans' Readjustment Assistance Act."