On a Friday afternoon in late April, Michael Lauzardo greeted his patient. “I’m Dr. Lauzardo,” he said, ushering the woman to his station. “Nice to meetcha.”

He was warm but efficient as he ran through his questions. Any problems with the first Covid-19 vaccine dose? Any questions for me? Nope and nope, she replied. He injected the 0.3 milliliter dose into her shoulder, tossed the empty syringe, stuck on a bandage,
and thanked her for getting vaccinated, for doing her part. She stood, and Lauzardo beckoned to the next person in line. The exchange took less than a minute. On to the next patient. Inject, toss, stick, repeat.

Every minute today was precious. Thousands of people had appointments at the University of Florida’s mass-vaccination clinic, located on the fifth floor of Ben Hill Griffin Stadium’s skybox tower, high above the football field. The bleachers were mostly empty. The Jumbotron projected that day’s graduation ceremonies to an audience of a few dozen. But inside, the clinic was buzzing with activity. About 120 people, mostly students, walked through the door every 20 minutes. By midafternoon, there was a backlog. A socially distanced line had formed on the sidewalk below.

Lauzardo is the deputy director of the university’s Emerging Pathogens Institute, and he has overseen the ramp-up and eventual launch of the university’s all-out vaccination blitz, an effort to inoculate more than 100,000 people over six weeks. He’s also in charge of coronavirus testing for the campus. Ever since last spring, he’s worked double-digit hours most days. On this day, he was at the clinic to observe five medical students and to be a vaccinator in the evening. He wasn’t supposed to step in this early. But the team was short staffed, so he had to pinch-hit. Whatever it takes to make the system run.
It takes a lot. All day, behind a black curtain, pharmacy students and technicians mixed hundreds of vaccine vials with saline solution, drew the mixture into syringes, and flicked at them to eliminate air bubbles. Runners ferried those doses and supplies to seven vaccination stations, which spanned the length of a football field. Meanwhile, greeters and form-checkers welcomed the stream of people to the site, made sure students had filled out both sides of their paperwork, and occasionally distracted those who were especially needle-shy.

To arrive at this point took months of preparation, of little sleep and sore feet. It took, and takes, constant coordination among university employees. It takes a raft of volunteers, some with no connection to the university, who want to do their part in bringing the pandemic to its knees.
And that’s the *easy* part. Many of that day’s appointments were for students who were eager to get vaccinated. They wanted to resurrect a more-typical college experience, one without masks or mandates. Afterward, they snapped selfies to commemorate the moment.

The more formidable challenge is outside the stadium walls.

The University of Florida is not only attempting to vaccinate its own students, staff, and faculty. It’s a major player in the effort to vaccinate the population of the surrounding region. Alachua County, located in the heart of north-central Florida, is home to about 270,000 people. The University of Florida is in the county’s biggest city, Gainesville, which leans strongly Democratic. Beyond the city limits, however, Alachua County is largely rural, with acres of pastureland, berry fields, and pecan trees. Residents can be more conservative.

University-affiliated sites account for one-third to 40 percent of all of the Covid-19 vaccines administered so far in Alachua, said Paul D. Myers, the county health officer. From the start, the university and county have tried to reach county residents in a variety of ways, holding vaccine clinics on the university campus and in Gainesville’s predominantly Black Eastside, and deploying university experts to talk up the shots at town halls, growers’ and ranchers’ meetings, and church events. Officials will need to run more of these smaller, more work-intensive, and less efficient events to reach those still unvaccinated.
It’s not surprising that the University of Florida would play a leading role in a Covid-19 vaccine campaign. It has the expertise and infrastructure, including the stadium. Having faculty and staff members from the university help organize clinics, answer questions, and volunteer to give shots speaks to the ideal of what a big public research university can do for its neighbors. They’re the benefits you expect from having the flagship next door.

Like vaccinators across the country, however, Lauzardo and his team are running into inequities in health-care access and vaccine hesitancy. How well the university succeeds against those barriers will determine how well protected the community will be, and what experience students will have, come fall. The campaign is also an opportunity for the university to demonstrate its value at a time when higher education is increasingly regarded as out of touch and even dangerous. Colleges across the country contributed to Covid-19 outbreaks within their own communities. The pandemic exposed and deepened selective universities’ role in driving inequity. And it revealed and was fueled by Americans’ lack of trust in science and expertise. Wherever colleges are providing vaccines, vaccinators, and vaccine information, it’s an opportunity to heal some of those harms. But success isn’t guaranteed.

Before there was any vaccine against Covid-19 in sight, the University of Florida had the fundamental job of keeping its students and local community from getting infected.

Over the summer of 2020, despite some local anxiety, state leaders strongly encouraged the public universities to open in the fall. On the national stage, Florida was gaining a reputation for being open for business — and tourism — despite the pandemic. University of Florida administrators decided to offer some in-person instruction and fill residence halls to near capacity. They didn’t require testing of most students.

In the first three weeks of the fall semester, almost 700 students and employees tested positive for the coronavirus. Unsettled by the experience, faculty members repeatedly protested having to teach face-to-face. Meanwhile, outside of campus boundaries, local
news reported Gators packing into downtown bars, maskless. “F*** a mask,” one student told the news station WUFT.

Signs and cardboard gravestones protest the U. of Florida's decision to offer more face-to-face classes in the spring of 2021.

“As a community member, it was palpable,” said David Arreola, a city commissioner. “People would avoid groups of young people, whether they were outside or not. It was like there were two Gainesvilles.” He felt he had to press administrators to take the pandemic seriously, and to acknowledge that a segment of students was flouting good safety practices and could spread the virus. “There was deep concern in the community that the university was not going to be able to handle the outbreak,” he said.
The University of Florida turned out to be able to. Unlike some other college counties, Alachua didn’t experience a significant rise in cases after the student wave, according to a study published in *Computer Methods in Biomechanics and Bioengineering*. Arreola called it “a miracle,” which he attributed to the county health department and “people at the university who do care.”

Lauzardo’s testing program was critical to bringing the fall outbreak under control. He compared his experience last fall to being shot at and getting away unscathed.

It was especially important, then, to get the vaccination effort right. Since the beginning of the pandemic, Lauzardo thought vaccines would most likely be developed. He now sees them as the only true way out of the crisis. The campus and surrounding community would both need high vaccination rates. With too little immunization outside its gates, the university would have to keep testing students frequently, which is expensive. The danger would remain that outbreaks started on campus could spread to the community, or vice versa, instead of being stymied by vaccinated bodies.

In December 2020, the Food and Drug Administration authorized the first Covid-19 vaccine for emergency use in the United States. University faculty and administrators helped set up an immunization clinic in Eastside Gainesville in early January. Officials also quietly scheduled drive-through appointments at a parking garage on campus where they were already offering tests. This was arguably their first community “mass vax” site.

Planning emails, obtained through a public-records request, show University of Florida and Alachua County Department of Health staffers coordinating who would print forms, train injectors, direct traffic, provide standby emergency medical workers, and dispose of used needles. Two days before the event, they were still awaiting confirmation of the number of doses the site would receive. Once they got word of a shipment of 210, they formed a plan: Give 15 shots every 15 minutes, over a three-hour window.
One health-department staffer seemed surprised at that clip. “That’s 1 apt per minute,” wrote Brad Caron, a preparedness planner.

“You’re right,” replied Myers, the county health officer.

About three weeks later, on February 5, officials vaccinated more than 1,000 people in a day, at Griffin Stadium. On April 5, Gov. Ron DeSantis made all Floridians age 18 and up eligible to receive shots, and the university announced a goal: It wanted to vaccinate 20,000 people in Alachua County every week for six weeks. To get there, a phalanx of volunteers had put together an operation at Griffin Stadium capable of injecting more than 5,000 arms a day.

Health experts believed it was imperative to not only get as many Alachua County residents vaccinated as possible, but to do so quickly. The longer that people remained unvaccinated, the more time genetic variants of the coronavirus had to spread and mutate. “We can end this now, if we just all get vaccinated now,” Lauzardo said. “You drag it out, it ends in January, June of next year.”
The Jumbotron at Ben Hill Griffin Stadium

At first, the stadium had no problem filling its seats. On March 30, the university had sent out an email, inviting more than 82,000 students and employees to make appointments at Griffin to get their shots. More than 5,000 people signed up in the first hour and a half. On April 6, when a UF Health communications staffer suggested to Meghan Froman, co-director of the university’s testing and vaccination program, that the staffer email all UF Health employees to invite them to drop by Griffin for shots, Froman admitted privately to having a “freak-out.” There was no way the packed operation could handle drop-ins.

Yet just a week later, she was emailing UF Health herself, seeking staffers who would be willing to stop by for a vaccine. “Due to our low numbers on Wednesday, 4/14 and Friday, 4/16,” she wrote, “we can handle walk-ups all day.”
The demand for Griffin shots was fading fast. “We underestimated how much the students were going to jump on it,” Lauzardo said, “and we overestimated how much the community would come here to get it done.”

Like vaccinators across the country, the team in Alachua County was running into barriers as diverse as its population. Some people were uncomfortable coming to the stadium or unable to get there easily. Some belonged to groups with a history of being mistreated by the American health-care system. There were people who were anxious about the vaccines’ safety, and others who believed wilder conspiracy theories about the shots — that they contained microchips to track people, or material from aborted fetuses, or that Covid-19 is not a real and serious threat.
From the beginning, the county vaccine effort was a mix of events large and small. Emails from December 2020 to April 2021 show university and county health officials preparing for ever-bigger mass-vaccination sites while also visiting a retirement community to give shots to residents; adding to their list of Black churches where they worked with leaders to set up clinics on site, and where they might vaccinate 100 or 200 people in a day; and fielding requests for shots for just a few dozen people, or even individuals. Now, however, it was clear they would have to rely even more on smaller-scale events and personal relationships. They would have to make progress at rates orders of magnitude lower than a mass-vax site can achieve.

They’re closing the Griffin Stadium operations at the end of May. The fire hydrants have dried up, and putting out the blaze now means carrying buckets by hand.

On a warm Saturday evening in early May, families gathered at a public plaza in downtown Gainesville to celebrate the Day of the Immigrant — or Día del Inmigrante. In the corner of the plaza, medical students and volunteer translators staffed a vaccination clinic.

It was a modest setup compared with the football stadium. Just a table and seven folding chairs underneath the overhang of a City Slice pizzeria. The goal was modest, too — to administer not thousands of doses but, if they were lucky, tens.

Earlier that day, Lauzardo had dropped off a cardboard box with about 50 prepped syringes. This “grab-and-go” pack, as he calls it, is a new collaboration between his team and the Rural Women’s Health Project, a health-justice nonprofit based in Gainesville. It’s an ad hoc method of navigating around the steep hurdles to vaccine access for immigrants and non-English speakers in the area, for whom it’s not always possible to drive to a mass-vaccination clinic like that at the football stadium.

If you don’t speak English, for example, information about where to go for an appointment is harder to come by. You might be wary because if your reaction to the dose is severe enough, you might have to take off work, a luxury many workers can’t
afford. Even if you make it to your appointment, you’ll probably be asked to prove you’re a Florida resident, something undocumented immigrants can’t do. An estimated 775,000 unauthorized immigrants lived in the state as of 2016, comprising 5.6 percent of the labor force.

Bringing vaccines to where people gather skirts some of those hurdles. That tactic doesn’t work without people who are dedicated to scaling those barriers and willing to collaborate with the university — people like Robin Lewy, the health project’s director of programming.

Lewy’s organization has been helping provide pandemic-related aid to vulnerable people throughout the county. The morning before the celebration, she picked up a grab-and-go-pack from Lauzardo and drove an hour to vaccinate 49 migrant workers. With limited English and internet access, no proof of state residency, and no individual mobility, their chance of getting vaccinated without help from someone like Lewy was slim to none.

On Saturday evening, Lewy ran the show. She reminded attendees that they didn’t need any identification to get the vaccine. We’re here, she told the crowd from the outdoor stage, to serve you.

At some point, she made her way over to a friend who lives in Gainesville, Lina Colondres, and egged her on.

Lewy “told me, ‘Come on, we’re doing the vaccine. Right? Right?’” said Colondres, whose purple ponytail matched her purple T-shirt. “I’m like, ‘I don’t know.’”

Colondres is a mother of four who is originally from Puerto Rico. Everybody in her life who had gotten the vaccine had encouraged her to get it. But she had been hesitating. She’d heard on the news about the pause put on the Johnson & Johnson vaccine after six people who had received it developed blood clots. That news “panicked” her a bit, said
Colondres, who is disabled and has a lot of health issues. (Federal officials lifted the pause after a safety review.)

Her family had arrived at that evening’s celebration with no plans to get vaccinated. But then Lewy came over and told her “all this positive stuff,” she said, like that she should get vaccinated for her children, for her community. She locked eyes with her husband, Ruby Flores.

Colondres and Flores were reunited just months ago. In March of 2012, Flores had gone to work one day — his toddler son’s birthday — at an Alabama chicken plant and never returned home, said Colondres. He’d been deported to Mexico. The loss was unimaginable. There were days, Colondres said, that she wanted to die.

It took nearly nine years for him to return via a green card. Now, the man she loves is home again. That evening, after Lewy’s encouragement, they looked at each other and agreed, in the way that parents do, to do something a little scary for the sake of their children. “We kind of, like, eye-forced each other,” Colondres said.

They walked over to the table and folding chairs. A medical student answered Colondres’s questions and stuck her arm with a needle.

She and Flores were two of 15 people who got a shot that evening — a far cry from the 3,158 doses given the previous day at the football stadium.

After their shots, the couple stood around and watched a dance performance on stage. The two children they had brought with them, that toddler son, now 12, and his brother, 13, sat and played games on their phones. As the Florida evening cooled, Flores wrapped his arms around his youngest son, still immersed in the bright, beeping screen, and held on.

The next day, Gerard Duncan held his microphone with both hands as he preached about moving on.
His feet planted on the dark red carpeted pulpit, a yellow container of Clorox wipes nearby, the pastor told congregants inside the historic Mount Carmel Baptist Church that they must start “snapping out” of this pandemic and return to some semblance of normal life. “You can’t continue,” Duncan told the room, “to be bound.”

Duncan takes his role as a community leader seriously, and during the pandemic it has been no different. When cases first began to climb in Florida, he and other pastors talked to Lauzardo about how to keep parishioners safe. They established trust. Lauzardo was “like a prophet” in that he foretold eventualities about the pandemic that came true, said one local pastor, Karl Anderson. After that conversation, Anderson said he embraced the idea of holding drive-in church services so that parishioners could stay in their vehicles, socially-distanced. “We never stopped having church,” he said. “We just were smarter about it.”

Pastor Gerard Duncan says he wanted to “be a lamb” and get vaccinated, to set an example.
Soon, it’d become clear how disproportionately Black Americans suffer at the hand of the pandemic. Across the country, Black and Hispanic Americans were more likely to be hospitalized and die from Covid-19 than white people. In Alachua County, Black people make up \textbf{21 percent} of residents, but \textbf{32 percent} of Covid-19 deaths. Local pastors and community leaders who’d lost friends and loved ones deeply felt the brutal inequities.

They and the university also understood that mass clinics on campus would not be enough to reach Black Gainesville residents. Shirley Watts, another pastor, volunteered at a mass clinic at the stadium early on in the pandemic. She noticed that not many Black people were showing up. At the time, people eligible for the shots were mainly over 65, or had underlying health conditions. “Many of us are not all that comfortable trying to get on campus and walk stairs and walk from parking places,” she said. People who aren’t students or employees might not feel like they know how to find their way around campus, she said.

The university itself can feel at times unwelcoming or out of reach. Just \textbf{6.7 percent} of the student body identifies as Black or African American. Do local African American kids dream of someday becoming “a hometown Gator?” Duncan mused before answering his own question. “Not necessarily.”

Early on, the university collaborated with faith leaders to hold vaccination clinics at places that did feel like home to many: churches — Mt. Moriah, Mt. Pleasant, Upper Room Ministries, and others. Lauzardo and some of the faith leaders held a town hall to answer questions and allay people’s fears. Science, the doctor \textit{told the audience}, is “God’s language.”

The university also established a community-relations group that includes pastors, business leaders, and elected officials to help with local outreach, especially to vulnerable and hard-to-reach populations. One idea was for people who are respected in and around Gainesville, like a pediatrician or the famed Florida football alum and former coach Steve Spurrier, to become “vaccine champions,” or people who broadcast...
their positive experience of receiving the vaccine, so that it might tip the scales for others.

Duncan serves on the committee and became a vaccine champion, even though he’d once been skeptical of it. His outlook changed when he and his son contracted Covid-19. In that moment, the pandemic became real, less abstract, in a way it hadn’t been before. He eventually decided to “be a lamb” and get vaccinated, he said, and he encouraged others to do so, too. People like Violet Brown, a great-grandmother who attends Duncan’s church. He told her it was safe, that he felt fine. So she prayed on it, she said, and God led her in the right direction.

When Duncan put the word out in January that he was helping people make appointments, his phone rang day and night. “I felt like a 911 operator,” he said. By now, months later, demand has slowed. The church vaccination clinics are less busy. Those who were itching to get vaccinated, or who were wary but relatively easily convinced, have gotten their doses already.

Reaching people for whom seeds of doubt have sprouted into a forest of skepticism will be tough, even with the help of people like Duncan.

When the pandemic first struck, some of his church members scattered, he said. And they’ve been slow to return.

On that Sunday morning, just a handful of adults and children filled his pews. He preached about moving on, past the hardship of the previous year, to a mostly empty room.

Around Hawthorne, Florida, a small town 15 miles east of Gainesville, some homeowners have erected yard signs during the pandemic that deliver a simple motto. “Faith Over Fear.”

That messaging, says Matthew Surrency, Hawthorne’s mayor, is a bit misguided.
Surrency has spent the past year trying to ensure that his town, which has a high concentration of senior citizens, navigates the pandemic safely. He’s encouraged people to avoid gathering in groups where the virus could easily spread, like in churches.

But there’s social pressure in a small town to continue showing up for Sunday services. When you’re not in church, you could be “looked down upon,” Surrency said. Telling people to have “faith over fear” certainly doesn’t ease that sense of obligation.

Having faith over fear can lead to tragedy. When other churches in the area closed their doors, Gordon Chapel Community Church, a white building shaded by oak trees that sits just over the county line, stayed open. In late October, there was an outbreak. Dozens became infected, the Los Angeles Times reported. The pastor’s wife got sick. Her mother, brother, an aunt, and an uncle, died.

The church is outside town limits, so there was little Surrency could do except continue trying to talk to people about the risks of Covid-19 and the proper ways to stay safe. Even if the church itself didn’t make the right decision, Surrency said, armed with information, people could be better equipped to decide for themselves what to do.

The mayor has faced other challenges. In Hawthorne, people prize their privacy. Some residents who’ve gotten vaccinated won’t check the box to indicate their race, for example, said Surrency, which makes it harder to know what groups should be targeted for outreach. (Later that day, a Hawthorne resident who’d just exited the Ace Hardware told a Chronicle reporter he didn’t want it reported that he had bought “Beware of Dog” and “No Trespassing” signs. “People,” he said, “are snoopy.”)

Surrency serves with Duncan on the university’s community-relations group. They’ve talked about the challenges of getting vaccine uptake in more rural, and more conservative, parts of the county.

In Florida, especially, the pandemic has been highly politicized. Some Republican elected leaders resisted local mask orders. Many Republican men, in particular, remain
steadfast against the vaccine, polls show. At a recent meeting of Alachua County commissioners, that skepticism was on full display. Locals lambasted commissioners for keeping a mask mandate in place, and for supposedly shoving the vaccine down their throats.

“Since when,” said one woman, “did people that were hired to tell us what road they were going to fix start making health choices for my family?”

Lauzardo attended the meeting virtually and gave his typical upbeat presentation about why vaccines are so critical. But many citizens brought their own interpretations of the prevailing research to the discussion. Lauzardo quoted “no science,” said one man. “They’re not clean vaccines. They’re dirty vaccines,” said another, a farmer, who also told commissioners he didn’t know why they weren’t talking about “people drinking ginger and turmeric, or taking herbs, to cure” Covid-19.

Lauzardo left the meeting before the hour-and-twenty-minutes of public comment. But the opinions expressed there don’t surprise him. By now, he’s heard it all. The way he sees it, about 20 percent of people won’t get the vaccine no matter what you do. You could pass out gold bars, he said, and they won’t do it. Meanwhile, 40 percent want it so bad, they’d swim through piranha-infested waters just to get it.

It’s that remaining 40 percent, Lauzardo says, that’s key. The people who aren’t immediately saying yes but aren’t saying no, either. The “wait-and-see” people.
On a Monday afternoon in early May, Sam Carroll was waiting and seeing.

He manned the cash register of the store he owns, Carroll’s Farm Supply, located off U.S. Highway 301 in Hawthorne. Shelves were packed with fresh feed, seeds, chainsaws, preserves, and T-shirts bearing messages like “May The LORD Be With You” in the Star Wars font. Bags of potting soil and stacks of lumber sat outside. Inside, it smelled of gasoline.

Carroll, wearing a moss green T-shirt and a salt-and-pepper beard, chatted with his steady trickle of customers, mostly men from around here whom he knew, and gave them quotes on, say, a bag of corn. “You probably ain’t going to like the price of it,” Carroll told one customer. It’d gone up a few dollars since last year. The man reckoned that the price had increased because of “your president,” Joe Biden.
“I’m not going to say I put him in office,” Carroll replied, jovially, “but he is my president.” Carroll leans conservative and voted for Trump, though he didn’t love how the former president could sometimes “run his mouth like diarrhea.”

Despite the price hikes, business had been good. People staying home means more money being spent on their houses. The store had closed for only two days during the pandemic, in August, when Carroll and his whole family tested positive for Covid-19, including his father and his mother, who’d just gotten over two bouts of cancer. They’d been taking precautions, said Carroll, wearing masks — including to Gator football games — and regularly disinfecting the store. He wouldn’t even let his mother visit the store, for fear she’d contract the virus.

The disease is “no joke,” Carroll said. “It puts a shadow on you.” You’d be in the middle of a conversation and your brain would just “spark and quit.” His mother had it worse. She spent seven days in the hospital and at times could barely function. There was a point when Carroll worried she was going to die.

But as for the vaccine? Both Carroll and his mother, who fully recovered, weren’t getting it. It’s too new, said Carroll. He’s not against vaccinations, but “I don’t know if that thing was rushed through.”

Still, he’s open to it. His family has season tickets for Gator football, and they’ll probably wind up wearing masks the entire time they’re at the stadium this fall, too. “I don’t know if I want to be crammed in there with 90,000 people without having a mask on,” he said. “So there’s the other end of the spectrum.”

When customers come by the store, he’ll sometimes ask them, Would you take the vaccine? “I try to be an educated person,” Carroll said.

Carroll seemed to be holding different views in his hands, feeling their weight, and sizing them up against each other. Could he see himself getting the vaccine in the future?
“Absolutely,” he said. “My wife is talking about already getting it, but —” Carroll paused, cocked his head, tugged at his ear, and trailed off. He just wasn’t sure.

The work of winning over the “wait-and-see” crowd may be slow and difficult, but Lauzardo is often cheerful about it. Not just cheerful, but deeply positive. As a Christian, his worldview is founded on the idea of redemption. “To me,” he said, “there’s redemption here.”

For the university, he sees a chance to improve town-gown relations, reduce racial health disparities, and demonstrate the worth of expertise and higher ed, long after the pandemic is over. “We can show the real relevance of large academic centers to their communities,” he said. “There’s no way we would have been able to do this without Covid, if we’re really honest with ourselves.”

In the meantime, there’s a long road left before the community is well protected from Covid-19.

Current numbers weren’t available at publication time, but the University of Florida never hit its goal of 20,000 doses in any week after April 5, when the governor opened up vaccine eligibility and the Griffin Stadium team gave out more than 5,200 shots. In the three and a half weeks between April 5 and 30, vaccinators gave just 33,000 doses. Less than half of Alachua County residents have received any dose of a vaccine, and the number of shots given in the county has been declining steadily since just after April 5. The consequences show up in county hospitals: Covid-19 hospitalizations in the area peaked in early January, then declined through late March, as vaccinations racked up. Since then, they’ve remained stubbornly flat.
Michael Lauzardo takes a moment at Griffin Stadium, where he and his team have been running mass-vaccination events.

But there’s some hope that expertise, personal relationships, and leaving the way open and easy can make a difference.

It did for Carroll.

After his first conversation with a Chronicle reporter, his mother went in for a visit to her cancer doctor, who told her that in no way, shape or form should she be scared of the vaccine. In fact, the doctor said it is imperative that she get it. Because some of her patients don’t come in anymore. They caught Covid-19 and never recovered.

That, plus a conversation with a local pharmacy technician who came into the store, tipped the scales for Carroll.
He loves his mother. He wants to do what he can to keep her safe. So he and his wife, he said, are scheduling appointments.

*Emma Pettit reported from Florida. Francie Diep reported from Washington.*

*We welcome your thoughts and questions about this article. Please [email the editors](mailto:editor@chronicle.com) or [submit a letter](https://www.chronicle.com/letters) for publication.*

---

**Emma Pettit**

Emma Pettit is a senior reporter at *The Chronicle* who covers all things faculty. She writes mostly about professors and the strange, funny, sometimes harmful and sometimes hopeful ways they work and live. Follow her on Twitter at @EmmaJanePettit, or email her at emma.pettit@chronicle.com.

---

**Francie Diep**

Francie Diep is a senior reporter covering money in higher education.

---

**IN THE CHRONICLE STORE**