

DREXEL UNIVERSITY
Dornsife SPH
SCHOOL OF PUBLIC HEALTH MAGAZINE

SPRING/SUMMER 2019

URBAN HEALTH
GLOBAL IMPACT



THE POWER OF POLICY: MASTERING THE ART OF PROTECTING HEALTH
CLASSROOM TO COMMUNITY: STUDENTS LEARNING PUBLIC HEALTH IN THE REAL WORLD

One of the distinguishing features of our school from its very origins, has been its focus on the student experience. Nearly 25 years ago when the faculty who came together to create the school developed the curriculum, they wanted it to be different from what was common then at many schools, not another “plain vanilla school.”

They wanted the curriculum to be less static and theoretical and more focused on problem solving and on providing real-life practical experiences for students as part of their training. And this idea, the idea that students learn best when they are able to continually apply and reflect on what they are learning, has remained a core component of our school's identity and our educational programs.

In this issue of our magazine, you will see many student stories reflected. Stories of students working here in our own Philadelphia, in Latin America, and in Africa. Stories of students working for the health department, in advocacy organizations, health care providers, non-profits, businesses, and laboratories. Stories of students learning the theory and methods of public health while they apply what they learn to generate new evidence, build partnerships, and work to create real change through both local programs and large-scale policy change. Stories of students who focus on research

doing surveys, compiling different kinds of data, doing statistical analyses, conducting laboratory studies, and reviewing and synthesizing evidence. Stories of students who use what we know to advocate for health and promote and support public health interventions. Students who participate in the development of policy and build the partnerships needed to create real and meaningful change that promotes health equity.

We know that it is critical to provide opportunities for student experiences in all aspects of public health practice, policy development, and research. We do this through an extensive set of local and global partners and through the many projects and programs (both research and practice-oriented) that our faculty engage in. But we also know that our curriculum has to evolve and change to fit the changing needs of our students and the world they will work in. In this issue you will also read about a novel integrated course on the foundations



Ana V. Diez Roux, MD, PhD, MPH

*Dean and Distinguished Professor,
Epidemiology, Dornsife School of Public Health*

and systems of public health that our school has recently launched. In this course our faculty use key current public health challenges to illustrate the core principles of our field, in a way that is reminiscent of the problem-focused public health curriculum espoused by the faculty who founded our school.

Every year at commencement, as the graduating students walk across the stage, I am amazed by what I see. I see accomplishment, energy, creativity, and diversity. I see a desire to go out into the world and use knowledge to make a difference. I see commitment. Sometimes, in today's world it is not easy to stay hopeful. But as I shake each student's hand, and hear their loved ones' cheer, I am reminded that hope is after all possible. And I am grateful to know that at our school, we are committed to doing all we can to provide our students with the knowledge, skills, and values they need to make the world a healthier and fairer place for all of us.

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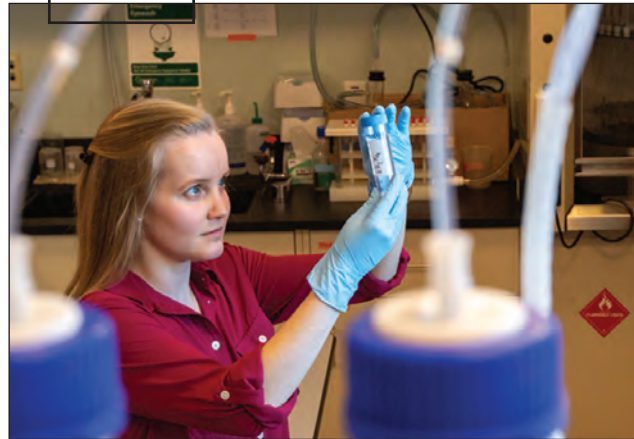
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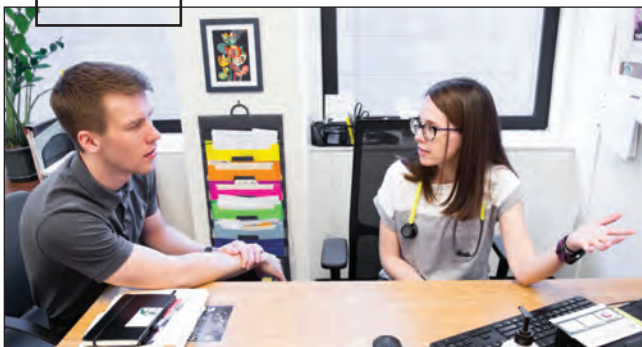
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EVALUATING THE HEALTH EFFECTS OF PHYSICAL ENVIRONMENT UPGRADING INTERVENTIONS IN INFORMAL SETTLEMENTS

REAL-WORLD EXPERIENCE

DORNSIFE STUDENTS GIVE BACK TO THE COMMUNITY, WHILE BUILDING CAREERS BY ADVANCING PUBLIC HEALTH IN PHILADELPHIA'S NEIGHBORHOODS, COMMUNITY ORGANIZATIONS, GOVERNMENT AGENCIES, AND HEALTHCARE PROVIDERS, WITHIN A MONTH OF STARTING A DEGREE PROGRAM.

800
HOURS working as public health practitioners before senior year.

300
HOURS in on-the-job career development before completing their degree.

86 professional and health policy partners employed Dornsife students in 2018.

87 percent of master's degree students are employed within 12 months of graduation.



Cities: How Big is Too Big When It Comes to Public Health?

Urban areas across the globe are rapidly increasing in population. According to the United Nations, 68 percent of the world's population is expected to live in cities by 2050. Philadelphia's population, at more than 1.5 million (metropolitan area 6 million), grew in 2018 for the 11th straight year, though at a slower rate than nearby New York, Boston, and Washington, DC.

The City of Brotherly Love may seem almost cozy next to New York's 8.6 million people (metropolitan area 20 million), but both are small towns when compared with megacities like Tokyo (metropolitan area 37 million), Delhi (28 million), Mexico City (21 million), or Sao Paulo (21 million). Large urban populations enjoy better economic opportunities, along with other amenities; but resident displacement, pollution, skyrocketing housing costs, higher crime rates, and overcrowded transit systems are also part of the deal. To understand how city size relates to population health, Usama Bilal, MD, MPH, PhD, an assistant professor in the department of Epidemiology and Biostatistics and the Urban Health Collaborative at the Dornsife School of Public Health, has begun work on a \$1.25 million research project funded by the National Institutes of Health, to investigate the impact of urban scaling.

"Our objective is to discover how cities can grow without the negative consequences of growth on health, and also infrastructure, climate and other factors," Bilal says. His preliminary findings suggest that policymakers



need to address the health risks that increase with population size, as well as understand the challenges of smaller cities.

"We have early findings in three areas," Bilal says. "Most infectious diseases become more common in big cities. Conversely, rates of maternal mortality also seem to be lower in large cities," he says. This is a surprising discovery considering the worrying, high rates of maternal mortality nationwide.

Bilal and his team — including Pricila Mullachery, PhD, MPH, a postdoctoral research fellow at the Urban Health Collaborative — are also using a similar framework to study the evolution of the opioid epidemic, which was initially thought of as linked to higher mortality rates in rural areas and small towns. "Opioid overdose deaths are not just a rural phenomenon, but may be becoming more common in cities," he says.

As the city scaling research group continues to compare trends in large cities such as Los Angeles and Chicago, to those in small cities such as Johnstown and Altoona, PA, the intent is to also learn more about what informs the multiple city, state, and federal policies that control how cities manage population growth. Dornsife students Ran Li (MS Candidate in Biostatistics) and Edwin McCulley (MS Candidate in Epidemiology) helped obtain and analyze data for the study.

"Cities are challenging because of the complexity of the policy environment," Bilal says. "We will eventually do research on not only the health trends in cities, but also how to evaluate policies and work through them to address the health inequalities and disparities that may emerge, as well as other issues such as what happens to the people who are pushed out when cities become larger and more expensive places to live."

Finding More Effective Ways to Study Why We Eat Unhealthy Foods

Anyone who has tried (and likely failed) to change long-held eating habits, can attest to how subtle environmental cues can throw you off your game. Advertising, easy access to sweets and salty snacks, not to mention the often high cost of healthier choices, can make it hard to stick to a new nutrition plan.

As a result, public health experts continually investigate the factors that may shape food choices, especially in urban populations.

Across Latin America, for instance, policymakers are looking for solutions to high rates of obesity, that coexist with high levels of undernutrition and overweight. It is called the “double burden of malnutrition.” Approximately 57 percent of Latin American adults are overweight (the global average is 39 percent), while nearly 48 percent of children in some Latin American countries experience stunting for undernutrition and micronutrient deficiencies, according to policy brief number two, from the Urban Health Network for Latin America and Caribbean (LAC-Urban Health).

“High consumption of ultra-processed foods that leads to higher rates of obesity, diabetes, and chronic disease, are at the center of the issue,” says Brent Langellier, PhD, assistant professor of Health Management and Policy at the Dornsife School of Public Health. The result is a diet high in sugar, saturated fat, and sodium, with fewer vitamins, minerals and fiber.



To gain a better understanding of what policies might encourage healthier behaviors, Langellier and a research team with members from Columbia, Brazil, and Dornsife’s Urban Health Collaborative, reviewed the use of complex systems models used to study factors that shape dietary patterns. Models may make it possible

Langellier and his co-authors found that there are still “many opportunities ... to advance the state of the science of complex systems approaches to diet and nutrition, including leveraging the wide availability of epidemiologic and policy evaluation data to improve model validation.”

“High consumption of ultra-processed foods that lead to higher rates of obesity, diabetes, and chronic disease are the center of the issue.” - Brent Langellier, PhD

to understand the combined effects of policies such as Chile’s “front-of-package” food labeling law; Argentina’s move to remove trans fatty acids from foods, Mexico’s sugar and energy-dense foods tax, when combined with other factors like access to foods and the characteristics of retail environments.

The team is developing an agent-based model to study the factors influencing consumption of ultra-processed foods. The model will be used to understand how various policies can be combined to maximize their impact.

Making Nail Salons Healthier for Workers Through Policy

There are more than 400,000 licensed technicians working in nail salons across the United States. The industry has seen a 300 percent increase in salons and technicians in the last 20 years. Many nail technicians put in long hours, without basic health care coverage, while earning annual salaries estimated at roughly \$25,000. Several recent studies also show that these nail salon workers are exposed to a range of hazards including toxic chemicals, ergonomic hazards, and possible disease transmission from clients. Workers often report skin and respiratory irritation and musculoskeletal pain.

Yet, finding effective ways to provide healthier environments for nail salon workers is far from simple. A new study, *"Factors Influencing Health and Safety Practices Among Vietnamese Nail Salon Technicians and Owners: A Qualitative Study,"* published in the *American Journal of Industrial Medicine*,

conducted by Tran Huynh, PhD, an assistant professor in the department of Environmental and Occupational Health, at the Dornsife School of Public Health, found that improving industry practices around health meant negotiating complicated relationships among nail technicians, salon owners, clients, and policymakers.

Huynh explains, "a lack of the awareness of workplace hazards and effective ways to minimize exposures puts nail salon technicians at heightened risk. This is coupled with gaps in policies, regulations, enforcement. Risky practices continue to exist under the radar."

Huynh and her team surveyed salon workers and managers, in metropolitan Philadelphia, to explore the factors that contributed to the health and safety practices among nail salon technicians and owners. They found that while some basic knowledge about the hazards and control measures were generally known among the employees, misconceptions

about certain health and safety practices also existed. These included the use of surgical masks for dust and chemical protection or the belief that muscular pain is mostly due to aging.

"Some of these misunderstandings were consistent with reports of nail salon practices from other states which may indicate information and training gaps persist not only in Philadelphia, but potentially among the larger nail salon industry," wrote the research team: Ngoc Doan, a research assistant at Dornsife; Ngan Trinh of Temple University; Niko Verdecias, a doctoral student at Dornsife; Samantha Stalford, MPH '19, a Dornsife research assistant; and Amy Carroll-Scott, PhD, associate professor of Community Health and Prevention at Dornsife.

Huynh plans to follow this study with work translated into additional languages and an investigation into effective, policy-level interventions.

**"... Risky practices continue to exist under the radar."
- Tran Huynh, PhD**





How Do Kensington Residents Really Feel About A Proposed Overdose Prevention Site?

With funding from a small pilot grant, Alexis Roth, PhD, MPH, assistant professor of Community Health and Prevention at the Dornsife School of Public Health, along with Stephen Lankenau, PhD, Dornsife's associate dean for research, initiated a study on the acceptability of the proposed Overdose Prevention Site (OPS) among 360 residents and 79 business owners/staffers in the neighborhood.

The study is the first that takes a systematic approach to assessing Kensington residents' thoughts and concerns about a proposed OPS in the community. The work is an important contribution to the ongoing debate about how best to address the impact

of the opioid epidemic on the Kensington neighborhood.

In recent months, residents have expressed fears that the proposed OPS would increase drug-related violence. While concerns about OPS implementation are understandable, advocates argue that in the city with the highest overdose rates among large cities in the United States something must be done and that the most vocal protestors may not fully represent the community.

After talking to 542 individuals in Kensington, Roth and the research group discovered that 90 percent of the residents surveyed and 63 percent of the business owner/staff group were in favor of an OPS

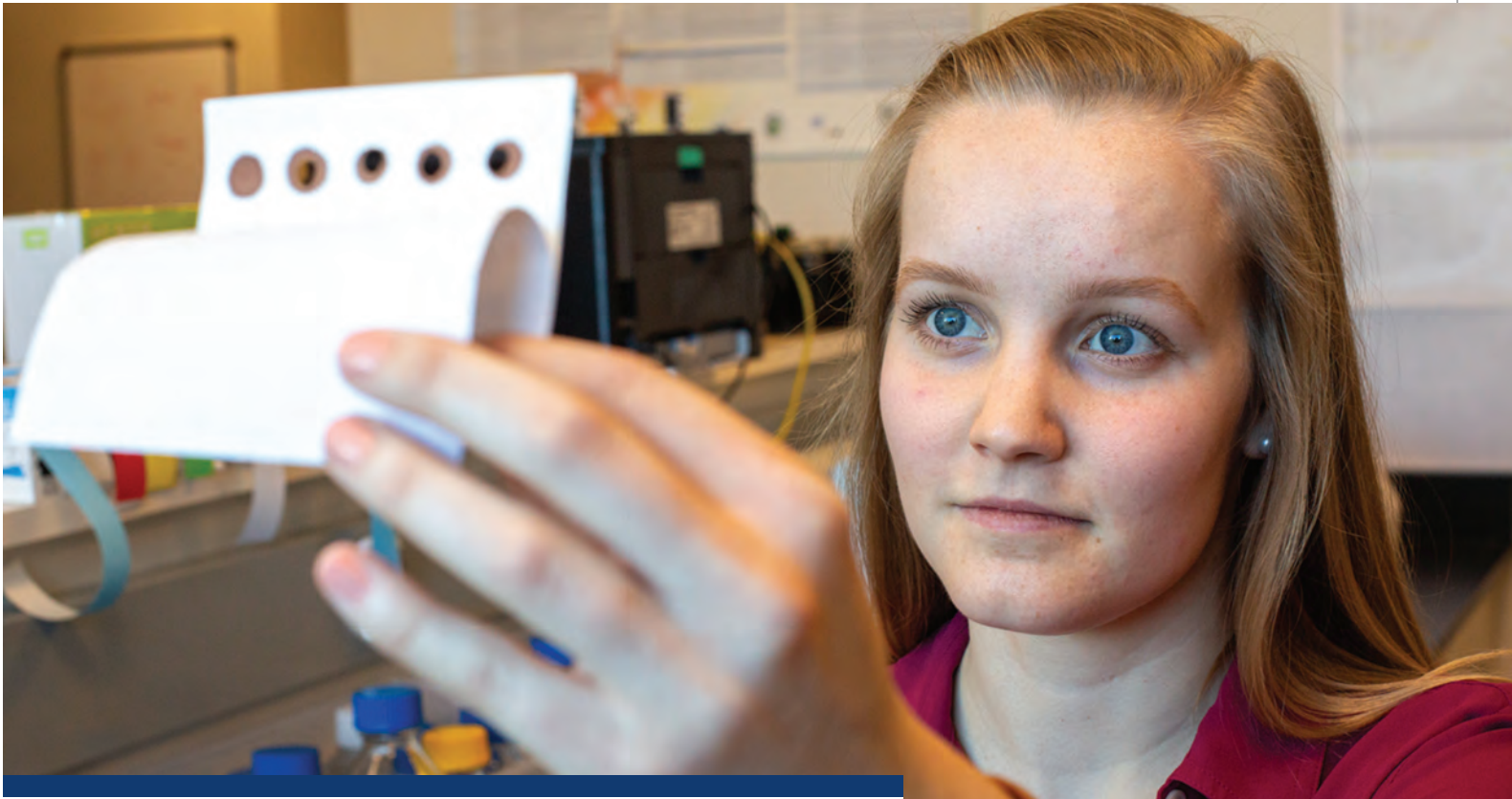
“Ours is the first systematic gathering of people in the community to assess their opinion and our findings suggest the community is in favor of an OPS opening.”

- Alexis Roth, PhD

opening in Kensington. “Ours is the first systematic gathering of people in the community to assess their opinion and our findings suggest the community is in favor of an OPS opening.”

Certain trends did emerge among the supporters, which, Roth acknowledged, is an important contribution of the work. “Among residents, persons without stable housing and those who use opioids were most likely to support the OPS,” she says. Among businesses, people of color were more likely than white respondents to support the OPS. “To a large degree,” Roth adds, “we believe support stems from the community’s frequent experience with drug-related social problems such as seeing public drug use or finding publicly discarded syringes on the streets.”

Roth says that the intention of the work is to “take a community temperature and assess community opinions about the OPS as well as their experiences with drug use.” The research team plans to replicate this study if the OPS opens to see if and how community opinions change.



Anna Bostwick, BS/MPH '21

INVESTIGATING A PUBLIC HEALTH APPROACH TO UNDERSTANDING AUTISM

By Courtney Harris Bond
Photos by Margo Reed

A Dornsife undergraduate combines chemistry and technology to look at a possible contributor to autism at the population level.

Anna Bostwick, BS/MPH '21 may only be a junior, but as part of her co-op experience she is already deeply engaged in graduate-level research at the A.J. Drexel Autism Institute's Exposure Science Lab.

"I've really loved how I've been able to combine my chemistry and public health interests and get amazing job experience," says Bostwick, who is a student in Dornsife's accelerated Bachelor of Science in Public Health/Master of Public Health program. She plans to

“We’re trying to see if there is a connection between the molecules and the outcome data in terms of autism diagnosis.” - Anna Bostwick

graduate in 2021. “This project has so much weight. As a 20-year-old undergrad to work on a project that has huge implications, and all I did was go up to a professor after class and ask, ‘Hey, can I work in your lab?’”

Bostwick is referring to Nate Snyder, PhD, MPH, an assistant professor at the A.J. Autism Institute who leads the Exposure Science Lab and lectured in one of Bostwick’s public health classes last spring. Snyder’s work focuses on identifying and measuring modifiable risk factors for autism.

“I was really interested,” Bostwick says. “He’s doing public health work and chemistry work, and I asked if he had room for an undergrad in his lab. He’s been a great mentor.”

SEEKING CLUES TO AUTISM BEFORE BIRTH

Using blood spots collected from babies at birth, Bostwick is doing “untargeted analysis” to look for statistical patterns in the different molecules within the blood to see if they have any correlation to autism development. As part of her co-op work experience, Bostwick is expanding her research by working with Kristen Lyall, ScD, an assistant professor at the A.J. Drexel Autism Institute. Lyall is an epidemiologist who examines how the environmental factors mothers were exposed to during pregnancy may affect the outcome regarding autism.

The blood spot samples they are using come from routine neonatal screenings that are banked in California. Through the state’s Department of Developmental Services, which tracks information on autism diagnosis, it is possible to link specific samples to diagnoses and subsequently identify risk factors that may relate to these outcomes, Lyall explains.

Specifically, Lyall’s study looks at polyunsaturated fatty acids, which

“Anna’s work can help us identify factors that we could change at a population level to reduce the severity or prevalence of autism.” - Nate Snyder, PhD

are important fats involved in brain development, particularly in the latter part of pregnancy. Lyall’s hypothesis is that higher levels of these fatty acids for the developing fetus may lower the risk that the child will develop autism.

Lyall is leading the study that provided the initial blood spot samples, and Snyder is now working with them to expand the examination of potential risk factors to examine a wide range of other molecules measured in the

samples. “It’s a good example of how you can do a lot more than what you initially propose to do in a study,” Lyall says.

“Combining the biochemical knowledge that people like Nate and Anna have with public health methods can be really informative,” Lyall adds. She explains that she is “very impressed by Anna and by the whole experience. I think it’s great as an undergraduate to be working on an applied project because the only way you learn something is by doing it. She [Bostwick] is really gaining incredible experience. She’s very motivated and has a good handle on taking on very complicated, new things.”

To analyze the data from the blood samples at the center of the project, Bostwick has learned to use many statistical computing programs,

including R. Using this software and others, she codes and analyzes the small molecule data from Lyall and Snyder’s work in order to create graphs and track patterns, with the hope of finding some links to autism. “We’re trying to see if there is a connection between the molecules and the outcome data in terms of an autism diagnosis,” Bostwick says.

According to Snyder, “Anna is using a number of different pieces of software

to extract as much molecular information from the blood samples as possible and then using other software to correlate that information with outcomes that we care about.”

This study has the potential for significant implications in the public health realm for autism. The work Bostwick is doing with Lyall and Snyder might be able to help determine the groups at higher risk for developing autism, Lyall says. “But, we should be careful in not selling this as a method for detecting autism at birth,” Lyall says. “There’s a lot that happens in the period between birth and diagnosis.”

“Anna’s work can help us identify factors that we could change at a population level to reduce the severity or prevalence of autism,” Snyder says.

“Understanding the roots of autism is very important for public health, especially with all the issues we’ve had with the vaccine debate and the distrust in science,” Bostwick adds.

“By researching this, we can better understand the many factors already known to increase the risk for autism and see how they interact.”

Snyder agrees: “I think that figuring out more legitimate causes and contributors to autism will reduce anti-vaccine and vaccine hesitancy.”

“Understanding the roots of autism is very important for public health, especially with all the issues we’ve had with the vaccine debate and the distrust in science.”

team of people, which is what we do in public health, as well as “a lot of cross- and trans-disciplinary work,” Snyder says.

Bostwick says that the opportunity to do graduate-level work as an undergraduate and to be able to participate in projects that have

- Anna Bostwick

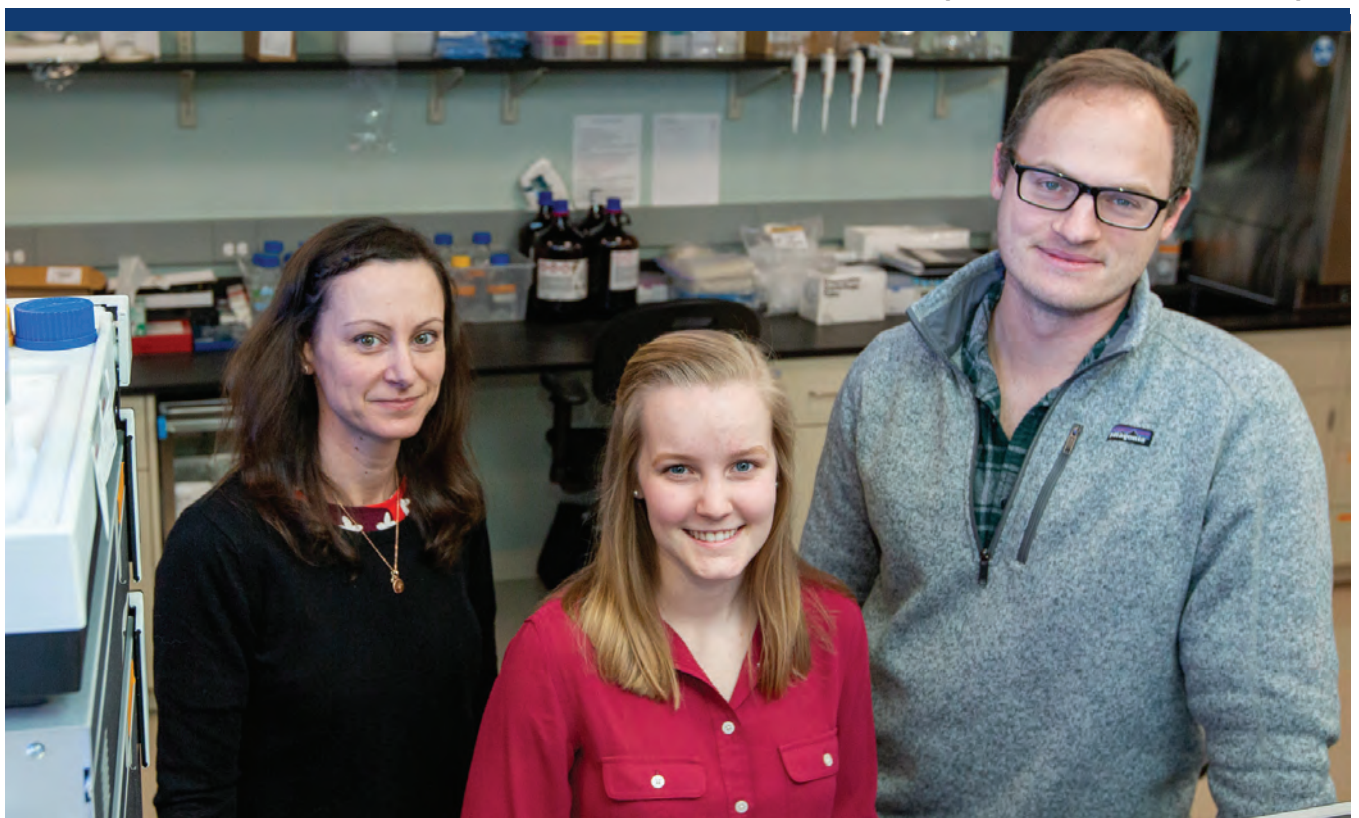
Bostwick says the work she is contributing to in the lab can also help public health officials better understand people who have autism in order to build more effective infrastructure, programs, and educational tools to support them.

She is also getting the opportunity to work with two mentors. “Anna really gets a unique chance to work with a

applications in the real world has been invaluable.

“It’s been a very self-directed environment,” Bostwick says. “It’s taught me a lot about being confident in myself and the work I’m doing.”

Kristen Lyall, Anna Bostwick, and Nate Snyder





GETTING THE **MOST** OUT OF **DORNSIFE**

By Courtney Harris Bond
Photo by Rachel Wisniewski

A first-year MPH student, and veteran student advisor, shares her ideas on how to succeed and really enjoy Drexel.

As an undergraduate at The Lincoln University, Breana Branch discovered that she enjoyed supporting her fellow students just as much as pursuing her BS in biology at the nation's first Historically Black College. Now a 2020 master's in public health candidate at Dornsife (DSPH), Branch is studying epidemiology, but she is already making time to get to know her fellow students and lend a hand.

To begin with, she is a Dornsife Student Ambassador, volunteering her time at admissions events, open houses, student orientation days, and private advice sessions to help prospective students find their way through the admissions process, and find out what it's like to be at Dornsife.

Sharing what she's learned as an orientation leader and mentor for transfer and freshman students at Lincoln is serving her well at Dornsife,

but she is also hoping to pay her own positive experience forward. "When I visited Drexel, I met a Student Ambassador who talked with me and really helped me feel welcome. She was very warm. It really helped me make the decision to choose Dornsife," she says.

At DSPH's 2019 Winter Preview Day Branch got her chance. "A young woman considering Dornsife had lots of questions, so I shared a card

Courtney Harris Bond is a Rosalynn Carter Journalism Fellow and a freelance reporter in the Philadelphia area.

so that she could get in touch. She later emailed to say that I had made her feel comfortable. She was interested in applying to be a Dornsife Fellow and she was really interested in community health and prevention. We talked about the types of things I usually discuss with prospective students – class sizes, what types of out of class experiences they might have, research opportunities.” A few weeks later, she emailed Branch to let her know she had chosen Drexel.

She also calms the nerves of students concerned about pursuing their interest in epidemiology. “I make it clear that it is manageable. It’s possible, even with the five quarters [a shorter time frame than most schools].”

“I advise them to just manage their time. It can be challenging with the quarter system. For me, coming from a semester system, it’s very different. It’s a much faster pace than a semester. It was definitely a shock because there’s no time to procrastinate,” Branch adds with a broad smile.

“Some prospective students are concerned, because they also want to get involved, but I tell them ‘understand what’s due and plan it out. It will be a little fast, but it’s not something that you can’t handle.’ One of the reasons I chose Dornsife is because I can graduate earlier than all of the other MPH graduates in 2020,” she says.

Branch also wants to take advantage of DSPH’s broad opportunities to learn about many aspects of public health. For instance, she’s excited about starting her term as a Dornsife FIRE Fellow, at the school’s Center for Firefighter Injury Research & Safety Trends (FIRST), where she will be analyzing data collected from EMS

and fire houses around the city. “I really want to strengthen the data analysis skills I’m learning in my classes and learn more about the fire service and occupational health,” she says.

The FIRST Center conducts fire service injury research, epidemiology, and evaluation. She is also a Dornsife Public Health Fellow, working as a graduate research assistant with Sharrelle Barber, ScD, MPH, assistant research professor, department of Epidemiology and Biostatistics. “Breana will be assisting me in advancing analysis and manuscripts examining residential segregation, race, and cardiometabolic risk factors in the Brazilian Longitudinal Study of Adult Health (ELSA-Brazil) and compiling multimedia content for the Urban Inequalities and Health Online course which will be offered in winter 2020,” Barber says.

The one thing she does that’s absolutely *not* health focused is relax with one of her favorite pastimes — baking. “I really like to make lemon-glazed, blueberry muffins, cupcakes, and brownies,” Branch says. Her fellow students might be happy to know that she bakes by the dozen and “likes to share because [she] can’t eat 12 cupcakes.”

A CAREER IN SERVICE

What does Branch hope to do when she gets that head start on other MPH graduates in March of 2020? She is not exactly sure at this point, yet she someday hopes to work for the Centers for Disease Control and Prevention.

In the meantime, when this 25-year-old from Bowie, MD graduates, she will look for a government job that allows her to apply her epidemiological skills at the local, state, or federal level. Or perhaps join the Air Force.

She also goes to all the teaching assistant sessions that she can attend. Of her approach, she says, “I always go to my TA sessions, especially for epidemiology because this is my career and I want to do as well as possible.”

“If I am stressed, I will also go to the counseling center. I know mental health care has a stigma, but you don’t have to have a mental health condition to go to the counseling center, if you have a bad day, you can go. You have to make sure you are physically, as well as mentally healthy, because graduate school can stress you out.”

To her fellow students she says: “Don’t ever be afraid to ask for help.”

“Some prospective students are concerned, because they also want to get involved, but I tell them ‘understand what’s due and plan it out. It will be a little fast, but it’s not something that you can’t handle.’”

- Breana Branch

THE POWER OF POLICY

By Sherry L. Howard

Dornsife students learn the real-world art of crafting, informing, and safeguarding the legal and legislative safety net that supports health in every community.



In the first week of his Dornsife practice experience at Philadelphia's People's Emergency Center (PEC), Thomas Jackson was put to the test.

His boss, Joe Willard, vice president for policy and advocacy, had sent him an email stating that "he was going to throw me to the sharks," Jackson says. Willard directed his new intern to take his place at a Philadelphia City Council hearing on budget allocations.

"He gave me specific details: Where I could find printed versions of the testimony, where I had to sit," says Jackson, a first year MPH student in Dornsife's department of Health Management and Policy. "I had no idea what to expect. I had never been to one before."

Thomas arrived more than an hour early, the first person in the Council Chambers. "Overall, the experience was empowering because that's the type of thing I want to do in the future ... going to those types of meetings and seeing the results of policy."

Willard adds, "I wanted to test him on his ability to adapt to experiences that are not common to him and his ability to think for himself. This would also tell me what I needed to do to support him."

Jackson began his PEC work in April. He is part of the most recent class of Dornsife students who prepare for careers in public health by taking the skills they learn in Dornsife's classrooms out into the world to complete at least 300 hours of work advancing public health through the school's partnerships with Philadelphia's state and local agencies, hospitals, clinics, community organizations, and other sites around the region.

"You need to have good health policy in place to impact population health," says Alex Ortega, chair, PhD, department of Health Management and Policy at Dornsife. "Some of our biggest public health interventions have been policy-related: vaccination policies, Medicare, Medicaid, and the Affordable Care Act. These are all policies and laws that have a large impact on people's lives, and so public health professionals need to know how to work with policymakers, devise policy, advocate for policy, implement policy, and how to evaluate policy as well as how policies turn into effective programs."

Some of the faculty at Dornsife have worked at many of these partner organizations, Ortega says, such as James Buehler, MD, clinical professor, who took a two-year leave-of-absence from Dornsife in 2014 to become Philadelphia's Health Commissioner. Dornsife's Dean, Ana Diez Roux, MD, PhD, MPH; John Rich, MD, a Dornsife professor and co-director of the Center for Nonviolence and Justice, and Marla Gold, MD, Dornsife dean emerita, are all current members of the Philadelphia Department of Public Health Board of Health.

advocacy skills that influence public health practice," Ortega says. "Everything we do has to have a practice or policy slant. But it's not only that, it's the connections the faculty have. They have a number of local, regional and national connections which help our students place well in meaningful practicum internships."

LEARNING WHAT WORKS IN PHILLY

The Philadelphia Department of Public Health is not only a partner for Dornsife students, but the school's researchers often evaluate and inform local policies. Recent projects include assessing the impact of the Philadelphia Housing Authority's smoke-free policy and a bike-sharing project in low-income neighborhoods. Rachel Bard, MPH '19, worked on the Board of Health regulations in 2018 as part of the Philadelphia Health Law Project. Other students have also assisted in community health needs assessments.

Jessica Lopez, MPH '15, Community Health and Prevention, has worked on three surveys assessing possible barriers to the implementation of the smoke-free housing policy, under the guidance of Dornsife faculty members Ann Klassen, PhD, and Nora Lee, PhD.

"I have seen the impact of policies on communities, and the desire of stakeholders to come together to create change."

- Jessica Lopez, MPH '15

"A lot of our teaching deals with instructing students on how to work in the real world and using policy and

"One goal was to gauge private landlords' attitudes and experiences with tenants' tobacco use, as well as

“A lot of our teaching deals with instructing students on how to work in the real world and using policy and advocacy skills that influence public health practice.”

- Alex Ortega, PhD

their knowledge of Philadelphia's multi-unit housing smoking disclosure law that requires landlords to tell prospective renters in multi-unit buildings whether the building is smoke-free,” Lopez says. “By working in various settings, I have seen the impact of policies on communities, and the desire of stakeholders to come together to create change.”

“When we are looking to implement policy ... one of the questions we ask as we are thinking about its implementation is how are we going to know if it's effective or not,” says Cheryl Bettigole, MD, division director for Chronic Disease Prevention, Get Healthy Philly. “Reaching out to partners at Dornsife is an important piece of this in terms of researchers who are interested in working with us to evaluate the effectiveness of policy.”

Measuring the impact of Philadelphia's well-known soda tax was also a team project guided by Dornsife faculty

member Amy Auchincloss, PhD, with a key part of the work conducted by student Yichen Zhong, MHS, PhD '19, epidemiology.

“We conducted surveys to compare residents' beverage consumption before and after the tax,” says Zhong, now an associate principal scientist at Merck, who specializes in data science. “I learned how the tax might affect

different stakeholders. It really helped me learn different perspectives. When applying what we learned in the classroom to the real world, I realized it is very complex to bring about a policy change and measure its impact.”

Embedding students in the health department has been just as important in the evaluations, Bettigole says,



“Lots of negative health outcomes come from not having a stable living environment.” - Thomas Jackson

sharing that in one project they helped conduct ground-truthing at food stores across the city to assess healthy options. Interns have also helped the city make up for low staffing levels.

“Having students be able to come and spend time in the health department ... has been incredibly beneficial in terms of having additional hands on deck in cases of limited resources. Exposing individuals to what it’s like to work at a local health department before they even graduate really creates a passion in them for working in this setting,” says Chief Epidemiologist Raynard Washington, PhD, MPH, noting that some of those former interns now work full time for the department.

WORKING CLOSER TO THE COMMUNITY

Jackson chose an atypical place for his summer-long practice experience. Since the PEC is not a public health agency, it works directly with people whose health outcomes are influenced by their lack of housing. It also offers community and economic programs to improve neighborhoods.

The link between homelessness and population health is currently receiving national attention. In April, the American Public Health Association officially declared housing and homelessness a public health issue. Ortega noted that many homeless people are struggling with mental health problems, substance use issues, food insecurity, and often physical health problems such as diabetes and hypertension.

Homeless people also endure factors that are not always linked

to poor health, but are determining factors, such as educational deficiencies, lack of income, discrimination and of course, housing insecurity. Jackson says these are the social determinants of health that he learned at Dornsife. “If you don’t know where you’re going to sleep at night, you’re

and remove barriers that are preventing them from obtaining stable housing.

He is also knee-deep in advancing a Pennsylvania House bill that will support youth who age out of the foster care system, but make it to college and are in need of some support.



L to R: Willard and Jackson with Rep. Chrissy Houlahan (D-PA) and her team.

probably not going for regular health checkups ... getting regular cleanings at the dentist, you’re probably not having eye exams,” explains Jackson, who grew up in a low-income family in Stringer, MS, and as a college student was temporarily faced with no place to live. “Lots of negative health outcomes come from not having a stable living environment.”

At PEC, Jackson is creating a geographic information system (GIS) map so staff can develop a plan for housing and other services in specific neighborhoods. The goal is also to coax local members of congress to support a federal housing bill that would expand the definition of a homeless person. Doing so would more realistically reflect people who are homeless

Jackson has been making phone calls and setting up meetings with legislators to get their support for the bill. Willard also tapped him to write a policy brief on the bill. “I let him know, you’re going to be writing for staff people who don’t have a lot of time and if you have a compound, complex academic sentence, I’m going to break it up into three sentences. Be prepared to write in the real world for a population with many different perspectives,” says Willard. “[Because] a suburban or urban or rural legislator approaches foster care issues differently. Policy briefs must consider that. We are also trying to instill in Thomas that it’s not we professionals who can tell the story. It’s got to be an individual in the issue,” Willard says.

Adds Ortega, “In the classroom, we can teach about theory and we can give applied examples, but it’s a whole other thing to go out in the field and experience the policymaking process, the complexities, and challenges of making policy.”

Jackson agrees that “there has to be that human connection with the research and the results and then the policy.” He chose Dornsife for its emphasis on that same concept as well as community engagement. “I’m gaining experience in that aspect of human connection at PEC, but the concept is really something emphasized at Dornsife.”

The impact that policies have on everyday people is also part of what convinced Cinthya Alberto, a second-year PhD student in Dornsife’s department of Health Management and Policy, to focus on public health instead of medicine. She recently published her first authored research paper on the effects of the Affordable Care Act on pediatric racial and ethnic health care disparities resulting from barriers created by healthcare providers in California. She showed that children had improved access to health care providers after the law was implemented.

Alberto says she became interested after seeing providers drop people from Medicaid because they considered the federal reimbursements to be too low.

“While I was working at a psychiatrist’s office, I ended up resigning from that position because I didn’t feel comfortable working there because of the policies they were implementing,” says Alberto. “They decided they were going to stop taking Medicaid and I’m thinking,

OK, these are patients who are low-income who have Medicaid and they’re sick and you’re literally going to stop seeing them because you don’t care for the Medicaid reimbursement?”



Cinthya Alberto

Her real-life experiences and a 2016 Dornsife study opportunity in Cuba made her realize that she wanted to use research to advocate for and impact health care policy.

“If we keep publishing our work in journals,” Alberto says, “who’s reading our work? It’s the same researchers in the same silo. As researchers, we are responsible for our findings and there needs to be a shift to disseminate our findings to outsiders, out to organizations or grassroots, and ultimately to policymakers.”

Jackson shares Alberto’s view. “What I hope to do is take research and draft it into things like policy memos and policy briefs,” he says, “and work alongside people like city council members and congressional representatives to develop meaningful policies that really reach to the roots of problems rather than some topical Band-Aid solutions.”

WORKING WITH PARENTS AND TEENS TO IMPROVE SEX ED

When it comes to refining expert skills about the many ways to inform and shape policy in the real world, a fortunate group of students from nearly every Dornsife School of Public Health (DSPH) master of public health (MPH) class gets to test and enhance those skills at PolicyLab.

Children’s Hospital of Philadelphia’s (CHOP), PolicyLab intentionally collaborates with practitioners, families and policymakers because they say they know that they “cannot achieve improved child health outcomes by [themselves].” That approach is at the root of CHOP’s longstanding partnership with DSPH.

The 2019 Dornsife team includes Chloe Bernardin, Sarah Ehsan, Kathleen Escoto, and Lauren Trumbull, all members of the MPH ’20 class. Working under the guidance of Aletha Akers, MD, MPH, faculty at PolicyLab, and Ava Skolnik, MPH, a clinical research coordinator at CHOP, who is also a Drexel Alum. They are exploring various approaches to improving adolescent sexual and reproductive health.



Sarah Ehsan

While Ehsan and Escoto are studying how teens use contraceptives, Bernardin and Trumbull are helping to develop a video game script to help parents and teens communicate effectively about sexual health. All three projects are part of PolicyLab’s Adolescent Health and Well-being research — a portfolio designed to improve methods and tools for practitioners, policymakers, as well as parents and children.

“We are trying to create an evidence base to show what works and what does not,” says Akers. “The work focused on gaining a broad understanding of how young people use reproductive health services and how we can improve the services and increase that use, along with education.”

“I’m really excited to work on a sexual health project,” says Ehsan, who recalls receiving abstinence only sex education while growing up in Indianapolis. She is looking into how teen girls use Intrauterine devices (IUD), with an eye toward encouraging IUD use as it has been shown to reduce teen pregnancy.

“One of the objectives is to see if adolescents are getting the same quality of care with IUD use that adults get,” Akers says.

“I’m interested in empowering young people to take charge of their reproductive health. As an

epidemiology major, it’s also great to work with mixed methods — quantitative and qualitative research.”

Escoto is analyzing data to find out if 16- to 21-year-olds adhere to certain contraceptive methods. “One of my goals is possibly to work in women’s health,” says Escoto, though she is also interested in environmental health.



Kathleen Escoto

She sees her real-world experience at PolicyLab as an ideal learning experience. “There’s so much more volatility in data you see in a real environment. Plus, you get to work with doctors, psychologists, nurses, other statisticians — you feel part of a team effort.”



Chloe Bernardin

Bernardin and Trumbull’s project is part of Akers’ ParentsAreTalking.com website work. “We are conducting focus



Lauren Trumbull

groups to help write the script for a video game Drexel students are developing to help parents talk to their teens [12- to 17- year-olds] about sex,” Trumbull says.

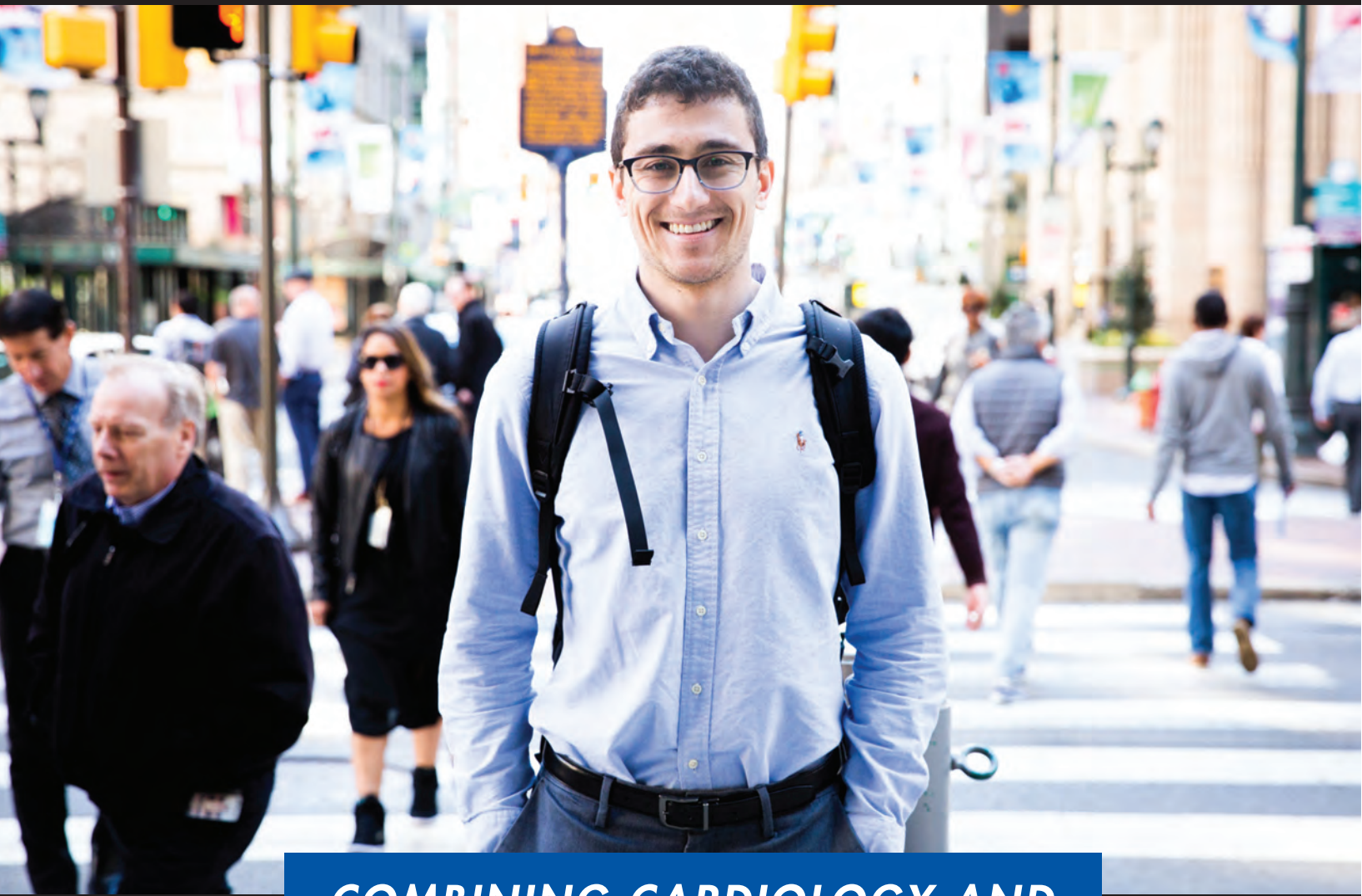
“We are not just targeting adolescents,” Akers adds. “We look at ways of engaging parents as well.”

The project supports public health, Trumbull says, because research shows that “when parents talk to their kids about sex they are more likely to practice safe sex or abstain until later in life.”

The game will focus on turning everyday moments — like when a parent finds a condom in their son’s pocket — into a productive, teachable conversation.

“I’ve always been interested in reproductive health and research. I thought this project would be a good way to combine those topics,” says Bernardin.

Trumbull, who wants to address health disparities in minority populations, also appreciates doing work that may allow her to actually see an impact. “What we are doing is real,” she says. “We are going to write a script for this game, and then it’s live. Not just being graded in a classroom.”



COMBINING CARDIOLOGY AND

PUBLIC HEALTH **TO HELP** **COMMUNITIES**

By Emily Gallagher

Discovering the value of the population approach to health and healing.

Emily Gallagher is a Communications Coordinator at the Dornsife School of Public Health.

Photo by Rachel Wisniewski

Markian Bojko, MD/MPH '20, intends to one day be a cardiothoracic surgeon and clinical researcher. His path to a career in health and medicine began as an undergraduate at Boston College studying physics. Since his family is from Ukraine, Bojko was excited to volunteer at a cardiothoracic surgery center in Ukraine where he had the opportunity to witness open-heart surgery. "This unique experience helped me determine that I wanted to pursue a career as a surgeon," he says.

Now in his third year of medical school at Drexel College of Medicine, as a student in the Dornsife School of Public Health's (DSPH), MD/MPH program, Bojko has expanded his career goals to include a desire to understand and improve public health. When not in class, Bojko can be found grading papers as a human physiology teacher's assistant, biking to class, or volunteering at the Health Outreach Project (HOP), which is run by Drexel medical students. "HOP provides care to Philadelphians who lack access to care through free health clinics and services," he says.

His HOP experience reflects his understanding of the link between aspects of life outside of the clinical realm and health status. "I chose the MD/MPH program for both idealistic and practical reasons," Bojko explains. "The idealistic vision included my hope of having a greater impact on the health of my community beyond just my immediate patients. From a practical perspective, I wanted to gain confidence in my ability to design and initiate research projects."

EXPLORING RESEARCH THROUGH PRACTICE

Working under the guidance of Prashanth Vallabhajosyula, MD, associate professor of Surgery at the Hospital of the University of

"I now feel confident that I can take a research idea and transform it into an answerable research hypothesis that may add to the current knowledge in the field and impact people's lives."

- Markian Bojko

Pennsylvania, Bojko had an opportunity to further expand that understanding. In 2018, while working on his Dornsife Integrated Learning Experience (ILE), he studied patients with acute type A aortic dissections (ATAAD), a serious, often fatal, heart condition in which the inner layer of the aorta tears. Student projects like Bojko's, which focus on research or policy activities, are completed by all Dornsife MPH students. Penn Medicine is just one of the 86 partners (in 2019) who open their doors to Dornsife public health graduate students each year.

The objective of the study was to determine if a patient with a higher degree of aortic insufficiency (AI) at the time of ATAAD is at a higher risk of developing reoccurring AI at any time after the surgery. The study included approximately 500 patients. Following the advice of his advisor, Jana Mossey, PhD, MPH, MSN, professor emerita in the department of Epidemiology and Biostatistics at Dornsife, Bojko worked hard to determine the best approach to clean and prepare data for analysis, summarize descriptive statistics, build multivariable models, analyze missing values, and use propensity score-matching to estimate the effects of the surgical intervention.

"I advised Markian to think like an epidemiologist and ask questions in critical ways," says Mossey. "MD/MPH students look at a broader context than just biological characteristics when conducting research. For example,

he questioned whether patients who are underinsured have worse post-surgery outcomes and if they had health care access issues; or, did the patient wait too long to seek medical attention resulting in a more complex surgical intervention and recovery?

Ultimately, it was discovered that ATAAD patients do have a heightened risk of developing reoccurring AI, even years after surgery. "The data compiled will be useful for future research," says Bojko.

Further underscoring the potential impact of the study, Bojko and the research team received national recognition for their work. "It is rewarding that the research has been well-accepted in the cardiothoracic surgery community," he says. "The work will be recognized at the American Association for Thoracic Surgery's 99th annual meeting in Toronto where I will have the opportunity to present it."

As for his choice of pursuing an MPH, in addition to his MD, Bojko says, "The program helped me attain specific skills that will undoubtedly help me in the future. I now feel confident that I can take a research idea and transform it into an answerable research hypothesis that may add to the current knowledge in the field and impact people's lives." Someday, he adds, he will volunteer again in Ukraine, only this time he will take his new knowledge to bring about positive changes in public health.

MAKING A HEALTHIER LIFE POSSIBLE FOR AT-RISK TEENS

By Courtney Harris Bond



Adding a Dornsife EMPH to his accomplishments helps a student advance his dreams of creating a world that offers health care to everyone, from every community.

Cameron McConkey, BS, is determined to make big changes in public health, whether he is working his day job as operations coordinator for the Center for Family Intervention Science at Drexel's College of Nursing and Health Professions, or laying the groundwork for success in his upcoming fellowship at Philadelphia FIGHT's Youth Health Empowerment Project (Y-HEP) Health Center.

Working on his Executive Master's of Public Health (EMPH), at Dornsife, along with the work he will explore as a two-year Stoneleigh Emerging Leader Fellow working at the Y-HEP Health Center, is McConkey's way of advancing the issues that he is passionate about: making quality health care a regular part of life for LGBTQ+ and at-risk adolescents.

McConkey's mentor at the Y-HEP Health Center thinks he is just what the program needs. "We are really, really fortunate to have found someone who perfectly aligns with the vision and mission of our work and understands the way in which we operate," says Elaina Tully, MD, the center's medical director, who will guide McConkey's work. The organization offers culturally-competent medical care, along with advocacy, education, and other services, to low-income individuals living with HIV/AIDS and other

at-risk youth, through a harm-reduction model. "We meet youth where they are," Tully says.

The goal of McConkey's work at Y-HEP will be to find new best practices for increasing health care access for the population the clinic serves, but he and Tully will begin by creating a solid foundation for their work by conducting a needs assessment to identify barriers to health care for local young people ages 13 to 24.

"We want the project to be youth-led and plan to leverage the first year to gather as much information about adolescent health care as possible," says McConkey. "Many of the young adults we will work with may struggle with mental health issues, unstable housing, and substance use issues. It's a really diverse population there."

During the second year, McConkey will help pilot a program that builds on the

results of the needs assessment to begin to create ways to extend access to health care to the vulnerable populations outside the clinic's walls. McConkey's current ideas include a mobile van with health care available to youth shelters or perhaps partnering in some way with the foster care system, school districts, or other non-profits.

"It's easy to get excited about what all these solutions could look like," McConkey says. But what is really important is "being intentional in developing relationships with patients, with the adolescents who are there now at Y-HEP and making myself accessible to youth networks. This is going to be really important when it comes to gathering information."

The goal is not to develop a new model of health care to enhance clinic capacity. McConkey says, it is to focus on improving circumstances for individuals at the greatest risk and who are least engaged in care. "Each additional success is huge. It's more about the quality of those individual successes than the quantity."

Ultimately, they hope to have a "model that can be implemented in other agencies and cities," McConkey adds. He sees his work on his EMPH at Dornsife as key to helping him succeed in his fellowship as he learns to examine the world through a "social justice lens."

His EMPH thesis is entitled "Strategies for Addressing LGBTQ+ Health Education and Inclusion in a College of Nursing and Health Professions." The focus is on finding strategies for addressing LGBTQ+ inclusion in domains of health care professional development and higher education.

"I am passionate about LGBTQ+ health because it is my belief that health care

and social services built for society's most marginalized people are the services that best serve society, at large," McConkey says. "As an out and proud member of the LGBTQ+ community who benefits from a great deal of white and cisgender privilege, I carry a sense of obligation to pay forward the activism that has afforded me much of the freedom I have today."

"This freedom does not exist for all people in the LGBTQ+ community; we know that health disparities within this community disproportionately affect transgender and gender diverse individuals and those with multiple marginalized identities (i.e., non-white,

"... it is my belief that health care and social services built for society's most marginalized people are the services that best serve society ..."

- Cameron McConkey

working class, low social mobility)," McConkey continues.

"When I consider what LGBTQ+ health means to me, I think about building health and social equity both within the LGBTQ+ community and between LGBTQ+ and non-LGBTQ+ identified individuals. I think about health programs that are inclusive and respectful of all people, regardless of their gender identity, gender expression and sexual orientation. I think about local, state and federal policies that protect LGBTQ+ people from housing, employment and public accommodation discrimination, which directly relate to LGBTQ+ health."

Determined to learn as much as he can while making change, McConkey also


intends to earn Dornsife's certificate in LGBTQ+ health once he is through with his EMPH. He is also encouraged by the support and recognition he has received along the way. He was recently awarded the Jonathan Lax Scholarship for Gay Men from the Bread and Roses Community Fund, and the Drexel Common Good Award for Civic Engagement from the Graduate College. The Jonathan Lax Scholarship will help pay for not only his LGBTQ+ health certificate but also for part of his EMPH.

McConkey said Dornsife's EMPH program "respects people's passions" and has given him the leeway to research and assess LGBTQ+ health

across the United States, work that will help him in his fellowship and beyond.

When he is taking a break from his civic engagement and working on projects directly related to LGBTQ+ health and community, McConkey, a Pennsylvania native who grew up in Uniontown, is also a self-described "outdoor enthusiast," who loves to hike, run, and camp.

For his work at Philadelphia FIGHT, McConkey said he feels like his "role is as a patient advocate. I feel an immense sense of responsibility in hearing these stories and bringing them back to effect change. I want to do what I can to elevate these adolescent voices and do what I can to better their health and health care experiences."



The US Public Health
Health System

(L to R) Michael Yudell, Thersa Sweet, Jennifer Kolker, Jerry Fagliano

INTEGRATING

PUBLIC HEALTH EDUCATION

By Karyn L. Feiden

Teaching Across Disciplines:
A Core Course Prepares Students
for Careers in Practice

Karyn L. Feiden is a freelance health writer in New York, NY.

Photos by Rachel Wisniewski

“You really need the contributions of subject matter experts in each field in order to have an impact.”

- Claire Gunnison

Ten years in the Navy taught Claire Gunnison quite a bit about the value of teamwork and respect for other perspectives. So, when she entered her first Public Health Foundations and Systems class as a Master’s of Public Health (MPH) candidate at Dornsife, she already appreciated the power of training that engages players across many fields. “It prepares you much better for the world,” says Gunnison, who is majoring in health management and policy. “You really need the contributions of subject matter experts in each field in order to have an impact.”

That’s the logic behind the interdisciplinary core course (PBHL 510 and 511) that everyone enrolled in Dornsife’s MPH program is required to take in their first two quarters, regardless of their specialty. Designed to give students a solid grounding in all facets of public health, and especially to demonstrate how they are interrelated, the course was introduced in the fall of 2017 as part of a broader curriculum redesign. For a nimble school with a social justice mission, committed to using science and research to drive action and policy, the innovation could not be more timely. “We are one of the few schools [the Council on Education for Public Health estimates 18% of schools] who are teaching our core courses in an integrated fashion,”

says Michael Yudell, chair of the department of Community Health and Prevention.

The escalating measles outbreak is only the most recent illustration of why this approach matters. “We are currently living in a public health failure,” warns Yudell, referring to the widening impact of vaccine hesitancy. When the core course probes the topic of vaccinations,

“We are one of the few schools who are teaching our core courses in an integrated fashion ... ”

- Michael Yudell, PhD

it does so through the lenses of ethics and history, policy and communication, infectious disease patterns and immunology, a breadth of coverage that “helps to create the next generation of public health scientists who can understand the importance and

relevance of vaccines from multiple perspectives,” Yudell says.

FOUR FACULTY, FOUR MODULES, COUNTLESS CONNECTIONS

When Dornsife decided to refresh its curriculum, under the leadership of Dean Ana Diex Roux, MD, PhD, MPH, faculty came together at a strategic planning retreat to talk in-depth about the knowledge and competencies MPH students should have by the time they graduate. “From that quickly came the idea that there needs to be an integrated core,” emphasizes Jennifer Kolker, associate dean for public health practice and associate clinical professor in the department of Health Management and Policy. “The whole notion of teaching these things in silos doesn’t make sense for the 21st century public health professional.”

Public Health Foundations and Systems classes are built around 80 minutes of lecture and discussion twice-weekly. Four faculty members, Jerry Fagliano, PhD, MPH; Jennifer Kolker, MPH; Thersa Sweet, PhD, MPH; and Michael Yudell, PhD, MPH, each representing one of the majors available at the school, divide up responsibility for the lectures. However, the entire team is generally on hand to listen, learn, interject, and enrich every conversation.

Over the two quarters, the course is divided into four modules: determinants of health; human rights, ethics and history; translating knowledge into action; and public health leadership. Each module is taught through the lens of a specific public health challenge. For example, the determinants of health module is structured around smoking. For six weeks, faculty members stretch across their disciplines to examine what smoking does to the body, disparities in smoking rates, the burden of smoking-related diseases, the history of tobacco control, the dangers of harvesting tobacco, and the influence of taxes on cigarette purchases.

“It is not so much about the content, but about using these topics to understand the framework,” clarifies Professor Kolker. “It is about understanding that everything in public health can be applied to tobacco.”

“Whatever we learned from the lectures we would implement and use in the labs.”
- Farren Rodrigues

Beyond the lectures, the students participate in two-hour weekly lab sessions in smaller groups run by a teaching fellow (and doctoral candidate). These sessions provide an opportunity to apply new knowledge. “Whatever we learned from the lectures we would implement and use in the labs,” explains MPH ‘20, Farren Rodrigues, whose interest in maternal and child health helped steer her towards a major in community health and prevention.

Substance use — the theme used to explore the translation of knowledge into action — illustrates how lectures and labs work in tandem. Among the key lecture topics are surveillance, the biological and behavioral implications of addiction, historical perspectives, prevention strategies, public policy and program planning. Then, in a lab exercise, students are asked to write memos arguing for or against a proposal to open a safe needle injection site in Philadelphia and then to present their arguments to the class.

Occasionally, a student will decide to change fields based on the broad exposure they gain in the integrated course, but it commonly cements an earlier decision, as it did for MPH ‘20 student Lauren Trumbull. “Listening to other sides of public health confirmed my interest in community health and prevention,” she says. “But it also gave me a different perspective on how much the four segments of public health need each other. You can never just do prevention. I still need my friends who are in epidemiology and policy and environmental health. We get to see how much our peers are very much going to be our colleagues and coworkers in the future.”

THE POWER OF TEAM TEACHING

Although the experience of team teaching was new to most of the faculty, the Foundations and Systems course has demonstrated its power. “The camaraderie among the faculty allows us to query and question one another during the course in a way that enriches the material being taught,” explains Yudell. “It allows students to see that there is a back and forth and a thoughtfulness here.”

The four professors meet weekly to agree on the focus of each presentation and the competencies it helps to develop. “This is not just four lecturers doing their own thing,” says Fagliano, who chairs the department of Environmental and Occupational Health. “It is all of us paying attention to one another’s content area and giving feedback and reflecting on the coming week’s lectures and what we can contribute.”

The classes provide plenty of opportunity for faculty to play off one another. For example, the theme of substance use has engendered a vigorous conversation about the relative importance of nature and nurture. Sweet, an associate professor in the department of Epidemiology and Biostatistics, presents the biology of addiction while Yudell explores the relevant social and behavioral issues. “I’ll talk about what happens in the brain,” explains Sweet, “and then Mike [Yudell] will talk about how people with addiction have historically been treated and how he sees approaching this simply as a biological disease is a disservice.”

Faculty members may also chime in to draw connections across lectures and highlight interdisciplinary links (e.g., the history of AIDS activism and its influence on FDA policy informs public health leadership today). The professors often learn from their colleagues and always listen attentively. “Students tend to perk up when they see another faculty member putting in a comment,” says Fagliano. “It is good for them to know we are all engaged and listening and reflecting during the lecture. It usually adds richness to the flow.”

So what is the key to successful teaching in an interdisciplinary milieu? “You have to be willing to compromise, and be respectful and take responsibility,” says Sweet. When those attributes are modeled in the classroom, future public health professionals get a taste of the skill set they will need as they head into practice.

“This is not just four lecturers doing their own thing ... it is all of us paying attention to one another’s content ... reflecting on the coming week’s lectures and what we can contribute.”

- Jerry Fagliano, PhD

Thersa Sweet introducing students to epidemiology.



MENTOR AND STUDENT

TACKLE **STRESS AND VIOLENCE**

AMONG FIRST RESPONDERS

By Sheree Crute



Firefighters from San Diego Fire-Rescue Department, Station 12 (L to R) Dave Stept, Corey Teng, Jason Diaz, and Joe Zakar with Regan Murray.

As part of one of Dornsife's most impactful research centers, this team is working to find ways to help EMS workers combat stress, violence, and protect their mental health.

Sheree Crute is director of the Dornsife marketing & communications department.

In those terrifying moments when someone realizes it's time to grab a phone and dial 911, there's seldom a thought given to the tremendous stress and strain endured by the women and men who must respond to that call. Understanding the potential mental health impact of what first responders experience at work each day is the work of Regan M. Murray and Kendall Seigworth, along with the larger team at Dornsife's Center for Firefighter Injury Research & Safety Trends (FIRST).

Together, Murray, MPH '17, an EMT, and EMS Project Manager for the Firefighter Injury Research and Safety Trends (FIRST) and Seigworth, MPH '19, who completed her practicum at FIRST, are working with rare information. They are analyzing interviews in which first responders have shared deeply personal stories about their work experiences.

"It is very telling that all of these interviews describe the great emotional demand of being in this profession. EMS work is stressful and has deep mental health impacts, yet many responders do not have access to any resources or training to deal with on-the-job trauma," Murray says. "In most fire departments, there's no formal mental health counseling beyond employee assistance programs."

The interviews have been used to help inform FIRST's "Stress and Violence in fire-based EMS Responders (SAVER)" project. The SAVER project is the first to receive FEMA R&D grant funds to address the EMS aspect of the fire service, even though EMS accounts

for as much as 70 to 90 percent of fire department call volumes. The SAVER study is intended to determine the predictors of fire-based EMS responder injury and stress.

BUILDING RESEARCH SKILLS

Working with Murray's guidance, Seigworth is honing her research skills by coding and categorizing the interviews. "The EMS responders identify a lot of personal factors as well as broader structural issues – poor funding, high call volume, having to deal with very stressed patients or bystanders, and witnessing violence while responding to calls," Seigworth says.

The project has also expanded Seigworth's perspective on conducting research. "I'm inspired by how many ways we go about doing research," she says. "Using psychological scale measures, along with qualitative interviews, to get a full understanding of someone. There are so many ways to go about investigating major social issues."

And even though she graduates from Dornsife in June 2019, Seigworth will be staying on with FIRST as a Fire service Injury Research, Epidemiology, and Evaluation Fellow for the summer. For students working with the FIRST Center, Murray adds, "You'll gain valuable lessons applicable to all areas of public health research. We really prepare MPH students for the workplace – students get that professional polish."

As a Senior Fellow Seigworth will map calls, look at patient care reports, and patterns to learn where calls involving violence against EMS workers might be concentrated for SAVER study sites in Chicago, Dallas, Philadelphia, and San Diego.

"I want to get my PhD someday," Seigworth says, "but I'm excited to be at the FIRST Center for the summer and then I'll see where life takes me from there."



Kendall Seigworth and Regan M. Murray

TWO STUDENTS LEARN THE

TRUE MEANING

OF COMMUNITY HEALTH IN AN AFRICAN COUNTRY

By Sheree Crute and Emily Gallagher



Sharon Dei-Tumi

AN INVENTIVE PUBLIC HEALTH SOLUTION GIVES GIRLS A CHANCE AT A NEW LIFE

When Sharon Dei-Tumi, MPH'19, set off for Lesotho, to explore water resources and public health, as a World Vision, Dornsife Global Development Fellow, she had no idea she would have a chance to change young girls' lives.

Because of her background as a medical technician, Dei-Tumi was allowed to accompany nurse practitioners into Lesotho's rural communities to an under-five clinic (for children age 5 or younger). Once there, she discovered that the very young women she assumed were older sisters babysitting siblings, were in fact very young mothers, yet most were the age of school girls.

"I asked the nurses about the young moms and she explained that once the girls began to menstruate, they were unable to buy pads, so they would miss so much school that they would eventually drop out. Once at home, girls became a burden to their

families, so they would be married off at a young age," Dei-Tumi says.

The situation was so dire, Dei-Tumi learned that the local government attempted to distribute pads, but there were never enough and they were only available to those girls who could still make it to school. With unemployment in the region at nearly 70 percent, Dei-Tumi explains "most families have to save any extra income for medicine or food so buying pads was an afterthought."

Determined to think of a solution, Dei-Tumi began speaking with the girls, and discovered that they were attempting to create their own solutions, though with few resources. "They were using T-shirts or in some cases socks or sheepskin, fabrics their families could spare."

Dei-Tumi quickly realized that these materials could be used to create reusable, effective pads. "I had read some literature on cloth pads and how they had been really successful at relieving this disparity in some other countries."

After conducting focus groups to see if the community was interested in trying

something new, Dei-Tumi was asked for a demonstration. Combining her own expert sewing skills, with what she learned from the company AFRIPads, she set up six demonstrations around the area to teach all who would attend how to make their own reusable pads.

"I focused on teaching the community, so that they could teach their neighbors. In my first group, I had 12 people and 10 were males, fathers. They were very interested in how they could help their daughters get an education," Dei-Tumi recalls.

After those sessions, Dei-Tumi credited many of the young women in the community in her research, in part to give them the credibility to carry on their work in their community. "I still keep in touch with some of the girls I worked with hosting demonstration sessions. They wanted to start a vocational school of their own."

The work was also perfectly in line with Dei-Tumi's career goals. A native of Accra, Ghana, Dei-Tumi says she hopes to return home someday to help remake the public health system there.



Alexis Johnson

Of her success creating a sustainable, community-responsive, public health solution in just her second year studying public health, Dei-Tumi says, “It was a lot of hope for me. It helped me know that no matter how bad one part of the world is there’s always a beacon of hope somewhere.”

HELPING A COMMUNITY RECOVER AFTER EL NIÑO

Alexis Johnson, an MPH ‘19 student in Dornsife’s department of Environmental and Occupational Health (EOH), has lived all over the United States, but considers New York, NY, her home. Growing up, she always had a desire to make a difference through health, but felt medicine was not the choice for her. “I didn’t see myself treating patients in a traditional medical setting,” she says. Public health gave her a chance to work on a broader scale.

When it came time to select her practice experience, Johnson also decided to explore global health issues by spending part of it in Berea, Lesotho, as a Dornsife Global Development Scholar. “I felt it was necessary for me to get out of my comfort zone, immerse myself in another

culture, and learn about their challenges first-hand,” says Johnson.

Johnson’s advisor Idris Robinson, MPH, assistant director of Global Health Programs at the Dornsife Global Development Scholars Program, was instrumental in helping her expand her public health interests by introducing her to World Vision, a global relief, development and advocacy organization dedicated to working with children, families and communities to overcome poverty and injustice.

Once on site, Johnson got an immediate, hands-on experience in public health, as well as the connection between health and culture. “I led outbreak investigations, implemented intervention strategies, and learned about environmental health from a whole new viewpoint,” Johnson says.

Her project was helping Lesotho’s population cope with the impact of an ongoing El Niño-induced drought crisis that had devastated many communities. The resulting lack of access to safe drinking water and sanitation put

Lesotho residents at high risk for hygiene-related diseases.

Johnson’s work centered on categorizing the population’s health problems, while setting priorities for the most effective use of resources — an excellent opportunity to make use of her studies for her minor in Infectious Diseases and Prevention. “I compiled a needs assessment report that examined the prevalence of water, sanitation, and hygiene-related illnesses such as diarrheal diseases,” she says.

While her practicum focused on gathering and evaluating data, Johnson became an advocate for the people of Berea. “It was important to consider what the citizens wanted, needed or identified as a major barrier to their health and well-being,” she says.

After six years of pursuing her undergraduate and graduate degrees, Johnson looks forward to beginning her professional life. “I am excited about starting a career and getting a job that I love,” she says.

Sheree Crute and Emily Gallagher are members of the Dornsife marketing & communications team.

Drexel Study Cites Importance of Rights-Based Indicators in Tracking HIV Epidemic



As national and global attention focuses on controlling — and someday ending — the HIV epidemic, human rights-based indicators are critical to assessing progress, suggests new research led by Joseph Amon, PhD. Amon is the new director of Global Health at the Dornsife School of Public Health and clinical professor in the department of Community Health and Prevention. He and his team, which included the head of the UNAIDS office in the Central African Republic and the director of the Global Network of People Living with HIV, among others, found that past and current methods of assessing the epidemic have impeded successful policymaking and planning in many communities around the world.

To begin with, Amon points out, “Understanding trends in relation to an epidemic are fundamental to epidemiology. Are things getting better or worse? What country is seeing the fastest rise in HIV infections and what countries are seeing dramatic drops?” He adds, “In our paper, for example, we talk about ‘epidemic transition’ as an alternative to ‘epidemic control’ to avoid the implication of a top-down approach and to highlight the understanding that progress toward the end of the HIV epidemic is not going to happen in a simple, linear fashion.”

In their study, “Defining rights-based indicators of HIV epidemic transition,” published in *PLOS Medicine*, Amon and his research team found the following:

- Stark differences in HIV incidence and mortality across locations and populations demonstrate the challenge of identifying a single indicator, at national scale, of progress toward the control of HIV epidemics.
- Even in countries that report decreases in HIV incidence, incidence may be increasing among groups that are particularly vulnerable and face political and social exclusion, especially sex workers, people who inject drugs, transgender persons, men who have sex with men, and prisoners.
- Five categories of indicators should be examined that address: levels of coverage of key evidence-based prevention and treatment interventions; incidence and prevalence of HIV infection; AIDS-related or all-cause mortality among people living with HIV; stigma and discrimination; and the legal and policy environment.

- Indicators should be disaggregated, whenever feasible, to fully reflect progress and challenges relating to all populations and locations in the national response.
- Evaluating indicators of national progress should meaningfully involve people living with HIV and those from key populations.

The researchers concluded that although the world is ready to celebrate an “end of AIDS,” it is important to recall that past efforts to define epidemic control may have done more harm than good, undermining realistic planning and policymaking. To combat this, a broader, rights-based indicator framework should be at the center of what epidemic transition means. This rights-based indicator framework should both track the factors driving the HIV epidemic and measure our progress from a highly-stigmatized epidemic that generates discrimination and human rights abuses. Ultimately, it should help transform it to a rational, evidence-informed, and rights-based response that respects the dignity and rights of those living with and vulnerable to HIV.

- Britt Faulstick

Study: As Many as 1 in 40 U.S. Children Has Autism



A new report from the Centers for Disease Control and Prevention (CDC) and U.S. Department of Health and Human Services (HHS), supported by the A.J. Drexel Autism Institute, suggests that as many as one in 40 U.S. children has autism. The report was written in collaboration with researchers from Drexel University, Harvard Medical School and George Washington University. Based on data from the HHS's 2016 National Survey of Children's Health, the study seems to confirm a decades-long trend of increasing autism diagnoses among children in the United States.

"This research is another step toward getting our arms around the number of people who are affected by autism spectrum disorder (ASD)," said Paul Shattuck, PhD, an associate professor in the Dornsife School of Public Health and head of the Institute's Life Course Outcomes research program in the A.J. Drexel Autism Institute. "While there have been a number of efforts to understand just how many people have autism, one thing they have in common is that most of them suggest the number is growing."

The finding — that about 1.5 million U.S. children have received an autism

diagnosis — which was recently reported in the journal *Pediatrics*, represents an increase in prevalence of childhood autism from the CDC's most recent biennial report on autism in 2014, which suggested that 1 in 59 American children has autism. While that number was based on an examination of available medical and education records of children between the ages of 8 and 11, this report, from the HHS Health Resources and Services Administration's Maternal and Child Health Bureau, digs a bit deeper by asking more than 43,000 parents if their children had received an ASD diagnosis. The survey also expanded the age range of "children" to include those 3 to 17 years old.

"Through the National Survey of Children's Health, our study provides the most recent nationally representative data on both the prevalence of autism and some of the challenges families face obtaining care," said lead author Michael D. Kogan, PhD, director, Office of Epidemiology and Research of the Health Resources and Services Administration's Maternal and Child Health Bureau. "This new information improves our capacity to understand and address autism, a complex neurological disorder."

The National Survey, which takes a broad look at children's health, has included several questions about autism in each of its last four iterations since 2003, with the findings helping to direct federal and state support programs and policies. By taking a focused look at the autism-related data from the most recent survey, the research team also identified a number of trends in autism diagnosis:

- Boys are 3.46 times more likely to be diagnosed with ASD than girls
- Diagnoses are twice as prevalent among children from households below the federal poverty level as those among children from families whose income is at least four-times the Federal Poverty Level
- Preterm children are also 71 percent more likely to be diagnosed
- US-born children were 2.34 times more likely to be diagnosed than foreign-born children

"Even after decades of hard work in the area of autism research, it's clear that we're only just beginning to understand the scope of ASD and its social and economic ripple effects," Shattuck says.

- Britt Faulstick

Air Pollution Linked to Stroke



In a nationwide study, counties with dirtier air had higher rates of stroke deaths and shorter life expectancies, according to preliminary research led by Longjian Liu, MD, PhD, associate professor of Epidemiology and Biostatistics at the Dornsife School of Public Health. The new work was presented at the 2019 American Stroke Association's International Conference.

Liu and his team examined the average annual levels of air pollution (PM2.5) that contain fine inhalable particles. Produced by diesel engines and the burning of coal, biomass and kerosene, this type of air pollution has previously been shown to enter the circulatory system and cause harm.

Analyzing health data and pollution-monitoring information from 1,561 counties across the United States between 2005 and 2010, researchers found the annual average for fine air pollution ranged from 7.2 to 14.7 (average 11.75) micrograms per cubic meter.

"Overall, the annual average was at a level considered acceptable. However, 51 percent of counties had an annual average exceeding 12 micrograms per

cubic meter, the annual average limit of the National Air Quality Standards for PM2.5 set by the Environmental Protection Agency (December 2012)," said Liu.

When researchers examined associations between county average PM2.5 pollution levels and health measures (age-adjusted rates in adults 35 years and older), they found: The dirtier the air, the higher the rate of stroke deaths and shorter life expectancy in both men and women. The higher the poverty rate and fewer the number of health providers in a county, the more high pollution impacts health. The highest impact on stroke was in the South. The new results raise the possibility that exposure to PM2.5 pollution may be a factor in creating the so-called "stroke belt" in the southern United States. Other possible contributors to excessive rates of stroke in these states are poverty, diet, smoking, the control of stroke risk factors and the availability of health services.

"To reduce the risk of stroke, clinicians should consider their patients' likely exposure to air pollution along with other risk factors," Liu said

- American Heart Association

Study Finds Asbestos in Talc, Used Across Southeast Asia



The public health risks associated with talcum powder containing asbestos have been widely explored in the United States, especially links with cancer. The latest work from Arthur Frank, MD, PhD, a professor in the department of Environmental and Occupational Health at the Dornsife School of Public Health, has now found a similar risk in Southeast Asia.

In new research, published in the March 2019 *American Journal of Industrial Medicine*, Frank, along with Indian and American colleagues, initially examined five popular talc products commonly used in India and other parts of Southeast Asia. One powder was found to contain tremolite asbestos. A second group of eight products was tested and six were found to contain tremolite asbestos. Frank concluded "large quantities of body talc products containing asbestos are used throughout Southeast Asia and are likely to pose a clear public health risk for asbestos-related diseases," such as cancer.

Evaluating the Health Effects of Physical Environment Upgrading Interventions in Informal Settlements



Tremolite asbestos has also been found in talc and other mineral deposits in the United States, as well as play sand used by children. In Southeast Asia, the products tested are most often used by adults dealing with extreme heat and humidity. “The risks of asbestos-contaminated talc include cancers such as lung, mesothelioma, ovarian, laryngeal and others,” Frank says. “Asbestos and talc can also cause non-malignant fibrotic changes in the lung.” Ovarian cancer is also said to be common in parts of Southeast Asia.

“Given the growing concern about asbestos in talc products, the implications of such exposures for hundreds of millions of Indians represents a significant public health problem,” Frank says. “There should be moves by the Indian government to force testing and prove that talc products sold are free of asbestos.”

- Sheree Crute



By 2030, 2 billion of the world’s projected 8.1 billion people will live in informal settlements. Improving health can be achieved through settlement upgrading interventions.

The evidence for the effect of these interventions on health, however, remains limited. Assessing past and current interventions can guide cities seeking to implement these changes to interventions by highlighting the types of interventions undertaken and the ways population health is most likely to be affected.

Salud Urbana en América Latina (SALURBAL) project researchers, Rosie Mae Henson, MPH, Urban Health Collaborative (UHC) at the Dornsife School of Public Health (DSPH), Ana Ortigoza, MD, MS, doctoral candidate, UHC at the DSPH, Kevin Martinez, MD, Instituto de Nutrición de Centro América y Panamá, and Gina Lovasi, PhD, MPH, UHC at the DSPH, are working to systematically review the health effects of physical environment upgrading interventions in Brazil, Mexico, El Salvador, Uruguay, Columbia, Argentina, India, and South Africa. “As rapid urbanization continues, cities and countries are confronting the need to ensure safe and adequate living conditions for all,” says Henson.

SALURBAL researchers identified the key characteristics and health effects of

physical environment upgrading evaluations in low- and middle-income countries and assessed the quality of the evidence from these evaluations.

Thirteen evaluations were published between 2012 and 2018, of which eight implemented rigorous study designs. Overall, evidence from upgrading interventions suggests health benefits across different indicators of health. Specifically, improvements in quality of life and reductions in violence and infectious disease were reported. Consistent with a previous review, most evaluations scored weak with threats of bias across multiple domains. “Despite what we found, there are still areas for improvement in evaluation design and analysis,” says Henson.

The study resulted in numerous recommendations including accounting for intervention inconsistency, collecting data at multiple time points, using secondary data, and handling missing data properly.

Natural experiments provide opportunities to build an evidence base that links interventions to health outcomes. Understanding and isolating the effects of these interventions can inform necessary policy decisions to address inadequate living conditions as rapid urban growth continues across the globe.

- Emily Gallagher



STAFF SPOTLIGHT
CAROLINE VOYLES

GUIDING STUDENTS TO
REAL-WORLD SUCCESS

By Courtney Harris Bond

Photo by Rachel Wisniewski

“Be active and present while here at Dornsife, including in your practical experiences. Join student clubs, go to journal clubs and office hours, ask good questions in class and at your placement sites. The more you put into your time here, the more you’ll get out of it in the form of connections, people willing to write you references, and, most importantly, a richer understanding of and ability to deploy the concepts and skills necessary to make a difference in communities around the world.” - Caroline Voyles

As the Director of Student Placement and Partnership Development, Caroline Voyles gets to help both Master’s of Public Health and Executive Master’s of Public Health candidates engage in the “doing” of public health. She’s their guide to the real-world, out-of-classroom experiences that are such a critical part of a Dornsife public health education.

When it’s time for students to explore Integrated Learning Experiences (ILE), Depth, or Breadth experiences, Voyles introduces them to the 60 to 75 partner opportunities (depending on the year), that they can engage in around Philadelphia and the region. First-year students are allowed to

choose from long-term projects or internships, committing to work at least 120 hours in a public health practice setting, such as Decision Resource Group, a pharmaceutical consulting firm. Another student might land at a nonprofit such as The Scattergood Foundation, which works in the realm of behavioral health. Many students also end up working at Philadelphia’s Department of Public Health on projects, while others might end up at the Children’s Hospital of Philadelphia. These are their applied practical experiences.

Second-year students engage in more targeted work — specific to their major — that often sets the stage for their

public health career. Their Integrated Learning Experiences have a variety of formats, some of which involve research, program evaluation, or an internship with multiple projects and activities. Some students publish a master’s paper associated with their Integrated Learning Experience and sometimes go to work for their placement site after graduation.

Creating the ideal match between student goals and aspirations and community partner opportunities is what Voyles enjoys most. It’s her way of supporting student success.

“I really like working with students to figure out connections between their

Courtney Harris Bond is a Rosalynn Carter Journalism Fellow and a freelance reporter in the Philadelphia area.

past experiences and where they would like to go in public health," says Voyles, a Minnesota native who first moved to Philadelphia in 2012.

"Some are coming with an undergraduate degree that may be in biology, others are career-changers. And others want to elevate their role in the field. Sometimes those who come from a career, [but] not in public health say, 'I've only ever done lab work.' But everybody comes with knowledge and skills gleaned from work experience, or volunteer experience, or course work. I like helping them connect the dots."

Sometimes that means also working with students who arrive at her office with a cover letter or resume in hand. Voyles talks through goals and work experiences and then helps students figure out what they want most from their applied practical or Integrated Learning Experiences.

Other times, students approach Voyles and say, "I have so many interests. I don't know what I want to do." Then she is able to help them focus on the transferrable skills that they want to learn that will support a variety of public health programs and issues.

Faculty advisors and community preceptors also help students find their way to practice experiences that are the best fit, but since part of Voyles' job is seeking out community partners, she is happy to make beneficial connections. "Students can meet with

me in the first year, and I can help build those partnerships that are relevant to their interests," she says.

The path to helping students not only succeed at Dornsife, but also find rewarding careers includes a series of activities that Voyles, along with her colleague Michelle McDermott, assistant director of student and alumni affairs, conduct each year. By hosting the School's Professional Development Seminar Series, they provide a forum where students can explore topics ranging from resume development to interviewing to networking. "We help them prepare for the professional aspects of the placement search that they aren't necessarily learning in the classroom," Voyles says.

Last year, Voyles also helped pilot the Philadelphia Public Health Immersion Program. During the weeklong initiative, new students get to discover and learn about different public health issues each day, such as substance abuse or injury prevention. Each morning, a Dornsife faculty member gives a lecture on a topic. Then in the afternoon, an external partner comes in to show "how this knowledge of public health helps influence public health outcomes on the ground," Voyles says.

Practice experiences may also help students uncover new interests or perhaps new career paths. "Last year, one of my students came to me and said,

'You know, I came in really knowing what I was going to do, and now I'm confused because so many things seem interesting,'" Voyles says. "For instance, he didn't expect to be so interested in tobacco control policy."

Voyles, a PhD candidate in Dornsife's department of Community Health and Prevention, is interested in research in the area of LGBTQ+ health and social inclusion. "I worked in the field of LGBTQ+ health prior to moving to Philly. I thought I may want to switch to food insecurity, so I took a temporary position that gave me exposure to that work. That experience confirmed that my heart was really in the realm of sexual and gender minority health and inclusion, so I came to Dornsife to elevate my skills in that area. It's for this reason that I love my student placement role, because I understand how all practical experiences can support an understanding of where you want to go, whether it's a feeling of confirmation that you're in the right place or the desire to steer in a different direction."

What she likes most about her work is how she helps her students engage in public health practice in the real world. "Practice is the glue that solidifies the concepts that they learn in our classrooms," Voyles says. "They learn by doing. They learn through their own successes. They do work that is meaningful to our partners and they really contribute to an organization. It builds confidence in the students themselves as well."



STAFF SPOTLIGHT
JAMEL LONG

MEETING THE UNIQUE NEEDS OF **STUDENTS FROM ALL BACKGROUNDS**

By Courtney Harris Bond

Photo by Rachel Wisniewski

“Take full advantage of what college has to offer! You’ll probably never have as many resources and opportunities available to you, as you do while you’re in college. In addition, once you start your careers, you’ll never have the type of free time you have now. So get involved, make connections (not just peer-to-peer, but find a faculty or staff member that you feel you can trust and who may be willing to mentor you), try new things, and most importantly, have fun!”

- Jamel Long

Jamel Long says helping students achieve success never gets old. As Dornsife School of Public Health’s Director of Academic Affairs, Long is in charge of making sure the school’s curriculum and coursework are in line with accreditation standards. But his favorite part of his job is advising undergraduate public health students and Executive Master of Public Health students as their academic and program advisor.

“You’re always rooting for all your students ... those who maybe come

in your office and cry about a personal issue they are facing or those students who want you to be the first person to know that they got an A on a paper,” Long says.

Long, himself, knows the true value of a supportive academic environment. Born and raised in Newark, NJ, he won an academic scholarship to the private boarding school, The Gunnery, in Washington, CT, at the age of 14.

“Growing up in the Newark public school system was a pretty typical

experience for most inner-city students: over-crowded classrooms, old text books, overworked teachers,” Long says. “In addition, there were the things that we had to deal with outside of school: drugs, crime, violence, etc., all within our neighborhood. I knew I wanted a different experience for high school. At The Gunnery, I truly began to learn how to learn. Classes were small and teachers were able to truly invest time in student success. The environment was safe and welcoming. It was a completely different world than what I was used to back home in Newark.”

Long's experience at The Gunnery also motivated him to work in education. He moved to Philadelphia in 2010 for a job as assistant director of financial aid and to start his master's degree in Higher Education Administration and Leadership at Drexel. He is now working on his doctorate in education.

In 2012, Long transitioned from the enrollment management side of the university to the academic side and started working in Drexel's School of Education. Then, in October of 2015, he joined the Dornsife School of Public Health team as graduate programs administrator, becoming director of academic affairs in 2018.

One of his special memories is a relationship he developed with a student pursuing a master of science degree in Drexel's Higher Education and Leadership Program, who had some health issues and other problems. He and Long decided it would be better if the student took a leave of absence from the program. But ultimately, the student returned and graduated.

Then, a couple years later, Long received this email: *"Thank you for being someone who had contributed to my success at Drexel, you are one of the people that stick out the most. You were an example of the type of support and guidance an advisor should provide to their students to assist in their success ...*

I wanted to let you know that your efforts to help me get back on track weren't in vain.

The student went on to encourage Long to *"keep doing ... impactful work for students like me ... it makes a huge difference!"*

Long still keeps in touch with this former student today. "Those are the moments that kind of make it worthwhile," Long says about receiving this email.

Just recently, Long talked with an African American student graduating from Dornsife in June. "She expressed how important it was for her and other students of color to have me here as a support system and how much that had helped during her time with us," Long says.

Long explains that because there is a shortage of African Americans in higher education, he knows "how important it is for students to see someone that looks like them, particularly students who may not be used to being in environments where they are the minority. I don't take that lightly at all. My goal is to always be of assistance and support to all students, but it always feels good when a student tells me how my presence has had a positive impact on them."

When thinking about the key to successfully working with his students, Long says he has to really get to know them. "An 18-year-old college freshman, living away from home will have completely different needs than someone in their mid-40s, who is in a professional degree program to advance their career, and online students have different needs than those who are on campus."

In his free time, Long enjoys cooking and says he probably would have been a chef or owned a few restaurants, had he not chosen higher education. "I love the process of creating new dishes and recreating dishes from some of my favorite restaurants."

Long adds his career has "really blossomed" during his nine years at Drexel.

"It's just something about being in this environment. Everyone is working toward a goal at all times. It's inspiring to be around so many people who are so motivated."

ALUMNI NOTES



A South Jersey local and Dornsife School of Public Health (DSPH) alum, Yolande Greene, MPH '15, Health Management and Policy, was honored as this year's Gamechanger at the HIMSS Global Conference & Exhibition in Orlando, FL. A Population Health and Health IT Consultant, Greene says, "I work to transform health care, challenge the status quo, and forge a new path."

The event brought together more than 45,000 health information and technology professionals, clinicians, executives, and market suppliers from around the world for HIMSS, a global not-for-profit focused on better health through technology.

Changing the Public Health Game in the Greater Philadelphia Area

By Emily Gallagher

A Dornsife alum is honored for her ability to leverage technology to improve public health.

Greene was named The Gamechanger for her work initiating the HealthShare Exchange's Health Information Exchange (HIE) program in the Delaware Valley. There, she leveraged technology to build bridges, foster collaboration, and fill informational gaps. "I was responsible for the overall planning, management, and execution of programmatic and strategic initiatives for the HIE program," Greene says. The program provides access to a robust data set of health care provider and patient interaction and clinical information on groups of individuals from multiple sources.

She implemented quality reporting and analytics services, worked with local and state health departments on public health initiatives, and partnered with other community-based organizations to provide enhanced care to the Philadelphia community.

"With these systems in place, public health practitioners can spend more time assessing problems and designing evidence-based solutions from the most up-to-date information," says Greene.

To promote health equity, Greene believes, "We must improve access to quality, affordable care for everyone through the effective implementation of health information and technology."

Now, five years into her career, Greene hopes to be an example to others in the industry. "For young, black women in America, opportunities in health IT are not readily available. I have the chance to lay the foundation for others," says Greene.

In many unique ways, DSPH helped prepare Greene for her future career. "My experience at Dornsife provided me with the leadership skills needed to embark on my career," she says. "I use core skills such as management, program development, organizational change, public policy and advocacy in all aspects of my work."

Greene encourages current students to make the most of their time at DSPH. "The possibilities are endless with a master's degree in public health. Leave no stone unturned, no opportunity overlooked. You have the tools to truly make an impact in whatever industry you decide to pursue."



Oluwatoyin Fadeyibi, MPH '16

**DIRECTOR OF PHARMACY INITIATIVES,
COMMUNITY BEHAVIORAL HEALTH
(A DIVISION OF PHILADELPHIA'S
DEPARTMENT OF BEHAVIORAL HEALTH
AND INTELLECTUAL DISABILITY SERVICES)**

MY GREATEST ACCOMPLISHMENT:

Taking the risk to follow my eight-year-long dream of obtaining a master's in public health. During the two-year MPH program I was raising a toddler, working as a clinical pharmacist and also pregnant — thankfully with the support of an understanding husband. In the realm of accomplishments, three things are of great value to me — my faith in Jesus, my family and the ability to serve the poor and overlooked in society. As such, any day that I can live out my faith, connect with my family and serve the underprivileged around me is a day rich in accomplishment.

HOW DORNSIFE HELPED:

Prior to attending Drexel, I had been practicing pharmacy in a hospital setting for six years while concurrently co-leading a nonprofit in Philadelphia. My desire to pursue training in public

health was fueled by the medical missions locally and abroad that LabakCare led, and also by a dream to one day aid in the strengthening of my home country Nigeria's health care and public health infrastructures. The training I received from the Dornsife School of Public Health provided me with the framework, tools, coaching and confidence to always look beyond health needs and into the social factors that determine health conditions. In addition, hands-on experience in programmatic design and evaluation helped to position me for my current non-traditional-pharmacist role in a quasi-governmental agency. As the first pharmacist in Philadelphia's behavioral health department, I use my clinical and public health skills to serve Philadelphia's underprivileged residents who are on Medicaid. The experiential training embedded in Dornsife's programming also taught me the value of community engagement, inclusion and buy-in, generosity of heart and the often underestimated impact that policy has on the health of the public. These lessons have become a fabric of any work I set my heart to do.

WHERE I'LL BE IN FIVE YEARS:

I hope to still be doing fulfilling public health work that impacts the most vulnerable in society — whether right here in Philadelphia or across the Atlantic Ocean in Nigeria — ideally, both!



Danielle Fernandez, MPH '15

**APPLIED EPIDEMIOLOGIST, FLORIDA
DEPARTMENT OF HEALTH IN MIAMI-DADE
COUNTY**

MY GREATEST ACCOMPLISHMENT:

For my community-based master's project at the Dornsife School of Public Health, I worked with the College of Engineering to conduct research on the incubation period of Ebola virus disease (EVD) during the 2014 West African outbreak. Using data obtained from the Ministries of Health of Liberia, Sierra Leone, Guinea and Nigeria, and weekly reports published by the World Health Organization, I created prediction models to examine the role of measurement error and reporting bias on the incubation period of 2–21 days for EVD. The findings of this project suggest that the incubation period of EVD may be up to 31 days. In 2016, I presented my research at the annual Council for State and Territorial Epidemiologists in Alaska and had the opportunity to discuss the findings and implications with world-renowned subject matter experts.

... continued

ALUMNI NOTES

HOW DORNSIFE HELPED:

During my career at Dornsife, I received training in data sciences, gaining a solid foundation in many computer programs and statistical software that I use in my daily work today. Knowing how to analyze and present data in a way that is scientifically sound and widely understood is crucial when investigating endemic diseases such as foodborne “bugs” as well as when responding to novel infectious disease outbreaks such as Zika virus. My coursework well-equipped me with the skills necessary for the “disease detective” work of applied epidemiology.

WHERE I’LL BE IN FIVE YEARS:

I intend to obtain a PhD in Health Informatics, as I think strong data systems and surveillance are our best line of defense against future disease threats. I am also particularly interested in working in the global health field — integrating my interests in international development, data and infectious disease epidemiology — and conducting my PhD research abroad if given the opportunity. Further out, I have my sights set on more permanent international work — running a CDC field office in Northern Africa, perhaps — but I am willing (and excited) to go where the work takes me.

’02

ALICE ULHOA-CINTRA, MD, MPH, recently joined the medical oncologist team at the Cleveland Clinic Indian River Hospital’s Scully-Welsh Cancer Center.

’09

ROMI PIERCE HALL, MPH, is combating California’s housing crisis as the director of neighborhood collaborations at East Bay Asian Local Development Corporation (EBALDC) in Oakland, CA. In this role, she manages EBALDC’s work as a convener of the San Pablo Area Revitalization Collaborative (SPARC).

’14

BRITTANY M. CHAMBERS, MPH, was recently promoted to senior education manager at the Center to Advance Palliative Care (CAPC) in New York, NY.

ALEXIS BUMPERS, MPH, accepted a new position as a statistician at the Health Resources and Services Administration (HRSAgov) in Washington, DC, in April 2019.

’15

LATOYA HAMILTON, MPH, joined NYC Health + Hospitals as assistant director in October 2018.

’16

EMILY PETERMAN, MPH, was promoted to director of research and evaluation at the Association of

State and Territorial Health Officials (ASTHO) in Arlington, VA, in October 2018.

ZACHARY DANIELS, MPH, serves as senior research specialist at UVA: The Center for Health Policy in Charlottesville, VA.

VIREN DOSHI, JD/MPH, began a new position as counsel for Conner Strong & Buckelew in Marlton, NJ, in February 2019.

’17

JEANETTE BOWLES, DRPH, joined the nonprofit Safehouse as an executive director to lead the organization as it works to open a supervised injection site for people in addiction, a first for Philadelphia and possibly the entire nation.

’18

MARGAUX MAZUR, MPH, a former research assistant at the Dornsife School of Public Health, began working at Product Investigations, Inc. as project manager in December 2018.

KRISTINA THOMPSON, MPH, recently joined KPMG U.S. as an advisory associate on health care and government solutions in Philadelphia, PA.

’19

ALYA NADJI, MPH, began working as a research analyst at Independence Blue Cross in Philadelphia in January 2019.

**DORNSIFE SCHOOL OF
PUBLIC HEALTH**

#1 IN



This year *U.S. News & World Report* ranked Dornsife the #19 graduate school of public health in the country, and the #1 school or program of public health in Philadelphia.

Dornsife’s new ranking, six slots above 2015 (the last ranking period) reflects the growing reputation of the school as a center of excellence in policy-relevant research and training programs in population health. The school has experienced extraordinary growth since the last round of rankings, reflected in more than 25 new faculty, a doubling of research dollars, a revamped masters of public health program, and the launching of additional masters and doctoral programs across various public health specialties.

FACULTY AWARDS

Professor Alex Ezeh

HONORED BY THE WORLD ACADEMY OF SCIENCES

Alex Ezeh, PhD, professor of global health in the Dornsife School of Public Health’s department of Community Health and Prevention, was awarded a 2018 TWAS Prize by the World Academy of Sciences for his vital demographic studies of African population, health, and education. His work provides essential insights into sustainable development. The TWAS prize includes an award of \$15,000.

Professor Shiriki Kumanyika

**RECEIVES 2019 ELIZABETH FRIES
HEALTH EDUCATION AWARD**

Shiriki Kumanyika, PhD, MPH, research professor in the department of Community Health and Prevention at the Dornsife School of Public Health and a distinguished professor emeritus of epidemiology in the department of Biostatistics and Epidemiology at the University of Pennsylvania, Perelman School of Medicine, was awarded the 2019 Elizabeth Fries Health Education Award.

Professor Jonathan Purtle

**AWARDED FOR OUTSTANDING SCHOLARLY
ACHIEVEMENT AT DREXEL UNIVERSITY**

Jonathan Purtle, DrPH, assistant professor in the department of Health Management and Policy at the Dornsife School of Public Health, received Drexel University’s Office of the Provost’s award for Outstanding Early Career Scholarly Achievement. This award recognizes his leadership, dedication, and contributions in policy dissemination and implementation research, and health equity.

Dean Ana Diez Roux

**INDUCTED INTO THE SOCIETY OF SCHOLARS
AT JOHNS HOPKINS BLOOMBERG SCHOOL
OF PUBLIC HEALTH**

Ana Diez Roux, MD, PhD, MPH, dean of the Dornsife School of Public Health, was inducted into the Society of Scholars at the Johns Hopkins Bloomberg School of Public Health, in April of 2019. The award is given to those who have “gained marked distinction in their respective fields since spending formative years at Johns Hopkins.”

AWARDS, HONORS, MAJOR GRANTS

Associate Professor Loni Philip Tabb

AWARDED FOR EARLY WORK APPLYING BIOSTATISTICS TO COMMUNITY HEALTH ISSUES

Loni Philip Tabb, PhD, an associate professor of biostatistics in the department of Epidemiology and Biostatistics at the Dornsife School of Public Health, has been named an Under 40 Emerging Scholar by *Diverse Issues in Higher Education*.

STUDENT AWARDS

Sarah Bowler

DORNSIFE STUDENT AWARDED DAVID WINSTON SCHOLARSHIP

Sarah Bowler, MPH '20, department of Health Management and Policy at Dornsife School of Public Health student and Dornsife Public Health Fellow 2018, was awarded the David Winston Health Policy Scholarship on May 6, 2019. The highly competitive scholarship recognizes excellence and achievement for students in master's degree programs in health administration, health policy, and public health by providing \$10,000 per year.

MAJOR GRANTS

Professor Anneclaire De Roos

GRANT FROM WILLIAM PENN FOUNDATION

Anneclaire De Roos, PhD, MPH, associate professor of Environmental and Occupational Health at the Dornsife School of Public Health, along with Patrick Gurian, PhD, associate professor at Drexel's College of Engineering, received a \$269,000 William Penn Foundation grant to participate in a research synthesis on the health, economic, environmental, and social impacts of urban public spaces that will describe the state of the field by delineating what we know and do not know about the benefits and costs of urban spaces that are free and open to the public.

Professor Ann Klassen

DREXEL TEAM RECEIVES FUNDING TO STUDY VACCINE HESITANCY IN TAJIKISTAN

Ann Klassen, PhD, professor in the department of Community Health and Prevention at the Dornsife School of Public Health, is the principal investigator for a \$146,441 award given to DSPH by UNICEF Tajikistan to conduct formative research to investigate factors influencing vaccine hesitancy in Tajikistan.

Associate Professor Brian K. Lee

AWARDED \$1.7 MILLION TO EXPLORE EPILEPSY MEDICATION – AUTISM RISK

Brian K. Lee, PhD, an associate professor in Dornsife's department of Epidemiology and Biostatistics, has received an R01 grant from the National Institutes of Health to look at anti-epileptic medications and pregnancy. The purpose of the research will be to characterize the harms and benefits of the medication, in relation to autism risk, for the fetus.

Associate Professor Ana Martinez-Donate, PhD

AWARDED \$3.1 MILLION R01 GRANT FROM THE NATIONAL INSTITUTE OF CHILD HEALTH AND HUMAN DEVELOPMENT

Associate Professor in Dornsife's department of Community Health and Prevention, Ana Martinez-Donate, PhD, received a 5-year, \$3.1 million R01 grant, from the National Institute of Child Health and Human Development. The award will be used for the HIV Risk and Access to Healthcare Among Mexican Immigrants project. The research team will be setting up an observatory of health to monitor the health of Mexican immigrants coming across the border into the United States and/or returning to Mexico. Through a series of surveys, this project will assess their health status and access to services related to HIV/AIDS, mental health, substance use, and chronic diseases.

Professor Janell L. Mensinger

RESEARCH SELECTED FOR CURE GRANT PROGRAM

Research co-directed by Janell L. Mensinger, PhD, associate research professor and director of the Biostatistics Service Center in the department of Epidemiology and Biostatistics at the Dornsife School of Public Health, was selected for submission to the PA Department of Health's 2019 Commonwealth Universal Research Enhancement (CURE) grant program for funding. The study, A Pilot Feasibility Trial of Body Trust®: A Trauma-Informed Internet-Based Guided Self-Help Program for Binge Eating, was co-directed by Guy Diamond, PhD, associate professor at Drexel's College of Nursing and Health Professions.

Professor Alex Ortega

DORNSIFE RECEIVES NIH R01 GRANT TO STUDY MENTAL HEALTH ISSUES LINKED TO HURRICANE MARIA

Alex Ortega, PhD, professor and chair of the department of Health Management and Policy at the Dornsife School of Public Health, along with his team of DSPH and University of Puerto Rico investigators, was awarded a \$3.2 million R01 grant by the National Institutes of Health (NIH) to study psychiatric and substance use disorders among island Puerto Ricans impacted by Hurricane Maria.

Professor Jonathan Purtle

AWARDED ROBERT WOOD JOHNSON FOUNDATION GRANT

Jonathan Purtle, DrPH, an assistant professor in Dornsife's department of Health Management and Policy, will investigate how adjusting messaging can influence public opinions and policymaking about the science of child development with a \$500,000 grant from the Robert Wood Johnson Foundation. He will focus on how to better communicate with legislators and lay audiences about what can happen when children experience toxic levels of stress. While stress results from a range of both positive and negative responses to life circumstances, toxic stress occurs when a child experiences a prolonged stress response.

Leah Schinasi

URBAN HEALTH COLLABORATIVE RESEARCHER AWARDED GRANT TO FURTHER ENVIRONMENTAL RESEARCH

Leah Schinasi, PhD, an epidemiologist in the Urban Health Collaborative at the Drexel University Dornsife School of Public Health, was recently awarded the American Heart Association (ASH) 2019 Career Development Award. The \$231,000 award supports highly promising health care and academic professionals who explore innovative questions that will provide preliminary data and training necessary to assure the applicants future success as a research scientist. Schinasi's work focuses on the acute and chronic health effects of exposures encountered in the environment and workplace.

Professor Renee Turchi

AWARDED CDC GRANT TO HELP CHILDREN WITH SPECIAL NEEDS

Renee Turchi, MD, MPH, a clinical professor at the Dornsife School of Public Health, a professor of Pediatrics at the Drexel College of Medicine, and Section Chief of General Pediatrics at St. Christopher's Hospital for Children in Philadelphia, was awarded a \$1.65 million (over three years) Centers for Disease Control and Prevention (CDC) grant — "Home Assessments for Patients and Families with Special Health Care Needs: Developing Tools, Communication Strategies, and Standards." This award represents a partnership with the CDC and the Dornsife School of Public Health, that includes Dornsife's Center for Public Health Readiness & Communication, the PA Medical Home Initiative at the Pennsylvania chapter of the American Academy of Pediatrics, and the Pennsylvania Department of Health.

SALURBAL Team to Analyze Impact of Climate Change in Latin America

The Salud Urbana en América Latina (SALURBAL) project, coordinated by the Drexel Dornsife Urban Health Collaborative, has received a \$278,471 grant, over three years, from the Wellcome Trust to study the public health impact of extreme heat events likely linked to climate change in nine Latin American countries.

FACULTY NOTES



Kamiar Alaei, MD, DrPH

HERO OF HEALTH AND HUMAN RIGHTS VISITS DORNSIFE

This year, Kamiar Alaei, MD, DrPH, a distinguished scholar of global health from Iran, has become part of the Dornsife team as a visiting scholar. Alaei works with Joe Amon, PhD, MSPH, director of the Office of Global Health, developing projects and teaching courses on health and human rights.

An award-winning scientist and human rights advocate, Alaei earned his medical doctorate from Isfahan Medical University, his Master of Public Health in epidemiology from Tehran Medical University and his Master of Science in International Health from Harvard University. Since 2004, his focus has been on HIV/AIDS, health disparities, drug policy, the linkage between health and human rights law, and health diplomacy in the Middle East.



Sharrelle Barber, ScD, MPH

CO-LEADS MAJOR STUDY

Sharrelle Barber, ScD, MPH, assistant research professor of Epidemiology and Biostatistics at the Urban Health Collaborative at Dornsife, is a new co-leader of the Social Determinants of Health Working Group and the Vanguard Center for the Jackson Heart Study.



John Rich, MD, MPH

PROFESSOR RICH BECOMES A FELLOW AT TRUST FOR AMERICA'S HEALTH

John Rich, MD, MPH, professor in the Health Management and Policy department and co-director of the Center for Nonviolence and Social Justice at the Dornsife School of Public Health, became a distinguished visiting fellow at Trust for America's Health (TFAH). Rich's activities will include offering research and programmatic educational sessions on trauma, urban violence, and health disparities.



Michael Yudell, PhD, MPH

BECOMES CHAIR OF NEWBORN HEALTH BOARD

Michael Yudell, PhD, MPH chair, department of Community Health and Prevention, was elected as the chair of the Pennsylvania Secretary of Health's Newborn Screening Technical Advisory Board. The technical advisory board provides recommendations, guidance and support to the Department of Health staff that have the responsibility for the planning, evaluation, modification and management of the statewide Newborn Screening and Follow-Up Program.



5

**QUESTIONS FOR
TRAN HUYNH**

This year, Tran Huynh, PhD, MPH, CIH, an assistant professor in Dornsife’s department of Environmental and Occupational Health, completed a study revealing tough barriers to creating healthier work environments in the city’s nail salons. Her research offers hope not only to Philadelphia’s workforce, but also to the more than 400,000 nail technicians across the United States. Here, Huynh talks about work and health.

Q: Why did you choose occupational health, after studying microbiology as an undergraduate?

A: I used to work in a lab and learned that I wanted to work with people more. We spend most of our time at work, but there are surprisingly few researchers focusing on health risks in the workplace.

Q: How did you get started?

A: During my graduate study, I had a chance to work on a project that took me back to Vietnam, traveling with a public health nurse researcher. We looked at infectious disease transmission among duck farmers when the avian influenza was a big issue. We did qualitative interviews with duck farmers and workers who sold poultry in the markets to understand how they might be at risk. I really liked it because I learned about the communities and cultures. I also discovered the connection between infectious disease and working conditions.

Q: Why study nail salons and what did you find?

A: Ever since my family moved to the United States in 1997, my mom has worked in a salon. This was before I learned about occupational health, so it wasn’t until later that I realized the connection between her working conditions and some of the symptoms that she experienced – e.g., headaches, severe fatigue, pain in her hands – and that they were preventable.

In my study, I found a lack of awareness of workplace hazards which puts salon workers at risk. Unfortunately, the complex relationships between nail technicians, owners, clients, and policymakers make it challenging to create a sustainable change in behavior.

Q: Do you have any advice for students who want to work in occupational health?

A: The current laws that aim to protect workers are very outdated, so workers may still be at risk despite companies being in compliance. Thus, we should always encourage management to use the best practices based on the latest evidence.

Q: What’s next for you?

A: We will be testing our intervention package in a small number of salons with a local Vietnamese organization, Vietlead. The goal is to scale up our training so that we can make the materials accessible to as many nail salon workers and owners as possible. We will also simultaneously work with local policymakers to advocate for policy change and resources for more outreach.



DREXEL UNIVERSITY
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OUR CHALLENGE

URBAN HEALTH. GLOBAL IMPACT.

For more than two decades, the Drexel Dornsife School of Public Health's research programs and centers have uncovered surprising truths that have challenged convention. Just as importantly, our research has inspired change in urban and global health policy and practice. Because it's not enough to know the answers to public health's toughest questions—we must act on them.

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