Why Do US Latinos Underuse Mental Health Services?

Latinos in the US access mental health services at a lower rate than non-Hispanic whites, and a new study led by Dr. Katherine Keyes, Instructor in Epidemiology, indicates that language barriers and stronger cultural ties to Hispanic heritage predict this pattern. Dr. Deborah Hasin, Professor of Clinical Epidemiology (in Psychiatry), was the senior investigator on the study, and Dr. Lisa Bates, Assistant Professor of Epidemiology was a co-investigator.

Latinos are the fastest growing minority group in the US, with the expectation they will comprise 20% of the population by 2020. However, disparities between their use of health services and those of non-Latino whites have been on the rise and are only partially explained by differences in financial means and health insurance status.

To further understand the causes, the study, which was published in Social Psychiatry and Psychiatric Epidemiology, examined the degree to which markers of immigrant adaptation, such as exclusively speaking Spanish and stronger ties to ethnic identity, play a role in Latino experience with mental health services.

Using data from 6,359 Latino participants in the National Epidemiologic Survey on Alcohol and Related Conditions (NESARC), a nationally representative face-to-face survey of US residents, the investigators found that greater levels of Latino ethnic identity, use of Spanish language, and less time living in the US predicted lower usage of mental health services for mood disorders, even after controlling for factors such as insurance, income, and the severity of symptoms.

The authors also note that Latinos are more likely to distrust the medical community and the health care system due to past experiences of discriminatory treatment or ineffective care, and cultural stigmas and attitudes toward psychiatric disorders and mental health services.

The investigators found few differences between subgroups of Latinos (such as Puerto Ricans, Mexicans, and Cubans) after controlling for economic and practical barriers, though Mexican individuals with a mood/anxiety disorder were less likely to seek treatment than Puerto Rican individuals.

The results suggest that strategies to improve mental health care should focus on ethnic/cultural factors that are unique to Latino immigrants and on the specific disorder, even among Latinos who speak English.

“Although increasing the financial accessibility of mental health service use is a priority, programs to improve access to care and management of illness should recognize the important role of language, cultural values and beliefs, and more explicitly address access to care for specific psychiatric disorders across diverse populations,” the authors say.

MESSAGE FROM THE CHAIR

Dear colleagues,

Welcome to the April 2011 issue of Two by Two, the Department of Epidemiology newsletter. In this issue, we shine a light on International Engagement among our faculty and students. We include a sampling of international research projects led by Department faculty. We profile the Epidemiology faculty who make up the core of the International Center for AIDS Care and Treatment Programs (ICAP). Also, we feature the Epidemiology students engaged in the school-wide Global Health Track program.

Psychiatric epidemiology also figures prominently this month, in three ways: our Giants Among Us profile of Dr. Bruce Dohrenwend’s seminal contributions to the field; the multiple psychiatric epidemiology awards garnered by our faculty; and the arrival of Dr. Karestan Koenen, an alumna of our Psychiatric Epidemiology Training program who joined the faculty in March.

In recognition of International Women’s Day in March, we highlight the career of Epidemiology alumna Dr. Roberta Ness, whose work focuses on women’s health.

Our thanks to the senior cluster administrators, faculty, and students who provided material for this international issue. And finally, my very best wishes to the students who are winding up their spring semester, especially those preparing to graduate in May. Look for a special June issue focused on our award winning students and graduates.

Warm regards,

CLUSTER SEMINARS

LATE MARCH/APRIL — MAY

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SOCIAL EPIDEMIOLOGY
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PSYCH / NEURO EPIDEMIOLOGY
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LIFECOURSE EPIDEMIOLOGY
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EPIDEMIOLOGY INNOVATION
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CHRONIC DISEASE EPIDEMIOLOGY
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FRIDAY, MAY 13  12:00-1:00 PM

INFECTIOUS DISEASE EPIDEMIOLOGY
FRIDAY, APRIL 29  3:00-4:30 PM
FRIDAY, MAY 20  3:00-4:30 PM

UPCOMING  APRIL — MAY
Drugs play a role in aviation accidents, study finds

Aviation employees who test positive for illicit drugs are almost three times as likely to be involved in an accident as those who test negative, according to a new study by faculty and students of the Department of Epidemiology. “We wanted to see whether drug violations by employees are associated with their risk of being in an aviation accident,” Dr. Guohua Li, Professor of Epidemiology, says. “Our case-control analysis of nearly 5,000 employees who were involved in aviation accidents and over one million employees who were not indicates that the answer is a very clear yes.” The investigators found that 1.8% of the employees involved in accidents tested positive for drugs (marijuana, cocaine, amphetamines, opiates, or phencyclidine) compared with 0.6% of their randomly selected counterparts. Aviation employees with safety-sensitive functions are subject to mandatory random drug testing as well as post-accident testing. This study is part of an ongoing NIH-funded project aimed at assessing the effectiveness of mandatory alcohol and drug testing programs in reducing occupational accidents and injuries. Coauthors include Dr. Charles DiMaggio, Associate Clinical Professor of Epidemiology; Dr. Qi Zhao, an MPH student; and Ms. Joanne Brady, a PhD student.


Aggressive diabetes treatment associated with risk of death

In 2008, Dr. William Friedewald, Vice Chair of the Department of Epidemiology and Professor of Clinical Epidemiology, Clinical Biostatistics, and Clinical Medicine, and his co-investigators in the Action to Control Cardiovascular Risk in Diabetes (ACCORD) study reported the surprising finding that an intensive blood sugar lowering strategy that was hoped to reduce the risk of cardiovascular disease (CVD) for people with type 2 diabetes actually posed an increased risk of death for participants, compared to a control group on a standard therapy approach. After the investigators learned of those results, they ceased the intensive therapy strategy. The most recent ACCORD publication, senior authored by Dr. Friedewald and published in the New England Journal of Medicine (NEJM), finds that despite having switched to the standard therapy approach, the participants still have as high a rate of mortality as they did before. In order to find out whether the rate of mortality decreases the longer patients are off the intensive therapy, the ACCORD group will continue to monitor the participants for the next 4 years. Because of the clinical and scientific importance of the findings from this large complex clinical trial, 3 related papers have been published in the NEJM over the last 9 months.

Study supports banning smoking in public

A new study senior authored by Dr. Paolo Vineis, Adjunct Professor of Epidemiology and the Chair of Environmental Epidemiology at Imperial College London, provides increased support for laws that ban smoking in public, showing a link between second-hand smoke and tobacco in the bloodstream. Several countries are currently considering new legislation regarding smoking bans. The study suggests that quantifying HHOs for different types of hospitals and hospital units can be used as a benchmark to measure health care workers’ compliance with these standards.

Faculty and students present at ASPO

The American Society for Preventive Oncology (ASPO) held its annual meeting March 5-8 in Las Vegas. It was the 35th anniversary of ASPO, and research by our own predoctoral, postdoctoral, and faculty at Mailman was extensively featured. Dr. Parisa Tehranifar’s work was selected for the “Best of Cancer Epidemiology, Biomarkers and Prevention” session featuring the top articles of the past year impacting the field. Specifically, her work, published with Drs. Mary Beth Terry, Al Neugut, and Bruce Link, focuses on the increasing racial disparities seen for cancers that are more amenable to treatment/prevention. Dr. Neugut spoke on the controversy surrounding the use of sigmoidoscopy versus colonoscopy.

Oral presentations were given by Dr. Jeanine Genkinger on pancreatic cancer, Dr. Grace Hillyer on colon cancer screening in Latinas, Dr. Hui Chen Wu on global methylation and breast cancer, doctoral student Meghan Work on histological differences in breast cancer risk factors, doctoral student Jennifer Ferris on parental age and ovarian cancer, and research associate Julie Flom on prenatal smoke exposure and DNA methylation. Poster presentations were given by Dr. Lissette Delgado-Cruzata on DNA methylation, research associate Ann Cloud on BRCA1 methylation, doctoral student Catherine Richards on colonoscopy screening, and doctoral student Laura Rimers on uptake of selective estrogen receptor modulators. Dr. Judith Jacobson conducted the New Investigator Workshop for fellows from around the country. Meghan Work was selected into this prestigious program.

Dr. Terry was program chair for the meeting and developed the program over the past 12 months with colleagues at MD Anderson and other cancer centers.

“Mary Beth gave us a lot of outstanding exposure nationally, and the performance of the trainees and junior faculty was really impressive,” says Dr. Neugut.

Faculty present at CROI conference

Drs. Moïse Desvarieux and Louise Kuhn gave presentations at the Conference on Retroviruses and Opportunistic Infections (CROI) which was held in Boston from February 27-March 2. Dr. Kuhn presented final results from NEVER-EST, a large randomized study that compared switching from nevirapine-based anti-retroviral therapy (ART) to lopinavir-based ART in infants under age 2. Dr. Desvarieux presented the results of a study that found HIV infection and not anti-retroviral drugs (ARV) is associated with thicker carotid atherosclerosis, a degenerative disease of the arteries.
Dr. Mary Beth Terry, Associate Professor of Epidemiology, received an R01 from the National Cancer Institute entitled Lessons in Epidemiology and Genetics of Adult Cancer from Youth (LEGACY), effective 1/10/11 – 12/31/15. The study will examine the interaction of genetic and environmental risk factors in the development of breast cancer. It will be based in a cohort of 450 girls age 6-13 who are daughters of women enrolled in the Breast Cancer Family Registry and 450 girls from families without breast cancer, all of whom will be followed at 6 month intervals. LEGACY will provide a rich resource for molecular and biomarker studies in young girls which will inform our understanding of when breast cancer susceptibility begins, whether it is influenced by modifiable determinants, and how it affects psychosocial adjustment and behaviors.

Dr. Ezra Susser, Professor of Epidemiology and Psychiatry, was awarded the American Public Health Association’s 2011 Rema Lapouse Award for outstanding contributions to the scientific understanding of the epidemiology and control of mental disorders. He joins former Lapouse recipients from the Mailman School Drs. Mervyn Susser, Bruce Dohrenwend, Myrna Weissman, and Bruce Link. Dr. Susser will give a talk at APHA in October and receive the award.

Dr. Magdalena Cerdá, Assistant Professor of Epidemiology, won the American Psychopathological Association’s 11th Annual Robins/Guze Award for promising research being conducted in psychiatric epidemiology by a junior investigator. Dr. Cerdá joins newly recruited faculty member Dr. Karestan Koenen as a recipient of the Robins/Guze Award.
Dr. Elkind’s diet soda study on CBS

Dr. Mitchell Elkind was featured in a CBS New York report on his recent study that found drinking diet soda may be associated with an increased risk of strokes, heart attacks, and other causes of death related to vascular disease. Still unclear is whether there is a chemical in diet sodas that causes vascular diseases or whether people who drink diet sodas are more likely to engage in other behaviors that lead to bad health. “It could be due to the fact that people who drink diet beverages may not realize how much they’re eating of other foods, because they don’t get the fullness or sense of satiety that they get from consuming sugar beverages,” Dr. Elkind said.

Dr. Vineis in Nature

Dr. Paolo Vineis was featured in the February 16 issue of Nature, in an article about new ways of measuring individuals’ exposure to the environment that try to get beyond the difficulties and uncertainties of self-reporting. According to the article, “Vineis [and psychologist Tom Baranowski] are at the forefront of a movement among health researchers to develop measurements of environmental exposures that are more precise and objective than questionnaires.” Some of these measures involve blood-based tests, while others require subjects to wear sensors that capture their movement and take pictures of such things as their lunch, or samples of the air they breathe. According to the article, “A comprehensive exposome is many years off—so for now, Vineis is just hoping for a better way to measure one exposure at a time.”

As he says in the article, “I don’t think we’ll completely give up on questionnaires.”

Dr. Susser on the historic cohort study in Nature

Dr. Ezra Susser was quoted in the March 1 issue of Nature, in a feature about the 65th birthdays of the 16,695 men and women who are part of the 1946 birth cohort study, the longest-running cohort study in the world. Dr. Susser, who has conducted research on this cohort for many years, had this to say: “It’s unique and groundbreaking in the history of epidemiology. It’s the only study to have chased an entire cohort across its life course—and it’s not yet finished. You gain enormous depth of understanding in how [a] disease came to be by following someone over their life course.”

Dr. Lipkin in The New Yorker

Dr. W. Ian Lipkin’s work was cited in the January 31 issue of The New Yorker magazine in the article “Going Viral: The Pentagon takes on a new enemy: swine flu.” The article describes Dr. Lipkin’s quick turnaround for sequencing the pandemic strain of influenza in 2009: “Lipkin’s staff sent…the swine-flu sequence when it was finished. It looked like a piece of fine embroidery—tiny dots of green, blue, yellow, red, and purple. Lipkin had sequenced the virus in thirty-one hours.”

Two fellows publish book on causal thinking

Causality and Psychopathology: Finding the Determinants of Disorders and their Cures (Oxford Press), an edited volume by Katherine Keyes, PhD, Instructor in Epidemiology and Epidemiology Merit Fellow, and Katherine Ornstein, MPH, pre-doctoral fellow in the Psychiatric Epidemiology Training Program, was published this past December. The book’s contributions are refined versions of presentations from the ground-breaking 2008 meeting of the American Psychopathological Association on approaches to improving the methodical rigor of establishing causality. “This volume examines the complicated issues in causal inference from many perspectives providing researchers with a valuable resource to engage in their work in psychopathology as well as other fields,” Dr. Keyes and Ms. Ornstein say. “Causality and Psychopathology is an incomparable and fundamental book for any social scientist that is seriously considering addressing causal issues in psychopathology research,” says Dr. Margarita Alegria, the Director of the Center for Multicultural Mental Health Research at Cambridge Health Alliance & Harvard Medical School.
Jeremiah Barondess, MD, one of the most distinguished clinicians and scholars of our time, has joined the Mailman School as a member of the faculty of Epidemiology and Special Advisor to the Dean.

Dr. Barondess has long been an international leader in chronic disease prevention, urban health, and in shaping pedagogy at the intersection of public health and medicine. He is renowned for reviving the New York Academy of Medicine and turning around New York City’s municipal hospitals after years of bureaucratic and financial problems in the 1980s and 1990s.

Dr. Barondess did his medical training at the Johns Hopkins University School of Medicine and carried out clinical training at Johns Hopkins and at New York Hospital/Cornell Medical Center. After that, he became part of the first cohort of the CDC’s Epidemic Intelligence Service officers, under the direction of Dr. Alexander Langmuir.

He spent most of his career at Cornell where he served as the William T. Foley Distinguished Professor in Clinical Medicine and the Director of General Internal Medicine. In 1990 he became the President of the New York Academy of Medicine, which, during his 16-year tenure, he transformed into an intensive urban health-focused research institution with more than 200 full-time staff. During that period, the Academy inaugurated the Journal of Urban Health, the first peer-reviewed journal focused on urban health issues, and became a leader in shaping the national and international conversation around urban health.

Dr. Barondess has been suitably decorated for his long and distinguished service to medicine and public health. He has served, among others, as President of the American College of Physicians, of the American Clinical and Climatological Association, and the American Osler Society. He has been a member of the Institute of Medicine since 1971.

At the Mailman School, Dr. Barondess will continue to work closely with Dr. Moise Desvarieux and members of the Mailman School’s Chronic Disease Initiative to shape the school’s agenda around chronic disease prevention. He will also work with the Curriculum Renewal Task Force on developing chronic disease educational opportunities for Mailman students and building opportunities for interprofessional education spanning the Mailman School and the Schools of Medicine, Nursing, and Dentistry.
Dr. Ness was one of the first to propose a research paradigm that connects women’s health problems with their gender—now known as “gender-based biology”—in her book Health and Disease among Women: Biological and Environmental Influences (Oxford University Press, 1999). The book explores health questions such as why depression is more common in women than in men and evidence that links cardiovascular disease with hormones. Dr. Ness has also authored nearly 300 peer-reviewed papers on topics including the epidemiology of ovarian cancer, preeclampsia, and pelvic inflammatory disease; adverse pregnancy and perinatal outcomes; links between reproductive history and cardiovascular disease; and bacterial sexually transmitted infections.

She currently leads UTSPH’s Center for Innovation Generation, which aims to get researchers to identify cognitive biases that limit creative thinking. Her book Innovation Generation, about creating successful ideas by breaking formulaic thought patterns, will be coming out in 2012 from Oxford University Press. Dr. Ness recently received funding on a large training grant geared toward developing highly innovative scientists.

Dr. Ness taught at Columbia and the University of Pennsylvania before joining the University of Pittsburgh Graduate School of Public Health in 1993, where she eventually became the chair of the Department of Epidemiology and later the interim dean. While there, Dr. Ness also directed the Epidemiology of Women’s Health Program, which focused on promoting the health and well-being of women through teaching and research in epidemiology. Dr. Ness assumed her current position at the University of Texas in 2008.

Dr. Ness also served as president of the American College of Epidemiology in 2009. Dr. Ness is a frequent advisor to the National Institutes for Health, the Centers for Disease Control and Prevention, the Agency for Healthcare Research and Quality, and the Department of Defense. She has taken part in several reports published by the Institute of Medicine of the National Academies of Science.

Trained in epidemiology and internal medicine, Roberta B. Ness, MD, MPH, is an expert in women’s health research and the current Dean of University of Texas School of Public Health (UTSPH). Dr. Ness, who earned her MPH here, has been at the forefront of research that recognizes the unique health issues of women.
Jennifer Ferris, MPH, is a PhD candidate in the Department who researches risk factors for ovarian cancer with Dr. Mary Beth Terry. Jennifer earned a degree in neuroscience as an undergraduate at Franklin and Marshall College, where she examined the effects of Ritalin in adolescent rats.

From that experience, she learned that she enjoyed doing research with other people and soon discovered the field of epidemiology. She went on to earn her MPH from Yale University.

While in school, she participated in a student-run public health outreach program, where she worked with a small community in El Salvador to identify their major health concerns and to reduce their burden of disease through such initiatives as the development of a sustainable clean water system.

With a desire to pursue a career in cancer research, she completed her summer practicum with Dr. Terry and after graduation returned to Columbia to continue working with her. Jennifer has presented their research at both national and international conferences, including Society for Epidemiologic Research and the International Society for Developmental Origins of Health and Disease. After a few years in research she decided to apply to the PhD program at Columbia as a Cancer Fellow.

Today, Jennifer’s work with Dr. Terry focuses on risk factors for ovarian cancer in families, using the unique resource of the Breast Cancer Family Registry. Using a lifecourse approach, they are also examining associations between exposures early in life and risk of ovarian cancer in the offspring, which Jennifer will be presenting at the American Society of Preventive Oncology conference this year.

When she is not working on campus, Jennifer enjoys running throughout the city with organizations such as the New York Road Runners and Team in Training for the Leukemia and Lymphoma Society.
Dr. Ariel Pablos-Méndez nominated by White House for USAID post

Dr. Ariel Pablos-Méndez, Professor of Clinical Medicine and Epidemiology, has been nominated by President Barack Obama to serve as Assistant Administrator for Global Health at the US Agency for International Development (USAID). In addition to his position here, Dr. Pablos-Méndez is currently Managing Director at the Rockefeller Foundation. He earned his MPH from the Mailman School in 1992.

Dr. Renee Goodwin’s baby

Zachary Giraud Goodwin Chester was born in the morning of January 28, 2011, to Dr. Renee Goodwin, and her husband Chris Chester. Zachary weighed 7 lbs 12 oz. His older brother Alexander seems very happy with his new younger brother. Congratulations to Dr. Goodwin and her family!

George Loo successfully defends dissertation

Dr. George Loo successfully defended his dissertation “The Mental Health Consequences of Disaster Exposure among Federal Disaster Responders” on March 7. His adviser and sponsor was Dr. Charles DiMaggio.

Dr. Karestan Koenen joins faculty

Dr. Karestan Koenen, an alumna of the Psychiatric Epidemiology Training (PET) program, returned to the Department as a faculty member on March 14. Her research, which focuses on how genetics and environment mediate the role of trauma in psychopathology, is directly relevant to research underway here. She will play a primary role in the life of the psychiatric/neuro epidemiology cluster and the PET program.

First Alan Berkman Memorial Lecture

The first annual Alan Berkman Memorial Lecture will be given on April 6 by Dr. Gerald Friedland on the subject “A Journey Through Three Epidemics: HIV, TB, and XDRTB.” Dr. Friedland is an Adjunct Professor of Epidemiology at the Mailman School; a Professor of Medicine, Epidemiology, and Public Health at Yale University; and Director of the AIDS Program at Yale New Haven Hospital. The lecture takes place from 4-5:30 in the 8th Floor Auditorium, 722 West 168th Street. Reception to follow.

Doctoral students and faculty judge high school epi competition

Doctoral students Catherine Richards and Bevin Cohen and Instructor in Epidemiology Dr. Katherine Keyes will participate as judges in the College Board’s Young Epidemiology Scholars Program (YES), in Washington, D.C. from April 15-18. YES is a nationwide scholarship competition for high school students who are judged on original epidemiology research papers that propose solutions to population health problems.
BRUCE DOHRENWEND

His most significant research contributions have helped his peers and the public understand the mental toll taken on veterans of the Vietnam War and on workers and residents who were present at the Three Mile Island nuclear reactor meltdown in the 1970s.

He has helped put psychiatric epidemiology on the map with the Psychiatric Epidemiology Training (PET), which over the years has ensured that the study of mental health thrives in the Department of Epidemiology and attracts scholars from many disciplines.

**Studying stressful life events**

Dr. Dohrenwend earned a PhD in psychology from Cornell University in 1955 and became interested in abnormal psychology because of the nature of the, “vivid, challenging behaviors” that encompass “a rich panoply of human problems.”

This was an era when many large-scale studies were being conducted that examined the links between socio-economic status and mental health. After graduating, he joined one such study, run by Dr. Alexander Leighton, a psychiatrist and anthropologist, which looked at the prevalence of psychiatric “caseness” and impairment in Stirling County—a fishing, farming, and lumbering area of Nova Scotia, Canada—in order to understand how disorders were distributed in different types of organized and disorganized communities.

In the decades after he joined Columbia, he and his wife, the late Dr. Barbara Snell Dohrenwend, established themselves in this area. They wrote and edited four books together: *Social Status and Psychological Disorder* (1969), *Stressful Life Events: Their Nature and Effects* (1976), *Stressful Life Events and Their Contexts* (1981), and *Mental Illness in the United States: Epidemiological Estimates* (1980). These works explored epidemiological findings about the relationship between psychiatric disorders and stress related to social factors like gender, race, and socioeconomic status.

Through these works, Dr. Dohrenwend brought a
complex understanding of the interplay of life events in influencing psychiatric disorders, applying a rigor that had sometimes been lacking in the world of social psychiatry and psychiatric epidemiology.

According to Dr. Myrna Weissman, he "took it to another level, looking at the impact of the event, whether it was in your control, not in your control, and also developing assessment scales."

"Simply put, 'getting it right' is hard work," says Dr. Bruce Link. "A large part of the reason that Bruce stands as a giant among us is because his own research reflects his commitment to getting it right."

The PET program and the causation question

In 1972, Dr. Dohrenwend established PET with a National Institute of Mental Health grant, in order to train scholars from different disciplines in psychiatric epidemiology. The program became an incubator for cross-disciplinary collaboration and brought many psychologists to the University.

It also brought many generations of scientists under the mentorship of Dr. Dohrenwend.

"I always give PET credit for teaching me how to think. The program puts a unique intellectual stamp on its trainees that remains even when they go into research areas that seem quite disparate," says Dr. Karestan Koenen, one of Dr. Dohrenwend’s mentees in the program.

Beginning in the 1980s, the study of psychiatric disorders had been changing significantly, as the study of genetic causes for mental health problems began to overtake the study of societal causes. It was the sort of turn in the field that might cause some academics to guard their turf defensively.

But Dr. Dohrenwend took head-on both explanations for psychiatric disorders in a study about the classic conundrum known as the "causation-selection issue"—whether "the inverse relationship between psychiatric disorders and socioeconomic status is due more to social causation (adversity and stress) or social selection (the downward mobility of the genetically predisposed)."

Published in Science in 1992, the study compared psychiatric disorders in nearly 5,000 Israelis, about half of European background, who typically occupied a higher socio-economic status, and half of North African background, who usually occupied a lower socio-economic status.

The findings suggested that whether a person was more influenced by social causation or social selection factors depended on the type of disorder. Schizophrenia, for instance, was linked to social selection; while depression in women and substance use disorders in men were influenced by social causes.

The paper won the prestigious American Association for Advancement of Science (AAAS) prize for Behavioral Science Research in 1991.

Mental health outcomes of Three Mile Island and the Vietnam War

Dr. Dohrenwend brought his knowledge of life stressors to mental health inquiries into two of the most difficult events of the 1970s, the Three Mile Island disaster and the Vietnam War.

In 1979, Dr. Dohrenwend was appointed as the head of President Jimmy Carter’s task group to investigate the behavioral effects of Three Mile Island. After conducting studies of the event’s impact on the stress levels of residents in Middletown, Pennsylvania, he strongly cautioned authorities not to ignore the safety concerns of workers at the nuclear reactor site.

"[This] is a classic issue in high magnification here: Two sets of values, each of them unimpeachable in itself, each of them fine in itself but for the fact that they conflict with each other. One is the value of technological progress in our society. The other is the value of public health and safety. They have met on what appears to be a near collision course around the issue of Three Mile Island," he said at a New York Academy of Medicine symposium in 1983.

In the early 1980s, Dr. Dohrenwend was appointed to the Scientific Advisory Board of the Veteran’s Administration’s National Vietnam Veterans Readjustment Study
(NVRS), which was investigating rates of posttraumatic stress disorder (PTSD) in the military. PTSD had recently been recognized as a legitimate diagnosis, and it became important to have a reliable estimate of the number of veterans who suffered from the disorder.

Early results were not conclusive. NVRS’s report to Congress in 1988, which found 30.9% of veterans had suffered full-blown PTSD in their lifetimes, clashed with the findings of a study reported the same year by the Centers for Disease Control which found only 14.7% had PTSD. When methodological flaws were discovered in the CDC study, the NVRS results became accepted, though they still struggled to gain legitimacy because of questions about how over 30% of veterans in the sample could have experienced PTSD when only 15% had served in combat roles.

Such concerns prompted Dr. Dohrenwend to reanalyze the NVRS data and put together a more rigorous measure of PTSD and war-zone stress exposure in Vietnam veterans. He required that the disorder had to have arisen from trauma during one’s service in Vietnam, not before or after. He also made use of a new diagnostic criterion of impairment of functioning, and he made sure to account for the untraditional nature of combat exposure in a war that was considered frontless. To corroborate veterans’ reports of exposure to war-zone stressors, the team examined data from military personnel files and worked with Dr. Nick Turse, an historian, to gather data from military archival sources and historical accounts.

The group concluded that 18.7% of veterans had suffered from impairing, war-related PTSD, a lower rate than the original NVRS study, but serious nonetheless. Significantly, Dr. Dohrenwend’s team found little evidence that veterans falsely reported PTSD. Those results “made even the critics sit up and take notice,” he says.

The study was greeted with much less skepticism than the prior two, owing in no small part to these rigorous methods. This and other accolades have not slowed Dr. Dohrenwend, who continues to investigate PTSD especially as it is related to racial/ethnic and SES differences. He is also working on a measure of life events that can account for the complexity of various stressors and their impact on people.

And his legacy already lives on in the work of others.

**REFERENCES**


INTERNATIONAL ENGAGEMENT

Twelve examples of faculty’s global engagement

Epidemiology faculty in The International Center for AIDS Care and Treatment Programs (ICAP)

Epidemiology Global Health Track
Dr. Lisa M. Bates is beginning fieldwork for a new R01 HD061630-01A1 cohort study, “Influences of Women’s Empowerment on Marriage and Violence in Bangladesh.” In recent years Bangladesh has experienced dramatic changes in sources of women’s empowerment, especially in girls’ education, resulting in impressive achievements in gender parity in enrollment and attainment. However, evidence suggests these dramatic changes may produce unintended consequences in marriage markets and dynamics within marriage. The objective of this study is to clarify the individual- and community-level mechanisms by which a woman’s empowerment is associated with her risk of experiencing intimate partner violence (IPV) in rural Bangladesh.
Dr. Magdalena Cerdá studies violence, drug use, and psychiatric disorders in Latin America, examining how they can be influenced by external factors, such as exposure to traumatic events, or the public services and infrastructure of a neighborhood. Her current research in Medellín, Colombia, focuses on the effect that neighborhood infrastructure investment—motivated by the construction of an urban cable car system connecting the urban periphery to the city center—has on violence and substance use. She is also investigating the role that paramilitary groups play in shaping social control and violence in Medellín. Building on this work, she is developing a proposal to investigate the relationship between demobilization from illegal armed groups, family violence, and child mental health. Dr. Cerdá is also working with the University of São Paulo in Brazil to investigate the determinants of the homicide drop in the city of São Paulo, and to carry out research on neighborhood influences and mental health among older adults.

Dr. Leslie Davidson leads the ASENZE study, a collaboration between Columbia and the University of KwaZulu-Natal (UKZN) that seeks to promote better physical and psychosocial functioning of children in South Africa. The primary aim of the study is to determine how the ability of preschool children with neuro-developmental disorders to function cognitively and socially is influenced by health-related, contextual, and psychosocial factors, including caregiver mental health and substance abuse. The study team, which also includes Department members Drs. Stephen Arpadi and Zena Stein and doctoral candidate Victoria Nankabirwa, is currently following-up the population-based sample of almost 1,600 children as they enter school. So far, they have gotten an excellent response rate. Dr. Davidson is also a co-investigator in an NIH-funded study following the neurodevelopment of children of mothers, treated in a randomized trial for anemia in pregnancy in Benin, West Africa.

Dr. Moïse Desvarieux is leading the Department of Epidemiology’s partnership with the École des Hautes Études en Santé Publique (EHESP) in order to facilitate exchange between faculty and students and promote collaboration and synergies in public health education, research, and practice. The group is working on several topics, including the interpretation of cohort studies, how to promote vaccine acceptance, and creating a global database of climate and health information, as they relate to chronic disease. The Department began this collaboration in 2010 and will continue with meetings and conferences in the upcoming year.

Dr. Megan Hall is working in Bangladesh on a K99/00 training and research grant studying the chemical effects of arsenic in the population’s drinking water. Specifically, she is investigating the effect of including nutritional supplements on the methylation of arsenic. Her mentors are Drs. Al Neugut, Habib Ahsan, and Mary Gamble, Professor of Environmental Health Sciences at Mailman.

Dr. Bruce Link is working with an interdisciplinary team on a project called “A US-UK Comparison of Discrimination & Disparities in Health & Health Service Use.” A growing body of evidence in the US and UK documents large health disparities by race and socioeconomic status (SES). The project brings together an interdisciplinary team of US and UK investigators with established ties and common objectives to create comparable data in both countries that will permit a better understanding of health disparities, how they are influenced by social structures, and how they might be reduced.

Dr. Denis Nash is focused on retention and engagement of patients in the Kagera region of Tanzania prior to antiretroviral therapy (ART) initiation. He also investigates multi-level determinants of late ART initiation in sub-Saharan Africa. Lastly, Dr. Nash is involved in an initiative called International Epidemiological Databases to Evaluate AIDS (I EDEA) in the eastern Africa region. IEDEA is a multi-partner, multi-center project that combines data on cohorts of patients receiving HIV care and treatment.

Dr. Meda Hail is working in Bangladesh on a K99/00 training and research grant studying the chemical effects of arsenic in the population’s drinking water. Specifically, she is investigating the effect of including nutritional supplements on the methylation of arsenic. Her mentors are Drs. Al Neugut, Habib Ahsan, and Mary Gamble, Professor of Environmental Health Sciences at Mailman.

Dr. Al Neugut and Judith Jacobson run the Columbia-South Africa Training Program on HIV-Associated Malignancies. The program focuses on strengthening research into three malignant cancers that have been associated with HIV cases in South Africa: Kaposi sarcoma (KS), non-Hodgkin lymphoma (NHL), and cervical cancer. The goal of the program is to train a rising generation of scientists to deal with the growing burden that these cancers are posing on the public health infrastructure in South Africa. It partners with institutions in South Africa, including the University of KwaZulu-Natal and is funded by a D043 grant from the National Cancer Institute.

The Global Mental Health Program is supporting the development of a “regional network” in Latin America for building research capacity, improving mental health services, and supporting one another’s efforts. GMHP co-Directors Drs. Ezra Susser and Sandro Galea already have longstanding relationships with the network sites, as illustrated in a piece from September by La Nacion, Argentina’s leading newspaper. “Eighteen years of joint work and friendship and the deep hope that the worst situations can improve with the intervention of people, even those who seem weaker or more vulnerable. This is what joins Ezra Susser and [his partner in South America] José Lumerman... Susser and Lumerman agree that mental patients do not have to be interned in institutions for life, but contained when in crisis and offer them a resocialization network afterwards.”

GMHP is also developing programs in other countries around the world.
Dr. Lawrence Yang—CHINA

Dr. Lawrence Yang researches schizophrenia in Chinese populations. Dr. Yang, in tandem with Drs. Ezra Susser and Michael Phillips, will examine a subtype of schizophrenia called deficit syndrome, among the only untreated, nationally representative sample of 400 schizophrenia patients in China. The project is part of the Department’s Global Mental Health Program and is based on a groundbreaking study of Dr. Phillips that was published in The Lancet in 2009. Dr. Yang is also initiating two other mental health projects: an anti-stigma intervention for families of first episode schizophrenia, and an examination of how deficits in auditory processing ability (which affect tonal perception, an ability critical to Chinese language comprehension) affects schizophrenia course.

NIH Fogarty AIDS International Training and Research Program—SOUTH AFRICA, SWAZILAND, LESOTHO, NAMIBIA

Since 1993, Columbia University has been a key participant in the NIH Fogarty AIDS International Training and Research Program (AITRP). The program supports HIV/AIDS and related Tuberculosis training and research for health scientists, clinicians, and allied health workers from developing countries and emerging democracies in southern Africa. It is unique among AITRPs in having its principal investigator, Dr. Quarraisha Abdool Karim, Associate Professor of Epidemiology, situated in a developing country. With over 125 long-term trainees and 186 short-term trainees who have come out of the program, the CU-Fogarty AITRP has had a major impact on building research and treatment capacities in South Africa, Swaziland, Lesotho, and Namibia. Trainees of the program were involved in some of the major new scientific developments in HIV prevention over the last year, including the major finding that a vaginal microbicide gel could be used to prevent HIV, when to initiate ARV treatment in HIV-TB co-infected patients, and a study showing that early antiretroviral treatment of children infected with HIV is more cost-effective than deferred treatment.

A Fogarty alum and graduate of the Department’s MS program, Nhlanhla Nhlabatsi, did his first Fogarty traineeship in 2001. Nhlanhla is currently doing his second Fogarty traineeship and doing his doctoral studies in HIV Epidemiology and Health Systems at the University of Cape Town under the mentorship of Dr. Landon Myer, a previous trainee of the Fogarty program.

After completing his MS, Nhlanhla returned to the Swaziland Ministry of Health, where he is now the Head of the National AIDS Program, and is their country representative on the program’s Training Advisory Committee. He has established several research collaborations with European investigators in relation to vaccine and microbicide development, and is building the clinical trial capacity in Swaziland where he was tasked with establishing an Epidemiology Unit within the Ministry of Health in 2009. Despite the Swaziland’s academic isolation, he has been slowly building his team through in-country training, maintaining links with the Centre for AIDS Programme of Research in South Africa (CAPRISA) in Durban, South Africa, including sending trainees from Swaziland to train at CAPRISA.

Nhlanhla arranged the first National Health Conference of the Department of Health of Swaziland in 2010 and has co-authored a number of local and international publications and policy documents, including a baseline assessment on HIV/AIDS issues among factory health workers in Swaziland, in July 2008.
ICAP at Columbia University was founded at the Mailman School in 2004. It is one of the largest multicountry programs focused on HIV and related conditions. Led by Dr. Wafaa El-Sadr, Professor of Epidemiology and Medicine and leader of the Department’s Infectious Disease cluster, ICAP is currently working in 14 countries in sub Saharan Africa, 3 countries in Central Asia, and in the US. Most of the ICAP faculty are appointed in the Department of Epidemiology.

ICAP works hand-in-hand with ministries of health, academic institutions, and non-governmental organizations to plan, design and support the implementation of public health related programs. These include programs focused on HIV, tuberculosis, malaria, maternal and child health. ICAP’s approach has centered on the strengthening of health systems through design of innovative evidence-based models of care, training and mentorship, infrastructure development related to facilities, laboratories, drug and commodity procurement, monitoring and evaluation systems, and strengthening planning, management and financial management skills. By the end of December 2010, more than a million persons with HIV have received services through ICAP supported programs. In addition, close to 2 million pregnant women have received HIV testing, and for those found to be HIV infected access to appropriate treatment was provided. Similarly, close to 2 million persons in sub Saharan Africa have received HIV testing and appropriate referrals thereafter through ICAP-supported programs.

ICAP has also sought to answer key questions through research layered on its programmatic platform. Currently, ICAP is conducting more than 60 research studies globally that encompass clinical trials, epidemiological studies, behavioral interventions, and operations research.

ICAP has also been building on its extensive global platform, offering students from MSPH, other schools at Columbia University, and other institutions the opportunity to be engaged in global activities. Selected students are linked with NY-based or internationally-based ICAP programs where they work on pre-selected projects under the supervision of experienced mentors.

ICAP’s faculty play a large role in the Department of Epidemiology as well, leading key courses, providing mentorship to master’s and doctoral students, and participating in key committees. They also collaborate with other faculty in this and other departments, and work closely with the Chair to guide the direction of our Department.
Dr. Wafaa El-Sadr, Professor of Epidemiology and Medicine, has been at the forefront of HIV/AIDS and TB research, prevention, and treatment for several decades. Her academic career over the past 25 years has spanned the history of the epidemic in this country and globally. She has succeeded in linking research, training, and practice and in taking programs to scale. As director of ICAP, she leads a staff of more than 1,000 individuals around the world engaged in ground-breaking work. She currently plays a key leadership role in the NIH-funded HIV Prevention Network. In the Department of Epidemiology, Dr. El-Sadr is head of the infectious disease cluster and focuses her current research on strategies for the prevention and management of HIV and TB. She also leads the MSPH Global Health Initiative. She has been recognized through a number of awards, including being named a John D. and Catherine T. MacArthur Foundation Fellow in 2009.

Dr. Elaine Abrams, Professor of Pediatrics and Epidemiology, is the Senior Director for Research at ICAP, where she oversees all aspects of its research efforts. This includes providing guidance for design and implementation of research studies; establishing standard operating procedures for conduct of research; and supporting innovative clinical, operations, behavioral, and implementation research in the context of programmatic scale-up. She also leads ICAP’s design and implementation of programs that work on the prevention of mother-to-child HIV transmission (PMTCT) and pediatric care and treatment in sub-Saharan Africa. Dr. Abrams’ research interests have focused on mother-to-child HIV transmission (MTCT), the natural history of pediatric HIV, and optimizing antiretroviral therapy for children.

Dr. Rosalind Carter, Assistant Professor of Clinical of Epidemiology, researches the prevention of MTCT and researches pediatric HIV care and treatment. At ICAP, she supervises and conducts independent analyses of the MTCT Plus Initiative to share best practices for implementing a family-focused HIV care model in sub-Saharan Africa. She also provides technical assistance for monitoring and evaluation of pediatric programs at University Teaching Hospital in Lusaka, Zambia, and supports the improvement of monitoring and evaluation systems for PMTCT and pediatric programs in most ICAP countries. In the Department of Epidemiology she has contributed to core classes by giving guest lectures in Principles of Epidemiology and Epidemiology of Infectious Disease and serving as an academic advisor and a master’s thesis primary and secondary reader for about 20 students.
**INTERNATIONAL ENGAGEMENT**

**Dr. Francine Cournos**, Professor of Clinical Psychiatry (in Epidemiology), serves as Senior Project Officer for Adherence, Psychosocial Support, and Mental Health within ICAP’s Clinical Unit. Her work in ICAP has also included a collaboration with the Rwandan Ministry of Health to develop and implement an initiative that integrates HIV care and mental health care. In the Department of Epidemiology, she is helping to build the student and young faculty component of the Global Mental Health Program (GMHP). Dr. Cournos’ research has focused on the interface between HIV infection and mental illness.

**Dr. Batya Elul**, Assistant Professor of Clinical Epidemiology, is the Acting Director of ICAP’s Monitoring and Evaluation (M&E) Unit, which is responsible for assessing the progress and impact of all of ICAP’s work. ICAP’s M&E team collects, manages, analyzes, and disseminates multi-level data from more than 1,300 ICAP-supported facilities. Dr. Elul also leads or collaborates on several studies related to the scale-up of HIV services, with a particular focus on retaining patients who are not yet eligible for treatment and integrating reproductive health and HIV services. Within the Department, she is a member of the Master’s Committee, serves as the representative to the Global Health Track (GHT) Committee, and advises many of the department’s GHT master’s students.

**Dr. Robin Flam**, Assistant Clinical Professor of Medicine and Epidemiology, is the Director of the ICAP Clinical Unit. Along with Dr. Žena Stein, Dr. Flam highlighted as early as 1981 the HIV epidemic’s potential effect on women. At ICAP, she has focused on the incorporation of evidence-based research into the development of HIV programs. Her main effort is in defining and disseminating models and practical methods for building in-country capacity while supporting the delivery of high quality, family focused, comprehensive services in resource limited settings. Dr. Flam is also the Principal Investigator of the ICAP Nurse Capacity Initiative. This Health Resources and Services Administration (HRSA)-funded initiative aims to strengthen pre-service and in-service education and training of nurses as a means of enhancing the health service. In the Department, Dr. Flam serves on the Epidemiology Doctoral Committee and mentors and advises doctoral and master’s students.

**Dr. David Hoos**, Assistant Professor of Clinical Epidemiology, is Senior Implementation Director at ICAP where he oversees the implementation of the largest CDC grant to support HIV prevention, care, and treatment programs in eight countries. In addition, Dr. Hoos has played a pivotal role in directing drug procurement for the MTCT-Plus Initiative. At the Mailman School, Dr. Hoos served as coordinator for the Fogarty International Center of the NIH-funded Columbia University/Southern Africa AIDS International Training and Research Program (AITRP). He is a member of the Department’s Doctoral Committee.

**Dr. Andrea A. Howard**, Associate Professor of Clinical Epidemiology, is Deputy Director of the Clinical Unit at ICAP. Her research focuses on the epidemiology of HIV and related infections, including hepatitis C and TB. Dr. Howard oversees a team that provides technical assistance in the integration of prevention, care, and treatment programs for TB and HIV infection in sub-Saharan Africa. She is also the clinical lead for ICAP’s new HIV care and treatment program in Central Asia. Dr. Howard directs the Infectious Disease Epidemiology course at the Mailman School and serves on the steering committee of the Center for Infectious Disease Epidemiology Research (CIDER) training program.

**Dr. Jessica Justman**, Associate Professor of Clinical Medicine (in Epidemiology), is Senior Technical Director of ICAP. In this role, she oversees clinical, monitoring and evaluation, and health systems-strengthening activities for HIV prevention, care, and treatment programs. She also supervises ICAP’s clinical laboratory support activities with the assistance of a team of regional and local laboratory advisors. In addition, Dr. Justman serves as Associate Director of the CIDER. Her primary research interest is in HIV prevention. She is an active investigator in the NIH-funded HIV Prevention Trials Network (HPTN). She has conducted several HIV prevention clinical trials, particularly microbicide studies, and currently serves as co-Chair of the HPTN’s Women’s HIV Seroincidence Study (ISIS). Dr. Justman was instrumental in identifying risks associated with diabetes and other metabolic complications in these women, and the metabolic side-effects of HIV and antiretroviral therapy has remained one of her major research interests. In the Department she serves on the Doctoral Committee, mentors master’s and doctoral students, and represents us on the school-wide Faculty Steering Committee.
Epidemiology Global Health Track
Students describe their international practicum experiences

The Global Health Track (GHT) program prepares master’s students for either management or policy careers in organizations working to improve health in other countries. Epidemiology students in the GHT gain an orientation to epidemiologic applications within global health settings, including a 6-month overseas practicum. Here, 6 epidemiology students describe their 2010 practicum experiences.

AFRICA

HAMSA SUBRAMANIAM, TANZANIA

I was working for Helen Keller International (HKI) in the Tanzania country office located in Dar es Salaam. A Vitamin A supplementation (VAS) campaign takes place twice-yearly for children 6-59 months of age, however data for monitoring coverage and progress of the program is unreliable. By conducting a post-event coverage survey (a randomized cluster sampling method) to validate administrative data, HKI can assist the government in identifying children missed by this essential child survival program. I assisted in training data collectors, traveled with data collection teams throughout Tanzania mainland and Zanzibar to guide data quality, and conducted district and zonal workshops to assist low performing district improve coverage.

It’s easy to forget that one rarely starts with a clean data set, but in my time in Tanzania, I was reminded that data is messy. This experience made me realize how difficult it is to collect sound data in low resource settings. The sad irony is that without sound data, providing evidence-based solutions is challenging, and these are the settings that require it the most. I was incredibly fortunate to be working with a team that recognized this difficulty and passionately pursued the truth. Working at HKI revealed to me the power of data, and I am forever grateful for the supportive mentorship and guidance I received during my time there. Words cannot express the affection I have for that country, and I hope to work there again someday.

VERONICA LEE, ETHIOPIA

For my practicum, I worked with Academy for Educational Development and the International Food Policy Research Institute on the Alive and Thrive Project, which is a Gates Foundation-funded initiative to promote optimal infant and young child feeding practices among children up to 2 years of age for the prevention and reduction of childhood stunting. My specific responsibilities as the Monitoring and Evaluation (M&E) intern included supporting the M&E team on the implementation of the project’s baseline survey in 2 regions of the country and on the design of process evaluation for the project’s activities.

The most valuable part of my experience was visiting the households in the villages and getting to speak with the mothers about their health behaviors and practices. It provided a huge insight into understanding how the interventions we promote as public health professionals, like exclusive breastfeeding or bednet use to protect against malaria, play out at the household level—why they are or are not adopted or how they are modified to best suit the mother’s and family’s needs. It allowed me to see firsthand how critical it is to transform efficacious researching findings into health interventions of a holistic approach in order to be truly effective in improving health outcomes at the household level.
ANGELIE SINGH, MALI AND SENEGAL

With Millennium Villages Project, I had the chance to work on a community-based malnutrition treatment program in the grasslands of central Mali and northern Senegal. I loved learning from and brainstorming with the site teams and local leaders on how best to implement new studies and programs, but my most enlightening moments came from interviewing the mothers, fathers, and caretakers of malnourished children in the remote villages of Senegal.

ASIA

LINDSEY LOCKS, NEPAL

I spent my practicum working with Helen Keller International in Nepal. I am particularly interested in malnutrition in children under 2 years, and this was a great opportunity to continue to work in this field, while learning more about food-based approaches to address this challenge. As an epidemiology student, I also really enjoyed familiarizing myself with a cluster, randomized control trial that is testing the impact of an integrated homestead food production and nutrition behavior change communication strategy across control and intervention communities. It was great to see how an epidemiological framework can be applied to operations research on community-based interventions. I also loved the people whom I had a chance to work with in Nepal, and of course, trekking in the Himalayas!

MARIE STONER, INDONESIA

I did my practicum in Jakarta, Indonesia, working for an NGO called Mercy Corps in monitoring and evaluation. Mercy Corp’s projects in Indonesia target urban, slum areas. Initially, I was assisting with the evaluation of a project that was using a mother support group model to increase exclusive and early initiation of breastfeeding. Exclusive breastfeeding has been declining rapidly in Indonesia and early initiation remains low. I helped to analyze and write up the results of a cluster randomized control trial comparing neighborhoods that received the intervention versus neighborhoods that did not. In the second half of my practicum, I led an evaluation of another project focused on launching healthy food carts in communities to both improve nutrition and to provide additional business opportunities. We analyzed financial information related to the economic component of the project, did a random survey of 150 people in the area, and conducted several qualitative interviews. I also assisted with other tasks in the office, including creating a monitoring system, article writing, helping with an assessment for another economic project and even conducting a biostatistics workshop (which I did not expect to do). From my experience, having a solid knowledge of epidemiological methods and analysis provides valuable insights into understanding how programs and data systems can be improved. However, it also taught me to challenge these concepts and to think about ways that “ideal” epidemiological methods can be adapted to challenging and complex environments.

SOUTH AMERICA

KEITH ATCHISON, BRAZIL

I was working on a project to evaluate environmental predictors of dengue incidence in Recife, Brazil. I was working with FIOCRUZ, an institution that works under the Brazilian Ministry of Health. This was a valuable experience for me because I greatly improved my language skills. It was also eye-opening to see how the Brazilian workplace functions. There was just a greater sense of community among everyone working where I was and less ego. There was a communal area for coffee where everyone would take breaks together and chat for 30 minutes or so. It was nice to see people just putting work aside for a little and getting to know the people better who they spent 40+ hours a week with.
USEFUL RESOURCES

- **p. 25**
  - **Visiting scholars guide**
  - Important facts about short- and long-term visitors to the Department, including pre-approvals, visas, titles, office space, and lodging

- **p. 26**
  - **Around NYC**
  - A guide to museums and events for summer visitors to New York

- **p. 27**
  - **Master’s thesis grading guidelines**
  - A detailed checklist to guide faculty in grading master’s theses

- **p. 29**
  - **Master’s thesis dataset form**
  - Collecting information from faculty about datasets available for use by master’s students
The Department of Epidemiology welcomes scholars who want to spend sabbaticals or short periods of time with us, provided that the three steps below are followed.

STEP 1: CONTACT THE CHAIR’S OFFICE FOR APPROVAL

The sponsoring faculty member should email the Chair about the proposed visitor. All proposed visitors to the Department in any capacity must be approved by the Chair’s office. Approval is contingent on the following criteria:

- there is a sponsoring faculty member who wishes to invite the visitor and who feels that the visitor will add to the intellectual life of the Department
- the visitor is a fit with the Department’s strategic mission.
- the visitor is committed to participating in the life of the Department and will attend Department seminars, CUEGRs and so forth
- there is no cost to us in terms of either salary or accommodation
- we have adequate office space to host our visitors

STEP 2: WORK WITH MR. BRIAN VAN BUREN ON TITLE, VISA, UNI

Once approval from the Chair has been secured, the sponsoring faculty member should contact Mr. Brian Van Buren, Associate Director of Epidemiology HR/Faculty Affairs, who will evaluate the purpose of the visit, the funding source, and the CV to determine whether a visitor will require a formal faculty or staff appointment, volunteer status, a visa, or other special considerations. He will guide both the sponsoring faculty member and the visitor through the visa/appointment process, manage the on-boarding process, and create a UNI.

It is important to keep in mind that:

- regardless of length of stay, all visitors who will be spending time in the Department must be registered with Human Resources, per University policy.
- Mr. Van Buren must be alerted several months in advance of the proposed visit.

STEP 3: WORK WITH MS. EBONY KING ON OPERATIONS

Once there is an estimated date for the visitor’s arrival, Ms. Ebony King will coordinate with the sponsoring faculty member about space, equipment, and telecommunications considerations. Ms. King will make every effort to place the visitor near his/her planned collaborator(s), but this may not always be possible.

AN IMPORTANT NOTE: HOUSING

Visitors are responsible for identifying and funding their own housing. They should be made aware in advance that housing options at Columbia are extremely limited and that NYC housing in general tends to be very expensive. Listed below are a number of housing resources that visitors are encouraged to explore.

- Just down the street from Mailman at 50 Haven Avenue is Bard Hall, which can accommodate a limited number of visitors to the CUMC for short-term stays. Call to inquire about availability and rates: 212-304-7000.
- The University hosts a subletting site for on- and off-campus apartments. [http://columbia.edu/cu/ire/sublease/subregistry.html](http://columbia.edu/cu/ire/sublease/subregistry.html)
- The Columbia Office of Postdoctoral Affairs also offers guidance, specifically to postdoctoral research fellows and scientists. Notably, there is a limited amount of on-campus housing at CUMC available via a monthly lottery. [http://postdocs.columbia.edu/housing.html#1](http://postdocs.columbia.edu/housing.html#1)

Outside of the University, there are also some options for short term housing that have been helpful in the past:

- The Morningside Inn at 235 West 107th Street offers hotel accommodations for visitors starting at $75/night. [http://morningsideinn-ny.com](http://morningsideinn-ny.com)
- Sabbatical Homes connects faculty from around the world who are looking for rentals and home exchanges. [http://sabbaticalhomes.com](http://sabbaticalhomes.com)
**USEFUL RESOURCES**

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**Around NYC**

**MUSEUMS**

- **Metropolitan Museum of Art** [metmuseum.org] is one of the world’s largest art museums.

- **Cooper-Hewitt National Design Museum** [cooperhewitt.org], housed in Andrew Carnegie’s former mansion and devoted to historic and contemporary design.

- **Solomon R. Guggenheim Museum** [guggenheim.org/new-york], a famous contemporary art museum housed in one of the city’s most unique buildings, which was designed by Frank Lloyd Wright.

- **The Museum of Modern Art** [moma.org] One of the world’s best known modern and contemporary art museums. Visit the main museum in Midtown Manhattan or MOMA PS1 [ps1.org], its satellite exhibition space in Queens.

- **American Museum of Natural History** [amnh.org] World renowned scientific collections and exhibits on Manhattan’s Upper West Side.

- **New York City Tenement Museum** [tenement.org] Learn about the history of immigrants in New York at a former tenement home on the Lower East Side.

Close to campus on Broadway and West 155th St. is the free **Hispanic Society of America Museum** [hispanicsociety.org], which features archaeology, paintings, sculpture, and textiles from early Spanish history to modern day.

Also near campus is **The Cloisters** [metmuseum.org/Works_of_Art/the_cloisters], which is devoted to medieval European art and architecture. Don’t forget to take a stroll around the site of the museum, beautiful **Fort Tryon Park**,[nycgovparks.org/parks/fort-tryonpark] which overlooks the Hudson River.

**FREE SUMMER EVENTS**

- **Shakespeare in the Park** [publictheater.org] A favorite summer activity for New Yorkers, see free performances of Shakespeare plays in Central Park [Tip: Get in line early for tickets because they go fast!]

- **New York Philharmonic Concerts in the Park** [nyphil.org/attend/summer/index.cfm?page=parks] Enjoy to the city’s symphony orchestra outdoors. Bring food and a picnic blanket!

- **Bryant Park Summer Film Festival** [bryantpark.org/plan-your-visit/filmfestival.html] Watch free movies under the stars at one of the city’s most beautiful parks. For a less crowded alternative, check out the other parks [gonyc.about.com/od/summersites/a/summervideos.htm] in the city that offer free movies throughout June.

**Governor’s Island** [govisland.com/html/home/home.shtml] Take a free ferry ride from South Ferry in Manhattan to this former U.S. Coast Guard site, which now offers cycling, paddle boating, miniature golf, and outdoor concerts.

**Puerto Rican Day Parade** [nationalpuertoricandayparade.org] This popular parade celebrates the nation of Puerto Rico and its people. It takes place on Sunday, June 12, along Fifth Avenue in Manhattan.

**Central Park SummerStage** [summerstage.org] offers an eclectic mix of music programming in Central Park, with many free shows.

**Mermaid Parade** [coneyisland.com/mermaid.shtml] is a popular parade that takes place in the Coney Island neighborhood of Brooklyn in mid-to-late June. Participants dress in aquatic costumes and ride marine-themed floats.

**WALKING TOURS**

Want a tour of some of NYC’s distinct neighborhoods? Check out one of the city’s many walking tours.

[gonyc.about.com/od/toursbr/new_York_City_Walking_Tours.htm]

**RESTAURANTS**

New York features some of the world’s best restaurants.

For more information on restaurants, visit **Chowhound** [chowhound.chow.com/boards/18], Zagat [zagat.com/newyork], Yelp [yelp.com/nyc], and **New York Magazine** [nymag.com/restaurants].

Don’t forget, for one week in late June, you can get great deals on lunch and dinner during **Restaurant Week** [gonyc.about.com/cs/restaurants/a/restaurantweek.htm]!

To learn more about tours, restaurants, museums, and nightlife, visit **Time Out New York** [newyork.timeout.com], **New York Magazine** [nymag.com/visitorsguide], or the city’s **official tourism site** [iloveny.com]
### Epidemiology Master’s Thesis Grading Guideline

**Name of Student: ___________________  Thesis Reader: __________________**

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<td><strong>A</strong> Research question and associated hypotheses</td>
<td>10</td>
<td>□ Thesis poses a clear research question and/or associated hypotheses 10 PTS</td>
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<td></td>
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<td>□ Thesis poses a clear but limited or flawed research question and/or hypotheses 8-9 PTS</td>
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<td>□ Thesis does not pose a clear research and/or hypotheses &lt;7 PTS</td>
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<tr>
<td><strong>B</strong> Conceptual framework</td>
<td>10</td>
<td>□ Thesis uses relevant theoretical/conceptual frameworks in insightful or innovative ways 10 PTS</td>
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<td></td>
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<td>□ Thesis uses relevant theoretical/conceptual frameworks appropriately 8-9 PTS</td>
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<td></td>
<td>□ Thesis uses theoretical/conceptual frameworks in a perfunctory way &lt;7 PTS</td>
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<tr>
<td><strong>C</strong> Literature review</td>
<td>10</td>
<td>□ Student provides a full scan of relevant literature and critiques literature in a sophisticated way that advances the discussion of the topic 10 PTS</td>
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<td>□ Student provides a full scan of relevant literature but weaker critique 8-9 PTS</td>
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<td>□ Student provides a scan of the relevant literature but it is incomplete &lt;7PTS</td>
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<tr>
<td><strong>D</strong> Study design, sample and statistical methods</td>
<td>15</td>
<td>□ Design or statistical methods are innovative or sophisticated 15 PTS</td>
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<td>□ Design and statistical methods are appropriate and clearly described 12-14 PTS</td>
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<td></td>
<td></td>
<td>□ Design and statistical methods are inappropriate or overly simplistic &lt;11 PTS</td>
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<tr>
<td><strong>E</strong> Tables and figures</td>
<td>5</td>
<td>□ All tables and figures are clear, include legends and are relevant to the questions posed 5 PTS</td>
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<td></td>
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<td>□ Tables and figures and legends are clear, but not tightly linked to the questions posed 4 PTS</td>
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<td>□ Figures and tables do not fully address the questions or hypotheses posed or are not clear &lt;3 PTS</td>
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<tr>
<td><strong>F</strong> Results section</td>
<td>15</td>
<td>□ Results are clearly articulated and closely linked to the research question and hypotheses 15 PTS</td>
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<td></td>
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<td>□ Results are clearly summarized but not fully connected to the research questions posed 12-14</td>
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<td>□ The methods or analyses are inappropriate and/or inaccurately described &lt;11 PTS</td>
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<td><strong>G</strong> Discussion section</td>
<td>15</td>
<td>□ Demonstrates excellent synthesis of results and applies to published literature 15 PTS</td>
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<td>□ Demonstrates excellent synthesis of results but less successful in applying to published literature 12-14 PTS</td>
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<tr>
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<td></td>
<td>□ Poor synthesis of results and/or limited understanding of how results fit into context of previous research on thesis topic &lt;11 PTS</td>
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<tr>
<td><strong>H</strong> Overall quality of writing</td>
<td>10</td>
<td>□ Thesis is extremely well written eg publishable with minor revisions 10 PTS</td>
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<td></td>
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<td>□ Thesis is clearly organized but might benefit from more careful attention to transitional sentences, to flow of the arguments, or grammar and syntax 8-9 PTS</td>
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<td>□ Thesis has significant organizational or proofreading errors &lt;7 PTS</td>
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<tr>
<td><strong>I</strong> Citations</td>
<td>10</td>
<td>□ Scholarly ideas are cited properly 10 PTS</td>
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<td>□ Scholarly ideas are cited but may contain some errors 8-9 PTS</td>
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<td></td>
<td>□ Scholarly ideas are not well cited or contain serious errors &lt;7 PTS</td>
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</table>

**Total Possible Points: 100**

**Total**

**CONTINUED →**
In grading, the reader may consider not only the included ratings but additional strengths and weaknesses (described in comments, below). The thesis grade may also take into account intellectual growth of student in the process of writing their thesis (e.g., improvement in writing skills, learning new statistical methods and software appropriate to project).

The final grade for the thesis is the result of discussion between both readers and should be communicated to Liliane Zaretsky (lz3@columbia.edu) for processing. The reader should communicate the grade directly to the student as well.

Thank you for your work with Epidemiology master’s students.

Additional Comments / Concerns:
____________________________________________________________________________________
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Final Grade: ____________________________________________________________

Grader’s Signature: ____________________________________________ Date: __________________________
If you have data sets that you can make available to students for their master’s theses, please fill out this form and email to Dr. Renee Goodwin. rdg66@columbia.edu

Name: ______________________________ Date: ______________

Please briefly describe each available dataset, with a short study title, the study design, the exposures, the outcomes, and any special features that you think may be relevant. (Use extra pages as needed)

1

2

3

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☐ By Email
☐ In Person
☐ Other

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Please check all that apply

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☐ SPSS
☐ STATA
☐ S-PLUS
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Please check all that apply

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☐ EXCEL
☐ SAS
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Thank you for helping us to fulfill our commitment to these students.
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