The dimensions of the School of Public Health’s reach include more than 4,000 alumni who are active in nearly 70 countries—and on six continents—around the world.

The variety, challenges and rewards of public health work are explored in a photo essay of 38 YSPH alumni who work around the globe to improve people’s lives.

YSPH students team up with their colleagues at the School of Art to create more than 30 original health-themed posters that have been displayed in New Haven and Hartford.
I have had many wonderful experiences in my position as Dean of Public Health at Yale. In this role, I have the privilege of working with some of the most talented and dedicated researchers in the world. Almost every day, I hear or read about research they have done and are doing that is likely to improve the lives of countless individuals domestically and abroad.

In addition to conducting cutting-edge research, our faculty members train future generations of public health professionals who will have a positive impact throughout the world. As I tell our graduates each year, one of my favorite days is Commencement day. As the ceremony starts and I watch our graduates convene, I am reminded of their intelligence, commitment, creativity and caring, which fills me with gratitude and optimism. My gratitude is for the opportunity I have had to meet and learn from so many passionate and gifted people. My optimism stems from the many conversations I have had with these students and their predecessors whom I have met throughout the United States and in many other countries. Working with our students and many of our amazing alumni has allowed me to see, and have hope for, the future.

The future I see when I talk to our students is reassuring and inspiring. They may soon provide basic health services in a major city or isolated town in the United States. They may do so with a nongovernmental organization in Africa or South America. Some will go on to obtain a Ph.D. or a degree in medicine or law. They may end up working in the federal government to ensure the safety of our air, drinking water or medicines and/or to pursue a research career. Some will design clinical trials or manage a large hospital. They may work for a local health department, for the Centers for Disease Control and Prevention or for the World Health Organization.

I have visited our alumni in public health departments, clinics, hospitals and many other types of organizations in the United States, as well as in big cities and remote villages in countries such as Russia, Brazil, China and Africa. They are working to detect and prevent emerging infections and to address endemic infections, to protect our environment, to prevent the diseases that are looming in our futures and to improve the systems and policies that guide all of our efforts to prevent and treat the many acute and chronic conditions that affect our health. I am truly inspired by the work they do.

As the school approaches its centennial celebration in 2015, this is an apropos time to celebrate the many contributions that our alumni are making to improve the world’s health. In this issue of *Yale Public Health*, we share alumni stories that have inspired our students and the rest of us. The photo essay in the pages that follow depicts not only how broad and varied the discipline of public health is, but also the enormous impact that our graduates have around the globe as they immerse themselves in public health.

*Paul D. Cleary, Ph.D.*
Dean, Yale School of Public Health
The Big Apple, it seems, is poised to shed some circumference.

New York City health officials in September approved Mayor Michael R. Bloomberg’s proposal to ban the sale of large (greater than 16 ounces) sugary drinks in certain public venues such as restaurants.

Supporters and health advocates are hailing this pioneering measure as a public health triumph and a small step forward in combating obesity in America, which most everyone agrees is a serious, pervasive and growing threat.

But not everyone is pleased with the city’s public policy. There are concerns of government overreach and the rise of an all-powerful “Nanny State.” Barrering derailment in the courts, the legislation is slated to go into effect early next year, and patrons in many establishments will have to get by with smaller gulps of soda and other sugar-based drinks.

The potentially adverse health consequences of sugary drinks are poignantly displayed in an ongoing exhibition at the Yale Peabody Museum of Natural History. Big Food: Health, Culture and the Evolution of Eating includes several displays that focus on sugar-laced beverages, including one of baby bottles emblazoned with popular soft drink logos.

Another shows the amount of sugar contained in a variety of popular soft drinks. In some cases there are as many as 18 spoonfuls of sugar in a single container. Such drinks contribute to an average annual sugar consumption of 64 pounds for American adults. The consequences of this level of consumption in terms of weight gain and the onset of chronic health problems, such as diabetes and cardiovascular diseases, are almost incalculable.

Still another display — a digital clock with numbers in constant motion — shows the revenue that would be raised if a 1-cent tax were enacted on every ounce of sugar-sweetened beverages sold in the United States. Between the clock’s activation on February 9, when Big Food opened, and through the end of September, the amount had exceeded $7.6 billion.

These and Big Food’s other displays, which explore nutrition, portion size, farming, processed foods, increasingly sedentary lifestyles, the quality of food lunches and other aspects of America’s obesity problem, have earned the public’s attention. More than 90,000 visitors have toured the exhibition and many have affirmed that Big Food has altered the way they view food, diet and health.

The exhibition is a collaboration among CARE: Community Alliance for Research and Engagement at the Yale School of Public Health, the Peabody Museum and the Yale Rudd Center for Food Policy & Obesity. It is just one part of CARE’s work to improve health, and lives, in New Haven.

If you haven’t had a chance to visit Big Food, I urge you to do so. It is educational, poignant and even fun. It remains on display through December 2.

Michael Greenwood
Managing Editor
Advances

Brain tumors linked to frequent dental X-rays

People who receive frequent dental X-rays have an increased risk of developing a meningioma, the most common and potentially debilitating type of noncancerous brain tumor, new research led by the Yale School of Public Health has found.

The study showed that individuals receiving bitewing exams (which use X-ray film held in place by a tab between the teeth) on a yearly or more-frequent basis were approximately 50 percent more likely to develop a meningioma than their peers in the control group.

Additionally, a link between meningioma risk and panoramic dental exams (which use an X-ray outside of the mouth to develop a single image of all of the teeth) was also found. Individuals younger than 10 years old who received this type of exam in the past had a nearly five times greater risk of developing meningioma, while those who received it on a yearly or more-frequent basis were up to three times more likely to develop a tumor.

The researchers analyzed data from 1,433 patients who were diagnosed with the disease and were residents of Connecticut, Massachusetts, North Carolina, California and Texas. The investigators also included information from a control group of 1,350 individuals with similar characteristics who did not have the tumor. The mean age was just over 57 years for both groups.

While today’s dental patients are exposed to lower X-ray doses than in the past, the American Dental Association stresses the need for dentists to examine the risks and benefits of dental X-rays and has confirmed that there is little evidence to support the use of dental X-rays of all teeth in patients who are not experiencing symptoms.

“The study highlights the need for increasing awareness regarding the optimal use of dental X-rays, which unlike many risk factors is modifiable,” said lead author Elizabeth B. Claus, Ph.D. ’88, M.D. ’94, professor in the Department of Biostatistics and an attending neurosurgeon at Brigham and Women’s Hospital in Boston.

Meningiomas develop in a membrane that envelops the brain and the central nervous system, known as the meninges. These tumors can grow undetected for years and can eventually reach the size of a baseball or larger. While they are not cancerous, meningiomas can cause debilitating side effects such as headaches, vision problems and loss of speech and motor control. Women develop the tumors more often than men.

The American Dental Association’s guidelines for healthy persons suggest that children receive one X-ray every one to two years, teenagers every one and a half to three years and adults every two to three years. The study was published in Cancer, a journal of the American Cancer Society.

Michael Greenwood

Stroke treatments found to vary widely around U.S.

Imagine that someone is on a cross-country RV trip, and that person has a stroke.

Judith H. Lichtman, M.Sc., M.P.H. ’88, Ph.D. ’96, associate professor in the Department of Chronic Disease Epidemiology, has found that getting all the recommended stroke treatments can vary by which part of the country a person is in when entering the hospital.

Lichtman and her colleagues examined nearly 1 million hospital admissions for stroke or mini-stroke over a seven-year period in four geographic regions of the country. All hospitals in the study were members of a quality improvement program called “Get With The Guidelines—Stroke.” The researchers checked to see how many of eight recommended treatments eligible patients received, such as blood thinners and antihypertensive medications, as well as what percentage of patients received all interventions for which they were eligible. The aim was to examine efforts to prevent second strokes, which vary markedly by region and often have poorer outcomes than the first ones do.

Overall, patients’ treatment delivery rates were lower in the Midwest and South and highest in the Northeast. However, patients in the South and West were more likely to be given
lipid-lowering medications than those in the Northeast, while Western and Northeastern patients were likeliest to receive the clot-busting medication tPA. Weight loss counseling was most robust in Southern hospitals and least in Northeastern hospitals. The findings were published in the journal Stroke.

The regional differences persisted even when researchers adjusted for factors like race and whether a hospital was a stroke center. “These are proven therapies, and yet it is unfortunate to see that they’re not utilized as much as they can be,” said Lichtman. “These are lost opportunities.”

Jenny Blair

Geocoding used to identify health disparities

Connecticut women living in poor neighborhoods or ones with a greater concentration of African-Americans are more likely to have a precancerous cervical lesion than if they lived elsewhere.

Linda M. Niccolai, M.Sc., Ph.D., associate professor in the Department of Epidemiology of Microbial Diseases, discovered the health disparity after studying two years’ worth of such diagnoses.

Since the 2006 introduction of the human papillomavirus (HPV) vaccine, many precancerous cervical lesions have been rendered preventable—at least in theory. In practice, it’s key to know whom to prioritize for vaccination. Connecticut is one of only two states to track those cervical lesions that presage cancer, making it an ideal environment in which to document potential disparities.

Using a technique called geocoding, Niccolai and her team reviewed addresses of women diagnosed with a precancerous cervical lesion in 2008 or 2009. From census data, the team then culled poverty rates and the proportion of minority residents in each patient’s home neighborhood. Their findings appeared this spring in the American Journal of Public Health.

The results suggest that where women live subjects them to a complex set of influences, some of which can raise the risk of cervical lesions. “Place matters,” said Niccolai. “It’s really the environment in which you live and work and go to school that exerts an influence on your health, as much as your own individual characteristics.”

The study is the first in a planned series to monitor vaccination and lesion rates in the post-HPV vaccine era. Niccolai hopes that what they learn will eventually help reduce these geographic health disparities.

M.G.

Suicidal thoughts elevated among women with PMDD

The prevalence of nonfatal suicidal thoughts and behaviors is elevated among women who are suffering from premenstrual dysphoric disorder (PMDD), a condition that affects between 3 percent and 8 percent of American women.

While both premenstrual syndrome (PMS) and PMDD are characterized by physical and affective symptoms that occur in the week prior to the onset of menses, the affective symp-

toms of PMDD are much more severe and are associated with substantial detriments to women’s functioning at home, at work and in relationships.

Research led by a postdoctoral fellow at the Yale School of Public Health analyzed cross-sectional survey data from 3,965 American women between the ages of 18 and 40 and found that women with PMDD were significantly more likely than women reporting no premenstrual symptoms to have suicidal thoughts (2.22 times) or plans (2.27 times) or to make an attempt (2.10 times).

“Although these findings are provocative, we must be cautious in our interpretations. While our results show a correlational association between PMDD and nonfatal suicidal thoughts and behaviors, this is not to say that PMDD causes nonfatal suicidal thoughts and behaviors. It may be that women who are prone to PMDD may also be prone to nonfatal suicidal thoughts and behaviors, independently of their PMDD,” said Corey E. Pilver, Ph.D., a postdoctoral fellow in the Department of Biostatistics and the study’s lead author. “Regardless of the causal or noncausal nature of this association, women who suffer from
PMDD should seek assistance from their physicians. Additionally, people who feel that they might hurt themselves should seek crisis help from the National Suicide Prevention Lifeline.”

The findings suggest that clinicians treating women with PMDD be vigilant for signs of suicidal thought or behavior and that they evaluate and treat women who exhibit such signs. The paper was published in the journal *Social Psychiatry and Psychiatric Epidemiology*.

Michael Greenwood

**HCC rates pronounced in poor neighborhoods**

The incidence of hepatocellular carcinoma (HCC) is rising in the United States, and certain racial and ethnic groups are harder hit than others. The reasons for both trends are unclear, in part because risk factors for HCC—like poverty, spotty access to care and hepatitis C—are overrepresented among some minorities.

To help untangle the possible effects of ancestry from those risk factors, Fatma M. Shebl, M.D., M.Sc., M.P.H., Ph.D., assistant professor in the Department of Chronic Disease Epidemiology, studied the data from over 18,000 patients with HCC in the National Cancer Institute-sponsored Surveillance, Epidemiology and End Results registries. These patients live in areas that are home to about 10 percent of the U.S. population. Shebl and her colleagues used census data to compare characteristics of the patients’ home neighborhoods with those of neighborhoods of healthy controls of the same background.

Compared to healthy people, HCC patients as a group lived in poorer neighborhoods, which were also home to fewer high school graduates and fewer native-born residents. Those trends held true for whites and most minorities, with the exception of Hispanic HCC patients, whose neighbors were not poorer than those of unaffected Hispanics. White patients’ neighborhoods had higher socioeconomic markers than those of non-white patients.

Shebl’s results appeared in *Cancer Epidemiology, Biomarkers & Prevention* in June and may help focus HCC prevention programs on poor communities and those with more immigrants—as well as on high-risk Hispanics living in rich and poor areas alike. “When you understand health disparities, you can plan your efforts better,” said Shebl.

Jenny Blair

**Some 800,000 saved by U.S. anti-smoking measures**

More than 800,000 lives were saved in the United States over a 25-year period as a result of increasingly stringent anti-smoking measures that began in earnest after the U.S. Surgeon General’s landmark report on tobacco in the mid-1960s.

Using a Yale mathematical model, the study quantified for the first time the effects of tobacco regulation. It also concluded that 2.5 million people who died from smoking-related lung cancer in this same period might have survived if stricter tobacco control measures had been in place.

Researchers from the Yale School of Public Health and more than a dozen other universities and institutes formed the Cancer Intervention and Surveillance Modeling Network (CISNET) consortium and analyzed trends in cigarette smoking. Detailed cigarette smoking histories were recreated for generations dating back to 1890, and significant events, such as the Surgeon General’s report, were factored in.

The researchers found that gradual changes in smoking behavior over a 25-year period beginning in 1975 resulted in approximately 824,000 fewer lung cancer deaths, 603,000 of which were among men. The results were published in the *Journal of the National Cancer Institute*.

“Tobacco control strategies in the United States have saved hundreds of thousands of lives from lung cancer death,” said co-author Theodore R. Holford, Ph.D. ’73, a Susan Dwight Bliss Professor of Public Health in Biostatistics at the School of Public Health and leader of Yale’s CISNET team. “But there is still much more that needs to be done, because globally millions continue to die from lung cancer caused by smoking. Most lung cancer deaths are preventable.”

M.G.
### Responses from YSPH alumni are as varied as the profession in which they practice:

<table>
<thead>
<tr>
<th>Response</th>
<th>Author</th>
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<tbody>
<tr>
<td>“Public health is a discipline that invites broad consideration of all the issues affecting the physiology of a healthy or unhealthy community. It generates insights, challenging questions and, when all goes as planned, solutions that can unlock the ability of individuals to reach their fullest potential.”</td>
<td>Steven Newton</td>
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<td>“My definition of public health is simple—how can we best live in harmony with ourselves, with others and with the planet?”</td>
<td>Dana Faulkner</td>
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<tr>
<td>“It is an approach to health and well-being that recognizes the interconnectedness of individuals with their social and political environments and works toward creating and sustaining conditions in which people can live healthy, productive lives.”</td>
<td>Unni Karunakara</td>
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<tr>
<td>“Public health is the fusion of social, medical and environmental sciences that control disease and foster well-being in communities.”</td>
<td>Jewel Mullen</td>
</tr>
<tr>
<td>“Public health is the often invisible actions that are taken to ensure that people are protected from disease, injury and violence and that they have access to resources that allow them to live healthy lives.”</td>
<td>Linda Degutis</td>
</tr>
<tr>
<td>“Public health empowers the public with their health through positive addictions. We not only thwart ‘dis-ease,’ but inspire ease in choosing healthful foods (like veggies) and engaging in fun exercise (Dance!).”</td>
<td>Eric Triffin</td>
</tr>
<tr>
<td>“Public health is a concern of the global human population. It is the prevention of disease in the foreseeable and distant future, and beyond the limits of this planet.”</td>
<td>Zinzi Blell</td>
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“Public health is the integration of the well-being of the individual (human or animal) with that of family, community and the environment.”

—Zimra Gordon-Danzer

“Public health involves the understanding of science, statistics, policy and social behaviors to effectively characterize the diseases that burden our communities. The consequence is that the services, education, laws and prevention programs intended to reduce these burdens will be appropriately established.”

—Maya Hanna

“Public health is a multidisciplinary effort to promote human health and prevent disease. It requires an understanding of genetic, social and environmental elements that shape disease exposure and risk.”

—Yvette Girard

“Public health means ensuring that all people, regardless of their resources, have the tools they need to protect and improve their own health and that of their families and communities.”

—Karen Schmidt

“Public health is about providing the highest quality of life and health to the community, challenging the creativity of those working in the field to attain even greater excellence and championing those with no voice.”

—Heidi Boerstler

“I define public health as health for populations regardless of gender, age, profession, race and nationality. It means ‘improvement of health and quality of life’ that can be promoted through different multidisciplinary health intervention practices by a variety of health professionals/skills/specializations to combat and prevent diseases to save lives.”

—Vandine Or

“For me, in this day and age, public health is recognizing the links between health and human-driven environmental degradation, with the aim of reconciling human behavior with the health of the environment and its people.”

—Eliza Little
“Public health is to be developed and managed by the local communities, with culturally appropriate technical assistance and sustainable capacity building from outsiders.”

—Kai-Lih Liu

“Public health is a perspective—a data-driven, population perspective on issues that matter to all people, societies and the planet.”

—Heidi Gortakowski

“Public health is a world of interdependence and connectivity. The problems and solutions affect all humans at a variety of levels in the world. We, therefore, have a collective vested interest in improving and advancing its causes.”

—Thomas Chapman

“Public health is the art and science of improving the health of populations. There has never been a more important time to prove what public health can do.”

—Sarah Dash

“Public health is programs and activities that serve to prevent disease and promote wellness within the general population and at-risk subgroups and that address needs across the health care continuum and across the lifespan. It is a wonderfully challenging, life-giving career.”

—Susan Michaels-Strasser

“In my eyes, public health is about ensuring that patients have access to high-quality care and services, in a consistent and respectful manner.”

—Richard D’Aquila

“I embrace the Institute of Medicine’s definition: ‘Public health is what we, as a society, do collectively to assure the conditions for people to be healthy.’”

—Shelley Geballe

“It is an interdisciplinary approach to disease prevention and health promotion on a population level. It is a dynamic field that aims to address the health needs of communities worldwide.”

—Patrick Byam
YSPH alumni around the world
More than 4,000 School of Public Health graduates are involved in some of today’s most pressing health challenges in nearly 70 countries around the globe. By putting their training to use in a variety of capacities—whether in research, academics, government or administration or for private nonprofits—the school’s alumni are helping to build a healthier future for all.
LIVES in PUBLIC HEALTH

YSPH alumni work around the world to fight disease; innovate; reduce health disparities; and build the foundation for a better, and healthier, future for all.

More than 4,000 Yale School of Public Health alumni are actively involved in improving health around the globe. In some cases, this work is done on the individual level; in others it affects groups or whole regions; and in still others the scope is fundamentally global.

This work ranges from running a health clinic that provides essential medical and preventive services to people who may otherwise go without; advocating for children; fighting environmental injustice; studying the effects of air pollution; digging deep borehole wells that provide potable, life-giving water; and contributing to new drugs to help people with type 2 diabetes, to name just a few.

In this photo essay we are able to present only a fraction of our alumni—a total of 38 across five continents—and the distinctive types of work that they do around the world. It is intended to provide a glimpse into the exceptionally diverse, vital and growing field of public health and the difference that dedicated practitioners are making here in New Haven, throughout North America and in communities around the world.

C.-E.A. Winslow, who founded public health at Yale nearly 100 years ago and is recognized as a founder of the modern public health movement, described the discipline as “the science and art of preventing disease, prolonging life and promoting health through the organized efforts and informed choices of society, organizations, public and private, communities and individuals.”

His spirit and vision live on and are practiced daily.

Michael Greenwood
Kai-Lih Liu, M.P.H., Ph.D.’96

Phnom Penh, Cambodia

Associate director, Strategic Information Unit, FHI 360

Kai-Lih heads the Strategic Information Unit for monitoring and evaluation, surveillance and research activities in HIV, tuberculosis and malaria at FHI 360. His work entails collaborations with UNAIDS, the World Health Organization, UNICEF and various government agencies. Here, one of the employees records field data on a laptop in a rural region of the country.
Edith M. Pestana, M.P.H.’93

Hartford, Connecticut
Administrator, Environmental Justice Program, Connecticut Department of Energy and Environmental Protection

Children play—and live—close to industry and pollution at this site in Connecticut. As administrator of the state’s Environmental Justice Program, Edith monitors this site and others to address the environmental inequities that are often present in lower-socioeconomic and minority communities. The agency’s mission is to ensure that all residents receive equal protection under environmental and public health law and have equal access to the state’s natural resources.
Atlanta, Georgia

Director, National Center for Injury Prevention and Control, Centers for Disease Control and Prevention

During a recent trip to New Delhi, India, Linda helped to dedicate a new school of public health for traffic safety and visited hospitals (bottom) to develop trauma and injury surveillance systems. She works to prevent injury and violence, leading causes of death and disability in the United States and throughout the world.
Katrina Clark, M.P.H. ’71

New Haven, Connecticut

*Executive director, Fair Haven Community Health Center*

As the executive director of the Fair Haven Community Health Center, Katrina (right) says that the reward of being a health care administrator is realizing that the grants, analyses and health care programs and services that are brought to fruition all contribute to making health care accessible to the residents of an inner city community and to reducing health care disparities. Founded in 1971, the center provides comprehensive health care – from prenatal to pediatric, adolescent to adult and geriatric – to the greater Fair Haven community.
Eric Triffin, M.P.H. ’86

Bethany, Connecticut

Health activist, adjunct public health professor, retired director of public health

Dressing as Snappy the Peas/Peace Pod or, alternatively, as Mr. Carrot, Eric seeks to “infect” people with good eating habits, such as carrots and peas! He is also known as TaDaah the TranscenDancer and inspires people to dance with joy.
Elizabeth B. Claus, Ph.D.’88, M.D.’94

New Haven, Connecticut

Professor of biostatistics, director of medical research, Yale School of Public Health; Attending neurosurgeon, Brigham and Women’s Hospital

An intracranial meningioma pushes against the soft tissue of the brain. Elizabeth leads a research team that is studying the environmental and genetic risk factors for meningioma, glioma and breast tumors. She is also a practicing neurosurgeon, with a focus on neuro-oncology.
Surrounded by family, Nirav (left) is sworn in by Gov. Andrew Cuomo as the 15th New York State Commissioner of Health on January 24, 2011. He heads one of the nation’s leading public health agencies, with a budget of more than $50 billion, and administers the state’s public health insurance programs, which cover five million New Yorkers. As commissioner, Nirav also oversees public health and prevention initiatives, regulation of hospitals and other health care facilities and the research program in a premier biomedical laboratory.
Sarah J. Dash, M.P.H. ’01
Silver Spring, Maryland
Senior legislative assistant (health), Office of U.S. Sen. John D. Rockefeller IV

Sarah confers with Sen. Rockefeller, D-W.Va., as they wait for the tram to take them to the U.S. Capitol. Legislative assistants serve as subject matter and strategy experts for members of Congress. Public health has been in the forefront on Capitol Hill during much of 2012, with the Affordable Care Act being an unprecedented national investment in health care.
Yvette A. Girard, M.P.H.’02, Ph.D.

Sacramento, California

Postdoctoral scholar, Wildlife Health Center, University of California, Davis

Working as a molecular epidemiologist, Yvette uses laboratory, statistical and phylogenetic tools to understand the ecology and evolution of emerging infectious diseases such as avian trichomonosis, Lyme borreliosis, toxoplasmosis and avian influenza in human and wildlife populations. Here, she prepares to take a sample from a bird.
Teaneck, New Jersey

Dentist

As a participant in Dental Volunteers for Israel, Gregory and his associates have provided dental treatment to needy children and adults and clinic management in Jerusalem and on Kibbutz Hanaton, in northern Israel near Nazareth. When not in Israel, he uses his administrative and clinical skills to manage a multispecialty group dental practice with sites in New York City, New Jersey, Connecticut and London.
Virginia Hanrahan, M.P.H. ’91, M.F.A. ’07

Bethel, Connecticut

Visual artist with concentrations in painting and fiber art

Through art, Virginia seeks to emphasize the concerns and plight of forgotten aspects of society and the environment. She mixes personal and cultural themes into paintings that address social inequality, psychological issues and spirituality. Art, she says, gives her the opportunity to continuously ask the question, “What is public health?” This work is titled We Live Among You and We Won’t Let You Forget.
Jewel M. Mullen, M.D., M.P.H., ’96

Middlefield, Connecticut

Commissioner, Connecticut Department of Public Health

Jewel (left) oversees the state’s leading public health agency, whose mission is to protect and promote the health and safety of Connecticut residents. Here, she prepares for a health-related interview on a Connecticut television news station. She oversees an agency that employs more than 800 people, has an annual budget of more than $250 million and addresses health issues as diverse as asthma and seafood safety.
Atulya K. Saxena, M.P.H. ’01, M.D.

Oxford, England

Doctor of philosophy candidate, Department of Public Health, University of Oxford

Atulya focuses on globalization and the aging population. He has worked on projects studying aging workforces, infectious and noncommunicable diseases and health promotion. His current research examines informal care, identity and the relationships between media and health. Here, in a community outside Jaisalmer, India, Atulya examines the impact of globalization on identity and its consequences for health behavior.
Thomas W. Chapman, M.P.H. ’71, Ed.D.

Bethesda, Maryland

President and CEO, HSC Foundation

Thomas (right) leads a system of care for infants to young adults with severe, multiple chronic illnesses, most of whom are physically and/or behaviorally impacted by their illnesses. His organization also operates a new National Youth Transitions Center and National Veterans Center for people who need support to achieve independence and work readiness.
Jacob Creswell, M.P.H. '00

Geneva, Switzerland
Technical officer, World Health Organization

Jacob works on the TB REACH initiative that provides funding for projects that attempt to improve tuberculosis case detection and treatment across the globe. This urban slum in Karachi, Pakistan, is the site of such work. TB, Jacob notes, is largely a disease of the poor; is transmitted easily when people live in cramped, tight quarters; and develops in people who have weakened immune systems and in those who are undernourished.
Ariane A. Kirtley, M.P.H. ’04

Bellgarde-en-Forez, France

Founder and director, Amman Imman: Water Is Life

Ariane is the founder and director of the international NGO Amman Imman: Water Is Life. Amman Imman builds clean and sustainable water sources; provides food security; and supports educational, environmental and health initiatives among some of the world’s most vulnerable populations. It is currently operating in the Azawak region of Niger, where 50 percent of children die before their fifth birthday and where most people travel over 35 miles to obtain just a few gallons of mud water to drink, cook and bathe with. Here, a woman is giving a child the first potable drink of water he has ever had from Amman Imman’s “Well of Love” borehole, built in 2010 and financed by Montessori students across the world.
New York, New York  

*Director, Non-surgical Foot and Ankle Service and the Joe DiMaggio Sports Medicine Foot and Ankle Center*

Rock consults with a patient at the Non-surgical Foot and Ankle Service. The center is dedicated to evaluating the majority of foot, ankle and musculoskeletal problems that often can be treated successfully without surgery. Located at the Hospital for Special Surgery, the service is the first of its kind in the greater New York area and is widely known for its unique approach.
Brian P. Leaderer, M.P.H. ’71, Ph.D. ’75

Guilford, Connecticut

Susan Dwight Bliss Professor of Epidemiology (Environmental Health), Deputy dean, Yale School of Public Health

Brian’s research interests focus on assessing exposures to air contaminants and the health impact resulting from those exposures in epidemiological studies conducted in at-risk populations in the United States and China. This picture was taken in Shanghai, China, during a visit to study sites.
Bedford, New York

Recording artist, singer, songwriter, Dolce Diva Music

As a singer/songwriter as well as president of her own independent record label, Joanne (who goes by the stage name “Joanna”) says that the business skills that she acquired as a health care administration major are invaluable to her as she markets, promotes and distributes her product: music.
Dana M. Faulkner, M.P.H. ’96

Chevy Chase, Maryland

CEO, Friends of the National Arboretum

Dana’s work as CEO of the Friends of the National Arboretum allows her to expand access to, and support for, a national environmental treasure—446 acres of gardens and green space in the heart of the nation’s capital. Here, a young girl learns the basics and experiences the pleasures of gardening in a plot at the arboretum.
Zinzi Nandi Segura Blell, R.N., M.P.H. ’09

Galveston, Texas

*Doctoral student, University of Texas; NASA principal investigator team member*

Zinzi’s current research focuses on vaccine development for a virus recognized by the World Health Organization as a priority pathogen with potential for malicious use as a weapon. Her work with NASA sought the use of a microgravity environment as a novel platform in a study on the prevention of diseases on Earth and in space flight.
Dakar, Senegal

Earth Institute at Columbia University/Global Health and Development

The Earth Institute seeks to improve health and reduce poverty in sub-Saharan Africa. From 2003 to 2011, Karen focused on strengthening health systems in rural Rwanda, and in 2012 she began work with the Earth Institute’s Millennium Development Goals Centre in Dakar. Here, a farmer in the Millennium Village in Mayange, Rwanda, was provided with improved, fast-maturing mango tree seedlings. Two years later, the trees are bearing large, healthy fruit. Even though the tree is still very small, the mangoes are so big that he has to prop up the branches.
At a school just outside Kabul, Afghanistan, Elisabeth provides psychodiagnostic screening to all of the resident schoolchildren. Her work at Vivo, an international nongovernmental organization, focuses on research, prevention and therapy for individuals and communities who experience violence, conflict, abuse, neglect or torture.
Irene Trowell-Harris, R.N., M.P.H. ’73, Ed.D.
Arlington, Virginia
Director, Center for Women Veterans

Irene is the primary adviser to the Secretary of Veterans Affairs on programs, policies and legislation related to women veterans. She promotes public health through policy and legislation that enhance healthy lifestyles of women veterans and their eligible family members through health care services and benefits such as GI Bill education, homeless and caregiver support, home loan guaranty, employment and vocational rehabilitation. Irene joined the service as a young woman in the 1960s (inset) and, in 1998, became the first African-American woman in the history of the National Guard to be promoted to the rank of general officer. She retired in 2001 as a major general.
Atlanta, Georgia

Director, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention

Ursula (pictured here) leads the CDC’s portfolio of programs to prevent chronic disease and promote health. She recently traveled to Pine Ridge, S.D., to address health issues among Native Americans on the Pine Ridge Reservation, home to the Oglala Sioux, and stopped at this burial site that contains 146 people killed during the 1890 Wounded Knee Massacre.
Joan Louise Kenney, M.P.H.’03, Ph.D.

Fort Collins, Colorado

Postdoctoral fellow, American Society for Microbiology/Centers for Disease Control and Prevention

Joan’s research seeks to understand the evolutionary fitness of enzootic alphaviruses within their insect vectors in order to determine the potential of these viruses to cause human disease and to illustrate the need for vaccine development. She is currently working to identify novel vaccine strategies for various arboviruses. Here, a microscopy image shows a mosquito midgut coexposed to two types of virus particles that individually express green and red fluorescent protein.
Geneva, Switzerland

*International president, Médecins Sans Frontières (Doctors Without Borders)*

Unni screens a child for malnutrition in a displaced persons camp in Mogadishu, Somalia, on August 20, 2011. MSF is an independent, international, medical humanitarian organization that delivers assistance to people affected by armed conflict, epidemics, natural disasters and exclusion from health care.
Stamford, Connecticut

*Associate veterinarian, VCA Davis Animal Hospital; Yale Human Animal Medicine Project*

As a veterinarian who practices preventive medicine and manages acute and chronic disease, Zimra (left) assesses not only the pet, but also its owner, during treatment. When developing a treatment plan, she takes into consideration whether the owner has any physical, mental, environmental or social constraints and what personal, family, hospital and community resources she can use to optimize the well-being of the pet and its human family.
Phnom Penh, Cambodia

**Director, Department of International Cooperation, Ministry of Health of Cambodia**

Vandine (above left and below) has served in the Ministry of Health of Cambodia in various capacities since its founding, after the demise of the Khmer Rouge. Her work has included providing immunizations to children in still-dangerous areas of the country, pediatric and adult medical care (including for injuries from land mines), surveillance of communicable diseases and health information system reform. In 1994, she became the first Cambodian woman to be awarded a Fulbright Scholarship to study at Yale. Cambodia, she notes, is becoming increasingly modern, as a new generation of young professionals learns the skills of medicine, management and public health.
Susan Michaels-Strasser, M.P.H. ’95, M.S.N. ’95, Ph.D.

Lusaka, Zambia

Country director, Elizabeth Glaser Pediatric AIDS Foundation in Zambia

Susan directs a variety of programs related to HIV prevention, care and treatment, with funding from the U.S. government/PEPFAR, UNICEF and the Conrad N. Hilton Foundation. She also does research on related areas, including HIV service integration and pediatric counseling. Here, she greets Kenneth Kaunda, Zambia’s first president.
São Paulo, Brazil

*Executive director and CEO, Hospital Santa Catarina*

In September, Larry became executive director and CEO of Hospital Santa Catarina, a 327-bed general acute care hospital located on one of South America’s most recognized streets, the Avenida Paulista. The hospital has 88 ICU beds, including 15 in the neonatal unit. Its emergency room averages between 500 and 600 patients each day, about a third of whom are pediatric.
Patrick R. Byam, M.P.H. ’08

New Haven, Connecticut

Research associate, Yale University

Patrick works with the Yale Global Health Leadership Institute and its partners to improve the delivery of primary health care in rural areas of Ethiopia. The country, with some 80 million people, has made notable strides despite a lack of resources and widespread poverty. Here, churchgoers take a much-needed rest while hiking up Mount Entoto in Addis Ababa.
Martha G. Dale, M.P.H. ‘80

New Haven, Connecticut

Program director, Yale Global Health Leadership Institute

Martha (left) designs and conducts leadership, health policy and business education programs for senior health care managers and public health administrators in China. She also works with visiting delegations of health care professionals from Africa who travel to Yale each year to devise solutions to specific health care issues in their home countries.
Branford, Connecticut

Distinguished Senior Fellow and co-founding president, Connecticut Voices for Children; Lecturer, Yale School of Public Health and Yale Law School

Throughout her 30-plus-year career, Shelley has worked at the intersection of law and health—as a civil rights lawyer in health-related litigation; as co-founding president of Connecticut Voices for Children, a research and advocacy organization that promotes law and policy that foster healthy child development; and, now, as a teacher of Yale students interested in a similar path.
Cambridge, Massachusetts

Statistician manager, Pfizer Worldwide Research and Development

As a statistician supporting Pfizer’s Cardiovascular and Metabolic Diseases Research Unit, Maya ensures that preclinical assays produce quality results through rigorous statistical validation and offers innovative approaches to study design. The assays target metabolic pathways for type 2 diabetes and are used to select novel compounds with potential for further evaluation.
Mario Garcia, M.D., M.Sc., M.P.H. ’02

New Haven, Connecticut

Director of Health, New Haven Health Department

Mario gives a presentation in 2012 to the New Haven Board of Aldermen about the dangers of exposure to secondhand smoke and also to promote the notion of a nonsmoking rule for all rental units within the city. Such a policy, he notes, would reduce exposure to secondhand smoke for a large segment of the city’s population. As the director of the city’s health department, Mario oversees—and advocated for—a variety of measures to protect and promote the health of some 130,000 people.
A woman receiving treatment at Nyaya Health beams with joy. Founded by Duncan and several other Yale students, the clinic seeks to improve the health of poor communities in Nepal by providing a range of medical and public health services in an area of the country that had previously offered little of either. Nyaya, which in Nepali means justice, partnered with the Ministry of Health and opened a primary care center in an isolated district in 2008.
Richard D’Aquila, M.P.H. ’79

Westbrook, Connecticut

President and COO, Yale-New Haven Hospital

As president and COO of Yale-New Haven Hospital, Richard’s main responsibility is to ensure that patients in greater New Haven and beyond have access to exceptional clinical programs, cutting-edge technology and an exemplary patient experience that is grounded in dignity and respect. Here, Richard (left) visits with a patient.
A rewarding profession

A veteran practitioner and director of the APHA sees many opportunities and challenges awaiting the next generation of public health professionals.

Georges C. Benjamin, M.D., is the executive director of the American Public Health Association (APHA), the nation’s largest and oldest organization of public health professionals. His career in medicine and health spans more than 30 years and includes managing an ambulatory care service in Washington state; serving as chief of emergency medicine at Walter Reed Army Medical Center in Washington, D.C.; and directing Maryland's Department of Health and Mental Hygiene.

Benjamin sees the early 21st century as an exciting and crucial time for people to enter the field of public health, both to meet a range of existing health challenges and to respond to emerging threats. Public health professionals are not always fully appreciated, he notes, because they often prevent diseases and disasters from occurring in the first place. This success can create unintended problems of its own, including public complacency and greater budget scrutiny.

Is this a good time to be entering the public health profession?

GB: This is an amazing time to be entering the profession of public health. Our nation spends about $2.7 trillion on health and remains in the bottom quartile of industrialized nations in terms of health outcomes. It has become clear that we need to do things differently if we are going to turn this around. Public health measures can play a central role in the effort. They are a proven method to improve health and are best done when integrated throughout the health system. Well-trained public health practitioners are the intellectual key to this effort.

Is the need for public health practitioners growing?

GB: Like most professions, public health has higher than usual losses due to retiring members of the baby boom generation. There also is an increased need for more professionals as a result of the health system’s transformation to a more population-based practice. In addition, globalization is increasing both the demand for people to address health issues in underserved countries and problems that cross national lines. Population-based approaches are the key to problem solving because disease does not recognize lines and boundaries on a map, and public health is superb at solving this kind of health problem. The growth of the e-community and social media also is working to narrow the distances between people. The next generation of public health practitioners is the key to leveraging this new technology because they have grown up using it.

Are there enough people trained in public health to meet these challenges?

GB: No, we do not have enough people today. Since 2007 we have lost over 50,000 governmental public health workers out of a field of 500,000. Many of these people have retired or moved to other areas of work. They will need to be replaced at a rapid pace.

How is the field of public health different today than it was, say, 30 years ago?

GB: Everything we do today is now done in an environment of rapid change, increased transparency and more politics. The science of what we do and the return on investment are increasingly challenged. This means we have to be more vigilant and better at communicating in order to convince people that we are right when we give them advice or order a health intervention.

Why do people go into public health? Is there a common denominator?

GB: I believe people enter this field through a variety of life and career paths that lead them to believe that improving people’s health is best done through a population-based approach. There is no right door or pathway to get here. There is also an element of the desire to achieve a measure of social justice that underlies their journey.

What are some of the newer fields available in public health made possible by scientific or technical progress?

GB: The emerging field of genomics, which on the clinical
“Any health career is truly an honorable and noteworthy profession.”
—Georges Benjamin

care side is leading to individual and more-targeted therapies, is also giving us the knowledge about how much we are alike. From a population-based perspective, our ability to rapidly understand the genetic structure of a new infectious agent gives us the skills to rapidly create safer and more-efficient vaccines. New concepts like syndromic surveillance and the epidemiologic use of large data sets will allow us to target populations for broad community-based interventions that address the social determinants that improve health without traditional medical care. Emerging science about human behavior and risk communication is also helping us to better manage disasters.

Despite some marked public health successes, there is no shortage of serious challenges. What do you see as some of the biggest threats?

GB: There are two challenges: invisibility and the role of government. When public health has done its best work, nothing happens, so the biggest challenge is the inability to prove a negative. Meaning, if you prevent something from happening, how do you take credit for the nonevent? The invisibility of good public health practice translates into complacency of the public, policymakers and resource allocators. It results in the lack of sustainable and reliable support for public health and inadequate funding. That is, until something happens; then we want to fix it, when it never should have happened in the first place. We also continue to debate the role of government in the United States and how much government we should have. Public health is done by collective action, often through policy development and assurance. Government can often be an effective catalyst for change.

What are some of the fastest-growing areas of public health?

GB: Global health, public health preparedness and chronic disease reduction and control are three major areas in public health. In addition, there is a growing undergraduate training movement that is looking to give college graduates the opportunity to learn the essentials of public health as part of their general studies and, if interested, to major or minor in public health.

Interest in global health is growing here at Yale and many other universities. What’s driving this?

GB: I think this is the result of the globalization movement in general, and this generation has grown up in an interconnected world. Solving problems across borders makes sense because our food systems are global, as are travel and the change in our climate, and of course, we have seen how easily and quickly infectious diseases like SARS and H1N1 can become international events. I also think students want to make a difference, and as they connect the dots they see that solutions done on a global basis can also solve problems locally.

HIV/AIDS has been with us for a little more than 30 years now. What is your assessment of how this public health challenge has been handled?

GB: We have matured as a people in our approach to HIV/AIDS in many ways. I remain concerned that, while our science has moved forward by leaps and bounds, we have slacked off on aggressive education and nonclinical prevention, such that we have a generation that is not as concerned as it should be.

What sets public health apart from other health-related careers?

GB: Any health career is truly an honorable and noteworthy profession. Public health is part of that profession and part of a continuum of disciplines that work to create and maintain health. I have found public health to be as exciting, rewarding and fun as my time as an emergency physician. For people who want variety, a sense of fulfillment and the ability to contribute to humanity—public health can meet those needs.

You have been in the field for more than 30 years. Did you have a defining moment?

GB: The defining moment for me was when I left my job as health officer for the state of Maryland. I had been in the department for eight years (the last four as secretary), and when I looked back there was no question that the health of the people of Maryland had improved since I first arrived.

Michael Greenwood
A Yale exhibition on public health issues is displayed in two Connecticut cities and is gaining national attention.

Fourteen students from the School of Public Health teamed up with an equal number of colleagues at the School of Art in a first-time collaboration that resulted in The Art of Public Health. Together, the students created more than 30 original health-themed posters that have been exhibited in New Haven and, more recently, at the Capitol in Hartford. The effort was directed by Catherine Yeckel, Ph.D., associate research scientist and lecturer in the Department of Environmental Health Sciences, and Julian Bittiner, M.F.A. ’08, lecturer at the School of Art.
Translation

“You came to NEW LANDS in search of a BETTER LIFE—don’t let poor nutrition ruin your plans. In the United States, cancer is the second leading cause of death among Latinos. Obesity increases the risk for cardiovascular diseases, certain cancers, diabetes, high blood pressure and even premature death. A healthy diet and physical activity can improve your health, save you money and lead you to a better life. The change is in your hands!”
The Significance of a Breast Cancer Screening
Janky Patel, M.P.H. ’12; Robert Matthews, M.F.A. ’13

Two statistics are displayed: one easy to see and read, the other visible only upon a closer look. The difference between the two figures is the difference in rates of survival between early detection through a breast cancer screening and later detection. The poster’s message is clear: early detection saves lives.

Exercise and Socialize
Stephanie Shao, M.P.H. ’12; Rachel Needle, B.A. ’14

This poster seeks to spark motivation through a unifying technological inspiration—the smartphone. By demonstrating the social aspects of physical activity through use of real imagery captured at Yale University, the poster is meant to instill a refreshing perspective on exercising to improve health. The tendency of today’s technologically enabled generation to be sedentary is an increasing public health concern. This poster is part of a series of three.

Perspectives on Obesity
Sarah Aspinwall, M.P.H. ’12; Jacqi Lee, B.A. ’14

This poster deals with the issue of obesity in America—aimed at a general audience but specifically at adults and parents, in an effort to raise awareness about childhood obesity. The design utilizes mostly typographic strategies and minimal information to convey important aspects of the issue: portion sizes, food labeling and advertising. This poster is part of a series of three.

For every $1 spent on childhood obesity prevention, the food industry spends $8,100 marketing unhealthy food to kids.

Do you know what your child is watching?
(above left) *No Dairy Required*
Danielle Correia, M.P.H. ’12; Ellen Su, B.A. ’13

The photograph portrays a splash of milk against a dark background. The stark color contrast highlights the potentially damaging effects of milk on the lactose intolerant, and offsets the portrayal of dairy as an exclusively positive and beneficial food group.

(above) *It’s Never Too Early To Start the Wheels Turning*
Anna Zonderman, M.P.H. ’12; Yinan Song, B.A. ’14

Parents and caregivers play an active role in their children’s growth and development. This image depicts a silhouette of a child with turning gears inside his/her head, showing that simple activities can promote healthy development. The poster also conveys the critical message that a child is never too young for these interactions to have a positive effect.

(left) *Self-Respect*
Abby West, M.P.H. ’12; Marina Kitchen, M.F.A. ’14

This poster presents a fresh approach to a time-worn issue, suggesting that simple actions can showcase self-respect. Small choices, like eating fresh vegetables or admitting that you need help and asking for it, keep you healthy. You make these choices when you respect your body and mind and believe they are worth protecting. This poster is part of a series of six.
Blindness Prevention
Adam VanDeusen, M.P.H. ’13; Jessica Svendsen, M.F.A. ’13
This poster depicts the critical public health issue of preventable blindness. A large proportion of blindness throughout the world is preventable, and blindness can have severe economic, social and physical consequences for those afflicted. The images on these posters are blurred, giving a sense of how a person with cataracts may see the world. This poster is part of a series of three.

Eating Your Words
Elyor Vidal, M.P.H. ’12; Jang Hyun Han, M.F.A. ’13
This poster is meant to draw the viewer in with a common, seemingly harmless vernacular phrase that refers to food. The unhealthy foods and related diseases are combined in an acrostic fashion. Reading and understanding a food nutrition label can be difficult to many. This poster is part of a series of five.

One Health
Eileen Huang, M.P.H. ’13; Jane Long, B.S. ’13
Our well-being reflects the health of our environment and any organisms with which we come in contact. As our world becomes increasingly populated, the interaction among environments, animals and humans is more intimate than ever before, as shown in this poster, where they interlock and form one piece. ‘One Health’ is an approach to public health that promotes a healthy planet through collaborative efforts among professionals from various areas of expertise.
This poster highlights the discrepancy of life expectancies at birth among different countries. According to the United Nations, life expectancy at birth from 2005 to 2010 ranged from 39.2 years to 82.6 years.

This poster attempts to conceptualize how little the United States spends on important global health issues such as HIV/AIDS. While the overall amount spent is small, the number of lives saved is in the millions. Oftentimes, politicians view global health spending as an easy area to cut during difficult fiscal times. Recent surveys have shown that the American public believes we spend a much higher percentage of the budget on foreign aid than we actually do.

Julian Bittiner, lecturer at the Yale School of Art, and Catherine Yeckel, associate research scientist and lecturer in the Department of Environmental Health Sciences at YSPH, organized The Art of Public Health.
Public health students help refugee children resettle in New Haven with an after-school program that fosters artistic expression and new friendships.

By Anna L. Zonderman

“What are we painting today?”

The question followed me as I walked down the hallway. Some 15 minutes before we were scheduled to start, there were already a dozen children crammed into the activity room for our weekly art session. More were coming.

Usually, kids participating in the art program at IRIS (Integrated Refugee and Immigrant Services) trickle in slowly over the first half-hour of our scheduled time. But today was a painting day and that draws a crowd. By the time we started, 25 children ranging in age from 4 to 14 had paint, a brush and paper, and all were eager to start.

Each year, IRIS welcomes and resettles as many as 200 refugees—people who have fled persecution and violence in their homelands—into the New Haven community. Between one-third and one-half of the newcomers are children. To meet the special needs of these youth, IRIS’s Education and Youth Services team coordinates extensive after-school and summer programming for young people of all ages. Through the Yale student organization HealthCORE, School of Public Health students (as well as those from Yale College and other graduate and professional programs) often volunteer as facilitators for these activities.

At the end of the 2010-2011 academic year, several of my classmates administered a survey to IRIS clients to better understand what after-school programs were most popular and what additional programs could be developed. Several requests for arts and crafts activities led Claire Greene, Milena Gianfrancesco and Britton Gibson (all are 2012 M.P.H. graduates) to propose an art program in the fall 2011 semester. Together with Jasmine Carver, M.P.H. ’13, we developed a curriculum that would be fun for our young participants, while also simultaneously addressing some of their needs as young refugees.

In addition to the opportunity for creative expression, the children benefit from the therapeutic nature of art. Through drawing, painting, paper cutting and other activities, they have an emotional outlet and a method of communication that are not limited by language barriers or access to resources. Although every refugee’s experience is different, children forced to leave their homes and resettle in a new country are particularly vulnerable. The IRIS art program provides a stable, fun and safe space for these young people as they adjust to a new life.

Designing and implementing the program gave me a valuable opportunity: to have a direct impact on the health and well-being of children in New Haven. This experience has also allowed me to bridge my interests in public health and community development, utilizing the skills I learned as a YSPH student in a creative and meaningful way. As both a coordinator and facilitator of the art program, I noticed encouraging changes in the participating children’s engagement with art and with one another as the program progressed. I look forward to seeing how we can expand the program, as art becomes a permanent component of IRIS’s services for resettled refugee children.

During the 2012-2013 school year, the IRIS art program (which operated with donations and supplies already available at IRIS during its pilot year) will be funded by a grant from the Mayor’s Community Arts Grants Program. Jasmine Carver and Natalie Price (both second-year M.P.H. students) will coordinate the program with assistance from Anna Zonderman.

Anna Zonderman graduated from the Yale School of Public Health in 2012 with an M.P.H.
Alumni explore the challenges of obesity and the role of government in promoting better health.

Just a few decades ago, obesity was not considered a serious public health issue in the United States. That started to change in the 1970s, and the obesity rate has accelerated in recent years, to the point where nearly 66 percent of the U.S. population is now considered either overweight or obese.

“The issue is no longer ‘Do we have a problem?’ … The question is ‘What do we do about it?’” said William H. Dietz, M.D., Ph.D., director of the Division of Nutrition, Physical Activity, and Obesity at the Centers for Disease Control and Prevention.

During his keynote speech at the 2012 Yale School of Public Health Alumni Day, Dietz identified a number of factors that have contributed to the nation’s obesity trend, among them changes in transportation, food supply, dietary habits and portion sizes and the rise of sugar, fried foods and chips as staples for many.

Obesity-related diseases now cost the nation some $150 billion annually in direct health care costs, a figure that is probably an underestimate, Dietz told dozens of alumni gathered at the New Haven Lawn Club.

Reversing the current trends will require a sustained and coordinated effort, on a par with the government’s response to the health threat posed by tobacco, he said. It will require multiple policy changes that deter people from gaining excessive weight in the first place, while also helping people who are already heavyset to slim down.

This will mean encouraging people to reduce the number of calories they consume, decrease television time, switch from sugared to nonsugared cereals and engage in a healthy amount of daily exercise. Dietz cited first lady Michelle Obama’s “Let’s Move!” campaign, which promotes physical activity among children, as a step in the right direction. “Physical activity is essential,” he said.

YSPH Professor Jeannette R. Ickovics, Ph.D., who served as moderator of the panel discussion and is director of CARE: Community Alliance for Research and Engagement, told alumni about ongoing efforts to address the problems of obesity and poor nutrition in some of New Haven’s most underserved neighborhoods. CARE’s efforts include promoting healthier lifestyles among public school students, making nutritious food more available through the Healthy Corner Store Initiative and mounting an exhibition at the Peabody Museum of Natural History that outlines the scope of America’s obesity problem and its associated health threats.

Panelist Marlene B. Schwartz, Ph.D., deputy director of Yale’s Rudd Center for Food Policy & Obesity, noted that some of the unhealthiest food products are also the ones most heavily marketed, especially to children. When cereal manufacturers have been asked why they do this, they maintain that they cannot sell healthier options.

Gretchen Van Wye, Ph.D. ’04, deputy director of the Bureau of Chronic Disease Prevention and Control at the New York City Department of Health and Mental Hygiene,
“The issue is no longer ‘Do we have a problem?’ … The question is ‘What do we do about it?’”

–William Dietz

outlined some of the provocative public service ads that her agency has produced as part of an effort to fight obesity.

“The evidence is on our side,” said panelist Van Wye.

Linda C. Degutis, M.S.N. ’82, Dr.P.H. ’94, received the 2012 Distinguished Alumni Award. She left her position at YSPH in 2010 to become director of the National Center for Injury Prevention and Control at the Centers for Disease Control and Prevention. She is also past president of the American Public Health Association.

Degutis said her first experience with public health was working in an emergency room as a young woman and that it has been an exciting journey ever since.

“I plan to keep exploring, keep taking risks, keep pushing the envelope,” Degutis said.

The day ended with a tour of the Big Food exhibition, led by Ickovics, who is also the exhibition’s lead curator.

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Michael Greenwood
Alumni News

1960s

The American Public Health Association has selected **Raul R. Cuadrado**, M.P.H. ’63, Dr.P.H., to serve a one-year term as an honorary vice president. Raul’s biomedical and behavioral research interests have included improving and developing economical, rapid, sensitive and specific diagnostic tests and devices while at the Centers for Disease Control and Prevention, the Yale Arbovirus Research Unit and the University of Michigan. At present, he consults for universities, corporations and governments of foreign countries in higher education.

**Steven Jonas**, M.D., M.P.H. ’67, has written a book, *Duathlon Training and Racing for Ordinary Mortals*, which was released by Globe Pequot Press in March. Steven is a professor of preventive medicine in the Graduate Program in Public Health at the School of Medicine, Stony Brook University. His books, both academic and trade, have been published since the mid-1970s. Since the mid-1980s a major focus of his work has been sports, the promotion of regular exercise, weight management and how to mobilize one’s motivation for making changes in personal health-related behaviors.

1970s


The Girl Scouts of South Carolina honored five Columbia-area women at its 19th Annual Women of Distinction Awards Dinner in March, including **Patricia Moore-Pastides**, M.P.H. ’79. The honor recognizes women for their service, leadership, community, visibility and professionalism. Patricia is the first lady of the University of South Carolina and an accomplished cook, writer and public health professional. With the publication of her first book in 2010, *Greek Revival: Cooking for Life*, she embarked on a campaign to introduce Americans to the health benefits of the traditional Mediterranean diet and lifestyle.

1980s

**Peter Tortora**, M.D., M.P.H. ’87, has been elected president of Bridgeport Hospital’s 600-member medical staff. A member of the hospital’s active medical staff for more than 20 years, Peter graduated from Fairfield University with a degree in biology and received his medical degree from Ross University School of Medicine.

**Allison Kalloo**, M.P.H. ’94, founder and CEO of Clinical Ambassador, was included in the 2012 “100 of the Most Inspiring People” issue of *PharmaVOICE*. Clinical Ambassador seeks to reduce health disparities by promoting minority inclusion in clinical trials. It works with clinical research organizations and pharmaceutical industries to close gaps, comply with mandates and strengthen science.

**David L. Katz**, M.D., M.P.H. ’93, has been named to the scientific advisory board of GenoVive, a company that is developing DNA-based, natural weight loss solutions. David is founder and director of the Integrative Medicine Center at Griffin Hospital in Derby, Conn., and founder and president of the nonprofit Turn the Tide Foundation.
Eric Becker, M.P.H. ’06, has released a new film, *Honor the Treaties*, a 14-minute documentary about photojournalist Aaron Huey’s experiences on the Pine Ridge Reservation in South Dakota. It is available for viewing at weareshouting.com. Eric was featured in the Spring 2012 issue of *Yale Public Health* for his work on the documentary *Sound and Vision*.

Brandis Belt, M.D., M.P.H. ’07, was named a Lambaréné Public Health Fellow by the Albert Schweitzer Fellowship. Brandis will work for three months with the Albert Schweitzer Hospital in Lambaréné, Gabon, in West Central Africa’s Community Health Outreach Program, providing village-based health care (including maternal/child health, HIV/AIDS education and prevention, tuberculosis education and malaria prevention and treatment). She is doing an internal medicine and pediatrics combined residency at Indiana University.

Samantha Lakmali Illangasekare, M.P.H. ’05, Ph.D., and Gideon Karl Bragin were married in May at the Brooklyn Botanic Garden. Bertie P. Fernando, a friend of the bride’s family, led a part of the ceremony, which included Sri Lankan and Jewish wedding traditions. Samantha is a postdoctoral research fellow studying urban women’s health issues at the Johns Hopkins Urban Health Institute in Baltimore.

Keshia M. Pollack, M.P.H., ’02, Ph.D., has been named the recipient of the 2012 Mid-Career Outstanding Service Award from the Injury Control and Emergency Health Services Section of the American Public Health Association. The award recognizes public health professionals who have dedicated up to 10 years of service to the field of injury prevention and who have made exceptional contributions in research, policy development, practice and advocacy. Keshia is an associate professor at the Johns Hopkins Center for Injury Research and Policy at the Johns Hopkins Bloomberg School of Public Health.

Atulya K. Saxena, M.P.H. ’01, received the Hind Rattan Award (“Jewel of India”) in recognition of outstanding services, achievements and contributions at the 31st International Congress of Non-Resident Indians on the eve of Indian Republic Day, January 25, in New Delhi.

Have an update?

Your classmates want to hear about you! Help us share your news of a new job, promotion, recognition, marriage, birth of a child, etc. Send items (and photos) to ysph.alumni@yale.edu.
The School of Public Health offers a variety of services, information and opportunities for our alumni.

**Enjoy alumni services**

- Lifelong e-mail
- YSPH Career Services and Yale Career Network
- Distance learning
- Podcasts
- AYA benefits, such as access to JSTOR, a digital archive with more than 1,000 academic journals, alumni rates for Payne Whitney Gymnasium and borrowing privileges from Yale libraries

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- Interview prospective students
- Make a gift
- Participate in a speaker series
- Attend events and reunions
- Purchase YSPH merchandise

For additional information on these and other opportunities, visit publichealth.yale.edu/alumni/services/index.aspx
Dean Paul D. Cleary noted that the graduates could have chosen more lucrative career paths than public health, but that few vocations offer a greater chance to help people and contribute to the public good.
"The path you are starting down is a noble one.
— Nancy Brinker

Graduates urged to have vision, remain committed, innovate

Komen founder inspired by the talent gathered at the 2012 Commencement.

When Nancy Brinker’s sister was diagnosed with breast cancer in the late 1970s, Nancy promised her that she would do everything to battle a disease that was then largely untalked about and carried an element of stigma and for which there was little, if any, in the way of resources or support. They were “dark times.”

Her sibling died from breast cancer in 1982. Today, a full 30 years later, Brinker remains committed to the pledge she made to Susan G. Komen, for whom she created Susan G. Komen for the Cure.

Breast cancer turned out to be a much tougher adversary than she originally imagined, Brinker told the Yale School of Public Health Class of 2012 during her Commencement address inside Battell Chapel. The disease remains a scourge, claiming the lives of tens of thousands of women each year in the United States alone.

But there has been impressive and encouraging progress: more and more women are surviving breast cancer; screening for the disease is increasingly routine; there are support groups for women with the disease and for survivors; and large amounts of money – Brinker’s foundation alone has raised almost $2 billion – are being spent on research, education, screening and treatment.

A former U.S. ambassador to Hungary, Brinker said that the work to end breast cancer is a long-term goal, one to which she will likely have to dedicate the rest of her life.

Brinker told the 121 graduates that they are the ones who will continue the fight against breast cancer and a host of other diseases and public health threats and challenges. She expressed confidence in their ability to do so.

“I am inspired by the collection of talent gathered here today,” Brinker said to the graduates and hundreds of their friends and family, who came from as far away as Australia and China to witness a new generation of public health professionals go forth.

“We need people like you. The path you are starting down is a noble one. Thank you. Thank you.”

Dean Paul D. Cleary noted that the graduates could have chosen more lucrative career paths than public health, but that few vocations offer a greater chance to help people and to contribute to the public good.

Robert Dubrow, who was selected by the Class of 2012 as Teacher of the Year, told the graduates that health challenges abound, including issues related to obesity, disease prevention and health disparities, and that his generation of health practitioners has left much undone in terms of creating a healthier future.

“My generation has faltered. Yours will do better,” Dubrow, M.D., Ph.D., associate professor in the Department of Chronic Disease Epidemiology, said to a standing ovation from graduates.

His colleague, Andrew T. DeWan, has been on the YSPH faculty for only three years, but he has quickly made an impression as someone who sets high standards and inspires the students with whom he works. He received YSPH’s 2012 Distinguished Student Mentoring Award.
DeWan, M.P.H., Ph.D., assistant professor in the Department of Chronic Disease Epidemiology, said he had benefited professionally from excellent mentorship during his days as a student and understands the difference that guidance can make in a student’s academic career. And, he said, addressing his students, the benefit has been mutual. “I am lucky to have worked with you.”

Before diplomas were awarded, Cleary presented several graduates with awards for outstanding accomplishments during their studies at YSPH. Daniel I. Jacobs and Shawn Terryah each received the Dean’s Prize for Outstanding M.P.H. Thesis; Sara Nguyen was recognized with the Wilbur G. Downs, M.D., M.P.H., Outstanding Thesis Prize in International Health; Yao Fu received the Brandon James Brei Memorial Award; Luisa Tsang received the Henry J. (Sam) Chauncey Jr. Inspiration Award; and Rhobhi Matinyi received the Lowell Levin Award for Excellence in Global Health.

Matinyi, who delivered the student address, noted that after two years of studying public health, the graduates would soon be called upon to apply the skills that they have learned and to help people in need.

To succeed, they will at times have to defy the status quo, upset conventional boundaries and figure out how to turn challenges into opportunities. And the challenges are many—AIDS, millions worldwide lack access to safe drinking water and climate change is still being debated.

“Yale has given us the tools,” Matinyi said. “But these are only valuable if we use them to articulate and implement viable solutions that positively impact the lives of those we serve.”

Michael Greenwood

“Amy generation has faltered. Yours will do better.”

—Robert Dubrow

Graduate Jonathan Curtis has two reasons to celebrate: a diploma from the Yale School of Public Health and a newborn daughter.

A young guest stays dry with Yale-issued rain gear.
Health as a measure of national success

When measuring success, the Himalayan nation of Bhutan doesn’t look to its gross domestic product or to the number of luxury goods its citizens own.

Instead, the country measures through its yardstick of GNH: Gross National Happiness.

The index has become part of Bhutanese life, and health is recognized as an important component. Toward this, the small country (landlocked between China and India) is actively looking for ways to further improve the well-being of its people, including the creation of a partnership with the Yale School of Public Health, said Nima Wangchuk, a visiting scholar at Yale from the Royal Institute of Health Sciences of the Royal University of Bhutan.

During a lecture earlier this year, Wangchuk said Bhutan could benefit from Yale’s public health expertise, and he spoke of establishing formal exchange programs between his country and the school and joint public health research projects. He also noted that Bhutan would be a good place for M.P.H. students to do their summer internships (on topics ranging from the connection between health and religion to HIV/AIDS) and also for Ph.D. students to conduct research.

“We welcome each and every one of you,” he said. “We will be there to help you in every way possible.”

Wangchuk outlined impressive strides in health care that Bhutan has achieved in a relatively short time.

The vast majority of the population receives immunizations, leprosy has almost been eliminated and polio has been eradicated, the last case being reported in 1986. The average life expectancy, meanwhile, has climbed from 49 years in 1984 to more than 66 years today.

These successes have been possible, in part, because the country has made the health of its citizens a national priority. There are stringent tobacco control measures in place (even for foreign visitors); free access to basic health services is enshrined in the nation’s constitution; and there is even a national number (similar to 911 in the United States) that people can call for information about and help with their health. For people who are seriously ill, the government funds free medical treatment abroad (usually in India).

Still, the country faces a number of serious challenges. Alcohol abuse is a problem and there is a shortage of health care workers, particularly in the country’s remote and rugged interior. Bhutan is also grappling with a few hundred cases of AIDS, and poverty in the largely rural nation is also pervasive.

The public health infrastructure in Bhutan is still being built and much remains to be done. Wangchuk said that Yale’s input could be invaluable in this process. “You are very good at public health.”

Michael Greenwood

—Nima Wangchuk
Teacher, mentor of the year named at YSPH

Robert Dubrow’s passion for public health, his carefully prepared class lectures and his availability to students did not go unnoticed by the Class of 2012. They selected him as YSPH’s Teacher of the Year.

“Dr. Dubrow’s commitment to teaching and passion for the subject are evident in each lecture he gives, as he gently guided each of us and carefully considered the input of each student,” one student wrote in support of Dubrow’s nomination.

The honor is not a first for Dubrow, M.D., Ph.D., associate professor in the Department of Chronic Disease Epidemiology; he was also selected as the school’s Teacher of the Year in 2002 and 2007.

Dubrow said that the courses he teaches, “Principles of Epidemiology I” and “Principles of Epidemiology II,” give him an opportunity to have a positive impact on a large number of students, who eventually use what they’ve learned to work in various ways to improve people’s health.

“Furthermore,” he said, “the impact is reciprocal. Each time I teach, I learn a tremendous amount from the students.”

Dubrow’s research on cancer epidemiology focuses on glioma (the main form of brain cancer), as well as on HIV-related malignancies.

His colleague at the School of Public Health, Andrew T. DeWan, M.P.H., Ph.D., assistant professor in the Department of Chronic Disease Epidemiology, received the 2012 Distinguished Student Mentoring Award, an honor that was established in 2009 to recognize faculty mentors.

“I owe much of my positive and successful experience at YSPH to his guidance, feedback and encouragement.”

—YSPH student, referring to Andrew DeWan

The award affirms the recipient as a leader in shaping the next generation of public health professionals, serving as a role model for students while encouraging them to grow and achieve their full potential. DeWan was nominated by graduating students and selected by a student/faculty subcommittee of the Education Committee.

“I work with exceptional, thoughtful students and advisees, and I have them to thank for this great honor,” said DeWan. “I will continue to do all I can to help students have a positive and fulfilling experience at the School of Public Health.”

DeWan studies how variations in the human genome contribute to complex human diseases. He has worked on a variety of diseases, including childhood asthma, pre-eclampsia and age-related macular degeneration.

One student noted that DeWan’s mentorship is of “superior” quality. “I owe much of my positive and successful experience at YSPH to his guidance, feedback and encouragement,” the student said.

Dean Paul D. Cleary praised both Dubrow and DeWan as exceptional researchers and educators. “Their contributions are many and varied and help to make the School of Public Health so vibrant.”

M.G.
The art of poster hanging. Properly hanging more than 30 health-themed posters is exacting and time-consuming work. Catherine Yeckel of the School of Public Health and Julian Bittiner of the School of Art worked together for hours in July to arrange The Art of Public Health posters in the concourse at the state Capitol for an upcoming exhibition.

Going on a tick hunt. Assistant Professor Maria Diuk-Wasser (second from right) and three research assistants, Kayleigh O’Keeffe (second from left), Tanner Steeves (left) and Alyssa Woronik, prepare to collect ticks at several sites in Mansfield, Conn., in July as part of an ongoing study of the range of babesiosis (a tick-borne disease) and how it is changing. Ticks are collected daily at multiple sites throughout eastern Connecticut and parts of Rhode Island during warmer months by using heavy cloths that are dragged along the ground.
Smartphones as a health research tool

To understand these complex relationships, researchers at the School of Public Health are turning to modern technology—in the form of smartphones—to monitor the flow of information among dozens of people and the way in which this influences health outcomes such as substance abuse and sexually transmitted diseases.

The study will focus on existing social networks in three New Haven neighborhoods—consisting of a total of 120 men between the ages of 18 and 25—and follow their cell phone activity over a period of several months.

Participants will agree to allow their cell phones to be tracked by the research team led by Trace Kershaw, Ph.D., associate professor in the Department of Chronic Disease Epidemiology. Each participant’s physical location will be tracked by global positioning, and a computer program that interfaces with the phones will register all incoming and outgoing calls as well as text messages. All of the data that are collected will be strictly confidential and protected.

“Cell phones have made it easier to maintain and develop network ties. Network members can be reached at any time and location, and this fosters interactions among network members,” Kershaw said of the study, which is expected to start this fall and run for about two years. “The nature of how this communication flows and how it relates to network characteristics and risk within networks will allow us to develop peer interventions by suggesting the most effective modes, frequency and patterns of information delivery.”

Trace Kershaw

Each of the three social networks will start with a single individual, and then his friends will be recruited and then their friends, until a group has 40 active members. Participants will also provide detailed information at the start of the study on their level of sexually risky behavior and drug use.

Kershaw said that cell phones and mobile technology have not been used to their full potential as public health research tools, and he believes that this is one of the first studies that will use phones to track personal communications and locations. The study should help to determine the usefulness of cell phones in understanding social networks, which could have broad implications for future public health research.

Michael Greenwood

The study will focus on existing social networks in three New Haven neighborhoods—consisting of a total of 120 men between the ages of 18 and 25.

Social networks are often multifaceted, evolving and, research suggests, closely tied to personal health.

But the complex interactions that occur within social groups and how these ultimately influence one’s health have not been thoroughly studied.
William “Casey” King (right) engages students in a discussion about the public health consequences of social inequity. King, executive director of the Yale Center for Analytical Sciences, directs the Young Scholars Program, now in its third year.

Admire Chirowodza of Cape Town, South Africa, participated in this year’s Young Scholars Program as a YCAS Global Fellow.

A scientific summer

It is no secret that American high school students are falling behind their peers from other nations in scientific achievement and mastery. One survey showed that they ranked 29th out of 56 countries.

The Yale School of Public Health has responded to this challenge with the creation of the Yale Center for Analytical Sciences (YCAS) Young Scholars Program. Every day for two weeks this summer, eight teenagers participated in an intensive introduction to biostatistics with Yale clinical faculty. After the morning’s lecture, they learned the statistical modeling program R in the computer lab. At lunch, they “toured” different aspects of public health with doctoral students and Yale research scientists.

Speakers included Albert I. Ko, M.D., chair of the Department of Epidemiology of Microbial Diseases, who discussed the diseases of the urban poor in Brazil; Roy S. Herbst, Ph.D., M.D., chief oncologist at the Yale Cancer Center; and Beth A. Jones, M.P.H. ’86, Ph.D. ’93, YSPH research scientist and lecturer, who discussed social inequity in breast cancer screening.

“What I like about this program,” said Noelle Shipley, a mathematics educator at Wilbur Cross High School in New Haven and a member of the YCAS High School Science Advisory Committee, “is that it can open the students’ eyes to new areas and new opportunities they may have never imagined before.”

A panel of high school science teachers in conjunction with educators and statistical scientists from YCAS designed the Young Scholars Program. Now in its third year, the program has doubled in size and expanded to include students statewide.

Honored at Yale. Ethiopia’s Minister of Health, Tedros Adhanom Ghebreyesus (center), received the Stanley T. Woodward Lectureship award, given to distinguished international visitors to Yale University. Tedros was one of 23 senior health practitioners and researchers from South Africa, Liberia, Ethiopia and Ghana who attended Yale’s fourth annual Global Health Leadership Institute (GHLI) conference in early June. With him are Elizabeth Bradley, YSPH professor and GHLI’s director, and Yale President Richard Levin.
Awards and honors

The Neighborhood Health Project (NHP), a student-run free clinic, was awarded the Seton Graduate/Professional Ivy Award, one of Yale’s highest honors for public service in New Haven. YSPH students Sarah B. Aspinwall, M.P.H. ’12, and Danielle Correia, M.P.H. ’12, were two of the co-coordinators of the project. Students working in the clinic represent the schools of public health, medicine and nursing and the physician associate program. NHP offers screening for hypertension and diabetes, with the aim of providing education and improving access to health care for low-income patients in New Haven.

Stephanie M. Davis, M.D., M.P.H. ’12, was promoted to the rank of lieutenant colonel in a ceremony at the Yale School of Public Health in March. Davis, an officer in the U.S. Air Force, graduated from the Advanced Professional M.P.H. program in May.

Jason M. Fletcher, Ph.D., associate professor in the Department of Health Policy and Management, has been named a William T. Grant Scholar. The Scholars Program supports the professional development of promising, early-career researchers in the social, behavioral and health sciences.

Alison P. Galvani, Ph.D., associate professor in the Department of Epidemiology of Microbial Diseases, has been named a faculty winner in the 2012 Blavatnik Awards for Young Scientists competition by the New York Academy of Sciences and the Blavatnik Family Foundation.

Kate Hacker, a Ph.D. student in the Department of Epidemiology of Microbial Diseases, has been awarded a Fulbright Fellowship to develop ecological proxies for the risk of leptospirosis infection in slums in Salvador, Brazil.

Jeannette R. Ickovics, Ph.D., professor in the Division of Social and Behavioral Sciences, was awarded an honorary degree by Muhlenberg College at the school’s 164th Commencement on May 20 in Allentown, Penn.

Kaveh Khoshnood, M.P.H. ’89, Ph.D. ’95, associate professor in the Department of Epidemiology of Microbial Diseases, was awarded funds from the Yale MacMillan Center’s Kempf Fund to organize a workshop titled “Conflict, Resilience and Health Initiative” during the 2012-2013 academic year.

Vanessa Lamers, a joint-degree student in public health and environmental sciences, won a 2012 Yale Center for Environmental Law & Policy research prize fellowship.

Robert W. Makuch, Ph.D. ’77, professor in the Department of Biostatistics, was invited to serve on the University of Connecticut Advisory Board for the Dean of the College of Liberal Arts and Sciences.

Susan T. Mayne, Ph.D., C.-E.A. Winslow Professor of Epidemiology and chair of the Department of Chronic Disease Epidemiology, has been appointed to the editorial committee of Annual Review of Nutrition.

Rafael Pérez-Escamilla, Ph.D., professor in the Department of Chronic Disease Epidemiology and director of the Office of Community Health at the Yale School of Public Health, has been appointed to the Institute of Medicine’s Food and Nutrition Board.

Melinda M. Pettigrew, Ph.D. ’99, associate dean for Academic Affairs and associate professor in the Department of Epidemiology of Microbial Diseases, has been named a Fellow of the Hedwig van Ameringen Executive Leadership in Academic Medicine Program for Women at Drexel University College of Medicine.

Nancy H. Ruddle, Ph.D. ’68, professor emeritus and senior research scientist in the Department of Epidemiology of Microbial Diseases, was elected to serve as a council delegate from the Section on Medical Sciences for the American Association for the Advancement of Science.

A familiar face on a northbound train. A poster of Dean Paul Cleary hangs in a Metro-North train, part of a Yale campaign to encourage public participation in health-related research. The campaign also includes several other Yale academic leaders.
YSPH Notes

YSPH around the world

New Haven A new health survey of city residents starts in September to combat growing rates of chronic disease. The effort is led locally by CARE: Community Alliance for Research and Engagement.

Tanzania A recent YSPH graduate publishes a paper on the relationship between religiosity, spirituality and mental health among 135 rural, low-income HIV-positive adults in Iringa.

China Birth cohort studies are conducted to elucidate the underlying mechanisms of the fetal origins hypothesis of non-communicable diseases.

People from California and throughout the United States participate in a webinar on the dangers of indoor tanning offered by the CT-R1 Public Health Training Center at YSPH.

Delegates from four African nations (South Africa, Liberia, Ghana and Ethiopia) attend the weeklong Global Health Leadership Institute conference at Yale, where they address specific health care issues in their countries.

Fiji A YSPH student works with the World Health Organization for her summer internship in Suva.
Olurotimi Ishola Bajulaiye, M.D., M.P.H. ’84, died on December 20 at the age of 56. Olurotimi was born in Nigeria and attended the College of Medicine, University of Lagos, where he was a member of the Zee Club and completed his medical degree. From there, he received his master’s degree in public health from Yale and completed his psychiatry residency at Columbia University’s program at Harlem Hospital, followed by fellowship training in neuropsychiatry at the University of Pittsburgh. He had a distinguished career in psychiatry and public health in Westchester County and the New York metropolitan area. In his leisure time, Olurotimi enjoyed golf, track and singing hymnals.

Barbara Yetka Eisenberg, M.P.H. ’68, died on October 14, 2011, at the age of 68. Barbara was predeceased by her husband, M. Michael Eisenberg, M.D.

Grace Erickson, M.P.H. ’85, M.S.N. ’85, died on June 18, 2011, at the age of 78. Grace was educated at Columbia University, Yale and the College of William and Mary, where she earned her doctorate in education. She was a professor of nursing at Virginia Commonwealth University and the University of South Florida. Grace was interested in community public health, teaching and church activities.

Normand E. Girard, M.P.H. ’38, of Winchester, Mass., died on May 20 at the age of 79. An Air Force veteran, Normand spent the majority of his professional career as the president of Somerville Hospital (1966 to 1991). In that capacity, he was elected to fellowships in the Royal Society of Health and the American College of Hospital Administrators. He was president of the Hospital Superintendents Club in 1979, a state delegate of the American Hospital Association (1986 to 1988) and chair of the board of the Massachusetts Hospital Association. His leisure activities included racing sailboats and building model ships. He was married to Nancysue (Carroll) Girard for 54 years.

Naomi (Barer) Golden, M.P.H. ’45, died on February 2 at the age of 92. Born in New Haven, Naomi graduated from New Haven State Teachers College, taught elementary school for several years and then earned her M.P.H. from Yale. She later worked as a health planner for the state of Connecticut. After raising their six children, Naomi and her husband retired to Cape Cod in 1985. There she enjoyed painting, music, book discussion groups and the natural beauty of the Cape.

Thomas A. Harrington, M.P.H. ’56, died at Community Hospice House in Merrimack, N.H., on April 14 at the age of 87. Thomas was born in Miami, graduated from Boston Latin High School and earned degrees from both the University of Maine and Yale. He served in the U.S. Army during the Korean War. He was originally stationed in Japan and was given the assignment of writing Gen. Douglas MacArthur’s memoirs. However, he was reassigned to the position of hospital administrator at the military hospital in Tokyo. Thomas went on to serve as hospital administrator of several New England hospitals.

Brother Philip Kennedy, M.P.H. ’75, died in Signal Mountain, Tenn., on May 2 at the age of 83. He joined the Congregation of Alexian Brothers in June 1946, beginning a career that included service in the Alexian Brothers ministries in Elizabeth, N.J.; St. Louis, Mo.; and Chicago and Elk Grove Village, Ill. In 1975, he earned an M.P.H. in hospital administration from Yale, after which he went on to a career as a hospital administrator. In 1983, he began his ministry as CEO and president of the Alexian Brothers Medical Center in Elk Grove Village. He was elected to several terms on the Alexian Brothers Provincial Council and was active in the Chicago and State of Illinois hospital leadership.

Barbara Elizabeth Kilduff Mango, M.P.H. ’41, died on December 27 at the age of 94 after a long battle with Pick’s disease. Barbara earned a B.S. in 1939 from Duke University and then obtained her M.P.H. from Yale. In the 1940s she worked as a public health specialist for the State Department of Health in Hartford, Conn. Following her marriage in 1949, she and Lt. Col. Mango were stationed at U.S. Air Force bases throughout the United States, as well as in Okinawa, Taiwan and the Philippines. They retired to Savannah, Ga., where they lived for more than 30 years. Barbara was an avid golfer, swimmer and reader and excelled in all types of card and word games (routinely beating all of her opponents).

Send obituary notices to ysph.alumni@yale.edu
An early laboratory protects the public’s health

Prior to Anna M.R. Lauder’s endowment that established the Department of Public Health at Yale in 1915, the Yale School of Medicine offered classes in the then-emerging fields of sanitary science and bacteriology.

Awareness of the role of microorganisms in the transmission of infectious diseases was growing, and these classes signaled a shift from disease treatment to prevention and health promotion within the community. In this photograph, believed to have been taken prior to 1909, members of the laboratory housed at 150 York Street in New Haven researched water pollution and typhoid fever, noted *Medicine at Yale: The First 200 Years*. The lab also tested water for the New Haven Board of Health and later examined milk supplies for the city as well.

When C.-E.A. Winslow was hired to chair Yale’s Department of Public Health, he expanded on this foundation with the twin goals of training medical students in preventive medicine and training public health professionals. The department’s scope grew to include public health administrative practice, industrial hygiene, bacterial physiology, sanitary bacteriology, health education, housing, medical care and vital statistics.

*Denise Meyer*
A gathering of public health talent

It is notable when even a few directors of public health from Connecticut gather. To have eight is something unusual, special enough to attract a photographer’s attention.

Seven YSPH alumni and one faculty member who are current or former health directors in Connecticut, including a past and current Commissioner of Health at the state level, all attended the school’s annual Alumni Day on July 1. The group photo also included the event’s keynote speaker.

The directors are (back row, left to right) William Quinn, M.P.H. ’75, interim director of public health, Waterbury Department of Public Health; Andrea Boissevain, M.P.H. ’86, director of health, Stratford Health Department; Elaine O’Keefe, former director of health, Stratford Health Department, and current executive director, Center for Interdisciplinary Research on AIDS at Yale; keynote speaker William Dietz; and Eric Triffn, M.P.H. ’86, former director of public health, West Haven Public Health Department.

In the front row (left to right) are Mario Garcia, M.P.H. ’02, director of health, New Haven Health Department; Susan Addiss, M.P.H. ’69, former commissioner of health for the State of Connecticut; Jewel Mullen, M.D. M.P.H. ’96, Connecticut’s current commissioner of public health; and Patricia Checko, M.P.H. ’81, former director of the Bristol-Burlington Health District.

_Nicolas Esguerra_
STAY INVOLVED AND CONNECTED

The School of Public Health offers a variety of services, information and opportunities for our alumni.

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Lifelong e-mail: A permanent Yale e-mail alias is available for free to all alumni.

Career assistance: Resources to assist with networking and job searches throughout your career.

Distance learning: The University offers free online educational opportunities through Open Yale Courses.

Podcasts: Hundreds of lectures, events and scholarly presentations are available on iTunesU.

Association of Yale Alumni benefits: These include access to JSTOR, a digital archive with more than 1,000 academic journals, library borrowing privileges and alumni rates at Payne Whitney Gymnasium.

For additional information on these and other opportunities, visit publichealth.yale.edu/alumni/services/index.aspx