

# OHIO STATE PUBLIC HEALTH

AUTUMN / WINTER 2018

THE MAGAZINE OF  
THE OHIO STATE UNIVERSITY  
COLLEGE OF PUBLIC HEALTH



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Sr. Associate Dean Michael Bisesi co-leads Ohio State's Global One Health initiative, taking Buckeye expertise to the far corners of the globe.



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#### OHIO STATE PUBLIC HEALTH MAGAZINE

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THE OHIO STATE UNIVERSITY  
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## DEAN'S MESSAGE



With the holiday season upon us, I cannot help but be reminded of the importance of gratitude and hope in our work.

The state of public health remains complex worldwide, and the challenges we face in our nation and in our state are daunting. But I only have to look inside the pages of this issue to regain that hope and gratitude.

The College of Public Health began in the Department of Medicine in 1914 and has grown tremendously over the years. We became an independent college in 2007 in large part because of the leadership of women and men like Drs. Marty and Geri Keller – a visionary couple determined to make our world a kinder and healthier place to live – whom you will read about in this issue.

Today I am grateful for those visionaries in our college who, like the Kellers, are making a real difference. They are leading the way in addiction and mental health, maternal and infant health, chronic disease, and the social determinants of health. Our senior associate dean, Dr. Michael Bisesi, demonstrates a steadfast commitment to global health, while the commitment of Dr. Shawnita Sealy-Jefferson in the Division of Epidemiology to making social justice a critical component of public health advances our mission. They give us hope.

I am also grateful and hopeful because of our students. Nicholas Anstine's commitment to addressing the opioid epidemic in our state by leading Ohio's first recovery high school will impact generations, and Elli Schwartz's commitment to challenging herself to thrive, and not just survive, represent the best of the best. Our undergraduate and graduate public health students are well positioned at the college to make a difference. They give us hope.

I am grateful to all of our staff, faculty and students, who demonstrated this year their strong commitment to paying it forward and giving back. They are engaged with our communities by volunteering to bring healthier foods to underserved neighborhoods and supporting people living with opioid-related substance use disorder, just to name a few examples. They give us hope.

As you read through the pages of this issue, from the monumental research published by our faculty to the achievements of our alumni, I hope that you, too, will be grateful and hopeful for the impact of public health on the world.

Gratefully,

William J. Martin II, MD  
Dean, College of Public Health



# MHA Students Compete In and Host Programs Nationwide

Students in the College of Public Health's Master of Health Administration program competed in and hosted the sixth annual First-year Student Case Competition at Ohio State in the spring. Eighteen teams from 12 programs across the country travelled to Columbus to develop and propose strategies to implement the Medicare Access and Chip Reauthorization Act in a realistic health system.

In October, a team of MHA students traveled to Orlando and placed first in the Everett V. Fox Student Case Competition, hosted by the National Association of Health Services Executives. The annual competition is designed for minority leaders in health care. The Ohio State team was one of over 25 student teams that were challenged to apply their knowledge, creativity and experiences to tackling the case study.

Later that month, another team of MHA students from the college took second place in the Robbins Case Competition in Healthcare Management, hosted by Baylor University in Waco, TX. One of the students, Rachel Roeth, was honored with the "Best Presenter" award. Eleven teams competed on a case focusing on the design of a hub-and-spoke model for oncology services.

*PHOTO: MHA students celebrate their first-place win in the Everett V. Fox Student Case Competition at Walt Disney World in Orlando.*

## MHA Cup celebrates 10 years of student support

Alumni, students, faculty and friends of the College of Public Health's Master of Health Administration program participated in the tenth annual MHA Cup Luncheon and Scholarship Golf Outing in August in Columbus, raising over \$3,000 to support MHA students.

# MHA CUP

**"The way you guys are able to come back together, that's what Buckeye Nation is all about," guest speaker William White, former Ohio State and NFL football player, said at the luncheon. "It's always about paying it forward."**

The golf outing and luncheon was founded by MHA students in 2008 with the purpose of raising money for professional development opportunities. Ten years later the event is organized by some of those same students—now alumni—with support from the Health Services Management and Policy Alumni Society, participants and corporate sponsors.

*PHOTO: A student, alumnus and former faculty member hitting the links at the tenth annual MHA Cup Luncheon and Scholarship Golf Outing in August in Columbus.*



# HOMEcoming TAILGATE BRINGS TOGETHER PUBLIC HEALTH BUCKEYES

More than 100 alumni, students, faculty, staff, family, pets and friends of the College of Public Health came together outside Cunz Hall on a sunny Saturday in October for the Homecoming Tailgate.

The college, College of Public Health Alumni Society and Health Services Management and Policy Alumni Society treated guests to delicious food and drinks, games, raffles and plenty of Buckeye spirit. The Buckeyes then treated everyone to a victory over Indiana. Go Bucks!

There was more reason to celebrate that day when Karsen Kaple, a fourth-year undergraduate student of public health, was announced Ohio State's Homecoming King. Kaple was selected based on his leadership qualities, spirit, integrity and involvement at the university.

"This accomplishment is a representation of the many people who have supported me, believed in me and provided me with opportunities over the past four years," Kaple says. "It makes me proud to represent first-generation students and rural Ohio on such a large platform. Being a student at Ohio State has been the most impactful and meaningful experience of my life thus far, and representing the university in this way is a great honor."

# HOMEcoming

COMMUNITY



*PHOTO: Karsen Kaple, a fourth-year undergraduate student of public health, being crowned Homecoming King along with Homecoming Queen Miranda Koewler, OSU Alumni Association CEO Jim Smith and Brutus.*



## Panel shares personal stories of recovery, loss, response to opioid epidemic

A panel of non-traditional public health practitioners shared how their personal experiences led to their unconventional work addressing the opioid epidemic during an installment of the College of Public Health's Voices from the Community series in September. Over 100 guests attended the discussion at the Ohio Union while viewers live-streamed it on the college's Facebook page.

Master of Health Administration student Nick Anstine discussed his experience launching a high school for students in recovery; Matt Caudill described how the loss of his daughter to substance use redefined his work as chief of staff at the Franklin County Coroner's Office; and Taylor Rae Steele and Jennifer Leffler shared their personal stories of recovery and how it led them to community activism and work in harm reduction. The discussion was moderated by Teresa Long, MD, MPH, special adviser of community engagement and partnership at the college.



## Taking a seat at The Big Table

How can we strengthen and connect Columbus? That was the question discussed by students, alumni, faculty, staff and community partners during The Big Table, a 24-hour, citywide event in August organized by The Columbus Foundation.

The purpose of the annual event is to foster civil conversations by people from all walks of life throughout Columbus. The College of Public Health hosted three conversations at a non-profit café on Columbus's South Side owned and operated by Mid-Ohio Foodbank, while students of the college hosted a conversation at Cunz Hall.

## College co-hosts naloxone trainings, distributes hundreds of overdose reversal kits

Opioid overdoses take the lives of over 5,000 Ohioans each year. In an effort to mitigate this epidemic, the College of Public Health co-hosted four naloxone training and distribution events with Ohio State's Wilce Student Health Center, Wexner Medical Center and Collegiate Recovery Community, and Equitas Health.

Attendees of each of the four sessions this fall were taught how to administer the life-saving opioid overdose antidote and were provided a free naloxone kit courtesy of the Ohio Department of Health and Wexner Medical Center. More than 300 kits were distributed when the series wrapped up in November.

PHOTO: Rick Barclay, program manager of the harm reduction program Safe Point, instructs participants how to use the life-saving opioid overdose antidote naloxone.

*"We have a strong commitment to be a good neighbor," says José Rodriguez, director of external relations and strategic initiatives for the college.*

*"Not only do we want to educate and protect our institution, we also want to protect the people that are part of our neighborhoods."*





## Former EPA administrator honored at CPH Pre-Commencement



The College of Public Health honored Gina McCarthy, director of Harvard's Center for Climate, Health and Global Environment and former Environmental Protection Agency administrator, with the 2018 Thompson of Public Health Award for her leadership in implementing strategies for a healthier global environment.

McCarthy intentionally linked national environmental policy to public health initiatives in her tenure as EPA administrator under President Barack Obama, shifting the landscape of environmental policy at the time. Her initiatives protected water sources, cut air pollution and strengthened chemical safety to protect the most vulnerable Americans from negative health impacts.



I'm excited we have brand new people who are thinking about tackling these issues; joining to figure out how we not just address pollution, but deliver health care more effectively.

The college recognized McCarthy's accomplishments at the 2018 College of Public Health Pre-Commencement Celebration in May, where she was presented the 2018 Thompson Public Health Award by Dean William Martin II, MD.

"A recent [World Health Organization] report estimated 7 million people a year die prematurely from air pollution. So, we have huge work to do, together. It's not just in the developing world, it's in the United States too," McCarthy said to the crowd of nearly 500 graduates, family and friends, and faculty and staff of the college. "This is why I'm excited we have brand new people who are thinking about tackling these issues; joining to figure out how we not just address pollution, but deliver health care more effectively."

The Thompson Public Health Award is presented annually by the College of Public Health to an individual or organization in recognition of their contributions to advance the nation's public health. It was established in 2014 in honor of Ohio State President William Oxley Thompson's decision to ban tobacco use in Ohio State's buildings in 1900.

*PHOTO: Former EPA administrator Gina McCarthy addresses the crowd of nearly 500 students, faculty and parents at the 2018 College of Public Health Pre-Commencement Celebration in May.*

## Reaching out and giving back

Community service, outreach and engagement are crucial to public health, which is why the College of Public Health began offering faculty, staff and students monthly opportunities to step out of their classrooms and offices and volunteer on behalf of the community around them.

Beginning this summer, members of the college came together in the third-floor lobby of Cunz Hall to assemble safe injection kits for Safe Point, a harm reduction program of Equitas Health in Columbus. Other volunteers headed to the South Side to stock groceries at All People's Fresh Market, a program established by Community Development for All People that provides access to healthy, fresh food to underserved residents.

Additional opportunities are being coordinated by dedicated faculty and staff volunteers determined to support a variety of causes that improve public health.



## College bids farewell to Tanenbaum, Dembe

Two esteemed faculty members concluded their time at the College of Public Health this year after decades of research and instruction



**Sandra Tanenbaum, PhD, retired in May after nearly 28 years at The Ohio State University.**

A professor of health services management and policy (HSMP), Tanenbaum instructed numerous students throughout her career.

"The thing I will miss most at OSU is without question the students," Tanenbaum says. "The opportunity to engage them in learning about the U.S. health care system, and especially to get them thinking in new ways, has been a great joy."

Over the years her research has centered on disability, Medicaid and health policy. Her dedication to public health will leave a lasting impact at the college.

"In nearly three decades with the program, she has challenged hundreds of students—including me—to think critically about the health care system, understand the role of policy and politics in its evolution, and make clear, well-informed arguments when taking a position," says Julie Robbins, PhD, director of the college's Master of Health Administration program. "Her discussion-based classes were easily the most informative and engaging of my academic career."



This summer, **Allard Dembe, ScD, retired as a professor of HSMP.** Dembe's research focused on occupational health policy and the epidemiology of chronic disease since he joined CPH in 2006.

"Al is widely recognized as a national expert in the field of occupational health services research," says Thomas Wickizer, PhD, chair of the college's health services management and policy division. "His recent work on the effect of long work hours on health gained national attention. Al brought a deep commitment to scholarship, which benefited many CPH students over the years."



Ohio State Public Health’s Erinn Aulfinger sat down with assistant professor Shawnita Sealy-Jefferson, PhD, MPH, who joined the College of Public Health’s Division of Epidemiology this academic year.

**What made you decide to come to The Ohio State University?**

I am originally from Detroit where there’s a very striking racial disparity in preterm birth, the adverse birth outcome on which I focus. I found that Columbus’s preterm birth outcome is one of the worst in the country. There were no social epidemiologists here at Ohio State and the potential to create a social epidemiology class was appealing because a lot of students haven’t been exposed to the subject discipline of social epidemiology, which merges sociology and epidemiology together.

**What drives your passion for public health?**

Four things about who I am at my core make this work a perfect fit for me. The first thing about me is that I defy odds. I’m an epidemiologist and I calculate odds for a living, but I don’t think the odds against me matter. Racial disparity in preterm birth has existed for a long time and it looks like we can’t do anything about it, but I don’t care what it looks like because I have never paid attention to the odds of whether I can do or try something. The second thing is that I fight injustice. In public health we have a moral imperative to fight for social justice. The third thing about me is I believe that God has my back and good will prevail over evil. And then the fourth thing about me is that I find and help underdogs. Trying to find solutions for groups that are suffering is my responsibility and a part of who I am.

**How does the CPH community support you in developing this passion?**

I have been here for six months but I have been overwhelmed by how the College of Public Health faculty and students seem to want me here. They seem to value my perspectives. I have the space and the freedom to just do my thing, and people seem to appreciate that I’m doing the work that I’m doing. I also feel supported in terms of my teaching as well. I’m just showing up and being my authentic self and the students seem to appreciate that. The part of my job that is most fulfilling to me is helping and inspiring students and encouraging them to do what they want to do and assuring them they can make a difference.

**What research are you currently working on?**

My doctoral training is in stroke epidemiology, so I do work on chronic diseases with the Women’s Health Initiative. I also have been working on grant proposals that are focused on neighborhood-level factors like women’s perceptions of their neighborhood and objective neighborhood disadvantage measures, like blight, and how that relates to preterm birth rates. I love my work. I would do this work for free.

**What are some of your passions and interests outside of work?**

My family motivates me and inspires me. I have a 15-year-old son and a 9-year-old daughter. I am passionate about showing up and being present with my family once I leave work. My husband and I are very committed to activism, community service and leadership development in our community. I also like traveling and being outside. My work is hard sometimes and I have to be able to decompress. Relaxing with my family and friends is how I keep myself sane.

*Shawnita Sealy-Jefferson has an MPH in public health practice from Wayne State University and a PhD in epidemiological sciences from the University of Michigan’s School of Public Health.*

Dr. Shawnita Sealy-Jefferson



**Quality an ‘afterthought’ in the campaign for health care access, report finds**

*By Erinn Aulfinger*  
**Associate professor of epidemiology Marcel Yotebieng, MD, MPH, PhD, alongside 13 other experts in the field, co-authored a report released in August by the National Academy of Medicine.**

The report, titled “Crossing the Global Quality Chasm: Improving health care worldwide,” describes a need for the public health community to shift their focus from strictly providing access to health services to instead providing high-quality, effective health care.

“I’ve been working in HIV for my entire professional life and I’m in public health because of access. I was a clinician and saw how difficult it was to have access to HIV care and treatment,” Yotebieng says. “But now that we are on the positive trend of success in maximizing access to care, there is increasing evidence that access is not good enough.”

This research builds on the work of the 2001 Institute of Medicine report “Crossing the Quality Chasm.” The 2018 report uses six features of health care to characterize quality care, including safety, effectiveness, patient-centeredness, timeliness, efficiency and equity. According to the 2018 report, access to low-quality care impacts factors other than physical health. Productivity is decreased between \$1.4 and \$1.6 trillion each year as a result of these deaths.

“So far, across the globe, our effort has been to provide access to people. It’s not enough to go to a hospital. We estimate 5 to 8 million people die because of poor quality every year and that’s a low, low estimate,” Yotebieng says.

These deaths account for 10 to 15 percent of the total deaths in low- and middle-income countries.

Yotebieng says more measures are needed to identify and quantify high-quality health care services to improve the effectiveness of health care solutions and elevate the impact care has on the population it is serving.

“We don’t want to wait until death to measure that the quality wasn’t good,” Yotebieng says. “If something is important, we create words and measurements. We measure time in minutes and in seconds in a very precise manner. Why is it that when it comes to health care quality, we use very vague stuff to measure it? We focus on access and coverage, and quality is always an afterthought.”

**Doctoral student wins scholarship to attend, present at family planning forum**

*By Erinn Aulfinger*  
**Epidemiology doctoral student Courtney Dewart won a scholarship to attend the 2018 North American Forum on Family Planning in October in New Orleans.**

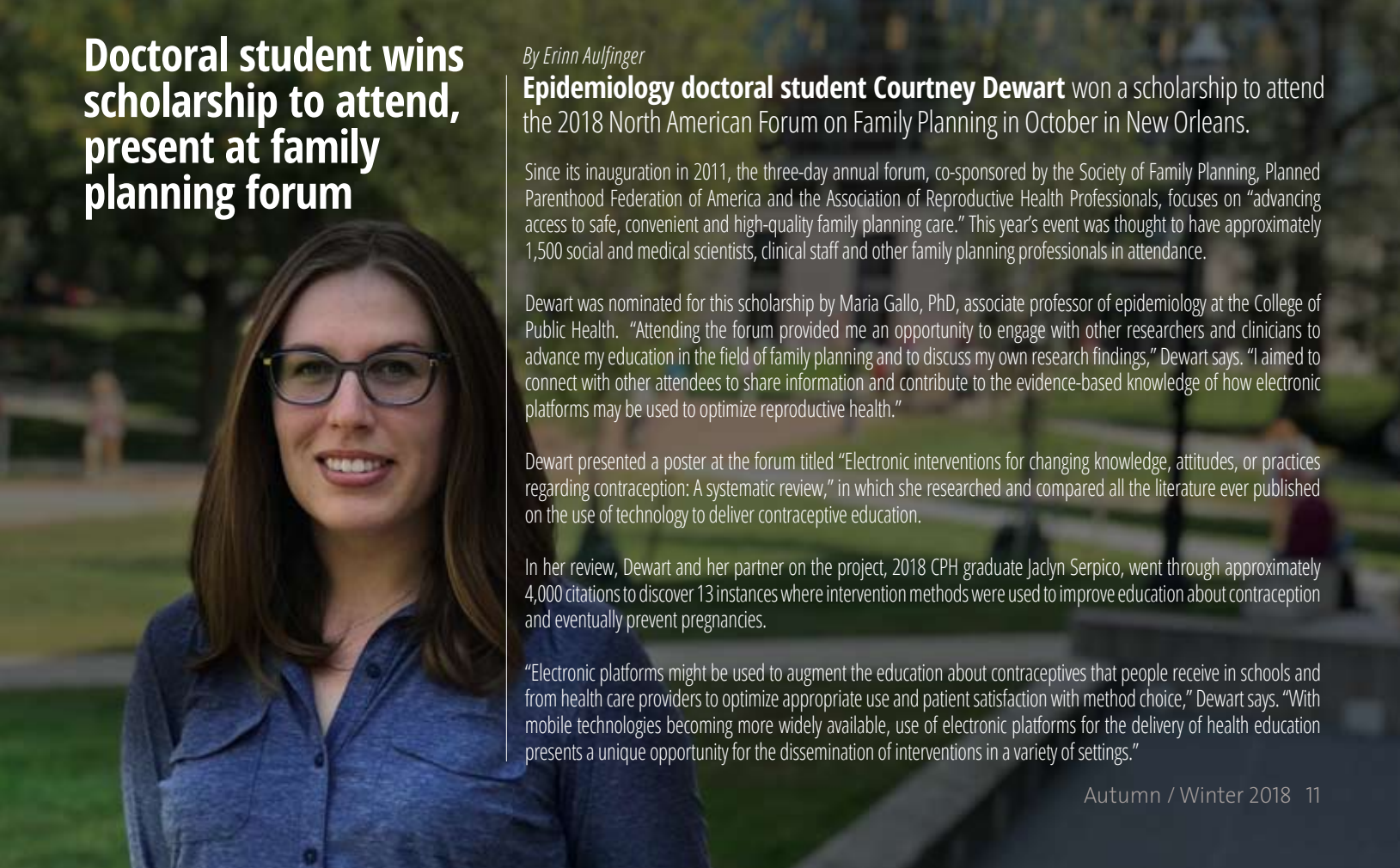
Since its inauguration in 2011, the three-day annual forum, co-sponsored by the Society of Family Planning, Planned Parenthood Federation of America and the Association of Reproductive Health Professionals, focuses on “advancing access to safe, convenient and high-quality family planning care.” This year’s event was thought to have approximately 1,500 social and medical scientists, clinical staff and other family planning professionals in attendance.

Dewart was nominated for this scholarship by Maria Gallo, PhD, associate professor of epidemiology at the College of Public Health. “Attending the forum provided me an opportunity to engage with other researchers and clinicians to advance my education in the field of family planning and to discuss my own research findings,” Dewart says. “I aimed to connect with other attendees to share information and contribute to the evidence-based knowledge of how electronic platforms may be used to optimize reproductive health.”

Dewart presented a poster at the forum titled “Electronic interventions for changing knowledge, attitudes, or practices regarding contraception: A systematic review,” in which she researched and compared all the literature ever published on the use of technology to deliver contraceptive education.

In her review, Dewart and her partner on the project, 2018 CPH graduate Jaclyn Serpico, went through approximately 4,000 citations to discover 13 instances where intervention methods were used to improve education about contraception and eventually prevent pregnancies.

“Electronic platforms might be used to augment the education about contraceptives that people receive in schools and from health care providers to optimize appropriate use and patient satisfaction with method choice,” Dewart says. “With mobile technologies becoming more widely available, use of electronic platforms for the delivery of health education presents a unique opportunity for the dissemination of interventions in a variety of settings.”







## Self-control and obesity: Gender matters in children

By Misti Crane

A toddler's self-regulation – the ability to change behavior in different social situations – may predict whether he or she will be obese come kindergarten, but the connection appears to be much different for girls than for boys.

Self-regulation is something all children must develop, and poorer self-control in childhood is associated with worse adult health, economic and social outcomes. However, a new study from The Ohio State University found that more self-regulation may not necessarily reduce the risk of obesity, especially in girls.

Girls who scored at either the low or the high end on measures of self-regulation when they were 2 years old were more likely than girls with average self-regulation to be obese at age 5, while boys with high self-regulation were less likely to be obese than their peers with low or average self-regulation, found the study, which appears in the journal *JAMA Pediatrics*.

The difference raises important new questions about the role of gender in the development of childhood obesity, says lead author Sarah Anderson, PhD, associate professor of epidemiology at the College of Public Health.

"Although we tend to assume that more self-regulation is always a positive, it may not be," Anderson says.

Those seeking answers about how to prevent childhood obesity should be mindful of the possibility that interventions to improve self-regulation might not play out the same way for boys and girls, she says.

"People are trying ways to prevent obesity in young children, and some of those approaches involve improving self-regulation. Our study suggests that could have an unintended impact for some girls," Anderson says.

"This study leads one to think about how young children are potentially responding differently to messages and expectations based on whether they are boys or girls. We should be cautious about assuming that increases in self-regulation are optimal for everyone."

The study analyzed data from a nationally representative sample of 6,400 U.S. children born in 2001 to see whether a child's ability to self-regulate when they were 2-years-old was associated with their risk of obesity in kindergarten – and to look for any differences between genders. The data came from the National Center for Education Statistics.

Self-regulation was measured using a four-part in-home assessment that looked at a child's adaptability, persistence, attention and frustration tolerance. Each child received from one point to five points on each measure, for a possible score of 20 – a very high level of self-regulation.

"Observers were looking at things like how readily a child gave up a block when an adult said it was time to play with something else, how difficult it was to hold their attention and how easily frustrated they became when things weren't going their way," Anderson says.

"Going in, we thought what many people think – that we would see lower rates of obesity as self-regulation increased."

But when they looked at their data, in which they separated children into quartiles ranging from "least regulated" to "most regulated," the researchers found that girls in the least and most self-regulated groups were more likely to be obese at kindergarten age than their female peers in the middle categories.

There was little difference in boys' risk of obesity except for among the most-regulated, who were least likely to be obese. Obesity was determined by measuring height and weight and defined as a body mass index greater than or equal to the 95th percentile.

"We should not assume that interventions to increase self-regulation will necessarily lead to benefits for both genders – it may be different for boys and girls," Anderson says.

The researchers say there are many ongoing efforts to promote self-regulation in children for a variety of desired outcomes, including obesity prevention and improved school readiness.

In neither gender did the researchers see a clear step-wise pattern where increased self-regulation meant decreased rates of obesity.

Researchers believe that a variety of factors may contribute to links between self-regulation and obesity, including physiological differences and behavioral responses to demands in a child's environment that could affect appetite, food intake, sleep and activity level.

"Obesity prevention is a complex and humbling task. Gender is another social influence that may affect the success of obesity prevention efforts," says Anderson's co-author, Robert Whitaker of Temple University.

This study adds to other obesity research that has found important differences between genders, Anderson says.

"All we can do based on this research is speculate, but it's possible that girls and boys are reacting differently to social expectations and that could play a role in childhood obesity," Anderson says.

"If you're a boy and if the people around you are more OK with you getting easily frustrated and not paying attention, the social stress from your environment may be less than it is for a girl."

## THE NEW PUBLIC HEALTH LAW

A Transdisciplinary Approach to Practice and Advocacy

SCOTT BURRIS  
MICHAEL BERMAN  
MATTHEW PENN  
TARA RAMANATHAN HOLIDAY

"We're hoping it will become the new standard for public health law courses, both in law schools and in public health schools."

## Public health and law professor releases new textbook

By Erinn Aulfinger

Micah Berman, associate professor of health services management and policy at the College of Public Health, with a joint appointment at the Moritz College of Law, co-authored a public health law textbook designed for graduate and upper-level undergraduate law and public health students.

The textbook, titled "The New Public Health Law: A Transdisciplinary Approach to Practice and Advocacy," includes a range of skills and activities for lawyers and non-lawyers by focusing on the position of the current U.S. health system and the creation and execution of new systems.

Alongside co-authors Scott Burris, Matthew Penn and Tara Ramanathan Holiday, Berman designed the text for what he calls a "flipped classroom approach." This method establishes a basis of knowledge through the text and provides the instructor the opportunity to supplement learning with current events and examples inside the classroom environment.

## HPV intervention study found to double vaccination rates, approved for larger trial

By Erinn Aulfinger

Associate professor of health behavior and health promotion Paul Reiter, PhD, MPH, was awarded an R01 grant from the National Cancer Institute to test an online intervention that encourages human papillomavirus (HPV) vaccine use among gay and bisexual men ages 18 to 26.

Reiter and Annie-Laurie McRee, DrPH, MPH, affiliate faculty in the Division of Epidemiology and Community Health at the University of Minnesota, began this research in 2015 with an R21 grant to develop and pilot test the online intervention that provided participants with information about the benefits of HPV vaccine and risks of the virus.

Reiter's initial study recruited 150 gay and bisexual men through social media. Half of the participants were presented with the intervention and text or email reminders over a seven-month period, while the other half received control group materials. The participants were asked to evaluate the intervention's accessibility, information quality and ease of operation. Reiter found that after men were presented with the intervention materials, vaccination rates nearly doubled.

The 2018 study will increase the number of participants to almost 2,000 gay and bisexual men, which will allow for a more advanced analysis of the results and a change in the depth of the reminders that the intervention group receives. In the pilot study, participants were given unidirectional reminders that provided a one-way line of communication to prompt them to get three doses of the vaccine. However, the new study will allow for bidirectional reminders and conversations that Reiter hypothesizes will increase vaccination rates from the initial intervention method.

"The R01 project will just be a much larger application of the pilot study and will tell us for sure whether or not the intervention works. It will also generate data that tells exactly how the intervention produces an effect," Reiter says.

Additional collaborators from Ohio State include Mira Katz, PhD, professor of health behavior and health promotion; Abigail Shoben, PhD, associate professor of biostatistics; and Electra Paskett, PhD, professor of epidemiology and Marion N. Rowley professor of cancer research in the Division of Cancer Prevention and Control at the College of Medicine.



# New report shows increasing trend of EMS-administered naloxone for overdoses

A study conducted by researchers with The Ohio State University Wexner Medical Center and the National Registry of Emergency Medical Technicians shows a significant increase in EMS administration of naloxone during a recent five-year period. Naloxone is a life-saving drug that can quickly reverse the effects of an opioid overdose.



The report, published in August in the Centers for Disease Control and Prevention's (CDC) *Morbidity and Mortality Weekly Report*, found the rate of EMS naloxone administration events increased by 75.1 percent from 2012 to 2016. That mirrors the nearly 80 percent increase in opioid overdose deaths in the U.S. during the same time.

**"We saw a consistent increase in events across all age groups over the five years. We also found evidence that people aged 25-34 years are most affected. They had the highest amount of both naloxone administrations by EMS and overdose deaths,"** says Rebecca Cash, a research fellow at the National Registry and a doctoral student of epidemiology in the College of Public Health.

One of Cash's fellow doctoral students, Remle Crowe, is a co-author on the paper.

Researchers used data from the National Emergency Medical Services Information System (NEMSIS) and compared it with opioid overdose death rates from the National Vital Statistics System. Over 10,000 EMS agencies and 49 U.S. states and territories contribute patient care data to NEMSIS. When analyzing the data, the researchers defined an EMS-administered naloxone event as treating the patient with one dose of the drug during medical care.

"Beyond the actual increase in opioid overdoses, this study suggests that EMS providers are increasingly more likely to treat with naloxone in borderline cases," Cash says.

The researchers noted another previously undescribed trend. Both administrations of naloxone by EMS and overdose deaths among people aged 25-34 increased sharply and surpassed those in the 45-54 age group during the five year span they studied.

**"While it's difficult to tell from the data, it's possible this is due to increased efforts to control misuse of prescription opioid pain relievers. At the same time, use of illegal opioids such as heroin and illicitly manufactured fentanyl has increased and is associated with younger age groups,"** says Ashish Panchal, MD, PhD, emergency medicine expert at The Ohio State Wexner Medical Center and research director with the National Registry.

The researchers also highlight the importance of EMS providers and their patient information in contributing to a more complete evaluation of the opioid overdose problem in the U.S.

"This report can help EMS, health care organizations and communities understand the burden of injury in the opioid overdose epidemic. They can benchmark performance over time and compare with national averages," Panchal says. "These data can also assist in the development of more timely emergency response interventions, more naloxone administrations in suspected drug overdoses and referral to drug treatment and care coordination."

# New program boosts use of HIV medications in injection-drug users

By Misti Crane

**A relatively simple effort to provide counseling and connect injection-drug users with resources could prove powerful against the spread of HIV in a notoriously hard-to-reach population, new research suggests.**

The study increased by almost 30 percent the use of antiretroviral medications to suppress HIV infection, according to the study, which appears in *The Lancet*.

The research team, co-led by William Miller, MD, PhD, MPH, professor and chair of the Division of Epidemiology at the College of Public Health, studied the intervention in a handful of high-risk populations around the world and found that it was not only well-received but could also reduce deaths from HIV infection.

Miller and his colleagues wanted to create a low-cost, effective program that would help the select populations tested in this study – but one that could also be ramped up to improve the worldwide health of HIV-infected people who inject drugs. The study included sites in the Ukraine, Vietnam and Indonesia that are part of the HIV Prevention Trials Network.

"All over the world, people who inject drugs are stigmatized in both the general population and the health care setting and they tend to be afraid to engage with health care providers and others who want to help them," Miller says. "This becomes even more of a challenge when it comes to people who inject drugs and who have HIV."

"Our goal was to design something that could be scaled up relatively easily, including in places that don't have a lot of resources," Miller says.

After a year, 72 percent of the HIV-positive group who received the flexible program of psychosocial counseling and help navigating existing resources say they were using antiretroviral therapy (ART) to combat their HIV infection. In the control group, only 43 percent of infected participants were on therapy.

That's a remarkable victory in a group of HIV-positive people who face serious obstacles to ongoing treatment, including stigma and poor access to adequate health care, Miller says. The World Health Organization has set a goal of 90 percent uptake of ART among infected individuals by 2020.

The researchers also saw a significant improvement in the intervention group when it came to suppress the virus – and likely reducing the risk of transmission. Forty-one percent of HIV-positive men and women who had psychosocial support and help accessing resources achieved viral suppression, compared to 24 percent of those in the control group.

Furthermore, 41 percent of the HIV-positive participants in the study group were on medication to help with their drug use, versus 25 percent of their peers who did not receive additional help. Among the non-infected drug-use partners, uptake of medication for drug use was slightly higher among those in the intervention group, but the difference wasn't statistically significant.

And none of the HIV-free drug-use partners in the intervention group were infected in a year's time. In the control group, seven partners were infected.

Both the infected and uninfected participants in the intervention group saw lower mortality rates than those in the standard-of-care group. Seven percent of infected intervention participants, compared to 15 percent who received standard care, died during the study follow-up.

And, though it wasn't an outcome the research team originally planned to analyze, they did find that the initiative cut the risk of death in half. Among uninfected intervention participants in the study, .5 percent died, compared to three percent of those who received standard care.

People who use injection drugs typically have high rates of HIV and limited access to antiretroviral therapy and medications to help them stop using injection drugs, Miller says.

The intervention used in the study was designed in hopes of offering counseling and steering people toward existing resources that could improve their health – including preventing HIV infection and helping them move toward a drug-free life.

A key element was the flexibility of the program, the researchers say. Previous studies have often been prescriptive in terms of how much counseling a participant receives. In this study, the participants could receive as little or as much as suited their needs.

"Our study confirmed the fact that the effort to successfully engage HIV-infected people who use injection drugs in care is on a spectrum. Some needed very little support, and some required an enormous effort with several visits and counseling sessions to help them and convince them to get into care," says study co-lead author Irving Hoffman, PA, MPH, of the University of North Carolina.

"The flexibility of our intervention was ideal to serve this population and objective," he says.

The study included 502 people who were HIV positive at the start of the trial, and another 806 HIV-free people within their drug-use circles. A quarter of the study participants were assigned to the new intervention, while the rest received "standard of care" – whatever is typically available to this population.

Participants in the study ranged from 18 to 60 years old and were actively injecting drugs at least twice a week at the time of enrollment in the research. The researchers found the non-infected participants through the HIV-infected study subjects, who suggested people with whom they used drugs. Up to five injection partners were enrolled per HIV-infected "index" participant.

Standard of care in each of the countries included referrals for HIV management and medication, including methadone or buprenorphine. They also received a standard harm-reduction package, HIV testing and counseling, referrals for antiretroviral therapy and other basic care provided in their country. That could include referrals to clean syringe programs, risk-reduction counseling for injection drug use and sexually transmitted diseases.

Infected participants in the intervention group received all of that, in addition to access to systems navigators who helped them engage with resources, stick with the program and adhere to HIV care and therapy to reduce or stop injection drug use. They also had psychosocial counseling that included tactics to help them solve problems, build skills and set goals.

Each participant received at least two meetings or phone calls with a systems navigator and a counselor. Participants were asked to bring a family member, friend or partner with them to these sessions. After the initial two sessions, the frequency or amount of help was dictated by the participant's needs and desires.

The National Institute of Allergy and Infectious Diseases, the National Institute of Mental Health and the National Institute on Drug Abuse supported the study. Kathryn Lancaster, PhD, MPH, assistant professor of epidemiology at the College of Public Health, also worked on the study.



## CPH staff member wins annual research paper contest

By Erinn Aulfinger

Epidemiology program manager Brittney Keller-Hamilton, MPH, was announced as one of five winners in the 2018 Preventing Chronic Disease (PCD) Student Research Paper Contest.

Keller-Hamilton was awarded in the doctoral category for her paper titled *"Tobacco and Alcohol on Television: A Content Analysis of Male Adolescents' Favorite Shows."*

Out of 109 total submissions, one winner was selected from each of the doctoral, undergraduate and high school categories, and two were chosen in the graduate category.

Prior to her research, television tobacco and alcohol portrayals had not been examined in more than seven years, according to Keller-Hamilton. After studying 1,220 adolescent males and their favorite television programs, nine of the 20 most popular shows rated TV-14 were randomly selected and found to have exposed the boys to approximately one tobacco incident and 21 alcohol incidents per hour.

"An implication is that if kids are watching a lot of TV shows with this, they may be more likely to use these products themselves," Keller-Hamilton says. "There is no consideration of tobacco and alcohol portrayals that go into TV ratings, so parents can't use ratings as they are to decide whether the show is appropriate for their kid."



An implication is that if kids are watching a lot of TV shows with this, they may be more likely to use these products themselves.



## Algal blooms a threat to small lakes and ponds, too

By Misti Crane

Harmful algae aren't just a problem for high-profile bodies of water – it poses serious, toxic threats in small ponds and lakes as well, new research has found.

A team of researchers from The Ohio State University examined water samples from two dozen ponds and small lakes in rural Ohio and found plenty of cause for concern, with particularly high levels of toxins at one lake.

Toxins from algae can cause skin rashes, intestinal problems and damage to the liver and nervous system. Fertilizers common to agriculture – including nitrogen and phosphorous – create an environment in which harmful algae can flourish.

The researchers say that the way farmers manage runoff could play a significant role in creating water bodies that are ripe for harmful algal blooms. A primary concern is tile drainage, a widely used agricultural approach to removing excess water from the soil below the surface. That water – and the nutrients found in it – are rerouted, often toward ponds on farm property, says study co-author Seungjun Lee, PhD, a postdoctoral researcher in environmental health sciences at the College of Public Health.

"A lot of people and government agencies are paying attention to larger lakes, including Lake Erie, but these smaller bodies of water are also used for recreation, fishing and irrigation," he says.

The study was published recently in the journal *Environmental Science & Technology*.

The research team, led by environmental health sciences professor Jiyoung Lee, PhD, analyzed samples from the 24 bodies of water over a three-month period in late summer 2015.

Ten of the sites had detectable levels of microcystins, toxins produced by freshwater cyanobacteria during algal blooms.

One site had repeated instances of microcystin concentrations above recreational guidelines set by the Ohio Environmental Protection Agency, and so the research team paid particular attention to the samples from that site.

"Samples from this lake in early July were particularly concerning, as they contained four times the recommended amount of microcystin for recreational use and more than 800 times the recommended level for drinking," Seungjun Lee says.

A pond or lake with high toxin levels presents a risk to people, pets, farm animals, wildlife (including fish) and crops and could benefit from routine monitoring and work to lower the risk of algal blooms, he says. The researchers did not name the lake in question, because it is privately owned.

Jiyoung Lee says the impact of tile drainage may be elevated in small lakes and ponds, compared to larger lakes.

"Highly concentrated nutrients are being introduced into a smaller volume of water, making small lakes and ponds more sensitive to this influx of phosphorous, nitrogen and other nutrients," she says.

Nitrate and phosphorous are linked to the primary type of toxic microcystin found in the water. Judicious use of fertilizers could help control the algal blooms, as could measures to reduce animal waste contamination of ponds and lakes, Seungjun Lee says.

Though the study concentrated on Ohio agricultural areas, its findings likely apply to many areas throughout the U.S. and the world where agriculture and small lakes and ponds coexist, the researchers says.

Researchers from Kenyon College also contributed to the study, which was partially funded by the Ohio Water Development Authority.



**A team of researchers from The Ohio State University examined water samples from two dozen ponds and small lakes in rural Ohio and found plenty of cause for concern, with particularly high levels of toxins at one lake.**



# Study finds 2 in 5 teens texting while driving despite state bans

Li Li, MS, a doctoral student of epidemiology at the College of Public Health, is the first author of an article examining individual- and state-level factors associated with teens texting while driving.

The study, done in conjunction with researchers from The Research Institute at Nationwide Children's Hospital and the Centers for Disease Control and Prevention (CDC), looked at Youth Risk Behavior Survey data from 35 states.

The study was published in *Journal of Adolescent Health* and found that nearly two in five teen drivers ages 14 years and older had texted while driving at least once in the month prior to the survey, despite the fact that 34 of 35 states in the study ban text

messaging for drivers 21 years and younger. The percentage of teens texting while driving varied across the 35 states, ranging from 26 percent in Maryland to 64 percent in South Dakota.

"Cellphone use while driving is a public health epidemic. I hope my findings would inspire attention and action from the public and the policy makers, to reduce risky driving behaviors and traffic injuries by young drivers," Li says.

Li received guidance from her adviser, Motao Zhu, MD, MS, PhD, principle investigator at the Center for Injury Research and Policy at The Research Institute at Nationwide Children's Hospital, associate professor of pediatrics at The Ohio State University College of Medicine and affiliate faculty at the College of Public Health. Zhu has expertise in injury epidemiology including teen driving safety.

Under Zhu's mentorship, Li has been actively involved in several National Institutes of

Health (NIH) and CDC-funded research projects, such as using a cellphone app to reduce cellphone-related distraction among young drivers, cellphone law evaluation, driver's licensing law evaluation and the Youth Risk Behavior Survey of high school students.

Li presented her research at the 2017 the American Public Health Association (APHA) Annual Meeting, and won the Best Student Paper out of 11 candidates from the Injury Control and Emergency Health Services (ICEHS) section. Li also won the ICEHS Presidents' Road Safety Scholarship in 2017, and was named as a Traffic Safety Scholar by Lifesavers National Conference on Highway Safety Priorities in 2018.

"I would like to thank my adviser, Dr. Motao Zhu, for mentoring and supporting me over the years," Li says. "Without him, I would not be able to conduct high-caliber research, publish in high-impact journals and win prestigious awards."



“

Recovery high schools, on the front end, show great promise for our nation's young people struggling with substance use. Touting exceptional outcomes, these schools could revolutionize early intervention for adolescents.

## BREAKING GROUND

By Nicholas Anstine

The U.S. health care system is ill prepared to address the deadliest addiction crisis of our time. We continue to invest resources into treating addiction like an acute or pharmacologic problem, forcing substance use disorder (SUD) into our current health care framework rather than adapting the system to meet the needs of the population. This over-medicalization of addiction might initially seem productive, but won't truly meet the needs of patients in the long run.

Addiction is a bio-psycho-social disease. It involves not only medical stabilization and detoxification but also comprehensive treatment and recovery support services to address its many emotional and behavioral components. The collateral consequences of addiction – such as criminal justice, foster care, etc. – are what make it unique and unable to be treated exclusively in a medical setting. These things cannot be tackled through a 20-day inpatient stay or 15-minute appointments with a health care provider.

We also have an imbalance in how we are treating different forms of addiction. By the end of this fiscal year, the federal government will spend \$1.5 billion on the State Opioid Response Grants and \$89 million on the Medication-Assisted Treatment for Prescription Drug and Opioid Addiction program. In contrast, they will spend a little over \$9 million on the Building Communities of Recovery program and \$2.4 million on the Recovery

Community Services Program. While increasing access to medication is an important part of comprehensive treatment, disproportionate investment in opioid use disorder (OUD) could potentially create a lopsided solution.

Don't get me wrong, health care is a critical and necessary component to addiction treatment and sustained recovery, but it is just one component. The solution to our nation's current addiction crisis is supporting an entire continuum of care that addresses all the bio-psycho-social aspects of SUD. Recovery high schools, on the front end, show great promise for our nation's young people struggling with substance use. Touting exceptional outcomes, these schools could revolutionize early intervention for adolescents.

As board chair for Heartland High School, Ohio's only recovery school, I look forward to partnering with my colleagues in public health and health care to build out and align prevention, early intervention, treatment and recovery support services for our community.

*Nicholas Anstine is pursuing a Master of Health Administration at the College of Public Health. He is chair of the board of directors for Heartland High School in Columbus, Ohio's only substance use recovery high school.*



The relationship between regional development and public health can be a rocky one. On the one hand, economic growth offers more opportunity for prosperity, which can lead to better health care and longer life expectancy.

On the other hand, growth and development put greater strain on the environment and introduce new health challenges to regions that may not be prepared to handle them. That's where The Ohio State University's Global One Health initiative (GOHi) comes in.

GOHi connects experts from Ohio State's seven health sciences colleges and six other Ohio State colleges with professionals in countries such as Thailand, Ethiopia, Kenya, Brazil, India, Tanzania, Mexico and China. It centers on an approach called "One Health" that promotes interdisciplinary work to prevent the spread of disease and improve health with the belief that the health of humans, animals, plants and the environment intersect.

Michael Bisesi, PhD, a co-lead for GOHi and the senior associate dean of academic affairs at the College of Public Health, was invited in 2009 by Wondwossen Gebreyes, DVM, PhD, founder and executive director of GOHi, to collaborate on a proposal for a five-year grant from the National Institutes of Health focused on food security in regions of East Africa. Today, the grant has been renewed and expanded into a multidisciplinary initiative that plans global projects, trains graduate students and working professionals in other countries through workshops, offers online continuing education courses and modules, and interacts with various government officials and international agencies

Bisesi guides GOHi in several ways: He serves as a co-lead on the GOHi executive committee, engaging in strategic planning and implementation of applicable initiatives, and he participates in grant proposal development and related activities focused on capacity building via training and research. Major efforts involve partners in East African countries.

# It's All Connected: Ohio State's commitment to Global One Health unwavering as environmental needs expand

*By Janaya Greene*

"We're sharing our knowledge and skills with them, but for us to apply it to that setting we have to learn more about their culture, geography, demographics and the epidemiology," Bisesi says. "We learn about their country and they learn about ours. What we share with them is that we go there as a source of expertise to be complementary with their expertise."

As East African countries and cities advance, GOHi's team at Ohio State and in East Africa work to find new ways to prevent or reduce environmental impacts.

"They're building more universities, increasing transportation sources and increasing manufacturing and agricultural sources," Bisesi says. "From a health exposure standpoint, there's no longer just infectious agents and infectious diseases. Concerns have expanded to include toxic chemical agents and exposures and the related non-infectious diseases. As they're building infrastructure and rapidly developing, it's putting an increased demand on the environment."

In partnership with government entities, GOHi plans new ways to help the region advance with less harm. Electric bikes and subsidized electrical trains reduce fuel strain on the environment and decrease fuel use in Addis Ababa, Ethiopia, specifically, according to Getnet Yimer, MD, PhD, GOHi's East Africa regional director. The trains reduce financial strain on residents as well.

"It's helping people a lot. Since it's subsidized, it doesn't even cover its own costs," Yimer says. "Another train runs between Addis Ababa and the Port of Djibouti. That train recently started functioning and it also uses electricity to run."

As East Africa further develops, the possibility of health emergencies will likely continue to increase. Yimer oversees projects to combat these new diseases first hand, some of the most concerning being brucellosis, rabies and anthrax.

A mass rabies vaccination training in Addis Ababa, January 2018

*PHOTO by Maria Belu*

"We have research projects in rural areas where people are at risk. One year, we did mass vaccinations on rabies. Another year, Ohio State graduate students came here and got involved with mass vaccinations of dogs," Yimer says. "We vaccinated more than 8,000 dogs in Addis Ababa alone in six weeks. That had a great impact."

GOHi has grown from its early days, but securing funding while working across multiple regions, for multiple causes, while based in the United States can be a challenge for many health professionals. Yet as the primary representative from the College of Public Health, Bisesi has remained a stronghold in GOHi's impact in East Africa and beyond.

"Public health, including environmental public health, is really the core to every health component," says Bisesi, who is also a professor and interim chair of the Division of Environmental Health Sciences at the college. "The foundational area of public health links with every initiative that we have."



# Navigating the terrain of transition from combat to classroom

By Erinn Aulfinger

David Hibler began his time at Ohio State approximately three weeks after coming home from basic training. His hard work pursuing undergraduate degrees in biology and psychology was often interrupted by mobilizations and deployments. This was not the textbook experience of a college student.

“After my first deployment, I was back in a classroom at Ohio State within three days of getting home,” Hibler says. “It is a huge transition from being in a combat zone, getting fired at and having a whole list of responsibilities that you need to take care of versus sitting in a classroom and just trying to learn the material and pass the exams.”

The transition from combat to classroom showed Hibler that veteran and military students lack the necessary guidance to navigate the duality of their experience. Now, Hibler, a doctoral student of environmental health sciences, is the first point of contact for many of his peers transitioning to civilian life as the College of Public Health’s first veteran student advocate.

Currently on Ohio State’s campus there are 1,800 veterans, dependents and active duty members; 1,400 current faculty and staff veterans; and over 400 Reserve Officer Training Corps program participants, according to the Office of Military and Veterans Services.

Mike Carrell, assistant vice provost and director of the Office of Military and Veterans Services, began the donor-funded program in 2012 to build and maintain military and veteran communities throughout campus. Carrell says the program grew from seven students in its first year to 31 current student advocates at Ohio State and its regional campuses.

“The program helps veterans get together with other people so they can feel a little more connected and can find people who have shared similar experiences to themselves,” Hibler says. “Nobody really understands what people have to go through on deployment besides someone who has been there. You can try to explain all you want, but it’s nothing like living through it.”

Mark Weir, associate professor of environmental health sciences and Hibler’s faculty adviser for the veteran student advocate position, says that this program intends to build a veteran and military community tailored to public health to support members and educate staff and faculty on the challenges this group faces.

“Ohio State is one of the leading universities on how much time and support they put into military students, but there is still work to be done,” Weir says. “It is a community that is typically not going to open up and admit to the need for this kind of help in some cases. It is a community I have either been directly or indirectly involved with for a long time, and I’ve noticed is not typically focused on in this type of way.”

In 2018, College Consensus, a website for school rankings and student review aggregation, ranked Ohio State as the 8th best college in the country for military and veteran students.

Hibler says he hopes that the interdisciplinary networking opportunities and social and speaker events will establish the program’s focus on fostering connection within the veteran and military body at Ohio State. He intends to focus on growing the program, as well as potentially establishing a scholarship and fellowship fund to help military and veteran students throughout every aspect of their college experience.

“Being a veteran means that you didn’t live the normal life. At some point in time you were taken off the traditional path and had to do some things that ‘normal’ students don’t have to deal with or really understand,” Hibler says. “When you see the majority of the people around you getting to walk down the traditional path toward what is generally considered success, without having to carry the same kind of things that are in the pack on your back, it can be very disheartening and it can be a reason that a lot of veterans give up.”

Hibler stresses that it was his experience as a military student that is the inspiration for the support he gives others.

“That’s why I want to help. This type of program didn’t exist when I was doing my undergrad here, and I know that it can make a huge difference in the lives of those that give so much to us.”



# In Memorium: Dr. Martin D. Keller

By Steve Barrish



The College of Public Health lost a key figure in its history and in the field of public health. Professor Emeritus Martin D. Keller, MD, PhD, died peacefully in September at age 95.

Born in Brooklyn, NY, in 1923 and having studied at Yeshiva University, New York University and Cornell University, Keller became a nationally recognized epidemiologist and professor who played a critical role in the formation of what is now The Ohio State University College of Public Health.

Keller held appointments at Beth Israel Hospital in Boston and the Department of Preventive Medicine at Harvard Medical School before taking a position as associate professor of preventive medicine at Ohio State’s College of Medicine, where he would spend nearly 40 years.

While chair of the Department of Preventive Medicine, Keller shared his vision that the department might one day become a public health college at Ohio State. He worked diligently over the years to secure numerous grants and develop a depth of expertise and a prestigious national reputation. His dedication paid off when in

1995 Ohio State established the first school of public health in Ohio. The school became the College of Public Health in 2007, realizing Keller’s vision. In 2014, Keller was recognized by Dean William Martin II, MD, as a Champion of Public Health.

As an epidemiologist, Keller worked against the spread of infectious disease from the county level in Ohio to the national level at the Centers for Disease Control and Prevention. His impact in Ohio continued through roles at the Ohio Department of Health, including acting chief of the Division of Communicable Diseases, chief of the Division of Chronic Diseases and Tuberculosis and chief of research and training.

Keller left his wife, Geraldine, and their three children and three grandchildren. His legacy will live on at The Ohio State University College of Public Health and around the world through all the students and colleagues he inspired.



## The Student

By Elli Schwartz

I was fortunate last summer to spend 10 weeks in Malawi, the “Warm Heart of Africa.” I traveled to this small country in the southeastern part of the continent to work on an epidemiological study through the UNC Project-Malawi, under the direction of William Miller, MD, PhD, MPH, and Kathy Lancaster, PhD, MPH, professors of epidemiology at Ohio State’s College of Public Health.

The study, called iKnow, focused on acute HIV sexual partner and social contact referral. The goals of the study were to determine the most effective ways to identify, test and treat the HIV-infected population of Malawi, where HIV prevalence is among the highest in the world. My primary responsibilities as an intern were to manage and clean study datasets, structure and complete needs assessments to determine sustainable ways to improve project efficiency, and facilitate team trainings to implement efficiency initiatives. I spent a significant amount of time shadowing epidemiologists to observe research practice methods and accompanying nurses and physicians on rounds to compare standards of care in Malawi to those in the United States.

With every clinic efficiency initiative that I implemented – and every mountain that I summited in my free time – I was able to gain confidence in myself and see limitless possibilities for my future, whether in infectious disease epidemiology or medicine. I made lasting connections with Malawian researchers, providers and patients, and with other

visiting students and researchers. I gained valuable insight from these individuals by learning about their interests, motivations, career paths and goals. I intend to nourish these relationships, as many will likely be lifetime mentors for me.

Completing this international travel experience taught me that I could successfully overcome what seemed to be insurmountable challenges at times. I proved to myself that I was able to thrive—not just survive—in a culture that was in so many ways opposite of the one I left behind for the summer. I will always be grateful that I was provided with this transformational opportunity.

*Elli Schwartz is a third-year undergraduate student of environmental public health at the College of Public Health. When students like Elli travel abroad, they’re learning to create a healthier world. They need our support to get there. If you’re interested in making an impact, please visit [cph.osu.edu](http://cph.osu.edu) and make a gift to the Global Health Travel Fund (#314259).*



## The Graduate

By Mary DiOrio ’00

You never know how your career may change over time. If you are open to new opportunities, you may be surprised at the path you take.

When I completed my Master of Public Health (MPH) at The Ohio State University School of Public Health in 2000, I likely would have told you that I expected to work at a state or local health department for the length of my career. I wouldn’t have foreseen at the time that I would work for a large health care system. Now that I have been with OhioHealth for almost two years, I can tell you that my public health background prepared me well for this phase of my career – and that I am in the perfect place to continue working on improving the health of our communities.

I obtained my medical degree from Ohio State in 1994 and did a Family Medicine Residency at Riverside Methodist Hospital in Columbus. This journey led me to realize that I wanted to work in public health, so I followed that training with a Preventive Medicine Residency and MPH education. I began my public health career at the Ohio Department of Health (ODH) in 2001 and progressed through various roles there, including medical director from 2014-2016.

In 2017, I became medical director of population health for the OhioHealth Physician Group (OPG). (I have since added on the role of medical director of quality for OPG.) Population health management gives a nod to public health in its approach to assessing

the health of a population. It looks at health outcomes of groups of individuals as well as the underlying factors for these outcomes, such as social determinants of health. Understanding how translational the work of public health is to the broader conversation about the health of individuals has helped me in my transition to a health care system.

My career move from traditional public health has allowed me to take my foundational focus on populations and add a different lens to my approach. I remain curious and look for learning opportunities, and I know that in order to grow as a health care professional, I must be open to changing my perspective and looking at health solutions from different angles.

*Mary DiOrio, MD, MPH, is the medical director of quality and population health at the OhioHealth Physician Group. She graduated in 1994 with Doctor of Medicine from Ohio State’s College of Medicine and in 2000 with a Master of Public Health from Ohio State’s School of Public Health.*



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## ALUMNI NEWS & NOTES

### Nichole Hodges, PhD '16, MPH '05, MCHES

In August, Nichole received a Extramural Loan Repayment Program for Pediatric Research Award from the National Institutes of Health (NIH) and the Eunice Kennedy Shriver National Institute of Child Health and Human Development. The NIH loan repayment program was established by Congress and designed to recruit and retain highly qualified professionals into biomedical or biobehavioral research careers. The awards repay up to \$35,000 per year in student loan debt for qualified individuals. More information about the program can be found at [lrp.nih.gov](http://lrp.nih.gov).



### Carol Smathers, MPH '09

The Denise Miller National 4-H Innovator Award was presented to Carol, Katie Riemenschneider, MPH '16, and Theresa Ferrari. This award recognizes a team that exemplifies innovation, accomplishment and commitment in the design and delivery of a unique 4-H program. It was awarded for the team's work to educate OSU Extension, professional, teen and general public audiences about Ohio's opioid crisis. The team's efforts include the "What's in YOUR Medicine Cabinet?" display that engages teens and teachers at fairs and events, and "Hope for Ohio: A Teen Forum on Ohio's Opioid Crisis." The forum, attended by 120 high school youth and youth leaders, was hosted along with the Ohio Farm Bureau, National FFA Organization and Prevention Action Alliance.

### Lois Hall, MS '85

Lois received the first Lifetime Achievement Award from the Grief Recovery Institute at the 2018 International Grief Recovery Conference in September in Los Angeles. She began her work with Grief Recovery in the 1980's while working with the HIV/AIDS program. Lois was trained in 1998 and was invited by the founder to become a national trainer in 2001. In 2016, Lois asked to join as staff with the institute, based in Bend, OR. Lois's involvement has helped establish the international conferences the institute's research committee, and to assist in strengthening their quality assurance and improvement efforts. To learn more about grief as a public health issue, visit [griefrecoverymethod.com](http://griefrecoverymethod.com).



### Gail Marsh, MHA '90

Gail was named in February as The Ohio State University's first chief strategy officer. She brings more than three decades of experience at Ohio State, having served as senior associate vice president in the Office of Health Sciences and chief strategy officer for the Wexner Medical Center since 2003. She will also continue her current roles as president of Ohio State Health Inc. and the Ohio State Health Network.

### John Billington, MPH '09

John began a new role at GlaxoSmithKline (GSK) as director of science policy, vaccines in Global Communications & Government Affairs. He will lead global public policy for vaccines R&D, manufacturing and quality assurance, as well as the company's policy efforts related to vaccine development for emerging infectious diseases. John plans to move to Belgium, the site of GSK's global vaccines headquarters, with his wife and two children in January.



### Ryan Fisher, BSPH '16

Ryan began a new role as a junior public health analyst at the Centers for Disease Control and Prevention (CDC) in Atlanta. He works in the Center for Global Health's Division of Global HIV & TB to assist the Chief of the Special Initiatives branch. Ryan returned earlier this year from Cameroon where he served for two years as a volunteer community health educator in the Peace Corps. His service focused primarily on HIV prevention, gender, and sexual and reproductive health for adolescent girls young women (AGYW), and orphans and vulnerable children (OVCs).

and

## ALUMNI NEWS & NOTES

### Lanese Scholarship reaches goal

Fundraisers reached their \$50,000 goal to award the Richard R. Lanese Scholarship. Many alumni and friends of the College of Public Health stepped up and provided the support needed to set the scholarship in motion. The college intends to award the scholarship, named after the late epidemiology professor, for the first time in January 2019.

### Tamira Moon, MPH '04

Tamira was named by the Atlanta Business Chronicle 40 Under 40 as a young leader who is are making an impact in the Metro Atlanta area. She is among the 40 young movers and shakers who have scaled the ranks, are making a mark in their industries are leading in their communities. She was recognized for her career accomplishments addressing the second leading cause death as the program director for Georgia's Comprehensive Cancer Control Program and her community involvement as the founder/president of To the Moon & Back Foundation Inc., which uplifts the mission to "pay it forward today to make better tomorrow!"



### Larry Margolis, MS '73

Larry, a managing partner at SPM Marketing & Communications in La Grange, IL, was awarded the 2018 Society for Healthcare Strategy & Market Development (SHSMD) Leadership Excellence Award in September. Larry was selected for this award based on outstanding achievements in the following areas: innovation in the practice of the strategy disciplines; enhancement of the profession; exceptional personal qualities and leadership abilities; career achievements and progression; and stewardship. The award is the highest honor a member can receive.

### Manoj Sharma, PhD '97

Manoj, one of the first graduates from the School of Public Health, received the Integrative, Complementary, and Traditional Health Practices (ICTHP) IMPACT Award, the highest award of the section for contributions to integrative health, at American Public Health Association Annual Meeting in November in San Diego.



### Duane Reynolds, MHA '04

Duane was recognized by Modern Healthcare as a 2018 Up & Comer for pursuing health equity in his work as chief of inclusion and diversity at Optum Advisory Services.



## ALUMNI NEWS & NOTES

### **Adrienne Shinn, MPH '06**

Adrienne was hired in June 2018 as the marketing director for the Neurological Institute at The Ohio State University Wexner Medical Center. She noted that she constantly leverages the knowledge and unique perspectives she gained in the college's MPH-Program for Experienced Professionals to market and communicate the medical center's programs and services to patients to help improve outcomes.

### **Alexandra Brown, MPH '18**

Alexandra began working on a demonstration initiative funded by the Office on Violence Against Women at the Maryland Network Against Domestic Violence (MNADV). MNADV's Lethality Assessment Program (LAP) is a nationally implemented protocol that provides an easy and effective method for law enforcement and other community professionals to identify victims of domestic violence who are at the highest risk of being seriously injured or killed by their intimate partners, and immediately connect them to the local community-based domestic violence service program. As a project manager for LAP, Alexandra is developing a process by which to certify LAP-implementing jurisdictions around the country.

### **Emily Manning, MPH '17**

Emily applied in June for a BJA COAP Category 1 grant on behalf of the Hamilton County Heroin Coalition, of which she is the program coordinator. She received the \$500,000 grant to implement a pilot Law Enforcement Assisted Diversion (LEAD) program in Cincinnati. This marks her first successful grant application.

### **Angie Byrne, MPH '06**

Angie was named to the eight-member Somerville, MA, Vision Zero Task Force. The Task Force will work over several months to develop a strategic plan to address transportation safety in Somerville while engaging with members of the community in the process. Once the plan is developed, the task force will work with city leadership on implementation of the plan. Vision Zero is a strategy to eliminate all traffic fatalities and severe injuries while increasing safe, healthy and equitable mobility for all. Somerville is the most densely populated municipality in New England and the 16th most densely populated incorporated municipality in the U.S.

### **David Miller, MS '80**

David co-authored the book *Employed Physician Networks: A Guide to Building Strategic Advantage, Value, and Financial Sustainability*, which was published in November by Health Administration Press. The book offers a clear framework for a network's growth—from the “novice” phase through the “high-performing” phase—and highlights the key elements that contribute to a successful evolution to high performance. David is managing partner at HSG in Louisville.

### **Maya Brown-Zimmerman, MPH '08**

Maya received the Cheryl Gasner Spirit of Service Award from The Marfan Foundation in July. The award recognizes people who show leadership to the connective tissue disorder community on both a local and national level.

### **Shery Milz, MS '87**

Shery was promoted to professor of public health at the University of Toledo in July.

### **Morgan Richardson, MPH '17**

Morgan began a new job as a project manager in the Division of Thoracic Surgery at The Ohio State University Wexner Medical Center.

### **Alexander Sandberg, MHA '15**

Alexander moved to Dallas from Chicago to begin a new job with HealthCare Appraisers Inc. as a physician compensation valuation analyst.

### **Peyton Howell, MS '90**

Peyton was appointed chief commercial and strategy officer at PAREXEL International Corporation in May. She is responsible for leading PAREXEL's commercial strategy, including global sales, customer service and sales operations. Prior to this new role, Peyton served as executive vice president at AmerisourceBergen.



### **Steve Smith, MS '77**

*Photo by Joe Shuman*

Steve is the recipient of the 2018 Ralph Davenport Mershon Award from The Ohio State University Alumni Association. He began his career with the professional services firm Ernst & Young before co-founding Accretive Health, a provider of revenue management and physician advisory services. The Chicago-based firm went public in 2010.

Throughout his career, Steve mentored students and recruited graduates from Ohio State. He also provided career counseling for those between jobs and connected them with potential employers. Retired since 2011, Steve currently serves on the alumni council that advises Ohio State President Michael V. Drake. He has served as president of both the Health Services Management and Policy Alumni Society and, more recently, the College of Public Health Alumni Society.

The Ralph Davenport Mershon Award is presented to alumni who have demonstrated exceptional leadership and service to The Ohio State University.



*“Philanthropy is not just about donating money, it’s about making a difference in the lives of people.”*



Dr. Phyllis Cummins and her husband, Donald Dyche, understand the importance of improving the lives of others by supporting causes they feel passionate about. That is why Dr. Cummins and Mr. Dyche established the Fund for Opioid and Drug Abuse Research at the College of Public Health.

Their transformative gift will help Ohio State experts evaluate the effectiveness of solutions to the opioid crisis, a deadly epidemic that Dr. Cummins could see the impact of in the media and in her work as assistant director of research and an adjunct associate professor in the Department of Sociology and Gerontology at Miami University in Oxford, Ohio.

“The opioid crisis is permeating many parts of our lives, from the economy to family relationships. It is not a problem that is going to go away any time soon,” Dr. Cummins says. “Even if the rate of addiction goes down, there are still going to be so many people who are impacted. I hope that our gift will make it easier for those who have been affected by the opioid crisis.”

Gifts like this and others that Dr. Cummins and Mr. Dyche have made to her alma mater truly make a difference in improving the lives of others.

**You, too, can make a difference with a gift to the College of Public Health.**

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*“I have a better grasp on public health theory because of my training in the MPH-PEP program, and as such am better prepared for the real-world public health challenges I face at work on a daily basis.”*

- **Julia Applegate**  
PEP student, Director of the Institute for LGBTQ Health Equity at Equitas Health

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