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Public health students take on Ohio county’s struggle with opioids in case competition

Teams of students from the College of Public Health presented strategies for reducing the burden of opioid misuse and opioid-related deaths in Hocking County, Ohio, to county health officials in the inaugural CPH Student Case Competition in November.

The competition, organized and hosted by the College of Public Health Alumni Society, challenged teams of undergraduate and graduate students to spend two weeks developing population health intervention strategies based on the county’s community health assessment data, and existing resources and programming.

“As you know, the opioid epidemic in our city, state and country is a major public health crisis,” CPH Dean William Martin II, MD, said in his opening remarks at the event. “This case competition is an opportunity for our brightest public health students to test their skills in finding solutions to a real-life crisis.”

The teams presented their work in front of a panel of judges that included Doug Fisher, DPM, health commissioner of Hocking County; Bill Dunlap, deputy director of the Athens-Hocking-Vinton Alcohol, Drug Addiction and Mental Health Services Board; and Kathryn Lancaster, PhD, MPH, assistant professor of epidemiology at CPH.

“It just kind of reassures our future in public health,” Fisher says. “Interacting with the students and seeing what kind of quality OSU is producing as far as public health students—that’s one of the main things I gained and was reassured about.”

Each team was evaluated and scored on their ability to describe the scope of opioid and substance misuse in Hocking County; their analysis of current strategies; their selection of the appropriate population health model to implement, along with outcome measurements, evaluation plan, budget and limitations; and the professionalism of their presentations.

“I think it’s a good application of everything we’ve been learning in school,” says Sara Godina, competition participant and second-year graduate student of epidemiology. “It’s a real-world application of a public health problem and that’s what we’re in school for.”

The winning team from the competition included Vikas Munjal, Amber Moore and Maddie Drenkhan, all final-year undergraduate students. The team traveled to the Hocking County Health Department in March to present their work at an Opiate Task Force meeting, and have been invited to present at the Ohio Public Health Combined Conference in May.

William J. Martin II, MD

DEAN’S MESSAGE

“Our mission is the welfare of humankind.”

These are the words of Dr. Natalia Kanem, executive director of the United Nations Population Fund, who called on the public health community to unite in promotion of peace and social justice. As you’ll see in this issue of Ohio State Public Health, we are heeding the call both inside and outside the classroom.

Our remarkable students are taking on today’s toughest public health challenges before we’ve even had the chance to hand them a diploma. They’re developing strategies to combat the opioid crisis and presenting those strategies to the health departments and task forces they’re intended for. They’re sending desperately needed supplies thousands of miles to hurricane-ravaged Puerto Rico. They’re out in the community making a difference in the lives of those struggling with addiction, homelessness and health disparities.

I’m in awe of our students, and I know that they’re inspired every day by our staff and faculty who are dedicated to passionate teaching, extraordinary research and community outreach. They’re developing solutions and taking action, and preparing the next generation to follow in their footsteps.

There has never been a more challenging and exciting time to be in public health. Only together can we achieve our mission.

Sincerely,

William J. Martin II, MD

Zeb Purdin, MHA ’15 (left), one of the alumni organizers of the case competition, observes student presentations beside the panel of judges (from left: Doug Fisher, DPM; Bill Dunlap; and Kathryn Lancaster, PhD, MPH).
Biostatistics professor re-selected as university faculty mentor

One way new professors at Ohio State gain support on their journeys as Buckeyes is through Faculty FIT, a year-long mentorship program pairing new and established faculty members.

Rebecca Andridge, PhD, associate professor of biostatistics at CPH, has been selected for the second year in a row to serve as a mentor in the program. She is one of 27 faculty members who will mentor a cohort of three to four new faculty members from a variety of fields and teaching backgrounds.

“During a selective application process, Dr. Andridge was chosen as a mentor and is, indeed, part of an elite class of outstanding Ohio State teachers,” says Kay Halasek, BA, MA, PhD, director of Ohio State’s University Institute for Teaching and Learning, a variety of fields and teaching backgrounds.

“But I can’t help but think about my own journey. It was incredibly gratifying to watch her navigate that process with us as a mentor in the program last year,” Andridge says. “She taught her first class in the spring and I really made me want to work harder to make them proud.”

A team of students from the college’s Master of Health Administration (MHA) program placed third in the National Association of Health Services Executives (NAHSE) Student Case Competition last fall in San Antonio, Texas.

The students were challenged with making Oakland, California, the healthiest city in America through the Accountable Health Communities model.

“I cannot express how amazing and supportive the students, staff, faculty, alumni and everyone else in our program was,” says Gennel Vieira, a student in the program who competed at NAHSE. “Having everyone there for us at every step of the process was the best feeling for me and made me want to work harder to make them proud.”

MHA program director Julie Robbins, PhD, says case competitions are a prime way to prepare students for careers in the health care administration field.

“Case competitions are a really good hands-on way for students to apply what they’ve learned in the program,” Robbins says. “We work with our students a lot to see themselves as professionals, not just students, and this kind of opportunity where they’re presenting to health care executives from leading systems across the country really challenges them to up their game in terms of professional presentation.”

Robbins expressed that the NAHSE competition is of great importance to minority students, as the representation of African American health leaders — who are underrepresented in the field — serves as inspiration for the group.

“I’m proud of them regardless of the outcome,” Robbins says. “It’s fun to make the finals, it’s fun to place, but I put far less stake in that versus what they learn, how hard they work to prepare and how much they invest in themselves and put themselves out there to do the best that they can. That, to me, is exciting. The rest is icing on the cake.”

The trip was organized by CPH Dean William Martin II, MD, who had his first taste of health policy in 1994 as a senior health policy fellow in the office of Sen. Ted Kennedy.

With help from CPH staff and Ohio State’s Office of Federal Relations in Washington, Martin set up meetings with lawmakers and officials such as Ohio Sen. Rob Portman; U.S. Surgeon General VADM Jerome Adams, MD, MPH; and American Public Health Association executive director George Benjamin, MD, to name a few.

“This trip was one of unparalleled opportunity,” says Carra Gilson, a third-year undergraduate student of public health sociology. “It challenged me to explore intersections between political activism and public health progress.”

The group also spent an evening mingling with D.C.-area alumni of the college and special guest Phil Mattingly, CNN congressional correspondent and fellow Buckeye.

The students put advocacy into action, engaging face-to-face with policymakers on issues such as health disparities, the opioid crisis, gun violence, health policy and veterinary public health (One Health).

“Before our time in D.C., I was unfamiliar with the systems that so directly navigate public policy’s influence on our well-being,” Gilson says. “However, having spent three full days in our country’s capital actively connecting with influential leaders on relevant issues along with my peers, I now feel more empowered to recognize and engage with the intersections between political activism and public health progress.”

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CPH student joins student leaders across Ohio to address childhood poverty

From the Civil Rights movement of the 1960s to recent activism for gun safety, young people have been a driving force behind change in the United States. These movements are inspiration for Chinenye Bosah, who is doing her part in improving the lives of young people in Ohio.

Bosah, a second-year undergraduate student of environmental public health, was invited to the 2017 Propel Ohio Collegiate Leadership Summit at The University of Akron in November. She was joined by hundreds of other students from colleges across the state to learn what factors lead to childhood poverty, and what she can do to address them in her own community.

“A big takeaway for me was learning about redlining and red zoning that began in the 1960s,” Bosah says. “It put certain neighborhoods at a higher disadvantage; it’s still having a negative impact today and contributes more to childhood poverty than I previously thought.”

Propel Ohio is a leadership program that promotes civic engagement and leadership among undergraduate students. Partners of the program include Ohio Campus Compact, Ohio United Way and the Office of Ohio Senator Sherrod Brown, who was one of the guest speakers at the summit.

Bosah and other central Ohio undergraduate students gathered for a regional summit at Ohio State in February. They discussed ways to get involved in their communities and mentor children living in poverty.

“Sometimes I feel like people think, I have to do something really big where I’m helping fifty plus people to make a difference,” Bosah says. “But it can be a butterfly effect. Making a difference for one person can help them make a difference in someone else’s life and so on.”

Bosah has since taken the lessons she learned at Propel Ohio to middle schools in Columbus. She volunteers for 1Girl, a program through which she visits a school in a disadvantaged neighborhood once a week to mentor young girls on topics ranging from leadership to friendship.

“It’s mostly to be a mentor and constant figure in their life; to show that people do care,” Bosah says. “It’s also to be an example — because the school I volunteer at this semester is all girls of color, so I think it’s cool for them to see that they can go to college, too.”

The College of Public Health presented the 2017 Champions of Public Health Awards in October to four individuals and organizations for making strides in improving the health and well-being of Ohioans.

Among the awardees were the Children’s Defense Fund-Ohio, which received the Dean’s Award for adhering to the needs of poor children, those with disabilities and children of color; Robert Crane, MD, president and founder of the Preventing Tobacco Addiction Foundation, who received the Community Leader Award for his work preventing nicotine addiction in Ohio and across the nation; Catherine Hewitt, MPH, health educator and Medical Reserve Corps coordinator for Lake County General Health District, who received the Public Health Practitioner Award for her community health work to end tobacco use and other health education accomplishments; and Al Edmondson, who received the Organization Award for Making a Difference Inc., a non-profit he founded and of which he serves as CEO.

Making a Difference Inc. focuses on personal awareness and well-being throughout urban areas of Columbus by holding health fairs and wellness clinics to educate the members of the community.

“This acknowledgement means so much to me and many others,” Edmondson said during his acceptance speech. “I hope this will be an example to encourage others to get involved in their community.”

Edmondson began his philanthropic efforts by partnering with Ohio State’s College of Nursing and African American nursing program, Chi Eta Phi, to hold health screenings in his barbershop, A Cut Above the Rest, on Columbus’s Near East Side.

Along with members of the Ohio State and Columbus public health communities, U.S. Rep. Joyce Beatty of the 3rd District of Ohio joined the ceremony and shared her take on the importance of public health.

“I’m in Washington everyday fighting for health care, for public health dollars,” Beatty said as she congratulated the award recipients. “You know why? Because you give us the hope. You provide the opportunity, and it is departments and colleges like yours that will give us the change that we need.”
Students, faculty reconnect at ‘Welcome Back’ event; collect donations for opioid-affected southern Ohio

The college kicked off spring semester with a “Welcome Back” event in early January. While reconnecting over free breakfast and coffee, students, faculty and staff learned about some of the support services that the college’s Office of Research provides, and student organizations shared overviews of their missions.

“The ‘Welcome Back’ event was a great opportunity to showcase what our organization is about, and it was a great way to gain new members,” says Reginald Scott, a fourth-year undergraduate student of public health sociology and president of the Multicultural Public Health Student Association. “We got a lot of exposure.”

Attendees of the event, hosted by the CPH Diversity and Inclusion Committee, also had the opportunity to donate warm clothing to children and families in southern Ohio affected by the opioid crisis.

The clothing drive was organized by the Public Health Student Leadership Council (PHSLC) and their faculty adviser, William Miller, MD, PhD, MPH, chair of the Division of Epidemiology at CPH.

“It was amazing to get all of the donations we needed on the list,” says Elli Schwartz, a second-year undergraduate student of environmental public health and co-chair of PHSLC. “It was so inspiring to see our community give back.”

Together, the CPH community collected clothing donations for 64 children and parents. Members of PHSLC drove the donations to Portsmouth, Ohio, later that week.

“They were shocked,” Schwartz says. “There were community members helping us unload the cars. The bailiff that works at the drug court, you could tell he was getting emotional because he didn’t expect it all.”

Members of the Public Health Student Leadership Council deliver warm clothing to the Scioto County courthouse. The donations went to families affected by the opioid crisis.

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You’re a Buckeye alum who pursued your doctorate at the University of Minnesota. What brought you back to Ohio State?

I grew up in this midwestern, urban culture, and both my family and my wife’s family live in Cincinnati. When I decided to keep doing biostatistics in academia, we began looking at places that have a similar culture and would allow us to easily get back to see our families on a regular basis. Out of our options, Ohio State’s biostatistics department was the best fit.

What about the department stood out to you compared to other universities?

One thing is how the biostatistics department is integrated with the rest of the college. At many universities, biostatistics is the odd one out—often not even in the same location. That’s something that affects both students, who aren’t seeing or working with other areas of public health, and faculty, because it’s harder to be in close collaboration with other public health researchers if you’re not seeing them often.

What research are you currently working on?

My research is statistical methods for clinical trials; that involves both the design of trials and analysis of the data you get out of the trials. One thing I specifically focus on within clinical trials are identifying which types of patients benefit from a particular treatment. It’s with the hopes that if you have more information about who in particular is benefiting, then you can make better choices for the patient and make more efficient programs for allocating treatments to specific patients rather than automatically giving everybody the same thing.

I also monitor the safety of ongoing trials, making sure people who are given a treatment aren’t experiencing high adverse events that are outside of what is considered an acceptable range for that type of treatment.

What role does the Division of Biostatistics at CPH play in advancing these discoveries?

Methodologically, there are plenty of people around the division who are experts in things that I’m not. Whenever I’m working with areas of specialty that other people have more familiarity with, it’s really useful to get their input. Another thing this division helps me with more often is collaborative research. Sometimes my colleagues will refer a project to me if it falls under my particular specialty. These referrals have pretty quickly set up a good number of collaborative relationships that are useful in working on both the collaborative science and my methods research.

What do you do for fun?

I really like bicycling. I don’t race but I make it a point to commute by bike and go for casual rides when the weather is good enough. I also enjoy certain types of computer games, particularly simulation games that are a version of what we care about in public health. Games where you can build a city or transport system. I find fun because you can play around with ideas you care about with low-stakes and on a reasonable time scale.

Would you say your passion for public health drives your love of simulation games?

I don’t know what causes what, but there’s some type of connection there. My early attraction to computer games got me into computer programming and mathematics. That ended up having a big impact on the math and computer science I’m interested in.

You’re a big science fiction fan. What’s your favorite science-fiction work?

My favorite movie is “2001: A Space Odyssey,” directed by Stanley Kubrick. It’s such a beautifully shot film. My favorite thing about science fiction is that realization that you really don’t know what’s going on in the broader universe; it’s just this huge mystery. You end up with the same feeling when doing mathematical research, where part of the joy in it is that you really have no idea what’s going on and it’s OK. That same feeling of discovery that I experience vicariously through literature and movies is the same feeling of discovery I really enjoy in my work.

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Tobacco 21 becomes law in Columbus with leadership from CPH faculty

Columbus recently passed a law known as Tobacco 21, which raised the legal age to purchase tobacco products from 18 to 21.

Associate Professor Micah Berman, JD, and Professor Emerita Mary Ellen Wewers, PhD, MPH, helped lead Columbus’s Tobacco 21 campaign, making Columbus the sixth city in Ohio to adopt the ordinance.

“I worked with city council and the health department to talk through more of the specifics of what a law could look like, some of the legal issues and some of the implementation issues,” says Berman, who holds a joint appointment with Ohio State’s Moritz College of Law and CPH. “A big issue with public health laws in general, including Tobacco 21 laws, is that you want to do more than just pass a law; you want to make sure there’s a plan for putting the law in place and making sure it’s enforced and working.”

Berman co-authored a white paper that helped inform the law with Robert Crane, MD, clinical professor of family medicine at Ohio State and president and founder of the Preventing Tobacco Addiction Foundation, and Natalie Hemmert, JD, MPH, staff attorney at Public Health Law Center who was a postdoctoral fellow in CPH’s Center of Excellence in Regulatory Tobacco Policy at the time.

Published by CPH in 2015, the white paper detailed how raising the minimum age for sales of tobacco products would be effective in improving health and have minimal economic consequences to retailers.

While Berman and his colleagues helped orchestrate the law, Wewers played an integral role in developing the rules to implement the law as a member of the Columbus board of health.

“We’ve seen results in other cities across America that are promising—youth initiation rates of tobacco use do go down,” Wewers says. “Our hope and goal is, with this policy in place, we will see less uptake of tobacco products among our adolescents.”

Other leaders in this initiative were Crane, the Columbus board of health, Councilwoman Priscilla R. Tyson, and former Columbus Health Commissioner Teresa Long, MD.

Advocates believe the Columbus law is the strongest in the nation and will serve as a model because of its unique enforcement component. Under the law, inspections will be conducted at licensed locations and civil fines will be issued as a penalty of violation. Repeat violators can have their licenses suspended or revoked.

It will take years to see the effect of Tobacco 21, which took effect in October, but Wewers has hope that the legislation will have a positive impact.

“If you can stop kids from starting, the chances are that by age 21 or later we’ll see far fewer people addicted to tobacco products,” she says. “It’ll have huge benefits for society, from a health perspective and economic perspective.”

‘Smart Foodsheds’ project aims to improve food security in Columbus, Sacramento

Although food is mass produced to feed the world’s population, health and nutritional disparities like food insecurity still affect the lives of millions. Working to address these disparities is Ayaz Hyder, PhD, assistant professor of environmental health sciences at the College of Public Health.

Hyder is co-principal investigator on a National Science Foundation (NSF)-funded project aimed at improving food security and community health through smarter regional food systems. The project, “Developing an Informational Infrastructure for Building Smart Regional Foodsheds,” stores diverse public data from multiple partners in information systems called “smart foodsheds.” Communities can then access the information to track where food is grown, processed and transported; learn about local food sources; and create partnerships to bring new food sources to communities in need.

“In the long term, what it’s doing is building the foundation for a well-connected system,” Hyder explains. “It’s building a foundation that others can then leverage to sustainably address food insecurity.”

Collaborators on the project include Casey Hoy, PhD, professor and Kellogg Endowed Chair of agricultural ecosystem management at Ohio State, and researchers from University of California-Davis and the Lawrence Berkeley National Lab. Hyder and Hoy—who also serves as the faculty director for the Initiative for Food and Agricultural Transformation (InFACT), a focus area in Ohio State’s Discovery Themes—will work on food systems data for Columbus respectively from their colleagues in California. The two teams will connect and transfer data methods and technology to strengthen their “foodshed” informatics.

“The first step is community engagement to make sure we don’t develop something that no one needs,” Hyder says. “We want to be purposeful about it by engaging with those who are producing the food, who are transporting the food, who are processing the food, who are buying the food and who are eating the food, to ask, ‘What would this connected system and data about food look like?’”

Ohio’s food insecurity surpasses the nation’s average of 5.6 percent of food insecure families at 7.5 percent as of 2015. This Smart Regional Foodsheds project hopes to change that.

“Nationwide Children’s Hospital [in Columbus] has thousands of people who come into the ER and say that they’re food insecure, meaning that they have to choose between buying for food or paying for rent,” Hyder says. “So what we’re developing is this linkage between food system data and the health data that can help Nationwide figure out better where to put food pantries and things like that.”

The project kicked off at the beginning of this year, at which point Hyder and his colleagues began planning which community groups and leaders to engage with. It has been funded by NSF at $500,000 and is estimated to end in 2021.
Researchers seek to identify specific carcinogens affecting firefighters

Firefighters are 14 percent more likely to experience cancer-related deaths than the general U.S. population, according to a study by the National Institute for Occupational Safety and Health.

CPH researchers Susan Olivo-Marston, PhD, MPH, Olorunfemi Adetona, PhD, and Darryl Hood, PhD, are building off of this study to find ways to improve firefighters’ occupational safety.

The team will use biological markers in firefighters to identify which specific contaminants emitted in structural fire smoke are associated with cancer.

Olivo-Marston, assistant professor of epidemiology, hopes this study will give fire departments a better idea of how to reduce the risk of cancer in their workforce.

“We don’t really have a good grasp of what this increase of cancer risk looks like and which types of cancer we’re dealing with,” Olivo-Marston says. “That’s our goal to really begin to understand the risk that these firefighters have solely due to their job and to learn if there are certain types of cancer that they’re at higher risk of versus others.”

Adetona, assistant professor of environmental health sciences, says he and his colleagues are recruiting participants for the study from fire departments in Columbus and throughout Ohio.

“There are many things they’re doing to reduce the exposure and absorption of contaminants in their bodies,” Adetona says. “They’re providing firefighters with additional gear so used gear can be cleaned after they respond to a fire and they’re introducing ventilation in their vehicle bays to reduce the level of diesel exhaust that could seep into their living quarters.”

He adds that leadership of these fire departments is eager to understand the specific risks their workforce faces, and with backgrounds in volunteer firefighting, Olivo-Marston and Adetona are eager to help.

Research forums a rite of passage for many students

Not all students have the honor of competing in research forums, which makes being selected to participate an achievement in and of itself.

In March, three of the college’s doctoral students placed in the top three in their respective categories at the Edward F. Hayes Graduate Research Forum.

Brittany Keller-Hamilton (epidemiology) placed second for her research on the effects of outdoor tobacco advertising on young males; Seungjen Lee (environmental health sciences) placed second with his research on microcystin accumulation in vegetables; and Igor Mrdjen (environmental health sciences) placed third for his research on cyanotoxins.

At the Denman Undergraduate Research Forum in April, 27 CPH students competed with research ranging from governmental responses to the HIV epidemic to mental illnesses in Tanzania.

Leah Sadinski, a fourth-year undergraduate student of environmental public health, won first place in the “Solving Complex Population Health Issues” award category for her research on sexually transmitted infections on college campuses. Mikafui Dzotsi, a fourth-year undergraduate student of public health sociology, was awarded first place in the “Science for the Public Good” category for her research on meningococcal disease on college campuses.
Many health care administrators turn to value-based care as a delivery model to improve care processes and quality. These improvements often achieve better patient outcomes and decrease health care costs for providers and patients alike—a win-win.


I often say that equity is the forgotten aim.

There are several aspects of health care equity, one of which is identifying and resolving racial and ethnic disparities in care. My company, Multimedia in Healthcare Inc., has surveyed nearly 100 hospitals about their disparities resolution practices. We found that nearly 100 percent of hospitals collect patient race, ethnicity and language data, but less than 10 percent have taken the next step of stratifying quality measures for the purpose of identifying and resolving health disparities.

Disparities resolution is not only the right thing to do, there is a business case as well. The Health Resources and Services Administration's 2017 Health Equity Report, released in April, states that “marked disparities are found in a number of health indicators,” including diabetes, cardiovascular disease and breast cancer, among others. The very chronic conditions that, when managed properly, can push us over the cost savings threshold.

Another aspect of health care equity is diversity and inclusion among health system teams. A survey by the American Hospital Association showed that only 11 percent of executive positions are held by minorities, down a percentage point from 2013. And a measly 14 percent of board positions are filled with people of color or other minority representatives.

Creating an environment that embraces health care equity starts at the top, and it is often unlikely that those impacted by care disparities are close enough to the C-suite to create awareness.

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The College of Public Health's Master of Health Administration (MHA) program plays a leading role in moving the dial on the forgotten aim of health care equity. Leaders such as Dr. Julie Robbins are partnering with the HSMP Alumni Society's diversity committee, of which I chair. Together, we have adopted goals associated with improving the experiences of underrepresented students and alumni.

I predict the impact we’ll have on diversity and inclusion in our program and among our alumni will have a ripple effect on health systems. We are creating pathways to executive-level positions for graduates, and are with them along the way. Our work extends to all graduates of the college who impact disparities in care. Together we will make U.S. health care teams recognized worldwide for being trusted providers of care regardless of our individual differences.

Lisa R. Sloane is the founder and CEO of Multimedia in Healthcare Inc. in Cincinnati, Ohio, which helps health care providers create robust health equity programs. She earned her Master of Health Administration from CPH in 2007, and is currently the chair of the HSMP Alumni Society's diversity committee. Email Lisa at lisa@go2mih.com if you want to learn more about the diversity committee's strategies or join. Creating an environment that embraces health care equity starts at the top, and it is often unlikely that those impacted by care disparities are close enough to the C-suite to create awareness.
The hill is steep in the battle against opioids. Drug overdose deaths in the U.S. climbed 21 percent in 2016 from the year before, according to the Centers for Disease Control and Prevention, and nearly two-thirds of those deaths involved prescription or illicit opioids.

Turning the tide of this growing crisis isn’t the work of one entity or field of practice, a point emphasized by the Opioid Innovation Fund: a $1.35 million commitment announced last year by Executive Vice President and Provost Bruce McPherson, PhD, to fuel interdisciplinary research and collaboration in solving the epidemic.

“This is an opportunity to further build capacity on campus around the opioid crisis,” says CPH Dean William Martin II, MD, who was selected by the university to co-chair a steering committee responsible for allocating the funds.

In October 2017, Martin and his co-chair Roger Rennekamp, PhD, director of Ohio State Extension, collected pre-proposals from nearly 100 applicants representing disciplines university-wide. A third advanced to the next round in the selection process.

“The full proposals, as well as the preproposals, really reflected the breadth of the university,” Martin says. “They were all well done; very competitive. It was a challenging process to even cull the herd down to 33.”

After the final selection, eight teams were awarded grants ranging from $100,000 to $45,000. The projects include a $96,762 implementation grant to develop the Franklin County Opioid Crisis Activities Levels Map, a system to track and map, on a daily basis, data on opiate overdoses from the 22 emergency medical services organizations in Franklin County. The data will be used to help connect communities in greatest need to resources to combat overdoses.

“It will be more than just a dashboard. It will be a way to address research questions and policy questions, and provide data in a way that Columbus Public Health or other community organizations can use right away to make better decisions, to make faster decisions and to save more lives,” says Ayaz Hyder, assistant professor of environmental health sciences at CPH and one of the researchers for the FOCAL map project.

Another grant of $45,541 will fund development of a community and social network-based campaign to reduce opioid-related stigma and overdose. The campaign will educate people who use drugs, their friends and family, and the broader community about the opioid overdose-reversal medication naloxone, and how to recognize and respond to an overdose.

Martin was joined by Francis Collins, MD, PhD, director of the National Institutes of Health (NIH), in the announcement of the awards in March. Collins also participated in a roundtable discussion with researchers and other community experts to discuss solutions to the opioid epidemic.

“I’m very impressed and gratified to see the kind of creativity and energy and resources that are being put into this,” Collins says. “And we at NIH are prepared to figure out ways to inspire all of those investigators all over the country to come forward with their best ideas about how this could be most appropriately allocated to make progress in this space.”

Martin says the awards were just the start of a university effort to reduce the burden of the opioid crisis.

“This obviously is a moment for us not only to celebrate the awards, but also to underscore the breadth of the opportunities and the breadth of a land-grant university to solve the problems in our communities,” he says. “This is not going to be done in isolation. It is done together with the communities that we serve.”

The long game here is to look for scalable solutions that are evidence based. I have no problems having that be the final filter.”

— CPH Dean William Martin II, MD

CRISIS INTERVENTION
Ohio State’s Opioid Innovation Fund inspires multidisciplinary partnerships to address the opioid epidemic

CAMPUS INNOVATION
BY STEVE BARRISH AND CHRIS BOOKER

There is $500 million for this current fiscal year on top of what we’ve already been doing. That is specifically targeted to increase our ability to do research in this space,” Collins says. “And we at NIH are prepared to figure out ways to inspire all of those investigators all over the country to come forward with their best ideas about how this could be most appropriately allocated to make progress in this space.”

A team of Ohio State researchers and community partners whose proposal, “Building Recommended Practices for Working with Domestic Violence Survivors Who Use Opioids in Residential Services: A Community Engagement Approach,” was selected for grant funding. (From left: Kathryn Lancaster, PhD, MPH; Rachel Ramirez Hammond, MA, MSW; Julianna Nemeth, PhD, MA; Susan Yoon, PhD, MS; Julianna Nemeth, PhD, MA; and Cecilia Mengo, PhD.)

“But there’s no substitute for the work that’s being done,” Martin says. “And we at NIH aim to try to be the best possible partner we can offer those efforts.”

Collins says an apparent federal budget agreement will likely mean more funding for addiction research and treatment. He says universities like Ohio State will be critical to helping communities solve the addiction crisis.

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Robert Hood (left), doctoral student of epidemiology, and Kenton Reasion, graduate student of epidemiology, balance their time between coursework and assisting with the Opioid Innovation Fund grants.
A HEAD START

Meet just a few of the College of Public Health students combating opioid and substance abuse in between classes.

KIRSTEN CHRZAN
Master of Public Health, epidemiology

The first life I saved was a heroin overdose victim in her early thirties. She was found by her father unconscious on her bedroom floor. She was cyanotic with a threadly pulse and was not breathing when I arrived on scene. Naloxone was administered and a nasal airway was placed, then I began ventilating her with a bag valve mask and managed to get her breathing again. After several minutes, the naloxone began to take effect and she slowly regained consciousness.

Witnessing the damage the opioid crisis is causing people and their families is part of what drove me to become an EMT. I saw it first-hand during my practicum last summer when I assisted with community naloxone trainings. I decided to enroll in EMT basic training and am now a practicing EMT with MediCare Ambulance.

Earning my MPH in epidemiology is teaching me the relationship between exposure and disease. It’s showing me the importance of timely care intervention and education to alter the risk of disease. These lessons are invaluable when providing patient care as an EMT.

This crisis is difficult for everyone involved. My hope is that it can be overcome in part from the efforts of me and those who stand beside me in blue.

HANNAH PISCALKO
Master of Public Health, epidemiology

In between graduating with my BSH last December and beginning my pursuit of an MPH this August, I am getting an up-close look at how the opioid crisis is tearing apart our communities. I am working as a full-time research assistant for Dr. Bill Miller, chair of the Division of Health Services Research at the University of Cincinnati. This grant focuses on substance use and access to care in southern Ohio.

I have had the opportunity to travel to these locations where I have assisted other members of the OHQP team in interviewing people who live and work in the community. The work that I have been able to do under Dr. Miller has helped me realize that substance abuse and mental health is the type of epidemic research that I want to pursue when I continue my education at the college this fall.

TALEED EL-SABAWI
Doctor of Philosophy, health services management and policy, political science

Throughout my career in law, I have represented and advocated for foster children, most of whom came from families ravaged by drug abuse. I quickly realized that by the time the child welfare system intervened, it was too late and we were just struggling to piece families back together.

The narratives used by interest groups and administration agencies to describe drug use to federal legislators have changed. These casual definitions influence the types of legislative proposals used to address the opioid crisis.

I hope that my research as a PhD in health policy and political science will inform policy geared at addressing the root causes of the problem.

FADI SMILEY
Master of Public Health Program for Experienced Professionals

I did my practicum at the Ohio State’s Higher Education Center for Alcohol and Drug Misuse Prevention and Recovery. My mentor, Dr. Ken Hale, and I worked on the Prescription Drug Learning Collaborative, which consisted of six one-hour webinars that addressed different aspects of prescription drug misuse in the university community.

The first webinar was an introduction to the series to help explain why prescription drug misuse prevention is necessary. It featured students telling their story of recovery from prescription drugs. I was one of the students who shared. I discussed my story of recovery from opioids and how it affected my college experience and career.

It was gratifying to share my story on this platform and educate others in the university community on prescription drug misuse. I hope that my story helps breakdown common stigmas associated with substance use disorders, and shines a light on why stronger prevention strategies are needed.

VANESSA APODACA
Doctor of Philosophy, epidemiology

The idea for my dissertation came to me while in line at my local social security office. The long wait gave me an opportunity to talk with some of the others patiently waiting in line. They began sharing how their families have been affected by the opioid epidemic. As someone who has personally experienced a close family member suffer from substance abuse, the conversation tugged at my heartstrings.

My focus on the opioid epidemic has led me to explore why opioid misuse began improving in Florida in 2012, according to data provided by my adviser, Dr. Randell Harris. I began looking at opioid-related hospitalization rates and their costs over time, the impact of the state’s Prescription Drug Monitoring Program that was implemented in 2010 and the effect of accessibility to substance abuse treatment facilities on hospitalization rates.

I hope that research from this project will develop solutions through policy implementation and the creation of intervention programs. My goal after completing my PhD in spring 2019 is to continue my research on the opioid epidemic and provide a bridge between the scientific research community and the federal government.

NICK ANSTINE
Master of Health Administration

I have had the opportunity to work with the Center for Alcohol and Other Drug Education Prevention at Maravilla High School. This is in large part because the most common triggers for adolescent relapse, disorders and adolescent recovery.

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Adolescents in recovery from substance use disorders often relapse when returning to school. This is in large part because the most common triggers for adolescent relapse, school stress and socialization, are often left unmitigated at the average school.

I currently chair a board that’s launching Ohio’s first recovery high school for students with substance use disorders. Heartland High School will ensure that students in recovery are afforded the opportunity to receive a high-quality education in a safe environment that is specifically conducive to recovery. We have worked diligently over the past two years to secure startup funding, scholarships, a location and permits to open this fall.

My greatest hope for Heartland is that we can fundamentally shift the conversation surrounding substance use disorders, encouraging our society to focus on the redemption of recovery rather than the stigma of addiction. Heartland will save lives—of that I am completely certain. But I want more for Heartland. I want Heartland to catalyze a larger change in how our community views and handles substance use disorders and adolescent recovery.

TREVOR MOFFITT
Doctor of Philosophy, health behavior and health promotion

There can be many roadblocks for people with substance use disorder seeking treatment: A NIDA study I assisted with compared the effectiveness of Suboxone and Vivitrol, two common medically assisted treatments for opioid use disorder. The study—the largest comparative study of its kind to date—identified the difficulty in getting clients the treatment they so desperately need and want.

This was corroborated by what I observed while I worked in the research department at Maravilla treatment center. We had many clients eager to start Vivitrol, but due to the wait time for other medication to clear their system, several relapsed before receiving the medication.

I hope to focus my dissertation around this induction problem and other issues opioid users face when trying to start treatment. Part of my research will be to help Drs. Pam Saldberry and Bill Miller on a project focused on opioid misuse in southern Ohio. I am also on a grant through the Opioid Innovation Fund with Dr. Thomas Huber, working with Maryhaven to map the treatment continuum for people with opioid use disorder.
A DOSE OF THE REAL WORLD

CPI student Ryan Yoder gets a head start on harm reduction
BY JANAYA GREENE

Ryan Yoder’s volunteer work at Safe Point began with small tasks: transporting syringes, handing out brochures on HIV and Hepatitis and restocking tourniquets. A year and a half later, he’s one of only three staff members supporting one of Columbus’s most comprehensive harm reduction programs for intravenous drug use.

Yoder had no idea that volunteering at Safe Point would be the beginning of a much larger journey that would have an impact not only on the clients he served, but on him as well.

Upon enrolling at Ohio State, Yoder wanted to be a biochemist. His mom was a nurse at a drug detox center and Yoder had a passion for health, so majoring in biochemistry made the most sense.

“At the time, I was interested in medicine and how practitioners got to focus on people,” says Yoder, a fourth-year undergraduate student of public health sociology at CPH. “That’s what was missing in the biochemistry curriculum: that interaction on how all of the information was applicable to population health.”

Yoder merged his interests in population health and public policy by declaring a public health major and public policy minor.

In spring 2016, Yoder took a class he would later learn had several opportunities for him to apply course curriculum to the real world.

“During my U.S. and International Healthcare course, I did a report on syringe service programs and their benefit to IV drug users and the community,” Yoder says. “Doing research for that paper is how I learned Columbus has the Safe Point program.”

“During my U.S. and International Healthcare course, I did a report on syringe service programs and their benefit to IV drug users and the community,” Yoder says. “Doing research for that paper is how I learned Columbus has the Safe Point program.”

Yoder’s dedication as a volunteer led him to a position on staff at Safe Point alongside Barclay. Yoder’s new role as an outreach specialist has given him a clearer view of how his talents can be applied in the field of public health.

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Safe Point provides access to syringes, HIV and Hepatitis C testing, overdose prevention education, and more in an effort to decrease the spread of infectious diseases. The program also distributes the life-saving overdose reversal medication naloxone to families and individuals at risk.

Rick Barclay has been an outreach specialist for Safe Point since its start of operations in 2016.

“People who use IV drugs are at a higher risk for HIV, Hep C and any other number of blood borne illnesses,” Barclay says. “We make it less likely that these diseases are going to be transmitted in this population.”

He began volunteering at Safe Point that summer, joining a group of other College of Public Health faculty, staff and students who dedicate their time to the program.

“Safe Point has made me a better advocate for people’s health, for mental health, for substance abuse—which I’m really thankful for,” Yoder attributes the experience he has had at Safe Point as inspiration for how to continue his education, and how to launch his career.

He has been accepted to Johns Hopkins Bloomberg School of Public Health where he’ll pursue a master’s degree in health policy beginning in the fall. He then wants to launch a career focused on lessening the stigma of addiction and increasing drug treatment from a harm reduction route.

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Ryan Yoder (second from left) with Rick Barclay (right) and the rest of the small-but-mighty staff at Safe Point.
A woman’s memories of a loved one’s experience with cancer could play a significant role in how she approaches breast cancer prevention in her own life, a new study has found.

Women whose family members or friends died of cancer were far more likely to approach prevention aggressively than were those whose loved ones survived the disease, found a team of researchers at The Ohio State University.

“The cancer of someone you care about is a lens through which you interpret your own risk,” says Tasleem Padamsee, PhD, an assistant professor of health services management and policy at the College of Public Health and lead author of the study, which appears in the Journal of Health Psychology.

“Our study suggests that that experience has an impact on how women make decisions about prevention,” says Padamsee, who also is part of Ohio State’s Comprehensive Cancer Center.

She interviewed 50 women at elevated risk of developing breast cancer in hopes of better understanding why some women opt for protective measures including removal of their breasts and taking medication while others do not. Thirty of the women were white and 20 were African American.

The study’s design intentionally included open-ended questions to help ensure that the researchers’ own ideas about which factors matter most wouldn’t bias the findings.

“We wanted to understand what information high-risk women are using to make their choices about genetic testing, prophylactic surgery and medication and we were able to learn a lot by listening to how each woman told her personal story,” she says.

Reviewing all 50 of the interviews, the researchers observed clear trends.

They divided study participants into four categories based on how the women described their lifetime experiences with cancer, ranging from those with little to no close experience to those who had a traumatic exposure to cancer, usually because a loved one (often the woman’s mother) died.

Most of the women in the study had breast cancer risk well above the 12 percent average lifetime risk for all women. Women whose genes put them at a 20 percent or higher lifetime risk of developing breast cancer may benefit from medical interventions including advanced and more-frequent imaging, prophylactic removal of the breasts and anti-estrogen medications, such as tamoxifen.

And researchers know that each of those methods is used far less often than clinical guidelines recommend.

Padamsee says she was somewhat surprised by how much influence watching friends, who also face experience cancer had on women’s own approach to prevention, even among women with similar risk levels.

“Women who had traumatic experiences were more likely to view breast cancer as a death sentence while those with more positive experiences perceived it as a hardship, but one that could be overcome,” she says. “And the women who had a trauma are the ones who were really willing to consider more aggressive options.”

Women in the three study groups who had not lived through a traumatic cancer experience with a loved one were generally experience with a loved one were generally

This could be because of barriers to seeing specialists who could help educate women about their options.

“My goal is to empower women so that they know their risks and their options and can make the health care choices that are consistent with their own values,” Padamsee says.

“What really bothers me is that, until now, the research hasn’t been able to tell us the difference between women who are making a choice not to go for aggressive prevention and those who have no information and no options in front of them,”

The research was supported by the National Cancer Institute. Other Ohio State researchers involved in the study were Anna Muraveva, Celia Wills, Electra Paskett and Lisa Yee, who is now with City of Hope National Medical Center. THIS IS AN ADVANCE PUBLICATION. THE FINAL, PUBLISHED VERSION MAY DIFFER.

Loved one’s death could spur aggressive measures against breast cancer

Study: High-risk women’s decisions tied to experiences of family, friends

Padamsee is the recipient of the 2018 Distinguished Undergraduate Research Mentor Award, presented to her by Executive Vice President and Provost Bruce McPheron, PhD, for motivating undergraduate students to conduct research in her HSMP 4650 course. She is also the recipient of the 2018 Excellence in Teaching Award from the College of Public Health.

In the newly published study, African American participants were more likely than white participants to view cancer as a monolithic disease and to not talk about breast cancer as a specific illness that could be prevented with approaches beyond routine mammography and healthful living.

That could be because of barriers to seeing specialists who could help educate women about their options.

Padamsee says she was troubled that some of the women were not aware of prevention options for which they would be potential candidates and that many said that financial barriers stood in the way of their pursuit of genetic testing.

“A lot of women said, ‘If I had the test and I knew I had a mutation, then I would have surgery,’ and that tells me that we need to work on making sure more women have access to those tests,” she says.

The next step in this research will include a more detailed examination of factors, including race and socioeconomic status, that likely contribute to prevention choices.
It’s autumn semester. The sun is still shining, the leaves are still on the buckeye trees and Liane Davila-Martin was settling in to the final year of earning her master’s degree in epidemiology at Ohio State.

That’s when the hurricane hit, and Davila-Martin found herself 2,000 miles away from home with little to do to help her friends and family.

On September 21, Hurricane Maria devastated Puerto Rico and the U.S. Virgin Islands. Flooding in Puerto Rico left millions without fuel, food and electricity.

While residents of the island were hit the hardest, the effects of the disaster were felt far beyond the Caribbean. Many Puerto Ricans on the mainland mourned for their home and their loved ones—like Davila-Martin did.

“We couldn’t communicate with our families because the communication towers were down, and not knowing if they were okay — if they were safe and sound — was probably one of the worst feelings I’ve experienced in my life,” Davila-Martin says. But she was far from alone. Davila-Martin turned to her fellow members of the Puerto Rican Student Association (PRSA), over which she presides. The student organization responded by raising more than $2,300 in aid and collecting ten pallets-worth of desperately needed supplies.

“As an organization and as Puerto Ricans, we couldn’t just stand with our arms crossed, which is why we decided to do a fundraiser and supply drive to help our island and our people back home,” Davila-Martin says.

PRSA’s donations were sent to communities in Puerto Rico like San Juan, Aguadilla, San Germán and Mayagüez. Davila-Martin’s hometown.

Davila-Martin will extend her goodwill toward beings with more than two legs as she pursues a Doctor of Veterinary Medicine at Ohio State following graduation this spring.

It was apparent from the beginning that the federal response to Puerto Rico would not be as it occurred in Florida or Houston,” Martin says. “That’s when the sense of obligation increases. It’s what we do.”

Martin reached out to Dharma Vázquez Torres, PhD, dean of University of Puerto Rico School of Public Health, and discovered that one basic need was apparent: clean water.

In addition to lack of power, hundreds of thousands of Puerto Ricans were living without safe drinking water. In fact, the island’s water sources were already in violation of the Safe Drinking Water Act before Hurricane Maria hit, according to the Natural Resources Defense Council.

“Extending disaster relief efforts continues to pose a challenge for public health leaders, but with continued dedication and partnerships of public health institutions across the world, it may not remain so difficult,” Martin says. “Then as we establish this, we can start partnering with other schools and programs in public health.”

It has been eight months since Hurricane Maria devastated my home island of Puerto Rico, growing up in San Juan’s Condado neighborhood. The oceanfront area is a vibrant and diverse pedestrian-oriented community that, a hub for arts, entertainment and tourists. Hurricane Maria not only ravaged my old neighborhood, it forever changed the lives of millions of Puerto Ricans living on and off the island.

Learning that the island did not have electricity, edible food and clean water, among other human needs, was unfathomable. Carrying the guilt that I am living on the mainland, away from the devastation and family, really salted in the wound.

Today, parts of the island are still experiencing one of the biggest blackouts in U.S. history and many citizens are still without clean water. But students like Liane and PRSA continue to prove that location isn’t a deterrent factor in who can and can’t help those in need.

In my time with the College of Public Health, I am constantly inspired by our community’s willingness to take action. CPH alumni stepped up with great generosity and supported the purchase of items like solar lamps and medical supplies that were distributed to residents in the center of the island, which was particularly devastated.

In addition to PUR technology, environmental scientists at the University of Puerto Rico received Procter and Gamble soap products and buckets for additional distribution. “What a land-grant university like Ohio State can do is work with another land-grant university and find how we can leverage the skills and knowledge that we have in partnership,” Martin says. “It’s a wonderful testament to what is unique about land-grant universities and their commitment to the community.”

When CPH Dean William Martin II, MD, learned of Hurricane Maria’s impact on Puerto Rico, he couldn’t idly watch the island struggle in need of resources. With help from public health leaders and the private sector, Martin spearheaded an initiative to send water-purifying technology to Puerto Rican residents.

“CPH Dean William Martin II, MD”

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UNIFIED FOR PUERTO RICO

BY JOSÉ RODRIGUEZ

From students to faculty and staff to alumni, Public Health Buckeyes recognize a problem and put both feet forward to find a resolution.

José Rodriguez is director of external relations and strategic initiatives at the College of Public Health.
I remember the exact moment I knew I needed to return to Ohio State to get my MPH. I was the LGBTQ health program manager at Columbus Public Health and the health commissioner asked me to prepare a presentation for the board of health that included a reference to “Principles of the Ethical Practice of Public Health.” I had been working in public health for 13 years and was passionate about the field, but I didn’t know this apparently seminal body of work. It was then that I realized my need for a more academic and theoretical knowledge of public health.

Fortunately I came across the Program for Experienced Professionals (PEP) at the College of Public Health and enrolled six months later. The flexibility of the program has allowed me to balance my time as a working parent, and the coursework has complemented my professional experience in countless ways.

From the practical to the theoretical, classes on subjects such as health care organization, strategic change, public health leadership and adolescent health have all augmented my ability to implement public health initiatives in my current role as director of the Institute for LGBTQ Health Equity at Equitas Health.

I am becoming a stronger public health professional because of what I’m learning in the PEP program and the relationships I have developed with faculty. I have a better grasp of the theoretical underpinnings of this profession because of my training, and as such am better prepared for the real-world public health challenges I face on a daily basis.

While it has been a challenge balancing personal, professional and educational obligations, I look forward to adding the letters M-P-H after my name in spring 2019 as an indication of my commitment to the principles that guide our work in public health.

Julia M. Applegate is director of the Institute for LGBTQ Health Equity at Equitas Health in Columbus, Ohio, which focuses on reducing health disparities experienced by the LGBTQ community through educating both patients and providers, supporting public health research with this population and engaging community members. She earned a Master of Arts in women’s, gender and sexuality studies from Ohio State in 1997, and is currently pursuing a Master of Public Health through the College of Public Health’s Program for Experienced Professionals (PEP).

THE STUDENT

By Dan Brook

I fell in love with epidemiology in 2011. I was a freshman at Ohio State and my familiarity with public health was limited to the movie “Contagion” and the Affordable Care Act. After I had the opportunity to meet with and observe some professors at the College of Public Health, I was hooked.

At the time, I was committed to pursuing academic medicine. I had the (false) belief that public health and medicine were separate entities, but after entering medical school I recognized how intertwined public health and medicine are.

I contemplated applying to MPH programs, but after working on a pharmacoeconomics project, I soon realized that level of training wasn’t going to be enough. I decided to go all in and pursue a PhD in epidemiology.

Entering a dual degree program can be a leap. It can be tough to straddle cohorts of classmates or, in my case, leave a group behind entirely as you take a new path in your career. But the rewards are well worth it.

Several dual degree programs exist at Ohio State, however public health stands out because it is inherently an interdisciplinary field. In medicine, I’m being trained to translate public health research, and in public health I’m learning how to translate medical research. These translational skills that I am fostering will undoubtedly help my future as a public health physician-scientist.

Whether your areas of interest have well-worn paths laid by students before you or you’re interested in an entirely new combination, take the plunge and pursue a combined degree. Your career will thank you for it.

Dan Brook is currently pursuing an MD and a PhD in epidemiology in the Medical Scientist Training Program. He is a graduate fellow advisee of William Miller, MD, PhD, MPH, chair of the Division of Epidemiology at CPH. Brook is interested in the intersection of health care services, infectious disease epidemiology and the opioid epidemic.

THE GRADUATE

By Julia Applegate

I remember the exact moment I knew I needed to return to Ohio State to get my MPH. I was the LGBTQ health program manager at Columbus Public Health and the health commissioner asked me to prepare a presentation for the board of health that included a reference to “Principles of the Ethical Practice of Public Health.” I had been working in public health for 15 years and was passionate about the field, but I didn’t know this apparently seminal body of work. It was then that I realized my need for a more academic and theoretical knowledge of public health.

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THE OHIO STATE UNIVERSITY

COLLEGE OF PUBLIC HEALTH
CATHERINE ZAVATSHY RAUMGARDNER, MHA ’86, FACHE
Catherine was recently elected treasurer of The Ohio State University Alumni Association board of directors. She has been an active member of the board for the past two years, having served on the finance committee, chaired the investment committee and co-chaired the planning committee. As an alumna of the Master of Health Administration (MHA) program, Catherine has been an active member of the HSMP Alumni Society, having served on the executive committee and currently on the Management Institute planning committee. Catherine is a 1984 graduate of the Fisher College of Business and a 1986 graduate of the MHA program.

JENNIFER JACKSON, MPH ’10
Jennifer was promoted to lead epidemiologist from Zika epidemiologist at Florida Health in Orange County. She has been invited to present the abstract, “An Outbreak of Human Cases of Campylobacteriosis Linked to Puppies from a National Pet Store Chain – Orange County, Florida, July 2017,” at the 2018 CSTE Annual Conference in West Palm Beach.

ELIZABETH COLEBANK-ANDES, MPH ’17
Elizabeth graduated this spring with her MSN from the university of Cincinnati. She plans to obtain a board certification as an adult-gero acute care nurse practitioner.

ANTON JAMES JOHNSON, MHA ’16
Anton and two of his fellow 2016 MHA alumni, Phil Weiss and Chris Kvale, recently went on an Italian exploration trip together. The trio used the international trip to reunite, rest and professionally challenge each other through reflection and conversation.

ISAAK “IKE” C. FERGUSON, PHD ’74
Isaac and his wife have led volunteer medical training teams to several countries in Africa, Eastern Europe and India since retiring ten years ago. Having worked as the director of humanitarian service at the Thrasher Research Fund, volunteering has been a natural fit. They have been involved in maternal and newborn care, directed national vision screening initiatives for children in Eastern Europe, and prepared physical rehabilitation centers to construct and fit wheelchairs for patients. They have made more than 60 trips to eight countries during their retirement.

JACLYNN MISSLER, MHA ’17
Jaclynn got married in June and soon after accepted an offer of admission to attend Yale University for the graduate entry to medicine program. She will be specializing in family medicine with a concentration in diabetes, and will begin classes in August.

KATHERINE FRIEDMAN, BSPH ’17
Katherine recently became a Refugee AmeriCorps member in the Greater Washington, D.C., area. She works at the Ethiopian Community Development Council, a refugee resettlement agency. Through this position, she helps newly arrived refugees and asylum seekers navigate the U.S. health care system and apply for federal and state assistance programs such as food stamps and Medicaid. She also teaches a twice-weekly English class to some of the female refugees.

CHAD WILLIAM SELMEK, BSPH ’17
Chad recently accepted a new position as OhioHealth as a financial advocate in the post-ED Transition of Care Clinic at Riverside Methodist Hospital.

CYNTHIA ANDERSON, MPH ’14
In January, Cynthia started a new position as the External Quality Review Org (EQRO) contract program manager for the Ohio Department of Medicaid Office of Health Research and Quality.

STEPHANI S. KIM, MPH ’11
Stephani graduated from the University of Cincinnati College of Medicine with a PhD in epidemiology in August. Her dissertation was titled “Informal Electronic Waste Recycling: Metal Concentrations in Pregnant Women and Neonates and Associations with Adverse Birth Outcomes in Guiyu, China.” In September, she began a postdoctoral fellowship at the National Institute of Environmental Health Science’s epidemiology branch.

ZEB PURDIN, MHA ’15
Zeb was hired in February as the business manager for cellular therapy at The Ohio State University Comprehensive Cancer Center – Arthur G. James Cancer Hospital and Richard J. Solove Research Institute. In his role, he manages the administrative aspects of the cellular therapy program, an innovative program at The James using newly FDA-approved CAR-T therapies to treat Lymphoma and Leukemia. He works with pharmaceutical companies, regulatory agencies and other departments at The James to create appropriate workflows for patients and ensure appropriately billing and payment for this new treatment modality.

KRISTEN COWAN, BSPH ’16
Kristen is graduating this spring with her MPH from Emory University.

LESLIE L. MARTIN, MPH ’08, CFRE
Leslie has recently accepted a position as the director of development & major gifts at the Columbus Speech & Hearing Center.

Julia Scheinman ’16 receives the CPH Alumni Society Franklin Banks, William R. Gemma Distinguished Alumni Memorial Award
Julia, who graduated with a Bachelor of Science in Public Health, has served as a disease intervention specialist in the Women’s Health and Family Planning Center at Columbus Public Health. She was offered the full-time position following an internship in the Teen Outreach Program, where she provided comprehensive sexual education to young people between the ages of 12 and 18. In addition to improving the lives of Ohioans, her role has been another step toward her dream of working in women’s health.

In her acceptance speech in October, Scheinman shared her experience seeing the impact of her work through young people she has taught so far in her career. “These moments that I’m sharing with you are rarely public,” Julia thoughtfully shared with the audience. “This is part of the reason why I call those in public health ‘unsung heroes.’ That’s why receiving this recognition today is so meaningful and so extraordinary.”

Julia has been accepted to the Yale School of Nursing where she’ll begin in August.
CaniSe Y. Bean, MPH ‘95
CaniSe was named the recipient of the ADEAGies Foundation Award for Vision-Dental Educator. The Gies awards are named after the legendary biochemist and founder of the Columbia University College of Dental Medicine, William J. Gies, PhD, who is considered the father of modern dentistry. Award recipients are honored for exemplifying the highest standards in oral health and dental education, research, and leadership. Canise received her award at the 2018 American Dental Education Association (ADEA) Annual Session and Exhibition in Orlando in March.

Jim Hartman, MS ‘92
Jim retired from Columbus Public Health in 2014, and will be swimming at the Gay Games 10 in Paris in August.
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- Mike Smeltzer ’70

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