EMORY

FALL 2009

Public Health

Rollins School of Public Health

Picture of

Global Health

Improving lives

from Atlanta and the Americas to Africa and Asia

Students Respond to H1N1 | Clinic of Hope

Asian Men and HIV

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On the Cover

Brian Chu 09MPH was amazed by the women he met in Ghana in summer 2008. His photo depicts the son of a Ghanian woman with Health Keepers, a group that purchases and resells health protection items such as mosquito nets and water treatment tablets. Chu's photo was

among the 2009 winners in the Emory Global Health Institute's student photography contest. In the photo above, Chu assists during a Health Keepers presentation. A Dean's Council Scholar, Chu now works on lymphatic filariasis with the Task Force for Global Health.



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EMORY | Public Health

Rollins School of Public Health

FALL 2009



The True Meaning of Grace

Grace Crum Rollins believed in better health for all.

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This year, nearly half of all MPH applicants sought to enter our global programs. We also experienced a record increase in the total number of new students enrolled in our school.

A new vision of global health

We began this academic year by celebrating the magnificent life of Grace Crum Rollins. Her philanthropy and vision and that of the entire Rollins family are largely responsible for the success and rapid growth of the Rollins School of Public Health. Mrs. Rollins took great pride in our accomplishments, including those related to global health.

Our faculty, students, and alumni are helping shape a world that is less defined by geographic boundaries and increasingly defined by common challenges. Infectious disease expert Carlos del Rio, Hubert Professor and Chair of the Hubert Department of Global Health, conducts research, trains clinicians, and promotes care for globally diverse patients at Grady Memorial Hospital. The scope of his work extends beyond Atlanta to Mexico, Ethiopia, and other countries. Behavioral scientist Frank Wong seeks to prevent AIDs among Asian men in China and in the United States. Alumnus Alawode Oladele helps refugees begin life anew by providing medical care at the clinic he directs in DeKalb County. Nick Schaad and Michael Marrone were among the more than 80 students who volunteered to work at the CDC following the HINI outbreak last spring.

More and more students are seeking careers in global health. Nearly half of all MPH applicants sought to enter our global programs this year. We also experienced a record increase in the total number of new students enrolled in our school. Their interest reflects how they viewed the world as children and how they see it today—a place where there are no limits to improving health for everyone.

Sincerely,

James W. Curran, MD, MPH

Dean



The true meaning of

he was quiet and small in stature but firm in her beliefs. Grace Crum Rollins made good on her late husband's interest in helping construct a building to house Emory's School of Public Health. In 1994, the Grace Crum Rollins Building became the permanent home for the school that Emory named for her extraordinary family.

Mrs. Rollins, whose generosity led the Rollins School of Public Health to become one of the nation's premier schools in its field, died on August 8 at age 98.

"Essentially, the school would not be what it is today without her family," says RSPH Dean James Curran. "Our faculty, students, and alumni are part of her legacy." grace

GRACE CRUM ROLLINS BELIEVED
IN BETTER HEALTH FOR ALL

That legacy began when Grace Crum married O. Wayne Rollins during the Depression. Both grew up in rural communities and shared values steeped in family, faith, and hard work. They lived simply and never bought anything on credit. When Wayne was hospitalized for an appendectomy, Grace knitted to pay his bill.

Success came in the 1940s, when Wayne built his first radio station in Virginia, one of many that he and his brother John would own. Years later,

Forbes magazine would count Wayne among the nation's greatest business leaders. In what is considered one of the first leveraged buyouts, Wayne bought Orkin Exterminating in 1964. The family business grew to encompass oil and gas services, security systems, and real estate.

Also in 1964, Wayne and Grace moved to Atlanta with their sons Randall and Gary. The couple became involved at Emory through the Candler School of Theology and Wayne's role as a university trustee.





Previous page: Grace Crum Rollins breaks ground in 1993 on the school's first building, named in her honor. Above left: In 1990, O. Wayne and Grace Rollins dedicate the Rollins Research Center for biomedical research. Above right: Born in rural Tennessee, Mrs. Rollins was grounded in family, faith, and hard work. Right: Mrs. Rollins and her sons, Randall (left) and Gary, shared Wayne Rollins' commitment to improving health.

With a lead gift to the School of Medicine, they enabled construction of the O. Wayne Rollins Research Center, doubling Emory's laboratory space. Upon learning that the school of public health needed a building, Wayne voiced his support for a new facility but died unexpectedly in 1991. Less than a year after his death, Grace and her sons fulfilled his interest by contributing \$10 million for construction.

Other gifts followed. The family funded the O. Wayne and Grace Crum Rollins Endowment for faculty development and the Center for Public Health Preparedness and Research. In 2007, the family provided a \$50 million lead gift from the O. Wayne Rollins Foundation and Mrs. Rollins for a second RSPH building to be connected to the Grace Crum Rollins Building by a glass corridor. The Claudia Nance Rollins Building, named for Wayne's mother, will open in 2010 and more than double the physical

size of the school.

While Mrs. Rollins' husband was one of the nation's most successful businessmen, she preferred family life, gardening, and

painting to the spotlight. Her family was her greatest joy—sons Randall and Gary (Emory trustee emeritus and trustee, respectively), 10 grand-children (including her late grand-daughter, for whom the school's Rita Anne Rollins Room is named), and 24 great-grandchildren.

In 1995, the year that Mrs. Rollins turned 85, she attended the dedication of the school's first building and received an honorary degree from Emory. Later that year, she met James Curran, who had become dean. When they toured the building together, she pointed out the plantings. "She told me they could be improved with a little hard work," recalls Curran. For her 90th birthday

in 2000, the school dedicated the Grace Crum Rollins Garden, now a shady spot for students and faculty.

The idea of creating a public health building in 1990 appealed to Wayne Rollins' entrepreneurial spirit. With just 20 faculty and 300 graduates, it was a risky endeavor. "Mrs. Rollins shared his commitment," Curran says. "Today the school has more than 180 faculty and 5,000 alumni in 90 countries."

"Each morning, when I go to my office, I pass by a portrait of Mrs. Rollins," he adds. "It reminds me of the importance of hard work, family loyalty, strong values, and the true meaning of grace and generosity."

—Pam Auchmutey
■

Passing the torch

Lance Waller and Michael Kutner

have much in common. Both have spent their careers identifying and quantifying patterns of disease occurrence. Their life's work is more closely aligned now that Waller succeeds Kutner as Rollins Professor and Chair of the Department of

Biostatistics and Bioinformatics.

Waller leads a department that has become integral to clinical and scientific research throughout the Woodruff Health Sciences Center. "Emory researchers in a range of disciplines, including predictive health, oncology, and

HIV/AIDS, increasingly turn to biostatistics to aid their research efforts," says RSPH Dean James Curran.

Waller's own research involves the assessment of spatial clustering to identify and track disease occurrence, linking spatial statistics and geographic information systems to map disease patterns, statistical assessments to understand differences between environmental exposure and risk, and hierarchical methods for modeling small-area health statistics.

"The most effective programs in biostatistics grow and adapt in concert with new measurement methods and the new research possibilities enabled by them," says Waller. "Making sense of complex data in accurate, reliable, and interpretable ways is our primary goal." Waller also serves as associate director of the Center for Comprehensive Informatics (CCI), based in the Woodruff Health Sciences Center. Through the CCI, the RSPH collaborates with researchers in medicine, nursing, and other disciplines at Emory and those at institu-

academic affairs. He left in 1994 to build the epidemiology and biostatistics department at the Cleveland Clinic. After returning to the RSPH in 2000, he was appointed Rollins Professor and Chair in 2004.

Although he has stepped down as chair, Kutner will continue to teach and conduct research with the Emory Center for Health in Aging, the Atlanta VA Medical Center, and other partners. He plans to revise his textbooks on *Applied Linear Regression Models* and *Applied Linear Statistical Models*. Just recently, he





Lance Waller (left), Rollins Professor and Chair of biostatistics and bioinformatics, spoke at a reception honoring his predecessor, Michael Kutner. Among other mementos, Kutner received a box of Special K as a token of affection from faculty and students who call him "Dr. K." The school also created the Michael H. Kutner Fund to support the professional development of biostatistics students.

tions like Georgia Tech to capture and analyze biomedical data. The department began working with the CCI during Kutner's tenure as chair, prompting the addition of the word "bioinformatics" to its name.

Such changes are nothing new in Emory biostatistics. In 1971, Kutner joined the Department of Biometry in the School of Medicine. When the department moved to the RSPH in 1990, so did Kutner as director of the Division of Biostatistics and the RSPH's first associate dean for

added the 2009 Mu Sigma Rho Statistical Education Award to his long list of national honors.

To recognize his contributions to his profession and the RSPH, the school created the Michael H. Kutner Fund to support the professional development of master's and doctoral students.

"I'm thrilled to turn the department chair over to Dr. Waller," says Kutner. "I'm confident that he will do an excellent job in taking our department to new and greater heights."

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A milestone in global health

William Foege knows how to build coalitions. The renowned epidemiologist finessed the art of bringing people together by working in West Africa to eradicate smallpox, strengthening U.S. public health efforts as CDC director, and promoting peace and health globally as execu-

tive director of The Carter Center.

In 1984, he co-founded the Task Force for Child Survival by rallying WHO, UNICEF, the World Bank, the Rockefeller Foundation, and the UN Development Program as partners to increase the childhood vaccination rate worldwide from 20% to 80%. The partners met their goal ahead of schedule, proving that a coalition could achieve what no single organization could on its own.

Foege, RSPH Presidential Distinguished Professor Emeritus, was among those who gathered at Task Force headquarters last spring to celebrate the organization's 25th anniversary. Now directed by RSPH adjunct professor Mark Rosenberg, Task Force programs help eradicate polio, strengthen public policy to improve road safety worldwide, develop public health information

systems, train child care providers in parenting skills and child development, and protect communities from neglected tropical diseases such as river blindness, lymphatic filariasis, and trachoma.

During the past year, the Task Force moved its 50-plus staff members into a permanent home in Decatur, Georgia, and changed its name to the Task Force for Global Health. Two established international programs—the Training Programs in Epidemiology and Public Health Interventions Network and the International Trachoma Initiative joined the organization, bringing the total number of programs to 10. It also secured a commitment from Pfizer to donate more than \$1 billion worth of the drug Zithromax to help eliminate trachoma worldwide.

"Our growth, in part, is due to our ability to bring organizations and programs together under one roof and generate discussion and collaboration that save lives and change health policy," says Rosenberg.

True to its mission, the Task Force works closely with the private sector, international organizations, and lo-



Top left: James Curran (left) and William Foege view an exhibit on the Task Force for Global Health. Top right: Task Force director Mark Rosenberg serves on the RSPH faculty. Bottom right: Alan Hinman (left), shown with Bill Watson, also teaches at Rollins.

cal partners such as the CDC, CARE, The Carter Center, and Emory. Since 2007, four fellows and 20 interns from the RSPH have worked with the Task Force. Dean James Curran serves on its board of directors. Rosenberg and other Task Force staff teach as adjunct faculty at Rollins.

"Dean Curran's participation on our board helps us link with student interns, faculty interested in participating in our work, and other joint initiatives," says Rosenberg. "With every program, and through our partnerships in global health, the Task Force increases the depth and breadth of its outreach to those in need."

Center targets cardiometabolic diseases

Worldwide, more people in developing countries die of cardiovascular disease and diabetes than malaria, HIV, and tuberculosis combined. Emory and the Public Health Foundation of India (PHFI) lead a new effort targeting this group of costly, chronic, and potentially debilitating diseases.

The Global Center of Excellence for Prevention and Control of Cardiometabolic Diseases in South Asia will be based at PHFI in New Delhi. Researchers there and at Emory will study the burden and risk factors for cardiovascular disease and diabetes in India and Pakistan and develop intervention strategies for prevention and control. Faculty also will train young scientists in both countries in cardiovascular epidemiology research.

The center is one of nine similar centers funded by the National

Heart, Lung, and Blood Institute. Additional funds from the Ovations Chronic Disease Initiative of the UnitedHealth Group will support the PHFI/Emory center.

To begin their studies, researchers will establish three surveillance cohorts in New Delhi and Chennai, India, and in Karachi, Pakistan, to survey 4,000 people in each city for heart disease and its risk factors. Investigators will follow them over time to determine the rate and predictors of developing heart disease.

In another study, researchers will recruit 1,200 people living with diabetes in eight locations in India and Pakistan to test the effectiveness of various diabetes and heart disease treatment and care-delivery strategies.

The strategies behind the center's research are twofold, says K.M. Ven-



kat Narayan, Ruth and O.C. Hubert Professor of Global Health and Epidemiology and U.S. lead investigator. "First, we want to understand the occurrence and burdens associated with heart disease and diabetes to identify those who are at high risk for these conditions. Second, once someone develops diabetes, we want to control the disease and prevent its severe and ofen life-threatening complications."

Narayan and Dorairaj Prabhakaran, PHFI lead investigator, know the disease statistics well. India, Pakistan, and Bangladesh are among the top 10 countries in the world with the most diabetes cases. South Asia has the highest number of diabetesrelated deaths in a region, and Asian Indians are projected to account for 40% to 60% of the global cardiovascular disease burden over the next 10 to 15 years. In India, 35% of cardiovascular disease-related deaths occur in people ages 35 to 64. In the United States, the rate for the same age group is 12%.

Healthy growth spurt

The recent downturn in the economy hasn't kept the RSPH from growing, notes RSPH Dean James Curran. The new Claudia Nance Rollins Building (right), on schedule and slightly under budget, will be ready for students next fall. During the past 18 months, the number of full-time faculty has grown by more than 10%. This fall, the RSPH enrolled the largest number of new students ever. As of September, the school had 444 new students, a 24.7% increase over last year. Total enrollment is 992 students, including



Kara Brown Robinson, assistant dean for admissions and recruitment, credits the increase to growing interest in public health and global health-related programs among the current generation of students.

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HIV specialist **CARLOS DEL RIO** bridges patients and populations as chair of the Hubert Department of Global Health

BY PAM AUCHMUTEY

THE WORLD SHIFTED LAST APRIL FOR CARLOS DEL RIO.

The Emory infectious disease expert and medical faculty member was named Hubert Professor and Chair of the Hubert Department of Global Health. Later that month, he boarded a plane for Mexico to assist colleagues there with the HINI influenza outbreak.

honor the wishes of the late O.C. Hubert, who asked that his estate be used to help people who were hungry and sick. Thanks to the guidance of William Foege, currently Presidential Distinguished Scholar and professor emeritus of global health, the Hubert Foundation chose to focus on



Above: The RSPH has been a good fit for the foundation led by Richard Hubert (center), who visited recently with Solveig Argeseanu, assistant professor of global health, and Carlos del Rio. Above right: Del Rio rejoined Emory in 1996 to help ramp up its efforts in HIV/AIDS.

The shift was not as dramatic as it might seem. "I've been doing global health work for a long time," says del Rio, a native of Mexico and former chief of medicine at Grady Memorial Hospital. "Two of my main areas of interest are health disparities and global health. The work I was doing at Grady was related to global health here in Atlanta.

"What is different is that I've moved from an environment in the medical school that primarily focuses on the patient to an environment in the school of public health that primarily focuses on populations."

The chair that del Rio holds was made possible by a gift from the Hubert Foundation. To date, the foundation has given and pledged more than \$13 million to the RSPH. The foundation was created to



improving health globally through the RSPH. In 2006, the school named its global health department for the Hubert family in appreciation of their support.

"It thrills me through

and through to think of what we've been able to do," says Atlanta attorney Richard Hubert, who is O.C.'s son. "Dr. del Rio has the right talent to carry out my father's wishes to change lives."

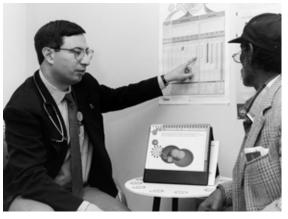
Del Rio's curiosity about health and a world without borders emerged early on. He is the son of a Mexico Supreme Court chief justice and diplomat and the grandson of a physician turned diplomat. In junior high school, del Rio read *Microbe Hunters*, Paul de Kruif's classic about Louis Pasteur and other microbiology heroes. "That book clearly made a difference to me," he says. "That's the kind of book you read and think, 'That's what I want to do.' "

After earning his medical degree in Mexico, del Rio completed his residency

and fellowship training at Emory. His views on health disparities deepened through daily contact with underserved patients at Grady. Later, he went on to serve as executive director of the National AIDS Council of Mexico, where he developed programs to control spread of the disease. "I learned about public health and global health through HIV," he says.

expert who mentored del Rio during his fellowship—asked for his help on an NIH grant application to create a Center for AIDS Research (CFAR) based at Emory. Today, the Emory CFAR, led by Curran, del Rio, and pathologist and vaccine development specialist Eric Hunter, includes more than 100 scientists and clinicians who have garnered \$59 million for research.

with severe pneumonia and you find that they're infected with HIV and already have AIDS, there has been a failure of public health to prevent them from getting infected and from being diagnosed to prevent them from getting sick," says del Rio. "If we were successful at prevention, we wouldn't see these patients coming to the hospital. That's the challenge that public health faces in this country.







L-R: Carlos del Rio insructs a patient at Grady Hospital, congratulates winners after the Team Emory bike ride to support HIV/AIDS research, meets with former U.S. President Jimmy Carter, and talks with Richard Hubert.

It was through the National AIDS Council that del Rio came to know RSPH Dean James Curran, then chair of the CDC's Task Force on AIDS. Through the council's collaborations with WHO, del Rio saw a global catastrophe in the making. In 1996, he returned to Emory to help ramp up its efforts in HIV/AIDS prevention and treatment.

Thus he began doing what some jokingly describe as the work of three people. He taught students, residents, and fellows in the School of Medicine. He served on the adjunct faculty in the RSPH. He conducted research on HIV/AIDS, TB, hepatitis, influenza, and other infectious diseases. He treated patients with the same diseases at Grady Hospital and at the Ponce de Leon Center, Grady's outpatient clinic for patients with HIV. And more.

One day, Curran and David Stephens—the infectious disease This past summer, del Rio became the Emory site leader for the NIH-sponsored HIV Prevention Trials Network (HPTN). The worldwide collaborative develops and tests non-vaccine interventions designed to prevent HIV transmission. For the next three years, CFAR investigators will conduct clinical trials at the Ponce Center and at the Hope Clinic, part of the Emory Vaccine Center.

"Antiretroviral therapy has saved countless lives over the past decade, and intensive research is under way to discover an HIV vaccine," notes del Rio. "But the biggest impact on the disease comes from preventing transmission."

Remember the "P" word

Developing effective HIV prevention and intervention programs in the most affected communities is a challenge globally as well as locally. "Every time a patient comes to Grady

There ought to be incentives for people to stay healthy instead of barriers to staying healthy."

More daunting is preventing disease on a global scale, much of which rests on changing unhealthy behaviors related to diet, exercise, smoking, and sex. "We know very little about how to implement population-wide behavior change," he says, "and we need to learn more."

Growing human capital to strengthen research capacity in resource-constrained countries is also key. Since 1998, the NIH/Fogarty International Center has funded the Emory Aids Training and Research Program (AITRP) to build capacity in Armenia, the Republic of Georgia, Ethiopia, Mexico, Rwanda, Vietnam, and Zambia. Led by del Rio, AITRP brings a select group of young scientists to Emory each year for advanced training. Emory faculty also train and mentor scientists in these countries.

The training program has opened avenues to improving health. In Ethiopia, del Rio helped expand HIV testing among the police force and bring antiretroviral therapy into the community for people living with HIV. In the Republic of Georgia, the Emory AITRP and the Emory-Georgia Tuberculosis Research Training Program, another NIH/Fogarty program led by RSPH adjunct faculty member Henry Blumberg, has helped build research capacity in HIV,



hepatitis, and tuberculosis research.

Their efforts have made a difference. Del Rio was among four U.S. university researchers honored by Republic of Georgia First Lady Sandra Roelofs for a decade of work to combat AIDs. That level of political engagement, del Rio notes, is critical to halting AIDs and other diseases. "To be effective, we need strong partners."

Del Rio intends to expand partnerships and resources to benefit the global health department in multiple ways: Growing the number of new faculty. Increasing research. Expanding collaborations with the School of Medicine and other partners in Atlanta and around the world. And meeting students' rising expectations. Over the past two years, global health spurred 80% of the increase in school enrollment.

"The growing interest in global health among students and trainees is amazing," says del Rio. "This is a generation of people who think globally, who continuously think about addressing diseases in other countries. The challenge is how to use that energy effectively for meaningful change in the community and in the world."



BUILDING GLOBAL HEALTH CAPITAL

Reynaldo Martorell has never strayed far from his roots. He grew up in Honduras, one of the poorest countries in the Americas. His family was more fortunate than most. His father worked for a multinational banana company, which provided a steady income, food to eat, running water, a place to live. But Martorell remembers how poverty and poor diet affected the lives of other families, especially their children.

His concern for their health led him to study nutritional problems in developing countries. For the past 12 years, he also chaired the Hubert Department of Global Health, a role he relinquished last spring to focus more on research.

When he first arrived at the school, the "department" he joined was called the Center for International Health.

As the department evolved, so did its name—from "center" to the Department of International Health, the Department of Global Health, and now the Hubert Department of Global Health.

The only endowed department at Emory and the only named department at a U.S. school of public health, the Hubert Department of Global Health has earned a reputation as one of the best in the world. Teaching and research strengths include infectious and chronic diseases, population and reproductive health, community health, and nutrition.

As his departmental responsibilities grew, Martorell maintained an active research portfolio and partnered with several foundations and agencies. He continues to collaborate on a landmark

longitudinal study in Guatemala to assess how childhood nutrition affects health and quality of life in adulthood. In an article published last year in *The Lancet*, Martorell and his colleagues showed a direct link between nutrition intervention during early childhood and income. Among other findings, the team showed that improving childhood nutrition during the first two years of life increased the wages of adult men by 46%. Martorell regards the paper as the most influential of the study, ongoing since 1969.

In earlier articles on the study, "We showed that childhood nutrition influenced adult body size and health, and that it was also related to cognitive development and schooling," he says. "In the Lancet paper, there was a direct link to income. We've been pursuing the argument that investing in early childhood nutrition is a long-term economic investment because it builds human capital. It produces people with greater potential to be economically productive."

More studies are pending, such as one examining the long-term effects of the 1959 to 1961 famine in China on adult health and human capital. A study currently in the planning stage will analyze the implementation of maternal nutrition intervention programs in Ethiopia, Nigeria, and India.

"I'm very happy to have been chair of the department, but it's time to put more effort into research," says Martorell. "It's a great time because so many opportunities in global health await."—Pam Auchmutey

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STUDENTS AND FACULTY AID THE CDC DURING THE **H1N1 OUTBREAK**

READ

By Robin Tricoles

When it comes to disease outbreaks, Rollins has the expertise and manpower to help. Last spring, as HINI avian influenza spread, first in Mexico and then across the globe, the CDC put out a call asking students to assist. Within three days, 85 RSPH students had volunteered.

Nick Schaad was among the students authorized to help man the CDC's Emergency Operations Center at the height of the HINI outbreak. Schaad volunteered as part of the Student Outreach Response Team, whose members help bridge the gap between classroom theories and the realities of public health practice.

Once the CDC began to identify influenza clusters, students began conducting phone surveys. "I was involved in the St. Francis prep school survey in New York," says Schaad. "Students and staff members who were sick with any flu-like symptoms were identified. We called them and asked about the size of their household, what they might have done to protect themselves, and any recent travel. Our goal was to learn as much as possible about HINI in

advance of the fall flu season."

Schaad's experience at the CDC reenforced what he learned during his first year at Rollins. "I had a class in survey methods, and it applied directly to my work at CDC, everything from the training we went through to how we phrased the survey questions. My work at CDC also helped me get ready for my practicum this summer. I worked in northern Sri Lanka with the CDC's International Emergency and Refugee Health Branch to conduct surveys on mortality and general health."

"I was involved in the St. Francis prep school survey in New York... Our goal was to learn as much as possible about H1N1 in advance of the fall flu season."

-Nick Schaad, student volunteer at the CDC



Left: After they volunteered, RSPH students Nick Schaad (left) and Michael Marrone were authorized to work in the CDC's Emergency Operations Center following the H1N1 outbreak. The experience built on their classroom knowledge of survey methods. Above: Keith Klugman, an expert on bacterial pneumonia, was tapped by the CDC to serve on a team of outside experts to help inform the agency's response efforts.

Like the students they teach, RSPH faculty are helping and learning as much as they can regarding HINI. In April, the CDC tapped three faculty members to serve on Team B. A strategic concept developed by the CDC in the early 2000s to cope with the growing complexity of public health emergencies, Team B includes experts from outside the CDC to quickly review and inform the agency's efforts.

Keith Klugman was a natural choice for HINI. Klugman, a physician and microbiologist who holds the William H. Foege Chair in Global Health, is regarded as the world's leading expert on bacterial pneumonia. Understanding the bacterial complications of viral flu is vital to diminishing its lethality. RSPH experts Ruth Berkelman (emergency preparedness) and Carlos del Rio (infectious disease) also served on Team B.

"My role included the bacterial complications of influenza," says Klugman. "We reviewed and commented on the CDC's policies before they were made public. Members also had an opportunity to identify aspects of the epidemic for which we thought CDC ought to develop policy, and the CDC has been very responsive to our suggestions."

A key policy area that must be developed: methods to get the most out of available immunizations once flu season begins.

12 | public health magazine | fall 2009 fall 2009 | public health magazine | 13 One method includes vaccinating young babies for flu and for pneumococcal infections. Not only does this immunization protect babies, it protects adults as well.

"Young babies and children seem to be the key to flu transmission," says Klugman. "If you can immunize the majority of young infants, you may reduce the transmission in the population as a whole."

Klugman cautions that HINI'S epidemiology may be different from that of past flu viruses. So far, this strain seems to affect younger people

model, the vaccine, depending on certain assumptions, can save many hundreds, thousands, or even millions of lives depending on the extent to which the influenza is leading to complicated bacterial pneumonias.

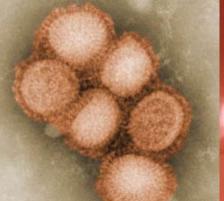
"Evidence from 1918 clearly shows that the great majority of deaths were due to bacterial complications of the flu," he adds. "In other words, the flu itself could occasionally cause death on its own. But it caused death mostly by facilitating a synergistic lethality between itself and bacteria."

is a massive interaction between HIV and bacterial infections," says Klugman. "If bacterial infections increased in association with flu, HIV-infected people would be at particular risk."

A world of unknowns

Health officials worldwide are concerned about HINI's responsiveness to treatment, its virulence, and its lethality when combined with underlying bacterial infections, especially in the developing world. Thus far, who has categorized the HINI pandemic as moderate.





"Evidence from 1918 clearly shows that the great majority of deaths were due to bacterial complications of the flu."

—Keith Klugman, William H. Foege Chair in Global Health

more than older and thus affects which demographic group should be targeted for immunization.

Along with collaborators at Harvard, Klugman is developing a model to measure the impact of vaccinating particular populations against pneumococcal disease. The model will show not only the vaccination's economic impact but how it affects morbidity and mortality associated with influenza pandemic. Influenza is often associated with pneumococcal pneumonia, especially in the young and elderly.

"We used the 1918 flu pandemic as a model but updated it to include the introduction of antibiotics," says Klugman. "The model showed that vaccinating children would be highly cost-effective in the advent of a pandemic and even during an endemic flu season. What's more, in the pandemic

moniae (left). While antibiotics can fight infection, vulnerable populations are still likely to suffer.

The H1N1 virus strain (center) can lead to bacterial infections caused by Streptococcus pneu-

Much has changed in fighting flu since 1918. The bacteria that caused so many deaths still exist but are susceptible to antibiotics. Yet vulnerable people and populations especially are likely to suffer.

"I'm concerned about deaths related to bacterial infections in the developing world," says Klugman.
"As hini influenza spreads into Africa and into parts of Southeast Asia, then questions about access to antibiotics become important. I would expect morbidity and mortality associated with bacterial super infections to increase."

Experts have yet to know how the HINI virus interacts with HIV, a great concern in Africa. "Certainly there

"The major risk in the Southern Hemisphere and the poorer parts of the world depends on what treatment is available should one become very ill," says Klugman. Patient access to respirators is just one example.

"We're witnessing the evolution of the flu," he adds. "It's generally been moderate. By mixing with the circulating flu in the Southern Hemisphere, it could mutate and become resistant to the first line of flu drugs. It could also become more severe." By September, nearly 600 deaths from HINI had occurred in the United States, where the peak flu season has yet to begin. Says Klugman, "We must remain ever vigilant."

S. pneumoniae (left and right): CDC/Richard Facklam; Flu (centen): CDC / C. S. Goldsmith and A. Balish



n outbreak of measles in the state of Washington last year sickened 19 children. Of those who fell ill, 18 had something in common—they were not vaccinated.

For RSPH researcher Saad Omer, the Washington outbreak is a perfect example of the effect on an entire community when individuals are unimmunized. His research aims to shed light on ways to encourage increased vaccine compliance for adults and their children.

"Vaccine-preventable diseases such as measles, influenza, and pertussis often start among persons who forego vaccinations, spread rapidly within unvaccinated populations, and also spread to other subpopulations," says Omer, assistant professor of global health in the RSPH and an affiliate faculty member of the Emory Vaccine Center. "Everyone benefits from vaccines."

In a recent *New England Journal of Medicine* article, Omer and his colleagues reviewed evidence from several states showing that vaccine refusal due to nonmedical reasons puts children in communities with high rates of refusal at higher risk for infectious diseases such as measles and whooping cough.

Even children whose parents do not refuse vaccination are put at risk because "herd immunity" normally protects children who are too young to be vaccinated, who can't be vaccinated for medical reasons, or whose immune systems do not respond sufficiently to vaccination.

"Research findings indicate that everyone who lives

Saad Omer aims to increase vaccine compliance to prevent childhood diseases.

Why Vaccine Compliance Matters

THOSE WHO REFUSE PUT OTHERS AT RISK OF DISEASE

By Ashante Dobbs

in a community with a high proportion of unvaccinated individuals has an elevated risk of developing a vaccinepreventable disease," says Omer.

In addition to his work on vaccine refusals, Omer is looking at the impact on infants of immunizing their mothers against seasonal flu. A clinical trial in Bangladesh, in which mothers were vaccinated for flu, showed promise in protecting their infants, who were too young to be vaccinated. His work there has important implications not just for mothers and young children in developing countries but also for those in developed countries such as the United States because there is no approved vaccine for infants younger than 6 months.

"People don't realize that flu kills," says Omer. "Even seasonal flu kills, and the elderly and very young are especially at risk."

Omer trained as a physician in Pakistan and taught at Johns Hopkins, where he participated in studies in Africa and Asia related to HIV in mothers and infants.

Upon joining the RSPH last year, he received a Faculty Distinction Fund Award from the Emory Global Health Institute. These awards help bring scholars to Emory who are intent on developing successful global health programs. This year, he received the Maurice R. Hilleman Early-Stage Career Investigator Award from the National Foundation for Infectious Diseases, named for the late microbiologist who contributed to the development of several vaccines still in use today.

"Vaccines are one of the most effective tools available for preventing disease in humans, particularly children," says Omer. "Maintaining high levels of vaccine coverage will ensure that we maintain gains already made to eradicate important childhood diseases."

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CHINA'S

ENVIRONMENTAL BLACK BOX

By Kay Torrance



Justin Remais looks at climate change to understand how snail fever spreads from village to village

mall and slow, snails are paid little heed in the developed world. In poorer countries, the tiny creatures create big havoc—they are the middlemen in schistosomiasis transmission, the most prevalent tropical disease in the world after malaria. Despite their role in carrying the disease, snails have been largely overlooked in international efforts to control schistosomiasis. Environmental health researcher Justin Remais wants to give snails their place in the sun.

Justin Remais travels regularly to rural Sichuan to study the transmission of schistosomiasis or "snail fever." Remais, who heads the RSPH's Global Environmental Health Program, is researching how environmental phenomena such as climate change can allow schistosomiasis to gain

new ground. He wants to unlock the "black box" of schistosomiasis: How does the parasite move from village to village, from province to province? The perfect place to look is in Sichuan, China.

Schistosomiasis is nicknamed "snail fever" for good reason. Snails host the parasite that causes the disease. When the snails shed the parasite into fresh water, it penetrates the skin of farm animals and people, form worms, and lay eggs that cause fever, abdominal pain, diarrhea, and

enlargement of the liver and spleen. Children may experience stunted growth and cognitive development. Severe cases can lead to bladder cancer, liver disease, and death.

For years, efforts to control schistosomiasis have centered on a oncea-year oral medication, praziquantel. While praziquantel is inexpensive, a more sustainable approach is to target the parasite's environment.

"Treating people is absolutely necessary, but treatment programs are difficult and expensive to sustain," says Remais. "The lack of sanitation in many of the affected areas allows the disease to kick-start again. We have to treat the disease as an environmental problem."

Schistosomiasis has plagued China for centuries, and while the disease cannot be eradicated, it can be controlled. Prior to 1950, more than 10 million people were believed to be infected. In the late 1950s, Chinese leader Mao Tse-tung sent teams of people armed with sharpened chopsticks to spear snails. The effort resulted in several million fewer cases. Today, less than 1 million Chinese are infected.

In the 1990s, a World Bank program in a number of China's provinces that focused on pharmaceutical treatment made substantial progress. The decline in disease even led to economic development in the affected areas. In recent years, however, the disease has re-emerged, including in the Sichuan province. Because of climate change, poor sanitation, and other factors, communities that had achieved control through drug treatment were ripe for reinfection.

Sichuan is an ideal "environmental soup" in which to study schistosomiasis, Remais says. The province is mostly poor and rural. Some infrastructure improvements have been made, such as lining irrigation ditches with concrete (thus eliminating the wet soil in which snails thrive) and installing

plumbing for

Students are developing new methods to detect schistosomiasis. Right: Yiliu Chen prepares for a tracer study. Far right: lan Spain sets up a device to collect the parasites that cause the disease.

running water. These projects have yet to spread widely. Moreover, little coordination occurs between local government departments such as public works and public health. As a result, some areas in the province have seen schistosomiasis outbreaks while others have not.

This long history of control programs has left Sichuan's citizens "intervention-fatigued," says Remais. Many times, entire villages were given praziquantel when only a few cases emerged. The drug can cause side effects: drowsiness, stomach cramps, sweating, and diarrhea.

While farmers could wear boots and long gloves to avoid infection, many eschew them because of the subtropical climate. So they continue to walk unheeded in the infected water that fills their rice fields.

How to conquer snails

Remais and a team of graduate students make the trip to Sichuan every summer, digging up snails, characterizing the environment, interviewing villagers, and bringing local government departments together. They've dotted thousands of snail shells with

nail polish to determine how far the snails travel and when their numbers increase. Dissecting the snails also extracts genetic information about where they have lived and under what conditions.

This past summer, Ian Spain

This past summer, Ian Spain 10MPH evaluated bio-gas systems,

their greenhouse gas emissions."

Caitlin Worrell IOMPH is developing a new method for detecting parasites in water. The current method, the mouse bioassay, requires exposing mice to contaminated water and then examining them for the parasite. The new method involves filtering water



which destroy parasite ova. The systems, popular throughout China, use animal and human waste to produce methane gas, which, in turn, is used

to cook and heat homes. Anaerobic bacteria do all the work in these systems, breaking down the waste and emitting methane gas which is then piped off to the house. Since the eggs that cause schistosomiasis are destroyed in system, the infection chain is halted.

Because methane is a greenhouse gas, Spain seeks to determine whether the systems are leaking significant amounts.

"To date, no one has done a complete leak evaluation of these systems," Spain says. "The Chinese government has been promoting the systems' construction but lacks the funding to offer the systems to every family, and many families cannot afford them on their own. With my project, I am hoping to draw attention to this funding gap and to possibly promote the systems as viable carbon offset investments by quantifying



through a silk membrane, intended to trap the parasite. Remais hopes to obviate the need for mouse bioassays and examining water samples under the microscope, both of which involve great expense and time.

All of these efforts yield data that Remais melds into a mathematical model fine-tuned to predict outcomes. Key environmental factors are plugged in, such as temperature, water flow, vegetation, and topography, to determine schistosomiasis risk across the region.

He hopes that his work on schistosomiasis will allow him and other public health leaders to track how the parasite moves from water source to water source, from village to village, to better predict and ultimately prevent the spread of disease, now and in a future certain to include major changes to China's environment.

Alawode Oladele helps refugees begin life anew

CLINIC OF HOR

By Pam Auchmutey

he patients who visit the clinic run by Alawode Oladele 93MPH have been through a lot. Most have just arrived in DeKalb County to escape war, torture, and persecution in other nations.

Oladele, medical director of county-wide services for the DeKalb County Board of Health, helps ensure that the 1,000 to 2,000 refugees screened yearly at the clinic begin their new lives as healthy as possible. "We sometimes forget that refugees have quite a task before them," says Oladele, also known as "Dr. O."

Today, nearly 10% of Georgia residents speak a language other than English in their households. Of the more than 2,000 refugees who arrive in Georgia each year, more than 85% settle in DeKalb County, which offers the state's only Refugee Health Program. In response to their needs, Oladele co-founded the

Refugee Stress Clinic in 2002 and the Center for Torture and Trauma Survivors in 2005. "We've developed a very struc-

a special interest in helping refugee children succeed in school.

As medical director of county-wide services for the DeKalb County Board of Health, "Dr. O" takes

"We've developed a very structured health screening program by default and put some grants together to expand our capacity," he says.

Early each week, 20 to 30 refugees come daily to the DeKalb clinic for initial screening. They return later in the week for thorough evaluation that includes physical, mental, and nutritional assessments. Clinic staff also brief refugees on the U.S. health care system.

While clinic staff anticipate many of the refugees' needs, unexpected

challenges arise. When the first wave of Karen and Chin refugees from Burma arrived, none of the available interpreters could speak their languages. Four years ago, the majority of refugees came from Sudan, Somalia, and Vietnam. Now clinic staff primarily see refugees from Bhutan and Iraq as well as Burma.

The Refugee Health Program screens all refugees for communicable diseases including HIV, syphilis, hepatitis, and TB; chronic diseases such as hypertension and diabetes; mental health problems such as anxiety or depression; and nutrition problems such as anemia.

Additional screenings for parasitic and other diseases vary, depending on the country of origin. New arrivals from north Africa and Egypt may be tested for schistosomiasis, while refugees from Vietnam may be examined for leprosy.

Clinic staff invariably see unusual

presentations of disease. In one instance, a young Somali woman was diagnosed with genital tuberculosis, which can scar the uterus and prevent pregnancy. Last year, Oladele co-wrote a Southern Medical Journal article about the condition seen in some women from sub-Saharan Africa and India.

"It's unusual in women of child-bearing ages," says Oladele. "If you catch it early, women can still become pregnant."

In a more recent Southern Medical Journal article, Oladele and colleagues from the DeKalb County Board of Health and Emory School of Medicine recommended further study to evaluate the role of vitamin D in TB treatment.

of vitamin D in TB treatment. Patients deficient in vitamin D appear to be more resistant to treatment.

Such knowledge helps inform the practice and research of experts at Emory, Morehouse School of Medicine, Georgia State University, the Georgia Division of Public Health, Atlanta-area hospitals, and the CDC. A member of the CDC's TB Trials Consortium, the refugee clinic was a testing site for Quantiferon-TB GOLD, approved in 2005 by the FDA to detect latent TB.

"We can learn a lot from the populations we see in the refugee clinic because they represent true pathology from different parts of the world," says Oladele.

A GIANT impact

Born in Nigeria and schooled in Lagos, Oladele arrived in Atlanta at age 15 to attend Morehouse College and Morehouse School of Medicine. He completed his residency and his fellowship at Emory. He has been former Ambassador Andrew Young's

healthy weight due to moringa," he says.

Back in DeKalb County, Oladele sees patients in the refugee clinic four days a week. Once they are screened, he is never sure if they will continue to seek treatment should they need it. They are more con-



"We sometimes forget that refugees have quite a task before them," says Oladele.

physician and holds a patent for a bladder cancer treatment. In Africa, he co-founded the Global Initiative for the Advancement of Nutritional Therapy (GIANT). The small project evolved to help eliminate hunger and malnutrition through improved nutrition, better food access, and clean water across the continent.

Oladele is a moving force behind GIANT's promotion of the moringa, a nutrient-rich plant that helps people who are HIV-positive maintain their weight. The Moringa Tree of Hope initiative teaches villagers how to plant and grow trees throughout Africa to use as a food supplement.

"We have seen whole villages full of malnourished children regain a cerned about finding a job and a place to live, learning English, and enrolling their children in school.

There are success stories, especially among children who overcome the anxiety and emotional trauma of resettlement to become stellar students and citizens.

"We're now seeing the fruits of our labor," says Oladele. "Kids are graduating from high school and going on to college."

David Thon 09MPH is among them. One of the former Lost Boys from Sudan, Thon graduated from Rollins and now consults for The Carter Center in Sudan to help eradicate Guinea worm disease.

For Oladele, former patients like Thon are the ultimate success story. "They are reinvesting in communities," he says.



China's fast economic shift has left many people without jobs. As the economy has transitioned over the past 30 years, the jobless have hit the road in search of work. Approximately 140 million people are migrants, moving from place to place, and the lack of job growth has led many men to sell sex, says Frank Wong, associate professor of behavioral sciences and health education.

In particular, Wong studies "money boys" or Chinese male prostitutes. Wong is about halfway through a five-year, NIH-funded study of 1,200 men in Shanghai who have sex with men, about half of whom are prostitutes. Through his work, he has gleaned a portrait of their lives, including how HIV is affecting their ranks, all in an effort to design future interventions to prevent spread of the disease in China.

From his interviews with money boys, Wong estimates that 20% of

remembers. "I felt his pain. He was depressed but needed the money."

Gay men also struggle, emotionally and financially, in a country that has yet to recognize and legally define homosexuality. "Can these men divide their psyche?" asks Wong. "Can this be just an economic choice? No. Some Chinese men do call themselves 'gay,' but it is unclear if they mean it in the same way as when Americans use the term.

Men having sex with men is a behavior to us, but

to many Chinese it is an identity."

Homosexuality and the gay sex trade are largely underground networks in mainland China. The city of Shanghai is a different case.

"Shanghai has lots of gay bars no one blinks at them," Wong says. "Everything is about money there. The city functions fairly independently from the rest of China, hence increase (based on improved data collection) in the number of HIV/AIDS cases among the general population in 2006 over 2005. Of these cases, more than 12% were contracted via male sex with men. For most of 2007, the number of new HIV/AIDS cases in the general population averaged more than 3,000 per month, the majority resulting from all types of sexual transmission.

20% OF MALE SEX WORKERS IN CHINA ARE IN THE TRADE BECAUSE OF THE LACK OF JOBS.

Through his research, Wong found that money boys are more likely than other migrant men to use alcohol, while both groups report a low rate of condom use. Both groups also have misconceptions about HIV and AIDs. If China's government addressed syphilis and alcohol abuse in particular, he says, the HIV rate would decrease. Instead, the government is focusing on pornography as a root cause of prostitution.

In another study targeting 2,400 men in five U.S. cities, Wong is examining men of Asian and Pacific Island descent who have sex with men. While both ethnic groups collectively make up only 1% of AIDS cases in the United States, more than 66% of the groups' AIDS cases are in men having sex with men.

After white men, Asian and Pacific Island men have the highest percentage of cases resulting from homosexual transmission. In comparison, AIDS cases among African Americans are spread more evenly among heterosexual, homosexual, and druguse transmissions.

With time, Wong plans to devise interventions to empower men having sex with men regarding their health and their social networks in the United States and in China. It is his way of protecting the health of an underserved population. Says Wong, "I'm an activist at heart."

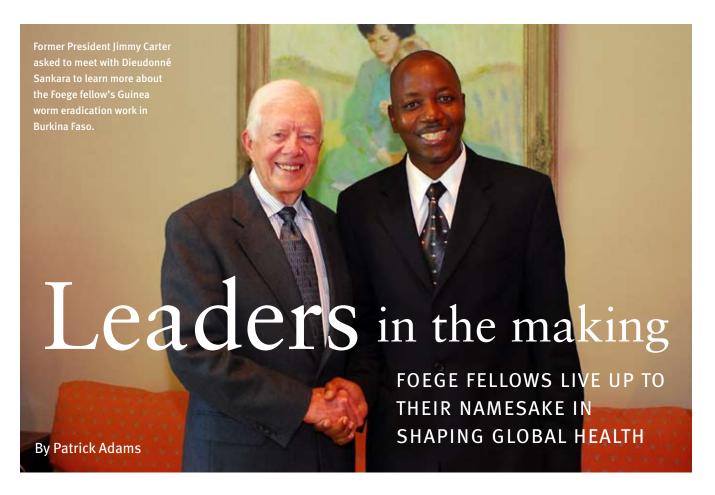


male sex workers are not gay but simply in the trade because of the lack of available jobs. Other experts put the number closer to 50%.

Wong recently observed a panel discussion with Chinese sex workers, one of whom was straight and another gay. The heterosexual man appeared traumatized, Wong

the difference in culture. Most money boys there come from rural areas, have limited education, and have no experience living in big cities."

In addition to interviewing the men, Wong is testing them for HIV and other sexually transmitted diseases. According to UNAIDS and other sources, China experienced a 45%



In 2003, when the William H. Foege Fellowship in Global Health program was still in the planning stages, RSPH professor and public health economist Deborah McFarland received a request from Foege and RSPH Dean James Curran. "They wanted to know if I would be the program director," she recalls. "I said 'yes' immediately."

In the six years since, McFarland has served as mentor, colleague, and friend to 14 Foege fellows, all supported by a \$5 million endowment from the Bill & Melinda Gates Foundation. Established to honor the career achievements of Foege, renowned global health expert and senior adviser to the Gates Foundation, the gift supports four fellows every year. In pursing their MPH degrees, the fellows—mid-career professionals from developing countries—forge lasting partnerships with Atlanta-based public health agencies,

including Emory, The Carter Center, CDC, Care USA, and the Task Force for Global Health.

To date, II fellows have earned their MPH degrees, three currently are enrolled, and two new fellows arrived on campus this fall. "It's a tremendous opportunity for emerging global health leaders," says McFarland, who helps facilitate what can be a challenging transition. "A couple of fellows struggled at first with English. But the hardest thing for most of them is getting accustomed to being a student again after many years as a professional with a great deal of responsibility. They're an extraordinarily accomplished group of people."

Take, for example, Landry Tsague, a physician from Cameroon. Before he arrived at Rollins in August 2006, Tsague was coordinator of the National Prevention of Mother-to-Child Transmission (PMTCT) program for the Cameroonian Ministry of Public

Health. Working directly with the Global Fund for AIDS, TB, and Malaria, Tsague was instrumental in scaling up PMTCT services throughout Cameroon. For his contributions, he received the International AIDS Society Young Investigator Award, among other distinctions.

His experiences as a Foege fellow were nothing short of life changing, he says. "Meeting and interacting with the people who have done so much to shape public health, who eradicated smallpox—it was humbling and inspiring, and it made me focus more on my work," Tsague says.

For his thesis on PMTCT in Kenya, Tsague collaborated with colleagues at the CDC's Global AIDS Program and CARE Cameroon, which nominated him for the Foege fellowship. "They helped me conceptualize public health problems," he says, "and gave me confidence in my ability to

help solve those problems, which is what I do everyday."

In 2005, only 24 Guinea worm cases were reported in Burkina Faso, down from 1,995 in 2000, the year Dieudonné Sankara was appointed national coordinator of the country's Guinea Worm Eradication Program. So impressed was President Jimmy Carter that he summoned Sankara for a private meeting on the issue during his Foege fellowship in 2006. Sankara collaborated with The Carter Center to evaluate trachoma control programs in refugee camps in South Sudan, the research that formed the basis of his award-winning thesis. After graduating from the RSPH in 2008, Sankara became the Neglected Tropical Diseases (NTD) technical director for the Research Triangle Institute in Washington, D.C. There he oversees integration of NTD programs in eight countries in sub-Saharan Africa.

Sankara's success was among the stories that McFarland proudly



Foege fellows met with Bill Gates Sr. (second from left) in Seattle this year.

"No presentations, no speeches. Just a day-and-a-half of face-to-face exchange with Gates' senior program staff, which is a rare thing."

-DEBORAH MCFARLAND, PROGRAM DIRECTOR



The 2006 Foege Fellows: Landry Tsague (left), Moe Moe Aung, and Dieudonné Sankara with Deborah McFarland (right) and William Foege (second from left).

shared with Gates Foundation staff on a visit to the organization's Seattle headquarters earlier this year. McFarland made the trip with Foege fellows Madsen Beau de Rochars of Haiti, Joseph Njau of Tanzania, Gulnora Khasanova of Tajikistan,

> Muhsin Siddiquey of Bangladesh, and Sankara. "It was a fantastic opportunity for the fellows," she says. "No presentations, no speeches. Just a day-and-a-half of face-to-face exchange with Gates' senior health program staff, which is a rare thing."

The rewards were mutual, she adds. "The Gates staff don't engage in practice, so they're anxious to link with folks who

are working in the field. It's a chance for them to channel these bright, capable, young researchers and ask, 'Is this intervention or this policy really working? Does it make sense?'"

Valuing the unvalued

McFarland's colleague, global health professor Stanley Foster, has learned a thing or two from the Foege fellows. He often cites the work of Senkham Boutdara.

"As director of CARE's country HIV/AIDS program in Laos, Senkham felt compassion for sex workers who were excluded from society," Foster recalls.

Boutdara broke through those barriers by visiting the sex workers' homes and listening to their stories. The ostracized women began to see themselves as persons of value. Boutdara arranged meetings between public officials and the newly empowered women. Their image began to change from that of "social evil" to "our sister who needs help," says Foster. "Senkham contributed much to our learning."

Patrick Adams is a 2009 graduate of the RSPH.

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A Cross-fertilization of Ideas

For Humphrey fellows, learning builds local and global connections

By Stone Irvin

Getrude Ncube is a millionaire. So is every other citizen of Zimbabwe. Hyperinflation in the East African country is so bad that a paycheck's value can plummet on the trip to the bank.

But the midwife from Harare, who recently completed a Humphrey fellowship at the RSPH, yearns for home, where her family and job with the Ministry of Health and Child Welfare await. Once there, she faces a mammoth task: working to implement networking strategies to track patients with HIV/AIDS to



The Humphrey Class of 2009: (Standing L-R) Zakiyah Bukhary, William Ako Takang, Lasha Loria, Chijioike Okoro, Ariyaratne Manathunge, and Danni Xiang. (Seated L-R): Getrude Ncube, Ana Maria Tudor, Khin Khin Soe, and Frances Nana Kamara.

provide them with follow-up treatment and counseling.

Humphrey colleague William Ako Takang also has a family and livelihood in Africa. A specialist in obstetrics and gynecology from Cameroon, Takang has a deep interest in the prevention of mother-to-child transmission of HIV as well as a passion to halt a different kind of inflation prevalent in his country: an escalating maternal mortality rate.



In Cameroon, William Ako Takang plans to implement a project to provide expectant mothers with counseling to reduce septic abortions. "I've already had talks with partners in the United States who are going to participate in my project."

Takang wears a kind smile despite the enormity of the problems he has chosen to tackle. Thanks to his Humphrey fellowship, he is brimming with ideas to improve patient care in his homeland, including the implementation of electronic medical records to track patients and a project to provide expectant mothers with counseling to reduce the number of septic abortions.

"I've already had talks with partners in the United States who are going to participate in my project," says Takang.

Philip Brachman has neither fam-

ily nor business in Africa. As with all of the fellows, he has become a major part of Takang's life as coordinator of the Hubert H. Humphrey Fellowship Program in the RSPH.

30 years and counting

President Jimmy Carter established the program in 1978 to honor the late U.S. vice president and senator for his long-term advocacy of international cooperation. Administered

> by the Institute of International Education (IIE), the annual program selects 160 mid-career professionals in all disciplines from developing countries who are assigned to one of 15 U.S. campuses. The J. William Fulbright Scholarship Board chooses the finalists from a pool of 500 applicants. Last year, the RSPH hosted 10 fellows from Saudi Arabia, Sierra Leone, the Republic of Georgia, Sri Lanka, Nigeria, Burma, Romania, China, Cameroon, and Zimbabwe.

> Brachman has guided the fellows since 1993, when Emory was designated as a host campus. In his 16 years coordinating the

program, he has worked with 166 fellows from 75 countries.

He has spent the time securing resources for the fellows, assisting them with housing and basic necessities. Five years ago, Brachman instituted a program with the help of two anonymous donors to provide funds for laptop computers for the fellows. Today, the program continues to provide funding, as does IIE, so that all fellows can purchase laptops for communicating with Emory faculty, friends, and Humphrey alumni when they return home.

"It's important for the fellows to

stay in touch and maintain the links that the program nurtures," says Brachman.

A living tribute to its founder

As set forth by President Carter, the Humphrey Fellowship Program fosters relationships between the United States and other countries built on mutual understanding and interaction. Thus Brachman encourages the fellows at Emory to travel as much as possible.

Every year, Brachman accompanies the fellows to Plains, Georgia, to visit the Jimmy Carter National Historic Site and invites the former president to meet them. This past year, Carter invited them to a revival service at his church.

"We were filled with lots of emotions when we met him," says Takang. "We were thankful for his foresight on health and human rights."

In addition to meeting Americans from Emory and across the nation, the fellows learn from each other, sharing experiences from their home countries. "There is a great crossfertilization of ideas," says Ncube.

The cross-cultural learning and the professional experience that fellows gain serve them and their constituents well, says Brachman. They land jobs in international health and tend to advance quickly up their respective professional ladders. Fellows like Ncube and Takang return home full of fresh ideas and helpful contacts who are ready and willing to provide them with the support they need.

"It's a fantastic program," says Brachman, "Carter had such vision in setting it up. It's quite a living tribute to him."

Stone Irvin is a journalism student at the University of Georgia. The Humphrey Fellowship Program, founded by President Carter, marked its 30th anniversary in 2008.

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Curran honored with endowed chair

For the first time, Emory has created an endowed chair to honor a sitting dean. Named for RSPH Dean James Curran, the chair is funded by a gift from the university and Lawrence and Ann Klamon, volunteer leaders with the school. Through their The Klamons play a major role in Campaign Emory. As RSPH campaign co-chairs, they are leading the school's efforts to raise \$150 million by 2012 to enhance faculty recruitment, research, teaching, student scholarships, and facilities.



Creation of an endowed chair named for him came as a surprise to Dean James Curran (second from right), shown here with Ben Johnson (left) and Ann Estes and Lawrence Klamon.

generosity, Curran and his successors will be known as the James W. Curran Dean of Public Health.

In appreciation of the Klamons' gift, the RSPH will name a large public meeting space in its new building in their honor. The Lawrence P. and Ann Estes Klamon Room will be located on the top floor of the Claudia Nance Rollins Building, set to open in fall 2010.

Their gift honoring Curran is a natural extension of their longtime relationship with the RSPH and Emory. Ann is a graduate of Emory College and Emory Law School and serves on the RSPH Dean's Council. Larry chairs the Dean's Council and is a former member of the Goizueta Business School's Advisory Council and Emory's Board of Visitors. Both were drawn to Rollins' mission of

improving health locally and globally and the faculty, staff, and students who strive to make that happen.
That of course includes Curran.

For nearly 25 years, Curran served with the CDC, becoming a pioneer in the detection and prevention of HIV/AIDS and serving as assistant surgeon general with the U.S. Public Health Service. For his achievements, Curran was elected to the Institute of Medicine (IOM) in 1993. Two years later, he joined the RSPH as dean and professor of epidemiology.

Curran subsequently became principal investigator and co-director of the Emory Center for AIDS Research, bringing together more than 100 Emory scientists and clinicians as collaborators. He has chaired the Association of Schools of Public Health and currently chairs the 10M's Board of Population Health and Public Health Practice. He also serves on advisory boards with Emory's Global Health Institute and Winship Cancer Institute and on the governing board of the Public Health Foundation of India. Through these and other leadership activities, he has built bridges to enhance quality of life for families, communities, and populations.

"Jim Curran's leadership definitely deserves special recognition," says Ann Klamon. "Larry and I are honored to support Jim and help Rollins achieve its goal of better health for people around the globe."—Pam Auchmutey and Ashante Dobbs



Global Soul Mates

Couple identifies with students' field experiences

By the time they graduated from high school, Carlos and Carol Martel knew that studying abroad could change lives.

Now the retired couple is extending that opportunity to RSPH students with a bequest to support Global Field Experiences (GFES).

This past summer, 80 students undertook GFEs to conduct research projects in 42 countries. Before they graduate, students complete a master's thesis or capstone project based on their data from the field.

Carlos Martel's first international experience was in the United States. In October 1960, he traveled from his native Havana on a student visa to stay with an uncle in Miami to

escape the political uncertainty in Cuba. Carlos' parents eventually joined their son, and the family moved to West Point, Georgia, in January 1962.

On his first day at West Point High School, Carlos met Carol Muldoon, a West Point native whose own experiences as an exchange student would shape her life.

During her junior year in high school, Carol lived in Ludwigshafen, Germany, while her host family's son lived with her parents and attended West Point High.

Carol so loved the experience that she studied in Vienna, Austria, and Freiburg, Germany, during college at Mary Washington in Virginia. She went on to earn her master's degree in German at Ohio State before moving to Atlanta.

"Once you are exposed to another culture, it takes root in your soul," Carol says. "It is life changing. Living in another country gives you the ability to truly appreciate the perspectives of others."

Her husband Carlos studied mechanical engineering at Georgia Tech. After graduating in 1968, he spent a summer working in Belgium as part of the International Association for the Exchange of Students for Practical Experience.

"I stayed with a family in a small community about an hour south of Brussels. I had a Eurail pass and put quite a few miles on it around the continent," he says. "The most important lesson I learned was a sense of how other people think and live. It is vital to understanding why they

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The Martels met during high school.

often act differently than you do and what you can learn from that instead of being afraid of it."

Carlos and Carol met again in Atlanta in early 1970. They married on October 18, 1975, 15 years to the day after Carlos emigrated from Cuba. Through their careers, they became part of Atlanta's growing international community.

Carol worked for the Atlanta office of the Institute of International Education. She later joined the Metro Atlanta Chamber of Commerce and became vice president for international affairs. After nearly 10 years with the chamber, Carol was recruited by The Coca-Cola Company. She retired in 2007 as director of stakeholder engagement in global labor relations and workplace accountability, with a focus on human and labor rights.

Early in his career, Carlos worked in international marketing, sales, and business development. In 1982, he co-founded The Multisource Group, an international consulting firm specializing in export marketing and foreign investment. He served as the company's president until 1992, when he became deputy commissioner for international trade at the Georgia Department of Economic Development. In 2005, he left the department to serve as a strategic adviser to international economic development organizations before retiring in 2007.

Through Carlos' service as a founding member of the RSPH Advisory Board and the Dean's

Council, the Martels learned about public health issues and the critical role that public health practitioners play in the wellness and safety of the global population. They identified with the GFE program because of the opportunities it provides for students and the communities they serve.

"This type of experience is invaluable for students," says Carlos.

"As they work with people around the world who lack access to basic necessities, Rollins students use their knowledge to solve those problems but also gain insights that help define their own lives and careers."

Through the GFE program, the Martels are helping influence others' lives in a way that fits their ideals.

"We treasure the international experiences we had as students and in our careers," says Carlos. "We want to provide opportunities for young people with comparable aspirations to benefit from experiences similar to those we were fortunate to have."—Maria Lameiras

For more information about Global Field Experiences, visit www.sph.emory.edu/GFE/.



RSPH campaign support tops \$120 million

To date, the RSPH has raised more than \$120 million—80% of its \$150 million goal—for Campaign Emory. Gifts to the RSPH help build endowments for teaching and research, scholarships, programs, and facilities. As of September, the university had raised more than \$958 million toward its \$1.6 billion goal.

To learn more about Campaign Emory and the RSPH, visit www.campaign.emory.edu. To make a gift, contact Kathryn Graves, Associate Dean for Development and External Relations, at 404-727-3352 or kgraves@emory.edu.





New Family Legacy

McGowan Scholarship assists MD/MPH student

A couple of years ago, an Emory medical student walked into John McGowan's office seeking advice. "I can't stand it," she told McGowan about her OB/GYN rotation at Grady Memorial Hospital. The student loved caring for her patients. But the number of single teen mothers distressed her. "I'm going to do something about it," she said.

"She wanted to study behavioral sciences and health education to craft some messages to address the problem," recalls McGowan, who directs the MD/MPH program. "And she did."

It is a success story that McGowan has witnessed many times. As of May 2009, 84 students had completed the joint program since the first student graduated in 1997. By May 2010, 16 more are expected to graduate and raise the total to 100.

For McGowan, leading the MD/MPH program is a fitting role. As a physician and epidemiologist who

has studied antibacterial resistance, he understands the needs of individual patients and patient populations and how research can improve their health. As a faculty member with the RSPH and School of Medicine, he recognizes the financial pressures that MD/MPH students face.

To help defray the cost of their education, McGowan and his wife, Linda Kay, have established the John E. and Doris W. McGowan Scholarship. Named for his late parents, the scholarship provides tuition support for a student during the MPH year. Lindsay Boole, who holds a BS degree in biomedical engineering, became the first McGowan Scholar this fall.

"The average student debt for four years of medical school is huge, and the MD/MPH program requires another year of study," says McGown. "Not only are students adding an extra year to study public health, but they also are making an additional

financial commitment."

The scholarship reflects McGowan's family history. His father practiced at Brooklyn State Hospital on Long Island, where he helped pioneer the field of child psychiatry. His mother was a social worker at the same hospital. Her father was a physician who was one of the first directors in the state hospital system in New York.

Now retired, McGowan's wife, Linda Kay, directed special projects in the CDC director's office and served as vice president for programs with the CDC Foundation. Their daughter, Angie McGowan 98MPH, is a senior program officer with the Robert Wood Johnson Foundation and past president of the RSPH Alumni Board. All share a commitment to MD/MPH students.

"Word has gotten around that we have a strong MD/MPH program, and students are looking at Emory specifically because of that," says McGowan. "It has become a valuable recruiting tool for the medical school. We didn't build the program. The students did."—Pam Auchmutey

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New Alumni Leadership

Chad VanDenBerg 96MPH recently took office as president of the RSPH Alumni Board. VanDenBerg, who majored in health policy and management, is director of clinical performance management at Grady Memorial Hospital. Among his responsbilities: best practice implementation, Joint Commission core measure submissions and improvements, peer reviews and referrals, quality assessment of care, service line support, and administrative support for the Atlanta Clinical and Translational Science Institute (ACTSI). Emory, Morehouse School of Medicine, and Georgia Tech are ACTSI partners.

Grassroots Advocate

Commencement speaker Daniel Blumenthal 86MPH did not intend to make a political speech but then again, the public health field is political. From tobacco control and safe water to health care reform, public health experts advocate change to protect the health of populations. "Change at the top will not take place until you hear from those at the grassroots level," he reminded the Class of 2009. "I hope you will not forget to focus on community because that's where change starts." Blumenthal is chair of community health and preventive medicine at Morehouse School of Medicine.



Michael Kutner (left) presents the Thomas F. Sellers Jr. Award to Roger Rochat.



Daniel Blumenthal 86MPH



Elizabeth Downes (Nursing) and Deborah McFarland (RSPH) share Emory Williams Teaching Award honors.

Alumni Association Board Members

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Heather Ingold, 00MPH
Tamara Lamia 02MPH
Jackie McClain, 03MPH
Edgar Simard, 04MPH
Suzy Singer, 07MPH
Kathy Ward, 07MPH RN BSN CIC

Upcoming Events

Dean's Reception, American Public Health Association

Monday, November 9, 2009 6:00 pm-8:00 pm National Liberty Museum, Philadelphia, PA

Public Health Career Fair

Friday, February 5, 2010 10:00 am-2:00 pm Emory Conference Center Hotel

Networking Night-Washington, DC

Tuesday, March 9, 2010 6:00 pm-8:00 pm

6:00 pm-8:00 pm Location: TBD

Public Health in Action Reception *Honoring Alumni and Faculty Achievements*

Thursday, April 15, 2010

6:00 pm-8:00 pm

Silver Bell Pavilion, Emory Conference Center Hotel

For information about these and other events: alumni@sph.emory.edu or 404-727-4740.



David Chow 78MD 78MPH (third from right) with U.S. Senator Mark Warner (fourth from right) and others



Michael Ugwueke 86MPH



Jonathan Ratcliff 01MPH, Megan Benoit Ratcliff 01MPH, and Noah

1970s

DAVID CHOW 78MD 78MPH

takes office in November as president of the Medical Society of Northern Virginia. Chow, former chief of ophthalmology at Reston Hospital Center, is a TV guest lecturer who conducts question-andanswer sessions for Voice of America, interacting with audiences in China. Speaking in Mandarin Chinese, audience members call in toll free to a studio in Washington, DC, to discuss medical and surgical aspects of ophthalmology.

Chow also was selected to participate in the yearlong Claude Moore Physician Leadership Institute, sponsored by the Medical Society of Virginia. The training institute helps create a network of physician leaders to advance health care in the state.

1980s

MICHAEL UGWUEKE 86MPH was named CEO and administrator at Methodist North Hospital in Memphis, TN. He continues to serve as CEO of Methodist South Hospital. Both hospitals are part of Methodist Le Bonheur Healthcare.

1990s

DAVID DELOZIER 96MPH

was named team lead for the Public Health Partners Team within the CDC's Public Health Partners and Coordination Branch. DeLozier has served as lead health scientist for infectious disease programs in the Research Application Branch, Division of Adolescent and School Health. He also has worked in the Nutritional Biochemistry and Radiation Studies Branches with the National Center for Environmental Health.

BORN: To JENNIFER FIELDS SELIGMAN 97MPH and her husband, Greg, a son and a daughter, on May 5, 2009. Their twins are named Gabriel Ryder and Sophie Michelle. The family lives in Wayne, NJ.

BORN: To **CARI CONNELL LICHTMAN 99MPH** and her husband, Dan, a son, Rory James, on Oct. 8, 2008. The family lives in Atlanta.



Melody Moezzi 06MPH on CNN

2000s

ALI KHAN 00MPH was named acting director of the National Center for Zoonotic, Vector-Borne, and Enteric Diseases at the CDC.

BORN: To JONATHAN
RATCLIFF 01MPH 08M and
his wife, MEGAN BENOIT
RATCLIFF 01MPH, a son,
Noah Jay, on March 21,
2009. Jonathan is an emergency medicine resident at
the University of Cincinnati.
Megan is a research fellow in
pediatric obesity at Cincinnati
Children's Hospital Medical
Center.

DARCY ANN FREEDMAN

02MPH received her doctorate in community research and action from Vanderbilt University. She serves on the faculty at the University of South Carolina as assistant professor of social work.

JENNIFER TUBOKU-METGER BLAKELY 03MPH received

her law degree from the University of Georgia. She is an associate with the Atlanta firm Arnall Golden Gregory.

MELODY MOEZZI 06MPH

06L of Decatur, GA, provided television and radio commentary on Iranian politics and the presidential election held in June. Moezzi grew up primarily in Dayton, Ohio,



Eva Lathrop 09MPH (right) and Youseline Telemaque (left) partner with women's health advocates in Cap-Hatien, Haiti.



Telemaque (right) collects data about birth outcomes from tradititonal birth attendants and Konbit Sante agents.

amid a "strong and vibrant Iranian-American diaspora." She was interviewed about Iran on the Mike O'Meara Show and the Montel Across America on Air America show. Her recent articles include "Iran's Underground Railroad" in the The Huffington Post (July 7, 2009) and "Islam, Iranian Style" in *The Washington Post* (June 26, 2009). CNN also interviewed Moezzi about Neda Soltan, the young woman killed during the protests after the election in Iran.

EVA LATHROP 09MPH and Youseline Telemaque were recognized by the American College of Obstetricians

and Gynecologists for their research on postpartum planning practices and needs among women in Cap-Haitien, Haiti. Lathrop leads the Konbit Sante Cap-Haitien Health Partnership's women's health team of Portland, Maine, while Telemaque is an OB/GYN who works for Konbit Sante in Haiti.

cians interviewed medical providers and postpartum patients at a large public teaching hospital in northern Haiti. They learned that patients favored learning more about family planning before leaving the hospital. They also learned that Haitian

For their research, the physi-

health care providers do not use the opportunity to talk with women hospitalized postpartum about family planning. However, Lathrop notes, Haitian doctors and nurses are concerned about the high incidence of unsafe abortions and maternal deaths. The clinicians recognize that prevention of unwanted pregnancies by focused family planning programs is one of the most effective ways to reduce maternal mortality rates.

Lathrop and Telemaque have begun training hospital health care providers in family planning. And they are reaching out to the community with reproductive health training for traditional birth attendants, who deliver most of the babies in the area. Lathrop is a GYN/OB fellow at Emory.

SHAUNA METTEE 09MSN/

MPH is one of 81 new
Epidemic Intelligence
Service Officers at the CDC.
Her class includes BIZRAT
ABRAHAM 06MD/MPH,
LAURA BETTENCOURT
05MPH, CARRIE DEBOER
08MSN/MPH, ERIN
MURRAY 08MSPH/PHD,
and ROXANNE WILLIAMS
04MPH.

Would you like to see your news and photos on these pages?

Share your latest developments by email, mail, or fax. Address: Alumni Records, RSPH, PO Box 133000, Atlanta, GA 30333-9906.

Fax: 404-727-9853. Email: alumni@sph.emory.edu.



Say hello to E-Connection, the online community of the Emory Alumni Association. Hundreds of alumni are using the website to link professionally and personally with each other. Through E-Connection, RSPH alumni can reconnect with old friends and colleagues, meet alumni in their area, network with alumni around the world, share photos and special interests, and search for jobs. To register with E-Connection, visit www.alumni.emory.edu and look for the heading "Are you Connected?"

Looking for a job?

Sponsored by RSPH Career Services, the Public Health Employment Connection lists job opportunities for alumni and students in public health. To view the site, visit www.sph.emory.edu/CAREER/phec_info.php.

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Remembering Grace

Though she lived quietly and shunned the spotlight, Grace Crum Rollins helped the Rollins School of Public Health become one of the nation's top schools in its field. To learn more about her life, see page 3.

