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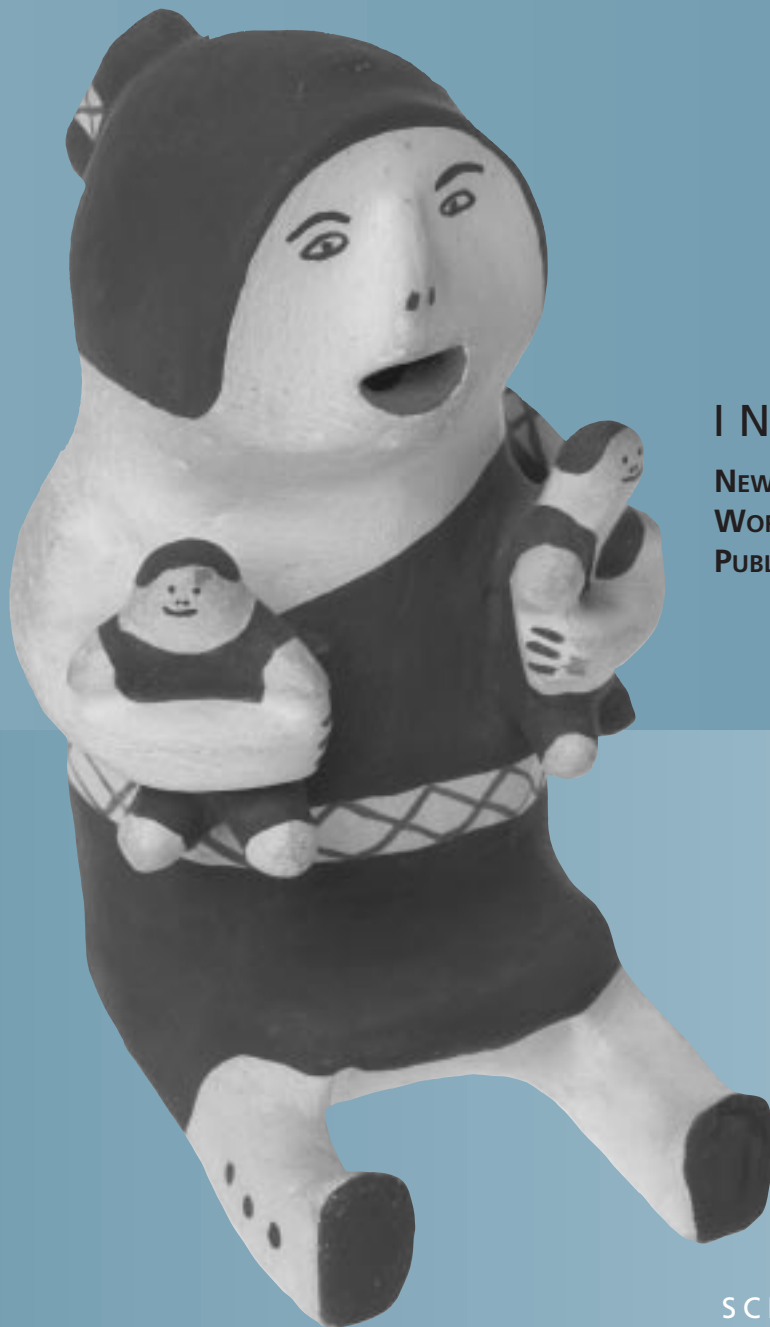
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HEALTH views

A MAGAZINE FOR UIC SPH ALUMNI AND FRIENDS

FALL 2003



IN THIS ISSUE

NEW INITIATIVES IN A CHANGING
WORLD—TELLING THE STORY OF
PUBLIC HEALTH TODAY

SCHOOL OF PUBLIC HEALTH
people serving people

UIC University of Illinois
at Chicago

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New Initiatives in a Changing World—Telling the Story of Public Health Today

The cover depicts a Pueblo Storyteller figure that reflects the Pueblo tradition of storytelling and is at the origin of a modern reinvention and revitalization of Pueblo pottery. Because good health is often taken for granted, one of the key issues for public health today is telling its story effectively to the public it serves. The Storyteller figure seems an appropriate symbol for this ongoing need to articulate the scope and impact of the work we do to protect and promote well-being and quality of life for all.

HEALTHviews is published bi-annually for alumni and friends of the School of Public Health at the University of Illinois at Chicago.

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From the DEAN



Dean Susan C. Scrimshaw and U.S. Surgeon General Richard H. Carmona were co-presenters at a conference on "The Media and Health Research: Informing the Public."

For the past three years, Illinois and the state's entire university system have been struggling to bridge the widening gap between declining financial resources and increasing costs. The School of Public Health is confronting extreme budget constraints. There was a 10 percent recurring budget cut last year, followed by another cut of almost 11 percent this year, resulting in a permanent loss of more than 20% of the school's state support.

We have learned, nevertheless, not only how to survive but to succeed in this time of economic austerity. One of the places where we have cut back is in our publications. This edition of *HEALTHviews* is more compact than ever before, the articles were written by our own faculty members, and the faculty, student, and alumni sections of the magazine have been transferred to our website where they can be updated regularly at no cost for publication or mailing.

As demonstrated by the articles that follow, we at the School of Public Health refuse any compromises in the excellence either of the education and service we offer or of the research we conduct here.

In this issue, you will meet faculty and students who are volunteering to serve Chicago in the event of a terrorist attack, a new director of the Environmental and Occupational Health Sciences Division who contributes new vision to all our work, and leaders who are partnering with community organizations to improve the health of vulnerable mothers, children, and families. You will also find news of the initiation of an entirely new master's program in public health informatics.

Not long ago, we were already struggling to deal with naturally occurring epidemics, the resurgence of diseases we had once thought conquered, and environmental hazards. We must now be ready to respond to deliberate acts of destruction and sabotage as well as to threats like SARS, West Nile virus, and monkey pox as they emerge with frightening speed and span the world. Now as never before, we need to educate and train the public health practitioners and professionals who will be called upon to address these challenges. This issue of *HEALTHviews* describes some of the initiatives we have taken to meet that goal in a changing world, and it tells part of the public health story that is evolving today.

Susan C. Scrimshaw, PhD
Dean

SCHOOL OF PUBLIC HEALTH PREPARES TRAINING AND TOOLS TO COMBAT TERRORISM

Faculty and Students Form Rapid Response Team

Concern over mail-related anthrax, smallpox, West Nile virus, and SARS, and warnings by our government that we are at risk for terrorist attacks have led to an explosion of interest in outbreak investigation and applied experience in infectious disease epidemiology among students at the School of Public Health. Public health departments have been asked to increase surveillance and control measures dramatically for a wide range of diseases while at the same time funding for their overall operations has been drastically cut. These developments have combined to force both public health educators and leaders to think about ways to extend workforce capabilities.

In the past two years, both the Illinois Department of Public Health (IDPH) and the Chicago Department of Public Health (CDPH) have asked the School of Public Health to make students available to assist health department personnel in the event of emergencies or large outbreaks.

In response to these requests, Ronald Hershow, MD, and Douglas Passaro, MD, MPH, associate professors in the Epidemiology and Biostatistics Division, have assembled the Student EpiCorps, a "rapid response team" composed of student volunteers with a wide variety of backgrounds and areas of expertise. Members of the EpiCorps are available twenty-four hours a day to assist IDPH and CDPH on request.

The purpose of the EpiCorps is to provide surge surveillance capacity, obtain training and real-life experience in disease surveillance, and interest students in working in public health in Illinois. Roles for students in the EpiCorps include assisting IDPH staff with surveillance and outbreak investigation, developing questionnaires, performing interviews, and conducting technical research, and operating mass vaccination clinics, providing general logistical and programmatic support.

The diversity of the SPH student body will be an important asset in performing both tasks. For example, the twenty-seven Student EpiCorps volunteers speak a total of eleven languages. This resource may prove critical in investigating outbreaks occurring among certain ethnic populations.



Students Linda Rosul, Larysa Fedoriv, and Audrey Bauer and Douglas Passaro, MD, MPH, associate professor of epidemiology, review plans for TOPOFF exercises in Chicago.

Because outbreaks can occur any day of the week, EpiCorps volunteers know that they could be called on to assist with an outbreak at a moment's notice, even when they are in the middle of classes or exams. Because practical training is considered an essential part of public health education, Dean Susan Scrimshaw has asked faculty to let these student volunteers defer assignments or exams as needed while they work on outbreaks.

IDPH is planning to expand the program to include Student EpiCorps units at Northwestern University's Feinberg School of Medicine, the University of Illinois at Springfield, and Northern Illinois University. Illinois State Epidemiologist Mark Dworkin notes, "The EpiCorps gives students a chance to learn some practical outbreak skills and could provide real support to public health agencies in the event of a public health emergency."

Jeanette Tandez, an MPH student in epidemiology, says, "This is an exciting time to be in public health. My participation in the Student EpiCorps resulted in an invitation to observe TOPOFF 2—the national bioterrorism drill—in May. It was an exciting taste of public health in action."

By Douglas Passaro, MD, MPH

DOUGLAS PASSARO, MD, MPH, HAD BEEN AN OUTBREAK INVESTIGATOR WITH THE EPIDEMIC INTELLIGENCE SERVICE FOR THE CENTERS FOR DISEASE CONTROL AND PREVENTION BEFORE COMPLETING AN INFECTIOUS DISEASES FELLOWSHIP AT STANFORD UNIVERSITY. DURING HIS FELLOWSHIP, HE DIRECTED CALIFORNIA'S UNEXPLAINED ILLNESS AND DEATH PROJECT AND BECAME KEENLY INTERESTED IN THE ROLE OF NON-TRADITIONAL SURVEILLANCE SYSTEMS IN PROTECTING THE PUBLIC'S HEALTH.

PASSARO BEGAN WORK AT UIC SPH THE WEEK BEFORE THE WORLD TRADE CENTER BOMBINGS. BY THE TIME PANIC HAD BEGUN TO SUBSIDE OVER THE OUTBREAK OF MAIL-ASSOCIATED ANTHRAX IN AUTUMN 2002, IT HAD BECOME CLEAR THAT THE LANDSCAPE OF PUBLIC HEALTH WAS ALTERED FOREVER. "WHEN I REALIZED THAT OUR STATE HEALTH DEPARTMENT WAS LIKELY TO BE OVERWHELMED, MY FIRST RESPONSE WAS TO CALL THE ILLINOIS STATE EPIDEMIOLOGIST TO ASK HIM HOW I COULD HELP."

IDPH NEEDED A BIOTERRORISM COORDINATOR, AND PASSARO OCCUPIED THAT POSITION BRIEFLY, ALONG WITH HIS DAY JOB AS ASSOCIATE PROFESSOR OF EPIDEMIOLOGY AND CLINICAL ASSISTANT PROFESSOR OF MEDICINE AT UIC. HE SUBSEQUENTLY SET UP A CONTRACT THAT ALLOWED UIC FACULTY AND STAFF TO PROVIDE IDPH WITH A RANGE OF SERVICES AND TECHNICAL EXPERTISE RELATED TO PREPAREDNESS AND RESPONSE FOR BIOTERRORISM AND EMERGING INFECTIOUS DISEASES.

IN THE PAST YEAR, PASSARO AND HIS TEAM OF RESEARCHERS HAVE INVESTIGATED AN OUTBREAK OF UNIDENTIFIED FUNGAL INFECTIONS AT A HEALTH CARE FACILITY AS WELL AS AN OUTBREAK OF EPIDEMIC CONJUNCTIVITIS CAUSED BY AN UNKNOWN PATHOGEN AT A LOCAL UNIVERSITY. THEY ARE ALSO ACTIVELY CONDUCTING RESEARCH ON WEST NILE VIRUS. THEY HAVE DEVELOPED EDUCATIONAL MODULES FOR IDPH COVERING A RANGE OF BIOTERRORIST AGENTS AND PARTICIPATED IN TOPOFF 2.

TOPOFF 2 Exercise Takes on Terrorism in Chicago

From May 12 through May 16, Chicago took part in TOPOFF 2, the largest terrorism exercise ever conducted in the United States and the world.

The exercise simulated multiple attacks against domestic targets using weapons of mass destruction. More specifically, Chicago, Cook County, and surrounding areas were "exposed" to the airborne release of plague bacilli in multiple locations. Concurrently, Seattle and the Puget Sound region experienced a simulated explosion of a radiological dispersal device (RDD) or "dirty bomb."

The exercise was a congressionally mandated disaster drill designed to test the response of top officials (hence the name TOPOFF) to terrorist acts. The Chicago portion of the exercise involved more than 100 federal, state, local, private-sector, and Canadian agencies and organizations.

Douglas Passaro, MD, MPH, Ronald Hershow, MD and six University of Illinois at Chicago (UIC) School of Public Health students—Charlesnika Evans, Linda Rosul, Audrey Bauer, Jeanette Tandez, Matthew Westercamp, and Anne McIntyre—were invited to participate in the exercise in various capacities. Passaro and the students assisted the state epidemiologist, Mark Dworkin, in developing different aspects of the response to the evolving Chicago "outbreak." Hershow participated as an evaluator of the exercise, assigned to observe and take notes that will be dissected to find out what went well and what needs improvement.

In the previous TOPOFF exercise, conducted in Denver in 2000, participants were interviewed weeks after the exercise, and conclusions were drawn from this delayed debriefing. It is anticipated that by using evaluators like Hershow, who chronicled the response in "real-time," a more accurate evaluation of the response will be possible. Projections suggest that at least four months will be required to go through notes taken by the corps of evaluators who participated in TOPOFF 2. Hershow alone took seventy pages of notes in a day and a half of observation.

TOPOFF began on the morning of May 13 when Dworkin received his first "exercise" e-mail at 7:40 AM: "IDPH reports 100 patients in Chicago area with SARS-like symptoms. Gov/Homeland Security/Washington working on press release." From then on, information arrived rapidly via e-mail and fax, and Dworkin and his staff began work.



Ronald Hershaw, MD, associate professor of epidemiology, and students Anne McIntyre and Charlesnika Evans review preliminary data from TOPOFF.

Early lab findings indicated that this was probably not SARS, but initial clues were vague. Bipolar staining bacilli were noted on diagnostic specimens from two early cases, but laboratory expert Roman Golash warned that, although suggestive, bipolar staining was not definitively diagnostic of plague.

By 9:05 AM, Dworkin had organized a conference call between his office and health departments in Chicago, suburban Cook County, and Lake, DuPage, and Kane Counties. These jurisdictions reported a total of eighty-nine cases, with at least nine deaths. Symptoms of cases were discussed, and Passaro was asked to prepare a memo summarizing available information on symptoms and to develop a list of diagnoses—in order of likelihood—that might be consistent with the array of symptoms being reported.

With the help of the UIC students, this task was rapidly accomplished. It was noted that several of the affected individuals had been at a hockey game at the United Center. Furthermore, several cases had recently traveled through Union Station and O'Hare Airport. Equipped with this information, Passaro was asked to obtain a list of recent events at the United Center...and so it went. Hour after hour, more disquieting information was "injected" into the exercise. Decisions were made, memos were written and dispatched, and the case counts rose into the thousands.

It was an unforgettable experience for the UIC contingent. Hershaw says that, although there were moments of confusion and

uncertainty, "overall I was very impressed" with the response orchestrated by Dworkin, the Chicago Department of Public Health, and the collar county health departments. Hershaw adds, "The exercise will provide invaluable information for Chicago and Seattle. Beyond that, the lessons learned from deconstructing the TOPOFF 2 exercise will inform all jurisdictions within the United States and around the world about how to prepare for possible future terrorist incidents. The exercise also has great relevance for natural outbreak and disaster control efforts."

By Ronald Hershaw, MD

I really enjoyed the concepts I learned in Introduction to Epidemiology, but I wondered how they could be used in the real world.

—Larysa Fedoriw, MPH student in epidemiology

MEET THE NEW DIRECTOR OF THE ENVIRONMENTAL AND OCCUPATIONAL HEALTH SCIENCES DIVISION—

An Interview with Rosemary Sokas, MD, MOH, FACP

Rosemary Sokas, MD, MOH, FACP, joined the School of Public Health in November 2002, having previously served as associate director for science at the National Institute for Occupational Safety and Health.

How did your professional focus on occupational and environmental health develop?

I started out in primary care internal medicine and worked in a migrant health center in western Puerto Rico and then at the Dr. Martin Luther King, Jr. Health Center in the Bronx before deciding to focus on prevention. I had seen pesticide exposure, musculoskeletal disorders from repetitive work, and the consequences of the stress of unemployment and domestic violence in these clinical settings. I also had a strong family interest because my grandfather, who was the center of my childhood, had been a drop forge worker with profound noise-induced hearing loss.

Occupational health was an easy choice, and it evolved to include environmental health. My first academic positions were in medical schools, at the University of Pennsylvania and at George Washington University. There I worked to incorporate occupational and environmental health into medical education and focused my research on the occupational and environmental factors having an impact on primary care topics like hypertension or musculoskeletal disorders.

Subsequently, I had six years of federal government service, first as director of the Occupational Safety & Health Administration's (OSHA) Office of Occupational Medicine, then as the associate director for science at the National Institute for Occupational Safety and Health (NIOSH). These were intense, fruitful years. At OSHA, I had the chance to see some of the worst workplaces in the U.S. and to start to recognize themes about what exactly causes exceptionally bad work settings, and, conversely, what might improve them. Accountability and communication were dominant factors.

At NIOSH, I helped coordinate our response to the terrorist events of 9/11 and the subsequent anthrax mailings, and accountability and communication again emerged as key themes. Equally striking was the central place of work in the events themselves. People were

targeted through their work. Rescue and response workers all faced additional health and safety hazards because of their work.

What opportunities do Chicago and UIC present for advances in occupational and environmental health?

It's impossible to convey fully the richness and excitement of working in occupational and environmental health in a major metropolitan area. Think about virtually everything that allows us to live in Chicago—water treatment facilities, buildings, transportation, food distribution, you name it—all are the work of human hands, a constant effort allowing us to live our lives.

At the same time, each of these activities has the potential to cause harm, to our air, water, to wildlife, to ourselves. So, in the largest sense, the occupational and environmental health sciences help us to live more fully human lives in a way that respects the environment and attempts to sustain it for our children and their children. On the individual level, each of us hopes for healthy, meaningful work, not only to provide for our needs and for our families, but also to share in the act of creation—whether it's helping a child learn to read or roofing a building or treating a patient's cancer or discovering the mechanism of action of ultrafine particulate pollution.

Chicago is a great place to be to look at the interface between the natural and the built environments. UIC as a whole offers a stunning array of talented faculty, staff, and students, and the School of Public Health is a fertile environment for a whole range of work focused on prevention. The faculty members in the Environmental and Occupational Health Sciences (EOHS) Division are diverse, talented, passionate about their work, and wonderfully collegial. Individually, they focus on very specific scientific questions that they address rigorously, applying state-of-the-art approaches to address emerging questions such as the fate and transport of persistent organic pollutants in the Great Lakes, the impact of waste water from dental treatment facilities, sub-cellular inflammatory responses to inhaled exposures, the behavior of airborne pollutants, intervention strategies to promote safety in agriculture



Rosemary Sokas, MD, MOH, FACP (right) responds to questions from *HEALTHviews* interviewer.

and other high-risk industries, and health and safety in developing countries and in the newly emerging states of Eastern Europe.

How is the EOHS curriculum evolving to prepare students for real-world practice?

Because faculty are engaged in practice and policy setting as well as in research, they provide students with both the technical expertise and the real-world applicability that energize classes focused on risk assessment or occupational diseases. The division faculty has just been through a strategic planning process that resulted in some curriculum changes. The new requirements for all of the students in our track include one course (of the student's choosing) in each of the three major areas of EOHS: measuring exposures, understanding outcomes, and implementing interventions.

In addition, students are asked to select a "quantitative theme." Each theme is a cluster of three courses, chosen with the assistance of faculty advisors, that allows students to graduate with the ability to apply specific, quantitative skills to whatever problem they confront. One student might elect environmental epidemiology, for example, while another might choose quantitative risk assessment, another might elect survey design, and yet another exposure assessment methods. The focused nature of this approach will allow students to have very competitive skills within a general public health framework.

The division effectively doubles the resources it is able to offer students through the Education and Research Center, funded by NIOSH and directed by Dr. Lorraine Conroy. In addition to providing support for students enrolling in the master's in industrial hygiene program, the occupational medicine residency programs at UIC and the John H. Stroger, Jr. Hospital

of Cook County, and the occupational health nursing program in the College of Nursing, this center sponsors pilot research projects. Faculty research also funds a number of research assistantships and provides opportunities for students to conduct research in industrial hygiene, epidemiology, toxicology, and environmental chemistry, among other areas.

What do you see as major challenges affecting occupational and environmental health now?

I think one of the biggest challenges is getting what we do know about strategies for improving occupational and environmental health widely implemented so that they benefit workers and the wider public. The increasing injury and illness rates among nursing home workers, rising mortality rates among immigrant workers, and the high death toll among the self-employed and others in small businesses are examples of severe problems for which solutions may be available but are not implemented. These are the kinds of challenges calling out for intervention effectiveness research, a very applied, pragmatic approach.

There are faculty members here who have worked with the Chicago Area Workers' Rights Initiative, a coalition of governmental, labor, and faith-based organizations working to address the needs of the most disenfranchised. I currently chair the American Public Health Association's Occupational Health Section, and am co-team leader for the National Occupational Research Agenda's Special Populations at Risk Team, which explores the special needs of vulnerable populations. The UIC SPH is a wonderful place to bring these academic threads together, working with colleagues throughout the school to target environmental justice issues and particularly the needs of disadvantaged workers in small businesses.



Kevin Croke, PhD, and Edward Mensah, PhD, review progress in implementation of the MPH Program in Public Health Informatics.

EDUCATION WITHOUT BORDERS: THE ONLINE PUBLIC HEALTH INFORMATICS PROGRAM

Improved information management and utilization are recognized as the keys to confronting the major public health challenges of the 21st century.

Concerns about bioterrorism and emerging infectious diseases have fueled an increase in the demand for surveillance systems supported by state and local health information infrastructures. At the same time, health care reform and the rise of managed care with its focus on disease prevention, health promotion, and cost savings, have contributed to the need for population-based health information systems. The forces of globalization have added to the demand for information systems capable of detecting and tracking new and re-emerging communicable diseases. The effectiveness of public health responses to these challenges depends on the availability of reliable, timely, accurate, and comparable health information.

The major constraint to the realization of the full potential of health information technology in advancing the practice of public health lies in the development and diffusion of informatics knowledge to public health professionals. Currently, the nation lacks enough professionals who possess the required skills in

both public health and information management and are capable of integrating public health practice with health information technology. The new field of public health informatics applies information science and technology to public health practice, teaching, and research.

A grant from the Health Resources and Services Administration's Bureau of Health Professions, coordinated by Annette Valenta, DrPH, associate professor and interim director, Biomedical and Health Information Sciences in UIC's College of Applied Health Sciences, partly funded the development of five informatics courses at the college. These courses formed the foundation for all health informatics programs at UIC.

In 1998, Edward Mensah, PhD, associate professor, Health Policy and Administration Division, took a sabbatical to study the economics of online education and to develop the conceptual framework for the MPH degree with a specialization in public health informatics. This structure was later developed, in collaboration with Kevin Croke, PhD, a professor in health policy and administration, and Valenta, into the School of Public Health's formal MPH Program in Public Health Informatics. Mensah serves as program director. Much of the success of this effort is owed to the strong support and collaboration of the faculty and staff of both the School of Public Health and the College of Applied Health Sciences and to the leadership from the colleges' respective Dean's Offices. Another pivotal factor in the program's success was the prior development, evaluation, and refinement of online versions of the School of Public Health's required core public health courses.

At present, only three schools of public health offer Master of Public Health programs with

specializations in public health informatics. These are Emory University in Atlanta, the University of Washington in Seattle, and the University of Illinois at Chicago (UIC). Of these, UIC offers the first fully online informatics degree program in public health in the nation.

Program Competencies

The program competencies include:

- knowledge of the basic principles of public health;
- the ability to specify the requirements for the development of public health-related information systems;
- familiarity with health data definitions and standards;
- a knowledge of health information privacy and confidentiality practices;
- the ability to plan, specify, and manage the implementation of public health information systems projects;
- a working knowledge of the existence, structure, and uses of public health and health databases and networks;
- an understanding of the basic functions and operations of information technologies that have significant application in public health practice;
- skill in information technology planning, procurement, and change management.

Curriculum and Students' Backgrounds

The master's program in public health informatics consists of fifteen online courses (forty-eight credit hours) designed to meet all of the requirements for a traditional Master of Public Health degree. The curriculum includes six public health core courses, eight informatics courses, and a practicum/capstone experience. Together these components assure students' achievement of the basic competencies delineated above. The degree is intended for completion in a minimum of three years, although in special cases students can complete the program in two and a half years. Additionally, a shorter certificate program has been derived from the overall MPH program. Both programs can be accessed at <http://www.uic.edu/sph/phi/>.

The MPH degree program in public health informatics started in fall 2002 with sixteen students located in six states (Illinois, Arkansas, Arizona, Montana, Pennsylvania, and Georgia) and one in England. They are all full-time health professionals working as physicians, nurses, public health administrators, managed care officials, medical school professors, military officers, and dentists. All sixteen

students re-enrolled for courses in the spring 2003 semester, providing a remarkable zero percent drop-out rate.

Enrollment in the certificate program started in the spring 2003 semester with nine students, eight from the U.S. and one from Ghana, West Africa.

Future Directions

In future, we plan to implement enhanced technological and organizational infrastructures in order to improve interactivity among students, faculty, and public health practitioners. Our initial effort is the development of an online journal of public health informatics. The first edition focuses on *Informatics and Organizational Infrastructure for Monitoring Bioterrorism*. The journal will encourage online communication and exchange on public health informatics issues as well serving as a focal point for informatics news and technology reports. A draft of the structure for the journal can be accessed at

<http://www.uic.edu/sph/phi/ojphi/>.

In addition to the two foreign students from Great Britain and Ghana already enrolled in the program, the fall 2003 class will include students from South Africa, Ghana, Kenya, Pakistan, Zambia, Yemen, and ten states in the U.S.

The online delivery model allows the University of Illinois at Chicago to assist in the development of informatics capacity and infrastructure in an increasingly information-intensive health care environment. The program appeals to busy health professionals who are constrained by time and/or locations far from Chicago. Health professionals from developing countries can now achieve informatics expertise while working in their own countries.

The online delivery model promotes the sharing of education without borders and will contribute in part to solving the brain drain problem confronting areas of the developing world.

By Edward Mensah, PhD, Kevin Croke, PhD, and Annette Valenta, DrPH

IMPROVED
INFORMATION
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FIRST MICHAEL BRUTON WORKPLACE SAFETY FOUNDATION SCHOLARSHIP AWARDED

The Michael Bruton Workplace Safety Foundation (MBWSF) was formed in memory of the late Michael Bruton who, at the time of his death from cancer caused by exposure to asbestos in the workplace, was president of the Chicago Federation of Labor (CFL). The CFL and the Bruton family believe that a foundation dedicated to promoting safety in the workplace is a fitting way to remember a person who dedicated a large portion of his life to promoting worker welfare.

In 2002, the Bruton Foundation branched out in a new direction by establishing a scholarship endowment with the UIC School of Public Health. Nearly 500 union leaders and supporters were on hand on April 26, 2002 at Teamsters Local 705 Hall when Dennis Gannon, MBWSF president and CFL secretary-treasurer, presented Dean Susan Scrimshaw the first check to establish the \$250,000 endowment.

Accompanying Gannon at the presentation were Marilyn Bruton, Michael Bruton's wife, and his son Tom Bruton, a member of the MBWSF Board of Directors.

"We are not too far down the road, maybe three or four more years, from obtaining the full endowment," Gannon said. "Each and every person and labor organization that has ever contributed to the MBWSF should feel very proud that they are carrying on the legacy of Michael Bruton by ensuring a safer workplace for all of our members."

The scholarship will be presented every fall in memory of Michael Bruton to a graduate student in the school's Environmental and Occupational Health Sciences (EOHS) Division. Trustees of the MBWSF will be part of the selection committee that will identify scholarship recipients.

Following the annual luncheon last April, the MBWSF board of directors and faculty from EOHS developed guidelines for the annual scholarship and invited EOHS students to apply. Representatives from the MBWSF and EOHS selected Lezah Brown-Ellington out of a field of five strong applicants as the first recipient of the annual award.

Born and raised on Chicago's South Side, Brown-Ellington is a single mother with three sons. After marriage, children and divorce, she decided it was time for a change and returned to graduate school in industrial hygiene at UIC. She has made public health a



Bill Gainer (SBC), Chicago Federation of Labor President Dennis Gannon, Tom Bruton, Marilyn Bruton, Reverend Gavin Quinn, scholarship recipient Lezah Brown-Ellington, Assistant Professor Serap Erdal (UIC SPH), Tim Bruton, Mike Fitzgerald (IBEW 134), Carl Galman (Steelworkers), and Mike O'Neill (Chicago Building Trades Council) celebrate first MBWSF award.

life-long passion and is currently finishing her Master of Science degree in public health and plans to continue on to work toward her PhD.

Brown-Ellington's résumé included a Bachelor of Science degree in environmental health and industrial hygiene from Purdue University, six years as the health and safety officer at Children's Hospital Medical Center in Cincinnati, Ohio, and seven years as a compliance officer and industrial hygienist with the Occupational Safety & Health Administration (OSHA) in Cincinnati. One detail that caught the committee's attention was that her work with OSHA included two years as the American Federation of Governmental Employees' union steward.

The committee was also very impressed with Brown-Ellington's record of volunteer service, which includes the Delta Sigma Theta sorority, the American Industrial Hygiene Association, and the Boy Scouts of America.

At the annual MBWSF luncheon on April 25, 2003, Brown-Ellington told a packed hall of union supporters that "it brings me great pride to stand here, and I humbly accept this plaque for being the first Michael Bruton Scholar."

During her remarks, she explained what it means to be an industrial hygienist. "It means that I am trained in understanding and anticipating what environmental or occupational exposures may cause injury, illness, or death. In short, we clean up what no one else understands. In relation to occupational exposures, we would like to think that we are the apple a day that keeps the doctor away, or if the doctor should already be in the equation, we help to control what is causing the problem."

By Peter Scheff, PhD, CIH

LEADERSHIP, SCHOLARSHIP, AND PARTNERSHIPS ARE CORNERSTONES OF THE MATERNAL AND CHILD HEALTH PROGRAM



Guatemalan children look on at a village festival.

The Maternal and Child Health Program (MCHP) in the School of Public Health's Community Health Sciences Division, first funded in 1983, is one of twelve programs in schools of public health supported by the Maternal and Child Health Bureau of the Health Resources and Services Administration. The mission of the MCHP is "to be a maternal and child health center of excellence that builds public health capacity through science-based approaches that strengthen individuals, families, communities, and health service agencies." The overall program goal is to improve the health of mothers, children, and families by preparing leaders to tackle the complex problems affecting these groups. Program emphasis is on leadership, scholarship, and partnerships with public and private agencies serving the MCH population as well as with the communities in which MCH problems are most persistent and pervasive.

A multidisciplinary program faculty offers the MPH and doctoral degrees in a multicultural environment to students who are primarily from DHHS Regions V and VII. MCH faculty and students engage in a range of initiatives designed to enhance the development of relationships and the exchange of resources between academia and the wider community. These include collaborative research activities, field-based learning in courses and practica, provision of continuing education offerings, technical assistance and consultation, and work with state and local health, welfare, and education agencies, advocacy groups, and community-based health and social service organizations.

According to MCHP director Naomi Morris, MD, MPH, "The MCHP approach forms a synergistic triangle in which community service, research, and education enrich each other reciprocally to the benefit of community members, faculty, and students here at the School of Public Health." Some examples of MCHP initiatives follow.

Recent MPH graduate Nicole Stoller, working with the Oak Park Department of Public Health, developed and tested a "tool kit" for school staff and students, parent organizations, and health departments to use in assessing their schools' food and physical activity environments. The kit has sections to evaluate various environmental elements, such as school meals' availability and content, vending machines, and availability and intensity of physical education, among others. Along with the assessment tool, the kit includes a resource guide and instructions on developing a community action and evaluation plan. Availability of a tool kit such as this could provide an impetus for community change around the issues of childhood overweight and obesity.

MPH student and nurse-midwife Barbara Recker, CNM, MSN, recently completed a practicum placement with the Chicago Health Connection (CHC), a community-based organization that provides training, nurturing, and mentoring of community women to become doulas or birth companions and breastfeeding peer counselors. The trained doulas and peer counselors utilize their valuable expertise to support pregnant teens

and young mothers in their own communities. Recker was able to make use of both her professional skills and more recently acquired knowledge from the School of Public Health to assist the CHC with an evaluation of their doula program and the design of a centralized data collection system.

When asked about Recker's contribution, CHC executive director Rachel Abramson, RN, MSN, said, "We feel very fortunate to have had Barbara Recker working with us as a public health intern during this past term. She leaves us with a valuable, indeed a critical product for our work this year: a draft data collection system for an emerging national network of community-based doula programs. Integrating Barbara into our team was a delight. I hope we provided her with an interesting context for using her existing skills and learning new ones. For the Chicago Health Connection, this internship was a very positive experience."

While all MCH students complete a practicum placement, MCH faculty members are also increasing the use of fieldwork as a component in their courses. For example, the twenty-one students in Dr. Michele Kelley's spring 2003 Community Assessment in Public Health course spent time in the Puerto Rican Humboldt Park community as a "behavioral setting," interacting with community members and leaders. The students patronized local businesses, interviewed leaders and political representatives, learned about local "indigenous" knowledge, and observed this wisdom applied in culturally tailored programs developed by community members in response to their own health issues.

Because of this exposure to and involvement with the community, the students will be better prepared to work on real-world health issues in the future and to partner with communities, recognizing their strengths as well as their critical health concerns. Jose Lopez, educator, activist, and executive director of the Puerto

Rican Cultural Center, emphasizes the importance of "the dialogic process between the community and the academy" and how respect for this process must be instilled in future public health scientists and practitioners by "engaging them at a formative stage in their careers" through field-based learning.

Faculty members of the MCH Program recognize community partners as co-creators of knowledge for improving public health practice. Community wisdom, coupled with the power of science, can be directed to solve persistent community health problems and reduce disparities in health status. At a recent symposium hosted by the Midwestern Psychological Association on "Community Action, Development, and Social Capital: A Healthy Community Perspective," community members from the Puerto Rican Cultural Center working with Kelley disseminated information about their social capital, capacity and history, and responses to health issues.

The Maternal and Child Health Bureau funds four projects in Chicago under the Healthy Start Initiative with the goal of reducing rates of infant mortality, low birthweight, and premature birth. As local evaluators, Dr. Michele Issel, for the Greater Englewood Healthy Start, and Dr. Myrtis Sullivan, for the South Side Healthy Start, direct the local project evaluation or serve on the local evaluation team and work with Healthy Start project directors to assure that the projects meet both the criteria established by the bureau and the needs of the people they serve.

Noel Chávez, PhD, RD, LD, interim director of the Community Health Sciences Division, works with the Colores de la Tierra (Colors of the Earth) community gardening project. Funded by the U.S. Department of Agriculture Community Food Projects, Centro San Bonifacio, and ECOVIDA, Association House of Chicago and the UIC SPH are collaborating to improve family and community food availability and

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quality through education and training in ecology, urban gardening, vermiculture, aquaculture, and microentrepreneurial techniques for low-income Latinos living in the West Town and Humboldt Park community areas of Chicago. Chávez works with development of the program’s nutrition content as well as with its evaluation.

Faculty member Nadine Peacock, PhD, MPH, recently returned from Monteverde, Costa Rica where she was one of four UIC faculty members teaching community-based participatory health research methods to students enrolled in a six-week program, Field Methods for Community Health, sponsored by the UIC School of Public Health. Students in the course worked with community partners, learning how to assess community issues and develop practical solutions. Peacock is currently conducting research aimed at improving the understanding of the psychological and behavioral components of pregnancy intention, in order to direct interventions more effectively to those most at risk for adverse outcomes of unintended pregnancies.

Research assistant professor Joan Kennelly, PhD, MPH, RN, serves as a consultant with the Chicago Department of Public Health (CDPH). In the past three years, she has provided leadership on several CDPH-initiated collaborative projects working closely with community and state partners. Kennelly was instrumental in conducting a collaborative, city-wide strategic planning process to create an integrated system of services for women, children, and families in Chicago. The process identified key issues and culminated in the development of a detailed strategic plan. Portions of the plan are currently being implemented with new funding from the DHHS Health Resources and Services Administration’s Community Access Program. Kennelly also works with CDPH leadership and staff on another community project to establish priorities and mobilize prevention efforts around fetal and infant mortality. Kennelly believes that community-driven, multi-disciplinary partnerships and collaborations are essential for effective public health practice.

Reflecting upon her work with CDPH, she says, “Collaborative partnerships are very energizing. They

also have great potential for generating knowledge and moving public health science and practice forward for the benefit of the whole population.”

The MCHP offers a multilevel continuing education program to address the diverse needs of MCH professionals in state and local health departments, human service and education agencies, not-for-profit advocacy organizations, and community-based health and social service organizations. This past April, the MCH Program hosted the second conference in a three-year series devoted to the translation of research into MCH public health practice. The theme of this year’s conference was “Eliminating Racial and Ethnic Health Disparities.” A new continuing education offering, Successful Development and Management of a Public Health Program, was piloted this spring and summer under the direction of Kris Gupta, DrPH, to offer additional public health leadership and management skills to both community partners and professional students.

The unique approach the Maternal and Child Health Program takes to fostering leadership, scholarship, and partnerships contributes significantly to its success in preparing public health leaders and building capacity within the broader MCH community. According to Shirley Fleming, CNM, DrPH, first deputy commissioner, Chicago Department of Public Health, “The program’s triangulated approach makes a tremendous contribution to developing future MCH leaders, to working effectively with communities, and, ultimately, to improving the health and well-being of Chicago’s families.”

By Peg Dublin, RN, BSN

Editor’s Note: An article on development of the School of Public Health’s MPH and PhD Programs in Maternal and Child Health Epidemiology by MCHP faculty members Arden Handler, DrPH, Joan Kennelly, PhD, MPH, RN, and Deborah Rosenberg, PhD will appear in *HEALTHviews* Spring 2004.

giving news

SPH AWARDS RECOGNIZE LEADERS OF THE FUTURE

This year's major School of Public Health award recipients were asked why they pursued their areas of specialty and what their awards meant to them and to their future practice in public health.



Marsha Bievre-Baker, recipient of the 2003 Paul Q. Peterson Scholarship Award for excellence in the practical application of public health delivery and research:

"As a recent MD/MPH graduate, I intend to improve the quality of reproductive health care for women around the world both as an obstetrician-gynecologist and as a public health professional. The Paul Q.

Peterson Scholarship Award has helped me progress towards this goal by providing me with an invaluable opportunity to continue my research project, Project Pace: Postpartum Adolescent Contraception Education. The goal of Project PACE is to determine the effectiveness of a one-to-one counseling approach in informing adolescent mothers about their contraceptive options in the immediate postpartum period. Without the financial support provided by the Paul Q. Peterson award, I would not have been able to continue this research project, which I plan to implement in my obstetrics and gynecology residency training program at the University of Southern California – Los Angeles County Hospital."



Jennifer Layden-Almer, recipient of the 2003 Haenszel Award for Excellence in Research within the Epidemiology and Biostatistics Division:

"I wanted to pursue a PhD in epidemiology to go along with my MD degree. The role public health plays in medicine is fundamental. In addition, the knowledge I have gained from the study of epidemiology and biostatistics is important to the conduct and pursuit of

the research I am interested in. By having both degrees, I will be better able to pursue my research interests and integrate the two fields. Being recognized by the Epidemiology and Biostatistics Division for the research I have been conducting has been a significant honor."



Angeline A. Widmer, recipient of the Alan W. Donaldson Memorial Award for academic excellence, quality of leadership, and community service:

"Public health provides a direct avenue of service for me through which to work on improving the well-being of populations

and communities, by employing core values and principles. My passion for social justice issues, which are embedded in public health, has directed my academic endeavors and continues to drive all aspects of my current work. Pursuing my MBA has provided additional expertise in applying business concepts to resource management in the public and not-for-profit health sectors. The Alan W. Donaldson Memorial Award (and similar awards) provides its recipients with recognition for outstanding work and volunteerism undertaken on behalf of underserved communities. Monetary assistance with such awards allows recipients to continue valuable service through public health initiatives within these communities. These awards also enhance the visibility of public health endeavors and remind us all of the importance of leadership and community service in advancing public health."

Dear Alumni and Friends:

You make a world of difference...

Despite the severe economic constraints of the past several years, the generous gifts of our alumni and other friends of the School of Public Health have allowed us not only to sustain but also to expand the funds that make possible the awards our 2003 recipients describe. The Peterson, Haenszel, and Donaldson scholarship funds continue to grow and continue to support the studies, work, and aspirations of outstanding students who are the leaders of the future in public health. What you give to our scholarship funds gives back to the world through the contributions of our graduates, and we are very grateful.



This past spring, we were deeply saddened to learn of the death of Viron L. Diefenbach, DDS, MPH, a nationally recognized champion for public health dentistry who served the School of Public Health as associate dean from 1977 to 1978 and then as dean from 1978 to 1983. Dr. Diefenbach is warmly remembered for his concern for the students here and his dedication to providing them with the best available educational resources and opportunities. I am pleased to be able to announce that the establishment of the Viron L. Diefenbach Public Health Scholarship Fund will carry forward Dr. Diefenbach's legacy of care and commitment.

This year, one of our goals is an increased focus on division-based outreach to School of Public Health alumni. For those of you who can return to the school, this will take the form of events that are specifically tailored to meet the needs and interests of alumni of the respective SPH divisions. Please watch your mail for announcements of these offerings and give us the pleasure of sharing them with you. For alumni from around the country, we will be holding our annual reception at the American Public Health Association Annual Meeting in San Francisco on November 17. Look for the invitation to the reception in this magazine, and we will look forward to seeing you there!

In the meantime, we would like to invite you to visit the School of Public Health website at <http://www.uic.edu/sph/> to view the completely renovated sites for each of the divisions. Also part of the new look on our website is a newly designed section for the Office of Development with an online giving feature that describes the Peterson, Haenszel, Donaldson, and other funds that serve our students.

With thanks again for your help today in creating a better world tomorrow through public health,

A handwritten signature in cursive script that reads "Susan L. Mennenga".

Susan L. Mennenga

Assistant Dean for Development