

Where Should the Fight to Eliminate Health Care Disparities Begin?

Tiffany Groover, MPH'05

More than forty years ago, the federal government made it clear that it would end Jim Crow practices by eliminating subtle forms of segregation shaped by physician practices and assuring that minorities would receive equal health care treatment. As a means to ensure this, in 1966 Title VI was enacted.

Over time, improvements have been made, but the problem has yet to be fully remedied. Health care treatment today is unfortunately consistently disproportionate between minorities and whites. This manner of treatment is defined as health care disparities. I was first introduced to this term during my freshman year at Tufts. As an introduction to a course, Community Health 101, the class viewed a film documenting the issue of health care disparities. It provided a painful portrayal of unequal health care treatment and it simultaneously reflected my personal woes.

Three years following the showing of this film, my aunt lost her fight with chronic liver disease. Her death marked her fifteenth year on the waiting list for a liver transplant, which could have saved her life. It was her death and the possibility of preserving the lives of others that became the source of my motivation and desire to address this issue. Two years following the death of my aunt, I was given the opportunity to do just that through the MPH Program's Applied Learning Experience.

For more than twenty years I have been a member of the Boston area, living in a predominately African-American community. Although the term has not always been familiar, the issue of health care disparities has and continues to be prominent within this community. Recent efforts to solve this problem have included but are not limited to increasing health care workers receipt of culturally competent education and training, consistent data collection relative to race categorization, and an effort to increase access to health care services. What remains to be said is that these interventions were developed with minimal or no use of community member input. It was through this awareness that I decided to approach this issue with a grassroots methodology.

The goal of this effort was to determine how knowledgeable African -Americans in the Boston community were about the issue of health care disparities. In an effort to achieve a somewhat representative sample, I chose four communities within the inner sectors of Boston as the site of selection; these included Roxbury, Dorchester, Mattapan and the South End.

Within each of these communities, I randomly chose a Baptist church as a recruitment site, primarily because the Baptist church has a strong influence on the ideals and decisions of African Americans that are both represented and underrepresented within the church community. In an effort to gather all of the necessary information, I, with the help of my preceptor Dr. M. Barton Laws, Assistant Clinical Professor of Public Health and Family Medicine, who is a practiced researcher in the field of health disparities from the Latin American Health Institute, developed an agenda and moderated four focus groups with

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Anthony Schlaff, MD, MPH



Anthony Schlaff, MD, MPH
Director, MPH Program

The director's message will alternate between the MPH and MS-Health Communication Program Directors.

Public Health is about both science and politics. Often, the science is simpler than the politics. This past year we have all witnessed too many major disasters, including the tsunami in December 2004, Hurricane Katrina in August 2005, and the earthquake in Pakistan in October 2005. All three were natural disasters, but in all three, human political behavior governed much of what was done or not done to prepare for such events, and what was done or not done during and after the events to protect human life. For Katrina, at least some of the responsibility for the causal web that led to the disaster can be attributed to human behavior. Nature, after all, did not design the city of New Orleans, and most would agree that global warming, specifically the slight increase in the temperature of the waters of the Gulf of Mexico, contributed to the intensity of Katrina at landfall.

Many of the scientific and technical fixes that could have ameliorated the harm done by these disasters already exist e.g. early warning systems; updated levees, pumps and tidal gates; transportation systems; buildings that are less prone to collapse in an earthquake. It is not just the scientific challenges, but the political ones that limit effective public health action. Mustering the political will to pay for these systems, particularly in the face of uncertainty and when those most at risk are poor, is a continuing challenge for society. Clearly, we cannot take every action that might protect us from every conceivable risk, but the events of the last year suggest that collectively we are doing too little.

Avian flu may be the next great "natural" disaster. The risk of such a "natural" event has probably been greatly increased by our very human systems of poultry farming throughout Asia. There are growing signs that governments are beginning to understand the potential scope and necessary response to a flu pandemic. The science of vaccine development is complex, but the capacity to develop a vaccine exists. Our understanding of the ecology and virology of influenza can improve but is already highly developed, allowing us to monitor the epidemic in wild and domestic birds and observe its occasional jumps to human hosts. We already have in limited supply medications that would likely greatly reduce the morbidity and mortality from infection. Whether we prepare in time and at a scale to stop or ameliorate a pandemic should it occur is again largely a question of politics and whether governments will muster the political will and resources to catch the start of human to human spread whenever and wherever it occurs; to develop and distribute vaccines and medicine in adequate volumes whenever and wherever they are needed; and to put in place the necessary and appropriate systems to maintain order and communication in the setting of potential global panic.

For our programs, we face the challenge of how to train and prepare students to make a difference on such issues. This is no simple task and involves thinking through both how to understand the world and how to acquire the power to change it. For the first task, that of understanding, the range of disciplines applicable to the combined scientific and political challenges presented by any single public health problem is huge. Teaching all of them, for every public health problem and with sufficient depth to create expertise, would require much more than can be accomplished in one or two years of study. Creating conditions where those trained in public health are more likely to acquire access to political power is even more of a challenge. As an educational program, we seek to bring bright and creative people to the profession and to give them some understanding of the "whys" and "hows" of political power. We can provide only the beginning of the tools needed to practice effective public health.

In part because of these challenges, public health education continually seeks to re-create itself. As a faculty, we are in the midst of two efforts to improve the curriculum. One effort involves the notion of "competency." How can we move our education from one designed to impart knowledge to one designed to prepare students to be effective in professional and political settings? Our second effort involves expanding the content of the curriculum. In particular, we recognize that the profession demands that students come to the field with some basic management skills, and with the capacity to understand the biological basis of the human health problems being addressed by public health action. We are working, therefore, to incorporate biology and management into an already crowded public health curriculum. For both these efforts, we will be looking for student input, primarily but not exclusively through the Student Senate. Please stay tuned!

A handwritten signature in cursive script, appearing to read "Tony Schlaff".

William Rand, Ph.D.

Aviva Must, PhD and James N. Hyde, Jr., MA, MS

William Medden Rand Ph.D., fondly known to his students as Will, was named Professor Emeritus at the May 2005 Tufts University Commencement. After 17 years as a member of Tufts University School of Medicine's faculty he was so honored for his demonstrated commitment to teaching and excellence in research and scholarship. In April, the department hosted a celebration of his academic life at Tufts. Several students joined the faculty gala, and others sent written remembrances. It was a wonderful party—even Will, who never likes to be the center of attention, had a good time!

Professor Rand came to the School of Medicine at Tufts in 1998, after spending the almost 20 years at Massachusetts Institute of Technology in the departments of Biostatistics and Applied Biological Sciences. As Professor of Biostatistics, Will Rand mostly taught for the medical school and the department. But, as word of his talents and patience with students and researchers traveled, his activities expanded to include the Cummings School of Veterinary Medicine, the Dental School, and the Clinical Research Center at the New England Medical Center (NEMC).

Dr. Rand's research has focused in three main areas: modeling human growth, defining human nutrition requirements, and analyzing food composition. His work in these areas was broadly recognized throughout the world and he has served on many expert panels for international organizations, including the Food and Agriculture Organization (FAO), the World Health Organization (WHO), and the United Nations. In the area of methodology, his interests extended to the design and analysis of biomedical studies and multivariate modeling of complex biological phenomena. He has over 140 publications in the peer reviewed literature, and is author or co-author of five books and at

least 25 major reports in his principal areas and fields of interest.

Beyond this record of achievement in research, it is Dr. Rand's commitment to teaching that won him a special place in the hearts of the students who passed through his classes. Dr. Rand served as the Course Director for the Epidemiology and Biostatistics course for both the medical and Cummings Schools, the core biostatistics course for the Combined MD/MPH and DVM/MPH Tracks, and a myriad of short courses in all three Tufts health professional schools. Dr. Rand is widely known and revered for his careful attention to preparation and detail. His accessibility and patience with students struggling to master biostatistics are legendary. Especially, as a deadline for a research project drew near, it was not uncommon to see a line of students forming outside of his door, all wanting to take him up on his sincere offer to provide additional help. In fact, this pattern of behavior often continued on as students entered their later years of training or even into residency for those who stayed in the NEMC-Tufts orbit.

Because of Dr. Rand's dedication to teaching, he was consistently cited by students for his teaching, receiving excellence in teaching awards from students in the Combined MD/MPH and DVM/MPH Tracks for 1998-2003. Further, the ties and bonds that he developed with his former students over the years have been strong and durable. It is a tribute to him as a teacher that when students return to Tufts for a Boston visit, for whatever reason, they often stop by our Department specifically to look up and check-in with Dr. Rand.

Although he has formerly retired as of December 2004, we are fortunate that Dr. Rand continues to stay involved in writing and scholarly pursuits and still comes to Tufts on a regular basis. So, while you can't count on him being in if you just drop by, he checks his email regularly and is eager to hear from and willing to help former students.

Faculty Notes

Beatrice Lorge Rogers, PhD, Professor of Nutrition Science and Policy, gave a talk entitled "Hunger Mapping and its Relevance to Household Food Security" at the Colombian Institute of Family Welfare's Congress on Food Security.

Denise Jacobson, PhD, MPH, Assistant Professor of Public Health and Family Medicine (PHFM), recently co-authored an article entitled "Predictors of Bone Mineral Density in Human Immunodeficiency Infected Children" in the *Journal of Pediatric Gastroenterology Nutrition*.

Congratulations to **Carole Palmer, EdD, PhD**, Professor of Nutrition and Oral Health, on her recent award of Dietitian of the Year 2005 by the New Hampshire Dietetic Association for singular American Dietetic Association leadership in the area of dental nutrition.

Congratulations to **Amy Lischko, MSPH**, Instructor of PHFM, on her recent appointment as Director of Health Care Policy for the Massachusetts Executive Office of Health and Human Services.

Congratulations to **Barry S. Levy, MD, MPH**, Adjunct Professor of PHFM, who will be awarded the Sedgwick Memorial Medal, the highest award of the American Public Health Association, at its Annual Meeting in Philadelphia on December 11.

M. Barton Laws, PhD, Assistant Clinical Professor of PHFM, along with Dr. Ira Wilson have received a 2-year NIH grant for an exploratory development project to further develop and implement a system for analyzing physician-patient interactions and software to facilitate coding and data entry.

Doug Brugge, PhD, Associate Professor of PHFM, recently had an article published by Environmental Health: A Global Access Science Source, entitled "An Epidemiological Perspective on the Teratogenicity of Depleted Uranium Aerosols".

Paul Hattis, MD, JD, Assistant Professor, was recently awarded funding as a co-investigator on a grant from the Kellogg Foundation entitled: "Using Accreditation Standards as a Tool for Increasing Racial and Ethnic Diversity in Medicine, Dentistry, Nursing and Psychology".

Dariush Mozaffarian MD, MPH, Adjunct Professor of PHFM, recently had an article published entitled "Fish consumption and stroke risk in elderly individuals: the Cardiovascular Health Study" in the Archives of Internal Medicine.

Anthrax Emergency Response Preparation

Kelly Hackett, DVM/MPH'08

Every year, first-year veterinary students in the MPH program at Tufts have the daunting task of finding a summer internship that will provide experience within the field of public health while maintaining some relevance to veterinary medicine. Although the importance of veterinary knowledge within the realm of public health activity is gaining acknowledgement, this task is not as easy as it sounds. I began my search by contacting the nearest regional public health department to see if they could offer me a worthwhile summer experience. As luck would have it, the Northeast District Department of Health was eager to give me a project. Within a few weeks we determined that I would draft an emergency response plan for anthrax exposure. No simple task, indeed, but one that would certainly involve a veterinary perspective, as anthrax is a zoonotic disease.

My task was to organize a public health response to potential anthrax exposure for a region of Connecticut that has over 85,000 residents. I had no idea where to begin, so I started with the basics. I read about anthrax and considered it from medical, veterinary, and public health

perspectives. I did literature searches on the disease and its etiology, on its diagnosis and treatment. I interviewed state public health officials about their thoughts on how to handle the threat of anthrax from environmental and bio-terrorist viewpoints. Much of my energy was focused on studying the public health response to the anthrax attacks of 2001. The lessons learned from that experience allowed me to understand where the real challenges exist and where improvement was needed. I was also able to use the department's emergency response plan for smallpox as a template for my draft. However, there exists a great distinction between smallpox and anthrax when viewed from a public health perspective. Namely, vaccinating the public for smallpox is effective protection as long as it is completed within 10 days of the suspected exposure. Anthrax is a different story. The anthrax vaccine is only available for military personnel or other individuals at high risk of coming into contact with the bacterium or its spore (i.e. researchers). This leaves public health officials with the challenge of dispensing prophylactic antibiotics to all exposed individuals within 48 hours of exposure.

Thus, response to anthrax exposure involves the potentially chaotic process of informing the public of the dangers of anthrax, transporting exposed individuals to mass prophylactic clinics, and dispensing antibiotics in a timely fashion. This is complicated by individuals who cannot travel (hospital patients, inmates, etc.) and those who may not be able to take certain antibiotics (pregnant women, people with allergies, etc.). Throw in the logistics of traffic control, recruiting and training volunteers, and communication between local, state, and federal authorities, and you have yourself quite a challenge. After participating in a drill that simulated an operating prophylactic clinic at a nearby school, I realized that preparedness is everything. If involved public health officials and volunteers are aware of their roles in an emergency response of this nature, it is much more likely to be successful in protecting the public from this disease. I only hope that my suggestions are used to prepare regional health departments for quick, effective responses to the threat of anthrax. I can only pray that the need for such an emergency response will never present itself again.



Dr. Beth Rosenberg, Assistant Professor of Public Health and Family Medicine, at the Forbidden City, in Beijing.

Investigating the Working Conditions in Chinese Footwear Factories

Dr. Rosenberg was in China in August investigating working and living conditions in footwear factories. She found it evocative of Lowell, Massachusetts in 1870, when New England farm girls left their homes to work in unsafe factories and live in crowded, sometimes squalid, dormitories. Like their historic sisters, the young Chinese women are generally happy because they don't know the dangers of the factory, they have running water, the work is easier than farm work, they have a steady food supply and they are making more money than ever before. Unlike their historic sisters, they text message each other to spread information about which factories are better places to work. Dr. Rosenberg's work will be used to try to improve environmental, health and safety programs in the factories.

2005-2006 Public Health Student Senate



Members of the 2005-2006 PHSS

Emily Backman, MPH'06, PHSS Chair

Greetings!

After a successful summer, elections, and our first meeting, the Public Health Student Senate is off and running, full-steam ahead for the 2005-2006 academic school year. The Senate has changed and grown in the past four years since its creation however remains as committed as ever to upholding our mission: "To improve the student body cohesiveness, improve the quality of academics and serve as the voice for the student body."

Our newly elected 2005-2006 Public Health Student Senate (PHSS) consists of representatives from the various degrees offered through the Graduate Programs in Public Health (GPPH). Once elected, senate members have the opportunity to pursue a Senate Executive Position as well as represent the voice of the Senate on one of the various GPPH Committees throughout the year. At the end of this article are a list of this year's elected Senate members and faculty committee representatives.

Thus far, Senate plans for the 2005 fall semester include several student social events, a Coat, Hat & Mitten Drive, our annual PHPD holiday party/toy drive and a secretive plan to bring a new public health item for sale! The Senate is also currently working closely with Doina Iliescu, the PHPD Career/Students Services Coordinator, on an Alumni Panel

for February 2006.

The Senate meets bi-monthly at 1:00 PM on Sundays and all program members are invited to attend. Meeting minutes and information regarding upcoming events will always be posted on the PHSS bulletin board in the Office of Public Health and Professional Degree Programs, outside Conference Room #1. The Tufts Public Health T-Shirts that debuted last year are still for sale at a bargain price of \$15 and pictures of the snazzy design are also displayed on the PHSS bulletin board. If anyone has any questions, comments, concerns or is interested in purchasing a shirt they are encouraged to email the Senate at: gpphsenate@tufts.edu.

We look forward to seeing you all this semester!

2005-2006 Public Health Student Senate:

MPH Track: Emily Backman, *PHSS Chair*; Marlene Camacho, *PHSS Secretary*; Meredith Haines, *PHSS Vice Chair/Finance*; Lucie Krizova, Evdokia Oikonomou

BA/MPH Track: Kenny Bain

MS-HCOM: Lara Romanowski

JD/MPH Track: Katherine Campbell

MD/MPH & DVM/MPH Tracks: Molly Seavey, Class of 2006; Yen Truong, Class

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Career Services

Doina Iliescu

The Career Services office is dedicated to empowering students and alumni to meet their career goals by providing the services, resources, and programs that enhance the career development process.

A series of skill development workshops have been planned for the year, along with an alumni panel slated for February. Additional programming will bring representatives from several Boston area employers to the school to share information about internships and employment opportunities. Please visit the events page of the Career Services web site because this page will be updated periodically as events are confirmed.

A number of career-related books are available for your use and are housed in the reference section of the Hirsh Health Sciences Library. Among the newest additions are [Expert Resumes for Health Careers](#), [Interview Magic](#), and [Networking for Jobs in Health Care](#).

Password protected jobs, internships, and fellowships are posted weekly to the Career Services web site. To obtain the password please contact me at doina.iliescu@tufts.edu or (617) 636-3519. A hard copy of the lists is posted in the Office of Student Services.

Career counseling is available by appointment. Feel free to bring any issues of concern to the table and if you would like help with your resume, please e-mail your current resume to me one week prior to your appointment.

Finally, if you're not yet familiar with the Tufts Career Network this invaluable resource, coordinated through the Tufts Office of Career Services, is a means for you to contact Tufts alumni, parents and friends who have agreed to share career and job-related information with current Tufts students and alumni. More information about using the Network is available at <http://careers.tufts.edu/network/default.htm>.

Welcome!

The Graduate Programs in Public Health (GPPH) is pleased to announce the addition of Dr. Ruth Palombo, Nutrition Concentration Leader, Ruthanne Haley, Registrar, Doina Iliescu, Career/Student Services Coordinator, and Lauren Budd, Academic/Student Services Assistant. In addition, the GPPH wishes to congratulate Mark Woodin, Sc.D. on his appointment as the new Epidemiology/Biostatistics Concentration Leader and Beth Rosenberg, ScD, MPH on her appointment as the new Environmental Health Concentration Leader. Drs. Rosenberg and Woodin have been an important part of the MPH program for many years by teaching courses (Epidemiology, Biostatistics and Occupational and Environmental Health) and advising students. A special thank you to Dr. David Gute who was the Environmental Health Concentration leader since the start of the MPH program and Dr. Christine Economos, who served as the Nutrition Concentration Leader for several years, for their leadership.



Ruth Palombo, PhD, MPH Nutrition Concentration Leader

Ruth Palombo, Ph.D., is the new MPH Nutrition Concentration Leader. She comes to us from the Massachusetts Department of Public Health where she was the Director of the Office of Elder Health. She received her Bachelor of Science in Human Nutrition and Foods, a Master of Science in Nutrition and Public Health from Columbia University, a Master of Science from Harvard University School of Public Health in Health Policy and Management and a PhD from Brandeis University's Heller School for Social Policy and Management. Her research efforts are focused on nutrition, health promotion and chronic disease prevention related to older adults and successful aging.

Mkaya Mwamburi, MD, Assistant MPH Epidemiology/Biostatistics Concentration Leader

Mkaya Mwamburi, MD, is the new Assistant Epidemiology/Biostatistics Concentration Leader and director of the Combined MPH Track's Biostatistics course. He is also a research scientist in the Department of Public Health and Family Medicine's Nutrition/Infection Unit. Dr. Mwamburi received his medical degree from the University of Nairobi, practiced medicine in Kenya and South Africa and was a Research Scientist at the University of Kwa Natal. Some of his current research efforts include operational research in HIV care and treatment in Kenya and South Africa and clinical and cost effectiveness of HIV treatment strategies including modified directly observed therapy (MDOT).



Ruthanne Haley, EdM, Registrar, Public Health and Professional Degree Programs

Ruthanne Haley, Ed.M., comes to us after most recently being the Director of Records and Literacy for Boston University's School of Education, where she oversaw the student records operations, including registration, petitions, and grading. Ruthanne has worked in higher education administration for the last thirteen years in various student services' roles and brings to the PHPD a wealth of experience. Overall she is responsible for all functions and activities of the registrar including registration, grade collection and dissemination and degree tracking and completion. Ruthanne's office is in the Public Health and Professional Degree Program's Office of Student Services.



Doina Iliescu, Career/Student Services Coordinator

Doina Iliescu joins Tufts after spending the last five years at The Heller School for Social Policy and Management at Brandeis University, where she served as the Student Events and Services Coordinator. Doina's goal for the Career Services office is for it to be dedicated to empowering students and alumni to meet their career goals by providing the services, resources, and programs that enhance the career development process. If you have any ideas for events and services you would like to see offered, please contact Doina at phpd-careerservices@tufts.edu. To learn more about upcoming career services activities for this academic year, see page 5.



Lauren Budd - Academic/Student Services Assistant

Lauren Budd is a graduate of Wesleyan University where she majored in English. She has worked in higher education and general administration for the last few years, where she has gained valuable administrative skills. Lauren provides frontline student services and assists with the coordination of registration, admissions, academic and career services.



Brooke Moore - Administrative Assistant, Dept. Public Health & Family Medicine

Brooke Moore is a graduate of the University of Wisconsin-Madison where she majored in History and Political Science. She recently worked for Towne Park Corporation in Wisconsin as an Executive Assistant and was also a support staff member for the Wisconsin State Senate. Brooke is responsible for assisting with the day-to-day Department of Public Health and Family Medicine's administrative operations.



Celebrating the Class of 2005



Members of the Graduate Programs in Public Health Class of 2005

In May 2005, the Graduate Programs in Public Health celebrated the graduation of 49 of its students. Of these students 31 received a MPH degree; 4 received a MS-Health Communication degree, 7 received MD and MPH degrees; and 7 received MS-Nutrition and MPH degrees.

Sunindia Bhalla, BA/MPH, gave the Graduate Programs' Student Address. In her address, she noted that public health incorporates all of the future actions of those in attendance at the commencement; the future epidemiologist, researcher, physician, chief executive officer of a hospital, or an employee of the World Health Organization.

At a reception honoring the class of 2005, several awards were given. Academic Achievement awards were given to Lauren Hacker, MPH, Jessie Glasser, MD/MPH, and Melissa Wachterman, MD/MPH. Alia Bucciarell, MS, and Emily Case, MS were honored with the Murray Feingold and Timothy Johnson Health Communication Academic Achievement Award.

The Outstanding Applied Learning Experience Award was given to Amanda Behrens, MPH for her project entitled "*Strategic Communication Plan and Web Design for the Massachusetts Public*

Health Association" and Melissa Wachterman, MD/MPH for her project entitled "*The Impact of Gender and Marital Status on End of Life Care*". Emily Case received the Norman S. Stearns Applied Learning Experience Award in Health Communication for her project entitled "*Evaluation of 'What's Up Doc?'*" *A Program Addressing Elder Patient/Doctor Communication.*"

Several students were inducted into the Honorary Public Health Society, Delta Omega and they included, Amanda Behrens, MPH, Ethan Eddy, JD/MPH, Lauren Hacker, MPH, Stephen Miller, MPH, and Melissa Wachterman, MD/MPH.

The class of 2005 honored several faculty members with Citation for Excellence in Teaching Awards. Marcia Boumil, JD, LL.M. was honored by the MD/MPH students and Mark Woodin by the MPH Program students. In addition, Alfred DeMaria, Jr., MD, Director of the Bureau of Communicable Disease Control and State Epidemiologist at the Massachusetts Department of Public Health received the 2005 J. David Neparstek Community Mentor Award.

Best wishes to the class of 2005!

Ian MacNeill Award

The Graduate Programs in Public Health is pleased to announce the new Ian MacNeill Award. The award was established to recognize the work of a Tufts' health sciences or public health student who, in the opinion of the faculty, has demonstrated an outstanding ability to analyze and interpret, display and communicate critical information derived from research data. This award honors the work of Dr. Ian MacNeill, Emeritus Professor in Statistics who, through his academic career, has set the standard for research and scholarship in applying analytical tools in the public health sciences.

Dr. Ian MacNeill is a native of Saskatchewan, Canada. He earned an MA in mathematics at Queen's University and a PhD in statistics at Stanford University. For most of his academic career, Dr. MacNeill has been a faculty member at the University of Western Ontario, and was the founding Chair of the Department of Statistical and Actuarial Sciences. He is now Professor Emeritus in that Department. His academic specialty is time series analysis and forecasting. He is co-founder of The International Environmetrics Society and the journal *Environmetrics*. Equally important, Dr. MacNeill has developed and applied statistical methodologies in various areas of public health. He is well known for his significant contributions to modeling and forecasting of infectious and chronic diseases and for his international work on enhancing analytical tools for disease surveillance.

The Ian MacNeill Award will be given annually to the student whose work as judged by the selection committee satisfies at least two of the following three criteria: Demonstrates an innovative application of analytic techniques to public health data thereby leading to new insights and conclusions; Makes effective use of unusual data sources; Demonstrates the use of innovative communication tools and data visualization techniques to successfully deliver public health information to a particular audience.

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one held at each establishment. The insight provided by these focus groups was extremely powerful. Of the messages conveyed, two were outstanding. First, these individuals want to become advocates for their health care, but are in need of assistance and support. Secondly, it is critical that members beyond their community, particularly those in academia partner with them, seek their input, and include them as a vital asset in the elimination of health care disparities.

In an effort to ensure that these individuals' concerns do not go unheard, I am currently working to implement an educational program within these communities. The goal of this program will be to help these community members become advocates for their health care, provide an outlet for their continued concerns, and work to establish a strong rapport between these communities and that of academia.

Although this may be a small start to addressing such a huge problem, this approach may in fact give insight into what is possibly a lasting solution.

2005-2006 Public Health Student Senate

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of 2007, *PHSS Vice Chair/Programs*; Janelle Baptiste, Class of 2008

2005-2006 Senate PHPD Committee Representatives:

Steering Committee: Emily Backman, MPH Candidate; *Admissions:* Marlene Camacho, MPH Candidate; *Academic Affairs:* Evdokia Oikonomou, MPH Candidate; Yen Truong, MD/MPH'07; *Promotions:* Lara Romanowski, MS-HCOM Candidate

GPPH Rounds

The Graduate Programs in Public Health of Tufts University School of Medicine publishes the GPPH Rounds semi-annually. It reports on the activities of the programs, students, faculty, and alumni. We welcome your suggestions, photographs and news items.

Editor

Robin Glover

Comments should be sent to:
Robin Glover
Public Health & Professional Degree Programs
Tel: 617-636-2497
Fax: (617) 636-4017
robin.glover@tufts.edu

Visit the GPPH Web site:

www.tufts.edu/med/gpph/index.html

Tufts University School of Medicine
Public Health & Professional Degree Programs
136 Harrison Avenue
Boston, MA. 02111