


BY PAULA DERROW
PORTRAITS BY JOHN HERR
ILLUSTRATION BY TWO BY SIXTEEN

# The Alumni Powering New York

**There's nothing more exhilarating or meaningful than working in public health in an enormous—and enormously complicated—city like the Big Apple.**



Helen Arteaga, PhD, MPH '01 (left), is a New York City deputy mayor; Erin Kelly, MPH '15, is the chief of staff in Arteaga's office.

Students on the Columbia Mailman campus are united by the experience of living and studying in New York City. With all its excitement, messiness, and myriad challenges, the city is a living laboratory for the study of public health, and an example of the great need urban areas have for public health professionals to make life better.

It's no wonder, then, that after graduation so many alumni land roles in city government, as well as its health departments, agencies, and institutions that are vital to the life of the five boroughs. "New York City is one of the largest employers of graduates," confirms Heather Krasna, PhD, associate dean of career and professional development. A career with the city can shape-shift over time. Look at Nathan Albert, MPH '20 (Sociomedical Sciences), who worked as a community engagement supervisor for NYC Health + Hospitals after graduation. He later moved to the New York City Department of Health and Mental Hygiene and then became a project lead for the Department of Transportation.

On the following pages, meet five more alumni who prove that whatever brings you to New York City, there's a reason to stay and make your dreams happen.

## With a public health degree and a desire to benefit New Yorkers, there is flexibility to move within the city, trying on roles and broadening your expertise.

**HELEN ARTEAGA, PhD**

MPH in Health Policy and Management, '01

### Looking Out for New Yorkers from Cradle to Grave

Helen Arteaga was introduced to the need for public health policies that protect vulnerable people at an early age. "My father, who brought our family to Queens from Ecuador, was diagnosed with Stage 4 leukemia when I was 18," recalls Arteaga, who is New York City's deputy mayor for Health and Human Services.

Her father ended up at Elmhurst Hospital, close to where they lived, which seems like it would be a good thing—except it wasn't. "In the richest, most advanced country in the world, my father didn't have access to health insurance, so he couldn't get the cancer treatments he needed," says Arteaga. "He was diagnosed in November, and he died in February. I still remember that his Medicaid rejection letter arrived after he was already gone."

The tragedy galvanized her, propelling her to eventually become CEO of Elmhurst Hospital in 2021, where she helped transform it from "a place no one wanted to go to," as she describes it, to being named one of the best regional hospitals in the country by U.S. News & World Report. Arteaga was the first woman and first Latina to hold the CEO role; she says that despite what happened to him, "My father wouldn't have wanted it any other way. If his death is what it took to light a fire in me, to become the public health leader I am today, then I know, one thousand percent, that his death was not in vain."

Arteaga was appointed deputy mayor early in the administration of Mayor Zohran Mamdani. She leads the city's departments of social services, aging, veterans' services, and youth and children's services, among others, along with NYC Health + Hospitals and the Office of Chief Medical Examiner. "One of the things I love about my role is that it touches New Yorkers from the moment life begins, starting with prenatal care, birth, after-school programs and early education; vaccines; veterans' services—and, for people who fall on hard times, food stamps and Medicaid. I'm also there at the end of life. It's the full cycle. No two days are alike. On any given day, I get to touch the lives of 8.5 million people."

Not that New York City always makes her job easy. "The bureaucracy is like a ball of yarn you have to untangle," she quips. "Another challenge is breaking through to individuals and leaders who have been beaten down in public service. My goal is to remind them of the fire they still have; that they can make a difference."

It helps that, in some ways, the newish job feels like an extension of where she started. "I grew up in Corona, Queens, which is a high-need district. The neighborhood has one of the highest TB rates in the city, for instance, and there is a very busy TB clinic just ten blocks from where I live. I love how the staff there checks in to make sure that patients have up-to-date Medicaid; have had their annual physical; and provide information on housing. It's about seeing the whole person and making sure their needs are met. That's public health at its best."

Her education at Columbia Mailman prepared her for both the broad skills she needs and the details. "In stats class, I fell in love with using data for a purpose. The tools I learned at Mailman—logic models, the three P's [prevention, protection, promotion], all the foundational frameworks—I use them every day. That's why I'm grateful for the School. I find Mailman alumni everywhere I turn, including my deputy chief of staff. I'm optimistic that despite the federal government putting up barriers, we will find a way to keep people fed and insured. I've only been in the job six months, but I can already see the changes in my neighborhood as a result of what we've put into place. That's exciting."

**ERIN KELLY**

MPH in Health Policy and Management, '15

### Taking Health Policy From Idea to Implementation

Erin Kelly likes to describe her job as deputy chief of staff and chief strategy officer in the Office of the Deputy Mayor for Health and Human Services as a juggling act: "It's about balancing long-term policy work with putting out the fire of the day," she says from her desk at City Hall, where she works under Deputy Mayor Arteaga. "You're trying to implement something over the course of a few years, setting the stage, working around funding and the political realities of the moment, while also dealing with hantavirus or whatever crisis might come up on any given day."

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A correctional health job takes Nicki Harris, MPH '25, to Rikers Island.

That toggling doesn't faze her. Interestingly, she likens the kind of multitasking that's required in this role to when she was teaching in a classroom, which she did at Columbia Mailman, as a TA for Professor Larry Brown, PhD, and Professor Michael Sparer, JD, PhD. She still thinks of Sparer's course on policy and politics every day. "At City Hall, the central question is, 'How do you marry policy with the political?'" she says. "With Dr. Sparer, we worked quite a bit on health policy, the history of Medicaid, how it evolved, how it has been redesigned over time. Now, in this current moment with Medicaid, that's a constant lesson I draw on. Nothing is ever entirely new."

Kelly has worked for New York City for nearly her entire career, including for the city's Independent Budget Office and the Department of Social Services. Initially, though, she grew up thinking she wanted to be a doctor. "I took all the courses. I was very committed," she says. But then she did a stint for AmeriCorps working at a community health center. "That exposed me to both healthcare and public health at once, which is exactly why community health centers are such a great resource," she says. "I got interested in thinking about health at a global, whole-population level, and was driven to work in that space. I went to Mailman right after that, and ever since, my whole career has moved between the public health space and engaging with government and social care systems."

After going at it for more than a decade, she still calls what she does for a living "amazing." "The ability to impact so many people with your work is extraordinary. I'd encourage anyone with a public health degree to look into city government work and see where it might lead." That doesn't mean there aren't bumps—for one thing, the sheer size of her constituency makes it feel as if she is working for many cities within the city. "It's so large and varied that ensuring that everything we do benefits as many people as possible is a challenge," she says.

What helps is seeing her efforts reap real results. "I've spent a good part of my career thinking about the overdose crisis—about how we can do better for people dealing with substance use issues." She says the downward trends we're seeing in overdose deaths in the city stoke her optimism. "In the end, I'm very happy that I didn't become a doctor," she says. "Doctors are great, but I love the macro lens I get to take to work every day."

NICKI HARRIS

MPH in Sociomedical Sciences, '25

## Making Less-Visible New Yorkers Feel Seen

When Nicki Harris told friends and family that she'd accepted a position as a city program manager that would take her into Rikers Island, one of the city's most notorious jails, many balked. "I heard a lot of, 'Are you sure you'll be OK working with criminals?'" she recalls.

Yet Harris knew that working at NYC Health + Hospitals/Correctional Health Services running a program that enables incarcerated people to get care for often-stigmatized conditions such as HIV and hepatitis C, perhaps for the first time in their life, was exactly what she was meant to be doing. "I grew up low-income in San Diego, and people from my own family have been incarcerated, so this work hits home—it's my way of paying it forward," she says. "I get to directly serve people who cycle in and out of carceral settings, who face significant barriers not only to care, but also to housing and substance use programs. If I can help just one person break that cycle, that matters."

Not that her role is easy. For one thing, there's the red tape that comes with working for a big city institution—a factor that every person interviewed for this story mentioned. Yet in Harris' position, where she is responsible for screening and treating incarcerated people who opt in to the program for hepatitis B and C and HIV, as well as for providing antiretroviral PrEP treatment to help prevent the spread of HIV, the most significant challenge right now is federal funding cuts. "Our

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partner organizations are being downsized and reducing services at precisely the moment when we're seeing an increase in HIV diagnoses and higher rates of infectious disease. My colleagues who have been doing this work for 20, 30 years are alarmed."

Also challenging: working in a jail. "The setting is completely invisible to most of society, and navigating the physical environment, working alongside corrections officers, doing more with fewer resources—all of that requires a mental preparation that most people don't associate with public health work."

And yet, somehow, she says she couldn't feel better prepared. As someone who came out of the Department of Sociomedical Sciences, she says that "the focus on health equity, structural racism, and social determinants of health was woven through all our coursework. That foundation is a big part of why I felt drawn to—and ready for—working in a jail setting." Harris was particularly influenced by Professor Robert E. Fullilove, EdD, who would regularly bring formerly incarcerated people into the classroom to share their experiences. "Hearing those stories showed me that someone can come out of prison after 20 years and, when connected to the right resources, do remarkable things," she says.

Harris sees those possibilities on the job, every day, in the most unlikely circumstances. "The most rewarding part is how tangible it is—I have a direct impact on the communities of New York City, and I see what I do play out in people's daily lives." Often, when she comes into work, patients run up to her, excited to talk about their treatment or thanking her for helping them get cured. Says Harris: "When people get excited about their own medical care, especially around diseases that no one wants to discuss, well, that's truly remarkable."

Nina Rothschild, MPH '92, DrPH '00 (left), has worked for more than two decades in the New York City Department of Health and Mental Hygiene; Melissa Nuñez, MPH '19, brings her biostats brain to the City Council.



**NINA ROTHSCHILD**

MPH in Sociomedical Sciences, '92;
DrPH in Health Policy and Management, '00

## Protecting New Yorkers From Deadly Outbreaks

In college, Nina Rothschild wouldn't have predicted that she'd end up at New York City's Department of Health and Mental Hygiene, much less stay there for more than two decades, working first in maternal health, then in HIV prevention. Rothschild graduated from Barnard as an English major, then went on to earn a master's degree in English literature at Columbia Graduate School of Arts and Sciences. But while browsing the public health course catalog one day, she found herself more interested in what she wasn't studying. "I wanted to take almost everything!" she says. She enrolled at Columbia Mailman in the fall of 1990.

Looking back at her time at the School, she particularly remembers Ronald Bayer, PhD, now a professor emeritus of Sociomedical Sciences, and reading his book, *Private Acts, Social Consequences: AIDS and the Politics of Public Health*. "He included a section on closing the bathhouses in San Francisco as a means of reducing HIV transmission—this was before the era of antiretroviral cocktails," she recalls. "The tension between public health decision-making and civil liberties is something I see playing out in different forms constantly today."

With her DrPH in hand, she landed at the city's health department and, over her 26-plus-year career, has worn many hats there. Currently, she is a city research scientist—"though I don't actually do research," laughs Rothschild, who is also a former Columbia Mailman Alumni Board member. What she does do, in the department's Division of Disease Control, is direct the physician-on-call program, where doctors are available outside of normal business hours and on weekends to answer calls from the city's providers about infectious disease concerns.

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She also makes sure that the city is prepared for public health emergencies, whether it's welcoming sailors for Fleet Week or 1 million visitors from around the world for the FIFA World Cup. "Anything could happen," says Rothschild. "A visitor could arrive from a country with Ebola; a food vendor could serve unsafe food, sending a hundred people to the emergency room. And that's not counting the usual things that go along with large crowds and a major international event, such as a measles outbreak. Whatever it is, we have to be ready."

If that sounds complicated and, well, stressful, Rothschild relishes it. "I'm a New Yorker. What I love about working in a large jurisdiction like New York is the scope of it all—we have access to extraordinary amounts of data and deal with a remarkable array of public health challenges. From the moment you enter the subway and see people who are unhoused or living with mental illness, it's clear there's no shortage of need."

And though it is a difficult period in the public health field in general—Rothschild points to the spread of misinformation and antivaccine sentiment, to name just a couple of current issues—she says she takes comfort in what she sees as the camaraderie in the field. "We're all in the same boat and confronted with the same pressures, but we also know that this current political moment won't last forever," she says.

In other words, she's not one to run from a crisis but rather to savor her ability to react to it. Case in point: Ask Rothschild what has been most satisfying about her time at the health department and she is quick to say, "unequivocally," that it was having direct contact with community members during the pandemic, when she led a team of 90 or so people giving out 1,000 vaccines a day for two and a half months in the Rockaways. "Somehow, one gentleman got my cell number—we had vaccinated him, his mother, and his sister, who had a mental disability, and he kept calling to thank me. I held on to one of his messages for a long time," Rothschild recalls. "That kind of connection is what this work is really about."

**MELISSA NUÑEZ**

MS in Biostatistics, '19

## Analyzing the Effectiveness of Public Health Programs

It isn't always easy figuring out how you can make a living doing something you love—especially when that something feels highly abstract. That was the dilemma Melissa Nuñez faced when she graduated from Adelphi University in 2017, with a degree in mathematics. "I knew I wanted to use my quantitative skills, but at the same time, I wanted to see my work making an impact in the world," says Nuñez, an assistant deputy director on the data team of the New York City Council.

She found what she was looking for at Columbia Mailman's Biostatistics Epidemiology Summer Training program. "I discovered biostatistics and public health and got my first real exposure to the field," she says. "I was searching for the intersection between quantitative skills and real-world impact. That summer, I found it."

As a native New Yorker born, raised, and living in the Bronx, Nuñez is keenly attuned to how what she studied, and what she now does for work, affects the city she calls home and the people who live there. Columbia Mailman helped her make that connection. She says the summer program—then, later, the master's program—helped her appreciate the importance of thinking critically about health, from both a quantitative and a qualitative perspective. "At Mailman, I learned how everything connects. Public health isn't just clinical—it's housing quality and asthma; transportation and health inequities; policy and population outcomes. Mailman helped me see the full picture."

That's the kind of broad lens Nuñez relies on at the City Council, where she has been for seven years, starting as a data scientist within the legislative division, then moving up to senior data scientist, and finally to the data division management team. "We support the policy and policy-making process, using data and qualitative evidence to understand what's happening on the ground."

She is especially proud of her work on the City Council's Cure Violence programs, which treat gun violence as a public health issue. "The approach mirrors how you'd treat an epidemic," she explains. "We use credible messengers, people who were once involved in the justice system, as mentors who work with at-risk youth to prevent gang violence and retaliation." Her role, in part, involved a yearlong rigorous analysis of the program's effectiveness. In precincts where the program was deployed, shootings decreased by up to 19 percent. "That's exactly the kind of work I came here to do—connecting data to real policy outcomes," she says.

Her projects aren't always that cut and dried, however. "We have to balance many competing priorities and address legal considerations, which means moving slowly and carefully," she says. Moreover, the public data she works with aren't necessarily built for research or analytical purposes. "A lot of what I do involves figuring out how to interpret messy information and turn it into something useful and actionable," she says.

And yet, for Nuñez, working for the city's governing body is exactly the type of career she yearned for. "I feel a sense of purpose," she says. "My job affects New Yorkers across the city. I'll see something on the news, come to work the next day, and dig into it. Every day brings something new and relevant. I just love that." ●

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**PAULA DERROW** covers health, psychology, and social change and often writes for universities and nonprofits.