SUMMER 2014

ISSUE 4

sms socialforces

the **NEWSLETTER** of

THE DEPARTMENT OF SOCIOMEDICAL SCIENCES, COLUMBIA UNIVERSITY MAILMAN SCHOOL OF PUBLIC HEALTH

RESEARCH FINDINGS

Gendered Power and Negotiating Women's Health in Rural Tamil Nadu, India PAGE 8

The Renormalization of Smoking? E-Cigarettes and the Tobacco "Endgame" PAGE 10

Rewriting Abortion: Deploying the Medical Record in Jurisdictional Negotiation over a Forbidden Practice in Senegal PAGE 12







CONTENTS

2 SMS SNAPSHOTS

- **3** FROM THE CHAIR
- 4 GRADUATES
- 8 SMS IN ACTION
- **10** RESEARCH FINDINGS
- 15 DISPATCHES
- 16 PROFILES
- **25** INCARCERATION INITIATIVE
- 26 SMS AWARDS
- 28 BIBLIOGRAPHY & GRANTS

<mark>sмs</mark> snapshots...



Doctoral students Heather Wurtz, Siri Suh, and Sara Shoener at SMS Food for Thought



Dr. Merril Silverstein, Professor Eugene Litwak, speaker Dr. Vern Bengtson, SMS Chair Lisa Metsch, and Professor Richard Parker at the 2014 Annual Eugene Litwak Honorary Lecture



SMS MPH students Megan Galeucia and Emma Prins and Professor Jennifer Hirsch lobbying for the Farmworkers Fair Labor Practices Act in Albany



Grants Director Kim Guevara, Professor Ana Abraído-Lanza, and Director of Admissions and Financial Aid Joseph Korevec at our monthly Bagel Bash



Program Coordinator Chelsea Davis (SMS MPH '12) and Professor David Weiss at the Seminar Series for Gender, Sexuality, and Health



SMS MPH students enjoy our monthly Bagel Bash



Doctoral students Mariana Martins, Nadav Antebi, and Elisa Gonzalez at the 2013 SMS Holiday Party

Welcome



elcome to the Summer 2014 issue of SMS Social Forces! Congratulations to our 2014 SMS graduates! Our graduates have accomplished so much during their time at Columbia and we wish them all the best as they embark on their careers in public health and the social and behavioral sciences. Notably, our MPH students were members of the first cohort of students at Mailman to complete the new Columbia MPH core curriculum. Additionally, this year there was a record number of social science and public health scholars who received their PhD and DrPH degrees in SMS.

We had many accomplishments during this past year!

We were awarded a new National Institutes of Health (NIH)-funded pre-doctoral and postdoctoral training program in collaboration with Columbia University's School of Social Work. This award represents our third NIH-funded training program. The incoming cohort of doctoral students will all be receiving pre-doctoral fellowships in our training programs. Recruitment for our MPH program is at a record high and this fall SMS will welcome our largest incoming class of masters students. Our students continue to be the recipients of numerous awards and honors from Columbia University and numerous foundations and federal agencies such as the National Science Foundation and the NIH.

This year SMS and the Mailman School received a generous gift to establish and endow the new Lerner Center for Public Health Promotion and recruit the new Sidney and Helaine Lerner Professor of Public Health Promotion. The Center's focus will be on social and behavioral factors associated with health status and behavior and the science and methods of effective behavior change essential to preventing disease and managing chronic illness.

Our faculty and students published important new study findings (some are highlighted in this issue of Social Forces) that demonstrate how we are bringing the social sciences to bear upon our most pressing public health challenges in the US and throughout the world. Our faculty members have received numerous new grants this year. Notably, Professor Diana Hernandez received her first independent NIH grant and Professor Rachel Shelton was awarded a career development grant from the American Cancer Society. Our SMS faculty members are among the best teachers at Columbia. Professor and former SMS Chair, Amy Fairchild, was awarded (from the Mailman students) the 2014 Mailman School Teaching Excellence Award.

We plan to continue to reach out to our SMS alumni. We ended our academic year with a breakfast for SMS alumni and hope to reach out more next year. We look forward to the coming academic year. Please stay in touch.

Best regards,

Lisa R. Metsch, PhD

Stephen Smith Professor and Chair of Sociomedical Sciences

A warm welcome to new **SMS** faculty and staff

- Rej Joo, MPH, Project
 Coordinator (Supervisor: SMS
 Professor Patrick Wilson)
- Grace Lee, MPH, Project
 Coordinator (Lerner Center for Public Health Promotion)
- Michael McNeil, EdD, Adjunct Assistant Professor of Sociomedical Sciences
- Douglas Phillips, MPH, Project Health Coordinator (Supervisor: SMS Professor Diana Hernandez)
- Monica Sweeney, MD, Adjunct Assistant Professor of Sociomedical Sciences
- David Weiss, PhD, Assistant
 Professor of Sociomedical
 Sciences (Columbia Aging Center)

Congratulations MPH Graduates

FEBRUARY 2014

Hannah Cohen-Blair Heidi Poppendeck Susannah Slocum Walidah Walker Amanda Winters

MAY 2014

Kristin Aquero Brittany Ajegba Kathleen Bahan Julie Bass Rachel Bavley Philip Beaudry Elizabeth Bloemen Lauren Boc Elisabeth Brockway Camilla Burkot Angelina Caruso Meghan Chappell Christine Chen-Person Lauren Cubellis Gloria Diaz Miki Duruz Edith Fox Emilie Gladstone Cynthia Golembeski Monica Gould Caitlin Gruer

Sindhura Gummi Danielle Gurr Anuradha Hashemi Sarah Kerr Memoona Khan Monika Khan Christina Kyriakos Colleen Lanier Christensen Grace Lee Matthew Lee Rachel Leep Tara McCrimmon Lisa McManus Deborah Min Rahma Mkuu Nicole Moodhe Manasa Muthusubramanian Doris Osei-Afriyie Sheila Pande Vivian Peng Zachary Peters

Mary Pisciotta Katherine Robbins Neesha Rov Brena Sena Stuart Sia Hannah Sommer Laura Sutter Tisa Thomas Lauren Uhler Gloria Vidal Karina Villanueva Frin Ward **DeCiembre White** Molly Woodriff Amy Yang Hope Yates Mary Yeotsas Toddchelle Young Kara Zinger



Meet four of our 2014 MPH graduates



Brittany Ajegba

Brittany Ajegba graduated with her MPH in Sociomedical Sciences in May 2014. She is primarily interested in health disparities amongst minority populations and maternal and child health. Her thesis was entitled, "Assessing the Social and Economic Determinants of Uptake of and Adherence to Prevention of Mother to Child Transmission (pMTCT) of HIV Strategies in Post Civil War

(Conflict) Nations in Sub-Saharan Africa," and was sponsored by SMS Professor Joyce Moon-Howard. For her practicum, Brittany worked with the Washtenaw Area Council for Children as a Co-Community Outreach Coordinator for their Safe Sleep program, which addresses preventable infant deaths caused by unsafe sleep practices. Brittany received her BA in Sociology with minors in International Studies and African-American studies from the University of Michigan-Ann Arbor in 2011. She is an avid sports fan and loves to watch Wolverine football. After graduation, she hopes to pursue a Doctor of Medicine (M.D.) degree, with the goal of combining public health and medical approaches to explore social and economic determinants of health in minority populations.



Memoona Khan

Memoona Khan graduated with her MPH in Sociomedical Sciences in May 2014. Her thesis was entitled, "Does Contraceptive and Condom Self- and Collective Efficacy Allow Adolescent Girls in Sub-Saharan Africa to Make Better Sexual and Reproductive Health Decisions?" and was sponsored by SMS Professor Mindy Fullilove. Memoona received her BA in Health Policy Studies

from the University of Michigan-Dearborn in 2010. She is passionate about sexual and reproductive health and rights and is particularly focused on gender-based violence. Originally from Zambia, she chose to return there for her practicum experience and work on a project with the Population Council to empower adolescent girls. She trained interviewers, supervised data collection, and spoke with many women and girls about problems they encounter on a daily basis. Now that she has completed her MPH, Memoona plans to return to Zambia to continue working with the Population Council, and eventually pursue research and program implementation around gender-based violence as the issue gains exposure and momentum within the country.



Grace Lee

Grace Lee graduated with her MPH in Sociomedical Sciences and a certificate in Health Promotion Research and Practice in May 2014. A 2014 recipient of the Sociomedical Sciences Distinguished Master's Thesis Award, Grace's thesis "Sign up for Health Care! Increasing Young Adult Enrollment in the Health Insurance Under the Affordable Care Act" proposed a health communication

intervention to increase young adult enrollment in health insurance under the Affordable Care Act, and was sponsored by SMS Professor Marita Murrman. For her practicum, Grace supported the Putnam County Department of Health in preparing for national public health accreditation by assisting with website reconstruction, finalizing reports, and initiating quality improvement processes. The project was funded by the Health Resources and Services Administration (HRSA) and supported by the New York City-Long Island-Tri County Public Health Training Center. Prior to Columbia, Grace received her BS in psychobiology from UCLA and served in AmeriCorps as a community organizer in Baltimore City. Grace is now the Project Coordinator for the new Lerner Center for Public Health Promotion in the Department of Sociomedical Sciences at the Mailman School of Public Health.



Matthew Lee

Matthew Lee graduated with his MPH in Sociomedical Sciences and a certificate in Health Promotion Research and Practice in May 2014. His thesis was entitled, "MSM Narratives of Lubricant Use, Condom Failures, and Sexual Risk in South African Townships," and was sponsored by SMS Professor Theodorus Sandfort. Matthew received his BA in anthropology and English literature,

with a minor in public health, from Washington University in St. Louis in 2012. Matthew is interested in gender and sexuality, with a particular focus on exploring the sociocultural contexts of STI and HIV transmission and prevention. While at Mailman, he conducted research at the HIV Center for Clinical and Behavioral Studies and served as a Health Promotion Assistant at the Morningside campus. He was also able to play his 5th and last year of college eligibility for the men's ultimate frisbee team at Columbia. With his MPH, Matthew intends to work in the field of sexual and reproductive health, focusing on the design and evaluation of theory-driven and evidence-based STI and HIV prevention programs. He would also like to pursue doctoral studies at the intersection of anthropology, public health, and medicine. Matthew graduates from Mailman deeply grateful for the mentorship of his SMS professors and with great respect for his peers, particularly his cohort in the Health Promotion Research and Practice certificate, under the direction of SMS Professor Marita Murrman.

Congratulations Doctoral Graduates

FEBRUARY 2014

Linnea Carlson, PhD (Anthropology)

DISSERTATION TITLE: "'Takin' it On': Communicating AIDS Through Universal Templates in Guyana" SPONSOR: Kim Hopper POSITION: Part-time faculty in the Department of Sociology at Framingham State University and the Department of Anthropology at Bridgewater State University

Allison Goldberg, PhD (Political Science)

DISSERTATION TITLE: "Norms within Networks: Opinion Leader and Peer Network Influences on Mothers/ Caregivers' Childhood Immunization Decisions in Rural Northern Nigeria" SPONSOR: Peter Messeri POSITION: Director, Global Corporate Affairs at Anheuser-Busch InBev

Kasia Malinowska-Sempruch, DrPH

DISSERTATION TITLE: "HIV among Drug Users in Poland: The Paradoxes of an Epidemic" SPONSOR: Richard Parker POSITION: Director of the Open Society Global Drug Policy Program

Kristin McCarthy, DrPH

DISSERTATION TITLE: "Social Capital and Health: A Multidimensional Approach" SPONSOR: Robert Fullilove

MAY 2014

Alison Bateman-House, PhD (History)

DISSERTATION TITLE: "Compelled to Volunteer: American Conscientious Objectors to World War II as Subjects of Medical Research" SPONSOR: Ronald Bayer POSITION: Postdoctoral fellow at New York University's Division of Medical Ethics.

Naumi Feldman, DrPH

DISSERTATION TITLE: "Public Conceptions about the Effectiveness of Race-Based Medicine and Personalized Genomic Medicine" SPONSOR: Jo Phelan

Melissa Kenzig, DrPH

DISSERTATION TITLE: Health Status and Personal Development During College: The Effects of Health Behaviors and Negative Experiences on College Students' Transition to Adulthood" SPONSOR: Bob Fullilove POSITION: Assistant Professor in the College of Health, Human Services, and Science at Ashford University

Li Kuang, PhD (Sociology)

DISSERTATION TITLE: "Neighborhood Effects on Children's Educational Attainment and Teenage Childbirth" SPONSOR: Mary Clare Lennon

Sara Lewis, PhD (Anthropology)

DISSERTATION TITLE: "Spacious Minds, Empty Selves: Coping and Resilience in the Tibetan Exile Community" SPONSOR: Kim Hopper POSITION: Visiting Assistant Professor of Anthropology, University of Oregon

Heather Moulton, DrPH

DISSERTATION TITLE: "Aging with Longterm Physical Disability: The Role of Secondary Conditions" SPONSOR: Peter Messeri

Sara Shoener. DrPH

DISSERTATION TITLE: "Accounting for Comprehensive Safety: Intimate Partner Violence, Marginalization, and Institutional Response" SPONSOR: Jennifer Hirsch

Siri Suh, PhD (Sociology)

DISSERTATION TITLE: "The Paradox of Post-Abortion Care: A Global Health Intervention at the Intersection of Medicine, Criminal Justice, and Transnational Population Politics in Senegal" SPONSOR: Connie Nathanson POSITION: Visiting Assistant Professor in the Department of Sociology at Barnard College, Columbia University

Carmen Yon Leau, PhD (Anthropology)

DISSERTATION TITLE: "Sexuality, Social Inequality, and Sexual Vulnerability Among Low-Income Youth in the City of Ayacucho, Peru" SPONSOR: Richard Parker POSITION: Researcher at the Instituto de Estudios Peruanos (Institute for Peruvian Studies)



From left to right: Front row-Sara Shoener, Carmen Yon-Leau,Naumi Feldman, Sara Lewis and Allison Goldberg. Back row: Adria Armbrister, Siri Suh, Brooke West and Kirk Fiereck.

OCTOBER 2014 (EXPECTED)

Adria Armbrister, PhD (Sociology) DISSERTATION TITLE: "The Influence of Discriminatory Beliefs on Practice: Racial Disparities in The Treatment of Women with Systemic Lupus Erythematosus (SLE)" SPONSOR: Jo Phelan POSITION: Social Development Specialist, Gender and Diversity Division, Social Sector, Inter-American Development Bank (IDB)

Laura Bothwell, PhD (History)

DISSERTATION TITLE: "A Social History of the Randomized Controlled Trial" SPONSOR: James Colgrove POSITION: Postdoctoral fellow at Harvard Medical School / Brigham and Women's Hospital in Pharmaceutical Law and Health Services Research

Kirk Fiereck, PhD (Anthropology)

DISSERTATION TITLE: "Modern Traditions: Sexual Ideology and Sexual Science in South Africa" SPONSOR: Richard Parker POSITION: Mellon Postdoctoral Fellow in Sexuality/Queer Studies at the University of Pennsylvania

Yusuf Ransome, DrPH

DISSERTATION TITLE: "Can Religion and Socioeconomic Status Explain Black-White Differences in Alcohol Abuse?" SPONSOR: Theodorus Sandfort POSITION: Yerby Postdoctoral Fellow at the Harvard School of Public Health

Chien-Tien Su, DrPH

DISSERTATION TITLE: "Job Strain and Neck Symptoms in Work-related Musculoskeletal Disorders" SPONSOR: Mary Clare Lennon

Diana Szatkowski, PhD (Anthropology)

DISSERTATION TITLE: "Reform in China's Population Program: A View from the Grassroots." SPONSOR: Myron Cohen

Brooke West, PhD (Sociology)

DISSERTATION TITLE: "The Real Risks of Fishing: HIV Risk Environments and the Intersection of Networks, Masculinity and Drug Use among Fishermen in Malaysia" SPONSOR: Nabila El-Bassel POSITION: Postdoctoral fellow in the Division of Global Health at University of California San Diego.

SMS in action: dissertation fieldwork

Gendered Power and Negotiating Women's Health in Rural Tamil Nadu, India



5pm: There are no women or children on the main road. Men are sitting or standing in groups – most smoking, some drinking tea, and many talking loudly.

DISSERTATION RESEARCH BY: DrPH Candidate Nityanjali Thummalachetty

DISSERTATION SPONSOR: Professor Constance Nathanson

FUNDED BY: Apollo Hospitals Research & Educational Foundation (AHREF)

Project Description

My dissertation research explores structural, interpersonal, and individual level factors impacting women's power to seek medical care for sexual and reproductive health-related conditions in rural Tamil Nadu, India. Previous research at the intersection of gender, power, and health has investigated aspects of force (for example, rape and violence), resource control (monetary or otherwise), social obligations, and gender norms. My research also explores these factors, but specifically emphasizes how constrained agency and familiarity with health care institutions influence women's healthseeking behaviors in this community. The primary aim of my dissertation is to investigate the ways in which women's experiences of power within their families and community shape their sexual and reproductive health-seeking behaviors. Because the state of Tamil Nadu

has aggressively pursued cervical cancer control programs to increase uptake of cervical cancer screening, much of my research focused explicitly on women's health-seeking behaviors related to cervical cancer screening.

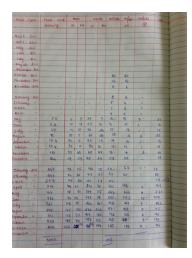
Fieldsite and Approach

I conducted field research in the fall of 2013 in a small village in the Thanjavur District of Tamil Nadu, India. This village has two primary healthcare facilities – a free rural micro-health center (RMHC) and a government primary health facility, both located centrally and 0.5 km apart from one another. The RMHC is a primary care clinic run by a local non-profit organization focused on making primary health care accessible to rural populations.

My study sample included 45 women patients from the RHMC or government health facility, 30 men (25 of whom were husbands of the women participants), and 6 healthcare providers from the two facilities (5 providers were affiliated with the RMHC, 1 was affiliated with the government facility). Participants who were husbands of women participants were essential to acquiring a better understanding of the couple and family level factors influencing women's health-seeking behaviors. To gather data on these multi-level factors, I conducted in-depth interviews and administered descriptive surveys (for demographic information) with the women, men, and healthcare providers in my sample.

THE VILLAGE

Geographically, the village is split in half by its only main road, where all major businesses such as the private clinic, two banks, a mini-grocery, general stores, tea stands, and the main bus stop are located. The main road clearly demarcates the scheduled caste (SC) neighborhood from the backward caste (BC) neighborhood, with the SC neighborhood on one side of the road and the BC neighborhood on the other. My interviews made it apparent that the spatial boundaries of caste were strongly upheld within the village - to the extent that most members of each caste, and particularly women, had never ventured to the other side of the main road and seen the other neighborhood. The main road was also a gendered space, particularly as the day went on. Although both women and men could be seen on the main road during the late mornings and early afternoons, once agricultural fieldwork ended around 4.30pm, the main road became exclusively a space for socialization among men.



Medical records maintained by the government health facility for cervical cancer screening



Standard women's health examination table in the RHMC

Fieldwork Experience & Some Preliminary Findings

CHOOSING TO SCREEN FOR CERVICAL CANCER

Through my interviews, I found that women generally used either the RMHC or the government health facility for most primary health related issues, often frequenting both facilities depending on logistical convenience, such as hours or specific services offered. Women who had ever screened for cervical cancer reported doing so at either the RHMC or the government health facility, where free screening is offered to women over the age of 30 (30 years and above being the state-recommended age bracket for screening). Almost all women in my sample had only been screened once, unless they were encouraged to follow up regarding an abnormal screening result. Various awareness and screening campaigns had previously been organized by both the RHMC and the government health facility, and screening services were also offered at these health facilities on an ongoing basis. Both the RHMC and the government health facility face pressure to increase cervical cancer screening uptake from the Tamil Nadu State Government. Additionally, the government health facility is required to report their monthly screening data to the state government.

In my interviews and informal conversations with government health facility staff, I found that while healthcare providers often spoke of the importance of women feeling empowered to choose to screen for cervical cancer, in practice most women who need any type of medical attention are required to be screened for cervical cancer prior to seeing a physician, even though this is not a state policy. Government health facility staff explained that requiring women to screen before they see a doctor is an effort to increase uptake of cervical cancer screening. At the RHMC, screening is outwardly framed as more of a choice. Women are strongly encouraged to screen, and healthcare providers often cajole unscreened women into screening. However one RHMC provider mentioned that she sometimes advises women to screen because their current medical complaint is likely related to cervical cancer – even when women have completely unrelated conditions - in an effort to increase screening uptake.

CONSTRAINED AGENCY

To assess women's experience of power, in-depth interviews included questions related to whether women had experienced force in their family relationships (particularly with their husbands), how much control women had over family resources (whether monetary or otherwise), the extent of women's social obligations (such as caretaking of children or elders), and whether women reported feeling autonomous in their families or the community at large. Familiarity with healthcare facilities and acts of agency, however constrained, were also key to understanding how power dynamics affected women's health-seeking behaviors.

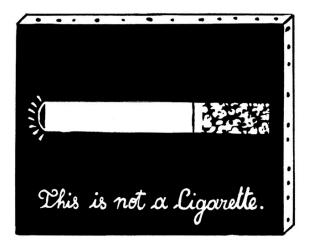
Women who experienced more power in their marriages and families were more likely to report seeking initial and followup care in a timely manner and with the relevant health care providers, and more likely to report seeking emotional and logistic support (in the form of transportation, care of the children etc.) from their husbands.

Women who experienced less power in their marriages and families reported feeling concerned about the potential repercussions of being open with and seeking support from their husbands regarding matters of their own health. Examples of repercussions about which women expressed concerns ranged from facing disappointment from their husband or disagreements within the couple, to increased alcohol consumption by their husband, infidelity, or even being abandoned. As a result, many women said they avoid confiding in their husband or in-laws about their own health concerns, and instead seek support from parents and siblings, particularly their sisters. Women said that seeking support from their family of origin enabled them to seek medical care (often without informing their husband) and make contingent plans with their parents and/or siblings regarding finances or care for their children in the event they are found to be sick.

research findings

ARTICLE

The Renormalization of Smoking? E-Cigarettes and the Tobacco "Endgame"



Electronic cigarettes have rocketed to popularity in a just a few short years, igniting furious controversy in their wake. In a recent commentary in the *New England Journal of Medicine*, SMS faculty members Amy Fairchild, Ron Bayer, and James Colgrove argue that efforts to prohibit the devices are unwise and counterproductive.

E-cigarettes simulate the sensation of smoking by heating liquid nicotine, water, and flavorings combined with either propylene glycol or vegetable glycerin to create vapor similar to cigarette smoke. To proponents, e-cigarettes offer a promising pathway to cessation for the millions of smokers whose addiction to nicotine makes it difficult or impossible for them to quit. Opponents view the devices very differently, however. Many tobacco control advocates see the e-cigarette as a "gateway" or "bridge" product that will lead to an increase in the use of traditional tobacco cigarettes. There are also fears that the devices will "renormalize" smoking and undermine or reverse years of efforts to make the cigarette a socially disfavored product.

The Food and Drug Administration and localities around the U.S. are grappling with how to regulate e-cigarettes—whether, for example, the devices should be sold to minors, or included in existing bans on smoking in public places. The FDA has just released a proposed rule that will allow for the regulation of e-cigarettes as tobacco products. These debates illustrate the difficulty of public health policy making in the face of scientific uncertainty. Although the weight of data suggests that e-cigarette are far safer than their tobacco cousins, and that they are as effective as nicotine replacement therapies like the patch or nicotine gum in helping smokers quit, their long-term effect on the prevalence of tobacco use is unclear.

Professors Fairchild, Bayer, and Colgrove claim that the existing evidence argues in favor of e-cigarettes being regulated but available, rather than kept off the market entirely. Their stance is consistent with the philosophy of harm reduction, which holds that the best way to respond to risky behavior such as drug use is to reduce the danger as much as possible, rather than try to eliminate the behavior. "An unwillingness to consider e-cigarette use until all risks or uncertainties are eliminated strays dangerously close to dogmatism," they write. "We believe that states should ban the sale of e-cigarettes to minors and the FDA should move swiftly to regulate them so that their potential harms are better understood—and so that they can contribute to the goal of harm reduction."

Fairchild AL, Bayer R, Colgrove J. (2013). The Renormalization of Smoking? E-Cigarettes and the Tobacco "Endgame." New England Journal of Medicine 370, 293-295. (Article link)

IMAGE CREDIT: THE NEW YORK TIMES

ARTICLE

Fluctuations in Depression and Well-Being Are Associated with Sexual Risk Episodes among HIV-Positive Men

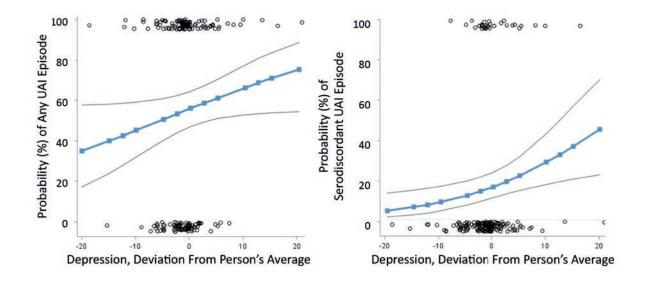
SMS Professor Patrick Wilson, SMS Associate Research Scientist Gertraud Stadler, and SMS doctoral student Melissa Boone with Psychology Professor Niall Bolger recently published an article entitled, "Fluctuations in Depression and Well-Being Are Associated With Sexual Risk Episodes Among HIV-Positive Men," in the journal *Health Psychology*.

Research to date has found a weak association between mental health and sexual risk behavior in men who have sex with men (MSM). However, in the majority of research, depression and risk behaviors have mostly been studied in a static way, relating individuals' typical level of depression with their typical level of risk behavior. The SMS researchers are the first to look at depression and risk behavior in a more dynamic way-they explore fluctuations in depression from week to week in association with risk behavior. Over six weeks, 106 sexually active, HIV-positive MSM living in New York completed weekly surveys that asked about their sexual behavior, depression, and well-being during the prior week. The researchers found that the fluctuations in depression and well-being affected participants' risk behaviors. As the two panels in the figure below show, in weeks when participants felt less depressed than usual they showed lower risk behavior. In weeks when they felt more depressed than usual they showed

higher risk behavior. Thus, this new study suggests that changes in mood matter more than typical emotional state.

The study has implications for how we study mental health and behavior among HIV-positive MSM, and what interventions we offer this population. The study provides first evidence that the link between depression and risk behavior is more dynamic than most researchers initially thought. These findings call for (1) an inclusion of temporal dynamics in theories of mental health and behavior change, (2) new studies that are able to capture fluctuations in time with innovative designs that capture more fine-grained data, and (3) data analytic procedures that address both stability and fluctuations in psychological constructs of interest. The SMS researchers suggest that interventions will benefit from a better understanding of these time-dependent processes as well. Mental health interventions that aim to improve emotion regulation and coping behaviors are warranted, in addition to individual, social, and structural interventions that reduce time-varying stressors that may be the cause of fluctuations in depression.

Wilson PA, Stadler G, Boone MR, Bolger N. (2014). Fluctuations in Depression and Well-Being Are Associated with Sexual Risk Episodes among HIV-Positive Men. *Health Psychology*. [E-pub ahead of print.] (Article link)



EXPLANATION OF FIGURE: This set of graphs plots within-person deviations in depression (x-axis) against the probability of an unprotected anal intercourse (UAI; left panel) and serodiscordant UAI (right panel) sexual risk episode (y-axis). As shown in the left panel, for weeks when a participant's depression was -1 SD (10.19) lower than usual, the probability of any UAI episode was 43%; when depression was +1 SD higher than usual), the probability was 69%. Likewise, as shown in the panel on the right, when a participant's depression was -1 SD (10.19) lower than usual, the probability for a serodiscordant UAI episode was 7%; when depression was +1 SD higher than usual, the probability was 33%. These findings were replicated when exploring within-person changes in well-being, as measured by the Functional Assessment of HIV Infection. When well-being was lower than usual the probability of UAI and serodiscordant UAI episodes was increased, when well-being was higher than usual the probability of risk episodes was decreased.

Although operations research worldwide has documented best practices for post-abortion care (PAC), less is known about what it means professionally to treat abortion complications in settings where this procedure is legally restricted. In an article published in Social Science & Medicine in 2014, recent SMS PhD graduate (medical sociology) Siri Suh explores how PAC unfolds in hospitals in Senegal, where abortion is forbidden under any circumstance and police officials expect medical providers to report women who present to the hospital with complications of suspected illegal abortion. Dr. Suh shows how providers obscure suspected cases of induced abortion in medical records to circumvent police involvement at the hospital. This article emerged from Dr. Suh's dissertation research, which investigates PAC as a site of jurisdictional dispute between medicine, criminal justice and transnational population politics. Dr. Suh conducted in-depth interviews with 89 individuals, observed PAC treatment and reviewed records at three hospitals, and reviewed court records of abortion prosecuted by the state.

Dr. Suh's attention to hospital records suggests that medical documents do not simply represent clinical events. Rather, records are actively involved in selectively constructing the official transcript of events they are designed to document. The article illustrates how health providers produce a particular account of the type of abortion treated through a series of practices such as the patient interview, the clinical exam, and the ultrasound. Providers obscure induced abortion in medical documents in three ways: using ambiguous terminology that does not differentiate between induced and spontaneous abortion, omitting data on the type of abortion altogether, and reporting the total number but not the type of abortions treated.

Dr. Suh demonstrates significant tensions between health providers' ethical obligations to protect patient privacy and perceived obligations to report suspected cases to the police. Providers reproduce abortion stigma by singling out young, poor and unmarried women for further questioning and at times retention at the hospital following treatment. When induced abortion is disguised as miscarriage in medical records, health information systems are unable to measure abortion incidence. The omission of abortion data reinforces the notion that this procedure is rare and socially deviant. Although PAC offers life-saving care to women with complications of abortion, the intervention fails to address the causes of unsafe abortion and may even perpetuate abortion stigma. Dr. Suh's research guestions the capacity of PAC to reduce unsafe abortion in Senegal and approximately 50 other countries worldwide with active PAC programs.

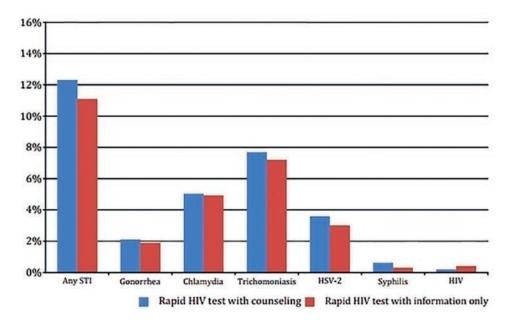
Suh S. (2014). "Rewriting Abortion: Deploying the Medical Record in Jurisdictional Negotiation over a Forbidden Practice in Senegal." *Social Science and Medicine* 108, 20-33. (Article link)

ARTICLE

Rewriting Abortion: Deploying the Medical Record in Jurisdictional Negotiation over a Forbidden Practice in Senegal



PAC treatment room in a tertiary level state hospital in Senegal.



Depillis, L. (2013, October 30). HIV counseling is often ineffective. So we should make HIV testing less cumbersome. *The Washington Post.* (Article link)

ARTICLE

Effect of Risk-Reduction Counseling with Rapid HIV Testing on Risk of Acquiring Sexually Transmitted Infections: The AWARE Randomized Clinical Trial

In the October 23/30 2013 issue of JAMA. SMS Chair and Stephen Smith Professor Lisa Metsch, SMS Professor Lauren Gooden, SMS Project Director Pedro Castellon, and colleagues reported findings from the AWARE randomized clinical trial, a NIDA-funded study evaluating the efficacy of risk reduction counseling on the incidence of sexually transmitted infections (STIs), including HIV, among patients who seek care at STI clinics. This study included 5012 patients from 9 STD clinics in the United States. All 5012 patients received rapid HIV testing. 2,505 patients were randomized to receive risk-reduction counseling and a rapid HIV test, and 2,507 patients received only brief information about HIV and the testing process along with their rapid HIV test. At 6 months, the team examined the rates of new STIs in each group, and found that counseling provided no additional benefit in preventing sexually transmitted infections. There were 250 of 2039 incident cases (12.3%) in the counseling group and 226 of 2032 (11.1%) in the information-only group. Additionally, the team found that counseling doubled the cost of HIV testing.

Dr. Metsch and colleagues' findings have significant implications for public health policy. In 2006, the Centers for Disease Control (CDC) released new guidelines that recommended the expansion of HIV screening as a routine part of healthcare for all adults. By recommending an opt-out routine screening system, the CDC hoped to reduce HIV transmission by identifying individuals with HIV, linking persons with HIV to care, reduce perinatal transmission, promote early detection of HIV, and normalize HIV testing . These new guidelines also recommended that risk-reduction counseling not be required at the time of testing, which had the potential to alter the traditional model of HIV counseling and testing.

This study lends support to the CDC's 2006 recommendation that reconsidered the role of counseling as an essential component of HIV testing. Dr. Metsch and colleagues note that costs associated with risk reduction counseling at the time of testing may not be an efficient use of resources without evidence of effectiveness. For persons testing HIV positive, the researchers stipulate that, "posttest counseling remains essential, both for addressing psychological needs and for providing and ensuring follow-through with medical care and support." Dr. Metsch and colleagues call for a "more focused approach to providing information at the time of testing, which may allow clinics to use resources more efficiently to conduct universal testing, potentially detecting more HIV cases earlier and linking and engaging HIV-infected people in care."

Metsch LR, Feaster DJ, Gooden L, Schackman BR, Matheson T, Das M, Golden MR, Huffaker S, Haynes LF, Tross S, Malotte CK, Douaihy A, Korthuis PT, Duffus WA, Henn S, Bolan R, Phillip SS, Castro JG, Castellon PC, McLaughlin G, Mandler RN, Branson B, Colfax G. (2013). Effect of Risk-Reduction Counseling with Rapid HIV Testing on Risk of Acquiring Sexually Transmitted Infections: The AWARE Randomized Clinical Trial. JAMA 310(16), 1701-1710.

NEW BOOK

The Transplant Imaginary: Mechanical Hearts, Animal Parts, and Moral Thinking in Highly Experimental Science

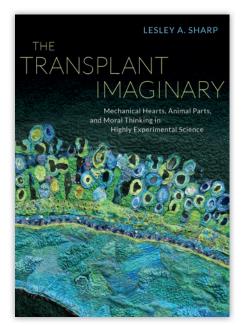
By Lesley A. Sharp Published November 2013 by University of California Press

In *The Transplant Imaginary*, author Lesley Sharp explores the extraordinarily surgically successful realm of organ transplantation, which is plagued worldwide by the scarcity of donated human parts, a quandary that generates ongoing debates over the marketing of organs as patients die waiting for replacements. These widespread anxieties within and beyond medicine over organ scarcity inspire seemingly futuristic trajectories in other fields. Especially prominent, longstanding, and promising domains include xenotransplantation, or efforts to cull fleshy organs from animals for human use, and bioengineering, a field peopled with "tinkerers" intent on designing implantable mechanical devices, where the heart is of special interest.

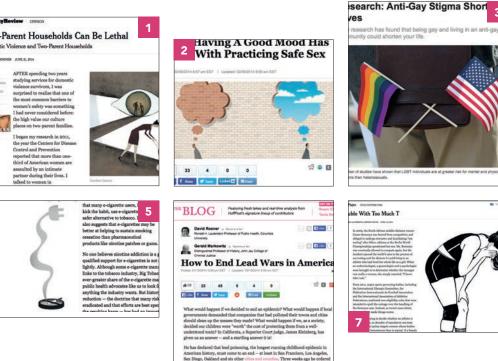
Scarcity, suffering, and sacrifice are pervasive and, seemingly, inescapable themes that frame the transplant imaginary. Xenotransplant experts and bioengineers at work in labs in five Anglophone countries share a marked determination to eliminate scarcity and human suffering, certain that their efforts might one day altogether eliminate any need for parts of human origin. A premise that drives Sharp's compelling ethnographic project is that high-stakes experimentation inspires moral thinking, informing scientists' determination to redirect the surgical trajectory of transplantation and, ultimately, alter the integrity of the human form.

Source: UC Press

Lesley A. Sharp is a Senior Research Scientist in the Department of Sociomedical Sciences and Ann Whitney Olin Professor of Anthropology at Barnard College, Columbia University.



dispatches FROM SMS



uld shorten your life

3



One in 10 male-for-male Craigs men who don't identify as gay the NGI-seeking ads, researchers said, su rch 24, 2014 at 5:14 PM | 11 C f in Q+ Δ rold Pollack: Your team c randomized trial comparing HIV

sk behavio ers in two groups, or vided HIV testing acc tion behavioral er provided the s tine with out such cou who who on te



h: In 2006, the Centers for Di ed a new guidel ent for adult and ado ent HIV ter ings. In an effort to make HIV screening more routine in ire, CDC made some important departures from prior ons. Before 2006, there was a much greater empha udividuals with specific risk factors

ed on one major change in what CDC ntary HIV testing has traditionally included risk-reduction counsel mended that risk reduction co o6 statement rec e required at the time of HIV testing. This change was highly 8 ial. Many people in the field protested.

Sara Shoener, DrPH '14, published an op-ed in the New York Times explaining how the stigma of single motherhood is harmful to survivors of domestic violence.

Professor Patrick Wilson, Research **C** Scientist Gertraud Stadler, and doctoral student Melissa Boone published research on well-being and sexual risk among HIV+ MSM in Health Psychology, which received media attention, including an article in the Huffington Post.

3) Protessor mains Professor Mark Hatzenbuehler's stigma and mortality in sexual minority populations were featured in various news outlets, such as the Huffington Post and US News & World Report.

Professor Eric Schrimshaw's research on non-gay-identified men in the online sexual marketplace was covered by a variety of news outlets such as Science Daily, United Press International, LGBT Weekly, and Towleroad.

Professors Amy Fairchild and 5) Protessors Any Farthering and James Colgrove published an op-ed in the New York Times arguing in favor of e-cigarettes and their regulation by the FDA.

Professors David Rosner and Gerald Markowitz co-authored an article in the Huffington Post entitled, "How to End Lead Wars in America."

PhD Alumnae Katrina Karkazis and Rebecca Jordan-Young authored an op-ed for the New York Times arguing against the barring of female athletes with high testosterone levels.

SMS Professor and Chair Lisa 8) Metsch, was interviewed for a Washington Post article entitled, "HIV counseling is often ineffective. So we should make HIV testing less cumbersome," regarding her recently published findings on HIV counseling from Project AWARE.

profiles

Assistant Professor of Sociomedical Sciences

Diana Hernández



"I hope that in due time, energy insecurity will be more widely used to explore and explain the associations between poverty, poor housing quality and health outcomes such as asthma and stress." Professor Hernández focuses her work on issues of social inequality with particular emphasis on racial and socioeconomic stratification and structural causes of disadvantage. Her current research explores the concept of energy insecurity using an innovative mixed-method approach to examine the impact of energy efficiency interventions on health and finances of low-income householders.

How does your research on energy insecurity fit into public health research, and

more specifically into sociomedical sciences? Energy insecurity refers to an inability to adequately meet basic household energy needs, a phenomenon which poses significant and unexposed health and social challenges for vulnerable groups. This concept fits well into a sociomedical sciences framework because it considers energy, housing, health and poverty in an integrated way. Conceptually, energy insecurity is rooted within the sociological literature on material hardships of the poor and the public health literature on social determinants of health. It also parallels similar, and more established, concepts such as food insecurity. I hope that in due time, energy insecurity will be more widely used to explore and explain the associations between poverty, poor housing quality and health outcomes such as asthma and stress.

Tell me about some of your other major projects that you're currently working on or ideas you have for future research? I currently lead or significantly contribute to several projects and recently completed data collection on two energy-insecurity related projects. The first project is a pilot project supported by the Provost's Office to examine the impact of energy efficiency interventions on the health and finances of low-income householders. The second project, funded by an NIEHS funded R21 grant, evaluates changes associated with Clean Heat policies that phase out the use of high-polluting fuel oil in NYC. We are examining changes in indoor/outdoor air quality in residential environments using exposure assessments and surveys as well as key informant interviews. I also collaborate on a project funded by the Department of Housing and Urban Development with Yumiko Aratani and Jeanne Brooks-Gunn to assess health and educational outcomes associated with capital improvements and sustainable renovations in public housing. Lastly, I maintain an active role as a co-Investigator and lead ethnographer on a NIDA-funded project led by SMS Chair and Professor Lisa Metsch that seeks to implement and evaluate a community-level, structured approach to enhance HIV care access and retention for drug users in San Juan, Puerto Rico.

Are you still engaged with translational research? Why is that important, and how does that inform your current work? Absolutely! Most of my research is dedicated to evaluating interventions at the housing and neighborhood levels. Every single research project I work on has a translational component with implications for policy or service provision and a broad mission to advance health equity. Additionally, I engage with translational work on the implementation side of public health. For instance, in my capacity as a board officer of BOOM!Health (formerly Citiwide Harm Reduction and Bronx AIDS Services), I provide guidance on the organization's research and evaluation efforts. I am also a founding member of the West Harlem Clean Heat Council, an advisory panel for the Clean Heat Clean Energy Initiative sponsored by WE ACT for Environmental Justice.

What is your favorite thing about teaching or mentoring? I enjoy seeing students grow in the teaching and mentoring process. I mentor students at the undergraduate, master's and doctoral levels and even have a few young professionals under my wing. I value straight talk, encourage innovation and big thinking and help those I mentor to imagine a world without limits. Essentially, I impart the most important lessons of my life story and hope they are inspired to be bold and take chances, be of service and be relentless in their pursuit of knowledge, truth and justice.

What do you hope to do this summer? I'm really looking forward to decorating my new home and spending time with my 9-year old nephew, who visits from Florida every year. We always enjoy our urban expeditions and I look forward to exploring new sites with him.



Assistant Professor of Sociomedical Sciences at CUMC and Associate Director of the Sociomedical Sciences Research Group in Miami

Margaret Pereyra



"At the Sociomedical Sciences Research Group in Miami, our studies employ mixed methodologies that include ethnographic, epidemiologic, intervention, and health services research." Professor Pereyra has a variety of research interests. Early in her research career, she contributed to studies addressing maternal and child health services in Los Angeles County. Since joining Dr. Metsch's team more than 15 years ago, Professor Pereyra has contributed to a variety of studies in the fields of substance abuse and HIV/AIDS, particularly in relation to accessing and utilizing health services. More recently, she has conducted research examining access to and use of dental care services among people living with HIV/AIDS, as well as dentists' potential role in screening for HIV and other medical conditions outside of the realm of oral health. Her main research interests continue to include access to and utilization of health services in general, including screening services.

Professor Pereyra is a recipient of a Minority HIV/AIDS Research Initiative Award (MARI) from the CDC, and she is currently conducting a study of patient acceptance of rapid HIV testing (oral swab) in the dental care setting. Previous studies have noted that only 17% of dentists believe patients would be receptive to HIV testing if offered, however there is little data available on patients' acceptance of oral rapid HIV testing (ORHT) in the dental setting. In Professor Pereyra's current study, dental patients in two community health centers in Miami are offered rapid HIV testing and then interviewed about their reasons for accepting or refusing the test. Preliminary results based on a sample of 173 patients at the first site (target sample is 300 per site) suggest that the majority of patients (84%) accepted rapid HIV testing.

Can you tell us about the Sociomedical Sciences Research Group in

Miami? The Sociomedical Sciences Research Group in Miami has 14 staff members and 3 faculty members. We currently have seven studies funded by the NIH, including studies in the NIDA Clinical Trials Network and Miami site of the NIAID-funded Women's Interagency HIV Study (WIHS). Our studies employ mixed methodologies that include ethnographic, epidemiologic, intervention, and health services research. Our center has developed close collaborations with the local and state health departments and other community-based agencies. We hope to continue to grow collaborations between the SMS Research Group in Miami and other Mailman researchers, as our center provides access to South Florida populations that can be studied alone or as a comparison group to New York populations.

What is your favorite thing about teaching or mentoring? I really enjoy mentoring students on quantitative methods, especially as part of a thesis or dissertation. It is very rewarding to see the progress a student can make with a hands-on approach to data analysis outside of the classroom setting.

Do you have any hobbies? In the past year, I have taken up cycling and really enjoy it. I also enjoy travelling with my husband and we have been including cycling on our trips as much as possible.

profiles

Professor of Sociomedical Sciences at CUMC

Peter Messeri



"Peering into the future, big data and new technology looms large in advancing the range of data collection. However it also raises unsettling questions about research ethics and privacy challenges to the prevailing paradigms of causal analysis in the social sciences." Professor Peter Messeri is a medical sociologist whose focus includes the organization of health care systems, community interventions to promote healthier communities, tobacco control, and the nature of health and social disparities. He has methodological expertise in the conduct of group randomized designs to evaluate interventions at the community and health systems level as well as methods for assessing causal effects for non-experimental studies.

Tell us about your key research interests throughout your career. I find it very difficult to pin down a short list of my primary research interests, but a few core themes do run through my long research career in SMS. I broke into public health research as a staff associate for Ann Brunswick in 1980. Under her mentorship, I learned the science and craft of what would become the mainstay of my methodological focus - survey research, and in particular assembling multi-wave panel data sets from in-person interviews and longitudinal data analysis. My research commitment to the health of New York City, and to Harlem in particular, also dates back to my work with Ann on the health and wellbeing of the then-young adult cohort who had grown up in Harlem during the 1950s. Our research focused on tobacco and illicit substance use. I have never been quite able to kick the tobacco...research habit. During the early 2000s, I was part of the research team that evaluated American Legacy's innovative truth anti-tobacco campaign, which not coincidentally continued a long standing collaboration with our former SMS department head, Cheryl Healton, who found time in her busy schedule as the founding CEO of Legacy to be an active participant in the evaluation of truth. I have just started a second tour at Legacy, to evaluate truth II. I now have the pleasure to work with my former SMS doctoral students, Drs. Donna Vallone and Jennifer Cantrell

A second theme that has weaved through my research is a sociological perspective on health promotion and disease prevention. In 1985, a then-freshly-minted PhD in sociology, I accepted SMS Professor and Former Chair Eugene Litwak's offer to stay on at SMS as an Assistant Professor. Eugene presciently saw that SMS was a natural intellectual home for health promotion and disease prevention (HPDP). In this mission we were ably assisted by Professors Don Gemson and Jack Ellinson. They became my HPDP mentors and research colleagues. This early exposure to HPDP lead to several intervention studies with a focus on improving the health of the Harlem Community.

HIV/AIDS is the third theme of my research career that emerged during the early years of the epidemic. Among many research projects, the Community Health & Information (CHAIN) Project takes pride of place as the hallmark of my research career. CHAIN has been a primary source of data on the continuities and dramatic changes in the lived experience of NYC residents living with HIV during the past 20 years and counting. Over the years, I have had the privilege to work with many SMS colleagues on CHAIN, but no one has been more central to the success of CHAIN than my co-senior investigator from the start, SMS Professor Angela Aidala. Together we designed the CHAIN project. The quality and breadth of the CHAIN dataset owes much to Angela's leadership in cultivating a dedicated in-house survey research team composed of several generations of SMS graduate students and members of communities affected by HIV/AIDS. This team recruits, tracks and repeatedly interviews cohorts of people living with HIVAIDS in neighborhoods throughout New York City and the suburban counties to the north.

CHAIN's primary mission is best described as the direct translation of research into practice. The longitudinal research design coupled with the wide-ranging CHAIN interview schedule has proven to be a very robust approach for applying rigorous social science research methods in the service of HIV/AIDS planning and policy. For two decades, CHAIN reports and presentations have informed the planning and policy deliberations of CHAIN's primary audiences – the members of NYC's HIV/AIDS planning council, its committees, HIV/AIDS service providers, and the HIV positive community. The CHAIN team actively collaborates with our NYC DOHMH and Public Health Solution colleagues to develop a series of annual CHAIN research studies. These studies address planning and policy issues of current interest to our public health practice and community audiences. Over the years, we have fine-tuned CHAIN reports and presentations to best meet the information needs of our primary audiences of policy makers, service providers and community groups. We then selectively translate our findings into articles suitable for publication in peer reviewed research journals. A project of such great length does not lend itself to an easy summary of what I have learned and contributed to research and practice on HIV/AIDS. Perhaps the best way to give a flavor of CHAIN research is to note that my CHAIN colleagues and I are currently working on CHAIN reports on aging, employment, chronic health conditions, service needs and utilizations. On my desk is a report that I want to turn into an academic publication on education and mortality, a second on tobacco use, and a third on validation of self-reports of blood test results.

What is your perspective on student training? I view doctoral studies as the start of a life-long commitment to a balanced mastery of social science theory and methods. The distinct challenge of SMS doctoral training is how best to infuse our students with the department's inter and multi-disciplinary approach to social science research. Despite the disciplinary diversity of SMS, I do believe that our students should share a common knowledge of core theories and concepts about the individual and society. Over a decade ago this spirit motivated the development of a required first year theory course that I have co-taught with Kim Hopper and Richard Parker. This seminar is less about instruction than the shared task of instructors and students grappling with the primary texts of social science theory that have informed empirical research into the social determinants, production, and construction of individual and population health. With equal conviction, I believe that training SMS students in the breadth of theory that crosses disciplinary boundaries must be matched with a similar breadth and depth of social science methods. It is not simply a matter of being able to mix quantitative and qualitative method, but that training in different social science methods liberates the researcher to select methods of empirical inquiry that best match the profoundly different ways we in the social sciences approach theory and research.

Although I have done both qualitative and quantitative research, it is no secret that I am primarily a quantitative type. I decided many years ago to teach an advanced methods course designed to instill in SMS students a sophisticated understanding of the research design and analysis challenges that confront those of us attempting to construct causal explanations from observational data. Peering into the future, big data and new technology looms large in advancing the range of data collection. However it also raises unsettling questions about research ethics and privacy challenges to the prevailing paradigms of causal analysis in the social sciences.

Do you have any hobbies? After a busy week, I have found cycling a great form of physical activity and relaxation. A family tradition is a two-week stay at Avalon on the Jersey shore, which for me is a relaxing mix of work and beach activities. My wife and I like to travel – what academic doesn't? This year, we will be cruising up the Rhone River and then spend a few days in London, where I am looking forward to watching one stage of the Tour de France.



The Department of Sociomedical Sciences at a faculty retreat in 1997



Professor Messeri in his early days at SMS



Enrique Roldan

Junior Accountant



Enrique Roldan started in the SMS department in 2007. He is responsible for the accounts payable for the department, which includes paying invoices, creating purchase orders, depositing funds, and helping other processors to get payments through. A large portion of his day-to-day involves problem-solving.

What attracted you to SMS? In all honesty, it was the laidback nature of the department. When I came to my interview here, Dr. Richard Parker told me to relax and that I could loosen up the tie I had on, and I immediately knew I would love it here. I just like the people, and I guess with all of the different disciplines here and different types of people, I mix in well with the feel of the department.

What are your interests/activities outside of work? I jog, I play softball... believe it or not, I write poetry and stories – I was always a creative person. I like to walk around as if I'm a tourist in the city I have always lived in – funny how you can always find something new! I like to go to the movies with my son when we get the chance.

What do you hope to do this summer? This summer I hope to relax. I hope to take a trip alone to somewhere warm with a nice body of water – don't want to depend on anyone, I just want to go alone. I'm a very simple person.

Do you have any advice for students? Appreciate life and all it offers. Look around and enjoy. And most of all, laugh a lot.

Michelle Rivera, CTP

Department Administrator



Michelle Rivera started in February 2013 as Departmental Administrator for SMS. She works closely with the MSPH Finance Office to ensure that the department's financial infrastructure soundly supports the department's educational, research and service missions, and is responsible for confirming that daily operational tasks are completed effectively and efficiently.

What attracted you to SMS? At first my attraction was coming back to MSPH, since I was first employed with Columbia University in 2006 as the Accounting Manager in the MSPH Finance Office. I loved working at CUMC because the people always made me feel at home. During my interview with Dr. Lisa Metsch, I immediately knew that this would be a good fit for both of us. She wanted someone well versed in the financial matters of the university, and I was looking for an opportunity to work with someone who is compassionate and continuously supports the growth of her team.

What are your interests/activities outside of work? I love to give back to my community and often participate in fundraisers for worthy causes. I am also still actively involved with my community-based sorority. I love to exercise – especially salsa dancing, zumba, circuit training, cycling, and I just began running. Hopefully one day I can do a triathlon. A girl can dream!

What do you hope to do this summer? This summer, I plan to work with my daughter on her high school applications...loads of fun.



Margaret Wurth, MPH '12

Researcher, Human Rights Watch



WEBSITE: hrw.org/bios/margaret-wurth

EMAIL: margaret.wurth@gmail.com You are currently a Researcher at Human Rights Watch – where you completed your SMS practicum. Can you tell us about your practicum experience? For my practicum, I interned with the Health and Human Rights Division at Human Rights Watch, where my main project was to research and write an advocacy document on harm reduction access for people who use drugs in North Carolina. My practicum project gave me the chance to argue that misguided state laws and policies were blocking evidence-based HIV prevention strategies, such as sterile syringes. After my first year of coursework in SMS, I was well prepared to analyze how the legal and policy context was creating barriers to effective public health interventions. Human Rights Watch added a layer to my analysis by helping me to see harm reduction not only as sound public health policy, but also as a human rights imperative.

Can you talk about some of the various topics you cover over at Human Rights Watch, and what kinds of activities are involved with your work

there? I was the intern who refused to leave! During my second year in SMS, I continued to intern with the Health and Human Rights Division, and assisted with research on the use of condoms as evidence of prostitution-related crimes in New York and other major US cities. After graduating (actually, one week before graduation!) with my MPH, Human Rights Watch hired me for an advocacy position for the condoms-as-evidence project, so I spent my days arguing with police and prosecutors that the public health benefits of carrying condoms far outweigh any value the legal system might find in prosecuting someone for engaging in sex work. This past year, I have been working on a project regarding hazardous child labor on tobacco farms in the US. Through this research, my colleagues and I have found that children are working on US tobacco farms, and are exposed to nicotine, toxic pesticides, and other dangers. This May, we published a report with our findings, and we are now calling on Congress, the Obama administration, and big tobacco companies to end hazardous child labor on US tobacco farms. [Tobacco's Hidden Children: Hazardous Child Labor in United States Tobacco Farming is available at http://www.hrw.org/reports/2014/05/13/tobacco-s-hidden-children.]

How has the "SMS lens" (seeing public health as embedded in particular social, cultural, economic, and political contexts) influenced your professional attitudes and approaches to addressing public health issues? The SMS lens has shaped my approach to all of my work at Human Rights Watch. SMS taught me that effective policy advocacy happens when you're able to fully understand the diverse factors driving any health problem or shaping any health behavior, and to target the factors that are changeable. When I worked with the condoms-as-evidence project, I understood that police harassment and profiling of sex workers and transgender women was a harmful symptom of the criminalization of sex work. In my current research on child labor, I understand that poverty is pushing many parents to bring their young children to the fields to work. Recognizing these factors has helped me shape a realistic advocacy strategy, and push for feasible changes. I have always wanted to work with an organization committed to changing policies to promote public health, and I feel lucky to have found a home at Human Rights Watch where the SMS approach is part of my daily work.



Predoctoral Fellowship in Gender, Sexuality and Health

The Predoctoral Fellowship in Gender, Sexuality and Health (GSH) is a T32 training grant funded by the National Institute of Child Health and Development, Demographic and Behavioral Sciences Branch, directed by SMS Professor Constance Nathanson, and co-directed by SMS Professors Jennifer Hirsch and Peter Messeri.

This training program seeks to prepare students to conduct social science research focused on the social, cultural, political and historical factors that both contribute to and complicate the public health response to complex problems of reproductive and sexual health. The GSH Predoctoral Fellowship brings together distinguished scholars in the fields of gender and sexuality from the Department of Sociomedical Sciences and from other academic departments at both the Mailman School of Public Health and Columbia's Graduate School of Arts and Sciences to advise, mentor, and collaborate with trainees.

The GSH Predoctoral Fellowship includes several developmental requirements for trainees, including: (1) advanced coursework in critical perspectives in gender, sexuality, and health; (2) advanced coursework in conceptual and research approaches to sexuality; (3) coursework in the biological bases of sexual and reproductive health; (4) attendance at and active participation in the ongoing faculty-trainee Seminar Series in Gender, Sexuality and Health; (5) coursework in research ethics; (6) a research apprenticeship supervised by program faculty; and (7) doctoral research and dissertation focused on a topic in gender, sexuality and health.

The GSH Predoctoral Fellowship was initiated in 2006 and renewed in 2012. To date, the program has supported 11 doctoral students, 6 of whom have graduated. Graduates have gone on to tenure-track assistant professorships and post-doctoral research positions at top-tier institutions. Past and current trainees have received awards including the National Research Service Award (Kirchstein Fellowship), the Fulbright Scholarship, the National Science Foundation Dissertation Grant, the American Association of University Women Fellowship, the National Institute of Justice Fellowship, and the Wenner Gren Foundation Grant.

Initiative for Maximizing Student Development Program

The Initiative for Maximizing Student Development (IMSD) Program at the Mailman School of Public Health is an R25 educational training grant funded by the National Institute of General Medical Sciences (NIGMS) and directed by SMS Professor Ana Abraído-Lanza and Epidemiology Professor Crystal Fuller. IMSD seeks to increase the number of students from historically underrepresented groups who receive doctoral training in public health. Four academic departments at MSPH (Biostatistics, Environmental Health Sciences, Epidemiology, and Sociomedical Sciences) participate in the program.

The IMSD program includes five specific goals and objectives which aim to (1) increase the number of historically underrepresented students in the doctoral programs of the MSPH; (2) develop students' scholarship and grant-writing skills; (3) develop other research and professional skills by involving students in research and scientific activities; (4) create an environment that emphasizes students' strengths and competencies and the value of ethnic diversity in research and science; and (5) enhance the timely completion of doctoral study among students.

IMSD provides several developmental activities to strengthen students' research skills and promote their professional development: 1) a seminar course that includes workshops on techniques and strategies for success in graduate school, scientific writing, research careers, and professional development; 2) research assistantship placements characterized by strong mentoring relationships; 3) sponsored attendance at scientific conferences; and 4) a tailored advisory program that integrates individualized professional development plans.

To date, the MSPH IMSD program has supported 33 doctoral students, 11 of whom have graduated. Graduates are in top-tier institutions as post-doctoral research fellows, assistant professors, or researchers. Several IMSD students have received (among other awards) National Science Foundation awards and NIH F31 predoctoral fellowships.



New Interdisciplinary Training Grant:

Training Program on HIV and Substance Use in the Criminal Justice System

National grant supporting HIV and drug abuse prevention in criminal justice system

The National Institute of Drug Abuse (NIDA) division of the National Institutes of Health (NIH) has announced funding for a new research training program at Columbia's Mailman School of Public Health and the School of Social Work. Pre- and postdoctoral fellows at the schools will conduct bio-socio-behavioral HIV and drug abuse prevention, treatment, and care research in the criminal justice system. Currently, 2.2 million people are incarcerated in the U.S. The number of adults under correction supervision has recently peaked at over 7.2 million– a threefold increase since 1980. Over the past decade, the criminal justice system has been recognized as an epicenter of the HIV epidemic in the U.S.

Columbia's multidisciplinary collaboration builds upon research and education underway at both schools and brings together 32 faculty members who will participate in interdisciplinary mentoring.

The training program places a strong emphasis on improving the lives and health of individuals in alternatives-to-incarceration programs and under community supervision, including diversion programs, probation, community and drug courts. This includes the research on health disparities and policies affecting mass incarceration, a critical problem in many states.

Lead investigators are SMS Chair and Professor Lisa Metsch and School of Social Work Professor Nabila El-Bassel. School of Social Work Professor Elwin Wu is the Training Program Director.



"Our collaboration will have an impact on criminal justice curricula not only at the Schools of Public Health and Social Work, but university-wide, and will attract new faculty and students," notes Dr. Metsch, who points out that all incoming Mailman School Sociomedical Sciences doctoral students are now funded through training programs, an increasingly appropriate model for supporting doctoral-level education.

Dr. El-Bassel says, "The training program is well positioned at Columbia, given its geographic location in New York City, which ranks high amongst cities that have the greatest rates of incarceration and community supervision of racial/ethnic minority groups, as well as the highest rates of HIV and drug abuse. Moreover, Columbia has recently identified enhancing criminal justice curriculum, research, and training as one of the university's top priorities."

The project has been funded by NIH/NIDA for a 5 year period and the first fellows will arrive in the fall of 2014.

— Stephanie Berger

profiles CENTERS



The Center for the Study of Social Inequalities and Health

The Center for the Study of Social Inequalities and Health is a multidisciplinary collaboration of researchers dedicated to understanding and addressing connections between social inequalities and health. Directed by SMS Professors Bruce Link, Jo Phelan, and Mark Hatzenbuehler, the Center is supported by the Mailman School and the Sociomedical Sciences and Epidemiology Departments. The mission of the Center is to produce understanding about the inequalities that both divide us and influence our chances for a healthy life; the Center is dedicated to uncovering and bringing to light the processes connecting social inequalities and health conditions. The Center is currently focused on five major areas of inquiry: (1) social conditions as fundamental causes of health inequalities; (2) stigma, prejudice, and discrimination; (3) race and ethnicity; (4) intergenerational socioeconomic influences on health; and (5) inequality in early life determinants of health.

The goals of the Center include: (1) to produce knowledge about inequalities and health through research that bears a strong theoretical foundation and a high degree of empirical rigor; (2) to contribute to the dissemination of knowledge about inequality and health locally, nationally, and across international borders; (3) to train and mentor a new generation of scholars who have the capacity to conduct research on inequality and its relation to health; and (4) to promote racial, ethnic, gender, and socioeconomic diversity in the faculty, staff, and student body of the Mailman School of Public Health and Columbia University, and to increase awareness of diversity issues among faculty and administration.

Center activities include:

JOURNAL CLUB:

The Center sponsors the Social Inequalities in Health Journal Club, which meets monthly to discuss journal articles pertaining to social, behavioral, and cultural factors and health with relevance to the investigation and interpretation of health disparities.

SPEAKERS:

Several times a year, the Center invites outside speakers to address the MSPH community. Past speakers have included Professors Douglas Massey (Princeton), Annette Lareau (UPenn), Nancy Krieger (Harvard), and Eric Klinenberg (NYU).

SCHOLARSHIP:

The Center supports research through two recently established funds and one award:

- Doctoral Student Fund for Research or Conference Travel: The proposals must be centered around research or conference travel that advances our understanding of the causes and consequences of various forms of social inequality.
- Seed Grant Fund: Available for faculty at the Sociomedical Sciences and Epidemiology Departments.
- Center for Social Inequalities and Health Distinguished Dissertation Award.

For more information, please visit http://www.mailman.columbia.edu/ academic-departments/centers/center-study-social-inequalities-and-health

SMS SNAPShotS... A Public Health Approach to Incarceration



Bryan Stevenson, Executive Director of the Equal Justice Initiative, delivers the keynote address entitled "Injustice and Mass Incarceration: A Threat to Public Health"



Dean Linda Fried discusses issues of incarceration and public health with Phyllis Mailman, MSPH Board of Overseers, and Len Tow, Chairman of The Tow Foundation

A Public Health Approach to Incarceration: Opportunities for Action was hosted by the MSPH Department of Sociomedical Sciences and Incarceration and Public Health Initiative and supported by The Tow Foundation. On June 3rd and 4th, 2014, over 150 people including community leaders, policy makers, deans, and senior faculty representing over fifty public health schools and programs, gathered at MSPH to discuss putting a public health lens on incarceration in the United States.



SMS MPH students Shae Cali, Sharon Green, and Zachary Peters speak on a panel about student involvement, moderated by 2014 MSPH alumnus David Cloud, now senior program associate at the Vera Institute of Justice.



Professor Robert Fullilove watches the conference panel



Jill Barkan, Associate Dean for Institutional Advancement, and Phyllis Mailman, MSPH Board of Overseers



Kim Milian, Assistant Director of Institutional Events for the MSPH Dean's Office, and Yasmin Davis, SMS Administrative Manager, as Day 1 comes to a close



Bryan Stevenson, Executive Director of the Equal Justice Initiative, and Dr. Monica Sweeney discuss his keynote address "Injustice and Mass Incarceration: A Threat to Public Health"



SMS Chair Lisa Metsch describes the conference goals and mission during her welcome address





Professor **Ana Abraído-Lanza** was selected for the 2013-2014 Columbia University Provost Leadership Fellows Program.



Camilla Burkot (MPH, '14) received a Distinguished Thesis Award for her thesis, "Protecting people or protecting science? New dimensions of risk and regulation in global health research," which was sponsored by Professor Kavita Sivaramakrishnan.



Professor **Alwyn Cohall** received an award on behalf of the Harlem Health Promotion Center for exceptional work in HIV/AIDS in New York City from NYC Health Commissioner Thomas Farley.



Professor **Amy Fairchild** was the recipient of the 2014 Mailman School Teaching Excellence Award.



Professor **Robert Fullilove** received the 2014 Life Changers Award from the Love Alive International (LAI) Foundation for his extraordinary work as a community leader and activist in HIV/AIDS.



SMS PhD alumna **Claire Edington** was awarded the Pressman-Burroughs Wellcome Award by the American Association for the History of Medicine.



SMS PhD Alumna **Nora Kenworthy** (Political Science) received the Marisa de Castro Benton Dissertation Award for her dissertation entitled, "What Only Heaven Hears: Citizens and the State in the Wake of HIV Scale-Up," which was sponsored by Professor Richard Parker.



Grace Lee (MPH, '14) received a Distinguished Thesis Award for her thesis, "Sign UP! for Health Care: Increasing Young Adult Enrollment in the Health Insurance Under the Affordable Care Act," which was sponsored by Professor Marita Murrman.



PhD Candidate **Ronna Popkin** received the Eugene Litwak Award for her dissertation proposal, "(Dis)Embodied Health Decisions? Understandings and Management of Breast and Ovarian Cancer Genetic Risk," sponsored by Professor Carole Vance.



Professor **David Rosner** received the 2014 John P. McGovern Science and Society Award on behalf of Sigma XI, The Scientific Research Society



Professor **Eric Schrimshaw** won the Calderone Award for Junior Investigators at MSPH.



Research Scientist **Gertraud Stadler-Queiroz** received the 2014 Early Career Award from the Health Psychology Division of the International Association of Applied Psychology.



Siri Suh, PhD '14, received the Jack Elinson Award for "Rewriting abortion: Deploying medical records in jurisdictional negotiation over a forbidden practice in Senegal," published in Social Science & Medicine in May 2014.

Selected Bibliography of Publications, Grants and Fellowships

(OCT 2013-MAY 2014)

GRANTS

Doctoral student **Nadav Antebi.** American Psychological Association's Division 17 Section on Positive Psychology Student Research Award. \$100.

Professor Angela Aidala.

M*A*C* AIDS Fund Grant for" Research to Inform Advocacy Project." 1/1/14–12/31/14. \$100,000.

Professors **Ronald Bayer** and **Constance Nathanson** (with Drs. Bhaven Sampat and Sandro Galea). William T. Grant Foundation Research Grant for their project entitled, "What Counts as Evidence for Adolescent Preventive Health Services Policy and Practice? A Study of the US Preventive Services Task Force." 6/01/2014–05/31/2016. \$549,225.

Doctoral student **Amy Dao.** Weatherhead East Asian Institute SYLFF Summer Grant. 5/14–8/14. \$3,000.

Professor **Amy Fairchild**. Greenwall Foundation Grant for her research entitled, "The Uses and Abuses of Fear." 01/01/14– 12/31/14. \$60,000.

Professor **Sally Findley.** Robert Wood Johnson Foundation Grant for a project entitled, "Profiles of WIC and Health Program Participation." \$399,943

Professor **Mark Hatzenbuehler** (Co-PI: Dr. Marizen Ramirez). Center for Injury Epidemiology and Prevention at Columbia University. "Are anti-bullying policies effective in reducing school bullying and victimization? A pilot project in 14 U.S. states". 11/7/2013–11/7/2014. \$7500.

Professor **Mark Hatzenbuehler** (PIs: Drs. Hannah Cooper, Sam Friedman and Ron Stall). R01 grant from the National Institute on Drug Abuse (NIDA) for a project entitled "Metropolitan trajectories of HIV epidemics and responses in US key populations." 6/1/2014–5/31/2019. \$3,000,988

Professor **Diana Hernandez**. R21 grant from the NIH/National Institute for Environmental Health Sciences (NIEHS) for her project titled, "Assessing the Impact of Clean Heat Policy Intervention in New York City." 01/20/2014– 12/31/2015. \$240,000.

Professor **Rita Kukafka** (Co-PI Dr. Kathy Crew) R01 from the National Cancer Institute for their project entitled, "Increasing breast cancer chemoprevention in the primary care setting." 5/1/2014– 4/30/2019. \$2,572,031.

Chair and Professor Lisa Metsch (Co-PI Dr. Nabila El-Bassel) T32 from the National Institute on Drug Abuse. This training program will begin in the fall semester of 2014 and run for five years.

Doctoral student **Amaya Perez-Brumer.** R25 NIMH Fellow Grant for a project entitled, "A mixedmethods study to identify and evaluate sexual and HIV transmission networks among African American sexual and gender minorities in Jackson, Mississippi." 6/01/2014–6/01/2016. \$20,000.

Professor **Rachel Shelton.** American Cancer Society Mentored Research Scholar Grant for her project, "Interpersonal Influences on Treatment Decision-making among Stage II Colon Cancer Patients." 7/1/2013–6-30/2018. \$729,000.

Associate Research Scientist Gertraud Stadler-Queiroz (Co-PI Dr. Marla Hamberger). Gertrude H. Sergievsky Center Pilot Grant Award for project entitled "Medication Adherence in a Diverse Sample of Persons Living with Epilepsy: An Intervention Development Study". \$25,000. Professor **Ursula M. Staudinger** (Co-PI: Dr. Esteban Calvo). Chile-Columbia University Fund Grant for their project entitled, "When does Retirement Optimize Health? Casual Effects of Retirement Timing on Health Outcomes and Healthy Behavior of Older Americans and Chileans." 1/1/14-12/31/14. \$24,000.

Professor **Ursula M. Staudinger**. (Co-PI: Stéphane Helleringer). Small-Scale Interdisciplinary Research Grant from the Global Health Initiative for their project entitled, "Addressing age misreporting in sub-Saharan aging studies."\$10,000.

Professor **Pamela Valera.** Columbia University Criminal Justice Initiative for her project entitled "Steps to reentry: Understanding the steps to successful community reintegration." 2/14-8/14. \$5,000.

Doctoral student **Heather Wurtz.** Institute of Latin American Studies Summer Field Research Pre-Dissertation Travel Grant. 6/2014-7/2014. \$500.

FELLOWSHIPS

Doctoral student **Shruti Chhabra**. Population Reference Bureau Policy Communication Fellowship. \$2,000

Doctoral student **Amy Dao.** Tokyo Foundation SYLFF Research Abroad Fellowship. 11/14-11/15. \$5,000

Doctoral student **Amy Dao.** Weatherhead East Asian Institute SYLFF Academic Year Fellowship. 11/15-11/16. \$12,000.

Doctoral student **José Diaz.** Predoctoral Fellowship in Behavioral Science Training in Drug Abuse Research at the National Development and Research Institutes (NDRI).

Doctoral student **Abby DiCarlo**. Communications in Health and Epidemiology Fellowship at Columbia University.

Doctoral student **Ijeoma Eboh**. National Science Foundation Graduation Research Fellowship. Doctoral student **Kirk Fiereck.** Columbia University Teagle Teaching Fellowship.

Doctoral student **Kirk Fiereck.** Mellon Postdoctoral Fellowship in Sexuality and Queer Studies at the University of Pennsylvania.

Doctoral student **David Johns.** The Data & Society Research Institute Fellowship. \$20,500.

Doctoral student **David Johns.** The Francis A. Countway Library Fellowship in the History of Medicine. \$3500

Doctoral student **Rebecca Kruger.** Inter-American Foundation (IAF) Grassroots Development Dissertation Research Fellowship. 6/2014-1/2015. \$21,300.

Doctoral student **Ronna Popkin.** Columbia University Writing Program Teaching Fellowship.

PUBLICATIONS

Alley, S. C. (2013). Review of Chagas Disease: History of a Continent's Scourge. In The Journal of Latin American and Caribbean Anthropology. 18(3):544-546.

Alley, S. Christopher and Sommerfeld, J. (2013). Infectious Disease in Times of Social and Ecological Change. Medical Anthropology: Cross-Cultural Studies in Health and Illness 33(2), 85-91.

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Clark, JL, Segura, ER, **Perez-Brumer, AG**, Reisner, SL, Peinado, J, Salvatierra, HJ, Lama, JR. (2014). Potential impact and acceptability of internet partner notification for men who have sex with men and transgender women recently diagnosed as having sexually transmitted disease in Lima, Peru. Sexually Transmitted Diseases, 41(1), 43-45.

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DiCarlo, A., Mantell, J.E., Remien, R.H., Zerbe, A., Morris, D., Pitt, B., Abrams, E.J., El-Sadr, W. (2014). 'Men say HIV testing is for women': Gender dynamics and perceptions of HIV testing in Lesotho. Culture, Health and Sexuality. [E-pub ahead of print.]

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Lukachko, A., **Hatzenbuehler**, **M. L.,** & Keyes, K.M. (2014). Structural racism and myocardial infarction in the United States. Social Science and Medicine, 103 (Feb 2014), 42-50.

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