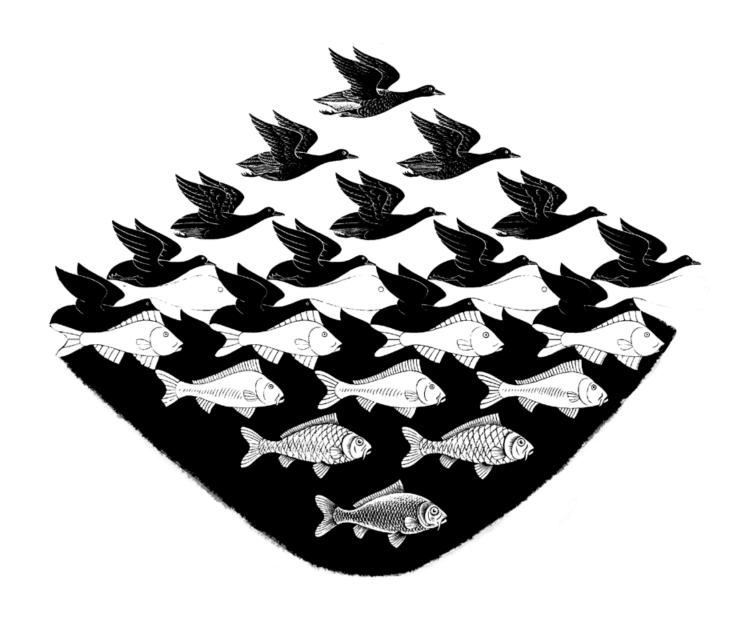


Gentrification and public health
Playing chicken with America's health
Injury control through collaboration





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#### chair's message



Colleagues,

Welcome to the fall 2015 issue of 2x2.

In this issue, 2x2 grapples with the causes and consequences of gentrification, examining its historical, economic, and social context, and efforts by researchers and advocates to understand and address the public health problems it often produces.

From the 2x2 project, we share evidence of the considerable public health risks posed by salmonella and the poultry industry.

We highlight just a small a selection of the hundreds of faculty articles published in recent months; these studies shed light on how parental age affects autism risk in children, help to clarify how immune response to chronic fatigue syndrome is associated with cognitive dysfunction, and reveal that PTSD may have long-term health consequences for women, among many other important epidemiological insights that move the field forward.

In these pages we also note examples of our faculty members' recent contributions to the public health conversation in the media, addressing MERS, Legionnaires' disease, the childhood obesity epidemic, anthrax, HIV prevention, and depression screening, to name a few.

As always, we hope you will find this issue interesting and informative.

Warm regards,

D Dkugu



#### Medical marijuana laws haven't increased teen cannabis use

related media coverage

The New York Times nyti.ms/1GIZoH8

Washington Post wpo.st/OJbT0

Rolling Stone rol.st/1Fl0phh

*NBC* bit.ly/1HqBZUK

Forbes onforb.es/1KTJRnU

arijuana use in teenagers does not increase after a state legalizes medical marijuana, according to research published in *The Lancet Psychiatry*. The nationwide study by Dr. Deborah Hasin, professor of epidemiology in psychiatry, Dr. Katherine M. Keyes, assistant professor of epidemiology, and colleagues, was based on data from more than one million 8th, 10th, and 12th grade students between 1991 and 2014 in 21 states where medical marijuana was legalized.

The analysis, the most comprehensive to date, provides the strongest evidence so far that the rate of marijuana use by teenagers did not increase after the laws were passed. Since 1996, 23 U.S. states and the District of Columbia have passed laws allowing the medical use of marijuana. State legalization of medical marijuana has raised concerns about increased accessibility and acceptability of marijuana to teenagers.

"Up to now, in the states that passed medical marijuana laws, adolescent marijuana use was already higher than in other states which may be due to a range of factors and overall attitudes toward drug use," noted Dr. Hasin.

The researchers compared teen marijuana use in states with and without legislation, but also looked closely at usage rates in states with medical marijuana laws in the periods before and after the legislation went into effect.

The data from the national Monitoring the Future survey showed there was no statistically significant increase in marijuana usage rates among Grade 10 and Grade 12 students after medical marijuana laws came into effect in the states that adopted them. Use of the drug actually dropped among Grade 8 students after legislation was put in place.

The research was funded by the U.S. National Institute on Drug Abuse.

Dr. Hasin presented the research at the College on Problems of Drug Dependence annual meeting held in Phoenix, Arizona June 13–18th.

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Hasin DS, Wall M, Keyes KM, Cerdá M, Schulenberg J, O'Malley PM, Galea S, Pacula R, Feng T. Medical marijuana laws and adolescent marijuana use in the USA from 1991 to 2014: results from annual, repeated cross-sectional surveys. Lancet Psychiatry. 2015 June 15. pii: S2215-0366(15)00217-5. doi: 10.1016/ S2215-0366(15)00217-5.

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#### publication highlights



# Heroin use spikes among whites who abuse prescription painkillers

related media coverage

U.S. News & World Report t.usnews.com/Z936u3

aculty in the department of epidemiology looked at the frequency of nonmedical prescription opioid use and the risk of heroin-related behaviors and found that past-year heroin use rose among individuals taking opioids like oxycontin, and these increases varied by race and ethnicity. The most significant rise in heroin use was among Hispanics and non-Hispanic whites, where the rate of heroin use for the latter group increased by 75 percent in 2008–2011 compared to earlier years.

The research, led by Dr. Silvia Martins, associate professor of epidemiology, sheds light on the racial and ethnic differences in trends of nonmedical opioid and heroin use over time.

Using data from the National Survey on Drug Use and Health, a large nationally representative household sample of 67,500 people, and self-reported heroin use within the last 12 months, the researchers examined the change in patterns of past-year non-prescription drug and heroin use between 2002-2005 and 2008-2011 across racial and ethnic groups. The study also looked at the association between past-year frequency of both, heroin-related risk behaviors, and exposure to heroin availability. For those who had endorsed using heroin in the past, participants were also asked how they administered the drug.

In 2008–2011, the risk of past-year heroin use, ever injecting heroin, past-year heroin abuse or dependence, and the perception of availability of heroin increased as the frequency of nonmedical opioid use increased for all race and ethnicities, but particularly for non-Hispanic whites.

"We found that individuals endorsing past-year non-prescription opioids who also use heroin are likely to be in more advanced stages of their drug use," said Dr. Martins. "The individuals tend to use prescription opioids as a substitute for heroin when heroin is unavailable, to augment a heroin-induced 'high,' to 'treat'

withdrawal symptoms, and to curb heroin use."

Regarding frequency of use, for Hispanics, increases were significant only among those using opioids about 1–29 days in the past year. Among blacks and whites, significant increases in the rate of heroin use were observed among those using prescription opioids more frequently (100–365 days) in the past year.

Consistent with earlier research, with the exception of Hispanics, frequent prescription opioid users of all races and ethnicities and heroin users were at increased risk of ever injecting heroin and of past-year heroin abuse and/or dependence. "This is alarming and raises concern since injection drug use among prescription opioid users can contribute to the spread of HIV, as recently reported in Southern Indiana, as well as of Hepatitis C," said Dr. Martins.

"The noteworthy increase in the annual rate of heroin abuse or dependence among non-Hispanic whites parallels the significant increase in nonmedical opioid use during the last decade and the growing number of heroin overdose deaths described for this race and ethnic group in recent years," said Dr. Martins. "Overall, our results suggest a connection between opioid and heroin use and heroin-related adverse outcomes at the population level, implying that frequent nonmedical users of prescription opioids, regardless of race or ethnicity, should be the focus of public health efforts to prevent and mitigate the harms of heroin use."

Martins SS, Santaella-Tenorio J, Marshall BD, Maldonado A, Cerdá M. Racial/ethnic differences in trends in heroin use and hero-in-related risk behaviors among nonmedical prescription opioid users. Drug Alcohol Depend. 2015 Jun 1;151:278-83. doi: 10.1016/j.drugalcdep.2015.03.020. Epub 2015 Apr 2. PubMed PMID: 25869542; PubMed Central PMCID: PMC4447574.

# Children of older parents and May-December couples at increased risk for autism

related media coverage

Medical News Today
bit.ly/1F6zeXn

here is a substantial body of research associating parental age with autism spectrum disorders, although not all studies agree with each other and it has been a challenge to pinpoint the shape of the relationship. A recent study co-authored by epidemiology faculty members sheds new light on the nature of the risk relationship by examining the ages of both parents to determine if paternal age and maternal age contribute independently or jointly to the likelihood of autism spectrum disorders in offspring.

Drs. Ezra Susser, professor of epidemiology and psychiatry; Michaeline Bresnahan, assistant professor of epidemiology; and Mady Hornig, associate professor of epidemiology and Director of Translational Research of the Center for Infection and Immunity at Columbia's Mailman School of Public Health, analyzed data from more than 5.7 million children born in Israel, Western Australia, Denmark, Norway, and Sweden between 1985 and 2004.

Children born to older parents or to couples who differ in age by ten years or more appear to be at an increased risk for autism spectrum disorders (ASD), according to a largest-of-its-kind, multinational study in *Molecular Psychology*.

"This is the first major result from a historic collaboration among epidemiologists that combines registry data from many countries to study autism spectrum disorders," said Dr. Susser.

Obtaining and analyzing data from millions of children allowed the researchers to ask important questions about parental age and children's relative risk for autism that were, until now, impossible to examine.

"Since maternal and paternal age tend to be highly correlated, very large numbers are required to clearly differentiate their effects," said Dr. Susser.

Using this extremely large data set, the researchers separated out the influence of mother's age versus father's age, while adjusting for the potential influence of the other parent's age.

Results show that "older maternal age and paternal age at conception are each independently related to the risk of ASD," said Dr. Susser.

Kids born to older moms, older dads, or parents who differ in age by a decade or more had an elevated risk for autism.

While it's important to note that most children developed normally—even those in high-risk groups—the chances of autism were lowest when

mothers were 25-35 years old, fathers were 29-39 years old, and the parents were closely matched in age.

"Comparing fathers and mothers over the same age range, the RRs [relative risks] with advancing age were of similar magnitude," the authors noted in the article. This "... suggests that advancing paternal age may contribute more to the risk than advancing maternal age overall, due to the longer male child-bearing potential."

In other words, advancing maternal age and paternal age both increase children's risk for autism, but because men are fertile longer than women, older dads may actually contribute more to overall autism risk than older moms.

In Denmark, Norway, and Sweden (but not in Israel or Western Australia), the association between mother's age and child's autism risk was U-shaped: Teen moms were, much like older moms, more likely to give birth to children with autism. The "safest" age for giving birth among women in these Scandinavian countries was just over 30 years old.

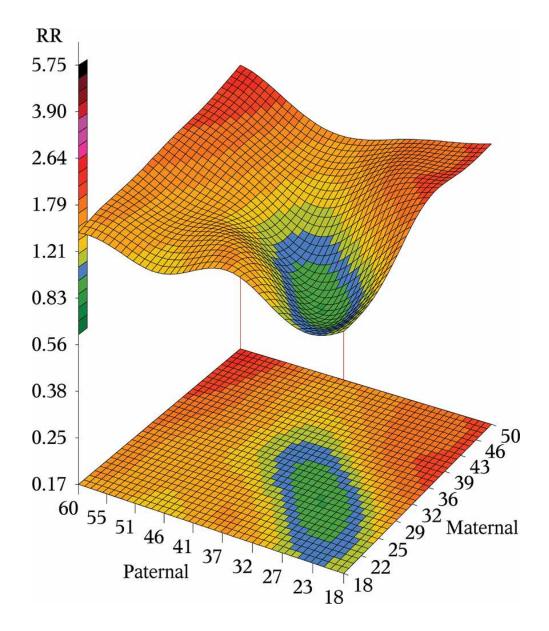
The study "... raises a number of new puzzles for future research," said Dr. Susser.

No previous research has been able to examine autism trends in such great detail. This article provides new directions for scholarly inquiry on the subject of parental age and children's autism risk.

Sandin S, Schendel D, Magnusson P, Hultman C, Surén P, Susser E, Grønborg T, Gissler M, Gunnes N, Gross R, Henning M, Bresnahan M, Sourander A, Hornig M, Carter K, Francis R, Parner E, Leonard H, Rosanoff M, Stoltenberg C, Reichenberg A. Autism risk associated with parental age and with increasing difference in age between the parents. Mol Psychiatry. 2015; Figure 3, Retrieved June 23, 2015 from Nature. doi: 10.1038/mp.2015.70 Used with permission from Nature Publishing Group.



# Relative risk for autism spectrum disorder by joint paternal and maternal age



Relative risk (RR) for autism spectrum disorder by joint paternal and maternal age (referent parental ages 25 years). RR's adjusted for offspring sex, birth year, and country of birth. Color Code: dark greens indicate RR < 1; blue indicates RR  $\approx$ 1; lime green, yellow, oranges and reds indicate increasing RR's >1.

SANDIN S, SCHENDEL D, MAGNUSSON P, HULTMAN C, SURÉN P, SUSSER E, GRØNBORG T, GISSLER M, GUNNES N, GROSS R, HENNING M, BRESNAHAN M, SOURANDER A, HORNIG M, CARTER K, FRANCIS R, PARNER E, LEONARD H, ROSANOFF M, STOLTENBERG C, REICHENBERG A. AUTISM RISK ASSOCIATED WITH PARENTAL AGE AND WITH INCREASING DIFFERENCE IN AGE BETWEEN THE PARENTS. MOL PSYCHIATRY. 2015; FIGURE 3, RETRIEVED JUNE 23, 2015 FROM NATURE. DOI: 10.1038/MP.2015.70 USED WITH PERMISSION FROM NATURE PUBLISHING GROUP.



Finding double happiness: new work on marriage outcomes in China for individuals with psychosis

new paper from Dr. Lawrence Yang, associate professor of epidemiology, Dr. Michael Phillips, professor of clinical psychiatry and clinical epidemiology, and Dr. Ezra Susser, professor of epidemiology and psychiatry, titled "Marriage outcome and relationship with urban versus rural context for individuals with psychosis in a population-based study in China" was just published in Social Psychiatry and Psychiatric Epidemiology.

Social integration for people with psychosis in low- and middle-income countries remains an important issue that might facilitate or hinder their recovery. However, this issue has rarely been investigated across urban versus rural settings in the same country. The researchers therefore examined marriage outcomes for individuals with psychosis in urban versus rural settings in China in a large community-based study in four provinces representing 12 percent of China's population (393 individuals with psychosis). Main results showed that while urban and rural residents had similar impairments due to symptoms, urban female residents were 2.72 times more likely to be unmarried than their rural counterparts. Further stratified analyses indicated that this marital disadvantage occurred primarily among urban females with an earlier age of onset.

The findings indicate that urban contexts impeded opportunities for marriage for female individuals with psychosis specifically. These data suggest that urban women with earlier age of onset have difficulty in obtaining marriage, which may be related to economic expectations of women in urban areas. This research is especially significant given the rapid urbanization of China and how it might adversely affect social integration opportunities for people with psychosis.

FALL 2015 : ISSUE 6.02

Yang LH, Phillips MR, Li X, Yu G, Zhang J, Shi Q, Song Z, Ding Z, Pang S, Susser E. Marriage outcome and relationship with urban versus rural context for individuals with psychosis in a population-based study in China. Soc Psychiatry Psychiatr Epidemiol. 2015 Jun 22. [Epub ahead of print] PubMed PMID: 26096300.





National
Academy
of Medicine
report focuses
on bridging
quality gap in
psychosocial
treatments

plan to ensure that evidence-based psychosocial interventions are routinely used in clinical practice and made a part of clinical training for mental health professionals was recently released by the National Academy of Medicine (NAM). Co-authored by Dr. Myrna Weissman, professor of epidemiology in psychiatry, the report points to a strong need to strengthen evidence on the effectiveness of psychosocial interventions, and to develop guidelines and quality measures for implementing these interventions in professional practice. Though medications undergo a systematic review of their efficacy, no similar process has existed for psychosocial treatments. The report, titled "Psychosocial Interventions for Mental and Substance Use Disorders," sets forth a detailed program that identifies the steps needed to close this problematic quality gap.

Mental health and substance use disorders affect approximately 20 percent of the U.S. population, and frequently occur together. The rate of comorbidity of these disorders with physical disorders is also high. Psychosocial interventions for mental and substance use disorders include psychotherapies, community-based treatments, vocational rehabilitation, peer support services, and integrated care interventions. These are delivered in individual, group, and even virtual settings, and may be administered as stand-alone treatments or combined with other interventions, such as medications.

The NAM report proposes an iterative process that engages consumers at every step of a cyclical framework to: strengthen the evidence base for interventions; identify elements of effective intervention; conduct independent systematic reviews to inform clinical guidelines; develop quality measures; and implement interventions and improve outcomes.

Addressing the quality standards for psychosocial treatment is particularly critical given the recent passage of two significant pieces of legislation: the Mental Health Parity and Addiction Act, and the Affordable Care Act (ACA). The ACA expands access to health insurance and aims to reform how care is delivered, with an emphasis on accountability and performance measurement. The Parity Act redresses limits on access to behavioral health care services. Defining standards for psychosocial interventions and implementing strategies to monitor the quality of those interventions will assist in making these two acts effective.

"The NAM report acknowledges the value of psychological interventions and the evidence supporting their efficacy," said Dr. Weissman, who is also the Diane Goldman Kemper Family Professor of Psychiatry at Columbia University Medical Center. "Treatments so important to health need to be rigorously defined, taught, practiced, and made accessible."

Download the book for free in PDF format here: epi.is/psychosocial-interventions

Committee on Developing Evidence-Based Standards for Psychosocial Interventions for Mental Disorders, Board on Health Sciences Policy, Institute of Medicine; England MJ, Butler AS, Gonzalez ML, editors. Psychosocial Interventions for Mental and Substance Use Disorders: A Framework for Establishing Evidence-Based Standards. Washington (DC): National Academies Press (US); 2015.PubMed PMID: 26203478.



# New clues into cognitive dysfunction in chronic fatigue syndrome

related media coverage

Yahoo Health
yhoo.it/1MxQ8al

esearchers in epidemiology have identified a unique pattern of immune molecules in the cerebrospinal fluid of people with myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS) that provides insights into the basis for cognitive dysfunction—frequently described by patients as "brain fog"—as well as new hope for improvements in diagnosis and treatment.

In the study published in Molecular Psychiatry, Dr. Mady Hornig, and colleagues used immunoassay testing methods to measure levels of 51 immune biomarkers called cytokines in the cerebrospinal fluid of 32 people with ME/CFS for an average of seven years, 40 with multiple sclerosis, and 19 non-diseased controls. The researchers found that levels of most cytokines, including the inflammatory immune molecule interleukin 1, were depressed in individuals with ME/CFS compared with the other two groups, matching what was seen in a blood study in patients who had the disease for more than three years. One cytokine-eotaxin-was elevated in the ME/CFS and MS groups, but not in the control group.

"We now know that the same changes to the immune system that we recently reported in the blood of people with ME/CFS with long-standing disease are also present in the central nervous system," said Dr. Hornig, professor of epidemiology and director of translational research at the Center for Infection and Immunity at the Mailman School. "These immune differences may contribute to symptoms in both the peripheral parts of the body and the brain, from muscle weakness to brain fog."

#### Implications for diagnosis and treatment

"Diagnosis of ME/CFS is now based on clinical criteria. Our findings offer the hope of objective diagnostic tests for disease as well as the potential for therapies that correct the imbalance in cytokine levels seen in people with ME/CFS at different stages of their disease," added Dr. W. Ian Lipkin, John Snow Professor of Epidemiology and director of the Center for Infection and Immunity.

There is precedent for use of human monoclonal antibodies that regulate the immune response in a wide range of disorders from rheumatoid arthritis to multiple sclerosis. However, the researchers note, additional work will be needed to assess the safety and efficacy of this approach.

Hornig M, Gottschalk G, Peterson DL, Knox KK, Schultz AF, Eddy ML, Che X, Lipkin WI. Cytokine network analysis of cerebrospinal fluid in myalgic encephalomyelitis/chronic fatigue syndrome. Mol Psychiatry. 2015 Mar 31. doi: 10.1038/mp.2015.29. [Epub ahead of print] PubMed PMID: 25824300.

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IMAGE: CHAD FUST

# Frequent trips to ER are powerful predictor of death from prescription drug overdoses

related media coverage

U.S. News and World Report bit.ly/1MxQxdv

ith rates of prescription drug overdose at an all-time high, researchers at Columbia University's Mailman School of Public Health found that among individuals who visited the emergency department, the risk of subsequently dying from prescription drug overdose increased markedly based on how many times they visited the ER. Relative to patients with one or fewer trips to the ER in the previous year, the risk of dying from prescription drug overdose was five times the rate for those with two visits, 17 times for those with three visits, and 48 times for those with four or more visits.

Despite the importance of the ER as a key clinical entry point for patients at high-risk of prescription drug overdose, the new study is among the first to evaluate the relationship between the ER and overdose. Results are published online in the journal *Annals of Epidemiology*.

"While 'doctor-shopping'— the practice of visiting multiple health care providers to obtain controlled substances— has been shown to be associated with prescription drug overdose in many studies, our investigation demonstrates that the frequency of emergency department visits in the past year is a strong predictor of subsequent death from prescription drug overdose," said Dr. Joanne E. Brady, adjunct assistant professor of epidemiology at the Mailman School of Public Health and first author.

Nearly 60 percent of drug overdose deaths involve prescription drugs. According to 2011 data, 1.4 million ER visits implicated use of prescription drugs in a manner other than for which it was prescribed.

The researchers analyzed data for the years 2006–2010 from the New York Statewide Planning and Research Cooperative System, a data reporting system that collects emergency department visit data from non-federal hospitals in New York State, including patient characteristics, discharge diagnoses, and procedures received. These records were matched with mortality data for patients who subsequently died.

By comparing 2,732 patients who subsequently died from prescription drug overdose and 2,732 patients who did not, the researchers found substantially increased risk in patients who were diagnosed with substance use disorders or other psychiatric disorders, and who were male, 35-54 years of age, or white. Additionally, patients who subsequently died of a prescription drug overdose were more likely to be discharged against medical advice at the initial emergency room visit.

"Emergency department visits may serve as an important window of opportunity for identifying patients at heightened risk of prescription drug overdose and for implementing evidence-based intervention programs, such as providing these patients and their families with take-home naloxone and drug treatment referral," said senior author Dr. Guohua Li, Finster Professor of Anesthesiology and Epidemiology and director, Center for Injury Epidemiology and Prevention at Columbia.

Brady JE, DiMaggio CJ, Keyes KM, Doyle JJ, Richardson LD, Li G. Emergency department utilization and subsequent prescription drug overdose death. Ann Epidemiol. 2015 Aug;25(8):613-619.e2. doi: 10.1016/j.annepidem.2015.03.018. Epub 2015 Apr 2. PubMed PMID: 25935710.



#### PTSD raises odds of heart attack and stroke in women

related media coverage

CNN cnn.it/1T1a9aa

American Heart Association bit.ly/1M4XLUn

omen with elevated symptoms of post-traumatic stress disorder consistent with the clinical threshold for the disorder had 60-percent higher rates of having a heart attack or stroke compared with women who never experienced trauma.

In a survey of nearly 50,000 younger and middle-aged women in the Nurses' Health Study II, 80 percent reported experiencing a traumatic event in their lives. More than half of this group (58 percent) reported no symptoms of PTSD. Those reporting symptoms of PTSD were split evenly between those with one to three symptoms and those with four or more symptoms, a commonly used clinical cut-off for PTSD.

Trauma exposure alone—that is, reporting trauma but no symptoms of PTSD—also increased risk for heart attack and stroke by nearly 50 percent.

#### Psychological trauma, physical health consequences

Behaviors like smoking and lack of physical activity and medical factors like hypertension and the use of anti-depressants accounted for nearly half the association between PTSD and cardiovascular disease in women with four or more symptoms of PTSD, but less than 15 percent in women who reported trauma without PTSD.

While more research is needed, the authors said PTSD may disrupt physiological stress systems such as the hypothalamic-pituitary-adrenal axis and the autonomic nervous system, in addition to leading to various unhealthy behaviors that may increase risk of heart attack and stroke.

#### The takeaway

"Most women experience psychological trauma at some point in the their life, but few know that there could be serious long-term repercussions for physical health," said senior author Dr. Karestan Koenen, a professor of epidemiology at Columbia's Mailman School and the Harvard T.H. Chan School,

whose earlier studies linked PTSD in women to diabetes and obesity.

"Our results provide further evidence that PTSD is not solely a mental health problem, but also increases risk of chronic disease," continued Dr. Koenen.

According to the authors, women who experienced trauma—even if they don't have symptoms of PTSD—should talk to their doctor about their risk for cardiovascular disease and how to lower it.

Physical activity, diet, and drug treatments like aspirin and statins are known to lower risk for heart attack and stroke. It is not yet clear if treating PTSD can lower cardiovascular risk.

#### Women and PTSD

Unlike previous research, which has largely focused on men with PTSD related to combat, the new study looks at women and a wide range of traumas, from sexual and physical assault to surviving a natural disaster.

"PTSD is twice as common in women than in men, and women with PTSD are more likely to have severe and persistent symptoms," said first author Dr. Jennifer Sumner, Epidemiology Merit Fellow at Columbia's Mailman School and Visiting Scientist at the Harvard T.H. Chan School. "Likewise, women with cardiovascular disease are more likely to be hospitalized and die from a heart attack compared with men. For all these reasons, it's critical that we understand how PTSD contributes to cardiovascular disease in women."

Sumner JA, Kubzansky LD, Elkind MS, Roberts AL, Agnew-Blais J, Chen Q, Cerdá M, Rexrode KM, Rich-Edwards JW, Spiegelman D, Suglia SF, Rimm EB, Koenen KC. Trauma Exposure and Posttraumatic Stress Disorder Symptoms Predict Onset of Cardiovascular Events in Women. Circulation. 2015 Jul 28;132(4):251-9. doi: 10.1161/CIRCULATION-AHA.114.014492. Epub 2015 Jun 29. PubMed PMID: 26124186.

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#### briefs

#### Columbia epidemiologist named science analyst at American Institute for Cancer Research

Dr. Christine L. Sardo Molmenti, postdoctoral research scientist in epidemiology, is now a Science Analyst at the American Institute for Cancer Research. She will assist the Institute in its mission to examine how weight, diet, activity, and lifestyle affect cancer risk.

Dr. Sardo Molmenti's research focuses on the effects of fruit phenolics, inflammation, and sedentary behavior on colorectal neoplasia and obesity.

Recently, she has published on the strong link between colorectal adenoma recurrence and a sedentary lifestyle among men.

To preserve good health, The Institute for Cancer Research recommends at least 30 minutes of physical activity each day; a low body weight; minimal consumption of red meats and processed meats; and limited alcoholic use (two drinks a day for men and one for women).

Read more at bit.ly/ christine-sardo-molmenti.

## Social epi cluster launches a blog

The social epidemiology cluster has launched a blog to disseminate and translate research on the importance of social determinants of health. They are building a free-to-use Info-Graphix library that documents key statistics, findings and issues - so far a series of graphs on NYC Cause Specific Mortality Rates by neighborhood poverty rate and a series of slides showing the enormity of Mass Incarceration have been posted. New slide decks will be posted on a regular basis. They have also launched "Social Epi Radio," which uses the Spotify streaming music service to play curated mixes focused on specific social issues. The first stream is Ska and Reggae songs about the trials and tribulations of living in a disadvantaged neighborhood. Coming soon—a Hip Hop mix about Drug Sentencing and Mass Incarceration and a mix on Environmental Justice.

Read more at blogs.cuit.columbia.edu/socialepicluster.

# The Tobacco Atlas reveals troubling news for low-income countries

Dr. Neil W. Schluger, Professor of Medicine, Epidemiology, and Environmental Health Sciences, Division Chief of Pulmonary, Allergy and Critical Care Medicine, and Interim Chair of Epidemiology, is a coauthor of *The Tobacco Atlas*, a publication that is produced by the American Cancer Society and the World Lung Foundation.

Launched this March at the World Conference on Tobacco or Health, the completely revised and updated fifth edition of *The Tobacco Atlas*, together with its companion website, tobaccoatlas.org, aims to be the most comprehensive, informative and accessible resource on the most important and current issues in the evolving tobacco epidemic. Media coverage of the findings and recommendations in the Atlas appeared in *Reuters*, *Time*, and *The Lancet* 

According to the latest issue, "over the past 50 years, tobacco farming has shifted from high to low- and middle-income countries" and "...the short-term benefits of a crop that generates cash for farmers are offset by the long-term consequences of increased food insecurity, frequent sustained debt, environmental damage, and illness, and poverty among farm workers."

World Lung Foundation. The tobacco atlas, 2015. Atlanta, GA: American Cancer Society, Inc. [Accessed 4 Aug 2015.] Available from URL: tobaccoatlas.org.

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# Gentrification and public health: Opportunities and challenges in change

BY AMY SCHELLENBAUM AND DANA MARCH, PHD





IMAGE: ANDREAS KAMBANIS





IMAGE: RACHEL KRAMER BUSSEL

IMAGE: MATTHEW RUTLEDGE

ongtime residents
consider East Austin,
Texas a victim of its
own success. It's a narrative
locals in transforming
neighborhoods across
America would recognize:
As recently as the 1990s,
East Austin's population was
around 90 percent Latino; the
area's families having carved
homes here in the decades
following a 1928 law that
segregated Texas' capital.

Officials neglected the area for decades—unless, of course, something undesirable, like a power plant, needed a home.

Fast-forward to the mid-2000s. The neighborhood boasts the farmers' markets, coffee shops, and food trucks required of a blooming hipster haven. Land value has skyrocketed, and so have rents and down payments. Much of the old community can't afford to live here.

For decades the community came together to protect its neighborhood, many times to great success. For example, in the 1990s, community leaders combated what activist and longtime resident Susana Almanza called "environmental racism," demanding the closure of the Holly Street Power Plant. Eventually, in 2009, the government ceased the plant's operations.

This is where the victim-of-its-own-success moniker comes into play. As blights and polluting structures were demolished, residents from greater Austin started moving in. The effect snowballed until, by 2014, housing prices were 70 to 80 times what they were even in the 1990s.

"We cleaned it all up," Ms. Almanza said, "just so the new [residents] can come in and take over the barrio."

#### Grappling with gentrification

Indeed, when people or institutions with more money decide land is valuable, the onrush of wealth drives up housing prices, squeezing out the neighborhood's original dwellers.

The effects of such a shift can be severe: researchers have long established the health woes of people whose lives have been uprooted. People leave their jobs and move into lesser-quality housing, life events are often paid for by working more hours or avoiding medical care. The psychological effects are long-lasting and dire.





IMAGE: SEE-MING LEE





IMAGE: JOE NICKOL

The term gentrification dates back more than five decades—and its socio-political causes back much further—but the task of understanding this process has taken on a new urgency. Researchers endeavor to parse its context, causes, and consequences.

Researchers have focused on the extent of gentrification in U.S. cities. A 2013 analysis by economist Daniel Hartley, for example, shows the most pronounced effects of this complex social process in the nation's largest urban areas—New York, Boston, Washington, DC, Seattle, and San Francisco. In Hartley's investigation, the percent of gentrified urban neighborhoods ranged substantially, from 61 percent in Boston to less than five percent in other major metro areas, such as San Diego.

Meanwhile, advocates strive to keep neighborhoods from disintegrating or, barring that, mitigate the potentially negative effects of community dissolution. What causes gentrification? How detrimental are its effects? How do we facilitate development that isn't harmful for residents? The department of epidemiology recently convened a symposium to ask these questions, investigating themes that resonate here-and-now, despite having been gnarled by decades. Scholars and activists discussed the origins and implications of gentrification, calling upon a spate of tools from the academic's arsenal.

The task at hand was not to pin down a solution to the displacement of poor communities—though many were discussed—but rather to inform researchers and organizers, inspire new collaborations, and reiterate the importance of studying the topic.

To introduce the symposium, its hosts Dr. Mindy Fullilove, professor of clinical psychiatry and clinical sociomedical sciences, Dr. Robert E. Fullilove, professor of sociomedical sciences and associate dean from minority affairs, and Dr. Gina Lovasi, assistant professor of epidemiology, first outlined the problem. Policies dating back before The New Deal set the stage for urban renewal, gentrification, and other forms of forced displacement.

In all, some one million Americans in 993 cities have been forced out of their communities. Some 75 percent of those displaced were people of color.

The narrative begins with Jim Crow laws, which allowed banks and real estate companies to limit where blacks could live and open businesses, and continues into the aftermath of the Great Depression, when the government decided where to invest New Deal money based on the number of foreign-born residents and people of color. Neighborhoods that were already neglected were given the lowest scores, furthering disinvestment.

Fast-forward a few decades, and the city labels some of these neighborhoods

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Because new residents are also more likely to make noise complaints, gentrification too threatens placebased culture, one defined in Tremé by parades, bars, and live jazz.

"slums," using eminent domain to demolish housing and community buildings in favor of university infrastructure or shiny cultural centers.

Gentrification is often viewed as a natural process, although its history indicates otherwise.

#### The eve of mass displacement

Dr. Richard Marciano from the University of Maryland and his co-authors examined data from the Home Owners' Loan Corporation, a New Deal program FDR created to refinance mortgages and prevent mass foreclosures post-Depression. (Over the next three decades, the U.S. government financed over \$120 billion in new housing, though less than two percent of that real estate was available to non-white families.)

The HOLC put in place appraisal methods that kick-started a practice known as redlining, or the institutionalized denial of services.

The appraisals are painful to read, describing neighborhoods in terms of racial makeup and the immigration status of their inhabitants. Documents discouraged realtors from "introducing any individuals whose presence will clearly be detrimental to property," according to Dr. Marciano, with the capacity for detriment based largely on "race or nationality."

Using these appraisals, HOLC categorized neighborhoods into colors, with "red" neighborhoods being the most "detrimental." Redlining is how the government noted where it wasn't going to send money—again, based on race and ethnicity.

Perhaps unsurprisingly, the red areas of these maps "fit like a glove" with maps of urban renewal projects decades later. It's not hard to see why. Systematic neglect translates to less federal mortgage aid, fewer parks, and poorer public schools. A dearth of housing code enforcement and tenants' rights contributed to the slum-like conditions the federal government tried to eradicate in the '50s and '60s.

Urban renewal is what Dr. Marciano dubbed the "second act" of gentrification. It began in earnest with the Housing Act of 1949. By the 1960s, Harlem-born writer James Baldwin termed urban renewal "Negro Removal."

Vulnerability to gentrification today, said Dr. Lovasi, is "the legacy of segregation."

But gentrification is both dynamic and complex—and contextually dependent. It doesn't always rupture communities of color. Research using Census data from the 1990s led by University of Colorado economist Terra McKinnish indicates that gentrification of low-income black neighborhoods, in fact, renders them more attractive to middle-class black families.

#### A vulgar, criminal intrusion

To showcase the detrimental effects of gentrification, Dr. Trushna Parekh from Texas Southern University presented vignettes from the New Orleans Tremé neighborhood. One interviewee, George, described the changes in terms of police activity, and how he "couldn't move about the neighborhood freely without being stalked by the police," Dr. Parekh said. "He was routinely harassed without any reason."

Gentrifiers, Dr. Parekh said, are "notorious for calling the police." In the mind of new residents, they are improving the neighborhood. As one wealthier new resident told Dr. Parekh, "I feel like I am much more proactive, you know, I call the cops [...] I care about the community."

Because new residents are also more likely to make noise complaints,

gentrification also threatens place-based culture, one defined in Tremé by parades, bars, and live jazz.

Long-time residents don't mince words, one calling newcomers "a vulgar criminal intrusion into our streets. [...] When the drums come, they don't come to the door and greet the people, they call the police."

#### 'The last clean up is us leaving.'

Andrew J. Padilla, a filmmaker, documents changing neighborhoods like his own, East Harlem. At the symposium, he spoke about how communities fight to determine their own fate.

That quest for self-determination had duplicitous effects for East Austin, Texas, whose zip code is considered the "second-most gentrified" in the country. Mr. Padilla interviewed community leaders last year, uncovering a troublesome narrative: the more success community members had expelling unsightly structures the government imposed, the more the community became endangered.

Twenty years ago a house "would cost you maybe about \$18,000," an interviewee noted. In 2015, a new house goes for \$1.3 million

For decades, a local environmental group worked to rid the neighborhood of power plants and other undesirable structures. By the 2000s, they had found a lot of success, but success meant people from "Anglo" Austin wanted to live on the other side.

"They're benefiting from the struggle," Ms. Almanza said. "It's sort of like a punishment from the city [...] You no longer wanted to live with polluting—well guess what? You're not going to be able to live there anymore."

As Mr. Padilla put it, "We cleaned it up, but the last cleanup is us leaving."

#### Housing instability as brain poison

Dr. Angela A. Aidala, associate research scientist in Sociomedical Sciences, points out that politicians and developers tend to focus on things like the increased sense of safety, property values, tax revenues, and even social mix, meaning poverty is less concentrated. "Yes, it facilitates mixing," she said. "For a time."

Impacts for the original residents, however, are hard to ignore: rent increases are often financed by cutting back on healthy food and medical care, or by working more hours. Residents may need to double-up in apartments or seek poorer-quality housing. They may also experience some unexpected boosts as well, like credit score increases of 1.5 to 8 points, depending on whether they are staying or going.

Still, housing insecurity is a major issue. Dr. Aidala called insecurity and transience "brain poison," and an inevitable evil if "your house is a constant source of stress."

Gentrification can disrupt social networks and shutter small businesses.
Shelters, food banks, drug centers and other social services can dissolve.

Unstable housing, Dr. Aidala noted, also has a tendency to make medical treatment particularly difficult. Case in point: unstably housed people living with HIV or AIDS are two to six times more likely to use hard drugs, share needles, or "exchange sex" than those with stable housing but "the same personal characteristics and service use patterns." Housing, she said, is "one of the most important barriers" limiting the use of combination drug therapy.

Rapid gentrification, in particular, may result in serious short- and long-term consequences that "undermine the resilience of communities," according to Dr. Lovasi.

A sudden loss of housing and the elimination of spaces for music events or other neighborhood gatherings can erode residents' physical and mental health.

When gentrification breaks down social ties, said Dr. Lovasi, it "ultimately contributes to a sense of futility and cynicism."

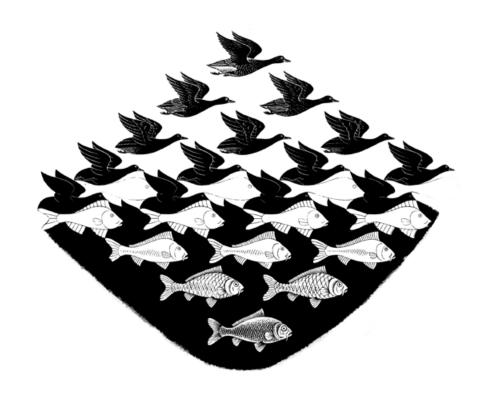
#### Another yoga studio is not the solution

"Things are really, really bad," Dawn Phillips, a 20-year activist in California's Bay Area, said. To live in Oakland on minimum wage, one must work 165 hours a week. Now is the time, she said, to figure out community-driven development.

So what exactly are the key components of establishing a community-driven model of development? Quite simply, a major paradigm shift. Development, she said, is very different when the government is not planning for wealthier residents. "We have never heard people say 'we need another yoga studio.'"

The solution begins by stabilizing the community with tenant protections that keep rents affordable. As Ms. Phillips said, "Organizing for tenant protection is some of the least popular forms of organizing, but we've got to."

What remains clear is that the changes inherent in gentrification can deeply affect communities that have forged meaningful lives despite a lack of financial resources. Families that are confined to lower socioeconomic positions are likely to retain that status across generations, living in disadvantaged neighborhoods regardless of their geographic mobility, as work by NYU sociologist Patrick Sharkey shows in his award-winning 2014 book, Stuck In Place. Residential neighborhoods are but one axis along which the staggering social inequality in the U.S. manifests itself. The complexities of gentrification demand sophisticated epidemiological, social, and economic research that can parse out its many causes and consequences. Such research should involve communities themselves, because there is no simple solution, especially when the challenges hit home.



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# Playing chicken with America's health

FRONTLINE investigates salmonella, the poultry industry, and public health

BY DANA MARCH. PHD

the2x2project.org

2x2.ph/chicken-trouble



n 1906, Upton Sinclair published The Jungle, which laid bare the exploitation of immigrants and the harsh working conditions to which they were subjected in the United States. More resonant with the American public, however, was the powerful exposé of the deplorable lack of sanitation in Chicago meatpacking plants. Nearly a century later, the conditions Sinclair described endure. arguably in a more inimical form—the U.S. poultry industry.

The filth and diseased animals of the days of The Jungle are not found in contemporary American poultry plants, thanks to regulatory action the novel shaped directly—the Meat Inspection Act and the Federal Food and Drugs Act of 1906, which gave rise to the Food and Drug Administration in 1930. However, today's poultry industry ferries a far more pernicious threat to the American public: Salmonella.

In "The Trouble with Chicken", which airs Tuesday, May 12 on PBS, FRONTLINE exposes the terrifying threat of Salmonella in the American poultry industry and the shocking impotence of the U.S. public health system to protect Americans from Salmonella and other infectious agents found in food.

As FRONTLINE reports, Salmonella affects over a million Americans every year, including approximately 200,000 from contaminated poultry, and is the leading cause of death from food-borne illness. Between 1998 and 2012, 278 outbreaks of salmonella attributable to chicken and turkey have occurred in at least 41 states. A particularly virulent and multi-drug resistant strain of Salmonella, Salmonella

Heidelberg, which is more commonly found in the bloodstream than other strains of Salmonella, has been responsible for a series of deadly outbreaks attributable to tainted poultry since 2004.

No one knows the effects better than Noah Craten and his family. In October 2013, 18-month old Noah contracted Salmonella Heidelberg from chicken produced by Foster Farms, a \$2 billion industrial poultry operation that is the largest producer on the West coast. Tainted chicken from Foster Farms was responsible for the largest Salmonella outbreak in U.S. history, which lasted 16 months and ultimately sickened 634 people across 29 states.

Noah's bout with Salmonella Heidelberg resulted in his hospitalization with a brain abscess that eventually required surgery. Noah's hospitalization due to complications from Salmonella infection was not unique. According to the CDC, 38 percent of people infected were hospitalized, twice what would be expected in a normal Salmonella outbreak.

This extraordinary epidemic occurred despite the presence of federal inspectors from USDA's Food Inspection and Safety

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Typically, FSIS inspectors examine less than one chicken per production facility per day—even when the volume may reach the hundreds of thousands. And the inspections favor aberrations that are visible to the eye, not microscopic organisms.

Service (FSIS) at Foster Farms. FRONT-LINE's investigation sets into relief the alarmingly antiquated inspection practices and regulatory system that puts Americans at risk of Salmonella poisoning and other food-borne illnesses. Samples taken by FSIS inspectors from the Foster Farms plants that produced and distributed tainted chicken actually met USDA safety standards.

In addition, USDA inspection practices, which were established over a century ago, focus on the whole chicken. Today, however, 80 percent of chicken sold in the United States is chicken parts—breasts, thighs, and legs. The separation process offers an additional opportunity for chicken to be contaminated by Salmonella. The FSIS has not set Salmonella standards for chicken parts.

Typically, FSIS inspectors examine less than one chicken per production facility per day—even when the volume may reach the hundreds of thousands. And the inspections favor aberrations that are visible to the eye, not microscopic organisms. When Salmonella testing does take place, it examines neither levels of the bacteria nor strains, which could differentiate among the innocuous and dangerous, like the antibiotic-resistant Salmonella Heidelberg.

Salmonella differs from other harmful bacteria responsible for food-borne illness and death, like E. Coli, which caused a catastrophic outbreak in 1993 when contaminated hamburger meat was served in the national fast food chain Jack-in-the-Box. Any level of E. Coli in food is considered unacceptable by the USDA, prompting recalls of food in the interest of public health because of its regulatory status as

an adulterant. Unlike E. Coli, Salmonella is not classified an adulterant by the USDA.

Bill Marler, a food safety attorney who led the case against Jack-in-the-Box in the 1990s, tells FRONTLINE's David Hoffman, "Even though chicken is causing people to become ill, government is allowing Salmonella and Salmonella Heidelberg to be just part of the chicken equation. And until they just come to grips with the fact that there isn't an acceptable level of Salmonella, it's going to remain this way for the foreseeable future."

Instead of forcing Foster Farms to recall its Salmonella-riddled chicken, FSIS issued a public health alert. Despite the fact that FSIS inspectors had found that as much as 25 percent of the chicken parts from Foster Farms were contaminated, the USDA needed the food safety equivalent of a smoking gun. In other words, they needed the "gold standard"-contaminated chicken that directly linked Foster Farms to the outbreak. The USDA issued a warning letter to Foster Farms, leaving it to control Salmonella levels in its plants. Ten months after the Salmonella outbreak, a Foster Farms plant was shut down—because of a cockroach infestation, not Salmonella.

Finger pointing by Congress and the Obama administration, as well as powerful lobbying by the National Chicken Council, has resulted in a public health system that is legally paralyzed to prevent foodborne illness from Salmonella. Tom Vislak, the U.S. Secretary of Agriculture since 2009, explains to FRONTLINE's Hoffman, "Shutting Foster Farms down wouldn't necessarily have prevented any of those hospitalizations or illnesses, because the product that caused those illnesses had

already entered the stream of commerce. But in terms of being able to recall the product, well we certainly would have if we'd had definitive proof of the specific product that was causing the illness. That definitive proof is necessary in order to meet the legal burdens that are required in order to make sure that a court doesn't overturn it."

A decade after Salmonella Heidelberg was discovered in Foster Farms chicken, the USDA finally requested a recall. The gold standard, at last, had been found.

This set of circumstances has influenced perceptions of an utter breakdown in the protection of public health in the United States by the USDA. Mr. Marler tells David Hoffman, "Let's make no mistake about what's going on here. It is the failure of FSIS to think about themselves as a public health entity. They choose not to go to Congress and ask for authority, for recall authority, and they choose not to do the basic scientific work that they need to justify calling Salmonella an adulterant so they can withstand a court challenge from the industry. That's the failure here."

FRONTLINE makes it forcefully clear that the USDA is playing chicken with America's health. The public health book that is The Jungle, it seems, remains ominously open.

Watch the FRONTLINE report at to.pbs.org/1EUWvyw.

#### symposium report

#### Injury control through collaboration

ttendees at the third annual Innovations in Translating Injury Research into Effective Prevention Seminar are passionate about protecting community health in the United States and abroad.

"To just treat trauma and not try to prevent it is just absolutely immoral," said Dr. Barbara A. Barlow, executive director of the Injury Free Coalition for Kids and professor emerita of surgery epidemiology at Columbia University.

The daylong symposium on May 22, sponsored by Columbia's Center for Injury Epidemiology and Research, drew scholars and policy experts from across the country to examine and debate best practices for injury prevention.

More than 60 people attended the event, which covered a wide range of topics, including traffic fatalities, prescription drug overdoses, gun violence, falls from windows, sudden infant death syndrome, and techniques for geographic injury mapping.

The average person encounters numerous situations every day that involve a significant, preventable risk for injury, and, according to estimates by the Centers for Disease Control and Prevention (CDC), injuries are the number-one killer of Americans between the ages of one and 44. In the U.S. alone, injuries result in 2.8 million hospitalizations and 29 million emergency room visits annually.

Dr. Joyce C. Pressley, associate professor of epidemiology and health policy and management at Columbia, served as course director and was one of ten speakers to present new findings. Attendees also had the opportunity to participate in several roundtable discussions.

Dr. Pressley gave a talk on window falls, illustrating how the New York City initiative to prevent them via legislation alone and legislation combined with varying types of enforcement led to incremental improvements in window fall injury and mortality. More broadly, she also highlighted the roles that mandatory injury reporting systems for tracking the impact of health regulations/injury prevention legislation and various legal actions, such as complaints, citations, civil fines, criminal prosecution, and expanded liability, can play in safeguarding health.

In 1976, when New York's window guard regulations were first enacted, 24 children died and 217 were injured in window falls. Since that time, falls from windows have significantly decreased: In 2013, only one child died and just six were injured in such incidents. Children Can't Fly, the pioneering window guard campaign that inspired the formal health code requirement, was created by Democratic politician and civic leader Charlotte Spiegel who passed away on April 27 in Manhattan at age 92.

Kim Wiley-Schwartz, Assistant Commissioner for Education and Outreach at the NYC Department of Transportation, provided an update on Vision Zero, the City's initiative to reduce traffic fatalities and injuries, especially among pedestrians. By 2024, the goal is to completely eliminate traffic fatalities in New York City.

In October 2014, Mayor Bill de Blasio signed local legislation reducing the default speed limit on New York City streets from 30 to 25 miles per hour. The Department of Transportation also recently installed more than 400 new speed bumps, five miles of protected bike paths, and 45 leading pedestrian interval signals (which show a walk sign for pedestrians before showing a green light to car traffic).

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'To just treat trauma and not try to prevent it is just absolutely immoral'



IMAGE: ALLISON MEIER

Twenty-three percent fewer pedestrians lost their lives in 2014 compared to 2013 (138 deaths vs. 180 deaths), and pedestrian fatalities in NYC are at their lowest levels since 1910. The City's Vision Zero Task Force plans to concentrate on reducing truck- and bus-related pedestrian deaths in the coming year.

Dr. Hillary V. Kunins, Assistant Commissioner at the New York City Department of Health and Mental Hygiene and head of the Department's Bureau of Alcohol and Drug Use - Prevention, Care and Treatment, spoke about prescription drug initiatives in New York City. The City's multi-pronged approach includes: monitoring and surveillance; raising public awareness; promoting judicious opioid prescribing; distributing naloxone; and promoting access to effective treatment for opioid addiction.

Dr. Pina Violano, co-principal investigator of the Injury Free Coalition for Kids at New Haven, presented on a framework to mitigate gun violence, using the city of New Haven, New York as a test case. Informed by survey data collected from people in the area, she and her colleagues formed two Community Resilience Teams in the neighborhoods of West River and Newhallville, which will focus on building social cohesion and making the local communities better places to live.

Dr. Steven C. Rogers, assistant professor at the University of Connecticut's School of Medicine, attending physician at Emergency Mental Health Services, and co-principal investigator for the Injury Free Coalition for Kids of Hartford, described the Pediatric E-Network, a pilot program for providing injury prevention education. He and his research team offered 101 patients a tablet pre-loaded with a mobile app that contains information about teen driving safety. The vast majority of patients, 81 percent, accepted the tablet when it was handed to them, suggesting that parents and children would be receptive to receiving injury prevention information at outpatient clinics when presented in this digital format.

Dr. Michael P. Hirsh, professor of surgery and pediatrics at University of Massachusetts Medical School and Surgeon-in-Chief at UMASS Memorial Children's Medical Center, made a compelling case for gun buyback programs using the Pittsburgh and Worcester gun buyback projects and their track records as successful examples. The U.S. is the most heavily armed country in the world with about 90 guns for every 100 Americans, according to the 2007 Small Arms Survey conducted by the Geneva-based Graduate Institute of International Studies. The United States Bureau of Justice Statistics found that firearm violence accounted for about 70 percent of all homicides in the U.S. between 1993 and 2011.

Garry Lapidus, Injury Prevention Center Director at Connecticut Children's Medical Center/Hartford Hospital and associate professor of pediatrics and public health at the University of Connecticut School of Medicine, reviewed the epidemiology and prevention of motor vehicle crashes among teen drivers, spotlighting risk factors for crashes and evidence that favors graduated driver licensing (GDL) systems, which place restrictions on underage drivers. Per mile driven, teen drivers are three times more likely to crash than drivers aged 20 years and older. Many studies in the U.S. and Canada have shown that GDL reduces motor vehicle crashes and fatalities by 20–40 percent. Since North Carolina implemented comprehensive graduated licensing laws, crashes involving 16-year-olds have decreased by 25 percent.

Beverly Miller, Associate Director of Research at Arkansas Children's Hospital Injury Prevention Center and Program Coordinator at the Injury Free Coalition for Kids of Arkansas, enumerated the American Academy of Pediatrics' recommendations for safe sleep environments to reduce infant mortality and described



IMAGE: VICTORIA DINIELLI

four specific interventions. Sudden Infant Death Syndrome (SIDS) is 133 percent higher in Arkansas than in the U.S. as a whole, according to Ms. Miller's presentation. Forty-three babies would be saved in just one year if the incidence of SIDS in Arkansas could be brought down to the national level.

Arkansas experiences excess SIDS in part because caregivers are unaware of the risk factors. Fewer than half of teen mothers in Arkansas place their infants on appropriate sleep surfaces and 75 of these teen moms report occasional bed sharing.

Finally, Dr. Wendy J. Pomerantz, professor of pediatrics at the University of Cincinnati, showed how attractive data presentation is crucial to injury prevention efforts. A Geographic Information System (GIS) is a critical tool for visualizing spatial or geographical data, including public health data, such as incidence rates and factors contributing to local injuries. Researchers can use GIS to monitor health events and detect trends, which helps inform decision making and priority setting. Injury maps are also useful for storytelling, as they enhance communication. The tool can play a key role in

health-related program development, implementation, and evaluation. It can also inspire community members, motivate public leaders, and engage stakeholders.

Support and collaboration were among the seminar's most prominent themes: Participants eagerly shared new-found knowledge while seeking to benefit from others' wealth of experience.

"If you go into injury prevention and you feel like you are alone doing this, it gets overwhelming" said Dr. Kitty Gelberg, New York State Department of Health Bureau of Occupational Health and Injury Director, who attended the event. She added that seminars like this one provide a reminder that "you are not alone; you don't have to recreate the wheel. The template is there and you can follow it."

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# Vaccines and the public's health: History, culture, and science



**RSVP** CUESS.ORG

#### **OCTOBER 12, 2015**

12:30 - 5:00 PM

Columbia University Medical Center Campus

Image from the History of Medicine, National Library of Medicine

#### in the news



How MERS spread from bats to camels to humans is a mystery Middle East respiratory syndrome coronavirus—commonly known as MERS—likely kills about 40 percent of those it infects. The mechanisms by which it made the leap from non-human animals to people are unknown. "MERS is still pretty mysterious," Dr. Stephen S. Morse, professor of epidemiology, told National Geographic. > on.natgeo.com/1SOomdS

Worst Legionnaires' outbreak in NYC history now ebbing

Dr. Mary T. Bassett, New York City's health commissioner and associate professor of clinical epidemiology, helped contain a deadly outbreak of Legionnaires' disease in the South Bronx by issuing a directive to all building owners to have their air conditioners' water-cooling towers inspected and cleaned over a two-week period or face misdemeanor charges. Read more on CNN > cnn.it/1DHRuN2, Reuters > reut.rs/10OalXn, The Wall Street Journal > on.wsj. com/1lXazgF, and The New York Times. > nyti.ms/1lFfoFW

Change Medicare or risk losing it

As Medicare turned 50, Dr. Linda P. Fried, Mailman School Dean and DeLamar Professor of Public Health, proposed five changes to ensure the continued existence of this important program, which "maximizes healthy aging and disease prevention." Read Dr. Fried's full blog entry on *The Huffington Post*.

> huff.to/1|F8DnB

# Gluten found in probiotics for celiac disease

"Gluten-Free" claims on many probiotic supplements are bogus, according to research by Dr. Benjamin Lebwohl, Herbert Irving Assistant Professor of Medicine and professor of epidemiology, which was featured in *The New York Times*. > nyti.ms/1BafP7M

Mom's extra pregnancy pounds = lasting weight problems in kids? Children born to women who were overweight or obese before pregnancy may face lifelong struggles with their weight, according to a study by Dr. Andrew Rundle, associate professor of epidemiology. Read more on *U.S. News & World Report.* > t.usnews.com/Z7m3tj

Ebola virus hides in testicles up to five months

A *Popular Science* article quotes Dr. Stephen S. Morse while explaining why Ebola is difficult to eradicate (it can hide out for several months in body parts that are shielded from the immune system). Read more on *Popular Science*. > pops.ci/JvA3Fw

Does vegetarian diet protect against colon cancer?

"That's the problem in dietary studies of cancer," Dr. Alfred Neugut, Myron Studner Professor of Cancer Research and professor of epidemiology, told CBS when asked to comment on the posited protective effect of vegetarian diets against colon cancer. "We don't know exactly what the connection is." Read more on CBS > cbsn.ws/1SOIAW7 and The Huffington Post. > huff.to/1Gz8Rw6

Solving the childhood obesity epidemic

In a recent blog entry for The Huffington Post, Dean Linda P. Fried summarized several studies on childhood obesity by Dr. Andrew G. Rundle and colleagues at Columbia that together suggest personal responsibility alone can't fix the country's growing weight problems. Read the full blog entry on *The Huffington Post.* > huff.to/ICCHtul

## Difficult to predict which pilots will commit suicide

In the wake of the Germanwings jetliner crash, many have asked if enough is being done to identify pilots who may be suicidal. While these incidents are rare—just one or two such crashes occur each year worldwide—"there is no reliable way for any airline to predict which pilots are going to commit suicide by airplane," said Dr. Guohua Li. Read more at NPR. > n.pr/1ytxq9I

# Which "alternative" breast cancer therapies to try/avoid

Acetyl-I-carnitine supplements may increase neuropathy in breast cancer patients, according to a comprehensive review of 4,900 journal articles, headed by Dr. Heather Greenlee. Meditation, yoga, and relaxation with imagery appear to have mood-related benefits. Consumer Reports picked up the story after the Society for Integrative Oncology issued new guidelines for breast cancer patients. Read more at *Consumer Reports*. > bit.ly/1Due6k3

#### Nearly 30 percent of Americans abuse alcohol; few treated

While three in ten U.S. adults admit to misusing alcohol or have a drinking problem, fewer than one in five with symptoms is treated, according to research conducted by Dr. Deborah S. Hasin. Read more at ASPPH. > bit. Iy/1SOy0gF

## Period-tracking mobile app a boon to research

"The data quality that you can get from this app is useful not just for predicting cycle length, but could be important in menopause research," Dr. Mary Beth Terry, professor of epidemiology, told International Business Times when asked about 'Clue,' a smartphone application that tracks factors related to women's reproductive and sexual health. Read more at *International Business Times.* > bit.ly/1Mb5WA2

## Docs should screen everyone for depression

About seven percent of U.S. adults are depressed. Because depressive disorders often go undiagnosed and they're easy to detect using short questionnaires, "depression screening should be routine," said Dr. Myrna M. Weissman, professor of epidemiology in psychiatry, in an interview with *Reuters Health*. > reut.rs/1gtqeHi



#### Anthrax is like an onion

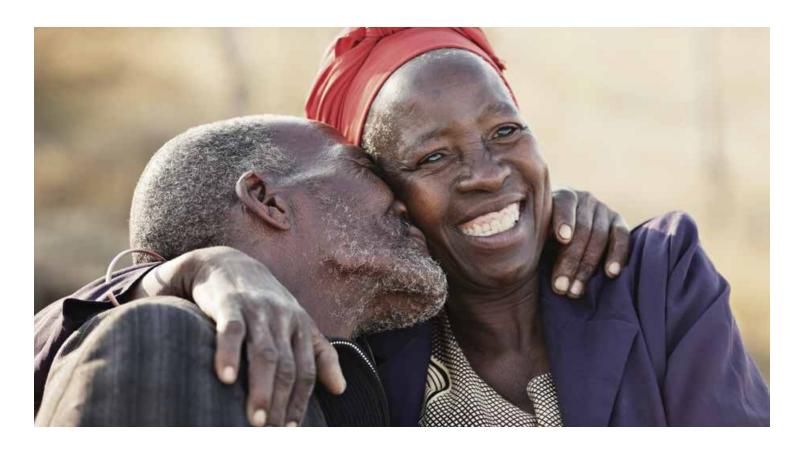
"They're among the hardiest of conventional organisms," said Dr. Stephen S. Morse of anthrax spores in an ABC interview. He compares its various components, which allow it to survive 100 years or more, to the layers of an onion. Read more on ABC > abcn.ws/1K3TdJD and The Guardian. > gu.com/p/49ink/stw

## Inexpensive drugs boost breast cancer survival

Aromatase inhibitors and bisphosphonates – which stop estrogen production and prevent bone loss, respectively – improve survival rates and decrease breast cancer recurrence rates in postmenopausal women who are treated early. "There may be benefits to giving them combined because one is counteracting the side effects of the other," Dr. Dawn L. Hershman, associate professor of medicine and epidemiology, told CBS. > cbsn.ws/1g9uqMU

Young African women will consistently take HIV prevention pill

Truvada offers near-perfect protection against HIV when taken as prescribed, and 76 percent of young African women consistently took the antiretroviral to avoid HIV infection in a recent study. Female high school students in Africa are five times more likely than their male peers to be infected with HIV, said Dr. Quarraisha Abdool Karim, associate professor of epidemiology, in an interview with *The New York Times*. > nyti.ms/1GFmk3p



## Columbia epidemiologists bust global aging myths

Forbes recently published a story debunking the top four myths related to global aging and asked Columbia epidemiologists to weigh in on the subject. Dean Linda P. Fried dispelled the commonly held misconception that population aging is a problem limited to developed countries. "China is about to have more older people than the U.S. has population," she said. Dr. Moise Desvarieux, associate professor of epidemiology, rejected the notion that wealthy nations are the only ones struggling with increases in age-related chronic diseases. Dr. Desvarieux noted that the highest rates of smoking, alcohol, diabetes and heart disease are actually in less-developed nations. Read more on Forbes. > onforb.es/1CbjrGZ

## Dementia need not be part of normal aging

Preventing or slowing the progression of cognitive decline associated with Alzheimer's disease and other forms of dementia is an achievable goal, said Dean Linda P. Fried in a recent blog entry for *The Huffington Post.* > huff.to/1UIG5GW

#### faculty publications

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