2012

Department of Epidemiology





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CHAIR'S LETTER



It is my privilege to present in the coming pages a summary of what the Columbia University Department of Epidemiology has done in 2012, and where we are headed in 2013.

About three years ago our department crafted a strategic vision for our work. In this vision we articulated a focus on innovative interdisciplinary research with a broad cells-to-society approach to questions about population health. We affirmed our commitment to teaching students to be lifelong learners and leaders in academic research and public health practice. We also aimed to make our findings accessible and to use our findings to develop effective population-wide and clinical interventions.

In the past year we have made strides in all three areas, including innovating in research, expanding our educational programs, and substantially ramping up our efforts to help translate our science. To ensure that these developments grow in an effective, sustainable manner, we have solidified an administrative infrastructure that supports our mission.

This annual report therefore presents our work around each of these four pillars:

	Advancing innovation
EDUCATION	Training the next generation of public health scientists
TRANSLATION	Bringing the science of public health to the public
ORGANIZATION	Making the science possible

I hope you find this report a useful summary of our work during 2012 and a roadmap to what we are planning for 2013. For our faculty, students, and staff we intend this report to be an opportunity for annual reflection, a brief pause to consider what we have done and to clearly articulate what we intend to do. For our colleagues outside the department we hope that this report may identify areas of potential synergy and collaboration for the year ahead.

Warm regards,

Pandro

This year the department has produced important research on many of the most challenging public health questions of our time, using rigorous, innovative methods, and has advanced the science conversation by bringing leaders in epidemiology together for seminars and symposia.



Advancing innovation

Cutting-edge research

Faculty research over the past year has addressed some of the most interesting and controversial questions in public health today, adding to what we know around such topics as the obesity epidemic, the AIDS vaccine, and the effects of social adversity on health. Our department's cluster structure has encouraged this innovative epidemiological research and promoted cross-cluster and cross-school collaboration. A few examples of our research from the past year follow.





Chronic Disease Epidemiology

Pollution exposure may put kids at risk of obesity

Prenatal exposure to air pollution may be a contributor to childhood obesity, according to a study lead authored by Dr. Andrew Rundle, associate professor of epidemiology, in the *American Journal of Epidemiology*.

Pregnant women in New York City who lived in environments that exposed them to higher concentrations of endocrine-disrupting chemicals known as polycyclic aromatic hydrocarbons or PAH were more than twice as likely to have children who were obese by age seven than women who were exposed at lower levels. PAH are released by the burning of coal, oil, diesel, and gas and also found in cigarette smoke.

While the main causes of child obesity are a poor diet and lack of exercise, it is suspected that these chemicals can cause hormone disruption that may alter the body's metabolism.

"These data suggest that obesity isn't just the result of individual choices like diet and exercise but that other factors can predispose us to weight gain," says Dr. Rundle.

READ MORE ABOUT THIS STUDY IN **APPENDIX 1**, TWO BY TWO, JUNE, PAGE 3.

Epidemiology Innovation

More than half of drivers killed in auto crashes were on alcohol, drugs

Fifty-seven percent of drivers killed in car collisions tested positive for alcohol and/or other drugs, and 20 percent were on more than one drug at the time of their crash, according to a study authored by Finster Professor of Anesthesiology and Epidemiology Dr. Guohua Li and doctoral candidate Ms. Joanne Brady. Dr. Li and Ms. Brady examined toxicology reports from 14 states over the period of 2005-2009, looking at a total of over 20,000 drivers who died within an hour of a crash. Alcohol was the most commonly detected substance, present in 40 percent of drivers, followed by marijuana, which was traced in 10 percent of drivers. Understanding the role of drugs and alcohol in car fatalities can help officials craft road safety policy, the authors say.

READ MORE ABOUT THIS STUDY IN **APPENDIX 1**, TWO BY TWO, SUMMER, PAGE 7.



THE DATA

FACULTY APPOINTED IN EPIDEMIOLOGY 161

FACULTY WITH A PRIMARY ACADEMIC OR ADMINISTRATIVE HOME IN EPIDEMIOLOGY 67



Infectious Disease Epidemiology

New hope in quest for AIDS vaccine

A consortium of researchers led by the Centre for the AIDS Programme of Research in South Africa (CAPRISA) under its director, Dr. Salim Abdool Karim, a professor of clinical epidemiology at Columbia, published a study in *Nature Medicine* showing a vulnerability that allows the human body to kill most strains of the human immunodeficiency virus, an important advance in the decades' long quest for an AIDS vaccine.

The scientists were able for the first time to understand how the bodies of some HIV infected individuals produce "broadly neutralizing antibodies" that are able to fight most strains of the virus.

"Now that we know one way to get the body to make broadly neutralizing antibodies, we need to figure out how to make an AIDS vaccine that mimics this," said Dr. Abdool Karim.

READ MORE ABOUT THIS STUDY IN APPENDIX 1, TWO BY TWO, DECEMBER, PAGE 1.

Lifecourse Epidemiology

Younger immigrants at heightened risk of developing psychotic disorders

Young children who migrate across borders are at heightened risk of developing psychotic disorders, according to a study senior authored by professor of epidemiology and psychiatry Dr. Ezra Susser in the *American Journal of Psychiatry*. Recent research has found significant links between immigration and psychotic disorders such as schizophrenia. There are several possible reasons for these patterns, from vitamin D deficiency, which is commonly seen among immigrants, to the stress of living as an ethnic minority in a new country.

"Our findings join the growing body of literature suggesting that adverse social experiences in early life, such as childhood trauma or parental separation, raise the risks," Dr. Susser said.

READ MORE ABOUT THIS STUDY IN APPENDIX 1, TWO BY TWO, FEBRUARY, PAGE 1.





Psych / Neuro Epidemiology

Adversity in childhood associated with inflammation in teen years

Exposure to stressful living conditions and events in early childhood is associated with elevated levels of inflammation in the older child and teen years, posing a heightened risk of chronic disease later in life, according to a new study senior authored by Dr. Karestan Koenen, associate professor of epidemiology. Evidence suggests a link between neuro-psychiatric responses to stress and health outcomes later in life.

Dr. Koenen's is one of the first studies to look at inflammation during the teenage years as a physical response to such stressors as low income and adverse family dynamics.

"These findings suggest a biological pathway by which traumatic experiences in early life may influence the risk for developing chronic diseases later in the life course," says Dr. Koenen. "C-reactive protein is a strong marker of cardiovascular disease in adults."

Biomarkers of inflammation, she said, may aid health practitioners in identifying children and adolescents who are at risk for long term health problems.

READ MORE ABOUT THIS STUDY IN **APPENDIX 1**, TWO BY TWO, SUMMER, PAGE 6.



Social Epidemiology

Stressful home life linked to obesity in young girls

A stressful home life, including intimate partner violence, a mother's depression, or a father's incarceration, predisposes young girls to early onset obesity, according to a study in *Pediatrics* lead authored by Dr. Shakira Suglia, assistant professor of epidemiology.

The association between early childhood stressors and obesity could potentially reflect parenting behaviors such as providing the child with a poor diet and not encouraging physical activity.

Up until now, most studies examining social stressors have focused on school-aged children or adolescents, and few prior studies have taken a longitudinal approach.

READ MORE ABOUT THIS STUDY IN **APPENDIX 1**, TWO BY TWO, JUNE, PAGE 1.

THE DATA
PEER REVIEWED SCHOLARLY ARTICLES IN 2012 700+



Bringing together leaders in the field

This spring, the Department of Epidemiology inaugurated the Columbia University Epidemiology Scientific Symposium, or CUESS, an ongoing symposium series that brings the best minds in our field together for a full day of discussions on the most pressing health questions of our time.

Over the course of the year, CUESS addressed the direction of social epidemiology, eradicating pediatric HIV around the globe, health screening, and the mind-brain intersection in health research. To engage attendees and those who could not make it, CUESS events have been live-Tweeted via our Twitter account @cuepidemiology, using the hashtag #CUESS.





Modern controversies in screening

MAY 11

It was once a tenet of preventive medicine that a healthy woman should get a mammogram and a healthy man a PSA (prostatespecific antigen) test at age 40.

But with several studies showing that screenings lead to a small number of lives saved while false positives can lead to unnecessary and potentially harmful medical procedures and excessive radiation exposure, the public health and medical community are taking a fresh look at an old practice.

To spotlight the science behind screening, the Department of Epidemiology held its first CUESS on "Modern controversies in screening," bringing leading figures in the field together for the day-long event hosted by Dr. Al Neugut, the chronic disease epidemiology cluster leader.

In a departure from the current orthodoxy promoting universal screening, speakers at the symposium recommended more targeted screening, especially for various cancers.

AN AGENDA OF THIS EVENT CAN BE FOUND IN APPENDIX 2.



The mind-brain intersection

JUNE 8

Only 30 years ago, neuroscientists believed the brain was fixed at early childhood, its functions pre-programmed by genes. The inner workings of the mind were seen as separate from the functioning of the brain and in turn, the rest of the body.

Fast forward three decades, and scientists of various disciplines have moved beyond this "mind-brain split" and replaced it with a conception of the brain as malleable, its neurologic responses influenced over the course of life by genetic, molecular, and environmental factors.

To synthesize the current research in this fast-developing area, the department brought leading scientists in the fields of epidemiology, neurology, psychology, and genetics, together for a symposium on the "Mind-brain intersection: Population science over the lifecourse," hosted by Drs. Mitchell Elkind and Karestan Koenen, who is the psychiatric/neurological epidemiology cluster leader.

"Twenty years from now, the boundaries drawn between psychiatric and neurological disorders will be forgotten. The future for research is in their convergence over the life course," said Dr. Koenen.

AN AGENDA OF THIS EVENT CAN BE FOUND IN APPENDIX 2.





Charting the next 25 years in social epidemiology

OCTOBER 26

Social epidemiology is a relatively new area of epidemiology, coming into its own over the past quarter century.

As social epidemiology has grown in scope, the field has expanded to examine not only how societal influences shape human health but how these influences interact with biological, neurological, molecular, and genetic factors.

This was the message at the "Charting the next 25 years of social epidemiology" CUESS in October, hosted by Dr. Bruce Link, the social epidemiology cluster leader.

The event brought together rising stars and established luminaries in the field of social epidemiology. The panels allowed for extended discussion periods, covering everything from the philosophical underpinnings of the discipline to cutting edge methodological approaches to whether social epidemiologists should act as policy advocates.

AN AGENDA OF THIS EVENT CAN BE FOUND IN APPENDIX 2.

Eliminating pediatric HIV: Hype versus hope

NOVEMBER 29

With 90 percent of new pediatric HIV infections occurring in "high burden" countries, mostly in Africa, the United Nations has set a global plan of effectively eliminating mother to child transmission of the virus by 2015.

To discuss the whether it might be achieved, the department brought together epidemiologists, clinicians, and government and NGO officials, many of whom are working on the ground to fight the epidemic. While wealthy countries have already effectively eliminated cases of pediatric HIV, poor and middle income countries lack easy access to effective antiretroviral treatment and have limited resources to provide maternal care, participants said.

Despite the significant challenges, there are some signs of progress. The number of new infections averted in children in low and middle-income countries more than doubled between 2009 and 2011. Said Craig McClure, chief of the HIV/AIDS section at UNICEF: "I get asked almost everyday whether the global plan can be achieved, and I really believe it can.

AN AGENDA OF THIS EVENT CAN BE FOUND IN APPENDIX 2.



The science conversation

Our department hosts three different seminar series monthly. We hold our Columbia University Epidemiology Grand Rounds (CUEGRs), Department Seminars, and within each cluster, a cluster seminar. These seminar series help forge connections between our department and other leading institutions and foster scientific conversation within our department.



Columbia University Epidemiology Grand Rounds (CUEGR)

The CUEGR lecture series brings global leaders in epidemiology to Columbia to share their ground-breaking work with the department's faculty and students, as well as with the Columbia community and with the wider public.

The series, which covers a broad range of topics, has fostered academic exchange around key issues in epidemiology and forged important links between the department and leading epidemiologists around the world.

Among the 2012 CUEGR speakers were *New York Times* medical columnist Dr. Lawrence Altman, who spoke about how the first human subjects in medical studies are chosen; Dr. David Hemenway who discussed how guns contribute to population health; and Dr. Nubia Muñoz who spoke about the etiology, treatment, and prevention of cervical cancer.



■ JANUARY 25

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Cancer epidemiology cohorts: Trends, value, and future directions Deborah Winn, PhD Deputy Director, Division of Cancer Control and Population Sciences, National Cancer Institute

- FEBRUARY 28 Who goes first? The story of self-experimentation in medicine Lawrence Altman, MD Medical Correspondent, New York Times
- MARCH 21 Guns and public health David Hemenway, PhD Professor of Health Policy, Director, Harvard Injury Control Research Center, Harvard School of Public Health
- APRIL 25

New hope for HIV prevention (Alan Berkman Memorial Lecture) Salim Abdool Karim, MD, PhD Professor of Clinical Epidemiology, Columbia University; Director, Center For the Aids Program of Research In South Africa (CAPRISA); Pro Vice-Chacellor (Research), University of KwaZulu Natal

OCTOBER 24

Male circumcision for HIV/STI prevention: Trials and tribulations of implementation Ronald Gray, MD Professor of Epidemiology, Johns Hopkins University, Bloomberg School of Public Health

NOVEMBER 14

From etiology to prevention: The case of cervical cancer (Geoffrey Howe Memorial Lecture) Nubia Muñoz, MD, MPH Emeritus Scientist at the National Cancer Institute of Colombia

■ DECEMBER 5

"Dead science" in the era of molecular biology? The NIH attack on epidemiology Lewis H. Kuller, MD, DrPH Professor Emeritus, Department of Epidemiology, Graduate School of Public Health, University of Pittsburgh

THE DATA

TOTAL NUMBER OF ACADEMIC PRESENTATIONS IN 2012 (CUESS, CUEGR, DEPARTMENT SEMINARS, SPECIAL LECTURES, CLUSTER SEMINARS) 73





Department Seminars

The Department Seminars, held throughout the academic year, showcase the research and work being done by faculty and students in the department. Each year one seminar is devoted to master's student poster presentations of research from their summer practicum experiences. FEBRUARY 10
 Social/environmental determinants of diabetes and obesity
 Tiffany Gary-Webb, PhD, Associate
 Professor of Epidemiology

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- MARCH 9 What is the stable unit treatment value assumption (SUTVA) and should you care? Sharon Schwartz, PhD, Professor of Clinical Epidemiology
- APRIL 13 Investigating the link between chronic infections and vascular disease: Are we nuts? Moïse Desvarieux, MD, DMM, PhD, Associate Professor of Epidemiology
- JUNE 8
 Surveillance and forecasting of emerging infectious diseases
 Stephen S. Morse, PhD, FAAM, Professor of Clinical Epidemiology
- SEPTEMBER 7
 Effects of urbanicity on employment for individuals with schizophrenia: A representative, population-based cohort study in China Lawrence Yang, PhD, Assistant Professor of Epidemiology
- OCTOBER 12 Master's student day: Poster session and presentations
- DECEMBER 7 Person-centered Wellness Home: An idea whose time has come Thelma Mielenz, PhD, Assistant Professor of Epidemiology

Training the next generation of epidemiologists is core to the mission of the department. Our master's, doctoral, and post-doctoral training programs are designed to provide students with the state-of-the-science skills and tools they need to become tomorrow's leaders in academic research and public health practice.



Training the next generation of public health scientists



Launching the Executive MS

This past fall, the department launched a new executive master of science in epidemiology, responding to growing demand for training in the discipline from working professionals. The program gives trainees the same rigorous methodological training they would get in our traditional master's program in a format that accommodates the schedules of busy working professionals.

Our inaugural class includes 19 trainees with diverse and accomplished backgrounds, including several physicians who have worked in infectious disease, pediatrics, and obstetrics/gynecology; pharmaceutical researchers; a department of health employee; the vice president of a market research firm; and a product liability attorney, among others. This cohort has coalesced into a tightly knit study group almost immediately, and students are already gaining invaluable knowledge and perspective from each other to augment what they acquire in the classroom.

The program has several unique features. Classes meet once a month for one long weekend—Friday, Saturday and Sunday. To accommodate the schedules of participants we provide breakfast, lunch, coffee, and snacks on each of the three program days, purchase all required books and software for our students, and install the software on their personal laptops.

Virtual office hours and review sessions are held weekly (in some cases, twice-weekly) for each course, and trainees also make use of our virtual learning environment for informal study groups

FOR MORE INFORMATION ABOUT THE EXECUTIVE MS, VISIT CUEXECMSEPI.ORG



THE DATA

TRAINEES ENROLLED IN OUR TRADITIONAL MS PROGRAM 8 TRAINEES ENROLLED IN OUR NEW EXECUTIVE MS PROGRAM 19

EPIC 2012

Each June, the Epidemiology and Population Health Summer Institute at Columbia University (EPIC) offers an extended range of week-long skill-building courses in epidemiology and population health research to academics, clinicians, and public health professionals.

EPIC

EPIC has solidified its reputation as a dynamic program of exceptionally taught courses that appeal to a variety of participants, from college students interested in training for a career in public health to clinicians who want to learn how to design studies to public health professionals who want to brush up their skills.

In its second year, EPIC doubled its enrollment and expanded course offerings by 28 percent, from 18 to 25 courses, several of them responding to demand gauged after year one. A selection of those courses includes Ethics of Public Health, Assessing and Managing Risks, Introduction to Pharmacoepidemiology, Approaches to Race in Epidemiologic Research, and Comparative Effectiveness Research Methods.

EPIC also brought back many of the most popular courses from 2011, including Introduction to Multi-Level Modeling; Longitudinal Data Analysis; Systematic Review and Meta-analysis; and Epidemiologic Analysis Using R, SAS, and STATA (three separate courses).

Reviews of the courses were, for the second year in a row, overwhelmingly positive. Over 90 percent of respondents were very satisfied with their experience taking an EPIC course and gave high marks both to the quality of teaching and the relevance of the materials to their academic and professional goals.

As the *Epi Monitor* said in a profile of EPIC earlier in the year: "[EPIC's] relatively large number of courses will catapult Columbia to the front ranks of institutions such as the University of Michigan and the Johns Hopkins University Schools of Public Health with much older programs that offer a similar number and range of courses in epidemiology."

In 2013, EPIC will expand its course offerings yet again, adding as many as 10 new classes and offering a digital classroom component.

FOR MORE INFORMATION ABOUT EPIC, VISIT CUEPISUMMER.ORG

^{1 &}quot;New Summer Institute In Epidemiology At Columbia Proves Successful In Its First Year, Plans Are To Add More Than A Dozen New Courses In 2012." EpiMonitor. http://www.epimonitor.net/New_Summer_ Institute_at_Columbia.htm



EPIC fund

The EPIC fund was created to provide our graduate students with an opportunity to access resources to help advance their educational agenda beyond what is covered by their tuition. It is funded by revenue generated from EPIC, and is awarded to students every four months.

Students can use their EPIC funding to finance travel, data collection, or presentation of findings at conferences. Funds can also go toward purchase of e-books, datasets, or samples for a study or tuition for specific training needs, like short courses, workshops, and software or lab technique training.

In 2011-2012, the EPIC fund helped 18 trainees. The fund allowed one doctoral trainee to deliver a presentation at the 10th Annual Conference on Urban Health in Brazil, another trainee to present research findings at the 19th Conference on Retroviruses and Opportunistic Infections in Seattle, and yet another trainee to invest in specialized software needed for his dissertation proposal.

THE DATA NUMBER OF PARTICIPANTS IN EPIC IN 2012 225



Epidemiology and the new MPH curriculum

This year the Mailman School inaugurated a new master of public health curriculum, a first-in-the-nation, innovative, interdisciplinary, leadershipbased public health program. The curriculum emphasizes mastery of methods of epidemiological research and is enriched by additional courses on a large range of important disease outcomes, such as AIDS, tuberculosis, and cancer, and on factors that may be important in disease causation, such as genetics, nutrition, and influence of the social and physical environment.

Epidemiology students take the interdisciplinary core courses in the fall semester of their first year, and the bulk of the methods sequence of epidemiology and biostatistics in the spring semester. A full description of the program is included in APPENDIX 3, "Master's Guidelines".

The new MPH features a formal certificate program that provides students with advanced training in a public health topic beyond their departmental discipline. Students within the Department of Epidemiology are able to select a certificate from 20 of the 24 certificate programs offered, but the majority of epidemiology two-year MPH students are in one of the following certificate programs: Advanced Epidemiology, Epidemiology of Chronic Disease, Global Health, Infectious Disease Epidemiology, or Social Determinants of Health. A smaller number of epidemiology students take other certificates such as Public Health Research Methods, Health of an Aging Society, Applied Biostatistics, and Child Youth and Family Health.



Number of MPH students in each certificate



Revamped PhD and DrPH curricula

In the past two decades epidemiology has gone through dramatic changes as a discipline, suggesting a need for a shift in epidemiologic thinking and consequently for changes in training and education. To reflect these changes the department has rolled out a new training sequence over 2011 and 2012 for our PhD program and revamped our DrPH curriculum to reflect the needs of the working professionals who typically enroll in the program. Both doctoral degrees now include a streamlined and expanded core methods course sequence and more flexibility in selection of substantive courses. This aligns our doctoral training with the department strategic plan to be responsive to student requests for more doctoral level methods courses and for greater flexibility in course requirements to allow sufficient opportunities for research projects.

In addition, our revamped DrPH features a dedicated effort to allow our trainees to integrate their ongoing or prior work experience in their doctoral training. This experience includes focused mentoring by department faculty around our DrPH students' work that aims to integrate students' research and their coursework seamlessly. A DrPH seminar helps bring cohesion to the group and cement the programs' intent to help mid-career professionals obtain doctoral training to further their education.

To ensure that the program meets these training goals, the curriculum committee consulted with the director of educational initiatives at the Mailman School, and the Columbia Center for New Media Teaching and Learning to develop an ongoing evaluation process. This process consists of monitoring the necessary resources to meet program requirements, meetings with the curriculum faculty, classroom visitations by program faculty, and focus groups with the current PhD students.

DETAILED DESCRIPTIONS OF THE PHD AND DRPH PROGRAMS CAN BE FOUND IN APPENDIX 4, "DOCTORAL GUIDELINES."

THE DATA

NUMBER OF TRAINEES ENROLLED IN DOCTORAL PROGRAMS IN 2012 76 (64 PHD AND 12 DRPH)



New master's and doctoral guidelines

This year, the department introduced significantly updated and revised guidelines for master's and doctoral trainees. They incorporate all changes adopted in recent years and have been reorganized and streamlined to make the content more easily accessible.

Master's guidelines

The master's guidelines acquaint incoming MPH students to the new curriculum, describe the components of the three master's degrees the department offers, and provide information about the key sources of support and resources and activities available to optimize students' educational experience.

TO VIEW THE MASTER'S GUIDELINES, SEE APPENDIX 3 OR VISIT MAILMAN. COLUMBIA.EDU/SITES/DEFAULT/FILES/MASTERS_GUIDELINES_2012.PDF

Doctoral guidelines

The doctoral guidelines provide essential information on the basics of the PhD and DrPH programs such as program requirements, registrations, and covering the cost of the degree. The guidelines also offer an overview of the structure of the department and the resources available to students, including a roadmap showing how doctoral students can optimize their educational experience by engaging with faculty and peers in the department.

TO VIEW THE DOCTORAL GUIDELINES, SEE APPENDIX 4 OR VISIT MAILMAN. COLUMBIA.EDU/SITES/DEFAULT/FILES/DOCTORAL_GUIDELINES_2012B.PDF









Student life

This year, the department has built on its effort to engage all of our trainees, beginning the summer before they arrive and continuing even after they graduate. Our goal is to create a vibrant academic and social environment where students are encouraged to learn from each other and from faculty.

For students, a guide to everything

Our outreach begins in the summer before students arrive when the department publishes its annual student guide. Called "For students, a guide to everything," it provides an overview of what students can expect from their experience in the Department of Epidemiology, how to get engaged, and how to make the most of New York City.

The guide includes a description of the master's and doctoral curricula, a writeup about the MPH practicum, including features on several student's experiences, a list of conferences of interest to master's and doctoral trainees, a list of all of the upcoming events in 2012-13, and guides on where to study and eat on and off campus.





Master's student day

This fall, the department held our second annual master's student day, which is designed to give students the experience of presenting at a professional conference. Every second-year master's student presents a poster abstract of their practicum, and three student award winners deliver oral presentations at a department seminar.

READ MORE ABOUT MASTER'S STUDENT DAY IN APPENDIX 1, TWO BY TWO, DECEMBER, PAGE 12.

Connecting doctoral and master's students

To foster learning between doctoral and master's students, the department has created a doctoralmaster's liaison program, in which two doctoral students, Ms. Carolyn Herzig and Ms. Catherine Richards, work with master's students throughout the year on various projects.

This year they supervised the master's journal club in epidemiology, arranged lunches between students and faculty, and held question and answer sessions about getting a PhD and other career quandaries.

READ MORE ABOUT THE MASTER'S STUDENT LIASONS IN APPENDIX 1, TWO BY TWO, SUMMER, PAGE 40.



Supporting students through training grants

Training programs in the Department of Epidemiology address a diverse range of health domains and epidemiological methods. Each program demonstrates the core values of the department: a broad view of causation that encompasses factors from the molecular to the societal as they play out from conception until death; a collaborative, interdisciplinary approach; an emphasis on developing and teaching sophisticated methodologies; a focus on innovative intervention and evaluation; and active engagement in public health. In addition to the department's many established training programs, such as the Psychiatric Epidemiology Training program and the Fogarty AIDS International Training and Research, the department has sought to add new training programs in recent years.

The newest program, begun this past fall, is the Substance Use Disorders Epidemiology Training Program, which trains pre- and post-doctoral fellows to use epidemiologic methods to understand the onset, course, and consequences of substance abuse, and to transform such understanding into actions that mitigate the toll substance abuse takes on individuals and on society. This training program is funded by the National Institute on Drug Abuse at the National Institutes of Health and is a joint enterprise between our department and the Department of Psychiatry. The program funds two postdoctoral fellows and two predoctoral fellows annually.

FOR A FULL LIST OF TRAINING PROGRAMS IN THE DEPARTMENT, VISIT MAILMAN.COLUMBIA.EDU/ACADEMIC-DEPARTMENTS/EPIDEMIOLOGY/ TRAINING-PROGRAMS

The department is engaged in communicating our science, internally and externally, through multiple fora.

During the past year we have been making wider use of social media to break news about new faculty research, as well as to communicate about the large number of events we sponsor, including symposia, grand rounds, seminars, special lectures, training and cluster seminars, and social gatherings.

In our ongoing effort to translate our science to a community beyond our department, our school, and the university, we have expanded our science coverage in our Two by Two publication and with an innovative new website called the 2×2 project, which brings epidemiology to a broad audience.

Bringing the science of population health to the public

The 2×2 project: Communicating our science

The 2×2 project aims to inform the health conversation through timely and effective communication of emerging public health science, in order to advance the department's vision of translating our scientific findings into practice. Healthy societies depend on citizens who are informed about disease and wellness. In an era of rapidly emerging infectious disease, epidemic levels of obesity, and a rise in the diagnosis of neurological disorders such as autism, it is important that the general public understand health risks and how to address them. However, too often the health information that reaches the public is inaccurate, incomplete, and out of context.

Epidemiology is critical to understanding many of our most challenging health problems and therefore should not be the sole province of the scientists and practitioners who have access to the literature. It is our belief that the public has both a right to and an appetite for more complete, evidence-based information about population health. What's more, we see translation of the science as one of the core functions of a leading Department of Epidemiology.

The 2×2 project aims to provide the public with clear and engaging communication about health beyond the headlines. Our goal is to engage an audience beyond our scientific colleagues, one that includes thought leaders and policy makers from outside the discipline.





Training the next generation of communicators

The department has established an additional educational component to the 2×2 project called the Communication in Health and Epidemiology Fellowship (CHEF), to advance the goal of training the next generation of epidemiologists to be effective health communicators. Through a competitive application process the department chooses four public health students or recent graduates for a year-long fellowship during which they will learn about the theory and practice of communicating health information to the public and contribute to the writing, editing, publicizing, and operations of the 2×2 project website.

Social media

As part of our ongoing effort as a department to marry science with new forms of communication, the 2×2 project has widely employed social media to disseminate our coverage. We have developed an active presence on Twitter and Facebook, which has significantly broadened the reach of our coverage.

LEARN MORE AT THE2X2PROJECT.ORG



Examples of our coverage thus far include:

- Soda ban science Weighing the evidence behind the sugary drink limits in NYC the2x2project.org/ doing-the-right-thing
- Pain in the developing world Severely needed pain management is being stifled in developing countries the2x2project.org/developingpalliative-care
- Economic bust, health boom? Why bad economic times may equal good health the2x2project.org/ recessions-and-health
- Disease moves beyond the Tropics Temperatures are rising. So is Chagas disease. the2x2project.org/climatechange-chagas

- Behavior's role in an AIDS-free generation Behavioral change is integral to a 'Generation without AIDS' the2x2project.org/behavioralintervention-aids-free-generation
- A new wonder drug for heart disease? Why an affordable fourin-one pill has not reached the U.S. the2x2project.org/the-polypill
- Why is Medicare so expensive? A five-part series the2x2project.org/ medicare-episode-1
- Weekly round-up The best and worst of health in the headlines across the web the2x2project.org/weeklyroundup-9

- Public health under Romney What public health would look like if he were elected president the2x2project. org/public-health-under-romney
- Mental health and Hurricane Sandy What we can expect and what we can do the2x2project.org/mental-healthand-hurricane-sandy
- Treating the mental wounds of war Is the U.S. prepared to help returning veterans? the2x2project.org/ treating-the-mental-wounds-of-war

The editorial team encourages faculty, students, and staff to consider submissions to the 2×2 project. More information about submissions is available on the website. As it continues, the 2×2 project will expand our base of contributors to leading academics, journalists, and other thought leaders.











IN THE NEWS	
Dr. Denierlassen anternanskan and Anerstanskan and Anerstanskan Grutten	
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Two by Two turns three

In 2012 the department's newsletter, Two by Two celebrated its third year. Since launching in 2010, Two by Two, has served to communicate internally to department faculty, staff, and students about events, academic programs, awards, profiles of people in the department, and other news, as well as to communicate to our alumni, the Mailman School, and Columbia University communities about our innovative scientific research. This year we broadened Two by Two's aims to meet our goal of translating the science. The issues of the past year represent an increased editorial priority on articulating and translating our research advances to a wider public and highlighting important and controversial public health topics, such as the causes of the obesity epidemic and teen drug use. A hallmark of this effort is a feature rolled out in February called "Lines of Inquiry", profiled below. We also continue to highlight the latest faculty research and coverage of our studies in media outlets like the *New York Times, Atlantic, Washington Post, NPR*, and *Reuters*.

The launch of the 2×2 project represented the expansion of Two by Two into the digital space. Though the 2×2 project is aimed at an even wider audience, both media are focused on communicating the science of public health to a broad public. Throughout this year and next, much of the scientific content featured in Two by Two will also appear in extended form on the 2×2 project website.

Two by Two also focused on our close collaborative ties across the Columbia University Medical Center, with a series called "Partner Profiles," that covered our partnerships with centers like the Center for Infection and Immunity, the Institute for Human Nutrition, and the Center for Interdisciplinary Research to Prevent Infections, and with partners overseas, such as our "Atlantic Alliance" with France's Ecole des hautes études en santé publique (EHESP).

Explaining the science: Lines of inquiry

In both Two by Two and the 2×2 project, we have sought to put our faculty's research into the larger context of public health questions and controversies. As part of this effort, we published a "Lines of Inquiry" series on a range of issues—from the debate over teenagers and medical marijuana to the influence of physical surroundings on obesity. The articles take a journalistic approach, integrating the work of our faculty with that of others in the field, reaching out to leading scholars on particular topics, and incorporating their sometimes opposing viewpoints. These pieces show how epidemiologic research is fundamental in helping illuminate pressing health topics and guiding health interventions. Our "Lines of Inquiry" articles for 2012 are summarized here.



How our environment contributes to obesity

An increasing number of voices in the public health and medical community are embracing the idea that obesity is a societal, not an individual problem. Investigators across several health- disciplines have, over the last decade, examined how the built environment—such as strip malls, cul-de-sacs, drive-thrus, and highways-and a neighborhood's food environment contribute to the obesity epidemic. The built environment in many car-centric American neighborhoods, for instance, has contributed to a historic decline in walking and an increase in sedentary lifestyles.

Despite this evidence, industry, public officials and even some scientists note that it is difficult to point to one mechanism through which the environment gives way to a more obese population.

Nonetheless, the call has grown for a change in the way obesity is viewed. "I see a role for personal responsibility, but I strongly believe that we have organized our society such that my will power is constantly being challenged," says Dr. Andrew Rundle, an associate professor of epidemiology, and the director of the university's Built Environment and Health Project.

FOR AN EXPANDED VERSION OF THIS ARTICLE, SEE **APPENDIX 1**, TWO BY TWO, APRIL, PAGE 11.



Is medical marijuana responsible for the spike in teen marijuana use?

As use of marijuana for medical purposes enjoys near-historic levels of public support, health officials, policymakers, and parents are taking aim at the legalization movement, arguing that it has contributed to the rise in teen use of the drug, which in 2011 reached a 30-year high.

The spike led some officials to blame laws that have allowed greater availability of the drug for medical purposes. Eighteen states have passed such laws, all in the last 15 years, and Colorado and Washington legalized marijuana for recreational use in the past election.

"Whether there is a link between medical marijuana laws and teen marijuana use is very controversial right now. The topic has seen a lot of debate and opinion but very little research," says Dr. Deborah Hasin, professor of clinical epidemiology (in Psychiatry), who was awarded a grant this year to further study the issue.

Dr. Kerry Keyes, assistant professor of epidemiology says, "Our available data indicate that non-medical marijuana use is higher in states with medical marijuana laws; however, it's not clear at this point whether medical marijuana laws promote misuse, or whether it is the states with more marijuana users that tend to pass laws allowing medical use. It's a classic chicken or egg conundrum."

FOR AN EXPANDED VERSION OF THIS ARTICLE, SEE APPENDIX 1, TWO BY TWO, FEBRUARY, PAGE 9.



How teen driving became safer

Until recently, teen auto collisions were a dramatic but barely addressed public health problem, but over the last ten years the rate of teen deaths has declined historically—by 41 percent. This dramatic shift owes to a change in how drivers' licenses are viewed in the U.S. Licensing policy has long been shaped by the country's strong individualism, which has put adolescent freedom to drive ahead of safety concerns. But over the last 15 years, states have set restrictions on teen drivers, known as graduated drivers' licensing laws.

These laws have been associated with an overall 6 to 11 percent decline in the rate of fatal crashes for 16-year-olds according to a 2006 study by Dr. Guohua Li, a professor of anesthesiological sciences and epidemiology, and his colleagues.

"The bottom line is, graduated driver licensing has been a wonderful success story," said J. Peter Kissinger, president and chief executive of the AAA Foundation. "It's probably the most significant countermeasure put in place, but there is still a lot of work to be done."

FOR AN EXPANDED VERSION OF THIS ARTICLE, SEE APPENDIX 1, TWO BY TWO, JUNE, PAGE 14.





Treating the mental wounds of war

With the end of the American War in Iraq and the wind-down of the War in Afghanistan, an influx of troops will return home over the next few years, and the U.S. government is prepared as never before to deal with the psychiatric fallout of combat, especially post-traumatic stress disorder (PTSD).

However, recognition of the disorder may not be enough. While there is now a system in place to diagnose veterans and active duty soldiers and to offer them care, another barrier toward treating PTSD has become clear: will members of the military get that care, and will it be effective?

Wary of being perceived as sick, disordered, or unstable, veterans and active duty members often hesitate to seek care, according to a report that came out this summer on PTSD by an Institute of Medicine committee, which was chaired by Dr. Sandro Galea. Troops are also hindered by wait lists and difficulty fitting a treatment schedule around work and other obligations.

"I think that the number one problem with treatment is not that we don't have effective techniques," says Dr. Charles Hoge, a retired army colonel and former director of a Walter Reed Army Institute of Research program on the psychological and neurological consequences of the Iraq and Afghanistan wars. "We have effective techniques. The number one problem is people not staying in treatment."

FOR AN EXPANDED VERSION OF THIS ARTICLE, SEE **APPENDIX 1**, TWO BY TWO, OCTOBER, PAGE 13.

Is the wealth gap creating a health gap?

Over the last thirty years as economic inequality has risen to levels not seen since the Gilded Age, the U.S. has dropped below other developed nations on a range of health indicators, such as life expectancy and infant mortality rates.

Despite America's immense wealth, there is a large gulf between the best off and worst off groups, related to race and education level.

"America is a very wealthy country, but we have one of the lowest life expectancies in the developed world," says Dr. Ichiro Kawachi, a professor of social epidemiology and chair of the department of society, human development, and health at Harvard University's School of Public Health.

Advances in social epidemiological research have illuminated how inequality is bad for health. For instance, studies have found that stress brought on by adverse conditions can lead individuals to smoke or gain weight and can also cause endocrinological changes.

The evidence suggests there is a need for a health perspective to be brought to the public debate over inequality.

So far "health implications have not mattered to politicians. Other aspects of inequality may have mattered to them," says Dr. George Kaplan, an emeritus professor of epidemiology at University of Michigan's School of Public Health.

FOR AN EXPANDED VERSION OF THIS ARTICLE, SEE **APPENDIX 1**, TWO BY TWO, DECEMBER, PAGE 14.


Harnessing social media to communicate our science

Over the course of the past year, the department has made new strides to communicate our research to a broader audience. Using social media to publicize faculty research and department events through our Twitter, Facebook, and LinkedIn accounts, we have built an epidemiologic community not only within but beyond the department.

In addition to publicizing our own work through social media, we stay engaged with the work of those who follow us and have significantly expanded our network over the past year.

We have also deployed an active social media presence at academic conferences like the Society for Epidemiologic Research's annual meeting and at our departmental academic events. This has helped us pick up new followers and create interest in our research and events.

In the coming year, we will continue to encourage more engagement of faculty and students with our social media tools.



What does it take to make the science possible?

Underpinning the exciting scientific advances, educational developments, compelling grand rounds and symposia, and cutting edge communications efforts featured in this report is a hardworking organizational infrastructure.

Within the context of organization, we present our efforts in the following areas: mentoring our junior faculty, recruiting new faculty, building and refining the ideal administrative infrastructure, training and developing our staff, and connecting all the players through social events and comprehensive intradepartmental communication. ORGANIZATION

Making the science possible

Faculty mentoring

Over the past three years we have expanded the department's long-standing junior faculty mentoring program, and the result has been a more structured and comprehensive approach that is well integrated with both university requirements and departmental practices. Designed to maximize our junior faculty members' opportunities for achieving excellence, there are several components of our structured mentoring program. A formal mentor is assigned to each junior faculty member (assistant professor, un-tenured associate professor on tenure track, or other junior faculty who request participation in the program). This assignment is made by the Chair's office in consultation with both the potential mentor and mentee. The Vice Chair meets with each mentor-mentee pair to review the expectations of mentoring. Thenceforward, the mentor and mentee are encouraged to meet regularly over the course of the year. A formal annual mentoring report is prepared by the faculty mentor and submitted to the Chair at the end of the year.

In addition, all department faculty participate in an annual review process, submitting a current CV and related materials for evaluation by the Chair and Vice Chair. For junior faculty members, the mentoring report is an additional component of the annual review, providing the Chair and Vice Chair with valuable additional perspective on their progress.

In keeping with university guidelines, all assistant professors and associate research scientists undergo a fourth year review, submitting CV and personal statement to a committee comprising the department Chair and Vice Chair, their mentor, and another senior faculty member. The committee meets privately and then with the junior faculty member to assess her/his progress toward promotion and/or tenure, and to make recommendations to enhance her/his likelihood of success.

Outside of these formal processes, the Chair and Vice Chair are available to meet with junior faculty at their request throughout the year to provide ongoing support and counsel as they navigate their early academic career trajectories.



Faculty recruitment

In 2010 we initiated a search process to identify and recruit individuals whose work is consistent with our strategic direction and who can help us achieve a full complement of faculty in all our areas of existing and anticipated strength.

Our search has focused on both mid-career faculty with an established National Institues of Health (NIH) funding track record and early-career faculty with clear potential for NIH funding; clearly focused on biologic or methodologic concerns in any of our core substantive areas of interest; and interested in our global, urban, and translational focus. We have been willing to invest resources in attracting the right person, seeing this as a central investment in the department's and the school's future.

This process continued apace in 2012. In addition to our search for core faculty members, we also worked in collaboration with two other departments, the Department of Surgery and the Department of Anesthesiology, on new recruitment efforts specifically for joint faculty members. In all, we held 15 special lectures in which prospective faculty presented their research to the department.

In addition to this formal search process, which yielded some stellar additions to the department this year, we have engaged some senior academicians as senior lecturers to provide added depth to the work underway in our faculty clusters.

We welcomed the following new faculty members:

- Dr. Cande Ananth, Professor of Reproductive Sciences (in Obstetrics and Gynecology) and Epidemiology in the lifecourse epidemiology cluster
- Dr. Abraham Aviv, Senior Lecturer in the lifecourse epidemiology cluster
- Dr. Megan Hall, Assistant Professor of Epidemiology in the chronic disease epidemiology cluster
- Dr. Katherine Keyes Wild, Assistant Professor of Epidemiology in the lifecourse epidemiology cluster
- Dr. Dana March, Assistant Professor of Clinical Epidemiology in the social epidemiology cluster
- Dr. Silvia Martins, Associate Professor of Epidemiology in the psych/neuro epidemiology cluster.
- Dr. Giorgio Solimano, Senior Lecturer in the chronic disease epidemiology cluster

Reflecting on an optimal administrative infrastructure

Our administrative engine is rarely visible to the outside world, but it is essential to every aspect of our scholarly mission. We are deeply invested in shaping and finetuning it to provide optimal support to our scientific and educational goals.





In July of 2010 we implemented a new administrative plan, organizing our faculty, staff, and doctoral students into six intellectual and administrative clusters around our pillars of strength in the department: infectious disease epidemiology, chronic disease epidemiology, lifecourse epidemiology, psychiatric and neurologic epidemiology, social epidemiology, and epidemiology innovation.

The cluster structure was designed with two fundamental goals in mind. We aimed to raise administrative policy and practice to a new standard and assure that all faculty were well-supported in the process of grant submission and post-award financial management, including budgeting, reporting, hiring, purchasing, and reimbursements. We also intended to catalyze intellectual exchange both within and across epidemiological disciplines, with the aim of stimulating productive discourse among investigators and nurturing the research careers of junior faculty and trainees.

Evaluation

With the cluster structure now firmly established and functioning, the time is right to pause to reflect on its success in meeting the original aims. In the second half of 2012, we developed a multiphase evaluation plan under the leadership of Vice Chair Dr. Bill Friedewald, including personal interviews, an anonymous survey, and focus group sessions.

In Phase I, beginning in October, Dr. Friedewald conducted structured one-on-one interviews with 26 faculty members representing each of the six clusters. Interview questions addressed specific elements of administrative and intellectual infrastructure. Phase II, beginning in December, included an anonymous survey distributed among the faculty, soliciting free form feedback on several aspects cluster functioning. Phase III, the final phase of the evaluation, which will include structured focus group sessions, will take place in the early months of 2013. Each focus group will comprise faculty from multiple clusters in order to facilitate a broadly representative response. The results of the complete evaluation process, including proposals for the further enhancement of the structure, will be summarized in a report to be presented and discussed with the full faculty during our March 2013 faculty meeting. We anticipate that this report will help us chart a course to further optimize our administrative structure and function over the coming year.

Staff development

In 2012 we developed a staff development theme for our quarterly all-staff meetings, also known as "Pizza Fridays." Our goals were to continue to facilitate dialog and skill sharing across our 60+ officers and support staff, to provide a deeper understanding of the mission, finances, and overall functioning of the department, and to introduce new opportunities for skill-building.

In March, department Chair Dr. Sandro Galea delivered a presentation on "Our Money," providing a detailed picture of our sources of income, the "taxes" we pay to the School and Medical Center, and the distribution of our expenditures, from personnel costs to keeping the copiers running.

Our May meeting featured a talk by Senior IT Support Specialist Mr. Scott Skversky, who took us through the step-by-step processes involved in troubleshooting hardware, software, and email problems, as well acquiring new equipment and software.

In September we brought in training specialists from Columbia University Learning and Development to deliver a customized version of the "Managing Your Time and Priorities" class. This session earned very high marks from those in attendance, who said that it allowed them to put some thought into how to structure their time and to see the value in not trying to do multiple things at once.

Our final meeting of the year took place at the end of November, and focused on "How Can We Do Better in 2013?" A survey monkey was distributed in advance of the meeting to solicit feedback and suggestions about our administrative structure and functioning, and the responses to this survey formed the agenda of the meeting. The goals that emerged from the discussion include additional customized training sessions and and some focused workshops on key administrative tasks.

We also made a special effort once again this year to encourage all staff to avail themselves of the exceptional personal and professional development courses offered by the University. We are pleased to note that the number of staff participating in these courses has increased steadily from year to year.

SEE APPENDIX 5 FOR THE TRAINING AND DEVELOPMENT INFORMATION AND FORM AND SEE APPENDIX 6 FOR THE GUIDE TO ADMINISTRATION.



Bringing faculty, students, and alumni together

The department functions best when we are all part of a dynamic and friendly community. For this reason, we hold social events throughout the year so faculty, staff, trainees, and alumni can meet and talk with one another and to enjoy each other's company. We also keep the communication circuits strong between the chair and faculty, staff, trainees, and alumni.

Our social events this year included a spring reception, a "Giants Among Us" reception dedicated to our senior faculty member who have made their mark as giants in the field, an alumni and friends reception at the annual meeting of the Society for Epidemiologic Research, as well as a spring and fall social, a holiday reception, and a reception for our 2012 graduates.

The department keeps members of our community consistently informed about events, opportunities, and news. Dr. Galea continues to communicate with faculty and staff every week through his Sunday Week N emails and also communicates monthly via email with trainees and bimonthly with alumni.

Our efforts to expand our social media footprint have helped to increase communication and engagement within the department by making people aware of faculty and student research, awards, and giving them the opportunity to learn about and connect with one another on research.

The department's efforts to reconnect with alumni will continue into 2013, including with alumni updates which will be published in Two by Two.



FACULTY / STUDENT AWARDS AND MILESTONES

Book releases

Dr. Charles DiMaggio, associate clinical professor of anesthesiological sciences and epidemiology, published the book, *SAS for Epidemiologists: Applications and Methods* (Springer). The comprehensive text covers the use of statistical analysis system software or SAS for epidemiology and public health research.

Dr. Guohua Li, Finster Professor of Anesthesiological Sciences and professor of epidemiology, co-authored, *Injury Research: Theories, Methods, and Approaches*, a bedrock text for researchers, practitioners, and graduate students in fields concerned with public safety and population health, such as injury control and prevention, safety engineering, risk management, emergency medical services, trauma care, health promotion, law enforcement, and criminal justice.

Faculty awards and leadership roles

Dr. Quarraisha Abdool Karim, associate professor of clinical epidemiology, was awarded the 2012 Prize in Medical Sciences by the Academy of Sciences for the Developing World (TWAS) "for her significant scientific contributions spanning two decades of the HIV epidemic in southern Africa, especially her ground-breaking research on tenofovir gel as the first HIV prevention technology for women." TWAS is an international organization that promotes science-based sustainable development in the Global South.

Dr. Salim Abdool Karim, professor of clinical epidemiology, was elected to the Institute of Medicine (IOM) of the National Academies, one of the highest honors in the fields of health and medicine in the U.S.

Dr. Abdool Karim was also named President of the South African Medical Research Council. According to the Council, the appointment of Dr. Abdool Karim, who is director of the AIDS research center CAPRISA, "will further strengthen [its] health research reputation as well as build on its impact on everyday health in South Africa."

Dr. Lisa Bates, assistant professor of epidemiology, co-edited a special issue of *Social Science and Medicine* that examined gender and health using relational, intersectional, and biosocial approaches.

Dr. Mitchell Elkind, associate professor of neurology and epidemiology (in the Gertrude H. Sergievsky Center), was chosen to be a member of The Virginia Apgar Academy of Medical Educators, an active community of educators at the College of Physicians & Surgeons dedicated to promoting, rewarding, and supporting outstanding education for medical students, residents, fellows, and faculty.

Dr. Sandro Galea, Gelman Professor and Chair of the Department of Epidemiology, was elected to the Institute of Medicine (IOM) of the National Academies, one of the highest honors in the fields of health and medicine in the U.S.

Dr. Rachel Gordon, assistant professor of clinical medicine and clinical epidemiology, was recognized by the Columbia University Medical Center with the Charles W. Bohmfalk Award for Distinguished Contributions to Teaching for excellence during pre-clinical years.

Dr. Gordon was also chosen to be a member of the Virginia Apgar Academy of Medical Educators, an active community of educators at the College of Physicians & Surgeons dedicated to promoting, rewarding, and supporting outstanding education for medical students, residents, fellows, and faculty.

Dr. Heather Greenlee, assistant professor of epidemiology and medical oncology, was elected to serve as president of the Society for Integrative Oncology for a term beginning in October 2013. The Society for Integrative Oncology is a multi-disciplinary organization of professionals dedicated to studying and facilitating the cancer treatment and recovery process through the use of evidence-based, comprehensive, integrative healthcare.

Dr. Karestan Koenen, associate professor of epidemiology, was named as lead epidemiologist to a consortium formed by Draper Laboratory to improve diagnostic tools and treatment outcomes for posttraumatic stress disorder.

Dr. Guohua Li received \$4.2 million over five years from the National Center for Injury Prevention and Control to set up the Injury Control Research Center at Columbia.

Dr. Bruce Link, professor of epidemiology and sociomedical sciences (in psychiatry), was presented with the New York State Psychiatric Institute's Mumford Award, a yearly grand rounds lecture established in memory of Dr. Emily Mumford who was a professor of clinical sociomedical sciences in psychiatry and public health at Columbia.

Dr. Gina Lovasi, assistant professor of epidemiology, was chosen by the American Thoracic Society to receive the Assembly on Environmental and Occupational Health David Bates Award, which recognizes promising investigation in the field of environmental and occupational health.

Dr. Lovasi was also honored with the Multi-Ethnic Study of Atherosclerosis Young Investigator Award (MESA).

Dr. Carolyn Westhoff, professor of obstetrics & gynecology, epidemiology, and population and family health, was named editor of *Contraception: An International Reproductive Health Journal*.

Dr. Lawrence Yang, assistant professor of epidemiology, received the American Psychiatric Foundation's Award for Advancing Minority Mental Health. The honor is given to individuals who have worked to increase access to quality mental health services for underserved minorities. Dr. Yang will use his award to support his anti-stigma work among Chinese immigrants with psychosis.

Student awards

Ms. Jaclyn Blachman-Forshay, a second year MPH student, won second prize for the master's student abstract award. Her abstract, which was done with the Women Under Siege Center's Women's Media Project in New York City is called "Crowd-sourced mapping of sexualized violence in Syria."

Mr. Patrick Dawson, who graduated from the MPH program in May, was one of the winners of the William Farr Award in Epidemiology, which is given to students who have shown commitment to understanding or addressing the causes of social inequalities in health.

Dr. Abdulrahman El-Sayed, a doctoral candidate, was awarded a Paul & Daisy Soros Fellowship for New Americans, which will support his MD and PhD studies at Columbia University.

Dr. El-Sayed also was awarded second prize by the Department of Epidemiology's contest for best student abstract submitted to the Society for Epidemiologic Research (SER) conference, which took place in June. His abstract is titled "Collective efficacy and community violence: What can an agent-based model tell us about the direction of association?"

Ms. Nicolia Eldred-Skemp, a second year MPH student, received a travel award to attend the 18th Annual Maternal and Child Health Epidemiology Conference this December in San Antonio, Tex. The award recognizes her abstract on the influence of social context and prenatal exposure to certain pollutants on cognitive functioning in children.

Ms. Sarah Ellwood, who graduated from the MPH program in May, was one of the winners of the Sydney Kark Award in Epidemiology, which recognizes students for commitment to global health research.

Ms. Sage Farrar, who graduated from the MPH program in June, was one of the winners of The Anna C. Gelman Award for Excellence in Epidemiology, which recognizes students for high academic distinction and the potential for significant contributions in the field of public health.

Ms. Vera Frajzyngier, who graduated from the PhD program in May, was one of the winners of Sydney Kark Award in Epidemiology, which recognizes students for commitment to global health research.

Ms. Samantha Garbers, who graduated from the PhD program in May, was one of the winners of the William Farr Award, which is given to students who have shown commitment to understanding or addressing the causes of social inequalities in health.

Ms. Rebecca Hanna, who graduated from the MPH program in May, was one of the winners of Sydney Kark Award, which recognizes students for commitment to global health research.

Ms. Katherine Hensel, a doctoral candidate, was awarded first prize by the Department of Epidemiology for best student abstract submitted to the SER conference. Her abstract is titled "Suicidal thoughts among American Indian/Alaska Native adolescents."

Ms. Jillian Knorr, who graduated from the MPH program in May, was one of the winners of the William Farr Award, which is given to students who have shown commitment to understanding or addressing the causes of social inequalities in health.

Mr. Russell McBride, who graduated from the PhD program in June, was one of the winners of The Anna C. Gelman Award for Excellence in Epidemiology, which recognizes students for high academic distinction and the potential for significant contributions in the field of public health.

Mr. Matthew MacFarlane, a second year MPH student, won third prize for the master's student abstract award. His abstract, is called. "Exploring the feasibility of using mobile phone technology to improve a anti-malaria campaign in rural Senegal."

Mr. Steve Mooney, who graduated from the MS program in June, was one of the winners of The Anna C. Gelman Award for Excellence in Epidemiology, which recognizes students for high academic distinction and the potential for significant contributions in the field of public health.

Ms. Stephanie Shiau, who graduated from the MPH program in June, was one of the winners of The Anna C. Gelman Award for Excellence in Epidemiology, which recognizes students for high academic distinction and the potential for significant contributions in the field of public health.

Ms. Heba Tawfik, who graduated from the PhD program in June, was one of the winners of The Anna C. Gelman Award for Excellence in Epidemiology, which recognizes students for high academic distinction and the potential for significant contributions in the field of public health.

Ms. Seanna Vine, a second year MPH student, won first prize for the master's student abstract award. Her abstract, which was done with Dr. Claire Wang of the Department of Health Policy and Management is called "Caloric impact of a 16-ounce serving size cap on sugar sweetened beverages served in restaurants."

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APPENDICES

APPENDIX 1

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APPENDIX 2

Agendas for CUESS

APPENDIX 3

Master's guidelines

APPENDIX 4

Doctoral guidelines

APPENDIX 5

Training and development

Guide to administration



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