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Letter from the Dean



I want to take this opportunity to eloborate on the accreditation process that is well underway at the college.

In August 2006, we began the application process for accreditation from the Council on Education for Public Health (CEPH), the independent agency recognized by the US Department of Education to accredit schools of public health. To start the process, we completed a self-evaluation and drafted a self-study document which we submitted to CEPH. The self-study document is posted on our website, and we invite you to review it and give us your feedback.

At our upcoming site visit on February 23-25, 2009, we will host a team of peer (academic and practitioner) reviewers who will validate our self-study by interviewing university officials, administrators, faculty, students, alumni, community leaders and

other important constituents. They will also inspect our facilities and resources. The team of reviewers will then prepare a report of its findings and forward it to the CEPH Board of Councilors. Based on the team's report combined with other information demonstrating compliance with the criteria, the board makes its final decision and will advise us in June of the outcome. Options include accreditation, denial of accreditation or probationary accreditation. When accredited, we will be asked to provide a one-year report addressing CEPH recommendations for the college, and we will be scheduled for a future reaccredidation.

Earning CEPH accreditation will provide assurance to prospective students that we have been evaluated and have met the standards established and accepted by the profession. It will make our programs more marketable by assuring potential employers that our graduates have completed a curriculum that covers essential skills and knowledge needed for today's jobs. Our students will also be qualified to sit for the new National Board of Public Health Examiners certification exam which will make them eligible for a variety of federal programs and fellowships. Additionally, it will open doors by qualifying us for research and securing dollars that are only available to accredited colleges.

Not only does the accreditation process give us the opportunity to examine our current strengths and weaknesses, but it is also a good opportunity to strategize for the future. Through our self-evaluation, we have identified four areas in which we believe we have the potential to gain national recognition: Gerontology, Emergency Preparedness, Infectious Disease and Cancer. You can find out about the work we are doing in these areas throughout the magazine.

Our mission is to promote health in human populations through innovative research, exemplary education, and engaged service dedicated to preventing disease and injury within the state and around the world. Through the process of accreditation, the leveraging of existing areas of research strengths and the development of new areas of expertise, we are working to fulfill this mission. Thank you for supporting our college.

Sincerely,

Phillip L. Williams, Ph.D., Dean

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Health at the University of Georgia promotes health in human populations through innovative research, exemplary education, and enagaged service dedicated to preventing disease and injury within the state and around the world.

Sections that connect directly to the mission are highlighted throughout the publication.



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Archway Public Health Professional Position Created

The College of Public Health in conjunction with the Office of Public Service and Outreach and Cooperative Extension has established the first Archway Public Health Professional. This position is one of the many components of the university's Archway Partnership, a program designed to deliver a full range of University of Georgia resources to counties facing significant issues related to rapid growth. This is the first Archway position in public health, and it will serve the citizens of Washington County, GA. Laura V. Bland, MPH '08, has been named the first Archway Public Health Professional.

The Archway project promotes community economic development; adapts to assist with each region's unique, expressed needs; and provides leadership by partnering with other higher education institutions, state agencies and local communities. The Archway Public Health Professional's role is to "conduct a needs assessment of public health problems in the community, identify resources in the community that could be mobilized, facilitate communication between community resources in the community and, in general, support the land grant mission of our institution," says senior associate dean Robert Galen, physician and professor of epidemiology.

According to Galen, "the hope is that a careful assessment of the public health problems facing a community will motivate the faculty to identify related research opportunities that will lead to solutions to those problems."



Laura V. Bland, MPH '08, has been named the college's first public service professional.

New Study Shows the Value of **Investing in Employee Health**

Is it worth it to invest in employee wellness programs? According to a study published in the September Journal of Occupational and Environmental Medicine, an official publication of the American College of Occupational and Environmental Medicine (ACOEM), it is.

Lead author of the new publication, Kristin M. Baker, MPH '07, is a Ph.D. student in the department of health promotion and behavior.

The research shows that an obesity management program can provide a significant drop in employee risk factors with at least a "modest" return on investment (ROI) in just one year.

Moreover, the ROI model introduced in this study provides a simpler, less costly tool to help companies estimate the dollar benefits of investing in employee wellness programs especially when compared to the more expensive formal evaluation studies used to build an economic case for health promotion programs.

The researchers analyzed a group of 890 overweight or obese employees participating in an obesity management program called Healthyroads. To assess the financial impact of the Healthyroads program, the researchers used a recently developed ROI model, which estimated the changes in medical costs and worker productivity resulting from reductions in health risks.

The results suggested a total projected savings of nearly \$312,000. About 60 percent of the savings are from reduced health care spending; the remaining 40 percent resulted from improvements in productivity.

The model estimated an overall ROI of \$1.17 to \$1.00 for each dollar spent on the obesity management program, costs decreased by \$1.17. The total cost of the Healthyroads program averaged \$300 per employee per year.

Georgia Cancer Coalition Names UGA **Distinguished Scholars**

The Georgia Cancer Coalition named two College of Public Health faculty members as Distinguished Cancer Scholars for 2008-09. John Vena, head of the department of epidemiology and biostatistics and Claire Robb, assistant professor of epidemiology each received 5-year grants from the cancer coalition. Over the next five years, Vena will receive \$150K per year and Robb will receive \$50K per year.

The funds will support their research efforts through the coalition's Distinguished Cancer Clinicians and Scientists program. The coalition selects scientists engaged in the most promising areas of cancer research who can strengthen the state's research talent, capacity, infrastructure and funding.

Since its inception in 2001, the Georgia Cancer Coalition has named 117 Distinguished Scholars. Fourteen have been named at the University of Georgia.

The 14 GCC scholars at UGA are among the more than 40 researchers who are members of the UGA Cancer Center, a multi-disciplinary center that was founded in 2004 to use the talents of the university's researchers in the fight against cancer.

Robb's research focuses on physical function and psychosocial factors that impact older cancer patients. Her goal is to better understand factors that contribute to treatment outcomes in older patients and to eliminate disparities in treatment of the elderly.

Vena studies factors that affect the health of populations and is currently researching occupational and environmental risk factors that impact breast, lung and bladder cancers.

The Georgia Cancer Coalition is an independent, notfor-profit organization that unites government agencies, academic institutions, civic groups, corporations and health care organizations in a concerted effort to strengthen cancer prevention, research and treatment in Georgia, with the ultimate goal of making Georgia one of the nation's premier states for cancer care. The mission is to reduce the number of cancer-related deaths in Georgia. The coalition is the first of its kind in the nation. For more information, see www. georgiacancer.org.



Claire Robb



John Vena



Cham Dallas, Ph.D., professor of health policy and management and director of the institute for health management and mass destruction

defense (IHMD), joined the College of Public Health to lead the college's outreach and research efforts in the area of emergency preparedness. Having more than 25 years of experience with issues related to weapons of mass destruction, including ten years of field experience at the Chernobyl nuclear disaster site, Dallas is internationally recognized. As an expert in the consequences of WMD, he is frequently invited to speak at the United Nations, national news outlets and in dozens of institutions worldwide on the medical response to nuclear war.

Dallas has been the recipient of several teaching awards, and has written scores of research papers for the scientific community and educational articles for the public on the toxic components of WMD.



Travis Glenn, Ph.D., joined the college as an associate professor of environmental health science. Glenn received his Ph.D. in Zo-

ology from the University of Maryland. His research interests include genetic mechanisms and developing new DNA techniques. Before joining

the college, he worked at the Savannah River Ecology Lab. In the past five years, Glenn has collaborated on research funded by the National Institute of Health, National Science Foundation, National Oceanic and Atmospheric Administration Oceans and Human Health Initiative and the Environmental Protection Agency, among many others.

Glenn also serves as the faculty director of the Georgia Genomics Facilities. These laboratories facilitate genomics research for investigators throughout Georgia and beyond.



Joel M. Lee, Dr. P.H., joined the College of Public Health in August as associate dean for academic affairs and professor of health policy

and management.

Lee has served on a number of association boards and advisory committees including the Board of Directors of the Association of University Programs in Health Administration (AUPHA), the Kentucky Health Care Strategy Forum, the Governing Council of the American Public Health Association, and many different committees of the American College of Health Care Executives. He serves as an accreditation site visitor for both the Council on Education in Public Health, and the Council on Accreditation in Health Services Management. He is a founding member of the Pfizer/ ASPH Academy of Distinguished Public Health Teachers, and is active in a variety of Association of Schools of Public Health committees. His

honors include the University of Kentucky Alumni Association "Great Teacher" Award, and the Golden Apple Teaching Award given to him by students from the UK College of Public Health. He frequently publishes on matters of education in public health and health administration education.

Lee was formerly a professor of health services management as well as the first associate dean for academic affairs and director of doctoral studies at the University of Kentucky College of Public Health.



James Oloya, Ph.D., joined the college as assistant professor of epidemiology. Oloya received his Ph.D. from the Norwegian School of Veterinary Science

in Oslo, Norway and his M.Sc. from Makerere University in Uganda. Oloya also completed a two-year postdoctoral research fellowship at North Dakota State University, specializing in microbial risk assessment of foods of animal origin.

Oloya specializes in epidemiology and veterinary public health and the epidemiology of zoonotic infections. His interests include: food safety epidemiology, antimicrobial drug resistance of food borne pathogens, public health, study designs in clinical trials, and the epidemiology of mycobacterial infections at the wildlife-domestic animal-human interface.

Oloya teaches courses in infectious disease epidemiology, food safety epidemiology, and veterinary public health.



John E. Vena, Ph.D., joined the college as head of the department of epidemiology and biostatistics. Vena was also named the University of Georgia

Foundation Professor.

Vena's honors include being named the Senior International Fellow from the Fogarty International Center of the National Institutes of Health, and a Great Lakes Scholar from the Association of Occupational and Environmental Clinics. He is a Fellow of the American College of Epidemiology, and the American Epidemiologic Society. Vena serves on the Governing Council for the Epidemiology Section of the American Public Health Association. His interests include occupational health, reproductive and developmental health, community-based research and cancer epidemiology.

Vena comes to the CPH from the Arnold School of Public Health at the University of South Carolina, where he helped build and expand a successful research and academic program as chair of the department of epidemiology and biostatistics.



Jia-Sheng Wang, M.D., Ph.D., joined the college as professor and head of the department of environmental health science. Prior to joining the UGA

faculty, Wang was a professor of molecular toxicology in the depart-

ment of environmental toxicology at Texas Tech University. He has also served on the faculty of John Hopkins University, Massachusetts Institute of Technology, and Southeast University.

Wang has published extensively and specializes in toxicology, carcinogenesis, cancer prevention, food safety, and molecular epidemiology. He has been a full member of many professional societies, including American Association for Cancer Research and Society of Toxicology. He currently serves as the Vice President of the Food Safety Specialty in the Society of Toxicology and the President-elect of the American Association of Chinese Toxicologists.



Christopher Whalen, M.D., a world-renowned expert on tuberculosis, joined the department of epidemiology and biostatistics as a professor of epidemiol-

ogy and is also a member of UGA's Faculty of Infectious Disease. Prior to coming to the University of Georgia, he served as the division head of epidemiology at Case Western Reserve University Medical School.

Whalen is a board certified physician in both internal medicine and infectious disease. He has been published in the New England Journal of Medicine, the Journal of the American Medical Association to Science and The Lancet. His research interests include tuberculosis, HIV infection, vaccines to prevent infectious disease and drug-resistant microorganisms.

UGA Collaborates with Peru

to Reduce Air Pollution

By Jordan Sarver



Jordan Sarver is pursuing his master's degree in journalism and mass communication with a concentration in health and medical journalism at Grady College. He received his bachelor's degree in biology from Morehouse College.

In Peru, a University of Georgia study that aims to reduce Peruvian citizens' exposure to indoor air pollution has just concluded.

EHS professor, Luke Naeher has spent the last few years studying air pollution in Peru. His latest study measured the effectiveness of new stove installations on Peru's air quality.

The study, based on Peru's stove intervention project, began in June and finished up in recent weeks.

The National Stove Program aims to reduce exposure to air pollution caused from wood and biomass smoke by providing tens of thousands of stoves to homes in Peru. This project was partially supported by the office of the vice-president for public service and outreach at UGA.

Many developing countries like Peru still rely on wood to heat their homes and cook their meals. Unfortunately, the smoke produced by burning wood and other fuels can have a severe impact on the respiratory health of the residents.

Naeher's study tested how well the stoves improved the air quality of the home. This was achieved by measuring the amount of pollutants in the air as well as in the blood and urine of residents' before and after installation of the new stoves.

"There is little to no strong data on how effective these stoves are at doing their intended purpose," said Naeher.

To help with the study, three of Nae-

her's graduate students traveled with him to Peru.

Kevin Horton, who is pursuing a doctoral degree in public health with an emphasis in environmental health, was one of the graduate students involved in the study.

Horton spent time collecting and analyzing the urine samples. The urine samples were sent to the Centers for Disease Control and Prevention for analysis. Horton is then responsible for analyzing the data received from the CDC.

The samples are measured for volatile organic compounds and poly-cyclic aromatic hydrocarbons. These compounds are the result of burning wood and other fuels. The community studied, Santiago de Chuco, is located 10,000 feet in altitude. The subjects studied were primarily women

Horton explained that the study focused on women because they are exposed to indoor pollution more than their male counterparts. This difference is due to the woman's role in Peru as the homemaker.

The condition of the homes with the old stoves was hard for the graduate students. "In a matter of 45 minutes to an hour, I was already feeling the effects," said Adam Eppler, a graduate student, referring to the itchy eyes and coughing he suffered from smoke exposure.

The old stoves did not have chimneys. Most of the smoke produced by cooking or heating the homes was not able to escape.

Because heating the homes was necessary throughout the night and cooking took place throughout the day, the stoves burned close to 24 hours a day.

The graduate students noted that most of the houses were full of smoke prior to the implementation of the new stoves.

The new stoves, which incorporated a chimney and a stovetop, called a "plancha" by the natives, allowed for the smoke to escape the home thereby reducing the amount of exposure to pollution.

Various approaches were used to measure air quality. Real-time air sampling equipment was able to measure and report air quality within the day. Each home was tested for a 24-hour period and the sample was drawn from the kitchen.

The women wore vests to measure their exposure to air pollution. The vests were outfitted with air sampling equipment and were worn throughout the day.

"It was pretty awkward for them to use the equipment," said Eppler.

At night they were asked to keep the vests near their bed at sleeping level to measure their exposure overnight. Results currently available show a marked difference in the quality of air with the implementation of the new stove.

Horton noted that the experience opened his eyes.

"It gives you an appreciation for how we live here," he said.

The Georgia Oceans & Health Initiative

By Christy Fricks



Christy Fricks is a second year masters student majoring in the new health and medical journalism concentration at Grady College. She is a longtime resident of Athens and the proud mother of a six year-old-boy.

& I

By Pearman Parker



Pearman Parker is a second year MPH student in the department of health promotion and behavior. She received her degree in public relations from Grady College of Journalism and Mass Communication. After graduation, she hopes to work in the growing field of health communication.

Oceanic and coastal waters harbor and transport microorganisms and chemicals that cause disease or otherwise affect humans and other animals. At the same time, the oceans are changing as a result of human activities.

The future impact of these changes on marine ecosystems is an area of active research. However, the ways in which these ecosystem changes will affect human health is a largely unexplored field.

To respond to this need, the University of Georgia is now partnering with researchers from multiple agencies to host the Georgia Oceans & Health Initiative (GOHI). A new graduate training program, GOHI is designed to train doctoral students to reach across traditional disciplines to understand the linkages between the oceans and human health. A 3-year grant from the National Oceanic and Atmospheric Administration will support the creation of this new graduate education program.

"Its goal is to bring together people that are working in marine sciences with human health outcomes," says Erin Lipp, principal investigator and associate professor in the College of Public Health's department of environmental health sciences.

The program participants will inves-

tigate applications to human health and health policy related to aquatic/ocean sciences. As a part of this initiative, four Ph.D. students have been received a three-year fellowship: Janna Carrie Futch, Carrie Givens, Alexandra Mass, and Jason Westrich.

This fellowship will enable them to receive training in the fundamental laboratory and field skills required of marine and environmental sciences. At the same time, it will provide them with the opportunity to be engaged in human health applications of ocean science through direct exposure and involvement in public health policy.

Additionally, two Ph.D. students per year from multiple science based degree programs will have the opportunity to diverge from their primary research to explore policy and research associated with oceans and human health, thereby expanding exposure to the topic. "It is an opportunity for students who already are doing a Ph.D. program to deviate from what they are doing in order to really zone in on the oceans and human health component," Lipp says.

At the end of grant period, 9 students will be broadly trained in both aquatic/ ocean sciences and its application to hu-

man health issues and health policy and will be prepared to successfully move forward in this growing field.

"This is an opportunity to sort of bridge what people are doing in the College of Public Health and what people are doing in Marine Sciences and some of these other programs," Lipp says. "We really do have a lot of research interests that overlap and this gives us an organizational reason to collaborate more and likewise working with NOAA labs and public health agencies."

Participants in the program will take graduate level courses developed in collaboration between the department of marine science and department of environmental health science. Students will also interact with the department of health policy and management, as a way to become exposed to the broader domain of public health.

In addition to classes, trainees will also experience two types of internships during their tenure in this program. Students will work directly in NOAA laboratories, for a period of at least 6 weeks, on research related to their dissertation. Finally, students will incorporate ocean science issues in public health policy through carefully selected internships with local, state and federal public health agencies.



A Passion for Prevention



"Epidemiology is the key to all decisions we make in medicine," says Professor John Vena, PhD. The departmental chair of epidemiology and biostatistics, briefly considered attending medical school after graduating Magna Cum Laude with a Bachelors in Biology from Saint Bonaventure University in New York in 1975. But, Vena decided to enter the field of public health instead. "A decision," he says, "made so much sense."

On his journey towards earning a Ph.D. in epidemiology, Vena says that he developed a real passion for population health. He realized that "instead of treating people, we need to think in terms of prevention." So, he attended graduate school at the State University of New York at Buffalo for natural sciences with a focus in epidemiology.

His passion for prevention and the "need to address critical public health issues," is still what drives Vena to this day. Since finishing his education, Vena has built a successful career in the field of epidemiology. Prior to joining the department of epidemiology and biostatistics at the UGA College of Public Health, he was on the faculty of the University of South Carolina Arnold School of Public Health. At USC he was professor and chair of the department of epidemiology and biostatistics and an associated faculty member of the School of Environment.

In addition to that, he spent over 25 years as a tenured professor at the University of Buffalo. There he held joint positions as director of the Environment and Society Institute and the Research Program in Environmental and Occupational Health.

Vena's research interests focus primarily on occupational and environmental health, as well as cancer. His accomplishments as a researcher include numerous grants and his list of publications and invited presentations is pages long.

One of his favorite research projects, which started in 1991 and is still running today, is a study of recreational sportsmen who may have been exposed to pollutants during their time around the Great Lakes.

In addition to studying environmental exposures, Vena is also an avid fan of the outdoors. He enjoys hiking, fishing, gardening, and any home improvement project he can get his hands on.

"The vision, the plans, and how they are implemented," attracted Vena to the College of Public Health. He says he is "impressed with the resources at the University of Georgia that complement the College of Public Health, such as: the College of Veterinary Medicine, the department of kinesiology, and the strong genetics and environmental health programs."

Vena says he looks forward to teaching, researching, and making the department of epidemiology and biostatistics "one of the leading departments...in the country.

He and his wife Sylvia also look forward to joining the Athens and UGA communities. They have three children: a son who has graduated and now works in law, a daughter who is an art educator, and another daughter who is about to graduate from the University of South Carolina with a degree in Sociology.

Vena comes to UGA from one of its biggest football rivals, the University of South Carolina, but laughs at the idea that switching teams will be a problem. I'm excited to become part of the UGA family...Go Dawgs," says Vena!

Educating Veterinarians for Public Health

By Pearman Parker & Christy Fricks

The 1970s heralded a new era for infectious diseases. Several diseases have emerged since then, and 75 percent of newly discovered infectious diseases in humans came from animals. This includes Ebola, West Nile virus, Lyme disease and SARS. Additionally, 80% of bio-threat agents are transmissible from animals to humans.

Despite the growing concern over newly emerging or re-emerging disease threats with an animal origin, there is a critical shortage of veterinarians, particularly those serving in public health practice.

In order to strengthen the public health workforce and alleviate the shortage of trained public health veterinarians in Georgia and elsewhere, the College of Public Health and the College of Veterinary Medicine created the DVM/MPH dual degree which provides students basic science training and the clinical aspects of animal diseases through the core DVM degree program and specialized public health training through the MPH program.

"The number of veterinarians working in public health had been steadily increasing and the vet school saw the opportunity to become a leader in the field," says Steve Valeika, assistant professor in the department of epidemiology and biostatistics. Georgia is one of few universities in the nation that offer a DVM/MPH dual degree.

Valeika explained that veterinarians added a lot to public health. He says that one of the core parts of DVM training is

to consider the health of populations, even though it may be cases of herds of animals,.

"This kind of broad thinking, comparative approach gives vets a naturally flexible way of approaching public health problems that few other professions are able to do," says Valeika.

After graduation, students are qualified to address the issues surrounding epidemiology, environmental health, global health, infectious disease investigation and control and homeland security.

"The DVM/MPH (degree) opens the door to public health work for animals, for humans and especially for the interface between animal health and human health," Valeika says.



Healthy Baby, Healthy Marriage

By Pearman Parker

Changing diapers, warming bottles, mixing formula, and trying to find time for a nap here and there in the hopes of gaining an ounce of rejuvenation are all part of the lifestyle for new mothers. Now, imagine the additional responsibilities that having a sick baby would add to this list. While the new mother of a sick child may be busy thinking about her child's health, she may not realize how the illness of the child may affect her marriage.

In the working paper, "Healthy Baby, Healthy Marriage? The Effect of Children's Health on Divorce," Angela R. Fertig, assistant professor in the department of health policy and management, is analyzing data to examine if there is a relationship between a child's poor health and marriage. If having a child with poor health causes a marriage to break up, Fertig argues that it can also cause the family's economic status to fall.

To investigate this theory, Fertig chose to look at birth weight as a determinant of divorce for her analysis. She did this in order to avoid issues of reverse causality. For example, she wanted to eliminate parents fighting as a possible reason for a child's ill health. She said that the majority of people have children early in their marriage. "So the best way is to chose a health indicator measured as early as possible." Additionally, because low-birth weight is often a harbinger of health problems, it has a large impact on the family's lives.

In her paper, Fertig said, long hospital visits, along with complicated medical procedures and the added fear of losing a child, are all factors that make the delivery of a low-birth weight baby traumatic for families. Plus, low birth weight is associated with childhood health problems such as cerebral palsy, high blood pressure, deafness, blindness and other ailments.

Fertig analyzed data from the 1988 National Health Interview Survey, the National Longitudinal Survey of Adolescent Health and the 1970 British Birth Cohort Study. She found divorce rates to be higher among parents with low birth weight babies than parents of normal weight children.

are less effective because of that belief," Fertig said. "One small way in which we can reduce health disparities among children by income is to target interventions at helping parents of low birth weight children stay together."

But, regardless of the divorce rate, Fertig's paper is evidence that health affects income, and offers insight which may lead to development of more effective interventions in the future.



Child Maltreatment Victims Lose Two Years of Quality of Life

By Sam Fahmy



Sam Fahmy is the science writer at the University of Georgia Office of Public Affairs/News Service. He's written about research topics as diverse as aging, ecology, bioenergy and gene therapy. He holds an undergraduate degree in biology from UGA and a master's degree in science and technology journalism from Texas A&M University.

Child maltreatment is associated with reductions in quality of life even decades later, according to a new University of Georgia study that finds that - on average - victims lose at least two years of quality of life.

UGA College of Public Health associate professor Phaedra Corso and her colleagues at the Centers for Disease Control and Prevention analyzed surveys of more than 6,000 people to assess the deficits in quality of life that victims suffer. Their results appear in the June issue of the American Journal of Public Health.

"We found, with rigorous statistical methods, that there are significant differences in health-related quality of life between people who were maltreated as children and those who were not," Corso said, "and that holds across all age groups."

Childhood maltreatment - which includes physical, sexual and emotional abuse and neglect - has been linked to an increased risk for ailments ranging from heart disease, obesity and diabetes to depression and anxiety. Corso said there are two reasons why. First, childhood maltreatment increases the likelihood of unhealthy behaviors such as smoking, substance abuse and sexual promiscuity. And recent studies suggest that repeated exposure to the stress caused by maltreatment alters brain circuits and hormonal systems, which puts victims at greater risk of chronic health problems.

The researchers found that 46 percent of respondents reported some form of maltreatment during childhood. Of those, 26 percent reported physical abuse; 21 percent reported sexual abuse; 10 percent reported emotional abuse; 14 percent reported emotional neglect; and nine percent reported physical neglect.

Corso said few studies have examined the long-term impact of childhood maltreatment on quality of life, and, until now, none had been designed so that the measures can be used in comparative economic impact analyses. These analyses are important, Corso said, because they allow public health officials to compare the costs and benefits of two unrelated public health interventions.

To assess reductions in quality of life, the team matched responses to a survey that assessed physical functioning, pain, cognitive functioning and social support with data from surveys that explicitly asked people how many years of life they would trade to be free of a given health condition. The result is a score that ranges from 0 to 1, with 0 being equivalent to death and 1 being perfect health. The average score for people who weren't maltreated was .78, while the score for those were was .75 - a difference of .03 per year. Throughout a lifetime, this figure translates to a loss of two years of qualityadjusted life expectancy.

"Every year gets diminished in some respect," Corso said, "because the person who was maltreated has a lower quality of life than the person who wasn't."

"The long-term consequences of child maltreatment are very real and concerning. All children should have safe, stable, and nurturing environments in which to grow and develop," said Dr.

Ileana Arias, director of CDC's National Center for Injury Prevention and Control. "For children and adults to live to their full potential, we must support programs that stop child maltreatment before it ever begins and work to help those who have already experienced it."

The researchers also found significant differences among age groups, with the gap between the non-maltreated and maltreated group growing smaller - but never disappearing – in older age groups. The exception, Corso noted, was in the 70 and above group, where the difference between the non-maltreated and maltreated group is actually larger than in the previous two age groups (60 to 69 and 50 to 59). The exact reasons for this difference are unclear, but Corso said older people might have more time to reflect on past maltreatment.

She cautions that the two-year reduction in quality of life undoubtedly underestimates the true impact of childhood maltreatment. Children experience severe reductions in quality of life as maltreatment is occurring, and surveys of adults don't account for those reductions.

Still, she said her team's study highlights the long-term damage associated with child maltreatment and, by helping to quantify its costs, helps make the case for funding prevention efforts.

"A lot of the time people don't consider violence as a public health issue," Corso said, "but there's a body of evidence that exists now that shows longterm health impacts of childhood maltreatment."

Investing In Our Students: The David Hayes Undergraduate Award Fund

By Tanisha Grimes

Picture your favorite teacher, the passion they brought to the classroom and how they impacted your life. That same type of teacher still exists, here, in the College of Public Health.

For 20 years, David Hayes has been a part of the University of Georgia as a faculty member in the department of health promotion and behavior (HPB).

Recently, as part of a vision formulated by Dean Phillip Williams and supported by the HPB faculty, a new undergraduate fund was developed in his name.

The David Hayes Undergraduate Fund offers resources generally reserved for graduate students—to undergraduates.

The fund will be used for a broad

range of purposes, geared toward preparing undergraduates for future professional and academic careers.

"By developing, maintaining and nurturing our undergraduate program, this fund allows us to stay at the forefront," says Carol Cotton, an HPB faculty member.

Ultimately the goal of the fund is to positively impact students, in the same way that Hayes has impacted others.

Hayes motivates students, past and present, encouraging them to take ownership of their learning.

"He really inspired me to want to continue my education. He has such a passion for teaching and is focused on student-centered learning," says Ashley Atherton, a former student of Hayes. Kendra Hibler, another former student echoed this sentiment, stating, "he used to say always own what you are saying, never say it's a dumb question, or ask if it's ok to ask this; just ask it and own what you think." Laura-Leigh Crowe signed up for Hayes' class at the urging of her mother, who had studied with him10 years ago. "He had a huge impact on my mom and he has had just the same impact on myself...you can tell he truly cares that you get the most out of your education," says Crowe.

Through the use of real-world applications, Hayes encourages critical thinking, going beyond lectures where students are expected to dully memorize and regurgitate information.

Hayes is very humbled and honored about the fund's name and hopes that the fund will give deserving students the opportunity to invest in their future. "I have always viewed my role as helping students reflect on the opportunities they are presented, and I ask myself, how can I help them get the most from those opportunities. I try to do the best that I can, to feel that my classroom is a place for them to explore ideas, raise questions, issues and express opinions that they have." says Hayes.

"I encourage anybody who ever had a great teacher or has been touched by what they experienced in the classroom to contribute to this fund; this is the fund for them," says Dr. Cotton.

To make a gift to the Hayes Fund contact

Kate Lindsey O'Reilly, 706-542-2590; krl@uga.edu.



Carol Cotton, a faculty member in the Department of Health Promotion and Behavior, and her family have donated \$10,000 to the David Hayes Fund. Pictured from L. to R.: Mark Wilson, head of the department of health promotion and behavior, Kendra Hibler, BSHP '07, Carol P. Cotton, BSED '77, MED '78, PHD '99, David M. Hayes, Dean Phillip L. Williams, and Senior Vice President for External Affairs, Tom Landrum.

A Student's Reflection: Finding Inspiration through Research

By Tanisha Grimes



Tanisha Grimes is currently a doctoral candidate whose dissertation is focused on the experiences of HIV positive African American females in the rural south.

When Dr. Hou first asked me if I was interested in doing an HIV/AIDS needs assessment, I immediately said "sure," without thinking about it. For over 10 years, I have been involved in the HIV/AIDS field, so joining the team was a natural thing for me to do. However, when I said "sure" I had no idea of the journey that I was about to embark upon—or, how it would impact my life.

My role on the project was to co-conduct a focus group, along with several individual interviews. I asked clients about their different needs and about the stigma that they have faced since being diagnosed with HIV or AIDS. I also asked for suggestions from them that might help improve community willingness to participate in HIV preventive services.

The clients were amazing. They have been through such adversity, and still stood strong, a vision of strength and resiliency. Among them, are those who first confronted their positive diagnosis through a fog of drug use, depression, isolation, despair, and even attempted suicides. Yet somehow, they have managed to rise above it all and continue to live a life of hope.

It was hard not to connect with them. As I listened to their stories, I could feel their pain and triumphs. In fact, during a focus group, I got up to wrap my arms around a weeping client and console them. They felt so burdened with this virus; they were made to feel like they were nothing in this world. Their tears flooded as they began to share, for the first time, the pain and anguish they endured. I wanted to comfort them,



touch them, and show them I wasn't afraid to have contact with them. I wanted to show them that I believed they were human and deserved to exist in the world, no matter what disease ran through their blood.

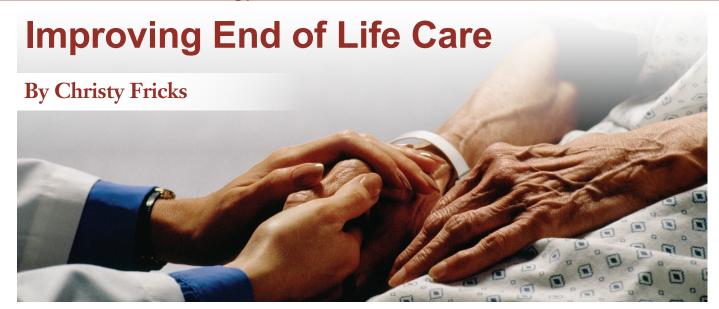
Providing dignity and respect to people living with HIV/ AIDS was one of the most important parts of being involved in this needs assessment.

This research is so important because it helps to give a voice to those who are shunned, ostracized and marginalized. It brings to the forefront their needs and what is important to them. It's about providing a forum for their voices to be heard and giving the best care for them as they live as positive individuals.

The study also highlights both the gains we have made in providing quality care to infected individuals and the deficits that still exist in providing care.

As a public health practitioner and AIDS advocate, being involved in this project motivated me to continue helping improve the lives of others. This HIV/AIDS Needs Assessment contributes to the quality of life for individuals living with this virus and also provides useful information to prolong their lifespan.

It has been an honor and a privilege to be able to interact with such strong and profound individuals, while trying to help make a difference in their lives. Most importantly, I showed them that there are people who are not afraid to treat them with love, dignity and respect.



For most of us, the last thing we want to do is think about the end of our lives. But, Anne Glass, assistant director of the institute of gerontology, wants to see this changed. She believes that this last stage of human life deserves more attention.

Indeed, avoidance of the topic is part of what contributes to pain and confusion during this particularly fragile part of life. In addition to that, because there is so much focus on preserving life, we often, inadvertently, ignore end-of-life care issues such as pain management, family support and honoring choices.

Such was the consensus at "Improving Palliative and End-of-Life Care for Frail Older Adults," the first of such conferences sponsored by the Georgia Geriatric Education Center (GGEC). The conference, held May 16-17, 2008 in Athens, drew over 50 healthcare professionals from throughout Georgia. It featured speakers with hands-on experience in palliative care programs and end-of-life care.

"I wanted to help healthcare providers see why and how they could start such programs at their hospitals, why and how to improve end-of-life care in nursing homes, and help to raise awareness and understanding of hospice services across the continuum," said Glass.

She pointed out that end-of-life care is a particularly opportune area for improvement, and palliative care programs are a relatively new approach in the medical field. .

The weekend included a broad range of topics including: Starting a Palliative Care Consult Service in Small Rural Hospitals, Improving the Final Days and Hours in the Nursing Home, Expanding Hospice Across the Continuum, Artificial Hydration and Nutrition in Dying Patients, and Pain Management in Terminally Ill Geriatric Patients.

But, it was the message presented at the opening session of the conference that united the attendees. "Death is hard but it doesn't have to be horrible," stated the voiceover during excerpts of a video from "Reclaiming the End of Life," a New Hampshire based group.

Diane Brookins agrees. As coordinator of a long-term care ombudsman program in Gainesville, Georgia, she was excited to meet others interested in learning about ways to improve care at this final stage of living. "We know that most general practitioners and most family members don't have a good understanding of end-of-life," said Brookins.

Almost 75% of all deaths occur among those who are aged 65 and above, and care for frail elders who are dying is particularly challenging for health care professionals," said Glass. "As documented in a state-by-state 'report card' (funded by the Robert Wood Johnson Foundation), end-of-life care in the United States is often mediocre."

This holds true in Georgia as well. "Unfortunately, the state of the art of end-of-life care in Georgia needs a significant amount of improvement," said Leonard Poon, director of both GGEC and the institute of gerontology.

The GGEC believes that education is the key to improving the quality of life for elders entering their final years.

It is one of many educational projects planned by GGEC, the first Geriatric Education Center developed in Georgia. A relatively new entity, funding to help launch the GGEC came from a \$1.26 million grant awarded in 2007 by the U.S. Department of Health and Human Services to the Institute of Gerontology at the UGA. Partners in the GGEC are Mercer University School of Medicine, Georgia Neurosurgical Institute, and Armstrong Atlantic State University.

Information presented at the conference will be made available and distributed through the GGEC. Glass is working on publishing the conference proceedings. "Palliative care will be one of the courses offered through our Georgia Geriatric Education Center at the institute of gerontology, and it will involve workshops and online training modules and certificate offerings," said Poon.

Lifelong Learning

By Lindsey Epperly



Lindsey Epperly is a second year **English major and** aspiring writer. After graduation, she hopes to pursue her dreams as a magazine journalist.



Great scholars go above and beyond their original intentions, constantly challenging themselves. No matter how much knowledge or wisdom such a person acquires, they never stop learning. One can find such an individual behind the desk at the institute of gerontology, in the soft-spoken, dedicated Leonard W. Poon.

Poon's desire to learn and research stretches far beyond that of many scholars. His yearning to educate and inform others of the world around them exceeds the expectations of your average professor. This is why, Phi Kappa Phi, a University of Georgia honor society, chose to honor him with the 2008 esteemed Love of Learning Award.

Although his office is decorated with many other awards, he takes time to point out his most recent addition. "I'm honored by the award. I see it as an acknowledgement of the work we have done over the last 20 years in the area of improving quality of life," said Poon, whose studies have also gained him international recognition – he recently received an honorary doctorate degree from Lund University of Sweden.

It is Poon's greatest desire to enhance life for others through his research of centenarians-those over the age of 100. He aims to unlock the secrets of these "expert survivors."

According to Poon, the study of centenarians can be a challenge because the mortality rate is 50 percent per year. "It takes time to study them," he said, "but you never know how long they'll have."

To maximize his research, Poon frequently takes advantage of travel opportunities to examine aspects of Gerontology across the country and across the world, oftentimes collaborating with other scholars.

Sponsored by the U.S.-Israel Bi-National Science Foundation, he led a group of senior and junior professors to Israel last January to study alongside a similar group of Israeli professors and graduate students Together they examined the roles of adversity among holocaust survivors and war-related post trauma patients. The goal was to increase understanding of how adversity impacts well-being. In Poon's opinion, the greatest purpose is that each group "can really learn from each other."

Poon also conducts research into the quality of centenarian life. On another journey in May to the University of Kentucky, he led a team of researchers and clinicians in a clinical consensus conference. As part of his work for the Centenarian Study, they sought to "determine the correlative relationship between neuropathological and neuropsychological findings among those with Alzheimer's disease and those untouched by the condition," said Poon.

"The benefit is not just to live long," he said, "but to maintain a good quality of life, as well."

Institute for Health Management and Mass Destruction Defense



Evaluating Emergency Management Techniques

By Michael Tannenbaum



Michael Tannebaum is a reporter with the Summerville Journal Scene in Summerville, SC. He received his MA degree from the Grady College of Journalism and Mass Communication in May, 2008.

Only three weeks before a tornado ripped through downtown Atlanta—with 130 mile per hour winds that injured dozens and ravaged much of the city—18 University of Georgia students conducted a simulation to evaluate how 12 different Northeast Georgia hospitals would operate if this precise disaster occurred.

The tornado drill simulated how the hospitals would handle tornados touching down in several different locations. It also replicated how the casualties would be routed to different hospitals in the area. "No one hospital could handle all the causalities," says Cham Dallas, professor and director of the IHMD. "Athens Regional and St. Mary's may have 300 beds but they might only have 30 or 40 that are open at a given time and when you have 300 or 400 people show up, what are you going to do?"

The students from the institute for health management and mass destruction defense, recently became certified hospital evaluators. They used a set of criteria to assess how the hospitals performed.

The scenarios that the hospitals role-played, were sent through a web-based program called Live Process, which the hospitals use to communicate with one another. For example, if a hospital falls short of a critical resource, the hospital uses the program to contact the regional coordinating hospital to determine how to obtain the resource.

Most of the students who participated in the exercise were evaluators; however, one student, Chris Hurst, played the role of Lead Controller, which required him to run the exercise. "I monitored the flow of the exercise to make sure that it wasn't get-

ting out of hand, where the [scenarios] aren't coming so fast that the hospital can't handle its responsibilities or that it isn't moving so slow that the players find it too easy," Hurst says.

Adam Gobin, one of the UGA students who was an evaluator at Habersham County Medical Center, says the simulation was invaluable for both the hospitals and the students. "It lets students see how rigid the accreditation process is for the disaster management part of the hospital," Gobin says. "The hospitals really have to be on their game and it forces the hospitals to learn their policies and see if they meet national accreditation standards as set forth by the Joint Commission."

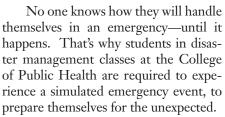
Hurst echoes Gobin's sentiment about the importance of the simulation. "Exercise preparedness is an iterative process," Hurst says. "You only get better by practicing, writing a report, seeing what was good and bad, then doing it all over again."

After the exercise, the students completed reports, which graded the hospitals' performance, highlighting strengths and weaknesses. The hospitals treat these reports very seriously. "The hospitals may make a large decision on their staffing, their equipment, or even the physical structure of the hospital based on a single report, particularly if it augments something they were already suspecting," Dallas says.

Although not a perfect science, simulations are effective and accurate tools for modeling disasters, which allow the hospitals to better prepare in the event that a disaster, such as a tornado, does strike – a reality that was magnified by the recent storm that decimated parts of Atlanta. "A tornado occurring in Atlanta shortly after the simulation was eerie," Gobin says. "But it shows why the simulation was so important."

Students Training for Disaster

By Christy Fricks



It is Thursday afternoon, and twodozen college students are gathered outside on the back lawn of the Athens Clarke County fire training facility. From a distance they appear to be simply hanging out: standing in groups or sitting alone quietly. Then you notice that some of them have open wounds on their faces, arms and legs. A few of them are groaning softly as if in pain, others are limping and yet another is wandering around looking confused.

These are students from the College of Public Health's basic disaster training for health care professionals class and it's sister component in the College of Pharmacy. While the students attend separate classes, they often participate in training exercises together. The students are divided into two groups: victims and responders.

Teachers Edward Rollor and Catherine White have prepared a mock scenario, which is kept secret from the responders and only announced to those who will play the role of victims, in the last 15 minutes before they begin.

On the responder side, students are assigned positions such as security, administrators, or emergency medical care professionals. Meanwhile, victims also receive defined parts to play such as: hysterical patient, wounded mother with child, or the overly helpful vol-

Rollor and White have scripted two students to be the 'biological ter-



rorists' spreading an unknown infectious agent. As in real life, the goal of the responders is to use random clues to discern the situation, in order to craft an effective, efficient plan for dealing with the situation.

, Bart Lino, a 1st year Masters of Public Health graduate student, will play a vital role in today's simulated event.

Lino has been assigned to administer the Strategic National Stockpile. Lino understands the importance of his role, "I have to make sure we have drugs in the proper quantity and effectively dispense them," he says. But like many of the students, Lino would prefer the 'fun' of playing a victim.

A whistle sounds the beginning of the event as "terrorist" CPH student Stephen Thomas approaches a police barrier. A first-year student, Thomas' left hand is covered in yellow slime; in his right, he hides a grenade. As he stumbles forward, he slips in and out of character: alternately laughing with other classmates and yelling, "help me" to attract the attention of the "police."

As the mock police approach Thomas, and see both the fake grenade and his oozing hand--the chaos begins. What will follow is a series of stilted responses, as the students attempt to properly deal with the event. They are responsible for all parts of the emergency situation: quarantining victims, providing medical care, dealing with government officials, hazardous waste teams, and even the mock press team that has been recruited for the event.

"They are always so surprised; it moves like a glacier," says Dallas, referring to the painfully slow action happening among the 50 or so students involved in the event.

Dallas, who is assisting with organizing the event, says the students in the HPAM 7350 class learn through drills, functional exercises like the one being held today and even full scale scenarios at local hospitals.

While instructors Dallas, Rollor and White set-up the exercise and oversee the event, they do not interfere or guide the students as it is happening. "You learn a lot from bad responses," says Dallas.

The scenario, as much as possible, happens in real time, which means it could take anywhere from 1 -3 hours for it to reach a point of 'resolution' where all responders are fully engaged and some semblance of order has been established.

Afterwards, there will be a "hot wash" of the event says Dallas. "We get together and say this is what you did right and this is what you did wrong."

Mike Strohsnitte, a third year pharmacy student, says the class exercises have given him a greater understanding of disaster events. "It definitely shows how chaotic it can be and that it is hard to maintain control," he says.

Students who take the CPH basic disaster training health professionals class in the spring receive certification in both the Red Cross' Basic First Aid and the American Medical Association's Basic Disaster Life Support (BDLS). Students who take the advanced component in the spring receive certification in Advanced Disaster Life Support (ADLS) as well as four successive Federal Emergency Management Certifications (FEMA).

UGA's College of Public Health provides the only student training for BDLS and ADLS in the state of Georgia.

Honor Roll of Donors

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The College of Public Health proudly recognizes the following alumni, friends, corporations, and foundations who have supported our academic programs, faculty and students over the past fiscal year (FY08). We thank you for your support! To make a gift to the College of Public Health, please contact our development office at 706-542-2590.

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Questions? Please contact Kate Lindsey O'Reilly in the College of Public Health Development Office at 706-542-2590 or krl@uga.edu.

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Kate Lindsey O'Reilly, **Director of Development**

Five years ago, a mother concerned that the chemical trichloroethylene (TCE), a cancer causing solvent being used as a degreaser by a nearby industrial plan, was contaminating the air in her neighborhood contacted the department of environmental health science for help. Students in the department received \$1000 to take air samples and analyze them to determine whether TCE levels were too high. The sampling project verified that the toxicant was contaminating the air and armed the mother with the information she needed to successfully lobby the plant to stop its use of TCE.

This sampling project was worth much more than \$1000 to the people living in the affected neighborhood. While not all funding for public health will pay such dividends, a gift to the College of Public Health support fund provides the college the flexibility to meet current and unforeseen needs.

Our research and outreach is advancing scientific discovery into the prevention, causes and cures of our most pressing public health concerns. Your donation to the College of Public Health could provide the seed money needed to eradicate Tuberculosis world-wide. Christopher Whalen, M.D., a professor of epidemiology, is currently researching how to accomplish this goal.

A gift to the college could also help prepare the country in the event of a nuclear explosion by supporting health policy professor, Cham Dallas's, work at the institute for health management and mass destruction defense.

Support for the college could also help us identify the areas of Georgia that have the most needs for cancer prevention. John Vena and Claire Robb, professors of epidemiology, have both been named cancer scholars by the Georgia Cancer Coalition.

Our mission is to promote health in human populations through innovative research, exemplary education, and engaged service dedicated to preventing disease and injury within the state and around the world. I encourage you to use the enclosed envelope to make a gift that will support this mission. Please know each gift makes a difference, and your commitment to our college is greatly appreciated. To learn more about our research and outreach and ways to support our mission, please contact the development office at 706/542-2590 or krl@uga.edu.

Donor Spotlight:



usan C. Waltman, who received her bachelor's degree in sociology and master's degree in social work from the University of Georgia and law degree from Columbia, has done a great deal for the field of public health. She is the Executive Vice President and General Counsel for the Greater New

York Hospital Association (GNYHA); she is on the board of the Public Health Association of New York City; and she is recognized for her efforts in the area of public health emergency preparedness.

But Waltman's commitment to improving public health is more than a professional responsibility. She currently serves as chair of the dean's advisory

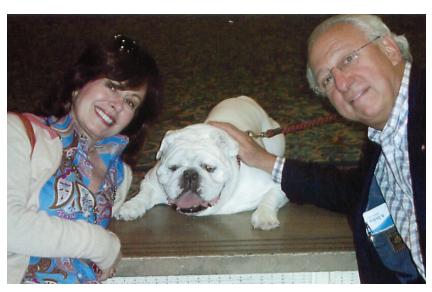
council at UGA's College of Public Health and has pledged to give \$100,000 to establish the Fund for Public Health Outreach. She has also established a summer internship program at the Greater New York Hospital Association through a gift to UGA's Honor's Program. Interns participating in this program work on initiatives in the areas of health policy, health management, and public health.

Waltman is compelled to support public health on a personal level as well as a professional level because of the vast disparities in health outcomes, health behaviors, access to health care and quality of health care that weigh disproportionately on minority and underserved communities. She has been instrumental in helping the College of Public Health build the infrastructure necessary to address the public health issues within the State of Georgia, the region and beyond. Through her donation of time, energy, ideas and her personal financial gift, she has helped to enhance the college's capacity to respond quickly to the changing needs of Georgia's diverse and underserved populations.

r. Harold S. Solomon, a physician practicing in Boston, MA, has been on the "Best Doctors in America" list since 1994; he is an associate clinical professor of medicine at Harvard Medical School; and he has too many national honors and awards for his contributions to medicine to list. But when Solomon is asked to describe himself, he simply says that he is "a product of Georgia Public Schools"—he attended grade school and high school in Savannah, earned his bachelor of science from the

University of Georgia in 1961 and completed medical school at the Medical College of Georgia. His wife, Milly Pincus Solomon, also attended UGA. Grateful for the education he received in Georgia, Solomon wanted to give back to his home state.

Having received his medical education in Georgia, Solomon was well aware of the public health concerns facing the state. He also wanted to give a gift that could reflect his connection to UGA's Jewish community, so Solomon pledged to give the College of Public Health \$50,000 to establish a Maymester course taught by a public health expert from Israel—Israel has been a pioneer in the contemporary concept and practice of public health and as a result has one of the world's healthiest populations. The first class, a course on emergency preparedness, will be offered this May and will be taught by someone from the School of Public Health at the University of Haifa in Israel.



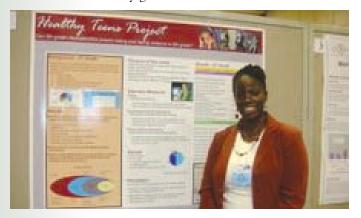
Award Recipients

Simeon Receives Award from Blue Cross Blue Shield of Georgia

Renee Simeon, a second year Master of Public Health student with a concentration in health promotion and behavior, was selected as the College of Public Health's first recipient of an award from the Blue Cross Blue Shield of Georgia Foundation Master of Public Health Fund. Simeon usedthe award money to present a poster at American Public Health Association's annual meeting that took place in San Diego in October.

The poster was titled, "Healthy Teens: Can 6th grade characteristics predict dating and dating violence in 9th grade?"

The Blue Cross Blue Shield of Georgia Foundation seeks to support community, state, and national initiatives that address two strategic signature programs: covering the uninsured and healthy generations.



Beard Named First Recipient of Connie Lloyd Scholarship



The College of Public Health Professional Degrees Committee recently named Stephanie Beard as the college's first the recipient of the Connie Lloyd Scholarship.

Stephanie is a second vear Master of Public Health student with a concentration in health policy and management.

spring, Stephanie completed an internship with the Madison Area Resource Team, which made her interested in developing a way to provide prenatal care for teen moms while providing insight against risky behaviors. She is evaluating new policies for providing such care as the final project for her degree. After graduation, Stephanie hopes to obtain a management position in a hospital known for its dedication to maternal health.

The scholarship was made possible by a gift generously donated by Don and Sue Lloyd and their children in honor of Mr. Lloyd's mother, Connie Lloyd.

The Connie Lloyd scholarship is awarded to a student in the College of Public Health with a program of study that includes course work, outreach or internships focused on women and health.



The Georgia Power Environmental HealthScience Scholarship was established to provide scholarships in Environmental Health Science within the College of Public Health. Scholarships will be used to recruit members of diverse backgrounds and to bring new students to UGA to major in Environmental Health. To be considered for this scholarship, students must apply as intended Environmental Health majors on their UGA application and be enrolled fulltime during the fall and spring semesters. Students also complete their internship degree requirements at Georgia Power. The 2008 - 2009 recipients are Marla Mae Martinez, Darryl Tricksey and Ariell Lawrence.



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The University of Georgia Global Health Symposium 2009



Social Determinants of Inequalities in Health II: Continuing the Global Conversation

March 24th-25th 9:00 AM - 6:00 PM

Paul D. Coverdell Center for Biomedical Health Sciences
The University of Georgia

Sponsors: The College of Public Health at the University of Georgia, The Biomedical Health Science Institute at the University of Georgia, W.K. Kellogg

Health Scholars Program

The two-day symposium will bring health experts from the United States, and France to the University of Georgia campus in Athens, Georgia, to exchange information about various methodologies and paradigms for understanding the contributions of socio-economic status, socio-political environment, and race and ethnicity to inequalities in health.