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Boston University
Improving Birth Outcomes Globally
Professor of International Health Deborah Maine is recognized as an innovator in the field of reproductive health.

Associate Dean for Students Gail Douglas, who has devoted her career to public service, plans to retire in June.

Retired Navy physician Robert Burke ('98) was among a group of health care providers who evaluated and treated Indonesians following the December 2004 tsunami.

Alumni Award winner Jeannine Rivet ('81), a former nurse, has risen to the highest ranks of the health care industry.

The photographs of the late Carmen Urdaneta ('97) capture the faces of Africa and Latin America.

Health Sphere talks with Seth Welles, associate professor of epidemiology, about BUSPH's new Lesbian, Gay, Bisexual, and Transgender Research Program in Public Health.

Boston University welcomes new leadership.

Experts considered the long-range future of public health at the inaugural conference of the Global Health Initiative at Boston University.

On the cover: The photo of a Tanzanian mother and child was taken by Carmen Urdaneta ('97), a communications officer for the nonprofit Management Sciences for Health (MSH), who lost her life while working in Afghanistan. The photograph was reprinted with the permission of MSH.
The arrival of new University leadership brings with it energy, enthusiasm, and the anticipation of institutional progress. For those of us on the Medical Campus, the feelings were multiplied by two with the arrival, in May, of Karen Antman, new provost of the Boston University Medical Campus and dean of the BU School of Medicine, and, in September, of Robert Brown, the University’s new president.

Dr. Antman is an accomplished clinical oncologist who understands the central role that BUSPH can play—through teaching, research, and community involvement—in the overall advancement of the Medical Campus. She is working to involve BUSPH in major campus-wide grant initiatives that will bolster the School’s commitment to transdisciplinary collaborations.

President Brown, a chemical engineer who came to BU after serving as provost at MIT, is also a champion of cross-disciplinary collaboration that will link the activities of the Charles River and Medical Campuses. In November he welcomed participants to the first international conference on the future of global health, sponsored by the BUSPH-based Global Health Initiative (GHI) at Boston University. (See page 16.) This impressive four-day effort, spearheaded by Gerald T. Keusch, GHI director and associate dean for global health at BUSPH, not only gathered health and health science and policy experts from around the world, but also engaged distinguished faculty from the Charles River Campus and health experts from BUSPH and the Medical Campus. President Brown told participants that the best work a great research university can do is to focus its talent and resources on solving pressing issues that face the world. It was gratifying to have BUSPH so centrally involved in this effort and to know that the School can help build exciting collaborations between the two campuses.

We have also undergone changes in leadership at the School. Professor Gary Young accepted my offer to become acting chair of the Department of Health Services, taking over from Mark Prashker, associate dean for research and institutional development. After four years of exemplary service, Jonathan Howland stepped down as chair of the Department of Social and Behavioral Sciences in December. Associate Professor Alisa Lincoln is chair ad interim while a search is conducted. We are also facing the bittersweet task of saying good-bye in June to Associate Dean for Students Gail Douglas, who will retire after eighteen years at BUSPH. Gail, who also is acting associate dean for public health practice, is a vastly talented public health practitioner. Please don’t miss our tribute to her on page 4.

One last note on leadership change: We are delighted to have former Medical Campus Provost Aram Chobanian back on campus after his two-year stint as BU president ad interim. Wisely, the BU Board of Trustees has honored his service by declaring him the University’s ninth president. A gifted expert in hypertension, President Emeritus Chobanian has returned to teach, conduct research, and work with students and faculty.

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A Creative Eye on Reproductive Health

Professor Deborah Maine Wants to Make BUSPH an Academic Center of Excellence in the Field

By Taylor McNeil

Just out of college, Deborah Maine got a dream job for someone interested in anthropology—she worked for Margaret Mead at the American Museum of Natural History in New York. "But soon," she says, "I wanted something more action-oriented." With that goal in mind, she went back to school to get an M.P.H. and later earned a doctorate in public health. Setting to work, her focus in international public health was women's health. From 1987 to 2005 she directed two programs on maternal mortality at Columbia University that have made significant improvements in maternal health care in the developing world. In June 2005 Maine joined BUSPH as a professor of international health and a member of the Center for International Health and Development (CIHD), teaching reproductive health classes and starting the next phase of her work.

"Deborah is recognized as a world leader in thinking creatively about some of the crucial issues facing the reproductive health agenda," says Associate Professor Jonathon Simon, chair of the Department of International Health and CIHD director. "She has proven herself over the last twenty years to be an innovator, somebody willing to take thoughtful, alternative positions. She's well trained in epidemiology, and therefore she wants to bring an evidence base to the study and practice of reproductive health, and for all those reasons, she helps us try to strengthen our program in this area."

Maine hopes to build a strong teaching and research program on reproductive health in developing countries. "Reproductive health conditions account for a large proportion of the global burden of disease—more than one-quarter of the burden for women and infants in developing countries. During my career, I have worked intensively on several aspects of reproductive health, especially family planning and maternal survival," she says. "There is a wealth of expertise in the Boston area on reproductive health, but no strong academic program that draws on that expertise. I would like to see BUSPH become an academic center of excellence in this field, working with other institutions in the U.S. and around the world."

She's long been interested in that point where evidence and policy meet—or don't. One of those areas in the mid-1980s was international maternal and child health (MCH) programs. "When I looked at maternal mortality, it was clear what women died of—the same things they died of in the 1600s—hemorrhage, infection, obstructive labor. And when you looked at maternal and child health programs, you saw they did nothing about the things that killed women." She and Allan Rosenfield, dean of Columbia's Mailman School of Public Health, published an article in Lancet in 1985—"Where's the M in MCH?"—that took the international health field to task for this deficiency and sparked a new phase in maternal health programs in the developing world.

With funding from the Carnegie Foundation, she directed Columbia University's Prevention of Maternal Mortality program. It provided technical support to a network of eleven multidisciplinary teams in West Africa from 1987 to 1996. The typical project would be for a team in, say, northern Sierra Leone to go to a district hospital, find out why a maternal health program wasn't working and what needed to be fixed. "Once the hospital was functioning better, they'd move out to health centers and the community. There were lots of great community activities, but not until the health services were working," Maine says.

After ten years, the result was a greater focus on maternal health care, but it wasn't enough for
Maine thought the project would work better if run by field agencies on the ground. “The world did not need Columbia University projects; it needed the whole ship to be turned. I realized that the thing to do was to involve big agencies like UNICEF and CARE, which already had field offices and were going to be there for a long time, but didn’t necessarily do much with health facilities,” Maine says.

“We went to these agencies and said we were going to focus on emergency obstetric care,” she says. “There would be activities in the communities as well, but that was the core of what we wanted to do.” Maine, who directed the Averting Maternal Death and Disability (AMDD) program, says the agencies were invited to design their own projects, and in the end, the eighteen biggest projects covered a population of 179 million people. Within two or three years in these project sites, the capacity to provide emergency obstetric care doubled.

Improving maternal mortality rates is often a management issue, Maine says. “So often we’d go to a hospital and they’d say, ‘We could do a C-section, but the light is broken over the operating table.’ So really, for want of some small things, lives were being lost.” The solution was to address “things like maintenance, clinical supervision, problem solving at the facility, and awareness on the part of the local ministry.”

The Gates Foundation asked a team of experts to evaluate the program, and they reported in 2004 that AMDD “helped to fill a significant gap in global programming for maternal health. AMDD’s technical, programmatic, and financial assistance to implementing partners has greatly improved the quality and effectiveness of maternal health services. The worldwide scale of the AMDD project is unprecedented among safe motherhood programs.”

Now at BUSPH, Maine is still spending about 30 percent of her time as a senior technical advisor to AMDD and is teaching a class on reproductive health. “She’s got the challenge to further strengthen our course offerings and our teaching in this area and to develop an applied research program that complements that teaching and contributes to the global knowledge base on reproductive health issues,” says Simon.

“I’m looking forward to continuing the maternal reproductive work, but also building up some new activities here,” Maine says, pointing to the area of reproductive health screening, which she says is often misapplied. “The gap between the evidence and the programs is what gives me the energy to focus intensively on something.”

Deborah Maine, professor of international health, is considered a leader in the field of reproductive health. Maine. By then “it was clear that many agencies really didn’t want to deal with the health system.” They were comfortable working on community projects, but working to improve health centers and rural hospitals was seen as very difficult. Moreover, Maine says, there was an assumption that life-threatening obstetric complications can mostly be prevented or predicted, which is not true. Women in the U.S. develop complications, but they don’t die, because they get good, prompt medical care. Thus, preventing a maternal death requires good emergency medical care. Maine and her colleagues at Columbia decided to confront the problem head-on. With a large grant from the Gates Foundation, they devised a program to directly address poorly functioning emergency health services in hospitals. Gates provided $56 million from 1999 through 2005 and recently awarded $10 million for the second phase of the program.
In June Gail Douglas will retire as associate dean for students, acting associate dean for public health practice, and associate professor of health services at BUSPH. It’s no wonder that Dean Robert Meenan expects the School will need three people to replace her. “The three of them together,” he adds, “will be hard-pressed to match Gail’s contributions and impact.”

Neither her eighteen-page résumé nor her packed computer calendar can begin to describe the breadth of Douglas’s contributions to the School and to public health. Colleagues say Douglas (SON’68, SPH’88), who began her career as a nurse, has spent the last forty years fighting health disparities, building consensus, and supporting and mentoring students. In addition to her three roles, she was, until January, director of the education core of the Partners in Health and Housing Prevention Research Center at BUSPH, a CDC-funded project that helps improve the health of public housing residents. She is a member of several state panels, including the Massachusetts Department of Public Health committees on hospital preparedness and bioterrorism planning and the department’s Drug Diversion Task Force, and a consultant to the state attorney general’s office on Medicaid fraud and patient abuse and to the Board of Registration in Nursing on standards of care. Not to mention an attentive grandmother of four.

Meenan says Douglas has helped to establish and maintain “the organizational culture of BUSPH as a humane and caring place to learn and work.”
Gail Douglas, associate dean for students, acting associate dean for public health practice, and associate professor of health services, has helped make BUSPH "a humane and caring place to learn and work," according to Dean Robert Meenan.

"As a nurse and a BUSPH alumna," Meenan says, "she has brought a wonderfully effective combination of educational backgrounds to her work. As a person with experience in health administration and public health, she has played a major role in keeping the School connected to the real world of public health. As a committed advocate for students, she has helped to keep the education mission of BUSPH front and center."

Robert Horsburgh, Jr., director of the prevention center and chair of the Department of Epidemiology, agrees. "In some ways, she's the conscience of the School," he says. "She keeps us on track."

Douglas has been successful, says Horsburgh, because she keeps her word and people trust her. "If she says she'll do something, she sticks with it for as long it takes to get it done." He adds, "She is the ultimate consensus builder. She's a team player, she works hard, and she focuses on the goal of getting the job done and getting it done right. And whenever a student has a problem, it always seems to end up on Gail's desk, and Gail takes care of it."

She's also dedicated to public service, says David Ozonoff, professor of environmental health. "She is committed to doing what is right, not just what is possible or popular. Combined with her managerial skill, this has been an important piece of making BUSPH known for its expertise in the service of the public's health."

Douglas deflects the praise. "You are only as good as the people around you," she says. "Were it not for wonderful academic and teaching colleagues, terrific health services department administrators and staff, my student- and practice-oriented department directors and assistant dean, and all of my project coordinators over the years, I would not have succeeded." She is retiring now, she says, because it's the right time. "I have family priorities."

Problem Solver

After earning a bachelor's from the now-closed BU School of Nursing, Douglas spent eighteen years at Norwood Hospital, working her way up from staff nurse to assistant director of nursing and director of medical/surgical nursing. (In 2004, she became a trustee.) She left to pursue an M.P.H. in health law at BUSPH and, on graduating, was recruited by the School to join the health services faculty. Over the years she has been chair ad interim and associate chair of the health services department, acting associate dean for practice, and, in addition to her health services classes, has taught courses on health management, policy, and quality in the BU Schools of Medicine and Management. She received the 1995 BUSPH Alumni Award, the 2002 Norman A. Scotch Award for Excellence in Teaching, and a half-dozen other BUSPH teaching awards.

Throughout her career, Douglas says, she's never been afraid to confront complex and seemingly intractable problems. In 1990, after a series of newspaper articles revealed a high mortality rate among African-American infants in Boston, she helped to develop the School's M.P.H. Nurse-Midwifery Education Program. "The OBs were leaving their practices because of high malpractice insurance rates, so pregnant women from at-risk communities had no one to go to," she recalls. "They were coming in to deliver very hypertensive, overweight; they had low-birthweight babies with upper-respiratory disease."

The program ended last year because of difficulties sustaining it, Douglas says. "It was very sad, but I think we've infiltrated the market, and we've increased the number of nurse midwives by vast numbers."

Another achievement was to formalize a student advising system that previously was ad hoc. "As a result," she says, "we not only have faculty..."
advisors assigned to students, but we have consistent documents that describe the departments and the educational program, a how-to for advisor and advisee. I'm a firm believer in structure. We need to have consistency and expectations; we need to set the bar, and if we don't set it, no one's going to aspire to reach it.

She says her approach to working out problems is to be firm and up-front about what she expects. "I'm a loud voice. I'm not superaggressive, but in my stand or my principles, people know exactly what they need to do." Tacked above her door is a small Red Cross flag, designating her office as a kind of safe zone. "People come in and they tell me the truth, they tell me their needs—and I'm not going to say it's just students—and we try to problem solve, whether it's getting them to resources, getting them hooked up with the appropriate advisors, confronting their own demons, becoming accountable for their actions. I don't believe in spoon-feeding students. It's getting them to a place where they can act and not be paralyzed by fear—fear of failure and sometimes fear of success, fear of completion, because the world may be expecting different things from them."

More than anything, Douglas says, she has been "a loud voice that reminds the School that it is a school, and with that comes the needs of students. We need to remember the needs of students. That will be on my tombstone." It may seem obvious, but it's an ongoing issue in academic institutions, she says. "Students are not going to be, for the most part, professors, so we need to give them the skills that are needed in the real world."

**In the Community**

Douglas's contributions go beyond the Talbot Building. She often testifies before the Massachusetts legislature and regulators on issues such as midwifery, prescriptive authority, and infant mortality. She was president of the Massachusetts Public Health Association. She's worked with the state Department of Public Health, the attorney general's office, and groups like the Massachusetts Extended Care Federation and the Massachusetts Hospital Association, as a management consultant for nursing homes and other caregiving organizations that were failing to protect their patients. "Each case is different," she says. "But there are principles that span all these things, and they are, what would you want? What would you need?"

In 1997, at the request of the governor's office, she conducted an assessment and recommended improvements in health care at the Suffolk County Jail. "The study is confidential," she says, "but it forced critical improvements to the health of the detainees." She also was part of a team that evaluated the health care needs of children in the custody of the state Department of Social Services. "The health services are fragmented and difficult to navigate," she says, adding that the legislature voted to increase the budget of health services. "That was a victory."

Douglas says her contributions to the field amount to "protecting people where they live."

"I don't believe in spoon-feeding students. It's getting them to a place where they can act and not be paralyzed by fear..."

—Gail Douglas

It's protecting their rights to be free and to receive what we know is good population-based health care or clinical care. My contribution, I think, is an affirmation to be courageous. I think I received a gift, and I'm not sure where it came from. It's a gift that's made me strong, strong-willed, principled. And that's one of the reasons I came here. I gravitated to the School, particularly to the people I knew stood up when it was important for them to be counted.

Douglas has plans for her retirement, some more domestic than others. "I'll make doll clothes," she says. "I just sewed two dresses for my granddaughters." She almost certainly will keep her hand in public health. "I'm sure I'll do some special projects," she says. In fact, she adds, "The AG's office is already calling."
Robert Burke ('98), a retired Navy surgeon pictured here in Banda Aceh, Indonesia, after the December 2004 tsunami, was part of a medical team that evaluated and treated approximately 20,000 Indonesians.

Retired Alumnus Offers Hope

By Meghan Noé

In more than twenty years as a Navy physician, Robert Burke handled the gamut of medical issues, from delivering babies to consulting the U.S. Marine Corps on the proper response to chemical and biological terrorism. As a surgeon attached to the Marine Corps during the Gulf War, Burke tended to Kuwaiti refugees as well as injured Iraqi prisoners of war, and in the early 1990s, while on temporary duty with the Coast Guard, he gave emergency medical care to hundreds of Haitians and Cubans who had braved the Caribbean waters attempting to enter the United States illegally. But arriving in Banda Aceh, Indonesia, after the December 2004 tsunami, he faced a catastrophe worse than any he had seen.

“I have been involved in areas of great destruction as a result of war-related issues, but I had never seen destruction of this level,” says Burke ('98), who arrived in the region aboard the United States Navy hospital ship Mercy one month after the tsunami. “Much of the architecture had been reduced to ankle height many miles from shore. Many of the natives I met were the sole survivors of their families. Thousand of people remained buried in the rubble even after we arrived, with red and white flags marking the spots where bodies were known to remain.”

Burke, who retired from the Navy in 2003, was among a group of health care providers recruited by Massachusetts General Hospital to staff the ship, which is operated by the international health assistance organization Project HOPE. “The recovery will take decades, but we went with the intention of doing the very best we could in the short time we were there,” he says. “The only complaint I ever heard from volunteers was that they wished they could do more. There was never a complaint that they were asked to do too much.” According to Project HOPE, Burke and other members of the medical team evaluated and treated approximately 20,000 Indonesians in the tsunami’s aftermath.

Because the ports in Banda Aceh had been destroyed, the Mercy was stationed several miles offshore. On land, Burke coordinated the airlifting of patients by helicopter to the ship, which had full surgery, laboratory, X-ray, and pharmacy capabilities. While aboard the ship, he put to use his training in public health, sitting on committees to develop food and water sanitation measures, immunization and maternal health programs, and other initiatives. “My M.P.H. program prepared me very well for general health issues in many different environments, including this one,” he says. “Every day of my practice of medicine and my military service, I was able to use what I learned at the School of Public Health.” Burke, who has been a guest lecturer at BU, plans to pursue a doctoral degree at BUSPH and hopes to develop policies on local, national, and international public health issues.

At a White House reception last July, President George W. Bush honored Burke and other members of Project HOPE for their response to the tsunami. The recognition was unexpected, but appreciated, Burke says. “It was an honor for me to serve with the medical and maritime professionals from the many countries that assisted the people of Banda Aceh, who have endured one of the greatest natural disasters in recorded history and yet remain determined to rebuild, to cherish their relationships with those who survived, and to look to the future.”
A Health

By Cynthia K. Buccini

After graduation from high school in Woonsocket, Rhode Island, in the mid-sixties, Jeannine Rivet, like many women, considered three career options: teacher, secretary, or nurse. "I didn't know which skills to develop at the time, but I liked to be with people and liked the challenge of thinking about things," she says. "Nursing was taking care of people and dealing with something new with every person." Then there was her father's advice: "If you're a nurse, you'll always have a job," he told her. "And he's right," she says. "I've always had a job, not exactly the way he described it, but it's worked for me."

Indeed, Rivet ('81) began her career as a nurse in Rhode Island, and over the next thirty years has risen to the highest ranks of the health care industry. She is executive vice president of Minnesota-based UnitedHealth Group—the second largest health insurer in the country—and is the company's highest-level female executive. She has been recognized both inside and outside the industry as an influential leader in the health care field. Fortune magazine has named her one of the fifty most powerful women in America, and she's been honored by the American Association of Health Plans and Minnesota's City Business as well as her alma mater: in 1999 she received a BUSPH Distinguished Alumni Award and in 2006 a Boston University Alumni Award. Throughout, she's been guided by the same principle: to help people get the care they need when they need it and to make that process easier.

These days, with health care more complex than ever, that's no easy task. "For every new thing that comes out, nothing goes away—paperwork, drugs, technology, treatment opportunities," says Rivet, vice-chair of the BUSPH Board of Visitors. "It's very confusing for consumers today, and the goal, no matter which part of the organization I'm in, is to keep trying to simplify that experience."

UnitedHealth Group is a holding company with five business segments. Rivet works with all of them in areas such as customer and public relations,
Former Nurse Jeannine Rivet ('81) Has Risen
to the Highest Ranks of the Health Care Industry

and she is UnitedHealth Group’s primary representa­tive to the pharma­ceutical industry. She has led or worked with all of the United business seg­ments and is now focused on its strategic business relationships.

From Nurse to Executive

After receiving a diploma from Rhode Island Hospital School of Nursing, Rivet worked as a pediatric nurse and supervisor before earning a bachelor’s in nursing from Boston College. In 1975 she began working for a Rhode Island HMO as the nurse in charge of its pediatric clinic, and during that time, decided to pursue a degree in public health at BU. The first person she spoke to was Barbara St. Onge, who recently retired as director of admissions and alumni relations. “I found her to be so personable and excited about the program,” Rivet says, “and I left thinking, ‘This is what I need to do.’ It’s exciting, it’s a new program, I knew I’d be meeting other health professionals, which I thought would be useful and interesting, and I liked the fact that I could do a concentration in health care administration.”

She has maintained a close connection to the School ever since. “I had an experience here that I always felt was a turning point,” she says. “The people I met influenced my life, the program supported me as a student, the content expanded my base, and the timing was perfect—it was a new program, open to feedback from us, the students. And I’m still giving feedback.”

When she completed her M.P.H. in 1981, Rivet was immediately sought out by an HMO in Washington, D.C. She’s been recruited for every job since. From Washington, she moved to Colorado as senior vice president of Peak Health Plan. “I had always run clinical oper­ations, making sure people got the services and the follow-up they needed,” she recalls. “My new colleagues in Colorado wanted me to shift gears and run an organization.” The job enabled her to learn how to head a business. “How do I make sure that we’re selling the right types of services that people want and can use? How do we make sure they understand what they have available to them and how we deliver on our promise to make sure it’s working properly?” Following a yearlong stint at Prudential in Boston, she joined United as a vice president, in 1990.

Rivet says she still applies the skills she learned as a nurse to her current work. “We’re doing the right thing for people at the right time,” she says. “We provide the environment to help individuals by giving them tools and information so they’ll make the right decisions for themselves.” Her biggest challenge, she says, is execution. “How to stay focused, to actually do what you want to do, which is impactful in a positive way to the whole health care experience,” Rivet says. “It’s executing a plan that demonstrates results and adds value. That has kept me awake for years and will for many more, as there are always opportunities to improve our services and systems.”
A talented photographer and dedicated communications professional, Carmen Urdaneta ('97) amassed a stunning portfolio of photographs during the six years she traveled around the world as a communications officer for Management Sciences for Health (MSH), a nonprofit international health care organization based in Cambridge, Massachusetts. She was on assignment in Afghanistan in February 2005 when she and two of her colleagues died in a plane crash thirty-five miles outside Kabul.

Urdaneta's photographs, from Africa and Latin America, were featured this past fall in an exhibition sponsored by Rx for Survival—A Global Health Challenge, a collaborative media presentation on global health by PBS television, Time magazine, National Public Radio, Penguin Press, and Johns Hopkins University. The exhibition, which included the cover photo in this issue of Health Sphere, was displayed in the Talbot Building at BUSPH and at other locations throughout Boston.

Clockwise from bottom left: a Nicaraguan mother and her family; a Nicaraguan girl with supplies; a South African mother and her child; a group of South African boys; a South African boy.

The photographs were reprinted with the permission of MSH.
**Understanding the LGBT Community**

A Conversation with Seth Welles

Remarkably few organized research programs focus exclusively on the health issues faced by members of the lesbian, gay, bisexual, and transgender (LGBT) community, other than HIV and other sexually transmitted diseases. This means that reliable data regarding the concerns and experiences of this visible yet underserved population are not available to those who shape health policy. Seth Welles, associate professor of epidemiology, is addressing this gap through BUSPH's new Lesbian, Gay, Bisexual, and Transgender Research Program in Public Health. Welles, the program's founder and director, discusses with Health Sphere the importance of applying a scientific approach to understanding the public health needs of this community.

Q. Why does the LGBT community need to be studied as a group?

Over the past twenty years, only disparate, disjointed efforts have been made to conduct research on the health care services available to the LGBT community, and the results of these studies do not inspire a great deal of confidence in terms of their methodology. For one thing, studies of HIV and sexually transmitted diseases in gay men have been based on an extremely limited population, with biased research and sampling. Similarly, studies that have examined the use of alcohol and drugs among lesbians have been based on very selective samples. This type of limited research fails to paint an accurate picture of the ongoing health problems in these communities. There is no question that a far more focused, scientific approach to conducting research is necessary.

We know that the LGBT population is more likely to engage in certain risky behaviors, for example, but we need to identify the factors that influence people to take such actions. Properly administered surveys would allow researchers to identify the percentages of LGBT students in a general student population, for instance; from there, we could correlate the prevalence of certain behaviors to specific adverse outcomes, such as an increased incidence of STDs, alcohol abuse, smoking, unwanted pregnancy, and so on. We want to learn more about the population, discover what causes people to do unsafe things, and then design interventions that will help them.

Q. Are there psychological issues in the LGBT community that have been overlooked by existing health care programs?

At this point, we don’t know why some members of the LGBT community are predisposed to participate in certain destructive behaviors. We need to study how the social environment affects the LGBT population. What is the role of internalized negativity brought on by homophobia and homonegativity? What is the impact of perceived discrimination against gays and lesbians?

There are also new and emerging familial roles for this community. What is the effect of state-sanctioned marriage on relationships? Parenting is a relatively new and very complex issue that involves the couple and their dependents.

Q. Why should BUSPH be involved in this type of research?

As an educational and research institution, BUSPH has the ability and the resources to create a body of scientifically documented knowledge that in turn can be used to improve the well-being of this underserved, vulnerable population. Our goal is to enable dedicated and talented...
scholars to work together to develop proposals, research, and papers that benefit the LGBT community. This program exists to facilitate research that will address, directly, existing health care disparities.

We want this program to be a resource for BUSPH, Boston University, and alumni. This is an interdisciplinary program that involves a variety of academic departments in the School, including health services, social and behavioral sciences, international health, and environmental health, as well as the School's Data Coordinating Center. The plan, over the long term, is to involve colleagues throughout the Boston University Medical Campus and beyond the University.

Q. How will you disseminate your findings?

We are developing the Journal of Lesbian, Gay, Bisexual, Transgender (LGBT) Health Research. My greatest hope is that it will become the equivalent of the American Journal of Public Health for LGBT issues. The journal will focus on providing social and medical scientists with research-and academic-oriented articles and news. The inaugural issue is scheduled to appear this spring, through Haworth Press.

Also, to open up the topic to the public, we are sponsoring free lectures. These events not only present information of interest to researchers and scholars in the field, but also gather members of the broader community who are interested in these vital issues in public health. Stewart Landers, a senior consultant at John Snow, Inc., a firm that conducts studies and community-based participatory research on HIV/AIDS and LGBT health, spoke in November about the importance of funding, designing, and implementing effective programs to deliver care and prevention services to this community. In February, Randall Sell, an assistant professor of sociomedical sciences at Columbia University's Mailman School of Public Health, examined the importance of collecting and understanding LGBT demographic data in research studies. On April 26, Nancy Krieger, associate director of the Harvard Center for Society and Health, will speak on the reasons that health disparities exist in the LGBT community and why it is crucial to understand and document the underlying causes in order to eliminate them.

We have established a Web site with up-to-date information on our activities and programs. I would encourage interested alumni and friends of the LGBT community to join our mailing list by visiting www.bu.edu/dev/lgbtph.
Levine Lecture Tackles Health Disparities

The 2005 Sol Levine Lectureship on Society and Health was delivered on October 24 by Bruce G. Link, professor of epidemiology and sociomedical sciences at Columbia University’s Mailman School of Public Health. Link discussed how and under what conditions social and economic inequalities are translated into health disparities in the United States.

The annual Sol Levine Lecture on Society and Health is cosponsored by BUSPH, the Center for Society and Health at Harvard School of Public Health, and the Health Institute at Tufts-New England Medical Center in honor of a scholar and educator whose breadth of interest covered the spectrum of sociology, with an emphasis on medicine and health. Levine was an esteemed member of the faculty of the cosponsoring institutions.

Lessons Learned Since 1918 Pandemic Are Focus of Bicknell Lecture

The 2005 William J. Bicknell Lectureship in Public Health featured two speakers whose work provides insight into the origins and course of the pandemic influenza of 1918, in which an estimated 40 million people died.

The topic was especially timely, noted Gerald T. Keusch, BUSPH associate dean for global health and organizer of the lecture series, as the world faces the potentially devastating avian flu. “Conditions are favorable for the emergence of a dangerous pandemic variant of the influenza virus, and preparedness to deal with such an event remains fragmented, underfunded, and weak,” he said. “The Bicknell Lectureship offered the public health community, as well as private citizens, the chance to learn about the threat and consider ways in which to improve preparedness.”

Peter Palese, chairman and professor of the department of microbiology at Mount Sinai School of Medicine, New York, presented “Influenza: Old and New Threats,” and John M. Barry, author of The Great Influenza: The Epic Story of the Deadliest Plague in History and distinguished visiting scholar at Tulane University, presented “Nature Against Man: Lessons from the 1918 Pandemic.”

A panel discussion followed, with George Annas, Edward R. Utley Professor of Health Law, Bioethics, and Human Rights at BUSPH; Alfred DeMaria, Jr., assistant commissioner of the Massachusetts Department of Public Health and director of the Bureau of Communicable Diseases; and Lone Simonsen, senior epidemiologist at the Office of Global Affairs of the National Institute of Allergy and Infectious Diseases.

The William J. Bicknell Lectureship in Public Health was established to provide fresh insight into the most pressing concerns in public health. The lectureship was endowed by a gift from William J. Bicknell, founding chairman of the BUSPH Department of International Health and professor of international health.

Annas Delivers Prestigious University Lecture

The foundation of contemporary American bioethics can be traced to the Nuremberg Doctors Trial and the adoption of the Nuremberg Code and the Universal Declaration of Human Rights, said George Annas in his 2005 University Lecture “American Bioethics After Nuremberg: Pragmatism, Politics, and Human Rights” last November.

After Nuremberg, American bioethics became increasingly rooted in pragmatism, most recently exemplified, Annas said, in Vice President Dick Cheney’s request to allow the CIA to torture suspects. But pragmatism is often a weak defense; it was behind the experiments the Nazis performed on Jews during the Holocaust, testing, for example, how long it would take a man to freeze to death in new uniforms designed for German soldiers. While the spotlight of medical ethics in the United States has shifted in recent years to issues such as life support, transplants, and technological advances, its roots in human rights should remind us to seek not only ethical medical behavior, he said, but also equality worldwide.

A frequently quoted bioethics expert, Annas is the chairman of BUSPH’s Department of Health Law, Bioethics, and Human Rights and the Edward R. Utley Professor of Health Law, Bioethics, and Human Rights. He also is professor of sociomedical sciences at the School of Medicine and professor of law at the School of Law. He is the author of The Rights of Patients and the recently published American Bioethics: Crossing Human Rights and Health Law Boundaries, among other publications.
New President Launches Planning Process

Robert A. Brown, who became the University's tenth president on September 1, has called on each of the University's seventeen schools and colleges on both the Charles River Campus and the Medical Campus to develop a ten-year strategic plan that will examine BU's academic strengths and consider directions for growth and development.

"Bob Brown's call for University-wide strategic planning has brought a sense of energy, purpose, and collaboration to Boston University," said BUSPH Dean Robert Meenan. "Over nearly fifteen years, BUSPH has engaged in three rounds of strategic planning that have successively taken stock of the School's strengths and guided future development. It is energizing to take part in a similar University-wide effort, knowing that it will lead to greater cross-campus collaboration." In fact, the BUSPH Executive Committee, which focuses on long-term planning, has been at work since January drafting a plan according to President Brown's request. "We look forward to playing an active role in creating a stronger, more interconnected BU," said Meenan.

Brown previously was provost of the Massachusetts Institute of Technology. He earned bachelor's and master's degrees from the University of Texas at Austin and a doctorate from the University of Minnesota, all in chemical engineering. After joining the faculty at MIT in 1979, he became chairman of the chemical engineering department, dean of engineering, and, in 1998, provost. His scientific research has been recognized by his election to the National Academy of Sciences and the American Academy of Arts and Sciences.

Among the tasks Brown undertook during a busy fall schedule was welcoming participants to the four-day "Global Health—A Bridge to the Future," the inaugural conference of the BUSPH-based Global Health Initiative at Boston University. (See page 16.) He also has been meeting with alumni around the country and overseas.

Med Campus Provost Seeks Collaboration

Attracted to the Boston University Medical Campus by its impressive growth, its commitment to the local community, and its reputation for collegial collaboration, Karen Antman assumed the positions of dean of the BU School of Medicine and provost of the Medical Campus in May 2005. "The opportunity to work with the outstanding group of educators, care providers, and laboratory, clinical, and public health investigators at BU Medical Campus is an enormous privilege," said Antman, whose initial efforts are focused on enhancing transdisciplinary research collaborations and the Medical Campus's core facilities.

"With its focus on solving population-based health problems, BU School of Public Health occupies a central role in our efforts to encourage transdisciplinary research collaboration across the Medical Campus and across the University," said Antman. "The [BUSPH-based] Global Health Initiative is an outstanding example of the kind of cross-University, multidisciplinary effort that has the potential to transform medicine and the way we teach it. The major new directions in research occur when people work at the interstices between fields."

She added, "In his fourteen years as dean, Bob Meenan has presided over a period of tremendous growth and transformation at the School, which is ranked today among the nation's best public health institutions. My job is to ensure that our progress on that trajectory accelerates."

Antman, who came to Boston University from the National Cancer Institute, succeeded Aram V. Chobanian.

Chobanian Returns to Med Campus

Aram V. Chobanian, an expert in hypertension, returned to the Medical Campus this fall to teach, perform research, and mentor younger faculty members and students. Chobanian, former BUSM dean and BU Medical Campus provost, left the Medical Campus in November 2003 to become BU president ad interim. He served until September 1, 2005, when Robert A. Brown became president. The BU Board of Trustees voted to designate Chobanian the ninth president of Boston University, removing the ad interim that had been part of his title.

"There is nothing interim or transient about the impact Dr. Chobanian has had," said Alan Leventhal, chairman of the Board of Trustees, "and we want history to record and recognize him as one of Boston University's most important and respected presidents." He added, "Aram managed the school through difficulties, created a sense of inclusion and respect throughout the campus, and kept the University moving ahead."
Global Health in 2050

Experts Gather at BUSPH to Talk About the Future of Public Health

More than seventy-five experts from around the world gathered at Boston University last November to find effective ways to reduce health disparities around the world and to consider the long-range future of public health. The conference, "Global Health—A Bridge to the Future," was the inaugural event of the Global Health Initiative (GHI) at Boston University, a University-wide endeavor based at BUSPH. The conference asked participants—experts and practitioners at the forefront of public health, health science and policy, the social sciences, and the arts—to identify ways to improve global public health fifty years from now.

"Over the four-day conference, we shared experiences, identified common issues, and brainstormed plans and strategies to help reduce health disparities among the world’s population," said conference organizer Gerald T. Keusch, GHI director and associate dean for global health at BUSPH. "Together, participants discussed what targets should be set in order to reduce global health disparities by the year 2050. They also explored how public health itself must evolve over the next fifty years in order to achieve those targets. Rather than considering specific diseases or conditions as most meetings do, we addressed truly big issues, such as creativity, identity, urbanization, and the adequacy of current institutions to attend to future global health concerns."

Conference participants affirmed that improving the health of the world’s population is fundamental to fostering economic prosperity and securing peaceful coexistence among nations. "There was wide agreement among participants that the disparities in public health experienced around the world are not only morally unconscionable, they also create conditions for political, economic, and health instability worldwide, and that it is within our capacity to redress them," said Keusch.

In his introductory remarks, BU President Robert A. Brown said that great universities cannot function as ivory towers but instead must be involved in creating knowledge for "global, societal, and economic impact." The work of the GHI, he said, will ensure that Boston University is an effective member of the global community.

A third of the conference participants were from the U.S., a third from developed countries, and a third from other developing countries. The conference was featured in a four-part series on Boston University World of Ideas, a weekly one-hour radio show produced by WBUR, the University’s NPR station (www.buworldofideas.org/shows/2005/11/20051120.asp). In addition, an archived webcast of the conference is available on the Global Health Initiative’s Web site (www.bu.edu/ghi), along with more information on global health activities at Boston University.

"In the coming months, we will review the topics and insights that emerged and put together recommendations for action regarding research, new programs, and institutional reform. Eventually, we plan to publish a book that compiles our findings," said Keusch.

"Global Health—A Bridge to the Future" was cosponsored by the Global Health Initiative, the Frederick S. Pardee Center for the Study of the Longer Range Future at Boston University, the School of Public Health, the RAND Pardee Center for Longer Range Global Policy and the Future Human Condition, and the RAND Center for Domestic and International Health Security.

The conference was made possible by the support of Frederick S. Pardee (SMG’54, GSM’54), the Bill and Melinda Gates Foundation, and the Alan and Sherry Leventhal Fund for Leadership and Innovation at Boston University.
Epidemiology/Biostatistics

Rosie Batista ('03) is busy. She’s taking courses in molecular biology, traveling cross-country and internationally, starting a new job, and buying a home with her husband, Douglas. Rosie, a prevention and client services coordinator for Boston’s AIDS Action Committee, writes, “It is an amazing environment in which to learn about HIV/AIDS prevention, HIV-positive client services, advocacy, and policy. I learned to be humble, flexible, and open to new life experiences at BUSPH. That experience comes in handy when face to face with HIV-positive individuals who are fighting the virus with spirit while dealing with work and life discrimination.”

Catherine Jackson Husbands ('03) of Nashville, Tennessee, transferred from her outcomes research position with drug development firm Covance in Gaithersburg, Maryland, to a data management job in Nashville in September 2005. She was married in April 2004.

Irene Shul ('03) married Josue Rivera in January 2005 in Vieques, Puerto Rico. Having completed a two-year fellowship at the CDC, she now works for the Massachusetts Department of Public Health. E-mail her at hantav@yahoo.com.

Nanyamka Hales ('04) is the prostate cancer coordinator for the Massachusetts Department of Public Health’s Comprehensive Cancer Control and Prevention Program, which is funded by the CDC. “This allows me to work on an area that is dear to my heart and my family, as well as to give back to the community. I am developing a Prostate Cancer Peer Messenger Program that works with black, non-Hispanic men over age forty to increase awareness of prostate cancer and the benefits of screening for prostate cancer in the five cities most affected by the disease: Boston, Brockton, Worcester, Cambridge, and Springfield. We expect this program to be a model for other states. The knowledge I gained from the BUSPH program has really prepared me for my current position to combat prostate cancer in Massachusetts.”

Health Law

Larry Vernaglia ('94) cochaired two health care conferences in September 2005: the Health Care Compliance Association annual regional meeting and Massachusetts Continuing Legal Education’s two-day Health Law Basics program. Larry is a partner in the health law practice group at Hinckley, Allen & Snyder in Boston.

Following a romantic trip to Paris, Megan Beil ('99) announced her engagement to Greg Najarian. The two plan to wed in New Jersey in September. Megan works for Blue Cross and Blue Shield of Massachusetts and was recently promoted to manager of care system measures in the health services evaluation department.

Michael R. Costa ('00) has been active in local and national health care. He recently assisted the nation’s largest home health/hospice provider in a $100 million acquisition that expanded its ability to serve vulnerable patients in eight southeastern states. In addition, Michael has been a frequent lecturer at national trade association meetings on such issues as health care policy reform and the implementation of the Medicare Drug Improvement Act. Locally, he is active in the pro bono community, serving underprivileged Massachusetts residents. Last November he spoke to BUSPH students and alumni about alternative career paths in health law.

Antitrust attorney Christi Braun ('01) has joined the Washington, D.C., law firm Ober Kaler, where she represents health care providers, insurance companies, and medical product corporations in investigations and litigation.

Suzanne MacRae ('01) writes, “Since graduating, I returned to work at the Dana Farber Cancer Institute in clinical research. It has been a great opportunity to put to use the medical ethics background I gained at BUSPH. In May 2005 I graduated with a Bachelor of Science in nursing, passed the boards, and am now the melanoma research nurse at DFCI. It’s really the best of both worlds!”

Lauren Nocera ('04) runs community-based programs, including school-based medical and dental services, and health care programs for the homeless at Thundermist Health Center in Rhode Island. She says, “I love working in the community health center setting, seeing the intersection of public health and primary care.” She would like to hear from other alumni who are working in community health centers. Contact her at lsnocera@yahoo.com.

Health Services

Tristram Blake ('79) is celebrating thirty-five years as executive director of the South End Community Health Center in Boston. “Greatest job in the world!” he says. “Much of the work we do has always emphasized prevention. Initiatives center on emergency preparedness, which, as we have seen in New Orleans, must include prevention and readiness on a far larger scale than we are used to.” On a more personal note, Tris adds, “My wife, Katie, and I have been married for over forty-six years. Last August we hosted the wedding of our granddaughter, Kimberly, to Steve Melody, in Kennebunkport, Maine, with Cape Porpoise Harbor's Goat Island Light as a backdrop.”

Sam Skura ('97) is the administrator for Caritas Clinic Emergency Medicine. “I manage the physician group staffing the emergency departments at the six member hospitals of the Caritas Christi Health Care System in Massachusetts.” He has three young children—Adam, Stephanie, and Joey—and sends his best wishes to the BUSPH community.
Erin Wall Brighton ('01) and Brian Brighton ('02, Health Law) are happy to announce the birth of Quinn Patrick and Julia Grace. The babies were born at the Cleveland Clinic, where Brian is completing his residency in orthopedic surgery. Erin is teaching eighth grade at a boys' school in Shaker Heights and working on a master's degree in education. Contact Erin at ebrighton@sbcglobal.net.

Since graduation, Elizabeth Cohen ('02) has been the executive director of Rape Crisis Services of Greater Lowell (Massachusetts). "Every day I use skills learned at BUSPH—from looking at my budgets to setting personnel policies to working with our board of directors." Last spring Elizabeth co-taught the course "Public Health Perspectives of Sexual Violence" with Associate Professor Elaine Alpert, for which they won one of BUSPH's coveted teaching awards. Elizabeth says, "I enjoy staying connected to the School and hope to continue this important professional and personal relationship."

Vin Sharma ('03) of Pepperell, Massachusetts, is a student at MIT's Sloan School of Management.

Clara Kebabian ('04) is a research coordinator/clinical research associate at Hypnion Inc., a clinical-stage, neuroscience-based drug discovery company in Lexington, Massachusetts. She finds her job exciting. She adds, "I am playing electric violin with a Boston-based rock band, the Jumblles (www.thejumblles.com). We were featured in a live performance on WAAF's 107.3 FM Bay State Rock in August. We'd love to come and play at BUSPH—there's one other BU alumnus in the group!"

Ellen Stockmann Burton ('05) of Silver Spring, Maryland, juggles her work as program coordinator in the applied public health department at the Johns Hopkins Bloomberg School of Public Health and as the executive director of the Maryland Association of County Health Officers. Ellen married Patrick Burton (GRS'05) in St. Louis, Missouri, in July 2005. Contact Ellen at ellenburton@gmail.com.

Beth Hasie ('05) reports that in the three months following graduation, "I got a terrific new job and married my partner of ten years, Sage, and we bought a home together in Jamaica Plain. I am director of the GLBT Health Access Project at JRI Health in Boston and can be reached at bhasie@jri.org."

International Health

Vanessa White ('96) has coauthored her first article in a peer-reviewed journal. "The Practice Community Meets the Ivory Tower: A Health Department/Academic Partnership to Improve Public Health Preparedness" appears in the summer 2005 issue of Public Health Reports. The piece describes a collaborative training project between the Montgomery County Department of Public Health (Rockville, Maryland) and the Johns Hopkins Bloomberg School of Public Health, to deploy a comprehensive emergency preparedness plan.

Anne Bergman ('97) continues her interest in health and nutrition. She has started the Frozen Pantry, a specialty food service business in Toronto that serves hearty, nutritious meals, drawing from cuisines from around the world.

Rabia Jalal ('03), of New York, New York, is a utilization coordinator at Atlantis Health Center in Worcester, Massachusetts. She finds her job exciting. She adds, "I am playing electric violin with a Boston-based rock band, the Jumblles (www.thejumblles.com). We were featured in a live performance on WAAF's 107.3 FM Bay State Rock in August. We'd love to come and play at BUSPH—there's one other BU alumnus in the group!"

After graduating from BUSPH, Nargiz Shamilo ('02) worked for the Centers for Disease Control and the World Health Organization, in Atlanta and Azerbaijan, evaluating strategies used for polio-eradication campaigns in high-risk areas. She then moved to International Mercy Corps, where she managed activities within the health portfolio of a large humanitarian project that assisted people internally displaced by war with Armenia. Now she has joined USAID/Baku as a project management specialist in health, overseeing multimillion-dollar projects in the areas of reproductive health and immunization. She recently worked on design for a new primary health care reform project and now serves on a team that is designing Azerbaijan's first demographic and health survey. The survey will be implemented with assistance from Macro International, CDC, and other partners.

Amy Coughlin ('03) of Newton, Massachusetts, spent the last two years in Nigeria as an HIV/AIDS program manager for Catholic Relief Services. She headed the mother-to-child transmission aspect of the President's Emergency Plan for AIDS Relief and collaborated on an anti-retroviral therapy and home-based care project. She has returned to the Boston area to work for Pathfinder International in Watertown and backstop programs for Nigeria. Amy was married in Buffalo, New York, last October.

Maternal and Child Health

Julie Wisniewski ('00) is program director for the Worcester Healthy Start Initiative and a department head at Great Brook Valley Health Center in Worcester, Massachusetts. In addition to serving as president of BUSPH's Alumni Board, she enjoys volunteering as mission coordinator for the March of Dimes Worcester WalkAmerica. She thinks that the Alumni Board is an excellent way to stay connected to the BUSPH community and encourages fellow alumni who are interested in joining the board to contact her at Julie Wisniewski@GREATBROOK.ORG.

Erica Streit-Kaplan ('01) and her husband, James, welcomed their daughter, Anna Madeline Kaplan, in May 2005. Inspired by
John P. Howe III (MED’69) and Jeannine Rivet (’81), both members of BUSPH’s Board of Visitors, were among six recipients of the annual Boston University Alumni Award, the most prestigious honor conferred by the Boston University Alumni. Recipients were recognized for their career achievements and service to Boston University at a ceremony held on the Charles River Campus during Winterfest in January.

Howe is president and chief executive officer of the international health foundation Project HOPE. Previously, he held the Distinguished Chair in Health Policy at the University of Texas Health Science Center at San Antonio. Howe earned a bachelor’s degree at Amherst College and a medical degree at Boston University School of Medicine. He served two years in the Army Medical Corps and later completed the health systems management program at Harvard Business School. Howe joined BUSPH’s Board of Visitors in 2005.

Rivet received BUSPH’s Distinguished Alumni Award in 1999. She is the executive vice president of UnitedHealth Group and is the company’s primary liaison to the pharmaceutical industry. She earned a bachelor’s in nursing from Boston College and an M.P.H. from BUSPH. A member of BUSPH’s Board of Visitors since 2000, she became vice-chair in 2005. (See profile on page 8.)

Social and Behavioral Sciences

Tom Barker (’85) oversees the HIV Corrections Programs for the Massachusetts Department of Public Health HIV/AIDS Bureau. All incarcerated individuals living with HIV or at high risk of contracting the virus are eligible for these programs. The community reintegration program for incarcerated persons with HIV/AIDS in Massachusetts is considered a national model by the Centers for Disease Control and the federal Health Resources and Services Administration. Tom says he has learned a great deal about the challenges and frustrations that come with working on the front lines, in the community, and in the jails and prisons. “That is what it’s all about,” he observes. On a personal note, he adds,

“

There are three (!) teenagers living in my house, who I am told are mine. Our Siamese cat chases dogs. I am a baseball and tennis fan, and I still believe that the Beatles were the best band ever. I live in Portsmouth, New Hampshire, and will not consider living anywhere else.”

Steven Bochetti (’86) returned in 2005 to Boston from consulting in Oregon. He is the program manager for the CenterCare program at the Massachusetts Department of Public Health (DPH) Division of Primary Care and Health Access. In the summer
of 2005 his sixteen-year-old daughter, Morissa, reviewed teen health promotion materials and worked with the perinatal database as a DPH intern. Contact Steven at steven.bochettl@state.ma.us.

Ken Vail ('94) has been director of health education and prevention with Community Health Action of Staten Island since December 2005. He is working on HIV/AIDS, education, LGBT issues, and direct-service provision to prevent the transmission of HIV and related co-factors. In 2005 he started the consulting firm Healthy Rhythm, a health-promotion and harm-reduction effort aimed at rock and alternative musicians and crews on music tours. E-mail Ken at kvail@healthyrythm.net.

Best wishes to Janine Jurkowski ('98), assistant professor at State University of New York School of Public Health, who became engaged last August to Michael Lefebvre. Michael has a master's degree from Rockefeller College of Public Affairs and Policy at the University at Albany and is a budget analyst for the New York Senate. They are planning a summer wedding in 2006.

Suzanne Morrison ('98) is the administrative manager for the orthopedic service at Massachusetts General Hospital, where "the trauma service is a hotbed for those of us who love epidemiology." While at BUSPH she developed an interest in local, state, and national politics. She spends much of her free time working on political campaigns at all levels, even when the results are discouraging. "I hope this note finds all of my classmates well," she writes.

Kristi Kangas ('01) of Charlestown, Massachusetts, has been promoted to program manager of the Injury Prevention Program at Children's Hospital in Boston. She looks forward to applying the knowledge she gained as a concentrator in health services to her first management position. In 2005 Kristi formed a young public health professionals networking group that meets monthly in the Boston area. The group started with injury prevention professionals, but anyone is encouraged to join. Contact Kristi at kristikangas@yahoo.com for more information.

Jared Lane K. Maeda ('02) left his clinical research position of three years at the Center for HIV/AIDS Care and Research at Boston Medical Center to pursue a Ph.D. in health policy and administration at the University of Illinois at Chicago's School of Public Health. He was recently elected student representative to the Asian Pacific Islander Caucus of APHA for 2005–2006. In his free time, Jared likes to travel home to Hawaii. E-mail Jared at jmaeda@post.harvard.edu.

BUSPH Alumni Wine-Tasting Event

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George Sherman Union Auditorium
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A year after the death of Terri Schiavo, experts who played roles in deciding, debating, or covering the case will consider the legal, medical, ethical, and political lessons learned. U.S. Representative Barney Frank will deliver the keynote address.

For more information and to register, visit www.bu.edu/law/news/schiavo/schiavo.htm.
Spirits were high as alums caught up with colleagues and faculty at the School's APHA gathering in Philadelphia in December. Top photo, from left, Alissa Almeida ('04), Jacey Greece ('04), Allison Appleton ('05), Becca Cheezum ('03), and Christina Santana ('04).

Bottom photo, from left, Karen Siren ('02), BUSPH Dean Robert F. Meenan, and Stephen Thuahnai.

Photographs: Kelly & Massa Photography