

Winter 2009

# Download full PDF issue of Thomas Jefferson University MPH Public Health Link Newsletter, Vol. 5, Iss. 1, Winter 2009

Follow this and additional works at: <http://jdc.jefferson.edu/phlink>

 Part of the [Public Health Commons](#)

[Let us know how access to this document benefits you](#)

---

## Recommended Citation

(2009) "Download full PDF issue of Thomas Jefferson University MPH Public Health Link Newsletter, Vol. 5, Iss. 1, Winter 2009," *Public Health Link*: Vol. 5 : Iss. 1 , Article 1.

Available at: <http://jdc.jefferson.edu/phlink/vol5/iss1/1>

This Article is brought to you for free and open access by the Jefferson Digital Commons. The Jefferson Digital Commons is a service of Thomas Jefferson University's [Center for Teaching and Learning \(CTL\)](#). The Commons is a showcase for Jefferson books and journals, peer-reviewed scholarly publications, unique historical collections from the University archives, and teaching tools. The Jefferson Digital Commons allows researchers and interested readers anywhere in the world to learn about and keep up to date with Jefferson scholarship. This article has been accepted for inclusion in Public Health Link by an authorized administrator of the Jefferson Digital Commons. For more information, please contact: [JeffersonDigitalCommons@jefferson.edu](mailto:JeffersonDigitalCommons@jefferson.edu).



### MPH Program Mission

The mission of the graduate Master of Public Health (MPH) program is to enhance the health of our communities through the development of future public health leaders via multidisciplinary education, research, community practice, and service.

### MPH Program Vision

Our vision is that the Thomas Jefferson University's MPH program is recognized as a center of excellence for integrative population health training throughout the greater Philadelphia region and beyond.

### MPH Program Goals

#### **Instruction Goals**

To provide all MPH students with quality graduate level education in core and elective courses and in community-based learning opportunities via Clerkship and Capstone projects that facilitate student mastery of public health competencies.

#### **Research Goals**

To provide opportunities and train all MPH students in the development and translation of public health research through coursework and the Capstone research project.

#### **Service Goals**

To provide structured service-learning opportunities for students through Clerkship, Capstone and other continuing education initiatives as formal and informal components of the MPH program and to encourage faculty to participate in public health community.

# Public Health Link

JEFFERSON COLLEGE OF GRADUATE STUDIES  
MASTER OF PUBLIC HEALTH E-NEWS

## MPH Spotlight

Alumnae—Meghan Gannon

Meghan Gannon is an ACPNet Administrator in the Department of Clinical Programs and Quality of Care at the American College of Physicians. She received her MSPH from Thomas Jefferson University (TJU) in 2006 and has since been working on several quality improvement programs which focus on various chronic conditions. While pursuing her masters, Meghan was fortunate to complete a Clerkship in Uganda where she also completed her thesis work.

It was in her first Public Health course at TJU that she learned about Jefferson's relationship with Hospice Africa Uganda (HAU). Dr James Plumb spoke about his work in Uganda and Jefferson's tradition of offering medical students the opportunity to intern there. A master's student had not traveled there for a Clerkship before, but the experience spoke to Meghan and she decided to contact Hospice and get approval from them and Jefferson to go.

Arriving at Hospice, Meghan discovered very quickly the complete lack of resources Uganda as a country has in treating its sick population. Lack of: physicians, health care infrastructure, medications, laboratory and testing equipment are just a few areas one could mention in speaking of the current health care situation.

There are also cultural barriers between medical staff and patients in treating them, as well as the cultural stigma attached to diseases such as HIV/AIDS that is evident in many communities. Meghan traveled from the bustling capital, Kampala to the rural districts of Rakai and Hoima speaking with patients, Hospice staff, and hospital workers. Yet, coupled with this need for more resources and improvement was a sense of communities coming together to fight the stigma of AIDS and its toll on their country.

Visitors to HAU are invited to stay at the guest house on Hospice's grounds. Some of the best dinners Meghan had were made by one of the house mothers, Juliet. Meghan would travel with the medical team she was assigned to that day until mid afternoon, visiting patients who could not travel for their medical care. Many of these patients are identified by members of their community, alerting hospice of their condition. Most of the patients Meghan spoke with were dying of AIDS, and many others were HIV positive. Each patient had a different story of how they acquired the disease and were living with it. Yet they all had one thing in common, most were not able to afford any ARV treatment. Instead they depended on the liquid morphine and medical care the Hospice staff could offer.

Meghan was struck by the unconditional generosity and kindness these patients and their families offered her in their homes. Most of the homes were made of mud, with only a mat to offer as a seat. In homes where the patients' tongue was Swahili or Lugandan, the nurses translated English to Meghan. She met a woman who believed her

only choice was to breastfeed; even though she was HIV positive and by doing this she would run the risk of passing her disease along to her HIV negative newborn. The issue of breastfeeding is a difficult one due to cultural issues and the poor sanitation of the water to mix with formula.

Meghan also met a man who contracted HIV from a blood transplant. Once he discovered she was from America, his face lit up and he spoke about how his son traveled to New York and showed her a big poster of Michael Jordan. His family sat with Meghan and HAU nurses and they all had tea, enjoying the conversation and distraction from his ailing condition. He passed away the following



Meghan Gannon & Juliet, House Mother of the Hospice Africa Uganda

week in his sleep.

The introduction of morphine into Uganda was championed by Dr Anne Merriman, founder of HAU. Several feasibility studies were completed in Africa to evaluate which country would be most receptive to Hospice care. Uganda was chosen due to its need (the HIV/AIDS epidemic had affected more than half of Uganda's population at one point) and the willingness of its Ministry of Health to allow hospice care, namely morphine, into the country. In the beginning, only physicians were allowed to dispense morphine; however the law now allows nurses to do the same.

It is this aspect of Hospice that Meghan focused her thesis project on, "The Evolution of Palliative Care in Uganda; An Observational Study". Her thesis evaluated the development of hospice care, specifically the use of morphine, in Uganda. The project identified barriers that Hospice faced regarding 1) opioid availability, and 2) access to care. Appropriate stakeholders were interviewed including hospice staff, its founder Dr Merriman, caregivers, and hospice patients. Identified barriers to opioids were: opioid legalization, opioidphobia, affordability, and availability (lack of prescribers). Barriers that health care

*Continued on Page 4*

## Re- Accreditation Update

The MPH program hosted a successful CEPH site visit on October 13 & 14, 2008. Many of our faculty, students, and alumni participated in welcoming our visitors and the program received positive feedback. A final decision on re-accreditation and length will be announced in July 2009.

## April Thesis/Capstone Presentations

Come out and support fellow MPH students present on their culminating project for the MPH.

This is a great opportunity to see what the final presentations are like as some of you prepare to present in the coming year.

**A schedule of presenters, topics, and times will be available at the end of March.**

**April 22nd, 9:30 am  
Curtis 217**

## Oxfam Hunger Banquet

On January 19<sup>th</sup>, Jefferson students were invited to the Oxfam Hunger Banquet, which was co-sponsored by the Physicians for Social Responsibility and SAPHE (Safety, Awareness, and Public Health Education). Approximately 50 people attended the event, a dozen of which were from the MPH program. The banquet was a creative way to open some eyes to the very real problem of world hunger. Participating students entered the Hamilton Building and randomly selected a card that dictated their country of origin, type of livelihood, and income status. The lowest class members were required to sit on the floor of the Hamilton lobby, the middle class in plastic chairs, and the upper class in cushioned chairs at a table complete with table cloth, plates, forks, knives, salad, and a beverage to boot.

A video presentation of the struggles occurring throughout the world and Oxfam's efforts to battle hunger was displayed. To reinforce these messages, the emcees conducted an interactive exercise to give a sense of how quickly a person can go from providing themselves with a means of nourishment to starving and vice versa.

Based on their income status, each group received a meal representative of a typical serving: a Styrofoam bowl of rice for the low income (no utensils provided...but

there was a bucket of water in which to dip a plastic cup for those who were thirsty), rice and beans served in plastic bowls with a spoon for the middle class, as well as cups of water, and a balanced, nutritious dinner including a salad, buttered roll, iced tea, and pasta alfredo for the high income group. Following the dinner, there was an open discussion among the students about their reactions to this experience. The overall impression was the startling realization that forty percent of people in the world (~ 2.5 billion) live between the fine line of minimal sustainability and extreme poverty, surviving on less than \$2 per day. With the unequal distribution of bountiful resources that the earth produces, and the number of men, women, and children who go hungry every day, the importance of the issue was brought into full focus: there is no reason that every human on this planet cannot have access to proper nutrition or is unable to experience the luxury of a full stomach.

The experience supplemented the knowledge of current concerns in the world and helped to greater express the magnitude of the problem. This event was pertinent to all, but especially to those in Public Health, whose professional careers are dedicated to promoting and educating the public about social injustices. The evening concluded with Oxfam's ending credits, its contact information, and a greater awareness of how the world experiences hunger. For those of us in the Jefferson Community, we look forward to the Oxfam Hunger Banquet's potential to become an annual event for all students.

*Megan Morris, Brianna Germain, and Jennifer Smith, MPH Students*



*MPH Students from left to right: Anna Quinn, Shannon Mace (JD/MPH), Eugene Goeser, Ashley Bowersox*

## SAPHE Students Participate in AIDS Walk Philly

On a cold Saturday in October, seven MPH students and members of the SAPHE (Safety Awareness and Public Health Education) Organization participated in the 2008 AIDS Walk Philly. The event raised money for the AIDS Fund, which supports HIV/AIDS education, prevention, and services in the Delaware Valley Region by raising dollars and increasing public awareness about the impact of HIV on our communities. AIDS Walk Philly is AIDS Fund's largest and most important fundraiser of the year. By walking, they raised awareness that HIV/AIDS is still a serious threat to our communities. As an organization, SAPHE raised over \$800 to benefit the AIDS Fund, and the



From left to right: SAPHE leader Katie Thomas, Philadelphia Mayor Michael Nutter, SAPHE leader Maura Murphy, MPH student Maria LaNasa

money will go to regional AIDS service providers in order to bridge the gaps in general operations and to fund projects that are not supported by other funding sources.

## Spring Health Policy Forums

Monthly Health Policy Forums are held in Bluemle 101 at 8:30-9:30 am with a light breakfast served. These are the upcoming forums for the Spring:

### March 11

The Public-Private Balance in Healthcare: Political and Economic Tipping Points  
**Speaker:** Alan Lyles, ScD, MD  
*Henry A. Rosenberg Professor of Public, Private and Nonprofit Partnerships*  
 School of Public Affairs' Health Systems Management University of Baltimore

### April 8

The Impact of Serious Medication Errors for Health Care Providers  
**Speaker:** Zane Robinson Wolf, PhD, RN, FAAN, *Dean and Professor*  
 School of Nursing, LaSalle University

### May 13

Progress in Patient Safety Initiatives  
**Speaker:** Mike Doering  
*Executive Director*  
 Patient Safety Authority of PA

### June 10

Patient Friendly Billing-Increasing Transparency  
**Speaker:** Michael Brennan  
*Chief Financial Officer*  
 Geisinger Health System



### PULSE & JeffMail

Please note that all MPH and Certificate of PH students, as well as MPH Faculty, are members of the Master of Public Health (MPH) Program Organization on Pulse. Students are encouraged to check this site often for pertinent program information, policies, and announcements.

Reminder that students will always be contacted through their Jefferson email accounts and not a personal account. You may have your Jefferson email forwarded to your personal account. If you need assistance on how to do set this up, please contact [Lisa.Chosed@Jefferson.edu](mailto:Lisa.Chosed@Jefferson.edu).



## Annual APHA: Public Health Without Borders

The American Public Health Association (APHA) held their 136th Annual Meeting and Exposition in sunny San Diego, California on October 25-29, 2008. The theme for the convergence was Public Health Without Borders, which focused on the vital connection of public health care providers. Nearly 13,000 individuals attended the conference to educate, learn, and collaborate on the nation's and world's top public health challenges. There were over 900 scientific sessions, roundtables, poster sessions, institutes and panel discussions at which over 4,000 scientific papers were presented.

Several members of Jefferson's faculty presented an oral or poster session. I had the opportunity to view Dr. Rickie Brawer's, PhD, MPH poster, as depicted. As a MPH candidate, the annual meeting and expo offered a tremendous amount of information across a wide variety of topics. From the fortification of flour on a global scale to discovering the International

Health Film Festival, the conference a variety of opportunities to enhance public health skills.

The 2009 meeting and expo will be held in Philadelphia, Pennsylvania from November 7-11, under the theme Water and Public Health. For further information on the event or APHA, please visit [www.apha.org](http://www.apha.org). I look forward to seeing you there!



Rickie Brawer, PhD, MPH with APHA participant, discussing poster

*Anna Quinn, MPH Student*

### **National Public Health Week Luncheon Making a World of Difference: Jefferson Public Health Initiatives**

Symposium featuring Jefferson public health leaders in health programs, policies, and research:

Moderator: Rob Simmons, DrPH, MPH, CHES, Program Director

- David B. Nash, MD, MBA, Founding Dean of the School of Population Health
- Richard Wender, MD, Chair of Family & Community Medicine
- Laura Gitlin, PhD, Director, Center for Applied Research and Health (CARAH)
- Ron Myers, PhD, DSW, Director, Division of Population Science, Kimmel Cancer Center
- Bhuvana Jayaraman, MPH Student

**Wed, April 8th 11:30 am—1 pm,  
Jefferson Alumni Hall Atrium**

**RSVP by April 3 at: [nphwlunch.eventbrite.com](http://nphwlunch.eventbrite.com)**

### **The Impact of Water on Public Health: Local, National, Global**

Christiaan Morssink and Tony Sauder, PGWI board members, will discuss the following:

- An overview of the water and public health issue that faces us on local, national, and international levels
- Information on the PGWI
- Details about the April 4th PGWI Conference
- A global health and water case study from Central or South America will also be discussed.

**Thurs, Mar 26th 5-6PM  
Hamilton 505  
RSVP by Mar 23 at:  
[phandwater.eventbrite.com](http://phandwater.eventbrite.com)**

*Continued from Page 1*

providers faced included: lack of human resources, lack of medical supplies, disconnect between target population and services, and difficulty in identification of sick individuals. Patient identified barriers were pain control, social support, financial support for food, and spiritual/emotional concerns. Caregiver identified barriers were emotional support and decreased work productivity (rapid depletion of resources). Identified successful techniques used to overcome these barriers included education, government support, international involvement, empowerment (community volunteers), and networking between organizations.

Morphine in liquid form was chosen because of it not requiring refrigeration and its ease in distribution. Still morphine prescribing is complicated by issues such as health literacy of caregivers/patients, patients visiting multiple clinics (drug interactions), and side effects.

The time Meghan spent with hospice staff and the patients she visited has changed the direction she wants to steer her career. She appreciates the challenge in treating HIV/AIDS in a cultural, economic, and organizational manner. Since this experience, Meghan has traveled a bit more off the beaten path learning about different cultures in countries like Dubai, Jordan, Tunisia, India, Oman, Nicaragua, Rwanda, and Guatemala. Appreciating differences among cultures and learning how to use our common threads to work together is something Meghan is interested in researching more in relation to HIV/AIDS and palliative care. Since returning from Uganda, Meghan has become involved with Project Welcome a volunteer group which helps immigrants/refugees with their English. She is also interested in pursuing a future career in palliative medicine and HIV/AIDS work, specifically looking at the role of the community volunteer in furthering the reach of medical care to rural villages.