

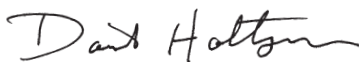
From the Chair

Many of the most devastating challenges to our health can be linked to our behavior. What we eat, how much we exercise, whether we practice safe sex, whether we smoke—these and myriad other behaviors not only influence our individual health but impact our collective health as well. The majority of the leading causes of premature mortality are driven by behavioral and social factors.

Persuading people to change their behaviors is not a simple task. Many factors—some obvious, some nuanced—play a role in human decision making. For example, whether or not someone puffs a cigarette today might be influenced by family history, peer pressure, the media, his or her attitude toward smoking, the availability of cigarettes in the community, anti-smoking laws, cigarette tax levels, and the physical properties of the cigarettes themselves.

The Department of Health, Behavior and Society is committed to developing a broad understanding of human behavior and the most effective ways to help people achieve better health. In a swiftly changing world, we are committed to addressing both familiar and new threats. Measuring the impact on health of a new oil pipeline in Chad, guiding adolescents in Baltimore threatened by the HIV epidemic, helping physicians better communicate with their patients, incorporating public health messages into popular TV programs in South Africa...We have a critically important, globe-spanning mission.

Nothing is more complex or more urgent than changing health behaviors. Before we can resolve the problems of HIV, obesity, cancer, injury, substance abuse, and others, we must first work to change the behavioral and social factors linked to them. In the Department of Health, Behavior and Society, our goal is developing new theories and interventions that will be used with increasing frequency and growing impact around the globe.



David Holtgrave, PhD

Chair

Department of Health, Behavior and Society



In a swiftly changing world, we are committed to addressing both familiar and new threats to the public's health. We have a critically important, globe-spanning mission.

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MISSION



The Department of Health, Behavior and Society (HBS) develops, tests, and disseminates interventions that tackle the behavioral issues that lead to enormous burdens of poor health.

We focus on the behavioral aspects of the top international and domestic causes of death and disability and feel a special responsibility to address public health challenges that disproportionately impact urban communities. The specific public health areas we address include smoking, obesity, diabetes, alcohol use, unintentional injury, violence, cancer, HIV/AIDS, sexually transmitted diseases (STDs), substance use, respiratory diseases and emerging infectious diseases, as well as the improvement of quality of life.

HBS is unique in that it truly works at multiple levels of intervention—from the individual to the community. We have particular strengths in health communication and health education, the development of community-level interventions, and the behavioral aspects of genetics and genetic counseling.



Departmental Highlights



Founded in July 2005 with a generous gift from an anonymous donor, HBS is one of the largest departments in the Bloomberg School of Public Health and is one of the strongest behavioral sciences departments in any U.S. public health school.

- David Holtgrave, the Department's founding chair, began his tenure on August 1, 2005.
- Twenty faculty transferred into HBS from the Department of Health Policy and Management in summer 2005.
- There are now 45 full-time, 18 part-time, 24 adjunct, and 28 jointly appointed faculty in the Department.

One of the largest departments in the Bloomberg School, HBS is also one of the strongest behavioral sciences departments in any U.S. public health school.



- In the 2010–2011 academic year, the faculty are training 120 students, including 65 in the doctoral program, 42 in the master's programs focused on health education, health communication and social factors, and 13 in a genetic counseling master's program.
- The Department now leads 7 research centers, including the following:
 - Center for Communication Programs
 - Institute for Global Tobacco Control
 - Johns Hopkins Weight Management Center
 - Center on Alcohol Marketing and Youth
 - Center for Mental Health Services in Pediatric Primary Care
 - The Lighthouse
 - The Center for Injury Research and Policy (The Injury Center resides in the Department of Health Policy and Management but its Director is Professor Andrea Gielen from HBS.)
- The Department has a broad reach, conducting research in Baltimore, in the U.S., and in over 45 countries around the world at any given time.
- In 2009 alone, 140 unique scientific papers were published by the faculty and students of the Department. Publication outlets have included the very best in public health, medicine, and the behavioral and social sciences. The scientific impact of the work published by the Department (as evidenced by analyses of the H-index measure of scientific citation patterns) is extremely competitive with peer departments at other universities.

- HBS research is not only cited in the journals, but also helps to solve public health challenges. Our technical expertise is available and actively sought out by key public health figures—from the President to Congress to state health departments to local, community-based organizations to the private sector. The Department has provided scientific input to key decision makers in a variety of ways, such as:
 - Dr. Holtgrave has been sworn in as a member of the Presidential Advisory Council on HIV/AIDS.
 - Dr. Holtgrave has provided testimony under oath to the U.S. House of Representatives during Representative Waxman’s hearing on domestic HIV prevention.
 - Various members of the department have served in a number of capacities to advise federal agencies and departments including CDC, NIH, DHHS, and HUD.
 - A number of faculty members have served to provide technical information to policymakers in the Maryland legislature and State health department (including the topical areas of cancer, alcohol use, smoking, and HIV/AIDS).
 - Multiple faculty members and students have worked closely with the Baltimore City government, health department, and school system (including serving on the Baltimore City AIDS Commission, and helping to conduct evaluations of healthy homes projects and programs to foster healthier eating in the schools).
 - Departmental faculty members are now conducting an evaluation of a novel health care “universal coverage” program in Howard County, and the findings of the evaluation are already being sought out to inform policy decisions.





Collaborations, Departmental Reach, and Professional Service

Worldwide Service,

Through community-based research, partnership with public health organizations and collaborations within the Hopkins community, the Department of Health, Behavior and Society engages colleagues in Baltimore and around the world.

This not only expands our sphere of service and influence but also maximizes our opportunities to collaborate with and learn from others.

COUNTRIES

- | | |
|-----------------|---------------|
| 1. Armenia | 9. Chad |
| 2. Azerbaijan | 10. China |
| 3. Bangladesh | 11. Ecuador |
| 4. Benin | 12. Egypt |
| 5. Bolivia | 13. Ethiopia |
| 6. Brazil | 14. Georgia |
| 7. Burkina Faso | 15. Ghana |
| 8. Cameroon | 16. Guatemala |
| | 17. Guinea |



Worldwide Impact

- | | | | |
|---------------|-----------------|-------------------|--------------|
| 18. Haiti | 27. Nicaragua | 36. Rwanda | 45. Yemen |
| 19. India | 28. Niger | 37. Senegal | 46. Zambia |
| 20. Indonesia | 29. Nigeria | 38. Sierra Leone | 47. Zimbabwe |
| 21. Jordan | 30. Pakistan | 39. South Africa | |
| 22. Kenya | 31. Paraguay | 40. South Korea | |
| 23. Malawi | 32. Peru | 41. Tanzania | |
| 24. Mali | 33. Philippines | 42. Ukraine | |
| 25. Namibia | 34. Romania | 43. United States | |
| 26. Nepal | 35. Russia | 44. Vietnam | |

Collaborations, Departmental Reach, and Professional Service



“Cross-fertilization” allows our research and teaching programs to reflect a wide variety of disciplines and to view public health challenges through many lenses.

Faculty with primary appointments in HBS also hold joint appointments in most other departments at the Bloomberg School and in other schools at Johns Hopkins (including Medicine and Nursing). Faculty with joint or adjunct appointments in HBS come from other universities, federal agencies, health departments and nonprofit organizations, and disciplines (including psychology, anthropology, sociology, law, communications, health education and epidemiology).

This “cross-fertilization” allows our research and teaching programs to reflect a wide variety of disciplines and to view public health challenges through many lenses—both of which are key to gaining new insights into vexing public health problems.

HBS faculty, students, and staff demonstrate their intense commitment to public health service by:

- Translating our knowledge into public health action by serving on advisory bodies associated with the White House, the Institute of Medicine, the United Nations, multiple federal, state, and local public health agencies, and local community-based organizations
- Serving as editors and editorial board members for journals (including *Patient Education and Counseling*, *AIDS & Behavior*, and *Health Education Research, Theory, and Practice*)
- Helping to establish a new journal, *Progress in Community Health Partnerships: Research, Education, and Action*, entirely focused on community-based participatory research
- Teaching courses focused on translational research
- Seeking out adjunct faculty interested and experienced in public health advocacy



Oil, International Development, and Health: Lori Leonard

An associate professor, Lori Leonard is leading a long-term study to analyze the health-related impacts that unfold as Chad attempts to spark economic development through oil production. The \$4.1 billion oil facility—partly financed by the World Bank—began production in 2003 and was expected to generate \$80 million annually for Chad over the next 25 years. “We’re looking at how modernization or development projects lead to very different ways of life,” says Leonard. “What happens when farmers stop farming and begin to work on the pipeline project or in some other capacity? What happens to people’s diets as they move from farming into the wage or informal sectors? We’re defining health very broadly and looking really at social change and people’s adaptation.”

Leonard, who once served in Chad as a Peace Corps volunteer, considers the country her second home and spends four months there each year. She works in collaboration with a Chadian NGO to follow 160 households in five sites—including three farming villages atop one of the oil fields, in a nearby small town, and in a neighborhood in the capital city. “We’ve seen farmers struggle to raise crops on dwindling available land and townspeople experience a boom-and-bust economy with a sudden influx of oil workers who are now out of jobs,” says Leonard, who is also working on an ethnographic study of HIV-positive adolescent girls in four U.S. cities. Despite promises of widespread improvements financed by oil riches, many Chadians have reservations about the future. “People have a tremendous amount of fear and skepticism about what’s going to happen to them,” Leonard says.



Lori Leonard, ScD
Associate Professor



“What happens when farmers stop farming and begin to work on the [oil] pipeline? What happens to people’s diets as they move from farming into the wage sector?”

Leading CCP Efforts Worldwide: Susan Krenn

Over the past 25 years, working at CCP has been a “continuing education” opportunity and a source of inspiration for Susan Krenn, who now leads the Center. Since she started at CCP in 1985, Krenn has witnessed and contributed to the evolving sophistication of the field of social and behavior change communication and its application to a broad range of global health challenges.

The dynamic nature and challenge of the field continues to fascinate and excite Krenn. She points to the need to balance “art and science” when attempting to achieve better health outcomes by changing behavior and shifting social norms. “Standard approaches do guide program design,” Krenn explains. “However, the inputs, outputs, and outcomes differ in every place CCP works, and we draw on a wide range of disciplines, theories, and approaches to maximize our impact. It’s truly inspirational to see all the pieces come together successfully—facilitating partners and beneficiaries to mobilize around a shared vision at all levels and delivering impact at scale.”

Krenn is also delighted to see the growing capacity and appreciation for strategic communication among program managers, policymakers, academics, and donors. Through its academic contributions at Johns Hopkins, the annual Leadership in Strategic Health Communication course, on-the-job training through field programs and other capacity building interventions, CCP shares its expertise with others—and the impact is visible wherever CCP works.

For Krenn, the reward comes from the opportunity to shape CCP’s contributions to the evolving field of strategic communication and, ultimately, to help people around the world make better health choices for themselves, their families, and their communities. “We have an extraordinary team of professionals here and across the globe,” Krenn exclaims. “We think big and are passionate about what we do. I can’t imagine a more gratifying challenge than this.”



Susan Krenn
Director of the Center for Communication Programs



“In South Africa, we’re involved in the development of a prime-time, award-winning soap opera that has people glued to their televisions.”

Communications: Theory, Youth, and Media

Formulating Communication Theory



Dr. Rajiv N. Rimal, associate professor, is a health communication scholar and the former Chair of the Health Communication divisions of both the International Communication Association and the National Communication Association. He is primarily interested in formulating theoretical approaches to health behavior change, and his scholarship focuses on understanding how people process health information, how health communication can change people's self-protective behaviors, and how individual-level factors (e.g., risk perceptions, motivations, and perceptions of self-efficacy) and societal-level factors (e.g., the normative environment) affect behaviors. His theoretical work has been applied in studying and changing behaviors pertaining to alcohol use, AIDS prevention, emergency preparedness, and cardiovascular disease prevention. He teaches Persuasive Communication Theory.

Reaching Youth through Media



Through radios, TV sets, or mobile phones, reaching youth with healthy messages is an exciting and important challenge. Dr. Dina Borzekowski advises and evaluates health communication campaigns and programs reaching children and adolescents around the world. Through her studies, Borzekowski has found that when a show is culturally-appropriate and models relevant, realistic behaviors, youth are inclined to perceive the displayed actions as normative and adopt them. Borzekowski enthusiastically says, "It is exciting when you see a four-year-old want to use a treated malaria net or share a meal with an HIV-positive friend because that was what she saw on the local version of Sesame Street."

Analyzing Health Messages in News Media



Dr. Kate Smith adopts a sociological approach to studying news media as a critical social institution for public health. Her research focuses on the contribution of the news media to public understanding of chronic disease, injury, and emerging health topics. Unpacking public conceptualizations of health issues is important for understanding both personal health behaviors and attitudes towards policy initiatives. Dr. Smith's current research includes analyses of how diet and food are covered in relation to health, the spread and focus of news attention to H1N1 flu following the initial outbreak, and what injury events get described as "freak accidents."

Rx for Effective Communications: Debra Roter

Debra Roter has devoted her career to understanding and improving patient-physician communications.

The Roter Interaction Analysis System has been used in more than 150 studies worldwide, acquiring a record of predicting such patient outcomes as satisfaction with medical care, keeping of appointments and adherence to medical recommendations. “It efficiently characterizes interaction by direct application to recordings without the need for transcription,” says Roter.

The results of her research make possible a better understanding of the social and psychological factors that influence the ways in which doctors and patients talk with one another. “I’ve studied physician and patient gender and ethnicity in medical-visit interaction and how these affect the dynamics of the visit’s dialogue,” Roter says. “Many of our studies go further than description to the implementation and evaluation of communication interventions. We train [doctors and nurses] in communication skills and design tools to help patients prioritize questions and concerns, be more engaged in their exchanges, and feel more confident in initiating discussion.”

Roter, who holds additional appointments in the schools of Medicine and Nursing as well as the Kimmel Cancer Center, is also co-director of the HBS Genetic Counseling Training Program. Her current research includes a National Human Genome Research Institute–funded study of the genetic counseling process and a National Institute of Child Health and Human Development–funded investigation of the effects of restricted literacy on doctor-patient communication. The latter specifically looks at the ability of pregnant women to discuss medical issues with their physicians and to understand complex medical information communicated to them during obstetrical visits.

“We train health care providers and patients to make sense of complex—and sometimes stressful—information,” Roter says. “It always comes down to effective communication.”



Debra L. Roter, DrPH
Professor

“We train health care providers and patients to make sense of complex—and sometimes stressful—information. It always comes down to effective communication.”



Institute for Global Tobacco Control (IGTC)

Envisioning a tobacco-free world, the IGTC aims to promote and improve health and well-being by reducing global tobacco use. In carrying out its mission, the Institute works with international and local partners to conduct timely and relevant research that informs decision-making; carry out surveillance to establish an evidence base that drives policy and practice; build sustainable tobacco control capacity; and provide strategic planning and implementation support that is responsive to specific country needs. In this context, tobacco control is viewed from a socioecologic perspective that recognizes the need to address smoking and other tobacco-related behaviors from individual, family and community, societal, and structural perspectives.



Joanna Cohen, PhD
Director of IGTC

The IGTC team is comprised of faculty (including Drs. Joanna Cohen, Frances Stillman, Ben Apelberg, Erika Avila-Tang, and Mr. Steve Tamplin, as well as key faculty in other departments and schools) and staff with extensive experience in global tobacco control-related work across a wide range of academic and professional disciplines, including surveillance, monitoring, and evaluation; research; capacity building; and strategic planning and implementation support. Joanna Cohen, PhD, IGTC's new director, has focused her research on the factors that affect the adoption and implementation of public health policies (especially related to tobacco availability and smoking behavior) and on evaluating the beneficial effects and the unintended consequences of such policies. IGTC is a very proud partner in the Bloomberg Global Tobacco Control Initiative.

Surveillance, monitoring & evaluation

- Policy and program development and implementation
- Assessing social determinants
- Delineating tobacco-related diseases and health conditions
- Exposure monitoring
- Tracking tobacco industry practices

Research

- Applied and translational research that informs policy and practice
- The epidemiology of smoking
- Building effective research networks
- Cessation as a component of policy implementation
- The economics of tobacco control

Capacity building

- Developing tobacco control leaders and champions
- Building partnerships and networks
- Developing strong service delivery organizations
- Developing and disseminating timely, user-friendly information and products
- Mobilizing stakeholders to resolve priority issues

Strategic planning & implementation support

- Working with governments and civil society to carry out comprehensive, evidence-based, multi-level strategic planning
- Delivering strategic messages to targeted audiences
- Promoting collaborative approaches to program development and implementation

The Schroeder Institute for Tobacco Research and Policy Studies

David B. Abrams, PhD, is currently a professor in HBS and executive director of The Schroeder Institute for Tobacco Research and Policy Studies at the American Legacy Foundation in Washington, DC. Former director of the Office of Behavioral and Social Sciences Research (OBSSR) at NIH, Dr. Abrams is a psychologist with interests in behavioral medicine, tobacco control, and the transdisciplinary integration of biomedical, sociobehavioral, and ecological-population models to improve health.

Abrams feels that “systems integration is arguably the single most important challenge to maximize the public health impact of all the disparate evidence-based research knowledge that we have on reducing tobacco use behavior—from genes and the neuroscience of nicotine addiction to the broader socio-cultural, economic, and environment vectors and policy levers.”

Abrams joined the faculty at HBS in 2009 in a partnership between HBS and The American Legacy Foundation to establish the Schroeder Institute (SI). The SI supports a “high risk, high reward, transdisciplinary, team science” model to strengthen the science and practice of tobacco control in the U.S. The twofold vision of the SI is: 1) to identify strategic priorities, gaps, and extraordinary opportunities for emerging research; and 2) to conduct cutting-edge research that has clear public health impact in reducing population smoking prevalence. SI investigators are involved in a range of projects that include: examining cessation treatment through online social networks like Facebook; improving adherence to Internet-based cessation treatment; evaluating mobile support for tobacco quitlines; and testing new ways of treating tobacco use among persons living with HIV/AIDS. SI has also spearheaded efforts to examine the extraordinary opportunity for research to inform the FDA implementation of the 2009 Family Smoking Prevention and Tobacco Control Act such as: a synthesis of the scientific evidence to support a ban on menthol cigarettes; examining public opinions concerning the FDA regulatory authority over the tobacco industry; and evaluating the safety of e-cigarettes.



David B. Abrams, PhD
 Professor
 Executive Director of The Schroeder
 Institute for Tobacco Research
 and Policy Studies at American
 Legacy Foundation

Center on Alcohol Marketing and Youth (CAMY)



David Jernigan, PhD
Associate Professor
Director of CAMY

“It continues to make no sense to advertise more heavily to those who cannot purchase alcohol than to those who can”.

Young people see too many ads about their illegal drug of choice—alcohol. The mission of David Jernigan, associate professor and director of the Center on Alcohol Marketing and Youth (CAMY), is to reduce this glut of inappropriate advertising and help protect young people from the risks and allures of underage drinking.

Alcohol is the leading drug problem among America’s youth and causes more than 4,600 deaths each year among people under 21, according to the Centers for Disease Control and Prevention. “Every day, 4,750 kids under age 16 take their first drink,” says Jernigan. “Alcohol marketing influences youth. Numerous long-term, federally-funded studies have found that the more young people are exposed to alcohol advertising, the more likely they are to drink or to drink more if they are already drinking.”

Funded by the Centers for Disease Control and Prevention, CAMY monitors the marketing practices of the alcohol industry to focus attention and action on industry practices that jeopardize the health and safety of America’s youth. Reducing high rates of underage alcohol consumption and the suffering caused by alcohol-related injuries and deaths among young people requires using the public health strategies of limiting the access to and the appeal of alcohol to underage persons.

CAMY is an example of media advocacy in action. Jernigan teaches the Department’s course on media advocacy, which is the strategic use of the mass media to support community organizing to promote health policy change. The Center has generated thousands of news stories on youth exposure to alcohol advertising.

In May of 2010, the World Health Assembly adopted the first-ever Global Strategy to Reduce Alcohol-Related Harm. This landmark strategy mandates action in 10 areas, including restricting alcohol marketing, increasing alcohol taxes and reducing alcohol’s physical availability. Jernigan has worked as an advisor to the World Health Organization and the World Bank on alcohol issues. “We may think we have a big problem in the U.S., but particularly in less-resourced countries, the potential for harm is greater, and the resources to combat the harms are fewer.”

“Hopkins encourages me to do relevant research at home, and to be active in training and providing resources internationally. The alcohol policy field is small and aging—being at Hopkins allows me to introduce a new generation to this vital field of public health research and practice.”

Johns Hopkins Weight Management Center (JHWMC)

The United States, and indeed the world, is facing a growing obesity epidemic. According to the CDC, two out of three American adults are now overweight or obese. As the weight of Americans rise, so do the medical risks associated with obesity.

To help tackle this problem, Dr. Lawrence Cheskin founded the Johns Hopkins Weight Management Center (JHWMC) in 1990. Originally hospital-based, the JHWMC joined the

Bloomberg School of Public Health in July 2009. The Center is the first component of the School to provide health-related services to individuals, and it specializes in working with people suffering from obesity-related disorders. The treatment provided highlights the expertise of the professional staff, which includes faculty physicians, a dietitian, a behavioral psychologist, and an exercise physiologist. Weight loss and long-term weight maintenance is achieved through changes in diet, eating-related behaviors, and physical activity. Follow-up surveys of people who complete the program show patients lose, on average, 45 pounds over 22 weeks, with a majority of the weight loss maintained by many individuals. As one patient put it, “The day I walked in the door of the JHWMC was the start of my new life. The key is to be willing to make not one big change, but many small ones, one at a time. I learned from the experts at the JHWMC, and I intend to maintain my current (much lower) weight for life.”

The Center also conducts research into techniques for the treatment of weight disorders, and the prevention of obesity on a population level. In the face of our obesigenic environment, the challenge from a public health perspective is to seek methods to improve outcomes for long-term management of weight and to prevent weight gain population-wide.

For students seeking experience working on the problem of obesity, JHWMC serves as a dynamic teaching and mentoring site for master’s and doctoral students, postdoctoral fellows, medical students, and undergraduates. Students regularly shadow clinicians, work on research studies, and interact with patients, research participants, and staff.



Lawrence Cheskin, MD, FACP
Associate Professor
Director of the Johns Hopkins Weight
Management Center



The Lighthouse



Carl Latkin, PhD
Professor
Director of the Lighthouse

The primary goal of Dr. Carl Latkin’s work has been to develop sustainable behavior change interventions with public health impact for impoverished and stigmatized communities. A second goal of his research is to document and understand how the social and physical environments influence health behaviors. Specifically, his work has focused on HIV and STI prevention with disadvantaged populations, mental health and psychological distress among inner-city residents, the role of substance abuse on HIV risk behaviors, and measurement of social-contextual factors including social and personal network analysis, neighborhood characteristics, and geographic information systems among disadvantaged populations.

Dr. Latkin’s team has established an urban field station called “the Lighthouse” in East Baltimore a few blocks from the Johns Hopkins campus. The Lighthouse has been home to numerous HIV and STI interventions for injection drug users, crack users, high-risk women, and men who have sex with men. Studies at the Lighthouse typically utilize mixed methods and community-based approaches. They test their interventions using randomized clinical trials. For those interventions that are found to be efficacious, through the process of translational research, intervention packages are developed for dissemination to interested CBOs, NGOs, and health departments.

In addition to his work in Baltimore, Dr. Latkin has developed social network-oriented HIV/STI prevention interventions in India, Russia, Lithuania, Vietnam, and Thailand. These interventions train peer educators to diffuse behavior change through their social networks and promote social norms of positive health behaviors. Dr. Latkin also works extensively in India on HIV prevention and HIV medical care and medication adherence programs.



Behavioral Surveillance Research Study: BESURE

HIV surveillance data tells us the demographic characteristics of the local HIV epidemic, but the people who make decisions about Baltimore HIV prevention priorities need much more information than that. Dr. Danielle German, an assistant scientist, directs the BESURE study, which aims to understand the characteristics and behaviors associated with HIV infection among communities at high risk for transmission in Baltimore. BESURE is the Baltimore site of CDC's National



Danielle German, PhD, MPH
Assistant Scientist

HIV Behavioral Surveillance (NHBS) program, a nationwide effort that works with injection drug users, men who have sex with men, and heterosexuals at high risk. “In Baltimore, we are partnered with the state health department, which helps ensure that the information we collect gets directly into the hands of local prevention and policy makers,” German says.

German has a long history of HIV prevention and harm reduction work with drug-using populations. She is particularly interested in the social and structural mechanisms that contribute to HIV infection in minority and disadvantaged populations. “We know that things like homelessness, poverty, unemployment, and incarceration are common among people with HIV. These same factors affect mental health and substance use and make it difficult for people to engage in and sustain preventative behaviors,” she says.

The BESURE study offers an opportunity to understand the nature of the social context surrounding HIV transmission in order to build programs and implement policies to prevent future infections. Addressing social determinants might help to address some of the stark disparities in HIV infection that exist in Baltimore.

“One of the most chilling findings from the BESURE study is that approximately half of African American men who have sex with men in Baltimore are HIV-positive, and the majority do not know their HIV status. This is a public health emergency.”

“One of the most chilling findings from the BESURE study is that approximately half of African American men who have sex with men in Baltimore are HIV-positive, and the majority do not know their HIV status. This is a public health emergency.”

Center for Mental Health Services in Pediatric Primary Care



Lawrence S. Wissow, MD, MPH
Professor



The longstanding theme of Dr. Wissow's research has been detecting psychosocial problems in children and families, with a particular interest in what happens at the interface of primary care and mental health care. Dr. Wissow, Dr. Debra Roter, and Susan Larson have worked together to focus on clinicians' knowledge and skills, with a particular focus on communications skills. They have explored this question from a number of angles, including work in

different cultures (African American, Latin American, American Indian), differences attributable to provider gender, a range of sensitive issues (including suicide and end-of-life decision-making), and a range of clinical settings (pediatric and adult primary care, emergency care, and chronic disease management).

This work led to their promotion of a "common factors" approach to mental health care in primary care settings as an alternative to diagnosis-specific protocols, which have proven difficult to implement. The model has been incorporated into recommendations from the American Academy of Pediatrics' Task Force of Mental Health, and it forms the basis for our NIMH-funded Center for Mental Health Services in Pediatric Primary Care. The Center is based in HBS, with Dr. Kate Fothergill as its executive director, and it involves colleagues at University of Maryland, Dartmouth, Georgetown, Wake Forest, and at Bassett Healthcare in upstate New York. Its goal is to develop practical but effective tools that primary care practitioners can use to collaborate with families in preventing and treating child mental health.

Center for Injury Research and Policy

Andrea Carlson Gielen, ScD, ScM, is a professor in the Department of Health, Behavior and Society. As the director of the Johns Hopkins Center for Injury Research and Policy in the Department of Health Policy and Management, Dr. Gielen brings a behavioral sciences perspective to the Center, and her work focuses on the development, implementation, and evaluation of injury prevention interventions.

Dr. Gielen sees her work as being at the intersection of research and practice. In the early 1980s, Dr. Gielen directed the Maryland health department's first statewide child passenger safety program, Project KISS (Kids in Safety Seats), which won a national award from the Society for Public Health Education. "This experience, followed by having the privilege of working with the world's leading experts in the injury field as a doctoral student and junior faculty here at Hopkins, really cemented my enthusiasm and commitment to injury prevention as a career," says Gielen. She conducts intervention research addressing unintentional injuries and domestic violence, both of which have critical needs for effective prevention services.

Working with colleagues in the Department of Pediatrics and HBS faculty member Eileen McDonald, Dr. Gielen's research developed a first-of-its-kind Children's Safety Center that provides hands-on learning opportunities and low-cost safety products. Sustained for more than a decade, this program has been replicated in other children's hospitals in the U.S. and overseas. The work also led to a new line of research on dissemination of effective safety products and the creation of a mobile safety center with the Baltimore City Fire Department.

Some of Dr. Gielen's early research demonstrated the impact of intimate partner violence (IPV) in the lives of low-income, urban women. There are few evidence-based IPV programs for use in the health care setting and even fewer for HIV-positive women, but Center research is attempting to fill this knowledge gap. A pilot study of the intervention has been completed, and plans are underway for full-scale trials in the future.



Andrea Carlson Gielen, ScD, ScM
 Professor
 Director of the Center for Injury Research and Policy

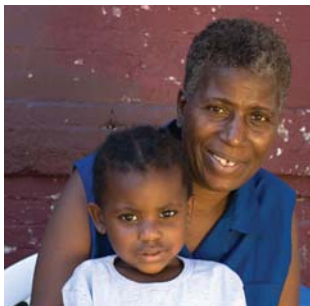


Community-Based Participatory Research: Janice Bowie



Janice V. Bowie, PhD, MPH
Associate Professor

“What you get in return are meaningful relationships, data that may reflect more accurately the population of interest and the satisfaction of doing work that serves people well.”



The health disparities of rural community residents, particularly African Americans, are pervasive. Dr. Bowie and her colleagues from the Hopkins Center for Health Disparities Solutions are employing a community-academic partnership with the Talbot County NAACP and the Talbot County Health Department to mobilize efforts to address the health and social inequities of its citizens.

Dr. Bowie provided faculty leadership to establish a new certificate program in Community Based Public Health for students wanting to develop skills and competencies necessary for community-based public health program development, management and evaluation, community-based participatory research (CBPR), and other research and public health practice in community settings. In addition, she and Lee Bone serve as site directors for the Kellogg Community Health Scholars postdoctoral program, which is building a cadre of leaders to utilize a CBPR approach to research and policy.

Dr. Bowie brings research, practice, and teaching experience in cancer prevention and control, specifically breast, prostate, and colorectal cancer; health disparities and African American health; and community-based participatory research. Each area of her work draws on multiple disciplines in the social and behavioral sciences, and has been applied in a range of settings including faith-based institutions, clinical, and community settings.

Longitudinal Research: The Woodlawn Study

As a doctoral student in the 1970s, Margaret Ensminger joined Chicago's Woodlawn Study. This unique longitudinal research and intervention project began in 1966 in all 12 schools in Woodlawn, a disadvantaged community on the south side of Chicago. All children and families in that community were invited to participate when the children were in first grade; most did. In 1983, Dr. Ensminger accepted a faculty position at Johns Hopkins University and has directed the Woodlawn Study from there ever since. The "children" are now in their late forties, and they and their mothers have been assessed over the life course. The study is illuminating the developmental pathways over the life course that lead some to fare well in life while others struggle. The experience led Ensminger, a professor with joint appointments in Psychiatry and Sociology, into a multidisciplinary career. It also sharpened her desire to effect positive change in society. "Family is important," Ensminger says, "but so are schools and experienced teachers, and the schools offer an opportunity for implementing programs that help children achieve their academic, social, and well-being potential." Ensminger and her collaborators have found that early difficulties in school, especially behavioral problems, lead to later drug and alcohol use, delinquency, and school dropout. Child-rearing patterns, attachment to school, and mother's education protect children from later difficulties. The study has also focused on development in the adult years and has considered the role of work, marriage, church, and organizational involvement in the health and well-being of the study participants. "When we understand the context, we can help reduce the risks and change the course of the children's pathways. We can't design interventions or policies on assumptions." The Woodlawn team includes several faculty members from the department. Doctoral students often join the research team each year, and nine doctoral students have written their dissertations on public health issues with this longitudinal and developmental data.



Margaret E. Ensminger, PhD
Professor

“When we understand the context, we can help reduce the risks and change the course of the children’s pathways. We can’t design interventions or policies on assumptions.”



Student Offerings: Overview and Doctoral Programs (PhD, ScD, DrPH)

Our education and training programs empower the public health leaders of tomorrow. HBS offers a variety of degree programs and educational opportunities that allow learners to develop skill sets at the cutting edge of behavioral and social science as applied to public health:

Degrees

- Doctor of Philosophy (PhD)
- Doctor of Public Health (DrPH)
- Doctor of Science (ScD)
- Master of Science in Public Health (MSPH)
- Master of Health Science in Social Factors (MHS)
- Master of Science (ScM) in genetic counseling
- Master of Public Health (MPH) concentration in social and behavioral sciences

Below are short summaries of several of our degree programs. Complete information on all of our academic programs can be found at www.jhsph.edu/dept/hbs.

Doctor of Philosophy (PhD) or Doctor of Science (ScD)

This doctoral program is designed for individuals seeking training for careers as social and behavioral scientists, health educators, and health promotion or communication specialists in the public health arena. The emphasis of the curriculum is on the application of behavioral and social science perspectives to research on contemporary health problems. Understanding and influencing health behaviors that are risk factors in disease and illness, as well as behaviors that can be considered protective and health enhancing, are strengths of the program. Rigorous training in research methods and program design and evaluation are also key elements of the curriculum.

Doctor of Public Health (DrPH)

The Doctor of Public Health (DrPH) is a Schoolwide advanced professional degree program designed for the student who has a master of public health (MPH) or its equivalent and who intends to pursue a leadership career in the professional practice of public health. The focus of the DrPH program in the Department of Health, Behavior and Society is on integrating and applying a broad range of knowledge and analytical skills in leadership, practice, policy analysis, program and budget management, and communication, with an emphasis on the application of behavioral and social science perspectives to contemporary health problems.



Student Offerings: Three Master's Programs

Master of Science in Public Health (MSPH) in Health Education and Health Communication:

The MSPH (previously a Master of Health Science) in health education and health communication prepares individuals for careers in the public health work force with an emphasis on health promotion and/or communication. The program provides a solid foundation in behavioral sciences principles and theories along with advanced skills in program planning, implementation, and evaluation. The program of study allows candidates sufficient flexibility to tailor their training to a specific population of interest, a set of health issues, or a broader focus on professional skills. Further tailoring may happen through the required field placement, where candidates apply their new skills to real-world public health problems in supervised positions with health education and communication programs. HBS faculty member Eileen McDonald works closely with MSPH candidates through a three-term seminar in the first year of the program and throughout the second year of the program through monthly seminars, field placement site visits, and one-on-one discussions to offer assistance as students complete their required final report.



Master of Health Science (MHS) in Social Factors in Health: The newest degree program in the Department is the MHS in Social Factors in Health. This academic master's degree is for students with undergraduate exposure to social and behavioral sciences and/or public health, who are interested in further training in the theory and methods for social science research. The degree prepares students for further doctoral training in public health or for work in public health research or policy, and focuses on integrating and applying a broad range of knowledge and analytical skills in social aspects of public health, with an emphasis on contemporary health problems. The program consists of one-and-a-half to two years of full-time study, combining classroom-based coursework, seminars and independent study, development of a research plan, completion of a mentored research project, and a master's research paper presenting original research. The program is directed by Katherine Smith, PhD, and co-directed by Danielle German, PhD.

Master of Science (ScM) in Genetic Counseling: The HBS Department and the National Human Genome Research Institute (NHGRI) at the National Institutes of Health collaborate to offer a unique Master's of Science (ScM) in genetic counseling. Established in 1996, the program draws on the strengths of both institutions to provide students with a strong foundation in three distinct areas: 1) the provision of quality genetic counseling clinical services, with an emphasis on clients' psychological and educational needs, 2) the conduct of social and behavioral science research related to genetic counseling, and 3) the education of health care providers, policymakers, and the public about genetics and related health and social issues. Program directors Barbara Biesecker (NHGRI) and Debra Roter (HBS), HBS faculty member Lori Erby, and members of the program's Executive Committee teach core courses, mentor students, and work to insure that the curriculum is responsive to the continually changing needs of students.

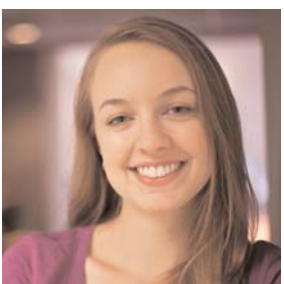
Student Involvement and Leadership



Amber Summers, PhD student in HBS, is currently exploring her research interests in cancer and obesity prevention by investigating individual and environmental factors that influence dietary behaviors. While fulfilling the requirements of the doctoral program, she has supplemented her academic path by participating in leadership roles at the School of Public Health. As a co-chair of the Health, Behavior and Society Student Organization, she served as a liaison between students and faculty in the HBS department in addition to facilitating both academic and social activities to increase student involvement in department life. Summers also participates in diversity leadership at the School by serving on the Black Graduate Student Association executive board and through her role as a student diversity ambassador.



Morgan Philbin completed her MHS in International Health in 2007 and began her doctoral work in HBS in 2008. She has worked on research projects with faculty in HBS and the medical school to explore her interests in HIV/AIDS, human behavior, and ethnographic methods, and she has presented her work at both domestic and international conferences. She has also served as a teaching assistant in multiple departments and has taken advantage of Johns Hopkins as a whole by taking classes and engaging with faculty at the Medical School and the School of Arts and Sciences. Philbin has also volunteered as an HIV voluntary counselor and tester in the Hopkins Emergency Room and by giving prenatal health talks to the local Latino community. As an MHS student she chaired the International Health Student Group, and she continues to be engaged through co-chairing the Health, Behavior and Society Student Organization (HBSSO). She has also been named a Sommer Scholar in 2011.



Elizabeth Rhoades chose the Department of Health, Behavior and Society for its interdisciplinary approach to public health and the diverse interests of its faculty. Taking advantage of the wide range of research opportunities available, she has honed her qualitative skills working with HBS faculty on projects related to alcohol advertising and news coverage of the H1N1 outbreak. She became further involved in the department as co-chair of the HBS Student Organization (HBSSO), helping to orient new students and encouraging student involvement in the department. Additionally, Rhoades has become involved in various activities in the wider Johns Hopkins community, as a teaching assistant to Public Health undergraduates, and as a student representative on the Schoolwide Academic Ethics Board. A Sommer Scholar, Rhoades is bringing her research interest in perspectives on water, climate change, and health to a cross-departmental Sommer Scholar team project, organizing events to mark World Water Day.

Alumni: Select Examples of Graduates' Careers

Catherine Harbour, PhD

Catherine Harbour graduated from HBS with her PhD in May 2009. Her dissertation was titled, "Normative Influences on Young Adults in Minya, Egypt, for Smoking and for Desired Family Size." She is currently a Fulbright Student in Cairo, conducting research on smoking and reproductive health among Egyptian youth.

Allisyn Moran, PhD

Allisyn Moran received her MHS in International Health and her PhD in HBS. Her final dissertation was titled, "Maternal Morbidity in Rural Bangladesh: Women's Perceptions and Care Seeking Behaviors." When she graduated, Moran worked as a scientist in the Public Health Sciences Division of The International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR,B), a health research organization located in Dhaka, Bangladesh. She currently works with the Saving Newborn Lives Program at Save the Children as a Senior Advisor for Research and Evaluation and is an associate in the Department of International Health at the Bloomberg School of Public Health.

Alezandria Turner, PhD

Alezandria Turner completed her doctoral degree in the HBS department in May 2009. Her dissertation was titled, "Psychosocial and Ecosocial Correlates of Sexual Behavior in Out-of-School Youth in Baltimore, Md." Since graduation she has worked as project director in the Center for Urban Epidemiologic Studies at the New York Academy of Medicine in New York City. She coordinates a NIDA-funded program that provides HIV testing to pharmacy customers and IDU syringe customers at two pharmacies in Harlem.

Linda Smith, MHS

Linda Smith completed her MHS in 2006. She did her field placement under the direction of HBS

faculty member Dr. Carl Latkin and worked with him and his staff at the Lighthouse, a research clinic exploring the study of disease prevention, including transmission of HIV/AIDS and the role of social networks. Based on her experiences there, Smith's final report was entitled, "Monitoring Intervention Fidelity of Behavioral Interventions for HIV Prevention." She now works as Program Director for the Global Health Access Program in Thailand.

Ellen Robinson, MHS

Ellen Robinson, a member of the 2006 MHS cohort, entered the program with a specific interest in health communication. As part of her degree, she was able to complete a certificate in health communication. Robinson completed her field placement with IQ Solutions, a social marketing firm in Rockville, Md. Her final report, entitled "The Use of Formative Research in Developing Communication Campaigns for the National Institute on Drug Abuse," summarized her major field placement experience. Today Robinson remains employed by IQ Solutions where she is a senior communications manager.

Amy Turriff, ScM

Amy Turriff joined the HBS ScM program in 2008 and graduated with her ScM in 2010. Her thesis, for which she recently accepted the Best Student Abstract Award at the meeting of the National Society of Genetic Counselors, focused on the psychosocial adaptation of adolescents and adults with Klinefelter Syndrome. Upon graduation, she was offered a genetic counseling position at the National Eye Institute (NEI), where she is involved with the X-linked retinoschisis and Usher syndrome research protocols and provides genetic counseling to pediatric and adult patients seen in the clinic. Turriff recently passed her genetic counseling certification exam.

Full-Time Faculty



David B. Abrams, PhD, professor in HBS and executive director of the Schroeder Institute. He is a licensed clinical health psychologist, specializing in treatment of addictive behavior. His primary interest is in fostering the systems integration of biomedical, sociobehavioral, and ecologic-public health models to understand and to eliminate tobacco use behavior at the population level.



Stella O. Babalola, PhD, associate professor. Dr. Babalola serves as senior research advisor at the Center for Communication Programs. She has helped to design, implement, monitor, and evaluate more than 30 programs on HIV prevention and care, family planning, child survival, women empowerment, female genital cutting, adolescent health, and democratic participation.



Lee R. Bone, MPH, associate professor. Ms. Bone's research focuses on health promotion in underserved, urban African-American populations and incorporates multidisciplinary and community-based participatory approaches. Her studies include cardiovascular disease (CVD) and CVD risk factors, diabetes, and cancer detection and control.



Dina L.G. Borzekowski, EdD, associate professor. Dr. Borzekowski's area of expertise is children, media, and health. She investigates how a child's or adolescent's demographics, background, and issue involvement (e.g., alcohol use, smoking, violence, nutrition and eating disorders) influence perceptions of positive and negative health messages.



Marc G. Boulay, PhD, assistant professor. Dr. Boulay's work focuses on mass media and interpersonal communication and their effects on health behaviors. He has evaluated health communication programs related to family planning, HIV/AIDS, adolescent health, and malaria prevention and treatment in Ghana, Tanzania, Nepal, Bangladesh, and several Eastern European countries.

Janice Bowie, PhD, MPH, is an associate professor and core faculty in the Center for Health Disparities Solutions. She also co-directs the School's Kellogg Community Health Scholars postdoctoral program. Her research includes minority health and health disparities, community-based participatory research (CBPR), chronic disease control, and spirituality. She teaches courses on implementation and sustainability of community health programs and an introduction to CBPR.



Rajeev Cherukupalli, PhD, research associate. Dr. Cherukupalli is an economist with research interests in the impact of tax subsidies on health insurance purchase decisions in the United States, risk and the composition of insurance markets, and, more recently, the behavioral economics of tobacco taxation. He assists the Bloomberg Initiative to Reduce Tobacco Use with work on the effectiveness of tobacco taxes in reducing consumption and prevalence globally.



Lawrence J. Cheskin, MD, associate professor. Dr. Cheskin founded and directs the Johns Hopkins Weight Management Center, which uses a comprehensive, team-based approach to obesity treatment. His research has included the effects of medications on body weight, how smoking relates to dieting and weight, how technology can be used to enhance the process of dietary change in people with diabetes, and the efficacy of lifestyle changes and food substitutions in weight loss and maintenance.



Joanna Cohen, PhD, associate professor and director of the Institute for Global Tobacco Control. She is an accomplished educator and has a strong body of published work in leading national and international journals. Her research interests focus on the factors that affect the adoption and implementation of public health policies (especially related to tobacco availability and smoking behavior) and on evaluating the beneficial effects and the unintended consequences of such policies.



Melissa Davey-Rothwell, PhD, CHES, assistant scientist. Dr. Davey-Rothwell's main research interest is the influence of social networks and norms on drug and sex-related behaviors. In addition, her work focuses on development, evaluation, and dissemination of behavioral interventions aimed to change HIV risk behaviors, depression, and medication adherence.



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Elaine E. Doherty, PhD, assistant scientist. Dr. Doherty's interests include studying criminal behavior and drug use over time. Her research focuses on using a life course framework to investigate the determinants of stability and change in drug use and crime throughout adulthood, with particular attention to the role of adult social bonds.



Margaret Ensminger, PhD, professor and vice chair of HBS. Dr. Ensminger's interests include life span development and health, childhood and adolescence, social structure and health, substance use, and aggressive and violent behavior. In the Woodlawn Project, she has been following a cohort of children from an inner-city neighborhood, first seen when they were in first grade and recently assessed at age 42.



Lori Hamby Erby, PhD, assistant professor. Dr. Erby's research is in the area of genetic counseling, with a focus on communication to enhance informed decision making and adaptation. She has a particular interest in linking the process of genetics communication to patient outcomes, in particular for individuals with limited literacy skills.



Maria Elena Figueroa, PhD, assistant scientist. Dr. Figueroa is director of the Research and Evaluation Division of the Center for Communication Programs. Her work includes leading the research and evaluation of large-scale HIV prevention programs in Mozambique. She also heads the Center's efforts on water, hygiene, and sanitation programs.



Fannie Fonseca-Becker, DrPH, assistant scientist. Dr. Fonseca-Becker is the director of the Johnson & Johnson Community Health Care Scholars Program. Her research interests are on the effect of capacity building in community health care program sustainability and on the reduction of health disparities. She also works in identifying the predictors of health competence for Latinos in the U.S.

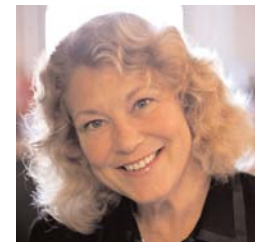
Kate E. Fothergill, PhD, MPH, assistant scientist. Dr. Fothergill works for both the Woodlawn Project and the Center for Mental Health Services in Pediatric Primary Care. She conducts research on the development of risk behaviors over the life course. For the Center, she assists Dr. Wissow with the oversight of the project, which aims to improve the capacity of primary care providers to deliver mental health care to children.



Danielle German, PhD, assistant scientist. Dr. German uses qualitative and quantitative methods to understand and address issues related to urban health, HIV transmission, drug use, mental health, social stability, and the built environment. With the BESURE study, she conducts HIV behavioral surveillance among populations at high risk in Baltimore.



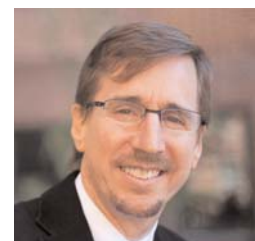
Andrea Gielen, ScD, ScM, professor. Dr. Gielen's research interests are in the application of behavior change theory, health education, and health communication to injury and violence prevention. Her work focuses on interventions to reduce childhood injuries among low-income, urban families and domestic violence among women at risk for and living with HIV/AIDS.



David Holtgrave, PhD, professor and chair. Dr. Holtgrave is professor and chair of the Department of Health, Behavior and Society. Previously, he was a professor at the Rollins School of Public Health, Emory University, and director of the Division of HIV/AIDS Prevention–Intervention Research and Support at the Centers for Disease Control and Prevention. He currently serves on the Presidential Advisory Council on HIV/AIDS and the Baltimore City Commission on AIDS. Dr. Holtgrave's research has heavily focused on HIV prevention, housing, and treatment; more recently his work has included studies related to tobacco use.



David H. Jernigan, PhD, associate professor. Dr. Jernigan, director of the Center on Alcohol Marketing and Youth, is an expert on alcohol policy and on the strategic use of the media to support health policy change. He has worked as an adviser to the World Health Organization and the World Bank. He was principal author of WHO's first Global Status Report on Alcohol and Global Status Report on Alcohol and Youth, and he co-authored "Media Advocacy and Public Health: Power for Prevention."



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Vanya Jones, PhD, MPH, assistant scientist. Dr. Jones explores how psychosocial and environmental factors impact the burden of injury for vulnerable populations including children, adolescents, and older adults. She is core faculty in the Center for Injury Research and Policy. Dr. Jones is currently investigating the relationship between parental/adolescent communication and unintentional and intentional childhood injuries.



Hee-Soon Juon, PhD, associate professor. Dr. Juon's research interests are minority mental health, suicidal behavior, substance use, and cancer control behaviors of underserved minority populations. Her work focuses on interventions to reduce cancer disparities of Asian Americans, particularly liver cancer prevention related to chronic hepatitis B virus infection.



Deanna Kerrigan, PhD, associate professor. Dr. Kerrigan's research focuses on social and structural factors affecting the health of underserved populations. She has focused on developing and evaluating effective HIV prevention interventions among marginalized population groups in Latin America as well as at-risk youth in the U.S. She directs a global HIV prevention research program called Project SEARCH: Research to Prevention (R2P) funded by USAID.

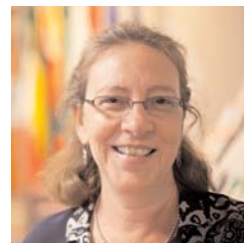


D. Lawrence Kincaid, PhD, associate scientist. Dr. Kincaid's research has focused on health communication evaluation, including methods to measure cost-effectiveness and methods for health communication analysis, such as computer programs to analyze audience perceptions of health-related behavior and to test a new theory of social influence in communication networks.



Amy R. Knowlton, ScD, associate professor. Dr. Knowlton's research focuses on social environmental factors associated with HIV medication adherence and engagement in HIV primary care among disadvantaged populations. She has published on topics of informal caregiving, illicit drug use, social support networks, gender, psychological distress, medical service utilization, and medication adherence.

Susan Krenn, BA, director, Center for Communication Programs. Ms. Krenn leads the Center, providing strategic oversight and direction for the Center's knowledge management, social and behavior change communication and research and evaluation programs. She has more than 25 years of experience developing and managing communication programs for family planning, safe motherhood, malaria, democracy and governance, and HIV/AIDS.



Susan M. Larson, MS, senior research associate. Ms. Larson's research is focused on studies of patient-provider communication, specifically through application of the Roter Interaction Analysis System. Studies include depression care for African Americans, consumer Internet education, colorectal cancer screening, and doctor-older patient interaction and medical decisions.



Carl Latkin, PhD, professor. The primary goal of Dr. Latkin's work has been to develop sustainable behavior change interventions for impoverished communities that have a public health impact. His work has focused on HIV, STI, and depression prevention, substance abuse, HIV risk behaviors, and social-contextual factors including social networks and neighborhood characteristics among disadvantaged populations.



Lori Leonard, ScD, associate professor. Dr. Leonard conducts ethnographic research on the impacts of the development of the oil industry and the construction of a pipeline on rural communities in Chad. Using ethnographic approaches, she also studies how health policies and technologies shape the clinical experience for patients and healthcare providers in the U.S.



Cathy Maulsby, MPH, PhD, assistant scientist. Dr. Maulsby's research focuses on undiagnosed seropositivity among men who have sex with men and the role of partnership characteristics in understanding HIV transmission. Dr. Maulsby is the Director of Evaluation for Positive Charge, a national program that links HIV-positive individuals into HIV care and treatment.



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Eileen McDonald, MS, associate scientist. Ms. McDonald's research includes the development, implementation, and evaluation of a variety of clinical and community-based interventions to reduce pediatric injury. She oversees three safety resource centers, partners with the Baltimore City Fire Department, and will be producing a dissemination guide to assist other communities create their own mobile or hospital-based safety centers.



Anne Palmer, MA, research associate. Ms. Palmer is the Eating for the Future program director for Johns Hopkins Center for a Livable Future. Her research interests include community food security, regional food systems, food environments, food deserts, and state and municipal food policy. She provides technical assistance to non-profits, foundations, and government agencies that are working to improve food access and supporting sustainable food systems.



Phyllis Piotrow, PhD, was the founder and first director of the Center for Communication Programs. Recognized internationally as an expert on population, family planning, and development communication, Dr. Piotrow has played a leading role in family planning and related health communication programs for 30 years.



Rajiv N. Rimal, PhD, associate professor. Dr. Rimal's research in health communication and health promotion focuses on the influence of social norms and risk perception on behavior change. He is currently working in Malawi, Ethiopia, and India.



Judith A. Robertson, BS, senior research associate. Ms. Robertson provides analysis and data management for a large epidemiological prospective study (The Woodlawn Project) exploring risk and protective factors for drug use and crime and their later effects on physical and mental health and social role functioning.

Debra Roter, DrPH, professor. Dr. Roter's research focuses on medical communication between patients and health care providers and its broad array of predictors and consequences. She is author of the Roter Interaction Analysis System (RIAS), which is the most widely used approach to medical interaction coding worldwide.



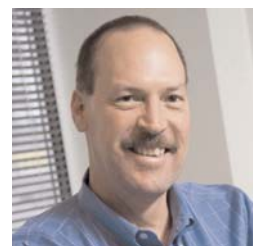
Katherine Clegg Smith, PhD, associate professor. Dr. Smith's research focuses on social determinants of health behavior, particularly the media's role in shaping health knowledge, behavior, and policymaking. She has a general interest in chronic disease prevention, public understanding of emerging health issues, and the use of qualitative methodology in public health research.



Frances Stillman, PhD, associate professor. Dr. Stillman is nationally and internationally recognized for her work on tobacco control and smoking cessation, especially for developing and evaluating innovative, state-of-the-art intervention projects. However, her major accomplishments are in the area of evaluation and the development of metrics based on a social-ecological model of change.



J. Douglas Storey, PhD, assistant professor. Dr. Storey's work focuses on the design and evaluation of health communication programs and on capacity building for strategic health communication planning, mostly in international settings. Current interests include the impact of risk and efficacy messaging on public health preparedness and the role of health competence in preventive health behavior.



Tara M. Sullivan, PhD, assistant scientist. Dr. Sullivan is a research associate at the CCP. Her areas of expertise are in program evaluation, health communication, quality of care, and reproductive health. She is currently investigating the demand for and uptake of evidence-based information into practice in Ethiopia, India, Malawi, Peru, Senegal, and multiple countries in southern Africa.



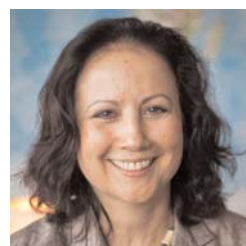
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Stephen Tamplin, MSE, associate scientist. Mr. Tamplin's work with the Institute for Global Tobacco Control focuses on tobacco control project development and implementation worldwide. He has broad public health and environment experience covering a range of technical disciplines, including tobacco control, air and water pollution control, chemical safety and hazardous waste management, and health promotion.



Karin E. Tobin, PhD, assistant scientist. Dr. Tobin's research focuses on socio-spatial factors that shape social networks and HIV risk of African American men who have sex with men and drug users and developing, testing, and evaluating theoretically-based behavioral interventions to reduce HIV, STIs, and poor mental health outcomes.



Carol Underwood, PhD, assistant professor. Dr. Underwood, a sociologist with a doctorate from JHU, has conducted research in international development, health communication, and gender equity for over 20 years. Her publications include HIV prevention among adolescents, Muslim religious leaders' views on contraception, Islam and health policy in Iran, and women's agency in the Arab world.



Lawrence Wissow, MD, professor. Dr. Wissow's work focuses on patient-doctor communication and its role in the detection and treatment of mental health issues during primary medical care visits. Head of the Center for Mental Health Services in Pediatric Primary Care, he is working on methods for incorporating mental health into primary care systems in both domestic and international settings.

Selected Faculty Publications

Adolescent/Children

Borzekowski DLG. Considering Children and Health Literacy: A Theoretical Approach. *Pediatrics*. 2009; 124: S282-S288.

Doherty EE, Green KM, Ensminger ME. Investigating the long-term influence of adolescent delinquency on drug use initiation. *Drug and Alcohol Dependence*. 2008; 93: 72-84.

Cancer

Bowie JV, Wells AM, Juon HS, Sydnor KD, Rodrigues E. How old are African American women when they receive their first mammogram? Results from a church-based study. *Journal of Community Health*. 2008 Aug; 33(4):183-191.

Klassen AC, Smith KC, Black MM, Caulfield LE. Mixed methods approaches to understanding cancer-related dietary risk in public housing residents. *Journal of Urban Health*. 2009 Jul; 86(4):624-40.

Communication/Media

Babalola S, Fatusi A, Anyanti J. Media Saturation, Communication Exposure and HIV Stigma in Nigeria. *Social Science & Medicine*. 2009; 68: 1513–1520 .

Boulay M, Tweedie I, Fiagbey E. The effectiveness of a national communication campaign using religious leaders to reduce HIV-related stigma in Ghana. *African Journal of AIDS Research*. 2008; 7(1):133-141.

Rimal RN, Brown J, Mkandawire G, Folda L, Creel AH. Audience segmentation as a social marketing tool in health promotion: Use of the risk perception attitude (RPA) framework in HIV prevention in Malawi. *American Journal of Public Health*. 2009;99: 2224-2229.

Roter DL, Hall JA. Communication and adherence: moving from prediction to understanding. *Medical Care*. 2009;47(8):823-5.

Smith KC, Twum D, Gielen AC. Media coverage of celebrity DUIs: teachable moments or problematic social modeling? *Alcohol*. 2009; 44(3):256-60.

Diet/Nutrition/Obesity/Diabetes

Borzekowski DL, Schenk S, Wilson JL, Peebles R. e-Ana and e-Mia: A content analysis of pro-eating disorder Web sites. *American Journal of Public Health*. 2010 Aug; 100(8):1526-34.

Cheskin LJ. (2010) Chapter 44: Obesity. In: Mullin G (ed) Integrative Gastroenterology. *Oxford University Press*, NY.

Family Health

Juon HS, Green KM, Fothergill KE, Kasper JD, Thorpe RJ, Ensminger ME. Welfare receipt trajectories of African-American women followed for 30 years. *Journal of Urban Health*. 2010; 87(1):76-94.

Leonard L. The social impact of the Chad-Cameroon oil pipeline: How industrial development affects gender relations, land tenure and local culture. *Global Public Health*. 2010; 5(2): 209-210.

Storey JD, Kaggwa E. The influence of changes in fertility-related norms on contraceptive use in Egypt, 1995-2005. *Population Review*. 2009; 48(1): 1-21.

Genetics

Erby LH, Roter D, Larson S, Cho J. The Rapid Estimate of Adult Literacy in Genetics (REAL-G): A means to assess literacy deficits in the context of genetics. *American Journal of Medical Genetics Part A*. 2008; 146A:174-181.

Healthcare/Policy

Committee on State of the USA Health Indicators. (David R. Holtgrave, member). 2008. State of the U.S.A. Health Indicators. Washington, D.C.: Institute of Medicine, *National Academy Press*.

Jernigan, DH. Alcohol-branded merchandise: the need for action. *Archives of Pediatric and Adolescent Medicine*. 2009; 163(3):278-9.

Sullivan, T.M.; Ohkubo, S.; Rinehart, W.; Storey, J.D. From research to policy and practice: A logic model to measure the impact of knowledge management for health programs. *Knowledge Management for Development Journal*. 2010 May; 6(1): 50-65.

HIV/AIDS/STDs

Holtgrave DR, Hall HI, Rhodes PH, Wolitski RJ. Updated annual HIV transmission rates in the United States, 1977-2006. *Journal of Acquired Immune Deficiency Syndromes*. 2009; 50: 236-238.

Holtgrave DR. On the epidemiologic and economic importance of the National AIDS Strategy for the United States. *Journal of Acquired Immune Deficiency Syndromes*. 2010; 55: 139-142.

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Special Thanks

The Department of Health, Behavior and Society could not have made such great strides since its inception without the incredible dedication and outstanding contributions of its central staff. From arranging critical seminar series, to assisting students as they arrive on campus, to developing a financial system for the Department, to tackling complex human resources issues around the world, the HBS staff have truly advanced the mission of the Department. The HBS faculty and students sincerely thank the Departmental staff for their contributions above and beyond the call of duty.

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