“To be yourself in a world that is constantly trying to make you something else is the greatest accomplishment.” — Ralph Waldo Emerson

WE ARE READY!

“I expect to expand my knowledge of global healthcare issues, population-based research, as well as knowledge of the rich and historic Ethiopian culture and people. I furthermore hope to gain insight into a potential career as an international medical practitioner and global health advocate. I want to make a difference.” — Kia Byrd, MIRT 2013 Ethiopia

“I grew up in an inner-city neighborhood where I witnessed and experienced many inequities in health and education. I hope to continue on to either a doctoral degree or MPH, and to apply the knowledge gained there to underserved areas like the community in which I was raised.” — Anjalene Whittier, MIRT 2013 Chile

“I believe the opportunity to study public health in Ethiopia through the MIRT program will give me a unique perspective that will supplement my classroom based knowledge of the field. In addition, it will reinforce my aspiration to work professionally as a physician and public health advocate globally!” — Alazar Haregu, MIRT 2013 Ethiopia
It is with great pleasure that we introduce our HSPH MIRT (MHIRT) 2013 fellows to the MIRT Program community. The new cohort of fellows are excited to begin their fellowships and continue the legacy of the MIRT Program in Chile and Ethiopia. Hope you enjoy meeting them!

**Kia’s Personal Statement**

Greetings. My name is Kia Byrd, and I am currently a junior majoring in Biology at Howard University in Washington, DC. As a current member of the Howard Hughes Medical Institute Research Scholars Program at Howard University and as a former research fellow at the California Institute of Technology, I am constantly reminded of the essential integration of research, medical treatment, and medical practice. With a fervent interest in both global health and medicine, I hope to earn an MD/MPH combined degree with goals of working in developing nations to further clinical research and practice in infectious disease.

I am extremely honored to have the opportunity to spend my summer in Ethiopia as a 2013 HSPH MIRT Fellow. I expect to expand my knowledge of global healthcare issues, population-based research, as well as knowledge of the rich and historic Ethiopian culture and people. I furthermore hope to gain insight into a potential career as an international medical practitioner and global health advocate. I want to make a difference.

**Alazar’s Personal Statement**

Hello! My name is Alazar Haregu. I am a third year student majoring in Biology at the University of Virginia. My interests range widely from medicine, to mentoring, to classical and modern art. I have a deep interest in health care reform within the scope of developing countries. While I have studied health care in developing countries through university courses as well as independent news sources, I feel that I have not been able to fully grasp the scope of the health disparity that exists between developed and underdeveloped nations. I believe the opportunity to study public health in Ethiopia through the MIRT program will give me a unique perspective that will supplement my classroom based knowledge of the field. In addition, it will reinforce my aspiration to work professionally as a physician and public health advocate globally!

“I slept and I dreamed that life is all joy. I woke and I saw that life is all service. I served and I saw that service is joy.” — Kahlil Gibran
**Darve’s Personal Statement**

Hi There! I am Darvé Robinson, a junior at the University of Pittsburgh, and I am excited to conduct population health research with the Harvard MIRT 2013 program! My personal interests include exploring science and technology, cooking, working outdoors, and music. I am an avid drummer, and I am happy to have played with music groups and ensembles from every continent (except Antarctica!). I currently play in an Indo-European Roma band, and I thoroughly enjoy the rich culture that music brings.

Much like music, science and population health derive its meaning from the people it serves; the culture, history and pride of the populations at study have large impacts on the overall health of those populations. During my time in Ethiopia, I hope to gain a clear sense of these connections and to understand more about the health dynamics at play in East Africa. I am also excited to experience some of the music and food that the Ethiopian culture has to offer. I am honored to have been selected for the Harvard MIRT 2013 program and I can’t wait for these experiences to begin!

**Jason’s Personal Statement**

Hi! I’m Jason Tran, and I currently attend the University of California, Riverside as an incoming junior. Majoring in Public Policy with a concentration in health and cultural policies, I hope to use this knowledge to create long lasting impacts for underserved communities. Heading towards a path that’ll make this possible, I aspire to become both a researcher and a physician, because the combination allows me to make dual contributions: While researching major public health issues, I will also play an active medical role in peoples’ lives. Most of my activities consist of helping the underserved, but I also enjoy writing music and hiking as hobbies. Just this past March, I decided to start training for triathlons.

From the HSPH MIRT fellowship, I anticipate to gain a wealth of research experience that’ll help make my life goals come true. All I can really say for now is that having the possibility to work and live somewhere outside of my comfort zone (Ethiopia) will benefit me in more ways than one.

“When you walk through that doorway of opportunity, you do not slam it shut behind you. You reach back and hold it open.” —First Lady Michelle Obama
Hello! My name is Deborah Rose and I’m currently a sophomore at Cornell University majoring in Spanish, double minoring in Global Health and Latino Studies, and completing the pre-medical track. I’m very interested in studying and addressing prevalent health issues that populations face across the globe. I’ve been exposed to issues within different cultural and socioeconomic contexts (whether they pertain to physical, mental, or social health), but I’ve never had the opportunity to really understand the strategies and/or interventions carried out to minimize the health challenges many are facing in resource-poor areas. Participating in the HSPH MIRT program will certainly allow me to do so. I’m very much looking forward to this international research experience in June because I know that it will be both transformative and enlightening. By the end of the fellowship, I hope to hone my research skills, broaden my understanding of global health issues, enhance cultural competency, and solidify my commitment to a career in healthcare.

I am a junior undergraduate at the University of Washington. I am majoring in Environmental Health with a minor in Global Health. I have always been interested in healthcare and especially health in other countries. In my spare time I am an active member of my sorority, Alpha Delta Pi, I am a snowboard/ski instructor, and I play club soccer at UW. I also enjoy hiking and sailing in the Washington area. I began doing research my sophomore year in neuroendocrinology and as a result I have blended my goals of becoming a doctor with doing research. I would like to get an MD/PhD and focus in rural healthcare. I am very excited to participate in the 2013 HSPH MIRT fellowship. I look forward to perfecting my Spanish and meeting people with different lifestyles. It will be interesting to view public health in another country and to be able to experience a field of research I haven’t done before!

“Protect your enthusiasm from the negativity and fear of others. Never decide to do nothing just because you can only do little. Do what you can. You would be surprised at what ‘little’ acts have done for our world.”—Steve Maraboli
Hello! My name is Anjalene Whittier, and I'm a student at the University of Rochester studying psychology. I grew up in an inner-city neighborhood where I witnessed and experienced many inequities in health and education. I hope to continue on to either a doctoral degree or MPH, and to apply the knowledge gained there to underserved areas like the community in which I was raised. I'm especially interested in working with people who have disabilities, like my younger sister.

I've always wanted to travel to South America, but I've never had the opportunity before. I can't wait to learn more about public health, gain more research experience, and pick up a few Chilenismos on the way!

African-American women have the highest mortality rates from heart disease, breast and lung cancer, stroke, and pregnancy among women of all racial and ethnic backgrounds.

Diabetes is most prevalent among American Indians in the southeastern United States (27.8 percent) and southern Arizona (27.8 percent).

Non-Hispanic blacks are more likely to be diabetics than non-Hispanic whites (11.4 percent versus 8.4 percent).

Latino, Asian, and American Indian women are less likely to be screened for cervical and breast cancer than white and African American women. Latino men are least likely to be screened for colorectal cancer compared to all other ethnic groups.

African-American children are about three times more likely to be hospitalized for asthma than their white peers and about five times more likely to seek care at an emergency room.

Although African Americans represent only 12.7 percent of the U.S. population, they account for 26 percent of all asthma mortality.

In spite of their higher mortality and morbidity for cardiovascular disease, African Americans and Latinos are less likely to undergo treatment for their conditions and are especially less likely to receive high-technology cardiac procedures, such as cardiac catheterization and coronary revascularization.

American Indians, African Americans, and Latinos are more likely to rate their health as fair or poor in comparison to whites and Asian.

African Americans and Latinos infected with HIV receive significantly less optimal health care compared to whites.

Although more than 80 percent of African Americans live in working families, only 53 percent are covered by employer-sponsored health insurance, compared to 73 percent of whites.

American Indians and Alaska Natives have Sudden Infant Death Syndrome (SIDS) rates that are two times higher than the general U.S. population.
A two day pre-travel orientation program was held on May 16 and 17 at the Harvard School of Public Health campus to welcome the new 2013 HSPH MIRT fellows and prepare them for their fellowship experience.

This annual pre-travel orientation, designed to prepare trainees for their research attachments globally, has been the cornerstone of the Program for all MIRT fellows. The orientation provides opportunities to meet and network with fellow MIRT-ies and program faculty, get important information on travel health, ethical conduct of human research, travel safety and cultural competency while gaining hands on skills necessary for conducting epidemiologic research.

Fellows had the opportunity to learn from experts around the country. The fellows also had a good opportunity to take care of last minute details before leaving home for their respective foreign research sites. Thank you so much to all who participated in making the orientation a great success! Below we share highlights of the orientation.

Dr. Edward Ryan, Associate Professor at Harvard Medical School and Director of Tropical Medicine, Division of Infectious Diseases at Mass General Hospital shared his expertise on travel health.

Steve Taylor, Associate Director of International Safety and Security, Harvard Global Support Services advised fellows about practical self defense and travel safety.

Karlotta Rosebaugh, MIRT Program Advisory Board Member and Director of Health Sciences Minority Students at University of Washington provided a lecture entitled Cultural and Global Citizenship Competency.

Dr. Mahlet Tadesse, Associate Professor at Georgetown University and Adjunct Associate Professor at HSPH taught fellows Epidemiology and Biostatistics.

Stanley Estime and Alyssa Speier, QA/QI Education Specialists at HSPH Office of Human Research Administration provided fellows with a lecture and led case study discussions on ethical conduct of human subjects research.

Thank you!
Kailey Nelson, MPH was an undergraduate student at Whitworth University in Spokane, WA when she participated in the MIRT Program in 2008. During her fellowship she went to Bangkok Thailand (with Drs. Williams and Lohsoonthorn) to work on a project entitled “Preterm delivery risk in relation to maternal occupational and leisure time physical activity among Thai women.” Since completing her MIRT fellowship, Kailey completed a Masters Degree in Epidemiology at the University of Washington.

What is your current status?
I am currently an epidemiologist for the Refugee Health Program at the Minnesota Department of Health.

How did the MIRT fellowship help you in your career path?
I participated in the MIRT fellowship the summer before I started the MPH program at the University of Washington. In addition to giving me a solid foundation in epidemiology, it has given me a global perspective, which is critical in refugee and international health. During the MIRT fellowship, we traveled to Mae Sot and spent a few days volunteering in the Mae Tao Clinic, which serves primarily Karen refugees from Burma residing in Thailand. The Karen have been the largest refugee group to resettle in Minnesota since 2008, and witnessing the refugee experience of the Karen overseas through MIRT has really complemented my current work, which is focused on the refugee experience after they have moved to the U.S.

What is your favorite Quote?
“Heroes” by Garrison Keillor is a great poem about refugees and immigrants in the U.S. that I would highly recommend.

What is your preferred menu?
I love seafood – and after my summer in Thailand I would never say no to Thai food!

What are your hobbies?
I love being in the mountains and a lot of my favorite activities stem off of that – hiking, camping, and skiing. I have yet to try cross-country skiing (which is popular here in Minnesota), but I hope to next winter!

Where is your favorite place to travel to?
I grew up in the Seattle-area, and since moving to Minnesota most of my traveling has been visiting family and friends back home. However, I have enjoyed getting to explore more of Minnesota, including at least a few of the 10,000 lakes!

Which kind of sport do you mostly perform?
I was a swimmer in college, but now I mostly stick to running. Although the Minnesota winters make running outside year-round a challenge!

What’s your best advice to students who want to succeed?
My advice would be to seek out internships and gain hands-on experience in the field you are interested in. School and classes are important, but they don’t give you an idea of what day-to-day life is like in that profession. My internships and fellowships were invaluable and really helped me narrow down my interest areas.

“Quote of the Month
“You will find true success and happiness if you have only one goal. There really is only one, and that is this: To fulfill the highest, most truthful expression of yourself as a human being. You want to max out your humanity by using your energy to lift yourself up, your family, and the people around you.”—Oprah Winfrey at the 2013 Harvard University graduation ceremony
Purpose: Poor sleep and heavy use of caffeinated beverages have been implicated as risk factors for a number of adverse health outcomes. Caffeine consumption and use of other stimulants are common among college students globally. However, to our knowledge, no studies have examined the influence of caffeinated beverages on sleep quality of college students in Southeast Asian populations. We conducted this study to evaluate the patterns of sleep quality; and to examine the extent to which poor sleep quality is associated with consumption of energy drinks, caffeinated beverages and other stimulants among 2,854 Thai college students.

Methods: A questionnaire was administered to ascertain demographic and behavioral characteristics. The Pittsburgh Sleep Quality Index (PSQI) was used to assess sleep habits and quality. Chi-square tests and multivariate logistic regression models were used to identify statistically significant associations.

Results: Overall, the prevalence of poor sleep quality was found to be 48.1%. A significant percent of students used stimulant beverages (58.0%). Stimulant use (OR 1.50; 95%CI 1.28-1.77) was found to be statistically significant and positively associated with poor sleep quality. Alcohol consumption (OR 3.10; 95% CI 1.72-5.59) and cigarette smoking (OR 1.43; 95% CI 1.02-1.98) also had statistically significant association with increased daytime dysfunction. In conclusion, stimulant use is common among Thai college students and is associated with several indices of poor sleep quality.

Conclusion: Our findings underscore the need to educate students on the importance of sleep and the influences of dietary and lifestyle choices on their sleep quality and overall health.

Objective: To examine the risk of preterm birth (PTB) in relation to maternal psychiatric symptoms during pregnancy in Peruvian women.

Study Design: This case-control study included 479 PTB cases and 480 term controls. In-person interviews were conducted to assess women's depressive, anxiety, and stress symptoms using the Patient Health Questionnaire (PHQ-9) and the Depression Anxiety Stress Scales (DASS-21). Multivariable logistic regression procedures were used to estimate adjusted odds ratios (aORs) and 95% confidence intervals (CIs).

Results: Compared with women reporting no or minimal depressive symptoms, the aOR (95% CI) for PTB associated with consecutive severity of depressive symptoms based on the PHQ-9 assessment method were as follows: mild, 2.22 (95% CI 1.64-3.00) and moderate-severe, 3.67 (95% CI 2.09-6.46). The corresponding aORs for normal, mild, and moderate-severe depressive symptoms based on the DASS-21 assessment were 1.00 (reference), 3.82 (95% CI 1.90-7.66), and 2.90 (95% CI 1.66-5.04), respectively. A positive gradient was observed for the odds of PTB with severity of anxiety (Ptrend < 0.001) and stress symptoms (Ptrend < 0.001).

Conclusion: The odds of PTB increased in pregnant Peruvian women with psychiatric symptoms. Efforts to screen and treat affected women may modify risks of PTB and possibly other associated disorders.
The HSPH MIRT 2012 fellows presented their MIRT research findings at the Annual meeting of the Associated Professional Sleep Society (aka SLEEP meeting). The SLEEP meeting is the largest national scientific meeting focused solely on sleep medicine and sleep research.

We are proud of you all!

1 to r: Yared Tarekegn, Hazar Khidir, Aline Souza, Claudia Martinez, Gardenia Casillas, Sam Translavina and Dr. Williams

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**Alumni Update**

*Do you have an update?*

*We want to highlight your professional accomplishments and personal milestones.*

*Help us keep you informed and let us know how you’re doing!*

*Please contact Bizu Gelaye via email (mirtprogram@gmail.com).*

*We would love to hear from you!*
MIRT is a national program designed to encourage students to pursue careers in biomedical and behavioral research. This program provides support for undergraduates and graduate students to receive research training in an international setting. MIRT is funded by the National Institute on Minority Health and Health Disparities (NIMHD) and Fogarty International Center (FIC) of the National Institutes of Health. The HSPH MIRT (formerly UW MIRT) Program was developed in collaboration with Dillard University, Xavier University, and Western Washington University. The program focuses on population-based health research in developing countries and builds on established linkages with academic institutions in Zimbabwe, Ethiopia, Vietnam, Thailand, Republic of Georgia, Australia, Chile, Peru, and Mexico.

He was a social worker and civil rights leader who was an effective powerbroker between the races during the 1960s, a time of racial unrest. He grew up in a middle class home in Lincoln Ridge, Kentucky. His parents emphasized that people are inherently decent, and that by working together, they could solve social problems. Much of his social work and advocacy philosophy was honed in the military during World War II where he focused on positive interpersonal mediation and communication. As a member of the US Army, he developed skills as a “powerbroker” and mediator between whites and blacks; this experience influenced him to become a social worker. He was instrumental in breaking down the barriers of segregation and inequality that held back African Americans. He was a mediator, pragmatist, and organizer who could bring consensus among many disparate groups as he focused on political and economic equality.

Who is this remarkable person?

A special prize will be awarded to the first person providing the correct response. Send your response to bgelaye@hsph.harvard.edu **** Cheers!