Mid-Trip Reflections of the Harvard MIRT 2018 Fellows

MIRT Ethiopia Fellows visiting the National Museum of Ethiopia (left). MIRT Peru Fellows at the Universidad San Martin de Porres (right).

“Global public health is meant to be experienced and this fellowship is giving us the opportunity to do just that. Every single moment in Addis has contributed to our understanding of the work that we do and why public health in a country like Ethiopia is so essential. It’s broadened my definition of global health and further motivated me to pursue a career that dedicates itself to working to understand those that may be different from us and fight to create solutions that can empower communities.” - Seble Yigletu, MIRT 2018 Ethiopia

“My experiences with the Harvard MIRT program have taught me that I still have a lot to learn on how to effect long-lasting change in a community or population. However, working directly with my faculty mentors to write a public health manuscript inspires me to keep pursuing this goal. They have helped me understand disease and epidemiology in a broader, more holistic way that expanded my perspective on both pathology of disease and intervention.” - Kevin Ashi, Harvard MIRT 2018 Peru

“The Harvard MIRT Program has shown me some of the many ways in which research and medicine are intertwined. Importantly, it has reminded me of the importance of broadening research to include global populations.” - Michael Kovasala, MIRT 2018 Chile
Ayah’s Mid-Trip Reflection

I love Ethiopia! Although I tried my best to research the country prior to arrival, no amount of internet research can sufficiently prepare you for the reality. Instead of allowing the uncertainty to worry me, I approached the challenge with excitement. I feel so much gratitude when I reflect on what my perceptions of Addis Ababa were during week one compared to now. As I write this mid-summer reflection, I can honestly say that I feel at home in Addis. The cows sharing the road with me on my walk to the Addis Ababa Continental Institute of Public Health, cobblestone paths, and the spontaneous electricity outages are all a part of why this country holds such a special place in my heart.

We were initially all quite nervous about navigating taxis and visiting different sites within the city; however, we have learned to communicate using simple English, expressive gesturing, some Amharic vocabulary that we learned from daily interactions, and to my surprise- my Arabic fluency has really come in handy!

Our taxi drivers and local restaurant owners have been incredibly helpful in allowing us to feel safe in an unfamiliar city. They provide recommendations, share their experiences, ask questions about American culture and we have even had a couple of them over at our house for tea.

The people we’ve met in Ethiopia are kind, warm, proud and very communal with their neighbors- a quality that unfortunately can be lacking in modern day U.S. I quickly fell in love with the cultural practice of taking frequent tea and coffee breaks. Coffee and popcorn is a combination that I didn’t expect to love as much as I do. I know I’ll be sharing that practice with friends and family once I’m back in the U.S., even though I don’t expect to ever master Ethiopian coffee the way it is made in Addis.

We came to Ethiopia during an exciting time politically. There was a recently elected prime minister and changes in improving relations between Ethiopia and Eritrea. Local Ethiopians seem to be very hopeful and happy with the new change, and I’m honored to be personally witnessing such a transformative time in this country’s deep, rich history.

One highlight is going on a 7am hike through the forest for a charity event. Even though it was a challenging morning hike, people were playing music, taking breaks to start dance circles and were very supportive of one another when crossing through particularly slippery parts of the hike.

Other highlights include the incredible cultural dances we’ve seen, unique flavors in the injera and other traditional foods, and enveloping ourselves in the hustle & bustle of the merkatos (markets). I feel much more confident in my ability to adapt to a changing environment and I definitely can say that I’m already immensely more well-versed in East African politics, culture, geography and social life. Above all, I know that the research I’m conducting on adolescent marriage is giving me real life exposure to tackling global health issues.
Ishmael’s Mid-Trip Reflection

Ishmael Williams
Undergraduate, Howard University
MIRT Site: Ethiopia

It’s only been four weeks, but I can say that Ethiopia has become home. The food has been amazing (and vegetarian-friendly), the people have been welcoming, and the country is absolutely beautiful. Most of our time has been concentrated within Ethiopia’s capital, Addis Ababa. Like many capitals of countries, Addis is very developed, populated, and busy.

One of my most memorable experiences thus far was our trip to West Hararghe, which is a 6-hour car ride on worn-down roads. This area was completely different from the life we experienced and observed in Addis. I generalized my idea of Ethiopia based on my observations in Addis; however, approximately 80% of Ethiopians live in the rural area. When we were driving through the villages, the members of the villages were so happy to see us, and they were welcoming us into their space. The purpose of the trip was to see the interventions targeting adolescent girls in the Oromia region.

Sometimes in epidemiologic research you only see the numbers, but with this trip, we could see and meet the faces behind those numbers.

It was impressive to see girls younger than myself saving money, managing loans, and purchasing income-generating assets (e.g. chickens and goats). Financial literacy, self-confidence, advocacy, support, family and community involvement, and education are the core values of the interventions.

Another equally memorable experience was a charity hike we did at 7 o’clock in the morning on a Saturday. The motto of the hike was “One child, one pack.” Each participant in the hike brought one pack of school supplies to support one child in the community. The amount of people that woke up to participate in this event was unbelievable. It was also surprising to see how complete strangers assisted and guided each other when we lost the path or the slippery terrain caused us to slide.

As a nutritional science student and vegetarian, I was concerned if my appetite would be negatively affected in Ethiopia, but I quickly realized my food cravings would be easily satisfied. Ethiopian Orthodox Christians are known to “fast,” which means they consume only vegan foods. Some of my favorite entrees are injera with shiro, egg sandwich with chips, scrambled egg omelets with French toast, fasting burgers, and of course, desserts!

Finally, I have spent a month living, eating, and researching with fellows that I met during a two-day orientation. At first, we were a little more than strangers. However, the unfamiliar environment and long distances from home have caused us to find comfort and friendship in each other. We know each other so well that we occasionally say something another person in the group was thinking.

I look forward to the historical site visits to Gondar, Lalibela, and Axum next week. Ethiopia is so rich in culture, tradition, and people, and I am excited to learn more. With half of our time in Ethiopia gone, I am glad I had the opportunity to reflect on my trip because time truly flies!

“There can be no greater gift than that of giving one’s time and energy to help others without expecting anything in return.”

– Nelson Mandela
Meet the Fellows

Jessica’s Mid-Trip Reflection

It is hard to imagine that it has only been a month since I left my home in Raleigh, North Carolina to live and work in Addis Ababa, Ethiopia. It feels like just yesterday I nervously disembarked from a Toronto-based Air Canada jet to first view the pale-yellow sunrise typical of Ethiopia’s capital city.

Tired but eager, I entered the airport from the tarmac to a room filled with black and blue butterflies. Their wings glistened, reflecting the sliver of sun that peaked out from behind the morning mist. Against the roar of the jet engine and bustle of rowdy passengers, I found a quiet peace. Unbeknownst to me, this would be one of many moments here to take my breath away.

From the alarming sounds emitted by the stray cats that scale our home’s cinder-block walls to the holy call-to-prayer that booms from an Orthodox Church situated atop a nearby hill, our first week was an adjustment.

Jessica Gingles
Undergraduate, Indiana University
MIRT Site: Ethiopia
Beginning at 6 AM, the bustle of blue bajajs, street vendors, and the city’s monorail system commence. A twenty-minute drive can last over an hour thanks to road traffic and pedestrians who weave in and out of harm’s way.

Our home is nicely situated a mere five-minute walk from Addis Continental Institute of Public Health. As someone who tends to run late, I am grateful for the short yet beautiful daily commute to our place of work.

Every day at 10 AM and again at 3 PM, there is “tea time.” A custom special to the institute, this event takes place on the window-lined top floor of the building where chai, bunna, and kolo are all set out at the start of the hour. Employees and visitors alike sit to enjoy their break, chatting against the rolling backdrop of the Entoto Mountains.

Our project targeting early marriage in the Oromia Region has taught me so much in a variety of ways. The initial literature review has proven foundational to understanding local issues and nuances that mark life in this area.

On a field site visit to West Hararghe, I witnessed firsthand the impact and importance of not only the work of CARE, US Aid, and Addis Continental —but our presence as MIRT fellows. We heard the powerful testimony of a schoolteacher in a small kebele on the outskirts of Chiro.

There, education lasted until Grade 8. Without an easily-accessible secondary school nearby, children lost faith in pursuing an education that most could not afford to continue. In this reality, marriage became a viable option to securing well-being and financial stability in adulthood.

Here, what may seem easy or simple at the start can quickly become elaborate. What can appear dangerous may be the most welcoming of experiences and vice versa. As a foreigner, you must make your decision carefully but boldly give yourself over to appreciating a culture that is not your own.

I have learned so much over the course of these past four weeks. I look forward to what remains.
We then traveled to the Entoto mountain right outside of Addis Ababa to see the views of the entire city from the top of the mountain. Our day didn’t even end there! We ate our dinner at the Taitu Hotel, one of the oldest hotels in Addis Ababa amidst beautiful historical artifacts. Our first day in Ethiopia was truly a reflection of how the rest of our time in Addis would be, fast-paced and exciting!

One of the things that has continuously stood out to me throughout the trip has been how warm and friendly the people have been to us throughout our time here. While I’ve been able to put my Amharic language skills to use, the people in our neighborhood Ayat have been instrumental in giving us advice and tips on how to navigate our time in Ethiopia. We’ve made friends with local taxi drivers, our neighbors, and store owners and they are always willing to make recommendations on good spots to grab a bite or fun places that we should explore in the city. Locals have been not only incredibly welcoming, but also willing to share pieces of their personal journeys and tell us stories about what makes Ethiopia so special to them.

Our time at the Addis Continental Institute of Public Health has been a fun-filled learning experience that continues to challenge us to think more deeply about our project and the impact that our work will have in Ethiopia. One of my initial concerns before the start of this fellowship was whether our research would be meaningful to the people of Ethiopia. However, through interactions with those both within the institute and throughout Addis Ababa, we’ve been told about the importance and necessity of our research on adolescent marriage. It’s been extremely rewarding to not only be able to experience life in Ethiopia, but also know that our time here used doing epidemiological public health work that is especially appreciated by the people of Ethiopia. My experience in Ethiopia has been an eye-opening experience in many senses. Most importantly, it has proven to me the sheer importance of understanding the context and perspective that different parts of the world offer.

Global public health is meant to be experienced and this fellowship is giving us the opportunity to do just that. Every single moment in Addis has contributed to our understanding of the work that we do and why public health in a country like Ethiopia is so essential. It’s broadened my definition of global health and further motivated me to pursue a career that dedicates itself to working to understand those that may be different from us and fight to create solutions that can empower communities.
I feel incredibly humbled to have reached the halfway mark of my time in Peru. Having the opportunity to be fully immersed in a new country while adapting to its customs, cuisine, language, and scenery has been incredible. I remember feeling quite anxious to be away from my family and friends for two months, but here I've felt at home. Living in the middle of the bustling city that is Miraflores, has allowed me to explore its markets, restaurants, and parks. Sometimes it can be a bit overwhelming given the new names and smells, but I’ve enjoyed getting out of my comfort zone. Recently, I repelled sandboarded in Ica and will hopefully be hiking Machu Picchu in August.

Watching the World Cup and cheering for Peru after qualifying for the first time in 36 years was very exciting. I admire how Peruvians came together and displayed their pride and support for its team. Since both Kevin and I are Mexican, we’ve noted various similarities with Peruvian culture.

Though we are often inclined to highlight cultural differences, drawing parallels is what’s important. The ability to speak Spanish every day, with all types of individuals, has allowed me to improve my grammar and expand my vocabulary overall.

Aside from experiencing Peru as a tourist, shadowing social workers at the hospital Dos De Mayo has been very eye-opening. Being able to interact with patients, in regards to their personal histories and circumstances has been very rewarding. I’ve realized that an individual goes beyond their diagnosis. There are so many factors that contribute to a person’s well being. The group of women at the hospital’s social services department, are some of the most selfless people I have ever met. Their willingness to lend a helping hand and become a source of hope, is something I hope to embody in my future endeavors. As I pursue my undergraduate degree in Social Welfare, I am reminded of the growing need for this profession.

Throughout my time here, Dr. Sixto Sanchez has been both a great guide and mentor. He’s definitely inspired me to pursue a career in public health, as both a healthcare professional and researcher. The impact his work has had in the OBGYN/Obstetrics department definitely shows. Kevin and I have had the chance to accompany him to the medical school were he teaches, and listen to thesis presentations. This exposure has allowed me to get an idea of what I will be doing as a future graduate student. Overall, the opportunity to interact with him and his family has definitely been a highlight of the trip. I’ve had some of the best ceviche thanks to them. I cannot wait to continue exploring and growing professionally throughout the remainder of this trip. During this short time, I have never felt so productive, outgoing, and confident in the work that I am doing, as well as in those stories I have yet to hear.

“When someone shows you who they are, believe them the first time.” – Maya Angelou
Before coming to Peru, I had no expectations. I was just excited to learn about Peruvian culture and the field of public health, but this past month I have learned so much more. While I already knew that I wanted to be a physician advocate for marginalized communities and eventually build a career in global health, my experiences with the Harvard MIRT program have taught me that I still have a lot to learn on how to effect long-lasting change in a community or population. However, working directly with my faculty mentors to write a public health manuscript inspires me to keep pursuing this goal. They have helped me understand disease and epidemiology in a broader, more holistic way that expanded my perspective on both pathology of disease and intervention. I have come to understand that epidemiology bridges the gap between the scientific wisdom of the laboratory and the clinical wisdom of the ward, as one focuses on groups of people rather than on individuals, cells, or molecules. Working on my manuscript has taught me of the importance of statistics in effecting positive social change and addressing underlying inequalities in healthcare.
Just like epidemiology and biostatistics are necessary to determine which surgical treatments produce more success stories than failures, it is necessary to understand which social determinants truly impact health-related states in marginalized communities.

While shadowing in the pediatric ward at the Hospital Dos de Mayo, a state-hospital with limited resources, I realized that all physicians, by necessity, had to look beyond germs or genetic predispositions and consider sociocultural factors, such as poverty and access to care. Physicians at Dos de Mayo have to be creative and work with the tools they have to secure an accurate diagnosis since they do not have some of the state-of-the-art technology that I had personally taken for granted in the U.S. During treatment, they have to consider a patient’s socioeconomic circumstances, such as where they live and what medications they can afford. These considerations complicate the training medical students undergo, since they can’t rely on technology or expensive medications to best treat their patients. It has become clear that combating health disparities requires understanding medicine through science, research, social determinants, and public health.

My time in Peru has also been incredibly fun. Since landing in Lima four weeks ago, I have felt at home. Everyone I have met, from Sixto’s family to physicians at the hospital, has been incredibly welcoming. The food (especially the ceviche) has been amazing, and it’s become clear why Peruvian food is considered some of the best in the world. So far, Elia and I have gotten the chance to go hiking at the Autisha canyon, where we saw a hidden waterfall within the canyon and repelled down a 30-meter wall, go sandboarding in the sand dunes on the outskirts of Ica, and explore Lima with Peruvian friends. I am excited to take advantage of our last few weeks here and explore as much of Peru as possible.

Elia and Kevin (MIRT Peru) in Ica, Peru surrounded by sand dunes and its famous oasis (top) and exploring the town center of Miraflores (middle). Michael (MIRT Chile) exploring the Valle de la Luna in San Pedro de Atacama (bottom).
Chile has been such an amazing experience so far! It’s hard to believe that I’m already 4 weeks into the MIRT fellowship. My hosts have been so accommodating and kind. Santiago could not be more different from my relatively quiet hometown. The busy city is filled with street performers, stray dogs and people walking in the streets at all hours. Despite getting lost in the metro several times, I love taking the metro. Seeing how the locals get around the city has really helped me acclimate to the different aspects of Chile. Before arriving in Santiago, I was nervous I would not be able to catch onto Chilean Spanish but now I find myself unconsciously using Chilean slang.

In the hospital, I have the chance to shadow Dr. Velez as he treats patients of a wide range of injury caused illnesses. My previous shadowing experience was limited to the emergency room so the rehabilitation department is quite a change. Here the doctors take time to have lunch and coffee breaks together. Unlike the emergency room, Dr. Velez gets to spend quality time with the patients and follow up with them periodically. Most of the patients here have suffered life changing injuries.

Listening to their stories has really helped me put our research study in perspective. The manuscript could have been written in US using the collected Chilean data, but it would be nowhere as meaningful to me if I had not had the opportunity to get to know the community our study aims to help. Getting to know the community truly makes all the difference in public health research.

So far Chile has challenged and broadened my perspective on medicine, patient care, public health and life in general. It has pushed me out of my comfort zone in so many ways. I still have so much more learning and exploring to do in Santiago, I look forward to the many more adventures I have left here.
Michael’s Mid-Trip Reflection

Michael Kovasala
Undergraduate, UNC Chapel Hill
MIRT Site: Chile

It’s hard to believe that I am already halfway through what has already been an incredibly inspiring experience. Waking up and walking to the metro, I am greeted every day by a breathtaking view of the Andes mountains which corral the city of Santiago. It is a busy and exciting city to live and work in, and it has been an extremely motivating environment to continuously push myself to work harder, create more, and move further beyond the confines of my comfort zone. As a bonus, I have been able to continue improving my Spanish, although it has taken some time to get used to the local accent and slang.

In the hospital, we have been working hard on our manuscript as well as spending time shadowing Dr. Velez. I have sat in on patient visits, as well as interdisciplinary meetings where I have been able to see how health professionals from multiple different departments and backgrounds discuss and formulate a plan for patients with more complicated needs. It has been uplifting and humbling to see how many minds and perspectives are able to come together, and this has helped contextualize the research that I am contributing to, and helped me to see the important place that global health research holds in the informing the process of a patient’s treatment.

The experience of being present in-country has also added a very visceral and human element to the research we are contributing to. It has been amazing and eye-opening to hear the stories of these patients, many of whom have suffered injuries that have permanently altered the course of their lives. Some of the patients that we have encountered as Dr. Velez’s patients are the same patients about which we are writing, and this fact serves as a constant reminder of the tangible impact that global public health research has on real people’s lives. This experience has absolutely solidified and reaffirmed my desire to pursue an MD/PhD with a focus on global health. The Harvard MIRT Program has shown me some of the many ways in which research and medicine are intertwined. Importantly, it has reminded me of the importance of broadening research to include global populations.

Each day I feel incredibly blessed to have been given this unique opportunity by the Harvard MIRT program. From trying my first “Completo Italiano,” to drinking maté with new Chilean friends, to biking through a valley in the driest non-polar desert on earth, I have been continually amazed and humbled by the breadth of Chilean culture to which I have been exposed. I have already learned and experienced so much, and I am excited to see what these next weeks will bring.

Michael enjoying the sunset on top of Cerro San Cristobal in Santiago.
Every year our MIRT fellows and faculty work on diverse research projects to address the needs of communities of each site. In the Science Corner, we provide synopses of study findings from selected sites. In this issue, we present studies from MIRT 2016-2017. Please visit the MIRT Program website to read the complete list of abstracts.

Background: Gestational diabetes mellitus (GDM) is a global public health concern with potential implications for the health of a mother and her offspring. However, data on the prevalence and risk factors of GDM in Latin America are scarce. The study was designed to estimate the prevalence of GDM and identify maternal risk factors among Peruvian women. Methods: A cross-sectional study was conducted among 1300 pregnant women attending a prenatal clinic in Lima, Peru. GDM was diagnosed using an Oral Glucose Tolerance Test (OGTT) performed between 24 and 28 gestational weeks using the International Association of Diabetes and Pregnancy Study Groups (IADPSG) criteria. Depression status was assessed using the Patient Health Questionnaire-9. Multivariate logistic regression models were used to identify risk factors of GDM. Results: Approximately 16% of pregnant women were diagnosed with GDM. The prevalence of obesity and depression were 24.4 and 10.6%, respectively. After adjusting for confounders, mid-pregnancy obesity was associated with a 1.64-fold increased odds of GDM (OR: 1.64; 95% CI: 1.03-2.61). Participants with a family history of diabetes had a 1.5-fold increased odds of developing GDM (OR: 1.51, 95% CI: 1.10-2.07) as compared to women without this family history. Depression was associated with a 1.54-fold increased odds of GDM (OR: 1.54; 95% CI: 1.09-2.17). Conclusions: GDM is highly prevalent and was associated with maternal obesity, family history of diabetes and antepartum depression among Peruvian women. Intervention programs aimed at early diagnoses and management of GDM need to take maternal obesity, family history of diabetes and antepartum depression into account.


Background: The Social Support Questionnaire – Short Form (SSQ-6) is a widely used instrument that assesses availability and satisfaction of a person’s social support. The present study aimed to evaluate the construct validity and factor structure of the Spanish language version of the SSQ-6 during early pregnancy. Participants and methods: A total of 4,236 pregnant Peruvian women were interviewed at 10.3 ± 3.8 weeks of gestation. In-person interviewers were used to collect lifestyle, demographic, and social support characteristics. The construct validity and factorial structure of the SSQ-6 were assessed through exploratory factor analysis (EFA) and confirmatory factor analysis (CFA). The internal consistency was evaluated using Cronbach’s alpha. Results: The mean SSQ-6 score was 39.6 ± 6.8 and Cronbach’s alpha was 0.83. EFA resulted in a three-factor solution that accounted for 60.6% of the variance. CFA results confirmed the three-factor structure and yielded measures indicating goodness of fit (comparative fit index of 0.9401) and accuracy (root mean square error of approximation of 0.0394). Conclusion: Although the SSQ-6 was originally developed as a two-factor model, and previous studies have supported this, in our study a three-factor model was found to be more appropriate. The SSQ-6 was found to have good construct validity and reliability for assessing social support.

Alazar Haregu was an undergraduate student at the University of Virginia in 2013 when he participated in the MIRT Program Fellowship in Addis Ababa, Ethiopia. During Alazar’s MIRT Fellowship, he contributed to a project titled “Circadian rhythm characteristics, poor sleep quality, daytime sleepiness and common psychiatric disorders among Thai college students” (Haregu et al. Asia Pac Psychiatry. 2015 Jun;7(2):182-9. PubMed PMID: 24664948).

As I'm sure is the case with all of my colleagues since completing the Harvard MIRT program, I have been quite busy! I graduated from the University of Virginia in the Spring of 2014 and matriculated into medical school at the University of Virginia that year. During medical school, I continued to pursue my interest in medicine and public health, eventually participating in a summer medical program called the Health Innovations Scholars Program (HISP) at the University of Colorado. As a part of the program, I received training in health system quality improvement (QI) and leadership and worked with medical students from across the country on a quality improvement project at the University of Colorado. After completing the summer program in 2015, I grew interested in health system quality improvement and began working on a QI project with a pediatric faculty member at UVA. Our research explored ways to improve the care of neonatal fever and bronchiolitis within the UVA Emergency Department. My research ultimately culminated in presentations at regional and national conferences. After completing my third year of medical school, I decided to pursue a career in pediatrics and ultimately matched at the University of Virginia for my pediatrics residency! I graduated from medical school in May 2018 and am set to begin training in June. I want to thank the Harvard MIRT program for the strong foundation and exposure in public health research. I look back very fondly at my experience with the program and truly believe it set the stage for my career in medicine and public health.

“Travel changes you. As you move through this life and this world you change things slightly, you leave marks behind, however small. And in return, life—and travel—leaves marks on you.” - Anthony Bourdain
Alumni Updates

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 Lauren Friedman via email (hsphmirt@gmail.com).

We would love to hear from you!

MIRT/MHIRT 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). The Harvard T. H. Chan School of Public Health MIRT (formerly the University of Washington 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, Vietnam, Thailand, Republic of Georgia, Peru, New Zealand, Mexico, Malaysia, Ethiopia, Chile and Australia.

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Kevin and Elia hiking at the Autisha Canyon in Peru