Maternal and Child Health

Fall 2014 Newsletter

Berkeley School of Public Healt

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from the chair

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Cover: Sarah Ismail, MPH MCH '11, and Mariah Lafleur, MPH PHN '09, with her daughter

Eskenazi Inducted Into **Collegium Ramazzini**

Dr. Brenda Eskenazi accepts induction into the Collegium Ramazzini from the mayor of Carpi, Italy. Induction into the Collegium is conferred during the annual Ramazzini Days on a scientist deemed to have made outstanding contributions to furthering the aims of Bernardino Ramazzini in safeguarding public health. **Congratulations Brenda!**





Dear MCH Friends,

This edition of our newsletter brings exciting news about student and alumni accomplishments, current developments in faculty research, spring events to anticipate, and lots of photos to share.

As the year winds down, I look back with pride and appreciation on our many accomplishments. Within these pages we bring you highlights from students' summer internships, we share our excitement in welcoming the incoming MCH class, and we celebrate our Faculty's recently published books, articles, and awards.

Looking ahead into the new year, I invite you to join us in March for a roundtable on the Changing California Landscape for Children with Special Health Care Needs. We've also begun to feature alumni and special guests' work at brown bag lunch talks; the first of these events is showcased on page 11. Let us know if you'd like to be a featured speaker, either solo or with a panel of peers.

This winter we also look forward to submitting our competitive renewal to MCHB for the MCH Leadership Training Grant. The Training Grant has been an integral part of our program at Berkeley for over 60 years; without it, we would not have been able to provide such breadth or depth of opportunities to our students. We are grateful for this support. Continued funding will support our commitment to exceptional training and education for MCH professionals, front-line research, and pioneering advances in MCH. We hope you'll partner with us in this important work.

Best wishes for happy and healthy winter holidays,

Apria guerdelma

Sylvia Guendelman PhD, LCSW Chair, Maternal & Child Health

letter from the 🔒

Swelcome party

Professor Ndola Prata with MCH students Maggie Crosby and Shannon Merrell

UC Berkeley MCH students, faculty and staff gathered for potluck at the home of Professor Brenda Eskenazi to celebrate the start of the 2014 school year. Returning students shared their summer internship experiences, and faculty discussed plans for the coming year.





MCH professors Cheri Pies and Brenda Eskenazi

Einternships

Preventing Maternal Mortality in Nepal

May Lample, MPH '15



at the MCH welcome party

This past summer I interned with One Heart World-Wide (OHWN), a non-profit in San Francisco that focuses on lowering rates of maternal and neonatal mortality in Nepal. I have long been interested in maternal mortality and was excited by the opportunity to work with a domestic organization that had an international focus. I was especially drawn to this particular organization because of its commitment to using local resources and knowledge, its interest in building capacity and strong desire to work with community partners. I was happy to see all these elements in action during my internship. Their commitment to working with rural communities, those with the highest rates of maternal mortality in Nepal, was especially noteworthy.

I was responsible mainly for two projects, one focusing on intimate partner violence and another on pre-eclampsia. OHWN serves remote, rural indigenous populations with a model they've developed called the Network of Safety that focuses on reducing preventative deaths related to pregnancy and childbearing.

I was working within this model to develop two interventions around the themes mentioned above. This involved creating a literature review, liaising with one of the organization's contacts in Nepal, studying current interventions on intimate partner violence and pre-eclampsia worldwide and developing a ppropriate interventions that could be integrated into OHWW's current work.

As part of this internship, I also had the opportunity to gain insight into the running of a small non-profit. The organization had two other employees in the San Francisco office in addition to the director, and I was introduced to the fundraising, networking and day-to-day activities of the organization. I was able to participate in the hiring of a new employee and often asked to contribute in conversations about new ideas and directions for the work. I'm thankful that I was able to work with such capable people, devoted to the work and eager to help me develop my knowledge and further my experience in the field.

his past summer, I interned at UCSF's Institute for Health Policy Studies with the Teen Pregnancy pre vention team. This experience provided me with a great

opportunity to develop and put into practice my public five "promising" communities, those with declining health skills within the Maternal and Child Health field. TBRs, and five "struggling" communities, those with persistently elevated or increasing TBRs. In addition, My duties as intern primarily revolved around research, I learned to use Publisher and created two commuwriting, and developing community resources. I connity briefs summarizing findings for the reproductive ducted literature reviews for a school-based yoga evaluhealth services and sexual education chapters of our ation project and an upcoming paper on youths' access to contraception in developing countries. I developed nia organizations such as Planned Parenthood. charts and graphs using collected data and created pre-While I learned a lot from the actual work I did this sentations for ongoing World Bank projects in Ethiopia and Nepal. I was one of the authors of the Adolescent summer, the best part of my internship was getting to know and learning from my co-workers. The wel-Community Health Assessment of Resources and Trends (CHART) Project, a needs assessment conductcoming and supportive environment really enhanced ed in Sacramento and Fresno counties that sought to my learning. At the end of the summer, I was invited understand disparities in STIs rates among youth and to to co-lead our team's annual team meeting and this identify what programs and policies may help to reduce was a great chance to reflect on all the great work the Teen Pregnancy Prevention team is doing. them.





with connect 🗑

Teen Pregnancy Prevention Strategies at UCSF Abigail Gutmann-Gonzalez, MPH '15

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I also helped write a summary report for the California Hotspots project that examined neighborhood factors associated with teen birth rates (TBRs) in Hotspots project. These will be distributed to Califor-

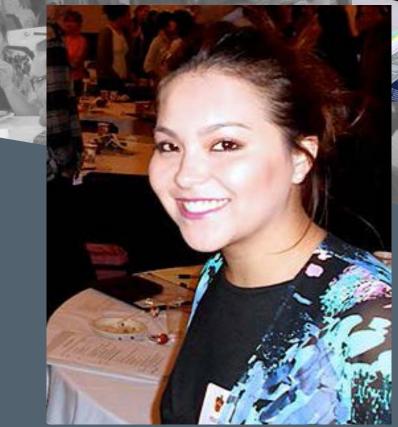
Abigail Gutmann-Gonzalez with staff members at UCSF's Institute for Healtlh Policy Studies

Corientation stu

MCH Program Assistant Director Kate Jerman with incoming MPH students Yves-Yvette Young and Josh Connor



At the 2014 New Student Orientation, Dean Bertozzi greeted the incoming class. Students were introduced to key staff and participated in diversity-fostering exercises, followed by a delicious lunch.



MPH student Yves-Yvette Young



MPH student Stacey Yamamoto

Binational Health Week:

Improving Latino Health in the U.S.

n October 5-6th, 2014, Lila Sheira and Stephanie Arteaga, two Maternal and Child Health graduate students from the University of California's School of Public Health travelled to San Luis Potosi, Mexico, to participate in the XIV Annual Binational Health Week (BHW). Alternating annually between Mexico and the United States, BHW is one of the largest gatherings of health workers, professionals, policy-makers, and researchers who share the goal of improving the lives of Mexican and other Latino immigrants in the United States. Lila and Stephanie share their experiences at the meeting here.

At this year's conference, representatives from the Center for Disease Control and Prevention (CDC), Health Initiative of the Americas, US Department of Health and Human Services, Secretariats of Health from Mexico, and political representatives from Guatemala, Honduras, Colombia, Peru, and Ecuador were present, as well as academics from the University of California Berkeley and Davis.

During the same week, Mexico was also celebrating their own national health week. This year's focus was Overall, our trip to Mexico for Binational Health Week vaccines for preventive purposes. During the opening was an amazing experience. We were able to meet ceremony of Mexico's Semana de Salud, we heard from many professionals in the field of Public Health who Public Health officials from around the country about are committed to improving the health of vulnerable the efforts to increase access to vaccines for children. immigrant populations. Despite the minimal discus-Efforts include nationwide campaigns to administer sion surrounding MCH issues, we were still able to the HPV vaccines to all young girls in school. A vitamin learn a lot about the health issue and needs of Latino A vaccine was also a priority for young children as it is immigrants in the US. We now also recognize the beneficial in strengthening the immune systems against importance of advocating for more research and various illnesses. work in binational MCH issues, and hope to gain more experience in that area as we progress in our degree At the end of the ceremony, a group of children were program and graduate. brought onstage to receive doses of vitamin A. Notably,

this group was made up mostly of young girls; only one young boy was present.

studen



Stephanie Arteaga and Lila Aziz Sheira, MPH MCH students, with Dr. Cristina Rabadán-Diehl, Office of the Americas/ Global Affairs, US Health and Human Services.

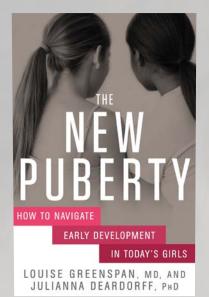
After introductions to Binational Health Week and National Health Week, we chose one or more working group sessions to attend. The four options were: 1) Infectious Diseases (HIV, Tuberculosis, and Influenza), 2) Access to healthcare services, 3) Chronic diseases, and 4) Occupational Health. Within the sessions that we attended (Infectious Diseases, Access, and Chronic Diseases), issues of maternal and child health were not as prominent as we would have liked. Issues of obesity and HIV were as close as we could get (with the latter focusing on men having sex with men). Discussions about reproductive health outcomes for immigrant women were also noticeably absent, despite the large numbers of immigrant women in the US.

Deardorff co-authors new book investigating early development in girls



updates

MCH professor and author Julianna Deardorff



Visit the book's website: thenewpuberty.com

xtensive research reveals that girls are going through puberty earlier than previus generations. But what happens when a girl has the brain of an 8-year-old and the body of a 13-year-old?

Dr. Louise Greenspan, a pediatric endocrinologist, and Dr. Julianna Deardorff, an adolescent psychologist and UC Berkeley MCH professor, are two of the leading investigators researching the root causes and effects of early puberty in girls. They and others in the field are concerned that this surprising phenomenon leads to longterm health risks, such as obesity, eating disorders, depression, anxiety and even cancer later in life.

Drawing on landmark, cutting-edge research and years of clinical experience, Drs. Greenspan and Deardorff explain why girls are developing at a faster rate, and enumerate both established and little known puberty prompters. For example:

- While it's accepted that obesity can instigate early puberty, studies have shown that emotional stressors in a girl's home and family life can also impact the onset of puberty.
- Seemingly safe, commonly-used natural ingredients like lavender and tea tree oil can actually have potent biological effects that disrupt normal physiology. Meanwhile, though soy has gotten an undeserved bad rap as a hormone mimicker, it's actually proving to be healthy when it comes from a natural source.

• Although people like to point fingers at hormones in dairy and meat products, these substances may not be as influential as the antibiotics that might act like hormones in the body.

• Early developmental changes can also bring on precocious behavioral changes, since the brain is "remodeled" during puberty. But it's not just "raging hormones" at play—social environment exerts a strong influence on emotions and impulse control and can protect an early developer from unwanted outcomes.

Greenspan and Deardorff offer highly practical strategies that can help offset and manage early puberty, including: recommendations for limiting exposure to certain known endocrine disrupters, which foods to eat and which to stay away from, which ingredients should be avoided in household goods and consumer products, how to help with a child's daily habits that play a major role in mental and physical development, how to smartly monitor a girl's social life (without helicoptering), and how to initiate and continue the conversation about puberty.



MCH students Emma Dubin-Rouda and Samantha Ngo along with Professor Julia Walsh and other UCB graduates have developed Emmunify, a system that uses communications technology to help raise vaccination rates among infants in poor countries.

2014 APHA

Development and First Phase Evaluation of a Maternity Leave Educational Tool for Pregnant, Working Women in California Sylvia Guendelman, PhD, LCSW, Elaine Kurtovich,

MPH, Linda Neuhauser, DrPH, Dana Edelman, MPH, CHES, Maura Georges, MPH, MSW and Peyton Mason-Marti, MPH

Weight Control Success Among Overweight and **Obese Women of Mexican-origin Living in Mexico** and the United States

Sylvia Guendelman, PhD, LCSW, Martha Kaufer-Horwitz, DSc NC and Miranda Ritterman-Weintraub, PhD

What Makes a Best Babies Zone? Evaluating a Multi-sector, Place Based Initiative Cheri Pies, MSW, DrPH, Kym Dorman, MPH and Kallista Bley, MPH

Reducing Latina Girls' Exposure to Hormone Disrupting Chemicals in Cosmetics: The HERMOSA Study

Kimberly Parra, Kim Harley, PhD, Katherine Kogut, MPH, Brenda Eskenazi, MA, PhD, Asa Bradman, PhD, Daniel Madrigal, MPH and Jianwen She, PhD

Walsh, MCH students create digital technology to increase immunization rates

Emmunify's goal is to increase life expectancy, educational achievement, and earning power. To raise funds for pilot testing in New Delhi slums, Emmunify has launched an Indiegogo campaign. Please donate and more importantly promote to your social network of family and friends.

A roundup of Faculty, student, and alumni presentations

Non-pneumatic Anti-shock Garment (NASG): When and Where to Apply

Janelle Downing, MS, Alison El Ayadi, ScD, MPH, Suellen Miller, PhD, CNM, Elizabeth Butrick, MPH and James G. Kahn, MD

Postpartum Care and the Provision of Effective **Postpartum Contraceptive Methods in** California's Medicaid Program

Monica Barr, MPH, Mary Bradsberry, Michael Howell, MA, Michael Policar, MD, MPH, Philip Darney, MD, MSc and Heike Thiel de Bocanegra, Ph.D., M.P.H.

Abortion in U.S. Newspapers, 2013 Katie Woodruff, MPH

Undocumented Status: Measurement and Definition in Public Health Research Maria-Elena Young, MPH and Daniel Madrigal, MPH

storify.com/APHA/

updates

Nurse-Family Partnership Investing in Mothers, Families and Communities



By Maria Camargo, RN, MPA, MPH Business Development Manager- SF Bay Area Nurse-Family Partnership | National Service Office and UCB MCH alumna

C ince March 2014, I have been working as the Busi-**O**ness Development Manager for Nurse-Family Partnership (NFP) here in the Bay Area. Nurse-Family Partnership is a national home visiting program for low-income women who are having their first babies. NFP yields quantifiable social benefits and a substantial return on the community's investment. In California, for every \$1 invested in NFP to serve high-risk families, communities can see up to \$4.20 in return due to savings in social, medical and criminal justice expenditures. More than 35 years of evidence from randomized, controlled trials have shown NFP's effectiveness guiding low-income, first-time moms and their children to successful futures.

In California, the program is implemented through county public health departments and public health nurses are conducting the home visits. My role is to work with new and existing implementing agencies on their sustainability and program expansion in order to help more moms in the Bay Area have healthy pregnancies, improve child health and development and become economically self-sufficient.

The benefits from the program are spread throughout different areas including healthcare, mental health, education and criminal justice. As part of my job, I try to build support for the program and work collaboratively with champions in the public and private sectors. The majority of the financial resources for the program come from a mix of federal, state and local funds and it varies depending on the county. It has been a great experience being able to interact with a diverse group of people including state

legislators, public health officials, foundations, healthcare organizations, nurses and most importantly the moms.

I had the opportunity to accompany a nurse during a home visit, the nurse briefed me on the mom's background before our visit and explained all the challenges the mom had overcome over the past two years. When I met the mom and her child I could not believe that the secure, professional-looking young woman in front of me had gone through so much adversity and was now going to college, had a part-time job and a beautiful healthy toddler. In my opinion, it is public health at its very best. The support nurses give new mothers empowers them to improve their lives and their children's.

We are currently working on bringing the program to scale in California and in other states in the country. Among the options to find sustainable funding to expand the program is a very innovative financial mechanism called Pay for Success (PFS) or social impact bonds (SIBs). A SIB is a type of social impact financing in which private investors make available upfront capital to social service providers to deliver services and the government is usually the backup payor. One of the regions in California exploring PFS is San Francisco. We have been gathering support for the project by working with numerous stakeholders from different sectors. So far the project has been well received and even though there is a long road ahead I look forward to continuing this journey to help bring change to the Bay Area.

J. Deardorff, A. Kale: Breastfeeding may delay pubertal onset in girls This study was published in the Journal of Maternal and Child Health.

The study was led by Aarti Kale MPH MCH'11, who n a recent study, maternal and child health researchanalyzed data from a population of 1,237 girls reers at the School looked into the idea that breast cruited across three geographic locations—New feeding may serve as a protective mechanism to delay York City, Cincinnati, and the San Francisco Bay onset of puberty in girls. They found that, in some cohorts, girls who were predominantly breastfed (as Area. Breast feeding practices were assessed using opposed to predominantly formula fed) showed later self-administered questionnaires with the primary caregiver. The girls were seen on an annual basis to onset of breast development. assess breast and pubic hair development. In addition to breastfeeding correlating with pubertal Girls with early-onset puberty are at risk for a multitude of health challenges, including greater risks of onset, duration of breastfeeding was also directly associated with age at onset of breast development. obesity, hypertension, and some cancers. Early maturation is also associated with lower self-esteem, higher However, a stratified analysis showed the association rates of depression and norm-breaking behaviors, and only in the Cincinnati cohort.

lower academic achievement.

"These findings are unique in suggesting that exclusive breastfeeding may delay onset of girls' pubertal timing," says Julianna Deardorff, associate professor of maternal and child health and coauthor of the study. "Given the limited number of modifiable factors influencing puberty, this is a promising area of research for intervention."



4/3/15, 10am-3pm

California

Over the past few years, health care reform, the California Children's Services (CCS) Redesign, and other shifts at the State and Federal levels have brought changes to services for Children with Special Health Care Needs. Join us for this special one-day Continuing Education Event to talk about the Changing Landscape for Children With Special Health Care Needs in California.

This event will bring together families, medical and mental health providers, policy experts, researchers, and other MCH professionals for presentations, round table discussions, and opportunities to hear more about what is happening and what we can expect in the future.

"The results varied across the sites, suggesting that unique characteristics of these cohorts and their environments modify effects," says Deardorff. "Further research into the contexts within which breastfeeding and girls' development occur would potentially illuminate sources of variability."

The Changing Landscape for Children with Special Health Care Needs (CSHCN) in

Alumni Brunch honors CHAMACOS





experience. Ryan is a current epi PhD student advised by PHN faculty.

CAL ALUMNI UC Berkeler

UC Berkeley MCH was thrilled to collaborate with the Public Health Nutrition program on our 3rd annual Alumni Networking Brunch. The brunch (this year honoring the CHAMACOS study) was attended by PHN faculty, MCH alumni and current students.



MCH students Darcy Craig, Margot Zipperstein, Shannon Merrell, Jillian Eversole, and Maggie Crosby

Recently published? Promoted? Celebrating a *life event? We want to hear* about it! Please send your updates to mchprogram@ berkeley.edu.

Professor Kim Harley, Associate Director for Health Effects Research at CHAMAC OS



The CHAMACOS team: Julianna Deardorff, Kimberly Parra, Brenda Eskenazi, Celina Trujillo, Kim Harley and Katie Kogut



