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## **The University of Texas at Austin April 1 and 2, 2008**

*Submitted to*

*The Office of Workforce and Career Development  
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## ***Acknowledgements***

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Finally, the conference would not have been possible without the generous financial support of the Office of Workforce and Career Development, CDC. We are deeply appreciative to Judy Delany and Anissa Ham for their faith in our vision to grow up the next generation of public



health professionals by providing university students and advisors with an opportunity to explore the field of public health. We thank them for partnering with us to make this extraordinary opportunity available at the University of Texas at Austin.



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## 1. Executive Summary

The United States and the State of Texas face a public health workforce shortage in the very near future, as it is estimated that 23% of the current workforce is eligible to retire by 2012<sup>1,2</sup>. Education and training is of paramount importance in creating the next generation of public health professionals to meet the challenges of the 21st century. In 2003, a partnership was created among the University of Texas at Austin (UT Austin), School of Biological Sciences, the Texas Department of State Health Services (TDSHS) and the Austin/Travis County Health and Human Services Department (ATCHHSD) with the mission of educating academic professionals and university students about the field of public health.

In September 2004, a public health internship program, designed to provide students with experiential education in public health, was launched, and in September 2003 and April 2006, two successful scientific conferences - ***“Become a Disease Detective: Discover Public Health!”*** - were held on the UT Austin campus. UT Austin is one of the largest and most ethnically diverse universities in the nation, with a total enrollment of 49,948 for the 2007-2008 academic year. It is a leader in the nation in the number of undergraduate degrees awarded to minority students. While students at the university (including the 3600 Biology majors) are keenly interested in health careers, they have had little exposure to public health as a career. Likewise, university faculty members, and academic, health professions and career advisors, who interact with thousands of students annually, are not well informed about the varied opportunities in public health. Both the internship program and the “Disease Detective” conferences are designed to educate these two university populations, and to provide them with information and resources about educational pathways and careers in the field of public health.

Building upon these previous successful initiatives, the third ***“Become a Disease Detective: Discover Public Health!”*** conference was held on April 1 and 2, 2008 at the Texas Union on the campus of UT Austin. The purpose of this conference, as with the previous two conferences, was to teach and inspire participants about public health. Approximately 750 students, university faculty members, and academic, health professions and career advisors attended the conference and visited the Exhibit Hall. Faculty and advisors attended a luncheon with public health professionals and a breakfast presented by the Association of Schools of Public Health that focused on undergraduate and graduate public health education. Students, faculty and advisors participated in a day long scientific conference, which included presentations on “hot topics” in public health, structured and informal conversations with public health professionals, and opportunities to talk with representatives from top graduate schools of public health and public health organizations. A complete program and list of conference activities can be found at the conference website: [www.sbs.utexas.edu/diseasedetective](http://www.sbs.utexas.edu/diseasedetective); the printed program provided to participants who attended the scientific conference is found in the Appendix 7.1.

Many agencies and organizations contributed to the success of the 2008 Disease Detective Conference. The conference was funded through a generous grant from the Office of Workforce and Career Development, The Centers for Disease Control and Prevention (CDC). Conference sponsors included: The University of Texas at Austin (UT Austin): College of Natural Sciences, School of Biological Sciences, Career Services



and Health Professions Office; The Centers for Disease Control and Prevention, Office of Workforce and Career Development; The Texas Department of State Health Services; The Austin/Travis County Health and Human Services Department; The University of Texas School of Public Health, Austin Regional Campus; The Association of Public Health Laboratories, and The Association of Schools of Public Health (ASPH). Generous in-kind support was provided by the Pfizer Public Health and Policy Group, The University of Texas Cooperative Society, Texas Public Health, Maryn McKenna, Infectious Awareness, and Giant Microbes.

Results of surveys completed by conference participants during the conference and five months afterwards, clearly demonstrated that faculty, advisors, students and public health professionals had positive experiences at the conference. Faculty and advisors received new knowledge and resources with which to advise thousands of students about public health education and careers. "Out-of-state" academic and health professions advisors who participated magnified the overall impact of the conference by returning to their home campuses to share the information they gained with interested students. Ms. Joy Coleman, Senior Relationship Manager, Gates Millennium Scholars Program, who attended the conference for the first time, is disseminating the information and resources she gained at the conference to Gates Millennium scholars enrolled in more than 1,500 colleges and universities around the country.

The conference gave hundreds of university students the opportunity to hear scientific presentations based on real cases in epidemiology and "disease detective" work, and to engage in discussions with public health professionals about their activities, functions and careers. Students were able to meet and interact with representatives from 19 graduate schools of public health and eight public health organizations in the Exhibit Hall to learn more about graduate education and public health careers. They also received instruction about how to access information about public health at the conference Information Resources Center and were provided with over 600 books to read more about the field. Students learned about training programs in public health, including the CDC Epidemic Intelligence Service, the CDC/APHL Emerging Infectious Disease Fellowship Program, and the recently created CDC Apprenticeship Program. Information also was available about the UT Austin Public Health Internship Program, a collaborative program between the university and the Texas Department of State Health Services (TDSHS), The Austin/Travis County Health and Human Services Department (ATCHHSD) and the University of Texas School of Public Health, Brownsville Regional Campus.

The 2008 *Become A Disease Detective: Discover Public Health!* conference also facilitated networking opportunities between university faculty and state and local public health officials and provided continuing education for local health professionals. The ASPH and APHL continue to view the UT Austin Disease Detective Conferences as model programs for the development of the public health "pipeline" and they have recently offered a "Pathways to Public Health Careers and Internship" grant program to encourage the development of similar conferences at other universities across the nation.

This training and outreach activity continues to be very successful because of the commitment of the university and its public health partners to create opportunities for students to explore public health, to educate academic professionals about the field, and to foster relationships between the academic and public health communities. Through



this ongoing collaboration, all partners involved are actively contributing to the development of the future public health workforce to meet shortages in our city, state and nation. Because of the interest and enthusiasm for public health demonstrated through the 2008 Disease Detective Conference, public health professionals and educators who participated have indicated their interest and willingness to continue this outreach activity by returning for future occasions.

Finally, this conference has served as a springboard for the development of a new B.S. in Public Health degree program at UT Austin which is expected to be implemented in the Fall of 2010.

<sup>1</sup>Association of Schools of Public Health. 2008. Confronting the Public Health Workforce Crisis: *ASPH Statement on the Public Health Workforce* ([www.asph.org](http://www.asph.org))

<sup>2</sup>Perlino, Courtney, M. 2006. *The Public Health Workforce Shortage: Left Unchecked, Will We Be Protected?* American Public Health Association ([www.apha.org](http://www.apha.org))



## **2. Conference Participants**

Conference participants included university faculty, advisors, students and public health professionals and admissions officers from graduate schools of public health.

Faculty, advisors and public health professionals participated in two days of conference activities. On April 1<sup>st</sup>, they attended a luncheon with public health professionals and on April 2<sup>nd</sup>, they attended a breakfast to learn about public health education as well as the scientific conference. Analyses of demographic surveys showed that 27 faculty and advisors attended the luncheon, 29 attended the breakfast and 19 attended the scientific conference. Through generous underwriting provided by Ms. Allison Foster, Deputy Executive Director, the Association of Schools of Public Health (ASPH), 12 advisors from 10 other universities in the United States, traveled to Austin to attend the conference. A profile of faculty and advisors attending the conference was summarized from breakfast demographic forms. Ninety percent were female and 15% classified themselves as minorities. Fifty seven percent of faculty and advisors were from UT Austin and 79% were over the age of 40.

A special invited guest was Ms. Joy Coleman, Senior Relationship Manager, Gates Millennium Scholars Program, who traveled from Washington, D.C. to participate in the conference and to meet with Gates Scholars who are enrolled at UT Austin. She held a meeting in the Texas Union on the evening of April 1<sup>st</sup> with Gates Scholars enrolled at UT Austin to network with the scholars and to encourage them to attend the conference. Beginning in 2005, public health became one of the five areas of graduate education to be funded by the Gates Millennium Scholars Program. Ms. Coleman is responsible for helping Gates Scholars around the country learn more about each of these five areas, including public health.

It is estimated that more than 600 students attended the scientific conference on April 2<sup>nd</sup> and analyses of demographic surveys showed that 95% of university students were from UT Austin with the remainder from four other Texas universities. Students from two clinical laboratory science education programs in the state, Tarleton State University (Ft. Worth) and Austin State Hospital (Austin) also attended. Eighty seven percent of student participants were undergraduate students. Of the undergraduates who indicated their classification, 35.5% were seniors, 25% were juniors and 20% each were either sophomores or freshmen. Fifty seven percent of students who participated were from populations defined as minorities; 67% were female. Ninety five percent of student attendees at the scientific conference were under the age of 29.

Two hundred public health professionals participated in the two days of the conference and their participation was a key to the conference success. They served on the conference planning committee, presented scientific talks, were exhibitors and were available for networking and one-on-one conversations with students. These individuals represented nine public health organizations: The Centers for Disease Control and Prevention, Texas Department of State Health Services, Austin-Travis County Health and Human Services Department, Association of Schools of Public Health, Association of Public Health Laboratories, The U.S. Public Health Service, The United States Agency for International Development (USAID), The United States Army, and Doctors Without Borders.



### **3. Conference Activities**

#### **3.1 Faculty - Advisor Luncheon with Public Health Professionals, April 1, 2008**

Faculty and advisors play important roles in student success at the university, interfacing with students daily and counseling them formally and informally about a variety of educational and career options. At UT Austin, on average, each university advisor may have as many as 1500 student contacts per year with undergraduate students in the Colleges of Natural Sciences, Liberal Arts and Nursing. Educating these individuals about the opportunities available in public health and providing them with current resources is an effective way to impact large numbers of students in an ongoing way. Two events were held at the 2008 Disease Detective Conference to help educate faculty and advisors about the field of public health: a faculty-advisor luncheon and a faculty advisor breakfast.

The faculty-advisor luncheon with public health professionals was held on April 1<sup>st</sup>, to provide attendees with information about workforce shortages in public health and to give them a current perspective about global public health. Members of the national, state and local public health communities were invited to network with faculty and advisors, and to share their personal experiences and perspectives about public health with members of the university community. Public health professionals and faculty from graduate schools of public health wore big red buttons with the words “Ask Me About Public Health!” so they could be easily identified by luncheon participants. Each faculty member and advisor was presented with a conference tote bag filled with resources about public health, including information about public health careers, graduate education, internships, fellowships, and public health practice agencies. Luncheon participants also were provided with a public health reading list prepared by Ms. Nancy Elder, Head Librarian, Life Sciences Library, UT Austin.

Luncheon participants were first greeted by Drs. Leanne Field and Diane Kneeland, conference co-organizers, and by Ms. Dena Garrison, President of *Texas Public Health*, an undergraduate student organization focused on public health. Dr. David Lakey, Commissioner of the Texas Department of State Health Services, then spoke to luncheon attendees about the importance of the public health profession, focusing on workforce shortages in the field. This was followed by the featured presenter, Dr. Joseph McCormick, Regional Dean and James Steel Professor, University of Texas School of Public Health, Brownsville Regional campus, who presented a lecture entitled “Global Health at Home and Abroad.”

Over one hundred individuals attended the luncheon; demographic information, using CDC survey forms modified for student (Appendix 7.2.1) and non-student participants (Appendix 7.2.2) were collected from 99 attendees (Tables 1-8). A supplemental evaluation (Appendix 7.2.3) also was administered to faculty and advisors in order to assess the effectiveness of the luncheon presentations (Tables 9-28).

#### **3.2 Faculty - Advisor Breakfast, April 2, 2008**

A faculty-advisor breakfast, hosted by the University of Texas, School of Public Health, Austin Regional Campus was held on April 2, 2008. The purpose of the breakfast was



to provide advisors with practical information about admission into graduate schools of public health and to introduce them to undergraduate public health education.

Breakfast participants were first greeted by conference co-organizer, Dr. Leanne Field. Dr. Cheryl, Perry, Regional Dean of the UT SPH then spoke about the importance of graduate education in public health and provided participants with an overview of the new Austin Regional Campus. This was followed by two featured presentations: 1) “Graduate Schools of Public Health: What Students Need to Know!” presented by Ms. Allison Foster, Deputy Executive Director, ASPH and a panel of admissions officers from the School of Public Health, The University of Minnesota; The Rollins School of Public Health, Emory University; the School of Public Health, The University of Texas; and The School of Public Health and Health Services, George Washington University; and 2) “Undergraduate Public Health Education,” presented by John McElligott, ASPH.

Over 50 individuals attended the breakfast and demographic information was collected from 29 attendees (Tables 29-36). A supplemental evaluation (Appendix 7.2.4) was administered to faculty and advisors attending the breakfast to assess the effectiveness of the breakfast presentations (Tables 37-52).

### **3.3 Scientific Conference and Exhibits for University Students, Faculty, Advisors, and Others, April 2, 2008**

An exciting scientific conference and exhibits for university students, faculty, advisors and others was held from 12 pm – 7:30 pm on April 2<sup>nd</sup>. These activities provided participants with the opportunity to hear scientific presentations by public health professionals, and to network one-on-one with representatives from graduate schools of public health and public health organizations. This approach is the first step in building the public health pipeline as students learn about many different public health careers and get information about how to apply to graduate programs in public health. The conference theme “Out of Africa” was chosen to appeal to university students who are keenly interested in learning about global disease outbreaks and international public health. Many students were drawn to the event by the chance to hear four presentations focused on public health initiatives in Africa, including keynote presentations by the distinguished public health scientists and “disease detectives”, Drs. Joseph McCormick and Susan Fisher-Hoch. Comments from public health professionals and students attending the conference can be found in Sections 5.1 and 5.2, respectively.

The scientific conference was advertised on campus for weeks in advance of the conference with posters (Appendix 7.6), flyers, banners, advertisements in the student newspaper and multiple e-mails sent to the 8,500 students in the College of Natural Sciences. Members of the UT Austin student organization, *Texas Public Health*, also advertised the conference via the social networking site, *Facebook*. The conference poster was displayed as a placard in university buses and several large outdoor banners were displayed around the campus. Students were encouraged to visit the conference website ([www.sbs.utexas.edu/diseasedetective](http://www.sbs.utexas.edu/diseasedetective)) to learn about the free conference activities, to view the scientific program and the list of conference exhibitors, and the speakers’ biographies (Appendix 7.3). Academic advisors displayed conference posters in their offices, and the eighty teaching faculty in the School of Biological Sciences publicized the conference in their classrooms using an informational flyer and a



PowerPoint slide. Students in other colleges - the College of Liberal Arts, the College of Pharmacy and the Schools of Nursing and Law also heard about the conference multiple times and in multiple ways, through posters and e-mails. The Pfizer "Milestones in Public Health" exhibit was displayed at the UT School of Nursing, the College of Pharmacy and the Life Sciences Library for the two weeks leading up to the conference. All students on campus were encouraged to attend the conference to hear "Exciting Presentations about Hot Topics in Public Health!" and to receive "Free Lunch!" "Free Books!" and "Free Pizza!"

Undergraduate student volunteers provided their enthusiasm and energy to help make the conference a success. Hundreds of students, including members of the student organization, *Texas Public Health*, and students participating in the UT Austin Public Health Internship Program, were involved in the planning and execution of the conference. Before the conference began, students helped with advertising, stuffed tote bags for the faculty-advisor luncheon and made decorations for the Exhibit Hall. The day of the conference, over 200 enthusiastic student volunteers, dressed in red "Become A Disease Detective" T-shirts, were involved in all aspects of the conference, including setting up the Exhibit Hall and registering conference participants. Teams of four student volunteers served as the moderators for the afternoon scientific sessions: introducing the speakers, passing out bookplates (redeemable for free books in the Exhibit Hall), administering supplemental evaluations and videotaping the presentations. Additional student volunteers helped in the Exhibit Hall by distributing the free books and assisting the conference exhibitors. Students participating in the UT Austin, Public Health Internship Program and their public health mentors, and members of *Texas Public Health* also served as exhibitors. One student volunteer, wearing a sandwich board that displayed the conference poster, walked around campus, handing out flyers and encouraging students to attend.

Participants registered for the conference onsite when they attended scientific sessions or entered the exhibit hall. After filling out demographic surveys, attendees were given red wrist-bands by student volunteers, indicating they were "officially" registered for the conference. They also were handed a printed program (Appendix 7.1) that included a list of conference activities, a schedule and synopsis of the scientific presentations, and a list of exhibitors. Public health professionals and educators who attended the conference were provided with big red buttons with the message "Ask Me About Public Health!" so that they could be easily identified by the students, faculty and advisors who were in attendance.

### **Scientific Sessions (12 – 6:30 pm)**

Sixteen scientific sessions were presented between 12 pm and 6:30 pm. Presenters included public health professionals from the CDC, the TDSHS, the ATCHHSD and individuals representing graduate schools of public health and public health organizations. Included among the speakers in the afternoon scientific sessions were four speakers from CDC, all of whom were current or former members of the CDC Epidemic Intelligence Service, one speaker from the USAID, seven speakers from TDSHS (including the Commissioner) and two speakers from ATCHHSD. Faculty at the UT School of Public Health supported the conference by serving on the organizing committee, presenting at the conference and by attending scientific sessions to help answer questions from interested faculty, advisors and students. APHL organized a special session focused on career opportunities in the public health laboratory and



ASPH presented a session for students about how to apply to graduate schools of public health.

The opening “kick off” presentation, “One World, One Goal: Optimal Health for All!” included a free “Italian Party Sub Lunch” for 250 students. The presenter for the kick-off luncheon was Dr. Eduardo Sanchez, former Commissioner of TDSHS and Director of the Public Health Policy Institute at the UT SPH. Between 1-5 pm, three concurrent sessions were presented each hour for a total of 12 sessions. At 5 pm, the keynote session was introduced by Dr. David Lakey, Commissioner of TDSHS, with a presentation entitled *Discover Public Health!*. Two keynote addresses were presented by Dr. Joseph B. McCormick (*Origins of HIV: Who What Why and How?*) and Dr. Susan P. Fisher-Hoch (*Africa: The Virus Cradle*). Students, faculty, advisors and others attending the scientific sessions were asked to complete an evaluation form to assess the effectiveness of the scientific presentations (Appendix 7.2.5). Following the keynote session, students were invited for a pizza dinner served in the loggia of the Texas Union Ballroom.

### **Exhibits (12 pm - 7:30 pm)**

Students attending the scientific sessions were encouraged to visit the Exhibit Hall, located in the historic Texas Union Ballroom. Nineteen graduate schools of public health, nine public health organizations, and four training programs participated as exhibitors. As students entered the Exhibit Hall they could “Meet a Public Health Professional” and have one-on-one conversations with epidemiologists, members of the CDC EIS program, public health nurses and other public health professionals. Nearby, at the *Information Resources Center*, Head Librarian, Ms. Nancy Elder, hosted a display of over 100 current books about public health found in the Life Sciences Library at UT Austin and taught students how to access on-line resources about public health for themselves. Ms. Elder also provided students with three separate reading lists: “Public Health Reading: Explore Topics in Public Health” (Appendix 7.4.1), describing the books available in the Life Sciences Library, and two “fun” reading lists: “Bioterror, Bacteria and Bad Guys: Adventures in Public Health” (Appendix 7.4.2), and “Viruses, Vectors and Victims: Public Health at the Movies” (Appendix 7.4.3). At the APHL exhibit, also near the entrance of the Exhibit Hall, participants learned about the CDC EID Emerging Infectious Disease Fellowship program, career opportunities in laboratory science, and the Southern Illinois University (SIU) graduate program in public health laboratory science. Ms. Eva Perlman (APHL) and Dr. David Carpenter (SIU) also presented each student with a tote bag and three public health books, generously provided by Ms. Delia Santana, of the Pfizer Public Health and Policy Group. Pfizer generously donated a total of 600 tote bags and 600 each of three titles: “Milestones in Public Health,” “Advancing Healthy Populations: The Pfizer Guide to Careers in Public Health,” and the newly published title, “Moments in Leadership- Case Studies in Public Health Policy and Practice”. Participants also were able to view the traveling Pfizer “Milestones in Public Health” exhibit (Appendix 7.5), as they strolled through the Exhibit Hall.

The ASPH was represented by Ms. Allison Foster and representatives from the 19 graduate schools of public health each had separate tables along the perimeter of the ballroom. Teams of public health professionals manned the TDSHS Laboratory Sciences Section and the ATCHHSD exhibits throughout the day. Ms. Caitlin Meredith represented “Doctors Without Borders” and LCDR Patrick Young represented the U.S. Public Health Service. Ms. Judy Delany and Ms. Annisa Ham, from the CDC Office of



Workforce and Career Development answered questions from students about careers at CDC. A representative from the “Public Health Apprenticeship Program” also was on hand at the CDC booth to recruit UT Austin students into the first Texas cohort of the newly created program. Three programs focused on public health at UT Austin also were represented in the Exhibit Hall: The Public Health Internship Program, The UT School of Nursing, Master of Science in Nursing (MSN) program (Public Health Concentration), and the UT Department of Kinesiology and Health Education, Graduate Program in Health Education.

The busiest exhibit in the Exhibit Hall was the book redemption table. Each of the first 30 participants who attended one or more of the twelve afternoon scientific sessions between 12 pm - 5 pm were presented with a book plate which they used to redeem for a free book in the Exhibit Hall. This conference activity was made possible by the generous sponsorship of the CDC, OWCD and by a grant from the University Cooperative Society to *Texas Public Health*. Students had their choice of ten different books about public health including: *Beating Back the Devil: On the Front Lines with the Disease Detectives of the Epidemic Intelligence Service*, by Maryn McKenna; *Flu: The Story Of The Great Influenza Pandemic*, by Gina Kolata; *Secret Agents: The Menace of Emerging Infections* by Madeline Drexler; *The Demon in the Freezer : A True Story* by Richard Preston; *The Hot Zone* by Richard Preston; *Virus Hunter: Thirty Years of Battling Hot Viruses Around the World* by C.J. Peters; *Level 4: Virus Hunters of the CDC* by Joseph McCormick, Susan Fisher-Hoch, and Leslie Alan Horvitz; *The Family That Couldn't Sleep: A Medical Mystery* by D.T. Max; *The Ghost Map: The Story of London's Most Terrifying Epidemic--and How It Changed Science, Cities, and the Modern World* by Steven Johnson; *Microbe: Are We Ready for the Next Plague?* by Alan Zelicoff and Michael, Bellomo; *Scourge: The Once and Future Threat of Smallpox* by Jonathan B. Tucker. In a four hour time span, over 600 books were given away. As indicated by student comments (Section 5.2), this was one of the most popular features of the conference. Many students expressed their amazement and appreciation for the opportunity to have a free book of their choice and to read more about public health!

A unique outside exhibit, “The Mobile Analytical Laboratory,” hosted by the U.S. Army’s 6<sup>th</sup> Civil Support Team, gave students the opportunity to meet public health professionals who are trained to respond to disasters, including bioterrorism and biological warfare. Students stepped inside the vehicle and members of the Texas Army and Air National Guard showed them the sophisticated laboratory equipment used to perform chemical, radiological and biological analyses.

Follow-up, on-line, post-conference evaluations were administered five months later to faculty and advisors (Appendix 7.2.6) (Tables 82-111), exhibitors (Appendix 7.2.7) (Tables 112-138), and speakers (7.2.8) (Tables 139-159) to assess the effectiveness of conference activities. Photos of the entire conference can be found in Appendix 7.7.



## 4. Conference Evaluations

### 4.1 Demographic Analyses: Faculty-Advisor Luncheon with Public Health Professionals, April 1, 2008 (Tables 1-8)

**Table 1. Gender of Participants**

Gender	Number of Responses
	Advisor's Luncheon (4/1/08)
Female	74
Male	25
<b>Total</b>	<b>99</b>

**Table 2. Age of Participants**

Age	Number of Responses
	Advisor's Luncheon (4/1/08)
Under 20	0
20-29	15
30-39	28
40-49	22
50-59	29
60 or older	10
<b>Total</b>	<b>104</b>



**Table 3. Race/ Ethnicity of Luncheon Participants**

Race/Ethnicity	Number of Responses
	Advisor's Luncheon (4/1/08)
American Indian or Alaska Native	2
Asian or Asian American	4
Black or African American	9
White	75
Hispanic or Latino	11
Native Hawaiian or Other Pacific Islander	0
<b>Total</b>	<b>101</b>

**Table 4. Type of Institution**

Type of Institution	Number of Responses
	Advisor's Luncheon (4/1/08)
State Health Department	19
Local Health Department	4
Hospital or Community Health Clinic	0
College or University	74
Law Enforcement/Fire/Emergency Response	0
Community-based Organization	0
Business	0
Other	
CDC: Federal	5
Non-profit organization (APHL)	3
Unspecified	1
<b>Total</b>	<b>106</b>



**Table 5. Health Profession Shortage Area**

Health Profession Shortage Area	Number of Responses
	Advisor's Luncheon (4/1/08)
Does Not Apply	62
Health Department	20
Community Health Center	0
Migrant Health Center	0
Health Care for the Homeless	0
Public Housing Primary Care	0
Rural Health Clinics	0
National Health Service Center	0
Indian Health Center	0
Federally Qualified Health Center	0
Designated Ambulatory Practice Sites	0
Other (specify)	
Environmental Health	1
Public Health Nursing	1
Federal: CDC	1
Public Health Laboratory	1
Public Health Education	1
<b>Total</b>	<b>87</b>

**Table 6. Length of Time Working for Current Employer**

Length of Time Working for Current Employer (years)	Number of Responses
	Advisor's Luncheon (4/1/08)
Less than 1	7
1-3	16
4-6	17
7-9	14
10-12	11
13-15	8
16 or more	20
<b>Total</b>	<b>93</b>



**Table 7. Responsibility for Disaster Preparedness or Emergency Response**

<b>Responsibility for Disaster Preparedness or Emergency Response</b>	<b>Number of Responses</b> Advisor's Luncheon (4/1/08)
Yes	19
No	81
Don't Know	0
<b>Total</b>	<b>100</b>

**Table 8. Current Profession**

<b>Current Profession</b>	<b>Number of Responses</b> Advisor's Luncheon (4/1/08)
<b>Health Profession</b>	
Physician	4
Physician Assistant	0
Nurse, Advanced Practice	0
Nurse, RN	2
Nurse, LVN	0
Home Health Aide/Medical Assistant	0
Laboratory Professional	1
Dentist	0
Dental Worker (Hygienist, Assistant)	0
Clinical Laboratory Technician	0
Veterinarian	1
Nutritionist/Dietician	1
Pharmacist	0
Therapist (OT, PT, RT, ST)	0
First Responder (EMT, Fire, Rescue, Hazmat)	0
Psychiatrist	0
Psychologist	0
Mental Health/Substance Abuse Clinician	1
Mental Health/Substance Abuse Counselor	0



Current Profession	Number of Responses
	Advisor's Luncheon (4/1/08)
<b>Public Health Professionals</b>	0
Biostatistician	2
Bioterrorism Coordinator	2
Community Outreach/Field Worker	1
Environmental engineer (includes technician)	0
Environmental Scientist and Specialist	2
Epidemiologist	10
Health Educator/Trainer	3
Health Information Systems/Data Analyst	0
Health Planner/Researcher/Analyst	1
Hospital Administrator/Management	0
Infection Control/Disease Investigator	2
Microbiologist	5
Public Health Management	3
Social Worker	0
Other Public Health Professional	0
<b>Students</b>	
Allied Health Student	0
Allopathic Medical Student	0
Community Health Worker Student	0
Dentistry Student	0
Medical Resident	0
Mental Health Student	0
Nursing, Advanced Practice, Student	0
Nursing Student	0
Osteopathic Medical Student	0
Pharmacy Student	0
Physician Assistant Student	0
Public Health Student	0
University Student	6
<b>Other</b>	
Public Health Laboratory Scientist	1
Elected Government Official	0
Elected Government Official Staff Member	0
Emergency Management (FEMA, Civil Defense)	0



Current Profession	Number of Responses
	Advisor's Luncheon (4/1/08)
Law/Judicial/Attorney	0
Law Enforcement	0
Support Staff (Administrative Assistant, Clerk)	5
Public Information Staff (Media Spokesperson/Liaison, PR Staff)	1
Teacher/Faculty	14
Health Professions Advisor	7
Academic Advisor	22
Career Advisor	6
Admissions Officer, School of Public Health	2
Librarian	2
Exhibitor	1
<b>Total</b>	<b>108</b>

### Narrative: Tables 1-8

Approximately 125 faculty, advisors and public health professionals attended the Faculty-Advisor Luncheon. **Tables 1-3** show the gender, age, and race/ethnicity of 99 luncheon participants who completed the survey. Seventy four (74.7%) of the respondents were female and 25 (25.3%) were male (**Table 1**). Fifteen (15.2%) of 104 who completed the survey ranged in age from 20-29, 50 (50.5%) were between 30-49 years of age and 39 (39.3%) were ages 50- 60 or older (**Table 2**). The race/ethnicity of 101 survey respondents was as follows: 75 (74.3%) White, 11 (10.9%) Hispanic or Latino, 9 (8.9%) Black or African American, 4 (3.9%) Asian or Asian American, and two American Indian or Alaska native (**Table 3**).

As outlined in **Table 4**, 74 (69.8%) of the luncheon participants who completed the survey, indicated they were affiliated with a college or university, 19 (17.9%) worked at a state health department, 4 (3.8%) were associated with a local health department. Nine (8.5% ) individuals indicated they were associated with an “other” type of institution. Of these, 5 responded they were from CDC, 3 were from APHL and 1 was unspecified. As shown in **Table 5**, 62 (71.3%) of 87 individuals who responded to the survey indicated they did not work in a health profession shortage area; 20 (23.%) indicated they did work in a health profession shortage area, and 5 (5.7%) indicated they worked in an “other” area. Included in the “other” category was one person each working in environmental health, in public health education, in public health nursing, at CDC, and in a public health laboratory.

**Table 6** summarizes the length of time that 93 luncheon attendees had worked for their current employers. Twenty three (24.7%) of those who completed the survey had worked for their current employer for less than 1 to 3 years, 17 (18.3%) had worked for their employer 4-6 years, 25 (26.9%) for 7-12 years, and 28 (30.1%) for 13- 16 years or more. As shown in **Table 7**, 19 (19%) of 100 luncheon participants were responsible for



disaster preparedness or emergency response and 81(81%) were not. Finally, **Table 8** summarizes the 27 different professions of 108 individuals who responded to this question in the survey. Six university professions were represented: academic advisor (22), teacher/faculty (14), health professions advisor (7), career advisor (6), admissions officer (2), and librarian (2). Ten individuals worked as health professionals and 31 as public health professionals. The latter included 10 epidemiologists. Six university students attended as did 9 individuals who listed their profession as “other.”

#### 4.2 Supplemental Evaluations: Faculty- Advisor Luncheon with Public Health Professionals, April 1, 2008 (Tables 9-28)

**Table 9. Classification of University Faculty and Advisors Attending the Luncheon**

<b>Classification</b>	<b>Number of Responses</b>
Faculty	5
Academic Advisors	17
Career Advisors	3
Other	2
<b>Total</b>	<b>27</b>

**Table 10. Universities Represented by Faculty and Advisors Attending the Luncheon (free responses)**

<b>University</b>	<b>Number of Responses</b>
University of Texas at Austin	18
University of Texas School of Public Health	1
University of California, Santa Cruz	2
University of Minnesota	2
University of Southern California	1
San Diego State University	1
Texas State University	1
<b>Total</b>	<b>26</b>



**Table 11. Majors Taught and Advised by University Faculty and Advisors Attending the Luncheon**

<b>Majors Taught and Advised</b>	<b>Number of Responses</b>
<b>University of Texas at Austin</b>	
All majors	4
Biology	8
Clinical Laboratory Science	3
Chemistry and Biochemistry	4
Geology	1
Health Professions	9
Human Ecology	2
Human Development and Family Sciences	2
Interdisciplinary Studies	2
Mathematics	3
Nutrition	2
Physics	1
Teaching (UTeach): All options	1
Textiles and Apparel	2
Undeclared	1
Undergraduate studies	1
<b>San Diego State University</b>	
All majors	1
<b>Texas State University</b>	
All majors	1
<b>University of California, Santa Cruz</b>	
All majors	1
Law	1
Business	1
Pre-health	1
Science	2
Social (Sciences)	1
<b>University of Southern California</b>	
Child and Family Health	1
Epidemiology-Biostatistics	1
Global Health	1
Health Communications	1
Health Education	1
Nutrition	1



**Table 12. Do you plan to attend the scientific presentations on April 2nd?**

<b>Plan to Attend Scientific Presentations?</b>	<b>Number of Responses</b>
Yes	18
No	6
<b>Total</b>	<b>24</b>

**Table 13. If you plan to attend the scientific presentations on April 2nd, which presentations are of most interest to you?**

<b>Presentations of Most Interest</b>	<b>Number of Responses</b>
One World, One Goal: Optimal Health for All	12
Out of Africa: HIV and MDR Epidemic: The Perfect Storm?	4
Women In Medicine – Women in Public Health!	6
Public Health, Austin, Texas!	5
MRSA: the Making of a Superbug!	2
Outbreak I: Epidemiologists- Outbreaks Are Our Business!	6
CSI: Public Health: Tackling Emerging Diseases and More in the Laboratory	2
One World, One Hope: Frontline Response to the Global AIDS Pandemic	3
“Beating Back the Devil” The CDC Epidemic Intelligence Service	8
College Students: What’s Going to Get You... and What Can You Do About It?	6
Out of Africa: Meds, Mango Leaves, and Prayers – Teasing Out Health Choices in the Congo	2
Outbreak II: Texas Disease Detectives in Action	2
Ready to Take the Next Step? Graduate Education in Public Health	12



<b>Presentations of Most Interest</b>	<b>Number of Responses</b>
Discover Public Health!	4
Origins of HIV	4
Africa: the Virus Cradle	4

**Table 14. Do you plan to attend the conference exhibits on April 2nd?**

<b>Plan to Attend Conference Exhibits?</b>	<b>Number of Responses</b>
Yes	19
No	5
<b>Total</b>	<b>24</b>

**Table 15. If you plan to attend the conference exhibits on April 2nd, which presentations are of most interest to you?**

<b>Exhibits of Most interest</b>	<b>Number of Responses</b>
Graduate Schools of Public Health	16
Public Health Organizations	6
Information Resources Center	9
Meet a Public Health Professional	6
Pfizer Milestones Exhibit	4



**Table 16. Have you visited the conference website?**

Visit Conference Website?	Number of Responses
Yes	20
No	4
<b>Total</b>	<b>24</b>

**Please give us your comments about the conference website** (free responses).

1. Needs maps for the building/ room site
2. Very well organized- lots of good information
3. Very clear and concise
4. Difficult to find conference location
5. Excellently designed, easy to find from UT home page
6. Very thorough, easy to understand

**Table 17. How knowledgeable do you think your students are about public health?**

1	2	3	4	5	Average
Not knowledgeable			Very knowledgeable		
3 <sup>1</sup>	6	12	3	1	2.7

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. Unsure of majors knowledge.
2. When I bring it up to them they don't know about what I'm talking about.
3. They simply don't know what it is. It seems they've never heard of it or don't know what one does in public health.
4. Don't read - too focused on "math, science..."
5. A portion of my students are doing a concentration in public health.
6. Based upon comments made - or lack thereof - in personal statements when applying to our program.
7. Students that come in for pre-health professions advising often do not have public health on their radar. It is often an opportunity to introduce the topic.
8. Biology majors tend to want to want a career in this field.



9. Even though I refer to the profession during our conversation many are very closed minded and only see MD as a profession.
10. Many students think about “health care” from a pre-med perspective and not very broadly. The challenge is getting them to step outside the box and consider these careers.
11. It seems that when it comes to public health, they think only of medical school.
12. More focused on pre-med, pre-pharm, etc.
13. Several students who have an interest in public health do not know about career opportunities.
14. Parents aren’t aware of public health or its opportunities.
15. Students don’t seem to know about what it is when I mention it.

**Table 18. My knowledge about the field of public health prior to attending this luncheon was....**

1	2	3	4	5	Average
Not knowledgeable			Very knowledgeable		
1	0	13	10	1	3.4

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. So many areas of interest.
2. Have attended this program at UT before as well as at other conferences.
3. I was not familiar with this area.
4. Time in the field - my job - necessitates that I explain to prospective students what public health is and the many sub-specialties.
5. I am learning so much more currently!
6. My knowledge is average- I know about global issues.
7. I attended the conference at 2006.
8. I have attempted to educate myself further, at conferences or using other resources. This symposium will be another excellent opportunity.
9. I think this year the conference speakers spoke more about what the field is and how advisors can help.
10. Don’t know much more than what’s in the news- not aware of all the different careers.
11. Previously employed with UT Health Sciences Center; many friends and acquaintances in the field of medicine/public health.
12. I’m aware of some of the fields of study.



**Table 19. It was valuable to me to attend a professional development luncheon with public health professionals.**

1	2	3	4	5	Average
Not valuable				Very valuable	
0 <sup>1</sup>	0	1	10	14	4.5

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. Found out valuable information for my students.
2. I have more information than before.
3. Good language about the difference between medical care and public health.
4. Networking is very helpful
5. Learning and networking are always valuable.
6. Very informative and persuasive information.
7. I look forward to opportunities to become educated in this area.
8. To keep updated.
9. I have a better picture of what the field is about and how I can help.
10. Needed to increase my awareness and knowledge to best advise my students.
11. I actually connected with an attendee who happens to know mutual contacts in public health.
12. Good points to give students as to why they should do public health.
13. Helped me find out more that I can pass it on to students



**Table 20. The featured presentations at the luncheon were informative and increased my understanding of the field of public health.**

1	2	3	4	5	Average
Not informative			Very informative		
0 <sup>1</sup>	0	0	10	15	4.6

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. Birth rates, population and how that can impact health and disease- especially psychiatric diseases
2. Especially liked Dr. Lakey's presentation, illuminating the functions of the relatively new DSHS
3. I have a better picture of what the field is about and how I can help.
4. Very useful.

**Table 21. The featured presentations at the luncheon increased my understanding of the educational pathways that lead to a career in public health.**

1	2	3	4	5	Average
Strongly disagree			Strongly agree		
0 <sup>1</sup>	5	5	8	6	3.6

<sup>1</sup>Number of responses

**Please comment about why you responded as you did.** (free responses)

1. The first presentation by Dr. Lakey shed light on many career opportunities.
2. Already know these paths.
3. I now better understand what I could do with a degree in public health.
4. But that wasn't really the goal of this presentation. Think this will be better addressed in tomorrow's symposium.
5. That is a question I still have; what degree or certifications are needed to work in public health.



**Table 22. The featured presentations at the luncheon increased my understanding about workforce shortages in public health.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	2	7	16	4.6

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. The stats were informative.
2. Dr. McCormick pointed out specific areas that require more trained professionals.
3. I didn't realize the shortages projected in the near future and how that can present career opportunities for students.
4. The stats that by 2020 we will be short more than a quarter million workers in public health.
5. Presentations with graphics and stats.
6. Stats speak for themselves.
7. Spelled out well by Dr. Lakey.

**Table 23. The presentation "Global Health at Home and Abroad" increased my understanding about global public health.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	3	8	14	4.5

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. The statistics presented were very telling of the problems.



**Table 24. The presentation “Global Health at Home and Abroad” increased my interest in global health.**

1	2	3	4	5	Average
Strongly disagree			Strongly agree		
0 <sup>1</sup>	0	3	11	11	4.3

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. I'm excited about the opportunities for graduating students.
2. Interesting dichotomy between what the US spends on its public health initiatives and what “less developed” countries spend.
3. Too much information.

**Table 25. The presentation “Global Health at Home and Abroad” has sparked my interest in getting students involved in global health.**

1	2	3	4	5	Average
Strongly disagree			Strongly agree		
0 <sup>1</sup>	1	3	5	16	4.4

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. Pre-med students are generally motivated to do this.
2. We have so many students who would be competitive for such graduate programs in public health. We have to educate those students to think beyond simply “I want to be a doctor. Period!”
3. I always had an interest and this just reaffirmed that I try to get students to consider public health as an option.
4. I think some of my stat students could consider this important career path!



**Table 26. I will use what I learned today to help advise students about public health as a career choice.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	0	3	21	4.9

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. I can pass on the information I've gained.
2. Yes- this presentation was very helpful and I will share it with my bio majors.
3. Try to get them thinking about backup plans to med school and other careers.
4. The variety of information and pamphlets on careers to majors in public health will be great for future advising sessions!
5. There is a need, many options, and I believe, rewarding opportunities; students tend to only think premed/dent, nursing, PT/PA.

**Table 27. Do you have any other comments about today's presentation? (free responses)**

Comments
<ol style="list-style-type: none"> <li>1. Very helpful!</li> <li>2. Great!</li> <li>3. I would love to get presentation by the first speaker. It provided a nice introduction to the field that can be used in information sessions to various groups interested in pursuing an MPH degree.</li> <li>4. Thanks for inviting representations from other universities to this event!!</li> <li>5. Thanks!</li> <li>6. Thank you for putting this together!</li> <li>7. Very nicely done- the food was good; useful gifts; very informative.</li> <li>8. Once again- very interesting, very informative.</li> <li>9. Great handouts; good speakers</li> <li>10. I'm so glad you're continuing the education needed in this area.</li> </ol>



**Table 28. Do you have suggestions for future presentations?  
(free responses)**

Suggestions
<ol style="list-style-type: none"> <li>1. Have some young graduates (a panel) in local, state, federal and global careers speak about what they are doing. Having them present at both the April 1 and April 2 to both students and professionals/staff/faculty/advisors would probably help spark interest in public health as a career.</li> <li>2. Public Health- Issues in different ethnic populations; Student Presentations- their research on a public health issue; Public Health- not just for science majors!</li> </ol>

### **Narrative: Tables 9-28**

A supplemental survey was administered to faculty and academic advisors who attended the luncheon, in order to collect additional demographic data and to assess the effectiveness of the luncheon presentations. Twenty seven individuals responded to the survey and the results are presented in Tables 9-23.

**Table 9** summarizes the classification of university personnel who attended the luncheon. Five individuals (18.5%) were faculty members, 17 (63%) were academic advisors, 3 (11.1%) were career advisors and 2 (7.4%) classified themselves as “other.” As shown in **Table 10**, seven universities were represented at the luncheon. Seventeen (70.9%) of respondents were from UT Austin, 2 (8.3%) were from the University of California, Santa Cruz, and one each (20.8%) were from the University of Texas School of Public Health, the University of Minnesota, The University of Southern California, San Diego State University and Texas State University.

**Table 11** summarizes the wide variety of majors taught and advised by these faculty and advisors, broken down by university. When these individuals were asked if they planned to attend the scientific presentations the next day (**Table 12**), 18 (75%) responded “yes”, and 6 (25%) responded “no”. The presentations of most interest to the faculty and advisors who planned to attend are summarized in **Table 13**. The “top three” presentations of greatest interest to those who planned to attend the scientific presentations were “One World, One Goal: Optimal Health for All”, “Ready to Take the Next Step?- Graduate Education in Public Health,” and “Beating Back the Devil - The CDC Epidemic Intelligence Service”.

**Table 14** summarizes the number of faculty and advisors who planned to attend the exhibits the following day. Nineteen (79%) of 24 respondents indicated they would



attend the exhibits and 5 (21%) indicated that they did not plan to attend. The exhibits of most interest to these individuals were graduate schools of public health and the Information Resources Center (**Table 15**). Twenty (83.3%) of 24 respondents indicated that they had visited the conference website (**Table 16**). While four respondents provided positive comments about the website, two others suggested that the finding the conference location was difficult and that maps for the building and room site would have been helpful.

When faculty and advisors were asked how knowledgeable they believed their students were about public health, 9 (36%) of 25 respondents indicated that their students were not knowledgeable or had little knowledge, 12 (48%) responded that they were somewhat knowledgeable, and only 4 (16%) responded that they were knowledgeable or very knowledgeable about the field (Average = 2.7) (**Table 17**). Two common themes in the comments provided to this question were that many students don't know about public health, and that many are focused primarily on a career in medicine. When 25 respondents were queried about their knowledge of public health prior to attending the luncheon, 1 (4%) indicated they were not knowledgeable or had little knowledge, 13 (52%) responded that they were somewhat knowledgeable, 10 (40%) responded that they were knowledgeable, and one (4%) indicated that they were very knowledgeable about public health before attending the luncheon (Average = 3.4) (**Table 18**). Twenty four (96%) of 25 faculty and advisors responding to the survey indicated that it was valuable for them to attend a professional development luncheon with public health professionals (Average = 4.5) (**Table 19**). Twenty five (100%) of 25 respondents agreed that the featured luncheon presentations were informative or very informative, and that they increased their understanding of the field of public health (Average = 4.6) (**Table 20**).

A variety of responses were given by 24 faculty and advisors who were asked if they agreed that the featured presentations increased their understanding of the educational pathways that lead to a career in public health (**Table 21**). Five (21%) disagreed with the statement, five (21%) were neutral, and 14 (58%) agreed or strongly agreed with the statement (Average = 3.6). Twenty three of 24 (92%) of faculty and advisors agreed or strongly agreed that the luncheon presentations increased their understanding of workforce shortages in public health (Average = 4.6) (**Table 22**).

The featured presenter at the luncheon, Dr. Joseph McCormick, focused on global health, comparing the statistics in the developing and developed world. Twenty two of 25 (88%) of faculty and advisors responded that his presentation "Global Health at Home and Abroad" increased their understanding of public health (Average = 4.5) (**Table 23**), and that it increased their own interest in global health (Average = 4.3) (**Table 24**). Twenty one of 25 advisors responded that Dr. McCormick's presentation sparked their interest in getting students involved in global health (Average 4.4) (**Table 25**). One hundred percent of 24 individuals responded that they would use what they learned at the luncheon to advise students about public health as a career choice (Average = 4.9) (**Table 26**). Several faculty and advisors shared very positive comments about the luncheon (**Table 27**), and two provided helpful suggestions about future presentations (**Table 28**).



#### 4.3 Demographic Analyses: Faculty- Advisor Breakfast, April 2, 2008 (Tables 29-36)

**Table 29. Gender of Participants**

<b>Gender</b>	<b>Number of Responses</b>
	Breakfast (4/2/08)
Female	26
Male	3
<b>Total</b>	<b>29</b>

**Table 30. Age of Participants**

<b>Age</b>	<b>Number of Responses</b>
	Breakfast (4/2/08)
Under 20	0
20-29	2
30-39	4
40-49	3
50-59	16
60 or older	4
<b>Total</b>	<b>29</b>



**Table 31. Race/ Ethnicity of Participants**

Race/Ethnicity	Number of Responses
	Breakfast (4/2/08)
American Indian or Alaska Native	0
Asian or Asian American	1
Black or African American	2
White	24
Hispanic or Latino	1
Native Hawaiian or Other Pacific Islander	0
<b>Total</b>	<b>28</b>

**Table 32. Type of Institution**

Type of Institution	Number of Responses
	Breakfast (4/2/08)
State Health Department	0
Local Health Department	0
Hospital or Community Health Clinic	0
College or University	26
Law Enforcement/Fire/Emergency Response	0
Community-based Organization	0
Business	1
Other	
CDC: Federal	0
Non-profit organization (APHL)	2
Unspecified	0
<b>Total</b>	<b>28</b>



**Table 33. Health Profession Shortage Area**

Health Profession Shortage Area	Number of Responses
	Breakfast (4/2/08)
Does Not Apply	21
Health Department	2
Community Health Center	1
Migrant Health Center	0
Health Care for the Homeless	0
Public Housing Primary Care	0
Rural Health Clinics	0
National Health Service Center	0
Indian Health Center	0
Federally Qualified Health Center	0
Designated Ambulatory Practice Sites	0
Other (specify)	
Environmental Health	0
Public Health Nursing	0
Federal: CDC	0
Public Health Laboratory	0
Public Health Education	0
<b>Total</b>	<b>24</b>

**Table 34. Length of Time Working for Current Employer**

Length of Time Working for Current Employer (years)	Number of Responses
	Breakfast (4/2/08)
Less than 1	1
1-3	3
4-6	3
7-9	4
10-12	6
13-15	3
16 or more	9
<b>Total</b>	<b>29</b>



**Table 35. Responsibility for Disaster Preparedness or Emergency Response**

Responsibility for Disaster Preparedness or Emergency Response	Number of Responses
	Breakfast (4/2/08)
Yes	1
No	28
Don't Know	0
<b>Total</b>	<b>29</b>

**Table 36. Current Profession**

Current Profession	Number of Responses
	Breakfast (4/2/08)
<b>Health Profession</b>	
Physician	1
Physician Assistant	0
Nurse, Advanced Practice	0
Nurse, RN	1
Nurse, LVN	0
Home Health Aide/Medical Assistant	0
Laboratory Professional	0
Dentist	0
Dental Worker (Hygienist, Assistant)	0
Clinical Laboratory Technician	0
Veterinarian	0
Nutritionist/Dietician	0
Pharmacist	0
Therapist (OT, PT, RT, ST)	0
First Responder (EMT, Fire, Rescue, Hazmat)	0
Psychiatrist	0
Psychologist	0
Mental Health/Substance Abuse Clinician	0
Mental Health/Substance Abuse Counselor	0



Current Profession	Number of Responses
	Breakfast (4/2/08)
<b>Public Health Professionals</b>	0
Biostatistician	0
Bioterrorism Coordinator	0
Community Outreach/Field Worker	0
Environmental engineer (includes technician)	0
Environmental Scientist and Specialist	0
Epidemiologist	0
Health Educator/Trainer	1
Health Information Systems/Data Analyst	0
Health Planner/Researcher/Analyst	0
Hospital Administrator/Management	0
Infection Control/Disease Investigator	1
Microbiologist	0
Public Health Management	0
Social Worker	0
Other Public Health Professional	0
<b>Students</b>	
Allied Health Student	0
Allopathic Medical Student	0
Community Health Worker Student	0
Dentistry Student	0
Medical Resident	0
Mental Health Student	0
Nursing, Advanced Practice, Student	0
Nursing Student	0
Osteopathic Medical Student	0
Pharmacy Student	0
Physician Assistant Student	0
Public Health Student	1
University Student	1
<b>Other</b>	
Public Health Laboratory Scientist	0
Elected Government Official	0
Elected Government Official Staff Member	0



Current Profession	Number of Responses
	Breakfast (4/2/08)
Emergency Management (FEMA, Civil Defense)	0
Law/Judicial/Attorney	0
Law Enforcement	0
Support Staff (Administrative Assistant, Clerk)	1
Public Information Staff (Media Spokesperson/Liaison, PR Staff)	0
Teacher/Faculty	6
Health Professions Advisor	5
Academic Advisor	6
Career Advisor	5
Admissions Officer, School of Public Health	1
Librarian	2
Exhibitor	1
<b>Total</b>	<b>33</b>

### Narrative: Tables 29-36

Faculty and advisors attending the Disease Detective conference in April, 2006 were asked to provide comments and suggestions about future conference activities; several participants requested that we provide additional sessions so that they could learn more about graduate education in public health. Thus, for the 2008 conference, a Faculty-Advisor breakfast was held to meet this expressed need. At the breakfast on April 2nd, conference participants heard from Dean Cheryl Perry about the brand new Austin Regional Campus of the UT SPH, and listened to a panel discussion presented by Ms. Allison Foster, Deputy Executive Director, ASPH and five admission recruiters from accredited schools of public health. Mr. John McElligott, with ASPH, also presented a lecture about undergraduate public health education.

Over 50 individuals attended the breakfast and demographic information was collected from 29 faculty and advisors who attended. **Table 29** shows the gender of these participants: 26 (89.7%) were female and (10.3%) were male. A breakdown of participants by age category is shown in **Table 30**. Six of the 29 individuals were between the ages of 20-39, 19 were ages 40-59 and 4 were 60 years of age or older. The race/ethnicity of 28 respondents included 24 (85.7%) white, 2 (7.1%) Black or African American, 1 (3.6%) Hispanic or Latino, 1 (3.6%) Asian or Asian American individuals (**Table 31**). Twenty six of 28 individuals indicated that they were affiliated with a college or university, 2 represented APHL and 1 was associated with a business (**Table 32**). As shown in **Table 33**, 21 (87.5%) of 24 individuals were not employed in a health profession shortage area, 2 (8.3%) worked at health departments and 1 (4.2%) was employed by a community health center. **Table 34** summarizes the length of time



that 29 breakfast attendees had worked for their current employers. Four (13.8%) had worked for their current employer from less than 1 to 3 years, 7 (24.2%) for 4-9 years, 9 (31%) for 10-15 years, and 9 (31%) for 16 years or more. Only one of 29 individuals who completed the survey had responsibility for disaster preparedness or emergency response (**Table 35**). **Table 36** summarizes the 14 professions of 33 individuals who responded to this survey question. Six university professions were represented: academic advisor (6), teacher/faculty (6), health professions advisor (5), career advisor (5) and librarian (2). One physician and one nurse were represented among health professionals. Public health professionals included one health educator and one infection control/disease investigator. One public health student, one university student, one member of the support staff and one exhibitor also were in attendance.

#### **4.4 Supplemental Evaluations: Faculty-Advisor Breakfast, April 2, 2008 (Tables 37-52)**

**(Responses from faculty and advisors; does not include public health professionals)**

**Table 37. Classification of University Faculty and Advisors Attending the Breakfast**

<b>Classification</b>	<b>Number of Responses</b>
Faculty	6
Academic Advisors	6
Career Advisors	7
Other	3
<b>Total</b>	<b>22</b>



**Table 38. Universities Represented by Faculty and Advisors Attending the Breakfast** (free responses).

<b>University</b>	<b>Number of Responses</b>
University of Texas at Austin	12
University of Texas School of Public Health	2
University of California, Santa Cruz	2
University of North Texas, School of Public Health	1
University of California, Davis	2
San Diego State University	1
Southern Illinois University	1
<b>Total</b>	<b>21</b>

**Table 39. Majors Taught and Advised by University Faculty and Advisors Attending the Breakfast**

<b>Majors Taught and Advised</b>	<b>Number of Responses</b>
<b>University of Texas at Austin</b>	
Biology	6
Clinical Laboratory Science	1
Chemistry	1
Health Professions	6
Natural Sciences	6
Nursing	1
Public Health	3
<b>University of Texas, School of Public Health</b>	
Public Health	3
Biostatistics	1
<b>San Diego State University</b>	
All Majors	1
<b>University of North Texas, School of Public Health</b>	
Environmental Health	1
Infectious Diseases	1



<b>Majors Taught and Advised</b>	<b>Number of Responses</b>
<b>University of California, Santa Cruz</b>	
All Majors	1
Law	1
Natural Sciences	1
Pre-health professions	1
<b>University of California, Davis</b>	
Pre-health professions	1
Public Health	1
<b>University of Southern Illinois</b>	
Biology	1
Infectious Disease	1
Public Health	1

**Table 40. Do you plan to attend the scientific presentations on April 2<sup>rd</sup>?**

<b>Plan to Attend Scientific Presentations?</b>	<b>Number of Responses</b>
Yes	8
No	11
<b>Total</b>	<b>22</b>

**Table 41. If you plan to attend the scientific presentations on April 2nd, which presentations are of most interest to you?**

<b>Presentations of Most Interest</b>	<b>Number of Responses</b>
One World, One Goal: Optimal Health for All	9
Out of Africa: HIV and MDR Epidemic: The Perfect Storm?	8
Women In Medicine – Women in Public Health!	5
Public Health, Austin, Texas!	5
MRSA: the Making of a Superbug!	6
Outbreak I: Epidemiologists- Outbreaks Are Our Business!	5
CSI: Public Health: Tackling Emerging Diseases and More in the Laboratory	2



<b>Presentations of Most Interest</b>	<b>Number of Responses</b>
One World, One Hope: Frontline Response to the Global AIDS Pandemic	3
"Beating Back the Devil" The CDC Epidemic Intelligence Service	7
College Students: What's Going to Get You... and What Can You Do About It?	4
Out of Africa: Meds, Mango Leaves, and Prayers - Teasing Out Health Choices in the Congo	7
Outbreak II: Texas Disease Detectives in Action	2
Ready to Take the Next Step? Graduate Education in Public Health	9
Discover Public Health!	7
Origins of HIV	4
Africa: the Virus Cradle	4

**Table 42. Do you plan to attend the conference exhibits on April 2nd?**

<b>Plan to Attend Conference Exhibits?</b>	<b>Number of Responses</b>
Yes	17
No	3
<b>Total</b>	<b>20</b>

**Table 43. If you plan to attend the conference exhibits on April 2nd, which presentations are of most interest to you?**

<b>Exhibits of Most interest</b>	<b>Number of Responses</b>
Graduate Schools of Public Health	14
Public Health Organizations	7
Information Resources Center	7
Meet a Public Health Professional	5
Pfizer Milestones Exhibit	4



**Table 44. Have you visited the conference website?**

Visit Conference Website?	Number of Responses
Yes	18
No	4
<b>Total</b>	<b>22</b>

**Please give us your comments about the conference website** (free responses).

1. Very informative, easy to use
2. There wasn't a location for the advisor breakfast
3. Visually appealing; current information included.
4. I couldn't find the location of the breakfast on the website; I just assumed it was in the same room as the lunch. Other than that, the site was useful.

**Table 45. How knowledgeable do you think your students are about public health?**

1	2	3	4	5	Average
Not knowledgeable			Very knowledgeable		
2 <sup>1</sup>	5	6	4	2	2.9

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. Many students are pre-med or pre-dent to begin but want to explore other health professions.
2. Med students get introduced to community/public health in 1<sup>st</sup> year.
3. When I tell them about public health, they don't know what I mean.
4. Some know about it, but many do not.
5. Excellent programs on our campus; Dr. Field, Dr. Kneeland.
6. Public health isn't on the radar for many students, although when I discuss this with math students, many are interested.



**Table 46. My knowledge about graduate education in public health prior to attending the Faculty-Advisor breakfast was....**

1	2	3	4	5	Average
Not knowledgeable			Very knowledgeable		
0 <sup>1</sup>	4	7	9	1	3.3

<sup>1</sup>Number of responses

**Please comment about why you responded as you did (free responses).**

1. I usually refer interested students to Diane Kneeland in the CNS career services office.
2. I know about the MPH in general, but not the MS, MHA and all of the specialty areas like epidemiology, etc. Was familiar with dual degree programs because the law school I worked at had a dual degree and my former boss had an MPH and did policy work.
3. I am a current public health graduate student.
4. Part of public health for > 20 years.
5. Having worked in public health for a number of years, and teaching students who are considering graduate work in public health.
6. Attended two previous meetings, but learn more every time.
7. Aware of the School of Nursing's public health programs and UT School of public health certification program.
8. Most of the students I advise are interested in physics or astronomy graduate programs, so public health isn't on my radar that much.



**Table 47. The featured presentation about graduate education in public health was informative and increased my understanding of educational pathways in public health.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	3	6	13	4.5

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. It was a good opportunity to hear from a variety of public health school and understand the diversity in the programs.
2. I learned about SOPHAS system and more specifics on various pathways. I still want to know what the careers look like for the specialty areas.
3. Didn't realize the great diversity among public health graduate school organization, curriculum, entry, etc
4. The multitude of graduate programs; wondering why no undergrad public health degree program.
5. Too brief.

**Table 48. My knowledge about undergraduate education in public health prior to attending the Faculty-Advisor Breakfast was**

1	2	3	4	5	Average
Not knowledgeable				Very knowledgeable	
1 <sup>1</sup>	10	2	7	1	3.0

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. I haven't heard of many programs before.
2. Not aware of undergrad programs.
3. I teach public health bacteriology lab; undergrads are hired at DSHS.
4. I work at the School of Nursing where we teach a public health course.
5. Very few programs in the west.



**Table 49. The featured presentation about undergraduate education in public health at the breakfast was informative and increased my understanding of educational pathways in public health.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	2	6	11	4.5

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. ASPH- learned about accredited programs.
2. Became aware of existence of such degrees; very informative.
3. Great information, useful.
4. New majors in PH, CEPH accreditations!
5. Opened my up to thinking/reflecting on the possibility of introducing more in UT undergraduate core curriculum.
6. Too brief!

**Table 50. I will use what I learned today to help advise my students about educational pathways in public health.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	0	2	16	4.9

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. I feel better prepared to discuss this area now.
2. Many of my human development students have expressed a related interest in the field.
3. PowerPoint slides with website were excellent.
4. Always good to hear latest information. Good choice of discussions.
5. To increase awareness of vital importance of public health to the world.
6. I think that this would be a rewarding field for a number of my students.



**Table 51. Do you have any other comments about today's presentations?  
(free responses)**

Other Comments
<ol style="list-style-type: none"> <li>1. I would like to know what a person with a BS in Public Health can do.</li> <li>2. Interesting to know that undergraduate PH programs have been increased.</li> <li>3. Excellent and informative!</li> <li>4. Really enjoyed it; very helpful; lively and interesting; best presentation yet. There wasn't an opportunity to ask the graduate panel any questions (maybe a more lax timeline).</li> <li>6. Very informative; good PowerPoints; great variety of schools represented; best conference so far!</li> <li>7. No water offered. Appreciate learning the association of schools of public health education as a resource for admissions.</li> <li>8. Matt Goldshore rocks!</li> </ol>

**Table 52. Do you have any suggestions for future presentations?  
(free responses)**

Suggestions
<ol style="list-style-type: none"> <li>1. Great organization and presentation!</li> <li>2. Very useful information!</li> <li>3. This conference is awesome, conceptually and practically!! Thank you for putting it together.</li> <li>4. Perhaps more examples of people who come from "non-traditional" academic fields would help us to advise our students. It's somewhat easy for me to make this pitch to math majors, but physics and astronomy are a bit more difficult (except for perhaps students involved in the radiation physics option). I just recently read an article about the migration of physics researchers into medical physics- perhaps there's a public health connection there?</li> </ol>



## Narrative: Tables 37-52

A supplemental survey was administered to faculty and academic advisors who attended the breakfast, in order to collect additional demographic data and to assess the usefulness of the breakfast presentations. The results of this survey are presented in **Tables 37-52**.

A summary of the classification of breakfast attendees is presented **Table 37**. Six (27.3%) of 22 individuals were faculty members, 6 (27.3%) were academic advisors, 7 (31.8%) were career advisors and 3 (13.6%) classified themselves as “other.” As presented in **Table 38**, 7 universities were represented at the luncheon. Twelve (57%) of 21 respondents were from UT Austin, 2 each were from the University of Texas School of Public Health, the University of California, Santa Cruz, and the University of California, Davis. One each was from the University of North Texas, School of Public Health, San Diego State University and Southern Illinois University. **Table 39** summarizes the wide variety of majors taught and advised by these faculty and advisors, broken down by university.

Eight (42.1%) of 19 faculty and advisors responded that they planned to attend the scientific presentations later that day, but 11 (57.9%) responded that they did not plan to attend (**Table 40**). The presentations of most interest to the faculty and advisors who planned to attend are summarized in **Table 41**. The “top three” presentations of greatest interest to those who planned to attend the scientific presentations were “One World, One Goal: Optimal Health for All”, “Ready to Take the Next Step? Graduate Education in Public Health,” and “Out of Africa: HIV and the MDR Epidemic: The Perfect Storm?”.

**Table 42** summarizes the number of faculty and advisors who planned to attend the conference exhibits the following day. Seventeen (85%) of 20 respondents indicated they planned to attend the exhibits and 3 (15%) did not plan to attend. The exhibits of most interest to these individuals were graduate schools of public health (**Table 43**). Eighteen (81.9%) of 22 respondents indicated that they had visited the conference website (**Table 44**).

Faculty and advisors attending the breakfast were asked how knowledgeable they believed their students were about public health. Seven (36.8%) of 19 respondents indicated that their students were not knowledgeable or had little knowledge, 6 (31.6%) responded that they were somewhat knowledgeable, and six (31.6%) responded that they were knowledgeable or very knowledgeable about the field (Average = 2.9) (**Table 45**). When these individuals were asked about their knowledge of graduate education in public health prior to attending the breakfast 4 (19%) indicated they had little knowledge, 7 (33.3%) responded that they were somewhat knowledgeable, and 10 (47.7%) responded that they were knowledgeable or very knowledgeable about the field (Average = 3.3) (**Table 46**). Following the presentation, 19 (86.4%) of 22 breakfast attendees responded that the featured presentation about graduate education in public health was informative and increased their understanding of educational pathways in public health; 3 (13.6%) of individuals responded that it was somewhat helpful (Average = 4.5) (**Table 47**). When 21 faculty and advisors were queried about their knowledge about undergraduate education in public health prior to attending the Faculty-Advisor breakfast, 11 (52.4%) of 21 respondents indicated they were not knowledgeable or had little knowledge, 2 (9.5%) were somewhat knowledgeable and 8 (38.1%) were knowledgeable



or very knowledgeable (Average = 3.0) **(Table 48)**. Following the featured presentation on undergraduate education, 17 (89.4%) of 19 faculty and advisors agreed or strongly agreed that the breakfast was informative and increased their understanding of educational pathways in public health and 2 (10.6%) somewhat agreed (Average = 4.5) **(Table 49)**. Eighteen (100%) of 18 faculty and advisors agreed or strongly agreed that they would use what they learned at the breakfast to advise their students about educational pathways in public health (Average = 4.9) **(Table 50)**. **Tables 51** and **Table 52** summarize the comments that faculty and advisors shared about the breakfast presentations and the suggestions they offered about future presentations.

#### 4.5 Demographic Analyses: University Students Attending the Scientific Conference and Exhibits, April 2, 2008 (Tables 53-62)

**Table 53. Gender of Participants**

Gender	Number of Responses
Female	351
Male	172
<b>Total</b>	<b>523</b>

**Table 54. Age of Participants**

Age	Number of Responses
Under 20	162
20-29	334
30-39	16
40-49	7
50-59	0
60 or older	0
<b>Total</b>	<b>519</b>



**Table 55. Race/ Ethnicity of Participants**

<b>Race/Ethnicity</b>	<b>Number of Responses</b>
American Indian or Alaska Native	2
Asian or Asian American	186
Black or African American	23
White	227
Hispanic or Latino	79
Native Hawaiian or Other Pacific Islander	3
Other (free responses)	
Persian	3
Unspecified	6
<b>Total</b>	<b>529</b>

**Table 56. Type of Educational Institution**

<b>Educational Institution</b>	<b>Number of Responses</b>
<b>University</b>	
University of Texas at Austin	501
Texas State	4
Tarleton State University	13
Austin Community College	5
University of North Texas Health Science Center	1
George Washington University	1
<b>High School</b>	2
<b>Middle School</b>	9
<b>Total</b>	<b>536</b>



**Table 57. College/School Within Your University**

<b>College/School</b>	<b>Number of Responses</b>
Business	22
Clinical Laboratory Science (Tarleton State)	13
Communication	24
Education	9
Engineering	16
Fine Arts	3
Kinesiology	5
Law	0
Liberal Arts	93
Natural Sciences	323
Nursing	15
Pharmacy	6
Social Work	2
<b>Total</b>	<b>512</b>



**Table 58. Classification of University Students**

<b>Classification</b>	<b>Number of Responses</b>
Freshman	69
Sophomore	69
Junior	89
Senior	125
Undergraduate (not specified)	89
Postbaccalaureate	1
Graduate, University	
Biology	2
Conservation Biology	1
Health Education	2
Microbiology	2
MIS	1
Molecular Biology	2
Unspecified	7
Graduate, School of Public Health	
Behavioral Science	0
Environmental Health Science	1
Epidemiology	2
Global/International Health	3
Health Policy	1
Nutrition	0
Nursing	1
Unspecified	1
Health Professions Students	0
Allied Health Student	0
Allopathic Medical Student	0
Community Health Worker Student	0
Clinical Laboratory Science	7
Dentistry Student	0
Medical Student	0
Mental Health Student	0
Nursing, Advanced Practice Student	4
Nursing Student	0
Osteopathic Medical Student	0
Pharmacy Student	23
Physician Assistant Student	0
Other	0
<b>Total</b>	<b>502</b>



**Table 59. Majors of Undergraduate Students**

<b>Major</b>	<b>Number of Responses</b>
Archaeology	1
Art History	1
Advertising	3
Biochemistry	34
Biology	
Cell and Molecular Biology	7
Ecology, Evolution & Behavior	2
Honors Biology	4
Human Biology	66
Microbiology	51
Neurobiology	2
Teaching	2
Unspecified	35
Subtotal (All Biology)	169
Biostatistics	0
Business	13
Chemistry	8
Clinical Laboratory Science	18
Computer Science	0
Ecology	0
Economics	3
Engineering	
Biomedical	4
Chemistry	1
Electrical	2
Petroleum	1
Mechanical	1
Civil	1
Architectural	1
English	3
French	3
Geography	4
Government	7
History	10
Human Development and Family Science	6
Humanitarian Studies	4
Journalism	3
Kinesiology	5
Mathematics	2
Mathematics - Applied	0
Mathematics - Statistical	0
Nursing	10
Nutritional Science	15
Psychology	12



<b>Major</b>	<b>Number of Responses</b>
Pharmacy	4
Public Health	2
Spanish	8
Social Work	2
Sociology	5
Studio Art	1
French	3
<b>Total</b>	<b>370</b>

**Table 60. Association with the following UT Austin Programs**

<b>Program</b>	<b>Number of Responses</b>
Dean's Scholars Honors Program	26
Plan II Honors Program	24
Turing Scholars	1
UTeach	15
Texas Interdisciplinary Plan	28
Bridging Disciplines Program	10
<b>Total</b>	<b>104</b>



**Table 61. Career Interests of University Students (free responses)**

<b>Career Interest</b>	<b>Number of Responses</b>
CDC	1
Clinical Laboratory Science	14
Computer Engineering	1
Dentistry	8
Forensic Sciences	2
Graduate School (unspecified)	30
Law	7
Medicine	138
Medicine/Public Health	16
Medicine/ PhD	7
Optometry	4
Pharmacy	39
Physician Assistant	4
Public Health	
Environmental Health	2
Epidemiology	10
Infectious Disease	5
International Health	6
Public Health Education	2
Immunology	1
Unspecified	42
Subtotal	68
Research	11
Teaching	4
<b>Total</b>	<b>354</b>

**Table 62. How Did You Learn About This Conference? (check all that apply)**

<b>How Did You Learn About This Conference?</b>	<b>Number of Responses</b>
Advisors	96
Daily Texan Advertisement	11
Banners/Flyers	126
Friends	83
Teachers	192
E-mails	124
Student Organizations	79
Facebook	17



## Narrative: Tables 53-62

It is estimated that > 600 students attended the scientific conference on April 2<sup>nd</sup>, and demographic information was collected from 535 of them. An analysis of these surveys is provided in **Tables 53-62**. **Tables 53** shows the gender of 523 students who responded to this question on the survey. Three hundred fifty (67.1%) of 523 respondents were female and 172 (32.9%) were male. Thus, two times more female students than male students attended the conference. **Table 54** summarizes the ages of 519 students who answered this question: 162 (31.2%) were under 20 years of age, 334 (64.3%) were 20-29 years of age, 16 (3.1%) were ages 30-49 and 7 (1.3%) were ages 40-49. The race/ethnicity of 529 students can be seen in **Table 55**. Two hundred and twenty seven (42.9%) students were white and 303 (57.1%) were from populations defined as minorities. The race/ethnicities of the minority students included: 186 (35.2%) Asian or Asian American, 79 (14.9%) Hispanic or Latino, 23 (4.3%) Black or African American, 3 (0.6%), Native Hawaiian or Other Pacific Islander, 2 (0.4%) American Indian or Alaska Native, and 9 (1.7%) "Other" races.

As shown in **Table 56**, 525 (97.9%) of 536 conference attendees who completed the survey, were affiliated with a college or university, while 0.4% were associated with a high school and 1.7% were associated with a middle school. The latter were middle school students, accompanied by their coach, Mary Beth Kean RN MSN CNS CRRN, from Kelly Lane Middle School, Waco, Texas, who were preparing to participate in a Science Olympiad competition. Five hundred and one (93.4%) of university students attending the scientific conference were from UT Austin; 2.4% were from the Clinical Laboratory Science (CLS) programs at Tarleton State University and 5 (0.9%) attended Austin Community College.. In addition, 4 students from Texas State University attended as did one student each from the University of North Texas Health Science Center and George Washington University.

University students were asked to indicate the College or School with which they were affiliated (**Table 57**). Of 512 students who responded to this question, 323 (63.1%) and 93 (18.2%) were affiliated with the two largest colleges at UT Austin, the College of Natural Sciences and the College of Liberal Arts, respectively. Twenty four (4.7%) were associated with the College of Communication and 22 (4.3%) were members of the McCombs School of Business. Sixteen (3.1%) were affiliated with the College of Engineering, and 15 (2.9%) were associated with the School of Nursing. Less than 10 students each were associated with five other UT Austin colleges or schools, including: 9 (College of Education), 6 (College of Pharmacy), 5 (Department of Kinesiology), 3 (Fine Arts) and 2 (School of Social Work.) Finally, 13 students participating in the conference were from Tarleton State University's CLS program.

**Table 58** summarizes the classification of university students attending the scientific conference. Four hundred forty one (87.8%) of 502 students responding to this survey question were undergraduates and 61 were either university graduate students, students in a graduate school of public health or health professions students. Of note was that 23 of the health professions students attending the conference were from the UT Austin College of Pharmacy. Of the 352 undergraduate students who indicated their classification, 125 (35.5%) were seniors, 89 (25.3%) were juniors and 69 (19.6%) each were either sophomores or freshmen.



**Table 59** summarizes the 30 different majors of 370 students who attended the conference. Biology majors made up the largest group of participants with 169 (45.7%) students. This result was not surprising since the School of Biological Sciences comprises the largest major on campus with 3600 students. Other majors represented by 10 or more students included: Biochemistry (34), Clinical Laboratory Science (18), Nutritional Science (15), Business (13), Psychology (12), and History and Nursing (10 students/each).

UT Austin offers several special programs for students, including Honors Programs in Natural Sciences (The Dean's Scholars Program), Liberal Arts (Plan II Program), and Computer Science (Turing Scholars), a nationally recognized program to train elementary, middle school and secondary math and science teachers (UTeach) and two interdisciplinary programs: Texas Interdisciplinary plan and the Bridging Disciplines Program. A total of 104 students indicated that they were associated with one of these specialized programs (**Table 60**).

**Table 61** summarizes the career interests of 354 student participants. The top five career interests of students were: Medicine (138; 38.98%), Public Health (68; 19.2%); Pharmacy (39; 11%), Graduate School, unspecified (30; 8.5%), and Medicine/Public Health (16; 4.5%). Finally, students were asked to indicate all the ways that they learned about the conference (**Table 62**). Students responded that they learned about the conference most often from Teachers (192), Banners/Flyers (126), E-mails (124), and Advisors (96).

#### 4.6 Supplemental Evaluations: University Students Attending the Scientific Conference and Exhibits, April 2, 2008 (Tables 63-67)

**Table 63. This presentation was informative and increased my understanding about the field of public health.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	1	16	93	99	4.4

<sup>1</sup>Number of responses



**Table 64. Student Comments about Individual Scientific Sessions  
(free responses)**

<b><i>The best part of this session was:</i></b>
<p><b><u>12 PM: One World, One Goal Optimal Health For All</u></b></p> <ol style="list-style-type: none"> <li>1. Some info not really new, but very interesting! He presented a non-traditional view of public health. Also the idea of the health system needing to incorporate both the public health and medical health systems.</li> <li>2. Good speaker and lunch!</li> <li>3. Presented in an interesting and informative way. The obesity flow chart was, although serious, an interesting part due to the way it was presented.</li> <li>4. Obesity talk.</li> <li>5. Great PowerPoint and speaker; very easy to understand and relate</li> <li>6. It was a clear and very important message; the speaker was very passionate about his work.</li> <li>7. The speaker gave a different view on public health</li> <li>8. The map of the U.S. and prevalence of obesity.</li> <li>9. Excellent intro. presentation for thinking about public health. Great obesity timeline</li> <li>10. The contrary view of public health as chronic infections being “more important” than infectious disease.</li> <li>11. Making things simple and highly effective</li> <li>12. Very dynamic, engaging speaker- thanks!</li> <li>13. Great speaker, very enjoyable; the evolution of obesity was surprising.</li> <li>14. The speaker really knew his stuff and was enjoyable.</li> </ol> <p><b><u>1 PM- Public Health, Austin, TX!</u></b></p> <ol style="list-style-type: none"> <li>1. The portion about the impact of pandemic disease.</li> <li>2. The statistical, number of deaths information.</li> <li>3. The specifics regarding local programs</li> <li>4. Personally meeting with David Lurie to discuss interventions in the East Austin area.</li> </ol> <p><b><u>1 PM- Women in Medicine- Women in Public Health!</u></b></p> <ol style="list-style-type: none"> <li>1. Listening to each woman’s path into public health</li> </ol> <p><b><u>1 PM- HIV and the MDR Epidemic: The Perfect Storm?</u></b></p> <ol style="list-style-type: none"> <li>1. Global health stats. I liked the presentations on new and reemerging infectious disease</li> <li>2. Learning about KZN.</li> <li>3. Learning of the vast occurrence in South Africa.</li> <li>4. Investigation of TB and HIV patients.</li> <li>5. Loved it all; speaker was very well informed.</li> <li>6. The whole thing.</li> <li>7. The information presented.</li> <li>8. Learning more about TB in general.</li> <li>9. Overview of coinfection of HIV/TB in emergence.</li> </ol>



10. The topic.
11. The intro. to TB.
12. I knew most of the information already, having a personal interest in the subject. I especially liked the info. linking the HIV and MDR-TB as well as illustrating the link through the study in South Africa.
13. Cannot specify- entire seminar good.
14. Details of the test with XDR-TB and HIV positive patients in South Africa.
15. Very interesting stats info about KZN

## **2 PM- CSI Public Health: Tackling Emerging Diseases and More in the Laboratory**

1. The speaker was very knowledgeable. I liked the first couple of slides explaining specific cases and new technology.
2. Learning about the different careers and opportunities.
3. It has made me interested in public health.
4. All the speakers.
5. Workload of public health education and internship opportunities.
6. I loved the enthusiasm and liveliness of the speakers!
7. How lab tests are done; learning about specific disease examples.
8. Gaining overall understanding of public health.
9. Opened the possibility of a career in public health.
10. The whole thing!

## **2 PM- MRSA: The Making of a Superbug!**

1. Entertaining speaker
2. The humor of the speaker
3. This was a great presentation! Great PowerPoint slides.
4. Clarity of information presented
5. Speaker was very effective and friendly. Presentation was very enjoyable.
6. The speaker!
7. Information and personal experience of the speaker with MRSA.
8. He was very informative about MRSA and added a lot of humor to his presentation.  
Liked that he explained about the overuse or misuse of antibiotics.
9. The hype about MRSA and the jokes.
10. MRSA diseases
11. Excellent speaker; I loved the personal experiences, stories.
12. Kept the audience's attention with occasional humor.
13. New knowledge on antibiotics/myths
14. Pictures!
15. He did really good job making clinical correlations with disease info. He was a very energetic and engaging speaker.
16. Pictures of *S. aureus* (MRSA).
17. Great speaker – entertaining and informative.
18. Information on clinical abuse of antibiotics.
17. Great speaker – entertaining and informative.
18. Information on clinical abuse of antibiotics.



## **2 PM- Outbreak I - Epidemiologists: Outbreaks Are our Business!**

1. Prion disease presentation
2. Unique case; learned how different organizations work together on single case
3. The PowerPoint presentations

## **3 PM- “Beating Back the Devil” The CDC Epidemic Intelligence Service**

1. The wide range of experience offered by the panelists
2. When they shared the list between a pharmaceutical product as a source of an outbreak; it was interesting to find out that there are uniformed EIS officers.
3. Interesting and very informative.
4. I didn't know the EIS program existed!
5. Examples of cases.
6. Anecdotal stories about experience in EIS
7. Details of outbreaks.

## **3 PM- One World, One Hope: Frontline Responses to the Global AIDS Pandemic**

1. Statistics, examples from personal experience
2. Hearing her personal experiences
3. “How to get involved” tips
4. It was informative to hear the non-science aspect of HIV/AIDS and to get a clear understanding of the sociologic burden of the pandemic. I appreciated the informative about opportunities for us to participate in concerning the epidemic
5. Learning about opportunities in the public health field applicable to an undergraduate.

## **4 PM- Out of Africa Meds, Mango Leaves and Prayers - Prayers – Teasing Out Health Choices in the Congo**

1. The pictures were beautiful!
2. Very interesting; good emphasis on the fact that health professionals need to understand the cultural practices and beliefs of where they are working.
3. The pictures made it real.
4. Very informative, clear, personal presentations.
5. The humanitarian element, specifically her direct experience with the people.
6. The aspects of Congo culture.
7. The photos and the narrative.
8. The personal anecdotes and her experiences.
9. A very interesting, clear and personal presentation.
10. The pictures and the stories.

## **4 PM- Outbreak II- Texas Disease Detectives in Action!**

1. Hearing about actual case studies in epidemiology and how departments coordinate
2. Very interesting! It was very cool learning about the epidemiological investigation with viral infections
3. Very interesting inside look on outbreak investigations



#### **4 PM- Ready to take the Next Step: Graduate Education in Public Health**

1. The graduate student's experience in public health
2. Useful links – thanks. Matt's talk was fun! I liked getting the admissions tips – also the funding information.
3. The way it pertained to college students.

#### **5 PM- Keynote Session**

1. McCormick and the exhibit hall.
2. The explanation of the possible sources of different African viruses.
3. The origin of AIDS.
4. I loved Dr. Fisher-Hoch's talk
5. The speakers were great!
6. The amazing experiences of the speakers.
7. The personal stories of the lecturers' experiences was interesting and informative.
8. Great topics; lecturers need more time to present.
9. Personal narratives
10. The origins of AIDS
11. I liked learning about the different Africa viruses
12. Increased my knowledge of the origins of HIV.
13. The maps and graphs greatly helped my understanding for this epidemic that I didn't have before. The stories painted a nice picture.
14. The content of the keynote addresses.
15. Mind opening presentations!
16. The reference to niche modeling and its use in the study of Ebola
17. Ebola and Marburg discussion
18. The wide range of issues covered
19. Dr. Fisher-Hoch's lecture on viruses in Africa, specifically referring to Ebola and Marburg outbreaks.
20. The wonderful lecture on Ebola and other viruses.
21. The speakers' first hand experience with what they were talking about.
22. Very good and interesting.
23. Interesting!
24. The stories.
25. The discussion about the origin of HIV/AIDS.
26. Awesome!
27. Excellent speakers!
28. The subject was great!
29. Subject matter
30. Very impressive. The wide range of issues covered from local to global, needle safety to habitat loss.
31. The virus cradle.
32. Ecological niche modeling = very cool
33. The summary of all the viruses.
34. The images and real life experiences!
35. Very informative speakers
36. I liked the ending.
37. Listening to real stories.
38. Dr. Fisher-Hoch's talk!
39. The speakers' presentations!
40. The speakers were able to connect all the different experiences together.



**Table 65. Number of University Students Attending Multiple Conference Sessions**

	Number of Conference Sessions Attended				
	1	2	3	4	5
Number of Students	135	27	5	2	0

**Table 66. The exhibits/resource center increased my understanding about educational and career opportunities in public health.**

The exhibits/resource center increased my understanding about educational and career opportunities in public health.					Average
1	2	3	4	5	
Strongly disagree			Strongly agree		
0 <sup>1</sup>	5	19	76	39	4.1

<sup>1</sup>Number of responses

**Comments:**

1. The books were a great idea!
2. Great meeting the grad-school representatives
3. There are lots of opportunities for graduate students but not short internships, etc. for undergraduate students.
4. Offer more job opportunities vs schools.
5. The books and the exhibitors are very informative and appreciated
6. I know a lot about many of the schools, but it was nice to learn about CDC's apprentice program.
7. I would like more information about the various things public health workers test for.
8. Opened the possibility of a career in public health
9. The books were a great idea!
10. I met a nursing doctoral student and that was really helpful.



**Table 67. Final Comments by University Students About the Scientific Conference (free responses)**

<p><b><i>If this is your last session, what are your final comments about the conference?</i></b></p>
<ol style="list-style-type: none"> <li>1. The conference was very interesting, I wish I'd gotten here earlier to learn and experience the conference more.</li> <li>2. I wish I had visited all of the speakers!</li> <li>3. It was very professional and provided countless resources.</li> <li>4. Nice experience and remains a possible interest of mine!</li> <li>5. Awesome! Very informative, good marketing and speakers.</li> <li>6. Great opportunity to learn about public health.</li> <li>7. A great opportunity to learn about public health including what it is and how to get into it. It was very well organized and informative.</li> <li>8. I hope to see another event like this.</li> <li>9. Well done! Fantastic resources!</li> <li>10. Very inspiring.</li> <li>11. Please continue this.</li> <li>12. Very interesting- have it again!</li> <li>13. Great! There should be more of these.</li> <li>14. Very well put together; lectures were very informative.</li> <li>15. This is a great idea and I really liked the topics covered.</li> <li>16. I really enjoyed it. It was very informative and eye opening. Great experience!</li> <li>17. The sessions I attended were helpful yet I was looking for a more exciting person researcher like the ones in Hot Zone.</li> <li>18. The title was what brought me in, I just came to volunteer. I enjoyed it and will invite friends to come next year.</li> <li>19. Because Public Health is such a multidisciplinary field, I would have liked to have seen more of social science/policy aspect of it.</li> <li>20. I enjoyed and appreciated the conference; I wish we could do this every year.</li> <li>21. Very well put together; lectures were very informative.</li> <li>22. Very informative, great speakers!</li> <li>23. Great sessions; unfortunately, I can only attend a few of them.</li> <li>24. This was fantastic!</li> <li>25. Awesome! Very informative and inspiring (smiley face)</li> <li>26. Great learning experience.</li> <li>27. Great program.</li> <li>28. Great!</li> <li>29. Loved it!</li> <li>30. Great job!</li> <li>31. Excellent – maybe put signs on the rooms to indicate where lectures are</li> <li>32. I really enjoyed it. It was very informative and eye opening. A great experience!</li> <li>33. Exciting and great idea!</li> <li>34. Please do it again</li> <li>35. Great experience – thank you!</li> <li>36. Very informative</li> <li>37. It was professional and provided countless resources</li> <li>38. It was informative</li> </ol>



39. Very informative =)
40. It was a nice experience and remains a possible interest of mine.
41. Great job on putting this together!
42. I was only able to attend the last event because of class all day
43. Awesome! Very informative, good marketing and speakers
44. Very nicely put together.
45. It was well organized!!!
46. Great opportunity to learn about public health.
47. A success!
48. Thank you!
49. A great opportunity to learn about public health including what it is and how to get into it.
50. It was very well organized and informative.
51. Enjoyable overall.
52. Very informative.
53. This was wonderful! Thank you for the time, effort, and resources used to accomplish this.
54. Welll done, impressive, fantastic resource!
55. Great job Dr. Field!
56. I really enjoyed it!
57. This was my only session. I only wish I could have come earlier! Everything seemed interesting!
58. It was great, very informative, plethora of information and very inspiring!
59. Very interesting, have it again in 4 years :)
60. Very informative and fun!

### **Narrative: Tables 63-67**

Students attending the scientific presentations and visiting the exhibits were asked to evaluate their experience and to provide comments. Of 209 students who evaluated the conference presentations, 92% agreed or strongly agreed that the presentations were informative and increased their understanding about the field of public health (Average = 4.4)(**Table 63**). **Table 64** summarizes the many positive comments that students had about each of the scientific sessions. One hundred thirty five (80%) indicated that they attended one conference session while 36 (20%) attended two or more sessions (**Table 65**). Students responded positively to the conference exhibits and information resources center; one hundred fifteen (83%) indicated that the exhibits/resource center increased their understanding about educational and career opportunities in public health (Average = 4.1) (**Table 66**). Final comments by university students about the conference are presented in **Table 67**.



**4.7 Demographic Analyses: Faculty, Advisors and Others Attending the Scientific Conference and Exhibits, April 2, 2008 (Tables 68-75, Modified CDC Survey Form)**

**Table 68. Gender of Participants**

<b>Gender</b>	<b>Number of Responses</b>
Female	53
Male	29
<b>Total</b>	<b>82</b>

**Table 69. Age of Participants**

<b>Age</b>	<b>Number of Responses</b>
Under 20	1
20-29	22
30-39	24
40-49	20
50-59	12
60 or older	3
<b>Total</b>	<b>82</b>



**Table 70. Race/ Ethnicity of Participants**

<b>Race/Ethnicity</b>	<b>Number of Responses</b>
American Indian or Alaska Native	0
Asian or Asian American	9
Black or African American	2
White	56
Hispanic or Latino	7
Native Hawaiian or Other Pacific Islander	0
Other	
Egyptian	1
Mixed	1
<b>Total</b>	<b>76</b>

**Table 71. Type of Institution**

<b>Type of Institution</b>	<b>Number of Responses</b>
State Health Department	18
Local Health Department	5
High School	4
Hospital or Community Health Clinic	6
College or University	39
Law Enforcement/Fire/Emergency Response	0
Community-based Organization	2
Business	3
Other	
Campus Ministry	1
CDC Contractor: Public Health Apprenticeship Program	1
Department of Defense	1
International Public Health	1
International Volunteer	1
Non profit association	1
Parent Volunteer Coach for Science Olympiad	1
School District	1
Unspecified	1
<b>Total</b>	<b>86</b>



**Table 72. Health Profession Shortage Area**

Health Profession Shortage Area	Number of Responses
Does Not Apply	53
Health Department	17
Community Health Center	3
Migrant Health Center	3
Health Care for the Homeless	2
Public Housing Primary Care	2
Rural Health Clinics	3
National Health Service Center	0
Indian Health Center	1
Federally Qualified Health Center	0
Designated Ambulatory Practice Sites	0
Other (specify)	
Clinical Laboratory	1
Military	1
Quality Management	1
University Health Science Center	1
<b>Total</b>	<b>88</b>

**Table 73. Length of Time Working for Current Employer**

Length of Time Working for Current Employer (years)	Number of Responses
Less than 1	30
1-3	14
4-6	13
7-9	7
10-12	4
13-15	8
16 or more	7
<b>Total</b>	<b>83</b>



**Table 74. Responsibility for Disaster Preparedness or Emergency Response**

<b>Responsibility for Disaster Preparedness or Emergency Response</b>	<b>Number of Responses</b>
Yes	19
No	61
Don't Know	3
<b>Total</b>	<b>83</b>

**Table 75. Current Profession**

<b>Current Profession</b>	<b>Number of Responses</b>
<b>Health Professions</b>	
Physician	4
Physician Assistant	0
Nurse, Advanced Practice	1
Nurse, RN	3
Nurse, LVN	0
Home Health Aide/Medical Assistant	1
Laboratory Professional	3
Dentist	0
Dental Worker (Hygienist, Assistant)	0
Clinical Laboratory Technician	2
Veterinarian	0
Nutritionist/Dietician	0
Pharmacist	3
Therapist (OT, PT, RT, ST)	0
First Responder (EMT, Fire, Rescue, Hazmat)	1
Psychiatrist	0
Psychologist	0
Mental Health/Substance Abuse Clinician	0
Mental Health/Substance Abuse Counselor	0
Other (free responses)	
Nursing Student	2
Medical Student	1
<b>Public Health Professionals</b>	
Social Worker	0
Behavioral Scientist	1
Biostatistician	1
Bioterrorism Coordinator	0
Community Outreach/Field Worker	0
Environmental engineer (includes technician)	0



<b>Public Health Professionals</b>	
Environmental Scientist and Specialist	0
Epidemiologist	3
Health Educator/Trainer	6
Health Information Systems/Data Analyst	0
Health Planner/Researcher/Analyst	1
Hospital Administrator/Management	0
Infection Control/Disease Investigator	1
Microbiologist	3
Public Health Management	0
Public Health Laboratory Scientist/Specialist	2
Other	
Behavioral Scientist	1
Communicable Disease Program Manager	1
Program Specialist	1
Public Health Laboratory Specialist	2
Social Worker	0
<b>Other</b>	
Elected Government Official	0
Emergency Management (FEMA, Civil Defense)	0
Law/Judicial/Attorney	0
Law Enforcement	0
Support Staff (Administrative Assistant, Clerk)	0
Public Information Staff (Media Spokesperson/Liason, PR Staff)	0
Teacher/Faculty	16
Health Professions Advisor	1
Academic Advisor	2
Career Advisor	0
Admissions Officer, School of Public Health	7
Exhibitor, other	3
<b>Other</b> (free responses)	
Army Officer	1
Campus Minister	1
Computer Programmer	1
Dean and Professor, School of Public Health	1
Educator	1
Engineer	1
Fundraising	1
Health Professions Advisor	1
Maintenance Worker	1
Parent Volunteer, Science Olympiad	1
Real Estate	1
USAF	1
University Staff/Research Center Administrator	1
<b>Total</b>	<b>90</b>



## Narrative: Tables 68-75

**Tables 68-75** summarize the demographic characteristics of faculty, advisors, public health professionals and others who attended the scientific conference and exhibits on April 2nd. The gender, age, and race/ethnicity of 82 conference participants who completed the survey is shown in **Table 68**. Fifty three (64.6%) of the respondents were female and 29 (35.3%) were male (**Table 68**). Twenty two (26.8%) of 82 individuals who completed the survey ranged in age from 20-29, 44 (53.6%) were between 30-49 years of age and 15 (18.2%) were ages 50- 60 or older (**Table 69**). The race/ethnicity of 76 survey respondents was as follows: 56 (73.7%) White, 7 (9.2%) Hispanic or Latino, 2 (2.6%) Black or African American, 9 (11.8%) Asian or Asian American, and two individuals who identified themselves as “other” (**Table 70**).

As outlined in **Table 71**, 39 (45.3%) of the conference participants who completed the survey indicated they were affiliated with a college or university, 18 (20.9%) worked at a state health department, and 5 (5.8%) were associated with a local health department. Six (7%) indicated they worked at a hospital or community health clinic, 4 (4.6%) at a high school 3 (3.5%) in business, and 2 (2.3%) at a community based organization. Nine (10.5%) individuals indicated they were associated with an “other” type of institution. Of these, 1 identified as being from CDC, 1 was involved in international public health, another was from campus ministry, and 1 was unspecified. As shown in **Table 72**, 53 (60%) of 88 individuals who responded to the survey indicated they did not work in a health profession shortage area; 31 (35.2%) indicated they did work in a health profession shortage area, and 4 (4.5%) indicated they worked in an “other” area. Included in the “other” category was one person each working in clinical laboratory, in the military, in quality management and in a university health science center.

**Table 73** summarizes the length of time that 83 conference attendees have worked for their current employers. Forty four (53%) of those who completed the survey had worked for their current employer for less than 1 to 3 years, 13 (15.7%) have worked for their employer 4-6 years, 11 (13.25%) for 7-12 years, and 15 (18%) for 13 - 16 years or more. As shown in **Table 74**, 19 (23%) of 83 conference participants were responsible for disaster preparedness or emergency response and 61 (73.5%) were not. Finally, **Table 75** summarizes the 41 different professions of 76 individuals who responded to this question in the survey. Four university professions were represented: teacher/faculty (16), academic advisor (2), health professions advisor (2), and admissions officer (7). Twenty one individuals worked as health professionals and 23 as public health professionals. The latter included 6 health educator/trainers. Fourteen individuals listed their profession as “other.”



#### 4.8 Supplemental Evaluations: Faculty, Advisors and Others Attending the Scientific Conference and Exhibits, April 2, 2008 (Tables 76-81)

**Table 76. This presentation was informative and increased my understanding about the field of public health.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	4	36	62	4.6

<sup>1</sup>Number of responses

**Table 77. Comments about Scientific Sessions:**

<b><i>The best part of this session was:</i></b>
<p><b><u>12 PM: One World, One Goal Optimal Health For All</u></b></p> <ol style="list-style-type: none"> <li>1. I liked the focus on life style behaviors related to public health</li> <li>2. Challenged status quo infectious disease model</li> <li>3. Loved Dr. Sanchez' enthusiasm.</li> <li>4. Good overview of the many facets of PH, especially chronic infections. Loved the importance of a healthy lifestyle as a foundation of public health.</li> <li>5. Great presenter – enthusiastic and knowledgeable.</li> <li>6. Interesting speaker for controlling chronic diseases.</li> <li>7. I learned about obesity as an infectious disease.</li> <li>8. A very interesting presentation!</li> <li>9. I got some great ideas!</li> </ol> <p><b><u>1 PM- Public Health, Austin, TX!</u></b></p> <ol style="list-style-type: none"> <li>1. Although this lacked the glamour of international health presentations, it was an excellent overview of real life public health.</li> <li>2. I loved learning more about specific projects/ programs in Austin</li> </ol> <p><b><u>1 PM- Women in Medicine- Women in Pubic Health!</u></b></p> <ol style="list-style-type: none"> <li>1. I enjoyed hearing about the different areas of public health.</li> <li>2. I was interested to find out how the various women got into public health careers.</li> </ol> <p><b><u>1 PM- HIV and the MDR Epidemic: The Perfect Storm?</u></b></p> <ol style="list-style-type: none"> <li>1. The supporting data/ graphic charts were interesting.</li> <li>2. Presentation was excellent.</li> <li>3. Excellent presentation overall.</li> <li>4. Knowledgeable speaker, well organized, good slides.</li> <li>5. I loved the case studies!</li> <li>6. The global statistics made an impact.</li> </ol>



7. The statistics were sobering.
8. Good overview of ongoing problems
9. The information about XDR-TB.

### **2PM- CSI Public Health: Tackling Emerging Diseases and More in the Laboratory**

1. Very informative speakers- compelling for students.
2. I did not know about the public health laboratory.
3. The speakers' thorough knowledge.

### **2 PM- MRSA: The Making of a Superbug!**

1. MRSA "hype"- good humor but gross pictures.
2. Interesting presentation style- great!
3. Charismatic speaker!
4. Excellent speaker; sense of humor but makes the point.
5. The history of MRSA.
6. Interesting presentation style.
7. I will try to try to explain to my high school students the connection between antibiotics and MRSA (Mercedes High School, Mercedes Texas).

### **2 PM- Outbreak I - Epidemiologists: Outbreaks Are our Business!**

1. Now I understand this kind of CJD.
2. The rodent outbreak presentation was very interesting.
3. All of it was great!
4. I liked the two related speakers/specific case studies.
5. Prion diseases.
6. Both presenters were organized, excellent speakers; superb PowerPoint presentations;
7. I liked the confidence and poise of presenters as well as the level of details.

### **3 PM- College Students: What's Going to Get You... and What Can You Do About It?**

1. I now have a better understanding of what affects my students.
2. Speaker well informed.
3. I learned about HPV vaccine efficacy.

### **3 PM- "Beating Back the Devil" The CDC Epidemic Intelligence Service**

1. The clear passion the speakers have for what they do.
2. Interesting sampling of EIS activities in Texas and elsewhere.
3. The presenters, Su, Taylor and Miller were awesome!
4. I learned a lot about the EIS and careers in epidemiology.
5. Loved it!

### **4 PM- Out of Africa Meds, Mango Leaves and Prayers – Teasing Out Health Choices in the Congo**

1. Very interesting- great slides
2. The speaker and the slides.
3. A lot of the pictures were good.
4. Thank you!
5. Learning how to approach public health problems.
6. This was the best presentation!



7. Loved learning about the speaker's experiences.
8. Personal stories and anecdotes; amazing, intimate experience
9. Really great representative from doctors without borders
10. The pictures were great.
11. The pictures and the stories.
12. Interesting talk about the much changed and changing Congo/Zaire/DR of Congo. I learned some interesting things about health (traditional and modern) in the Congo, including cerebral malaria
13. Presentation of personal experiences in Africa.

#### **4 PM- Outbreak II- Texas Disease Detectives in Action!**

1. The information about outbreaks – that you don't just look for the outbreaks – e.g. low levels of infection in disparate regions with a single source
2. Various opportunities in public health.
3. Real life experiences and discussion.

#### **4 PM- Ready to take the Next Step: Graduate Education in Public Health**

1. The personal information and specific school application information was very helpful; this was redundant to the advisors version.
2. Finding graduate opportunities.

#### **5 PM- Keynote Session**

1. History of HIV
2. The viruses from Africa; clear summary of latest understanding
3. Personal anecdotes on how these amazing speakers entered public health
4. Good review of viruses and HIV and hemorrhagic fevers. Best part was the SIV/HIV molecular and social connections. Hemorrhagic fever is also very interesting!
5. The British lady!
6. Africa, Cradle of Diseases presentation.
7. Both keynote talks were great!



**Table 78. The Exhibits and Activities in the Exhibit Hall increased my understanding about educational and career opportunities in public health.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	1	16	20	33	4.2

<sup>1</sup>Number of responses

**Comments:**

1. Good group of exhibitors,
2. Great exhibits, nice prizes, friendly people.
3. Very low energy, representatives weren't very helpful.
4. Excellent exhibits.

**Table 79. The information I received at this conference will be useful to me in my professional activities.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	1	11	27	61	4.5

<sup>1</sup>Number of responses

**Comments:**

1. Good combination of subjects presented; very current.
2. This makes me more knowledgeable when advising students.
3. I was previously unaware of the extent of the public health field.
4. I always like to hear new information.
5. I will pass this information along to high school students.



**Table 80. Comments about the Value of the Conference (free responses)**

***Please give us your comments about the value of this event to you and your suggestions for future events.***

1. First time I've focused on public health- learned a lot.
2. You guys are great!
3. It highlights the exciting part of public health or epidemiology, and also emphasizes the importance of public health in many other cases.
4. Great way to encourage students to stay in school/ activities for high school students
5. I'm an academic advisor, and I will take the information I've learned back to my students. Continue this great opportunity.
6. Good combination of subjects presented, very current.
7. Brings together a better perspective about a bigger impact through public health.
8. I will pass this information along to my high school students.
9. I can pass on this information to my students considering I teach in an area with a high incidence of TB! (High School Teacher, Mercedes, TX).
10. Makes me knowledgeable when advising students.
11. It's a great opportunity for students and staff.
12. Information about graduate program were very useful.
13. Presenters are fantastic and show so much enthusiasm for the field- it's wonderful for the students!
14. More tech applications to attract tekkies to the public health field.
15. So far I've learned a lot. Nice variety of breakout sessions to attend.
16. I was previously unaware of the extent of the public health field.
17. Interesting.
18. More information about the various things public health workers test for
19. Keep it coming!
20. Invite more schools in Texas or in bordering states.
21. More time for the exhibit hall and speakers.
22. The information about graduate programs at the breakfast was very useful.
23. Exhibit as a program to potential students.
24. Would attend again.
25. Brings a better perspective about a bigger impact through public health.



**Table 81. Final Comments By Faculty, Advisors and Others About the Conference (free responses)**

<i><b>If this is your last session, what are your final comments about the conference?</b></i>
<ol style="list-style-type: none"> <li>1. Very informative about opportunities in public health.</li> <li>2. The keynote session was very informative and organized, better than last time!</li> <li>3. Fantastic for students and faculty</li> <li>4. Excellent, diverse, program of talks and exhibits 5+!</li> <li>5. Enlightening and exciting</li> <li>6. Overall, great. Sessions were very informative</li> <li>7. Excellent, keep up the good work</li> <li>8. Very interesting conference</li> <li>9. Great speakers!</li> <li>10. Yes, All was well organized.</li> <li>11. Very valuable! Keep up the good work!</li> <li>12. Excellent!</li> <li>13. Helpful and Informative</li> <li>14. Excellent!</li> <li>15. Thank you.</li> <li>16. Overall, great. Sessions were very informative.</li> <li>17. The information about graduate programs at the breakfast were very useful.</li> <li>18. Very interesting conference.</li> <li>19. Great opportunity for students to learn about the field.</li> <li>20. Very helpful</li> <li>21. Excellent!</li> <li>22. Very good</li> <li>23. None. You guys are awesome.</li> <li>24. Excellent job!</li> <li>25. Awesome!</li> <li>26. <u>Very very</u> good!</li> </ol>

**Narrative: Tables 76-81**

Faculty, advisors, public health professionals and others who attended the scientific conference were asked to evaluate the scientific presentations and exhibits. Ninety eight (96.1%) of 102 individuals who completed the survey agreed or strongly agreed that the scientific presentations were informative and increased their understanding about the field of public health (Average = 4.5) (**Table 76**). The many positive comments that these participants shared about each of the conference presentations are summarized in **Table 77**. These individuals also evaluated the conference exhibits positively; 75.7% of 33 participants agreed or strongly agreed that the exhibits/resource center increased their understanding about educational and career opportunities in public health (Average = 4.2) (**Table 78**). Eighty eight percent of 100 individuals agreed or strongly agreed that the information they received at the scientific



conference would be useful to them in their professional activities (Average = 4.5) (**Table 79**). Final comments about the value of the conference and the suggestions that these participants provided for future conferences are listed in **Table 80**. Final comments from these individuals about the conference are shown in **Table 81**.

## 4.9 Post - Conference Evaluations

A post-conference evaluation was administered five months after the conference to faculty, academic advisors and career center personnel to determine if attending either the professional development luncheon, the scientific conference, or both impacted the way these individuals advised their students.

### 4.9.1 Post - Conference Evaluations: Faculty and Advisors (Tables 82-111)

**Table 82. Affiliation of Faculty and Advisors Responding to the Post-Conference Evaluation Survey**

Event	Number of Responses
Undergraduate Educational Institution	13
Graduate educational institution	3
Both undergraduate and graduate educational institution	1

**Table 83. Classification of Faculty and Advisors Responding to the Post Conference Evaluation Survey**

Classification	Number of Responses
Faculty member	2
Academic Advisor	8
Health Professions Advisor	5
Career Advisor	3
Program Director	1



**Table 84. Majors Taught and Advised by University Faculty and Advisors Responding to the Post Conference Evaluation Survey**

<b>Majors Taught and Advised</b>	<b>Number of Responses</b>
All majors	6
Business	0
Communications	0
Education	0
Engineering	0
Kinesiology and Health Education	0
Law	1
Natural Sciences	9
Nursing	2
Pharmacy	1
Public Health	2
Public Policy	0
Social Work	0
Other Health professions Most health professions Liberal Arts Interdisciplinary Certificate Program Interdisciplinary Program	5



**Table 85. Major Fields/Areas Taught and Advised by University Faculty and Advisors Responding to the Post Conference Evaluation Survey**

<b>Fields/Areas</b>	<b>Number of Responses</b>
All majors	6
Anatomy and Physiology	0
Biochemistry	1
Biological Sciences	4
Biology – Cell and Molecular	1
Biology – Ecology, Evolution and Behavior	1
Biology – Human Biology	1
Biology – Neurobiology	1
Biology – Teaching	0
Biostatistics	0
Chemistry	2
Child/Family Health	1
Clinical Laboratory Science	0
Computer Science	1
Ecology	0
Engineering	0
Engineering – Biomedical	0
Environmental Health	0
Emerging Infectious Diseases	0
Epidemiology	0
Health Communications	0
Health Education	0



<b>Fields/Areas</b>	<b>Number of Responses</b>
Health Professions	3
Health Promotion and Fitness	0
Human Development and Family Sciences	0
Immunology	0
Immunohematology	0
Infectious Diseases	0
Kinesiology	0
Law	1
Mathematics	4
Mathematics – Applied	3
Mathematics – Statistical	3
Mathematics and Science Teaching	1
Medical Microbiology	0
Microbiology	0
Natural Sciences	1
Neuroscience	0
Non-Science Majors	0
Nursing	0
Nursing – Public Health	1
Nutrition	1
Parasitology	0
Pathophysiology	0
Pharmacy	0



<b>Fields/Areas</b>	<b>Number of Responses</b>
Pre-health Professions	4
Pre-dental	3
Pre-medical	3
Pre-pharmacy	3
Pre-veterinarian	3
Psychology	0
Public health	2
Public health – biostatistics	0
Public Health – Environmental and Occupational Health Sciences	0
Public Health – Epidemiology	0
Public Health – Health Promotion and Behavioral Sciences	0
Public Health – Management, Policy, and Community Health	0
Science Education	0
Social Work	0
Other Physics and astronomy Critical Thinking, Research Methods Physics Nursing education and administration Textiles and Apparel Students in all majors working on certificates	6



**Table 86. Affiliations at UT Austin of Faculty and Advisors Responding to the Post Conference Evaluation Survey**

<b>Program Affiliations</b>	<b>Number of Responses</b>
Bridging Disciplines Programs	4
Dean's Scholars Honor Program	1
Division of Diversity and Community Engagement	0
Division of Statistics and Scientific Computation	0
Emerging Scholars	0
First Year Interest Groups (FIGS)	4
Freshman Research Initiative	1
International Study/Study Abroad	1
Multicultural Academic Initiative	0
Plan II Honors Program	0
Texas Interdisciplinary Plan	2
UTeach	0
Women in Natural Sciences	0
Other None Health Professions Office	2



**Table 87. Events Attended by the Faculty and Advisors Responding to the Post Conference Evaluation Survey**

Event	Number of Responses
Faculty and Advisor Luncheon with Public Health Professionals	16
Faculty and Advisor Breakfast: Graduate Schools of Public Health	11
Faculty and Advisor Breakfast: Undergraduate Public Health Education	8
Scientific Conference	8

**Table 88. Information about public health workforce shortages and global public health was presented at the luncheon. My knowledge about these topics was increased as a result of attending the luncheon.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
1 <sup>1</sup>	1	1	3	10	4.3

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. I have always been reluctant on how exactly to advise when it comes to PH. However after attending this luncheon and actually this whole conference, my knowledge was greatly increased! I now understand why all majors are appropriate for PH and how every discipline can come together to create a greater whole. My advising now includes examples of how this process works. I cannot say enough about how much I learned and I really appreciate the time and effort it took to prepare for this event.
2. I commented at length in my conference evaluation at the time, but do not recall my response.
3. I enjoyed the topics presented and felt like it helped me understand more about public health.
4. I'm not really familiar with this area at all -- the information was interesting, (if a bit scary -- shortages & all!) and I'm sure it will be useful!



5. A complete refocusing in PH due to our broken US health care system...whereas, PH used to consider third world medicine issues: vaccination, clean water, sanitation, diseases like Malaria the first priority, that has changed to deal with the huge underserved US community.
6. Prior to the conference, I had little knowledge of the field of public health, although I have been seeing an increasing number of students interested in the field. All the information conveyed at the conference was very helpful, and I feel much more competent in advising students interested in the field.
7. I have attended these luncheons on other occasions as well. Each time I feel I get important information which I can use in trying to educate the students I advise about a possible career path in public health. And, I get more enthusiastic about encouraging students to attend.
8. Already familiar with the issue.
9. Before this meeting, I did not know much about career paths in public health. I learned a lot from the speakers.
10. I feel that I learned a lot from the presentations.

**Table 89. The presentation "Graduate Schools of Public Health: What Students Need to Know!" increased my understanding of graduate education in public health.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	1	0	3	7	4.5

<sup>1</sup>Number of responses

**Please comment about why you responded as you did (free responses).**

1. Again, I learned about how all the different majors are appropriate.
2. I needed my info on this topic updated.
3. I felt like it was the most useful presentation because it relates directly to my work in advising students.
4. Again, I'm not all that familiar with this area, since it hasn't been an area that my students (math, physics & astronomy) have typically gone into; however, I think that a good number of them might be interested if they were aware of the field. Hearing about how important it is to find a school with the right accreditation was good to know.
5. Opened my eyes to more undergraduate PH programs.
6. It was very helpful to learn about the requirements and how to assist students in becoming competitive for admission. I also enjoyed learning about specific MPH programs.



7. I did not know about the consortium of schools and the emphasis on going to a program accredited by the national professional association. I am better equipped to advise my student know. I also realized that some graduate paths are very scientific and require a hard science background. I always thought it was more program administrative and did not know about the epidemiology track.

**Table 90. I have used the knowledge I gained at the presentation "Graduate Schools of Public Health: What Students Need to Know!" to help advise students.**

1	2	3	4	5	Average
Strongly agree					
0 <sup>1</sup>	0	2	1	8	4.5

<sup>1</sup>Number of responses

**Please comment about why you responded as you did (free responses).**

1. Same as above.
2. I shared everything I got from the conference with my students upon my return.
3. I haven't had much opportunity yet to use the knowledge.
4. Had more information about the ways in which programs may differ from each other and was encouraged to refer students to contact the programs to find out where they can get the education they are looking for.
5. Our math majors may use non-major courses to fulfill their science requirements – I now tell them it will broaden their opportunities if they take major level chemistry, biology and/or physics courses. I also see possibilities for our physics majors in environmental health.
6. I have advised several students about PH degrees and have 1 currently at Johns Hopkins in the MPH program, and another applying for the SDSU MPH program.
7. See above.
8. I haven't specifically advised any students on graduate programs in PH yet, but I will in the future.



**Table 91. The presentation "Undergraduate Public Health Education" increased my understanding of undergraduate education in public health.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	1	0	3	7	4.5

<sup>1</sup>Number of responses

**Please comment about why you responded as you did (free responses).**

1. Same as above.
2. I had little knowledge of this topic going in.
3. Haven't had much opportunity to use the information yet.
4. Yes...although I am aware of undergrad PH degrees (SDSU has had one forever in community health education), I found out more about them and a new focus.
5. See comments above.
6. I didn't even know that undergraduate programs existed before this.

**Table 92. I have used the knowledge I gained at the presentation "Undergraduate Public Health Education" to help advise students.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	1	1	3	6	4.3

<sup>1</sup>Number of responses

**Please comment about why you responded as you did (free responses).**

1. Same as above.
2. This isn't an option on our campus.
3. Haven't had much opportunity to use the information yet.
4. I advise getting knowledge about PH to pre-health students universally.
5. I haven't specifically advised any students on undergraduate programs in PH yet, but I will in the future.



**Table 93. I have used the resources I received at the Faculty-Advisor Luncheon and/or Breakfast to help advise students.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	5	4	6	4.1

<sup>1</sup>Number of faculty and advisors responding

**Please comment about why you responded as you did (free responses).**

1. Same as above.
2. I shared everything I got from the conference with my students upon my return.
3. They've given me some background info to use while advising students, and I've also directed students to various websites, resources, etc. mentioned in the info packet.
4. Handouts, put articles in my email newsletter.
5. So far this year, I have used them to learn more myself. I hope to incorporate them more into advising sessions with students in the near future.
6. Not much information provided for PHN.
7. I sent messages over my listservs about the CDC internship.
8. I have a better knowledge of where to direct students on campus for information and also for internship possibilities.

**Table 94. Did you attend the Scientific Conference on April 2, 2008?**

Attended the Scientific Conference	Number of Responses
Yes	8
No	8
<b>Total</b>	<b>16</b>



**Table 95. Which scientific presentations did you attend?**

<b>Presentations</b>	<b>Number of Responses</b>
One World, One Goal: Optimal Health for All	4
HIV and the MDR Epidemic:The Perfect Storm?	1
Public Health: Austin, Texas!	1
Women in Medicine- Women in Public Health!	6
MRSA: The Making of a Superbug!	2
Outbreak I: Epidemiologists- Outbreaks Are Our Business!	2
CSI: Public Health- Tackling Emerging Diseases and More in the Laboratory	2
One World, One Hope: Frontline Response to the Global AIDS Pandemic	1
"Beating Back the Devil"- The CDC Epidemic Intelligence Service	4
College Students: What's Going to Get You... and What Can You Do About It?	1
Meds, Mango Leaves and Prayers- Teasing Out Health Choices in the Congo	2
Outbreak II: Texas Disease Detectives in Action!	1
Ready to Take the Next Step? Graduate Education in Public Health	3
Keynote Session: Origins of HIV: Where, When, Why and How?	1
Keynote Session: Africa: The Virus Cradle	1



**Table 96. Which scientific presentations were of most value to you and why?**

<b>Value of Scientific Presentations</b>	
1.	I think "The Making of a Superbug" by Todd Bell and "Meds, Mango Leaves and Prayers" by Caitlin Meredith were absolutely outstanding! My whole view of medicine was completely influenced by these two speakers. I really understand more than ever how culture greatly influences medicine and how there really is no answer for every medical crises. Of course this has greatly impacted my advising. I found both of these speakers very personal and dedicated to their respective fields.
2.	I absolutely enjoyed all of them. Dr. Lakey was my favorite, but I don't see him on this list. I think he may have presented earlier in the day. I have used the "bodies in the river" analogy frequently since then to describe medical care versus public health. I was fascinated by the keynote sessions, which helped me return to my students with passion for the field.
3.	I think I attended one or two more than listed above, but can't remember now. It would be helpful if you would send out the survey closer to the time of the conference.
4.	All of the workshops were interesting, however, in my role as adviser, I found the first day to be more helpful.
5.	Presentations in which the speakers talk about their personal career paths are most valuable to me. I didn't have time to see more than one or I would have.

**Table 97. Attending the scientific presentations increased my understanding of the field of public health.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	0	2	6	4.8

<sup>1</sup>Number of responses

**Please comment about why you responded as you did (free responses).**

1. Same as above.
2. I knew the field was varied, but hearing the particulars drove the point home.
3. The presentations were interesting and covered topics I had not previously been exposed to.
4. The speakers talked about their background and what they do on a daily basis.



**Table 98. I have used what I learned at the scientific presentations to advise my students about the field of public health.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	1	2	2	3	3.9

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. Same as above.
2. I write a weekly newsletter to my students and included tidbits of what I learned and the websites, In individual advising I felt much more confident in describing the field and exploring public health as an option for my (mostly) pre-meds--many of whom will not be getting into med school, of course. My enthusiasm for public health since the conference has helped them to see it not as a "second-choice" alternative, but a worthy field of study and a career goal in and of itself.
3. I have not had opportunity to use the information yet.
4. The speakers were all nurses and my students are not in the nursing program.

**Table 99. Did you attend the conference exhibits on April 2, 2008 in the Texas Union Ballroom and outside of the Flawn Academic Center?**

Attendance at Conference Exhibits	Number of Responses
Yes	6
No	8
<b>Total</b>	<b>14</b>



**Table 100. Which exhibits did you visit?**

<b>Exhibits</b>	<b>Number of Responses</b>
Graduate Schools of Public Health	5
Public Health Organizations	4
Meet A Public Health Professional Corner	1
Training Programs (Emerging Infectious Disease Fellowship Program, CDC EIS Program, CDC Apprenticeship Program, UT Austin Public Health Internship Program)	5
Information Resources Center	5
Pfizer Milestones in Public Health Exhibit	2
Mobile Analytical Laboratory System (6th WMD Civil Support Team)	0

**Table 101. Which exhibits were of most value to you and why?**

<b>Exhibits of most value</b>
<ol style="list-style-type: none"><li>1. Graduate schools and Information Resources Center. Obviously gaining this info has impacted my advising.</li><li>2. Of course I picked up the Milestones book and have loaned it to my students. I picked up materials from all the exhibits to share.</li><li>3. NA</li><li>4. First hand accounts and helpful info.</li><li>5. All had helpful information.</li><li>6. As an advisor for undergraduates deciding on graduate study, post-baccalaureate options I could pass along to my students were very valuable.</li></ol>



**Table 102. I have used the resources I received at the Exhibits to help advise students about public health.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	1	1	4	4.5

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. I have handed out pamphlets.
2. They are available in the reception area for casual perusal, and in my office as resources to borrow. I refer to them during individual advising sessions.
3. NA
4. students handouts

**Table 103. Did you receive a book bag and the following books from the Pfizer Public Health and Policy Group?**

Receive a book bag and books?	Number of Responses
Milestones in Public Health	13
Advancing Healthy Populations: The Pfizer Guide to Careers in Public Health	12
Moments in Leadership: Case Studies in Public Health Policy and Practice	12



**Table 104. I have used the information from the Pfizer books to help advise my students.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
1 <sup>1</sup>	3	3	2	4	3.4

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. All this info is available for our students and according to the librarian has been greatly utilized.
2. Students interested in public health (either before they met with me, or after) have had access to these books and found them interesting.
3. I have not yet had the opportunity to use the information.
4. I refer students to these in our library.
5. I gave away some of the books to students and mentioned them in my newsletter.
6. Resources are available to students in the Career Center library.
7. I have used some of the information, but feel I can do much more after educating myself a bit more.
8. Have not read the books yet.
9. I haven't read them yet, but I have given them to students.
10. I expect to use these in the future, but have not yet had the opportunity.

**Table 105. Did you visit the conference website [www.sbs.utexas.edu/diseasedetective](http://www.sbs.utexas.edu/diseasedetective) ?**

Visit the conference website	Number of Responses
Yes	14
No	3
Total	17

**If you visited the website, do you have any comments?**

1. I think it is very informative.
2. It provided a good reminder of the conference.
3. It gets better every year.



4. seemed informative and enticing
5. It was user friendly to me.

**Table 106. Attending this conference increased my understanding about the field of public health and the educational pathways that lead to public health careers.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
1 <sup>1</sup>	1	1	5	8	4.1

<sup>1</sup>Number of responses

**Please comment about why you responded as you did (free responses).**

1. Same as above.
2. I considered myself well informed on the field before attending the conference. Now I truly am.
3. I learned more about what public health is, and I especially liked learning more about graduate education and careers in public health. That is probably most relevant to my students.
4. I felt it was time for me to learn more and I have a new respect for and understanding of the career paths and opportunities available for pre-health students in PH.
5. The information given by the speakers at the luncheon gave me new insight into what public health is all about and what kinds of careers my students (especially those in stats) can explore.
6. Already aware.



**Table 107. I have used what I learned at the conference to advise my students about the field of public health and the educational pathways that lead to public health careers.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	2	3	3	8	4.3

<sup>1</sup>Number of responses

**Please comment about why you responded as you did (free responses)**

1. Same as above.
2. Both by email and in individual advising.
3. I have not yet had the opportunity to use the information as most of my students are not enrolled for summer.
4. It's increased my awareness of the field -- again, it isn't one that comes to mind when you think, "physics & astronomy" majors, but ...
5. Advising -- and have some personal contacts from this meeting.
6. See above.
7. As part of my "Getting Ready for Advanced Degrees" seminar, I made attendance to this conference one of the assignments. Many of my Natural Science students are pre-med, and one of the goals of my GRAD seminar is to explore options. Exposure to other health-related careers through a conference like this which showcases all the amazing ways in which to impact the current state of health helped open their eyes to other paths. I have one student who became so excited about this "new" option she spent the entire spring looking for summer research programs in public health. This conference was also of value to my students in the Liberal Arts. Many want to go into Law, but are not sure what specialty. They were attracted to the public policy areas of public health.
8. Already advise PHN students.



**Table 108. Would you like to have access to or receive conference videotapes**

<b>Access to conference videotapes.</b>	<b>Number of Responses</b>
On the web	8
CDs or DVDs	1
Either	4

**Table 109. We have held one Disease Detective Conference in the Fall and two in the Spring. Do you have a preference for attending the conference in the Spring or the Fall?**

<b>Prefer Spring or Fall Conference</b>	<b>Number of Responses</b>
Fall	2
Spring	6
Either Fall or Spring	7

**Table 110. Do you have any final thoughts about the 2008 "Become A Disease Detective: Discover Public Health Conference?"**

<b>Final Thoughts</b>
<ol style="list-style-type: none"> <li>1. Really one of the best informative conferences I have ever attended.</li> <li>2. I was thrilled to be able to attend.</li> <li>3. It was a great conference this year. I would like more sessions for advisors during the afternoon. The science sessions are great for the students, but I don't understand much of the science.</li> <li>4. It was great -- I try to go whenever I can, and I learn more each year. This is the first time I've attended the Scientific Conference part of the program, and I look forward to attending it in future years.</li> <li>5. It was GREAT!</li> <li>6. Thank you so very much for coordinating this conference. I also would like to thank you for funding my travel and accommodations. I would not have been able to attend without the assistance.</li> <li>7. I think it's such a valuable experience for students, advisors, and faculty. Keep up the good work!</li> </ol>



8. I think this is a wonderful showcase of exciting options for those interested in impacting health and society. It opens up the potential paths from pre-med/pre-pharm to a whole world of really exciting directions.
9. Great Event--impressive and informative.
10. I understand putting together a conference of this magnitude is quite an undertaking but I believe the benefits to educate students about the opportunities in Public Health is well worth it. The interest in Public Health among the students I advise has greatly increased as a result of the conference. I hope there will continue to be future educational conferences of this type. I was amazed at the caliber of participants that were brought together on our campus from all over the nation to share their expertise!

**Table 111. Do you have any suggestions about how to make future conferences more educational and useful to you?**

Suggestions
<ol style="list-style-type: none"> <li>1. I actually thought the whole conference was planned out perfectly. There was time for everything.</li> <li>2. I was scribbling like a mad woman and still missed a lot of what I wanted to write down. I would greatly appreciate outlines of the presentations or Power Point slides so I could just add my notes, rather than try to get everything down. Next best thing--post the presentations on the web, then let us know when they become available.</li> <li>3. When the new application service is in place, it would be great to have a presentation by them.</li> <li>4. No.</li> <li>5. I'd be interested in hearing a panel of MPH students talk about the application process, the program as they experience it, and in what area they plan to work.</li> <li>6. No, except that I should attend more of the conference.</li> <li>7. Have a discussion on career paths in public health with only a bachelor's degree.</li> </ol>

### **Narrative: Tables 82-111**

Thirty three individuals received an email in July 2008, inviting them to complete the Faculty and Advisor Post Conference Evaluation and 18 (54.5%) individuals responded. **Table 82** indicates that 13 were associated with an undergraduate educational institution, 3 with a graduate institution, and one with both types of institutions. **Table 83** summarizes the classification of the 18 respondents who completed the survey. Eight were academic advisors, 5 were health professions advisors, 3 were career advisors, 2 were faculty members, and one was an undergraduate academic program director. These individuals taught and advised students enrolled in multiple majors (**Table 84**). Nine (52.9%) responded that they taught and advised in Natural Sciences, while 6



(35.3%) indicated that they taught and advised for all majors. **Table 85** breaks down major fields and areas taught/ advised by the advisors and faculty who responded to the survey in more detail. The top four major fields/areas taught and advised were 1) all majors (6), biological sciences (4), mathematics (4), and pre-health professions (4). Respondents were associated with several special programs at the University of Texas at Austin, including the Bridging Disciplines Program and Freshman Interest Groups (**Table 86**).

**Table 87** shows the conference activities that respondents attended. Sixteen (100%) attended the faculty and advisor luncheon, 11 (68%) attended the faculty and advisor breakfast, and 8 (50%) attended the presentation about undergraduate public health education. Eight (50%) of 16 faculty and advisors attended the scientific conference. When asked whether their knowledge of public health workforce shortages and global public health was increased as a result of attending the luncheon presentation, 13 of the 16 respondents agreed or strongly agreed, 1 was neutral and 2 disagreed or strongly disagreed (Average = 4.3; **Table 88**). Ten respondents agreed or strongly agreed that the breakfast presentation, “Graduate Schools of Public Health: What Students Need to Know!” increased their understanding of graduate education. One respondent disagreed (Average = 4.5; **Table 89**). When asked whether they had used the information from this presentation to advise students, 9 respondents agreed or strongly agreed and 2 were neutral (Average = 4.5; **Table 90**). Faculty and advisors also were asked to evaluate the breakfast presentation “Undergraduate Public Health Education” (**Table 91**). Ten respondents agreed or strongly agreed that the presentation increased their understanding of undergraduate education in public health, while 1 disagreed (Average = 4.5). Nine faculty and advisors agreed or strongly agreed, one was neutral and one disagreed, that they had used the knowledge they gained about undergraduate education in public health to advise their students (Average = 4.3; **Table 92**). When asked if they have used the resources from the luncheon and/or breakfast to advise students, 10 respondents agreed or strongly agreed and 5 were neutral (Average = 4.1; **Table 93**). **Table 94** shows that 8 of 16 faculty and advisors attended the scientific conference. **Table 95** summarizes the scientific presentations that were attended by these individuals. Every presentation was attended by one or more faculty or advisor. The three most popular presentations were: “Women in Medicine-Women in Public Health!” (6), “One World, One Goal: Optimal Health for All” (4), and “Beating Back the Devil – The CDC Epidemic Intelligence Service” (4). When these participants were asked which presentations were of most value to them, they gave a variety of responses (**Table 96**). All respondents agreed or strongly agreed that the presentations increased their understanding of the field of public health (Average = 4.8; **Table 97**). When asked whether they used the knowledge gained to advise their students, 5 agreed or strongly agreed, 2 were neutral and 1 disagreed (Average = 3.9; **Table 98**). Only 6 of 14 faculty and advisors responding to the survey indicated that they visited the exhibit hall (**Table 99**). Four exhibits were visited most often by these individuals: graduate schools of public health (5), training programs (5), the information resources center (5), and public health organizations (4). Surprisingly, none one of the respondents visited the outdoor exhibit, the Mobile Analytical Laboratory (**Table 100**). When asked which exhibits were of most value to them, a variety of responses were given (**Table 101**). Faculty and advisors were asked whether they used resources received from the exhibits to help advise their students (**Table 102**); 5 agreed or strongly agreed, while 1 respondent was neutral (Average = 4.5). **Table 103** indicates that 12 -13 respondents received copies of the three complimentary Pfizer books and the book bag. Six respondents agreed or strongly agreed that they had used the books to advise students, 3 were neutral and 4



disagreed or strongly disagreed (Average = 3.4; **Table 104**). Four of 10 individuals commented that they had not yet had the opportunity to use the books yet. Fourteen of 17 faculty and advisors responding to the survey had visited visit the conference website (**Table 105**). When asked whether attending the conference increased their understanding of public health, 13 respondents agreed or strongly agreed, 1 was neutral and two disagreed or strongly disagreed (Average = 4.1; **Table 106**). When asked whether they have used information from the conference to advise students about the field of public health or the educational pathways to public health careers, 11 respondents agreed or strongly agreed, 3 were neutral and 2 disagreed or strongly disagreed (Average = 4.3; **Table 107**). Eight of 13 respondents would like to have access to conference presentations as videotapes on the web, one preferred a CD or DVD, and 4 expressed interest in either web access or CDs or DVDs (**Table 108**). Of 15 respondents, 6 would like the conference to take place in the spring, 7 think either spring or fall is suitable, while 2 prefer the fall (**Table 109**). **Table 110** lists final thoughts that faculty and advisors had about attending the conference and **Table 111** summarizes suggestions they offered to make future conferences more educational and useful. Generally, faculty and advisors had very positive comments about the conference. Two individuals had concrete suggestions for future presentations. One suggested that a panel of MPH students talking about their experiences and career plans would be helpful; another indicated that information about career paths available with a bachelor's degree in public health would be useful.

#### 4.9.2 Post - Conference Evaluations: Exhibitors (Tables 112-138)

**Table 112. Affiliation of the Exhibitors Responding to the Post Conference Evaluation Survey**

Affiliation	Number of Responses
School of Public Health or a Graduate Educational Institution	10
UT Austin undergraduate program	2
Professional Public Health Organization	0
Federal Government Program or Agency	1
State Government Program or Agency	3
City/county government program or agency	0
University Libraries	2



**Table 113. Events Attended by the Exhibitors Responding to the Post Conference Evaluation Survey**

<b>Event</b>	<b>Number of Responses</b>
Faculty and Advisor Luncheon with Public Health Professionals	9
Faculty and Advisor Breakfast:: Graduate Schools of Public Health	9
Faculty and Advisor Breakfast:: Undergraduate Public Health Education	5
Scientific Conference	6

**Table 114. Did you serve as a conference speaker?**

<b>Serve as a Conference Speaker?</b>	<b>Number of Responses</b>
Yes	3
No	15

**Table 115. Would you be willing to speak at a future Disease Detective Conference?**

<b>Speak at a future conference</b>	<b>Number of Responses</b>
Yes	5
No	5
Don't know at this time	7



**Table 116. If so, what topic would you like to present?**

<b>Topic</b>
<ol style="list-style-type: none"><li>1. DISCUSS HOW THE EXCITING WORLD OF LABORATORY SCIENCES FEED DATA INTO THE PUBLIC HEALTH PROGRAMS THAT TOUCH THE LIVES OF EVERY CITIZEN EVERY DAY!</li><li>2. Information about the UT SPH Austin Regional Campus.</li><li>3. Careers in PH; Multigenerational workforce;</li><li>4. I think someone from the lab should give a talk. Or maybe someone can arrange tours. There are a lot of places in the lab that are exciting and do interesting work.</li><li>5. Undergraduate public health nursing curriculum.</li><li>6. Biostatistics and Public Health.</li><li>7. Anything that you think might suit your needs as it relates to public health.</li></ol>

**Table 117. Did you use the conference website?**

<b>Use Conference Website?</b>	<b>Number of Responses</b>
Directions	3
Parking information	2
Hotel Accommodations	3
Exhibit Hall Location	6
List of Exhibitors	4
Program	7
Did not use	3
<b>Total</b>	<b>11</b>



**Table 118. Was exhibitor registration convenient for you?**

Convenience of Registration	Number of Responses
Yes	15
No	0
<b>Total</b>	<b>15</b>

**Please comment about why you responded as you did** (free responses).

1. Did not register
2. n/a
3. n/a

**Table 119. Was exhibitor set up convenient for you?**

Convenience of Setup	Number of Responses
Yes	15
No	1
<b>Total</b>	<b>16</b>

**Please comment about why you responded as you did** (free responses).

1. I didn't set up anything. I was only at the conference from 2-4 pm.
2. We did not have a table though reservation had been made; we had to put something together ourselves when we got to the exhibit hall.
3. N/A
4. NA



**Table 120. The exhibits were open in the afternoon from 12 pm - 5 pm and from 6:30 pm - 7:30 pm (after the Keynote Session). I participated in the exhibits from...**

<b>Time I was present at the exhibit</b>	<b>Number of Responses</b>
12 pm - 5pm	18
6:30 pm – 7:30 pm	8

**Table 121. During which hours did you see the most students?**

<b>Hours of Maximum Student Traffic in the Exhibit Hall</b>	<b>Number of Responses</b>
12 pm – 1pm	1
1pm – 2 pm	4
2 pm – 3 pm	4
3 pm – 4 pm	3
4 pm – 5 pm	3
6:30 pm - 7:30 pm	0



**Table 122. We included an evening exhibit time to accommodate students who might not have been able to attend during the afternoon. Do you recommend that we continue the evening exhibit time at the next conference?**

Usefulness of Evening Exhibit Time	Number of Participants Responding
Yes	11
No	1
Unsure	5

**Please comment about why you responded as you did** (free responses).

1. I wasn't there in the evening, but I think you should continue to offer it.
2. STUDENTS WHO SHOW UP THIS "AFTER HOURS" TIME ARE USUALLY QUITE INTERESTED IN PUBLIC HEALTH; THEY'RE USUALLY SOME OF THE BEST STUDENTS TO TALK TO.
3. We were very tired by then but were able to speak to a few students. The evening exhibit time coincided with a keynote presentation which was nice because I was able to listen to the presentation simultaneously
4. There were students who came at this time who specifically said they had needed to work all day or had driven from a distance to participate.
5. It is very convenient for students on campus to attend evening sessions. And those who have a full class schedule should be encouraged to attend the exhibits to get information.
6. I wasn't actually there in the evening, but it makes sense to me to have that availability for students who couldn't attend during the day.
7. It seemed that they were done...perhaps leaving the exhibits open until dinner starts, then letting us close. It got to be a long day for us and for them.
8. All students should be accommodated and I believe this works best for them.

**Table 123. Did the refreshments provided during the exhibit hours meet your needs?**

Were Refreshments Sufficient?	Number of Responses
Yes	11
No	2
I did not visit the refreshment area	5



**Please comment about why you responded as you did** (free responses).

1. FREE FOOD ALWAYS GETS STUDENTS TO SHOW. FOR SOME, WHO COME PRIMARILY FOR THE FOOD, THE INFORMATION ASSOCIATED WITH THE EVENT, WHICH THEY USUALLY PICK UP, GETS THEM TO THINK ABOUT THEIR CAREER CHOICES.
2. The refreshments for exhibitors and speakers were some of the best finger foods I've had at similar conferences. Very good and great variety!
3. Very nice to have it close by so we didn't have to go far and leave exhibit too long.
4. We understood we would be provided lunch and were not.
5. The refreshments were gone when I went to the room. I was not aware of them until a colleague mentioned it.

**Table 124. Students were actively involved in all aspects of the conference. I received good student support in the exhibit hall.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
1 <sup>1</sup>	1	5	3	7	3.8

<sup>1</sup>Number of responses

**Please comment about the student support you received or suggest ways that students could better assist you next time.**

1. I didn't see any students....or notice their involvement in the process. I was only there to answer questions and was only there in a limited capacity.
2. We didn't receive much student support but I am sure they would have been willing to help If they visited booths and asked if we needed anything (water bottles or pens); that would be nice.
3. All student helpers were very pleasant and anxious to help in any way needed.
4. It wasn't the kind of support we needed. They were cheerful and greeted us but they did not know how to help us with getting a table set up.
5. N/A
6. The students directed me to my table and were very friendly.
7. All of the volunteer support was great. Student volunteers assisted us with set up and with breakdown of our exhibit



**Table 125. Exhibiting at the Disease Detective conference was a positive experience for me.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	2	2	12	4.6

<sup>1</sup>Number of exhibitors responding

**Please comment about why you responded as you did** (free responses).

1. It was fun to talk to the students about my job and what I do and about Public Health Careers. I like interacting with students and only have limited opportunities at my current job.
2. SETTING UP IN THE EXHIBIT WITH APHL ESTABLISHED A REAL FOCUS ON PUBLIC HEALTH LABORATORY TRAINING, AS COMPARED TO OTHER PUBLIC HEALTH DISCIPLINES/AREAS; THAT WAS A REAL POSITIVE.
3. Nice to see student enthusiasm for public health.
4. I was able to speak with a number of students who had no idea about public health. I discussed with them what services our state's public health laboratory provides. I was able to put in perspective for them how to treat populations versus individuals. I also described my own personal move from working in a hospital laboratory, providing laboratory testing for acute and chronic care patients, to a public health laboratory, providing laboratory screening procedures for a large Medicaid program which serves a wide population. Having these discussions reminded me and made me very proud of my own accomplishments.
5. I had a good time interacting with the students and answering their questions.
6. We did not have a placard or any other identifying mechanism, so unless I directed students to stop by and talk it didn't happen.
7. I learned more about students' information needs.
8. Good opportunity for students in Texas to learn more about what the University at Albany has to offer
9. Though the set up was not organized, the dialogue with students who came by our table was worth the time.
10. N/A



**Table 126. Exhibiting at the Disease Detective conference was valuable to my organization.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	5	2	9	4.25

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. RECRUITMENT HERE GAVE US NATALIE MILLS- ONE OF YOUR MAY 2008 GRADUATES.
2. Student recruitment.
3. I was able to advise several students about programs that were a good fit for their situation and need that they would not have known about.
4. From reviewing the wonderful student responses, it looks like we might have some future laboratorians coming up in the ranks!
5. I connected with people from the School of Public Health and the UT School of Nursing.
6. Distance is a factor and most students are not likely to go all the way to the Northeast for grad school. Still, some will which made my trip worth doing.
7. Not many of the students that stopped by were interested in nursing.
8. N/A
9. I was unable to recruit any students but enjoyed all other aspects of the conference.
10. This was an excellent outreach opportunity to remind students of the vital role of information resources in public health. It also served as an opportunity to reach the community
11. Public health professionals and remind them that University information resources can also support their work.



**Table 127. I would recommend that other programs and organizations exhibit at the Disease Detective Conference.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	0	6	11	4.6

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. EXCELLENT VENUE; LOTS OF EXHIBITORS; STUDENTS HAVE THE ABILITY TO ACCESS LOTS OF INFO EASILY.
2. Public health promotion - many students do not know what public health is.
3. It is a great way to network and get your message out to people who may not hear about public health very much.
4. I work at the public health lab. Our exhibit was weighted towards newborn screening. I thought that more areas in the lab could be represented more thoroughly.
5. The local health department should have sent public health nurses.
6. N/A

**Table 128. The University of Texas at Austin places a high priority on diversity. The population of students I met at the Disease Detective Conference was ethnically and racially diverse.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	7	5	5	3.9

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. Diversity age, ethnicity and gender.
2. Diversity seen in students who stopped by.



**Table 129. Many students in the College of Natural Sciences would like to pursue a health-related career. The students I met at the Disease Detective Conference were interested in learning more about public health as a career option.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	3	9	6	4.2

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. Many were also pre-med.
2. A lot of them were pre-med. I would have liked to have seen a broader selection of majors. I have an "aquatic biology" degree from UT. All you need is a science degree; more students might be interested in working in a clinical lab rather than at research or in the field.
3. Some were, some were not.
4. Many did not understand the possible scope of a career in public health and were interested to learn about the different areas of public health that can utilize a wide variety of educational backgrounds.

**Table 130. One of my goals in exhibiting at the conference was to recruit students to apply to public health programs or fellowships offered by my organization.**

Goal to recruit for training programs or fellowships?	Number of Responses
Yes	12
No	4
<b>Total</b>	<b>16</b>



**Table 131. If so, the Disease Detective conference was a good venue for presenting my public health programs to students.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	3	5	5	4.2

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. RECRUITMENT HERE GAVE US NATALIE MILLS - ONE OF YOUR MAY 2008 GRADUATES.
2. Most of our programs/fellowships, etc., are offered at the Masters level to post doctoral level so many of the students in the conference would have been pretty far away from this level. They were interested in the potential so there was a lot of opportunity to interact. I met a couple of people who were at that level and were interested.
3. Because we could offer our programs
4. I am only now realizing which, if any, students are a result of this effort.
5. N/A

**Table 132. I have had successful follow-up contacts with students since the Disease Detective conference.**

Follow Up Contacts	Number of Responses
Yes	5
No	6
Unsure	5
<b>Total</b>	<b>16</b>

**Please comment about why you responded as you did** (free responses).

1. Speak to a lot of students and that was many months back, cannot recollect.
2. I have had no requests from students.
3. My students are in nursing
4. N/A
5. Most of the students I met want to stay closer to home.



**Table 133. We have held one Disease Detective Conference in the fall and two in the spring. Do you have a preference for spring or fall?**

Preference for a spring or a fall conference time	Number of Responses
Fall	0
Spring	6
Either fall or spring	9

**Please comment about why you responded as you did** (free responses).

1. It's not up to me if I attend or not. I am at the whim of my employer.
2. February-May
3. March, April
4. Oct, Nov, April, May
5. March and April are great months; the Fall gets a little too busy.

**Table 134. Would you like to receive conference recording on DVD, or have access to video recordings on a website ?**

Conference DVD's or web access to video	Number of Participants Responding
On the web	7
As CDs or DVDs	2
Either	5



**Table 135. The goals of this conference were to educate university students, faculty and advisors about the dynamic field of public health and to encourage students to consider public health careers. From your perspective, was the conference an effective way to meet these goals?**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	2	3	12	4.6

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. Biological sciences received strong support - would like to see more lectures and students from the social sciences as well
2. Because of the responses from students to your survey.
3. I was able to listen to the keynote speakers and remembered that they gave a very specific view of public health. I can still remember one speaker talk about a public health nurse in Africa being whisked away by a helicopter so that she could be treated for whatever horrible virus she contracted. While international work is a part of public health and sometimes the most exciting to talk about, it's just one small part of public health. Additionally, the HIV speaker went a little too far into the minutae of cell biology.



**Table 136. A primary focus of the CDC Office of Workforce and Career Development is to develop the next generation of public health professionals in order to meet public health workforce shortages and current and emerging health promotion and protection priorities. From your perspective, was this conference an effective way to contribute to the development of the future public health workforce?**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	0	2	5	9	4.4

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. VERY WELL ORGANIZED. THEME OF "DISEASE DETECTIVE" IS GREAT! MAYBE THE POPULARITY OF TELEVISION'S CSI SERIES INITIATES THOUGHTS OF "DETECTIVE". "DISEASE DETECTIVE" MAKES THE CONNECTION?!?!
2. Very engaging and made public health "sexy."
3. So students will be inspired to enroll in one of the many public health programs available.

**Table 137. Do you have any final thoughts or comments about the 2008 "Become A Disease Detective: Discover Public Health Conference?"**

Final Thoughts
<ol style="list-style-type: none"> <li>1. Way to go!</li> <li>2. This was a great conference, well planned and executed. This should be repeated in strategic academic venues throughout the country</li> <li>3. Loved the disease detective bag; the most helpful time for me was attending the programs for faculty; I met a lot of great contacts to follow up with for future collaborations here at UT, particularly as we are developing a global health course as one of the UT flags for our nursing students.</li> <li>4. Very successful!</li> <li>5. This was the first time for me to attend as an exhibitor. It was a fantastic venue to talk to students about public health.</li> <li>6. Well organized and well thought out experience for the students. Great job!</li> </ol>



**Table 138. Do you have any suggestions about how to make future Disease Detective conferences more valuable to you?**

Suggestions
<ol style="list-style-type: none"> <li>1. DO AN ENCORE OF THE 2008 SESSION----WITH UPDATES, OF COURSE, ON WORKFORCE SHORTAGES, ON PROGRESS IN TRAINING PROGRAMS, ETC</li> <li>2. More social sciences, public health includes various disciplines</li> <li>3. Have them in other regions of the country in addition to UTexas each year. A great event that would be very beneficial to students outside of Texas. My University would certainly attend other regional events.</li> <li>4. More chances to network with other faculty</li> </ol>

### **Narrative Tables 112 - 138**

Fifty three individuals who served as conference exhibitors received an email in September 2008, inviting them to complete the Exhibitor Post Conference Evaluation, and 18 (34%) responded. **Table 112** indicates that of the 18 respondents, 10 were associated with school of public health or a graduate educational institution, 2 with a UT Austin undergraduate program, 4 with a federal or state government program or agency, and 2 with the university libraries. Nine exhibitors attended the faculty-advisor lunch on April 1 and the faculty-advisor breakfast on April 2. Five attended the presentation on undergraduate public health education, and 6 attended the scientific conference (**Table 113**). Three of the exhibitor respondents also were speakers at the conference (**Table 114**). Five individuals indicated they would like to serve as speakers at the next conference, while 7 were unsure and 5 did not wish to be speakers (**Table 115**). In **Table 116**, individuals commented on the topics they would like to present. Eleven individuals used the website to see the program schedule, find the location of the exhibit hall, check the list of exhibitors, etc. (**Table 117**). All respondents indicated that conference registration was convenient (**Table 118**). In **Table 119**, exhibitors were asked whether setup was convenient, and 15 or 16 responded that it was. Of the 18 respondents, all were present in the exhibit hall from 12-5 pm, and 8 were present from 6:30-7:30 pm (**Table 120**). In **Table 121**, the hours of maximum student traffic are recorded. Eight respondents indicated that maximum traffic occurred between 1-3 pm, while 6 indicated there was maximum traffic between 3-5 pm. Although no one had the most traffic during the evening hour of 6:30 – 7:30, 11 of 17 (65%) respondents thought that the evening exhibit time should continue to be included (**Table 122**). Eleven of 17 (65%) individuals responded that the refreshments provided during the exhibit time met their needs, while 5 (29%) did not visit the refreshment area, and 2 (18%) responded that the refreshments did not meet their needs (**Table 123**). When asked whether they received good support from student volunteers in the exhibit hall, 10 exhibitors agreed or strongly agreed, while 5 were neutral and 2 disagreed or strongly disagreed (**Table 124**;



Average = 3.8). Fourteen individuals agreed or strongly agreed that exhibiting at the conference was a positive experience for them, while 2 were neutral (**Table 125**; Average = 4.6). Eleven individuals agreed or strongly agreed that the conference was valuable to their organization, while five were neutral (**Table 126**; average = 4.3). All respondents agreed or strongly agreed that they would recommend that other programs and organizations exhibit at the Disease Detective Conference (**Table 127**; Average = 4.6). Ten individuals agreed or strongly agreed with the statement that the population of students they met at the conference was ethnically or racially diverse, while 7 respondents were neutral (**Table 128**; Average = 3.9). Fifteen individuals agreed or strongly agreed with the statement that the students they met were interested in learning more about public health as a career option, while 3 respondents were neutral (**Table 129**; Average = 4.2). Twelve of 16 respondents (75%) indicated that their goal at the conference was to recruit students to apply for public health programs or fellowships (**Table 130**). Ten respondents agreed or strongly agreed that the conference was a good venue for presenting their public health program to students, while 3 were neutral (**Table 131**; Average = 4.2). When asked whether they had had successful follow-up contacts with students, 5 (31%) responded in the affirmative, while 6 (37%) said they had not, and 5 (31%) were not sure (**Table 132**). In **Table 133**, 6 (40%) individuals indicated that they would prefer to attend the conference in the spring, while 9 (60%) had no preference. When asked whether they would like to receive conference recordings on DVD, or have access to recordings on a website, 7 individuals (50%) indicated they would prefer to have access to a website, while 5 (38%) indicated they would use either the website or a DVD (**Table 134**). The goals of the 2008 Disease Detective Conference were to educate university students, faculty and advisors about the field of public health and to encourage students to consider public health careers. When asked whether the conference was an effective way to meet these goals, 15 (88.2%) of respondents agreed or strongly agreed, while 2 (11.8%) were neutral (**Table 135**; Average = 4.6). ). A primary focus of the CDC Office of Workforce and Career Development is to develop the next generation of public health professionals in order to meet public health workforce shortages and current and emerging health promotion and protection priorities. Fourteen (87.5%) of individuals agreed or strongly agreed with the statement that the conference was an effective way to contribute to the development of the future public health workforce, while two (12.5%) were neutral (**Table 136**; Average = 4.4). Final comments and suggestions about how to make the next Disease Detective Conference more valuable are summarized in **Tables 137 and 138**.



#### 4.9.3 Post Conference Evaluations: Speakers (Tables 139-159)

**Table 139. Speaker Affiliation**

<b>Affiliation</b>	<b>Number of Responses</b>
Graduate Educational Institution or School of Public Health	3
Federal agency	2
State agency	5
City/county agency	1
Public health organization	2
Other (please specify) Medical Humanitarian Aid Organization	1

**Table 140. Participation in the Following Events**

<b>Event</b>	<b>Number of Responses</b>
Faculty and Advisor Luncheon with Public Health Professionals	9
Faculty and Advisor Breakfast: Graduate Schools of Public Health	3
Faculty and Advisor Breakfast: Undergraduate Public Health Education	1



**Table 141. Speaking at the Disease Detective Conference was a positive experience for me.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
1 <sup>1</sup>	0	0	6	5	4.2

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. I enjoy doing presentations and I was glad to do that for students.
2. It was nice to get back onto the campus, though parking was a nightmare.
3. It is always a pleasure talking with students about opportunities in public health.
4. The 2008 Disease Detective Conference at the University of Texas, Austin was one of the most enjoyable speaking engagements I've experienced to date! It was delightful to be able to share my passion for public health with students who were open and receptive to ideas about their future careers. The conference was incredibly well-organized and offered many opportunities to interact and talk with students individually about their interests, passions, and goals. It was my pleasure to be part of a dynamic and accomplished group of public health professionals providing multiple perspectives, from the local to the global public health arena, with students. The selection of speakers provided students with an understanding of the diverse and expansive career options within the field of public health. The Disease Detective Conference at UT-Austin is a model that other Universities should look to replicate as a means to get more bright, young people interested in Public Health as a career!
5. It was great to meet other public health professionals and to hear about others' work. Also, the enthusiasm of the undergraduate students was impressive.
6. This excellent conference is a great way to be able to interact with undergraduate students while they are still developing their ideas about potential careers. It was particularly impressive to find out how many smart students, aimed at medical school, started to reconsider their options as a result of the way this conference showed them the much wider range of career directions. In particular, those who really wanted to make an impact (and there were plenty of these young people) realized that they could impact more than one patient at a time through the wide range of careers in medicine AND public health. This program is also providing us with students for summer experiences, and post-bac students. The post-bac students are particularly interesting. They are all eventually planning medical school but are not ready to commit themselves. They want a break from directed studies and experience in the real world, doing something that matters. We have three right now, and all three have decided to work in research, complete an MPH, and then go to Medical School. This new trend needs encouragement because it will provide us with medical graduates with a more rounded experience including research and public health skills and the ability to significantly impact health.
7. I did a very short introduction, but it was positive for me to meet others.



**Table 142. Speaking at the Disease Detective Conference was valuable for my organization.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
1 <sup>1</sup>	0	0	4	7	4.3

<sup>1</sup>Number of responses

**Table 143. Would you be willing to present at a future Disease Detective conference?**

Presenting at a Future Disease Detective	Number of Responses
Yes	11
No	0
Unsure	1
<b>Total</b>	<b>12</b>

**Table 144. If so, what topic would you like to present?**

Topic
<ol style="list-style-type: none"> <li>1. Vaccine-Preventable Diseases; How to get into public health; What is Public Health</li> <li>2. Epidemiology and/or outbreaks investigations at the local/regional level.</li> <li>3. I would be happy to speak about Tuberculosis from a Global Perspective or share experiences from past outbreaks of Norovirus (diarrheal illness) I was involved in.</li> <li>4. My most recent work has been in measles epidemics and mass vaccination campaigns.</li> <li>5. MRSA and influenza</li> <li>6. Infectious disease related topics</li> <li>7. International Public Health</li> <li>8. Same health risks in college students</li> <li>9. Smoking prevention</li> </ol>



**Table 145. I used the conference website ([www.sbs.utexas.edu/diseasedetective](http://www.sbs.utexas.edu/diseasedetective)) for:**

Use of website	Number of Participants Responding
Directions	1
Parking information	3
Hotel Accommodations	0
Program	6
Room Location	0
List of Exhibitors	0
I did not use the conference website	2

**Do you have any comments about or suggestions for the conference website?**

1. This question only allows one answer; I also used it for hotel accommodations.
2. It would be nice to have a quick reference schedule online in addition to the PDF one that you have to download.
3. I had such good instructions by email I did not need to access the site.

**Table 146. When I arrived at the conference, it was easy for me to find the locations of my talk.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	1	2	5	4	4

<sup>1</sup>Number of responses

**Please comment about why you responded as you did (free responses).**

1. I was familiar with the location of the event but had to walk several blocks once I found parking. I had to search for 40+ minutes.
2. Yes, but partly because I been there before.
3. It was mainly my fault.



**Table 147. The equipment provided for my presentation met my needs.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	1	0	4	7	4.4

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. It was nice to not to have to worry about setting up equipment for my presentation. It was very easy for me to up load up my file and use it for my presentation.

**Table 148. Several student volunteers assisted with each scientific session by introducing the speakers, handing out bookplates, passing out and collecting demographic and evaluation forms and videotaping. Having students actively participate in this way was positive for me.**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	1	0	5	6	4.3

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. The students were a great help.



**Table 149. Did the refreshments provided during the conference hours meet your needs?**

Refreshments met needs.	Number of Responses
Yes	9
No	1
I did not visit	2
<b>Total</b>	<b>12</b>

**Please comment why you responded as you did.**

1. Not many vegetarian, high fiber options.

**Table 150. A new feature of the conference this year was "Meet a Public Health Professional" in the exhibit hall area. This activity was designed to give students the opportunity to talk one-on-one with public health professionals. Did you participate in this activity?**

Participation in Activity	Number of Responses
Yes	7
No	5
<b>Total</b>	<b>12</b>

**Table 151. If so, can you give us your comments about this activity and/or suggest ways we might better facilitate interaction between students and public health professionals during the conference?**

Comments About Activity
<p>1. I would say have fewer professionals per shift; since many of us know each other, we did tend to speak to ourselves more often. Maybe if each organization represented could also have a booth, if not in the exhibit hall then in another conference room and have maybe 2 people at each booth so students could stop by if interested.</p>



2. Not many students came by during the time I was present.
3. Dedicated break times for this time. The room was large and not too many student were there and it was not really conducive to much interaction
4. Not many students stopped where the public health professionals were standing while I was there. Most students walked past quickly to get to the booths. It may have been easier to connect students with professionals if there was a way to advertise what type of professional was available at any given time (state public health, lab person, health educator, etc). Maybe have signs at the table or move the 'meet the professionals' area somewhere to the side where it is visible but out of the main thoroughfare.
5. I think the activity could have been improved if it did not coincide with the pizza lunch - students were distracted with getting the lunch and then chatting with classmates. I did have the opportunity to talk with students individually after my talk and at other intervals during the conference; perhaps the "meet a health professional" could be better organized to help students identify us (other than the nametag).
6. It was great to be able to take the time to answer questions in depth.

**Table 152. Have you had any follow-up contact with students you met at the conference?**

<b>Follow up contact with students</b>	<b>Number of Responses</b>
Yes	4
No	8
<b>Total</b>	<b>12</b>

**Please comment why you responded as you did.**

1. I have had some e-mail exchanges from one young woman who is only in her 2nd year as an undergrad, but very interested in PH as a career. I have provided her links to training/internship opportunities that she may want to explore in order to get a better sense of working in public health.
2. We had several summer students, as we do each year, and one who is now enrolling with us in an MPH and working on research projects, with the eventual goal of Medical School.
3. I was at a social event and asked them what they thought. She was thinking about graduate school and it did influence her positively towards public health, but she still wasn't sure which way to go.
4. The students talk with our Academic Coordinator



**Table 153. I attended other scientific presentations at the conference.**

I attended other scientific presentations at the conference.	Number of Responses
Yes	10
No	2
<b>Total</b>	<b>12</b>

**Please comment why you responded as you did.**

1. They were all very well done.
2. It was great to be able to learn from and talk with other PH professionals at the conference - clearly, those that were selected share a passion for PH.
3. Very well done lecture regarding XDR TB.

**Table 154. I visited the conference exhibit hall.**

Visit the conference exhibit hall?	Number of Responses
Yes	12
No	0
<b>Total</b>	<b>12</b>

**Please comment why you responded as you did.**

1. The exhibit hall was nice and big, but maybe too big for the keynote speakers. It's a tough call to make.

**Table 155. Would you like to have access to or receive conference videotapes?**

Access to videotapes?	Number of Participants Responding
On the web?	3
As CDs or DVDs?	0
Either?	5



**Table 156. The goals of this conference were to educate university students, faculty and advisors about the dynamic field of public health and to encourage students to consider public health careers. From your perspective, was the conference an effective way to meet these goals?**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	1	0	6	5	4.3

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. Any opportunity that students have to learn about public health in their undergraduate years is a great one. I myself didn't find out about public health until late in my bachelor's program.
2. Mostly I think it met the goals. There was a lot of emphasis on the flashy side of epidemiology (i.e. international travel, exotic diseases, etc). While this is a great way to attract students it does not necessarily reflect the most common positions available. The international flavored tracks had far more attendance than any of the others. This was a bit discouraging for the other presenters. Of course, I think we wanted to hear those international presentations too.

**Table 157. A primary focus of the CDC Office of Workforce and Career Development is to develop the next generation of public health professionals in order to meet public health workforce shortages and current and emerging health promotion and protection priorities. From your perspective, was this conference an effective way to contribute to the development of the future public health workforce?**

1	2	3	4	5	Average
Strongly disagree				Strongly agree	
0 <sup>1</sup>	1	0	6	5	4.3

<sup>1</sup>Number of responses

**Please comment about why you responded as you did** (free responses).

1. The conference did allow for students to explore many career opportunities and to hear first hand about applied public health issues.



2. Again, there was a lot of emphasis on the flashy side of Epidemiology (i.e. international travel, exotic diseases, etc). While this is a great way to attract students it does not necessarily reflect the most common positions available. Perhaps instead of pairing similar topics together, mix an international talk with a local/state/national talk. It would provide a good perspective in one session of how things are done in both settings.
3. This is the best approach I have yet seen, and the most effective

**Table 158. Do you have any final thoughts about the 2008 "Become A Disease Detective: Discover Public Health Conference?"**

Final Thoughts
<ol style="list-style-type: none"> <li>1. Great work on the conference, Leanne and Diane! It's always fun to meet students who are interested in the field and to re-connect with old colleagues.</li> <li>2. So glad you put this together! The students who attend are very fortunate to have this program.</li> <li>3. I would love to be part of it next year!</li> <li>4. Really enjoyed the experience. I wish I would have had time to visit with other faculty/ presenters. Unfortunately, I had to fly in/ fly out the same day.</li> <li>5. None</li> <li>6. Please continue support. I would like to see it expand with a funded post bac training program.</li> </ol>

**Table 159. Do you have any suggestions about how to improve future Disease Detective conferences?**

Suggestions
<ol style="list-style-type: none"> <li>1. While I know the focus has always been on microbiology and infectious disease, there are a lot of different areas of public health that students can get into. I think it might be worth considering including at least one presentation on areas outside of communicable disease.</li> <li>2. Include more non-infectious epidemiology topics too. The disease detectives theme works for chronic diseases as well as infectious diseases. See comments for question 20.</li> </ol>

### **Narrative: Tables 139-159**

Thirty two individuals who served as speakers at the conference received an email in September 2008, inviting them to complete the Speaker Post Conference Evaluation and 12 (37.5%) responded. **Table 139** shows that of 12 respondents, 8 (67%) were from a state agency, a federal agency or a city or county agency, 3 (25%) were from a



graduate educational institution or school of public health, 2 (17%) were from a public health organization, and 1 was from a medical humanitarian aid organization.

**Table 140** shows the conference activities that respondents attended. Nine (100%) attended the faculty and advisor luncheon, 3 (33%) attended the faculty and advisor breakfast, and 1 (11%) attended the presentation about undergraduate public health education. When asked whether speaking at the Disease Detective Conference was a positive experience, 11 of the 12 respondents agreed or strongly agreed, and 1 strongly disagreed (Average = 4.2; **Table 141**). Eleven of twelve respondents agreed or strongly agreed that speaking at the conference was valuable for their organization. One respondent strongly disagreed (Average = 4.3; **Table 142**). When asked whether they would be willing to present at a future Disease Detective Conference, 11 individuals said they would be willing to present while 1 responded that they were unsure (**Table 143**).

**Table 144** lists the topics that nine speakers would be willing to present at a future conference. **Table 145** shows that 6 speakers used the conference website to view the program, 3 used it for parking information and 1 used it to find directions to the conference. Two individuals said they did not use the website. When asked whether it was easy to find the location of their talk, 9 individuals agreed or strongly agreed, 2 were neutral and one disagreed (**Table 146**, Average = 4.0). Eleven respondents agreed or strongly agreed that the equipment provided for the talk met their needs; 1 individual disagreed (**Table 147**, Average = 4.4). Student volunteers assisted in each session by introducing speakers, handing out and collecting demographic and evaluation forms, videotaping, etc. Eleven individuals agreed or strongly agreed that having the students participate in this way was positive for them; 1 individual disagreed (**Table 148**; Average = 4.3). Speakers were asked whether the refreshments provided during the conference hours met their needs. Nine individuals responded that they did meet their needs, 1 responded that they did not, and 2 did not visit the refreshment area (**Table 149**). Seven of 12 respondents indicated that they participated in the activity called “Meet a Public Health Professional “ a new feature of this year’s conference designed to give students the opportunity to talk one-on-one with public health professionals (**Table 150**). In **Table 151**, individuals gave their comments about the activity and suggestions for better facilitating interaction between students and public health professionals during future conferences. **Table 152** indicates that 4 of the 12 respondents had had follow-up contact with students. In **Table 153**, 10 of 12 (83%) respondents indicated that they attended other scientific presentations during the event, and **Table 154** shows that all 12 (100%) visited the exhibit hall. Three speakers expressed interest in having access to conference presentations on the web and five indicated they would like to have access either on the web or as CDs or DVDs (**Table 155**). When asked whether they thought the conference was an effective way to educate students, faculty and advisors about the dynamic field of public health and to encourage students to consider public health careers, 11 individuals agreed or strongly agreed and 1 disagreed (**Table 156**; Average = 4.3). A primary focus of the CDC Office of Workforce and Career Development is to develop the next generation of public health professionals in order to meet public health workforce shortages and current and emerging health promotion and protection priorities. When asked whether this conference was an effective way to contribute to the development of the future public health workforce, 11 individuals agreed or strongly agreed and 1 disagreed (**Table 157**; Average = 4.3). **Table 158** summarizes speakers’ final thoughts about the 2008 Disease Detective Conference, and **Table 159** includes their suggestions for future conferences.



## 5. Comments from Conference Participants

### 5.1 Public Health Professionals and Other Conference Participants

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**Adolfo M. Valadez, M.D., M.P.H., Assistant Commissioner, Prevention and Preparedness Services Division, Texas Department of State Health Services**

"The Disease Detective Conference continues to be an excellent opportunity to collaborate with the University of Texas at Austin. The conference not only provided undergraduate students with an opportunity to learn more about the broad and varied disciplines within public health, but also provided staff from the State health department an opportunity to network with other public health agencies, schools of public health, and like-minded individuals. The conference enhanced our collaborative relationships with the University and further strengthened the opportunities to improve our State's capacity to respond to public health work force needs, public health emergencies, such as pandemic influenza planning, and public health issues in general. Lastly, I personally appreciated the opportunity to play a role in the career decisions of undergraduate students seeking opportunities in public health. Overall, participation in the conference was a positive experience for me, my staff, and the participants!"

This is the only conference that I am aware of in our State that specifically exposes students to the possibilities of careers in public health and provides students an opportunity to network with public health professionals and leaders at the local, regional, state, and national levels. Plus, the conference is educational and fun! I look forward to participating in the next conference."

\*\*\*\*\*

**Susan Penfield, M.D., MPH, Manager of the Infectious Disease Control Unit, Community Preparedness Section, Texas Department of State Health Services**

The UT Disease Detective Conference never fails to inspire interest in public health in students from different areas of study, and the 2008 Conference was the best yet. Many students were having "aha" experiences, realizing that careers in public health cover a really broad spectrum of activities, from laboratory to field outbreak work to epi analysis and more, just in the infectious disease arena. They could find resonance with their own interests in other public health areas too, such as chronic disease, maternal/child health, environmental health, health care policy, and others, which I weaved in along with the principal topic, communicable disease.

A long time friend and physician colleague, Linda Dooley, M.D. and I gave a presentation that included basically "how I got into public health" - a long, interesting, and different path for each of us. The students were very engaged and asked many questions; you could see them figuring out ways that their own experiences and plans could include public health. We need the workforce and people who have the passion, knowing this isn't a way to get rich. I believe that the Disease Detective Conference provides a great opportunity to find those students and introduce them to our field. For others, it reinforces the interest they'd had since 2006. In fact, since these



conferences began, undergraduate students have created and maintained a public health society and bring in speakers to enrich the public health education experience between Disease Detective conferences.

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**Susan Neill, Ph.D., MBA, Director, Laboratory Services Section, Texas Department of State Health Services** “The Become A Disease Detective: Discover Public Health!” conference was outstanding. The conference was extremely well organized, very professional and provided not only the opportunity for formal interactions through presentations, but also provided plenty of time and space for the more informal interactions. The opportunity to have the one-on-one discussions with students and address their specific questions was outstanding. The enthusiasm by both presenters and students was evident throughout the event.

TDSHS laboratory staff were extremely enthusiastic about meeting and sharing their experiences with the students. It seemed to reinvigorate our staff as well as provide an opportunity for students to learn about public health.

We continue to receive inquiries from students wanting to learn more about the laboratory, have a significant number of students interested in an internship in the laboratory, and then wind up with a number of those working in the laboratory. Often, the Disease Detective conference was the student’s first exposure to public health.

This conference has been an outstanding opportunity for public health professionals to share their experiences with students and often with each other as well. It has helped to bring the public health community together and better understand everyone’s role in public health.

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**Richard Taylor, PhD, Manager, Strategic Preparedness Branch, Community Preparedness Section, Texas Department of State Health Services**

Dear Dr. Field

Thank you for the opportunity to speak at the “Become a Disease Detective: Discover Public Health!” conference. As a former Epidemic Intelligence Service Officer, I recognize the value of being able to engage with and share public health experiences with students, faculty and members of the community who have an interest in public health. My background in academia in both undergraduate and graduate teaching and training has taught me the importance of engaging students early in their academic studies to help support and guide them as they make career choices and refine their career paths. This conference provided an excellent forum to discuss the latest public health issues and numerous networking opportunities for students to meet those who have already chosen a career in public health.

I was delighted to see so many interested students, faculty, and community members attended each of the events and who took the opportunity to visit and network with representatives from the various public health agencies. During the conference, I too had the opportunity to network and share personal experiences regarding my career in public health and the EIS program. From the discussions I had with students, many



were very interested in making application to the Epidemic Intelligence Service Program at the Centers for Disease Control and Prevention.

Thanks again for inviting me to speak at such a wonderful event and I look forward to working with you again at future conferences.

\*\*\*\*\*

**Eric Miller, PhD, MSPH; Manager – Epidemiology; Texas Cancer Registry  
Cancer Epidemiology and Surveillance Branch; Texas Department of State  
Health Services**

I think the “Become a Disease Detective: Discover Public Health!” conference is essential for encouraging students to pursue a career in public health. For the Epidemic Intelligence Service (EIS) Program, it is an especially valuable opportunity for us to present the breadth of work conducted by EIS Officers. As an epidemiologist working primarily in chronic disease, I also think it is important for students to realize that EIS is much more than just responding to infectious disease outbreaks and provides invaluable public health field experience for persons with a wide range of interests. I have really enjoyed participating in the conference and feel it truly inspires students to pursue public health careers.

Thank you, Eric

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**Mr. David Lurie, Director, Austin Travis County Health and Human Services  
Department**

Dear Dr Field:

This letter is in support of your continued efforts on behalf the Disease Detective conference held on the Campus of the University of Texas at Austin in April 2008.

The Disease Detective Conference was an excellent workforce development opportunity for staff from the Austin/Travis County Health and Human Service Department. Through staff participation, in attending sessions and developing presentations, the Conference enhances our capacity to serve our customers and provides education opportunities related to disease surveillance and public health preparedness. It also served as an effective occasion to network, collaborate, and reinforce public health partnerships with various entities including, the Texas Department of State Health Services, college public health faculty from around the country, Federal agencies, faculty at the University of Texas and others. Co-sponsorship has enhanced our relationship with other participating organizations and provided an opportunity to supplement our commitment to ongoing development of the public health workforce.

Overall, the professional development of interested students is of great benefit in that they represent our future public health workforce. I strongly support this effort and have enjoyed presenting at past Disease Detective conferences, including the 2008 event.

Sincerely, David Lurie

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**Ms. Eva Perlman, Senior Director of Professional Development, Association of Public Health Laboratories (APHL)**

APHL participation in the "Beome a Disease Detectives" career event has contributed significantly to the development of strategic activities to increase awareness of career opportunities in public health laboratory science as well as building the pipeline to ensure an adequate and prepared public health laboratory workforce. As a direct result of this career event collaboration with UT-Austin, APHL has:

1. Developed a leadership forum addressing elements that contribute to the workforce shortages in public health laboratories. In particular an article was developed describing model practices in succession planning, recruitment and retention.
2. The National Center for Public Health Laboratory Leadership (NCPHLL) assembled a mentee cohort of mid level leaders in APHL member laboratories to help NCPHLL develop a strategic plan to equip emergent leaders with the skills required to take on the leadership and administration of a governmental public health laboratory. A product of this effort is the development of a 10 module laboratory management curriculum based on a Lab Management Curriculum previously development by the APHL Global Health programs for a global audience. It is expected that three modules will be completed within this calendar year (2009), including: Leadership; Strategic Planning; and Public Health 101.
3. APHL collaborated with the Association of Schools of Public Health, and with funding support from the Office of Workforce and Career Development (OWCD) at the Centers for Disease Control and Prevention (CDC), launched a joint effort to solicit proposals from the public health community to develop career events to promotes careers in public health in general, and public health laboratory in particular, as well as establish internships between academia and the practice community, e.g., public health laboratories.
4. APHL also distributed funds to a six states to develop marketing materials and toolkits to help promote careers in public health laboratory.
5. APHL is also a contributing collaborator with the Abbott supported "Labs are Vital" campaign. The website related to this effort has a separate web page with information about careers in public health laboratory science. In addition, APHL sponsored a competition for high school and college students to come up with unique and innovative marketing products that promote careers in public health lab science. The winners received scholarships. The top winner also received a fully paid trip to the APHL 2008 Annual Meeting in St. Louis. The winning projects were showcased on the APHL website.
6. APHL is capturing model practices from state/county and local public health laboratories that depict strategies for promoting careers in public health lab science.
7. APHL is developing a resource center for member laboratories that will include model practices for marketing careers in public health labs, as well as distributing a toolkit for recruitment and retention strategies and succession planning documents.



8. APHL has also developed a series of leadership competencies for five job categories within the public health laboratories to help labs recruit appropriate workforce.

9. APHL has re-established a Workforce Development Committee that is addressing all aspects of the workforce development as well as developing a strategy to help "build a pipeline" that will help assure an adequate public health lab workforce.

10. As a direct result of this program, APHL attracted a UT Austin graduate into the APHL/CDC Emerging Infectious Diseases Fellowship Program.

11. APHL also distributed well over 1,200 copies of the Pfizer sponsored "Guide to Public Health Careers" book to students, faculty and guidance counselors participating in the conference.

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**Ms. Allison Foster, Deputy Executive Director, Association of Schools of Public Health:** "The U.S. is facing a public health workforce crisis. The current public health workforce is inadequate to meet the health needs of the U.S. and global population. ASPH estimates that 250,000 more public health workers will be needed by 2020 which is compounded by the fact that 23% of the current workforce – almost 110,000 workers – are eligible to retire by 2012.

To meet this need, the 40 Council on Education for Public Health (CEPH) accredited schools of public health need to enroll and train more graduate students. The Disease Detective conference allows schools of public health to meet with a large population of students who might not otherwise have considered a career in public health. The continued support of schools of public health, as well as employers, is evidence of the success of this conference."

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**William H. Harvey, Ph.D., Emeritus Professor of Biology, Earlham College; National Association of Advisors for the Health Professions Liaison to the Association of Schools of Public Health**

It was a great pleasure for this undergraduate health advisor to attend the special public health conference, "Become a Disease Detective" held at the University of Texas, Austin on April 1-2nd, 2008. Dr. Leanne H. Field, Distinguished Senior Lecturer in the School of Biological Sciences, along with her colleagues, did a wonderful job of show-casing public health for hundreds of University of Texas undergraduates, faculty and advisors over these two days.

Much has been written recently regarding the explosion of interest in public health careers among undergraduates and to that end over 100 new undergraduate majors, minors, and interdisciplinary studies have been developed in colleges and universities across the nation. There has been, not surprisingly, a concomitant and dramatic increase in interest in graduate school applications in public health among this population of undergraduates.

Many public health educators feel that all undergraduates should have access to education in public health and in 2003, the IOM of the National Academy concluded that keeping the public healthy required "not only a well-educated public health workforce,



but also an educated citizenry” – all undergraduates should be exposed to public health education.

The University of Texas is moving rapidly toward making that happen by helping their undergraduates better understand the complexities and excitement of public health in the 21st Century by conducting these public health conferences. At the same time, there are special challenges in having undergraduate health career advisors understand the myriad of career choices and complex nature of graduate education in public health so that they can better serve and advise undergraduates who are caught up in public health excitement. Unfortunately, few undergraduate advisors feel comfortable advising students in public health as public health careers and education are still opaque and complex for many of these advisors.

To partially address this advising challenge, a number of undergraduate health advisors, with support from the ASPH, were invited to attend the “Become a Disease Detective” meeting in Austin. In Austin, the advisors participated in a variety of activities including a Faculty and Advisory Luncheon with public health professionals. At this luncheon we heard Dr. Joseph B. McCormick, Regional Dean, UT School of Public Health in Brownsville, TX. Dr. McCormick, a world recognized “disease detective” spoke on “Global Health at Home and Abroad”.

The next morning, over an ASPH sponsored breakfast, the advisors heard Allison Foster, Deputy Executive Director, ASPH, speak on “Graduate Schools of Public health- what students need to know”. Allison’s presentation was followed by a most informative talk on “Undergraduate Public Health Education” given by John McElligott of the ASPH. Both talks stimulated much discussion and questions following the presentations. And since both the undergraduate and graduate public health perspectives were given, this session was especially valuable to the advisors.

The balance of the conference was occupied by a Scientific Conference for students, faculty and advisors. Dozens of poster presentations, demonstrations and special exhibits filled an exhibit hall in the Texas Union Ballroom. Hundreds of students were in attendance, along with many faculty. Advisors had the opportunity to engage the exhibitors and presenters with questions and comments. It was clear that the advisors benefited greatly from this Public Health Exhibition.

“Fulfilling societies interest in assuring conditions in which people can be healthy” (IOM REPORT, 1988 is one definition of public health. To meet that challenge requires the input of individuals with a myriad of academic and training backgrounds. The Texas meeting illustrated to advisors that undergraduates from virtually any undergraduate major may find a career niche in public health. In addition, the advisors left the meeting with a new appreciation for the complexities of graduate education in public health where some graduate programs may offer as many as 24 graduate degrees! It can make for daunting advising.

For the last 6 years I have served as the Liaison from the national health careers advisory group, the National Association of Advisors for the Health Professions, NAAHP, to ASPH. It is one of my primary responsibilities to educate NAAHP member advisors about public health education and careers so that they can better advise students who are exploring public health career options.



The “Become a Disease Detective” conference at the University of Texas was a terrific professional development opportunity for the attending advisors. Many reported to me that they have both a much better understanding of the layers of complexity in the organization of public health as well as feeling much more comfortable discussing these complexities with their advisees. Consequently, from the advisor’s perspective, the meeting was a terrific success and enormously helpful. It would have been beneficial to have had a larger advisor attendance. Perhaps this can happen in the future.

All the advisors who attended would like to extend their appreciation to the University of Texas for this opportunity and the ASPH for funding their attendance.

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**Ms. Joy Coleman, Senior Relationship Manager, Gates Millennium Scholars**

Dear Dr. Field,

The *Become a Disease Detective: Discover Public Health* event was a great, educational event for faculty, advisors and students. I’ve been sharing much of the information that I gathered with my colleagues here at GMS headquarters and plan to summarize for our Partners in the very near future. Thanks so much for your hospitality and for allowing me to attend and represent GMS. The event at UT Austin was very relevant to goals we have set around transitioning more undergraduate Scholars into graduate programs.

Best regards,

Joy Coleman

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**Prof. Patrick J. Davis, Ph.D., Senior Associate Dean for Academic Affairs,  
University Distinguished Teaching Professor, College of Pharmacy,  
University of Texas at Austin**

Leanne, I want to personally thank you for all your hard work in organizing a most successful Disease Detective Conference. I encouraged my Emerging Infections Class (PHR 280U) to attend as many sessions as possible, and the comments I received back in class were overwhelmingly positive. They found the information to be timely, relevant, and stimulating. They LOVED the free books, and some are actually using that material in their cases. For me personally, the best part was hearing about the evolution of public health education on this campus, and I went away from the conference with my head spinning with the possibilities of joint degree programs between pharmacy and public health!

Thanks again for all you did, and for providing our students and the larger campus community this outstanding program!

Pat Davis

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**Ms.Nancy Elder, Head Librarian, Life Sciences Library, The University of Texas at Austin**

Host: Information Resources Center

Library participation highlights for students and professionals the key role of valid scientific information in public health education, research and practice. Over 185 students visited the booth to talk with professional librarians about resources available on campus. The exhibit consisted of 125 current books on a wide variety of public health topics ranging from epidemiology to microbiology and health promotion. In addition there were reading list handouts available for students to pick up. Some students expressed surprise that the Library was a conference participant, but on second thought and after a brief discussion, realized that the scientific literature plays a critical role in the availability of accurate, timely information for public health.

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**Ronald B. Harrist, Ph.D., Kay T. Kimball, Ph.D.; Associate Professors, Adjunct Faculty, University of Texas School of Public Health, Austin Regional Campus**

Dear Dr. Field -

We would like to tell you again how favorably impressed we were with the Become a Disease Detective conference last week. The program was first-rate with representatives from many health-related groups across the UT Austin campus and many other institutions around the country.

Your Internship Program at the Texas Department of State Health Services is outstanding and is equipping undergraduates with the skills and enthusiasm to mature into leaders in public health. We enjoyed seeing the many students in red shirts from the UT Austin Society for Public Health Students as they very effectively acted as hosts for this important meeting.

Congratulations on another excellent Disease Detective event and for the many important contributions you are making to public health education.

Sincerely,  
Ronald B. Harrist, Ph.D. Kay T. Kimball, Ph.D.

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**Mr. Jeff Shinn MT(ASCP), Education Coordinator, Austin State Hospital, Clinical Laboratory Science Program**

University of Texas Austin students are extremely fortunate to have events like the Disease Detective symposium available to them. This forum allows students to become familiar with possible careers in public health, as well as learn about current issues in the field. With the proposed personnel shortages, it is imperative to inform students about job opportunities in the public health arena. This conference included several renowned and distinguished presenters. I attended lectures covering topics such as treating cerebral malaria and cholera in the Congo, distributing HIV medications through PEPFAR, and the origins of the HIV virus. All of the presentations were informative, educational and very personal--speakers would bring their first hand experience to the



lecture. I believe symposiums like this are essential to promote careers in public health to university students.

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**Carrie Dillon MT (ASCP), Clinical Laboratory Scientist, Austin State Hospital**

Although I am a health professional in a clinical setting and not directly involved in public health, I found the UT Public Health Conference to be beneficial and extremely interesting. The topics were as equally exciting as the speakers, who I felt were the most qualified and personable speakers I have seen at conferences. The issues were engaging and stirred up interest in health professionals and students alike. "Public Health" is something that affects everyone in every field:

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**Mary Beth Kean RN MSN CNS CRRN; Kelly Lane Middle School, Science Olympiad Disease Detective Coach, Baylor University Medical Center**

Dr Field,

Thank you so much for the opportunity to attend the Disease Detectives conference at the University of Texas at Austin yesterday. You made us feel very welcome given I was leading what had to be the youngest attendees at the conference.

My Science Olympiad/ Disease Detectives middle school girls were so excited about what they learned and felt more confident in their own understanding of the information that I have been working with them on for the past several months. It brought what is often dry material to life for them- they could see the CDC in action. One of the girls in particular is now quite certain that she wants to be an epidemiologist (she is also my star team member) and I will do anything I can to keep the motivation high- she is 12 years old. When we took a break all of the girls opened up their new books and discussed what they had learned and talked about MRSA and XRTB all the way home.

They said they are going to ask their English teacher if they can use the books to complete their school assignments instead of the ones they borrow from the library. It might make for some interesting assignments for the English teacher to read! The girls also loved the WMD van and learned a lot about the type of degree a person needs to get a job like that and how the job relates to public health. We were also able to interview an Assistant Professor from UT school of Nursing Public health track about her career and preparation. This was helpful to expose them to careers for women in science.

We now have 5 girls (and one coach) who will be washing their hands for sure!

Thank you again!

Mary Beth Kean RN MSN CNS CRRN

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## 5.2 Students

### **A SAMPLING OF STUDENT COMMENTS FROM THE 2008 "*BECOME A DISEASE DETECTIVE: DISCOVER PUBLIC HEALTH!*" CONFERENCE, THE UNIVERSITY OF TEXAS AT AUSTIN, APRIL 2, 2008**

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#### **Disease Detective Conference - Lessons Learned!**

The Disease Detective Conference actually taught me a little something about the needs of the world. I have always been aware that the healthcare crises around the world are sometimes ignored, pushed to the bottom of the priorities list, or just plain denied as an issue. However, after hearing Dr. Sanchez speak about how he felt like there could be more done in public health rather than direct patient care, it got me thinking very seriously about my own goals. Yes, I want to be a doctor. Yes, I want to work with patients every day and help as many families and individuals as possible, I would think to myself. How can I be so sure however that this path is exactly the right one for me?

I walked around to every represented graduate school in the conference and continued to think about this more deeply. The more I saw the more the thought intrigued me. "What if I went into public health and actually made it my job to better society's healthcare infrastructure?" I could make more impact.

The Disease Detective Conference basically kick-started my new thoughts about my path in life. I realize that sounds pretty drastic, but I was looking for something like this. I have always had a yearning to help people and I have always found science and medicine fascinating. Going into public health could marry these two passions, and give me the strength to go in the right direction and not choose the wrong career. I will have to give this very much thought, but I am grateful for the opportunity I was given to perhaps expand in a different direction that may in the long run be the best possible one for me.

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I would like to thank all of the sponsors and especially the organizers who worked tirelessly to put on the Disease Detective Conference. It was an interesting and exciting day to say the least. I don't think that most people are aware of the unsung heroes who keep our public health system going. While they don't often get the primetime television shows or blockbuster movies, I learned that public health professionals really are the frontline soldiers in the battle against disease. I must admit that I knew little about this exciting field until the Disease Detective Conference. Throughout the day I met some of the field's brightest minds and was turned on to many opportunities that public health has to offer. Most of all I was surprised to hear over and over again that these public health heroes were in it for the opportunity not just to help one person but thousands, even millions! The thought had never crossed my mind.

I look forward to next year's conference and hope to see it grow even bigger. It was a tremendous resource for any student who could walk in and possibly set about to making the world a healthier, safer place. I doubt many other conferences can offer that kind of opportunity. Disease Detectives opened my eyes to countless, exciting



opportunities in the field of public health. I am grateful for all those who made this event possible.

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Before entering my junior year here at UT, I only saw myself going down one path: medical school. To my surprise, this pathway was much bumpier than expected. Through the conference, I was introduced to public health and it opened my eyes to so many other opportunities. Once again, my future looked bright. Attending the conference was just the boost I needed to get me going. Now I am so excited for my future! I cannot wait to get out there. I know that I can do anything.

The entirety of the conference was so great that I stayed for 5 hours straight! Dr. Sanchez was such a great opening and bringing back a UT Alumni to speak about his path into public health was the best way to end the conference for me. I was so happy to meet and greet with all of the schools of public health. The free books also excited me. Who doesn't love free gifts? And these schools made sure they brought free gifts!

Who knew that the conference could get me so excited! I honestly did not expect much excitement from the conference. I truly had such a great time and thanks to all who helped made it happen, I look forward to my future.

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I can honestly say that the Become a Disease Detective Conference certainly lived up to my expectations. I was excited to hear all the different speakers who took part in the conference and explore the exhibit hall. Most of the sessions I attended had speakers telling us about their experiences and involvement in the global fight against HIV/AIDS in Africa. While I had heard many of the statistics before, the personal experiences that these speakers shared with us were truly eye-opening. We can learn a lot from textbooks, but it is not the same as having real life experts from around the country come and share their vast knowledge and experiences with us. The exhibit hall was a great place for anyone interested in public health. This was a great opportunity for my friends to ask questions and just learn more. The best part of the conference was that we didn't leave empty handed! A lot of free stuff was given away which would not have been possible without the generous funding that was provided for the conference. The Become A Disease Detective Conference was a well-coordinated event and a worthwhile experience! K.P., Junior, B.A. Biology Major

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The disease detective conference started off with a bang. The first speaker opened the conference taking a 180 degree turn from the standard concentration on infectious diseases to talk about public health concentration on chronic diseases such as obesity and the diseases that follow. The conference opened my eyes to the plethora of opportunities available in the public health field. There were talks ranging from the epidemiology of AIDS and HIV to the local problems faced with XDR-TB and MRSA. The booths from various public health schools provided students with ample knowledge in pursuing further education in public health. The USAID representative, Dr. Megan Gerson, provided a personal look at how pursuing a career in public health has shaped her life.

The most memorable thing I heard at the conference was when Dr. Lakey, one of the key note speakers, said: "Being a physician in about helping one person at a time,



working in public health is helping populations at a time." This is one of the things that impacted me the most. The thought of helping many people at once was one of the things that prompted me to pursue a career in public health. Overall the conference pushed me to look into public health. F.M., Junior, April 8, 2008

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The 2008 "Discover Public Health" Fair was an exciting learning experience for me. Before the event, I knew very little about public health. I can honestly say that it has illuminated new and interesting fields of medicine that I am interested in exploring. I attended the opening kickoff session by Eduardo Sanchez, and it was so interesting that it convinced me to attend several other sessions. He brought up many issues with health care and public health that I had not thought about. His lecture helped me to realize the frightening and numerous problems that the world faces in terms of health. He pointed out that our country has amazing medical technology and has made many advances, yet many of the health problems that face us today are due to our unhealthy lifestyles. He then went on to talk about the importance of preventing these problems before treatment becomes impossible. He was very enthusiastic and passionate about these things and I really admire that. I also attended the "Women in Public Health" lecture by Susan Penfield and Linda Dooley. It was very inspiring to hear other women talk about how they chose careers in public health and what it means to them. They were also very enthusiastic and dedicated.

In addition, I attended the "Doctors Without Borders" lecture about the Congo, by Caitlin Meredith. I found this lecture to be the most inspiring and interesting. She talked about aspects of public health in the Congo and challenges they faced, that I had never considered before. She discussed the cultural barriers that they faced while trying to provide health care to people in the Congo. I have always been interested in cultural aspects of health and disease, and this furthered my interest. This lecture has led me to start thinking about how I could incorporate this into my future career. I would like to do something along the lines of delivering health care to foreign countries or underserved areas in our own country. I would also like to study this aspect of medicine further, and I am considering taking a class in which I could learn more about cultural and demographic aspects of health and disease. I am very interested in pursuing these things further and seeing where it takes me in my career. I think that many students are unaware of the exciting opportunities in public health, and this public health fair is a very effective way to make an impact on students. K.S., Junior, Human Biology Major

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I greatly enjoyed the Disease Detective conference. This was my first year attending this event and I was very impressed with the speakers and the different exhibits that were showcased. I was fortunate to attend three lectures and felt that I gained valuable knowledge from each speaker. The speakers were very engaging and I was able to gain a better understanding of the different aspects of public health that I was unaware of. As well, the exhibits allowed me to talk with public health school from different parts of the nation. This showed me the impact of public health institutions for different communities such as for border towns and for rural areas. Each representative was very attentive to my questions and really persuaded me to look into public health as a career choice. As if the event could not be better there were free items. I was able to get two free books and I can not wait to read them. In my opinion, and in speaking with my peers, this is an event that was a great success and I can't wait for the next year's exhibit. S.D.T., Junior-Microbiology Major



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I was not able to enjoy the last Disease Detective conference as a spectator because I volunteered through the entire event. But this year, I made sure to attend lectures, arrive early to receive a free book (and brought a few friends along so I could read their free books as well!), and visit with all of the schools and organizations that came just to talk with students. The Disease Detective Conference opened my eyes to the many opportunities available in the field of Public Health. Before, I didn't know exactly what public health entailed, but now I am feel I have a much better understanding of what it is, why it is so important, and I am now looking into a possible career in the field.

The conference also served as a means to arm us with very useful information in a world that is teeming with infectious agents-drug resistant and susceptible. I brought several of my non-science major friends to the conference so they would understand why it is that I'm a bit of a "germophobe" and I am constantly getting on to them about being more conscious of their health and the health of those around them. I thoroughly enjoyed the event, and would like to personally thank you for all of the hard work and time you put in to making it a success. It was an extremely positive experience. Once again, thank you for putting on such an amazing conference! L.J., Senior, Human Biology/Pre-Med Major

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The Disease Detectives conference was a fun, educational, exciting, and worthwhile experience for me. I was almost overwhelmed by the number of people attending the very first session, and when I came back after a class, there were still a great number of people around. I was able to attend three of the speakers' lectures and visit the exhibition hall. I had a good time listening to the speakers talk about their subject areas and what they were passionate about. My favorite was about MRSA with Dr. Bell. He was very funny and likeable. He was able to relay information in a way that even the ordinary person off the street could understand (although his pictures of half-necrotized human flesh was kind of nauseating). It was very interesting and he was just such a fun person to listen to. I was shocked by how many people working in hospitals did not wash their hands!

It was also wonderful to receive free books. It was a great way to get people excited about learning about the surrounding pathogens that can affect us and the diseases that have caused epidemics in the past. I felt like I had already learned a great deal in the class, and seeing it appear in real life with so many people involved was very exciting. Although I did not have enough time to visit all the booths, I got a chance to look at the posters informing us about different disease and pathologies. Everyone looked very friendly and ready answer any questions.

Overall, the Disease Detectives conference was a great success. It got me very excited and honestly, proud to be involved somehow just by taking the class and actually feeling like I understood (almost) everything that was being presented to me! It was a great chance for everyone - students, faculty, and family members - to get involved and realized how much we are intertwined with public health.

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I greatly enjoyed the Disease Detective conference. This was my first year attending this event and was very impressed with the speakers and the different exhibits that were showcased. I was fortunate to attend three lectures and felt that I gained valuable



knowledge from each speaker. The speakers were very engaging and I was able to gain a better understanding of the different aspects of public health that I was unaware of. As well, the exhibits allowed me to talk with public health school from different parts of the nation. This showed me the impact of public health institutions for different communities such as for border towns and for rural areas. Each representative was very attentive to my questions and really persuaded me to look into public health as a career choice. As if the event could not be better there were free items. I was able to get two free books and I can not wait to read them. In my opinion and in speaking with my peers this is an event that was a great success and I can't wait for the next year's exhibit.

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The Disease Detective Conference was highly informative and greatly engaging. I attended a lecture every hour and found that each one gave a great amount of information on its topic. The compilation of speakers gave a wide range of different resources as well. I enjoyed how different speakers gave information not only on emerging infectious disease in the world today, but also on how to keep healthy and prevent normal everyday causes for disease such as obesity. I believe both topics are very important in maintaining a high health standard in the US and across the world.

I am a pre-med student and am working towards applying to medical school and getting my MD degree. Before this year, I had not given much consideration to the field of public health. While attending the conference I was able to see how preventative treatment of disease and health problems in the world can keep the population one step ahead of disease, and that it is a whole different view about how to help and treat others. Even though I still want to get a medical degree, after attending the conference I am interested in applying that degree to not only patient care but also towards the field of public health. The conference has motivated me to do more research in public health and I am now greatly considering it as a part of my future career. J.N., 3<sup>rd</sup> Year, Senior, Microbiology Major

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I am very glad that I decided to attend this year's "Become a Disease Detective" conference. It was my first time going and to be honest, I wasn't expecting to enjoy the event as much as I did. I really enjoyed the speakers that I listened to; they were dynamic and engaging and kept my attention. I learned a lot from listening to what they said and fully appreciate them for taking the time out of their schedules to come and speak at this event.

I was also surprised at the amount of people that would be involved in this event. The amount of doctors, professionals and graduate school that attended really impressed me and provided me with ample opportunities to network. The only downside is that I didn't tell my friends that I was going to this event because I know a lot of them would have really benefitted from attending too. Even though I am currently interested in pursuing a career in pharmacy, this event has really sparked my interest in public health and it is a field that I am definitely going to consider being a part of in the future.

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Become a Disease Detective: Discover Public Health! was definitely one of the greatest things that has happened to me this year. I loved the atmosphere! Everyone around me was all smiles because we all were having just an amazing time! I had access to all those resources in the exhibit room and I was very glad that there were people there to



talk to me about a career in public health. It has opened new doors for me and I now have a very interesting career prospective! As if that wasn't enough, Pfizer gave us bags and free books on public health, and the representatives at the table were very welcoming and easy to talk to. My favorite part, I would have to say, would be the free books! The selection was absolutely wonderful and I wished I could have taken them all home with me. I am very thankful that we had funding for this event to even make this possible. In order to receive the books, you had to attend a talk and get a coupon, which of course wasn't a problem at all because the speakers were phenomenal! My favorite was the "MRSA: The Making of a Superbug" talk; it was all so fascinating and I learned so much about what MRSA is and what we can do to prevent infection as a community.

Overall, I am just thrilled that something like this even exists, and that our university was able to host such an event. I am very grateful to all the sponsors and everyone who made this event possible. Going to this event has made me understand how important public health is, and what my role should be. I really hope disease detective comes back again before my senior year!

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The Disease Detective Conference made a great impact on my view of public health. The seminars I went to were informative and interesting, and the exhibit hall was amazing well set up and organized.

The first lecture given by Dr. Sanchez was one of my favorites and I'm so glad I attended it. He was so enthusiastic and full of energy and really engaged the audience. The presentation was very interesting and I was able to learn about health problems today and how our own human behaviors play much of the role in the infectious and chronic diseases we see today. I was definitely a great way to start off the conference.

I also attended Dr. Podewil's lecture on TB and HIV and the possibility of a perfect storm. It was a great review for me, since we had just finished covering the TB topic in class. I was familiar with the multi-drug resistant strains and DOT treatments and other things she mentioned. I was saddened by some of the global statistics and pictures of emaciated people infected with TB. I also really like how she ended with the quote, "TB anywhere is TB everywhere."

At the keynote session, I was impressed especially by Dr. Fisher-Hoch's lecture on the many viruses and her stories about them in Africa. She's an amazing story teller and has such a great sense of humor. She was enthusiastic and energetic as she spoke and I wish there was more time for her to tell more stories about all the viruses. Dr. McCormick's speech was great as well. I've seen him in some videos in my Epidemiology class, so it was especially nice to get to see him in person.

I really liked how everything at this conference was set up. The idea of having 'young' speakers, food and free books and many other giveaways was definitely an incentive for people to go. I liked the bags from Pfizer and the great books you all were giving away. However, I feel that many of the attendees at the event were probably science majors, and we need to cater to the entire University. I told a few friends from the business school about this event, and they wouldn't have known about it if I didn't tell them. I really think it is important to inform as many students we can on issues in public health and let them know what is really happening today. Also, at some of the seminars, I thought the room might have been just a tad smaller than it should have been. Like at the first lecture with Dr. Sanchez, many people were sitting on the floor along the wall.



Other than that, I really enjoyed myself at this event and I learned so much more than I know now about public health.

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My name is L.K. I am a sophomore undergraduate student pursuing a Bachelor of Science in Biology. Parallel to my school work, I am very active in student organizations on the UT campus working on Social Justice issues. Some of these groups include Oxfam UT, the ONE campaign, the University Interfaith Council and the University Catholic Center's Social Justice Team. I have a passion for both the molecular sciences, finding the root causes of health complications, as well as for social concerns, searching for the root causes of these tensions, inequalities and problems in our local and global communities. I am always struggling to reconcile these two interest that are often regarded as two entirely separate fields.

I came to the *Become a Disease Detective Conference* not knowing what exactly to expect. All I saw was health, a topic I usually associate with the sciences, and public, an issue I connect with careers in humanities, in the same sentence. I attended the first speaker session, Eduardo Sanchez from UT's School of Public Health. I was so pleasantly surprised to hear him talk about the issues I cared most about: helping people or more so empowering people to help themselves through both direct service of doctors as well as, and just as importantly as, creating the healthy environment needed for future prevention of health diseases. I had been struggling with career options that I wanted to pursue this whole semester. This conference gave me an exciting, well-fitted career path to explore for the remainder of my time here at UT. Thank You!

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"The public health conference was a stellar venue that increased the awareness of this growing field. The speakers and their researches were mind blowing! I learned so much, but I think the most important thing I learned was that more research is needed to take care of our world's population.

I believe that UT needed this conference because not only did it make us more cognizant of the different diseases out there, but it also showed how ubiquitous public health is in all careers. I brought my mentees to the conference because they were all interested in healthcare. They were all amazed at the different job opportunities they could obtain. Also, this was the field they always pictured themselves to be in but didn't know about! Three out of 4 of them started looking into public health after this conference. I think it definitely changed their perspectives about how limited they thought the careers and researches are in the health care field.

Thank you Dr. Field and Dr. Kneeland for this amazing opportunity to interact with many public health workers and to engulf ourselves in this wonderful field!"

J.D., Microbiology Major

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When I was first told of the Disease Detective Conference, I didn't think much of it; I just figured it would be another fair or seminar that I would *try* to work my way through in between classes – even if it was only for free pens. However, the more I heard Dr. Field talk about it, the more excited she got, and more interested I became.



I went from being “somewhat interested” to “really excited” about the conference. I agreed to volunteer when I could, and I’m glad I did. I got to sit in on some really interesting lectures – where else would I have heard a lecture from the woman in charge of *all* the cases of prion disease in Texas?

The conference was enjoyable for me because I have never really been exposed to the world of public health before; it opened my eyes to not only career possibilities, but to interesting information in general. All the hard work was *obvious* – everything went smoothly and professionally. What’s even more important is that I can honestly say I enjoyed myself. It wasn’t another humdrum conference on campus. The best part was the overwhelming amount of giveaways – I came home with four free books! I’ve never gotten much more than a free pen at other business or career fairs.

Thanks for all the hard work! It was a great experience. W.Q., Junior, Microbiology Major

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During the disease detective conference, I was able to attend two seminars. “One World, One Goal: Optimal Health for All” with Dr. Eduardo Sanchez was insightful in that it stressed the importance of maintaining maximum wellness through prevention. Prevention of disease is the very essence of public health, yet our society has been slow to recognize that public health measures essentially encompass lifestyle choices, not just the management of infectious diseases. As an aspiring physician, this talk motivated me to take an active part in the health of my patients, insofar as their lifestyle choices are concerned, regardless of the field of medicine I ultimately pursue. Even if it be construed as somewhat annoying, this seminar encouraged me to consistently insist upon regular exercise, healthy eating habits, and the cessation of smoking. Though not all students at the seminar intend to formally pursue careers in public health management, Dr. Sanchez conveyed that there are multiple levels and opportunities with which to affect the wellness of the population. Whether with one patient at a time or at the level of the public health department, those entering a health career can do their part to better the wellness of the population.

The second seminar I attended, “Africa the Virus Cradle” with Dr. McCormick and Dr. Fisher-Hoch was completely enjoyable and insightful. I not only learned in great detail about the origins of HIV and other exotic diseases to surface in Africa, but the speakers were elegant in their explanation of theory and in the presentation of empirical evidence. The husband and wife team conveyed what it was like to work at the frontier of emerging infectious disease research. If I had to describe my experience, I would say awe inspiring! The fact that both speakers entered inhospitable and for the most part inaccessible regions of jungle for prolonged periods of time, collecting specimens and tracking down the course of an epidemic, was simply amazing. It was truly the highlight of the entire event. M.K., Junior, Honors Biology Major

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### **Disease Detective Conference: Personal Reflections**

When I heard about the Disease Detective Conference a couple of years ago, I was glad to attend, as I have always enjoyed public health. Though I was unable to see many of the exhibits, I did hear a couple of lectures, and definitely felt as though it was time well spent. About a month ago, when I heard that there would be another Disease Detective



Conference, I was very excited: this was an opportunity to fill in on what I had missed out on a few years ago.

I am very happy to say that I was not let down when I attended the Disease Detective Conference on April 2<sup>nd</sup>, 2008. I was able to meet several people from all over the country who worked in public health, and who represented institutions that dealt with public health. Through this, I was able to gain quite a bit of knowledge about fields I was previously ignorant about.

For me, the best part of the conference was attending individual lectures where a guest speaker spoke to us about his or her work in public health. I have gained so much information and knowledge about public health; some of the speakers inspired me to think about problems they were working on so much that I have discussed these issues with both family and friends, and have done personal research in my spare time. The conference has kindled in me a desire to work in public health even more so than I previously had. I feel extremely fortunate to have attended the conference, and only hope that it will be offered again in the future to other students. Many of us here at the University of Texas at Austin are passionate about public health, but have relatively few outlets in which to feed this interest, as there is no Public Health major at UT. However, this conference was a great opportunity to immerse one's self in his or her specific interest – public health – even if only for a day! N.M.

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Dear Dr. Field,

I really enjoyed the conference! I never really knew all of what encompassed the field of public health. I have to admit, the first thing I did after leaving the conference for lunch was talk nonstop about this career field! I met up with several younger friends for lunch who were undecided as to what profession they wanted to pursue. During lunch, I talked about all the information I had learned in the first session. The first speaker, Eduardo Sanchez was great. The information in his session was interesting and useful. I appreciated his energy and passion for public health and was fortunate to see and hear an individual so important in the field. I have A.D.D. and find it a little difficult to pay attention during lectures, but found the food to be very helpful in directing my attention.

The second speaker, Laura Jean Podewils gave me insight into TB that I found fascinating and alarming. I told my friends, that my passion to pursue dentistry originated and was influenced by my awesome dentist and my family's preference for careers in healthcare early in life. I told them that, had I experienced this conference earlier in my life, my choice in profession may have been towards public health. I cherish the moment when I sincerely chose dentistry as my career path and passion, and hoped to inspire them to at least take a look at this opportunity and possibly obtain that same passion for a career. I told them about the keynote session in the afternoon.

Later that day, I called my little brother who will go to UT next year, and told him to consider public health. Overall, I thought the conference to be a wild success. I really enjoyed Eduardo Sanchez and Laura Jean Podewils. The collection of booths was impressive. I was drawn to the Doctors Without Borders exhibit and had a 20 minute conversation with Caitlin Meredith about the opportunities to contribute on a global scale as a dentist.



I also thought the book selection was great. The organization, effort and creativity that was put into the whole event really speaks volumes about the passion that you and Dr. Kneeland have for what you do. It is simply inspiring. I can only hope to motivate young potential dentists in the same manner later down the road.

Thank you and great job on the conference!

W.D.C., Junior, Biology (B.A.), Pre-Dental, Business Foundations, Ethics & Leadership;  
Vice President - Texas Pre-Dental Society; The University of Texas at Austin

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### **Become a Disease Detective Conference – My Thoughts**

The collection of speakers at the Disease Detective Conference was amazing! My only comment here is that it was difficult to choose which lecture I wanted to go to. I especially liked Dr. Laura Podewils (HIV and MDR TB) and Dr. Vincent Fonseca (College Students). It was interesting to hear about public health initiatives on this campus (or the apparently lack there of—like a smoking ban). I also really enjoyed Dr. Joseph McCormick and Dr. Susan Fisher-Hoch's presentations. I have read about them in so many books, and I already knew quite a bit about their work. I didn't know that they wrote a book—perhaps it should have been one that was given out during the conference.

I especially enjoyed talking to representatives from each of the public health schools, and in future conferences I think it would be wonderful if more schools were there to recruit students. The Association of Public Health Schools presentation about going to graduate school was interesting (but general). I found speaking with each representative and directly asking them questions about their school and its programs was much more informative and helpful than the lecture. Matt Goldshore was great too. It was nice to get a student's perspective and in person, he was really helpful.

It would be really great to have undergraduates who have done research as part of the Public Health Internship (BIO 361P) to present their findings at future conferences. I realize that UT provides many opportunities for students to present their research, but this is could be a great opportunity for students to present their findings to other students interested in public health and to professionals working in the field. It would be a great way for students to get experience speaking and presenting research at conferences and it would be an easy way to relate public health initiatives back to Austin and UT.

Overall it was a terrific day and I left feeling really excited about public health work and graduate school. Thanks for all the hard work (and sleepless nights).  
A.C., Senior, Human Biology Major

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### **Become a Disease Detective**

Become a Disease Detective! started at 8:00 AM in the morning when I went to help set up the exhibit hall. Already I was extremely impressed with the picture boards that were put up and the professionalism and enthusiasm that all the volunteers put into getting the room set up.



I really enjoyed Dr. Eduardo Sanchez's "One World, One Goal: Optimal Health for All" talk and how he put a much different perspective into looking at public health. Not only did he talk about problems in public health today, but he also injected his own opinion into them. I also enjoyed Todd Bell's "MRSA: The Making of a Superbug," in which he stressed the importance of washing hands carefully and the right way.

I walked around in the exhibit hall and the free books were definitely a bonus in attracting a wide amount of people into coming to the talks. I noticed a lot of students were involved during the lectures, and a couple of them asked a lot of questions. I also had a chance to talk to Dr. Philip Huang about his work against tobacco campaigning. He talked about an ad that he did warning against the dangers of tobacco and how it was the #1 most preventable disease after obesity.

Generally, it was an exiting event and I feel like a lot of people really enjoyed the talks as well as the free books!

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**Become a Disease Detective: Discover Public Health!** was a great experience for me. I felt the conference was very informative and interesting. It provided many opportunities to learn about graduate programs in public health as well as other programs that promote traveling abroad to help fight infectious diseases. It was also very interesting to learn about the apprenticeship and internship programs offered in public health.

I also found the scientific presentation to be very valuable. I enjoyed listening to the presentations and learned very much about the topics offered. The presenters seemed very passionate about the topic they were discussing and I found them very pleasant to listen to. One presentation I was attended was "One World, One Goal: Optimal Health for All" by Eduardo Sanchez, M.D., MPH. Dr. Sanchez discussed many factors that contribute to the emergence of obesity that I had never considered before. For example, Dr. Sanchez discussed how a lack of an education or just living in a certain area can promote obesity. Dr. Sanchez was very entertaining and I feel the information he presented is very important for the health of the public.

I was also able to hear Todd Bell, M.D. speak about MRSA. Dr. Bell was very humorous and information in his presentation of the emergence of drug resistant pathogens. I was able to learn from Dr. Bell that simple things, such as washing ones hands, can significantly decrease the chances of people contracting diseases. I was able to learn about the programs provided in this country that allow people to go abroad to help fight diseases from the presentation by Megan Gerson, MPH. She very convincingly spoke about the importance of traveling abroad to help educate and treat those suffering from infectious diseases.

The conference provided many opportunities to speak with public health professionals about several different programs and the infectious diseases they specialize in. The conference taught me about the importance of public health professions and how educating the public is an important step in fighting many diseases. I also felt that the opportunity to receive a free book and free food was very generous. Overall the conference was a lot of fun and I am thankful that it was organized.

M.R., Senior, Human Biology Major



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## Become A Disease Detective Conference

I really enjoyed the opening talk by Dr. Eduardo Sanchez. The most interesting thing addressed in his presentation was the fact that in the United States, (a developed country), the diseases killing most people are not infectious diseases like they were a century ago, but chronic diseases. I think this was a very charismatic speaker bringing a lot of validity to notions of nutrition, and healthy life styles, which people might not consider direct threats to personal health. He outlined the direct relationships between seemingly non-medical aspects of health and their impact on the well being of an individual. Low income, for example, usually sounds like more of an inconvenient lifestyle rather than a health-threatening one. A person with low income may possibly be well informed on how to maintain a healthy life style and how exercising and eating well can impact them profoundly, but their low-income living conditions can actually prevent an individual from taking action to developing a healthy lifestyle. For example, if people do not earn much money, that tends to dramatically limit their free time; odds are they do not live in a safe neighborhood –this probably makes it unsafe to exercise, and if residing within what is called a “food desert” (a term I had not actually heard until this talk which refers to an area where salubrious foods like vegetables and fruits are not readily available, but snack foods and other foods high and fat while low in nutrients are plentiful).

Dr. Todd Bell’s talk on Methicillin Resistant *S. aureus* was the most enjoyable lecture. Although I heard two other great talks about tuberculosis and public health, I liked the MRSA talk, because we generally think of infectious threats flourishing in developing countries, or threatening from abroad; Dr. Bell brought an informative and alarming perspective to the domestic reality of MRSA. I understand that the iceberg concept of disease applies to infections like MRSA, but it never occurred to me that a large percentage of people are actually colonized by MRSA; he said that in west Texas he basically sees MRSA everyday. His photographs were vivid, and although he tried to keep the terms within normal vernacular, he did bring up some of the virulence factors, and pathogenesis issues we learn about in class

As things were wrapping up at the end of the day, my friend Emily and I sat eating pizza and resting our plates on the giant bags of stuff we received at the fair. Emily has been a biology major for several years now and hasn’t really planned to go to medical school. I told her how cool it was that we got all that stuff, and she told me how cool it was that there is an MPH degree, because she had never heard of it before that day. I see now that this was the purpose of the entire conference. R.M.

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The “Become a Disease Detective” conference was beneficial to me on many different levels. First and foremost, it was exciting to attend the various presentations and the keynote session. I enjoyed the first presentation by Dr. Sanchez, who discussed the current state of public health and methods of improving it. I next attended the session by Dr. Su, Dr. Taylor, and Dr. Miller, who gave an insightful and entertaining overview of the CDC Epidemic Intelligence Service. Finally, I went to the keynote session where Dr. McCormick and Dr. Fisher-Hoch gave separate talks concerning the origin of disease in Africa. This was perhaps my favorite segment of the entire conference. Dr. McCormick and Dr. Fisher-Hoch’s experiences in Africa were amazing; they were at ground zero



during several outbreaks in Africa, an astonishing encounter that I was thrilled to hear about.

The conference was also enjoyable for other reasons. I am looking forward to reading the books that were given away for attending the presentations, particularly "Flu" by Gina Kolata and "The Hot Zone" by Richard Preston, which, despite its prestige, I have not yet read. Also, any conference that provides its attendees with free food is always welcome, especially on a college campus.

The conference was especially influential for me in one particular regard. I am a pre-medicine student, and have never thoroughly considered a career in public health. During the presentations, I repeatedly heard that the speaker was previously a physician, but moved to a career in public health because they wanted to help thousands of people at once, instead of simply one-by-one. I had never considered this argument, but it will stay with me as I go on to medical school, and possibly resurface in the future. Thank you to everyone who helped make this conference possible.

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Dr. Field,

The Disease Detective Conference was a great experience for me. Not only was it nice to actually meet people who work in the field, but I thought it was even better seeing how many students showed interest (I thought I was one of a few who wanted to go into this profession)! The system with the book plates and attending the lectures was a great idea and I think it worked really well. Of the talks that I saw, the presenters seemed very knowledgeable and prepared-very professional.

I was able to sit down with the graduate school of public health admissions people and learned an incredible amount of information. I didn't realize there is one application for all the schools, and I didn't know that most schools allow you to get your masters part time! Thee free books were wonderful and I felt I learned a lot and enjoyed the entire conference experience! Thank you for working so hard to put this all together, I know it was stressful and busy for you!

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### **Become a Disease Detective Conference:**

Of everything in the conference, I would have to say that my favorite presentation was the *Meds, Mango Leaves, and Prayers* lecture about the Congo given by Caitlin Meredith. I had no idea that disease is worse in the Congo even after war there has been diminished. Ms. Meredith gave a detailed lecture about how physicians are having trouble getting the mothers in Congo to bring their children to health clinics when they are sick. Complete with lots of amazing photographs, she explained how the mothers in Congo are the main caretakers of the family and how their self-sufficiency leads them to try to nurse their children themselves when they are sick. She also talked of how Americans will only be able to help the people of Congo if they do not discount their beliefs about witchcraft and local remedies as they related to disease. I so greatly enjoyed this lecture because I had no idea that these types of problems are occurring in Africa. Learning about local remedies and how some people of Congo are adverse to health clinics due to their dislike of how American doctors dismiss their culture as it



relates to medicine and disease, was very eye-opening especially since we tend to only hear of health problems in the United States.

I also greatly enjoyed the keynote session given by Dr. McCormick and Dr. Fisher-Hoch. I especially enjoyed Dr. Fisher-Hoch's lecture about all of the different viruses that have originated in Africa and their history. While I had heard of many of these viruses, I had no idea what their origin was and where they came from in Africa. With all of the media out there about the Ebola virus, it was nice having all of the viruses sorted out and explained as it allowed me to understand why these epidemics started and how we can control them.

The free books were a HUGE hit. I got three of the books, including The Hot Zone, Flu, and Scourge. I must admit that I'd never really bought any scientific books besides the ones that I'm supposed to buy for school. Having these books given to me to read for free was amazing as I probably would not have read them otherwise. I think giving out these books gave a lot of students a chance to learn more about different pathogens and their diseases while having a good read. We've all read lots of textbooks in college and, while I have nothing against textbooks, it's really exciting to have books like this that are enjoyable to read while letting us learn about a disease more in-depth.

R.D., Senior, Microbiology Major

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"Become a Disease Detective: Discover Public Health" was an informative and unique experience. I was very impressed with the organization and scale of the event. When I first heard about it, I thought it would be a few speakers a couple schools to talk to, but it was far more and quite impressive. I was only able to make it to three presentations, "One World, One Goal: Optimal Health for All", "Out of Africa: HIV and the MDR Epidemic", and College Students: What's going to get you". Out of these three speakers my favorite was "One World, One Goal: Optimal Health for All", the speaker Eduardo Sanchez was a fabulous speaker and showed a very high interest in the subject. Dr. Sanchez also make the speaker enjoyable and entertaining for the audience as well by bringing up topics that we all can relate to, such as obesity. I could not believe the number of public health schools that were present at the exhibit hall. Between classes, tests, and work, I did not have time to speak to any of the graduate programs but from what I saw, they were very eager to talk to everyone and answer as many questions as you had.

One of the best parts of the event was the free books. I truly believe that handing out free books about public health is a great way to introduce the field to students who were not previously interested in it. Most students would normally not buy books about public health epidemics, but allowing people access to these books will help to introduce more people to the subject of public health. I am looking forward to reading all of the books I received, they all look very interesting. The event was wonderful and I am glad I had the opportunity to attend.

Wonderful job to everyone who put it together! K.F., Senior, Microbiology Major

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## **Disease Detectives Conference**

The Disease Detectives Conference this year was very entertaining, informative, and just all around fun! I unfortunately was not able to attend the entire event due to my class schedule, but I did get to see the majority of what the conference had to offer. I really enjoyed Dr. Sanchez's speech about Good Health for all. His ideas to treat health problems such as obesity, heart problems, and tobacco use by addressing lifestyle issues was in my mind very unique. I also thought that the food was great; speaking as a college student, if there if free food involved then I will almost certainly be there. I think that offering food to the students and other guests encouraged them to stay and listen to the speakers. Dr. Podewils' presentation of MDR TB and HIV was also very interesting. It was fun to see what we had been learning in class relate to what is actually being done and what is happening in the global battle against MDR TB. Also, expanding on that knowledge was a great experience as well.

After Dr. Podewil's spoke, I went outside to see the first response Weapons of Mass Destruction Bio/Chemical truck. This thing was really cool, unfortunately I don't think that too many of the guests knew that it was parked outside by the FAC building because when I went out there, there weren't too many people. I was given a tour by the two people who ran it. They told me that the truck was used to identify possible threats that could be chemical or biological agents. I was told that the truck can actually handle up to a Bio Safety Level 4 pathogen in one of the containment boxes. The truck also has a lot of equipment that would aid in the identification of various agents, one such piece of equipment was a PCR machine. After visiting the truck, I had to go to my other classes but I made it back in time to see the key note speakers. I really enjoyed Dr. McCormick's presentation of the origins of HIV. I personally would like to work with level 4 pathogens one day and when I get the chance to hear someone else who has worked with them, it really is a treat for me. Dr. Fisher-Hoch's presentation on the history of emerging viruses from Africa was by far the best part of the conference for me. B. H.

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### **"Become a Disease Detective Conference!"**

The Disease Detective public health conference at the University of Texas at Austin was perhaps the best conference I have attended during my years as an undergraduate. The organization and magnitude of the event itself impressed both students (including me) and the speakers themselves, who said that no other university they know of committed so much time and resources to a field as important and relevant as public health.

"Become a Disease Detective" placed public health in perspective in how it works as an invisible force that acts as one of the critical pillars of a global society that becomes smaller and smaller by the day. The work that is done by public health professionals unfortunately goes unnoticed, which has been a problem in and of itself since it has contributed to the shortage of public health workers, whose roles will only increase in significance for the aforementioned reasons. The conference appeared to address this issue as one of its primary concerns, and a healthy sense of urgency and enthusiasm was apparent as the various speakers spoke about the critical role that public health plays for the modern world. Nowhere was this more clear than the presence of multiple schools of public health in the main exhibit hall and the presentations that several of these institutions gave regarding the attributes of the field that attract people to the field



itself. To emphasize the point, an especially enthusiastic public health student, Matt Goldshore, elaborated on the life and career paths for public health professionals. The most lasting impression he made, for me, was the fact that public health works to help everyone, most especially the underprivileged. He explained that by caring for even the most destitute of people, everyone else will be better off, and not doing so would only invite trouble.

Perhaps most impressive was an overriding theme that public health is a collective human endeavor whereby all laboratories, disease monitoring centers, and so forth are so interdependent that the failure of any one can compromise the entire system by exposing a larger population to unnecessary disease. This point seemed to be driven home by several presentations as they emphasized that the public health system itself mirrors the world today, which is becoming a place where everyone is more and more connected to each other in spite of any geographic obstacles. The presentation by the local Austin public health department, "Epidemiologists: Outbreaks are Our Business!," was specific with this point; focusing on cases of salmonellosis spreading to several northern states including Minnesota, Pennsylvania, and Michigan from a rat/mice farm in Texas. This clearly upset public health officials in the affected states and created an embarrassing situation for Texas. This particular case convinced me how critical it is for all segments of the public health system to work toward optimal efficiency and it further helped me understand why public health workers are so concerned with Third World countries, where such a healthcare infrastructure is virtually absent.

Finally, this conference has had a greater impact in my conception of the delivery of health care than I had anticipated, and I can say with certainty that my own life has been influenced by this conference. My own personal habits and lifestyles were influenced by Dr. Vincent Fonseca's argument for college students to practice discipline, moderation, and healthy habits in areas like diet and exercise. Already under pressure from my family to take better care for my body, the cold hard facts in the form of statistics made it extremely difficult for me simply to dismiss Dr. Fonseca's points. But the conference had also influenced me in that I believed a bigger role for public health would play in my selected career - medicine. The message is clear: in an era of globalization and declining living space, we as a species have made it easier, if not ideal, for pathogens and harmful microbes to find a niche in a brave new world. Doctors and other healthcare professionals will need to understand the crucial role that public health plays and will continue to play in preventing outbreaks that could land in our own backyard. More importantly, I have become even more grateful for such a system, for without public health, it would not be a stretch to imagine a world with hospitals overflowing with patients stricken with the "old, out-of-fashion" diseases like smallpox, poliomyelitis, measles, and the like. Indeed, without public health, doctors would not be able to allocate precious resources like drugs, rooms, beds, equipment, and diagnostic tools to patients with conditions that have seized the spotlight like cancer, diabetes, and Parkinson's Disease.

And for those reasons, I am truly grateful and feel that I may even have the opportunity to collaborate with public health officials in the future for the betterment of everyone's lives. E.H., Junior, April 10, 2008

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I thought the Disease Detectives Conference was a very worthwhile event to attend! I am a fourth year at the University of Texas, and I believe that the conference would have been beneficial for not only undergraduate students, but graduate students as well as professionals and others already in the workforce. I believe it is vital that the general public learn more about the infectious diseases affecting our population today. I personally attended the presentation One World, One Goal: Optimal Health for All by Eduardo Sanchez and was very impressed. I think it is extraordinary that, although Dr. Sanchez attended medical school and was a practicing doctor for over ten years, he finds the world of public health more rewarding than the medical field. I would definitely recommend the Disease Detectives Conference to anyone.

A.H., Fourth Year, Biology Major (attending pharmacy school in the fall)

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My name is M.K. and I am a junior at the University of Texas. I am a Plan II /Biology double major. I attended the Disease Detectives conference and was thoroughly impressed with, not only the speakers, but the presentation, the choices of booths, books and food given out. As the conference began, the opening speaker, Dr. Sanchez, captivated the audiences by his relate-able lecture in which he tried to get everyone involved. A lot of the students attending are probably hoping to go to graduate programs, medical schools or going into public health, and this talk was applicable to all, as it told a story of a person transitioning from a carrier dedicated to treatment to prevention. He incorporated a motto of change into his talk and I was very impressed by him. During the lecture, the delicious food was also a bonus. Although I am not exactly how many people came, but it appeared there was enough food to keep everyone satisfied. That's one way to keep people's attention, keeping them fed!

I only planned to stay an hour, two at the most, and ended up staying 3-3.5 hours. There were so many options for the types of books, that I was torn among them. I wish there was a way I could've grabbed a few more. I think it was great that the conference even had members of the UT library there with handouts. These handouts made it significantly easy to find books related to public health, and I'll definitely be using those handouts in the future.

I would like to thank the people who made this possible!

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### **Disease Detective Conference**

Personally, for the parts of the conference that I had the chance to experience, I found the lectures to be not only informative, but also very entertaining. I was able to attend the first lecture of the conference and to hear about what has impacted public health in the last 50 years to cause the paradigm shift in what are the leading causes of death in our society. I enjoyed how the lecturer made the subject relatable and also suggested of ways to improve the situation that we as a society created for ourselves. Seeing how our ability to fight infectious diseases has increased our lifespan, but how our life style choices now are hindering our life expectancy is something that more people should be aware of. By improving such things as our environment, eating more green, exercising, and getting an education should be something that is common sense to us in the



university community, but is not easily achieved by people who cannot afford these luxuries.

Overall, I feel that the conference was very well organized and that it offered a vast amount of knowledge (as well as goodies) to UT students, like free books and bags, that we normally do not get the opportunity to receive. Being able to see how much of an impact infectious diseases have on the public and seeing what people in the public health field are doing now to help improve life is exhilarating. T.M.

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During the disease detective conference, I was able to attend two seminars. "One World, One Goal: Optimal Health for All" with Dr. Eduardo Sanchez was insightful in that it stressed the importance of maintaining maximum wellness through prevention. Prevention of disease is the very essence of public health, yet our society has been slow to recognize that public health measures essentially encompass lifestyle choices, not just the management of infectious diseases. As an aspiring physician, this talk motivated me to take an active part in the health of my patients, insofar as their lifestyle choices are concerned, regardless of the field of medicine I ultimately peruse. Even if it be construed as somewhat annoying, this seminar encouraged me to consistently insist upon regular exercise, healthy eating habits, and the cessation of smoking. Though not all students at the seminar intend to formally pursue careers in public health management, Dr. Sanchez conveyed that there are multiple levels and opportunities with which to affect the wellness of the population. Whether with one patient at a time or at the level of the public health department, those entering a health career can do their part to better the wellness of the population.

The second seminar I attended, "Africa the Virus Cradle" with the McCormick's was completely enjoyable and insightful. I not only learned in great detail about the origins of HIV and other exotic diseases to surface in Africa, but the speakers were elegant in their explanation of theory and in the presentation of empirical evidence. The husband and wife team conveyed what it was like to work at the frontier of emerging infectious disease research. If I had to describe my experience, I would say awe inspiring. The fact that both speakers entered inhospitable and for the most part inaccessible regions of jungle for prolonged periods of time, collecting specimens and tracking down the course of an epidemic, was simply amazing. It was truly the highlight of the entire event.

M.K., Honors Biology, Junior, Premedical Major

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### **Students attending Austin State Hospital's, Clinical Laboratory Science Program**

The Disease Detective symposium was very informative and interesting. As a college biology student I had no idea that there are so many career opportunities other than being a doctor, pharmacist, or physician's assistant. A lot of emphasis is placed on these careers, which is unfortunate for those students who are not as interested in these fields. Having a seminar to bring awareness to other options is extremely helpful for students that are undecided as to which field best suits them. I also thought the speakers were excellent. I have always been interested in public health and all of the speakers I saw had a wealth of knowledge as far as how to get in to the field and how disease tracking transpires out in the field. In addition, I thoroughly enjoyed the books. The idea of passing out the books really complemented the talks because not only did you get the



information from the speaker but then I was able to go home and read more about the issue. Overall, I think this was an important conference to have and I hope to be able to attend another one in the future. **M. R.**

The Disease Detective Conference was very interesting, and it allowed me as a student to see what kind of job opportunities are out there in Public Health. It also related to what I see everyday in the lab with the talk on MRSA. The talk given about DSHS allowed me to see other places to work besides in hospitals or doctors offices. Newborn screening is very important to parents and doctors for early detection of genetic diseases. I really learned a lot from the talk on exactly what public health is and how it was more than just emerging diseases – that it includes car wrecks, obesity, and other things that don't relate with viruses or bacteria at all. That was my favorite, because it allowed me to see all the sides of public health. **C.H.**

As a CLS major at UT currently enrolled in an accredited CLS program at Austin State Hospital, the Public Health “Become a Disease Detective” program enabled me to further expand my knowledge about all of the career opportunities available to CLS students. The lecturers provided a wide range of knowledge about current public health concerns, such as AIDS and malaria in developing countries, and gave information on how college and graduate students can get involved in this field of study. Also the numerous exhibits allowed me to talk to other health professionals on a one-on-one basis and ask specific questions about the valuable role of the laboratory in public health. Overall, the entire program gave me a new perspective on the values and benefits of becoming involved in public health, and I further learned how medical technologists continue to play a crucial role in public health. **L.L.**

Thank You for organizing the Public Health awareness event last week. I am a student at the ASH CLS program and I appreciate opportunities to learn about related areas of study. I feel it is important to have these events so that science students are more aware of the job possibilities that await them after they earn their degrees. Many students I speak with began their college careers as science students, but eventually switch majors because they are unaware of the variety of post-degree educational opportunities. Events like the Disease Detective Symposium will help retain many science students. I feel it is important students realize these opportunities can guarantee them steady employment in a fulfilling and exciting career. **N.C.**

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## **6. Conclusions**

A primary focus of the conference sponsor, the Centers for Disease Control and Prevention, Office of Workforce and Career Development, is to develop the next generation of public health professionals in order to meet public health workforce shortages and current and emerging health promotion and protection priorities. The goals of the 2008 *Become A Disease Detective: Discover Public Health!* Conference were to educate university faculty, advisors and students about the dynamic field of public health and to encourage students to consider public health careers. There is ample evidence that this conference, which was attended by over 600 students and 200 faculty, advisors and public health professionals, was an effective way to contribute to the development of the future public health workforce. A summary of the conference impact on participants follows.

### **6.1 Conference Impact: Faculty and Advisors**

Public health education at UT Austin has focused on two distinct populations: faculty and advisors, and students. The 2008 Disease Detective Conference reinforced and expanded upon the education that faculty and advisors received at the previous two conferences by providing them with new knowledge and resources with which to advise thousands of students about public health education and careers. Conference evaluations clearly demonstrated that faculty and advisors are using these resources to advise their students.

We believe the “out-of-state” academic and health professions advisors who participated in the 2008 “Disease Detective” conference magnified the overall impact of the conference as they have returned to their home campuses to share the information they gained with interested students. In addition, Ms. Joy Coleman, Senior Relationship Manager, Gates Millennium Scholars Program, who attended the conference for the first time, is disseminating the information and resources she gained at the conference to Gates Millennium scholars enrolled in more than 1,500 colleges and universities around the country. When the next “Disease Detective” conference is held, she has expressed interest in making it possible for Gates Scholars from the around the country to come to Austin to participate in the conference.

### **6.2 Conference Impact: University students**

The University of Texas at Austin is one of the largest universities in the nation and is a national leader in the number of undergraduate degrees awarded to minority students. Fifty seven percent of the university students who participated in the 2008 Disease Detective conference identified themselves as part of a racial or ethnic minority. Thus, the conference was an effective outreach activity to help expand the awareness of demographic groups that are underrepresented in the public health workforce .

The conference provided hundreds of university students with the opportunity to hear talks based on real cases in epidemiology and “disease detective” work, and to engage in discussions with public health professionals about their activities, functions and careers. Students also were able to meet and interact with representatives from 19



graduate schools of public health and 8 public health organizations. They also learned how to access information about public health for themselves at the conference Information Resources Center and were provided with over 600 books to read more about the field. Student comments and conference evaluations clearly demonstrate that these activities increased the interest of UT Austin students in public health education and careers.

The conference provided students with opportunities to learn about training programs in public health including the CDC Epidemic Intelligence Service, the CDC- APHL Emerging Infectious Disease Fellowship Program, and the recently created CDC Apprenticeship Program. Information also was available about the UT Austin Public Health Internship Program, a collaborative program between the university and the Texas Department of State Health Services (TDSHS), The Austin/Travis County Health and Human Services Department (ATCHHSD) and the UT School of Public Health, Brownsville Regional Campus. This program gives undergraduate students the opportunity to conduct one semester, goal-oriented research projects in laboratory science, epidemiology, and Texas-Mexico border health under the guidance of public health mentors. Students also learned about jobs that are available at the TDSHS and the ATCHHSD.

### **6.3 Additional Impacts of the Conference**

The ASPH and APHL continue to view the UT Austin Disease Detective Conferences as model programs and they have recently offered a “Pathways to Public Health Careers and Internship” grant program to encourage the development of similar conferences at other universities across the nation.

The 2008 Disease Detective conference also reinforced partnerships among participating entities including, the TDSHS, ATCHHSD, CDC and faculty at the UT Austin. As in 2006, this event served as a continuing education activity for local and state public health professionals and community health professionals, facilitating their professional development.

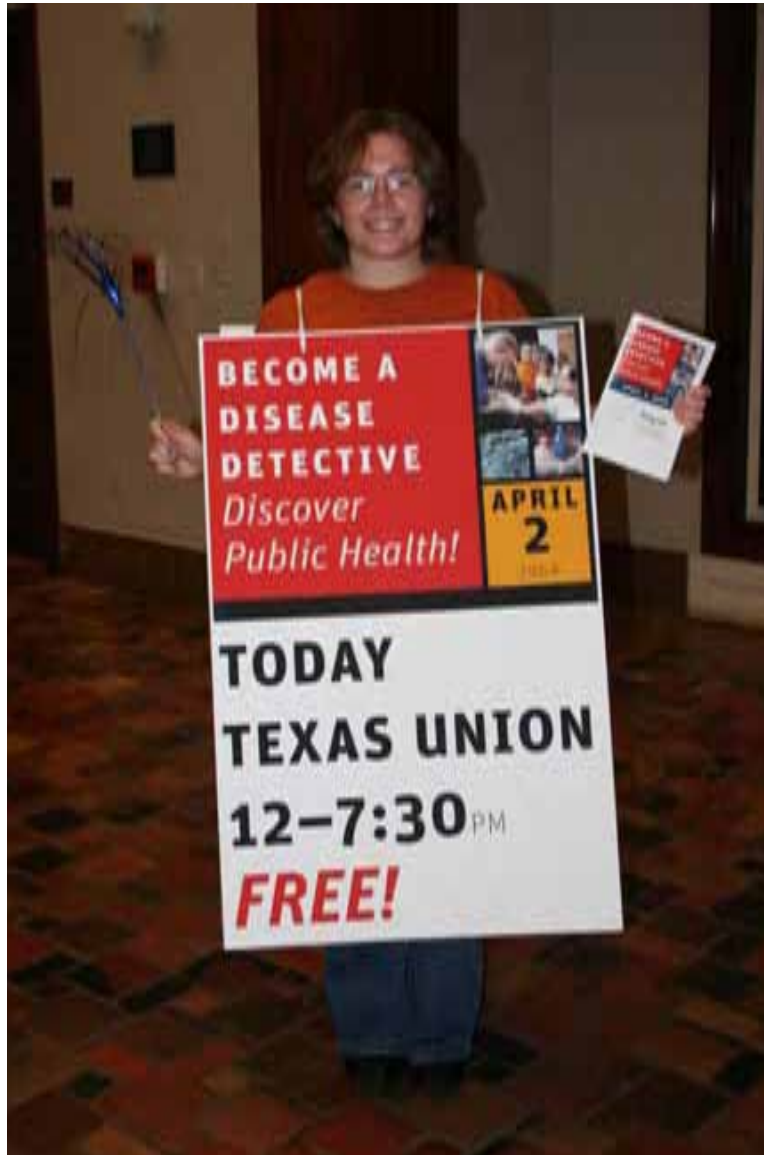
### **6.4 Future Initiatives**

Because of the interest and enthusiasm for public health demonstrated through the 2008 Disease Detective Conference, public health professionals and educators who participated have indicated their interest and willingness to continue this outreach activity by returning for future occasions.

Finally, this conference has served as a springboard for the development of a new B.S. in Public Health degree program at UT Austin. Development of the degree program is ongoing and is expected to be implemented in the Fall of 2010.



# APPENDICES





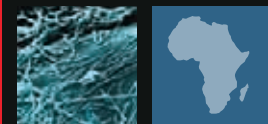
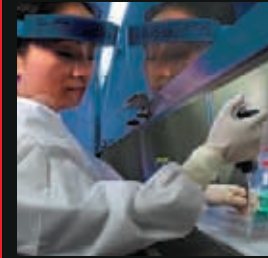
## APPENDIX 7.1

### Conference Program





become a  
disease  
detective  
Discover  
Public Health!



april 2, 2008

## Program

12–7:30pm | The Texas Union

The University of Texas at Austin

[www.sbs.utexas.edu/diseasedetective/](http://www.sbs.utexas.edu/diseasedetective/)



## WELCOME

Welcome to **Become a Disease Detective: Discover Public Health!** We hope you enjoy this day devoted to the exciting world of public health! The entire conference has been designed to help you explore the many and varied career opportunities in this dynamic field. You have the chance to hear multiple scientific presentations, talk to epidemiologists, laboratory scientists, real-life disease detectives and other public health professionals who work in Austin, in Texas and around the world. Representatives from the top graduate schools of public health are waiting to meet you in the Exhibit Hall, and you can find out how to take the next step and apply for graduate school in a special afternoon session. You can learn about apprenticeship and internship programs and the *Epidemic Intelligence Service* program sponsored by the Centers for Disease Control and Prevention (CDC). Don't be shy! Go up and meet the public health professionals wearing the red "Ask Me About Public Health" buttons. They are eager to share their experiences with you!

Several of our conference presentations revolve around the theme: *Out of Africa*. Don't miss the opportunity to learn why Africa is the world's virus cradle and about the origins of HIV on the continent. Get a current perspective on the frontline response to HIV/AIDS and the efforts to fight multidrug-resistant tuberculosis in Africa and around the world. Learn how the organization *Doctors Without Borders* is positively impacting the health of indigenous populations in the Congo and elsewhere in Africa.

Dedicated public health professionals work right here in Texas. Meet the Texas disease detectives who protect us from prions and who fight outbreaks of noroviruses, salmonella, and measles. Gain insight about the making of a superbug from a practicing physician who is actively involved in community health. Investigate how to put your skills to work in a Texas public health laboratory, tracking down outbreaks of foodborne disease and more! Learn why two dynamic women physicians choose to work in public health rather than in private practice. Meet the director of the Austin/Travis County Health and Human Services Department and discover how Austin public health professionals work to promote healthy life styles, protect us from infectious diseases



and environmental hazards and respond to natural disasters. As college students, you can impact your own health and the health of your friends. The Texas state epidemiologist will help you understand “What’s Going to Get You... and What You Can Do About It!” and a renowned expert in health policy will persuade you that addressing lifestyle issues is essential to achieving the goal of optimal health for all.

We hope this day will inspire you to consider new possibilities for your future. We are grateful to the CDC Office of Workforce and Career Development for supporting the conference and to all of the public health professionals who have made this day possible. They are investing in you! Don’t miss a minute of all the day’s activities. Discovering public health might just change your life!

Best wishes,

Leanne H. Field, Ph.D., and Diane M. Kneeland, Ph.D., Conference Co-organizers



## ACTIVITIES

**KICK OFF LUNCHEON 12 pm (Quadrangle Room, 3.304)**

**Free Lunch!** Italian Sub Sandwiches for the first 250 students

*One World, One Goal: Optimal Health for All* Eduardo Sanchez

**TWELVE EXCITING SCIENTIFIC PRESENTATIONS! 1 pm - 5 pm (Quadrangle Room, 3.304; Santa Rita Room, 3.304; Governor's Room 3.116)**

Hot Topics in Public Health

More than 500 **Free Books** will be given away!

**KEYNOTE SESSION: OUT OF AFRICA 5 pm - 6:30 pm (Ballroom, 3.202)**

*Discover Public Health!* David Lakey, M.D.

*Origins of HIV: Where, When, Why and How?* Joseph B. McCormick, M.D.

*Africa: The Virus Cradle* Susan P. Fisher-Hoch, M.D.

**Free Pizza!**

**EXHIBIT HALL 12 pm - 5 pm; 6:30pm - 7:30 pm (Ballroom, 3.202)**

- Visit with 18 Graduate Programs in Public Health
- Learn about Public Health Organizations including the CDC, Association of Public Health Laboratories and more ...
- Receive information about fellowship and apprenticeship opportunities
- Browse the Information Resources Center-receive free reading lists
- View the Pfizer: Milestones in Public Health Exhibit and receive free books
- Talk to disease detectives, featured speakers and public health professionals, at the "Public Health Professional Corner"
- Join Texas Public Health and participate in the Giant Microbe raffle
- Learn about the Public Health Internship Program

**SPECIAL! OUTSIDE EXHIBIT 1 pm - 4 pm; North Side of Flawn Academic Center**

Tour the mobile Analytical Lab System operated by the 6th WMD Civil Support Team

**Come early and stay late! !! IT'S ALL FREE !!**



## ACKNOWLEDGEMENTS

### *Conference Sponsors:*

The University of Texas at Austin: College of Natural Sciences, School of Biological Sciences, Career Services and Health Professions Office; The Centers for Disease Control and Prevention, Office of Workforce and Career Development; Texas Department of State Health Services; Austin Travis County Health and Human Services Department; The University of Texas School of Public Health, Austin Regional Campus; Association of Public Health Laboratories; Association of Schools of Public Health.

**This conference is generously supported by** *The Centers for Disease Control and Prevention, Office of Workforce and Career Development*

### **Thanks Everybody!**

Suzanne Barth, John Batterton , Allan Bonin, Henry Bose, Tom Bowie, Bryon Bowers, Jessica Briggs, Ruth Buskirk, Diane Butterfield, Nicolas Cortes-Penfield, Pat Davis, Judy Delany, Melissa Denn, Robert Durci, Grace Ecko , Nancy Elder, Dianne Farmer, Marilyn Felkner, Mike Field, Vincent Fonseca , Allison Foster , Jennifer Fritz, Dena Garrison, Matt Goldshore, Marianna Grenadier, Richa Gupta, Ruth Hagerman, Ann Harasimowitz, Scott Harris, Ron Harrist, Timothy Holtz, Kay Kimball, Rob Lallier, David Laude, Rosa Lozano, Krystle Luna, Michael Mackert, Blinda McClelland, Suzanne McIntyre, Sandra Miller, Natalie Mills, Barbara Moore, Barbara Murphey, Bob Nagy, Susan Neill, Trish O'Day, Susan Penfield , Eva Perlman, Cheryl Perry, Cathy Prescott, Dean Mary Ann Rankin, Suzette Ruedas, Bill Sage, Delia Santana, Ed Satterwhite , Scott Schulz, Aaron Starnes, David Steadman, Jeff Taylor , Karen Thomsen, Adolfo Valadez, Ben Vasquez, Damon Waitt, Paul Ward, Dean Wilcox



# EXHIBITORS

## Schools of Public Health

- \* Columbia University, Mailman School of Public Health
- \* Emory University, Rollins School of Public Health
- \* George Washington University School of Public Health and Health Services
- \* Johns Hopkins University, Bloomberg School of Public Health
- \* Ohio State University, College of Public Health
- \* Southern Illinois University, M.S. Degree in Public Health Laboratory Sciences Program
- \* State University of New York, University at Albany, School of Public Health
- \* Texas A&M Health Science Center, School of Rural Public Health
- \* Texas A&M Health Science Center-South Texas Center
- \* University of Kansas, Master of Public Health Program
- \* University of Kentucky, College of Public Health
- \* University of Minnesota, School of Public Health
- \* University of North Texas Health Science Center, School of Public Health
- \* University of Southern California, Master of Public Health Program
- \* University of Texas School of Public Health, Austin Regional Campus
- \* University of Texas School of Public Health, Brownsville Regional Campus
- \* University of Texas School of Public Health, Houston
- \* University of Washington School of Public Health and Community Medicine
- \* Yale University, School of Public Health

## Organizations

- \* Association of Public Health Laboratories (APHL)
- \* Association of Schools of Public Health (ASPH)
- \* Austin/Travis County Health and Human Services Department
- \* Centers for Disease Control and Prevention,  
Office of Workforce and Career Development
- \* Doctors Without Borders/Medecins Sans Frontieres
- \* Pitzer Public Health and Policy Group
- \* Texas Department of State Health Services
- \* The 6th WMD Civil Support Team, Texas National Guard Unit
- \* U.S. Public Health Service

## Training Programs

- \* APHL/CDC Emerging Infectious Diseases Fellowship Program
- \* CDC Apprenticeship Program
- \* CDC Epidemic Intelligence Service
- \* UT Austin, Public Health Internship Program

## The University of Texas at Austin

- \* Life Sciences Library
- \* School of Nursing
- \* Society of Public Health Students

## Sponsors:

College of Natural Sciences: School of Biological Sciences, Career Services and Health Professions Office; The Centers for Disease Control and Prevention, Office of Workforce and Career Development; Texas Department of State Health Services; Austin/Travis County Health and Human Services Department; The University of Texas School of Public Health, Austin Regional Campus; Association of Public Health Laboratories; Association of Schools of Public Health.



## PROGRAM: Become a Disease Detective: Discover Public Health!

Texas Union, The University of Texas at Austin, April 2, 2008

	Union Ballroom 3.202	Quadrangle Room, 3.304	Santa Rita Room 3.502	Governor's Room 3.116
12:00pm	EXHIBIT HALL OPENS Bring Your Friends! Learn about graduate programs, fellowships, public health careers and more!	OPENING KICKOFF! Italian Sub Sandwich Lunch One World, One Goal: Optimal Health for All Eduardo Sanchez		
1:00pm	VISIT THE EXHIBIT HALL Network with public health professionals!	OUT OF AFRICA: HIV and the MDR Epidemic: The Perfect Storm? Laura Podewils	Public Health: Austin, Texas! David Lurie	Women in Medicine—Women in Public Health! Susan Penfield, Linda Dooley
2:00pm	VISIT THE EXHIBIT HALL Visit the Pfizer Milestones Exhibit and Information Resources Center!	MRSA: The Making of a Superbug! Todd Bell	Outbreak I Epidemiologists: Outbreaks Are Our Business! Carol Davis, Karen Moody,	CSI: Public Health—Tackling Emerging Diseases and More in the Laboratory Susan Neill, Eva Perlman, David Carpenter
3:00pm	VISIT THE EXHIBIT HALL Redeem bookplates for free books!	One World, One Hope: Frontline Response to the Global AIDS Pandemic Megan Gerson	"Beating Back the Devil" The CDC Epidemic Intelligence Service John Su, Richard Taylor, Eric Miller	College Students: What's Going to Get You... and What Can You Do About It? Vincent Fonseca
4:00pm	VISIT THE EXHIBIT HALL Join Texas Public Health! Learn about the UT Austin Public Health Internship Program!	OUT OF AFRICA: Meds, Mango Leaves and Prayers—Teasing Out Health Choices in the Congo Caitlin Meredith	Outbreak II Texas Disease Detectives in Action! Rita Espinoza, Elia Puga	Ready to Take the Next Step? Graduate Education in Public Health Allison Foster, Matthew Goldshore, William Harvey, Melvin Monette, Shannon Shelton, Mary Ann Smith, Michael Ward
5:00–6:30pm	<b>KEYNOTE SESSION: OUT OF AFRICA</b> Welcome Discover Public Health! David Lakey Origins of HIV: Where, When, Why and How? Joseph B. McCormick Africa: The Virus Cradle Susan P. Fisher-Hoch			
6:30–7:30pm	Enjoy PIZZA with your friends! EXHIBIT HALL RE-OPENS FOR ONE MORE HOUR! Last chance to visit the exhibits and network with public health professionals!			



**It's all FREE!**



## SYNOPSES

### 12 PM

#### ***One World, One Goal: Optimal Health for All***

(Quadrangle Room 3.304)

**Eduardo Sanchez, M.D., MPH**, Director, Institute for Health Policy, UT School of Public Health

Public health used to be almost exclusively about the control of outbreaks caused by bacteria and viruses. The emerging health challenges today include diseases caused by tobacco use and obesity. Can we achieve optimal global health without addressing lifestyle issues? Is that enough? This presentation will use Texas as a case study to make the case for one world, one goal: optimal health.

### 1 PM

#### ***Women in Medicine – Women in Public Health!***

(Texas Governor's Room 3.116)

**Susan Penfeld, M.D.**, Manager, Infectious Disease Control Unit, Community Preparedness Section, Texas Department of State Health Services and **Linda Dooley, M.D.**, Health Authority for Travis County and Acting Medical Director for the Austin /Travis County Health and Human Services Department

Women wear many hats in public health and in medicine—not to mention real life. This presentation offers an opportunity to explore some of those roles, share experiences, and talk about public health and medicine as careers.

#### ***HIV and the MDR Epidemic: The Perfect Storm?***

(Quadrangle Room 3.304)

**Laura Jean Podewils, PhD, MS**, Epidemiologist, International Research and Programs Branch, Division of Tuberculosis Elimination, Centers for Disease Control and Prevention

In 2005, a new, essentially untreatable, strain of *Mycobacterium tuberculosis* was identified in Tegula Ferry, a small rural town of KwaZulu Natal, South Africa, the epicenter of the HIV/AIDS epidemic. Patients affected in the outbreak were HIV positive and died within 16 days after infection. They were identified as having extensively-drug resistant tuberculosis (XDR-TB), a form of multidrug-resistant tuberculosis (MDR-TB). The global HIV epidemic has caused explosive increases in TB incidence and may be contributing to increases in MDR-TB (and XDR-TB) prevalence. This presentation will focus on the factors that have contributed to the convergence of MDR-TB and HIV and explore ways that we may best prepare for this seemingly perfect storm.

#### ***Public Health - Austin, Texas!***

***An overview of the challenges, recent events, activities, and programs of the Austin Health and Human Services Department***

(Santa Rita Room 3.502)



**David Lurie, M.B.A.**, Director, Austin Travis County Health and Human Services Department  
<http://www.ci.austin.tx.us/health/>

The role of public health at the local level is to promote community-wide wellness; prevent disease; and to protect the community from infectious diseases, environmental hazards, and epidemics. From pandemic flu readiness, hurricane response, and communicable disease investigations, to promoting healthy lifestyles and behaviors and sheltering stray, lost or unwanted dogs and cats, our purpose is to work in partnership with the community to promote health, safety, and well-being. Join the ATCHHSD Director explore the challenges and benefits of providing public health and human services to Austin and Travis County - a population of nearly one million.

**2 PM**

### ***CSI-Public Health: Tackling Emerging Diseases and More in the Laboratory***

(Texas Governor's Room 3.116)

**Susan Neill, Ph.D., M.B.A.**, Director of the Laboratory Services Section, Texas Department of State Health Services; **Eva Perlman, MPH**, Senior Director of Professional Development, Association of Public Health Laboratories (APHL); **David Carpenter Ph.D.**, Southern Illinois University

Did you ever wonder what type of work is done in a public health laboratory? Is it the same as your hospital or doctor's office laboratory? These non-public health laboratories don't track down outbreaks in food, or test for newly recognized organisms, or test for potential bioterrorism agents. Your public health laboratory does all this and more!

**BONUS!** This session will also include information about the APHL and CDC, Emerging Infectious Diseases Fellowship Program and the Master's In Public Health Laboratory Sciences Program at Southern Illinois University.

### ***MRSA: The Making of the Superbug!***

(Quadrangle Room 3.304)

**Todd Bell, M.D.**, Assistant Professor, Texas Tech University, Health Sciences Center, School of Medicine at Amarillo

Methicillin Resistant *Staphylococcus aureus* (MRSA) has become a household word. Come learn about the evolution of a "superbug." We will explore the origins, the media hype and common misconceptions about this bacterium. We will also discuss what is being done to better understand the epidemiology and how MRSA affects the daily practice of a physician.

### **Outbreak I**

#### ***Epidemiologists: Outbreaks Are Our Business!***

(Santa Rita Room 3.502)

#### ***Tracking Down Salmonella in a Rodent Breeding Facility***

**Carol Davis, MSPH**, Epidemiologist, Texas Department of State Health Services Region 7



Most outbreak investigations that require field work start because several people in your community are sick. What happens when the sick people have never been in your community and live on the other side of the United States? In 2006, the Texas Department of State Health Services Region 7 teamed up with the Texas Office of the State Chemist and the Food and Drug Administration to determine if mice and rats from Texas were responsible for several cases of Salmonellosis in people from the Great Lakes region of the US. The presentation will describe this unique investigation and will highlight the importance of creative thinking and collaboration in public health.

### ***Proteins Gone Bad: Prion Disease in Texas***

**Karen Moody, PT, MS**, Creutzfeldt - Jakob Disease Surveillance Coordinator, Texas Department of State Health Services

It is not a virus or a bacterium. It is a 'prion' – an infectious protein which causes sponge-like holes in the brain of both humans and animals. Current theory points to prions as the cause of diseases such as Creutzfeldt-Jakob Disease (CJD), an invariably fatal brain disease in humans. Other diseases believed to be caused by prions include bovine spongiform encephalopathy otherwise known as 'Mad Cow Disease'. We will discuss prions, prion disease and how these diseases affect Texas citizens.

**3 PM**

### ***College Students: What's Going to Get You...and What Can You Do About It?***

(Texas Governor's Room 3.116)

**Vincent Fonseca, M.D., MPH**, Texas State Epidemiologist, Texas Department of State Health Services

Come learn about the most common and serious health issues facing young adults and actions you can take to improve your health- from what to ask for at the doctor's office to what choices can help minimize stress.

### ***One World, One Hope: Frontline Response to the Global AIDS Pandemic***

(Quadrangle Room 3.304)

**Megan Gerson, MPH**, Health Science Specialist, U.S. Agency for International Development, Global Health Bureau, Office of HIV/AIDS, Division of Technical Leadership and Research

The world's largest public health initiative ever dedicated to a single disease is currently underway, and the US government is on the frontlines of the fight against HIV/AIDS. Megan Gerson will discuss the current status of the global AIDS pandemic, how the US government is responding, why fighting AIDS is important to advancing development in many parts of the world, and how YOU can get involved in these historic efforts.

### ***"Beating Back the Devil" The CDC Epidemic Intelligence Service***

(Santa Rita Room 3.502)

**John Su, M.D, Ph.D, MPH**, US Public Health Service; **Richard Taylor, Ph.D.**, US Public Health Service, **Eric Miller, Ph.D., MSPH**, Texas Department of State Health Services Service



Drs. Su, Taylor, and Miller are current or former Epidemic Intelligence Service (EIS) Officers stationed at the Department of State Health Services here in Austin, Texas. They will share some of their experiences working as EIS Officers in Texas and how they came to apply to the EIS program. They will leave time at the end of their talk to address questions about the application process for prospective EIS Officers.

**4 PM**

***Out of Africa: Meds, Mango Leaves and Prayers - Teasing Out Health Choices in the Congo***

(Quadrangle Room 3.304)

**Caitlin Meredith, MPH**, Epidemiologist, Austin Travis County Health and Human Services and Representative of Doctors Without Borders/Medecins Sans Frontieres

Why would children be dying of a disease when they live within walking distance of a health clinic with medicine that could cure it? What happens when foreign doctors and local populations have different names, explanations and cures for the same diseases? Discussions with mamas about how they make decisions about their children's health care in the North and South Kivu provinces in the Democratic Republic of Congo reveals some of the answers.

***Ready to Take the Next Step? Graduate Education in Public Health***

(Texas Governor's Room 3.116)

**Allison Foster, MBA, CAE**, Association of Schools of Public Health; **Matthew Goldshore, B.S.**, George Washington University, School of Public Health and Health Services; **William Harvey, Ph.D.**, Earlham College; **Melvin Monette, M.Ed.**, University of Minnesota, School of Public Health; **Shannon Shelton, MA**, Emory University, Rollins School of Public Health; **Mary Ann Smith, Ph.D.**, UT School of Public Health, Houston; **Michael Ward, M.Ed.**, Johns Hopkins University, Bloomberg School of Public Health

Admissions directors from four Schools of Public Health and representatives of SOPHAS, the public health application service, will tell you everything you need to know about applying to schools of public health, including tips on financial aid, writing an effective personal essay, and how to get prior public health experience. Matt Goldshore, a 2007 UT graduate, will share with you his passion for infectious disease epidemiology and his experiences as a MPH student at George Washington University, including his global epidemiological investigations in Tanzania to prevent mother to child transmission of HIV/AIDS.

***Outbreak II***

***Texas Disease Detectives in Action!***

(Santa Rita Room 3.502)

***Measles in Texas, 2007***

**Rita Espinoza, MPH**, Epidemiologist, Infectious Disease Control Unit, Texas Department of State Health Services



Measles in Texas? I thought there was a vaccine and that everyone was protected. Come here about the importance of vaccines and how measles can easily emerge and the effort needed to control it.

***A Tale of Two Outbreaks: Facing the Challenge of Controlling Norovirus***

**Ella Puga, MPH**, Epidemiologist, Austin/Travis County Health and Human Services Department.

Residents of two separate long-term care facilities experience “stomach flu” illnesses within six weeks. Are these illnesses related? What does the health department do to control outbreaks? This presentation will answer those questions, and hopefully more, by retelling this disease detective story.

**5 PM: KEYNOTE SESSION (TEXAS UNION BALLROOM )**

***Discover Public Health!***

**David Lakey, M.D.**, Commissioner, Texas Department of State Health Services

From 1900 to 2000, the average life expectancy in the United States grew from 47 years to 77 years—an increase of 30 years. Public health improvements were responsible for 25 of those 30 years. Can the field of public health have a dramatic impact on American health and longevity in the coming decades? Come hear Dr. David Lakey, Texas Commissioner of State Health Services, describe the challenges and opportunities of a public health career in the 21st century.

***Origins of HIV: Where, When, Why and How?***

**Joseph B. McCormick, M.D.**, Regional Dean and James Steele Professor, The University of Texas School of Public Health, Brownsville Regional Campus

Have you wondered where HIV lived before it was a human virus and when it became a human virus? Have you wondered how HIV got into the human population in Africa? Or how HIV became epidemic? Or why the epidemic of HIV occurred in 1980's? The answers may surprise you.

***Africa: The Virus Cradle***

**Susan P. Fisher-Hoch, M.D.**, Professor of Epidemiology, University of Texas School of Public Health, Brownsville Regional Campus

The cradle of humanity is also the cradle of viruses. ‘Out of Africa’ has given us not only our genes and phenotype but the pathogens that can feed off them. With the specter of HIV looming over us it is easy to overlook all the other pathogens that originated just where we did, in the warmest and wettest center of the African continent.

We will look at some of these and how they jumped from their native species. Bats are center and front stage, but rodents, mosquitoes, ticks and a whole host of wild animals, right down to kudu are suspects. Nevertheless, we have ourselves most to blame. Many of these pathogens were minding their own business until we invaded their territory with forest destruction and overpopulation. Come and hear more.....



Special Thanks:



Pfizer Public Health and Policy Group



Maryn McKenna



Infectious Awareables



Giant Microbes



The University of Texas Cooperative Society



## APPENDIX 7.2

### Evaluation Instruments





## APPENDIX 7.2.1

### Demographic Evaluation Form: Students





## PARTICIPANT INFORMATION SHEET FOR STUDENTS

We are required to report the following aggregate information on all participants. Please complete this anonymous survey so that we may continue to offer educational courses and/or products.

### PLEASE FILL OUT THIS FORM COMPLETELY.

**Course:** Become a Disease Detective : Discover Public Health! 2008 **Date:** April 1-2, 2008

**Location:** Austin, Texas

*Please mark an X for the single best answer to the following questions. Please complete both sides.*

1. What is your gender?  
☐ Female ☐ Male
2. What is your age?  
☐ Under 20 ☐ 30 - 39 ☐ 50 - 59  
☐ 20 - 29 ☐ 40 - 49 ☐ 60 or older
3. What is your race or ethnicity?  
☐ American Indian or Alaska Native  
☐ Asian or Asian American  
☐ Black or African American  
☐ White  
☐ Hispanic or Latino  
☐ Native Hawaiian or Other Pacific Islander  
☐ Other (specify): \_\_\_\_\_
4. Type of educational institution you attend:  
☐ High School (specify): \_\_\_\_\_  
☐ University:  
☐ University of Texas at Austin  
☐ Texas State University  
☐ Tarleton State University  
☐ Other (specify): \_\_\_\_\_
5. College/School within your university:  
☐ Business  
☐ Communication  
☐ Education  
☐ Engineering  
☐ Kinesiology and Health Education  
☐ Law  
☐ Natural Sciences  
☐ Nursing  
☐ Pharmacy  
☐ Social Work  
☐ Other (specify): \_\_\_\_\_

(OVER)

Office Use Only

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6. Classification: ☐ Undergraduate student: ☐ Freshmen ☐ Sophomore ☐ Junior ☐ Senior

**If you are an undergraduate student, what is your major (Please check all that apply)?**

- |   |   |
|---|---|
| <input type="checkbox"/> Biochemistry                             | <input type="checkbox"/> Engineering (other, please specify)  |
| <input type="checkbox"/> Biology                                  | <input type="checkbox"/> Geology                              |
| <input type="checkbox"/> Biology- Cell and Molecular              | <input type="checkbox"/> Human Development and Family Science |
| <input type="checkbox"/> Biology- Ecology, Evolution and Behavior | <input type="checkbox"/> Math                                 |
| <input type="checkbox"/> Biology-Human Biology                    | <input type="checkbox"/> Math - Applied                       |
| <input type="checkbox"/> Biology- Microbiology                    | <input type="checkbox"/> Math- Statistical                    |
| <input type="checkbox"/> Biology- Teaching                        | <input type="checkbox"/> Nursing                              |
| <input type="checkbox"/> Biology- Honors                          | <input type="checkbox"/> Nursing- Public Health               |
| <input type="checkbox"/> Biostatistics                            | <input type="checkbox"/> Nutrition                            |
| <input type="checkbox"/> Chemistry                                | <input type="checkbox"/> Pharmacy                             |
| <input type="checkbox"/> Computer Science                         | <input type="checkbox"/> Public Health                        |
| <input type="checkbox"/> Ecology                                  | <input type="checkbox"/> Science Education                    |
| <input type="checkbox"/> Engineering-Biomedical                   | <input type="checkbox"/> Other (Please specify): _____        |

☐ Post-baccalaureate student

Graduate student:

☐ University - Graduate field of study (Please specify): \_\_\_\_\_

☐ School of Public Health - Concentration (Please specify): \_\_\_\_\_

☐ Behavioral Sciences /Health Education

☐ Biostatistics

☐ Environmental Health Sciences

☐ Epidemiology

☐ Global Health

☐ Health Policy

☐ International/Global Health

☐ Nutrition

☐ Other (Please specify): \_\_\_\_\_

☐ Health Professions Student:

☐ Allied Health Student

☐ Allopathic Medical Student

☐ Community Health Worker Student

☐ Clinical Laboratory Science

☐ Dentistry Student

☐ Medical Student

☐ Medical Resident

☐ Mental Health Student

☐ Nursing, Advanced Practice, Student

☐ Nursing Student

☐ Osteopathic Medical Student

☐ Pharmacy Student

☐ Physician Assistant Student

☐ Other (Please specify): \_\_\_\_\_

7. If a UT Austin student, are you associated with the following programs:

☐ Dean's Scholars Honor's Program ☐ UTeach

☐ Plan II Honor's Program ☐ Texas Interdisciplinary Plan

☐ Turing Scholars ☐ Bridging Disciplines Program

8. What are your career goals/interests? \_\_\_\_\_

9. How did you hear about the conference?

☐ Advisor

☐ Daily Texan

☐ Banners/Flyers

☐ Friends

☐ Teachers

☐ E-mails

☐ Face Book

☐ Student Organizations

10. Would you like additional information about graduate schools of public health?

If so, please share your e-mail address: \_\_\_\_\_

11. Would you like to have more information about the UT Austin Public Health Internship Program?

If so, please share your e-mail address: \_\_\_\_\_



## APPENDIX 7.2.2

### Demographic Evaluation Form: Non-Students





## PARTICIPANT INFORMATION SHEET FOR NON STUDENTS

We are required to report the following aggregate information on all participants. Please complete this anonymous survey so that we may continue to offer educational courses and/or products.

### PLEASE FILL OUT THIS FORM COMPLETELY.

**Course:** Become a Disease Detective : Discover Public Health! 2008 **Date:** April 1-2, 2008

**Location:** Austin, Texas

*Please mark an X for the single best answer to the following questions. Please complete both sides.*

1. What is your gender? ☐ Female ☐ Male
2. What is your age? ☐ Under 20 ☐ 30 - 39 ☐ 50 - 59  
☐ 20 - 29 ☐ 40 - 49 ☐ 60 or older
3. What is your race or ethnicity?  
☐ American Indian or Alaska Native  
☐ Asian or Asian American  
☐ Black or African American  
☐ White  
☐ Hispanic or Latino  
☐ Native Hawaiian or Other Pacific Islander  
☐ Other (specify): \_\_\_\_\_
4. Which of the following best describes the type of institution where you work or train?  
☐ State Health Department/Jurisdiction  
☐ Local Health Department/Jurisdiction  
☐ Hospital or Community Health Clinic  
☐ College or University ☐ High School  
☐ Law Enforcement/Fire/Emergency Response  
☐ Community-based Organization  
☐ Business  
☐ Other (specify): \_\_\_\_\_
5. Please indicate if you work in any one of these health profession shortage areas. Check only one.  
☐ Does Not Apply  
☐ Health Department  
☐ Community Health Center  
☐ Migrant Health Center  
☐ Health Care for the Homeless  
☐ Public Housing Primary Care  
☐ Rural Health Clinics  
☐ National Health Service Center  
☐ Indian Health Center  
☐ Federally Qualified Health Center  
☐ Designated Ambulatory Practice Sites  
☐ Other (specify): \_\_\_\_\_
6. How long have you worked for your current employer?  
☐ Less than 1 year ☐ 7- 9 years ☐ 13- 15 years  
☐ 1- 3 years ☐ 10- 12 years ☐ 16 years or more  
☐ 4- 6 years
7. Are you responsible for disaster preparedness or emergency response as a part of your job? ☐ Yes ☐ No ☐ Don't Know

Office Use Only

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8. What is your current profession? Select only one profession from among all occupational groups listed.

- ☐ Physician
- ☐ Physician Assistant
- ☐ Nurse, Advanced Practice (Nurse Practitioner, Nurse Midwife)
- ☐ Nurse, RN
- ☐ Nurse, LVN (LPN)
- ☐ Home Health Aide/Medical Assistant
- ☐ Laboratory Professional
- ☐ Dentist
- ☐ Dental Worker (Hygienist, Assistant)
- ☐ Clinical Laboratory Technician
- ☐ Veterinarian
- ☐ Nutritionist/Dietitian
- ☐ Pharmacist
- ☐ Therapist (OT, PT, RT, ST)
- ☐ First Responder (EMT, Fire, Rescue, Hazmat)
- ☐ Psychiatrist
- ☐ Psychologist
- ☐ Mental Health/Substance Abuse Clinician
- ☐ Mental Health/Substance Abuse Counselor
- ☐ Other (specify): \_\_\_\_\_

**Health  
Professions**

- ☐ Biostatistician
- ☐ Bioterrorism Coordinator
- ☐ Community Outreach Field Worker
- ☐ Environmental Engineer (include technician)
- ☐ Environmental Scientist & Specialist
- ☐ Epidemiologist
- ☐ Health Educator/Trainer
- ☐ Health Information Systems/Data Analyst
- ☐ Health Planner/Researcher/Analyst
- ☐ Hospital Administrator/Management
- ☐ Infection Control/Disease Investigator
- ☐ Microbiologist
- ☐ Public Health Laboratory Scientist/Specialist
- ☐ Social Worker
- ☐ Other (specify): \_\_\_\_\_

**Public  
Health  
Professions**

- ☐ Elected Government Official
- ☐ Elected Government Official, Staff Member
- ☐ Emergency Management (FEMA, Civil Defense)
- ☐ Law/Judicial/Attorney
- ☐ Law Enforcement
- ☐ Support Staff (Administrative Assistant, Clerk)
- ☐ Public Information Staff (Media Spokesperson/  
Liaison, PR Staff)

**Other**

- ☐ Teacher/Faculty
- ☐ Other (specify): \_\_\_\_\_
- ☐ Academic Advisor
- ☐ Career Advisor
- ☐ Admissions Officer, School of Public Health
- ☐ Exhibitor, School of Public Health
- ☐ Exhibitor, Other (specify): \_\_\_\_\_

*Thank you for taking a few moments to complete this information sheet.*



## APPENDIX 7.2.3

### Supplemental Evaluation: Faculty-Advisor Luncheon





***Become A Disease Detective: Discover Public Health!***  
***Advisors' Luncheon Survey April 1, 2008***

1. I am a faculty member \_\_\_\_ academic advisor \_\_\_\_ career advisor \_\_\_\_ other \_\_\_\_

2. I teach/advise students at (College or University) \_\_\_\_\_

What majors do you teach/advise?

---



---

3. How knowledgeable do you think your students are about public health?

1	2	3	4	5
Not knowledgeable			Very Knowledgeable	

Please comment about why you responded as you did.

4. Do you plan to attend the scientific presentations on April 2nd? Yes No

If so, which presentations are of most interest to you?

12 pm One World, One Goal: Optimal Health for All \_\_\_\_

1 pm: Out of Africa: HIV and the MDR Epidemic: The Perfect Storm \_\_\_\_  
 Women in Medicine – Women in Public Health \_\_\_\_  
 Public Health: Austin, Texas! \_\_\_\_

2 pm: MRSA: The Making of a Superbug! \_\_\_\_  
 Outbreak I Epidemiologists: Outbreaks Are Our Business \_\_\_\_  
 CSI: Public Health – Tackling Emerging Diseases and More in the Laboratory \_\_\_\_

3 pm One World, One Hope: Frontline Response to the Global AIDS Pandemic \_\_\_\_  
 "Beating Back the Devil" - The CDC Epidemic Intelligence Service \_\_\_\_  
 College Students: What's going to Get you...and What Can you Do about It? \_\_\_\_

4 pm Out of Africa: Meds, Mango Leaves and Prayers – Teasing Out Health Choices in the Congo \_\_\_\_  
 Outbreak II Medical Epidemiology: Disease Detectives in Action! \_\_\_\_  
 Ready to Take the Next Step? Graduate Education in Public Health \_\_\_\_

5 pm Keynote Session  
 Discover Public Health! \_\_\_\_  
 Origins of HIV: Where, When, Why and How? \_\_\_\_  
 Africa the Virus Cradle \_\_\_\_

5. Do you plan to attend the conference exhibits on April 2nd? Yes No

If so, which exhibits/activities are of most interest to you?

Graduate Schools of Public Health \_\_\_\_  
 Public Health Organizations \_\_\_\_  
 Information Resources Center \_\_\_\_  
 Meet a Public Health professional corner \_\_\_\_  
 Pfizer Milestones Exhibit \_\_\_\_



6. Have you visited the conference website?      Yes      No

Comments about the website\_\_\_\_\_

**7. My knowledge about the field of public health prior to attending the Faculty-Advisor Luncheon was**

1 2 3 4 5

Not knowledgeable Very Knowledgeable

Please comment about why you responded as you did.

**8. It was valuable to me to attend a luncheon with public health professionals.**

1 2 3 4 5

Not valuable Very Valuable

Please comment about why you responded as you did.

9. The featured presentation XXXXXX at the luncheon was informative and increased my understanding of the field of public health.

1                  2                  3                  4                  5

Strongly disagree    Strongly agree

Please comment about why you responded as you did.

10. The featured presentation at the luncheon increased my understanding of the educational pathways that lead to a career in public health.

Yes      No

Please explain \_\_\_\_\_

Strongly disagree                      Strongly agree

1                  2                  3                  4                  5

Please comment about why you responded as you did.



**11. I will use what I learned today to help me advise students about public health as a career choice.**

1

2

3

4

5

Strongly disagree

Strongly agree

Please comment about why you responded as you did.

**12. Do you have any other comments about today's presentation?**

**13. Do you have any suggestions for future presentations?**



## APPENDIX 7.2.4

### Supplemental Evaluation: Faculty-Advisor Breakfast





***Become A Disease Detective: Discover Public Health!***  
***Faculty and Advisor Breakfast Survey April 2, 2008***

1. I am a faculty member \_\_\_\_ academic advisor \_\_\_\_ career advisor \_\_\_\_ other \_\_\_\_

2. I teach/advise students at (College or University)\_\_\_\_\_

What majors do you teach/advise?

---



---

3. How knowledgeable do you think your students are about public health?

1	2	3	4	5
Not knowledgeable			Very Knowledgeable	

Please comment about why you responded as you did.

4. Do you plan to attend the scientific presentations on April 2nd? Yes No

If so, which presentations are of most interest to you?

12 pm One World, One Goal: Optimal Health for All \_\_\_\_

1 pm: Out of Africa: HIV and the MDR Epidemic: The Perfect Storm \_\_\_\_  
 Women in Medicine – Women in Public Health \_\_\_\_  
 Public Health: Austin, Texas! \_\_\_\_

2 pm: MRSA: The Making of a Superbug! \_\_\_\_  
 Outbreak I Epidemiologists: Outbreaks Are Our Business \_\_\_\_  
 CSI: Public Health – Tackling Emerging Diseases and More in the Laboratory \_\_\_\_

3 pm One World, One Hope: Frontline Response to the Global AIDS Pandemic \_\_\_\_  
 "Beating Back the Devil" - The CDC Epidemic Intelligence Service \_\_\_\_  
 College Students: What's going to Get you...and What Can you Do about It? \_\_\_\_

4 pm Out of Africa: Meds, Mango Leaves and Prayers – Teasing Out Health Choices in the Congo \_\_\_\_  
 Outbreak II Medical Epidemiology: Disease Detectives in Action! \_\_\_\_  
 Ready to Take the Next Step? Graduate Education in Public Health \_\_\_\_

5 pm Keynote Session  
 Discover Public Health! \_\_\_\_  
 Origins of HIV: Where, When, Why and How? \_\_\_\_  
 Africa the Virus Cradle \_\_\_\_

5. Do you plan to attend the conference exhibits on April 2nd? Yes No

If so, which exhibits/activities are of most interest to you?

Graduate Schools of Public Health \_\_\_\_  
 Public Health Organizations \_\_\_\_  
 Information Resources Center \_\_\_\_  
 Meet a Public Health professional corner \_\_\_\_  
 Pfizer Milestones Exhibit \_\_\_\_



6. Have you visited the conference website?      Yes      No

Comments about the website \_\_\_\_\_

7. My knowledge about the graduate education in public health prior to attending the Faculty-Advisor breakfast was

1	2	3	4	5
Not knowledgeable			Very Knowledgeable	

Please comment about why you responded as you did.

8. The featured presentation about graduate education in public health was informative and increased my understanding of educational pathways in public health.

1	2	3	4	5
Strongly disagree			Strongly agree	

Please comment about why you responded as you did.

9. My knowledge about undergraduate education in public health prior to attending the Faculty-Advisor breakfast was

1	2	3	4	5	6
Not knowledgeable			Very Knowledgeable		Did not attend this session

Please comment about why you responded as you did.

10. The featured presentation about undergraduate education in public health at the breakfast was informative and increased my understanding of educational pathways in public health.

1	2	3	4	5	6
Strongly disagree			Strongly agree		Did not attend this session

Please comment about why you responded as you did.



**11. I will use what I learned today to help advise my students about educational pathways in public health.**

1

2

3

4

5

Strongly disagree

Strongly agree

Please comment about why you responded as you did.

**12. Do you have any other comments about today's presentation(s)?**

**13. Would you like additional information about graduate (please circle) or undergraduate (please circle) education in public health?**

If so, please provide us with your name and e-mail address (PLEASE PRINT):

Name: \_\_\_\_\_

E-mail; \_\_\_\_\_

**14. Do you have any suggestions for future presentations?**



## APPENDIX 7.2.5

### Supplemental Evaluation: Scientific Conference





# EVALUATION FOR STUDENTS (FACULTY/ADVISORS FILL OUT THE OTHER SIDE!)

\*\*\*\*\*

**Please fill in the information that applies to you:**

I AM A **UNIVERSITY STUDENT** AT \_\_\_\_\_  
(Name of university)

I AM A FRESHMAN SOPHOMORE JUNIOR SENIOR (Please circle)

MY MAJOR IS \_\_\_\_\_

I AM A **HIGH SCHOOL STUDENT** AT \_\_\_\_\_  
(Name of High School)

I AM A FRESHMAN SOPHOMORE JUNIOR SENIOR (Please circle)

I AM INTERESTED IN STUDYING \_\_\_\_\_

\*\*\*\*\*

**Please answer the following:**

1. The presentations by the keynote speaker and career panel were informative and they increased my understanding about the field of public health.

1	2	3	4	5
strongly disagree				strongly agree

2. Visiting the exhibits increased my understanding about career opportunities in public health.

1	2	3	4	5
strongly disagree				strongly agree

**Please give us your comments:**

3. The most valuable part of this event to me was:

4. I would like to have more information about \_\_\_\_\_.

To receive a response please contact Dr. Leanne Field (field@mail.utexas.edu) or include your name and e-mail address here \_\_\_\_\_.



# EVALUATION FOR FACULTY MEMBERS, ADVISORS, AND OTHER ATTENDEES (STUDENTS – FILL OUT THE OTHER SIDE!)

\*\*\*\*\*

**Please fill in the information that applies to you:**

I AM UNIVERSITY/COLLEGE FACULTY MEMBER - I TEACH \_\_\_\_\_.  
(course(s))

I AM A UNIVERSITY/COLLEGE ADVISOR - I ADVISE STUDENTS IN \_\_\_\_\_.  
(discipline)

I AM A HIGH SCHOOL FACULTY MEMBER \_\_\_\_\_. I TEACH \_\_\_\_\_.  
(course(s))

I AM A HIGH SCHOOL ADVISOR. I ADVISE STUDENTS IN \_\_\_\_\_.  
(discipline)

OTHER ATTENDEES \_\_\_\_\_.  
(PLEASE LIST YOUR PROFESSIONAL AREA)

\*\*\*\*\*

**Please answer the following:**

1. The presentations by the keynote speaker and career panel were informative and they increased my understanding about the field of public health.

1	2	3	4	5
strongly disagree				strongly agree

2. Visiting the exhibits increased my understanding about career opportunities in public health.

1	2	3	4	5
strongly disagree				strongly agree

3. The information I received today will be useful to me in my teaching/ advising/ or professional activities.

1	2	3	4	5
strongly disagree				strongly agree

**Please give us your comments:**

4. How will you use the information you received by attending this event?
5. Please give us comments about the value of this event to you and your suggestions for future events.



## APPENDIX 7.2.6

### Post-Conference Evaluation: Faculty and Advisors





## 1. Disease Detective 08 Post Conference Evaluation for Advisors and Faculty

Thank you so much for taking the time to respond to the following questions about the Disease Detective Conference activities. Your input will be included in the final report to the CDC Office of Workforce and Career Development and will help us secure funding for a future conference. Your free responses in the comments sections are especially valuable to us!

### \* 1. Please provide your contact information.

First Name:

Last Name:

Organization:

Email Address:

Phone Number:

### 2. Which of the following events did you attend or participate in:

- ☐ April 1, 11:30 AM - 1:00 PM: Faculty and Advisor Luncheon with Public Health Professionals: Global Health at Home and Abroad
- ☐ April 1, 3 pm - Tour of the Lady Bird Johnson Wildflower Center
- ☐ April 1, 5:00 PM - Dinner at the County Line Restaurant
- ☐ April 2, 7:45 AM - 9:00 AM: Faculty and Advisor Breakfast: Graduate Schools of Public Health - What Students Need to Know!
- ☐ April 2, 9:00 AM - 9:30 AM: Presentation about Undergraduate Public Health Education
- ☐ April 2, 12:00 PM - 6:30 PM - Scientific Conference

### 3. I am affiliated with

- ☐ an undergraduate educational institution
- ☐ a graduate educational institution
- ☐ Other (please specify)

### \* 4. I am a (check all that apply):

- ☐ Faculty member
- ☐ Academic advisor
- ☐ Health professions advisor
- ☐ Career advisor
- ☐ Other (please specify job title)



## 5. I teach/advise for:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> All majors             | <input type="checkbox"/> Kinesiology and Health Education | <input type="checkbox"/> Public Health |
| <input type="checkbox"/> Business               | <input type="checkbox"/> Law                              | <input type="checkbox"/> Public Policy |
| <input type="checkbox"/> Communications         | <input type="checkbox"/> Natural Sciences                 | <input type="checkbox"/> Social Work   |
| <input type="checkbox"/> Education              | <input type="checkbox"/> Nursing                          |  |
| <input type="checkbox"/> Engineering            | <input type="checkbox"/> Pharmacy                         |  |
| <input type="checkbox"/> Other (please specify) |   |  |

## 6. The major fields/areas that I teach/advise (check all that apply):

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> All majors                                | <input type="checkbox"/> Epidemiology                          | <input type="checkbox"/> Nursing  |
| <input type="checkbox"/> Anatomy and Physiology                    | <input type="checkbox"/> Health Communications                 | <input type="checkbox"/> Nursing - Public Health  |
| <input type="checkbox"/> Biochemistry                              | <input type="checkbox"/> Health Education                      | <input type="checkbox"/> Nutrition  |
| <input type="checkbox"/> Biological Sciences                       | <input type="checkbox"/> Health Professions                    | <input type="checkbox"/> Parasitology   |
| <input type="checkbox"/> Biology - Cell and Molecular              | <input type="checkbox"/> Health Promotion and Fitness          | <input type="checkbox"/> Pathophysiology  |
| <input type="checkbox"/> Biology - Ecology, Evolution and Behavior | <input type="checkbox"/> Human Development and Family Sciences | <input type="checkbox"/> Pharmacy   |
| <input type="checkbox"/> Biology - Human Biology                   | <input type="checkbox"/> Immunology                            | <input type="checkbox"/> Pre-Health Professions   |
| <input type="checkbox"/> Biology - Neurobiology                    | <input type="checkbox"/> Immunohematology                      | <input type="checkbox"/> Pre-dental   |
| <input type="checkbox"/> Biology - Teaching                        | <input type="checkbox"/> Infectious Diseases                   | <input type="checkbox"/> Pre-medical  |
| <input type="checkbox"/> Biostatistics                             | <input type="checkbox"/> Kinesiology                           | <input type="checkbox"/> Pre-pharmacy   |
| <input type="checkbox"/> Chemistry                                 | <input type="checkbox"/> Law                                   | <input type="checkbox"/> Pre-veterinarian   |
| <input type="checkbox"/> Child/Family Health                       | <input type="checkbox"/> Mathematics                           | <input type="checkbox"/> Psychology   |
| <input type="checkbox"/> Clinical Laboratory Science               | <input type="checkbox"/> Mathematics - Applied                 | <input type="checkbox"/> Public Health  |
| <input type="checkbox"/> Computer Science                          | <input type="checkbox"/> Mathematics - Statistical             | <input type="checkbox"/> Public Health - Biostatistics                                  |
| <input type="checkbox"/> Ecology                                   | <input type="checkbox"/> Mathematics and Science Teaching      | <input type="checkbox"/> Public Health - Environmental and Occupational Health Sciences |
| <input type="checkbox"/> Economics                                 | <input type="checkbox"/> Medical Microbiology                  | <input type="checkbox"/> Public Health - Epidemiology                                   |
| <input type="checkbox"/> Engineering                               | <input type="checkbox"/> Microbiology                          | <input type="checkbox"/> Public Health - Health Promotion and Behavioral Sciences       |
| <input type="checkbox"/> Engineering - Biomedical                  | <input type="checkbox"/> Natural Sciences                      | <input type="checkbox"/> Public Health - Management, Policy, and Community Health       |
| <input type="checkbox"/> Environmental Health                      | <input type="checkbox"/> Neuroscience                          | <input type="checkbox"/> Science Education  |
| <input type="checkbox"/> Emerging Infectious Diseases              | <input type="checkbox"/> Non-Science Majors                    | <input type="checkbox"/> Social Work  |
| <input type="checkbox"/> Other (please specify)                    |  |   |



**7. At UT Austin, I am associated with the following programs:**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Bridging Disciplines Programs                     | <input type="checkbox"/> First Year Interest Groups (FIGS) | <input type="checkbox"/> Texas Interdisciplinary Plan |
| <input type="checkbox"/> Dean's Scholars Honor Program                     | <input type="checkbox"/> Freshman Research Initiative      | <input type="checkbox"/> UTeach                       |
| <input type="checkbox"/> Division of Diversity and Community Engagement    | <input type="checkbox"/> International Study/Study Abroad  | <input type="checkbox"/> Women in Natural Sciences    |
| <input type="checkbox"/> Division of Statistics and Scientific Computation | <input type="checkbox"/> Multicultural Academic Initiative |   |
| <input type="checkbox"/> Emerging Scholars                                 | <input type="checkbox"/> Plan II Honors Program            |   |
| <input type="checkbox"/> Other (please specify)                            |  |   |

**8. Did you attend the Faculty-Advisor Luncheon on April 1st?**

- ☐ Yes
- ☐ No

**9. Information about public health workforce shortages and global public health was presented at the luncheon. My knowledge about these topics was increased as a result of attending the luncheon.**

- ☐ 1 (Strongly disagree)
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 (Strongly agree)

Please comment about why you responded as you did.

**10. Did you attend the Faculty-Advisor Breakfast on April 2nd?**

- ☐ Yes
- ☐ No

**11. At the breakfast, I attended the presentation "Graduate Schools of Public Health: What Students Need to Know!"**

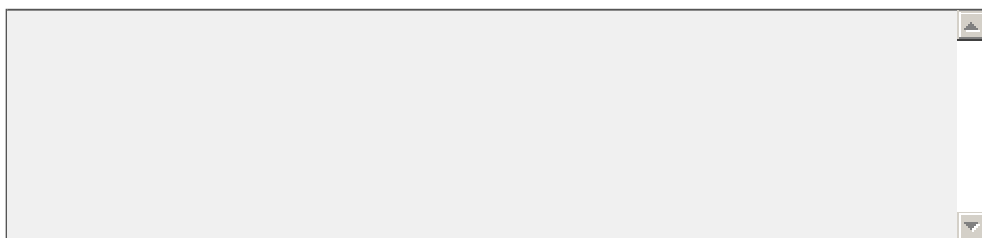
- ☐ Yes
- ☐ No



**12. The presentation "Graduate Schools of Public Health: What Students Need to Know!" increased my understanding of graduate education in public health.**

- ☐ 1 (Strongly disagree)
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 (Strongly agree)

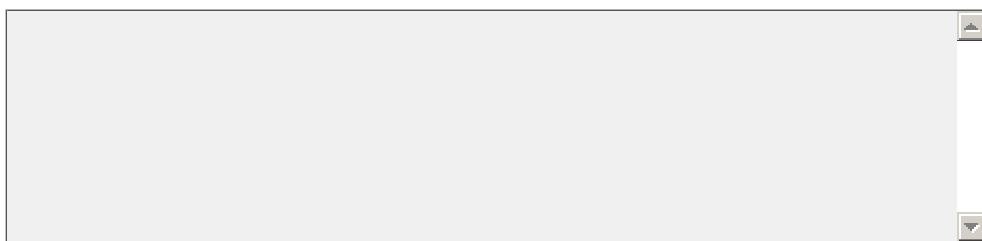
Please comment about why you responded as you did.



**13. I have used the knowledge I gained at the presentation "Graduate Schools of Public Health: What Students Need to Know!" to help advise students.**

- ☐ 1 (Strongly disagree)
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 (Strongly agree)

Please comment about why you responded as you did.



**14. At the breakfast, I attended the presentation "Undergraduate Public Health Education."**

- ☐ Yes
- ☐ No



**15. The presentation "Undergraduate Public Health Education" increased my understanding of undergraduate education in public health.**

- ☐ 1 (Strongly disagree)
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 (Strongly agree)

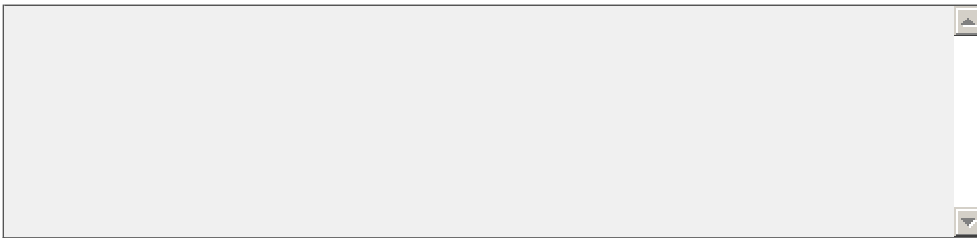
Please comment about why you responded as you did.



**16. I have used the knowledge I gained at the presentation "Undergraduate Public Health Education" to help advise students.**

- ☐ 1 (Strongly disagree)
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 (Strongly agree)

Please comment about why you responded as you did.

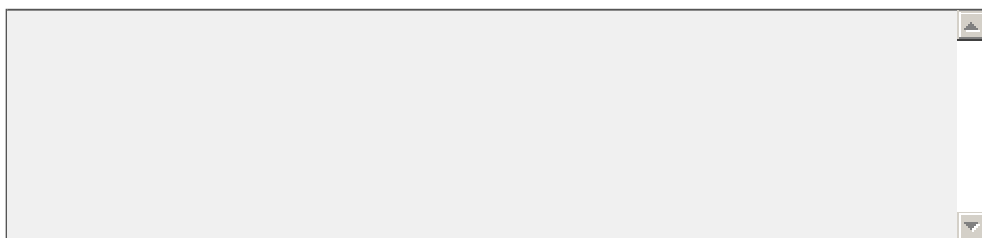




**17. I have used the resources I received at the Faculty-Advisor Luncheon and/or Breakfast to help advise students.**

- ☐ 1 (Strongly disagree)
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 (Strongly agree)

Please comment on how you have used these resources.



**18. Did you attend the Scientific Conference on April 2, 2008?**

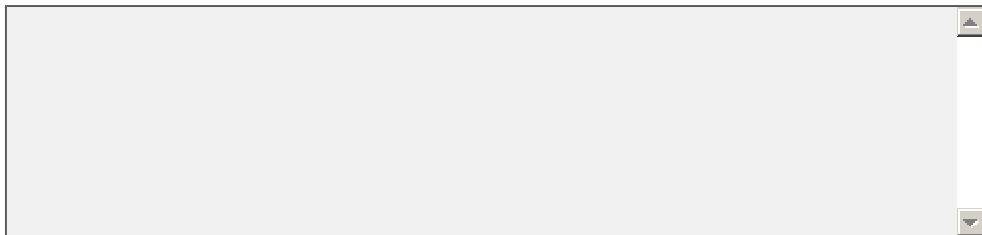
- ☐ Yes
- ☐ No

**19. Which scientific presentation did you attend?**

- ☐ One World, One Goal: Optimal Health for All by Eduardo Sanchez (Noon/Quadrangle Room)
- ☐ HIV and the MDR Epidemic: The Perfect Storm? by Laura Podewils (1 pm/Quadrangle Room)
- ☐ Public Health: Austin, Texas! by David Lurie (1 pm/Santa Rita Room)
- ☐ Women in Medicine- Women in Public Health! by Susan Penfield and Linda Dooley (1 pm/Governor's Room)
- ☐ MRSA: The Making of a Superbug! by Todd Bell (2 pm/Quadrangle Room)
- ☐ Outbreak I: Epidemiologists- Outbreaks Are Our Business! by Carol Davis and Karen Mooday (2 pm/Santa Rita Room)
- ☐ CSI: Public Health- Tackling Emerging Diseases and More in the Laboratory by Susan Neill, Eva Perlman and David Carpenter (2 pm/Governor's Room)
- ☐ One World, One Hope: Frontline Response to the Global AIDS Pandemic by Megan Gerson (3 pm/Quadrangle Room)
- ☐ "Beating Back the Devil"- The CDC Epidemic Service by John Su, Richard Taylor and Eric Miller (3pm/Santa Rita Room)
- ☐ College Students: What's Going to Get You... and What Can You Do About It? by Vince Fonseca (3pm/Governor's Room)
- ☐ Meds, Mango Leaves and Prayers- Teasing Out Health Choices in the Congo by Caitlin Meredith (4 pm/Quadrangle Room)
- ☐ Outbreak II: Texas Disease Detectives in Action! by Rita Espinoza and Ella Puga (4 pm/Santa Rita Room)
- ☐ Ready to Take the Next Step? Graduate Education in Public Health by Allison Foster, Matthew Goldshore, William Harvey, Melvin Monette, Mary Ann Smith and Michael Ward (4 pm/Governor's Room)
- ☐ Keynote Session: Origins of HIV: Where, When, Why and How? by Joseph McCormick (5 pm/Texas Union Ballroom)
- ☐ Keynote Session: Africa: The Virus Cradle by Susan Fisher-Hoch (5 pm/ Texas Union Ballroom)



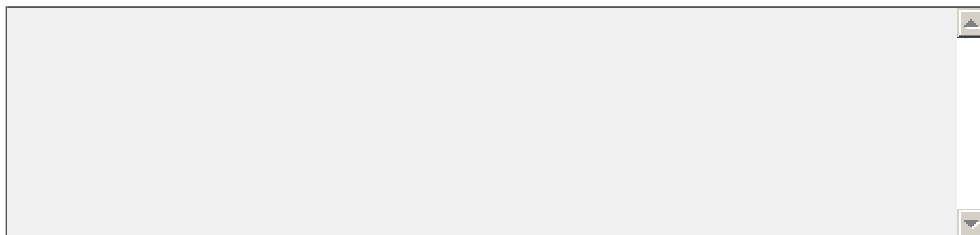
**20. Which scientific presentations were of most value to you and why?**

A large rectangular text area with a light gray background and a vertical scrollbar on the right side.

**21. Attending the scientific presentations increased my understanding of the field of public health.**

- ☐ 1 (Strongly disagree)
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 (Strongly agree)

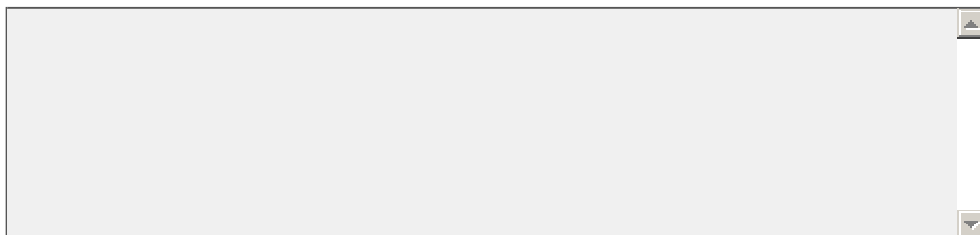
Please comment about why you responded as you did.

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**22. I have used what I learned at the scientific presentations to advise my students about the field of public health.**

- ☐ 1 (Strongly disagree)
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 (Strongly agree)

Please comment about why you responded as you did.

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**23. Did you attend the conference exhibits on April 2, 2008 in the Texas Union Ballroom and outside of Flawn Academic Center?**

- ☐ Yes
- ☐ No



## 24. Which exhibits did you visit?

- ☐ Graduate Schools of Public Health
- ☐ Public Health Organizations
- ☐ Meet A Public Health Professional Corner
- ☐ Training Programs (Emerging Infectious Disease Fellowship Program, CDC EIS Program, CDC Apprenticeship Program, UT Austin Public Health Internship Program)
- ☐ Information Resources Center
- ☐ Pfizer Milestones in Public Health Exhibit
- ☐ Mobile Analytical Laboratory System (6th WMD Civil Support Team)

Other (please specify)

## 25. Which exhibits were of most value to you and why?

## 26. I have used the resources I received at the Exhibits to help advise students about public health.

- ☐ 1 (Strongly disagree)
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 (Strongly agree)

Please comment on how you have used these resources.

## 27. Did you receive a book bag and the following books from the Pfizer Public Health and Policy Group?

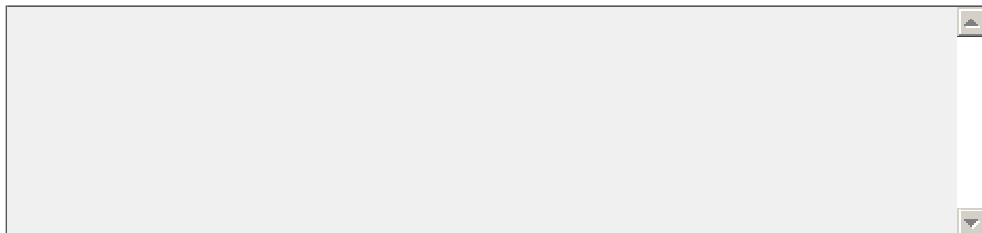
- ☐ Milestones in Public Health
- ☐ Advancing Healthy Populations: The Pfizer Guide to Careers in Public Health
- ☐ Moments in Leadership: Case Studies in Public Health Policy and Practice



**28. I have used the information from the Pfizer books to help advise my students.**

- ☐ 1 (Strongly disagree)
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 (Strongly agree)

Please comment on how you have used these resources.



**29. Did you visit the conference website ([www.sbs.utexas.edu/diseasedetective](http://www.sbs.utexas.edu/diseasedetective))?**

- ☐ Yes
- ☐ No

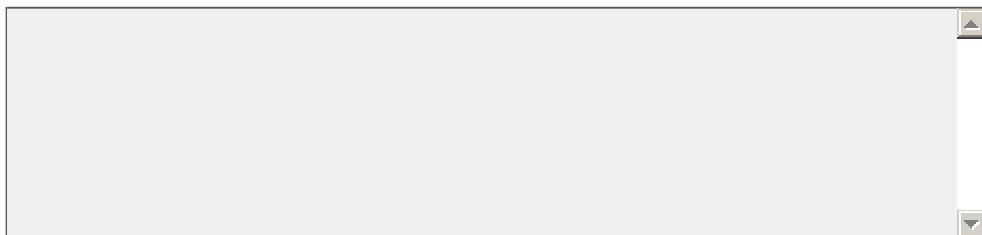
**30. If you visited the website, do you have any comments?**



**31. Attending this conference increased my understanding about the field of public health and the educational pathways that lead to public health careers.**

- ☐ 1 (Strongly disagree)
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 (Strongly agree)

Please comment on why you responded as you did.





**32. I have used what I learned at the conference to advise my students about the field of public health and the educational pathways that lead to public health careers.**

- ☐ 1 (Strongly disagree)
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 (Strongly agree)

Please comment on why you responded as you did.

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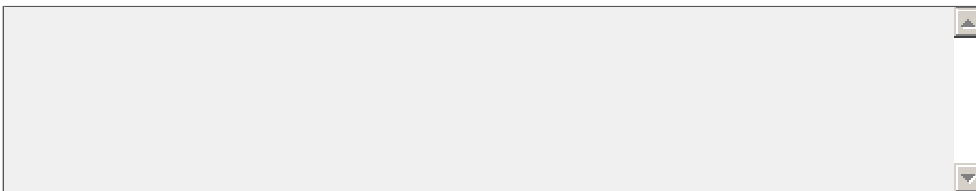
**33. Would you like to have access to or receive conference videotapes....**

- ☐ on the web?
- ☐ as CDs or DVDs?
- ☐ Either?

**34. We have held one Disease Detective Conference in the Fall and two in the Spring. Do you have a preference for attending the conference in the ...**

- ☐ Fall
- ☐ Spring
- ☐ Either Fall or Spring

Please comment on why you responded as you did.

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**35. Do you have any final thoughts about the 2008 "Become A Disease Detective: Discover Public Health Conference?"**

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**36. Do you have any suggestions about how to make future conferences more educational and useful to you?**

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## APPENDIX 7.2.7

### Post-Conference Evaluation: Exhibitors





## 1. Disease Detective 08 Post Conference Evaluation for Exhibitors

Thank you so much for taking the time to respond to the following questions about the Disease Detective Conference activities. Your input will be included in the final report to the CDC Office of Workforce and Career Development and will help us secure funding for a future conference. Your free responses in the comments sections are especially valuable to us!

### \* 1. Please provide your contact information.

First Name:

Last Name:

Job Title:

Organization:

Email Address:

Phone Number:

### 2. I am affiliated with a

- ☐ school of public health or a graduate program in public health
- ☐ UT Austin undergraduate program
- ☐ UT Austin graduate program
- ☐ professional public health organization
- ☐ federal government program or agency
- ☐ state government program or agency
- ☐ city/county government program or agency
- ☐ Other (please specify)

### 3. Besides exhibiting, did you have the opportunity to attend any of the other conference activities?

- ☐ April 1, 11:30 AM - 1:00 PM: Faculty and Advisor Luncheon with Public Health Professionals: Global Health at Home and Abroad
- ☐ April 1, 3 pm - Tour of the Lady Bird Johnson Wildflower Center
- ☐ April 1, 5:00 PM - Dinner at the County Line Restaurant
- ☐ April 2, 7:45 AM - 9:00 AM: Faculty and Advisor Breakfast: Graduate Schools of Public Health - What Students Need to Know!
- ☐ April 2, 9:00 AM - 9:30 AM: Presentation about Undergraduate Public Health Education
- ☐ April 2, 12:00 PM - 6:30 PM - Scientific Presentations

### 4. Did you serve as a conference speaker?

- ☐ Yes
- ☐ No



**5. Would you be willing to be a speaker at a future Disease Detective conference?**

- ☐ Yes
- ☐ No
- ☐ I don't know at this time

**6. If so, what topic would you like to present?**

**7. I used the conference website ([www.sbs.utexas.edu/diseasedetective](http://www.sbs.utexas.edu/diseasedetective)) for**

- ☐ Directions
- ☐ Parking Information
- ☐ Hotel Accomodations
- ☐ Exhibit Hall Location
- ☐ List of Exhibitors
- ☐ Program
- ☐ I did not use the conference website

Do you have any comments about or suggestions for the conference website?

**8. Was exhibitor registration convenient for you?**

- ☐ Yes
- ☐ No

Please provide us with comments or suggestion about how we might improve the registration process.

**9. Was exhibitor set up convenient for you?**

- ☐ Yes
- ☐ No

Please provide us with comments or suggestion about how we might improve the registration process.

**10. The exhibits were open in the afternoon from 12 pm - 5 pm and from 6:30 pm - 7:30 pm (after the Keynote Session). I participated in the exhibits from...**

- ☐ 12pm - 5pm
- ☐ 6:30pm - 7:30pm



**11. During which hours did you see the most students?**

- ☐ 12pm - 1pm
- ☐ 1pm - 2pm
- ☐ 2pm - 3pm
- ☐ 3pm - 4pm
- ☐ 4pm - 5pm
- ☐ 6:30pm - 7:30pm
- ☐ Unsure

**12. We included an evening exhibit time to accomodate students who might not have been able to attend during the afternoon. Do you recommend that we continue the evening exhibit time at the next conference?**

- ☐ Yes
- ☐ No
- ☐ Unsure

Please comment about why you responded as you did.

**13. Did the refreshments provided during the exhibit hours meet your needs?**

- ☐ Yes
- ☐ No
- ☐ I did not visit the refreshment area.

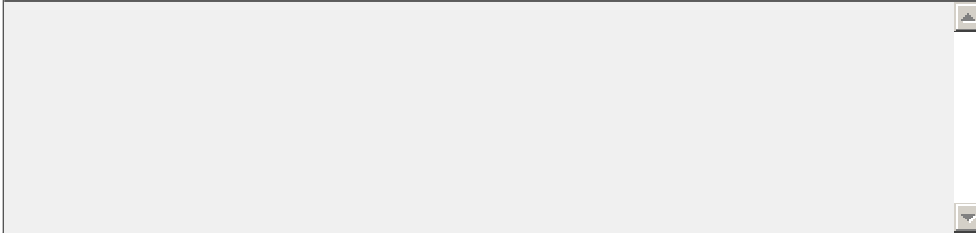
Please comment on why you responded as you did.



**14. Students were actively involved in all aspects of the conference. I received good student support in the exhibit hall.**

- ☐ 1 Strongly disagree
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 Strongly agree

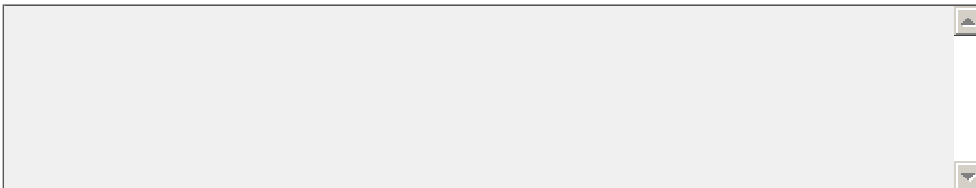
Can you please comment about the student support you received or suggest ways that students could better assist you next time?

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**15. Exhibiting at the Disease Detective conference was a positive experience for me.**

- ☐ 1 (Strongly disagree)
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 (Strongly agree)

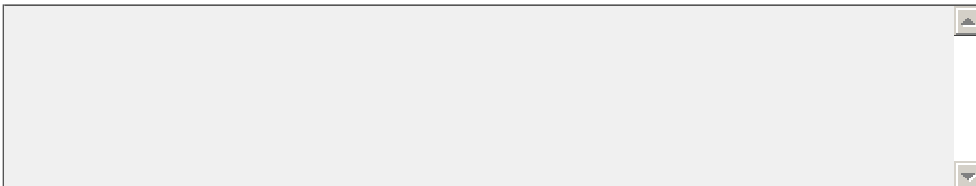
Please comment on why you responded as you did.

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**16. Exhibiting at the Disease Detective conference was valuable to my organization.**

- ☐ 1 (Strongly disagree)
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 (Strongly agree)

Please comment on why you responded as you did.

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**17. I would recommend that other programs and organizations exhibit at the Disease Detective conference.**

- ☐ 1 (Strongly disagree)
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 (Strongly agree)

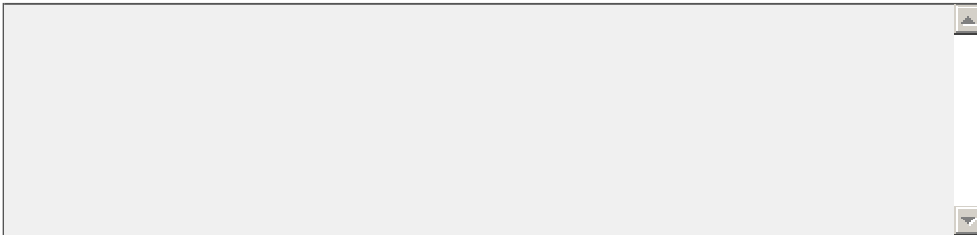
Please comment on why you responded as you did.



**18. The University of Texas at Austin places a high priority on diversity. The population of students I met at the Disease Detective Conference was ethnically and racially diverse.**

- ☐ 1 Strongly disagree
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 Strongly agree

Please comment on why you responded as you did.





**19. Many students in the College of Natural Sciences would like to pursue a health-related career. The students I met at the Disease Detective Conference were interested in learning more about public health as a career option.**

- ☐ 1 Strongly disagree
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 Strongly agree

Please comment on why you responded as you did.



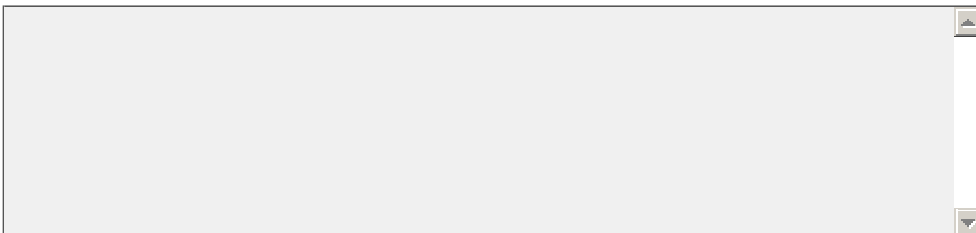
**20. One of my goals in exhibiting at the conference was to recruit students to apply to public health programs or fellowships offered by my organization.**

- ☐ Yes
- ☐ No

**21. If so, the Disease Detective conference was a good venue for presenting my public health programs to students.**

- ☐ 1 Strongly disagree
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 Strongly agree

Please comment on why you responded as you did.





**22. I have had successful follow-up contacts with students since the Disease Detective conference.**

- ☐ Yes
- ☐ No
- ☐ Unsure

Please comment on why you responded as you did. We would value your suggestions about ways to increase student follow-up contact.



**23. We have held one Disease Detective Conference in the Fall and two in the Spring. Do you have a preference for attending the conference in the ...**

- ☐ Fall
- ☐ Spring
- ☐ Either Fall or Spring

Please list a month or months that work best for you.



**24. Would you like to have access to or receive conference videotapes....**

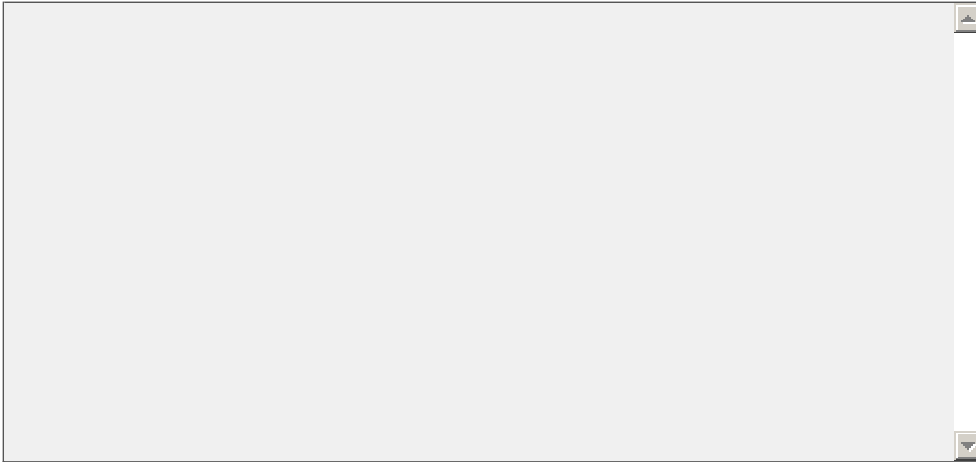
- ☐ on the web?
- ☐ as CDs or DVDs?
- ☐ Either?



**25. The goals of this conference were to educate university students, faculty and advisors about the dynamic field of public health and to encourage students to consider public health careers. From your perspective, was the conference an effective way to meet these goals?**

- ☐ 1 Strongly disagree
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 Strongly agree

Please comment on why you responded as you did.

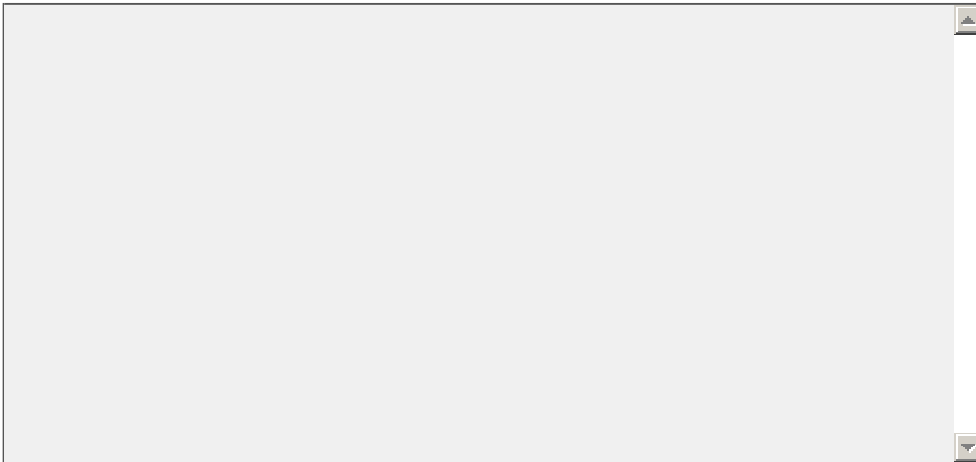
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**26. A primary focus of the CDC Office of Workforce and Career Development is to develop the next generation of public health professionals in order to meet public health workforce shortages and current and emerging health promotion and protection priorities. From your perspective, was this conference an effective way to contribute to the development of the future public health workforce?**

- ☐ 1 Strongly disagree
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 Strongly agree

Please comment on why you responded as you did.

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**27. Do you have any final thoughts or comments about the 2008 "Become A Disease Detective: Discover Public Health Conference?"**

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**28. Do you have any suggestions about how to make future Disease Detective conferences more valuable to you?**

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## APPENDIX 7.2.8

### Post-Conference Evaluation: Speakers





## 1. Disease Detective 08 Post Conference Evaluation for Speakers

Thank you so much for taking the time to respond to the following questions about your experience as a speaker at the 2008 Disease Detective Conference. Your input will be included in the final report to the CDC Office of Workforce and Career Development and will help us secure funding for a future conference. Your free responses in the comments sections are especially valuable to us!

### \* 1. Please provide your contact information.

First Name:

Last Name:

Job Title:

Organization:

Email Address:

Phone Number:

### 2. In addition to being a speaker, which of the following events did you attend or participate in?

- ☐ April 1, 11:30 AM - 1:00 PM: Faculty and Advisor Luncheon with Public Health Professionals: Global Health at Home and Abroad
- ☐ April 1, 3 pm - Tour of the Lady Bird Johnson Wildflower Center
- ☐ April 1, 5:00 PM - Dinner at the County Line Restaurant
- ☐ April 2, 7:45 AM - 9:00 AM: Faculty and Advisor Breakfast: Graduate Schools of Public Health - What Students Need to Know!
- ☐ April 2, 9:00 AM - 9:30 AM: Presentation about Undergraduate Public Health Education

### 3. I am affiliated with a

- ☐ graduate educational institution or school of public health
- ☐ federal agency
- ☐ state agency
- ☐ city/county agency
- ☐ public health organization
- ☐ Other (please specify)



**4. Speaking at the 2008 Disease Detective Conference was a positive experience for me.**

- ☐ 1 Strongly disagree
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 Strongly agree

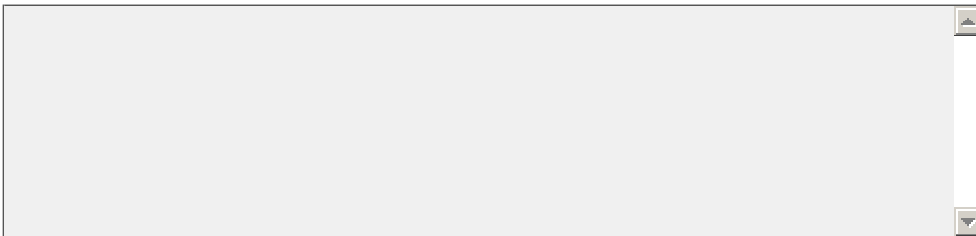
Please comment why you responded as you did.

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**5. Speaking at the 2008 Disease Detective Conference was valuable for my organization.**

- ☐ 1 Strongly disagree
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 Strongly agree

Please comment why you responded as you did.

A large, empty rectangular text area with a light gray background and a thin black border. It has a vertical scrollbar on the right side.

**6. Would you be willing to present at a future Disease Detective conference?**

- ☐ Yes
- ☐ No
- ☐ Unsure

**7. If so, what topic would you like to present?**

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**8. I used the conference website ([www.sbs.utexas.edu/diseasedetective](http://www.sbs.utexas.edu/diseasedetective)) for:**

- ☐ Directions
- ☐ Parking Information
- ☐ Hotel Accomodations
- ☐ Program
- ☐ Room Location
- ☐ List of Exhibitors
- ☐ I did not use the conference website

Do you have any comments about or suggestions for the conference website?

**9. When I arrived at the conference, it was easy for me to find the location of my talk.**

- ☐ 1 Strongly disagree
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 Strongly agree

Please comment why you responded as you did.

**10. The equipment provided for my presentation met my needs.**

- ☐ 1 Strongly disagree
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 Strongly agree

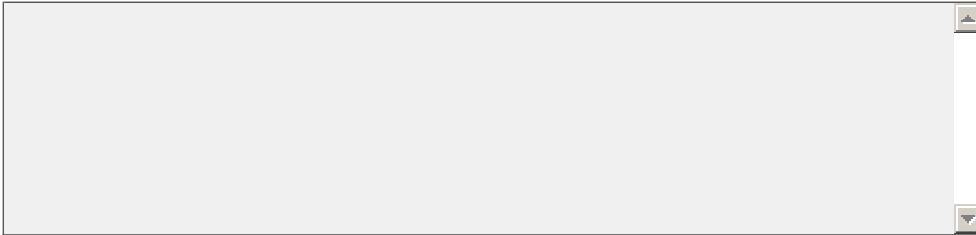
Please comment why you responded as you did.



**11. Several student volunteers assisted with each scientific session by introducing the speakers, handing out bookplates, passing out and collecting demographic and evaluation forms and videotaping. Having students actively participate in this way was positive for me.**

- ☐ 1 Strongly disagree
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 Strongly agree

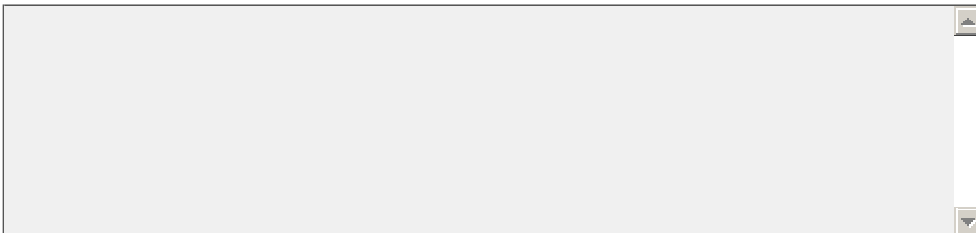
Do you have any comments or suggestions to improve the student support for each session?



**12. Did the refreshments provided during the conference hours meet your needs?**

- ☐ Yes
- ☐ No
- ☐ I did not visit the refreshment area

Please comment why you responded as you did.



**13. A new feature of the conference this year was "Meet a Public Health Professional" in the exhibit hall area. This activity was designed to give students the opportunity to talk one-on-one with public health professionals. Did you participate in this activity?**

- ☐ Yes
- ☐ No

**14. If so, can you give us your comments about this activity and/or suggest ways we might better facilitate interaction between students and public health professionals during the conference?**





**15. Have you had any follow-up contact with students you met at the conference?**

☐ Yes

☐ No

Please comment on your response.

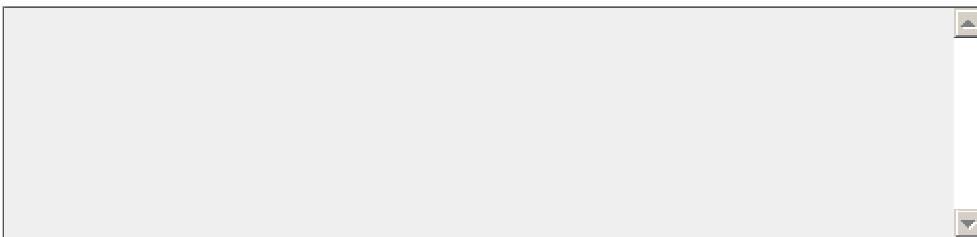


**16. I attended other scientific presentations at the conference.**

☐ Yes

☐ No

Please share any comments about the presentations you attended.

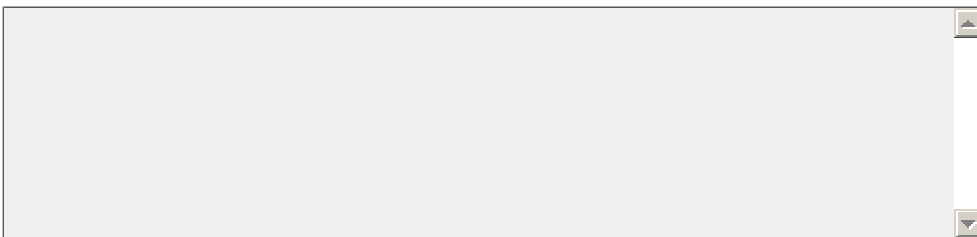


**17. I visited the conference exhibit hall.**

☐ Yes

☐ No

Do you have any comments about the exhibits or the exhibit hall?



**18. Would you like to have access to or receive conference videotapes....**

☐ on the web?

☐ as CDs or DVDs?

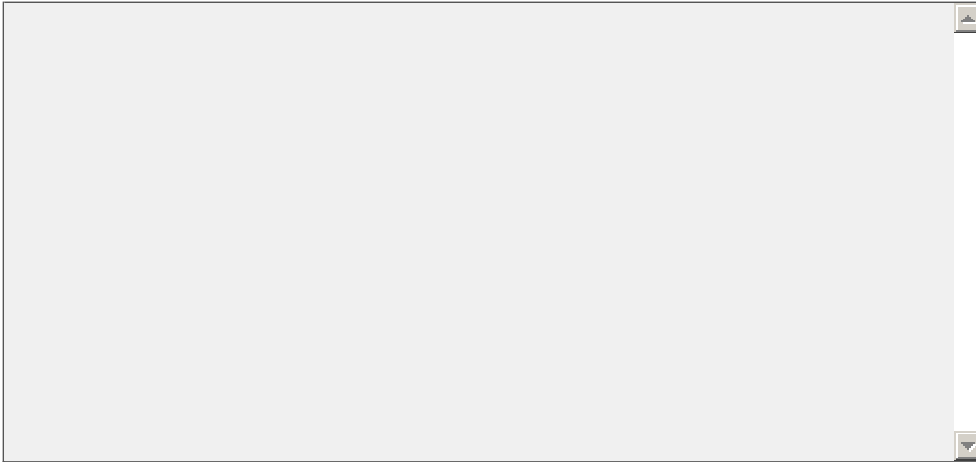
☐ Either?



**19. The goals of this conference were to educate university students, faculty and advisors about the dynamic field of public health and to encourage students to consider public health careers. From your perspective, was the conference an effective way to meet these goals?**

- ☐ 1 Strongly disagree
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 Strongly agree

Please comment about why you responded as you did.

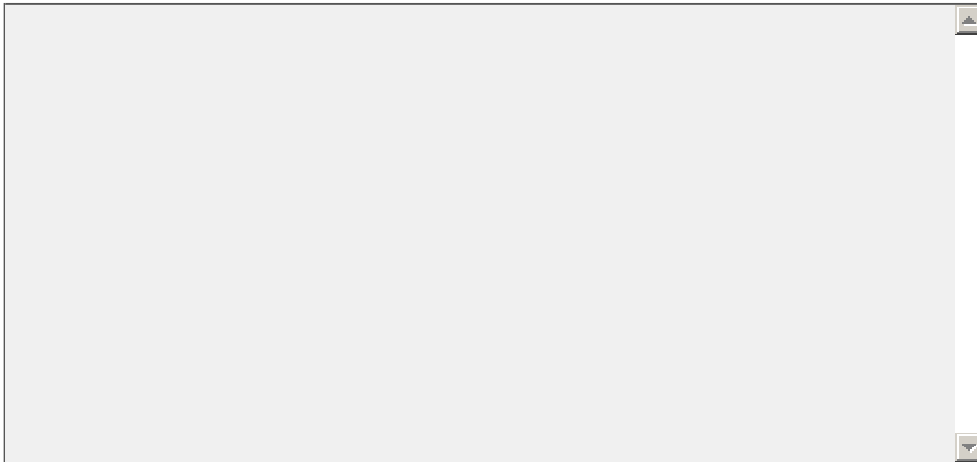
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**20. A primary focus of the CDC Office of Workforce and Career Development is to develop the next generation of public health professionals in order to meet public health workforce shortages and current and emerging health promotion and protection priorities. From your perspective, was this conference an effective way to contribute to the development of the future public health workforce?**

- ☐ 1 Strongly disagree
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 Strongly agree

Please comment about why you responded as you did.

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**21. Do you have any final thoughts about the 2008 "Become A Disease Detective: Discover Public Health Conference?"**

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**22. Do you have any suggestions about how to improve future Disease Detective conferences?**

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## APPENDIX 7.3

### Speaker Biographies





**SPEAKER BIOGRAPHIES: *Become A Disease Detective: Discover Public Health!*, The University of Texas at Austin, April 2008**

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**TODD BELL, M.D., Texas Tech University, Health Sciences Center, School of Medicine at Amarillo**

***Presentation: MRSA: The Making of a Superbug!***

**Biography:** Dr. Bell is an Assistant Professor at Texas Tech University, Health Sciences Center, School of Medicine at Amarillo. He received his Bachelors of Science degrees from Oklahoma State University in 1997 and his MD degree from the University of Arkansas School of Medicine in 2001. Dr Bell completed his combined residency training in internal medicine and pediatrics at Duke University Medical Center in 2005, then stayed on as chief resident for an additional six months before joining Texas Tech in 2006.

Dr. Bell is board certified in internal medicine and pediatrics. He has a joint appointment with the Department of Family and Community medicine where he teaches on the Hospitalist services. He is a member of the American Academy of Pediatrics and the American College of Physicians. Dr Bell was recognized with the 2004 "Golden Apple Teaching Award" for the best resident teacher at Duke University Medical Center. At the University of Arkansas he was awarded the Tom Dugan Award for Outstanding Senior in Pediatrics. Dr. Bell has a special interest in community health, inpatient care and resident and medical student education.

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**DAVID CARPENTER, Ph.D. MBA, Southern Illinois University**

***Presentation: CSI-Public Health: Tackling Emerging Diseases and More in the Laboratory***

David Carpenter is currently Associate Professor in the Department of Medical Microbiology and Immunology, **Southern Illinois University School of Medicine** in Springfield, Illinois. His current teaching responsibilities focus on infectious diseases basic sciences education and training of medical students and graduate students, with special emphasis on diseases of public health significance.

Prior to joining the SIU School of Medicine, Dr. Carpenter was Director of Laboratories for the **Illinois Department of Public Health (IDPH)**, a position he held from 1986 to January, 2000. In this position, he had responsibility for directing all operations of the IDPH clinical and environmental laboratories within the IDPH Division of Laboratories.



From 1977 to 1986, he was employed by **BAXTER Healthcare** of Deerfield, IL. He held positions in the BAXTER Dialysis Therapies division, conducting marketing research in support of new product development, and in the BAXTER R&D Division, managing laboratory units responsible for assuring and maintaining sterility of Baxter's marketed products.

Prior to moving to Illinois, he was a Research Microbiologist at the **US Army R&D Laboratories** in Natick, Massachusetts, where he conducted research on processes to mitigate the microbial spoilage of food rations.

Dr. Carpenter received his **BS** in Mycology/Microbiology from the University of Vermont, and his **PhD** in Microbiology from the University of New Hampshire. Following, he held a Postdoctoral Research Associateship of the NAS/NRC. In 1986, he received an **MBA** in Marketing from Lake Forest College Graduate School of Management in Lake Forest, Illinois.

Dr. Carpenter has authored several scientific publications and holds a U.S. patent for a medical device. He is a member of many professional societies: American Society for Microbiology; Illinois Public Health Association; American Association of Bioanalysts; American Public Health Association where he served as chair of the Laboratory section in 1998-2000. In 1995, he was President of the Association of Public Health Laboratories. From 2003-2006, he was a member of the USDA National Advisory Committee on Meat and Poultry Inspection. He also served on the Advisory Committee to the Director of National Center for Environmental Health at the Centers for Disease Control and Prevention in Atlanta.

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## **CAROL DAVIS, MSPH, Texas Department of State Health Services**

### **Presentation: *Outbreak I – Epidemiologists: Outbreaks Are Our Business!***

Carol M. Davis works for the Texas Department of State Health Services, Region 7 as an Epidemiologist. Her routine duties include infectious disease surveillance, outbreak investigation, health data analysis, technical assistance for local health departments and participation on numerous public health preparedness projects and workgroups. Prior to working for the state, she spent 2.5 years as an epidemiologist with the Houston Department of Health and Human Services. While in Houston, she worked with the Houston/Harris County Disaster Animal Management Task Force to develop a regional plan addressing public health issues related to animals during disasters. She also worked on enhancing both Hepatitis C and zoonotic disease surveillance activities. Carol earned her Masters of Science in Public Health with a concentration in Epidemiology at the Texas A&M University System Health Science Center School of Rural Public Health where she graduated with honors. Carol first became interested in public health while she was researching graduate schools. She wanted to find a program where she could study the impact of diseases



upon populations without having to focus on the clinical aspects of disease progression in individuals. Epidemiology was a perfect fit.

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**LINDA DOOLEY, M.D., Austin/Travis County Health and Human Services Department**

**Presentation: *Women in Medicine – Women in Public Health!***

**Biography:** I went to medical school with a strong interest in public health after a Peace Corps stint in Dahomey (now Benin), West Africa, and an undergraduate degree from Rice University in cultural anthropology. I did a residency in Internal Medicine since that was the most interesting to me in medical school and I enjoyed working in indigent health care here in Austin for 10 years before moving to be the tuberculosis doctor for Austin/Travis County Health and Human Services Department (A/TCHHSD). I work with direct health care of HIV+ patients, and serve as the medical director for the Communicable Disease Unit, which in this case means I have responsibilities for HIV screening, STD's, and a little Hansen's Disease. Currently, I also serve as the Health Authority for Travis County and am the Acting Medical Director for A/TCHHSD.

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**RITA ESPINOZA, MPH, Texas Department of State Health Services**

**Presentation: *Outbreak II: Texas Disease Detectives in Action!***

**Biography:** Ms. Espinoza earned a Bachelor's of Science from the University of Houston with a major in psychology and completed a Master in Public Health in Epidemiology at Tulane University School of Public Health and Tropical Medicine in 1998. She completed a fellowship with the National Institute for Occupational Safety before joining the Texas Department of State Health Services, Immunization Division in 2000. She served as the Division's Epidemiologist for 4½ years. She joined the Infectious Disease Control Unit in 2004 to serve as the epidemiologist responsible for the antibiotic resistant organisms and vaccine-preventable diseases. She has given numerous presentations at local, state, and national conferences.

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**SUSAN P. FISHER-HOCH, M.D., UT School of Public Health, Brownsville Regional Campus**

**Keynote Presentation: *Africa, the Virus Cradle***

**Biography:** Sue Fisher-Hoch was born in England in 1940. After completing High School she attended the Sorbonne in Paris, then continued linguistic and



cultural studies in Rome. She gained admission to the Royal Free Hospital School of Medicine in 1970 at a time when women, particularly married women were not offered places, and was later given the Elizabeth Garrett Anderson fellowship, in memory of the first English woman doctor. She graduated First Class in 1975 with seven prizes for excellence. After internship with Dr. Sheila Sherlock at the Royal Free Hospital, she joined the Radcliffe Hospital, Oxford to train in virology. Between 1978 and 1982 she taught medical students, ran virology laboratories and conducted research, publishing several papers. By 1981 she had membership of the Royal College of Pathology in Virology, a Master's degree in Microbiology with distinction and a doctoral degree in epidemiology (MD) from London University. Her doctoral thesis findings were published in the *Lancet* and were the first identification of hot water systems as the source of outbreaks of Legionnaire's disease, as opposed to air conditioning. In 1982 she obtained a Wellcome Trust Fellowship to study the pathophysiology of Ebola hemorrhagic fever in primates in the Porton Down BSL4 facilities using biological respirators. (BSL4 or BSL4 is the highest level of containment that exists, used for the most dangerous viruses such as Ebola and Lassa.) This led to better understanding of the processes involved in shock and death in Ebola. In 1982 she spent three months in Bangkok, working on treatment of rabies using intrathecal ribavirin. In 1984 she was invited to the CDC, Atlanta space suit BSL4 laboratory and published her findings on Lassa fever virus in the *Journal of Infectious Diseases*, providing key information on the pathophysiology of Ebola and Lassa viruses. Back in England she was central to the discovery that the parvovirus B19 was responsible for Fifth's Disease (Slapped Cheek Syndrome).

In 1985, she moved to the Central Public Health Laboratory to head the VHF unit, with its newly constructed glove box BSL4 laboratory. During this time she spent four months at the CDC Lassa Fever project in Sierra Leone to study the hematology of shock and bleeding in Lassa virus infected patients. She was at this time the UK representative on various WHO working groups, particularly hemorrhagic fevers and biosafety. Because the restrictive attitude of the UK authorities to work on BSL4 agents she moved in early 1986 to the CDC, Atlanta, where she remained for eight years, becoming Deputy Branch Chief, Special Pathogens Laboratory, and serving as Acting Branch Chief. Her responsibilities included primate studies of pathophysiology, vaccine evaluation, clinical and epidemiological advice for the United States and other countries, and supervision of the Sierra Leone Lassa Fever Research Unit. She published several major papers, notably efficacy of a Lassa Virus vaccine, comparative pathophysiology of Ebola isolates, and longitudinal studies of Ebola virus infections in monkeys. She was one of the team responsible for opening and operating the newest BSL4 laboratory at CDC.

Dr. Fisher-Hoch traveled widely and gained extensive experience working in China, Thailand, Indonesia and several countries in Africa, conducting studies and publishing reports. While with the CDC, she investigated outbreaks of Crimean Congo Hemorrhagic Fever in South Africa, Senegal and Saudi Arabia, where she gave an invited lecture in Mecca. She investigated devastating outbreaks of Lassa fever in Nigeria. She played a major part in the investigation



of the Reston outbreak in the US in monkeys imported from the Philippines, visiting Indonesia and the Netherlands to try to track the source of the virus, and then returning to the laboratory to perform primate studies. She was appointed an Adjunct Professor at Emory University, School of Public Health during this time, and taught students in their MPH program. She was responsible for supervision of field studies, including clinical trials of antiviral agents, and was involved in audit of a trial, and prepared study protocols for FDA approval.

In 1991, Dr. Fisher-Hoch moved to the division of Bacterial and Mycological Diseases at CDC, and broadened her experience in epidemiology and biostatistics. In 1992, she married Dr. Joseph McCormick, who was by that time with the Malaria Branch at CDC, and in 1993, they both moved to Karachi, Pakistan, to return to the field, taking up positions at the Aga Khan University. Dr. Fisher-Hoch was Research Professor, supervising the Clinical Microbiology Laboratory, the largest in Pakistan. She established a molecular epidemiology and molecular virology laboratory, and worked and published studies on important pathogens, such as hepatitis C (HCV), tuberculosis, typhoid and cholera. She identified and advised on an outbreak of CCHF in Quetta, Pakistan, and investigated on an outbreak of cholera in Gilgit, Northern Areas. She provided consultation to the Director of the Aga Khan Health Services, Kenya, on HIV and blood transfusions in hospitals in Nairobi, Kisumu, Mombasa and Dar-es-Salaam. At the Aga Khan Hospital, Dr. Fisher-Hoch also gained further teaching experience, designing and teaching a virology course for medical students, tutoring and encouraging young faculty, and teaching on short regional epidemiology training courses.

Early in 1997, she and her husband moved to Lyon, France, where she took charge of the design, building and scientific program of a new BSL4 suit laboratory, financed by Charles Mérieux. This is now the most technologically advanced laboratory for handling dangerous viruses in the world. She launched a comprehensive scientific program with collaborators in Europe, the United States and Africa. The President of France, M. J. Chirac, officially inaugurated the laboratory in March 1999. Dr Fisher-Hoch has been awarded the Chevalier de Legion d'Honneur, Le Medaille de Lyon by the mayor and former Prime Minister of France, Raymond Barre, and Le Prix Scientifique du Group Paris-Lyon, for her work in designing, constructing, and rendering operational the BSL4 laboratory of Lyon. The laboratory was given official permission to operate at BSL4 on June 16<sup>th</sup>, 2000. During this period Dr. Fisher-Hoch participated in a meeting in Novosibirsk, Siberia, to try to develop scientific programs with the BSL4 laboratory there, and also was involved in reviews of the Nipah outbreak in Malasia, and worked with a team in Gabon performing immunological studies on patient samples from a recent Ebola outbreak in that country.

In January 2001, she moved to Brownsville, Texas, with her husband who was appointed Assistant Dean for the new Brownsville campus of the UT School of Public Health. She is a full professor in the new school. Since then she has established a solid research program in diabetes and complications of diabetes,



including tuberculosis. This program has attracted solid NIH funding, and has made major advances in understanding of these diseases in minority populations. She has established a molecular microbiology laboratory, with a BSL3 for handling pathogens such as *Mycobacterium tuberculosis* and West Nile Virus.

Dr. Fisher-Hoch speaks fluent French, and Italian, and some Spanish. She carries both American and British passports. She has over the years contributed many chapters to major textbooks, written review articles, reviewed for several journals, and has more than 100 major publications. She has written invited editorials for the Lancet, and provided expert advice to the lay press and television, being featured personally in both media, and in books dealing with hemorrhagic fevers. With her husband, Joe McCormick she has published a popular account (*Level 4, Virus Hunters of the CDC*, now published in nine languages) of their adventures which has sold more than 70,000 copies, was translated into seven languages, and has been reissued in hard cover and paperback by Barnes and Noble.

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#### **VINCENT P. FONSECA, MD, MPH, Texas Department of State Health Services**

##### **Presentation: *College Students: What's Going to Get You...and What You Can Do about It!***

**Biography:** Since May 2006, Dr. Vince Fonseca has been the Texas State Epidemiologist at the Texas Department of State Health Services (DSHS). Before coming to DSHS, he spent 9 years in the Population Health Support Division (PHSD) of the Air Force Medical Service. PHSD is a center of expertise in preventive medicine and managed care. It is a think tank to promote evidence-based medicine and an effective, efficient managed-care system.

Dr. Fonseca was a preventive medicine physician at the US Army Center for Health Promotion as the Chief, Health, Fitness and Performance Branch. He also served with the United Nations Mission in Haiti as the preventive medicine officer, and was the disease surveillance physician at the office of the US Army Surgeon General. He has also been a medical director and a primary care physician at Army health facilities in Germany. He completed a public health and general preventive medicine residency at Walter Reed Army Institute of Research and he is board-certified in Public Health and General Preventive Medicine. He received his MD from Boston University, a Master of Public Health in quantitative methods from Harvard University, and a BA in psychology from Rice University.

Dr. Fonseca has co-authored articles in: JAMA on morbidity surveillance following Hurricane Andrew; American Journal of Preventive Medicine on cardiorespiratory fitness; American Journal of Health Promotion on weight gain



as a barrier to smoking cessation; Tobacco Control on the short-term health effects of smoking in a young, healthy population; Morbidity and Mortality Weekly Report on costs of smoking in the Air Force; Annals of Epidemiology on relative risk in cohort studies, Military Medicine on topics in unplanned pregnancy, breast cancer screening, costs of overweight, prevention of weight gain, and healthcare system workload trends and expenditures; Aviation, Space, and Environmental Medicine on clinical preventive services; in Disease Management on integrating behavioral healthcare into primary care and in Professional Psychology: Research and Practice on a clinical guide to manage suicidal patients.

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**ALLISON FOSTER, MBA, CAE, Association of Schools of Public Health**

**Presentations:**

***Graduate Education in Public Health: What Students Need to Know!***

Faculty-Advisor Breakfast, April 1st

***Ready to Take the Next Step? Graduate Education in Public Health,***

April 2nd

**Biography:** Ms. Foster has been at the Association of Schools of Public Health for over twelve years and is responsible for membership functions of the association, including working with schools of public health on student recruitment activities. One of Ms. Foster's main functions is to manage the schools of public health centralized application service, SOPHAS. Ms. Foster's background is in risk management and finance but she has spent the bulk of her career working in association management.

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**MEGAN GERSON, MPH, U.S. Agency for International Development, Global Health Bureau, Office of HIV/AIDS, Division of Technical Leadership and Research**

**Presentation: *One World, One Hope: Frontline Response Against the Global AIDS Pandemic***

Megan Gerson is a Health Science Specialist at the US Agency for International Development in Washington, DC. USAID is independent federal government agency that supports long-term and equitable economic growth and advances U.S. foreign policy objectives by supporting economic growth, agriculture and trade, global health, democracy, conflict prevention and humanitarian assistance. In USAID's Office of HIV/AIDS Megan focuses on HIV prevention, behavior change communication, and public health research. She also advises US-government supported HIV/AIDS programs in Ethiopia and the Democratic



Republic of Congo and travels extensively to these and other countries to support ongoing HIV prevention, care, and treatment programs, all of which are part of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR). Megan has also worked on international public health and HIV issues on the health policy staff of Senator Edward M. Kennedy, and has served as a delegate to the United Nations Commission on Population and Development. Prior to her work at USAID, Megan completed a Masters of Science in Public Health (MSc) in 2004 from the department of Health and Social Behavior at the Harvard School of Public Health. She also worked on domestic HIV/AIDS issues in Fairbanks, Alaska as a Jesuit Volunteer after graduating from the Communication program at Boston College in 2000.

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**MATTHEW GOLDSHORE, B.S., George Washington University**

**Presentation: *Ready to Take the Next Step? Graduate Education in Public Health***

Matt Goldshore graduated from the University of Texas at Austin in 2007 and is currently an MPH candidate in the Department of Epidemiology and a graduate certificate candidate in the Department of Global Health at the George Washington University, School of Public Health and Health Services. He participated in the Public Health Internship program at the Austin/Travis County Health and Human Services Department in the Tuberculosis Control unit while at the University of Texas and fell in love with infectious disease epidemiology. He is currently participating in policy analysis and review for the GWU Center for Global Health on the nutritional component of the President's Emergency Plan for AIDS Relief (PEPFAR) and conducting an epidemiological investigation in Moshi, Tanzania on Prevention of Mother to Child Transmission (PMTCT) of HIV/AIDS.

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**RONALD HARRIST, Ph.D., University of Texas School of Public Health, Austin Regional Campus**

**Presentation: *Faculty and Advisor Breakfast*, April 1st**

**Biography:** Dr. Ron Harrist is an Associate Professor of Biostatistics at The University of Texas School of Public Health, Austin Regional Campus and the Michael & Susan Dell Center for Advancement of Healthy Living. His research interests include multilevel statistical models with applications in cardiovascular disease, clinical trials and epidemiological studies. Dr. Harrist currently teaches courses in Biostatistics in Austin.



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**WILLIAM H. HARVEY, Ph.D., Earlham College**

**Presentations:**

***Faculty and Advisor Breakfast***, April 1<sup>st</sup>

***Ready to Take the Next Step? Graduate Education in Public Health***,  
April 2<sup>nd</sup>

**Biography:** William H. Harvey, Ph.D. is Emeritus Professor of Biology at Earlham College, Richmond, IN. Over his 30+ years on the biology faculty he taught microbiology, immunology, molecular genetics and served as the Chief Health Careers Advisor. Dr. Harvey has served in leadership roles and board membership for the National Association of Advisors for the Health Professions, NAAHP and is currently serving as the NAAHP liaison to ASPH where he has served as part of the planning team for SOPHAS. Dr. Harvey's training is in virology, especially those viruses associated with animal tumors. His research specialty is the genetics of human leukemia especially hairy cell leukemia. He has a keen interest in emerging viral and bacterial pandemics.

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**KAY KIMBALL, PH.D., University of Texas School of Public Health, Austin Regional Campus**

**Presentation:** ***Faculty and Advisor Breakfast***, April 1<sup>st</sup>

**Biography:** Dr. Kay Kimball is a biostatistician with many years of experience with Southwest Research Institute and Baylor College of Medicine. Her research interests include multilevel statistical models and meta-analysis with applications in balance disorders, cardiovascular medicine and behavioral modification of eating problems. She has designed and participated in many epidemiological studies and clinical trials. She currently is a private statistical consultant in Austin and is an adjunct faculty member at The University of Texas School of Public Health, Austin Regional Campus.

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**DAVID LAKEY, M.D., Commissioner, Texas Department of State Health Services**

**Keynote Presentation:** ***Discover Public Health!***



**Biography:** Dr. David Lakey serves as Commissioner of the Texas Department of State Health Services, leading one of the state's largest agencies with a staff of 11,500 and an annual budget of \$2.5 billion. As Commissioner, Dr. Lakey oversees programs such as disease prevention and bioterrorism preparedness, family and community health services, environmental and consumer safety, regulatory programs and mental health and substance abuse prevention and treatment programs.

Dr. Lakey became Commissioner on January 2, 2007. Prior to becoming Commissioner, Dr. Lakey served as an associate professor of medicine, chief of the Division of Clinical Infectious Disease and medical director of the Center for Pulmonary and Infectious Disease Control at the University of Texas Health Center in Tyler. He had been a faculty member there since 1998.

At the UT Center for Biosecurity and Public Health Preparedness, Dr. Lakey served as associate director for infectious disease and biosecurity. He also chaired a bioterrorism preparedness committee for 34 hospitals in East Texas and led the development of the Public Health Laboratory of East Texas in 2002.

He earned a Bachelor of Science in chemistry, graduating with high honors from Rose-Hulman Institute of Technology in Terre Haute, Ind., and received his medical degree with honors from Indiana University School of Medicine. Dr. Lakey was a resident in internal medicine and pediatric medicine and completed a fellowship in adult and pediatric infectious disease at Vanderbilt University Medical Center in Nashville, Tenn. He is board certified in infectious disease and pediatric infectious disease.

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**DAVID LURIE, M.B.A., Austin/Travis County Health and Human Services Department** <http://www.ci.austin.tx.us/health/>

**Presentation: *Public Health: Austin, Texas!***

**Biography:** This combined City/County Agency provides public health services, animal services, workforce development, day labor, youth development, child care, and services for the homeless; along with a comprehensive range of contracted community-based health and social services including basic needs, mental health and substance abuse services. The public health services include community health assessment, health promotion/healthy community initiatives, clinical services, health screening, emergency preparedness, communicable disease control, HIV services and environmental health. David has served in various other community health leadership positions including Director of Public Health for Seattle/King County and Commissioner of Health for the City of Minneapolis.



He is chairman of the Texas Public Health Coalition and Past President of the Texas Association Local Health Officials and has served on state and national public health committees focusing on health promotion, disease prevention, legislation, tobacco, and emergency preparedness. David is a former President of the U. S. Conference of Local Health Officers.

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**JOSEPH MCCORMICK, M.D., UT School of Public Health, Brownsville Regional Campus**

**Presentations:**

***Global Health at Home and Abroad, Faculty-Advisor Luncheon, April 1<sup>st</sup>***

**Keynote Presentation: *Origins of HIV: Where, When, Why and How*, April 2nd**

**Biography:** Joseph B. McCormick is Regional Dean and James H. Steele Professor, UT Houston School of Public Health, with responsibility for developing the new Brownsville campus. He took that position in January 2001. He was born in Tennessee in 1942 and raised in rural Indiana. He obtained a scholarship to Florida Southern College from which he graduated in 1964 with a double major in chemistry and mathematics, with Honors and with the outstanding awards in both subjects. Though he had been awarded a National Science Foundation grant in physics and accepted for the Peace Corps, he elected instead to attend the Free University of Brussels, Belgium, for a year to acquire sufficient French to enable him to take up a position teaching sciences and mathematics in a secondary school in Zaire (now Democratic Republic of the Congo). The school was in a remote area of Zaire, and in the turbulence of immediate post independence in that country, this period gave him the wider experience of life he was seeking. He worked in the local hospital, which gave him an introduction to medicine and particularly an interest in health issues in an international setting. With this in mind, he returned to the United States in 1967 and entered Duke Medical School from which he graduated in 1971, having also obtained an MS from Harvard School of Public Health in 1970, and receiving the Upjohn Award for Community Health. During his medical training he spent two summers, one in Guatemala, where he learnt and used Spanish and in Haiti, where he was able to use his French. His internship and residency were in pediatrics at the Children's Hospital of Philadelphia under Dr. C. Everett Koop.

In 1974, Dr. McCormick joined the US Public Health Commissioned Corps and became an Epidemic Intelligence Service Officer (EIS), Centers for Disease Control (CDC), Atlanta, GA, with the Special Pathogens Branch, Division of Bacterial Diseases, and became acting chief in his second year. He was also a fellow in the Preventive Medicine Residency Program at the Centers for Disease Control. He was involved at this stage with meningococcal meningitis in



particular, spending extensive time over two years in Brazil, where he learnt sufficient Portuguese to communicate fluently. On completion of his epidemiology training, he stayed with CDC, moving to the Division of Viral Diseases. He was sent to West Africa, to found the CDC Lassa Fever Research Project, Sierra Leone, West Africa. Just as he was setting up this project, he was called to go to the Republic of Congo (then Zaire) to join the team investigating the Ebola epidemic of 1976, the very first epidemic that introduced Ebola virus to the world. His knowledge of this country and of the French (and lesser extent Lingala) languages allowed him to undertake the difficult task of traveling through remote areas of northern Zaire to reach Sudan in an attempt to establish a connection with a second, concurrent outbreak in Sudan. Again in 1979, he was called on by WHO to lead the investigation of a second Ebola hemorrhagic fever outbreak in Sudan. He returned after this investigation to Sierra Leone, living and working for three years in the Eastern Province, conducting extensive and definitive studies of the epidemiology and treatment of Lassa hemorrhagic fever. Data from these years were published in landmark reports in the *New England Journal of Medicine* in the form of a definitive effective treatment for this disease, and in the *Journal of Infectious Diseases* which ran a series of four papers discussing the clinical disease, laboratory characteristics, epidemiology and pathophysiology all in the same issue. More than 1500 patients with laboratory confirmed Lassa fever were treated over 13 years, and the Project generated a number of other major publications. The Project is unfortunately no longer functional since rebels from Liberia overran most of Sierra Leone, and the Eastern Province was particularly badly affected.

On his return to Atlanta in 1982, Dr. McCormick became Chief, Special Pathogens Branch, Division of Viral Diseases at the Centers for Disease Control, and rapidly attained the rank of Medical Director (Navy Captain 06). He was director of the Biosafety Level 4 laboratory at CDC for 8 years, and oversaw the design and inaugurated the current BSL 4 facility at CDC. He was also director of the WHO Collaborating Center for Viral Hemorrhagic Fevers. In 1982, he identified the virus, now called Hantavirus, that causes a worldwide hemorrhagic disease, and causes the Hantavirus Pulmonary Syndrome in the Americas. During this time he became involved in AIDS and led the original team that did the first AIDS investigation in Africa and established the Project SIDA in Kinshasa, Zaire, and later the Project Retro-Ci in Abidjan, Ivory Coast. He co-authored numerous papers in major journals, including *Science*, and established a key point in the natural history of HIV infection in Africa, reported in the *New England Journal of Medicine*, by testing specimens saved in his laboratory from the 1976 Ebola outbreak including isolation of the oldest HIV virus. Dr. McCormick was the principle founder in 1983 of the Project SIDA in Kinshasa, Zaire, the earliest and best-established prospective study of AIDS in Africa, and subsequently a similar project (Project RetroCi) in Abidjan. In 1988 he was given sabbatical leave, to attend Scripps Clinic and Research Foundation, La Jolla, Ca. where he worked in the laboratory of Dr. Michael Oldstone on the molecular virology and immunology of arenaviruses and HIV.



In 1990-91, Dr. McCormick elected to consolidate his work in HIV by moving to be assistant to the Director, Division of HIV/AIDS at CDC. He widened the scope of his interests and experience by taking a position in the Malaria Branch as Chief, Immunobiology Activity, Malaria Branch, Division of Parasitic Diseases, CDC. During this period he established a cohort study of malaria in infants and young children, with a cellular and molecular biology oriented field laboratory facility in Kisumu, Kenya. This study has generated seminal data on the natural history of immunity to malaria in young children, and has now also become a major site for HIV research (directed again by Dr. Kevin DeCock who was an EIS with Dr. McCormick in 1985-1987 and together they founded the program in Abidjan, Ivory Coast). Dr. DeCock is now the director of the WHO world AIDS program. In 1993, Dr. McCormick was recruited to take up the post of Chairman, Community Health Sciences Department, at the Aga Khan University Medical School (AKU) in Karachi, Pakistan. His brief was to reorganize and reorient this large department toward a stronger scientific public health base, particularly the application of epidemiology and biostatistics to a variety of health problems. With additional recruitment of a CDC trained epidemiologist, and a biostatistician he established an epidemiology program, resembling the CDC Field Epidemiology Training Programs, but built on an academic private university model, with a Masters' degree in Epidemiology. The existing programs in urban and rural health and women and child health were broadened and brought under more rigorous scientific methodology. Several young Pakistanis have now completed studies on a variety of issues including infectious disease, maternal and child health care, vaccination studies, nutrition, urban health, occupational health, violence and women's rights. He also established the first master's program in epidemiology in Pakistan, and the first Family Medicine Department. These programs continue to flourish despite the difficult political situation in Karachi. In collaboration with his wife, Dr. Susan Fisher-Hoch, a molecular epidemiology laboratory was established to support field studies. Major funding was obtained (6 grants totaling 2.5 million dollars over 2 years). At least 45 peer reviewed scientific papers have now been published from this period. Dr. McCormick has also gained experience in teaching both undergraduate medical students and faculty at AKU. He also had extensive experience with public health research programs in rural areas as well as the large city of Karachi.

Dr. McCormick left Pakistan in early 1997 and moved to France where he was Professor at the Pasteur Institute in Paris and the Creator and Director of the Corporate Department of Epidemiology for Aventis Pasteur, the world's largest vaccine manufacturer. Together with his wife, who was its director, he designed and oversaw the construction of the first BSL4 laboratory in France (for which his wife received the Legion d'Honneur from President Chirac). He and his wife decided, after 8 years abroad, to return to the US in late 2000, and on January 1<sup>st</sup>, 2001, he took up the position of Regional Dean, University of Texas School of Public Health, with responsibility for the new Brownsville campus. The choice of this location was influenced by the opportunity to continue to work with disadvantaged communities in a multi-cultural, multilingual setting. In the first 2 years of his tenure there he worked with colleagues to establish the first Hispanic



Health Research Center, funded by the NIH and focused on the health issues of Hispanic people. He built a faculty of 10 and over 50 staff supported the development of a strong research program focused on the health issues of the Lower Rio Grande Valley people. He has also been instrumental in developing a major focus of TB research with NIH funding in the LRGV. Over the past 2 1/2 years he has raised over \$8 million in research funds from the NIH. Several papers are published or in preparation from this period of program development.

Dr. McCormick speaks and reads fluently in French, and also has some fluency in Spanish, Portuguese, German and Krio. His many awards include Exceptional Capability Promotion, Meritorious Service Medal, 3 PHS Citations, a unit commendation and the Foreign Service award of the USPHS, and the Friends of Public Health Award from the Texas Department of Health, and in 2005 University of Texas Chancellor's Health Fellow in Public Health. He was awarded Humanitarian Awards from his undergraduate Alma Mater, Florida Southern College in 2000, and from his Medical School, Duke University, in 2001. Prior to his current academic position he held several university appointments including Visiting Professor at Scripps Clinic and Research Foundation, La Jolla, Adjunct Professor at Emory University and at University of North Carolina, and Member of the Group d'Etudes de Virologie de L'Institut Pasteur, and now full professor at the Aga Khan University. He has conducted more than 30 consultations with organizations such as the Pan American Health Organization, the US.-Japan Panel on Leprosy, and the Institut Pasteur Outre-Mer, and has been an invited speaker and chairman at many symposia and meetings, including the 2nd International Conference on AIDS, the Meetings of the Japanese NIH and the 7th. International Congress of Virology, Berlin. He has served as consultant to WHO in viral hemorrhagic fevers, smallpox eradication, antiviral agents and AIDS. In 1985 he organized and co-chaired the first WHO meeting on AIDS in Africa on the African Continent.

His activities in viral hemorrhagic fevers and major contributions to the science and epidemiology of emerging pathogens has been aired on television, including programs by CNN and BBC, newspapers and periodicals and in several books for the lay reader. He recently participated in a new TV documentary *The Age of AIDS* on the beginning of the AIDS epidemic that was first aired in 2006. Dr. McCormick is a member of several scientific organizations and has published over 200 scientific publications involving co-authors from over 20 different countries and include many seminal papers in AIDS and viral hemorrhagic fevers, and a number of review articles and textbook chapters. He has acted as reviewer for many journals.

McCormick and his wife Susan raised 3 children who are pursuing professional careers. They also published an account of their adventures as virus hunters in: *Level 4, Virus Hunters of the CDC* (Barnes and Noble). This book has now been published in 6 languages and has sold over 100,000 copies in the US alone. It has and continues to be very influential among young people entering careers in science, and Dr. McCormick and his wife are frequently invited to speak to groups, such as the student's organization of the Duke MD/PhD program, and



students from those programs visit Brownsville to gain work experience with science in the community. Joseph McCormick is an accomplished amateur pianist, and enjoys outdoor activities such as running, back packing, skiing and fly fishing.

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## **JOHN MCELLIGOTT, MPH, ASSOCIATION OF SCHOOLS OF PUBLIC HEALTH**

**Presentation:** *Undergraduate Public Health Education, Faculty and Advisor Breakfast*, April 1st

John E. McElligott is a Project Manager with the Association of Schools of Public Health (ASPH). He received his MPH in policy and management from The University of Arizona. Prior to joining the ASPH, Mr. McElligott worked for the Arizona Department of Health Services. Other experience includes interning with the HRSA HIV/AIDS Bureau and volunteering in the U.S. Peace Corps.

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## **CAITLIN MEREDITH, MPH, DOCTORS WITHOUT BORDERS**

**Presentation:** *Out of Africa: Meds, Mango Leaves and Prayers – Teasing Out Health Choices in the Congo*, April 2<sup>nd</sup>

Caitlin Meredith is an epidemiologist whose first assignment with Doctors Without Borders/Médecins Sans Frontières (MSF) took her to the Darfur region of Sudan at the height of the crisis in 2004, where she used her expertise to track trends in diseases with epidemic potential.

Responding to the needs of internally displaced persons (IDPs) in the south and west of Darfur, MSF ran primary health care, nutrition, surgical and emergency preparedness programs in one of its largest emergency responses to date. Ms. Meredith helped to implement a mass measles vaccination campaign for tens of thousands of IDPs. In 2006, Ms. Meredith resumed her work with MSF, conducting an epidemiological survey of an area in the eastern part of the Democratic Republic of Congo, a region that has been host to ongoing and often intense conflict for a decade. Her work helped MSF to improve its programs for the local people who are frequently the targets of violence and have limited access to health care.

Ms. Meredith has a master's degree in public health from Tulane University, where her focus was on HIV/AIDS in sub-Saharan Africa. In addition to her contributions to MSF, she has conducted HIV/AIDS research for various non-governmental organizations based in Kenya, where she also worked in refugee



camps for Somali refugees with the United Nations High Commissioner for Refugees. She currently works as a health planner in the Immunization and Refugee Program for Austin/Travis County Health and Human Services based in Austin.

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**ERIC MILLER, Ph.D., MSPH, Texas Department of State Health Services**

**Presentation: *“Beating Back the Devil” The CDC Epidemic Intelligence Service***

**Biography:** Eric A. Miller is a former Epidemic Intelligence Service (EIS) Officer for the Centers for Disease Control and Prevention (CDC). After EIS he worked as an epidemiologist for the National Center on Birth Defects and Developmental Disabilities for the CDC and recently moved back to Texas as the coordinator of the Pregnancy Risk Assessment Monitoring System (PRAMS) in the Texas Department of State Health Services. During EIS he conducted wide-ranging investigations, including racial/ethnic disparities in tobacco use and disparities in complications from diabetes along the Texas-Mexico border as well as non-chronic disease investigations such as foodborne outbreaks and post-hurricane surveillance.

He received his undergraduate degree in biology with emphasis on genetics and cell biology from the University of Minnesota. He then attended the School of Public Health at the University of North Carolina at Chapel Hill and received a masters degree and doctorate in epidemiology.

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**KAREN MOODY, MS, Infectious Disease Control Unit, Texas Department of State Health Services**

**Presentation: *Outbreak I – Epidemiologists: Outbreaks Are Our Business!***

Karen Moody is the Creutzfeldt-Jakob Disease Surveillance Coordinator with the Texas Department of State Health Services. She graduated from Texas State University with a MS in Health Services Research and certificates in Biostatistics and Epidemiology. Previously, she received a degree in physical therapy at the University of Texas Health Science Center in San Antonio. It was during her 20-year career as a physical therapist that she developed an interest in disease research which led her to become an epidemiologist.



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**SUSAN NEILL, Ph.D., M.B.A., TEXAS DEPARTMENT OF STATE HEALTH SERVICES**

**Presentation:** *CSI-Public Health: Tackling Emerging Diseases and More in the Laboratory*

**Biography:** Susan Neill received her BA in Microbiology from the University of Texas at Austin, her MS and PhD from the University of Illinois at Champaign-Urbana, and her MBA from St. Edwards University in Austin. She has spent the past twenty-one years in public health as the Section Chief of the Rabies-Arbovirus Section, Branch Supervisor of the Medical Virology Branch, Division Director of the Biochemistry and Genetics Branch, and for the past seven years as the Director of the Laboratory Services Section

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**MELVIN E. MONETTE, M.Ed, UNIVERSITY OF MINNESOTA SCHOOL OF PUBLIC HEALTH**

**Presentation:** *Ready to Take the Next Step? Graduate Education in Public Health*

**Biography:** Melvin E Monette, *Turtle Mountain Band of Chippewa Indians*, BSEd, received his undergraduate degree in Education from the University of North Dakota (UND) after completing a year each at two North Dakota Tribal Colleges: Turtle Mountain Community College and Cankdeska Cikana Community College. His Master of Education from UND is in Higher Education Leadership with a specialty in Multicultural Affairs. He currently serves as the Director for Student Recruitment and Enrollment Management at the University of Minnesota School of Public Health and serves on the Executive Board of the Midwest Center for Lifelong Learning in Public Health. Melvin is an Ambassador for the American Indian Graduate Center - Gates Millennium Scholars Program, Co-Chair of the one-of-a-kind Saint Paul Foundation Spectrum Trust Two Feathers Endowment for community development, volunteers for the Twin Cities Gay Pride Events and is a member of Communities of Change: Professionals in Anti-Racism Training Round Table.

Melvin began his career as Recruitment Specialist for American Indian Students at the University of North Dakota. He advanced to Program Coordinator for Native American Programs and eventually managed the United Tribes Community Educator Program for UND. He left UND to work with the Minnesota Department of Education Office of Indian Education to manage 17 state grant programs as well as the Minnesota Indian Scholarship Program. The position of Director for Student Recruitment and Enrollment Management is a new venture for Melvin and he's enjoyed this first year and looks forward to several more as



we collectively move toward increasing our professionals of color in the work of Public Health.

Community involvement and advocacy are priorities for Melvin. In addition to his current involvements as stated above, Melvin has served in many capacities including membership and/or leadership in the Red River Valley HIV Network, Grand Forks Public Schools Human Dignity Commission, UND Safe Zone Trainer, UND Indian Association annual pow-wow, Minnesota Indian Education Association, Minnesota Association of Financial Aid Advisors, Minnesota Science Museum's Race: Are We So Different advisory committees, and most recently the Dream a Cure: Pink Shawl Campaign for American Indian Breast Cancer Awareness in North Dakota.

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### **SUSAN PENFIELD, M.D., Texas Department of State Health Services**

**Presentation:** *Women in Medicine – Women in Public Health!*

**Biography:** Dr. Penfield is currently manager of the Infectious Disease Control Unit in the Community Preparedness Section of the Texas Department of State Health Services (DSHS) and serves as the Texas TB Controller. She has the privilege of working with amazing colleagues in zoonosis control, tuberculosis control and prevention, infectious disease epidemiology and surveillance, pandemic influenza planning, all hazards preparedness, and the odd hurricane. Previously she served as director of the Children with Special Health Care Needs Division at the Texas Department of Health (now DSHS); as faculty member in the Austin Pediatric Education Program; and as a pediatrician in Austin-Travis County Health and Human Services Department community clinics. She earned a B.A. in Biochemistry from Rice University and an M.D. degree from Baylor College of Medicine; and completed a pediatrics residency in Austin with the Central Texas Medical Foundation.

"New challenges, old diseases, constant change, great partners, and more good information than one could ever learn -- public health is never boring!"

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### **EVA PERLMAN, M.P.H., Association of Public Health Laboratories**

**Presentation:** *CSI: Public Health! Tackling Emerging Diseases and More in the Laboratory*

**Biography:** Ms. Perlman has over 20 years of experience in public health and non-profit association management, with a concentration on training and continuing education. Currently she serves as Senior Director of Professional Development for the Association of Public Health Laboratories (APHL). She provides leadership, guidance and oversight in the operations, administration and



coordination of APHL sponsored workforce development, training and continuing education initiatives, including the National Center for Public Health Laboratory Leadership (NCPHLL), the National Laboratory Training Network (NLTN); and, the Emerging Infectious Diseases Fellowship and Traineeship Programs. Ms. Perlman serves on the Exhibitors Advisory Council for the American Public Health Association. She received her MPH at the University of Pittsburgh School of Public Health, and her BA at Case Western Reserve University.

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**CHERYL L. PERRY, PhD., University of Texas School of Public Health,  
Austin Regional Campus**

**Presentation:** *Faculty and Advisor Breakfast, April 1st*

**Biography:** Dr. Cheryl Perry is Professor and Regional Dean at the University of Texas School of Public Health, Austin Regional Campus. She is also a member of the Michael & Susan Dell Center for Advancement of Healthy Living and was named the Rockwell Chair in Society and Health in 2007. Dr. Perry joined the University of Texas School of Public Health in September 2006, after having been on the faculty at the University of Minnesota for 26 years.

Dr. Perry's research interests involve the design, development, implementation and evaluation of school and community programs for young people, particularly in the areas of tobacco and alcohol use, eating, and physical activity. She is currently Principal Investigator of Mobilizing Youth for Action Against Tobacco in India (MYTRI), funded by the Fogarty International Research Collaboration. She also serves as Co-Investigator for the National Cancer Institute funded Minnesota Adolescent Community Cohort examining the effects of Minnesota state and local programs on youth tobacco use. She is also a Co-Investigator on the Dell CATCH project in Travis County Texas. She has also just been assumed the work of Senior Scientific Editor for the 2010 Surgeon General's Report on youth and tobacco use.

Dr. Perry is a member of the Scientific Advisory Board for Communities That Care, University of Washington. In 2006, she received the Prevention Science Award from the Society for Prevention Research and in 2005, was recognized as one of the 100 Most-Cited Researchers in Tobacco-Related Research from the journal *Tobacco Control*.

Dr. Perry received her B.A. in Mathematics from the University of California, Los Angeles, her M.A. in Education from the University of California, Davis, and her Ph.D. in Education from Stanford University.

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**LAURA PODEWILS, PH.D., M.S., Centers for Disease Control and Prevention**

**Presentation:** *HIV and the MDR Epidemic: The Perfect Storm?*

**Biography:** Laura Podewils is an Epidemiologist with the International Research and Programs Branch, Division of Tuberculosis Elimination, National Center for HIV, STD, and TB Prevention, Centers for Disease Control and Prevention (CDC). From 2005-2007 she was a member of the Trials Consortium Team for the National Center for HIV, STD, and TB Prevention. From 2003- 2005, she served as an Epidemic Intelligence Service Officer with the National Center for Infectious Diseases, CDC. In 2005, she served as a Short-Term Consultant for the Stop Transmission of Polio Team 18 for the World Health Organization and was assigned to the Phillipines. Dr. Podewils also has had extensive international field experience in Thailand and Ghana. She was the recipient of the US Public Health Service Achievement Medal in 2005, and is the author of fifteen scientific publications. She received her Ph.D. in Epidemiology from Johns Hopkins Bloomberg School of Public Health in 2003, her M.S. from San Diego State University in 1998, and her B.S. from the University of Nevada, Reno in 1995.

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**ELLA PUGA, MPH, Austin/Travis County Health and Human Services Department**

**Presentation:** *Outbreak II: Texas Disease Detectives in Action!*

**Biography:** Ella Puga currently works as an Epidemiologist for the Austin/Travis County Health and Human Services Department. She completed a Bachelor of Science degree in Biology and a Master of Public Health degree in Hospital and Molecular Epidemiology at the University of Michigan. Ella previously worked as an Epidemiologist for the Texas Department of State Health Services, first in childhood lead poisoning prevention, then in minority health. From 2004-2007, she primarily worked in Austin/Travis County's Public Health Preparedness Program, assisting with enhanced disease surveillance efforts and planning for public health emergencies. Now Ella focuses on data analysis related to chronic disease prevention, and has been part of a team collaborating on a systems dynamics simulation modeling project to improve cardiovascular health with the Centers for Disease Control and Prevention. She still conducts foodborne illness outbreak investigations as well.

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## **EDUARDO SANCHEZ, M.D., M.P.H, University of Texas School of Public Health**

### **Presentation: *One World, One Goal: Optimal Health for All***

#### **Biography:**

*"One of the challenges facing anyone in the field of public health is trying to overcome the misperception that public health is medical care for poor people. It's not. Public health is a population-based approach to health that invests resources strategically to have a broad impact on the people of a community, a state, or a nation. Life expectancy in the United States increased from 47 years in 1900 to 77 years in 2000, yet few people recognize that 25 of the 30 years of longer life are attributable to public health measures such as clean water, improved sanitation, spraying for mosquitoes, and childhood vaccination programs. Public health programs, which receive only 3 percent of all health-care spending, have proven a wise investment."* - Dr. Eduardo Sanchez

Eduardo J. Sanchez, M.D., M.P.H is the Director of the Institute for Health Policy and Professor in the Division of Management, Policy and Community Health at The University of Texas School of Public Health (UTSPH). Dr. Sanchez is currently serving as Chair of the Advisory Committee to the Director, Centers for Disease Control and Prevention (CDC), Chair of the National Commission on Prevention Priorities (NCPPI), and a Food & Society Fellow. He also serves on the Travis County Healthcare District Board of Managers.

Prior to joining UTSPH in 2006, Dr. Sanchez served as the Texas Commissioner of Health from 2001 to 2006 as Commissioner of the Texas Department of Health from 2001 to 2004 and as Commissioner of the Texas Department of State Health Services (DSHS) from 2004 to 2006. He led the consolidation of Texas' public health, mental, health and substance abuse agencies into one single agency, DSHS, and in 2005, Dr. Sanchez directed the Texas health and medical response to Hurricanes Katrina and Rita. He served on the Institute of Medicine (IOM) Committee on Progress in Preventing Childhood Obesity and on the Centers for Disease Control and Prevention (CDC) National Center for Infectious Diseases (NCID) Board of Scientific Counselors during his state health officer tenure.

From 1992 to 2001, Dr. Sanchez practiced family medicine in Austin, Texas. In addition, he served as public health officer and chief medical officer for the Austin-Travis County Health and Human Services Department from 1994 to 1998. He played a key leadership role in helping to create the Texas Association of Local Health Officials (TALHO) in 1997. He served as TALHO's first President. He received his medical degree in 1988 from The University of Texas Southwestern Medical School and holds master's degrees in public health from the UT School of Public Health and in biomedical engineering from Duke University. He also has bachelor's degrees from Boston University in biomedical engineering and chemistry.

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**SHANNON SHELTON, M.A., Emory University Rollins School of Public Health**

**Presentation: *Ready to Take the Next Step? Graduate Education in Public Health***

Shannon Shelton is Associate Director of Admissions at the Rollins School of Public Health at Emory University in Atlanta. At Emory, she develops recruitment strategies and represents RSPH at the local, regional and national levels, as well as promotes RSPH through website development, innovative technologies, and promotional materials. She has worked at RSPH for 12 years in the area of admissions, academic advisement, and global health.

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**JOHN SU, M.D., Ph.D., M.P.H., Centers for Disease Control and Prevention**

**Presentation: *“Beating Back the Devil” The CDC Epidemic Intelligence Service***

**Biography:** LCDR John R. Su is currently an Epidemic Intelligence Service (EIS) Officer for the Centers for Disease Control and Prevention and serving in the United States Public Health Service. He is currently stationed in the Infectious Disease Control Unit of the Texas Department of State Health Services and has conducted numerous field investigations, including bloodstream infections due to contaminated medications, an outbreak of adenovirus on a military training base, and unexplained deaths at a federal corrections facility.

John holds a B.S. in biochemistry from Texas A&M University in College Station, an M.D. from the University of Texas Medical School at Houston, and a Ph.D. in virology and gene therapy from the University of Texas Graduate School of Biomedical Sciences. He completed residency training in both clinical pathology (in which he is board-certified) and preventive medicine – during which he earned an M.P.H. from Dartmouth Medical School in Hanover, New Hampshire.

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**RICHARD TAYLOR, Ph.D., Centers for Disease Control and Prevention**

**Presentation: *“Beating Back the Devil” The CDC Epidemic Intelligence Service***

**Biography:** LCDR Richard Taylor is a Commissioned Officer in the United States Public Health Service. During 2004–2006, he was an Epidemic Intelligence Service Officer for the Centers for Disease Control and Prevention (CDC). During that time he was stationed at the Texas Department of State Health Services in Austin, Texas in the Infectious Disease Control Unit where he assisted in conducting outbreak investigations for a variety of infectious diseases. Since then, he has been working for CDC's Coordinating Office for Terrorism



Preparedness and Emergency Response as a Career Epidemiology Field Officer. He continues his assignment with the Texas Department of State Health Services and currently works on pandemic influenza preparedness.

He received his Ph.D. at University of South Florida. He has taught courses in Epidemiology and Biostatistics and has lectured on a variety of public health topics both nationally and internationally.

He comes from a background in health behavior and health promotion. He served for several years as an Assistant Director of Health and Wellness at Florida International University in Miami. He enjoys teaching and is coauthor of *Biostatistics for the Health Sciences*, an introductory biostatistics textbook for graduate students.

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**Michael Ward, M.Ed., Johns Hopkins University School of Public Health**

**Presentation: *Ready to Take the Next Step? Graduate Education in Public Health***

**Biography:** Michael Ward currently serves as the Associate Dean for Student Affairs at the Bloomberg School of Public Health at Johns Hopkins University. At Hopkins he has oversight responsibilities for Admissions, Financial Aid, Records and Registration, Career services, Disability Support, Student Diversity, and the Student Outreach Center. Mike has served as a student affairs administrator for over seventeen years working in public and private colleges and university with very diverse missions.

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## APPENDIX 7.4

### Conference Reading Lists



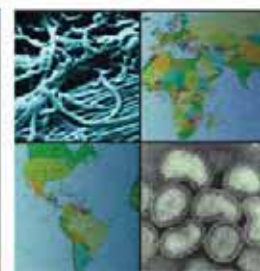
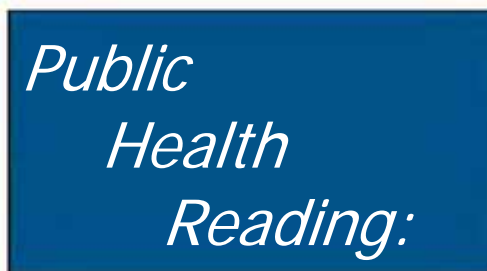


## APPENDIX 7.4.1

### *Public Health Reading: People Politics and Pandemics*







## *People, Politics & Pandemics*

- Abraham, T. (2005). Twenty-first century plague : the story of SARS. Baltimore, MD: Johns Hopkins University Press. RC 776 S27 A27 2005 Life Science
- Aschengrau, A., & Seage, G. R. (2008). Essentials of epidemiology in public health (2nd ed.). Sudbury, Mass.: Jones and Bartlett Publishers. RA 651 A83 2008 Life Science
- Barry, J. M. (2004). The great influenza : the epic story of the deadliest plague in history. New York: Viking. RC 150.4 B37 2004 Life Science, PCL
- Bazin, H. (2000). The eradication of smallpox : Edward Jenner and the first and only eradication of a human infectious disease. San Diego: Academic Press. RA 644 S6 B39 2000 Life Science
- Bhopal, R. S. (2007). Ethnicity, race, and health in multicultural societies : foundations for better epidemiology, public health and health care. New York: Oxford University Press. RA 563 M56 B56 2007 PCL
- Blumberg, B. S. (2002). Hepatitis B : the hunt for a killer virus. Princeton, NJ: Princeton University Press. QR 201 H46 B58 2002 Life Science, PCL
- Brownell, K. D., & Horgen, K. B. (2004). Food fight : the inside story of the food industry, America's obesity crisis, and what we can do about it. Chicago: Contemporary. RA 645 O23 B76 2004 Life Science
- Cirillo, V. J. (2004). Bullets and bacilli : the Spanish-American War and military medicine. New Brunswick, NJ: Rutgers University Press. E 731 C57 2004 PCL
- Close, W. T. (2002). Ebola : Through the eyes of the people. Marbleton, WY: Meadowlark Springs Productions. PS 3553 L587 E26 2002 PCL Stack
- Cohen, J. (2001). Shots in the dark : the wayward search for an AIDS vaccine. New York: Norton. QR 189.5 A33 C64 2001 Life Science, PCL
- Cohen, L. (2007). Prevention is primary : strategies for community well-being. New York: John Wiley & Sons. RA 445 P6585 2007 PCL
- Cole, L. A. (2003). The anthrax letters : a medical detective story. Washington, DC: Joseph Henry Press. HV 6432 C63 2003 PCL
- Critser, G. (2003). Fat land : how Americans became the fattest people in the world. Boston: Houghton Mifflin Co. RA 645.023 C75 2003 PCL, Pub.Affairs
- Crosby, A. W. (2003). America's forgotten pandemic : the influenza of 1918 (2nd ed.). New York: Cambridge University Press. RA 644 I6 C76 2003 Life Science
- Daniel, T. M. (1997). Captain of death : the story of tuberculosis. Rochester, NY: University of Rochester Press. RC 311 D25 1997 Life Science
- Davies, P. (2000). The devil's flu : the world's deadliest influenza epidemic and the scientific hunt for the virus that caused it (1st American ed.). New York: Henry Holt & Co. RA 644 I6 D38 2000 Life Science
- Davis, J. R., & Lederberg, J. (2001). Emerging infectious diseases from the global to the local perspective : a summary of a workshop of the Forum on Emerging Infections. Washington, DC: National Academy Press. RA 643 E46 2001 Life Science
- DiClemente, R. J., Crosby, R. A., & Kegler, M. C. (2002). Emerging theories in health promotion practice and research : strategies for improving public health (1st ed.). San Francisco: Jossey-Bass. RA 427.8 E447 2002 PCL
- Dormandy, T. (1999). The white death : a history of tuberculosis. London: Hambledon Press. RC 311 D67 1999 Life Science, PCL
- Drexler, M. (2002). Secret agents : the menace of emerging infections. Washington, DC: Joseph Henry Press. RA 653 D74 2002 Life Science
- Farmer, P. (1999). Infections and inequalities : the modern plagues. Berkeley: University of California Press. RA 418.5 P6 F37 1999 PCL
- Farmer, P. (2003). Pathologies of power : health, human rights, and the new war on the poor. Berkeley: University of California Press. HM 821 F37 2003 PCL
- Flynn, S. E. (2007). Edge of disaster : rebuilding a resilient nation. New York: Random House. HV 551.3 F62 2007 PCL
- Fong, I. W., & Drlica, K. (2008). Antimicrobial resistance and implications for the twenty-first century. New York: Springer. QR 177 A5825 2008 Life Science



- Friis, R. H., & Sellers, T. A. (2004). Epidemiology for public health practice (3rd ed.). Boston: Jones & Bartlett. RA 651 F686 2004 Life Science, PCL
- Gallo, R. C. (1991). Virus hunting : AIDS, cancer, and the human retrovirus : a story of scientific discovery. New York: BasicBooks. QR 359.72 G35 A3 1991 PCL
- Gandy, M., & Zumla, A. (2003). The return of the white plague : global poverty and the 'new' tuberculosis. London: Verso. RA 644 T7 R486 2003 Life Science
- Garrett, L. (1994). The coming plague : newly emerging diseases in a world out of balance. New York: Farrar, Straus & Giroux. RA 651 G37 1994 Life Science, PCL
- Garrett, L. (2000). Betrayal of trust : the collapse of global public health (1st pbk. ed.). New York: Hyperion. RA 441 G37 2000 Life Science, PCL
- Gest, H. (2003). Microbes : an invisible universe (Rev. ed.). Washington, DC: ASM Press. QR 41.2 G468 2003 Life Science
- Giesecke, J. (2002). Modern infectious disease epidemiology (2nd ed.). London: Arnold. RA 651 G54 2002 Life Science
- Gladwin, M., & Trattler, B. (2004). Clinical microbiology made ridiculously simple (3rd ed.). Miami: MedMaster. QR 67 G543 2004 Life Science
- Glanz, K., Rimer, B. K., & Lewis, F. M. (2002). Health behavior and health education : theory, research, and practice (3rd ed.). San Francisco: Jossey-Bass. RA 776.9 H434 2002 PCL
- Gordis, L. (2004). Epidemiology (3rd ed.). Philadelphia: Saunders. RA 651 G58 2004 Life Science
- Greenberg, R. S. (2005). Medical epidemiology (4th ed.). New York: Lange Medical Books. RA 650.5 M4 2005 PCL
- Guillemin, J. (1999). Anthrax : the investigation of a deadly outbreak. Berkeley: University of California Press. RA 644 A6 G85 1999 PCL
- Guillemin, J. (2005). Biological weapons : from the invention of state-sponsored programs to contemporary bioterrorism. New York: Columbia University Press. UG 447.8 G85 2005 PCL
- Heymann, D. L. (2004). Control of communicable diseases manual : an official report of the American Public Health Association (18th ed.). Washington, DC: American Public Health Association. RA 643 C65 2004 PCL
- Holland, W. W., Olsen, J., & Florey, C. d. V. (2007). The development of modern epidemiology : personal reports from those who were there. New York: Oxford University Press. RA 649 D58 2007 Life Science
- Hopkins, D. R. (2002). The greatest killer : smallpox in history, with a new introduction. Chicago: University of Chicago Press. RC 183.1 H66 2002 PCL
- Hornblum, A. M. (1998). Acres of skin : human experiments at Holmesburg Prison : a story of abuse and exploitation in the name of medical science. New York: Routledge. R 853 H8 H67 1998 Life Science, PCL
- Iezzoni, L. (1999). Influenza 1918 : the worst epidemic in American history. New York: TV Books. RC 150.4 I39 1999 PCL
- Institute of Medicine (U.S.). (2003). The future of the public's health in the 21st century. Washington, DC: National Academies Press. RA 445 F885 2003 PCL
- Geiter, L. (2000). Ending neglect : the elimination of tuberculosis in the United States. Washington, D.C.: National Academy Press. RA 644 T7 I57 2000 Life Science
- Jones, J. H., & Tuskegee Institute. (1993). Bad blood : the Tuskegee syphilis experiment (New and expanded ed.). New York: Free Press. R 853 H8 J66 1993 Life Science, PCL
- Kelly, J. (2005). The great mortality : an intimate history of the Black Death, the most devastating plague of all time (1st ed.). New York: HarperCollins Publishers. RC 172 K445 2005 PCL
- Kessel, F. S., Rosenfield, P. L., & Anderson, N. B. (2003). Expanding the boundaries of health and social science: case studies in interdisciplinary innovation. Oxford: Oxford University Press. R 853 I53 E955 2003 Life Science
- Kidder, T. (2003). Mountains beyond mountains (1st ed.). New York: Random House. R 154 F36 K53 2003 Life Science, PCL
- Kluger, J. (2004). Splendid solution : Jonas Salk and the conquest of polio. New York: G.P. Putnam's Sons. QR 31 S25 K58 2004 Life Science
- Kolata, G. B. (1999). Flu : the story of the great influenza pandemic of 1918 and the search for the virus that caused it (1st ed.). New York: Farrar, Straus and Giroux. RC 150.4 K64 1999 PCL
- Koneman, E. W., & Tupper, E. S. (2002). The other end of the microscope : the bacteria tell their own story : a fantasy. Washington, D.C.: ASM Press. QR 74.8 K664 2002 Life Science
- Koplow, D. A. (2003). Smallpox : the fight to eradicate a global scourge. Berkeley: University of California Press. RA 644 S6 K675 2003 Life Science, PCL
- Krasner, R. I. (2002). The microbial challenge : human-microbe interactions. Washington, D.C.: ASM Press. QR 46 K734 2002 Life Science
- Lashley, F. R., & Durham, J. D. (2007). Emerging infectious diseases : trends and issues. (2nd ed.). New



- York: Springer Pub. Co. RA 643 E465 2007 Life Science
- Layne, S. P., Beugelsdijk, T. J., & Patel, C. K. N. (2001). Firepower in the lab : automation in the fight against infectious diseases and bioterrorism. Washington D.C.: Joseph Henry Press. UG 447.8 F57 2001 Engineering Library
- Lederberg, J. (1999). Biological weapons : limiting the threat. Cambridge, Mass: MIT Press. Online, connect from <http://catalog.lib.utexas.edu/> Library Catalog
- Lee, R. A. (2007). From snake oil to medicine : pioneering public health. Westport, Conn.: Praeger Publishers. RA 424.5 C68 L44 2007 PCL
- Levy, J. A. (1998). HIV and the pathogenesis of AIDS (3rd ed.). Washington, DC: ASM Press. QR 201 A37 L48 2007 Life Science
- Levy, S. B. (2002). The antibiotic paradox : how the misuse of antibiotics destroys their curative power (2nd ed.). Cambridge, MA: Perseus Pub. QR 177 L48 2002 Life Science, PCL
- Lombardo, J. S., & Buckeridge, D. L. (2007). Disease surveillance : a public health informatics approach. Hoboken, N.J.: Wiley-Interscience. RA 652.2 P82 D57 2007 PCL
- Mahmoud, A. A. F. & Pray, L. A. (2002). Biological threats and terrorism : assessing the science and response capabilities : workshop summary. Washington, DC: National Academy Press. RC 88.9 T47 B54 2002 Life Science
- Mari, C. (2007). Global epidemics. New York: H.W. Wilson Co. RA 649 G56 2007 Life Science
- Markel, H. (2004). When germs travel : six major epidemics that have invaded America since 1900 and the fears they have unleashed (1st ed.). New York: Pantheon Books. RC 111 M226 2004 Life Science
- McCormick, J. B., Fisher-Hoch, S., & Horvitz, L. A. (1996). Level 4 : virus hunters of the CDC. New York: Barnes & Nobles Bks. RA 649 M27 1996 PCL
- McKenzie, J. F., Neiger, B. L., & Smeltzer, J. L. (2005). Planning, implementing, and evaluating health promotion programs : a primer (4th ed.). San Francisco: Pearson. RA 427.8 M39 2005 PCL
- Miller, J., Engelberg, S., & Broad, W. J. (2001). Germs : biological weapons and America's secret war. New York: Simon & Schuster. UG 447.8 M54 2001 PCL
- Mims, C. A. (2000). The war within us : everyman's guide to infection and immunity. San Diego, CA.: Academic Press. RC 112 M557 2000 Life Science
- Morris, R. D. (2007). The blue death : disease, disaster and the water we drink. New York: HarperCollins. RA 642 W3 M67 2007 PCL
- Morse, S. S. (1996). Emerging viruses. New York: Oxford University Press. RA 644 V55 E44 1996 Life Science
- Nachamkin, I., & Blaser, M. J. (2000). Campylobacter jejuni (2nd ed.). Washington, DC: ASM Press QR 201 C25 C36 2000 Life Science
- National Research Council (U.S.). Committee on Climate Ecosystems Infectious Disease and Human Health. (2001). Under the weather : climate, ecosystems, and infectious disease. Washington, DC: National Academy Press. RA 793 U53 2001 Life Science
- Needham, C., & Canning, R. (2003). Global disease eradication : the race for the last child. Washington, DC: ASM Press. RA 651 N44 2003 Life Science
- Nelson, A. M., & Horsburgh, C. R. (1998). Pathology of emerging infections 2. Washington, DC: ASM Press. RC 111 P393 1998 Life Science
- Nestle, M. (2002). Food politics : how the food industry influences nutrition and health. Berkeley: University of California Press. TX 360 U6 N47 2002 PCL
- Nestle, M. (2003). Safe food : bacteria, biotechnology, and bioterrorism. Berkeley: University of California Press. RA 601 N465 2003 Life Science, PCL
- Novick, L. F., Morrow, C. B., & Mays, G. P. (2008). Public health administration : principles for population-based management (2nd ed.). Sudbury, MA: Jones and Bartlett. RA 425 P83 2008 PCL
- Orent, W. (2004). Plague : the mysterious past and terrifying future of the world's most dangerous disease. New York: Free Press. RC 172 O746 2004 Life Science
- Ostfeld, R. S., Keesing, F., & Eviner, V. T. (Eds.). (2008). Infectious disease ecology : the effects of ecosystems on disease and of disease on ecosystems. Princeton: Princeton U Pr. QH 541.15 E265 I54 2008 Life Science
- Pagano, M., & Gauvreau, K. (2000). Principles of biostatistics (2nd ed.). Pacific Grove, CA: Duxbury. QH 323.5 P34 2000 TEXT Life Science
- Pierce, J. R., & Writer, J. (2005). Yellow jack : how yellow fever ravaged America and Walter Reed discovered its deadly secrets. Hoboken, NJ: J. Wiley. RA 644 Y4 R447 2005 Life Science
- Preston, R. (1994). The hot zone. New York: Random House. RC 140.5 P74 1994 PCL, Life Science
- Preston, R. (2002). The demon in the freezer : a true story. New York: Random House. RA 644 S6 P74 2002B Life Science
- Reichman, L. B., & Tanne, J. H. (2002). Timebomb : the global epidemic of multi-drug-resistant tuberculosis. New York: McGraw-Hill. RC 312 R454 2002 Life Science, PCL



- Reverby, S. (2000). Tuskegee's truths : rethinking the Tuskegee syphilis study. Chapel Hill: University of North Carolina Press. R 853 H8 T87 2000 PCL
- Rhodes, R. (1998). Deadly feasts : the "Prion" controversy and the public's health (1st Touchstone ed.). New York: Simon & Schuster. RA 644 P93 R46 1997 Life Science
- Roizman, B. (1995). Infectious diseases in an age of change : the impact of human ecology and behavior on disease transmission. Washington, DC: National Academy Press. RA 643 I654 1995 Life Science
- Ryan, F. (1997). Virus-X : tracking the new killer plagues : out of the present and into the future (1st ed.). Boston: Little, Brown. RA 643 R93 1997 PCL
- Salyers, A. A., & Whitt, D. D. (2005). Revenge of the microbes : how bacterial resistance is undermining the antibiotic miracle. Washington, DC: ASM Press. QR 177 S26 2005 Life Science
- Scheld, W. M., Murray, B. E., Hughes, J. M., & American Society for Microbiology. (2007). Emerging infections 7. Washington, DC: ASM Press. RC 109 E44 V.7 2007 Life Science
- Schlossberg, D. (2004). Infections of leisure (3rd ed.). Washington, DC: ASM Press. RC 113 I54 2004 Life Science
- Schlosser, E. (2001). Fast food nation : the dark side of the all-American meal. Boston: Houghton Mifflin. TX 715 S2968 2001 PCL
- Schlosser, E. (2003). Reefer madness : sex, drugs, and cheap labor in the American black market. Boston: Houghton Mifflin. HD 2346 U52 S34 2003 PCL
- Schneiderman, N. (2001). Integrating behavioral and social sciences with public health (1st ed.). Washington, DC: American Psychological Association. RA 418 I522 2001 PCL
- Schwartz, M., & Schneider, E. (2003). How the cows turned mad:Unlocking the Mysteries of Mad Cow Disease. Berkeley: University of California Press. RA 644 P93 S3913 2003 Life Science
- Sherman, I. W. (2007). Microbial source tracking. Washington, D.C. : ASM Press. QR 67 M53 2007 Life Science
- Sherman, I. W. (2006). The Power of Plagues. Washington, D.C.: ASM. RA 643 S55 2006 Life Science
- Sherman, I. W. (2007). Twelve diseases that changed our world. Washington, DC: ASM Press. RA 649 S44 2007 Life Science
- Shilts, R. (1987). And the band played on : politics, people, and the AIDS epidemic. New York: St. Martin's Press. RA 644 A25 S48 1987 PCL
- Shrader-Frechette, K. S. (2007). Taking action, saving lives : our duties to protect environmental and public health. New York: Oxford University Press. RA 566 S37 2007 Life Science
- Siegel, M., & Lotenberg, L. D. (2007). Marketing public health : strategies to promote social change (2nd ed.). Sudbury, MA: Jones and Bartlett Publishers. RA 427 S53 2007 Life Science
- Simons-Morton, B. G., Greene, W. H., Gottlieb, N. H., & Greene, W. H. (1995). Introduction to health education and health promotion (2nd ed.). Prospect Heights, IL: Waveland Press. RA 440 G74 1995 PCL
- Stine, G. J. (2008). AIDS Update, 2008. San Francisco: Benjamin Cummings. On order
- Strauss, J. H., & Strauss, E. G. (2008). Viruses and human disease (2nd ed.). Boston: Elsevier / Academic Press. QR 201 V55 S77 2008 Life Science
- Szklo, M., & Nieto, F. J. (2007). Epidemiology : beyond the basics (2nd ed.). Sudbury, MA: Jones and Bartlett Publishers. RA 651 S97 2007 Life Science
- Tabor, E. (2007). Emerging viruses in human populations. Amsterdam: Elsevier. QR 201 V55 E64 2007 Life Science
- Thomas, P. (2001). Big shot : passion, politics, and the struggle for an AIDS vaccine (1st ed.). New York: Public Affairs. QR 189.5 A33 T48 2001 PCL
- Tierno, P. M. (2001). The secret life of germs : observations and lessons from a microbe hunter. New York: Pocket Books. QR 56 T546 2001 Life Science
- Tucker, J. B. (2001). Scourge : the once and future threat of smallpox (1st ed.). New York: Atlantic Monthly Press. RC 183.1 T83 2001 PCL
- Tucker, J. B. (2006). War of nerves : chemical warfare from World War I to al-Qaeda. New York: Pantheon . UG 447 T83 2006 Engineering, PCL
- Turnock, B. J. (2004). Public health : what it is and how it works (3rd ed.). Sudbury, MA: Jones & Bartlett. RA 445 T86 2004 PCL
- Walters, M. J. (2003). Six modern plagues and how we are causing them. Washington: Island Press. RA 653 W34 2003 Life Science, PCL
- World Health Organization. (2000). Foodborne disease : a focus for health education. Geneva: World Health Organization. TX 531 F58 2000 Life Science
- Yam, P. (2003). The pathological protein : Mad Cow, Chronic Wasting, and other deadly prion diseases. New York: Copernicus. RA 644 P93 Y35 2003 Life Science
- Zelicoff, A. P., & Bellomo, M. (2005). Microbe : are we ready for the next plague? New York: American Management Association. RA 650.5 Z45 2005 PCL



## APPENDIX 7.4.2

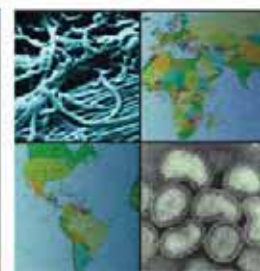
### *Biotech, Bacteria and Bad Guys Adventures in Public Health Fiction*







## *Bioterror, Bacteria & Bad Guys:*



### *Adventures in Public Health Fiction*

Berman, D. A. (2005). Mount doomsday : A novel. Boone, NC: High Country Publishers.

Mount Lassen erupts, and newsman Richard Burrell and geologist Lee Burrell discover the volcanic ash is radioactive. The government impedes attempts at protecting life in the region.

Burstyn, V. (2005). Water inc. London: New York.

Ecothriller about the struggle between environmental and corporate control over freshwater, an essential and increasingly endangered resource.

Camus, A., Gilbert, S., & tr. (1948). The plague ([1st American J. ed.]). New York: A.A. Knopf.

Chaos prevails when the bubonic plague strikes the Algerian coastal city of Oran.

Card, O. S. and A. Johnston (2007). Invasive procedures. New York, Tor.

Geneticist George Galen aids the downtrodden with the help of a genetically altered band of helpers known as Healers. Galen has developed V16, an effective treatment for many incurable genetic diseases; the problem is that when V16 isn't expressly tailored for each individual patient's DNA, the results are disastrous. Enter virologist Lt. Col. Frank Hartman, recruited by the federal Biohazard Agency to catch Galen and create an antidote. Based on Card's 1977 story *Malpractice*.

Child, L. (2007). Deep Storm : a novel. New York, Doubleday.

Peter Crane, a former naval doctor, investigates a mysterious illness on a North Atlantic oil rig. Crane is transported from the rig to an amazing undersea habitat run by the military that's apparently pursuing evidence that Atlantis exists. Psychotic episodes among the scientific staff keep Crane busy, while staff members confront him with concerns that exploring the Earth's core could be fatal to all life on earth.

Cook, R. (1998). Toxin. New York: Putnam.

Cook cooks up another medical thriller, with a bunch of E.coli bacteria as villain, an underdone hamburger as murder weapon, and a little boy as victim. His doctor-father soon discovers that something far more sinister than bad hygiene is the cause.

Goldberg, M. (2005). Wickett's remedy : A novel (1st ed.). New York: Doubleday.

When Spanish influenza hits Boston in the early 20th century, Lydia, a shopgirl, finds herself working as a nurse in an experimental ward dedicated to understanding the raging epidemic, through the use of human subjects.

Hecht, D. (2001). The babel effect : A novel (1st ed.): Crown Publishers.

The Genesis Project is researching a fascinating thesis: that violence is a virus and that evil is genetically based. A billionaire agrees to underwrite their project, which starts with brain scans of death row inmates and progresses to war zones and killing fields all over the world.

Ludlum, R., & Lynds, G. (2000). Hades factor. New York: St. Martin's Griffin.

After three disparate Americans succumb to an unknown Ebola-like virus, the U.S. Army Medical Research Institute for Infectious Diseases (USAMRIID) is pressed into service.

Ludlum, R., & Shelby, P. (2001). The cassandra compact (1st ed.). New York: St. Martin's Griffin.

Covert-One, the president's personal, super-secret agency formed after some recent virus-driven chaos, is staffed by international covert operatives who must locate a deadly strain of pox that was stolen.



Lynch, P. (1997). Omega. New York: Dutton.

Drug-resistant bacteria are running loose, causing different types of infection. Dr. Marcus Ford, head of a trauma unit, watches his patients succumb to these infections and then learns that his own daughter is also infected with this super bacteria. Ford learns that there may be a cure with a powerful, genetically engineered antibiotic. As he tries to locate this elusive antibiotic, his search leads him to a couple of high-powered pharmaceutical companies.

MacAlister, V. A. (2001). The mosquito war (1st ed.). New York: Forge.

A pharmaceutical firm finds a cure for malaria with a serum derived from sea sponges but the higher-ups cut funding for the project before the cure can be tested. A lab assistant, whose mother and brother died of malaria, takes matters into his own hands.

Mason, B. A. (2005). An atomic romance : A novel (1st ed.). New York: Random House.

Reed Futrell has worked for more than 20 years at a uranium enrichment plant. When news breaks about plutonium leaks at the plant, Reed investigates further and realizes that the company he thinks is taking care of him might not be telling its workers the truth.

Mullen, T. (2006). The last town on earth : a novel. New York, Random House.

It is the autumn of 1918 and a world war and an influenza epidemic rage outside the isolated utopian logging community of Commonwealth, Wash. In an eerily familiar climate of fear, rumor and patriotic hysteria, the town enacts a strict quarantine, posting guards at the only road into town. A weary soldier approaches the gate on foot and refuses to stop. Shots ring out, setting into motion a sequence of events that will bring the town face-to-face with some of the 20th-century's worst horrors.

Nance, J. J. (1995). Pandora's clock. New York: Doubleday.

Trapped on a Boeing-747, hundreds of people may be infected with a highly contagious virus that, if dispelled into the population, would wipe out a continent. No country wants the plane to land in their airport. Besides having nowhere to land, the pilot finds that someone is trying to shoot him down.

Palmer, M. (2002). Fatal: Bantam Books.

When several of Matt Rutledge's patients turn up in the emergency room, babbling incoherently with lumps on their faces, he discovers that the culprit may be a new supervaccine that's about to hit the market. Joined by a group of like-minded medical professionals and civilians, Rutledge sets out to stymie the makers of the vaccine.

Palmer, M. (2004). The society: Bantam Books.

Several loathsome CEOs of HMOs in Massachusetts are murdered. Patty Moriarity, a rookie state cop, gets involved with a physician, Dr. Will, and the two of them run into conflict with some extremely nasty health insurer executives and their loyal, gun-toting minions.

Preston, R. (1998). The cobra event. New York: Ballantine Books.

One crazed scientist takes it upon himself to develop and release a new biological weapon that will "thin out" the human race. The police, the FBI, and national medical and science personnel become involved in trying to get to the bottom of the deadly disease that is attacking New York City.

Roiphe, A. R. (2006). An imperfect lens : A novel (1st ed.). New York: Shaye Areheart Books.

Cholera arrives in Alexandria in 1883, followed by an intrepid French research team sent by Louis Pasteur to find and identify the "swimming monster."

Rollins, J. (2007). The Judas strain : a Sigma force novel. New York, Morrow.

Sigma Force, made up of former Special Forces officers trained as experts in various scientific fields ("killer scientists," one of their number calls them), scours the world for technologies that could help or threaten the U.S. This time the group's mission involves a devastating bacteriological plague, a mysterious cryptogram that may predate humanity, and the deadly truth about what happened after Marco Polo's expedition to China.

Simon, F. (2005). Brevig mission plague. Uhrichville, Ohio: Barbour Pub.

The Alaskan village of Brevig Mission, site of a deadly Spanish Flu outbreak of 1918, is home to the U.S. government's lab assigned to research a vaccine. When a Saudi extremist cell chooses the flu virus as the next major biological weapon, the government must protect the lab at all costs. When the SecurityCheck team discovers that the flu has been released, they must stop the threat-and find a cure.

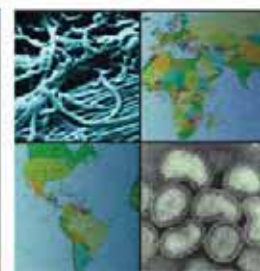


## APPENDIX 7.4.3

### *Viruses, Vectors and Victims: Public Health at the Movies*







## *Public Health at the Movies*

### *28 Weeks Later.* (2007)

Just when it seems the "rage virus" has been fully contained, and London is in the process of slowly recovering, an extremely unfortunate couple is attacked by a small band of rampaging "ragers". The cowardly husband escapes while his wife is attacked and presumably infected. Their surviving children fall under the protection of a U.S. Army sharpshooter, but nobody's safe for long.

### *Absolon.* (2003)

In the near future, a virus has infected everyone on the planet, and Absolon is a drug that everyone must take to stay alive. One corporation controls the drug. A scientist who was researching the virus is found murdered, and Norman Scott is the policeman who investigates the crime. Soon Norman realizes that he's in over his head, as hitmen are gunning for him.

### *And the Band Played On.* (1993)

Story of the discovery of the AIDS virus. From the early days in 1978 when numerous San Francisco gays began dying from unknown causes, to the identification of the HIV virus.

### *The Andromeda Strain.* (1981)

A deadly micro-organism enters Earth's atmosphere with a returning satellite, and a team of medical specialists must discover how to battle it before time runs out.

### *Cassandra Crossing.* (1977)

"Outbreak" meets "The Runaway Train" as a motley group of passengers are quarantined on a train destined to prevent the spread of the disease at the cost of their lives. Government intrigue, international smuggling, and the legend of the Cassandra Crossing add to the suspense.

### *Contagious.* (1997)

An epidemiologist has to cope with a cholera outbreak, track down a drug dealer who is a carrier, track down all the people he has come into contact with and deal with hundreds of patients. Then it gets personal. She discovers her husband and step-children are lost in the woods and her husband is infected with cholera. She begins a race against time to track them down while battling her own demons and lack of sleep. In the end her step-children treat her with a new found respect.

### *Erin Brockovich.* (2000)

Erin Brockovich is an unemployed single mother who works as a file clerk for a lawyer. While no one takes her seriously, with her trashy clothes and earthy manners, that soon changes when she begins to investigate a suspicious case involving the Pacific Gas & Electric Company. She discovers that the company is trying to buy land contaminated by toxic hexavalent chromium waste that the company is illegally dumping. Erin finds herself leading point in a series of events that involve her law firm in one of the biggest class action lawsuits in American history.

### *I Am Legend.* (2007)

After the outbreak of a lethal virus in 2009, in 2012 U.S. Army virologist Lieutenant Colonel Robert Neville is left as the last healthy human along with his trusty dog in New York City and possibly the entire world.



*The Insider.* (1999)

This film tells the true story of Jeffrey Wigand, a former tobacco executive, who revealed to CBS-TV News show "60 Minutes." that the tobacco industry was not only aware that cigarettes are addictive & harmful, but deliberately worked on increasing that addictiveness. He and producer Lowell Bergman learn the hard way that simply telling the truth is not enough as they struggle against both Big Tobacco's attempts to silence them and the CBS TV Network's own cowardly preference of putting money as a higher priority over the truth.

*John Q.* (2002)

John Q. is a factory worker facing financial hardship as a result of reduced hours in his workplace. He and his wife soon discover that their child is in need of an emergency heart transplant. Although they have an HMO, they are informed that their policy doesn't cover such an expensive procedure. Unable to raise the money for the surgery himself and with no recourse but to take his son home to die, John snaps and holds the staff and patients of the hospital's emergency room hostage at gunpoint.

*Mimic.* (1998)

A team of scientists discover a miracle cure that stops the spread of a deadly disease...only to find three years later that something has gone terribly wrong! Their creation has taken on a horrifying life of its own...able to mimic and destroy its every predator - even man! And now, it threatens to wipe out an entire city...unless they stop it in time.

*12 Monkeys.* (2005)

A lethal virus wipes out five billion people in 1996. Only 1% of the population survives by 2035, and is forced to live underground. A convict reluctantly volunteers to be sent back in time to 1996 to investigate the mysterious "Army of the Twelve Monkeys" and locate the virus before it mutates so that scientists can study it. Unfortunately Cole is mistakenly sent to 1990 and is arrested and locked up in a mental institution, where he meets Dr. Kathryn Raily, a psychiatrist, and Jeffrey Goines, the insane son of a famous scientist and virus expert.

*Miss Evers' Boys.* (1997)

In 1932, Nurse Eunice Evers is invited to work with doctors on the "Tuskegee Experiment" to study the effects of syphilis. She is faced with a terrible dilemma when she learns the patients are denied treatment that could cure them.

*Outbreak.* (1995)

Dustin Hoffman plays Sam Daniels, a take-charge army virologist trying to stave off global biological meltdown. A rare killer virus from the jungles of Zaire has taken hold in a California community. Its mortality rate is 100%. And some say the only way to stop its spread is to firebomb the town and everyone in it.

*Panic in the Streets.* (2005)

One night in the New Orleans slums, vicious hoodlum Blackie and his friends kill an illegal immigrant who won too much in a card game. When Dr. Reed confirms the dead man had pneumonic plague he must find and inoculate the killers.

*Quarantine.* (1990)

In a futuristic society being decimated by plague, a fascist movement seizes power and quarantines not only the plague victims, but anyone related to them. Rebels trying to assassinate a particularly reactionary senator stumble onto a computer programmer trying to track and eradicate the disease.

*Satan Bug.* (1964)

A germ warfare lab has had an accident. The first theory is that one of the nasty germs has gotten free and killed several scientists. The big fear is that a more virulent strain, named The Satan Bug because all life can be killed off by it should it escape, may have been stolen.

*Winged Scourge.* (1944)

Shows the development of the Anopheles mosquito, carrier of the malaria germ, from the larva to full growth at which time it becomes the menace. The Seven Dwarfs demonstrate the various methods for mosquito control.



## APPENDIX 7.5

# Pfizer “Milestones in Public Health” Report





## **Pfizer Milestones in Public Health Exhibit Report**

The Pfizer Milestones Exhibit was requested from the Pfizer Public Health Division to be used both as an educational display on the day of the conference, and as a way of raising awareness of students, staff and faculty all across the campus about the upcoming event.

The Pfizer Milestones Exhibit arrived at The University of Texas at Austin on March 17, 2008. For the next 15 days, until its departure on April 3, the exhibit, boxes of Pfizer books, and a poster to advertise the Disease Detective conference, traveled to three locations on campus. On April 2, it was displayed in the exhibit hall throughout the day. At each location, the books, "The Pfizer Guide to Careers in Public Health", and the "Milestones in Public Health" were available; approximately 200-500 books were distributed at each location.

The exhibit was first displayed at the UT School of Nursing, where the posters were hung on the walls of the Student Lounge for 3 days. It then traveled to the College of Pharmacy and was displayed for 3-4 days in the hallways of the Pharmacy building. The UT Life Sciences Library received the exhibit for 5 days including the weekend before the Disease Detective conference. Finally, the display was set up in the Exhibit Hall of the Disease Detective Conference, where it was viewed throughout the day by hundreds of students, advisors, faculty, and public health professionals.

At each location, the books, "The Pfizer Guide to Careers in Public Health", and the "Milestones in Public Health" were available; approximately 200-500 books were distributed at each location.

Nancy Elder, the Director of the Life Science Library, commented,

*"While the exhibit was in the Library we noticed many students taking a few extra moments to stop and look at the posters. We gave away about 400 books. I do think that students who noticed the Milestones exhibit also stopped to look at the announcement for the Disease Detective conference. Several students asked me what it was all about. I encouraged them to take a book but to also come over to the conference. I had a number of opportunities to introduce the diverse careers that are part of public health and the idea that it isn't 'only microbiologists'. We were quite amused when a number of students would see the books and were interested enough to come over and ask to check one out. What a wonderful surprise when we said 'they're free, you can have one'. In addition to students who were interested in the books and the exhibit, I noticed a number of other visitors to the library who stopped to see the exhibit and take a copy of the book. One was our library development officer who commented 'My wife is a nurse, so I hope it's ok if I took a book. She'll find this quite relevant to her work.' I also gave him a flyer for the conference and invited his wife."*

We concluded that the *Pfizer Milestones Exhibit* was an excellent way to educate large numbers of people all over the campus about public health, who both read the posters and received the books. It was also a great way to advertise our



upcoming Disease Detective Conference, which enjoyed an even larger participation this year than in 2006, with more than 600 students and 250 advisors, faculty and public health professionals in attendance. We are sincerely grateful for the opportunity to host this outstanding exhibit, and to provide students, faculty, and staff with books to excite them about careers in public health and to help them appreciate the major milestones in the field.



Photo 1: Donald Thompkins, graduating BSN student and Trish O'Day RN, MSN, Faculty at the UT School of Nursing



In the Texas Union Ballroom during the Disease Detective Conference April 2, 2008



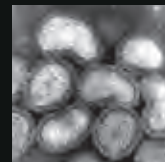
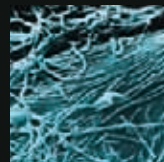
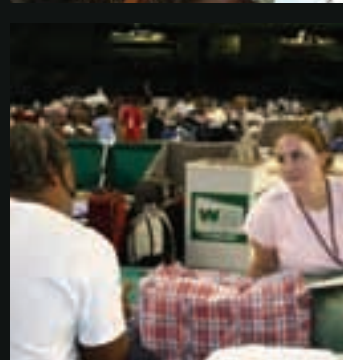
## APPENDIX 7.6

### Conference Posters and Flyers





# become a disease detective Discover Public Health!

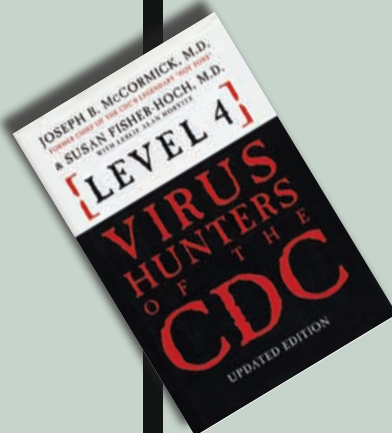


## save the date!



# april 2, 2008

12pm–8pm  
It's all free!



### Kickoff Luncheon

Twelve exciting presentations: Hot Topics in Public Health

### Keynote Session: Out of Africa

*Origins of HIV: Where, When, Why and How?*

Joseph B. McCormick, M.D.

*Africa: The Virus Cradle*

Susan P. Fisher-Hoch, M.D.

**Exhibits:** Graduate Education, Career Opportunities, Fellowships, and Internships in Public Health



Texas Union · The University of Texas at Austin

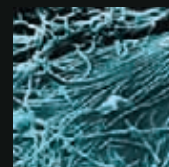
Check our website for updated information:

[www.sbs.utexas.edu/diseasedetective](http://www.sbs.utexas.edu/diseasedetective)

This conference is generously supported by: The Centers for Disease Control and Prevention, Office of Workforce and Career Development  
Sponsors: College of Natural Sciences: School of Biological Sciences, Career Services and Health Professions Office;  
The Centers for Disease Control and Prevention, Office of Workforce and Career Development; Texas Department of State Health Services;  
Austin/Travis County Health and Human Services Department; The University of Texas School of Public Health, Austin Regional Campus;  
Association of Public Health Laboratories; Association of Schools of Public Health.



# become a disease detective Discover Public Health!



april  
2  
2008

texas union • 12pm–7:30pm • the university of texas at austin

Check our website for updated information: [www.sbs.utexas.edu/diseasedetective/](http://www.sbs.utexas.edu/diseasedetective/)

**Exhibitors** Schools of Public Health Columbia University, Mailman School of Public Health • Emory University, Rollins School of Public Health • George Washington University School of Public Health and Health Services • Johns Hopkins University, Bloomberg School of Public Health • Ohio State University, College of Public Health • Southern Illinois University, M.S. Degree in Public Health Laboratory Sciences Program • State University of New York, University at Albany, School of Public Health • Texas A&M Health Science Center, School of Rural Public Health • University of Kansas, Master of Public Health Program • University of Kentucky College of Public Health • University of Minnesota, School of Public Health • University of North Texas Health Science Center, School of Public Health • University of Southern California Master of Public Health Program • University of Texas School of Public Health, Austin Regional Campus • University of Texas School of Public Health, Brownsville Regional Campus • University of Texas School of Public Health, Houston • University of Washington School of Public Health and Community Medicine • Yale University, School of Public Health  
**Organizations** Association of Public Health Laboratories (APHL) • Association of Schools of Public Health (ASPH) • Austin/Travis County Health and Human Services Department • Centers for Disease Control and Prevention, Office of Workforce and Career Development • Doctors Without Borders/Medecins Sans Frontieres • Pfizer Public Health & Policy Group • Texas Department of State Health Services • APHL/CDC Emerging Infectious Diseases Fellowship Program • CDC Epidemic Intelligence Service • US Public Health Service • USAID  
UT Austin Public Health Internship Program • Life Science Library • School of Nursing • Society of Public Health Students • Health Education Program, Department of Kinesiology & Health Education

	Union Ballroom 3.202	Quadrangle Room, 3.304	Santa Rita Room 3.502	Governor's Room 3.116
12:00pm	EXHIBIT HALL OPENS Bring Your Friends! Learn about graduate programs, fellowships, public health careers and more!	OPENING KICKOFF! Italian Sub Sandwich Lunch One World, One Goal: Optimal Health for All Eduardo Sanchez		
1:00pm	VISIT THE EXHIBIT HALL Network with public health professionals!	OUT OF AFRICA: HIV and the MDR Epidemic: The Perfect Storm? Laura Podewils	Public Health: Austin, Texas! David Lurie	Women in Medicine— Women in Public Health! Susan Penfield, Linda Dooley
2:00pm	VISIT THE EXHIBIT HALL Visit the Pfizer Milestones Exhibit and Information Resources Center!	MRSA: The Making of a Superbug! Todd Bell	Outbreak I Epidemiologists: Outbreaks Are Our Business! Carol Davis, Karen Moody,	CSI: Public Health— Tackling Emerging Diseases and More in the Laboratory Susan Neill, Eva Perlman, David Carpenter
3:00pm	VISIT THE EXHIBIT HALL Redeem bookplates for free books!	One World, One Hope: Frontline Response to the Global AIDS Pandemic Megan Gerson	"Beating Back the Devil" The CDC Epidemic Intelligence Service John Su, Richard Taylor, Eric Miller	College Students: What's Going to Get You... and What Can You Do About It? Vincent Fonseca
4:00pm	VISIT THE EXHIBIT HALL Join Texas Public Health! Learn about the UT Austin Public Health Internship Program!	OUT OF AFRICA: Meds, Mango Leaves and Prayers—Teasing Out Health Choices in the Congo Caitlin Meredith	Outbreak II Texas Disease Detectives in Action! Rita Espinoza, Elia Puga	Ready to Take the Next Step? Graduate Education in Public Health Allison Foster, Matthew Goldshore, William Harvey, Melvin Monette, Shannon Shelton, Mary Ann Smith, Michael Ward
5:00–6:30pm	KEYNOTE SESSION: OUT OF AFRICA Welcome Discover Public Health! David Lakey Origins of HIV: Where, When, Why and How? Joseph B. McCormick Africa: The Virus Cradle Susan P. Fisher-Hoch	   		
6:30–7:30pm	Enjoy PIZZA with your friends! EXHIBIT HALL RE-OPENS FOR ONE MORE HOUR! Last chance to visit the exhibits and network with public health professionals!	<b>It's all FREE!</b>		

Sponsors: College of Natural Sciences; School of Biological Sciences, Career Services and Health Professions Office; The Centers for Disease Control and Prevention, Office of Workforce and Career Development; Texas Department of State Health Services; Austin/Travis County Health and Human Services Department; The University of Texas School of Public Health, Austin Regional Campus; Association of Public Health Laboratories; Association of Schools of Public Health.  
This conference is generously supported by: The Centers for Disease Control and Prevention, Office of Workforce and Career Development.



# become a disease detective Discover Public Health!

## april 5, 2006

**SCHEDULE OF EVENTS** (See detailed program on the back side of this flyer)

**12 pm**

**"The Fantastic Field of Public Health!"**

**Free Lunch!**

**1–5 pm**

Twelve (12!) exciting presentations  
about "Hot Topics" in Public Health!

**Free Books!**

**5 pm**

**Keynote Session:**

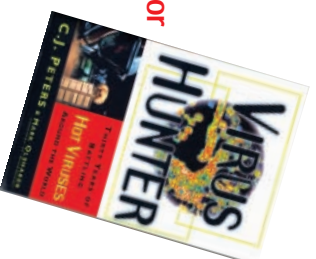
**C.J. Peters, M.D.,**

**famous disease**

**detective and author**

**of "Virus Hunter"**

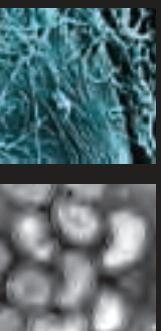
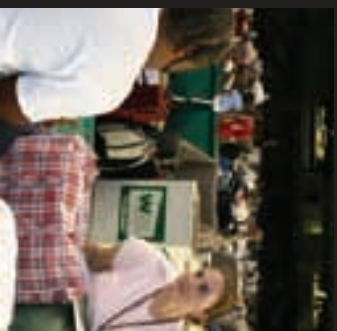
**Free Pizza!**



**7 pm**

**Doctors Without Borders**

**Exhibits (1–8 pm):** Schools of Public  
Health, CDC, Professional Organizations,  
Resource Center



## Don't Miss This Exciting Conference!

**12–8 pm**

## The Texas Union It's all FREE!!


**Details at [www.sbs.utexas.edu/publichealth/](http://www.sbs.utexas.edu/publichealth/)**

This conference is generously supported by  
The Centers for Disease Control and Prevention,  
The University of Texas School of Public Health,  
The Center for Biosecurity and  
Public Health Preparedness.



# Program “Become A Disease Detective: Discover Public Health!”

Texas Union, The University of Texas at Austin, April 5, 2006

12:00pm	Union Ballroom 3.202	Lone Star Room 3.208	Santa Rita Room 3.502	Governor's Room 3.116
1:00pm	Exhibits/ Resource Center Opens	Women in Medicine– Women in Public Health! Susan Penfield, Linda Doolley	Opening Kickoff! Free: Italian Party Sub Lunch The Fantastic Field of Public Health! Dennis Perrotta, Allison Foster	Public Health: Austin! David Lurie, Adolfo Valadez
2:00pm	Exhibits/ Resource Center	Become A Disease Detective: Discover Laboratory Science! Susan Neill, Eva Perlman	The Monster at Our Shores: Quarantine and the Emerging Pandemic Steven Harris	Outbreak I Epidemiologists: Outbreaks Are Our Business! Jeff Taylor, Janette Pichette
3:00pm	Exhibits/ Resource Center	“Beating Back the Devil” The CDC Epidemic Intelligence Service Richard Taylor, Swati Avashia, Eric Miller	A Disease Detective Tackles Border Health Joseph McCormick	A Century of Challenges: Public Health Responds! Linda Lloyd
4:00pm	Exhibits/ Resource Center	Veterinarian Disease Detectives: Emerging Threats from Animals to Humans Kristy Lillibridge, Beverlee Nix	Doctor Interrupted: A Career in Public Health Law Frederic Shaw	Outbreak II Medical Epidemiology: Disease Detectives in Action! John Walker, Tom Betz, Kathy Parker, Tom Sidwa
5:00–6:15pm	<b>Keynote Session</b> Wel come Dean Mary Ann Rankin Perspective Discover Public Health! Eduardo Sanchez Keynote Address Hemorrhagic Fevers: Collaborating to Combat Killer Viruses in Africa! C.J. Peters 			
6:15–7:00pm	Refreshments Exhibits/Resource Center			
7:00pm	Humanitarian Crisis in Sudan: A Doctor Without Borders Fady Joudah			
8:00–8:30pm	Exhibits/Resource Center Open 30 more minutes!			



## APPENDIX 7.7

### Conference Photos





# Faculty-Advisor Luncheon





# Faculty-Advisor Luncheon





# Faculty-Advisor Luncheon





# Faculty-Advisor Luncheon



Drs. Leanne Field and Diane Kneeland



Ms. Dena Garrison



Dr. David Lakey



Dr. Joseph McCormick



Dr. McCormick, Dr. Lakey, and  
Dr. Bill Sage



# Gates Millenium Scholars Meeting



Ms. Joy Coleman



Ms. Anne Nguyen

  
Gates Millennium Scholars  
"Leaders for America's Future"



# Faculty-Advisor Breakfast



Dr. Cheryl Perry



Ms. Allison Foster



Dr. Bill Harvey



Mr. Michael Ward



Ms. Shannon Shelton





Dr. Mary Ann Smith



Mr. Melvin Monette



Mr. Matt Goldshore



Mr. John McElligott



## Scientific Conference



## Kick Off Session





# Scientific Conference



Dr. Laura Podewils



Dr. John Su



Dr. Todd Bell



Ms. Caitlin Meredith



Ms. Megan Gerson



Ms. Rita Espinosa



Ms. Karen Moody



# Scientific Conference



Dr. Vince Fonseca



Dr. Susan Penfield



Dr. Richard Carpenter



Dr. Susan Neill



Mr. Matt Goldshore





# Scientific Conference



Dr. David Lakey



Dr. Joseph McCormick



Dr. Susan Fisher-Hoch



## Keynote Session





# Exhibits

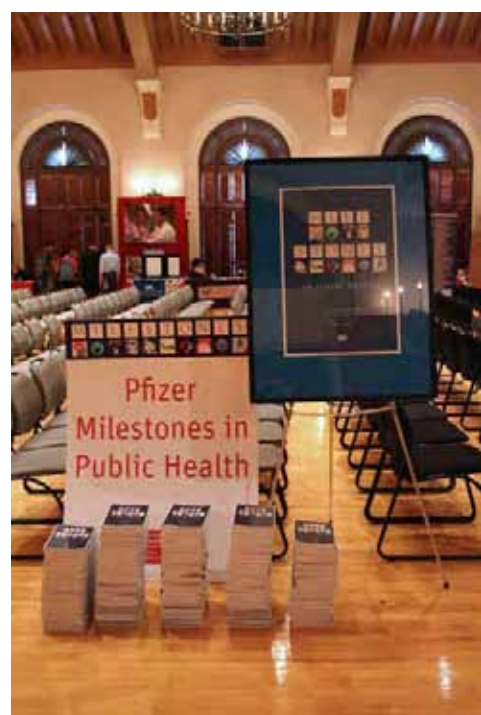
## Conference Registration





# Exhibits

Information Resources Center  
Life Sciences Library, UT Austin



Pfizer  
Milestones  
in Public  
Health  
Exhibit



Association of Schools of Public Health (APHL)



APHL



APHL



# Exhibits



Columbia University



University of Kansas



Association of Schools of Public Health



Ohio State University



Yale University



# Exhibits



Johns Hopkins University



University of Minnesota



University of Kentucky





# Exhibits



UT Austin Public Health Internship Program



University of Texas, Houston



George Washington University



# Exhibits



Doctors Without Borders



University of Southern California



Laboratory Services Section, Texas Department of State Health Services





# Exhibits



U.S. Public Health Service



Office of Workforce and Career Development,  
CDC



Ms. Annisa Ham, Ms. Judy Delany, Dr. Field



Austin/Travis County Health and  
Human Services Department



# Exhibits

## Book Redemption Table





# Exhibits

## “Meet a Public Health Professional” Corner





## Exhibits





# Exhibits





# Exhibits

## 6th WMD Civil Support Team Mobile Analytical Laboratory Outside Exhibit





# Volunteers in Action





# Volunteers in Action

