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LETTER FROM THE DIRECTOR

It is my great pleasure to introduce the third newsletter of the Vanderbilt Center for Medicine, Health, and Society (MHS). The newsletter is a collaborative project of the faculty, staff, and students at our center, and represents an annual means of spreading the word about our accomplishments, goals, and future plans. I particularly want to thank Tara McKay for her tremendous efforts in crafting this third volume.

As this newsletter attests, the past year has seen important and sustained growth at MHS. The Center continues to evolve into a cutting-edge research and teaching center that boasts a growing cohort of world-class scholars, expanding and innovative undergraduate and graduate curricula, and a number of vital projects and initiatives that cumulatively and creatively address health, healthcare, and healthcare solutions.

MHS began as a small faculty and student interest group in 2005, and between 2005 and 2010 the center offered a relatively small number of courses. Over the past six years, we have seen rapid expansion. We now offer over 60 MHS courses, and support nearly 550 undergraduate majors and a smaller number of minors. Our newly revised undergraduate curriculum offers seven important concentration areas, driven by student interest and faculty expertise in areas such as global health, health policies and economies, interseccionality, race, inequality, and health, and medicine, humanities, and the arts. We also support a vibrant new master's degree program—the MA in Social Foundations of Health—and collaborate with a number of other departments to help support PhD students.

MHS has quickly become a hub for pioneering research and first-rate teaching that focuses on the many, diverse aspects of healthcare solutions. Our robust cohort of core faculty spans a continuum of expertise including mental health, global health, health policy and health economics, research ethics, military mental health, men's health and racial disparities, gender and disability studies, literature and medicine, and pre-med curricular innovation, to name but a few!

We welcomed two outstanding new faculty members this year. Professor McKay is a sociologist from UCLA, and recently an RWJF Health Policy Scholar at UC Berkeley, who studies global health policy and LGBT health. And Professor Odie Lindsey is an award-winning fiction writer and teacher whose pedagogic expertise includes medicine and literature and the literature of the U.S. South.

As this newsletter details, over the past year our faculty published important articles and books, won major grants and awards, and appeared on a host of national media outlets. Of special note, MHS professor Laura Stark was just announced as the winner of the 2016 Ingalls Award for Excellence in Classroom Teaching. With the added expertise of more than 90 jointly appointed and affiliated faculty members, the center is truly a trans-institutional cog bridging Vanderbilt's many intellectual strengths.

Over the past year, we've hosted a series of cross-campus events including an important and wide-ranging conference that explored the Politics of Health in the US South. Keynotes for the event included Melissa Harris-Perry (Maya Angelou Presidential Chair at Wake Forest), Jesmyn Ward (winner of the National Book Award for Fiction), Kenneth Robinson (Physician and Pastor Emeritus of St. Andrews AME Church in Memphis), and Bryant Simon (endowed Professor of History at Temple University). We also continue to collaborate with the Anna Julia Cooper Center at Wake Forest on an ongoing project that addresses Gender, Health, and the South. Our center is also developing collaborative curricular and research projects in such locales as East London, Rio de Janeiro, Guatemala, and Johannesburg, South Africa. These and other initiatives were supported by generous grants from the REAM Foundation and Vanderbilt's Trans-Institutional Programs initiative.

These and other initiatives are continually updated on our website, vanderbilt.edu/mhs, and our doors are always open to students, parents, scholars, community members, and all others. We hope that you will visit often and stay tuned as we grow!

A handwritten signature in dark ink, appearing to read "Jonathan Metz".

Jonathan Metz, MD, PhD

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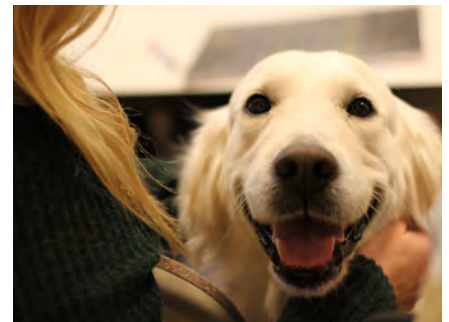


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news

MHS hosted a number of distinguished colleagues and visitors in 2015-2016 through our Hot Topics Series and our MHS colloquium series, organized by Assistant Professor Aimi Hamraie. Each featured MHS faculty, guests from the broader Vanderbilt faculty, as well as colleagues from national and international universities. Some of our guests included:

Catherine Burns
University of Witwatersrand, South Africa
Janelle Johnson
University of Wisconsin
Catherine Mill
Monash University, Australia
Martyn Pickersgill
University of Edinburgh, UK

Sherrie Randolph
University of Michigan
Elizabeth Roberts
University of Michigan
Trysh Travis
University of Florida

Vanderbilt colleagues presenting at our colloquium included **Jim Fraser** (Community Research and Action), **Jaco Hamman** (Divinity), **Kale Edmiston** (Neuroscience), and **Lauren Mitchell** (English).
Thank you all for joining us this year!

MHS Welcomes Fulbright Scholar Michael Orsini for Spring 2016

Since arriving in Nashville in early January 2016 to take up the Fulbright Visiting Research Chair at MHS, Orsini has been hard at work on a book manuscript that explores the role of emotions and stigma in policy making. His starting point for this timely project is an interest in challenging dominant ways of thinking about health politics and policy, especially the role of evidence in policy making. Emotions, Orsini argues, are central to how we think about policy problems collectively. "They don't get in the way of policy making, as some might have us believe," he explains. Orsini's project seeks to intervene in policy debates about obesity policy and HIV policies related to harm reduction by examining how these policy debates neglect, downplay or ignore entirely the affective dimensions of these debates. Reflecting on his time here at MHS, Orsini finds that "being in an interdisciplinary environment with scholars who work at the intersection of social theory and health has been especially rewarding, as has been the opportunity to interact with MHS students in classes offered by Professors Hamraie and Béhague, among others."

Welcome, Michael!



"I had a great visit to Vanderbilt in October, and really appreciated the invitation to present my ongoing work on psychiatry and society at the excellent Centre for Medicine, Health + Society. It was a real pleasure to engage with the diverse disciplines and approaches that MHS represents and brings together from across the university. A particular highlight was a chance to have lunch with the brilliant Ken MacLeish and discuss convergences and divergences between (mental) healthcare in the US and the UK (as well as to get his recommendations about where to go for the best bluegrass gigs in town)."

--Martyn Pickersgill



Congratulations to Odie Lindsey on his forthcoming short story collection, *We Come to Our Senses*, to be published by W.W. Norton in July 2016.

In *We Come to Our Senses*, Odie Lindsey considers the roles of veterans in the South. In particular, subjects trace the impact of gender and sexuality at war, likewise the extended, conflicted militarism that both defines and complicates southern history and southern bodies. As a veteran, Lindsey uses his cultural studies work to explore southern literature, war, and the body. Advocates of the collection include Pulitzer Prize-winning author and veteran Robert Olen Butler, National Book Award finalist Bonnie Jo Campbell, and novelist and journalist Helen Benedict, whose work frequently focuses on social injustice and war. VU Writer-in-Residence Alice Randall has also been a longtime mentor to Lindsey's process and progress.

Stories from *We Come to Our Senses* have appeared in *Best American Short Stories*, and will appear in *Guernica*, and in a "21st Century Southern Fiction," special issue of *Southern Cultures*, a journal produced by the Center for the Study of the American South at the University of North Carolina.

While finishing edits on the collection, Odie also worked with National Book Award winner and veteran Tim O'Brien at the Sewanee Writers' Conference. Lindsey will now switch focus to a forthcoming novel, also for W.W. Norton.

Kudos to Laura Stark who received the 2016 Ellen Gregg Ingalls Award for Excellence in Classroom Teaching.

The Ingalls Award is given on the basis of the faculty member's concern for an individual student's learning, the organization and engagement of classroom presentation, the clarity and fairness of criteria in awarding grades, and accessibility and helpfulness outside of the classroom. Student evaluations praised Stark's "flair for connecting the ideas discussed in class to relevant health-related events, the causes of health outcomes, disparities and current medical trends."

"Her students comment on being so excited about the class that they plan lunch meetings to discuss the material – with no prompting from the instructor," said Chancellor Nicholas Zeppos as he delivered the award.

Earlier in the year, Stark was also awarded a **Library Dean's Fellowship** to create a publicly-available, digital archive of her research materials on the history of "normal subjects" in twentieth-century biomedical research. The project is part of a broader collaboration between Vanderbilt and the Harvard University Medical School's Conway Library for the History of Medicine. **Congratulations, Laura!**

Congratulations to Derek Griffith who was one of 14 Associate Professors to be named a Vanderbilt Chancellor's Faculty Fellow. Fellows must be nominated by their deans for these competitive awards to support outstanding tenured associate professors. **Congratulations, Derek!**

Congratulations to Aimi Hamraie who was awarded two fellowships from the Curb Center for Art, Enterprise, & Public Policy and the Library Dean to fund the Mapping Access project. Hamraie's *Mapping Access* is a participatory research project aimed at mapping the role of the Vanderbilt campus environment in promoting accessibility and inclusion for diverse populations. **Congratulations, Aimi!**

Kudos also to Kenneth MacLeish who was awarded an honorable mention for the Society for Anthropology of North America's Delmos Jones and Jagna Scharff Memorial Prize for the critical study of North America in recognition of his 2013 book *Making War at Fort Hood: Life and Uncertainty in a Military Community* (Princeton University Press). **Congratulations, Ken!**

Congratulations to MHS Director, Jonathan Metzli, who received the Dosor International Award from Physicians for Human Rights (2016-2017), awarded bi-annually by the Middle East Consortium of Physicians for Human Rights for outstanding scholarship and advocacy.

accessible worlds

Ed Roberts Campus, Berkeley, CA

Assistant Professor Aimi Hamraie translates historical research on disability and design into Vanderbilt campus accessibility map, an invaluable strategic teaching and research tool.

In August 2015, I visited an exhibit on the history of the disability rights movement called “Patient No More” at the Ed Roberts Campus in Berkeley, California, which houses the Bay area’s disability rights organizations. From the exterior of the building’s glass façade, a red-orange ramp becomes visible as it spirals through the lobby to the building’s upper floors. Entering through the glass doors, I observed enlarged exhibit photos of disability rights protesters placed along the atrium walls, viewable from the ramp. Kiosks on the atrium floor showed archival film footage, posters, and sound clips of disability activists demanding recognition as citizens (rather than as patients) under the law. The building’s architecture reinforced this message: in much the same way that protesters in the films and images held signs and conducted sit-ins to demand federal accessibility laws, the elegant, brightly-colored ramp secured the right of disabled people to access public spaces.

What do the structures of the material world—buildings, streets, and cities—reveal about what kinds of people we imagine to be part of the human community? The goal of my interdisciplinary historical and philosophical research is to explore the implications of buildings and cities for bodies that are devalued and consequently left out of built

environments. Disabled people, people of above or below average size, gender minorities, children, and elders experience built environments very differently than those closer to average size, weight, or bodily function. For the last six years, I have collected and analyzed historical materials such as design documents, catalogues, legislative proceedings, and photographs, as well as buildings themselves, to understand how the accessibility movement challenged notions of the “normal” body in the twentieth-century United States. The culmination of my research will be my book, *Building Access* (forthcoming from the University of Minnesota Press), as well as *Mapping Access*, a digital project that uses participatory data collection to create an accessibility map of the Vanderbilt campus and spark dialogue about campus diversity. ♦





Assistant Professor Laura Stark investigates the lives of people who volunteered to participate in early human experiments.

Who serves as human subjects in medical experiments? This question has puzzled scholars, scientists, and critics curious to know why people choose to become the subjects of some of the most dangerous—and exciting—activities in medical research. The conventional answers are that “human guinea pigs” are unusually altruistic or especially poor, when they are not forced or coerced to enroll.

Yet it is hard to see how medical research could be such an important, everyday part of the biosciences if it relies on unusual, exceptional individuals. My goal has been to understand how it became both legal and morally acceptable to do medical experiments on healthy Americans with no debt to the government, in other words, healthy everyday civilians rather than soldiers, prisoners, or terminally ill patients.

For the past five years, I have been interviewing former “human subjects” of medical experiments conducted at the US National Institutes of Health Clinical Center from 1950 to the present day. I have been interviewing the scientists who experimented on them,

as well, and examining the historical archive. All told, I have completed 108 oral history interviews for my research.

The stories I found surprised me. The old letters, photos, memorabilia and anecdotes I collected—as well as records in historical archives—gave me a new understanding of how the large-scale market for human subjects emerged in the decades after World

Interviewing Former Human Subjects

War II. Based on what I found, I am writing a book, which is under contract with the University of Chicago Press: *The Normals: A Shadow History of Human Experiment*.

The historical materials I collected are part of the rare vernacular history of medical research, and over the past year I have been building an online “vernacular archive” of NIH’s Normal Volunteer Patient Program. With funding from Vanderbilt’s Library Dean’s Fellowship Program, I am coordinating a unique partnership between Vanderbilt and Harvard University Medical School’s Countway Library for the History of Medicine. I am working with a team from each site to make all of the materials I collected freely available to the public and to future scholars—the audio files and typed transcripts of the oral histories I completed with human subjects and scientists, as well as the photos, letters, and memorabilia from their time at NIH. If all goes well, you will be able to access these stories in the “vernacular archive” in the autumn of 2016. With any luck, it will enrich understandings of medical experimentation—past and present. ♦

diagnosing war

Assistant Professor Kenneth MacLeish interviews veterans and begins a new ethnographic study of the social life of war-related mental illness

The myriad psychological, interpersonal, and existential challenges that confront American veterans of the wars in Iraq and Afghanistan are understood chiefly in psychiatric terms. Diagnoses like posttraumatic stress disorder (PTSD) and related conditions like depression and anxiety help give a name to veterans' experiences and help furnish their access to healthcare and disability compensation. But they can also foreclose other, non-medical understandings of war experience and reproduce stereotypical conceptions of veterans as damaged, doomed, or dangerously unhinged.

I look at the interrelationship of these intertwined material, medical, cultural, and political dimensions of how war-related suffering is understood in the contemporary US. While the question of whether a diagnosis is "right" or accurate is highly consequential, as an anthropologist I'm interested in how and why people's experiences of war get slotted into particular categories and labels. In my previous research with soldiers at the US Army's Fort Hood, for instance, I learned how soldiers might be reluctant to accept a diagnosis of PTSD if they thought it would hinder their professional prospects, or be eager to receive it if it would enhance their medical retirement benefits, or feel suspicious of the label more generally because it would recast experiences and feelings that they associated with

normal aspects of soldiering as pathological symptoms of a mental disorder.

In my current project, I am looking at how ideas about war-related mental illness shape and take shape in veterans' lives in another institutional space: a veteran treatment court (VTC) where veteran offenders charged with certain minor offenses (drunk driving, assault) are spared a jail sentence in exchange for undergoing an intensive year-long therapeutic and self-improvement program. The court also facilitates their access to health care, job opportunities, and disability and education benefits. The court engages the staff (which include lawyers, a judge, law enforcement personnel, and social workers) and veteran participants in ongoing negotiation over what they all imagine the relationship between mental illness and criminal offense to be, and calibrating the court's sanctions and rewards accordingly. The work of the court raises provocative questions not only about how to best address veterans' needs, but also about how our social institutions balance care and coercion, how experts and lay people think about the relationship between mental illness and violence, and who we as a society expect people to be and become in the wake of war. ♦



“As an anthropologist, I’m interested in how and why people’s experiences of war get slotted into particular categories and labels.”



LGBT Aging post-Obergefell

Berkeley, CA

In collaboration with UC Berkeley, Assistant Professor Tara McKay launches new study of LGBT social networks and health among the San Francisco Bay Area's Over-50 crowd.

Social networks matter for health. They shape our access to support when we need advice, when tragedy strikes, and when we're sick and need help putting together a meal. For older Americans, spouses, family and relatives typically provide this assistance. However, for older lesbian, gay and bisexual, and transgender (LGBT) adults, homophobia has historically disrupted access to many of these primary sources of support. Older gay men in particular are more likely to live alone compared to either heterosexual men or women and lesbian women, and they often have no available caregiver for health-related concerns. But this may be changing.

Last summer, the Supreme Court's 5-4 decision in *Obergefell vs. Hodges* established that the fundamental right to marry is guaranteed to same-sex couples under the Fourteenth Amendment. Has this landmark decision opened up new sources for social, physical, and economic support among older LGBT adults? What are the implications of the right to marry for the health of older LGBT Americans? How might the historical legacy of limiting access to certain kinds of support shape how older LGBT Americans get support and from whom they get it?

Over the last six months, I've been collecting new data on older LGBT adults living in the San Francisco Bay Area to try to get at some of these questions. I'm part of a group of researchers based at UC Berkeley and funded by the National Institute on Aging to look more

“for older LGBT adults homophobia has historically disrupted access to many sources of support.”

closely at how we use the people in our lives when we need it most – when we get sick, when we lose a job, when our families change – and what kinds of support the people in our lives provide – financial, physical, emotional.

I'm very excited about this project because it utilizes novel data and methods and will be important for policy debates going on around the country about how to best serve aging LGBT populations. 💧



MHS Faculty Tackle



Associate Professor Derek Griffith (left), with Sheena Adams-Avery (center) and Professor Hector Myers (right), develops a new intervention using faith and FitBits to address obesity and improve health behaviors among African American men.

During the past decade, while obesity rates have plateaued for women, the rates of obesity among men, particularly African American men, have increased dramatically.

With funding from the National Institute of Diabetes, Digestive and Kidney Disorders, the Aetna Foundation and the Vanderbilt-Ingram Cancer Center, Professor Derek Griffith has been working to develop the first weight loss intervention for African American men that is tailored to their individual patterns of eating and physical activity, barriers and facilitators and ideals of what it means to be an African American man.

Late in 2015, *Mighty Men: A Faith-based Weight Loss Intervention to Reduce Cancer Disparities* was funded by the American Cancer Society to conduct a randomized-controlled trial of a 6-month weight-loss intervention for obese African American men 35-74 years old. This four-year, 1.6 million dollar study will be the first to use goals and messages tailored to individual African American men, wearable devices (e.g., Fitbit), personalized text messages, individualized websites, small group training led by a personal trainer and community resources to increase physical activity and healthy eating among participating men in Nashville, TN and Flint, MI. The multidisciplinary and trans-institutional team of investigators includes faculty

and staff at Duke University, Jackson State University, the University of Michigan, and community-based and faith-based organizations such as YOUR Center in Flint, Michigan.

The main goal is to see if participants have lost more weight than the comparison group at the end of six-months, but Griffith and his collaborators will also examine if men maintain the healthier behaviors and weight loss after the intervention. There is growing evidence that weight loss may reduce the risk of cancer among men, but so far there have been no rigorously designed community-based strategies to promote healthy eating, physical activity or weight loss in African American men, nor have they used objective measures of physical activity or physiological change.♦



Health Disparities

Can biopsychosocial models account for the disproportionate health inequities suffered by African Americans and other populations of color? If so, how can we use them to develop more effective interventions to ameliorate these inequities?

Professor Hector Myers, who arrived at Vanderbilt in 2013 from UCLA, has pursued these questions across multiple health issues, including essential hypertension, diabetes, HIV/AIDS, as well as on psychological distress and dysfunctions, including depression, anxiety and post-traumatic symptoms.

Myers' most recent work tests a model of cumulative lifetime burden of adversities and trauma among low socioeconomic status African American and Latino/as in predicting risk for psychological distress (i.e. depressive, somatic anxiety and PTSD symptoms) in collaboration with his colleagues at UCLA (Myers et al., 2015). With this group he has also developed

and tested a new composite trauma exposure risk index that allows us to reliably quantify lifetime exposure to adverse life experiences for use in research on lifetime burdens of adversities and trauma (Liu et al., 2015).

Myers is also continuing to serve as a co-investigator on an ongoing 5-year study testing the implementation of an couple-based intervention for HIV-serodiscordant African American couples that is being conducted in community agencies in Los Angeles and Oakland, California.

In his three years at Vanderbilt, Myers has already developed deep ties to local institutions. He is a collaborator on two large multi-institutional grant applications that are currently under review. When funded, he will serve on the Training and Mentoring Core in the Southeastern Collaborative for Precision Medicine and Health



Equity and will work with Dr. Lyle Cooper at Meharry Medical College to test the impact of a mindfulness stress management intervention on the progression of HIV/AIDS and related health outcomes in a sample of African American men who have sex with men (MSM). ♦

shaping the modern child

Associate Professor Dominique Béhague works to advance interdisciplinary research and theory with a special issue of *Social Science & Medicine* on a range of issues related to child development in global contexts.

I was excited this year to see our Special Issue in *Social Science & Medicine* -- "Shaping the modern child: genealogies and ethnographies of developmental science" -- go to press. Co-edited with my colleague Samuel Lézé from the Ecole Normale Supérieure de Lyon in France, the issue explores debates, conundrums and tensions in the sciences that study child development. Featuring the works of 11 scholars from a range of disciplines, including history, sociology, anthropology, neuroscience, and women's studies, papers investigate the historical and social trajectories through which expertise on child development gains pragmatic and conceptual traction, and contestation, in Japan, Brazil, India, China, Germany, France, Italy, Canada, the US, and the UK. Authors delve into a wide-range of issues and themes that intersect with child-development theory, including autism, transgender medicine, adolescent neuroplasticity,

nutrition, scholastic pressure, suicidality, depression, puberty, and contested modalities of care, including pharmaceuticalization and physical constraint. As my co-editor and I worked through the overarching lessons for the issue, it became clear that the papers were pointing us toward a fresh agenda for the development of a "critical child science" -- one that emerges at the intersection of genealogical and ethnographic perspectives. In doing so, the collection calls for greater cross-fertilization between two fields that have traditionally been set apart: science studies and childhood studies. ♦



AIMING FOR CHANGE

with Safe Tennessee

Dr. Jonathan Metzl was recently named Director of Research at the Safe Tennessee Project, a non-partisan, volunteer-based organization devoted to reducing gun violence in Tennessee.



Safe Tennessee is a group of concerned citizens and academics who want to address some of the pressing issues regarding gun violence in Tennessee. Safe Tennessee supports the Second Amendment but also advocates for common-sense measures that would reduce rates of gun injury and death. In line with the organization's interests in engaging people who hold a wide range of views about gun rights but who want to prevent unnecessary suffering, Dr. Jonathan Metzl and others are guided by a board that includes physicians and researchers from across the Vanderbilt campus.

Safe Tennessee's initiatives in no way intend to infringe on people's gun rights. But, from a medical perspective, public health and safety are at odds with gun laws. Bars, parks and college campuses, for instance, are very unfortunate sites to allow for gun proliferation because of the risks of accidental shootings, self-harm, and other unintended consequences. The more expansive gun rights become, the more Tennessee is seeing victims of gun violence—indeed, victims of the State's own policies. With Safe Tennessee, Metzl advocates for common sense solutions (i.e., closing gunshow loopholes, promoting background checks on purchases and gun-safety training, outlawing celebratory gunfire

that can harm children) that would be respectful of gun owners' rights but also decrease rates of injury and death.

Metzl first became interested in this topic through his academic work, which previously has looked at stigma against mental illness, and the ways that people with mental illness are far more likely to be the victims rather than the perpetrators of violence even though people often assume otherwise. In the aftermath of many mass shootings, Metzl says "I found myself having to address the same question again and again—is mental illness the root cause of gun crime in the US? Certainly, there are mental health histories that are important for mass shooters, but on an aggregate level, everyday gun violence is often statistically unrelated to mental illness. Gun crime is an everyday problem of 'us,' not a problem of 'them.'"

In response, Metzl started doing media appearances on the topic of gun violence and expanded his research agenda. In the process, "I've been lucky enough to meet and interact with thoughtful people on all sides of the US gun debate, and to try to forge common ground in this seemingly, and in my opinion needlessly polarized issue," say Metzl. ♦

INSURE TENNESSEE NOW!

Using Data to Advocate for Policy Change

Associate Professor Martha Jones works with the Tennessee Justice Center to inform policy and support advocacy efforts around closing the coverage gap for the state's low-income residents.

Who has been left out of the country's recent expansion of access to health insurance? As a result of Tennessee's choice to not close the coverage gap for residents who do not qualify for TennCare, Medicare, or subsidies to buy private insurance on an exchange through the Affordable Care Act, 280,000 of the State's residents remain uninsured. Most of the uninsured are low-income, childless adults, aged 18 to 64.

As a result of Tennessee's choice to not close the coverage gap, 280,000 of the state's residents remain uninsured.

An interdisciplinary group of Vanderbilt faculty and graduate students in MHS and Human and Organizational Development (HOD) is working to build a database with socio-economic, demographic, health, health insurance and health care data for Tennessee, mostly at the county level. The group includes Professor Martha Jones from MHS and Professor Craig Anne Heflinger from HOD as well as HOD graduate students Tessa Eidelman and Danielle Wilfong. They are working in collaboration with the Tennessee Justice Center (TJC), a non-profit law firm, to demonstrate the impact of the health insurance coverage gap on the state's low-income residents.

In addition to looking at characteristics of the uninsured and the possible health impacts of lacking insurance for those in the coverage gap, other parts of the MHS/HOD project examine personal debt due to bankruptcy in Tennessee and the fiscal condition of hospitals in the state, in particular those at-risk of closing due to lack of financial viability. The database has been used to create a set of online interactive maps to show the county-level distribution of physical health, mental health, uninsured adults, unaffordable health care and at-risk hospitals in Tennessee. These maps are available at <https://www.tnjustice.org/gap/healthcare-system/>. ♦

This work will provide data and analysis for scholarly research as well as to support advocacy efforts to bring health insurance to people in the coverage gap using federal money earmarked for this purpose. The Governor's plan, despite being fiscally conservative and designed to fit the needs of Tennessee, has been stalled in the Legislature for the past year. On April 12, 2016, House Speaker Beth Harwell announced the creation of a legislative task force to study options for moving forward on this issue.





Left: Evelyn Patterson (l) and Consuelo H. Wilkins (r) respond to questions after the opening session; Right: former Nashville Mayor Bill Purcell forgoes slides to discuss the politics of healthcare and health insurance in Tennessee.

Confronting the Politics of Health in the US South

The Politics of Health in the US South Conference was held at Vanderbilt on March 17 and 18th, and co-sponsored by the Vanderbilt Center for Medicine, Health, and Society, the Anna Julia Cooper Center at Wake Forest University, the REAM Foundation, the Vanderbilt Divinity School, the Bishop Joseph Johnson Black Cultural Center, The Office of the Vice Chancellor for Equity, Diversity, and Inclusion, and Vanderbilt Creative Writing. The conference provided an opportunity to engage in conversations about critical issues facing the US South across disciplines and institutions and explored how the health disparities in the US South often echo and influence social, economic, and political conditions of the health of the US at large. Focusing on the intersection of health and politics within the context of the US South, the conference sought to address how politics shape the social, economic, and structural contributors to health disparities in different diseases, access to treatment, and healthcare access that often disproportionately affect the South when compared to the US at large.

Melissa Harris-Perry delivered the opening keynote address in Benton Chapel to a full house of faculty, students, and community members. Her address focused on the intersection of race, health, and politics in the South as she explored the interconnections of Black Lives Matter, race, health, and politics. Tracing the history of blackness and racism in the South from slavery to the Civil Rights Movement, to the present-day, Harris-Perry explained how the “South” has been and is carried in black bodies and is a site of suffering that exists in black bodies. Focusing specifically on black

(continued on page 17)



Dr. Melissa Harris-Perry, Wake Forest University, delivers opening keynote.



Rev. Dr. Kenneth Robinson discusses the role of the Church in promoting health in the South.

Intersectional Research in the US South

Can we distinguish health from the social categories that shape what we perceive as unhealthy? Intersectional Research in the U.S. South included panelists Sara Kugler (Anna Julia Cooper Center, Wake Forest), Gilbert Gonzales (Health Policy, Vanderbilt), Jennifer Singh (Working Group on Race and Racism in Contemporary Biomedicine, Georgia Tech), Laura Carpenter (Sociology, Vanderbilt), Michael Wright and Taunya Wright (Department of Social Work and Urban Studies at Tennessee State), and Phillis Shephard (Vanderbilt Divinity School), all of whom offered diverse perspectives on how race, gender, sexuality, and

geography define popular and scholarly perceptions of normal health. Their comments were followed by a rousing Q&A with the audience.



Dr. Bryant Simon, Temple University, presents his research on one of the worst industrial accidents in the recent American past, a 1991 fire that killed 25 factory workers in Hamlet, North Carolina, and relates this event to the hidden costs of cheap government, cheap food, and cheap labor in US South.



Dr. Jennifer Singh, Georgia Tech, explores racial disparities in HIV in the the US in a presentation representing the interdisciplinary and transinstitutional work of the Working Group on Race and Racism in Contemporary Biomedicine.

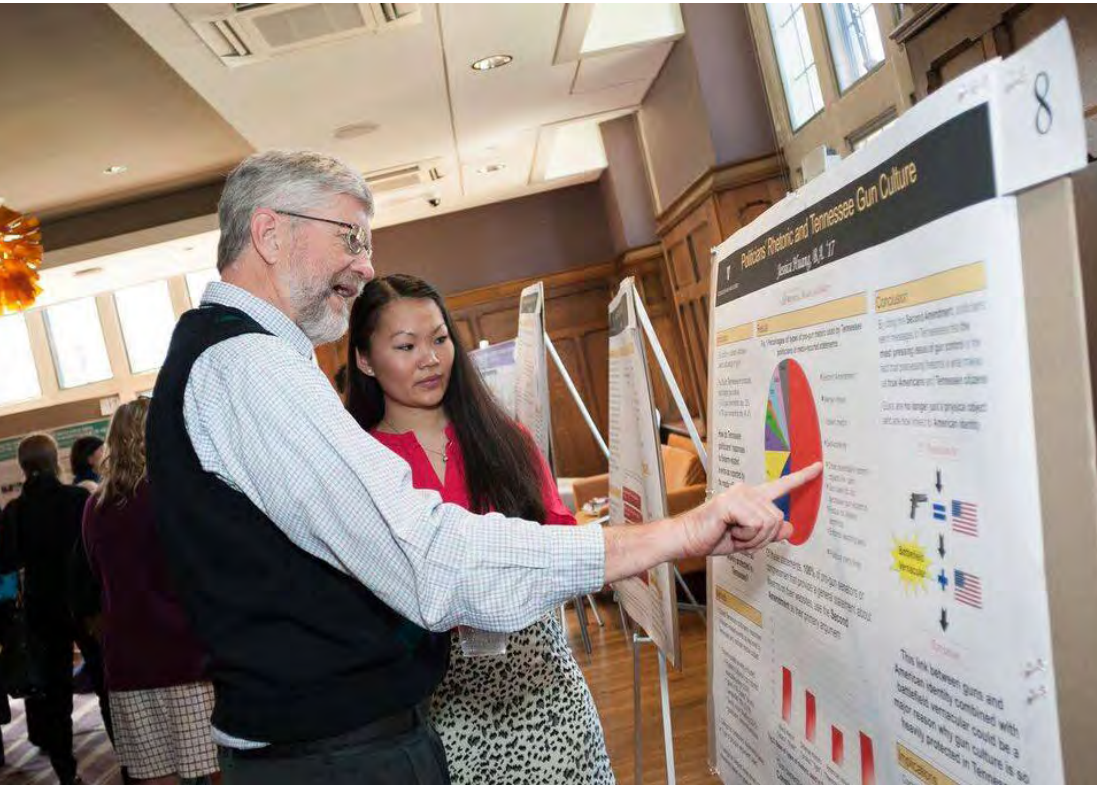
Narratives and Poetics of the U.S. South

In a sense, the Narratives and Poetics of the U.S. South was about looking small. As complement to content focused on large clusters of bodies or data, the panel, featuring National Book Award winner Jesmyn Ward, trained on the daily, intimate stories of individuals. Ward, whose writing often documents African American life on the Mississippi Gulf Coast, interspersed personal experience with selections from her novel *Salvage the Bones*. Fiction writer and Vanderbilt Professor Tony Early introduced Ward care of his own take on writing the South and southern bodies, and the panel included work by Vanderbilt MFA students Tiana Clark and Kelsey Norris, with a response by poet and MFA Chair, Kate Daniels, and a lively discussion afterwards with attendees.



Author Jesmyn Ward, Tiana Clark, and Kelsey Norris engage with conference attendees after the panel on Narratives and Poetics of the US South.

Highlighting Student Research



Jessica Yue Huang (r) talks about her research on gun culture in the US South with Dr. Sten Vermund (l), Professor at Vanderbilt Institute for Global Health.

Promoting student engagement in research is integral to creating an immersive learning experience for students at Vanderbilt. During lunch of Day Two, conference attendees engaged with graduate and undergraduate students from across the Vanderbilt campus, Wake Forest University, Emory University, Meharry Medical College, and the Office of Minority Health and Health Disparities at the North Carolina Division of Public Health. Student research examined topics from gun violence and sexual and reproductive health in Tennessee to genetic ancestry and race, and substance abuse treatment in for-profit versus not-for-profit centers. Together, the posters challenged misconceptions about health and mental health at the same time that they endeavored to advance knowledge and policy on various issues in the US South. ♡

Thank you to all of our student presenters!



(Left) Research Poster presentations by graduate and undergraduate students in Alumni Hall.
(Right) Yasmine Griffiths explains her research on health disparities in Tennessee.

(continued from page 14)

women, she encouraged the audience to reflect on how racial trauma is inscribed on and in the bodies of black women and is passed on from generation to generation. Harris-Perry also connected these issues to the durable effects of structural racism and systemic injustice on health, which manifest through suicide rates within the black community and among the community's young activists. Ultimately, Harris-Perry presented listeners with a powerful question: with the legacies of racism, slavery, experimentation and injustice, what must black bodies do to be healthy?

Is it possible to be well in struggle? ♡

-- Meera Nagarsheth, MA Candidate



The conference closed with a reception and live music by Nashville's own BarFlies.

Student Takeaways

"The unequivocal health dichotomies within the US South emulate, intensify, and embody the geographic, economic, cultural, and political tensions that encompass the politics of health in the United States."

-- Benjamin Sklar, '18

"Health and treatment/health care are affected by social and biological factors. Much like local biology is contingent on social and environmental factors, access to healthcare is the same way."

-- Allison Isabelli, '17

"Hearing that the South has yet to expand Medicaid despite having 6 out of the 10 states with highest rate of uninsured residents is horrifying. I found it incredibly interesting and saddening that NIH funding mostly goes to regions and states that are not in the South, which means that there is a huge presence of issues within the black community (slavery, poverty, discrimination, health care, etc.) that are going unexamined."

-- Allanah Jackson, '16

"I was unaware of the concentration of health issues and challenges in the US South; that is the strongest thing I've come away with today."

--Lauren Glassburn, '18

Transinstitutional Collaboration: Vanderbilt Center for Medicine, Health, and Society with the Anna Julia Cooper Center at Wake Forest University. (Left to Right: Nadia Rahman, Sheena Adams-Avery, Sarah Rudasill, Kimberlyn Leary, Melissa Harris-Perry, Jonathan Metzler, JuLeigh Petty, Rolisa Tutwyler, Sara Kugler, Tara McKay)





We're Trending

During the conference, students, faculty, and attendees took to their devices and live tweeted the conference in order to facilitate access and engagement beyond Vanderbilt.

#PoliticsOfHealth **Trending**

Emily Pingel @ambitiousthistl · Mar 18
@JonathanMetzl closes the #PoliticsOfHealth conference : "We can form coalitions across evidentiary claims" And we must. Now to decompress.
 3 4

Jonathan Metzl @JonathanMetzl · Mar 18
@OrsiniMichael wins best shoes award @ #PoliticsOfHealth
 3

MHS Vanderbilt @MHSVanderbilt · Mar 18
In reply to Christina
RT @belles_jettres @cransell We're looking forward to many more collaborations #PoliticsOfHealth
 1 [View conversation](#)

Meera N @MeeraBN03 · Mar 18
Beth Conklin: Flint, Michigan reminds us how water is the bedrock of public health. #PoliticsOfHealth
 4 3

Gilbert Gonzales @GilbGonzales · Mar 18
@taramckayphd great talk on justice in Malawi and the global south #PoliticsOfHealth @MHSVanderbilt

Meera N @MeeraBN03 · Mar 18
Joseph Interrante: The South bears a disproportionate burden of HIV/AIDS in the US. #PoliticsOfHealth
 2

Molly Moreau @moreau_molly · Mar 18
We should talk about health issues that affect cis white men, but from an intersectional framework - not as the default #PoliticsOfHealth
 1 2

David K. Jones @dklinejones · Mar 18
"We can be map-changers." What a pleasure to hear @GilbGonzales at the Vanderbilt #PoliticsOfHealth in South conf

Jonathan Metzl @JonathanMetzl · Mar 18
@AJCCenter Asst Director Sara Kugler addresses the landscapes of Intersectional research #PoliticsOfHealth

Meera N @MeeraBN03 · Mar 18
Collaboration and partnership can improve the state of intersectional research #PoliticsOfHealth
 1 2

Emily Pingel @ambitiousthistl · Mar 18
In reply to Dr Michael theMentor
Drs Michael and Tanya Wright on living with the trauma of health heritage #PoliticsOfHealth @MAWMedia @STaunyas
 2 2 [View conversation](#)

Meera N @MeeraBN03 · Mar 18
Michael Wright: We need to expand the idea of trauma; it is not just what happened but how it impacts your choice behavior. #PoliticsOfHealth
 1 1

mhs master's students

research health disparities, disability

Venus Green, 2-year Master's in MHS

Venus is in her first year of the two-year M.A. program in MHS and is a 2015-2016 Nichols Humanitarian Fellow. Before joining MHS, Venus received her B.A. in Political Science and African American Studies with a minor in Gender and Sexuality Studies from the University of California, Irvine. At UC Irvine, Venus conducted research examining the psychosociocultural factors that contribute to African American women's group formations, well-being, and health narratives within predominately white institutions. For her Master's thesis, she is examining the social determinants of infant mortality that disproportionately impact middle class African American women. More specifically, she is analyzing how the gendered and racial structure of their workplace environments, combined with the cultural narratives of the black middle class, impact and shape how these women experience and cope with adverse birth outcomes. This summer she

will be traveling abroad to conduct a service project that investigates how minority women in east London receive and perceive maternity health services. Following completion of the MHS Masters Program, Venus is planning to attend a PhD program in Public Health, Sociology, or American Studies.



Juliana Buccino, 4+1 Master's in MHS

At the end of February, Master's candidate Juliana Buccino attended the Birth Without Fear conference in Phoenix, AZ, as part of her original Master's research on how the organization works to address fear and anxiety among mothers and mothers-to-be. "Surrounded by new mothers, birth doulas, and other childbirth advocates, I experienced firsthand how Birth Without Fear promotes empowerment, body positivity, and fearless childbirth," says Buccino. At the conference, women shared their birth stories and listened to several speakers talk about pregnancy, childbirth, postpartum, and motherhood. "After studying how mothers shared positive birth experiences through the organization's online social media accounts, it was an incredible experience to be a part of so much solidarity and positive, encouraging words about childbirth and motherhood in person. A huge thanks to the MHS department for providing me with this opportunity to attend the conference!" Juliana received funding from an MHS research grant to conduct the research.

Juliana (right) with Birth Without Fear founder January Harshe

Peter Kent-Stoll, 2-year Master's in MHS

Peter is in his first year of the two-year M.A. program in MHS. Before joining MHS, he received his B.A. in Public Health Policy from the University of California, Irvine, where he conducted research on how genetic knowledge about disease shapes how people understand and talk about racial health disparities. He also conducted research on environmental organizations.

For his Master's thesis, Peter is studying the ways that colorectal cancer advocacy organizations raise awareness and seek funds for research and intervention. By conducting this research, he seeks to examine how cultural understandings of race, gender, risk, and responsibility shape and are shaped by how these organizations operate. How these organizations raise or do not raise issues of inequality has very real consequences for African Americans, who experience the highest rates of colorectal cancer. Peter is a 2015-2016 recipient of the Nichols Humanitarian Fund.

Upon completion of the MHS Master's Program, Peter is planning to attend a PhD program in Sociology.



Leah Samples, Master's Certificate in MHS

Leah came to Vanderbilt University to pursue a Master's degree in the Community Development and Action program. In this program, she conducted a qualitative exploration of the barriers to participation and citizenship that adults who are visually impaired experience in their environments. In addition to her thesis work, she is also involved in Professor Hamraie's *Mapping Access* project to map the accessibility of the Vanderbilt campus. The premise of this project is that mapping the accessibility of the campus environment can both provide necessary information for navigating between buildings and can also provide knowledge and insight into the concept and practice of accessibility more generally.

Leah is also working towards a Graduate Certificate in MHS, which has had a profound impact on her academic pursuits. In fact, it was through the Master's Certificate program that Leah was introduced to Science and Technology Studies (STS) and came to understand what it means to consider how social, political and cultural values affect scientific research and technological innovation and how these, in turn, affect society, politics and culture. In her research, Leah is committed to exploring the intersection of STS and the Disability Studies perspective. She will continue to explore this intersection at the University of Pennsylvania's History and Sociology of Science doctoral program in the fall of 2016.





Meera Nagarsheth, 4+1 Master's in MHS

Meera is a Masters candidate in MHS who deferred her medical school acceptance at the University of Miami Miller School of Medicine until 2016 in order first gain a better understanding of how sociostructural forces shape the contours of disease emergence and how social and structural injustices are embodied in biological pathologies. Her research examines the factors affecting participation of African Americans in HIV/AIDS clinical trials and advances a critique of the clinical trials research approach. More specifically, she argues that the clinical trials research needs to do a better job of situating individuals within the larger sociostructural context in which they exist, as participation in clinical trials is a function of both individual autonomy and larger structural forces that constrain or facilitate participation. Reflecting on her participation in the 4+1 program,

Meera explains, "The MHS MA program has deepened my interest in how medicine is pathologically expressed, but sociostructurally determined. The knowledge and tools I have gained from this program will enrich both my medical school training and future career as a community physician. The one-year MHS MA in the Social Foundations of Health has allowed me to examine how social and structural inequalities contribute to disease risk, health disparities, and access to treatment." Following medical school, Meera will pursue a career as an advocate and community physician in social medicine, focusing on the pathogenic role of social injustice in the cause, transmission, and distribution of diseases in low-income and minority communities.

Are YOU interested in earning a Master's degree in the Social Foundations of Health?

MHS is currently seeking students from a variety of backgrounds to join our **one-year Master's program**.

The program is open to Vanderbilt students AND external applicants interested in careers or advanced degrees in a wide array of health-related fields. The program emphasizes **health disparities, interdisciplinary research, and critical perspectives on health and illness**. Students work with a faculty mentor to develop a personalized plan of study that includes:

- Core courses in interdisciplinary research methods and critical health theory (30 credit hours over one year or three semesters).
- Elective courses drawn from MHS, Vanderbilt's departments of anthropology, history, psychology, sociology, ethics, policy studies, and economics, as well as Vanderbilt's schools of medicine, nursing, and law, and program in public health.
- Research project culminating in a thesis or practicum report.

Applications for the 2017-2018 academic year are due January 15, 2017.

Contact us at mhs@vanderbilt.edu or visit www.vanderbilt.edu/mhs to learn more about our program and the admissions process.



mhs + art

VU senior Vibhu Krishna's winning combination for bringing attention to mental health issues on campus

Vibhu Krishna, '16, is the first American citizen in her family and a Vanderbilt senior bringing together her interests in health and art by double majoring in Medicine, Health, and Society, with a concentration in Mental Health & Creative Healing, and Studio Art. As an artist interested in mental health, Krishna has strived to use both fields to inspire one another, and ultimately articulate concepts that neither could do as effectively alone. One of Krishna's first projects was somewhat more literal, involving using a diverse group of students to show mental health disorders via photography. The idea was to expand viewers' stereotype of a "typical mentally ill person," as well as to represent the emotional and psychological difficulties posed by these illnesses.

In this manner, a student viewer could more easily place themselves in the position of an afflicted student, and potentially question how university life may appear through the lens of mental illness. Furthermore, in using high-profile student models, the impact factor of each image, and awareness it creates, becomes a part of the piece.

Another mechanism for exploring the union of art and mental health that Krishna has been exploring more recently came out of her own process for relieving stress and anxiety. "I found that fine, repetitive pen-work -- similar in theory to the zentangle method or even

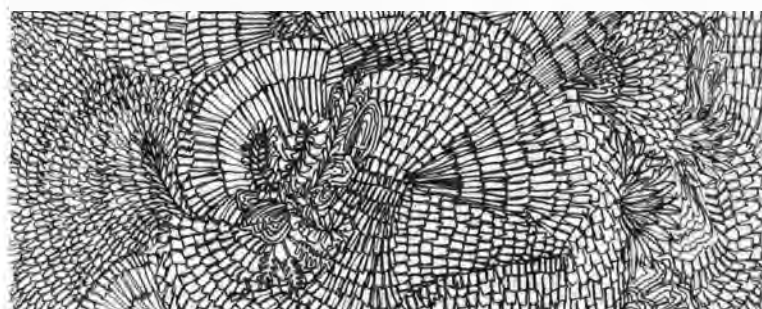
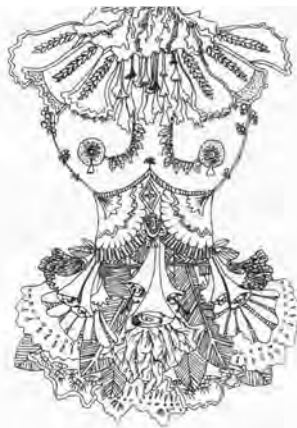


"Bipolar"

adult coloring books -- provided a platform for organic, stream-of-consciousness catharsis," explained Krishna. "I carry around 4"x5" pieces of Bristol board and the smallest ink pen available, and am thus able to practice this meditative technique at nearly any time of day."

Presently, Krishna is working on digitizing, enlarging, and laser-cutting these drawings (of which she has about 2.5 years' worth!), which will be part of an installation called Prana Sanctum at the Vanderbilt Studio Art Center, on display from April 15 to May 13, 2016. A circular light which fades and brightens at a calming breathing pace will serve as a focal point to the installation while the laser-cut drawings cover the walls of the space. Thus, the viewer is invited to sit in the ethereal, temple-like setting, and meditate alongside these projections of stress relief.

"It is my hope that mindfulness-based preventative and healing practices spread rapidly through our overmedicalized culture," says Krishna. "This is actually the inspiration for my MHS Honors Thesis, in which I examine the use of Mind-Body Practices and mindfulness among Vanderbilt undergraduates, so that the university may gain further insight into their utility for students at this institution." ♦



Opposite: "Anxiety"
Above (l to r) "Cultural", "Feminine", "Lost card"



To view more of Vibhu's work, visit her website:
www.vkrishna108.wix.com/artistportfolio

MHS alumna Renée Martin-Willet works to improve health, services for Nashville's refugees



In 2014, over 1,600 refugees were resettled in Tennessee from Syria, Iraq, Somalia, and numerous other countries. Unfortunately, refugees trying to assimilate face several major obstacles in Music City such as the lack of public transportation, translators, and medical services. Renée Martin-Willet, an MHS alumna, has been working collaborating with the Center for Refugees and Immigrants of Tennessee (CRIT); she has focused her efforts on CRIT's agricultural program and has worked closely with the program director in researching the benefits of this initiative.

After she completed her Master's in MHS in 2015, Renée continued her involvement by participating in the Refugee Task Force, an informal monthly colloquium held in Nashville. It was during this time she found a particular interest in the Refugee Agricultural Partnership program. Renée was awarded grant money from the Meharry-Vanderbilt Alliance Community Engaged Research Core, and the Vanderbilt Institute of Global Health to fund her current research project, "Refugee Agricultural Programs, Mental Health and Social Integration." This multifaceted project is an expansion of her Master's thesis and addresses conceptions of psychosocial health in refugee communities as well as experiments with tablet-based learning technology to overcome literacy and numeracy differences.

Renée started this work while completing her MA in MHS. She chose to pursue this program because the progressive connections developed with other university departments were unique to MHS at Vanderbilt. Renée said, "While pursuing my MA in MHS, there was a lot of space to carve out exactly what I was passionate about, and benefit from many different perspectives and kinds of expertise." The MHS department continues to support Renée in her amazing work and believes she will make great strides in improving the quality of life for refugees in Tennessee.

Renée's research sheds light on the numerous hardships faced by refugees in Nashville. After countless hours interviewing refugees and organizations that work with refugees, Renée is hopeful that Nashville can take some key steps to help integrate refugees into the community. "As for the city of Nashville," Renée explained, "I think incentivizing core businesses like grocers, clinics, and child care to invest in walkable, or short transit distance access within Nashville's immigrant neighborhoods, and then building safe sidewalks to access those places would be good for everyone, not just refugees." ♦

--Audrey Negrelli, '17

Else Sharp, MA '15, joins CDC to tackle HIV, Zika



After graduating from the MHS Master's Program last year, Else joined the CDC as a Public Health Associate at the New York State Department of Health in the AIDS Institute, Bureau of HIV/AIDS Epidemiology. She also recently became certified as a CDC Emergency Response Volunteer for Zika virus.

Last October, Else started a two-year program with the CDC working at the New York State Department of

Health. While her host site assignment was random, she was fortunate to be placed within the HIV/AIDS Epidemiology Bureau working on surveillance for New York state.

"It has been interesting for me to work in Epi coming out of the MHS graduate program," says Else. "I have realized how profoundly the MHS program has shaped my ideas about health and illness, and how rare a background in the Social Foundations of Health can be, even in public health. I am grateful to the MHS department as a whole, and to each of the faculty for individually fostering these ideas through your teaching and influence."

Coming from MHS, Else was looking for opportunities to work on the social and behavioral side of the virus, which she finds can be difficult from within the Bureau. However, for one of her projects Else is working with the Data to Care team to establish the Department's 'out of care' protocol.

While HIV surveillance data is used almost exclusively for tracking the epidemic, the use of this data is expanding to more actively facilitate linkage to care. Recent changes in public health law in New York State have allowed for the sharing of some surveillance data to identify and relink HIV patients into care, at the provider's request. Else is hoping to do some independent research and writing related to these changes in HIV surveillance. "I am sure that my MHS background will shape this work." ♦



Robert Sacks, MA '15, applies MHS principles in work with medical tech company Epic



learned in the MHS curricula to develop novel methods of caring for populations of people through technology."

Robert's work at Epic has connected in interesting ways

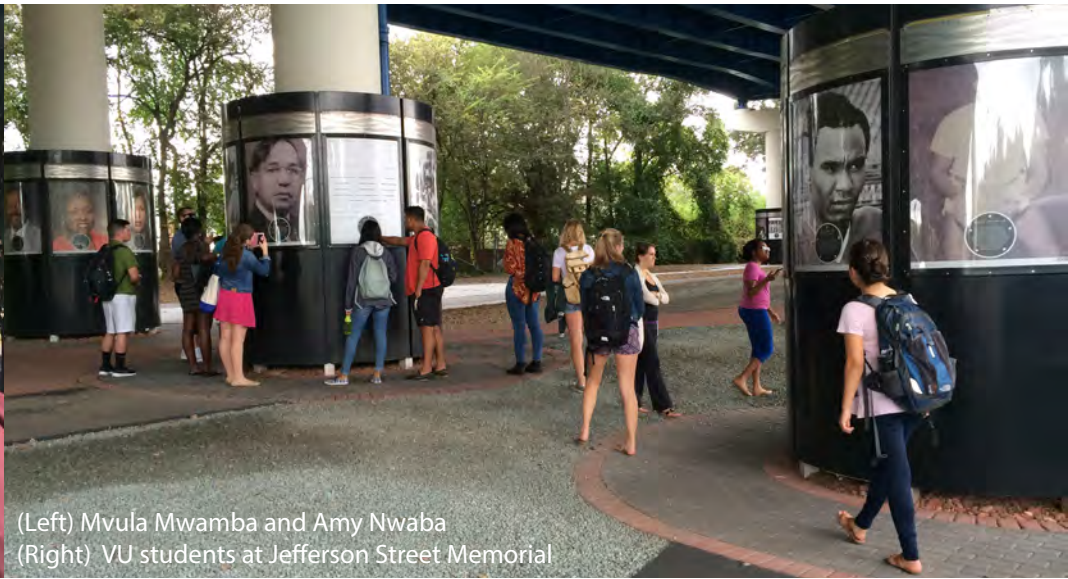
Since graduating from Vanderbilt, Robert Sacks has been working for Epic, an electronic medical record software company that is best known for its interoperable platform. Robert explains, "I've been working in Epic's population health management module, translating the knowledge I

with his research in the MHS 4+1 Master's program. Last year, under the direction of Professor Kenneth MacLeish, Robert completed his Master's thesis which explored the intimate understandings of genital trauma suffered by veteran soldiers. It was announced in December of 2015 that the first ever penis transplant to be performed in the U.S is finally scheduled to take place in 2016 -- on a wounded veteran. The transplant will be performed at Johns Hopkins Hospital with the operation being made possible through Epic technology. "Even though there is no direct connection between my role at Epic and this groundbreaking procedure," says Robert, "it is exciting for me to see my how my research at Vanderbilt is so closely intertwined with my new profession and the healthcare profession in general." ♦



immersion and pedagogy

MHS faculty push for innovative, experiential learning.



(Left) Mvula Mwamba and Amy Nwaba
(Right) VU students at Jefferson Street Memorial

Odie Lindsey's "Documenting the Body" course used field exercises and related scholarship to explore how different "bodies," literal and otherwise, contribute to the Nashville identity. Immersive activities engaged urban landscapes, public transportation, gentrification, cultural memory, LGBTI Health, sustainable agriculture and food deserts, immigration and refugee populations, and visual arts representations of the body.

Documenting the Body In Nashville

As an example, the class visited both the Jefferson Street Plaza and the Tennessee State Capital, then considered how various populations are memorialized (or not), and how these representations impact Nashville's cultural image, history, and community investment. Students studied public transportation then took bus lines throughout the city, and researched sustainability and

food security before visiting the Trevecca Urban Farm; small groups were dispatched to study gentrifying neighborhoods around Nashville, and in-class lectures were given by principals from the TransBuddy program, the Center for Refugee and Immigrants in Tennessee (CRIT), and Vanderbilt's Office of Active Citizenship and Service (OACS). As a complement to required coursework, students volunteered at an afterschool program conducted by Refugee and Immigrant Students Empowered (RISE), and at a CRIT community garden.

Research assignments challenged students to explore intersections between the various topics engaged in class. Among the ambitious papers was a study of gentrification, public transportation, and healthcare access in Nashville, the relationship of Nashville food deserts to Latino/Hispanic health, and the impact of the gender binary in visual arts to our cultural understanding, or misunderstanding, of transgender issues. ♡



Jeremy Mani and Nicole Levine view the Jefferson Street Mural.
Taken by Caroline Van Voorhis



healing animals

"A dog walked into my classroom."

It sounds like the beginning of an old joke. Instead it was the start of a new learning initiative. This spring, students in Professor Laura Stark's course "Healing Animals" had the chance to meet two therapy dogs and their trainers from Nashville-based River Road Retrievers. The golden retrievers, six-year-old Karisma and one-year-old Hope, extended our classroom learning on Americans with Disabilities Act by showing students concrete examples of how therapy dogs are used in addiction and trauma recovery programs.

Non-human animals are essential to modern medicine. Animals are also patients in their own right through veterinary medicine. Despite the centrality of animals in medicine, the roles of some animals—and some activities—are often obscured or erased in medical settings. The aim of the course is to explore the legal, economic, social and emotional techniques people

use to both celebrate and conceal the central place of animals in modern medicine.

Karisma and Hope offered hands-on learning of the best kind. Based on students' enthusiastic response, Stark organized a visit from Swoosh, the cancer dog. Swoosh and his trainer had recently returned from Washington, DC, where they had been invited to meet Congressional representatives who are studying how best to promote research on the animal-human bond. When not in Washington, Swoosh works as a therapy dog at the Vanderbilt Children's Hospital. Swoosh is part of a study, headed by nursing professor Mary Jo Gilmer, on how therapy dogs might reduce stress in pediatric oncology patients.

This spring, when dogs walked into Stark's classroom, they made the role of animals in therapeutics and in research tangible for students—and, by all accounts, made learning fun. 💧





SWIFT: fighting stigma of mental illness on campus

As part of Dr. Courtney Muse's class on social movements, students formed a new student movement called **SWIFT (Students With/Without Mental Illness Fight Together)**, which aims to destigmatize mental illness across campus.

In an effort to bridge the gap between students who experience mental illness and those who do not, SWIFT activists worked to start a campus-wide conversation through a photo poster display on March 21st from 10am-2pm on Library Lawn. The displays contained photos and stories of Vanderbilt students who have struggled or are struggling with mental health issues with the aim of raising awareness and creating a supportive community. Students from all backgrounds and years were featured showing that mental illness can affect anyone.

In mid-April, SWIFT also held a student-faculty dinner. Representatives from each department in the College of Arts and Sciences were invited

to attend. The purpose of the dinner was to bring college students' struggles with mental health problems to the attention of the faculty at Vanderbilt. A panel of experts also presented data on college students' mental health while invited speakers offered personal stories relating to mental illness. Based on a survey of Vanderbilt undergraduates, SWIFT activists also presented the faculty with a list of requests to better address mental health issues on campus, including requests for mental health sick days much like sick days provided for other illnesses to students by student health and for faculty to be more informed resources for students in need. ♡

Left to Right: Paul Aderemi, Annabelle Cella, Emily Bivins, Elizabeth Nichols, Takeydra Jones



new courses in 2016-2017

Join us in 2016-2017 as we launch new courses in collaboration with the Department of Health Policy.



Drs. Gilbert Gonzales and Sayeh Nikpay, Department of Health Policy, VUMC

FALL

Introduction to US Health Care Policy (MHS 3220)

Instructor: Sayeh Nikpay, PhD, MPH

This course, offered in collaboration with Vanderbilt's Department of Health Policy, aims to provide students with an overview of the US health care system, historical trends, and key features of its financing and delivery. Students will learn methods of health policy evaluation. The class will also explore how the current system will change as a result of the Affordable Care Act. The instructor, Sayeh Nikpay, is an expert in American health reform and hospital finance. Before joining the Vanderbilt faculty in 2015, Nikpay completed a post-doc at the University of Michigan and was a staff economist at the White House Council of Economic Advisers in 2010-2011.

SPRING

The Nation's Health: From Policy to Practice (MHS 3225)

Instructors: Gilbert Gonzalez, PhD & Tara McKay, PhD

The objective of this new University Course is to prepare Vanderbilt students to be more effective participants in debates over health policy by immersing them in the health policy environment, connecting the classroom to students' everyday lives, and promoting reflective and critical scholarship. The course is organized around big questions in the study of health disparities and domestic health policy with a particular focus on the historical, political and structural causes of health disparities among diverse Americans living in the US South. This course is open to undergraduate MHS majors and graduate students in MHS and Health Policy.

new books

Hamraie, Aimi. (Contracted and forthcoming 2017). *Building Access: Knowing and Making Universal Design*. University of Minnesota Press.

Lindsey, Odie. (forthcoming 2016). *We Come to Our Senses*. New York, NY: W.W. Norton.

grants + fellowships

Béhague, Dominique. Principal Investigator. (2014–2016). University Central Research Scholars Grant, Vanderbilt University, Funds for Seminar Series & Working groups, “Globalization, psychiatry and the politics of global mental health” (Co-Investigators: Jonathan Metzl, Kenneth MacLeish). Award amount: \$16,000

Griffith, Derek. Co-Investigator/ Sub-Project Principal Investigator/ Member of Consortium Core. (2016–2021). “Center of Excellence in Precision Medicine and Population Health in response to NIMHD Transdisciplinary Collaborative Centers for Health Disparities Research Focused on Precision Medicine (U54).” (Multiple PIs: Consuelo Wilkins, MD, MCSI, Nancy J. Cox, PhD, Maria F. Lima, PhD and Roy E. Weiss, MD, PhD). Award amount: \$9,452,962.

Griffith, Derek. Principal Investigator. (2016–2019). “Mighty Men: A Faith-Based Weight Loss Program to Reduce Cancer Disparities.” Research Scholar Grant in Cancer Control and Prevention Funded by the American Cancer Society. Award amount: \$1,600,000.

Griffith, Derek. Co-Investigator (2012–2017). “The Vanderbilt Institute for Clinical and Translational Research (VICTR).” UL1 funded by the National Center for Advancing Translational Sciences, National Institutes of Health. (PI: Gordon Bernard, MD). Award amount: \$6,986,576 (annual).

Griffith, Derek. Co-Investigator (2014–2017). “Active and Healthy Brotherhood.” Funded by the Patient-Centered Outcomes Research Institute. (PI: Melicia Whitt-Glover, PhD). Award amount: \$2,075,511.

Griffith, Derek. Co-Investigator (2014–2018). “HBCU PRIDE.” Funded by the National Heart, Lung, and Blood Institute, National Institutes of Health. (PI: Bettina Beech, PhD) Award amount: \$287,570 (annual).

Griffith, Derek. Principal Investigator. “Research Scholar Grant in Cancer Control and Prevention.” Funded by the American Cancer Society. Award amount: \$1,600,000.

Griffith, Derek. Principal Investigator. (2015–2016). “Using Tailoring and Technology to Promote Health Equity in African American Men.” Aetna Foundation. Award amount: \$89,806.

Griffith, Derek. Principal Investigator. Project 3 of the U54 Center of Excellence in Precision Medicine and Population Health: “Tailored behavioral intervention for overweight African American and Latino men.” Award amount: \$929,847.

Hamraie, Aimi. Library Dean’s Fellowship (2015–2016), Vanderbilt University.

Hamraie, Aimi. Public Fellows, Curb Center for Art, Enterprise, & Public Policy, Vanderbilt University.

McKay, Tara. Co-Investigator, subaward. (2015–2018). “Understanding how social networks affect health: LGBT oversample.” (PI: Claude Fischer) National Institute of Aging (R01). Award amount: \$189,000.

Stark, Laura. Library Dean’s Fellowship (2015–2016), Vanderbilt University.

Stark, Laura. Research Fellow (summer 2015), Max Planck Institute for the History of Science, Berlin, Germany.

journal articles

- Béhague, Dominique.** (2016). Psychiatry, bioepistemes and the making of adolescence in Southern Brazil. *História, Ciências, Saúde. Manguinhos*, 23 (1) pp. 131-153. DOI: [10.1590/S0104-59702016000100009](https://doi.org/10.1590/S0104-59702016000100009).
- Storeng, K.T. & **Béhague, Dominique.** (2016). Partner or poor cousin: the Safe Motherhood Initiative and the Partnership for Maternal, Newborn and Child Health. *Health Policy and Planning*. DOI: 10.1093/heapol/czw023
- Béhague, Dominique** & Lézé, S. (2015). Shaping the modern child: genealogies and ethnographies of developmental science. *Social Science and Medicine*, 143, 249-254. DOI:[10.1016/j.socscimed.2015.09.018](https://doi.org/10.1016/j.socscimed.2015.09.018).
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presentations + invited talks

- Béhague, Dominique.** (2015, November). *Kindly Governance: Rethinking Care in Mental Health*. Invited panelist at the American Anthropological Association Meeting,
- Béhague, Dominique.** (2015, September). *The rise of cost-effectiveness logics in global health*. Paper presented at the Vanderbilt Institute for Global Health Grand Rounds, Nashville, TN.
- Béhague, Dominique.** (2015, June). *Science, Psychiatry, Pedagogy, and Adolescence: The Making of Troubled Teen Motherhood in Southern Brazil*. Invited lecture at the Centre de recherche médecine, sciences, santé, santé mentale, société (Cermes3, CNRS, Paris).
- Béhague, Dominique.** (2015, May). *The rise of cost-effectiveness evidence in global health: contingencies of 'context' and the politics of contingency*. Invited lecture at the Department of Methodology, London School of Economics.
- Béhague, Dominique.** (2015, April). *The social production of mental morbidity among teen mothers in Southern Brazil*. Paper presented at the Gender, Health and the South Symposium, Wake Forest University, Winston-Salem, NC.
- Griffith, Derek.** (2016, April). *An intersectional approach to the social ecology of men's health*. Diversity in Public Health Summit: Homelessness: Giving a voice to an underserved population. Keynote panel presentation at the Multicultural Public Health Student Association (MPHSA), The Ohio State University, Columbus, OH.
- Griffith, Derek.** (2016, April). *Tailoring health disparities interventions through qualitative methods: The closer we get to why, the better we'll know how*. Keynote panel presentation at the University of Alabama National Public Health Week Celebration, Tuscaloosa, AL.
- Griffith, Derek.** (2015, December). *Masculinity and its impact on health behaviors*. Keynote panel presentation at the 2015 American Society for Men's Health Annual Meeting, Arlington, VA.
- Griffith, Derek.** (2015, November). *Recommendations & Lessons Learned from a State-Level Public Health Equity Initiative*. Paper presented at the annual meeting of the American Public Health Association, Chicago, IL.
- Griffith, Derek, Warren, M. Smoot, D., Sullivan, C.D., Robinson, K., Ward, K., Leventhal, M., Juarez, P., Edge, S., & Reece, M.** (2015, November). *Tennessee Men's Health Report Card: Lessons Learned and Implications*. Paper presented at the annual meeting of the American Public Health Association, Chicago, IL.
- Griffith, Derek.** (2015, October). *Keynote panel: Pathways to Success for Boys & Young Men of Color*. 5th Annual on Building Healthy Communities: Pathways to Success for Boys & Young Men of Color. Washington, DC Department of Behavioral Health. Washington Convention Center, Washington, DC.
- Griffith, Derek.** (2015, October). *Workshop: Masculinity, Motivation, and the Health of Men and Boys of Color*. 5th Annual on Building Healthy Communities: Pathways to Success for Boys & Young Men of Color. Washington, DC Department of Behavioral Health. Washington Convention Center, Washington, DC.
- Hamraie, Aimi.** (April, 2016). *Crip Technoscience*. Invited lecture at the University of Toronto Technoscience Salon, Toronto, Ontario, Canada.
- Hamraie, Aimi.** (April, 2015). *Crip Non-conformity: conversations between disabled users and built environments*. Paper presented at the Philosophia association meeting, Atlanta, Georgia.

- Hamraie, Aimi.** (June, 2015). *The Making of the Principles of Universal Design*. Paper presented at the Society for Disability Studies meeting, Atlanta, Georgia.
- Hamraie, Aimi.** (November, 2015). *Environmental Knowing and the Making of Social Justice in Architectural Space*. Paper presented at the History of Science Society meeting, San Francisco, California.
- MacLeish, Kenneth.** (2015, September). *Imagining Military Suicide*. Veterans Lecture Series, Middle Tennessee State University Honors College. Murfreesboro, TN.
- MacLeish, Kenneth.** (2015, September). *Anthropology on War, Trauma and Morality and Labeling Trauma: History, Culture, Politics*. Swords to Plowshares Symposium on Moral Injury. San Francisco, CA.
- MacLeish, Kenneth.** (2015, October). *How To Feel About War: Conduct, Intimacy, and the Governance of Military Life*. Paper presented at the meeting of the American Studies Association, Toronto, Ontario, Canada.
- MacLeish, Kenneth.** (2015, November). *Present Chaos: Rehabilitating the Future in a Veteran Treatment Court*. Paper presented at the meeting of the American Anthropological Association, Denver, CO.
- MacLeish, Kenneth.** (2016, March). *On Military Suicide: Risk, Care and Everyday Life*. Lycoming College, Williamsport, PA.
- MacLeish, Kenneth.** (2016, April). *Imagining Military Suicide: Risk, Pathology, and the Work of War-Making*. Department of Anthropology and Office of Military and Veteran Affairs, Syracuse University. Syracuse, NY.
- McKay, Tara.** (2016, April). *Social Networks and Health among Older LGBT Adults in the San Francisco Bay Area*. Paper presented at the meeting of the International Network for Social Network Analysis, Newport Beach, CA.
- McKay, Tara.** (2016, March). *Pursuing Social Justice through Public Health from Malawi to the US South*. Paper presented at the Vanderbilt Politics of Health in the US South Conference, Nashville, TN.
- McKay, Tara & Angotti, N.** (2015, August). *Ready Rhetorics: International LGBT Activism, Local Contexts, and Political Homophobia in Malawi, Nigeria, and Uganda*. Paper presented at the meeting of the American Sociological Association, Chicago, IL.

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Jonathan Metzl delivers keynote address at the Health Humanities Conference, Cleveland Clinic, Cleveland, OH.

VU Chancellor Nicholas Zeppos
first bumps MHS major
Jennifer Chou, '17



MHS Master's students hang
with Melissa Harris-Perry



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