

CENTER FOR **Medicine
FOR Health &
Society**

**MHS Leads Community Conversations
on Guns and Gun Violence**

**Students Engage TN Legislators on
Key Policy Issues**

Spring 2018 – No. 05



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From the Chair of MHS:

Welcome to the fifth edition of the Vanderbilt Center for Medicine, Health, and Society (MHS) newsletter. The volume is a collaborative project of the faculty, staff, and students at our center, and represents our annual means of spreading the word about our accomplishments, goals, and future plans. I particularly wish to thank Professor Tara McKay for her tremendous efforts in crafting and editing the content that appears within these pages.

The past year has seen vital 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, 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 70 MHS courses, and support nearly 550 undergraduate majors and a smaller number of minors. Our undergraduate curriculum offers seven important concentration areas, driven by student interest and faculty expertise in areas such as Global Health, Health Policies and Economies, Health Justice, and Medicine, Humanities, and the Arts. We also support a vibrant and growing 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 functions as 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!

And we continue to attract world-class faculty. Indeed, next year we will welcome two new faculty members. Lauren Gaydosh received a PhD in Sociology and Social Policy with a specialization in Demography from Princeton University, and then completed a postdoctoral fellowship at the Carolina Population Center at the University of North Carolina at Chapel Hill. She studies how childhood environments are shaped by and reinforce patterns of socioeconomic inequality, influencing health across the life course. Kym Weed is a PhD in English from the University of North Carolina at Chapel Hill who comes to us with expertise in American literature and health humanities, and who is completing a monograph titled, *Our Microbes: Imagining Human Interdependence with Bacteria in American Literature, Science, and Culture*.

As this newsletter details, over the past year our faculty have published important articles and books, won major grants and awards, and appeared on a host of national media outlets. 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.

So too, we continue to publish scholarly articles that detail the impact of our curriculum. For instance, a major study in *Social Science & Medicine* detailed the effectiveness of our "new approach to teaching race and health," along with the remarkable success our students see when applying to medical schools (<http://vanderbi.lt/mf5yr>). This is but the latest testament to the ways that MHS students learn to think critically about complex social issues that impact health, health care, and health policy. By teaching students to grapple with these monumental questions, the Center is helping develop sophisticated thinkers who are trained to be unsatisfied with the status quo—a generation of students who are prepared to find new solutions out of a complex web of challenges.

Over the past year we've hosted an exciting series of events, including wide-ranging conferences and panels that explored guns in America, the politics of healthcare reform, the histories of pharmaceuticals, military trauma, critical psychiatry, and medicine and the media, among other topics. We also continue to collaborate with a number of regional and global partners, from the Anna Julia Cooper Center at Wake Forest, to Kings College, London, to Sun Yat-Sen University in Guangdong, China.

These and other initiatives are continually updated on our website, www.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!

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Congratulations to Derek Griffith

Congratulations to Derek Griffith who was promoted to Full Professor in 2018. Professor Griffith is the Director of the Center for Research on Men's Health and a leading social scientist focused on social influences on men's health and racial and ethnic health disparities. He specializes in informing, developing, and testing interventions to improve African American men's lifestyle behaviors and chronic disease risk, morbidity and mortality, including reducing obesity and increasing healthy eating, physical activity and screening, often using a community-based participatory research approach. His research has been funded by the National Institutes of Health, the American Cancer Society, Patient Centered Outcomes Research Institute (PCORI), and the W.K. Kellogg Foundation. Congratulations, Derek!



Congratulations to Courtney Muse

Professor Courtney Muse, MHS Director of Advising, was awarded the 2017 Ernest A. Jones Faculty Advisor Award. The Ernest A. Jones Award was established in 1978 by a grateful parent in recognition of the excellent academic advice his son received from Professor Ernest A. Jones of the Department of Physics and Astronomy. The award honors a faculty member for dedication to undergraduate advising. The recipient of the Jones Award is chosen by a vote of graduating seniors. Each winner receives a cash award and an engraved Mississippi Julep pewter cup. Dr. Muse is the advisor to approximately 185 students. Congratulations, Courtney!



MHS Welcomes New Faculty

We are delighted to welcome Lauren Gaydosh and Kim Weed in 2018!



Lauren Gaydosh

Lauren Gaydosh will join MHS this fall as an Assistant Professor. She received her PhD in Sociology and Social Policy with a specialization in Demography from Princeton University, and her BA in Sociology from the University of Pennsylvania. Prior to Vanderbilt, Gaydosh was a postdoctoral fellow in Demography at the Carolina Population Center at the University of North Carolina at Chapel Hill. Gaydosh's research focuses on better understanding the role of early life environments in shaping health across the life course. Gaydosh integrates social, contextual, and biological data from population-based longitudinal studies to examine how inequalities in the social environment get under the skin to create health disparities. Gaydosh's recent research published in the *Proceedings of the National Academy of Sciences* shows that upward social mobility predicts better physical health for white adults, but not for black or Hispanic adults. This research documents the importance of early life exposure to disadvantage in perpetuating health inequalities. Welcome, Lauren!

Kym Weed

Kym Weed will join MHS as a Senior Lecturer and Assistant Graduate Director in Fall 2018, after completing her PhD in English at the University of North Carolina at Chapel Hill. She earned a BS in Biochemistry & Molecular Biology from Lebanon Valley College before working as a microbiologist. While earning her MA in English at the University of Maryland, College Park, she ushered post-baccalaureate students through the medical school application process as a pre-health advisor. As a scholar of American literature and health humanities, Weed researches the intersections of literature and science as well as narratives that shape experiences of health and disability. Her dissertation, "Our Microbes: Imagining Human Interdependence with Bacteria in American Literature, Science, and Culture, 1880–1920," extends scholarship about the anxieties provoked by disease-causing germs to attend to the bacteriologists and fiction writers who located possibility in the microbial world. An article derived from the project will appear in *Literature & Medicine* later this year. As a founding member of UNC's HHIVE Lab, an interdisciplinary health humanities lab, Weed orchestrated a study that elicited a written narrative about falling from older adults, and published on health humanities teaching in the *Journal of Medical Humanities*. She has taught courses in American literature, health humanities, and rhetoric and composition. Welcome, Kim!



New Faculty Books

Building Access: Universal Design and the Politics of Disability

(University of Minnesota Press, 2017)

by Aimi Hamraie

"All too often," wrote disabled architect Ronald Mace, "designers don't take the needs of disabled and elderly people into account when they are designing a building." In this groundbreaking interdisciplinary study, Hamraie places the claim that "designers do not design with disability in mind" into historical, theoretical, and cultural perspective. Typically understood in terms of wheelchair ramps, Braille signs, automatic toilets, curb cuts, and kitchens designed with aging in mind, the late-20th century Universal Design movement purports to create built environments that benefit everyone, not just the average user. But who counts as "everyone," Hamraie asks, and how can designers know? *Building Access* shows that as architects began to expand their focus from the average body to a range of users in the 20th century, they also came to rely upon value-laden scientific, medical, and industrial ways of defining citizenship. Consequently, inclusive design for disabled users was inseparable from Jim Crow-era racial segregation and gendered divisions of space. In response, the late-20th century Universal Design movement introduced new architectural features, but also challenged mainstream architects' ways of understanding human variation. Cracking open the archive of Universal Design and its founder, Ronald Mace, *Building Access* brings together histories of design, science, and inclusion in a deep engagement with the politics of knowing and making in the 20th-century United States.



MHS Welcomes New Staff Member, Marissa Potts

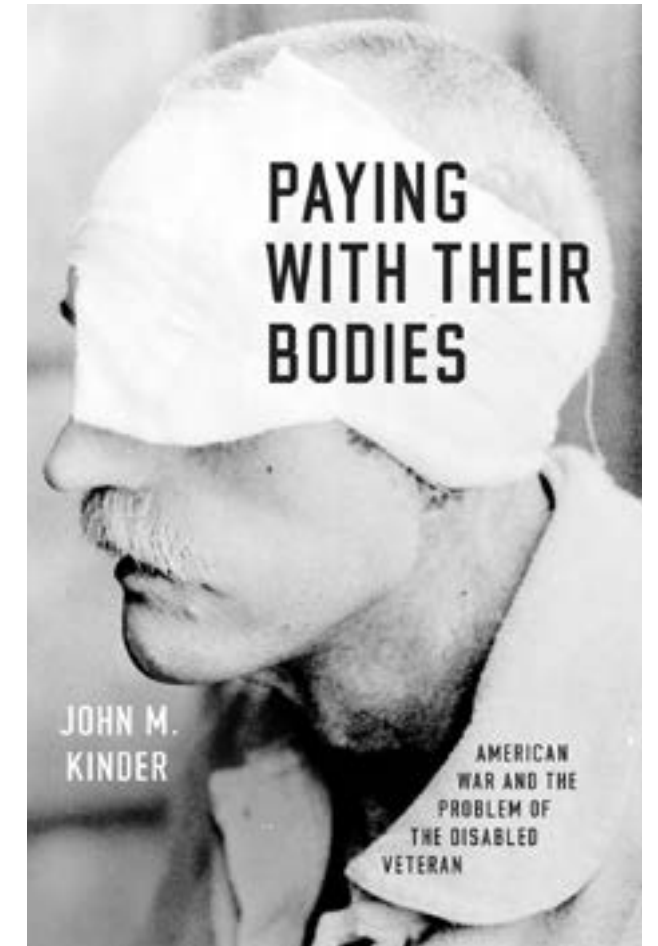
Please welcome Marissa Potts who has joined MHS as our new Program Coordinator. Marissa is a newcomer to Nashville by way of New Jersey. She has worked for the last six years at Princeton University, most recently in the Undergraduate Admissions Department as their Budget Coordinator. She holds Bachelor's degrees in Communication Studies and Psychology from Towson University.

Hot Topics in MHS

In 2017 and 2018, MHS hosted several guests as part of our Hot Topics Seminar Series, which aims to engage faculty and students across campus on controversial topics, and our Student Breakfast Series, which brings in scholars to talk in an intimate setting with undergraduate and graduate students about the work of a scholar, writing processes, and much more. This academic year, we were delighted to host or co-sponsor campus-wide events featuring Ben Reiss, John Kinder, Mimi Kúch, Bryant Simon, Perri Klass, and Rob McRuer.

"Never in This World a Victim like Me" What Disabled Veterans Can Teach Us about the History (and Future) of American War

MHS marked Veteran's Day with a lecture by Prof. John Kinder (Department of History, Oklahoma State University) on American war injury and disability. Drawing on examples from the Civil War to the recent wars in Iraq and Afghanistan, Prof. Kinder showed how veteran bodies become tokens onto which American society projects a vast range of anxieties about war's inevitable human toll, but also valuable case examples that show how the devastation of war are bound up with our national investment in unequal systems of class, racial, and gender inequality. The Robert Penn Warren Center for the Study of the Humanities co-sponsored this event.



Wild Nights How Taming Sleep Created Our Restless World

MHS Hot Topics' first featured speaker of Fall 2017, co-sponsored by the English Department, was Ben Reiss (Department of English, Emory University), who spoke about his recent book *Wild Nights: How Taming Sleep Created Our Restless World*. Prof. Reiss' talk showed how this most natural of practices is thoroughly interwoven with social norms that make our labor available for capital, govern sexuality and family organization, and naturalize the unequal distribution of the health and wellbeing associated with a good night's rest.



Hacking Psychiatry: Race, Gender, and Community

Asian Studies scholar Mimi Khúc ([Asian American Literary Review](#)) visited Vanderbilt's campus in April, 2018, to discuss her editorial contributions to the special issue of the AALR, titled *Open in Emergency*. The issue, unlike a typical journal, is a box filled with various components, ranging from a hacked DSM to tarot cards, and tapestries woven from letters and poems by individuals to their parents and family members. Khúc, along with AALR editor Lawrence-Minh Bui, collaborated with 75 scholars, writers, and creatives to craft this special issue, which draws attention to and considers the way in which modern psychiatry and mental health services largely leave out and misunderstand the Asian-American lived experience.



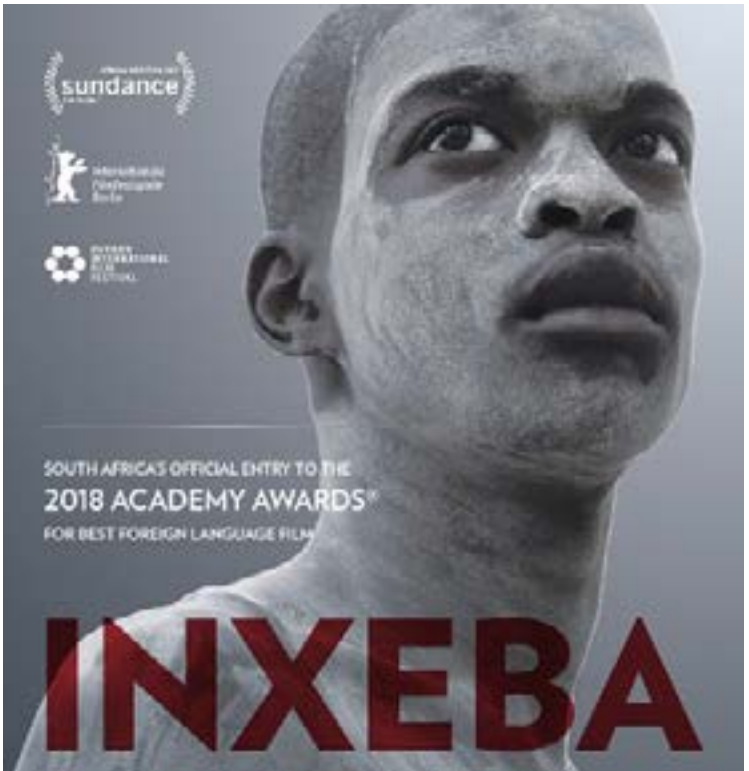
Khúc was joined by panelist Professor Ben Tran from Vanderbilt's Asian Studies and English departments; Liv Parks, who serves as assistant director at the K.C. Potter Center for LGBTQI Life at Vanderbilt; and Maggie Mang, graduate student in the Center for Medicine, Health, and Society. The panelists contributed their own knowledge, experiences and suggestions regarding the topic and took audience questions, which included mental health wellbeing on campus and the role parents play in shaping one's mental health narrative.



MHS in the Community

Nashville Premiere of *Inxeba: The Wound*

On November 9th, Professor Tara McKay hosted Vanderbilt's International Lens screening and the Nashville premiere of *Inxeba: The Wound*, South Africa's official entry for the 2018 Oscar's foreign language film category. *Inxeba* follows Xolani, a young factory worker living in the Eastern Cape of South Africa. Every year, Xolani and other men from his community gather in the mountains to observe a Xhosa initiation ritual transitioning a group of teenage boys to manhood. A seasoned caretaker, Xolani is asked to initiate and toughen up one boy from the city whose father suspects him of being gay. His defiant initiate discovers Xolani's best kept secret, a sexual relationship with Vija, another man in the community, and his entire existence begins to unravel. Through its depiction of Xolani's relationships, *Inxeba* challenges narratives of sexuality, masculinity, race, class, and tradition in post-apartheid South Africa in bold new ways. The film has been highly controversial in South Africa because of their depiction of same-sex sex and traditional rites of passage of young Xhosa men. We are honored to have been able to bring it to the Nashville community.



Music, the Mind, and Health Series Presents Japanese Guitarist Shin-ichi Fukuda

As part of the *Music, the Mind, and Health Series*, MHS, in collaboration with the Nashville Guitar Society, presented an evening with classical guitarist Shin-ichi Fukuda. For more than 30 years, Fukuda has pursued a concert career as a leading guitarist, performing solo recitals, concertos with orchestra, and chamber music in major cities around the world.

MHS Offering New Health Science Classes

We are delighted to welcome four new pre-health courses to our MHS curriculum: Human Anatomy and Physiology I and II, Introduction to Microbiology, and Introduction to Nutrition. These highly popular courses were previously housed in Nursing, but will transfer to MHS in large part due to the high numbers of MHS students who already take these offerings as gateways to professional schools. This is a tremendous win-win for all, and would not have been possible without the tireless efforts of Professor Dominique Béhague, and Deans Saggi, Christie-Mizell, and Morrison—Thank you. Housing these courses under MHS will allow us to bolster our pre-health offerings and options ever-more fully, and can allow for further cross-class collaborations in the future, as traditional science classes enter into a curriculum that also emphasizes cultural and cross-cultural approaches. In all, this move helps unify the curriculum for our non-science-major, pre-health students.

Please welcome Professors Cobb, Rollins-Smith, and Pope to MHS! The course descriptions are below:

MHS 3101: Human Anatomy and Physiology I

Charles Cobb, Ph.D.
Structure and function of the human organism. Integration of the gross anatomical structures and organ systems with microscopic structure, physiological function, and homeostatic mechanisms. Clinical relevance of selected topics. No credit for students who have earned credit for NURS 3101. One semester of a college-level course in biology or chemistry is expected.

MHS 1500: Introduction to Microbiology

Louise Rollins-Smith, Ph.D.
Basic introduction to microbiology. Diversity of bacteria and viruses. Genetics and metabolism of bacteria. Pathogenesis, host immune defense mechanisms, rationale for antimicrobial drugs. Bacteria, fungi, viruses, and parasites important to humans.

MHS 3102: Human Anatomy and Physiology II

Charles Cobb, Ph.D.
Continuation of 3101. Structure and function of the human organism. Integration of the gross anatomical structures and organ systems with microscopic structure, physiological function, and homeostatic mechanisms. Clinical relevance of selected topics. No credit for students who have earned credit for NURS 3102.

MHS 1600: Introduction to Nutrition and Health for a Changing World

Jamie Pope, MS, RD, LDN, FAND
Nutrition science and research; basic principles of digestion and absorption; role of specific nutrients and dietary practices in health promotion and chronic disease prevention. Nutrition throughout the lifespan. Not intended for students who have previously taken NURS 1601 or NURS 1602.

MHS Offering New Course on Healthcare Policy

We are also pleased to announce a new course, Introduction to U.S. Healthcare Policy, taught by Department of Health Policy Assistant Professor Sayeh Nikpay. Professor Nikpay was a staff economist at the Council of Economic Advisers in 2010–2011. Her research focuses on the impact of health reform on labor market decisions of individuals and hospital finance. The course will be offered in Fall 2018. Description below:

MHS 3320: Introduction to US Healthcare Policy

Sayeh Nikpay, Ph.D.
This class surveys and critiques the major mechanisms of financing in the U.S. healthcare system, analyzes the economic rationale for health reform, and introduces students to health policy analysis through the case studies from current health policy proposals.



Sayeh Nikpay

Humanizing Mental Health Issues on Campus

by Courtney Muse

In her Mental Illness Narratives (MHS 3450) course, Professor Courtney Muse is working hard to help Vanderbilt students connect with mental illness through exposure to the personal narratives of other students on campus. In the class, students read autobiographies of people with mental illnesses, but Muse finds it's also important to connect personally with someone who has a mental illness. Thus, Muse also invites fellow Vanderbilt students who are willing to open up about their struggles with mental illness to come in to talk about each mental illness the class reads about. This move is in line with Vanderbilt's push to create dialogue around mental illness on campus and it has been a fabulous opportunity for students to connect.

Amanda Schoewe, sophomore and MHS major, reflects on how exposure to her fellow students changed her perspective of mental illnesses, including depression and eating disorders. "The three guest speakers who discussed their depression left me with a really different impression of what it would feel and look like to live with depression. All three of these young women were bubbly, funny, and extremely well spoken. If I had been asked to point to three people in the room who suffered from depression prior to them sharing their stories, I do not think I would have chosen a single one of them. Hearing their stories made me realize how many other people that I know and would never expect to have depression suffer from it as well. Overall, these three stories gave me an entirely new outlook on mental illness and specifically depression at Vanderbilt. It is impossible to look at someone and assume they do not suffer from mental illness, because we are all capable of wearing "masks." Depression affects the popular, the super involved, the super smart and people of every race, age, and gender."

When the class turned to discuss the experience of having an eating disorder, Schoewe was similarly moved to connect her fellow students' experiences and concerns to her own life. Schoewe reflects, "Not only was the narrative told in class today by our guest speaker very informative, it was also extremely inspiring and made me realize a lot about my own life and the lives of my peers. I have a lot of friends who have had eating disorders, but I have never heard about or seen any to that extent. The guest speaker's story also proved to me that not every form of treatment works for everyone. She was passed along from facility to facility, and while she did admit to learning a lot from these places, some of them seem to have made her illness worse. Additionally, I had always thought of eating disorders as something you just beat one day, and boom, you are completely recovered. Our guest speaker's story proved that it is a continuous struggle. Based on my impression of the guest speaker, I was so surprised that she had gone through so much, because she seemed like any other student at Vanderbilt. It makes me sad to realize that there are probably so many people in my classes, on my floor, and people I just pass by that are having or have had adverse life experiences like the guest speaker."

As Vanderbilt works to bring mental health issues to the foreground, classes where students have the opportunity to connect with others are leading the way.





Updates On The Global Psyche

by [Dominique P. Béhague](#)

After two highly successful international conferences, the first in 2015 to build a partnership for the social sciences in global mental health, and the other last year on The Global Psyche, we are happy to report that we have two Special Issues in the works. The first will be published with *Medical Anthropology Quarterly*, the flagship journal of the Society for Medical Anthropology. Featuring research conducted in Argentina, Japan, Kosovo, Mexico, Russia, and the United States, this issue will explore how mental life has become a crucial site of moral and political reckoning, and of ethical speculation and reconfiguration, birthing novel experiments in justice, rights, personhood, and the good life. Our second special issue will delve more specifically into the changing materiality of the psyche. Bringing together scholars working in Brazil, Senegal, the United States, Italy, and Chile, contributors will draw on affect theory, feminist scholarship, and post-colonial insights to explore the many ways the global psyche has become a political object par excellence. We are immensely grateful for the generous funds we received for these conferences from the Vanderbilt International Office and the Research Scholars Grant program.

Beyond conferences and special issues, the intersections of psyche, globalization, and politics constitute a growing research cluster at MHS. Three recent highlights include:

Professor MacLeish's new research on a veteran treatment court and related veteran transition services serves as a reminder, central to our collective work, that even "local" mental health phenomena are global. His work will soon be featured in an international collection of scholars exploring various dimensions of the ethnography of war and trauma, and to this conversation Professor MacLeish brings insights into the particularly U.S.-centric character of what, in the form of the Post-Traumatic Stress Disorder diagnosis, has become a global phenomenon.

One of our MHS-MA students, Henning Ander, will be delving into similar themes in his thesis, which centers on how college students frame and analyze mental illness, theories of cause, and possibilities for prevention, recovery, and treatment. His approach—so critical to all work in this area—will be particularly attuned to the policy implications of ensuring a balanced and synergistic understanding of the biological, individual, institutional, economic, and cultural forces influencing mental wellbeing.

Professor Béhague's recent publications from her work in Brazil investigate the intersection of psychiatric and reproductive discourses surrounding adolescent sexual development, and the way these are interpreted by young people themselves, often with unintended affects that compound social exclusion. Additionally, Béhague has been appointed to the editorial board of a major new journal in the field, *Global Mental Health*, published by Cambridge University Press.

The Toxic Legacy of War

by [Ken MacLeish](#)

We often think of war as neatly contained in space and time, a clearly bounded object with distinct winners, losers, heroes, villains, and victims. But one of the enduring lessons I take from my research on U.S. war-making practices and the firsthand experiences of the people whose labor makes war is that this characterization is not simply wrong, but dangerously misleading. My new research project on the serious health problems of military service members exposed to the toxic fumes of waste disposal pits has only affirmed my sense that much of war's most severe damage happens beyond the battlefield, often in ways that force its victims to fight for recognition and that challenge how the rest of us see war. Since the beginning of the U.S. wars in Iraq and Afghanistan, the Defense Department has operated open-air burn pits for the expedient disposal of the everyday waste produced by forward-deployed American troops and routine war-making activities. Strict standards are meant to protect both the environment and human bystanders (occupying military forces and local civilians alike), but in practice, all manner of materials was burned in these pits, much of it in direct contravention of the Defense Department's own rules. Batteries, Styrofoam, paint, ammunition, uniforms, computers, tires, furniture, animal carcasses, used medical supplies, human waste, and body parts have all been disposed of there. An estimated 300,000 American service members, plus tens of thousands of private contractors and uncounted local civilians, have been exposed to the resulting smoke plumes, which contain particulate

matter, sulfur oxides, volatile organic compounds, and a vast array of other irritant, pathogenic, and carcinogenic substances. Exposure has been strongly associated with a range of fatal cancers, respiratory conditions, and neurological and immune diseases. But definitive causation is very difficult to prove, especially when related illnesses only emerge slowly over time, and the Defense Department and the contracting companies responsible for the pits have consistently asserted that they were operated safely. Working with a colleague at Rice University, and with funding support from the Veterans Health Administration's War-Related Illness and Injury Study Center (WRIISC), I recently began an ethnographic study of burn pit-affected service members, their family members, advocates, and clinicians. We are examining the official labeling of sufferers' affliction for treatment, care, and disability compensation purposes. But we are also learning about its importance as an expression of deservingness and institutional responsibility—that is, as a moral statement about being deliberately exposed to harm or deceived about their own safety. The stakes of this project have come to feel quite high, as exposed personnel often feel themselves to be "living on borrowed time," even in the absence of a terminal diagnosis, to use one veteran's words. At the same time, the prospect of better understanding this phenomenon promises to broaden the ways our society thinks about war, and our collective responsibility for its effects.



A Marine near a burn pit at Forward Operating Base Zeebrugge, Helmand province Afghanistan in 2006. Image via defenseimager.mil.



Studying Sensory Differences in Infant Siblings of Children with Autism

MHS student Alexandra Golden ('18), is currently completing her independent study in Dr. Tiffany Woynaroski's Biobehavioral Approaches in NeuroDevelopment (BAND) Laboratory at Vanderbilt University Medical Center. For the past two years, Golden has been actively involved in Dr. Woynaroski's ongoing Sensory Project in Infant Siblings of Children with Autism (Project SPIS), a longitudinal correlational study funded by the National Institutes of Health. Preliminary findings from Project SPIS have shown that early sensory differences may be producing cascading effects on social communication and language development in infants who are at elevated familial risk for Autism Spectrum Disorder. Motivated by the findings from the larger study, Alexandra has taken the lead on a pilot study that aims to evaluate whether a targeted early intervention may mitigate the developmental sequelae of early sensory differences in this at-risk population. To do this, she has developed a candidate intervention

for early sensory differences that is developmentally appropriate for infants and has applied for internal funding for this pilot work from the Vanderbilt Institute for Clinical and Translational Research. If her hypotheses are born out, Golden's research project has the potential to improve early identification and remediation of language and social communication impairments in infants at heightened risk for autism, and thus has strong relevance for public health. Golden presented her proposal for the aforementioned pilot study at Vanderbilt Kennedy Center Science Day in January and will additionally be presenting findings from Dr. Woynaroski's larger study at the 51st annual Gatlinburg Conference on Research and Theory in Intellectual and Developmental Disabilities in San Diego, California, in April. She will be continuing her work on this research in Dr. Woynaroski's laboratory in the year following graduation prior to attending medical school.



Working to Improve Healthcare for Nashville's Homeless

Since May 2017, MHS Senior Subhash Gutti has been working in close partnership the Neighborhood Health Downtown Clinic, an organization that provides free care to the Nashville homeless population. Subhash initially began his work with the DTC as part of a 12-week full time summer service project through the Ingram Scholarship Program, and he has continued to serve, conduct research, and shadow there ever since. During this time, his primary focuses have included medication adherence, ethnography, and the social determinants of health in the context of homelessness.

Within the clinic, Subhash has documented patients' self-identified obstacles and priorities, designed metrics to gauge medication adherence using electronic health records and pill counts, led nutrition classes, helped counsel addiction recovery groups, sponsored and distributed pillboxes, and aided in the pharmacy. Outside of the clinic, he has spent time meeting with street populations to learn their stories and connect uncared for individuals with the DTC.



Following a year of data collection, notable preliminary findings include the strong correlation between severity of homelessness and health prioritization, potential mistrust of healthcare providers in non-patient street populations, and highly variable access to prescription medication among the Nashville homeless. Subhash's goal is to impact local structures to better fit self-identified patient needs. He hopes to accomplish this using advocacy and data, and has so far presented his findings to clinic leadership and the National Healthcare for Homeless Council.



ABOVE: Subhash teaches a nutrition class in the clinic. The class was targeted towards patients living in transitional housing, who receive food stamps and have access to their own kitchen.

LEFT: Pillboxes that sponsored with project stipend. They were distributed to homeless patients who indicated on surveys that they struggled to organize their medication.

When the news cameras are gone
the truth will be told.

WHOSE STREETS?

WE WILL NOT GO QUIETLY

Community Conversations About Race and Policing

As part of the Black Cultural Center's events celebrating Black History Month in February, MHS, the Black Cultural Center, and the Commons sponsored a screening of *Whose Streets?*, a documentary by Sabaah Folayan about the community uprising after 18 year-old Michael Brown was shot and killed by police in Ferguson, Missouri, in August of 2014. The documentary screening and panel discussion afterward brought together students from Professor Celina Callahan-Kapoor's iSeminar, "Learning to Listen to America," and others from across campus to discuss the possibility of rethinking the police killing of unarmed black men as a public health concern. Panelists included Vanderbilt University Police Lieutenant LeShawn Oliver; Jonathan Metzl, MD/PhD (Director of MHS), whose current research addresses questions around guns and mental health in the community and in hospitals; and Sam Edwards, a Vanderbilt senior and incoming MHS graduate student with an interest in police surveillance of people of color as a public health issue.



Police Lieutenant LeShawn Oliver and Sam Edwards, a Vanderbilt senior and incoming MHS graduate student



MHS Professor Celina Callahan-Kapoor

Gun Violence Prevention: A Community Conversation

Firearms have become increasingly prevalent in daily life over the past decade, and numerous states are examining regulations governing many aspects of gun sales, purchases, and public carry privileges. This expansion of gun ownership raises a number of questions that an expert panel of academic researchers, medical professionals, lawmakers, and activists addressed in a well-attended panel discussion hosted by MHS, and held in the Vanderbilt Medical School on Feb. 14, 2018. Framing questions included: How can we balance gun rights with public safety? What are

the current states of firearm legislation, research and activism in Tennessee? What might political compromise look like? And, what is the responsibility of an institution such as Vanderbilt to address gun violence prevention? “It’s evident in our society that there are many issues surrounding guns that are divisive,” Dr. Jonathan Metzl, Vanderbilt psychiatrist, sociologist, and Director of the Center for Medicine, Health, and Society told the audience to open the panel. “But we hope to address these issues based on academics, research, and expertise in a way that might help move the debate forward.”



Jonathan Metzl



Below: Panelists Molly Pahn, Lee Harris, Beth Roth, and Stephan Heckers



Senior Maggie McAlexander

The panel discussion was sponsored by the Vanderbilt Center for Medicine, Health, and Society, the Vanderbilt Program in American Studies, and the dean’s offices for the College of Arts and Science and the School of Medicine.



Graduate student Lauren Taylor



Leading questions: Ken MacLeish



Panelists included:

Jonathan Metzl, Director, Center for Medicine, Health, and Society; expert on mental health and gun violence; and author of *Mental Illness, Mass Shootings, and the Politics of American Firearms*.



Stephan Heckers, Chair, Vanderbilt Department of Psychiatry, who addressed firearms and mental health.



Beth Roth, Director, Safe Tennessee, who addressed community activism in red states.

Lee Harris, Tennessee state senator, 29th District, who addressed the state of legislation.

Molly Pahn, Boston University, Public Health, who addressed firearms research.

Purnima Unni, Vanderbilt University Medical Center, Pediatric Surgery, who addressed trauma and injury.





Lessons from the Front Lines of Gun Violence Prevention

By Jonathan M. Metzl and Beth Joslin Roth

The Never Again revolution is taking shape in real time. Within days of the tragedy that killed their friends and shattered their lives, students at Marjory Stoneman Douglas High School organized a grassroots movement, with well-defined policy goals and plans for a nationwide protest in March. By doing so, these students challenged long-held narratives suggesting that nothing can be done to prevent gun violence because the corporate gun lobby is just too powerful to allow change, or that Americans are hopelessly deadlocked around firearm policy. We've been at the front line of these issues for some time. After the horrific mass shooting at Sandy Hook in 2012, we created an organization called Safe Tennessee with a centrist coalition of academics, activists, and concerned citizens, including many gun owners who felt that the NRA no longer spoke for their interests.

From the heart of a pro-gun red state, we've organized around key gun violence prevention strategies, with the goal of reducing near-epidemic rates of gun injury and death in our region. We've experienced some success, such as raising awareness of the importance of safe storage. We've also had setbacks, like an NRA lobbyist swooping in at the last moment to upend a bill we helped craft with bipartisan support that aimed to reduce gun death in children. We

feel tremendous admiration for the ways that the Florida students are turning tragedy into action. In support, we want to share several key lessons we've learned while working in violence prevention politics, hoping they might be useful going forward:

❑ **Take time to become experts** by studying research on gun violence and gun violence prevention. Pro-gun politicians frequently dismiss opinions they don't like by claiming that supporters are "uninformed," having "knee-jerk responses," or being "emotional" – claims that will be levied with ever greater force against youthful survivors. Counter that with factual knowledge of the issues. Stay abreast of research in important journals like the *American Journal of Public Health*, track trends through up-to-date resources such as *GVpedia*, and follow popular opinion through reputed polling agencies such as the Pew Research Center. From these sources you can develop well-informed talking points supported by real data.

❑ **Reach out to the gun owners and work with them.** One of the main messages conveyed by the NRA is that the slightest act of compromise anywhere represents an affront to gun rights everywhere. Yet despite the rhetoric, we've found that many gun owners don't actually feel that way. Many gun owners in this country are responsible

and support commonsense gun law reforms. In fact, nearly 90% of American gun owners are not members of the NRA. Despite what the NRA wants you to believe, the vast majority of gun owners support measures like background checks.

❑ **Avoid the stereotype trap.** The NRA and many politicians frequently promote the notion the gun violence is a problem of them – the mentally ill, for instance, or inner-city "gang members" – rather than one of us. These propositions are based in bias and misinformation. For instance, while many mass shooters have complex psychiatric histories, there are no statistical correlations between mental illness diagnosis and shooting someone else. Meanwhile, most gun deaths result not from gang-style shootouts, but from suicides. Remain vigilant against repeating these and other stereotypes—they serve only to divide us.

❑ **Stay aware of the broad scope of gun violence.** As jarring as they are, mass shootings represent only a fraction of the gun violence facing our nation. An assault weapons ban seems urgent and should be passed—but keep in mind that handguns are responsible for the vast majority of U.S. gun injury and death.

❑ **Have a defined set of goals** of what you want to see done at Federal and state levels and don't settle for weak compromises or policies that have already been addressed. Strengthening the existing background check system and addressing its deficiencies is important, for instance, but is hardly an adequate response to the problem at hand.

❑ **To get the attention of politicians: vote!** And register everyone you know to vote! This is the only way to bring about change. Even though emotional arguments carry tremendous resonance, politicians pay far more attention to mobilized voters and voting blocks.

❑ **Refute the notion that one specific policy would have stopped any one particular shooting.** For instance, after Sandy Hook, gun advocates frequently repeated the mantra that background checks "would not have prevented Newtown," and that therefore gun control itself

was a fool's errand. In reality, gun crime is highly variable, and so should be attempts to stop it. Communities that do so the best enact multiple common-sense laws and policies, and then see reduced rates of gun-related injury and death, even if shootings still occur.

❑ **Be prepared for the needle to move slowly on certain issues.** The modern-day gun violence prevention movement is taking shape now, but, remember that the NRA has a nearly 150-year history promoting gun ownership, and spent much of the past four decades building political networks and honing bumper-sticker slogans.

❑ **And finally, ask for help.** This is not going to be an easy fight, but don't get discouraged. There's nothing the old guard of gun violence prevention advocates would like more than to pass the baton onto the next generation of fearless activists. They are in awe of you. Reach out to them whenever you need backup or support.



Jonathan Metzl



Beth Roth

Building Healthy Cities

by Aimi Hamraie

My research investigates disability, design, and the built environment. For the past year, I have been involved with three major research projects. First, I completed and published *Building Access: Universal Design and the Politics of Disability* (University of Minnesota Press). This book, which is the first critical history of accessible design for disabled people in the United States, draws on nearly a decade of research, interviews, and rare archival documents to document changes in architecture and product design led by disabled architects and designers. I was honored to receive a competitive grant from the Graham Foundation for Advanced Studies in the Fine Arts to support the book's production.

I am currently at work on my second book, *Enlivened City*, which expands my research on accessibility and design to the urban built environment, where cities are increasingly turning to the promotion of health and livability to improve the quality of life for citizens. For the last year, I have been conducting historical and ethnographic research on the global "healthy cities" movement, which encompasses efforts to enhance urban livability through greenways, community gardens, and environmental sustainability. While I have studied this phenomenon throughout North America and Europe, my primary focus is Nashville, TN, a city that is using healthy cities design

to approach the challenges of its explosive rates of population growth. I have been investigating past and present approaches to address population health through the built environment. An article toward this project will appear in the journal *Built Environment* this year.

Finally, my third project, the Critical Design Lab, offers collaborative research and design opportunities for graduate and undergraduate students interested in disability and design. This year's lab, which includes eight members, is working on projects that include a design podcast, accessibility mapping, disability art and music, participatory design, museum accessibility, menstrual health, disaster politics, and social gerontology. This fall, members of the lab will present this work at the American Studies Association and National Women's Studies Association annual meetings.





Students Engage TN Legislators on Key Policy Issues

by Jenna Davis

Visiting the Tennessee State Capitol with the University Course The Nation's Health: From Policy to Practice, taught by Professor's Gilbert Gonzales (Health Policy) and Tara McKay (MHS), started to correct my pessimism about government's role in health. Raised by Democratic parents in rural Tennessee, I have never really approved of my state legislature. Instead, I developed mild feelings of contempt for most of my legislators, and on the whole felt pretty disenfranchised in Tennessean politics. So far, in learning about the role of interest groups in shaping health policy, I assumed they only served to inject special interests backed by powerful funding channels. While it would have been difficult to distinguish the people I passed in the hallways as lobbyists from ordinary citizens, it struck me that much of the legislature introduced and passed seemed to be generated by and tweaked by the actual legislators who review hundreds of pieces of legislation per year.

Our first meeting of the day was with Speaker Beth Harwell, Republican Speaker of the House, who is currently running for governor. She highly promoted Gov. Haslam's plan for tackling the opioid crisis, and emphasized that "we can't incarcerate our way out of this." The governor's plan, she said, would set aside resources for mental health care. Later in the day, however, I met with John Ray Clemmons, a Democratic state representative, who criticized the plan for its shallow reach. Additionally, he claimed that one-third of the funding set aside for

the crisis was allocated for corrections—perhaps that is what Speaker Harwell meant when she said that 80% of inmates have mental health problems and that more funding would be spent on mental health. It was interesting to see how each party mounted their arguments, and was an excellent preparation for later in the day, when each of us had to present our policy briefs to legislators.

After meeting with Speaker Harwell, we met with Rep. Rick Staples, a Democrat from Memphis. The most surprising and invigorating thing about meeting with Rep. Staples was his enduring optimism and upbeat attitude. Despite being one of just a few Democrats on the Hill, his positivity about the work he does and the legislation he has been able to sponsor was certainly interesting to me, a self-described pessimist. His success might have been because he seemed to intentionally choose non-partisan topics to sponsor; currently, he is working to write a bill to monitor lead levels in school water. When our questions moved to gun control, he seemed to have fewer ideas about how to work across the aisle, though he still seemed strangely optimistic, despite telling us that every gun bill introduced seemed to expand the areas to which Tennesseans can carry guns. He admitted, perhaps with a tinge of relief that this did not happen to him, that he had witnessed NRA representatives threaten his Republican counterparts when they were not sufficiently supportive of NRA interests.

Previous: students with Speaker Harwell
Below: UNIV 3325/5325 students with Court of Appeals Judge Andy Bennett



Next, we met with Rep. John Ray Clemmons. While he was certainly less of an optimist than Rep. Staples, he seemed more pragmatic and centrist as well. In addition to discussing the governor's plan, he also described the recent change in his counterparts' views about addiction. He said that in the past three years, more and more have begun to see addiction as an illness rather than a moral failing. He also acknowledged that the crisis was hitting hardest far away from his district in Nashville, in lower-served areas. While his tiny district is home to three hospitals, he works with representatives of districts that don't have a single hospital over 4 counties. This, he said, was one of the biggest faults in the Governor's plan; it allocated resources to emergency rooms without acknowledging that there were no emergency rooms near the opioid "hotspots." When discussing his own work, Rep. Clemmons said his bill on mental health parity was adopted, rewritten, and sponsored by Republicans. He didn't seem too disappointed that his bill was overlooked, but instead was happy that the policy would be passed, even without his name attached.

Afterwards, we met with Rep. Sabi Kumar, a Republican who sits on the House Health Committee. We dove in by discussing gun control. Rep. Kumar was very proud to discuss an upcoming bill that will eliminate sales tax on gun safes. We were familiar with this bill, as it was discussed by its sponsor, Sen. Harris, at the Vanderbilt gun violence panel on Feb. 14th. While he got into a heated discussion with one student who pushed him on the causes of gun violence, he seemed to try to win us back as an audience by speaking about Medicaid. Medicaid expansion, he said, was inevitable in Tennessee—Rep. Clemmons had also iterated this, though he seemed to think it was a long way off. I pressed him on Medicaid work requirements, an issue that I had researched and on which I had prepared a policy brief, and was surprised at how open he was to dialogue on issues I had with the requirement. Though my politics diverge from Rep. Kumar's, I was happy to see how my comments made him consider the problem more carefully.

I left the State Capitol uncharacteristically optimistic. There were legislators of both parties, working and doing their best for our state. While the most partisan issues were those that made me so pessimistic about government in Tennessee, most of the bills discussed and proposed were actually fairly nonpartisan. Mental health parity? Lead levels in schools? Child safety? Everyone could find a way to support those. The graduate students in the class were actually able to find additional sponsors for the bill they targeted with their prepared policy brief on child sexual abuse education, which ultimately passed in both the House and the Senate in March. The dreariness of being a Democrat in Tennessee aside, I left feeling optimistic about the state of Tennessee, and that the legislature was competent and able to listen, even across the aisle.



With Rep. Ramsey



With Rep. Jernigan



With Rep. Staples



With Rep. Clemmons



With Rep. Jones

Working to Prevent Suicide Deaths in Tennessee

It was shocking to see the difference between the Tennessee legislature and the legislature of my home state of Michigan. Our visit to the State Legislature demonstrated that states have very different levels of professionalism, representation of interests, and policy goals in their legislatures. While it was rewarding to be able to engage several legislators on the proposed Suicide Mortality Review and Prevention Bill of 2018 (HB1961/ SB1949), it was equally discouraging to see the strength of interest groups and of partisan politics in the state of Tennessee. Given that there was already quite a bit of support for the Suicide Mortality Review and Prevention Bill with the legislators that we met with, the opportunity came up several times to ask about whether Tennessee was working toward increasing the budget for mental health. According to the evidence that we presented in our policy brief on the bill, such as, Tennessee ranking 21st in the country for mental health expenditures, we were able to move the conversation one step further to talk about the State spending more on mental health. While most of the legislators supported our bill, which would put in place a team to review suicide cases in Tennessee in order to inform new policy that would curb these mortalities, support for increasing mental health expenditures was lacking. The response that we heard the most was talk of the state not having the money to spend more on mental health care. If our bill does get passed and signed by the governor, as we hope it does, I worry that due to fiscal reasons Tennessee will not be able to take the appropriate steps to address the structural causes of suicide and the systemic lapses in response to them.

- **Kyle Gavulic, Sophomore, MHS and French major, Political Science minor**

Coming to Appreciate State Politics and Policy in the Search for Better Health Care

I have never enjoyed politics. The concepts of Republicans and Democrats, the Left and the Right, political decision-making, and congressional committees were just some of the topics that I was never truly interested in. That all started to change once I began to understand the discourse that was necessary in creating continuous health policies. Why would suffering people not receive the care they needed? How did medical funding increase or decrease through the implementation of specific bills? What could be done to improve the health of all Americans, if anything could be done at all? This course, *The Nation's Health: From Policy to Practice*, and our trip to the Tennessee State Capital in February, demonstrated just how critical politicians are in the creation of viable health solutions for citizens affected by the opioid crisis, mental health issues, and lack of access to insurance. Unfortunately, meeting with some legislators also served to highlight the constant cross-talk, misinformation, and re-election pandering that delays and detracts from real improvements in health care across the state.

- **Dan Hecht, Senior, MHS major, Chemistry minor**

UNIV 3325/5325 students in front of the State Capitol building



Politics of Health Encyclopedia

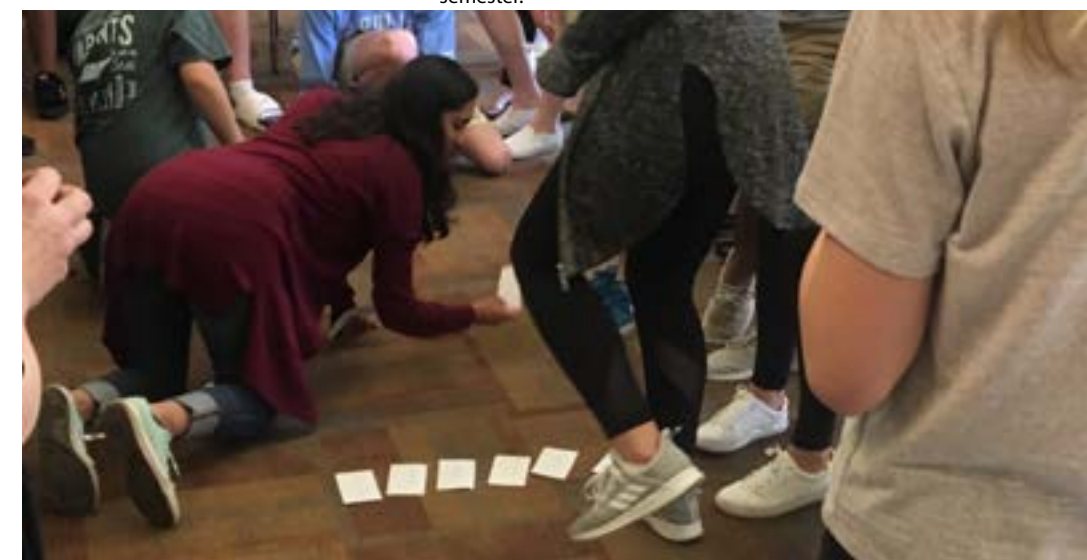
As part of her Politics of Health course, Professor Celina Callahan-Kapoor has students create and contribute to a living encyclopedia online. In the class, students learn and discuss the concepts and theories that define "health," how health can be measured, and the role of the nation in relation to health. During the course, students spend around three weeks researching their topics and compile their findings in the form of an encyclopedia entry. This encyclopedia consists of more than 150 concepts from class readings as well as student-chosen topics of interest; topics range from "Pharmaceuticalization" to "Mental Illness in Minority Populations" to "Gene Therapy."

After several semesters, the encyclopedia now serves as a point of reference for all Politics of Health students—as one entry mentions another topic, it is automatically hyperlinked for the reader's convenience.

As this encyclopedia grows, the entries will continue to diversify; and though there is a wide range of topics, they are all related through the politics of health and its re-occurring themes. Entries extend beyond these themes arising from classroom discussion, which highlights how large the scope of the "politics of health" is and how applicable the ideas presented in the classroom are to the real world. The word politics can seem very boxed in and stigmatic, however, this encyclopedia evidences how many different facets there are to this topic.

You can find out more, and browse the *Politics of Health Encyclopedia* yourself, at <https://my.vanderbilt.edu/politicsofhealth1/what-is-the-encyclopedia/>.

Learning pile sort/content analysis by organizing index cards that they filled out with the top two concepts and the top three facts they learned over the semester.





"Maputo Cityscape" Photo by Tara McKay

LGBT Rights and Health on the African Continent by Tara McKay

During the 1990s and 2000s, homosexuality and LGBT rights became highly politicized in some African countries. A lot of my research has focused on why this has happened and the consequences of increased politicized homophobia and violence for LGBT activists on the continent. For the last 10 years, I've been working in Malawi where, beginning in the mid 2000s, same-sex sexualities were starting to be identified as a population in need of targeted HIV prevention and treatment. But in late December 2009, two Malawians, Steven Monjeza and Tiwonge Chimbalanga, were arrested and convicted for sodomy, bringing same-sex sexualities to the forefront of international debates about whether gay rights were human rights and renewing Malawians' concerns about their moral and political sovereignty from the West.

In the past few years, my collaborators at American University and I have started interviewing activists, representatives from donor organizations, and in-country government officials from other countries that have experienced increases in hostility towards LGBT populations like Nigeria and Senegal. In all three countries, health is conceived as a right for all citizens, and we've observed that LGBT activists and organization often use HIV and health as a way to institutionalize concern for their communities within government bodies like the

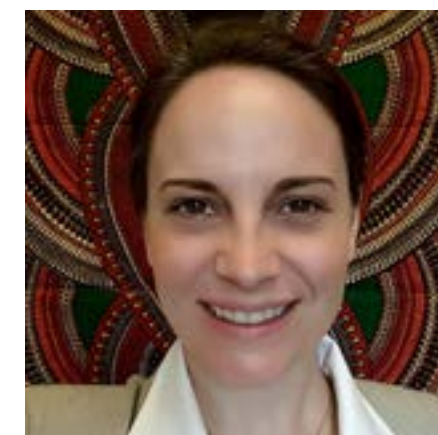
Ministry of Health. Donors also use HIV as a way to interface with LGBT organizations in countries where same-sex sex is criminalized, as it is in Malawi, Nigeria, and Senegal, in order to avoid confrontations with local governments. This focus on rights to health for all people, including LGBT people, provides opportunities for organizations and governments to engage with LGBT communities in criminalized contexts, but it is not without its constraints. For LGBT organizations, the focus on HIV diverts attention away from critical social justice work around LGBT peoples' rights, safety, and livelihoods. Additionally, donor funding for HIV and health can create tensions with local populations and governments that see LGBT organizations as representing Western interests.

Last summer, I received funding through Vanderbilt's Research Scholar Grant mechanism to expand my work to consider how LGBT organizing might be different in an African country where same-sex sex was recently decriminalized. Mozambique is one such country. In contrast to neighboring countries, Mozambique has decriminalized same-sex sex and expanded protections on the basis of sexual orientation in some sectors.

In July 2017, I traveled with José Cossa, Senior

Lecturer in Peabody's International and Comparative Education Program, to Mozambique to interview LGBT activists, local HIV researchers, donors working with LGBT populations, and Mozambican government officials. In two weeks, we conducted 14 interviews. Some days, we barely had time for a snack while shuttling across Maputo to the next meeting. In these interviews, we learned about how the primary LGBT organization in Mozambique, Lambda, conducts its advocacy and education work. We also talked about their priorities, strategies, and plans for the future. As the only LGBT organization in the country, Lambda has often had to act strategically and operate somewhat under the radar to fulfill their obligations to the local community. And despite working in a context where same-sex sex has been decriminalized, Lambda has for the last decade been blocked from officially registering with the government. Formal registration of a nongovernment organization (NGO) is needed to

be eligible for national and international grants and funds and has other implications for opening a bank account, paying staff, and filing taxes. Lambda's long-term inability to formally register as an NGO suggests a more nuanced trajectory of LGBT rights advances in Mozambique, where decriminalization is a major obstacle but just the first of many.



MHS professor, Tara McKay

Write, Edit, Read, Repeat by Odie Lindsey

This year, I welcomed the publication of *The Mississippi Encyclopedia* (University Press of Mississippi, 2017), for which I served as Associate Editor. Following the book's induction into the Library of Congress in Washington, D.C., I joined the volume co-editors at book release events held across Mississippi. The 10+ year project compiles scholarly work from nearly 700 scholars, covering 1,600 topics across 30 subject areas. Among other accolades, the encyclopedia has won awards from the Mississippi Institute of Arts and Letters and the Mississippi Historical Society, and was among the select books of 2017 chosen by Smithsonian Institution scholars for *Smithsonian Magazine*.

I also continued to travel in support of my recent short story collection, *We Come to Our Senses*, while finalizing edits on a forthcoming novel. (Both books are published by W.W. Norton.) I was a National Endowment of the Arts-sponsored fellow at the Virginia Center for the Creative Arts, and gave readings or panel talks in Chapel Hill, Durham, Austin, Atlanta, Little Rock, and elsewhere, and at book festivals such as the Southern Festival of Books, Mississippi Book Festival, and the Kentucky Book Fair. Of note was my interaction with songwriter Mary Gauthier, whose latest album was co-written with combat veterans and/or their caregivers. (I'm a combat veteran whose writing and teaching often deal with war or postwar issues, likewise gender, sexuality, and southern

cultural identity.) Alongside joint public appearances with Gauthier, I published an essay about her work with the *Oxford American*. Finally, my new short story, "Panoleah," appeared in the journal *War, Literature & the Arts*, and I have started research in advance of a new novel.



MHS professor Odie Lindsey meets with Civil Rights-era leader Dorie Ladner at the Library of Congress, Washington, D.C.



Health Consequences of Social Networks

by Lijun Song

Time flies. My research journey continues. Health consequences of social networks (i.e., informal structures of social relationships linking actors) remain as one of my major research themes. As a medical sociologist, I am interested in how various structural properties of social networks can affect—positively or negatively, directly or indirectly—one's health and well-being across space and time. To briefly summarize my relevant work in the past year, I had three manuscripts published or accepted for publication and gave six research talks.

As the lead author, I published one article (co-authored with two graduate students) in a peer-reviewed scholarly journal, *Sociological Perspectives*. My co-authors and I were honored that our article was featured as the Editor's Pick. As introduced in last year's MHS newsletter, our study finds that network members' socioeconomic status (SES) interplays with SES, lifestyle, and gender to exert three nondirect effects on body weight ratings: indirect, mediating, and moderating effects. I recently accepted the invitation from SAGE to participate in a podcast to be featured on the *Sociological Perspectives* website. I'm thrilled about recording my very first podcast soon.

As the first author, I also contributed one invited book chapter (co-authored with two graduate students), which was accepted for publication in *Handbook of Social Capital and Health*, published by Edward Elgar. This chapter systematically introduces the major theoretical approaches to social capital, critically reviews the theoretical extension and empirical application of those approaches to health, and concludes with a discussion of issues and future research directions. This chapter will serve as guides for health scholars interested in social capital theory.

Apart from my sociological research, interdisciplinary collaboration has been recently added to my research agenda. As the second author, I co-authored a referred conference publication with one graduate student and one professor in biomedical informatics. Focusing on relationships established in an online breast cancer discussion board, our study demonstrates that the volume of the reciprocity (i.e., reciprocal responses to forum posts) is positively associated with completing a five-year hormonal therapy.

Sharing research is always exciting and rewarding. I gave six talks on my ongoing research projects last year at domestic and international conferences, and colloquiums at other universities. Social capital is one of the major network-based theoretical tools in my research. Therefore, I was especially honored to give an invited presentation at the social capital and health symposium at the 50th Annual Meeting of Society for Epidemiologic Research. Before, during, and after the symposium, I got opportunities to exchange research ideas with other well-known social capital scholars who came from different countries.



Medical Law and Human Experiments

by Laura Stark

Changes in people's political sensibilities often lead to changes in medical law. But the relationship works the other way around, too. Changes in law can alter how people think of themselves and understand their experiences in medicine. My research looks at research on human bodies—from the legal apparatuses put in place, like ethics review boards, that uphold practices that might have seemed unethical only a few decades ago, to the deeply personal desires of people to participate in medical research, whether to give back to science, help family members, or earn some money.

I am finishing a book, called *The Normals: A People's History of Medical Experiment*, that looks at how a practice that had been considered both legally questionable and morally prohibited—namely the exchange of money for healthy civilian bodies to research—emerged in the decades after World War II. To be sure, people with limited political rights have long, and often tragically, been subjects of medical experiments: prisoners, soldiers, children, and minorities, for example. Yet during the same time that U.S. legal protections were put in place to protect people in medical experiments, the scale and everyday acceptability of paying healthy civilians to serve in experiments grew throughout the world. For the book, I researched former healthy human subjects of medical experiments at the U.S. National Institutes of Health

and created a “vernacular archive” of more than 100 former “normal control” research subjects and scientists who researched them at NIH from the 1950s to the present day. The vernacular archive is now being built at the Countway Library for the History of Medicine at Harvard University Medical School, through a unique collaboration with Vanderbilt University that I supervised.

As I have been writing the book for a broad audience, I have also been publishing scholarly articles to document and theorize for the academic community how medical law shapes—and is shaped by—people's experiences of medicine. In August, one of my articles, co-authored with Nancy Campbell at RPI, won the American Sociological Association's 2017 Star-Nelkin Prize for Best Article from the section on Science, Knowledge, and Technology. The prize was awarded at the ASA annual meeting in Montreal by the current section chair, Alondra Nelson, Dean of Social Science at Columbia University. The article was lauded because it documents the origins of a legal market for healthy bodies for medical experiments that today underwrites a multimillion-dollar research industry. It was also recognized for theorizing how the self-understanding of “human subjects” themselves changed in 1974, when the U.S. government first put in place regulations to protect research participants.

Photo by Daniel Morrison



The Tennessee Men's Health Report Card

by [Derek Griffith](#)



In June of 2017, the Center for Research on Men's Health launched the latest version of the *Tennessee Men's Health Report Card* (<https://www.vanderbilt.edu/crmh/tmhrc/index.php>), and the improvements in men's health we described made national news. Tennessee is the only state in the U.S. that has a systematic or coordinated strategy for monitoring men's health or assessing men's health disparities. Vanderbilt University, the Tennessee Department of Health, Meharry Medical College, Vanderbilt University Medical Center, Tennessee Men's Health Network, health providers, and advocates across the state have come together to publish a set of indicators as the *Tennessee Men's Health Report Card*. The report card highlights statistically significant changes in trends over time, quantifies racial, ethnic, age, and geographic disparities among men, highlights connections to regional and statewide public health initiatives, and suggests priorities for improving men's health in Tennessee. State data points were compared to Healthy People 2020 Objectives, and graded based on the degree of discrepancy between the goal and the current reality for Tennessee men. The 2017 report card was primarily comprised of infographics to facilitate a broader range of stakeholders (e.g., men,

women, educators, advocates, and policy makers) to access and digest this information. This version of the report card also was launched at regional events across the state to highlight the need and to create the opportunity for local stakeholders to discuss what the face of men's health looked like in their area. The report card team also produced an educational video to augment the report card (<https://spaces.hightail.com/space/Bm8P0WhpDj>). *The Tennessee Men's Health Report Card* has been recognized as a useful model that other states, and the nation, could use to characterize, monitor, and address the health needs of men. For example, these tools were featured at the American Cancer Society Cancer Action Network, Inc. Annual Policy meeting in November 2017 at St. Thomas Midtown Hospital in Nashville, TN. During this event, the American Cancer Society TN Government Relations Director distributed excerpts from the report card on cancer and where and how to intervene to improve men's health, and showed the promotional video of our American Cancer Society funded project, *Mighty Men: A Faith-Based Weight Loss Intervention to Reduce Cancer Disparities* (<https://www.vanderbilt.edu/crmh/ACS.php>).

Research by Marino Bruce featured in USA Today, The Today Show, and Time Magazine



The past year has been a productive one for Marino Bruce, Research Associate Professor of MHS and Associate Director of the Center for Research on Men's Health. With his colleagues, Bruce published 11 peer-reviewed manuscripts, and submitted 6 grant applications to NIH! The majority of his research focuses on health outcomes among African Americans with an emphasis on sex and gender disparities. He also studies community engagement and population health and has begun new projects examining the relationship between faith and health. "The response to this work," Bruce reflects, "has been simply amazing." This past year, Bruce was lead author on a study titled, "Church Attendance, Allostatic Load, and Mortality." The study was published in *PLOS One* and has already been viewed over 75,000 times since its publication in May 2017. This study has also been featured on over 130 global outlets including *USA Today*, *The Today Show*, and *Time* magazine. It has been a great year for Professor Bruce, and we look forward to him being even more productive over the next 12 months.

Expanding the Reach of MHS in the Humanities

Dr. Joy Ramirez came to MHS in the fall of 2017 from the Robert Penn Warren Center for the Humanities. Prior to that, she was a Lecturer in Vanderbilt's French and Italian Department where she taught the Diva in Italian Literature and Film, Introduction to Italian Cinema, and Italian Language and Culture. She received her MA in Romance Languages from the University of Oregon and her PhD in Comparative Literature from the University of Colorado at Boulder. She taught at Colorado College and the University of Colorado before coming to Vanderbilt. She has published articles on Italian silent cinema, 19th-century visual iconography of the 'hysterical' body, and postmodern architecture of Las Vegas. She is currently working on a book dealing with the history of adoption and "the baby scoop era" –the period between 1945 and the passing of *Roe v. Wade*, when millions of women in the U.S. relinquished their children. At MHS she has taught *Women and Madness*, and *Writing in the Humanities and Social Sciences*. In her class on writing, her students are working on poetry, memoir, and personal essays, as well as engaging in non-traditional genres such as experimental journalism, graphic medicine, and health blogging. She plans to do research this summer and attend a writing workshop in Portland, Oregon.



Graduate Student Research

Henning Ander

Henning is in his first year of the two-year MA program in MHS. Prior to Vanderbilt, he received his BA in Mathematics from Rollins College, where he conducted research in mathematical epidemiology by modeling the spread of alcoholism. He also aided in biological research on the NAMPT enzyme and muscle recovery.


For his Master's thesis, Henning is interested in the view of mental health on campus and how complementary and alternative therapies may be involved in treatment. Building on of the ideas of biological citizenship and that mental health and illness are situated, he aims to investigate on-campus narratives about mental illness. Exploring these narratives and the affect involved in mental illness might tell us a lot about the function of current psychological services on campuses, and also how social, structural, and cultural factors may be at play in mental health and illness. As an additional focus, Henning is also completing a Certificate of Global Health. Following completion of the MHS Master's Program, Henning plans to attend medical school.



Maggie Mang

During the 2017–2018 academic year, Maggie has had the immense privilege of working alongside both professors and cohort colleagues on developing, discovering, and expanding on research interests. She came into this program just as she made the switch from the natural sciences to humanities and the social sciences, and has found this space positively challenging and rewarding. As a result, this year has been vastly generative for finding and cultivating research interests she never would have thought were possible or available just a year ago.

Maggie's interests in critical disability theory and design has led her to Dr. Hamraie's Critical Design Lab, which takes the methods of critical design to address the multiplicitous relationships between the built environment, embodiment, and technology. The lab is currently working on collectively putting out blog posts and a lab podcast, *Contra**. Her individual project looks at the intersections of Crip time, disaster politics, and video manipulation. In addition, Maggie has had the immense pleasure in working with Dr. Béhague as she prepares her manuscript on the shaping of adolescence in Brazil. Though she is still working on developing her specific thesis question, Maggie is greatly concerned about issues in STS, affect theory, moral economies, and the philosophy and history of science/medicine.

Medicine, Health,
AND Society M.A. Program
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SOCIAL FOUNDATIONS OF HEALTH

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Lauren Taylor

Lauren is a Master’s candidate in MHS and works full-time as a Research Coordinator in the Pediatric Endocrinology division at the Children’s Hospital. She is interested broadly in the social determinants of mental health, politics of inclusion, and how health policy creates health inequities. For her thesis research, she is working with the Tennessee Justice Center, a nonprofit health policy advocacy group, to evaluate how lack of access to health insurance has an associated negative effect on mental health outcomes and psychological stress within Medicaid-Gap individuals of Tennessee. She has begun conducting interviews with uninsured adults across Tennessee, and plans to synthesize the data this summer and fall to hopefully use as an illustration of the effects of institutional power on individual mental health, and the negative costs of Tennessee’s legislature choosing not to expand Medicaid, resulting in thousands of citizens uninsured and underserved.

Lauren is also working on completing a Certificate in College Teaching through the Center for Teaching, to prepare her for her future goal of pursuing her PhD in Sociology and eventually becoming an professor. She has also completed 2 half marathons this semester, and is training for a full marathon in the Fall.



Elizabeth Manning

Elizabeth’s research is inspired by her experiences as a Trans Buddy, a peer advocate for transgender patients at Vanderbilt University Medical Center. She discovered that transgender people’s interactions with health care providers are complex and often fraught with decisions about how to discuss their transgender identities with their health care providers. These interactions are especially difficult for those who are non-binary transgender, which means that they do not identify solely as men or women. Elizabeth wanted to explore how non-binary transgender people interact with their health care providers in order to help both advocates and health care providers better respond to their needs.

Her study uses interviews and a focus group with both binary and non-binary transgender participants to examine how they balance the risks and rewards of coming out to their health care providers as transgender. She expects to use her data to both show how non-binary transgender people face unique challenges because they hold identities that are not coherent within clinical contexts, and to speak to larger issues of gender expectations and regulation in medicine. In the future, Elizabeth hopes her work will shape the way advocates and clinicians interact with transgender people and bring forward the voices of those who navigate the world outside gender norms.



Rebecca Rahimi

During the 2017–2018 academic year, I have had the privilege to work alongside professors and peers in cultivating my thesis research as well as the opportunity to work with Dr. Hamraie and several other innovative individuals in the Critical Design Lab. For my Master’s thesis, I have been interested in exploring the role storytelling and other broader cultural markers play on memory, nostalgia, and notions of home and identity for Iranian Revolutionary migrants and their (American-born) children. I plan for my thesis to be a novel-in-stories, wherein I will research the impact of post-memory and nostalgia dealt with by first-generation Persian-Americans, for a place and time their parents have spoken about, yet times they have not (yet) experienced.

The Critical Design Lab looks at the intersection of disability (and, at large, the exclusion of certain populations) with (industrial) design/architecture. Within the lab, I have contributed to the formation of collaborative projects, such as our blog and podcast, *Contra**, as well as my individual project. For that, I’m working on a satirical subscription service for a “Home in a Box,” a collection of items for elderly memory loss nursing home patients to create and restore senses of home, comfort, and familiarity within their sanitized medical spaces.



Ryan Dal Degan

Ryan’s team of researchers organizes and analyzes data from an AARP-funded study which aims to increase consumers consumption of fresh produce. This particular study targets SNAP recipients in Tennessee and Mississippi. Over the last 4 years, local Kroger stores and farmers’ markets were recruited as launch sites for the Fre\$h Savings Program, which allowed consumers to accrue “rewards points” on their SNAP EBT cards in the form of subsidies for purchases of fresh fruits and vegetables. The aim of the study was to incentivize and therefore increase overall consumption of fruits and vegetables in this target population. Ryan’s research questions for this project center on examining the links between farmers’ markets and F&V consumption, F&V consumption and risk factors for chronic health conditions, and other key sociological or anthropological factors, such as relative cost of food, or access to quality food through supermarkets or other food distribution sites.





Lydia Simmons

Lydia is completing her 4+1 in the MHS Master's program. Her research is focused on identity formation in biracial young adults, specifically the African American and white dynamic. She found this topic important because she feels race is a central focus of this country and has negatively affected many minority groups, even the biracial population. She also believes that much of the conversation in our society, as well as news, focuses on the African American and white races and the issues and tension that occurs between them, but rarely is any positive attention given to the biracial population. The negative light shined on minority races, specifically the African American population, has been evident in the news that we see on a daily basis. She hypothesized that the interracial young adults (African American and white) have a harder time finding themselves in a society like ours because the two races of whom they represent are very distant. Her research looks further into this idea of identity formation and how an interracial young adult comes to find their identity throughout their past childhood and as they enter adulthood.

One aim of her research is to determine how these interracial young adults come to identify with a race (black, white or biracial), how they come to accept it or reject it, and the difficulties society presses on them to identify with one. Another aim is to determine how different demographics changes one's sense of identity, how an interracial young adult is able to move fluidly within races, and how one is granted that option. Her last aim is to see when identify formation within an interracial young adult is formed, when and how it gets solidified, and/or if it is always open to being changed.



Ashley Ehlert

Ashley Ehlert's Master's thesis research is focused around military veterans' mental health journey after being diagnosed with PTSD. In her initial stages of research, she began to question what this journey actually looks like after discovering that more veterans are pursuing alternative treatments. Receiving a diagnosis for post-traumatic stress disorder is often one small step in a considerably larger and more complex mental health journey. PTSD is a pervasive disease with high rates of comorbidities, such as substance abuse and depression. With mental health being a growing issue in the U.S., and with the disproportionate number of military veterans getting diagnosed with it, it is important to address PTSD specifically within this population.

In addition to her thesis research, Ashley has been pursuing her graduate Certificate in Global Health. After working with an international medical nonprofit in undergraduate, she found a passion in international development and global health, which Vanderbilt has allowed her to pursue much more in depth. In the future she hopes to continue pursuing this passion and working towards addressing global health disparities.

Kristi Troutman

After graduating from Vanderbilt in 2017 with degrees in MHS and Spanish, Kristi has chosen to pursue a Master’s degree in MHS. Her research surrounds physicians’ perceptions of cultural competency training in medical institutions, with the ultimate hope of discovering new ways to think about, discuss, and implement medical education strategies. Cultural competency has many critiques, including both its tendency to facilitate stereotyping between physician and patient, and its exclusion of other important factors that affect health, such as structural variables. Through a qualitative case study approach comprised of interviews with physicians, she discovered a series of latent social values and stigmas attached to the concept of cultural sensitivity in medicine. Additionally, her research revealed that despite the training, or lack thereof, that may occur in a medical institution, many physicians still operate with awareness of intersectional themes and issues informed by life experiences. Ultimately, Kristi’s interest in the systematic attitudes and values embedded in medical institutions persists, and she plans to continue to explore them as she continues her education at Rutgers' Robert Wood Johnson Medical School in the fall of 2018.



Alexis Mundo

Alexis Mundo’s research is based in the realm of substance use, abuse, and addiction recovery on college campuses. He partnered with Vanderbilt University’s Collegiate Recovery Community (CRC) called Vanderbilt Recovery Support (VRS)—an extension of the Center for Student Wellbeing (CSW)—in order to gain greater knowledge about the recovery services that Vanderbilt has to offer to its students. His ultimate goal was to apply critical analysis towards augmenting and enhancing VRS, increasing outreach and participation, and improving measures of coaching efficacy, which he grounded in recovery theory and conceptual frameworks. In the 11 years since VRS’s inception, the community has grown and demonstrated improvement for students in recovery. Yet, there is always room for improving collegiate services, especially given that substance use and addiction is a widely prevalent issue on many college campuses.



Meredith Mattlin

Meredith has been completing her Master’s thesis this year on anti-science movements and the social construction of wellness and illness, which involved ethnographic research in the local community. This has been a deep dive into the social and medical dynamics of a world that was quite new to her before entering the MHS 4+1 program. Meanwhile, she has continued working with a group in a cancer research lab at Vanderbilt Medical Center on an ongoing research project concerning the epidemiological intersections of liver cancer and drug abuse. Outside of academic life, Meredith has been serving as the Station Manager at WRVU Nashville, Vanderbilt's independent radio station.

Simone Charley

This past year, Simone has been doing research on how people form social networks. In particular, her research looks to explain the evolution and processes through which one develops close ties with their peers through the lens of Erving Goffman’s dramaturgical model. After receiving an invitation to join the Portland Thorns professional women’s soccer team, Simone has been able to focus her research on team dynamics and social networks within the Portland Thorns professional women’s soccer organization. Her study will help broaden the scope of friendship development by looking at the role sports plays in social networks. Because sports bring together people of many different backgrounds, Simone’s study will help broaden relationship development research to more diverse groups of people and situations. Through observation and interviews with seasoned players, rookies, and draft picks, coupled with her firsthand experiences, she has been able to get an inside look at Goffman’s dramaturgical account of social network development.





Undergraduate Immersion Getting Involved in Research and the Nashville Community

We are thrilled to showcase the impressive work of our dedicated students who, in addition to their courses, spend time conducting research with faculty around campus and interning with community organizations.

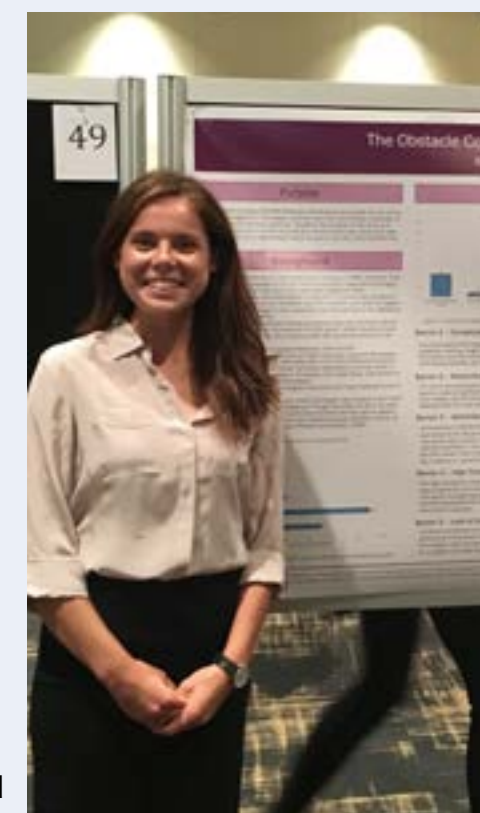


Adeline Ewing

During the Spring of 2018, Adeline Ewing ('18), has been interning at the Tennessee Justice Center as a case intern. The Tennessee Justice Center is a nonprofit that provides legal services to improve the lives of hundreds of thousands of Tennessee's most vulnerable children and families. Adeline works with low-income individuals across the state to help them get urgently needed medical care and health services when they confront obstacles that are insurmountable. She helps clients navigate the often confusing process associated with getting and keeping TennCare or Medicare insurance coverage. During the internship, Adeline noticed many clients who were greatly affected by the redetermination process for insurance coverage that began in 2015 in Tennessee. Using her experience at TJC, she is writing a research paper about the effect of this redetermination process on individuals trying to obtain insurance coverage. Adeline's internship at TJC has spurred an interest in the law, and so Adeline plans on pursuing a career in health law.

Lauryn Hardy

There are approximately 330,000 Medicare beneficiaries in Tennessee who qualify for one of five core public assistance programs. However, less than half of these individuals receive the benefits that they qualify for (Benefits Access Visualization). In order to understand the barriers to enrollment faced by Medicare-eligible Tennesseans, Lauryn Hardy conducted her own study in collaboration with the Tennessee Justice Center. She recently presented this research at the Undergraduate Research Fair. Her study identified and categorized the barriers that low-income seniors and adults with disabilities in Tennessee face when applying to at least one of the five core programs. Through a 10-question interview, this study gathered the experiences of 29 Tennesseans in this demographic. These individuals' experiences were then categorized by the barrier they reported using those identified in a previous study conducted by Chi-Fang Wu and Mary Keegan Eamon of the University of Illinois at Urbana-Champaign. However, whereas Wu and Eamon's study focused on families with children, this study focused on low-income seniors and adults with disabilities. Of the five barriers, Hardy found that administrative and technological inefficiencies were most reported by participants.





Denise Wanyana

For one month during summer 2017, Denise interned as a research assistant at Team Heart, a nonprofit medical organization focused on bringing sustainable cardiac care to Rwanda. The burden of non-communicable diseases (NCDs) is progressively affecting low-and middle-income countries such as Rwanda, where morbidity and mortality rates due to NCDs are steadily increasing. She participated in a national NCD screening research project and helped create a database registry to collect the screening results. The screenings were aimed at diagnosing patients with Rheumatic Heart Disease (RHD) in Rwanda's district hospitals and ensuring appropriate follow-up of RHD-diagnosed patients as well as post-cardiac patients. During this experience, Denise was able to interact with patients with varying knowledge and cardiac disease severity, and gained insight into the different levels of care and follow-up needed. Additionally, she observed the need to improve the capacity, knowledge, and skills of health professionals in Rwanda on how to use echocardiography ultrasound machines to diagnose RHD and other cardiac-related diseases.

After leaving Team Heart, Denise enrolled in an MHS independent study at Vanderbilt with Dr. Martha Jones, in order to further examine the data that were obtained during the screening activity. She learned a lot through the analysis and was able to gain a deeper understanding of the RHD burden in Rwanda. With proper treatment and care, RHD is completely preventable, but continues to cause significant levels of morbidity and mortality in countries with weak health systems. Thus, there is a great opportunity for strengthening Rwanda's health system to prevent death and disability from such avoidable diseases. This screening experience strengthened her desire to pursue a career in medicine and public health.

Kyle Gavulic

In January 2018, Vanderbilt's LGBT Policy Lab funded a grant proposal for sophomore student, Kyle Gavulic, who will spend Summer 2018 researching the impact of the shooting at Orlando's Pulse nightclub, which caters to LGBT individuals, on mental health outcomes in sexual minorities. Gavulic will be conducting this research under the supervision of Gilbert Gonzales, Assistant Professor in the Department of Health Policy at the Vanderbilt University School of Medicine. On a broader scale, Gavulic will use the National Health Interview Survey to look at how "minority stress" can negatively shape the mental health and health-related behaviors of LGBT individuals. "The impact of traumatic community-wide events on mental health in LGBT populations has seldom been researched," Gavulic explained, "which is why this study is crucial to better inform physicians and policymakers on how to address the health needs of LGBT individuals whose mental health often suffers from the adversity that they face. It is our hope that by identifying the mental health consequences of traumatic events and hate crimes for lesbian, gay, bisexual, and transgender people, we can influence policies that will mitigate psychological distress in LGBT populations."



Katherine Gelfand

As an MHS major, Katherine Gelfand ('19), has developed a passion for improving health outcomes through work in the nonprofit sector. During Spring 2018, she has been interning at the Governor's Foundation for Health and Wellness which works to improve the health of Tennessee residents by promoting healthy eating, physical exercise, and smoking cessation. As an intern, Gelfand has researched and crafted communication materials outlining public health statistics in Tennessee. She has also been involved in the application review process of many communities within the state that are applying for recognition as a "Healthier Tennessee" neighborhood because of their

dedication to improving the wellbeing of their residents. She has had the privilege of working with people who are passionate about this cause and seeing their hard work come to fruition. During summer 2018, Gelfand will continue her work in the nonprofit sector by interning at Unite for Sight in New Haven, CT. There, she will work to further their mission of improving global health delivery by performing data analysis on their partner eye clinics in countries around the world. She will also have the opportunity to create a Global Health University course relating to her Senior MHS Honors thesis on the impacts of global health funding on national health systems.

Minta Ray

A native of East Tennessee, graduating senior Araminta (Minta) Ray knew that she wanted to address a hometown issue with her undergraduate Honors thesis in MHS: Neonatal Abstinence Syndrome (NAS), or infant withdrawal due to maternal opioid abuse. While the opioid crisis has an especially tight grip on Tennessee, NAS rates across the state also soar above the national average. Minta decided to enter the conversation by writing a literature review with a critical twist—looking beyond data to examine the complex social relationships that shape the epidemic in Tennessee. Pulling together personal experience, current literature, and the nuanced understanding of the social foundations of health that she has gained while majoring in MHS, Minta hopes her thesis will serve as a valuable contribution to the conversation about opiates in Tennessee and beyond.

Next year, Minta is headed to The Ohio State University for medical school as she continues to pursue her dream of practicing medicine alongside the rural underserved. She will always be thankful for the community health perspective that she has gained as an MHS student at Vanderbilt.





Hoor Temuri

Hoor Temuri, a junior studying MHS and Spanish, is passionate about disease prevention in community health-based programs, particularly exploring health disparities focusing on Latina and African American women. In the past, her research on public health issues among minorities such as suicide prevention in LGBTQ youth, breast cancer disparity among African American women, as well as a case report on breast cancer, furthered her interest in health disparities while also instigating her to explore the fundamental biology behind disease prevention.

Currently, Temuri works in the Gama Lab, specializing in cell and developmental biology. The lab’s research focuses on apoptotic proteins in stem cells which is crucial in better understanding cancer biology. To visualize the bench to bedside stem cell research, Hoor shadows Dr. Goodman, a professor and hematologist in the stem cell transplant clinic which specializes in amyloidosis. Additionally, Hoor’s interest in combining public health and medicine was put into practice during the Vanderbilt Global Health Case competition, which looked at effective health care delivery in the Guyanese hinterland region. Her team’s innovative proposal emphasizing sustainability and community health won Second Place.

Isabel Taylor

For her independent study with Dr. Martha Jones during the Spring 2018 semester, MHS student Isabel Taylor has studied healthcare access for people with disabilities in the United States. Because those with disabilities often report poorer health outcomes than those without disabilities, access to healthcare through health insurance coverage is especially important for individuals with disabilities. In her research, Taylor used 2016 American Community Survey microdata to explore health insurance coverage rates for individuals with and without disabilities in order to demonstrate an association between disability status and health insurance type. She also investigated other variables that influence health status and health insurance coverage for individuals with and without disabilities, including age, sex, poverty status, and race. It was found that individuals with disabilities face higher rates of public health insurance use, lower rates of private health insurance use, and lower rates of uninsurance than those without disabilities.



Maggie Bergmann

As a part of a seminar on Gender & Violence, Maggie Bergmann has been serving as a volunteer at The Next Door, a local nonprofit organization. The Next Door provides a “continuum of evidence-based services for women and their families impacted by addiction, mental illness, trauma, and incarceration.” By providing a safe space exclusively for women, this organization does important work in our community. As a volunteer, Maggie primarily assists with childcare, providing mothers with support so they are able to attend group therapy sessions, take rehabilitative classes, and continue on their paths to recovery. Bergman is passionate about health equity, especially as it relates to incarcerated populations and those affected by addiction, so The Next Door is part of an important initiative. The organization addresses issues of addiction, trauma, and criminal justice involvement through a lens of public health—an approach with proven benefit for the individuals it serves. Not only does The Next Door’s mission align with Maggie’s interest to contribute to solutions, but the organization has an inspiring commitment to providing women who have been affected by harsh circumstances with support and treatment.



Summer Brown

A student-athlete on the Women’s Swim Team at Vanderbilt, Summer Brown will graduate with a double major in Medicine, Health, and Society (MHS), and English with a minor in Chemistry. Alongside competing in the swimming SEC Championships, she was an undergraduate researcher in Dr. Michael Stone’s lab at Vanderbilt during her sophomore and junior year. In Dr. Stone’s lab, she had the pleasure to study the carcinogen found in diesel exhaust: 3-Nitrobenzanthrone. She has also been exposed to a variety of lab research techniques, including but not limited to X-ray crystallography, nuclear magnetic resonance (NMR), gel electrophoresis, and high-performance liquid chromatography (HPLC).

This year, Summer began working for Dr. David Charles as part of his Telehealth Education Group, in Vanderbilt’s Medical Center. Her job entails researching telehealth and its effectiveness for patients regarding access to care, as well as managing and organizing Dr. Charles’ telehealth residency course.



Following graduation, Brown will enroll in the MHS 4+1 MA program here at Vanderbilt. Her research in the program will focus on analyzing and critiquing literature that effectively and efficiently communicates health information, diagnosis, and treatment plans between a doctor and patient.

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Metzl J.M., Petty, J. (2017, March). Integrating Structural Competency into an Innovative Pre-Health Curriculum at Vanderbilt University. *Academic Medicine* 92(3):354-359.

Moses, K.A., Heslop, D., **Griffith, D.M.**, Holmes, A., Sherden, L., Wilkins, C.H. & Wallston, K.A. (2017). Development and Initial Testing of the FLOW: Instrument, a Novel Instrument to Assess Lower Urinary Tract Symptoms in Men. *Journal of Urology*, 198(3), 657-662.

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Wyatt, G. E., Davhana-Maselesele, M., Chang, M., Wong, L., Nicholson, F., Der Sarkissian, A., Makhado, L., & **Myers, H.F.** The Longitudinal Study of the Aftermath of Rape among Rural South African Women. *Psychological Trauma: Theory, Research, Practice, and Policy*, 2017. <https://www.ncbi.nlm.nih.gov/pubmed/28459272>

Yin, Z., **Song, L.**, and Malin, B.A. Reciprocity and Its Association with Treatment Adherence in an Online Breast Cancer Forum. The 30th IEEE (Institute of Electrical and Electronics Engineers) International Symposium on Computer-Based Medical Systems (IEEE CBMS), Thessaloniki, Greece. June 2017.

PRESENTATIONS

Angotti, N., **McKay, T.**, & Robinson, R.S. (August, 2017) HIV Interventions, LGBT Visibility, and Anti-Gay Backlash in Malawi and Senegal. Paper presented at the American Sociological Association, Montreal, Canada.

Béhague, D.P. (2018, April) 'Adolescent' Sex and Psyche: The Politics of Pre-Emptive Intervention in Brazil. Paper presented at 'Law and Reproductive Health Politics in an Unjust World.' Princeton University, Princeton, NJ.

Béhague, D.P. (2018, February) Trajectories of Conflict and Justice in the Clinic in Pelotas, Brazil. Paper presented at the Department of Comparative Human Development Lecture series. Chicago University, Chicago, IL.

Béhague, D.P. (2017, November) Sex and Psyche: The Politics of Surveillance in a Brazilian Favela. Paper presented at the panel 'Technologies of Community Health: Society, Surveillance, and the Self' at the American Anthropological Association Meetings. Washington DC.

Béhague, D.P. (2017, July) Threading and Unthreading: Conflict, Politics, Clinic and Justice in Pelotas, Brazil. Paper presented at workshop 'History and Ethnography of Global Mental Health' of the Centre de recherche médecine, sciences, santé, santé mentale, société (CNRS). Florence, Italy.

Bowie, J. & **Griffith, D.M.** (2016, October). Invited Presenters: Balancing What, Why and How: Reflections on CBPR Training and Research from Faculty of Color. Session title: Looking Forward After 25 Years of Community-Based Public Health and Research. Oral presentation at the annual meeting of the American Public Health Association, Denver, CO.

Carpenter, C., Eppink, S., Gonzales, G., & **McKay, T.** (April, 2018) Effects of Access to Legal Same-Sex Marriage on Marriage and Health: Evidence from BRFSS. Paper presented at the Population Association of America, Denver, CO.

Cornish, E. & **Griffith, D.M.** (2016, November). “My Definition of Health is a Good State of Mind”: The Role Mental Health Plays in African American Men's Perception of Health. Oral presentation at the annual meeting of the American Public Health Association, Denver, CO

Cornish, E., Bergner, E., **Bruce, M.A.** & **Griffith, D.M.** (2017, November). Health is the Ability to Manage Yourself without Help: How Older African American Men Define Health and Successful Aging. Poster presentation at the annual meeting of the American Public Health Association, Atlanta, GA.

Cornish, E., Bergner, E. & **Griffith, D.M.** (2017, November). A Qualitative Meta-Synthesis Examining the Role of Women in African American Men's Prostate Cancer Screening and Treatment Decision-Making. Poster presentation at the annual meeting of the American Public Health Association, Atlanta, GA.

Cornish, E., **Griffith, D.M.** & Dean, D. (2016, November). “I Care About Other People and I Try To Let That Show by What I Do.” How Non-Traditional Masculinities Motivate Men's Health. Oral presentation at the annual meeting of the American Public Health Association, Denver, CO.

Dean, D., **Griffith, D.M.** & Cornish, E. (2016, November). “You Have to Work Harder to Get Your Foot in the Door”: How Setting Shapes the Stressors and Health of African American Men. Oral presentation at the annual meeting of the American Public Health Association, Denver, CO.

Griffith, D.M. (2017, April). How is Racism Gendered?: A Critical Consideration for Anti-Racism Praxis. Panel presentation (Came, H., Griffith, D.M. & Paradies, Y.) entitled “Three Faces of Racism: Addressing Racism as a Social Determinant of Health in Three Countries” at the World Congress on Public Health in Melbourne, Australia.

Griffith, D.M. (2017, December). Making Invisible Boys and Men Visible: Toward Policies That May Mitigate Health Disparities among Vulnerable Boys and Men. Panel on Policy, Stress and Health Disparities. American Psychological Association invited meeting entitled, “Stress and Health Disparities: Building Capacity to Understand, Prevent and Treat Stress in Vulnerable Populations”. American Psychological Association. Washington, DC.

Griffith, D.M. (2017, November). “Lest We Forget” the Duality of Blackness: The Art of Pursuing Health Equity. Keynote address at The Society for the Analysis of African American Public Health Issues 25th Anniversary & Annual Meeting. Atlanta, GA.

Griffith, D.M. (2016, September). Perspectives, Partnerships and Practices to “STIR” Globally. Keynote webinar at the STIR-Stop Institutional Racism Symposium. Te Mahurehure Marae. Auckland, New Zealand.

Griffith, D.M. (2016, May). Featured Speaker: American Psychological Association congressional briefing marking the release of the Men and Boys of Color Task Force report. Rayburn House Office Building, Washington, D.C.

Griffith, D.M. (2016, April). Obesity in Adult and Middle-Aged Men. Keynote address at the 7th Annual Dr. Lloyd C. Elam Spring Conference. From Cradle to Rocking Chair: Continuing and Emerging Issues in African American Male Health. Meharry Medical College, Nashville, TN.

Griffith, D.M. (2016, April). Where Are Men in Men's Health? Keynote presentation and Panelist on Men's Health as part of the Inauguration of the President, Dr. James Hildreth. Meharry Medical College, Nashville, TN.

Griffith, D.M. (2016, April). Keynote presentation: Tailoring Health Disparities Interventions through Qualitative Methods: The closer We Get to Why, the Better We'll Know How. The University of Alabama National Public Health Week Celebration. Hosted by the Department of Health Science, The University of Alabama. Tuscaloosa, AL.

Griffith, D.M. (2016, April). Keynote panel: Emerging Ecological Models & Health Disparities. Presentation title: An Intersectional Approach to the Social Ecology of Men's Health. Diversity in Public Health Summit: Homelessness: Giving a Voice to an Underserved Population. Hosted by the Multicultural Public Health Student Association (MPHSA) at The Ohio State University College of Public Health. The Ohio State University, Columbus, OH.

Griffith, D.M. (2017, October). Masculinity, Misbehavior and Men's Health Disparities. Invited speaker for the American Society for Men's Health Road Show. Nashville, TN.

Griffith, D.M. (2017, June). Invited Presentation: Sex, Gender, Men and Health Policy. 2017 Summer Institute on Health Policy. Robert Wood Johnson Foundation (RWJF) Center for Health Policy at Meharry Medical College. Nashville, TN.

Griffith, D.M. (2017, June). Invited Presentation: Mighty Men: A Faith-Based Weight Loss Program to Reduce Cancer Disparities. Atlanta, GA.

Griffith, D.M. (2017, June). Invited Presentation: A Patient Centered Approach to Improving the Health and Healthcare of Black Men. Caribbean Medical Providers Practicing Abroad 4th Annual Medical Conference and Community Outreach Program. Bridgetown, Barbados.

Griffith, D.M. (2016, October). Invited Symposium Chair: Context, Community and Culture as Social Determinants of Men's Health Disparities. 2016 Society for Research in Child Development Special Topic Meeting: Babies, Boys and Men of Color. Tampa Marriott Waterside Hotel & Marina. Tampa, FL.

Griffith, D.M. (2016, August). The Role of BRFSS in the Tennessee Men's Health Report Card. Behavioral Risk Factor Surveillance System Data Users Group Meeting. Tennessee Department of Health. William R. Snodgrass (Tennessee) Tower. Nashville, TN.

Griffith, D.M. & Hartfield, J.A. (2017, November). Historical Trauma Revisited: Reframing Police Involved Shootings of Unarmed Black Men as Both a Public Health and Human Rights Issue. Oral presentation at the annual meeting of the American Public Health Association, Atlanta, GA.

Griffith, D.M., Cornish, E., **Bruce, M.A.**, Ayers, D., Chen, S.C., McKissic, S. & Dean, D. (2016, November). Masculinity, Manhood and African American Men's Health: The Development and Preliminary Findings from a New Measure of Manhood. Oral presentation at the annual meeting of the American Public Health Association, Denver, CO.

Griffith, D.M. & **Bruce, M.A.** (2016, May). Manhood, Motivation and Middle-Aged African American Men's Health Behaviors. Hampton University Minority Men's Health Initiative. Hampton University Regional Transdisciplinary Collaborative Center Spring Research Retreat. North Carolina A&T State University. Greensboro, NC.

Hartfield, J.A., Johnson-Lawrence, V., **Griffith, D.M.**, Israel, B., House, J., White Perkins, D., & Schulz, A. (2017, November). Concentration of Non-Hispanic Black at the Block-Group Level Helps to Explain Racial and Ethnic Differences in Hypertension Awareness. Poster presentation at the annual meeting of the American Public Health Association, Atlanta, GA.

Hartfield, J.A., Johnson-Lawrence, V., **Griffith, D.M.**, Israel, B., House, J., White Perkins, D., & Schulz, A. (2017, November). Perceived Discrimination and Percent Non-Hispanic Black at the Neighborhood Level Explain Racial Differences in Hypertension Awareness, Treatment, and Control. Oral presentation at the annual meeting of the American Public Health Association, Atlanta, GA.

Jones, M. (2016, March). Health Insurance Coverage in the US South: What If Tennessee Had Expanded Medicaid in 2014?. Paper presented at the Vanderbilt MHS colloquium.

Jones, M. (2016, September). Characteristics of the Uninsured in Tennessee, 2013-14. Poster presented at the annual meeting of the Tennessee Public Health Association, Franklin, TN.

Jones, M. (2016, June). Workers' Compensation Denominators: Full-Time Equivalent Employees. Paper presented at annual meeting of the Council of State and Territorial Epidemiologists. Anchorage, AK.

Jones, M. (2016, December). Using ACS and LPC data for Workers' Compensation Full-Time Equivalent Denominators. Paper presented at the CDC/NIOSH Workers' Compensation Meeting. Atlanta, GA.

Jones, M. & Taylor, E., et al, (2017, November). Utilization of Tennessee Workers' Compensation Data for Injury Surveillance and Prevention, 2014-2015. Paper presented at the Tennessee Bureau of Workers' Compensation. Nashville, TN.

Jones, M. (2017, December). Workers' Compensation Denominators – Full-Time Equivalent Employees. Paper presented at the CDC/NIOSH Workers' Compensation Meeting. Minneapolis, MN.

Lindsey, O. (2017, November). Selections from *We Come to Our Senses*. Presented at the Veteran Experience in Literature panel, Kentucky Book Fair, Lexington, KY.

Lindsey, O. (2017, October). Selections from *We Come to Our Senses*. Presented at the Translating War Trauma Into Art panel, Southern Festival of Books, Nashville, TN.

Lindsey, O. (2017, September). Auditing Truth for Fiction. Paper and workshop presented at Middle Tennessee State University, Nashville, TN.

Lindsey, O. (2017, September). Selections from *We Come to Our Senses*. Presented at the Argenta Reading Series, Little Rock, AR.

Lindsey, O. (2017, September). Selections from *We Come to Our Senses*. Presented at the *Atlanta Journal Constitution*-Decatur Book Festival, Decatur, GA.

Lindsey, O. (2017, September). Selections from *We Come to Our Senses*. Presented at the Stories from the South panel, Mississippi Book Festival, Jackson, MS.

Lindsey, O. (2017, September). Selections from *The Mississippi Encyclopedia*. Presented at the Mississippi Book Festival, Jackson, MS.

Lindsey, O. (2017, August). Selections from *We Come to Our Senses*. Presented at Book People, Austin, TX.

Lindsey, O. (2017, July). Selections from *We Come to Our Senses*. Presented at Regulator Bookshop, Durham, NC.

Lindsey, O. (2017, July). Selections from *We Come to Our Senses*. Presented at Flyleaf Books, Chapel Hill, NC.

Lindsey, O. (2017, June). Selections from *The Mississippi Encyclopedia*. Presented at the Library of Congress, Washington, D.C.

Lindsey, O. (2017, June). Selections from *We Come to Our Senses*. Presented at Riverviews Artspace, Lynchburg, VA.

Lindsey, O. (2017, May). Selections from *The Mississippi Encyclopedia*. Presented at the Square Books, Oxford, MS.

MacLeish, K. (2018, April) War Machine/Work Machine: On Ex-Military Labor and Other Lines of Flight. ISA Special Sessions "Becoming War" Workshop. San Francisco, CA.

MacLeish, K. (2018, April) Making Live in the Afterwar: Survival and Deservingness in a Veteran Treatment Court. UCSF Department of Anthropology, History, and Social Medicine Culpepper Seminar Series. San Francisco, CA.

MacLeish, K. (2018, April) Abuse of a Public Animal: Drunk Driving and Martial Zoopolitics. Paper presented at

the meeting of the International Studies Association, San Francisco, CA.

MacLeish, K. (2018, February) Abuse of a Public Animal: Veteran Drunk Driving and Animal Politics. Department of American Studies, Brown University. Providence, RI.

MacLeish, K. (2017, October) The Politics of Care in a Veteran Treatment Court. Department of Anthropology, University of Chicago. Chicago, IL.

MacLeish, K. (2017, September) On The Road in the Afterwar: On Veteran Drunk Driving. Paper presented at the meeting of the Society for the Social Studies of Science, Boston, MA.

MacLeish, K. (2017, April) Supervising the Afterwar: Care and Deservingness in a Veteran Treatment Court. Department of Anthropology, Bucknell University. Lewisburg, PA.

McKay, T. (2017, November) Challenging Institutions through Policy Innovation, Party Strategies, and Activism: Views from Political Science, Sociology, and Education. Session Chair for panel presented at the African Studies Association, Chicago, IL.

McKay, T. (2017, April) Social Networks and Health among Older LGBT Adults in the San Francisco Bay Area. Paper presented at the Population Association of America, Chicago, IL.

McKay, T., Angotti, N., & Robinson, R.S. (2017, November) Creativity and Resilience in LGBT Organizing in Nigeria after the Same-Sex Marriage Prohibition Act. Paper presented at the African Studies Association, Chicago, IL.

McQueen, C., Cornish, E., Bergner, E. & **Griffith, D.M.** (2017, November). "If You Dwell on It, It'll Crack You": Stress Appraisal in Middle-Aged African American Men. Oral presentation at the annual meeting of the American Public Health Association, Atlanta, GA.

Myers, H. (2017, July) Invited lectures on "The Effects of Stress on Health across the Lifespan: Biological Dysregulation and Chronic Mental Disorders". Tirisano Training Program (TTP) in Capetown and Johannesburg, South Africa.

Song, L. (2017, November). Social Capital or Social Cost? Accessed Status, Tie Strength, and Depression in the U.S. and Urban China. University of Alabama at Birmingham, AL.

Song, L. (2017, October) Accessed Status, Tie Strength, and Depression: A Comparison between the U.S. and Urban China. Duke University, Durham, NC.

Song, L. (2017, July). Network Members' Occupational Status, Tie Strength, and Depression in Two Societies. Shanghai Social Science Summer Symposium (S5), New York University-Shanghai, China.

Song, L. (2017, May). Does Your Body Knows Who You Know in the Positional Hierarchy? Social Capital, Comparative Reference Group, and Health. Social Capital and Health Symposium, the 50th Annual Meeting of Society for Epidemiologic Research, Seattle, WA.

Song, L. (2017, May). Network Members' Occupational Status, Tie Strength, and Depression in Two Societies. Shandong University, Jinan, China.

Song, L. (2017, May). Network Members' Occupational Status, Tie Strength, and Depression in Two Societies."The XXXVII Sunbelt Conference of the International Network for Social Network Analysis (INSNA), Beijing, China.

Song, L., and Frazier, C. (2017, August) Educational Homogamy, Network Members' Status, and Gender: A Comparison across Three Societies. The 112th Annual Meeting of American Sociological Association, Montreal, Canada.

Song, L., and Frazier, C. (2017, March). Educational Homogamy, Network Members' Status, and Gender: A Comparison across Three Societies. The 80th Annual Meeting of Southern Sociological Society, Greenville, SC.

Stark, L. (2017, December). Unregulated Herpes Experiments Expose 'Black Hole' of Accountability, by Marisa Taylor. *The Washington Post / Kaiser Health News*.

Stark, L. (2017, December). The View from Somewhere: The Productive Contradictions of 'Context' in Late Modern Science. Cultural History Research Group and Descartes Centre, Utrecht University. Utrecht, Netherlands.

Stark, L. (2017, December). The Paradox of 'Risk' in the Social Sciences: A History. Center for Health, Law and Ethics, Haifa University. Haifa, Israel.

Stark, L. (2017, June). Working definitions: How the US NIH Read Political Economy into the Normal Human Body. Wellcome Trust (UK) workshop on Bioscience and the Politics of the Human. London, UK.

Thorpe, Jr., R., **Griffith, D.M., Bruce, M.A.** & Beech, B. (2017, November). Men’s health in the United States: The case for a national report. Oral presentation at the annual meeting of the American Public Health Association, Atlanta, GA.

Wells, II, B., Hartfield, J.A. & **Griffith, D.M.** (2017, November). Role of Health Hardiness in Physical Activity among Middle-Aged and Older African American Men. Oral presentation at the annual meeting of the American Public Health Association, Atlanta, GA.

Whitt-Glover, M., Hooker, S.P., Williams, T., Gizlice, Z., Murry, M., Hughes, O.S., **Griffith, D.M.**, Mobley, Y. & Woodruff, M. (2016, November). Y’all Come! Reaching African American Men for a Chronic Disease Prevention Study in the Southeastern U.S.: Lessons Learned. Oral presentation at the annual meeting of the American Public Health Association, Denver, CO.

GRANTS

Griffith, D.M. 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.

Griffith, D.M. Co-Investigator/ Sub-Project Principal Investigator/ Member of Consortium Core. (2016-2021).

Griffith, D.M. Center of Excellence in Precision Medicine and Population Health proposal 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).

Griffith, D.M. Principal Investigator (Project 3) of the NIMHD U54 (Center of Excellence in Precision Medicine and Population Health) (2017-2021): Tailored behavioral intervention for overweight African American and Latino men.

Griffith, D.M. Co-Investigator (2014-2018). Active and Healthy Brotherhood. Funded by the Patient-Centered Outcomes Research Institute. (PI: Melicia Whitt-Glover, PhD)

Griffith, D.M. Co-Investigator (2014-2018). Obesity Health Disparities PRIDE. R25 Funded by the National Heart, Lung, and Blood Institute, National Institutes of Health. (PI: Bettina Beech, PhD)

Griffith, D.M. Co-Investigator (2016-2019). Mobile Phone Intervention for Physical Activity Maintenance in African American Men (MobileMen). R41 funded by the National Institute on Minority Health and Health Disparities. (PI: Robert Newton, PhD)

Hamraie, A. Principal Investigator (2017). Graham Foundation for Advanced Studies in the Fine Arts, Publication Grant for Building Access.

Hamraie, A. Principal Investigator (2017). Vanderbilt Institute for Digital Learning Macro Grant.

Hamraie, A. Principal Investigator (2016). National Humanities Alliance Grant.

MacLeish, K. (with Z. Wool). Perspectives on Burn Pit Exposure: Questions of Diagnosis in Veteran and Caregiver Experience. War Related Illness and Injury Study Center, Veteran’s Health Administration Special Projects Funding.

McKay, T. Key Faculty. (2017-2019) Vanderbilt LGBT Policy Lab. Trans-Institutional Programs, Vanderbilt University. P.I.: Christopher Carpenter, Vanderbilt University

McKay, T. Principal Investigator. (2017-2018) LGBT Rights and Health in Mozambique. Research Scholar Grant, Faculty Development Grant, Vanderbilt University

McKay, T. Co-Investigator. (2016-2018) Marginalized Populations: How do LGBT Policies Impact the Health of People and Places. Robert Wood Johnson Foundation. P.I.: Christopher Carpenter, Vanderbilt University

Metzl, J.M. Principal Investigator (2017-18) Co-I, NEH/Institute for the Humanities, Humanities Frontiers Grant, University of Illinois-Chicago host

Metzl, J.M. Principal Investigator (2016-2021) Co-I, AGEP Transformation Alliance: Bridging the PhD to Postdoc to Faculty Transitions for Women of Color in STEM

Myers, H. Co-Investigator/Mentor (2015-2020) Mallal (PI). NIH/NIAID: Tennessee Center for AIDS Research.

Myers, H. Co-Investigator & Training & Mentoring Core (2016-2020). Wilkins (PI). NIMHHD. Vanderbilt-Miami-Meharry Center of Excellence in Precision Medicine and Health Disparities.

Myers, H. Co-Investigator and PI on Subaward (2017-2022). Morris (PI). NIMHHD. Mechanisms Linking Adversities and Pain in African American Adults.

Stark, L. (2018). Research Fellow (summer), Max Planck Institute for the History of Science, Berlin, Germany.

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