Human migration has always been an essential aspect of human life, and with it comes the potential for the spread of lifestyles, habits, genes, and diseases which could result in adverse outcomes for health and wellbeing. The migration journey itself is often fraught with events and exposures which result in negative health outcomes, both in the short and long term. Any effort to improve public health, especially at global levels, therefore, cannot ignore migrating populations. It was with this in mind that the Department of Public Health Sciences — in collaboration with the Center for Community and Global Health of the Stritch School of Medicine and Borderlinks, a Tucson-based nonprofit that provides cross-border relationship-building opportunities — participated in a border immersion experience. The trip ran from October 3rd to October 7th and featured talks, seminars, and observations with individuals and organizations on both sides of the U.S.-Mexico border that provide relief and assistance to migrants. In attendance were PHS faculty member Dr. Ramon Durazo and students Dana Riggins and Helen Nde. In this article, they provide their perspectives on the most memorable aspects of the trip.

**Helen Nde**

The social determinants of health feature majorly in most discussions about public health, and this immersion experience was a poignant lesson on that topic. Starting from the political, social, and economic factors that push individuals to make this journey, to the journey itself and the complications which arise once they reach their destination, it was a constant reminder that ill health is not just the presence of disease or disability but also the absence of mental, physical, and social wellbeing. The immigration crisis at the U.S-Mexico border is often not framed in terms of the public health crises it represents for the migrants. But a closer look at the situation would certainly reveal that phenomenon. One way in which this crisis manifests itself is in the death rates of migrants. Journeying across the border is dangerous, and hundreds of migrants who embark on this journey never reach their destination. The Sonoran desert landscape is hostile, rendering the travelers susceptible to dehydration, snakebites, and other kinds of injury that could result in death. Organizations we met with, such as No More Deaths, and individuals like Mike Wilson have made it their mission to provide drinkable water and emergency support to migrants, but their efforts are often not enough. Migrant deaths are still high and identifying bodies is a daunting task. Many of these individuals leave behind no health records with which they can be definitively identified. Oftentimes, they simply go missing, leaving behind family members who have no idea where they are or whether they are alive or dead, and with no one to turn to for help in locating them. The Colibri Center for Human Rights is one of the organizations in the region that aims to identify the bodies of dead migrants recovered in the desert, as well as provide assistance to family members trying to locate lost ones. We were introduced to Colibri’s mission and work by Chelsea Halstead, who coordinates...
Colibri’s direct service and research. Chelsea enumerated the many challenges faced by the various individuals and organizations involved in identifying or locating missing migrants, and we discussed what measures could be taken, especially at the policy level, to facilitate their work. Chelsea stressed the importance of coordination, resource sharing, and comprehensive databases to such endeavors, as well as the overall importance of locating missing persons and identifying dead bodies as a way of giving families much needed closure.

Another person we met was Dr. Carolyn Quigley, Stritch graduate and family medicine resident at the University Medical Center in Tucson. Speaking with Dr. Quigley about the challenges that migrants face in accessing health care, even in emergency situations, further impressed on my mind the importance of including the health and wellbeing of migrants, both documented and undocumented, in not just the immigration policy conversation but also the conversation about healthcare access, utilization, and outcomes. Fear of apprehension and subsequent deportation is a major barrier to access and utilization in border cities, but away from the border in cities like Chicago, other structural and systematic barriers arise which are just as challenging and result in unnecessary death and disability in both documented and undocumented migrant populations.

We also spoke with lawyers and activists on both sides of the border, and ultimately, the impression I got was that beyond seeking solutions to the immediate crisis at the border, there needs to be a broader conversation about the factors which create this crisis. In order to provide effective public health solutions, the full meaning of the word health must be taken into consideration. The conversation must move beyond the immediate physical health of migrants to address the social and other factors that put them in their predicament to begin with.

**Dana Riggins**

I am grateful to have been able to participate in this immersion experience. I got to meet a lot of great people and organizations, as well as the other members of Borderlinks delegation. Each person told us their story, described what they do, and it was good to hear a variety of positions and ideas. During our last day in Tucson, we were able to have dinner with Dr. Carolyn Quigley, who graduated from Stritch School of Medicine. Carolyn is originally from the Tucson area and is now completing her residency in the city. Being a native, she was able to give us insight on how relations across the border have changed throughout the years, as well as comment on the challenges to health care access caused by immigration policy. Carolyn talked to us about the health of border crossers, and told us the most common injuries she sees are injuries on the feet. The one thing she brought up that really struck me was that the Border Patrol parks outside the hospital to deter migrants from visiting the emergency department. This was shocking to me—that there are people who would rather watch other human beings suffer than receive the help they need — and is the one part of the border issue (and life) that will always get to me. After our dinner, we attended a vigil for Rosa, a woman facing deportation and taking sanctuary at Southside Presbyterian Church and part of the Sanctuary Movement, where the church protects refugees and migrants who have had a difficult time proving their status.

During all our meetings at Borderlinks we were actively listening/learning, meaning we were listening to understand, not to respond to the person speaking. The last day of our trip we changed this, and we began to respond with actions we can take. Our last meeting was spent brainstorming things we can do to change the issues we saw once we returned home. Some of these actions included giving presentations to others about what we learned on the trip, volunteering in our communities, learning Spanish, advocating for immigrants, voting, working to make education available to all who want it, and many more. After hearing everyone’s story, and seeing up-close the things people have to go through, it was nice to compile a list of things we can do to help. Overall, the immersion experience was an eye-opening introduction to immigration issues for me. I learned so much about U.S.-Mexico border history, current issues, and the humanitarian organizations that work there.
Dr. Ramon Durazo

I think trips like these are important first and foremost because they get students exposed to the needs of migrants, who constitute a particularly vulnerable component of the underserved population. They put into perspective the importance of incorporating the social justice into public health solutions and interventions. We went to the border and we witnessed what happens at the border, but it also got us thinking about those people who have left the border and have now been integrated into communities across the country. We start to think about where they came from and what their background is and what implications these factors have for their health. All that information is important to the discussion about the health issues that affect these populations. For example, we saw that a lot of the migrants are young people. They are healthy now for the most part, but they also have low education — which has an association with cardiovascular disease (CVD) — so over time you might see these once healthy people develop CVD, one of the major public health issues faced by the U.S.

What I am saying here is that if we want to think about public health interventions and programs for individuals such as this, then we also have to think about educational programs to minimize that risk. From the direct care point of view, if we want to be able to address the health needs of the migrant population then we have to understand that these people come from a different background and appreciate how this changes their perspective on health, even in things as simple as the naming of diseases, the practices for taking medication, the propensity to seek care, etc. Trips like this raise these issues in the minds of students who are public health leaders-in-the-making, and ensure that the issues are part of the discussion not just now but in the future.

This was our first trip, and there will be more. From an academic point of view, improvements can be made to ensure that students are better prepared before these trips. I am thinking about a seminar to be held prior to departure, with the aim of sorting out an agenda of topics to discuss before leaving, to put the issue in context — while there and when we return.

Immigration is a complex issue which needs to be addressed contextually. Another thought is to incorporate them into coursework. The danger is to avoid a situation where these trips become nothing more than sightseeing excursions. Visiting different places is great but there also needs to be open discussions about solutions, while keeping in mind that these are broad problems that will not be solved in a week.

It gives me hope to see that there are a growing number of organizations on the border committed to helping and supporting migrants and advocating for them, because people are going to keep coming.

Visit Borderlinks.org for more information about their organization
Loyola at the American Public Health Association Annual Meeting

This year’s APHA annual meeting was held in New Orleans, Louisiana, from November 15th to 19th, and featured a series of events, talks, presentations, and seminars geared towards strengthening the profession of Public Health through networking, knowledge sharing, mentorships, and dialogue. See this year’s program here.

Loyola’s Department of Public Health Sciences faculty was represented by Drs. Amy Luke, David Shoham, and Justin Harbison, and program coordinator Ms. Karen Tate, MPH; and the MPH students were represented by Helen Nde, LMSA president. This presented an opportunity for the department to market itself as a dynamic program and make crucial connections and partnerships that will bode well for growth.

APHA membership is open to public health professionals and students. Membership is highly beneficial to students, as it provides opportunities and resources to develop public health skills for a successful career. According to the APHA website, student members have the benefit of receiving both print and online access to the American Journal of Public Health. Students can also save $20 on membership dues (originally $75) when you choose online-only access to AJPH (green discount). Visit the APHA website for more information.

More Resources for Students

by Jason Gantenberg

As it’s always important to stay abreast of the latest developments and continue to expand your skillset, we have a few more resources for your this month that we hope will prove useful.

Illinois Public Health Association
http://www.ipha.com

Student membership in the IPHA is only $10! Despite the low ticket price, the Institute of Public Health at Loyola will cover the fee for the first 10 students who express interest.

R
http://r-project.org

R is a free and open-source stats program with numerous extensions and packages. If you’re looking to learn a stats program and pick up some programming skills, R is an excellent tool. You’ll find manuals and other documentation at the project website.

Data Camp
http://www.datacamp.com

Admittedly, I haven’t had too much experience with this site yet, but they do have a free Introduction to R module that will help you get your feet wet.

Center for Infectious Disease Research and Policy
http://www.cidrap.umn.edu/

If you’re looking for a place to keep up with infectious disease news, current events, and policy information, you could do worse than CIDRAP, run out of the University of Minnesota.

Bioethics.net
http://www.bioethics.net/

Home of the American Journal of Bioethics, the website also hosts short articles written in plain English exploring ethical dilemmas in research and policy.
St. Albert’s Day
by Christina Small

The 35th annual St. Albert’s Day was held on Thursday, October 30, 2014. This research presentation event held posters from over 250 medical and graduate students. Researchers presented results from work in various fields throughout Loyola University Chicago. Posters were displayed in Stritch Medical School. Each person set up his or her research poster, after which the hall was open for public viewing during the day. Additionally, some students gave oral presentations on their research findings. Each student stood by his or her poster for two hours at the end of the day to discuss and answer any questions. The student then presented his or her research findings to two judges.

Personally, this was my first research symposium. I was able to learn a great deal about the many research projects being done throughout the Loyola campuses. It was inspiring to walk around and take a look at the science presented by students at Loyola University Chicago. St. Albert’s Day was an impressive display of student knowledge, and I was honored to be a part of it. I would encourage any interested students to submit an abstract for next year’s event, as it really was a great experience.

Leadership Day Recap
by Jollyn Tyryfter

The leadership day presentations began with Susan Wortman from Loyola’s career center and another one of her greatly informative talks about career searches. This semester’s topic dealt with how to critique and improve your resume and CV, including formatting, word choice, how to best sell yourself and your skill set, editing, and when to use your resume vs. your CV. Wortman also provided advice on cleaning up your online presence and urged job-seekers to create an online portfolio for items not able to be shown on your resume. The talk as a whole was incredibly helpful in helping students start thinking about that first crucial step: landing an interview. Following her presentation, attendees had the opportunity to modify their resumes and receive some on-site input from her. For an in-depth critique, however, or for any other career advice, you can set up an appointment with Susan at the Lake Shore campus by calling 773.508.7716. If you’re unable to make it in person, she is also available via e-mail at mswortman@luc.edu. General career advising information is available at Loyola’s Career Development Center website: http://www.luc.edu/career.

Next, Dr. Celine Vatterott Woznica, from Child-to-Child (www.childtochild.org.uk), provided a new perspective on how to tackle community health problems: get children involved in the process. The organization itself is based in London, but Dr. Woznica is involved with the projects in Central and South America. Using a variety of techniques, such as games, puppet shows, and songs, children are able to describe the most pressing issues in their communities and develop strategies to solve them. Child-to-Child seeks to give them these opportunities; when children are given a voice they’re able to tackle problems in ways that adults may not have envisioned. In areas where these programs have been implemented there has been a long term positive effect on health outcomes and community involvement.

Last of all, David Macey’s presentation focused on communication. As public health practitioners it is often necessary to write for a variety of audiences: academics, doctors, the general public, and government officials, to name a few. He provided information on how to tailor your writing and effectively convey sometimes complicated information. It was an interactive presentation, with examples of how to be clear and concise while avoiding unnecessary jargon. Help on improving your writing is available from the writing center on the Water Tower and Lake Shore campuses, or you can schedule a virtual appointment at www.luc.edu/writing.
Student Spotlight: Jonathan Lawson

**Why did you decide to enroll in an MPH program?**
Short story, I discovered that I wouldn't be able to get where I wanted to be professionally or help people in the way I envisioned without a more advanced degree. As for why Loyola, the distance MPH program allows me to take classes while helping people wherever they need it, without being restricted to the Chicago area.

**Where are you now in the program?**
I'm just starting my first full semester of the program. I got started a little early with a class over the summer.

**What is your background prior to enrolling at Loyola?**
Educationally, a B.S. in Psychology with minors in Addiction Studies and Political Science from Boise State University in Idaho. Professionally, my background is in research analysis and data administration, both in government and in a private-sector setting. Currently, I'm consulting on political campaigns during the 2014 election season.

**What are your clinical or public health-related research interests?**
Primarily, I'm interested in identifying distal causes to more effectively tailor and deliver health interventions. I've always also been more interested in behavioral health than other branches of public health, so that informs my interests as well.

**What are you hoping to do after you complete your MPH?**
At the moment, I'm considering going to a DrPH program, and using that degree to either teach or do more research (or both!). If that doesn't happen immediately after I finish my MPH, I'll almost certainly go back to governmental work, hopefully in a research-type position in behavioral health.

**What are your hobbies and interests outside of public health?**
I grew up in Iowa and became a chef, but it turns out that job wasn't really giving me what I wanted. Since moving to Boise, I've become a more outdoorsy type (especially rafting) and an amateur bicycle racer.

### Important Dates

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<tr>
<th>Date</th>
<th>Event Description</th>
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<tr>
<td>November 15–19</td>
<td>American Public Health Association 142nd Annual Meeting and Exposition</td>
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<tr>
<td>November 21</td>
<td>Skating Night with Maywood Fine Arts</td>
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<td>November 26–29</td>
<td>Thanksgiving break—no classes</td>
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<td>December 1</td>
<td>Extension of time requests for Spring 2015 due at the Graduate Office, Granada Center, 4th floor</td>
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<td>Lake Shore Campus classes resume after Thanksgiving break.</td>
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<tr>
<td>December 6</td>
<td>Fall semester classes end</td>
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<td>December 8–16</td>
<td>Final exams (none on Sunday)</td>
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<tr>
<td>December 15</td>
<td>Last day to file an application to receive a degree for May 2015 degree conferral</td>
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<td>Last day to file a late application for May 2015 degree conferral ($25 late fee)</td>
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**ERRATUM**

In last month’s issue, in the article regarding the Maywood Fine Arts Pumpkin Patch Parade, we neglected to add that medical student Matt Brennan was also in attendance, representing Loyola. We regret the omission.
SciPec: Attend Anatomy Lab as an MPH Student

by Divya Hariharan

My name is Divya Hariharan, and I'm currently the MPH representative for SciPec. SciPec is an organization at Loyola that stands for Student Committee for Inter-Professional Education and Collaboration. This organization encourages inter-professionalism and wishes to integrate students of all the health science programs at Loyola in their organization. This involves dietetic students, MPH students, and nursing and medical students. SciPec encourages you to become a part of their organization and attend the social and service events they have planned for the year. As the MPH Representative for SciPec, I will be forwarding students information about events and opportunities available through SciPec.

One of the upcoming opportunities is the chance to visit the anatomy lab. SciPec organized this because they realized the accessibility to see cadavers is mostly limited to medical students, and they wish to expand this opportunity to the rest of the health sciences programs at Loyola.

This event will be held on December 1, 2014 at 6:00 p.m. For those interested in attending, please fill out the Google Docs spreadsheet linked to below, selecting the group in which you’d like to be included.

This is a great opportunity, and I strongly encourage everyone to try their best to attend as well become involved in SciPec for future events.

Google Doc: https://docs.google.com/spreadsheets/d/1ZoowNnzrquxO6nBU75upMkHTrWXYdEsLzh1zAoySyBw/edit#gid=0

SACNAS and Idealist Grad Fair Round-up

by Prof. Justin Harbison

This past month the Loyola MPH program attended two professional conferences to promote both the growth of the program and the hard work of its students. The first was the annual meeting of the Society for Advancement of Hispanics/Chicanos and Native Americans in Science or “SACNAS”, held in Los Angeles Civic Center in southern California. SACNAS is a society of scientists dedicated to fostering the success of Hispanic/Chicano and Native American scientists. Many of the approximately 4,000 attendees of this year’s conference were undergraduates with particular interest in science and health, a great target audience for the MPH program. In a day and a half, over a hundred participants stopped by MPH programs table and learned about the great things MPH students and faculty were doing back in Chicago. You can learn more about SACNAS at sacnas.org.

The other conference recently attended by MPH program was the Idealist Grad Fair held at the UIC Forum. Idealist Grad Fairs are free and open to the public and are specifically tailored for people considering graduate school. Although there were many different graduate schools and programs featured in this year’s fair in Chicago, programs in public health and health-related fields were by far the most popular. You can learn more about upcoming Idealist Grad Fairs held around the country at idealist.org. Stay tuned for more information regarding upcoming fairs and conferences attended by the MPH program.

Prof. Justin Harbison at the SACNAS
Officers

Helen Nde  
*President*

Jollyn Tyryfter  
*Vice President*

Jason Gantenberg  
*Communication Officer*

Christina Small  
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*Faculty Representative*