



# UC Berkeley School of Public Health Interdisciplinary MPH Program alumni & student news

Winter 2009

Current Students:

## Peter Sherris

MD, MPH Candidate 2009



Thinking that it might make things easier and that my time would be more controllable, I cut my clinical hours and began taking on administrative responsibilities. But I was wrong: I had even less control over my time than ever before. One day, I suffered an acute anxiety attack at work that felt like a heart attack. It was another important message, and I listened to it. I quit all my administrative duties and cut back to four days a week, doing mainly non-invasive cardiology.

As another decade passed I realized that I wasn't exactly bouncing out of bed in the morning or eager to get to work. I found myself feeling stressed and put upon. So I asked myself: should I wait for another message to arrive? I thought: "no."

My sister was at that time running vaccine trials in developing countries funded by the Gates Foundation. Every time we talked I could feel myself getting excited about the work she was doing. She was helping thousands of people while I helped a mere few. I met with her director who told me if I wanted to do her kind of work, I needed international experience and professional training—ideally an MPH. So I volunteered in Rwanda and loved it. The next step was to apply to the Interdisciplinary MPH Program--and here I am.

Going back to graduate school after 35 years is hard work. I'm a pretty disciplined guy but after months of homework, papers to write, pages upon pages of reading, and classes seven hours a day, I was ready for the December break!

In retrospect, I've learned a lot. I've especially enjoyed biostatistics, community organizing, and my class on water and development. I've struggled with epidemiology and the public health breadth courses. I'm not quite sure exactly how what I'm learning will affect my future work, but I can see that my focus is shifting from the individual to the community level. I guess after hearing *start where the people are*, thirty times, that the message is sinking in.

My goal now is to help Matibabu Foundation in its community-based efforts to improve the health and welfare of the people of Ugenya, Kenya. They have a \$1.5 million grant from the President's Emergency Fund for HIV and AIDS Relief and 1,500 people are currently receiving anti-retroviral drugs through the foundation. I've also been asked to help develop a malaria abatement program. I've just returned from spending the winter break there, and plan to go back next summer.

After 30 years of seeing patients every day, I was ready for something new. Throughout my career, after about 10 years of doing the same thing, I've noticed that a strange combination of stress, boredom and frustration tends to set in—not a good combination.

I was at the University Washington for both college and medical school, followed by an internship and residency at Kaiser, San Francisco. Then I was a real doctor, a general internist at Kaiser-Permanente in Vallejo, taking care of my patients in both in the clinic and the hospital. It was challenging work with long days and nights. I thought I was doing fine, but after a number of years of this, my 8 year old son Austin announced to me: "I want you to know Dad, that I'm never going to be a doctor!" Shocked, I asked him why. The answer was: "Because you work too hard." It was a message well received. I started coaching my son's baseball team and became a Boy Scout leader, spending many happy weeks with him and his fellow Scouts.

(continued on next page)

You are cordially invited to the  
University of California at Berkeley  
School of Public Health  
Interdisciplinary MPH Program

**10th Annual  
Alumni  
and  
Student  
Reception**



**Friday, April 24, 2009**  
5:30 pm - 7:30 pm

*150 University Hall  
UC Berkeley*

An opportunity for alumni,  
students, faculty and staff to meet  
and socialize

A dinner buffet will be served

Invitations will be emailed in March 2009

To make sure you receive your invitation,  
please call 510 643-2700

**Peter Sherris (continued)**

And I'm certainly not bored: I get up at 6:15 a.m to have enough time to bicycle to my 8:00 classes. I'm excited about this new phase of my career and so far have had no frustration or anxiety (except a little before the Epi exams). My wife is especially supportive – she was afraid I would retire and be home every day for lunch. My son is supportive too and he and I have switched roles: he recently edited one of my papers.

One more semester to go! And after that... I'll have the luxury and freedom to do whatever I want.

**Update: 42 unit MPH degree**



Starting this semester, the Interdisciplinary MPH Program changed the number of units required for the MPH degree from 24 to 42 units, to satisfy new standards prescribed by the accreditation body for Schools of Public Health in the U.S. The core requirements of the program remain the same, but more electives – around 20 units worth -- must be taken. Needless to say, this is a lot of work. We have therefore recommended that all students take the summer session before or after the school year to spread the burden.

To our surprise, the students are managing better than expected (a good thing) but we still have a semester to go. The real impact is that it is no longer possible to work and attend school at the same time. This is bound to have a detrimental impact the applicant pool. We will keep you posted.

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# Janet Berreman

MD, MPH 2003



I enrolled in the Interdisciplinary MPH program in 2003. The whirlwind MPH year gave me an important foundation for making the transition in my career from pediatrics to public health. I gained new ways of thinking about health, a new vocabulary, and new knowledge of how I could have an impact on the issues that concerned me. I was fortunate to join the City of Berkeley's Public Health Division shortly after I graduated. I have been the Deputy Health Officer here for two years now, and the Acting Health Officer for several months.

Berkeley's Division of Public Health is an ideal venue for learning the practice of public health. It's small enough to allow (and to require) its health officer to become well acquainted with an broad range of public health programs and activities, including community outreach, funding sources, political nuances, the partners involved and the residents served. And the city is large enough and diverse enough to have a full spectrum of public health issues that need attention.

Berkeley's 2007 Health Status Report showed that health inequities in Berkeley haven't changed much since the 1970's, although "health inequities" has replaced the term "health disparities." Now we broaden our thinking to include social justice and the causes of ill health that are rooted in social determinants. Here we also find avenues for solutions that go beyond the medical model.

Achieving health equity is clearly a task that is bigger than what the Public Health Division can do on its own. Health inequities are also affected by the economic and physical environments, and changing these environments requires concerted effort on many fronts by many people. If we are to

succeed in achieving health equity, we will need to collaborate with neighboring public health jurisdictions and city agencies, as well as professional, academic, and community organizations. We should also partner with the people in the many communities that make up the City of Berkeley and ensure that we listen respectfully to all of their voices.

This is an exciting time to work on health equity in Berkeley. Both the Berkeley Public Health Division and Alameda County Public Health Department are addressing health disparities. The Berkeley Unified School District and Berkeley's City Council have adopted the "Berkeley 2020 Vision," focusing on the achievement gap in Berkeley's schools. The recent PBS television series "Unnatural Causes" has provided us with an excellent tool for sharing these complex ideas with the community and potential partners.

These are financially challenging times for local health departments in California. State and federal budget cuts have already begun to have an impact on us. The economic downturn will put more people in need, particularly those who already bear the burden of health inequities. More than ever before, we will need to focus our efforts and prioritize the use of our limited resources.

I feel fortunate to work with a talented, experienced, and dedicated group of people, many of whom have weathered challenging times in the past. I am confident that we can meet these challenges and continue the work that needs to be done to achieve health equity in Berkeley. It is a real privilege to be part of the Berkeley Public Health Division in these times.

## Public Health Heroes Awards Ceremony

### Honoring:

Paul Farmer MD, PhD  
John E. Wennberg, MD, MPH  
Betty Moore  
WiRED International

**Wednesday, March 18, 2009**

Yerba Buena Center for the Arts,  
701 Mission Street  
San Francisco, California

Reception: 6:30 pm  
Dinner : 7:30 pm

Tickets: \$250

For more information please call 510 643-6382



Current Students:

# Hideto Saito

MD, Candidate for MPH 2009



“Chill:” this is the first advice that Nap Hosang had for me as he tried to calm me down over the phone where I was sitting in Olympia, Washington. It was late November 2007, just before the application deadline, when I found myself preparing last-minute application materials for the Interdisciplinary Program. I had only just found about the program. I had imagined myself in Australia or New Zealand as a family physician after I finished my residency in Olympia in summer 2008. But when my residency program told me about the Interdisciplinary MPH program at UC Berkeley, a whole new world of possibilities opened up for me.

It has long been my dream to go to less developed countries in Africa or Asia to work as a physician and to help people. I was born and raised in Tokyo, Japan, and have three sisters. My father is a gastroenterologist and he works at clinic next door to our house. Learning from him, and hearing about people suffering from drought, poverty and lack of hygiene in less developed countries, I decided that I would cross the oceans to help people in whatever way I could.

I spent six years of medical school in Sapporo, Hokkaido — a beautiful land full of frontier spirit. My school motto, “Boys, be ambitious!,” originated with William Clark, an American professor from Massachusetts. I decided to pursue family medicine. Primary care, which deals with a variety of people and problems and cares for the whole person, seems to be the ideal and most challenging and rewarding path for me to follow. A one year internship at the U.S. Naval Hospital in Yokosuka,

Japan gave me an understanding of American medicine before I began my residency in Washington.

My three years in Olympia were challenging, coming as I did from a very different country and jumping straight into a new life as a resident. During my residency I had an opportunity to visit Ilam in eastern Nepal, working in a small hospital with other three physicians for one month. It was striking to see women in labor who had failed deliver at home, being transferred to a hospital dying, or with dystocia. It was frustrating that I could not provide basic care that I took for granted in the U.S. We had to do manual ventilation for a pneumonia patient.

I received the Mark Stinson Fellowship for a post-residency in global health and underserved care, a program run by Contra Costa County Health Department. The Interdisciplinary MPH is part of the fellowship. I work at Richmond Health Center in Contra Costa County as a family physician twice a week and go to school full time. Practicing clinical medicine while studying public health is an interesting way to experience how the public health issues I’m learning about at school impact people’s lives at the individual level.

My Interdisciplinary classmates come from a variety of backgrounds and interests. We motivate and help each other, and we are supported by attentive faculty. We have a wonderful choice of classes for electives. Professors with different expertise and perspectives provide me with very practical approaches to problem solving. For example, I can see some solutions to the problems in Nepal in what I’ve learned in Malcolm Potts’ family planning class and in Art Reingold’s outbreak investigation course. There is so much to learn – I will never stop being intrigued and excited by public health!



## Career Café

Tuesday, February 10, 2009

Alumni House,  
UC Berkeley

Current School of Public Health students mee with alumni and other public health professionals to discuss career opportunities in the field of public health. To volunteer your experience, please email Ruthann Haffke in SPH Career Services, [haffke@berkeley.edu](mailto:haffke@berkeley.edu)

*Alumni Update:*

## David Dodds

PhD, MPH 2004



I have a strange resumé. Maybe that's why the Interdisciplinary MPH program fit my needs so well. During my childhood years I lived in southern California and Mexico. During my teen years, I lived in Amazon region of Peru where my father worked in public health and as a missionary physician, and my mother worked as a technical writer, school counselor, and high school teacher.

In college, I settled on a bachelor's degree in religious studies. This major required the least number of courses compared to other majors, and allowed me to take additional interesting classes like philosophy and writing, and to travel to Israel, Greece, and Rome. Because I could speak Spanish, I was hired soon after graduation by World Relief to work in Honduras as a refugee coordinator for Miskito Indians who had fled Nicaragua during the Sandinista regime. My experience in assisting refugees with resettlement issues such as housing, agriculture, health, and education led me to investigate anthropology as a possibly useful applied social science. After being accepted into UCLA's anthropology program, I returned to Honduras to do field research and write about Miskito land use for my master's thesis. Later, for my doctoral dissertation, I returned to Honduras as a Fulbright-Hays scholar to research the relationships between population, deforestation, agriculture, and the Miskito household economy in the Rio Plátano Biosphere Reserve.

After two postdoctoral fellowships in demography, one at Berkeley and one at Indiana University, I landed a RAND Corporation Central American Grant to interview 200 indigenous women about their reproductive histories and use of family planning methods. The goal of this research was to better understand fertility and mortality among the Miskito, Pech, and

Garífuna peoples including access to contraceptive technology and causes of infant mortality. I also continued my research on population and deforestation, adding analysis of satellite imagery and "ground truth" visits to my fieldwork.

My demography skills eventually led me to California state government where I first worked in the Demographic Research Unit at the Department of Finance. Later, at the California Department of Social Services, I collaborated with research scientists at the California Department of Health Services to test the development of a child abuse/neglect surveillance system funded by the CDC. My role was to develop a child mortality file from child welfare data as one source for the test surveillance system. One interesting bit of work was the research I did using California's child welfare management data system to better understand the links between the child welfare population and programs such as Temporary Assistance to Needy Families (TANF).

I was having a good time with these research challenges, but then the 2003 state budget crisis came and I was placed on notice for possible layoff. So I applied to UC Berkeley (why not go back to school?) as a backup plan. The layoff did not happen, but I was so pleased when I was accepted to the Interdisciplinary Program in the School of Public Health that I decided to go back to school anyway. My goals in attending the program were to increase my skills in quantitative analysis and to broaden my options for research employment in public health. I especially liked the Interdisciplinary Program because it was two semesters long and offered flexibility for me to take coursework useful for government work, such as survey sampling and non-profit financial management. The program achieved both goals for me.

Currently, I work as a Research Scientist in the epidemiology unit of the California Department of Public Health's Maternal, Child and Adolescent Health program. I am involved with various projects such as the annual Title V block grant report to the federal Health Resources and Services Administration, vital statistics measures, and the Black Infant Health program. Part of my work is very quantitative, using SAS to assess measures or trends in outcomes such as infant mortality, low birth weight, and pre-term delivery in various California populations using birth and death certificate data. Much of my time is spent on the Black Infant Health (BIH) program for which I am the primary data analyst. The program was created in 1989 to decrease high infant mortality among African Americans. Currently the program is undergoing an extensive review involving UCSF researchers, state public health experts, and local health jurisdictions. The review often requires special data analyses using vital statistics data or the BIH case management database and, occasionally, special reports to executive managers or legislators. Most recently, I've been involved in assisting in the design of maternal-child health curricula that may be used as part of binational public health training between the United States and Mexico.

I feel very fortunate to be a graduate of the Interdisciplinary MPH Program. I truly enjoyed the coursework, faculty, and my fellow students. I am inspired by reading this newsletter to learn what other graduates are doing around the world.

Interdisciplinary MPH Program  
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WE'D LIKE TO HEAR FROM YOU....

Please clip and mail to *Interdisciplinary Alumni and Student News*, UC Berkeley School of Public Health, c/o 50 University Hall, Berkeley CA 94720-7360, fax to 510 643-6981, or email [lsputz@berkeley.edu](mailto:lsputz@berkeley.edu).

Name \_\_\_\_\_

Address changes (mailing, email) \_\_\_\_\_

Update on work and family information \_\_\_\_\_

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