Berkeley Public Health

Interdisciplinary MPH Newsletter

Spring 2022

Alexia Charles

IPMPH 2022

Greetings from Berkeley!

My careers in medicine and education have been the outcome of a long journey in public service that ultimately led me to pursue my MPH in the Interdisciplinary program at UC Berkeley. As I approach the end of this program, I cannot imagine a better way to bring together my various professional experiences and align them with my goal to find meaningful ways to have an impact on lives of minority youth, particularly in low-income Black communities, both within and outside of the clinical setting.

Berkeley has truly transformed my perspectives.

As a pediatrician and former middle school teacher, caring for adolescent and teenage patients has always been an especially rewarding part of what I do. Now, after focusing my MPH studies in Maternal, Child and Adolescent Health, I see this subpopulation in a whole new light. Public health and developmental insights on this age group have added a great deal of depth, perspective and understanding to how I approach my adolescent patients and conduct confidential teen visits. Having learned about the life-course perspective and socio-ecological models, I now have a whole new meaning for how to approach patients, their caregivers, and surrounding communities from a truly holistic perspective.

Throughout this year, I have had so many *ah-ha moments*, where I discover there is a term, theory, or language for ideas I have spent much of my professional life discussing. Learning about concepts such as lived experiences, positionality, and leveraging policy to support systemic change has given me the ability to foster productive, interdisciplinary conversation around methods that are essential in achieving health and racial equity. My introduction to asset-based framing has transformed my language and approach from serving *at-risk youth* and focusing on addressing those deficits, to framing them as youth with incredible potential for growth and accomplishment. It has informed my thinking about how to build upon those strengths while providing appropriate opportunities and a nurturing environment with capacity-building for better, sustainable outcomes.

This year at Berkeley has also transformed my perspectives on an area of study I've sincerely enjoyed diving deeper into: Trauma-Informed-Care (TIC), Resilience, and Adverse Childhood Experiences (ACEs). So much of the research I've come across while studying at Berkeley has broadened my perspectives from focusing on ACEs and screening to considering the broader term of TIC, and related areas of positive childhood experiences, protective factors, resilience and so much more.

Being a part of this interdisciplinary cohort has exposed me to the breadth of professional experiences and areas of interest within public health. Working through our capstone projects, giving each other feedback, supporting each other through challenges, and learning about everyone's particular areas of interest and expertise has been a genuine pleasure that has enhanced my learning experience. The relationships built here have expanded my professional network and created life-long friendships.

Another great opportunity I was able to take advantage of here at Berkeley was the micro-courses. I never imagined I would be so excited to attend class on a Saturday! But these courses are truly one of the best kept secrets at Berkeley School of Public Health. The micro-course I took on Community Engagement was truly one of the most impactful elements of my Berkeley experience. It exposed me to well-known leaders in Social Determinants of Health and introduced me to critical concepts in the pursuit of equity, such as shifting power dynamics, participatory methods for research, the power of storytelling, and giving voice to communities served, through platforms like PhotoVoice.

Moving forward in my career, I cannot wait to apply all that I have learned at Berkeley in my professional roles. After graduation I will be relocating to Miami, Florida to practice primary care Pediatrics at a Federally Qualified Health Center and build relationships with minority communities through youth-based community engagement. I now feel I have the practical skills to build lasting partnerships with communities and practice community engagement through a participatory approach to ultimately shift power dynamics and transform systems to address root causes of inequities.

Not only has my MPH experience enhanced my clinical practice of Pediatrics, but it has reignited my passion for communing with youth in their safe spaces and finding meaningful ways to interact with and positively influence them during some of the most formative years of life!

Ignacio "Nacho" Santana

IPMPH 2022

In July 2021, I started my medical training as a specialist in occupational and environmental medicine (OEM) at the University of California, San Francisco. While not a well-recognized specialty even within medicine, I was immediately drawn to it given the broad applicability of related skills to areas beyond medical care. As a very broad discipline, OEM specialists take on roles in regulatory agencies, public health departments, academic research in epidemiology, multinational corporations – and often, a complex combination of these jobs. More importantly, I've found seemingly endless opportunities to apply the skills of this specialty to make a meaningful impact on a population level, which has been a recurrent underlying theme of my past and current experiences.

Prior to continuing residency at UCSF, I spent one year working for the University of California, Merced as a research scientist, consulting for and helping to design a study of agricultural workers in the San Joaquin Valley of California. This job was one of the reasons that I decided to pursue a residency in OEM, given that agricultural, forestry, and fishing jobs are among the most dangerous jobs worldwide. More importantly, it helped me realize that obtaining a proper education in the fundamentals of public health was essential to be able to design and conduct ethical and effective research, and so attending UC Berkeley's world-renowned School of Public Health as part of my residency experience was a major reason for choosing this specific residency program.

My original introduction to research was via a Brown University and Rhode Island Hospital collaboration assessing the feasibility and acceptability of using Google Glass in a clinical setting, a device that, while now obsolete, was cutting-edge technology when I was in my first year of medical school in 2013. Here, I learned the technical and analytical skills and responsibilities required of an effective research assistant, while at the same time helping me to the develop the communication skills required to effectively navigate between researchers and research participants. Still, at the time, my focus in terms of career development dealt mainly with clinical experience, with little expectation that research would play a role in my future.

However, this all changed with my time working with UC Merced, and my focus on public health research has really come to life at UC Berkeley. As part of my residency training, I had the fortune of connecting with highly accomplished UC Berkeley and UCSF researchers Drs. Stephanie Holm and John Balmes to begin working with data from their Children's Health and Air Pollution Study (CHAPS) cohort. Using this data, I am currently evaluating whether there is an association between prenatal air pollution exposure and the development of obesity among children living in the San Joaquin Valley, an area that I still consider home.

At the same time, Anke and Karen have been instrumental in helping to guide me, and I'd even be willing to bet all of us in the Interdisciplinary Program, through the entire MPH- and capstone-completion process. Completing what is essentially a 2-year curriculum over the course of one year is a tremendous challenge, even overwhelming at times, but support from colleagues, course instructors, and career mentors has made the challenge easier to manage. Through the collective guidance of all my mentors, I am extremely thankful to be learning fundamental concepts of public health while learning to code in R Studio, in addition to learning to critically evaluate research results from both work of others as well as my own, and I look forward to utilizing all that I've learned so far throughout my career.

Despite anticipating receiving my MPH degree in May 2022, I intend to continue my research efforts through my CHAPS collaborators and the Targeted Research Training (TRT) in Occupational Health program, sponsored by UCSF in collaboration with UC Berkeley, which will provide the ideal opportunity to continue honing the skills that I have been refining during the last year. Ultimately, I hope to continue carrying out effective research and translating it into effective action, so that I may become a leader and advocate in my field of occupational medicine.

Giulia Balconi

IPMPH 2022

I can't believe this incredible experience is almost over. I started the Interdisciplinary MPH in July 2021, attending online classes from my room in Italy, and dreaming about what was waiting for me on the other side of the ocean. And here I am, after nine months, in Spring 2022, almost at the end of this adventure, only two months away from my graduation.

As an international student coming from a business background, this experience was a unique opportunity for me to learn about public health and understand how I could use my economic and financial expertise to work for something I was deeply passionate about. I have always been interested in healthcare. After high school, I was undecided between pursuing medical school and studying business administration and management. I opted for the business path, which eventually brought me to the finance world. After my Master of Science in International Management, I started working in Investment Banking in London, UK. I was still in the United Kingdom, working in finance, when COVID-19 started spreading across Europe. The pandemic and the lockdown changed my routine as I started working from home. This new situation forced me to take one step back and question myself about my future. This was when my interest in public health started to grow, and when I decided to pursue a Master of Public Health.

When I came across the Interdisciplinary MPH Program at UC Berkeley, I immediately felt it was the right choice for me. This program welcomes students from several different backgrounds, and it is unique in its structure. It was the perfect bridge between my previous experience and my future career objectives. My main interests were global health and health technology, and this program gave me the opportunity to shape my academic curriculum and explore these areas while building a solid knowledge of public health.

Due to COVID-19 restrictions, I started my classes remotely in July, and I only received my visa to move to the United States at the beginning of the Fall Semester. Therefore, I attended the first two months from Italy. At the beginning, it was a bit hard to get used to taking overnight classes. Lectures used to start at 6pm and end around 2am for me, due to the different time zones. Nevertheless, I quickly got used to this new routine: I was studying during the day and attending classes in the evening. Since I took both Biostatistics and Epidemiology during the Summer Session, I had the flexibility to follow more electives and shape my curriculum based on my interests in the Fall Semester. 42 units in 11 months can be challenging, so I had to carefully plan my schedule to have enough time to follow all my classes. I decided to take as many units as possible in the first semester (I took 21 in the Fall) and to have more flexibility in the Spring. Indeed, as an international student, it was extremely important for me to have more time in the Spring Semester to apply for jobs and complete the OPT (Optional Practical Training) request on time to allow me to work in the US for one year after graduation.

As someone coming from a non-medical background, I knew the MPH was a unique opportunity for me to learn about what I had never had the chance to explore. Nevertheless, with only 11 months to complete the program, it was important for me to focus my curriculum on a few main topics. Since my main interests were related to global health and health technology, I decided to dedicate the Fall Semester to fulfilling the Global Health Certificate requirements, and to commit to exploring different health technology areas in the Spring Semester. In the Fall, I took classes like Foundations of Global Health, Global Health Policy, International Maternal and Child Health, and Outbreak Investigation. In the Spring Semester, I chose classes about Biomedical Innovation, Innovations in Healthcare, and Digital Health. I am particularly interested in the role of vaccines and vaccination campaigns in the world, and I decided to focus my Capstone Project on this topic. I am currently exploring COVID-19 vaccination campaigns across the world, with a policy analysis that will help me to understand successful and failing approaches, and to develop recommendations for potential future policies.

Looking back to the past months, I can say that I have had an incredible experience in Berkeley, and I have met amazing people. Since the beginning of the Summer Session, I found a lot of support from my classmates. Despite having met via zoom for the first two months, we managed to support each other, and we created friendships that became even stronger when we finally met in person in the Fall Semester. The Friday afternoon sessions were our weekly meetings, and the seminar lectures represented for me an invaluable support, both academically and emotionally.

As a student coming from another country, I also want to mention how beautiful the Bay Area is and how incredible this University is. It is a dynamic place, full of smart people and extremely supportive professors. I came here completely alone, but I have never felt lonely throughout the year. With COVID-19, at the very beginning, it was hard to meet people and build relationships. Social distancing and masking were not helpful to socialize and make friends. Nevertheless, the Interdisciplinary MPH cohort was very supportive, and they helped me to go through the hardest moments.

As I am approaching the end of the MPH Program, I am working hard to finish my Capstone Project while searching for jobs. My hope is to find a position that would allow me to value both my business background and my public health expertise. I feel this year at UC Berkeley helped me to grow both personally and professionally, and I am excited to see what the future holds for me after my graduation.

Katrina Sesline

IPMPH 2022

I decided to apply for MPH programs about four weeks before application deadlines. For context, this was right before the Delta COVID-19 surge that swept us back off our feet for a second time during our first year living in the pandemic. I was working as a medical social worker on the Liver Transplant service at Stanford Hospital. For most of us, our mental health was dramatically impacted by social isolation, loss, grief, and ongoing uncertainty about what would happen next. On the liver transplant service, we were seeing an increase in very young people whose alcohol use was exacerbated by the pandemic. They were going into sudden, acute liver failure, and their pathway to a transplant was unlikely due to sobriety requirements for eligibility. Myself and colleagues were quickly burning out from seeing the downstream effects of our failing mental health and substance use treatment systems of care exacerbated by the conditions of COVID.

This, in combination with the aftermath of George Floyd's murder and the stark COVID-related racial disparities that had become all too apparent, I was left feeling helpless about my ability to effect any meaningful change in my current social work role. I decided it was time to come back to school to develop more concrete policy advocacy skills. By the time I got the news that I'd been accepted into UC Berkeley's accelerated MPH program, it was a no-brainer - I was ready!

July quickly came around and we got news that summer classes would be held over Zoom with the plan to resume in-person instruction in the Fall. I would not recommend Statistics and Epidemiology over Zoom to my worst enemy. The pandemic continued to rage on, and I was learning to be a student again after several years in the field. It was hard making connections with other students in the cohort, and yet at the same time I had so much anxiety related to the idea of returning to in-person life in the Fall. Despite that, coming to campus for the first time was truly a breath of fresh air and changed the game in terms of my ability to feel engaged in the program.

Over the next two semesters, I tried to maintain intentionality and drill down on why I came back to school in the first place by way of the courses that I decided to enroll in. In the Fall, I took the Policy Advocacy class and Evaluation of Health and Social Programs. In the Spring, I really took advantage of the flexibility of the Interdisciplinary Program to carve out my own internship. I did this by approaching my Policy Advocacy professor and seeing if they would be willing to connect me with an organization that I could work with while receiving Independent Study units to satisfy an elective requirement. They said yes! I was ultimately placed with John Burton Advocates for Youth (JBAY), a local nonprofit that advocates for youth who have been in foster care or experienced homelessness. JBAY's mission was aligned with past work I had done with systems-involved youth, and I couldn't wait to get started. During my time with JBAY, I participated in coalition meetings, wrote advocacy letters for state legislators, developed fact sheets about the health and mental health impacts of experiencing homelessness. I also housed my capstone project within my work at JBAY by developing a survey to assess county-level progress on the implementation of a new guaranteed income program for pregnant foster youth in California.

And that brings me to my capstone. I wanted to be sure to share a lesson learned in hopes that it may help another student in the future. Initially, I landed a quantitative research project with a pretty remarkable reproductive health research team. I was so excited about it, and eager to try to develop my very rusty statistics skills in hopes to be a more effective research partner in the future. With about three months left until graduation, the project was not going as expected. I didn't feel like the project was a good fit for me overall, and I wasn't confident that I had the support needed to carry it out to the end. When I approached my program mentor Karen, her steadfast support in my decision-making process was key. She heard me out, validated my experience, and helped me strategically think through my decision to switch gears and take on a project with JBAY's team instead. This was the best decision I could have made. Despite making this change right in the home stretch of the program, I ended up with a project that was more aligned with my goals and passions, and I never once regretted the choice I'd made.

All this to say, throughout the program I encourage you to practice ongoing self-reflection. Don't be afraid to try something new, but at the same time, pivot when you need to pivot. Stay true to your goals and get creative about what you want to extract from this program. Anke and Karen are true advocates and mentors and will encourage you to run with the ideas you have along the way. As I think about next steps during the last few weeks of classes, I know I am exiting this program better equipped to bump up against our social systems and disrupt the status quo.

Pratik Chhetri

IPMPH 2018

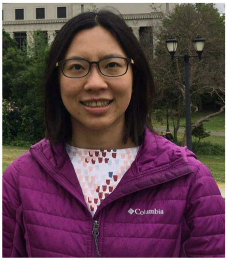
When I joined Berkeley for the Interdisciplinary MPH in 2017, I had just started healing from a deeply hurtful institutional racism from an academic institution in the Midwest. Even though I had been the recipient of the 'Einstein visa' for my 'extraordinary ability' in global health and biosciences years prior, the racist incident had single-handedly tanked my self-confidence, self-esteem to the lowest of lows. Admission to UC Berkeley in itself was a validation to my credibility and my worth. In a post-2016 political era, being a brown immigrant, having suffered through multiple traumatic experiences in this country– the most hurtful of all– the institutional racism at the "Midwest Nice" university, Berkeley's progressive "bubble" was the most effective bubble I had to be in, to heal, to feel like myself again, and to restart seeing myself as a global health leader again.

Eight years prior to joining UC Berkeley, during my early undergraduate years, my global health journey had begun as a chapter leader of an international non-profit, Universities Allied for Essential Medicines- UAEM, focused on equitable access to medicines and other biomedical innovations globally. Over the years since, I served on global governance committees, North American Board, and through various leadership positions in the organization. It is through UAEM that my work had spanned from debating global trade laws and intellectual property laws with representatives of giant pharmaceuticals to negotiating with country delegates to push for progressive policies at the World Health Assembly. Enrollment at UC Berkeley's Interdisciplinary MPH program did not only provide me with an opportunity to get a sound theoretical base of global public health, but also to continue to learn from the world's best and the brightest on various interdisciplinary aspects of global health.

During my time at Berkeley, I took a course from President W Bush's economic advisor, audited another one with President Clinton's Labor Secretary, and sat down with President Obama's economic advisor discussing a project. And thanks to the flexibility of the interdisciplinary program, I took courses at the law school, business school, policy school, not just the public health school. Where else would I be able to do all of that at a single campus? Furthermore, I had an opportunity to work with an amazing advisor, Dr Sokal-Gutierrez on a global health research project based in my home country Nepal. In fact, for most of the courses whenever feasible, I wrote class research papers on topics related to Nepal.

In fact, doing this gave me a clarity on what I really wanted to do after graduation - primarily basing my work in Nepal and South Asia. Since my graduation from Berkeley, I have mostly worked in Nepal and India, on global health, education and leadership development areas. Among others, my organization (Authentic Leadership Institute Nepal, ALIN) is currently wrapping up a project on urban poverty mitigation. Also, ALIN has just started an innovative 'Solutions Fellowship' program that brings bright youths from various disciplines from all over Nepal, toward interdisciplinary solutions to critical issues of national and global concerns. Recently, I have also started working with the Bhutanese refugees in the US, mostly centering around youth leadership and community strengthening. With Berkeley's education and exposure, and prior skillset, my team also parallelly provides leadership workshops, training, experiences to various corporate and non-corporate spaces. We have already worked with teams from Switzerland, Germany, India, Australia and others, and organized two global leadership conferences in India in 2019.

Yes, the courses at Berkeley were some of the toughest ones in my academic career, and I struggled through some of them. But I thoroughly enjoyed my entire time there and only have positive reviews, mostly because of the rich, inclusive, progressive culture the campus culminates, and the concentration of global who's who, most of whom are so very down to earth. Berkeley not only gave me a degree, but also a boost in confidence and a positive when I was at one of the lowest in my life. During my free time in the Bay Area, I walk around Berkeley's campus, for it provides me with immense positive energy immediately.



Sheng-Pei Wang,

IPMPH 2022

I'm a dermatologist from Taiwan and moved to the United States after completing my residency training in 2018. My first stop was doing a wound regeneration project in a basic research lab at the University of Southern California. It fulfilled my curiosity to look beyond the clinical manifestation of disease and investigate the underlying mechanism. It was also humbling to experience the diligence, perseverance, and multidisciplinary collaboration required to complete the project. Yet the time spent with mice and pipettes also made me realize that my passion lies in conducting research that collects human data and can be more readily translated into impacts on human health. When my research project was close to being published, I started to consider acquiring training in clinical and translational research.

At that time, I was choosing between programs in Master of Clinical Research and Master of Public Health (MPH). The Master of Clinical Research program teaches research methodology, statistics, and ethical and regulatory guidelines for patient-based research; while the MPH takes a broader perspective to understand health. I don't know what I would experience if I had chosen to study clinical research. But I am really grateful that I chose to enroll in the Interdisciplinary MPH program at UC Berkeley.

The past 10 months at Berkeley were full of pleasant surprises, and the impact this program had on me was way beyond what I had imagined. During the intense summer course, I discovered that I enjoyed learning and using R. The summer PH142 course was nicely designed and taught by Prof. Mi-Suk Kang Dufour, and this wonderful first encounter with R and statistics encouraged me to take more stats courses in the Fall and Spring semester. I also chose to develop my capstone project on secondary data analysis – I work with Dr. Katrina Abuabara to understand how environmental microbes are associated with the prevalence of allergy disease. It was at times stressful for a beginner like me to take on the challenge of linking large and complex data sets from the microbial and allergy databases. But it's thrilling to be a part of a multidisciplinary research team and explore the research question that I'm truly passionate about.

The MPH program also completely changed how I understand health and what I can do to improve health. As a provider, I used to understand health at the disease, organ, or individual level and follow guidelines to treat disease. In my senior years of clinical training, I gradually came to realize how limited pharmacological therapies are, and how stress, poverty, and many social determinants are affecting health. But I did not have the tools to tackle these big and complex issues and felt powerless. Throughout the MPH training, I was exposed to courses in Health Policy and Management, Health and Social Behaviors, and Environmental Health Sciences. Each breadth course expands my understanding of health in its unique way and complements my global view on health. The Changemaker Curriculum also trained me to think about the policy implications behind the research, and made me feel responsible for bringing about the change that I want to see. Growing up in a culture where we were expected to follow orders from a higher hierarchy, I feel empowered to transition from a follower to a changemaker-to-be.

Last but not the least, what I appreciate most about Berkeley is the people I met here. I learned immensely about diversity, equity, and inclusion from the colleagues in my cohort and the Berkeley School of Public Health. It's inspiring to work with colleagues who exude their genuine and tender care for marginalized communities and are passionate about realizing social justice and health equity. The mentorships I was able to develop in the past months are also deeply treasured. Our program advisors, Anke and Karen, are always there for us on any big and small matters. Also, every faculty at UCB SPH makes themselves available and encourages us to discuss everything – from course materials, teaching styles, career aspirations, imposter syndrome, and selfcare, to social justice and equity – with them. The insightful conversations with the faculty comprise an indispensable and enjoyable part of my learning.

When I decided to move to the US, I faced many questions. The questions came in different forms but boiled down to this – Will starting a new life in the US be better than being a dermatologist in Taiwan? I wasn't confident at that time, and I probably will never have the answer to this question because of its counterfactual nature. What I know is that 2018 marked the start of my journey to becoming a more resilient, grateful, and compassionate human being. What I know is that I'm glad that I spent a year at UCB SPH, where my passion for making this world a better place through healing was reignited and deepened. After completing the MPH training in May, I aim to continue my capstone project and also further explore my interest in the intersection between dermatology and mental health. Can we use stress-reduction techniques to control disease flare-ups in patients with chronic inflammatory skin disease, and to what extent? Are dermatologists aware of internalized skin disease stigma of patients, and how can we approach this? What is behind the hype of cosmetic procedures, how are they changing our perceptions, and do they really make people feel better? Hopefully, these are the questions I'll be answering in the following years.

In Memoriam:

Patricia (Trish) Hom MD, MPH

Class of 2013

It is with deep sorrow that we are letting you know that Patricia Hom, our alumna of the Interdisciplinary Class of 2013, passed away from lung cancer on 27 December 2021 in San Francisco. She was 40 years old. She took her last breath while she was on home hospice, surrounded by her family.

A native of San Francisco, Trish attended Hoover Middle School and Lowell High School. Shortly after graduating from high school, she had two beautiful sons Nathan and Andrew, who are now students at UCLA and UC Davis. Trish then took her children to UC Berkeley every day, where she graduated with honors with a double major in Integrative Biology and Molecular Cell Biology. She attended medical school at UCSF, and also completed a Master's degree in Public Health from UC Berkeley evaluating Mindfulness Centering Pregnancy Care for Teens at Richmond Hilltop Highschool in Richmond, all while raising her sons.

Trish matched to Harbor-UCLA for OBGYN residency, where she took her experience as a teen mom to care for underserved women of Los Angeles. Trish cared deeply for her co-residents - she trained many doctors who practice today. Trish served as Wellness Chief and received the "Teaching Resident of the Year" award as Chief Resident.

Trish was diagnosed with Stage 4 ALK-positive lung cancer three days after completing her OBGYN residency in July of 2017, and lived with cancer for 4 years. She was unable to practice medicine after her diagnosis. She became an advocate for lung cancer research, even presenting to Congress to demand more funding for research, and was a member of UCSF's (Female Asian Never Smokers) FANS study.

After returning to San Francisco, she met her husband, Alvin. Their romance blossomed through her cancer therapy and the COVID pandemic, and they married in December 2021. They shared wonderful walks on the beach and a love of Hawaii.

Family, friends and classmates will always remember Trish by her unbounded kindness and generosity, her curiosity for and knowledge of endless subjects, and her disarming sense of humor. She is survived by her husband Alvin, her sister Felicia, her brother Kenneth, her mother Margaret, and her sons Nathan and Andrew.

Patricia's last version of her website, The Cancer Prancer, remains accessible.

Faculty Corner:

Prof. Karen Sokal-Gutierrez, MD, MPH

I'm concluding my 5th year teaching in the Interdisciplinary MPH program. I've greatly appreciated co-teaching with Dr. Anke Hemmerling and working with our students. I've particularly enjoyed seeing the interprofessional learning and support among our students, and mentoring students through their capstone research process over the course of the year—starting with the seed of an idea, connecting with mentors, detailing research methods, analyzing data and generating results, and finally developing important recommendations for improving population health.

This will be my last year teaching in the program. Over recent years, I've assumed increasing responsibility to help my elderly mother and young grandchildren; and I've turned 65, and 'feeling my age.' I've decided to reduce my workload to spend more time caring for my family and myself, and to enjoy creative endeavors (e.g., art, music, writing, gardening, cooking, etc.). I also believe that it's the right time for me to step aside from my teaching position and support the university to hire talented younger faculty members from diverse backgrounds. I know that I'll miss the joys of teaching, but I look forward to continuing my research and advocacy on child nutrition and oral health, staying in touch with former students and colleagues, and exploring a new chapter in my life.

This spring, I received an award for teaching and mentoring at the UC Berkeley-UCSF Joint Medical Program (JMP), where I've taught for the past 20 years. To prepare for the award ceremony, I took some time to reflect on my two decades of teaching medical students, MPH students and undergraduates. I'm grateful to know that I've had a positive impact on hundreds of students, who've gone on to become outstanding health professionals, educators, researchers and advocates. I'd like to share with you a couple of the lessons that I've learned about being a teacher and mentor:

Early in my career, an eminent psychologist taught me that her philosophy for working with parents to support child mental health was a slight variant of 'The Golden Rule': "Do unto others as you would have them do unto others." This has been the heart of my teaching philosophy – That to teach students (future health professionals) to listen to patients and community members, respect them, care for them, and help support them to care for themselves and their families and communities, we educators need to treat our students that same way – listening to the students, respecting them, caring deeply for them as people, and supporting students to care for themselves, their classmates and loved ones.

One of my friends observed that my approach to teaching resonates with the story of a student who asked a Buddhist monk, "How should we treat others?" The monk replied, "There are no others."

Recently, I had a chance to review years of student evaluations of my teaching, which was heartwarming. In addition to appreciating my research advice and challenging exams, many students said, "Karen doesn't just see me as a student, she sees me as a full human being." One student said, "Karen isn't just a professor, she's a real person." For me, that's the simple heart of it.

Many thanks to Anke and to our wonderful colleagues and students for including me in your learning community. I look forward to continuing to share your successes in the future.

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