Welcome to another issue of The Scoop! COVID-19 continues to remind us of the paramount importance of public health and social justice. The disparate and devastating toll of the pandemic on marginalized groups, and vulnerable displaced populations around the world is a result of vast health disparities and inequities. The unacceptable violence in the U.S. against Black, Asian and other communities shows how much we need to do, individually and collectively, to create an antiracist and inclusive society. Our mission as public health professionals is to ensure every person’s right to health, dignity, safety, and wellbeing - locally as well as globally.

I am extremely encouraged by our domestic vaccination roll-out. It will save countless lives and livelihoods. But, domestic programs alone will not bring an end to the global pandemic. The U.S. administration should lift its blockade of the “Waiver from Certain Provisions of the TRIPS Agreement for the Prevention, Containment and Treatment of COVID-19”. With global supply limited, many people in low- and middle-income countries around the globe will not have vaccine access until at least 2022, according to the British Medical Journal. The Economist Intelligence Unit reports that most of the world’s poorest countries will have to wait until 2024 for mass immunization if current trends continue. Such global inequity will lead to needless suffering and loss of life and will mean greater risk of new variants against which vaccines are not effective and that can evade the antibodies developed by survivors. Without action, the health crisis and resulting economic crisis here and worldwide will continue. An International Chamber of Commerce report concluded that the current best-case scenario of wealthy nations being fully vaccinated by the middle of 2021 and poor countries

continued on page 2

In March 2021, a group of Icahn School of Medicine at Mount Sinai MD and MPH students continued a decade-long partnership with the Southeast Arizona Area Health Education Center (SEAHEC) located in the US/Mexico border city of Nogales. In lieu of visiting the region, SEAHEC organized a 3-day immersive virtual experience in which students learned about rural health, border health, and Native American/tribal health. Speakers included Kendall Jose, Vice Chairman of the Chukut Kuk District, Mercedes Gameros, MD, Director of the Centro de Salud Urbano Nogales, Sonora, and Border Patrol Agent Jonathan Hulog.

“I really loved that we got the chance to talk with a leader of the Tohono O’odham Nation, whose ancestral lands are bisected by the border wall. He walked us through how they provide care to their people on both sides of the border in spite of challenges posed by citizenship and the wall, and I appreciated his perspective on how they collaborate with both US and Mexican local, state, and federal governments.” – Jennifer Ren, MD Student

“Each session that we went through taught us something new. We had great conversations that allowed different approaches, opinions, and cultivated thoughts on what we are learning and how we can implement that into our future career.”

– Apeksha Tayal, MPH Student

Kendall Jose, Vice Chairman of the Chukut Kuk District, sharing the history and impact of the US/Mexico border diving the Tohono O’odham Nation. The participating students also learned about the impact of COVID and community efforts made to ensure people in the nation had access to food, water, and education on vaccinations.
Amongst the uncertainty and tension of the COVID-19 pandemic, the pain and distress of racism and bigotry have become even more dire. The recent increase in anti-Asian attacks is devastating and has jeopardized the safety of many lives.

An 84-year-old Thai immigrant in San Francisco, California, died after being violently shoved to the ground during his morning walk. A man kicked a 65-year-old Asian woman to the ground in broad daylight on a Midtown Manhattan sidewalk, stomped on her several times, and made anti-Asian remarks.

These acts of violence have sent waves of grief through the Asian American community. Following the tsunami of COVID-19 infections throughout America, this pandemic also unleashed a flood of xenophobia, hate, and scapegoating. While the past year has highlighted the prevalence of Anti-Asian racism, there is a history of exclusion, mistrust, and harmful stereotypes that continues to harm the Asian community.

While the threat of physical harm from anti-Asian attacks looms over the head of the Asian community, there has also been a toll on their emotional and mental well-being. Within our own Mount Sinai community, students have spoken up about their worries of safety. “I don’t go out anywhere alone anymore because of the anti-Asian incidences that have been occurring” – Tania Chen, MPH student. “I tell my family and friends to not let their elderly parents go out alone because they may become easy targets” – Wan Wen (Jovana) Zhu, MPH student. The stress about the rise in anti-Asian violence has inflicted fear that stretches far beyond the direct victims of these hateful words and violent incidents.

In addressing racism toward Asian and Asian Americans, it is important that we educate ourselves and those around us, foster discussion, and start campaigning for anti-racism and support for each other. This includes building trust with colleagues, encouraging and sharing stories, educating ourselves and others, building interventions that allow us to have access to support and care, and welcoming and supporting all.

To our Asian and Asian American community, we hear you, we empathize with you, we will continue to strive towards recognition and prevention of racism. Together we can uphold justice, and combat racism in all forms.

Solidarity with the Asian American Community

By MPH Student Mellesia Jeetoo, with special thanks to Tania Chen and Wan Wen (Jovana) Zhu for your courage and voice in this!

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The Director’s Column (continued from page 1)

The World Trade Organization (WTO) Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) requires WTO signatory countries to provide lengthy monopoly protections for medicines, tests and the technologies used to produce them. After a global campaign by public health and development groups, in 2001 the WTO issued a binding declaration about better balancing TRIPS intellectual property protections and public health needs. A temporary emergency COVID-19 waiver is in line with the WTO members’ agreement that intellectual property rules cannot create barriers to health treatments that unnecessarily cost human lives and undermine the global economy. A TRIPS waiver would remove a key obstacle to governments and manufacturers worldwide accessing the technology needed to invest in making COVID vaccines and treatments as rapidly as possible, in as many places as possible, for the billions who still need them. It might not be the silver bullet to end the pandemic, but it is rare that one policy change would so significantly impact a global health effort that could save millions of lives.

Understandably, governments have obligations to their own population, but we have to keep in mind that this is a global pandemic. If we are short-sighted and only eradicate the spread of the virus domestically, due to international travel and commerce, it will make its way back to our shores. All inequitable access to vaccines will achieve, is a prolongation of the pandemic and its disastrous impact on individuals’ lives and countries’ economies.

Update: Just before this issue of The Scoop went to print, the Biden administration in the US signaled it will support a global waiver on Covid-19 vaccine patents, and the EU – despite previous opposition, is now ‘ready to discuss it’. Eventually this might be a turning point and will lead to universal access to Covid-19 vaccines. As of now, rich nations vaccinate a citizen every second while the majority of the poorest nations are yet to give a single dose.
Each year the Graduate Program in Public Health students and staff announce events that recognize National Public Health Week at the Icahn School of Medicine at Mount Sinai. This year, the National Public Health Week Planning Committee was composed of MPH students: Stephanie Arbelaez, Tania Chen, Tanvi Deshpande, Amanda Singh; and Program Coordinators Anita Ofosu-Appiah and Jennifer Valdivia Espino, MS.

Flyer including all events, designed by MPH student Stephanie Arbelaez.

Monday, April 5, 2021
The National Public Health Week Drop-in Booth was an opportunity for prospective students and current Mount Sinai employees to speak with an admissions representative about the Graduate Program in Public Health. Participants were able to ask questions about course curriculum, student opportunities, and admissions criteria. There was also robust conversation pertaining to student involvement in the COVID-19 pandemic efforts at Mount Sinai. Overall, those who joined were able to get a better understanding of the mission of the program in educating students to prevent disease, protect the environment, and promote good health in partnership with the populations they serve.

Tuesday, April 6, 2021
The National Public Health Week Planning Committee brought the student community together around a pressing topic - The Future of Public Health: Technological Innovations. This event included student and alumni presentations and a lively discussion about the fields of digital health, telehealth, and data sharing since the beginning of the COVID-19 pandemic. The video recording is available for all to catch up on the discussion!

Wednesday, April 7, 2021
The Mount Sinai Institute for Exposomic Research hosted a Lunchtime Chat with Shanna Swan, PhD, Professor in the Department of Environmental Medicine and Public Health at the Icahn School of Medicine at Mount Sinai about her new book Count Down: How Our Modern World is Threatening Sperm Counts, Altering Male and Female Reproductive Development, and Imperiling the Future of the Human Race. This talk was aimed toward student and community audiences to share the message about chemical exposures impacting reproductive health. The video recording is available to share with all interested.

Thursday, April 8, 2021
This year has required students to be extraordinarily resilient and endlessly motivated to continue their studies, training and work commitments. The National Public Health Week Planning Committee stressed the importance of community building during these challenging times by hosting Strengthening Connectivity: Graduate Program in Public Health Student Social. The group got to know each other professionally and personally and shared laughs over trivia and pictionary games.

Friday, April 9, 2021
During the week, the Program encouraged all students, faculty, and community members to donate to Citymeals on Wheels, a New York State charity providing meals, companionship, and support services to our homebound elderly neighbors in all five NYC boroughs. Traditionally, a group of students would volunteer for a local organization in person, however, in the virtual environment, every individual can still make a difference by learning about an organization and donating to the cause.
Since the start of the COVID-19 pandemic, ISMMS students have organized and volunteered in relief efforts, telehealth and outreach communications, and more. Now, more than a year since the first COVID-19 cases were detected in New York, students have grown into leadership roles and put their public health training to the test.

ContraCOVID – An Introduction
ContraCOVID is a student run nonprofit that aims to serve Latinx and immigrant communities during the COVID-19 pandemic by offering free social service navigation and translation services. ContraCOVID was developed by a group of Harvard medical students in response to the pandemic and has grown to encompass multiple cities across the U.S. by mobilizing medical students and future health workers in various schools and educational institutions. The mission of ContraCovid is to provide timely culturally relevant health and social information in an easily accessible format for communities around the nation. ContraCOVID's overall vision is to provide people of all backgrounds with the information, health and social resources to thrive in the face of hardship.

Briana Bell, MPH Student: I am one of the co-leaders of ContraCOVID NYC which means that I oversee establishing partnerships with relevant organizations and leadership meetings, ensuring that we're giving quality service to our community. I also lead the community education team in which we work to provide educational materials on vaccine education, mental health, and more.

This pandemic has highlighted and further increased the disparities that have existed in Spanish-speaking and immigrant communities for many years. Lately, we have seen an increasing need in one-to-one assistance for navigating social and medical resources. ContraCOVID NYC's goal is to connect vulnerable populations to social and medical resources that are culturally appropriate to reduce health disparities. ContraCOVID NYC also offers translating services and conversational classes for non-English speakers to increase their English vocabulary. Ultimately, we would like to build community resilience amongst the minority communities in NYC through providing clients with the tools and knowledge to empower themselves and survive these difficult times.

This role is very important to me as I was one of the first who started working with the organization since its inception. It is so enlightening to help the community that I am a member of as well as seeing our goals come to fruition. We are growing so quickly and always evolving; if any reader knows about any free to low cost healthcare resources that the Spanish-speaking community would be able to access or would like to get involved, please email us at newyork@contracovid.com.

Adeyemi Oduwole, MPH Student: Within ContraCOVID, I work to link our target population to existing NYC resources through researching and screening organizations to develop the ContraCOVID referral network. I have helped create and maintain an online database of resources that helps promote communication between the organizations serving members of ContraCOVID's target population in NYC. Furthermore, I have participated in outreach within the community to promote the services of ContraCOVID.

The ContraCOVID program looks to provide essential resources to members of an underserved population. Due to the COVID-19 pandemic, many previously hidden public health issues and disparities have become more outstanding issues of concern as there have been increasing rates in alcoholism, domestic violence, and decreased academic involvement in members of the intended target population. Many of these issues are going unaddressed. Members of the target population living in New York are expected to benefit from the services that ContraCOVID offers. It will enhance their lives and act as a resource towards better overall health.

As an aspiring physician and Bronx-born native, this role has allowed me to submerge myself into the community where I am from. I have developed relationships with underserved individuals living across New York City and in the patient population that I hope to one day serve.

ContraCOVID is still looking for more volunteers and interns to join the team in any capacity! Feel free to reach out to me, and I'd love to share how you can get involved. adeyemi.oduwole@icahn.mssm.edu.

Studying Vaccine Hesitancy
Warda Chaudhary, MPH Student: For my Applied Practice Experience, I am very fortunate to be a part of the Infection Prevention Team at Icahn School of Medicine at Mount Sinai, and have Valerie Parkas, MD and Beverly Forsyth, MD, serve as my amazing mentors. We are
working on assessing vaccine confidence among medical and graduate students in the science and public health arena by conducting a cross-sectional study at Mount Sinai. To assess the knowledge and confidence regarding COVID-19 vaccination, we developed an anonymous online survey and distributed it among the students. Data obtained from this study will be used to identify specific concerns that come forward and to create interventions in order to increase vaccine trust specifically among students.

The COVID-19 pandemic has led to many deaths worldwide and the development of a vaccine to fight SARS-CoV-2 has been long-awaited globally. As COVID-19 vaccines are being rolled out, vaccine uncertainty and hesitancy among the public is also being revealed. Healthcare workers and students in the scientific community are also among the population that may or may not have opposing attitudes towards the COVID-19 vaccines. It is important to educate and promote knowledge surrounding the COVID-19 vaccination in order to ensure individuals of the safety and efficacy of mRNA vaccines. I feel very grateful for having the opportunity to not only be a major part of the development and the distribution of the survey, but to also have the chance to contribute significantly in the efforts to stop the spread of COVID-19.

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### 2021 Student Leadership Institute

**Becoming a More Authentic and Inclusive Leader**

*By MPH Students Alexandria Albert and Christina Grochowski*

Each year, the Association of Schools and Programs of Public Health invites selected students from across the nation to join in leadership development activities. This year’s Student Leadership Institute focused how leaders can turn the vision of diversity, equity and inclusion into reality. Stephan Davis, DNP, MHSA, FACHE, Assistant Professor at The University of North Texas (UNT) Health Science Center, and Jennifer Brown, Executive in Residence at UNT Health Science Center, led the group through presentations and skill building exercises to help us move into this reality. We examined our personal mission, vision, values, and those of our organizations. We also practiced how to share our diversity stories and parts of our identities in the workplace to normalize discussion of diversity, privilege, and allyship.

At the end of the institute, we were challenged to consider what we are going to start doing (what new behaviors you now know foster inclusive environments), stop doing (old behaviors you now know can be harmful), continue doing (things you already did that support inclusion), and do differently (things you did before that could bring positive change with a few adaptions). Finally by reflecting on these four categories we can start to figure out how to bridge the divide and move in the right direction to create an inclusive environment.

### Alex’s 3 Takeaways

1. **Relinquish the need to be right.**

An inclusive leader’s goal is not to persuade others to completely change their views. As a public health practitioner, you will be put into rooms with people who have wildly different views than your own. That’s OK. Giving up the need to be right all the time creates space for the most open and honest dialogue. This will prepare you to be receptive to others’ perspectives without having such intense reactions to opposition. This also makes reaching mutual understanding a possibility. Inspiration: Jennifer Brown

2. **Vulnerability doesn’t equate to weakness.**

Being vulnerable actually makes you more relatable to others. It means that you’re imperfect and 100% human. We all have been inspired by someone who was open enough to share parts of themselves with the world. Sharing your diversity story can unlock innate leadership qualities in others and it builds trust between people. Leaders inspire leaders—it’s the multiplier effect. Inspiration: Dr. Stephan Davis

3. **Build bridges for others.**

As an inclusive leader, you should always ask yourself how you can create opportunities to highlight diversity, promote inclusivity, and advance equity. After all, these are the opportunities that will allow for all of us to feel seen, feel heard, and feel understood. Find your building blocks and get to building! Inspiration: Fellow student at the Student Leadership Institute.
Mentor Spotlight: Alyssa Gale, MPH
By MPH Student Chantelle McLeish

Q: What is your role at Mount Sinai (And why do you love it)?
A: I am the Director of Health Education at Mount Sinai. Our department provides internal consultation, professional development training, and other types of support to our colleagues across the health system regarding patient education and communication efforts. We also provide youth programming that encourages Black youth in NYC to cultivate their interest in public and community health. I love my position at Mount Sinai because I am able to engage in a diverse range of public health practice. For example, we work with a variety of providers, supporting patient needs around everything from addiction, to chronic disease management, to pregnancy and childbirth. This position allows me to experience a breadth of public health topics, and that diversity makes my job even more interesting.

Q: What services does the Department of Health Education offer? What communities do you serve?
A: Our department has a wide scope of services, all of which are grounded in advancing health equity and racial justice. We offer internal consultation and programming services across the health system. For example, we develop class curricula, educational materials, professional development trainings, and other types of internal health education support. The communities we serve are diverse. Essentially, we serve communities in which health equity issues exist.

Q: In this era of COVID-19 and the recent approval and distribution of COVID-19 vaccines, how has the Department of Health Education started to address conversations about these topics?
A: Recently, the department has undertaken several multi-disciplinary efforts to address issues surrounding vaccine messaging. We have two primary aims: supporting providers in having respectful, patient-centered conversations, and supporting individuals or patients in making the decision that is right for them and their loved ones. We’ve developed resources to support Mount Sinai staff in starting conversations with colleagues around vaccine decision-making too, focusing on empathetic listening as the goal. As public health professionals, we know that vaccines are important to the health of our communities, however no one should feel pressured or coerced into getting vaccinated – vaccination should always be an autonomously made, informed decision. We have also developed resources for community facing presentations and conversations, including patient-facing resources that explain the basics of the COVID-19 vaccines with a QR code for scheduling an appointment.

Q: Tell us about your current work with racial justice & the Mount Sinai Summer Institute.
A: The Mount Sinai Summer Institute has recently been renamed, The Public Health and Racial Justice Program, because it ended up having a life outside of just last summer! This program is for Black and African American teens living in one of the five boroughs of NYC, who are interested in learning more about public health through a racial justice lens. We want young people to understand that public health is not just about doctors, nurses, labs, and researchers. Public health is all around them. It is their grocery stores, their safety at school, the physical protections their parents have at work, their access to parks and places to gather, it is truly the air they breathe and the water they drink. We want them to see that public health work is vast. We want them to feel empowered to see themselves reflected in the work that public health professionals and activists are doing every day in their very own communities. There are some truly amazing programs at Mount Sinai that focus on career entry into the field, or clinical tracks, or offering shadowing and mentoring opportunities for students who know what public health is and want to take part in it. This program takes a step back to engage young people who aren’t even aware yet that this might be something they’re interested in, to really introduce public health as a vast field with many opportunities. And of course, we specifically designed this program to focus on the intersection between public health and racial justice, and to encourage public health activism no matter what educational or career path a young person in our program may end up taking. Our program really emphasizes the systemic issues that are driving health disparities and inequities in America, and the power of social justice movements to address racism and its impact on individual and community health. We want to cultivate a belief that the voices and actions of these young people in our program matter, and that they can play a part in enacting change however they choose.

Q: The Department of Health Education regularly offers internship positions to students as well as cultivating relationships with youth in the New York City community. Describe the value of this mentorship for students and youth.
A: In terms of mentoring students within The Public Health and Racial Justice Program, I give complete and total credit, as well as my admiration and awe, to Lajeanna Haughton, LMSW, our Health Educator who serves as an excellent mentor to these young people. Lajeanna really educates, connects with,
Throughout my years, I have had the privilege to attend various conferences on Drug Addiction and Prevention and hear from past addicts turned Addiction Counselors. I have heard wonders on the accuracy they believe this book has which is what drew me to read it. Beautiful Boy by David Sheff is his memoir discussing his son’s addiction to drugs. It is a recollection of all the thoughts and fears running through a parent’s mind as their child relapses and recovers. I believe that this memoir not only allows for us to see upstream but places us directly into the family to feel and understand their pain. From this book, I gained insight into what the family of an addict faces, the emotions running through their minds, and the issues that arise from the stress. In terms of public health and the current opioid epidemic, I believe this book gives us a unique perspective on the struggles of families within this situation and some tools on how to structure prevention and educational programs for the people struggling with drug addiction. Since the time of this book’s publication, the opioid epidemic has only grown, and as public health professionals, we must look upstream to find solutions while also empathizing with those struggling with this addiction and the families concurrently affected. – Wendy Barillas, MPH Student

I stumbled upon “Quit Like A Woman” while strolling through Barnes & Noble. The title of the book caught my eye because I have an interest in understanding alcoholism and how people deal with addiction. “Quit Like A Woman” is part self-help and part autobiography. The book offers what I believe to be a groundbreaking perspective on addiction. Recounting her triumphs and failures with alcoholism, the author, Holly Whitaker, argues that Alcoholics Anonymous (AA) is not for everyone. The root of the issue lies in the fact that AA was made for white men. AA has twelve steps that instruct participants to humble themselves, ask for forgiveness, and submit to a higher power, but as Whitaker points out, “Women aren’t sick from an overdeveloped sense of ego or a pathological lack of humility… We drink not because we have too much power but because we have so little.” This feeling is magnified when it intersects with other marginalized identities. Considering both our criminal system and our medical system default to AA for rehabilitation, AA’s shortcomings have systemic repercussions. Until AA is replaced with a better public health alternative, Whitaker’s offerings of radical introspection and self-care seem like the best alternative. I highly recommend reading “Quit Like A Woman” to those interested in self-help and those wanting to change the future of public health alike. The first chapter is available for free at www.quitlikeawoman.com. It is also available for check out at the New York Public Library. – Hannah Johnson, MPH Student
Tips for Talking to Employers

For students in public health, finding a job is an important step towards applying your skills and becoming professionals. On April 14, 2021, the Graduate Program in Public Health hosted our annual Career Fair to support students searching for new opportunities. Kelly Gentry, MA, LPC, Manager, Career Services and Alumni Relations, shares answers to frequently asked questions!

What characteristics, skills, or achievements stand out to an employer?

Employers like candidates who are flexible, organized, have good communication skills, and are always willing to learn. These characteristics are universal. As we have all learned this past year, being able to pivot and adapt to new and unexpected circumstances is crucial. You can demonstrate these skills by giving examples of times you worked in a team, describing ways you managed or coordinated projects and information, and explaining how you handle new and difficult situations.

What is the best way to reach out to a hiring manager?

Use the contact information provided in the job description! Most hiring managers are happy to connect with prospective employees by email to answer questions about open positions. Please be cognizant that there are some companies that explicitly ask that individuals not reach out about positions because they are overwhelmed by applicants. If you do reach out, a simple email will be sufficient. If you don’t get a response, don’t be alarmed, human resource departments are usually overwhelmed by the volume of communications they receive in general, and when managing priorities, responding to a person they don’t know may not be on the top of the to-do list. Give it a week or so, and then send a follow-up email. If you don’t receive a response after two weeks, it is time to consider moving on. There are always other opportunities!

How has recruitment and onboarding of new employees changed in the virtual setting?

Right now, the biggest change with recruitment and onboarding probably has to do with finding out whether positions are remote or will be transitioning back to being in-person. Many organizations have found that remote work saves the company money and have decided to keep their employees at least partially remote. Finding out if and when a position will require time in the office is important. Virtual recruitment has expanded out of necessity, but many employers now realize its benefits: it opens the door to meeting potential candidates they may not have been able to reach during in-person recruitment. Students looking for jobs should prepare for virtual interviews and expect them to be a part of the hiring process even after COVID-19 restrictions lift across the country.

I hope that these tips help you on your job search. Feel free to reach out to Career Services and Alumni Relations for more information regarding job searches, career counseling, or professional development! – Kelly Gentry, MA, LPC

ANNOUNCEMENTS

Congratulations to all the June 2021 graduates! We wish you the best as you become change-makers in the field. Please stay in touch!

Special Recognition for MPH Student Ryan Buerger

Since early January 2021, a number of ISMMS students have been volunteering at the Mount Sinai vaccine clinic. We’d like to give Ryan Buerger special recognition for going above and beyond as a volunteer. “Ryan is just incredible – his work ethic, his personality, his flexibility...He is very dedicated to keeping the vaccine pod operation smooth and he goes out of his way to make people feel cared for.”

- Nurse Manager Jamie Ruhmsbottel

Interested in having your writing or photos published in The Scoop? Be a part of our next issue! Contact one of our editors to get involved.

The Scoop

Spring/Summer 2021

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