Hurricanes are dominating the headlines this fall. Right now, we are anxiously watching the public health crisis spawned by hurricanes Irma and Maria in Puerto Rico. Millions of people are struggling but, oftentimes, when the hurricane season passes, those who live in unaffected areas forget about the broad impacts of these storms.

While the media and humanitarians eventually move on to the next world crisis the damage to public health systems can continue for years. But we can break this cycle.

The primary health issue arising from hurricanes or cyclones lies in the risk of drowning from the storm surge associated with landfall. This risk is compounded by injuries from flying debris triggered by high winds, electrocution from fallen wires and fires sparked by electricity. The immediate risks of illness and death during the
Collaboration conquers challenges

The complexities of responding to the health challenges presented by natural disasters such as Harvey, Irma, and Maria affect us all, reminding us that global health is our health. Recently, I spoke to those from Puerto Rico in my local congregation, my son-in-law from Haiti, and to friends and colleagues in Texas. I was struck by how alike we are – how our regional and national perspectives, decisions about health care and attention to public health or lack of attention impact us all. We are indeed a global community. Artificial borders may serve to restrict entry or exit from our various countries or remind us that we happen to live in one of the 50 little countries also known as the United States. Nonetheless, these borders cannot protect health or prevent the transmission of disease and illness, nor stop the effect of natural disasters from influencing the collective health of the nation.

Therefore, when faced with the multifaceted challenges that natural disasters bring, it quickly becomes apparent that there is an interdependence between States, geographic regions, and nations related to determinants and outcomes of health. Complex problems – such as mental health issues, waterborne diseases, and foodborne diseases as well as damage to infrastructure – necessitate a strategic concentrated effort that is grounded in the principles of respect and value of alternative perspectives, effective communication, and teamwork. These challenges cannot be effectively addressed by one profession in isolation from others. The short-term and long-term aftermath of natural disasters require that health professionals are prepared to function in teams whose expertise may range from civil service to engineering to sanitation.

In the College of Health Sciences, we strive to create an interprofessional education and practice culture that prepares our graduates with the teamwork competencies required to be on the vanguard of effectively tackling complex issues such as disaster preparedness and response. Yet in the real world, our students often encounter practicing professionals who operate in silos and/or do not possess the skills necessary to be effective team members. Interestingly, the respective continuing education accreditation bodies for practicing nurses, pharmacists, and physicians have also concluded that the knowledge and skills inherent in interprofessional education are essential for effective practice in today’s environment. Hence, the Accreditation Council for Continuing Medical Education (ACCME), Accreditation Council for Pharmacy Education (ACPE) and American Nurses Credentialing Center (ANCC) have collaborated under the auspices of “Joint Accreditation” to create standards for interprofessional continuing education for practicing health care providers. The accessibility of continuing education that supports interprofessional collaborative practice is truly a value added for practicing health professionals. It also helps to ensure that COHS students will have more opportunities to see interprofessional collaborative practice in action; thus helping them to join the workforce to tackle complex challenges such as disaster preparedness and response.
From the Editor

Hurricane season seemed more tame back in the day

Growing up in South Florida, hurricane season was simply a part of life. From the beginning of June until the end of November, our family kept an eye on any storms moving our way and if needed we were ready to take emergency precautions. The number of major hurricanes each year ranged from zero to three.

The one upside of a hurricane, we Floridians say, is that you have time to evacuate because you have advanced notice. In the case of states that deal with tornadoes or earthquakes, however, they are caught off guard without any chance to prepare for escape.

That being said, though, my family was fortunate. At no point did we ever have to evacuate during a hurricane when I lived in North Miami and North Miami Beach between the years of 1972 and 1985. One of the biggest storms during my time in Florida was Hurricane Andrew in 1992. Packing winds of 165 mph, it caused $25 million in damage and ravaged areas in South Florida such as Florida City. It tore through homes and exposed shoddy housing developments.

A look at the past two decades of hurricane season shows not only some spikes in the number of major hurricanes but also colossal damage figures and death tolls. The costliest season on record was 2005, when Wilma led the way with six other major hurricanes, triggering damages of an unprecedented $159 million.

This year has brought with it some disturbing storm statistics:

- Harvey was the first major U.S. hurricane landfall since Wilma.
- First-ever three Category 4 U.S. hurricane landfalls in a single season.
- First time since 1893 that 10 hurricanes formed in a row.

Just what the future holds, I’ll leave to the experts, but I will say this much: Talking to family and friends who still live in Florida, they view the hurricane season with far more dread than they used to. And Dr. Muge Akpinar-Elci’s editorial in this month’s newsletter adds fuel to their anxieties.

SCHOOL OF NURSING

A Lunch and Learn event was held Sept. 15 at the Ted Constant Convocation Center. It was coordinated by students and included a panel discussion with Nursing Monarch Milestone Award Recipients. Students asked panelists questions related to career decision-making and planning, pursuing advanced education, and professional accomplishments.

The event was part of the school’s 50th Anniversary celebration.
ADVISORY BOARD SPOTLIGHT

Brian S. Dawson, Denver, Colorado

What do you do for a living?

I am the CEO and President of BD Perioperative & Healthcare Consulting, LLC. Over the past two years, I completed two contracts: a five-month contract with Sutter Solano Hospital and a 10-month contract with Keck Medical Center at University of Southern California.

What inspired you to choose your career?

I wanted to serve (help) people who found themselves in need of healthcare. I choose to be a nurse because of the experiences I had as a teenager watching my mother lose her battle with breast cancer. With the experiences I gained from my 28 years in the Navy, I went into OR consulting to help hospitals make the surgical experience as positive as possible for the patient and their families.

What sparked your interest in health care and the COHS Advisory Board?

My life experience in health care and the exceptional experience I had as a graduate student in the nursing program at the College of Health Sciences. My hope is to give back and ensure that students have an exceptional experience and gain advanced clinical skills and leadership training. I see the college achieving two things: providing the clinical skill to future healthcare providers and training future healthcare executive leaders.

What do you see as a big challenge in today’s health care?

The biggest challenge is providing health care to all who need it with the ever-shrinking healthcare dollars available at the state and federal levels.

What advice would you give students as they work toward careers in the healthcare industry?

Remember that when a person (patient or family member) walks through our doors, whether it’s a routine (Doctor’s Dental, or Physical Therapy rehab) visit, it’s a life event for that person and we should never ever treat that event like a job.

What do you do for fun?

Exercise, hang out with my two grandsons, travel and root for the Chicago Cubs. Go Cubs Go!
first few days of a hurricane result from inadequate access to health care. Among the health care barriers are loss of electricity, flooded facilities and equipment, shortages of medications and food, and unavailable health care providers.

Unfortunately, once a hurricane ravages an area, other hazards emerge, including injuries from the cleanup effort and strain on mental health as well as the spread of waterborne and foodborne diseases. From a public health perspective, physical and mental health are greatly impacted when people lack shelter, the most basic human need. In the long-term, providing sufficient water and food is another major concern. It is quite common for there to be an increase in communicable diseases following a disaster because the environment often enhances microorganism growth and can cause an outbreak, sometimes leading to a pandemic.

In the immediate aftermath of hurricanes Irma and Maria, the Centers for Disease Control and Prevention warned: “Significant damage from the hurricane has caused problems with water supplies, sanitation, food supply, electricity, transportation, shelter, communications, security, medical care, and mosquito control.” It advised U.S. citizens to postpone travel to severely affected areas. These precautions can further reduce the availability of trained personnel due to risks to their own safety and well-being.

Hurricanes also create environmental refugees. In the aftermath of Irma and Maria, many parts of Caribbean were left uninhabitable. Public health systems are facing increasing pressure from the unexpected number of deaths, injuries and illnesses as well as the ability for large populations to move.

These recent hurricanes have caused agonizing and distressing feelings, including the understanding that our lives are not always on a steady footing. As a physician and public health practitioner, I believe that these events should change our perspective. We must deal with the short- and long-term consequences of natural disasters on a continual basis, not just during hurricane season.

Furthermore, we must work together to develop vigorous and effective worldwide emergency preparedness programs, response activities and recovery operations. But we must also create a culture of solidarity. We should invest to improve the social, economic and environmental condition of our citizens before catastrophe hits. Preventive measurements will go far in helping us create more resilience communities for the next hurricane. Public trust is key to the success of planning for emergency public health response and creating resilient communities.

We can only build public trust with transparency, good communication and significant community engagement. We must start to think the unthinkable if we are to be ready for the next disaster.
Intern’s project gets center stage in APHA meeting

For spring intern Adam Elci, an eighth-grader at Ghent Montessori School in Norfolk, his time working with Old Dominion University’s Center for Global Health is paying off beyond his expectations.

In March, the 13-year-old applied for the weeklong internship, and after the interviewing process with the center’s research coordinator Michele Kekeh and center public relationship specialist Angelica Walker, Adam was chosen.

As part of his internship, Adam produced a short film with Walker — a Masters of Public Health student at ODU — called “Decompress Your Stress.” The film targets elementary and middle school students and teaches positive ways to cope with stress through active lifestyles.

Adam’s movie project was recently selected for the 2017 American Public Health Association’s Global Public Health Film Festival in November. This year’s APHA Annual Meeting and Public Exposition will be held in Atlanta.

“I didn’t expect that they would pick my film,” he said. “It was a big surprise. I am very proud and happy that they chose me.

Adam’s mother, Dr. Muge Akpinar-Elci, is director of ODU’s Center for Global Health. Being selected by APHA is a big honor, she said. She noted that thousands of public health professionals from around the world attend the APHA meeting each year, where they present their research, promote best practices, advocate for public health issues, and network with others.

“I am honored that ODU’s Center for Global Health will be featured in APHA’s Global Public Health Film Festival,” she said. “It will bring a visibility and prestige to our center. I am also a proud mom and professor that my son Adam and my student Angelica have brought this honor to our center.”

Adam said his main interests lie in mathematics and history, “but after my internship, global health also started interesting me more.”

Using the website PowToons, Adam was able to generate his film using animation to illustrate his better-health campaign.

Since an active lifestyle includes physical and mental wellness, “Decompress Your Stress” gives the viewer information on what an active lifestyle is, why it’s important, tips for mental wellness, tips for physical wellness and how modern technology can contribute to health. These tips are positive alternatives to risky behaviors and coping mechanisms such as alcohol and drug abuse.

You can view Adam’s film at: https://apha.confex.com/apha/2017/meetingapp.cgi/Paper/394605
On Sept. 20, the College of Health Sciences Promotion and Tenure Committee conducted a workshop for faculty interested in learning more about the criteria for promotion. The workshop was open to all faculty members, whether in a tenure or non-tenured track position.

Among the topics covered by the workshop were understanding the faculty handbook, criteria for promotion, correctly formatting your CV, scholarship benchmarks, and the importance of third-year reviews.

The Story: In 2016, martial arts teacher Michael Sheffield suffered a serious spinal cord injury. During his rehab, he received amazing care from ODU Monarch Physical Therapy Clinic. In gratitude, the Sheffield family and supporters are planning a fund-raising scavenger hunt, with net proceeds going to the clinic.

Where: Bearded Bird Brewing, 727 Granby Street, Norfolk, Va.

When: Sunday, Nov. 19 @11 a.m.—4 p.m., with a silent auction/raffle with entertainment 4-7 p.m.

Details: Teams can have up to four members. The cost is $25 a person and includes a Fight Like Mike T-shirt. Event sponsorships also are available.

For more information: Join the fun on Facebook at "Fight like Mike: The Hunt." Contact us at admin@flmthehunt.com
Special dinner honors Monarch Milestone award winners

On Sept. 15, the School of Nursing held its 50th Anniversary Nursing Monarch Milestone Awards Dinner at the Hilton Norfolk The Main. Nicole Livas, formerly with Wavy News 10, emceed the event. The Monarch Milestone award winners were Christine Mueller for research, Tracy E. Williams for leadership, Amber Price for innovative practice, Mae F. Felton for service, Christine A. Elnitsky for advocacy, Teena Minton McGuinness for teaching, and the Lettie Pate Whitehead Foundation for philanthropy.

President John Broderick offers a few words at the celebration.
On Oct. 2, the College of Health Sciences held its annual Welcome Back Picnic, with food, music, hula hoops, prizes and karaoke. It proved a wonderful turnout on beautiful day.
Upcoming Events

November

Nov. 3  Founders Day Lunch, 12:00 p.m. Ted Constant Convocation Center
Nov. 4  ODU vs Charlotte, Homecoming – COHS - PT&AT, 3:30 p.m. Kickoff
Nov. 7  Alpha Eta Luncheon, 11:30 a.m. – 1:30 p.m., Baron/Ellin Art Gallery
Nov. 9  Veteran’s Day Observance, 12:30 p.m. Kaufman Mall, North Mall
Nov. 13 SON White Coat Ceremony, 4:30 – 6:30 p.m., Ted Convocation Center, Big Blue Room
Nov. 14 Tidewater Physical Therapy Association Meeting Cadaver Series: Trunk/Spine at ODU SRC 2000 anatomy lab
Nov. 18 ODU vs Rice – COHS – C&EH, 2:00 p.m. Kickoff
Nov. 22 Noon Closing Thanksgiving Holiday – University Closed
Nov. 23-24 Thanksgiving Holiday – University Closed

SCHOOL OF COMMUNITY & ENVIRONMENTAL HEALTH

Student becomes first recipient of Marton Tech scholarship

Monica Mateo has been awarded the first Marton Technologies Industrial Hygiene Scholarship at Old Dominion University. The Marton Scholarship was established by Jacqueline Walton and Dawn Kriz, both ODU alumni, to benefit up and coming industrial hygienists in the ODU Environmental Health program. Each year students submit essays explaining their future goals in safety and health and are awarded a $1,000 scholarship.

Monica will complete her Bachelor of Science degree in Environmental Health, with an emphasis in Industrial Hygiene and Safety, in Summer 2018. She is an active duty Navy Dental Hospital Corpsman, working her way through college while holding down a full time military job. She was born in Bogota, Columbia, and first pursued a degree in chemical engineering. That degree introduced her to environmental health issues. While stationed in Norfolk, she decided to undertake a second degree at ODU in Environmental Health. She is working part-time on her internship with the Portsmouth Naval Hospital Industrial Hygiene branch. Monica says she has a true passion for all things safety and health.