EpiMonitor

We're not just for epidemiologists anymore!

A monthly update covering people, events, research, and key developments

Editor's Note:

Welcome to our annual worldwide event calendar issue. You'll find 165 events for all our readers - epidemiologists, biostatisticians and other public health professionals. Each event includes a date, sponsor, and wherever possible - a website link. This information comes from our internet searches and is only as good as what the sponsoring institution has published.

This month you'll also find a broad range of articles. The first talks about why CDC data is still reliable. We also have an interesting piece on COVID mortality and how it is associated with the partisan orientation of individual states. From Canada comes an article about the damages of arsenic and this month's job hunt article talks about the differences between a CV and a resume. We also have a fresh list of free books - this month they're all SAS books and there are a whopping 18 titles.

Summer Programs

Summer of 2026 is right around the corner and the time to start planning your summer schedule is right now. In the Marketplace you'll see our summer program sponsors are starting to advertise. You'll also find summer programs throughout the calendar - especially in May, June and July Take a look and book register early.

If you are in a position where you run a summer program we would be happy to talk to you about advertising options that will allow our readers to consider your offerings. Our annual summer program issue will be published in February. We will soon start gathering information for this issue and someone in your office should be receiving an email from us. You are also welcome to email us at info@epimonitor.net and we will send you a form to fill out so we have all the pertinent information about your program before we compile this issue.

As always, we continue to provide you with our popular monthly word game feature, Notes on People, an overview of what we are reading from the public media, and a listing of near term upcoming events. Ask us about the sponsorship opportunities for these standard monthly features - it offers you great exposure for your event, institution, book or other item of interest to our readers!

Until next month - stay safe and make 2026 your best year ever!

In This Issue

Did you miss last month's issue? **Read it here:** https://tinyurl.com/4ey6yecp **or here:** https://tinyurl.com/33597jab

Why CDC Health Data is Still Reliable

...even among challenges to communications and integrity

Authors: Katelyn Jetelina, PhD, MPH
Hannah Totte, MPH
Marisa Donnelly

Editor's Note: *This article was originally printed in Your Local Epidemiologist on December 10, 2025. To read more content from this source subscribe to Your Local Epidemiologist (YLE): https://tinyurl.com/47494ms4*

Back in February (a lifetime ago), when data were being edited under Executive Orders and all CDC communications were effectively frozen, I outlined four scenarios that would signal real cause for concern about CDC's information. Two of them have now unfolded in the past month:

1. The breach of scientific integrity, for example, the autism and vaccines site along with other less publicized changes.
2. The injection of political messaging into HHS channels.

Never did I think I would see it, but here we are.

The full extent of the damage is still unclear, and how much more may occur remains unknown. But one question stands out: what is the integrity of the data itself? Public health data—the public information used to estimate disease, hospitalization, and death rates, for example—are a vital resource. Their value lies in their purity, reliability, accuracy, and accessibility.

Despite everything, I remain confident in CDC data. This largely stems from the U.S. public health system's unconventional, decentralized structure. A pain in the butt fragmented system for epidemiologists, but one that now works to our advantage.

Hannah, the YLE Community Manager, pulled the top six questions you've been asking so we can provide answers. Here's where things stand.

1. Why can we still trust CDC data?

The key is a nuance most people find boring. Public health data in the U.S. do not flow from the top down; data are decentralized and built from the bottom up. Local and state health departments and hospital systems collect, manage, clean, and report data before they ever reach CDC.

Take flu data. When someone is hospitalized, the hospital records the case. That information moves to local or state health departments, where teams verify and clean it. Only then do states upload finalized numbers to CDC through secure systems. CDC then stitches these local puzzle pieces into a coherent national picture.

This role is essential because diseases do not respect state lines. CDC data inform cross-state responses, hospital capacity planning, testing needs, resource allocation, early warning signals, and shared lessons across jurisdictions. Without CDC, we would have 50 separate snapshots instead of a unified national system. Because CDC primarily stitches data rather than collects it, federal interference is much harder.

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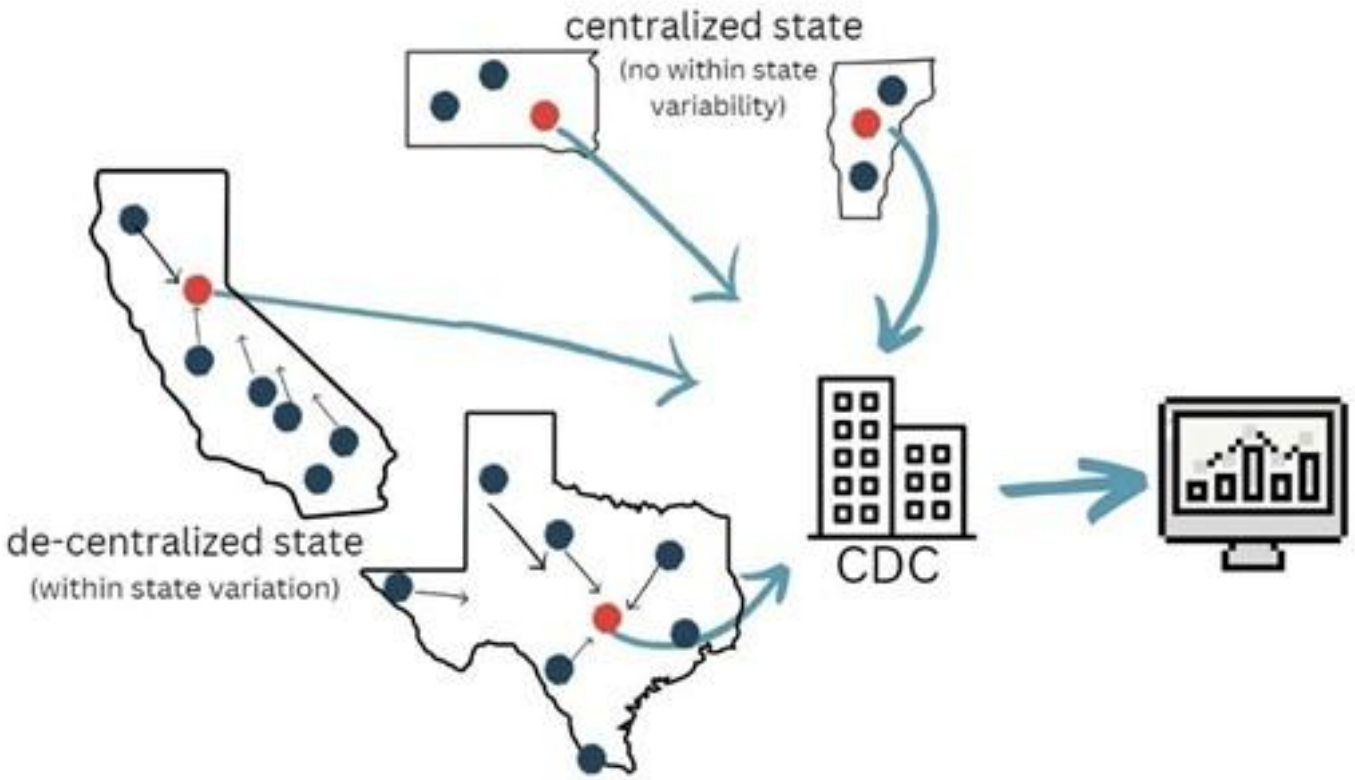

Blue dots= county health departments; red dots= state health departments; blue arrows= data flow. Figure by Katelyn Jetelina/YLE

CDC *does* run direct data collection for vital statistics and surveys, including collecting information on vaccination uptake, mortality, and health behaviors such as smoking and nutrition. Most of these datasets remain intact, with exceptions: some data elements have been removed, like transgender status, and funding cuts may halt certain surveys.

2. What about states that may also want to interfere with data?

For many diseases, reporting is legally required by states. A classic example is measles: when a patient is diagnosed, the health care provider must report the case to the county or state health department.

But states *voluntarily* share this information with CDC.

If a state wants to stop reporting to CDC, for whatever reason and for whatever data, they have the authority to do so. We saw this challenge during COVID-19 when some states, like Texas, stopped reporting vaccination data after the emergency period ended. The result was a significant gap on the CDC dashboard, leaving an incomplete national picture.

This year, you could easily see a potential "flip" scenario: some states *could* choose to stop reporting to CDC because of a lack of trust in HHS.

3. Is automation helping detect outbreaks in this moment of strain? What about layoffs?

Yes! Automation is incredibly helpful for outbreaks, but humans do the work, too.

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When someone is diagnosed with a foodborne illness, for example, the testing lab typically sends the bacterial isolate to the state public health lab. The samples are genetically sequenced, and results are uploaded to PulseNet, CDC's database. Then, algorithms scan for genetic clusters on data from across the country. If a cluster is detected—which suggests infections are linked and may have been infected from the same source—an alert is issued to public health epidemiologists who begin investigating in partnership with environmental health specialists and food safety agencies.

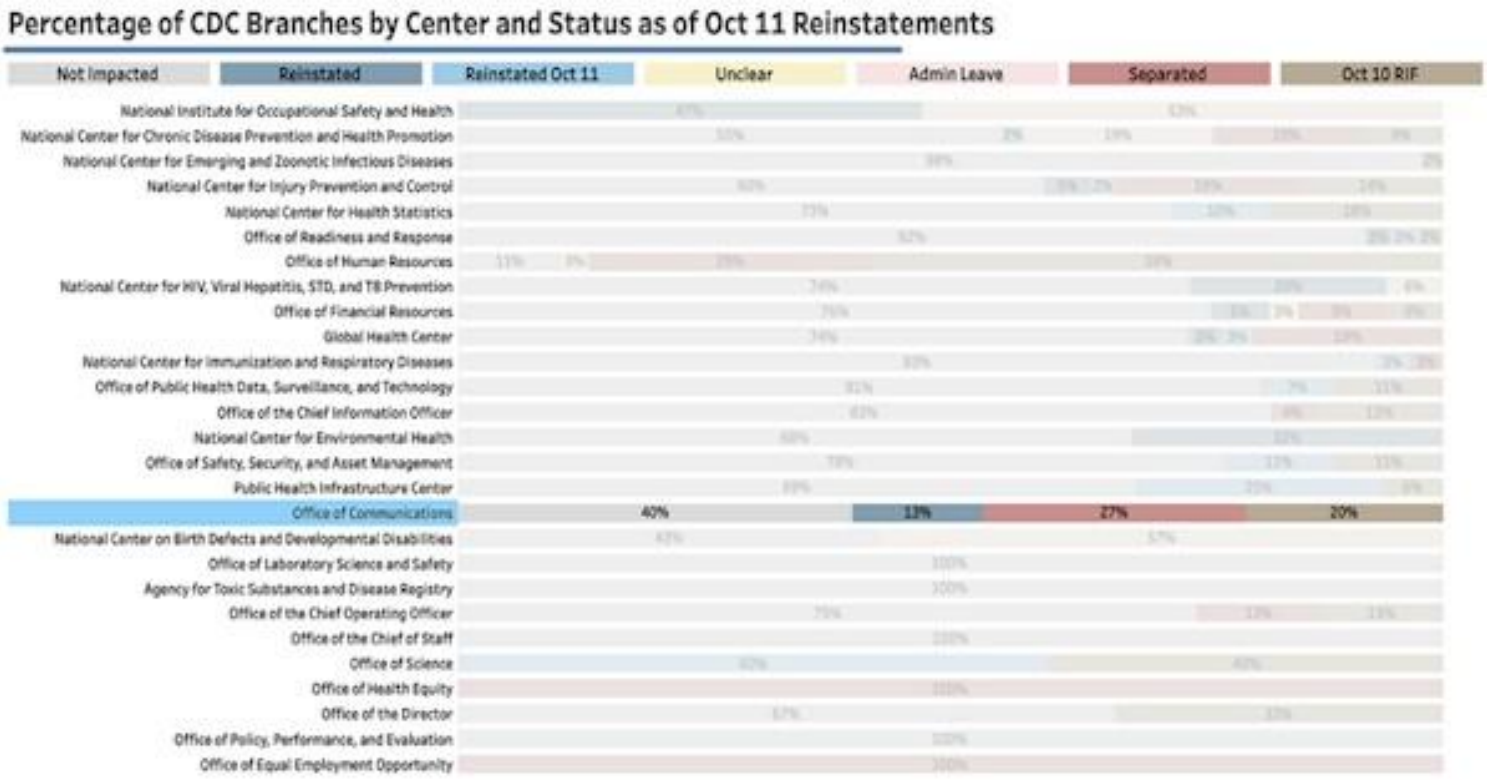
This algorithmic step removes much of the guesswork from identifying the initial stages of foodborne illness clusters and is a mostly automated process. But the core of outbreak response still relies on human investigation—interviewing patients, tracing food histories, and linking cases to a source.

The more cuts we have to staff, the more limited our capacity will be to respond to some of these outbreaks. Many are bracing for next year, when budgets will be cut by billions.

4. Have data communications changed?

Collecting data is one thing. Communicating it is another. Communications capacity has been dramatically reduced.

The National Public Health Coalition, a grassroots organization of fired HHS employees, found the Office of Communications is operating at roughly half of its pre-October capacity.



Source: CDC Data Project

As you can imagine, this impacts outputs.

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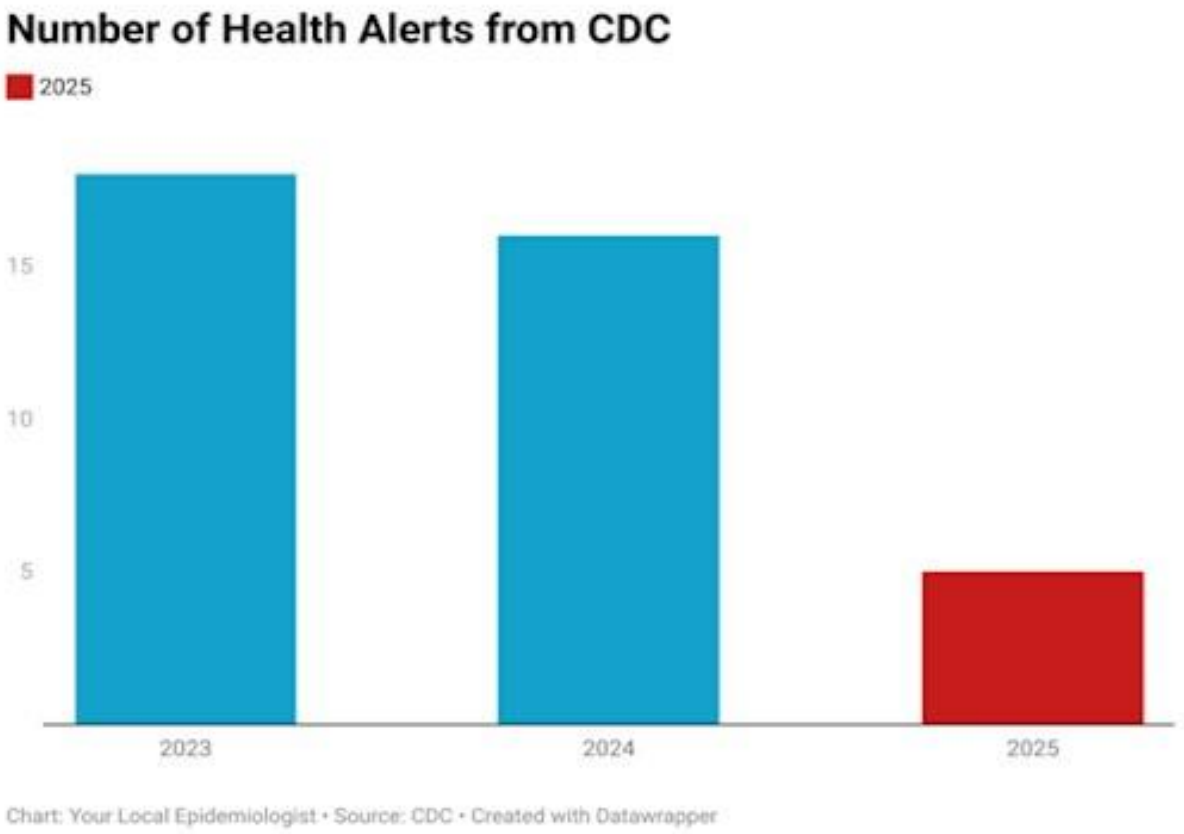
Take HAN—these are safety alerts sent to physicians as a heads up on what to look for when there's an emerging issue. The HAN office still exists, but it takes significant initiative to complete a HAN, even when the administration cares about such matters.

HAN has published only five alerts since the new administration took office. For comparison, HAN published 16 alerts in 2024 and 18 in 2023.



5. Is there a world where a U.S.-based NGO gets created to effectively replace the CDC?

To some extent, this is already happening as quickly as possible. We see this from multiple angles:

- ***Regional coalitions*** sharing communications, briefs, and insights
- ***Non-federal groups synthesizing data,*** like the Vaccine Integrity Project
- ***Communication efforts***, including professional organizations like AAP (who has STEPPED UP on social media platforms), and grassroots efforts like The Evidence Collective
- ***Data democratization efforts***, like PopHIVE

The problem is that nothing can ever compete with the federal government's budget, far-reaching infrastructure, and authority.

6. What does this mean for you?

You can feel confident that CDC data are accurately tracking diseases. And, if you're data gurus like us, you can also feel confident using the CDC data. We will let you know when our confidence decreases.

But also keep in mind that other sources exist:

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- ***Local and state public health departments*** remain primary sources of data, often publishing their own dashboards.
- ***Non-federal data sources*** such as WastewaterSCAN, Biobot, and PopHIVE provide additional datasets.

Bottom line

The data infrastructure is largely intact thanks to a decentralized system. As a nation, we will need to continuously ensure this is the case, as data are gold. The communications capacity, however, has been severely weakened.

Americans shouldn't have to monitor inputs and outputs from the nation's leading public health agency, but here we are.

For more content like this, please visit Your Local Epidemiologist (YLE) on Substack.

Your Local Epidemiologist

YLE can be found here: https://yourlocalepidemiologist.substack.com/

Your Local Epidemiologist (YLE) is founded and operated by Dr. Katelyn Jetelina, MPH PhD—an epidemiologist, wife, and mom of two little girls. YLE reaches more than 320,000 people in over 132 countries with one goal: "Translate" the ever-evolving public health science so that people will be well-equipped to make evidence-based decisions. This newsletter is free to everyone, thanks to the generous support of fellow YLE community members.

To support the effort, subscribe or upgrade your existing subscription: https://yourlocalepidemiologist.substack.com/

Disparities in Avoidable Mortality During the COVID-19 Pandemic Associated with State Partisan Orientation – Analysis of a Natural Experiment

Authors: Michael A. Stoto, Derek A. Chapman, Jong Hyung Lee & Steven H. Woolf

Five years after the beginning of the COVID-19 pandemic, analysts are still questioning whether the benefits of lockdowns, other restrictions, and vaccines outweighed the harms, and even whether these public health strategies "worked" at all. With almost any disease, mortality and other outcomes are determined by public attitudes and behaviors as well as policies, and all of these changed over the course of the pandemic in complex ways. Consequently, sorting out the effects of specific interventions is statistically challenging if not logically impossible.

During the pandemic there was a sharp partisan divide in states' messaging about and implementation of pandemic control policies, as well as the public's attitudes and willingness to change personal behaviors and be vaccinated. Because Republican-leaning states tended to have lower vaccine uptake and higher mortality, the phenomenon came to be labeled "Red Covid" in the summer of 2021, although state policies, implementation, behavior, and outcomes had started to diverge at least a year earlier. This created a kind of natural experiment in which different patterns of attitudes, policies, behaviors, and outcomes associated with partisan orientation emerged among the U.S. states.

While there were certainly economic, social, and educational benefits associated with the less restrictive policies in Red states, it is appropriate to ask how they compare to the number of deaths avoided. Our recent paper takes advantage of this natural experiment to assess the impact of non-pharmaceutical interventions as well as vaccines.
Specifically, we find that between the June 2020 and November 2021 more than half a million deaths could have been avoided, disproportionately in Republican controlled states, potentially reflecting differences in attitudes, policies, and behaviors. We also find that almost 300,000 avoidable deaths occurred before vaccines were widely available, potentially reflecting earlier relaxation and weaker implementation of non-pharmaceutical interventions in the same states. While disparities in mortality cannot be associated with any particular policy or political action, they demonstrate that combinations of public health strategies collectively made a substantial difference in COVID-19 outcomes and undercut the argument that public health strategies did not work at all.

Partisan differences in COVID-19 mortality rates

Excess mortality rates — the difference between observed all-cause mortality and predicted mortality based on pre-pandemic seasonal trends — were obtained from the Centers for Disease Control and Prevention. An analysis of these rates led us to identify five periods during which epidemiological patterns and available interventions varied:

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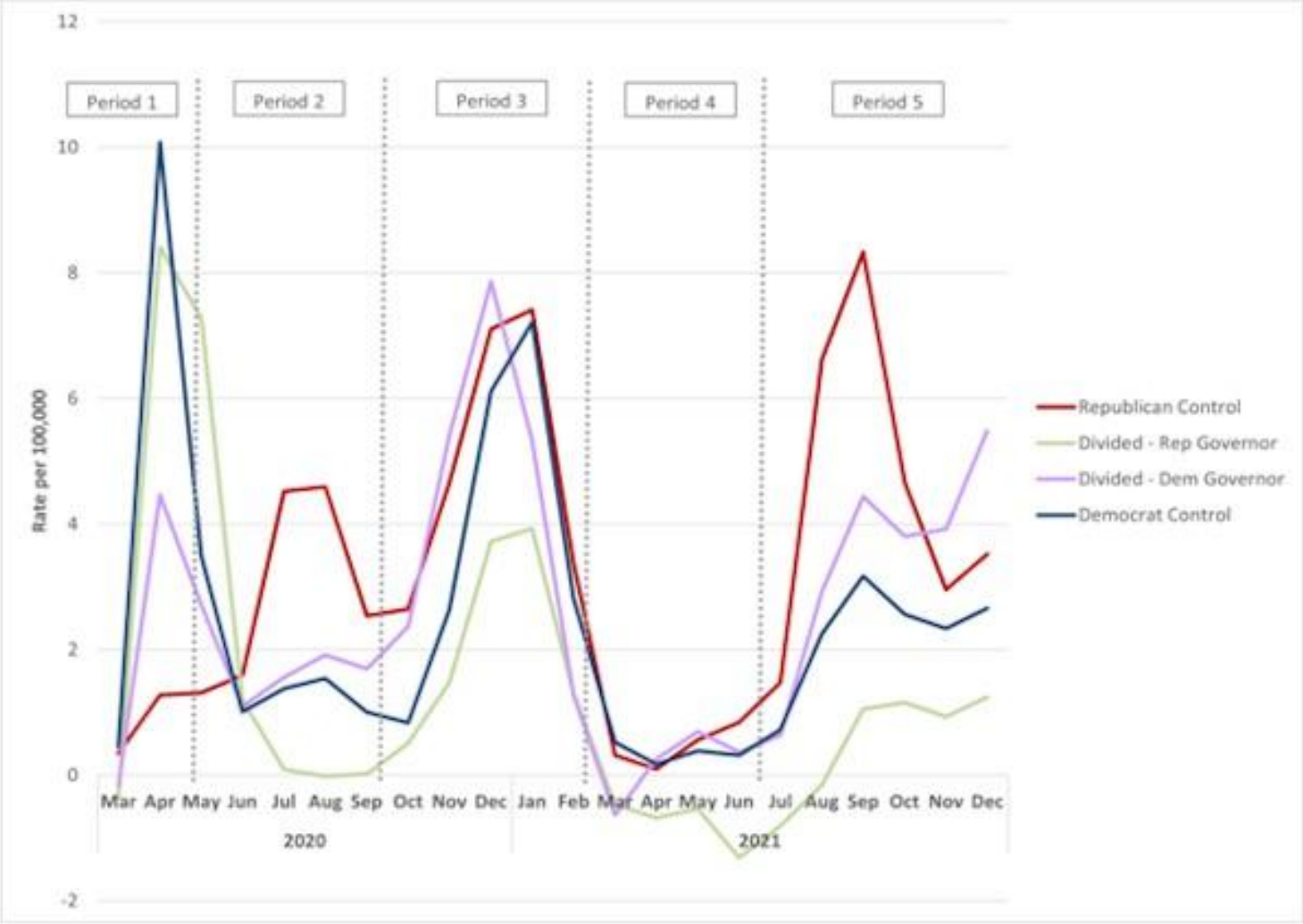
1. Initial outbreak (March – May 2020): deaths concentrated in Northeastern states
2. Summer 2020 (June – September 2020): infections spread nationwide and enforcement of non-pharmaceutical interventions (NPIs) began to differ
3. Alpha wave (October 2020 – February 2021): Alpha variant drove surges in COVID-19 cases and implementation of NPIs grew deeply polarized
4. Early vaccine (March – June 2021): vaccines introduced, initially for older adults and other at-risk populations
5. Delta wave (July – November 2021): Delta variant drove large surges, and vaccine uptake differed sharply by state.

As in our earlier research, we grouped states into four categories reflecting different levels of partisan control: states with "trifectas," in which either Democrats or Republicans held the governor's seat and controlled both chambers of the legislature, and states with divided government, in which the governor's party controlled no more than one chamber.

Figure 1. Avoidable deaths by partisan control of state government.



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We then calculated avoidable mortality rates for each state by subtracting from excess mortality rates the average rate in the 20% of states with the lowest excess death rates in each period. We did not include the initial outbreak period in these calculations because low mortality rates were likely not the result of policies but rather that the virus had not yet arrived in many states. On this basis, we calculated that 553,672 deaths could have been avoided.

*Table. Number of avoidable deaths and rate (per week * 1000) by partisan control of state government and period*

Avoidable deaths	Summer 2020 June – Sept. 2020	Alpha Wave Oct. 2020 – Feb. 2021	Early Vax Mar.– June 2021	Delta Wave July – Nov. 2021	Total over study period
Democrat Control	22,914	56,797	27,525	34,931	142,167
Divided - Dem Governor	13,822	32,197	11,174	30,401	87,595
Divided - Rep Governor	1,070	1,125	1,142	411	3,748
Republican Control	75,495	92,667	33,850	118,150	320,162
United States	**113,301**	**182,787**	**73,691**	**183,893**	**553,672**

More than half a million US deaths could have been avoided had all states experienced the excess mortality rates of the best-performing quintile of states. The nation's avoidable death toll was sizable, roughly double Faust and colleagues' estimate of excess deaths associated with racial-ethnic disparities. Similarly, Stoto and colleagues found that more than 400,000 deaths could have been avoided if each of four census regions experienced the lowest reported rate by region.

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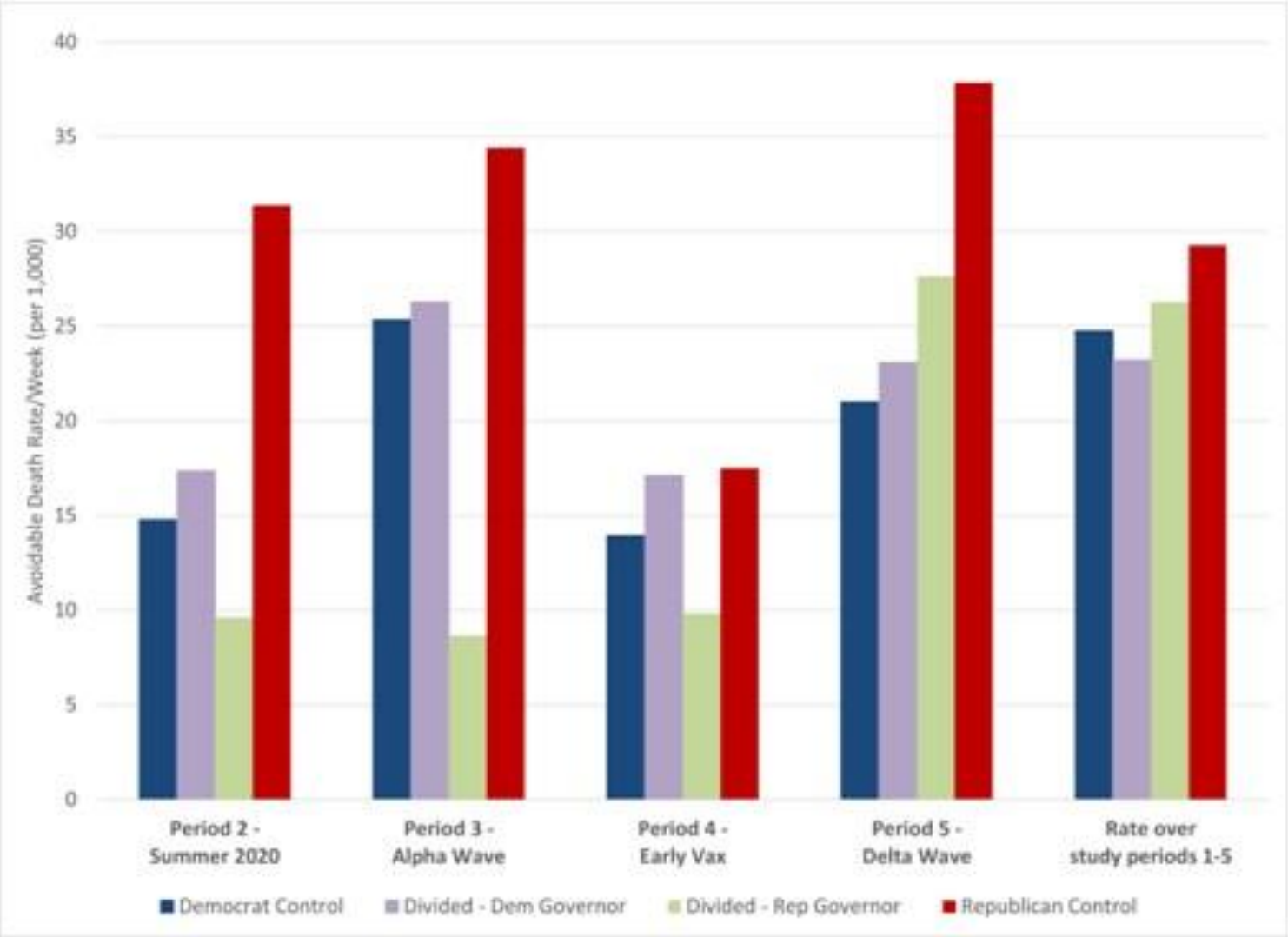

Figure 3. Avoidable death rate per week per 1,000 population by partisan control of state government.

Pre-vaccine period

The "Red Covid" label arose in the summer of 2021, focusing on disparities in vaccine uptake. However, almost 300,000 avoidable deaths occurred before vaccines were available, with significantly higher rates in Republican-controlled states (Figure 3). Avoidable death rates were 3.5 times as high in states with solid Republican control than states with Republican governors and divided legislatures. A regression analysis found that only partisan control and minority status were significant predictors of avoidable mortality rates.

States split along party lines on when to lift restrictions, how strictly to enforce mandates, and the public health guidance promoted by elected officials. Bollyky and colleagues documented significant differences between Republican-leaning and Democratic-leaning states in restrictions (e.g., bans on gatherings, stay-at-home orders, business closures, mask mandates). Public behavior may have also differed along partisan lines. Van Bavel and colleagues found that people who voted for Joseph Biden in the 2020 presidential election were more likely to wear masks, avoid gatherings, and observe other recommended practices. Many voices have questioned the

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efficacy of NPIs. Although our calculations cannot isolate the impact of any specific policy, the results for periods 2-3 reinforce the evidence that NPIs can be highly effective in reducing viral transmission and deaths.

Post-vaccine period

The nation experienced 257,584 avoidable deaths in periods 4-5, after highly effective vaccines were available. Rates and disparities between the four categories were relatively low in Period 4 but surged in Period 5 (Delta wave), when avoidable mortality rates were almost twice as high in states with solid Republican control than in solidly Democratic states. A regression analysis found that the poverty rate, the urban vs rural population ratio, and partisan control (including an interaction between the latter two factors) were the only significant predictors of avoidable mortality.

Overall, vaccines prevented more than 3 million deaths in the U.S through November 30, 2022. The disparity among the states in avoidable death rates during periods 4-5, accounting for 257,584 avoidable deaths, was likely due primarily to sharp differences by state in vaccine uptake, especially in younger adults. These differences emerged in the summer of 2021 when vaccines were first offered to those under age 65. Vaccine uptake was uniformly high among the most vulnerable in the first half of 2021; had partisan disparities emerged in period 4, the loss of life would have been much higher. Similarly, after December 2021 there were minimal differences among the states in COVID-19 mortality rates, presumably because by then nearly everyone had acquired some level of immunity through previous infections or vaccination. Vaccine mandates appeared in the summer of 2021, but were mainly at the federal level or in specific populations (e.g. healthcare workers), so probably did not contribute significantly to state differences.

The role of epidemiologic evidence

Without the opportunity to conduct randomized trials, it is difficult to draw conclusions about the impact of public health control strategies. This analysis demonstrates the importance of appropriate data and rigorous study methods. Earlier studies examined aggregate data, often without distinguishing among phases of the epidemic when both the level of transmission and the availability of effective interventions varied. Most studies of the Red Covid phenomenon focused on differences in vaccine uptake, and examine simple bivariate associations even though outcomes were influenced by other state-specific factors ranging from demographic, socioeconomic, and health care characteristics to public attitudes and behaviors and the co-occurrence of multiple policies that shifted over time. In addition, we based our analysis on excess mortality rates rather than reported Covid mortality rates. The latter are differentially undercounted in Red states, obscuring differences in actual mortality.

However, isolating the effect of policies, behaviors, attitudes, and political affiliation is immensely complex. One cannot analyze the impact of policies (arrow 1 in Fig. 4) without considering individual behavior as an intermediate factor (2). Political affiliation presumably influences which policies are adopted as well as compliance (3). Attitudes (including trust) determine both individuals' political affiliation and their behavior

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(4). Analysts must also account for the influence of demographic, socioeconomic, and other risk factors (such on Covid outcomes (5). And both attitudes and these other factors are associated with political affiliation, with the direction of the causal arrow unclear (6). Considering that multiple policies were implemented at different times, that attitudes and behaviors also vary over time and within a state, it is simply not possible to sort out the causal relationships, either statistically or conceptually. Our analysis does, however, demonstrate that the "Red Covid" phenomenon (the combination of Republication identification, less trust, Covid denialism, weaker policies, less compliance, more cases and deaths) emerged earlier than thought, and calculate its magnitude.

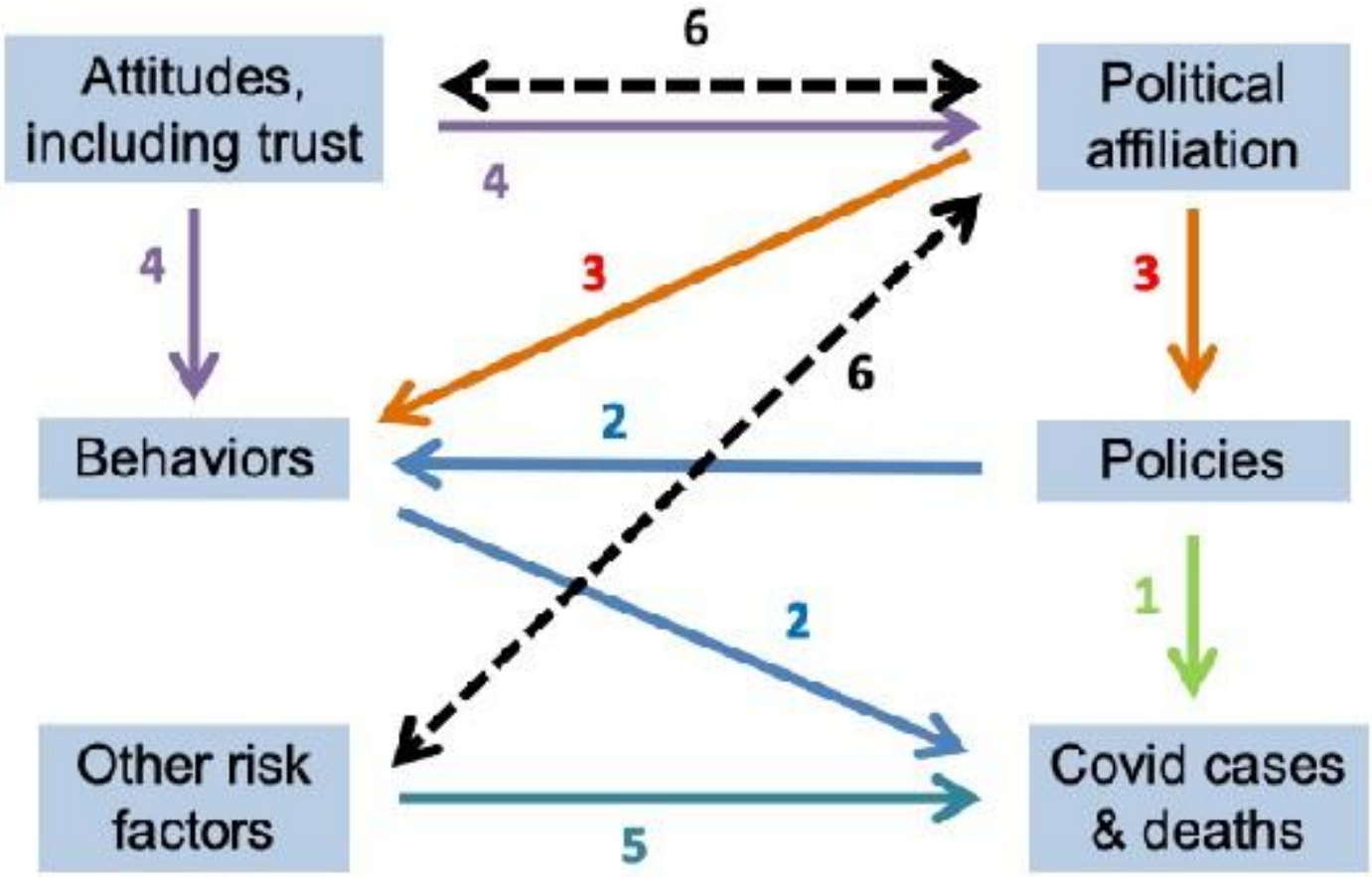

Figure 4. Associations and causal relationships.

Conclusions

State-level disparities in mortality rates are shaped by multiple variables — ranging from demographic, socioeconomic, and racial-ethnic characteristics to access to health care and the prevalence of health behaviors and preexisting conditions — but partisan choices made by state policymakers and the public are likely to have contributed to mortality trends during the pandemic. In this respect, we found that more than half a million deaths could have been avoided during the pandemic if all states had experienced the excess mortality rates of the best-performing quintile, and the majority – 320,162 – occurred in states with Republican governors and legislatures.

In addition, we found that almost 300,000 deaths could have been avoided before vaccines were widely available. While this study was not designed to measure the impact of any specific policy action, but rather to describe patterns in outcomes associated with partisan choices made by state policymakers and the public.

Even before the pandemic, studies had demonstrated that polarization of state policies had widened since the 1990s, that Republican-leaning populations experienced higher mortality rates than Democratic-leaning populations, and that states with progressive policy orientations experienced larger gains in life expectancy than those with conservative orientations. State policies in specific domains were associated with more favorable mortality outcomes. To some extent, the COVID-19 pandemic was an extension of this trend. This study, and the stark disparities it documents during the pandemic, thus contributes to the growing body of evidence that state policy choices influence health outcomes, a relationship likely to gain relevance in the future, as states make increasingly consequential decisions in other domains, such as reproductive health, firearms, and the climate, among others. ■

The Smallest Victims of Arsenic

How a poison in our water reveals a missed opportunity

Author: Bruce Lanphear, MD, MPH

NOTE: This article was originally published on November 11, 2025 by Plagues, Pollution & Poverty on Substack.

Reducing arsenic in our water may be one of the most direct—and overlooked—ways to prevent chronic disease.

Every year, hundreds of thousands of babies are born too small or too soon. Parents search for answers in genes or luck—but sometimes the culprit is closer to home. More than 40 million Americans drink from private wells—many of them untested and contaminated with arsenic or other toxic chemicals that can quietly raise the risk of premature or low-weight births.

Public-health victories rarely make headlines. Yet every so often, a new study reminds us not only how far we still have to go, but which direction to take. A study by Dr. Anne Nigra has done just that—linking arsenic in public drinking water to a greater risk of babies being born too small.

The finding is powerful on its own, but even more so in context. For centuries, arsenic has been known as a potent poison. At high doses, it kills quickly. At lower doses—those found in drinking water, food, and household dust—it works slowly, quietly increasing the risk of lung cancer, diabetes, and heart disease—three of the leading causes of death.

These aren't rare or distant outcomes; they're the illnesses that touch nearly every family, often without anyone realizing that a poison in the water may have helped set them in motion.

What this new study adds is clarity: no level of arsenic exposure can truly be considered safe.

Beyond Safe: The Trouble with Thresholds

The federal drinking-water standard for arsenic in the United States is 10 parts per billion—about five teaspoons in an Olympic-sized swimming pool. But that number reflects politics, not health—and the science has left it behind.

Both New Jersey and New Hampshire have set their standards at a more protective 5 parts per billion. And for good reason. A growing body of research shows that even "low" levels of arsenic are linked to harmful effects, from impaired fetal growth to excess cardiovascular disease.

The idea of a "safe threshold" for toxic chemicals has always been more political than scientific. Arsenic is simply the latest example. The science keeps showing that small, chronic exposures add up—that the line between a harmless dose and a harmful one is thinner than most of us can imagine.

The Evidence Builds: Clues from Birth and Beyond

For most people, arsenic exposure doesn't come from factories or mines—it comes quietly through the water we drink and the food we eat, especially rice**.** In much of the United States—and around the world—it occurs naturally in groundwater that supplies private

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wells, a hidden source of chronic exposure. Rice—which is a staple for half of the world's population—absorbs arsenic from both water and soil more efficiently than most crops. Together, these exposures create a steady intake of arsenic in millions of people who may never suspect it.

Private wells, used by more than 40 million Americans, are not regulated under the Safe Drinking Water Act. Families who depend on them often have no idea what's in their water. In rural and low-income communities, many drink what flows from their taps unaware it may contain arsenic, lead, PFAS, or other contaminants.

When the EPA lowered the federal arsenic standard from 50 to 10 parts per billion in 2001, not everyone agreed it was necessary. Senator Pete Domenici of New Mexico tried to block the rule, calling it unscientific and too costly for small communities. But time—and science—proved otherwise.

Using national biomonitoring data from 2003 to 2014, Anne Nigra found that arsenic exposure declined by about 17% among Americans on public water systems—equivalent to 2000 fewer cases of lung and bladder cancer each year. Levels, however, remained unchanged for families relying on private wells.

Policy works—when we let it. Even imperfect protections can save lives, reduce suffering, and remind us that progress, though often slow, still moves in the right direction when guided by evidence and public will.

A Global Crisis, Hiding in Plain Sight

The arsenic problem extends far beyond U.S. borders. In Bangladesh, where tens of millions rely on groundwater contaminated with

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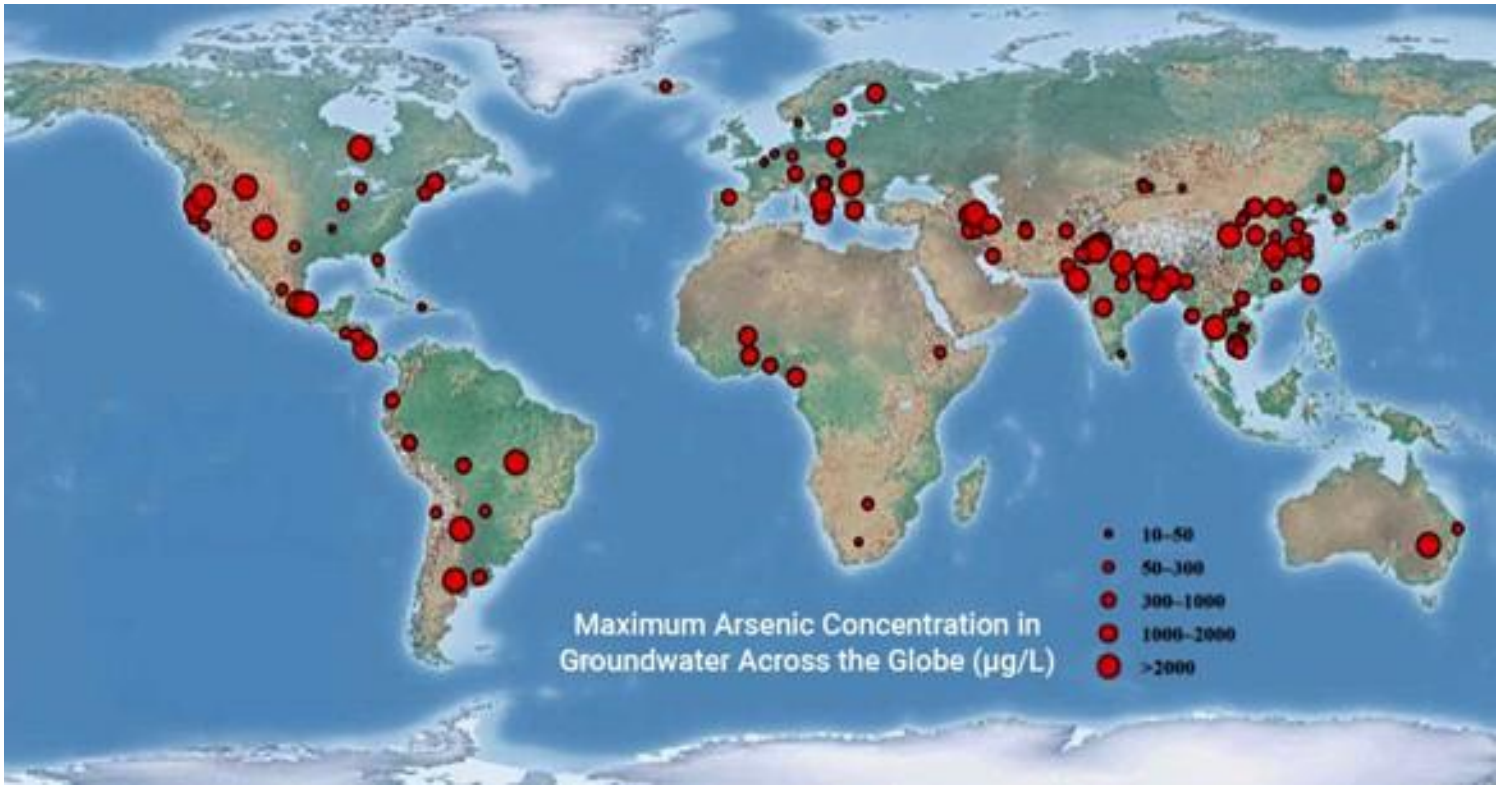
- Arsenic cont'd from page 16

naturally occurring arsenic, the crisis has been called *the largest mass poisoning in history.* Arsenic contamination threatens communities in India, China, Mexico, Chile, and parts of Canada.

Few environmental health problems are as overlooked—or as solvable—as arsenic exposure. Nearly 140 million people in 70 countries are drinking water at levels above the World Health Organization's guidance of 10 parts per billion. It contributes to a vast but largely invisible burden of disease. Yet few governments or donors invest in testing or cleaning up contaminated wells, even though tens of millions of people are exposed daily. The tools to identify and reduce arsenic in drinking water are inexpensive, proven, and scalable.



Adapted from Guo J, et al. Water 2024

Researchers have revealed another layer of concern: arsenic-contaminated water can foster bacteria that are resistant to multiple antibiotics**.** In arsenic-rich environments, microbes often share genes that help them survive both heavy metals and antimicrobial drugs. In this way, arsenic pollution doesn't just endanger those who drink the water—it also contributes to the global crisis of antibiotic resistance.

By almost any metric, reducing arsenic exposure ranks among the most efficient and equitable ways to prevent chronic disease and extend healthy life worldwide. And if we act broadly and with purpose—reducing arsenic, lead, PFAS, and fluoride in drinking water—the improvements in public health could be extraordinary.

Reducing arsenic, isn't just a water-quality improvement—it's an attack on the root causes of chronic disease.

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Why Birth Weight Matters

Birth weight is one of the oldest and most revealing measures in public health. For nearly a century, doctors and demographers have used it to gauge how societies are doing, because it distills—into a single number—the complex conditions that shape life before birth.

A baby's weight reflects far more than genetics: it mirrors the mother's nutrition, her exposure to pollutants or toxic metals, her stress, and the stability of her environment. Across populations, birth weight becomes a kind of social barometer, registering poverty, inequality, and contamination long before these forces show up in adult disease.

Low birth weight—babies weighing less than 2,500 grams—is a clear warning that something went wrong during pregnancy. But birth weight can also be too high. Babies born large for gestational age, often to mothers with obesity or diabetes, face greater risks of delivery complications and metabolic disease later in life.

The sweet spot of healthy birth weight, then, is more than a number—it's a measure of balance. It signals living conditions that support healthy pregnancies and resilient children. That's why shifts in birth weight tell such an important story about population health—and why, in the case of arsenic, the smallest victims may once again be revealing the hidden cost of contamination.

What Now?

It's time to stop asking how much poison is safe and start asking how to eliminate it. The evidence is in. Arsenic doesn't belong in our water—any more than lead belongs in gasoline or tobacco smoke in our lungs.

Reducing arsenic exposure is not just a technical fix; it's a preventive strike on the root causes of disease. And until we treat it that way, we will keep paying the price—in dollars, in suffering, and in lives just beginning. ■

To read more content like this please subscribe to Plagues, Pollution & Poverty on Substack

From Our Archives

The Job Hunt: How to Format Your Resume or CV for Success

Author: Madeline Roberts, PhD, MPH

EpiMonitor recently received a reader request from someone in the preliminary stages of a job search asking how to attractively and professionally format a CV:

"Dear EpiMonitor, I am starting my job search. I am told that my CV which is in the format required for my institution is unattractive and hard to read. Do you have a recommended format for people in our field?"

To begin, often résumé and CV are used synonymously, but there are nuanced differences between them. Largely they vary based on the position or industry to which you are applying as well as your own experience.

A suggested rule-of-thumb is a one-page résumé for Bachelor's degree applicants, a two-page résumé for Master's degree applicants, and a comprehensive CV for an applicant with a doctoral degree, however, certain organizations may request a CV format for any level candidate. Additionally, if you participated in research at the bachelor or master level and have publications, you may wish to include a publication category on your résumé or choose a CV format to highlight your experience. Great examples and formats of both CVs and résumés can be found here.

Résumé or CV? In short here are the similarities and differences:

	Résumé	**Curriculum Vitae (CV)**
Context: when do I use which?	Private industry or non-profit	Academia/education, scientific, research, and international positions
Typical length	1-2 pages, consider: Bachelor's degree: 1 page Master's degree: 2 pages	More comprehensive Doctoral degree: as many pages as needed
Categories suggested for both a résumé and a CV	Contact Information Objective or Summary of Qualifications (optional) Education Relevant Experience Relevant Coursework Technical Skills Leadership Special Skills/Areas of Specialization Community Service/Volunteer Work Honors and Awards Study Abroad/Travel/Languages Military Experience Other Experience	

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- Resume cont'd from page 19

	Résumé	Curriculum Vitae (CV)
Additional suggested categories specific to a CV		Dissertation/Thesis topic Postdoctoral Training/Fellowships Publications Awards Teaching Experience Abstracts and Presentations Symposia/Lectures Professional Affiliations Research Grants Certifications/Licensure University Committee Appointments

More and more epidemiologists will be in this same predicament. The US Bureau of Labor Statistics projects job growth for epidemiologists will increase 27% between 2022 and 2032, which is higher than average growth across all occupations. Over the next decade, approximately 800 openings annually are estimated for epidemiologists, many of which may stem from the need to replace workers who exit the field of epidemiology or retire. We have previously written about the epidemiology job market outlook (here and here).

Since our previous articles on the epidemiology job market, ChatGPT and generative AI have become an increasingly outsize factor virtually everywhere, including on the job-seeker front. For some time, employers have used AI and Applicant Tracking Systems to cull résumés, direct application processes, and identify candidates. A newer development is that applicants are now leveraging generative AI to write cover letters and résumés and using bots to apply for scores of jobs in a matter of minutes. (It is worth noting here that applying for jobs via bots can potentially backfire, as some employers now intentionally build skip questions into online applications to flag bot applicants.)

Having said that, ChatGPT and AI applications for job seekers can be powerful tools to help tailor your CV to a particular job description, and to edit, condense, and strengthen your work experience descriptions on your CV. Job-seeker applications like Sonora, Big Interview, Massive, and LazyApply assist with a number of tasks such as identifying jobs of interest and even applying to them on your behalf, as well as critiquing and strengthening your CV or résumé. One LazyApply user reported an approximately half percent success rate—20 interviews were extended after the service had applied for around 5,000 positions.

As you progress to the interview process, large language models like ChatGPT can help you think through potential interview questions, then flip the script to evaluate and refine your responses.

The best rule of thumb we've heard is to treat ChatGPT and generative AI as a research assistant—a solid source of information that you still need to check. If you are using ChatGPT for anything, you still need to "own the information" and make sure you've read and

- Resume cont'd on page 21

- Resume cont'd from page 20

fact-checked it. And in the job-seeking process, remember something AI cannot generate for you is genuine interest in a position or organization.

While content and formatting may vary depending on the type of job you're seeking (academic position, state health department, private industry), we've compiled some general pointers below.

1. Write an objective. Depending on what job you're applying for, a concise, clearly stated objective can communicate both your expertise and your interest in a specific position.

2. The double-edged sword of ChatGPT and generative AI. Use generative AI to help tailor your CV to a particular job description, and to edit, condense, and strengthen your work experience descriptions on your CV. Be aware that some companies include skip questions to differentiate between candidates that are mass-applying via bots and candidates that are applying manually.

   Generative AI can also help you prepare for an interview by assuming the role of an interviewer and asking you questions, as well as evaluating and refining your responses.

3. Once you have finalized your content, consider exploring professional résumé CV templates in a template editor, such as Canva. After all, you want to stand out!

Good luck in your job search! Be sure to stop by our job openings page, you may just find your next position.

■

2026 Worldwide Event Calendar
January 2026

January 5-17 **Type:** Winter Program **Web:** https://tinyurl.com/5n7f5spu
Title: Johns Hopkins Winter Institute
Sponsor: Johns Hopkins University **Location:** Baltimore, MD / Washington, DC / Virtual

January 5-16 **Type:** Short Course **Web:** https://bit.ly/3EYYZQY
Title: Selected Topics in Epidemiology
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

January 8-30 **Type:** Winter Program **Web:** https://www.epidm.nl/en/
Title: EpidM Winter Program 2026
Sponsor: Multiple **Location:** Amsterdam

January 14-16 **Type:** Short Course **Web:** https://tinyurl.com/ms73nax5
Title: Advanced Mendelian Randomization
Sponsor: University of Bristol **Location:** Virtual

Jan 19 – Feb 13 **Type:** Summer Program **Web:** https://tinyurl.com/y2xpcak5
Title: Summer Program 2026
Sponsor: Australian Consortium for Social & Political Research **Location:** Melbourne, AU & Virtual

Jan 19 – 21 **Type:** Short Course **Web:** https://bit.ly/3PBbiJv
Title: Competing Risks and Multi-State Models
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

Jan 21 – 23 **Type:** Short Course **Web:** http://tinyurl.com/epybnybr
Title: Improving your Stata: data management, publication-quality outputs and automating tasks
Sponsor: University of Bristol **Location:** Virtual

Jan 19 – 24 **Type:** Winter Program **Web:** https://bit.ly/3qunYrg
Title: Swiss Epidemiology Winter School
Sponsor: Institute of Social & Preventive Medicine - Bern **Location:** Wengen, Switzerland

Jan 22-26 **Type:** Conference **Web:** https://tinyurl.com/mt5arfzn
Title: 2026 Biostatistics Symposium
Sponsor: Biostatistics Symposium of Southern California **Location:** Newport Beach, CA

January 2026

January 26-28 **Type:** Short Course **Web:** http://tinyurl.com/y7wtv7zw
Title: Questionnaire Design: Application and Data Interpretation
Sponsor: University of Bristol **Location:** Virtual

January 26-30 **Type:** Short Course **Web:** https://bit.ly/3FDOYu8
Title: Using R for Decision Modeling in Health Technology Assessment
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

January 28-30 **Type:** Conference **Web:** https://tinyurl.com/mtkjxu3u
Title: 36th Annual Scientific Meeting of the JEA
Sponsor: Japan Epidemiological Association **Location:** Nagasaki, Japan

January 30 **Type:** Conference **Web:** https://tinyurl.com/3kwmnvfv
Title: 51st Topics in Infection 2026
Sponsor: Royal Society of Tropical Medicine & Hygiene **Location:** London, England

February 2026

February 9-13 **Type:** Short Course **Web:** http://tinyurl.com/59yh5856
Title: The Placebo Effect
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

February 9-13 **Type:** Short Course **Web:** https://bit.ly/3oW8L0W
Title: Introduction to Epidemiology
Sponsor: University of Bristol **Location:** Virtual

February 9-13 **Type:** Winter Program **Web:** https://bit.ly/3lRZeDf
Title: Winter School in Clinical Epidemiology
Sponsor: UMIT **Location:** Tirol, Austria

February 9-13 **Type:** Conference **Web:** https://tinyurl.com/2bwca379
Title: SER 2026 Mid-Year Meeting
Sponsor: Society for Epidemiologic Research **Location:** Virtual

February 2026

February 11-13 **Type:** Conference **Web:** https://tinyurl.com/3fem9cy2
Title: AIR 2026 Genomic Responses to Respiratory Infection, Microbiomes & Immunity
Sponsor: Wellcome Connecting Science **Location:** Hinxton, England

February 11-12 **Type:** Conference **Web:** https://tinyurl.com/38jhf97x
Title: Rural Health Policy Institute
Sponsor: National Rural Health Association **Location:** Washington, DC

February 12-13 **Type:** Conference **Web:** https://tinyurl.com/yb7ybu2r
Title: 7th Annual National Big Data Health Science Conference
Sponsor: Big Data Health Science Center **Location:** Columbia, SC

February 16-18 **Type:** Short Course **Web:** https://bit.ly/3G1mAn4
Title: Mendelian Randomisation
Sponsor: Erasmus MC **Location:** Virtual

February 17 **Type:** Conference **Web:** https://tinyurl.com/2de2wknd
Title: Arizona Rural & Public Health Policy Forum
Sponsor: University of Arizona SPH **Location:** Phoenix, AZ

February 22-26 **Type:** Conference **Web:** https://tinyurl.com/2de2wknd
Title: Conference on Retroviruses and Opportunistic Infections (CROI)
Sponsor: International Antivirus Society - US/CROI **Location:** Denver, CO

February 23-27 **Type:** Short Course **Web:** http://tinyurl.com/2fkh6ejx
Title: Introduction to Linear and Logistic Regression Models
Sponsor: University of Bristol **Location:** Virtual

February 27 **Type:** Conference **Web:** https://tinyurl.com/djwk9z4e
Title: Rare Disease Day
Sponsor: FDA-NIH **Location:** Bethesda, MD

March 2026

March 2-4 **Type:** Conference **Web:** https://tinyurl.com/32jem77y
Title: Microbiome Interactions in Health & Disease
Sponsor: Wellcome Connecting Science **Location:** Hinxton, England & Virtual

March 2-6 **Type:** Short Course **Web:** http://tinyurl.com/wkhee8uy
Title: Implementation Science
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

March 2-17 **Type:** Short Course **Web:** http://bit.ly/33XqJSJ
Title: Intensive Course in Applied Epidemiology
Sponsor: University of Aberdeen **Location:** Virtual

March 2-6 **Type:** Short Course **Web:** https://bit.ly/3v2gRXS
Title: An Introduction to the Analysis of the Next-generation Sequencing Data
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

March 2-11 **Type:** Short Course **Web:** http://tinyurl.com/yh8ce5ha
Title: Public Health Across the Life Course
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

March 3-13 **Type:** Short Course **Web:** https://tinyurl.com/mryhh3w7
Title: Item Response Theory
Sponsor: EpidM **Location:** Virtual

March 9-13 **Type:** Short Course **Web:** https://bit.ly/320OvlT
Title: Advanced Clinical Trials
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

March 11-13 **Type:** Conference **Web:** https://bit.ly/3WuSZrQ
Title: Public Health 2026
Sponsor: Canadian Public Health Association **Location:** Montreal, Canada

March 17-20 **Type:** Conference **Web:** https://tinyurl.com/2p9fmtep
Title: Epi Lifestyle Scientific Sessions - 2026
Sponsor: American Heart Association **Location:** Boston, MA

March 2026

March 12-13 **Type:** Conference **Web:** https://tinyurl.com/57z9dr6j
Title: 99th Annual Meeting - American Epidemiological Society
Sponsor: AES **Location:** Atlanta, GA

Mar 16 – Apr 1 **Type:** Short Course **Web:** http://tinyurl.com/4kzuxcys
Title: Repeated Measurements
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands & Virtual

March 18-20 **Type:** Conference **Web:** https://tinyurl.com/mseuj593
Title: 2026 ASPPH Annual Meeting for Academic Public Health
Sponsor: Association of Schools & Programs of Public Health **Location:** Arlington, VA

March 23-24 **Type:** Conference **Web:** https://tinyurl.com/342wpz83
Title: The Future of Preventive Medicine and Public Health
Sponsor: Peers Alley Conferences **Location:** Rome, Italy

March 16-18 **Type:** Conference **Web:** https://tinyurl.com/22jyzn2y
Title: SCPHA Annual Conference
Sponsor: South Carolina Public Health Association **Location:** Columbia, SC

Mar 16 – Apr 1 **Type:** Short Course **Web:** http://tinyurl.com/4kzuxcys
Title: Repeated Measurements
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands & Virtual

March 19-21 **Type:** Conference **Web:** https://tinyurl.com/yrxrzrm7
Title: 5th International Public Health Conference - Global Health Security
Sponsor: Magnus Group **Location:** Singapore or Virtual

Mar 23-25 **Type:** Conference **Web:** http://tinyurl.com/4kzuxcys
Title: RISE Conference on Social Determinants of Health
Sponsor: RISE Health **Location:** Orlando, FL

March 2026

Mar 23-26 **Type:** Conference **Web:** https://tinyurl.com/5n6bzvuu
Title: Antimicrobial Resistance - Genomes, Big Data and Emerging Technologies
Sponsor: Wellcome Connecting Science **Location:** Hinxton, England

March 25-27 **Type:** Conference **Web:** https://tinyurl.com/56fc85hu
Title: Annual Meeting - Society for Veterinary Epidemiology
Sponsor: SEVPM **Location:** London, England

March 26-27 **Type:** Conference **Web:** https://tinyurl.com/4u9sj4b4
Title: Conference on Epidemiology and Public Health
Sponsor: Conference Series **Location:** Tokyo, Japan

March 30 - April 2 **Type:** Conference **Web:** https://tinyurl.com/chtprfav
Title: 2026 World Vaccine Congress
Sponsor: Multiple **Location:** Washington, DC

April 2026

April 1-2 **Type:** Short Course **Web:** https://tinyurl.com/5b4t8b8b
Title: Introduction to Bayesian Statistics
Sponsor: EpidM **Location:** Amsterdam, The Netherlands

April 7-9 **Type:** Short Course **Web:** http://tinyurl.com/msdrnpt2
Title: Cardiovascular Epidemiology
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

April 7-10 **Type:** Conference **Web:** https://tinyurl.com/2p9m5ex5
Title: SHEA (Society for Healthcare Epidemiology of America) Spring 2026
Sponsor: SHEA **Location:** Chicago, IL

April 9-10 **Type:** Conference **Web:** https://tinyurl.com/mu2d38pp
Title: Cancer Retreat 2026
Sponsor: Erasmus MC Cancer Institute **Location:** Rotterdam, The Netherlands

April 2026

April 9-12 **Type:** Conference **Web:** https://tinyurl.com/46tjvuvn
Title: CUGH 2026 Conference
Sponsor: Consortium of Universities for Global Health **Location:** Washington, DC

April 12-14 **Type:** Conference **Web:** https://tinyurl.com/4hnr7svm
Title: 50th Annual Conference - American Society of Preventive Oncology
Sponsor: ASPO **Location:** Denver, CO

April 13-15 **Type:** Conference **Web:** https://tinyurl.com/35aa7ja8
Title: Mutations in Time and Space
Sponsor: Wellcome Connecting Science **Location:** Hinxton, England

Apr 13-16 **Type:** Conference **Web:** https://bit.ly/3oLZ2Kz
Title: NACCHO Preparedness Summit 2026
Sponsor: Multiple **Location:** Baltimore, MD & Virtual

April 17-21 **Type:** Conference **Web:** https://tinyurl.com/2ku8d5mn
Title: ESCMID Global 2026
Sponsor: ESCMID **Location:** Munich, Germany

April 17-22 **Type:** Conference **Web:** https://tinyurl.com/3tym854p
Title: 2026 Annual Meeting - American Association for Cancer Research
Sponsor: AACR **Location:** San Diego, CA

April 19-21 **Type:** Conference **Web:** https://tinyurl.com/34x5tnn5
Title: Teaching Prevention 2026
Sponsor: Association for Prevention Teaching & Research **Location:** Savannah, GA

April 20-21 **Type:** Short Course **Web:** https://tinyurl.com/zsyycmeb
Title: Analysis of Repeated Measures
Sponsor: University of Bristol **Location:** Virtual

April 20-23 **Type:** Conference **Web:** https://tinyurl.com/fjbtbtjn
Title: Annual Epidemic Intelligence Service Conference
Sponsor: CDC **Location:** Atlanta, GA

April 2026

April 20-24 **Type:** Short Course **Web:** https://bit.ly/3G3VhZr
Title: Advanced Decision Modeling
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

April 22-24 **Type:** Short Course **Web:** http://tinyurl.com/mvbrbtew
Title: Molecular Epidemiology
Sponsor: University of Bristol **Location:** Virtual

April 22-24 **Type:** Conference **Web:** https://tinyurl.com/3jzx8p4x
Title: SOPHE 2026
Sponsor: Society for Health Education **Location:** Portland, OR

Apr 22-24 **Type:** Meeting **Web:** https://tinyurl.com/3fhcdb7a
Title: 76th Annual Public Health Partnership Conference
Sponsor: NY State Public Health Associates **Location:** Lake Placid, NY

April 26-28 **Type:** Conference **Web:** https://tinyurl.com/4nb7cv4u
Title: Health Effects Institute - Annual Conference 2026
Sponsor: HEI **Location:** Chicago, IL

April 27-29 **Type:** Conference **Web:** https://tinyurl.com/4nb7cv4u
Title: 20th Annual - Genomics of Rare Disease
Sponsor: Wellcome Connecting Science **Location:** Hinxton, England

April 27-30 **Type:** Conference **Web:** https://tinyurl.com/3dv5rprz
Title: NCUIH 2026 Annual Conference
Sponsor: National Council of Urban Indian Health **Location:** Washington, DC

April 28-30 **Type:** Conference **Web:** https://tinyurl.com/5n8wjzvz
Title: 25th Annual NNPHI Conference
Sponsor: National Network of Public Health Institutes **Location:** New Orleans, LA

April 2026

April 28-30 **Type:** Conference **Web:** https://tinyurl.com/57zfrdzb
Title: World Hepatitis Summit
Sponsor: World Hepatitis Alliance **Location:** Bangkok, Thailand

Apr 29 **Type:** Conference **Web:** https://tinyurl.com/2cbk7y2r
Title: 95th Georgia Public Health Association Annual Conference
Sponsor: GPHA **Location:** Virtual

April 29 - May 1 **Type:** Meeting **Web:** https://tinyurl.com/pzyk3pp4
Title: 2026 Annual Oregon Epidemiologists' Meeting
Sponsor: Oregon Health Authority **Location:** Sunriver, OR

Apr 28 - May 15 **Type:** Short Course **Web:** https://bit.ly/3YwW6kG
Title: Missing Values in Clinical Research
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

May 2026

May 4-7 **Type:** Conference **Web:** https://tinyurl.com/mtepy6sf
Title: APHL 2026 Annual Conference
Sponsor: Association of Public Health Laboratories **Location:** Baltimore, MD

May 4-22 **Type:** Short Course **Web:** https://tinyurl.com/ynw2u7jc
Title: Modeling Food Health Risks and Animal Health Risks Using R
Sponsor: Epix Analytics **Location:** Virtual

May 6-9 **Type:** Conference **Web:** https://tinyurl.com/nhfhaa35
Title: 2026 Annual Conference - Population Association of America
Sponsor: PAA **Location:** St. Louis, MO

May 8-10 **Type:** Conference **Web:** https://tinyurl.com/58nxyaun
Title: The 11th Workshop on Biostatistics and Bioinformatics
Sponsor: National Science Foundation & Georgia State University **Location:** Atlanta, GA

May 8-10 **Type:** Conference **Web:** https://tinyurl.com/3uejhmav
Title: The 11th Workshop on Biostatistics and Bioinformatics
Sponsor: National Science Foundation & Georgia State University **Location:** Atlanta, GA

May 2026

May 11-13 **Type:** Short Course **Web:** https://tinyurl.com/242e3thd
Title: Health Effects of Vaccines: From Genomics to Policy
Sponsor: Wellcome Connecting Science **Location:** Hinxton, England & Virtual

May 11-13 **Type:** Short Course **Web:** http://tinyurl.com/2f2ax7jw
Title: Statistical Methods for Mediation Analysis
Sponsor: University of Bristol **Location:** Virtual

May 12-15 **Type:** Conference **Web:** http://bit.ly/2DXzS3d
Title: INTEREST 2026
Sponsor: IeDE (Intl Epi Databases to Evaluate AIDS **Location:** Dar es Salaam, Tanzania

May 13-15 **Type:** Conference **Web:** https://tinyurl.com/nkktrjyw
Title: Human Immunology: Genes and Environment
Sponsor: Wellcome Connecting Science **Location:** Hinxton, England & Virtual

May 14-15 **Type:** Short Course **Web:** http://tinyurl.com/2yw6dpxy
Title: Introduction to Quantitative Bias Analysis
Sponsor: University of Bristol **Location:** Virtual

May 14-17 **Type:** Conference **Web:** https://tinyurl.com/y99v5t7r
Title: Preventive Medicine 2026
Sponsor: American College of Preventive Medicine **Location:** Baltimore, MD

May 18-22 **Type:** Short Course **Web:** http://tinyurl.com/4xwhe3y9
Title: Introduction to Qualitative Research Methods
Sponsor: University of Bristol **Location:** Virtual

May 17-20 **Type:** Conference **Web:** https://bit.ly/3FBbwf3
Title: 47th Annual Meeting
Sponsor: Society for Clinical Trials **Location:** Phoenix, AZ

May 18-19 **Type:** Conference **Web:** https://tinyurl.com/4jhnbjbz
Title: Health Equity Conference
Sponsor: National Rural Health Association **Location:** San Diego, CA

May 2026

May 18-20 **Type:** Conference **Web:** https://tinyurl.com/3best8ar
Title: STATGEN 2026: Conference on Statistics in Genomics and Genetics
Sponsor: American Statistical Association (ASA) **Location:** Atlanta, GA

May 18-22 **Type:** Short Course **Web:** https://tinyurl.com/ynbf9drb
Title: Psychiatric Epidemiology
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

May 18-23 **Type:** Conference **Web:** https://bit.ly/321Yo2B
Title: 79th World Health Assembly
Sponsor: WHO **Location:** Geneva, Switzerland

May 18 – Jun 26 **Type:** Summer Program **Web:** https://tinyurl.com/4vhys5vn
Title: 2026 Summer Institute in Biostatistics and Data Science
Sponsor: Florida Atlantic University **Location:** Boca Raton, FL

May 18-28 **Type:** Short Course **Web:** http://tinyurl.com/4wkbwcu3
Title: Sustainable Public Health
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

May 19-21 **Type:** Conference **Web:** https://tinyurl.com/4d62xpv3
Title: 102nd Annual Education Conference
Sponsor: Texas Public Health Association **Location:** Houston, TX

May 19-21 **Type:** Conference **Web:** https://tinyurl.com/4ybfra9h
Title: 2026 Wisconsin Public Health Conference
Sponsor: WPHA **Location:** Wisconsin Dells, WI

May 19-22 **Type:** Conference **Web:** https://tinyurl.com/ys643ycx
Title: Annual Rural Health Conference
Sponsor: National Rural Health Association **Location:** San Diego, CA

May 20-22 **Type:** Conference **Web:** https://tinyurl.com/pvkjamkv
Title: Brain Tumor Epidemiology Consortium Conference
Sponsor: BTEC **Location:** London, England

May 2026

May 23-27 **Type:** Short Course **Web:** https://bit.ly/32uyVPE
Title: Causal Inference for Assessing Effectiveness in Real World Data and Clinical Trials
Sponsor: UMIT **Location:** Virtual

May 27-29 **Type:** Short Course **Web:** https://bit.ly/2C4g1PE
Title: Quality of Life Measurement
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

May 26-29 **Type:** Conference **Web:** https://tinyurl.com/2zy7edwx
Title: 2026 SPR Annual Conference
Sponsor: Society for Prevention Research **Location:** Washington, DC

May 30 - June 2 **Type:** Conference **Web:** https://tinyurl.com/422urdez
Title: Annual Research Meeting - Academy Health
Sponsor: Academy Health **Location:** Seattle, WA

May 30 - June 3 **Type:** Conference **Web:** https://tinyurl.com/52pu9k6x
Title: Statistical Society of Canada Annual Conference
Sponsor: SSC **Location:** Hamilton, Ontario, Canada

May 31 - June 13 **Type:** Summer Program **Web:** https://tinyurl.com/38yh396w
Title: Summer Program on Modern Methods in Biostatistics & Epidemiology
Sponsor: BioStatEpi **Location:** Treviso, Italy

May – June TBD **Type:** Summer Program **Web:** http://bit.ly/38mW6tl
Title: McGill Summer Institute
Sponsor: Summer Institutes in Global Health **Location:** Montreal, Quebec, Canada & Virtual

May-June TBD **Type:** Summer Program **Web:** http://bit.ly/2P1VUrR
Title: Summer Public Health Institute
Sponsor: University of Minnesota **Location:** Minneapolis, MN

June 2026

June 1-5 **Type:** Conference **Web:** https://tinyurl.com/jxms5vue
Title: 51st Annual Kettil Brunn Society Meeting
Sponsor: KBS **Location:** Kaunas, Lithuania

June 1-30 **Type:** Summer Program **Web:** https://tinyurl.com/jxms5vue
Title: EpiSummer@Columbia
Sponsor: Columbia University **Location:** Virtual

June 3-5 **Type:** Conference **Web:** https://tinyurl.com/26bnf44e
Title: 5th Annual ISI Regional Statistical Conference
Sponsor: ISI **Location:** Valletta, Malta

June 8-12 **Type:** Conference **Web:** https://tinyurl.com/2e24vjfw
Title: 2026 Grantmakers In Health (GIH) Annual Conference on Health Philanthropy
Sponsor: Grantmakers in Health **Location:** Baltimore, MD

June 9-11 **Type:** Conference **Web:** https://tinyurl.com/2nbxaexw
Title: 2025 Policy Action Institute
Sponsor: American Public Health Association **Location:**

June 15-17 **Type:** Conference **Web:** https://bit.ly/3DNvDDG
Title: Assn for Professionals in Infection Control and Epidemiology (APIC) 25th Annual Conference
Sponsor: APIC **Location:** Nashville, TN

June 15 – July 3 **Type:** Summer Program **Web:** http://eepe.org
Title: 38th Residential Summer Course in Epi
Sponsor: EEPE **Location:** Florence, Italy

June 2026

June 10-12 **Type:** Short Course **Web:** https://tinyurl.com/mr3d3bc4
Title: Machine Learning with Omics Data
Sponsor: University of Bristol **Location:** Virtual

June 10-12 **Type:** Conference **Web:** https://tinyurl.com/yc43vyb4
Title: 5th Annual BioInference Meeting
Sponsor: Multiple **Location:** St. Andrews, Scotland

June 11-12 **Type:** Conference **Web:** https://tinyurl.com/5n7ar83a
Title: 7th International Molecular Pathological Epidemiology (MPE) Meeting
Sponsor: Multiple **Location:** Buffalo, NY

June 15-19 **Type:** Summer Program **Web:** https://tinyurl.com/bdcufee9
Title: Pharmacoepidemiology Summer School
Sponsor: Aarhus University **Location:** Grenaa, Denmark

June 15-19 **Type:** Short Course **Web:** http://tinyurl.com/3z8s2w4e
Title: Understanding Trusted Research Environments
Sponsor: University of Bristol **Location:** Virtual

June 22-23 **Type:** Conference **Web:** http://bit.ly/2RyvIGU
Title: 39th Annual SPER Meeting
Sponsor: Society for Pediatric & Perinatal Epidemiologic Research **Location:** Phoenix, AZ

June 22-25 **Type:** Conference **Web:** https://tinyurl.com/w9jyfvfs
Title: SIS-FENStats 2026 - Joint Meeting of the Italian & European Statistical Societies
Sponsor: Italian Statistical Society **Location:** Rome, Italy

June 22 – July 3 **Type:** Short Course **Web:** https://bit.ly/2Kxw9QD
Title: Epidemiological Evaluation of Vaccines: Efficacy, Safety and Policy
Sponsor: LSHTM **Location:** London, England

June 28 – July 4 **Type:** Summer Program **Web:** https://tinyurl.com/3jn7x3w8
Title: ESCMID Summer School
Sponsor: ESCMID **Location:** Budapest, Hungary

June 2026

June 29 – July 3 **Type:** Short Course **Web:** https://tinyurl.com/ykdakjje
Title: Causal Inference in Epidemiology: Concepts and Methods
Sponsor: University of Bristol **Location:** Virtual

June TBD **Type:** Summer Program **Web:** https://tinyurl.com/84pu8myt
Title: Big Data Summer Institute
Sponsor: University of Michigan SPH **Location:** Ann Arbor, MI

June TBD **Type:** Summer Program **Web:** http://bit.ly/368xRgK
Title: Summer Program in Epidemiology
Sponsor: Harvard University **Location:** Boston, MA

July 2026

July 2-9 **Type:** Short Course **Web:** http://tinyurl.com/26sm9fs8
Title: CMMSE
Sponsor: University of Bristol **Location:** Virtual

July 6-7 **Type:** Short Course **Web:** http://tinyurl.com/26sm9fs8
Title: Further Survival Analysis
Sponsor: University of Bristol **Location:** Virtual

July 12-16 **Type:** Conference **Web:** https://tinyurl.com/bddvj2m6
Title: 33rd Annual Biometric Conference
Sponsor: International Biometric Society **Location:** Seoul, Korea

July 12-17 **Type:** Conference **Web:** https://tinyurl.com/ytv4hdvf
Title: 12th International Conference on Teaching Statistics
Sponsor: Multiple **Location:** Brisbane, Australia

July 12-22 **Type:** Summer Program **Web:** https://tinyurl.com/tbxyha4r
Title: Summer Institute of Advanced Epidemiology & Preventive Medicine
Sponsor: Tel Aviv University **Location:** Tel Aviv, Israel

July 13-15 **Type:** Conference **Web:** https://tinyurl.com/yvsayuw4
Title: 2026 Annual Meeting - Australasian Epidemiological Association
Sponsor: AES **Location:** Sofitel, Fiji

July 2026

July 13-17 **Type:** Short Course **Web:** http://tinyurl.com/3y8ejd74
Title: Designing and Conducting Pragmatic Randomised Controlled Trials
Sponsor: University of Bristol **Location:** Virtual

July 13-24 **Type:** Summer Program **Web:** https://tinyurl.com/46y94ked
Title: 17th Annual Summer Institute in Statistics and Modeling in Infectious Diseases (SISMID)
Sponsor: SISMID & Emory University **Location:** Atlanta, GA (online option available in June)

July 13-31 **Type:** Summer Program **Web:** https://bit.ly/2QnqkHv
Title: Summer Session in Epidemiology
Sponsor: University of Michigan **Location:** Ann Arbor, MI

July 14-17 **Type:** Conference **Web:** https://bit.ly/3GC1mtG
Title: NACCHO 360 Conference
Sponsor: NACCHO **Location:** Louisville, KY

July 19-24 **Type:** Workshop **Web:** https://tinyurl.com/3jr6kss9
Title: Integrative Molecular Epidemiology Workshop
Sponsor: American Association for Cancer Research (AACR) **Location:** Philadelphia, PA

July 26-31 **Type:** Conference **Web:** https://tinyurl.com/n4abxkex
Title: IAS 2026 - International AIDS Conference
Sponsor: International AIDS Society **Location:** Rio de Janerio, Brazil

July TBD **Type:** Summer Program **Web:** https://tinyurl.com/jubdfaf7
Title: 33rd International Summer School of Epidemiology at Ulm University
Sponsor: Ulm University **Location:** Ulm, Germany

July TBD **Type:** Summer Program **Web:** https://tinyurl.com/5xwkmwdy
Title: 8th Annual Summer Institute in Statistics for Clinical & Epidemiological Research (SISCER)
Sponsor: University of Washington **Location:** Virtual

July TBD **Type:** Summer Program **Web:** https://tinyurl.com/yc5s2b96
Title: Epi on the Island
Sponsor: University of Prince Edward Island **Location:** Prince Edward Island, Canada

July 2026

July TBD **Type:** Summer Program **Web:** https://tinyurl.com/4dwr6vxa
Title: 8th Annual Summer Institute in Statistics for Big Data (SISBID)
Sponsor: University of Washington **Location:** Atlanta, GA

August 2026

August 1-6 **Type:** Conference **Web:** https://tinyurl.com/yvfw99x5
Title: JSM 2026 (Joint Statistics Meeting)
Sponsor: American Statistical Association **Location:** Boston, MA

August 5-7 **Type:** Conference **Web:** https://tinyurl.com/4sxt3dcr
Title: 9th International Conference on Public Health (ICOPH 2026)
Sponsor: Multiple **Location:** Bali, Indonesia

August 30 - Sept 2 **Type:** Conference **Web:** https://tinyurl.com/5cvba6e3
Title: International Society of Environmental Epidemiology 37th Annual Conference
Sponsor: ISEE **Location:** Munich, Germany

August TBD **Type:** Summer Program **Web:** https://tinyurl.com/mtpbw2kn
Title: Erasmus Summer Program
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

September 2026

September 2-4 **Type:** Conference **Web:** https://tinyurl.com/3ynjazpf
Title: ECVPH AGM & Annual Scientific Conference 2026
Sponsor: ECVPH **Location:** Munich, Germany

September 2-6 **Type:** Conference **Web:** https://tinyurl.com/3v89us3s
Title: Swiss Public Health Conference 2026
Sponsor: Swiss Public Health **Location:** Lucerne, Switzerland

September 14-16 **Type:** Conference **Web:** https://tinyurl.com/2pjjearz
Title: 20th Vaccine Congress
Sponsor: Elsevier **Location:** Seville, Spain

September 2026

September 14-17 **Type:** Conference **Web:** https://tinyurl.com/4tnmnvyn
Title: American College of Epidemiology Annual Conference
Sponsor: ACE **Location:** Buffalo, NY

September 16-19 **Type:** Conference **Web:** https://tinyurl.com/rxykuhmw
Title: 22nd Biennial Congress - EPA Section of Epidemiology & Social Psychiatry
Sponsor: European Psychiatric Association **Location:** Brescia, Italy

Sept 21-23 **Type:** Short Course **Web:** https://tinyurl.com/3epumyc6
Title: Target Validation - In the Era of Genomics, Big Data, and AI
Sponsor: Wellcome Connecting Science **Location:** Hinxton, England & Virtual

Sept 24-25 **Type:** Conference **Web:** https://tinyurl.com/422urdez
Title: 2026 Health Datapalooza
Sponsor: Academy Health **Location:** Washington, DC

Sept 26 - Oct 2 **Type:** Conference **Web:** https://tinyurl.com/frsw6fbb
Title: 2026 IAPHS Conference
Sponsor: IAPHS **Location:** Portland, OR

Sept 27 - Oct 1 **Type:** Conference **Web:** https://tinyurl.com/yx8rh98f
Title: 47th Annual Conference of the International Society for Clinical Biostatistics (ISCB)
Sponsor: ICSB & GMDS **Location:** Breisgau, Germany

September TBD **Type:** Workshop **Web:** https://tinyurl.com/4cp62bcu
Title: 12th Microbial Bioinformatics Hackathon
Sponsor: ESCMID **Location:**

September TBD **Type:** Workshop **Web:** https://tinyurl.com/4cp62bcu
Title: 12th Microbial Bioinformatics Hackathon
Sponsor: ESCMID **Location:**

September TBD **Type:** Conference **Web:** https://tinyurl.com/4kk77e86
Title: Tennessee Public Health Association 2026 Annual Conference
Sponsor: TPHA **Location:**

September 2026

September TBD **Type:** Conference **Web:** https://tinyurl.com/yzfz45wp
Title: IGES 2026
Sponsor: International Genetic Epi Society **Location:**

September TBD **Type:** Conference **Web:** https://tinyurl.com/yrtr7d6x
Title: 2025 CityMatCH Leadership & MCH Epi Conference
Sponsor: CityMatch **Location:** TBD

October 2026

October 5-7 **Type:** Conference **Web:** https://tinyurl.com/muyzzc9t
Title: International Vaccines Conference
Sponsor: Magnus Group **Location:** Tokyo, Japan & Virtual

October 11-12 **Type:** Conference **Web:** https://tinyurl.com/d24vwhnt
Title: International Symposium on Public Health and Epidemiology
Sponsor: Scisynopsis Conferences **Location:** Singapore

October 18-21 **Type:** Conference **Web:** https://tinyurl.com/2nerrtrp
Title: ISPE Annual Conference
Sponsor: ISPE **Location:** Washington, DC

October 20-24 **Type:** Conference **Web:** https://tinyurl.com/u2r3hncd
Title: American Society for Human Genetics 2026 Annual Meeting
Sponsor: ASHG **Location:** Montreal, Canada

October 21-24 **Type:** Conference **Web:** https://idweek.org/
Title: IDWeek
Sponsor: Multiple **Location:** Washington, DC

October 22-23 **Type:** Conference **Web:** https://tinyurl.com/mryn44sk
Title: 9th Intl Conference on Public Health, Well-being and Healthcare Management
Sponsor: Conference Series **Location:** Paris, France

November 2026

November 1-4 **Type:** Conference **Web:** https://tinyurl.com/3hak6y99
Title: APHA Annual Meeting & Expo
Sponsor: American Public Health Association **Location:** San Antonio, TX

November TBD **Type:** Conference **Web:** https://bit.ly/3jcNVcY
Title: 19th European Public Health Conference
Sponsor: EPH **Location:** TBD

November TBD **Type:** Conference **Web:** https://tinyurl.com/ukxk929m
Title: 18th International Conference on Molecular Epidemiology and Evolutionary Genetics of Infectious Diseases / MEEGID XVIII
Sponsor: Elsevier **Location:** TBD

December 2026

As of publication time (December 2025) there were no events listed publicly for December 2026. Please visit our website or check the near term event calendar in each month's newsletter for updates. If you have an event that you neglected to send us, please forward it to us at any time.

Resources
18 Free SAS Books

Editor's Note:
This month's book list comes to us from a long time reader. He felt this was a valuable resource for his fellow readers. If you have a similar list please forward it to us so we can share it.

We are also interested in publishing book reviews. If you have a new book that you have read or written that you believes deserves to be seen by a wider audience please send us the information you have on it. If you're interested in reviewing books for the EpiMonitor, just drop us a line and we'll start a discussion to see what we can work out.

Bayesian Methods with SAS	https://tinyurl.com/669fp3ba
The SAS Add-In for Microsoft Office	https://tinyurl.com/y4hkmjuv
Natural Language Processing with SAS	https://tinyurl.com/yszd5b8s
Computer Vision with SAS	https://tinyurl.com/46n4xtxy
SAS and Open-Source Model Management	https://tinyurl.com/5n6v6nhp
Forecasting with SAS	https://tinyurl.com/4649pw7a
SAS Programming for R Users	https://tinyurl.com/4s845e5a
Exploring Modern Regression Methods Using SAS	https://tinyurl.com/4u8ptens
Visual Analytics with SAS Viya	https://tinyurl.com/3bwbpkzs
Text Analytics with SAS	https://tinyurl.com/3aue3eb8
Data Management with SAS	https://tinyurl.com/3axe8sdv
Artificial Intelligence with SAS	https://tinyurl.com/3fzd2c9n
Exploring SAS Enterprise Miner	https://tinyurl.com/2sn5uns9
Machine Learning with SAS	https://tinyurl.com/4mwd83kb
Discovering SAS Viya	https://tinyurl.com/yz4sue9p
Fraud Analytics with SAS	https://tinyurl.com/4zaekh5x
Vizualizing Data with SAS	https://tinyurl.com/mtt5ebse
Discovering Data Science with SAS	https://tinyurl.com/36cphp82

Epi Word Search – December 2025

E is for Epidemiology and…

This month's puzzle has fewer word but they all start with "epi" and that makes it a very difficult task to find them all. Good luck - don't let the puzzle frustrate you!

For an interactive online version go to: https://tinyurl.com/36pdt8xv

E is for Epidemiology and… *by Michele Gibson*
Powered by PuzzleMe™

Words to find:

1. Epidemic
2. Epidemiology
3. Epidermis
4. Epidermal
5. Epigenetic
6. Epigraphical
7. Epilepsy
8. Epilogue
9. EpiMonitor
10. Episode
11. Epitaph
12. Epithelial
13. Epitome
14. Epitomize
15. Epizoic
16. Epizoon

What We're Reading This Month

Editor's Note: All of us are confronted with more material than we can possibly hope to digest each month. However, that doesn't mean that we should miss some of the articles that appear in the public media on topics of interest to the epi community. The EpiMonitor curates a monthly list of some of the best articles we've encountered in the past month. See something you think others would like to read? Please **send** us a link at info@epimonitor.net and we'll include it in the next month.

Public Health Topics

- Myanmar's Civil War Pushes Infectious Disease Over Its Borders (NYT)
  https://tinyurl.com/yekwb6bt

- 'If the numbers are right, we're in trouble': Behind the comeback of measles in Canada (Globe & Mail via AppleNews)
  https://tinyurl.com/2dww6kn3

- The disease detectives who solve the world's strangest outbreaks (NatGeo via AppleNews)
  https://tinyurl.com/sstzp233

- I'm an Infectious Diseases Doctor. Our Pipeline of Experts Is in Distress. (MedPage Today)
  https://tinyurl.com/6retxz8c

- RFK Jr. wants to delay the hepatitis B vaccine. Here's what parents need to know. (KFF Health News via AppleNews)
  https://tinyurl.com/4t9akvzf

- Teens may have come up with a new way to detect, treat Lyme disease using CRISPR gene editing (60 Minutes - VIDEO)
  https://tinyurl.com/3e3wcez8

- Scientists thought Parkinson's was in our genes. It might be in the water. (Wired)
  https://tinyurl.com/39zffzkx

- Who did more harm to public health in 2025 — Kennedy or Rubio? (NPR)
  https://tinyurl.com/yfamnkwp

- 3 issues to watch in public health in 2026 (STAT)
  https://tinyurl.com/yc343ax2

- Reading cont'd on page 45

Public Health Topics, *cont.*

- How Cameroon Fought to Save Its Malaria Program After the U.S. Cut Critical Funding (NYT)
  https://tinyurl.com/33292nfw

- 2025: A Brutal Year for Global Health (Health Policy Watch)
  https://tinyurl.com/um9r4kx4

- Biostatistician Jeffrey Morris discusses his analysis of the vaccine monitoring system — and how it could be improved. (UnDark Magazine)
  https://tinyurl.com/m7z9dyme

- We Don't Seem to be Making America Healthy Again (NYT)
  https://tinyurl.com/mwcbduxj

- Israeli health officials call for sanctions on anti-vaxxers as flu morbidity rate rises (Jerusalem Post)
  https://tinyurl.com/4r5z4dwc

- How the NIH Became the Backbone of US Medical Research (The Scientist)
  https://tinyurl.com/32pt7jfk

- CDC's vaccine advisers are likely to make a controversial change to long-used vaccine (NPR)
  https://tinyurl.com/4k7cb9m5

- A New CDC Recommendation Could Mean a Big Change for Childhood Vaccines (Time)
  https://tinyurl.com/37y2eybj

- Opinion | Biden's IRA Is Harming Cancer Patients (WSJ)
  https://tinyurl.com/6n9c3ku7

Notes on People

Do you have news about yourself, a colleague, or a student?

Please help The Epidemiology Monitor keep the community informed by sending relevant news to us at this address for inclusion in our next issue. people@epimonitor.net

Honored: **Ralph S. Baric, PhD**, William R. Kenan, Jr. Distinguished Professor of epidemiology at the University of North Carolina, has been named to Clarivate's 2025 list of highly cited researchers. Baric has spent the past three decades as a world leader in the study of coronaviruses, noroviruses and flaviviruses.

Honored: Stellenbosch University (SU) bestowed an honorary doctorate on world-renowned epidemiologist and infectious disease expert Prof **Salim Safurdeen Abdool Karim** at its December graduation. Abdool Karim was awarded the degree Doctor of Science (DSc) (Medicine and Health Sciences), *honoris causa,* on Thursday (11 December 2025) at a graduation ceremony for the Faculty of Medicine and Health Sciences.

Honored: Virginia Commonwealth University's Dr. **Niloofar Ramezani** has been named the 2025 APHS Mid-Career Award recipient by the Applied Public Health Statistics Section of APHA!! This honor highlights Niloofar's meaningful contributions to applied public health statistics, her dedication to collaboration, and her long-standing service to APHS.

Named: **Bertha Hidalgo**, PhD, MPH, was named president of the American College of Epidemiology in September. Hidalgo is an associate professor in the Department of Epidemiology and associate dean for access and engagement at the University of Alabama at Birmingham School of Public Health.

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Named: Indiana University School of Medicine's **Kun Huang, PhD**, professor and chair of the Department of Biostatistics and Health Data Science, has been named one of 24 new fellows of the American College of Medical Informatics (ACMI). Huang is an internationally recognized leader in bioinformatics and computational pathology. He joined the IU School of Medicine in 2017 with a joint appointment to the Regenstrief Institute as a research scientist in the Clem McDonald Center for Biomedical Informatics.

Appointed: The U.S. Department of Health and Human Services (HHS) has announced the appointment of **Martin Kulldorff**, Ph.D., as chief science officer for the Office of the Assistant Secretary for Planning and Evaluation (ASPE). Kulldorff recently chaired the Centers for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practices (ACIP) and previously taught at Harvard Medical School. He is a biostatistician and epidemiologist with more than 200 peer-reviewed publications.

Appointed: Andreea Creanga, MD, PhD, was appointed chair of the Department of Epidemiology and Public Health at the University of Maryland School of Medicine in September. Prior to her new role, Creanga served as professor and associate director of the International Center for Maternal and Newborn Health at the Johns Hopkins Bloomberg School of Public Health.

Elected: UCLA Fielding School of Public Health **Professor Gang** Li has been elected President-Elect of the Western North American Region (WNAR) of the International Biometric Society. WNAR is a regional organization that supports statisticians and quantitative scientists across the western United States, western Canada, and Mexico. This prestigious leadership role reflects Professor Li's outstanding contributions to biostatistics, his long-standing service to the statistical community, and his commitment to advancing research, education, and collaboration across the region.

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Passed: Walter Dowdle, a microbiologist and second-in-command at the Centers for Disease Control and Prevention who helped lead the nation's early response to AIDS and later worked with the World Health Organization on the global effort to eradicate polio, died on Nov. 17 at his home in Hahira, in southern Georgia. He was 94.

During 34 years with the nation's public health agency, Dr. Dowdle ran laboratories and immunization programs and eventually became principal deputy director — the Atlanta-based agency's No. 2 official and its highest-ranking civil servant. He ran the C.D.C. as acting director for nearly two years, in two separate stints, before retiring from the federal government in 1994.

As a young C.D.C. virologist in 1967, Dr. Dowdle helped isolate a previously unknown strain of the herpes virus. Until that time, most scientists believed all herpes viruses were the same, no matter where they showed up on the body. Dr. Dowdle and two colleagues proved that the strain that caused cold sores was distinct from one that caused genital herpes.

It was a landmark discovery, but Dr. Dowdle recalled the effort in a 2024 interview with his signature understatement: "All in a day's work." https://tinyurl.com/bp5hka9k

Passed: Dr. Redding Ivy Corbett III, a distinguished epidemiologist and educator, passed away on October 2, 2025. Redding earned double master's degrees (one in Public Health) and a PhD in Epidemiology. For 30 years, he served South Carolina through his service with the Department of Health and Environmental Control (DHEC), contributing to [disease prevention/public health initiatives], as an adjunct professor at the University of South Carolina and a professor at Midlands Technical College. Redding left a lasting legacy in South Carolina through his commitment to public health and education. https://tinyurl.com/3mdtp3e7

Near Term Epidemiology Event Calendar

Every December The Epidemiology Monitor dedicates that issue to a calendar of events for the upcoming year. However that often means we don't have full information for events later in the upcoming year. Thus an online copy exists on our website that is updated regularly.
To view the full year please go to: http://www.epimonitor.net/Events The events that we are aware of for the next month follow below.

January 2026

January 5-17 **Type:** Winter Program **Web:** https://tinyurl.com/5n7f5spu
Title: Johns Hopkins Winter Institute
Sponsor: Johns Hopkins University **Location:** Baltimore, MD / Washington, DC / Virtual

January 5-16 **Type:** Short Course **Web:** https://bit.ly/3EYYZQY
Title: Selected Topics in Epidemiology
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

January 8-30 **Type:** Winter Program **Web:** https://www.epidm.nl/en/
Title: EpidM Winter Program 2026
Sponsor: Multiple **Location:** Amsterdam

January 14-16 **Type:** Short Course **Web:** https://tinyurl.com/ms73nax5
Title: Advanced Mendelian Randomization
Sponsor: University of Bristol **Location:** Virtual

Jan 19 – Feb 13 **Type:** Summer Program **Web:** https://tinyurl.com/y2xpcak5
Title: Summer Program 2026
Sponsor: Australian Consortium for Social & Political Research **Location:** Melbourne, AU & Virtual

Jan 19 – 21 **Type:** Short Course **Web:** https://bit.ly/3PBbiJv
Title: Competing Risks and Multi-State Models
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

Jan 21 – 23 **Type:** Short Course **Web:** http://tinyurl.com/epybnybr
Title: Improving your Stata: data management, publication-quality outputs and automating tasks
Sponsor: University of Bristol **Location:** Virtual

Jan 19 – 24 **Type:** Winter Program **Web:** https://bit.ly/3qunYrg
Title: Swiss Epidemiology Winter School
Sponsor: Institute of Social & Preventive Medicine - Bern **Location:** Wengen, Switzerland

Jan 22-26 **Type:** Conference **Web:** https://tinyurl.com/mt5arfzn
Title: 2026 Biostatistics Symposium
Sponsor: Biostatistics Symposium of Southern California **Location:** Newport Beach, CA

Near Term Epidemiology Event Calendar

January 2026

January 26-28 **Type:** Short Course **Web:** http://tinyurl.com/y7wtv7zw
Title: Questionnaire Design: Application and Data Interpretation
Sponsor: University of Bristol **Location:** Virtual

January 26-30 **Type:** Short Course **Web:** https://bit.ly/3FDOYu8
Title: Using R for Decision Modeling in Health Technology Assessment
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

January 28-30 **Type:** Conference **Web:** https://tinyurl.com/mtkjxu3u
Title: 36th Annual Scientific Meeting of the JEA
Sponsor: Japan Epidemiological Association **Location:** Nagasaki, Japan

January 30 **Type:** Conference **Web:** https://tinyurl.com/3kwmnvfv
Title: 51st Topics in Infection 2026
Sponsor: Royal Society of Tropical Medicine & Hygiene **Location:** London, England

February 2026

February 9-13 **Type:** Short Course **Web:** http://tinyurl.com/59yh5856
Title: The Placebo Effect
Sponsor: Erasmus MC **Location:** Rotterdam, The Netherlands

February 9-13 **Type:** Short Course **Web:** https://bit.ly/3oW8L0W
Title: Introduction to Epidemiology
Sponsor: University of Bristol **Location:** Virtual

February 9-13 **Type:** Winter Program **Web:** https://bit.ly/3lRZeDf
Title: Winter School in Clinical Epidemiology
Sponsor: UMIT **Location:** Tirol, Austria

February 9-13 **Type:** Conference **Web:** https://tinyurl.com/2bwca379
Title: SER 2026 Mid-Year Meeting
Sponsor: Society for Epidemiologic Research **Location:** Virtual

Type: Conference **Web:** https://tinyurl.com/3fem9cy2
February 11-13
Title: AIR 2026 Genomic Responses to Respiratory Infection, Microbiomes & Immunity
Sponsor: Wellcome Connecting Science **Location:** Hinxton, England

Near Term Epidemiology Event Calendar

February 2026

February 11-12 **Type:** Conference **Web:** https://tinyurl.com/38jhf97x
Title: Rural Health Policy Institute
Sponsor: National Rural Health Association **Location:** Washington, DC

Type: Conference **Web:** https://tinyurl.com/yb7ybu2r
February 12-13
Title: 7th Annual National Big Data Health Science Conference
Sponsor: Big Data Health Science Center **Location:** Columbia, SC

February 16-18 **Type:** Short Course **Web:** https://bit.ly/3G1mAn4
Title: Mendelian Randomisation
Sponsor: Erasmus MC **Location:** Virtual

February 17 **Type:** Conference **Web:** https://tinyurl.com/2de2wknd
Title: Arizona Rural & Public Health Policy Forum
Sponsor: University of Arizona SPH **Location:** Phoenix, AZ

February 22-26 **Type:** Conference **Web:** https://tinyurl.com/2de2wknd
Title: Conference on Retroviruses and Opportunistic Infections (CROI)
Sponsor: International Antivirus Society - US/CROI **Location:** Denver, CO

February 23-27 **Type:** Short Course **Web:** http://tinyurl.com/2fkh6ejx
Title: Introduction to Linear and Logistic Regression Models
Sponsor: University of Bristol **Location:** Virtual

February 27 **Type:** Conference **Web:** https://tinyurl.com/djwk9z4e
Title: Rare Disease Day
Sponsor: FDA-NIH **Location:** Bethesda, MD

Open Public Health Positions

The list below has been compiled by Public Health Hiring Help the new Substack column that has been created to help individuals in the public health community find positions in the midst of the chaos that is now impacting governmental agencies and grant recipients. This list represents the most current positions PHHH has been able to identify. We thank PHHH for their permission to reprint these listings.

Cornell Univ, Research Associate (NYC)
Not listed + benefits, Education: Bachelor's min, Master's preferred

Univ of NC Charlotte, Data Research Coordinator (Charlotte, NC)
Not listed + benefits, Education: Bachelor's min, Master's preferred

The Commonwealth Fund, Policy Program Associate (DC)
$66–83k + benefits, Education: Bachelor's min, Master's preferred

CA Air Resources Board, Climate Change EH Specialist (Sacramento, CA)
$72–120k + benefits, Education: Bachelor's min, Master's preferred

City of Milwaukee, Disease Intervention Specialist Coordinator (WI)
$66–79k + benefits, Education: Bachelor's min

Johns Hopkins Univ, Sr. Research Project Coordinator (Baltimore, MD)
$50–84k + benefits, Education: Bachelor's min, Master's preferred

City of Houston, Epidemiologist/Biostatistician (Houston, TX)
Not listed + benefits, Education: Master's min

Dartmouth College, Research Project Coordinator (Lebanon, NH)
$54–67k + benefits, Education: Bachelor's min, Master's preferred

County of Monterey, Chronic Disease Prevention Specialist (Salinas, CA)
$75–102k + benefits, Education: Bachelor's min

Rocky Boy Health Center, Hep C Free Program Coordinator (Box Elder, MT)
Not listed + benefits, Education: Bachelor's min

Pima County, EH Specialist I (Tucson, AZ)
$52–65k + benefits, Education: Bachelor's min

ASRC Federal, Clinical Health Epidemiologist (Falls Church, VA)
Not listed + benefits, Education: Bachelor's min, Master's preferred

Open Public Health Positions

Univ of TN, Research Project Coordinator (Knoxville, TN)
Not listed + benefits, Education: Master's min

Univ of Buffalo, EH EPI Research Specialist (Buffalo, NY)
Not listed + benefits, Education: Bachelor's min, Master's preferred

MN Dept of Health, Lead in Drinking Water Specialist (St. Paul, MN)
$50–72k + benefits, Education: Bachelor's min, Master's preferred

Dekalb Public Health, EH Specialist III (Atlanta, GA)
$52k + benefits, Education: Bachelor's min

County of Riverside, EH Specialist I/II/III (Riverside County, CA)
$62–108k + benefits, Education: Bachelor's min

OH State Univ, Biostatistician II (Columbus, OH)
Not listed + benefits, Education: Master's min

George Washington Univ, EHS Specialist (DC)
$52–95k + benefits, Education: Bachelor's min, Master's preferred

State of CA, Research Scientist II (Sacramento, CA)
$86–112k + benefits, Education: Bachelor's min, Master's preferred

UK Health Security Agency, Field Epi Training Fellow (London, UK)
Not listed + benefits, Master's min

State of Nebraska, Vital Statistics Informatician I (Lincoln, NE)
$66k + benefits, Bachelor's min, Master's preferred

CAMRIS, Epidemiologist I (San Diego, CA)
$77–98k + benefits, Master's min

NE Department of Health, Viral Hepatitis Program Specialist (Omaha, NE)
$50k + benefits, Bachelor's min, Master's preferred

Research Foundation for Mental Hygiene, Sr. Policy Analyst (New York, NY)
$97–113k + benefits, Master's min

Leidos, Behavioral Epidemiologist (San Diego, CA)
$70–126k + benefits, Bachelor's min, Master's preferred

Open Public Health Intern Positions

MaineHealth, Research Intern
Public Health Alignment: EPI

State of IN, Groundwater Intern
Public Health Alignment: EH

Rutgers Univ, Qualitative/Quantitative BH Research Analyst (PT)
Public Health Alignment: BSHES, EPI, BIOS

Bipartisan Policy Center, Health Policy Quantitative Consultant (CT)
Public Health Alignment: BIOS, EPI, HPM

State of IN, Wetlands and Stormwater Intern
Public Health Alignment: EH

Univ of FL, Cancer Research Intern
Public Health Alignment: EPI, BIOS, BSHES

Genentech, Public Affairs and Access Intern
Public Health Alignment: EPI, HPM, GH

National MS Society, Advocacy Intern
Public Health Alignment: BSHES, GH, HPM

Quest Diagnostics, Public Health Operations Intern
Public Health Alignment: EPI, BSHES, HPM

AAPI for Community Involvement, Advocacy, Health, Social Services Intern
Public Health Alignment: HPM, BSHES, GH

CHAS Health, Population Health Intern
Public Health Alignment: GH, BSHES

Genmab, Clinical Data Manager Intern
Public Health Alignment: EPI, BIOS

SRI, Health Sciences Associate Intern
Public Health Alignment: BSHES, EPI, BIOS

MD Anderson Cancer Center, Research Intern
Public Health Alignment: EPI, BIOS

Open Public Health Flexible Positions

Equality Federation, Public Health Policy Fellow (PT)
Public Health Alignment: HPM, GH

Takeda, EHS Intern
Public Health Alignment: EH

GA Dept of Health, Foodborne Disease Intern
Public Health Alignment: EPI, EH

County of Los Angeles, Health Program Analyst III (CT)
Public Health Alignment: GH, BSHES, HPM

King County, Perinatal Hep B Educator (CT)
Public Health Alignment: BSHES, EPI

AZ Dept of Health, Enteric Case Investigation Intern
Public Health Alignment: EPI

Stanford Healthcare, Population Health Analytics Intern
Public Health Alignment: EPI, BIOS

Equitable, Social Impact Intern
Public Health Alignment: GH, HPM

Micron Technology, Global Environmental Compliance Intern
Public Health Alignment: EH, HPM

CDM Smith, Climate Resiliency and Planning Intern
Public Health Alignment: EH

Cobb County Fire and Emergency Services, Sustainability Intern
Public Health Alignment: EH

State of IN, Data Science Intern
Public Health Alignment: BIOS

State of IN, Environmental Data Operations Intern
Public Health Alignment: EH, EPI, BIOS

Resources for the Future, Fossil Fuels Community Support Programs Intern
Public Health Alignment: EH, HPM

Marketplace

For Full Information on jobs: http://www.epimonitor.net/JobBank

The EpiMonitor offers a variety of plans for you to advertise your job opening, event or other item of interest to our readers. The basic advertising options are:

Web Only
This provides you with a full page on our website along with banner ads in appropriate places for what you are advertising (e.g. our Job Bank or Events pages). In addition, these ads are also featured in our monthly email blast. Web ads normally appear on our site within 2-3 hours of your order.

Web + Digital Print
This option provides either a full or half page digital print ad in this publication monthly along with all of the services included in the "Web Only" option.

Social Media
Starting in January 2026 we will also have social media add-on options for our web and print advertising programs.

COLUMBIA | MAILMAN SCHOOL OF PUBLIC HEALTH

EPIDEMIOLOGY

episummer @columbia

Epidemiology's Summer Institute at Columbia University

Columbia University's Department of Epidemiology launched a successful summer institute, episummer@columbia, in 2011 that provides opportunities to gain foundational knowledge and applied skills for advancing population health research. Intensive short courses are offered in either synchronous or asynchronous formats. Each year approximately 35 courses are offered to over 500 attendees. Registrants can choose from an overview of epidemiology to specialized courses on epidemiological methods, statistical programming languages, infectious disease modeling, and topics from implementation science to police violence.

EARLY DISCOUNTS AVAILABLE UNTIL
APRIL 1, 2026

REGISTRATION OPEN THROUGH
MAY 1, 2026

VISIT cuepisummer.org

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KAISER PERMANENTE® | DIVISION OF RESEARCH

Postdoctoral Fellows - Translational Research

The Division of Research (DOR) at Kaiser Permanente Northern California (KPNC) is recruiting fellows for the Translational Research Postdoctoral Fellowship Program. This two-year multidisciplinary fellowship program will train the next generation of researchers to conduct research embedded within an integrated healthcare delivery system. The program is designed to support post-doctoral fellows interested in research across the translational and population sciences research continuum spanning epidemiology, outcomes research, intervention research, disease prevention, and care evaluation and improvement.

Investigators and Fellows in the DOR have well-developed research programs in behavioral health and aging, infectious diseases, cardiovascular and metabolic conditions, cancer, health care delivery and policy, and women's and children's health. The DOR is the home for over 60 Investigators and 600 staff members overseeing numerous research projects with funding from the National Institutes of Health, other Federal agencies, non-profit organizations, industry, and internal sources. The successful applicant will have opportunities to develop research, writing, and grant preparation skills and enhance presentations and publications under the mentorship of an experienced DOR investigator. Investigators have access to rich clinical data sources from one of the nation's leading integrated healthcare delivery systems inclusive of more than 4.65 million members. KPNC and the DOR provide a unique research environment with a diverse patient population, robust longitudinal electronic health record data, comprehensive data capture, and a long-standing history of clinical research from real-world data sources and populations that can lead to higher quality care and outcomes.

The two-year, full-time program includes:

- Individualized scientific and career mentorship
- Works-in-progress meetings with DOR faculty and fellows
- Training in grant writing, manuscript development, and presenting science to scientific and lay audiences
- Experience writing at least two first-authored publications based on KPNC DOR projects
- Seminars on career and skills development topics
- Core competency training in research and biostatistical methods utilizing electronic health records data, including journal clubs

Qualifications: We seek talented candidates with a doctoral degree (such as PhD, DrPH, ScD, MD) in epidemiology, health services research, medicine, informatics, biostatistics, or related field. Preference will be given to applicants with strong analytic, writing, and oral communication skills and a demonstrated ability to publish manuscripts in peer-reviewed journals. **Applicants must be eligible for U.S. employment**. Individuals from all backgrounds, especially those from historically underrepresented groups, are encouraged to apply.

Application Procedures: We aim to admit 2-4 qualified candidates each year. Each fellow will be co-funded by their primary scientific mentor and the fellowship training program. Potential candidates are required to identify a Research Scientist from DOR's >60 highly experienced investigators in their area of interest who is committed to being a primary scientific mentor and providing co-funding. Faculty research portfolios can be found here: https://divisionofresearch.kaiserpermanente.org/our-team/scientific-sections/. If you would like help identifying a potential mentor, please email the Program Leadership Team at DOR_TRF@kp.org.

We are accepting applications for a Fall 2026 cohort through Monday, February 16, 2026 at: https://redcap.kaiser.org/surveys/?s=ECTNAPTTWNDLN4HF.

Applicants must submit: 1) Letter describing areas of research interest and potential research project to be conducted at DOR, 2) Letter of support from potential DOR scientific mentor, 3) Curriculum vitae, 4) Writing sample (e.g., first-authored manuscript), 5) Contact information for three individuals serving as references.

For more information: https://divisionofresearch.kaiserpermanente.org/research/fellowships/

UNIVERSITY OF MINNESOTA

CARDIOVASCULAR DISEASE EPIDEMIOLOGY AND PREVENTION POSTDOCTORAL FELLOWSHIP

The Division of Epidemiology & Community Health of the University of Minnesota has a current opening and is seeking candidates for a postdoctoral training fellowship in cardiovascular disease epidemiology and prevention.

Fellowship Experience Training emphasizes research methods in the epidemiology and prevention of cardiovascular disease. Training can include formal coursework in epidemiology, biostatistics, clinical research, nutrition, physiology, data science, and behavioral science.

Graduates gain competency in designing, administering, and analyzing cardiovascular population studies or preventive programs. The Division provides a rich and collaborative environment for the investigation of cardiovascular disease and related areas, in one of the largest Academic Health Centers in the U.S. Current Division research in cardiovascular epidemiology includes a robust blend of observational studies (e.g., ARIC, MESA, CARDIA, DISCOVERY), pharmacoepidemiology and interventional investigations (e.g., mGlide hypertension control RCT, Stand & Move at Work group randomized trial) aimed at improving public health and engaging a multidisciplinary integration of epidemiology, biology and behavioral science.

Benefits The program provides a stipend, tuition and fees for an MS or MPH degree, if desired, during the fellowship. This paid 2-3 year fellowship is sponsored by the National Institutes of Health.

Eligibility Candidates must have either an MD or a PhD degree and must be either a U.S. citizen or have permanent residency status.

Apply Interested applicants will complete an online application https://tinyurl.com/4e7yzp4c

Questions, please contact:
Jim Pankow, PhD, MPH panko001@umn.edu or Pamela Lutsey, PhD, MPH lutsey@umn.edu
Co-Directors of CVD Epi Training Program

For More Information

https://z.umn.edu/cvdepiT32

UNIVERSITY OF MINNESOTA

Tenure Track Assistant Professor - Epidemiology

The Division of Epidemiology and Community Health, University of Minnesota School of Public Health, seeks a tenure-track Assistant Professor who has expertise in a broad range of epidemiologic methods.

About the Job

The Division of Epidemiology & Community Health, School of Public Health, University of Minnesota, invites applications at the rank of Assistant Professor (tenure-track). As a faculty member, the individual will actively contribute to the Division's mission through research, teaching, advising, and professional service activities.

Key responsibilities include:

- Maintain and expand expertise in the application of foundational and cutting-edge epidemiologic methods. Candidates are expected to have a deep understanding of causal inference, bias mitigation, and statistical modelling. Expertise across diverse epidemiologic methods and content areas is welcomed.
- Develop a research program that incorporates rigorous epidemiologic methods, and collaborate with other faculty as a co-investigator on new grant initiatives. Example areas of possible methodologic applications include, but are not limited to, causal analysis, bias analysis, infectious disease modelling, mutational signatures in cancer, -omics data applications, spatial and temporal analyses, pharmacoepidemiology, quasi-experimental methods, implementation science, generative artificial intelligence and/or machine learning, digital health, wearables, etc.
- Contribute to Epidemiology curriculum development, teach epidemiologic methods as part of the Epidemiology PhD methods sequence and other classes as needed, and participate in development of the PhD qualifying examinations. Advising PhD, post-doctoral, and master's students is also expected.
- Actively engage in service, including at a national level through professional organizations focused on epidemiologic methods.
- Serve as a resource for translating up-to-date epidemiologic methods to applications in Division research projects.

Qualifications

Required: (1) PhD or equivalent in Epidemiology; (2) Research experience in epidemiology with a strong and promising publication record in relevant peer-reviewed journals; (3) Demonstration of the ability and enthusiasm to teach graduate-level courses on epidemiologic methods, or evidence of potential for teaching success.

Preferred: 1) Evidence of effective collaboration; 2) History of or potential for obtaining research funding; 3) Active engagement with the epidemiologic methods community.

About the Division

The University of Minnesota School of Public Health is consistently ranked in the top 15 Schools of Public Health nationally. The Division of Epidemiology and Community Health is the largest unit within the School and is strongly committed to diversity, equity, and inclusion. The Division has over 40 primary faculty members, more than 400 graduate students, and approximately $25 million in annual sponsored research grants. Our faculty conduct cutting-edge research advancing community and public health locally, nationally, and internationally. Faculty in the Division have diverse interests, spanning most disease areas, and conduct both interventional and observational investigations. The UMN has a strong academic health system which includes 6 Health Science Schools, a Clinical and Translational Science Institute, the Minnesota Population Center, and a strong collaborative relationship with the Minnesota Department of Health. Educational programs connected to the Division include an Epidemiology PhD, and MPH majors in Epidemiology, Community Health Promotion, Maternal & Child Health, and Public Health Nutrition.

How To Apply

Applications must be submitted online. To be considered for this position, please go to the Interfolio job site https://apply.interfolio.com/179313 and follow the application instructions.

This position is available immediately. Applications received prior to April 15, 2026 will be given full consideration; interested applicants should contact Dr. Pamela Lutsey (Professor, Division of Epidemiology & Community Health, email: lutsey@umn.edu) after that date. For questions about applying contact: Stacey Ripka (Senior Human Resources Consultant, email: sams0030@umn.edu). Applicants interested in more information about this position can contact Dr. Lutsey.

UNIVERSITY OF South Carolina

Open Rank Faculty - Environmental Epidemiology

The Department of Epidemiology and Biostatistics in the Arnold School of Public Health (ASPH) at the University of South Carolina (USC) invites applications for a full-time, open-rank faculty position in environmental epidemiology. Research expertise in all areas of environmental epidemiology will be considered. This recruitment is part of a campus-wide strategic effort to expand the University's leadership in advancing research and educational excellence in environmental health. The cluster will broaden expertise across disciplines to foster innovation and address the complexity of environmental health challenges through multidisciplinary scholarship. This initiative focuses on determining the impact of chemical, physical, behavioral, biological, and social environmental stressors across the lifespan, and emphasizes designing, testing, and scaling programmatic and policy interventions that address these stressors.

All applicants must hold a doctoral degree in epidemiology or a related field by their start date. At the assistant professor level (tenure-track), candidates should demonstrate excellence in research and the potential to secure external funding, teach graduate courses, and collaborate with public health and biomedical researchers. At the associate- or full-professor level (tenure-eligible), candidates must also demonstrate an established record of top-tier publications and competitive grants, a proven track record of supervising graduate students, and leadership in curriculum development, junior faculty mentoring, and cross-disciplinary collaboration. The successful candidate will maintain an active research program in environmental epidemiology, engage with cross-disciplinary research teams on topics related to environ-mental health, mentor graduate students, and teach graduate-level environmental epidemiology courses.

USC is a comprehensive Carnegie University of High Research Activity and Community Engagement. USC has five Health Science Units in addition to ASPH: 1) School of Medicine in Columbia, 2) School of Medicine in Greenville, 3) College of Nursing, 4) College of Pharmacy, and 5) College of Social Work. **ASPH** was founded in 1975. Among public universities in the US, the ASPH ranks second in overall enrollment and fourth in NIH funding. ASPH consists of six departments and several research centers that address topics such as disease prevention, nutrition and physical activity, cancer, health services and policy, rural health, HIV/AIDS, aging, and health disparities. For more information about ASPH and the department, please visit www.sph.sc.edu.

The **Department of Epidemiology and Biostatistics** is home to 35 full-time faculty members,12 in the Biostatistics Division and 23 in the Epidemiology Division. The faculty's robust research portfolio includes funding from a broad spectrum of federal agencies (e.g., NIH and CDC) and non-profit organizations. The department has a rich tradition of producing outstanding trainees. Currently, 112 students are enrolled in our master's and doctoral degree programs. The department, school, and university provide a strong collaborative environment for cross-disciplinary team science across the public health research continuum.

Columbia, SC, enjoys more than 300 days of sunshine annually and has ready access to pristine beaches, lakes, and mountains. The city boasts a range of historical and cultural attractions, festivals, performing arts, sporting events, and many outdoor recreation areas, including Congaree National Park and Lake Murray.

To apply: Applications must include: 1) application letter, 2) curriculum vitae, 3) research statement, 4) teaching statement, and 5) contact information for three references. Submit your application at the following link:

https://uscjobs.sc.edu/postings/196750

Application review will begin by November 1st, and the search will continue until the position is filled. The anticipated start date is August 16, 2026. For additional information, please contact Janine Rominger at janiner@mailbox.sc.edu or (803)-777-7666.
The University of South Carolina does not discriminate in educational or employment opportunities or decisions for qualified persons on the basis of age, ancestry, citizenship status, color, disability, ethnicity, familial status, gender (including transgender), gender identity or expression, genetic information, HIV/AIDs status, military status, national origin, pregnancy (false pregnancy, termination of pregnancy, childbirth, recovery therefrom or related medical conditions, breastfeeding), race, religion (including religious dress and grooming practices), sex, sexual orientation, veteran status, or any other bases under federal, state, local law, or regulations.

USC offers a robust benefits package described at:
http://www.sc.edu/about/offices_and_divisions/human_resources/benefits/index.php

THE UNIVERSITY OF CHICAGO

Postdoctoral Scholar in Cancer Epidemiology

The Department of Public Health Sciences at the University of Chicago is seeking a highly motivated postdoctoral scholar to join a dynamic research team focused on molecular epidemiology and health disparities in multiple myeloma. Our research integrates diverse large-scale datasets, including GWAS data, tumor and cell-free DNA methylation profiles, clinical and epidemiological data, and biological samples. As a postdoctoral scholar, you will play a leading role in analyzing these data and preparing manuscripts that investigate the roles of epigenetics, lifestyle influences, environmental factors, and social determinants of health on myeloma risk and outcomes. The post-doc scholar will also contribute to consortium-based research initiatives, participate in liquid-biopsy and epigenetic biomarker analysis, and have opportunities to initiate new projects and develop grant proposals.

Qualifications

Successful candidates will have:

1. A PhD or equivalent graduate degree in epidemiology, biostatistics, data-science, or a related field.
2. Strong expertise in epidemiology, biostatistics, genetics, and epigenetics.
3. Proven experience with programming and data analysis using R, SAS, or STAT
4. Excellent written and oral communication skills.

Candidates with experience in survival analysis, machine learning, and applying advanced biostatistical techniques will be highly regarded. As a postdoctoral scholar, you will work closely with dedicated mentors in a collaborative and multidisciplinary environment, with opportunities to pursue career development activities, develop independent research projects, and apply for grants (e.g., K99/R00).

Start date: 1/5/2026 (flexible)

Application process
Please send a letter including a statement of research interests and future goals, curriculum vitae, and names/addresses of 3 references to: Dr. Brian Chiu (mmepi@health.bsd.uchicago.edu). Application review will begin immediately but will continue until the position is filled.

Application information
This position is benefits-eligible, and information regarding benefits can be found at:
https://clients.garnett-powers.com/pd/uchicago/.

Additional information for postdocs in the University of Chicago Biological Sciences Division can be found at:
https://bsdpostdoc.uchicago.edu/. Compensation in the Biological Sciences Division follows the NIH NRSA Stipend scale.

All University departments and institutes are charged with building a faculty from a diversity of backgrounds and with diverse viewpoints; with cultivating an inclusive community that values freedom of expression; and with welcoming and supporting all their members.

We seek a diverse pool of applicants who wish to join an academic community that places the highest value on rigorous inquiry and encourages diverse perspectives, experiences, groups of individuals, and ideas to inform and stimulate intellectual challenge, engagement, and exchange. The University's Statements on Diversity are at:
https://provost.uchicago.edu/statements-diversity.

The University of Chicago is an Affirmative Action/Equal Opportunity/Disabled/Veterans Employer and does not discriminate on the basis of race, color, religion, sex, sexual orientation, gender, gender identity, national or ethnic origin, age, status as an individual with a disability, military or veteran status, genetic information, or other protected classes under the law. For additional information please see the University's Notice of Nondiscrimination.

Job seekers in need of a reasonable accommodation to complete the application process should call 773-834-3988 or email equalopportunity@uchicago.edu with their request.

Faculty Positions - Epidemiology & Biostatistics

The Washington University School of Public Health is seeking applications for tenure-track faculty positions at the rank of Assistant, Associate, or Full Professor in Epidemiology and Biostatistics who are accomplished, curious, intellectually courageous, and committed to excellence in population health science and scholarship.

As a research-intensive institution, the school provides a supportive, collegial, and intellectually engaged environment for faculty to pursue leading-edge, grant-driven scholarship. We encourage applicants who are enthusiastic about conducting interdisciplinary work across a breadth of disciplines.

Position: Tenure-Track Faculty Positions in Public Health
Location: St. Louis, Missouri

Position Overview:

The successful candidate will be expected to develop an extramurally funded research program, teach and mentor graduate students, and contribute to the service missions of the WashU School of Public Health and University. The candidate should demonstrate a commitment to excellence in research, teaching, and service, and have a strong desire to contribute to the advancement of public health.

Key Responsibilities:

- ►Develop and maintain an independent, innovative, and extramurally funded research program in epidemiology and/or biostatistics.
- ►Teach graduate courses in epidemiology, biostatistics, and related public health disciplines.
- ► Mentor and advise students at the master's and doctoral levels.
- ► Participate in school, community, and university service activities.
- ► Collaborate with faculty colleagues and promote interdisciplinary research initiatives.

Qualifications:

- ►A doctoral degree (PhD, DrPH, ScD, or equivalent) in Epidemiology, Biostatistics, or a closely related field.
- ► A strong record of scholarly achievement and evidence of, or potential for, securing extramural research funding.
- ► Demonstrated excellence in teaching and mentorship in the field of public health.
- ► Strong communication and interpersonal skills.

Application Procedure:

- ► Candidates are encouraged to apply through Interfolio. Applications will be accepted until the positions are filled. A complete application package must include:
- ► A cover letter specifying the position(s) being applied for and detailing the candidate's qualifications.
- ► A curriculum vitae.

Equal Employment Opportunity Statement

Washington University in St. Louis is committed to the principles and practices of equal employment opportunity and especially encourages applications by those underrepresented in their academic fields. It is the University's policy to provide equal opportunity and access to persons in all job titles without regard to race, color, age, religion, sex, sexual orientation, gender identity or expression, national origin, protected veteran status, disability, or genetic information.

Specific inquiries about these positions may be directed to Debra Haire-Joshu, Associate Dean for Faculty Affairs, WashU School of Public Health at the SPHFacultyAffairs@wustl.edu .

We look forward to reviewing your application and thank you for your interest in joining our academic community.

YLE can be found here: https://yourlocalepidemiologist.substack.com/

Your Local Epidemiologist (YLE) is founded and operated by Dr. Katelyn Jetelina, MPH PhD—an epidemiologist, wife, and mom of two little girls. YLE reaches more than 305,000 people in over 132 countries with one goal: "Translate" the ever-evolving public health science so that people will be well-equipped to make evidence-based decisions. This newsletter is free to everyone, thanks to the generous support of fellow YLE community members.

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https://yourlocalepidemiologist.substack.com/

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