The Epidemiology Monitor had its debut as a simple 8 page newsletter at the meeting of the Society for Epidemiologic Research in Minneapolis in June 1980. Since that time it has become known as “the voice of epidemiology”, and a must read for news about people and developments in the field, including the latest job opportunities. Also, we have been a much appreciated source of light humor with our multiple reader contests and other humorous items.

To celebrate our 40th year, we plan to publish Epi Wit and Wisdom II : The Best of The Epidemiology Monitor. The first volume published in 2000 was a compilation of our most noteworthy news reports, interviews, keynote addresses, special articles describing resources, interesting letters, obituaries of well-known figures, and humorous items and contests. We especially remember a haiku imparted to us at the time by the late Jeffrey Davis, a much respected and well-liked epidemiologist in Wisconsin for many years.

Relevant, concise
At twenty years, venerable
Worthy of praise

You can help us celebrate our 40th year by emailing us to share what you like the most about the Epi Monitor and what it means to you today or has meant to you over the years. No need to write a haiku. Send comments or simply cut and paste the following incomplete sentences in an email to editor@epimonitor.net and fill in the blanks with your own words and adjectives. We would like to publish the email comments and/or completed sentences we receive.

The Epidemiology Monitor been writing timely, _____________, and ____________articles each month for our readers. These articles are great for when you _______________________________.

Signed:
Your smart, _________________, and _________________ reader.
Name______________________________

Roger Bernier, PhD, MPH
Editor and Publisher
ditor@epimonitor.net
Hopkins Inquires About The State Of Epidemiology As Part Of Department’s 100th Anniversary Celebration

Is The Field In The Midst Of An “Identity Crisis”?

Led by Associate Professor Bryan Lau who gave a welcome address, the Epidemiology Department at the Hopkins School of Public Health celebrated its 100th birthday (1919-2019) by offering faculty, students and invited guests a chance to pause from their busy lives in mid-November to think about the state of epidemiology--past and future.

Goals

According to Lau, the goals of the day and a half symposium were fourfold:

- to reflect on what epidemiology has contributed to public health and what it will continue to contribute,
- how the field of epidemiology is perceived,
- how are we communicating what the field of epidemiology is about, and
- what do the skills we are teaching say about our field now?

The symposium on November 8 and 9 was composed of several sessions to address these themes, including how to communicate science presented by the Alan Alda communications team, how epidemiology is viewed by journal editors of the broader scientific community, and what the teaching of epidemiology reveals about the field today. (Read the interview with Lau following this article to learn about the highlights from these sessions.)

What is epidemiology?

Lau spent considerable time in his opening presentation seeking to describe what epidemiology is. He began with some of the well-known definitions but also pointed out the emergence of population health and wondered what is the difference between epidemiology and population health. Since the term first arose, it has grown in use and Lau wanted to know if this represents a rebranding of epidemiology triggered by the perception outsiders have about epidemiology. He wondered if population health has emerged because of the increased focus on causal inference and complex methods in epidemiology. He quoted from a 2013 paper by Sandro Galea stating “…interest in causes takes the field far away from relevance and into obsolescence.”

Other Trends

Others have expressed concern that epidemiology is leaving little room for working across disciplines or that it is producing results useful only at the individual level and not at the population level. New terms such as precision medicine and even precision public health have arisen. Some have called for epidemiology to renew its focus on public health. Since epidemiologists can work across the spectrum from the cellular and even sub-cellular level to the population level, Lau asked where do epidemiologists fit into these different
ways of thinking about the work health researchers do.

Hints

Perhaps a part of the answer to the question of where epidemiologists fit might come from how epidemiologists are perceived by persons from outside the field. This is important according to Lau because how epidemiologists are perceived impacts how results are believed, how epidemiologists stay relevant, and how epidemiologists find funding. Lau commented on worrisome observations that there is a shift away from epidemiology in many NIH strategic plans. Anecdotal evidence suggests a decline in the use of epidemiology terms in providing course titles and even in describing methods. For example, one individual in a conversation discouraged the use of the term “cohort” and suggested instead “following a group of people over time” to avoid using a term that has been a well-recognized part of epidemiology.

What Do We Think

Another theme or question posed by Lau was to ask how epidemiologists think they are perceived. He cited limited findings that concerns about the field are substantial even among insiders in epidemiology with 30% in one survey disagreeing with the idea that epidemiology is held in high regard. Attacks on nutritional epidemiology have occurred recently and epidemiology has been described as a weak science and the least reliable. In contrast, in other forums, papers have been published stating that epidemiology is very useful and deserves to be taught in secondary schools. A recent editorial in Nature Communications has called epidemiology “a science of high importance” (see below).

Bottom Line

According to Lau, how insiders and outsiders of the epidemiology field perceive epidemiology boils down to what epidemiologists are saying the field is all about. Some observers have noted that all fields debate these matters to some extent and that this debate is a healthy sign. Others point out that epidemiologists are known for being skeptical and critical of their own methods. The observation has been made that epidemiologists are so critical they eat their young. Epidemiologists diminish themselves, the thinking goes.

A final point raised by Lau near the end of his presentation was to ask—How do epidemiologists go from communicating about individual study results to communicating about the field itself? The opening session closed by leaving the audience with multiple questions in three broad theme areas.

Reflection

How did epidemiology arise?
Who are we?
Who do we need to become?

Communication

How do we communicate science better?
How do we communicate about our field?
What is our brand?

"...a science of high importance..."
**Future**
How do we shape the field?
What should we be teaching?

Highlights from how these themes were covered in sessions with communication experts, journal editors, and teachers of epidemiology can be found in the interview with Bryan Lau published below or in this issue.

And video of some of the sessions are available online at: 

**Editors.** Epidemiology is a science of high importance. Nature Communications 2018; 9: 1703 (https://go.nature.com/2K59k19)

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**Towards A Better Appreciation Of Epidemiology As A Whole---An Interview With Hopkins Epidemiologist Bryan Lau**

To obtain a sense of the highlights from different sessions at the recent Hopkins Symposium celebrating the Epidemiology Department’s 100th anniversary, we interviewed Bryan Lau, Associate Professor in the Department and one of the organizers of the meeting along with colleagues Stephan Ehrhardt and Priya Duggal. The Symposium was to address contemporary issues in the field, particularly those relating to the past and the future state of epidemiology. Three themes—the nature of epidemiology, communication in epidemiology, and the future of epidemiology were to be covered by invited participants, including communication experts, journal editors, and teachers of epidemiology.

**Communicating Science** talked about making connections with the person or audience that you are communicating with. It is having discussion in which individuals as scientists need to pause and make sure that they are understood. A takeaway point was to make the other person look good. It was a take on the “Yes and …” approach to communicate rather than “Yes but …”. That is, we need to accept the other person’s viewpoint and add to it or modify it rather than be confrontational in our communication.

The field of epidemiology has had a significant impact on the health of populations and I think it is time that we start communicating what the field is about to the broader world. In doing so, I think there is a message we can take from this session to try to keep in mind who we are communicating with. Is it with a lay audience, policy makers, funders, other scientists, or more specifically other epidemiologists? Are they a

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...scientists need to pause and make sure that they are understood.

"...we need to accept the other person's viewpoint and add to it or modify it rather than be confrontational..."
receptive audience or more of a wary audience? The goals of the messaging might be quite different in this latter case. With a likeminded or sympathetic audience we might be trying to get the overall scientific message across and the limitations of the field. With a less likeminded or sympathetic audience, the goal may be just to get them to acknowledge some aspect of the field overall that may help make them more sympathetic.

EM: What were the highlights in your opinion of what the journal editors had to say?

Lau: We specifically asked the journal editors to speak about why epidemiology is important to their journal, what role epidemiology has had, what role do they see epidemiology playing in the future, and what they would like to see more of from the field of epidemiology. Overall, each of the journals represented, which were Drs. Christine Laine from *Annals of Internal Medicine*, Rebecca Cooney from *Lancet*, Sonja Schmid from *Nature Communications*, and Brad Wibble from *Science*, discussed why epidemiology has been important and continues to be important for their journals. I think one of the take aways that the journal editors had was that they didn’t realize epidemiology had so much nuance to it. So in a way we may have altered their perceptions of the field.

However, for *Annals* and the *Lancet*, epidemiology was acknowledged as playing a large role in their journals and being able to address questions that are important to their missions. For *Nature Communications* and *Science*, it was that epidemiology could provide the principles for analysis and interpretation of observational data from “big data” since big data does not necessarily mean better data. So overall, my takeaway from the session with journal editors is that they viewed epidemiology as being an important field that can answer important questions in a principled way in order to reach appropriate inferences. Epidemiology will need to play a key part in understanding and explaining new challenges in public health such as big data or the effects of climate change on health.

EM: What were the highlights in your opinion of what the teachers of epidemiology had to say?

Lau: One of the key themes that was in many of the talks from teaching was that we need to focus on communication of epidemiology results, that is, science communication. But also that we need to focus on getting students to ask innovative and interesting questions. That is, we need to perhaps focus on getting students to ask good questions and a bit less on complex methodology. There is nothing wrong with complex methodology, but if we as a field are going to have impact, then we need to be able to ask good scientific and public health relevant questions.

EM: You and your colleagues recently wrote an article in the IJE proposing a unifying framework under which epidemiologists of all stripes could work productively to have public health impact. Why or how does the framework help epidemiologists address some of the key concerns you brought out in your opening presentation at the Hopkins 100th?

- Interview cont’d on page 6
anniversary celebration?

Lau: What Drs. Ehrhardt, Duggal, and I were trying to do with the IJE paper was to bring people who have been involved in these discussions in the field to focus on what the overall goal of epidemiology is. The definition of epidemiology as the study of the distribution and determinants of health related states and events in populations and the use of this knowledge to control health problems, is a broad definition. It covers all aspects of health and therefore we need to acknowledge that we have a large field that covers the mission of descriptive investigations including trends over time, surveillance, and outbreak investigations. But it also covers causal investigations as well as investigating how to implement in order to control determinants that lead to health outcomes. We try to acknowledge working at population levels down to individual levels. Therefore, epidemiologists do not need to work in each domain of descriptive, causal, and implementation investigations at both the population and individual levels but rather recognize the need for diversity between and across the various research areas and methodology, including statistical as well as study design methodology to support each of the domains.

With this paper we hoped to start or maybe continue a discussion about what our field is. We believe that this is a more holistic view of our field and that from this we can start communicating out more consciously about our field as a whole to other audiences and potentially change the way our field may be perceived. Similarly, the framework puts the scientific and public health question at issue in the forefront. Therefore, just as was suggested by the Symposium session on teaching, we need to be able to ask good public health questions and make clear that the methods serve the research question.

EM: Where does the framework fall short if you think it does in some respects?

Lau: I am not sure yet where the framework falls short. I believe it will become more apparent should the field open up to discuss where we are and what messages we coalesce around to communicate to various audiences.

EM: You mentioned an interest in catalyzing a conversation in the epidemiology community about the framework and the issues underlying it. Can you say more about your plans to do this?

Lau: Well I think that is up to the field to pick up the discussion. We will certainly continue to foster dialogue. Certainly having the Department Centennial Symposium focused on reflecting on what epidemiology is, how we are perceived, how we are communicating, and how what we teach shows our values. At the symposium were various chairs of departments of epidemiology and other individuals in positions of influence (*see below). So we are already engaging the community beyond what we did with publication in IJE.

EM: Sometimes it seems the epidemiology community is in a perpetual conversation about who we are and why we exist without ever
reaching any widespread consensus about these issues. Is that right? Are these questions really so intractable? Do you think that will change going forward?

Lau: I think that we are in a perpetual conversation about the field, but that is healthy for our field that we keep having self-reflection about who we are and who we want to be. It isn’t that the questions are intractable, but that the definition of epidemiology is so broad that we can cover a lot under this definition. Furthermore, methodology and technology keeps evolving as well as societal pressures and the way we communicate. Therefore, we keep revisiting the questions of who we are and why we exist because we need to keep evolving as a field to address the rising challenges and opportunities.

So what I think is different about our vision from the JHU Department of Epidemiology Centennial Symposium is that this discussion shifts the focus towards communicating our message of epidemiology out to a broader world about what we do, how we have impact, our strengths and limitations. Indeed as pointed out by the recent editorial in Nature Communications, the field of epidemiology is a science that has had great impact by saving millions of lives from diseases both infectious and non-communicable (see below). Therefore, we need to get this message across and that what we do or accomplish as a field is not reliant on any single study but comprises an accumulation or whole body of evidence.

Editors. Epidemiology is a science of high importance. Nature Communications 2018; 9: 1703 (https://go.nature.com/2K59k19)

...what we do or accomplish as a field is not reliant on any single study but comprises an accumulation or whole body of evidence.
"He also vowed to make submission of papers as painless as possible for authors..."

"...his company is very confident the new journal will be successful and sustainable."

"Elsevier To Launch New Open Access Global Epidemiology Journal In Early 2019

New Publication Seeks To Adapt To Much Changed Publishing Landscape

Seeing an unmet need for an epidemiologic research and teaching methods publication and one which is open access and free to readers everywhere, the publisher Elsevier is preparing to launch a new journal in 2019. It will be called Global Epidemiology, not to create a focus for international health topics, but to highlight its intention to appeal to a broad array of international readers. The editor will be the University of Minnesota’s George Maldonado. The other editors enlisted so far include Sander Greenland as an editorial consultant, Rich Rothenberg and Charles Poole as senior editors, and Anne Jurek as associate editor.

Differences

When asked how the journal would differ from existing epidemiology journals, Maldonado said he would seek to have fuller and more complete descriptions of methods, especially statistical and analytic procedures which he said are almost never described fully enough. Also, the new editor will seek to encourage more discussion of the limitations and their potential impact on the study findings. In another vein, Maldonado hopes to publish more teaching papers. He told the Monitor that he writes these kind of papers but has found it difficult to get them published. Consequently, he will be looking for papers which describe new or innovative teaching methods and are very clearly written. As an example, he said that authors of chapters for books might find it of interest to submit manuscripts since they would not need to wait until an entire book is completed to publish their work.

He also vowed to make submission of papers as painless as possible for authors using new tools now available to publishers (see below). In particular, he said making the page proof process in the final stages of publication as easy as possible was a priority for him.

Finally, Maldonado told the Monitor he is keen to have a great deal of commentary associated with the published papers in the journal. He intends to allow authors to have their say, but to accompany these opinions with commentary from others.

Needs Assessment

Asked about the need for another epidemiology journal, Elsevier’s Alex Smith told The Epidemiology Monitor that based on the company’s extensive market research and knowledge of the publishing industry and its experience in producing more than 2,500 journals, his company is very confident the new journal will be successful and sustainable. An important factor in this confidence is the interest that research funding organizations have in making the results of the research they support as widely available as possible and being willing to pay to have these results published. Under the open access model, authors who submit to Global Epidemiology will have to pay $1,750 per manuscript, according to Smith. Authors from low and middle
income countries will be assessed a lower fee or no fee at all to help create a forum for publishing work from the developing world.

More Producers

Another important factor expected to impact the success and growth of the journal is the finding that countries outside of North America and western Europe are accounting for an ever larger share of the total output of epidemiology research with China and Brazil now ranking in the top 5 epidemiology research producers. The new journal will not be sponsored by any single professional association of epidemiologists but rather will seek to appeal to a broad group of epidemiology subspecialities. Since the journal will be free and open access to all readers, there is no subscription fee discount that can be given. However, it is possible that the journal will give discounts on the $1750 publishing fee for members of collaborating organizations in exchange for some publicity and other supportive actions the organizations could take to help build the “Global Epidemiology” brand, according to Smith.

Your Paper Your Way

The new Journal is expected to launch around February 2019 when a website will be available for submitting papers. Publication of papers will occur in a rolling fashion with no bundling of papers into single or monthly issues. In what appears to be a major innovation, Elsevier will offer a service called “your paper your way” which will allow authors to submit their manuscripts in any format they wish to us and references in any layout they choose. If accepted, the papers will be reformatted by Elsevier into a common format for the Global Epidemiology format. According to Smith, this new feature is in response to one of the most frequently heard complaints from authors, namely that they have to spend inordinate amounts of time learning and adopting difficult or variable formats required by the journals. This challenge will not longer be a deterrent according to Smith.

Editorial Control

All decisions pertaining to the content and editorial integrity of the Journal will be up to Maldonado. As a publisher or publication manager, Smith is responsible for 5-10 separate journals and is there to assure the smoothness of daily operations but not to dictate any editorial policies. He will be involved in discussions of strategic issues with the editor, however, Elsevier trusts the editor as the subject matter expert and does not inject itself in editorial decisions.

According to the aims and scope of the new peer-reviewed Journal, its mission is to provide a publishing forum for high-quality epidemiologic research and methodological development. It will be global in the broadest sense inviting articles and seeking to stimulate open debate, across diverse areas of interest, application and geography.

Types of Articles

The journal invites the following types of articles, including but not necessarily limited to:

- Original research reports (including reports of null results).

"...China and Brazil now ranking in the top 5 epidemiology research producers."

"...Elsevier trusts the editor as the subject matter expert and does not inject itself in editorial decisions."

- Elsevier cont'd on page 12
Bloomberg American Health Initiative Holds Summit Meeting On Five Critical Health Problems

Initiative Bets On The “Power Of Public Health” To Help Reverse Decreasing Trend In US Life Expectancy

The Johns Hopkins Bloomberg School of Public Health received a $300 million gift from Bloomberg Philanthropies in 2016 in recognition of the School’s 100th anniversary and the School is translating the gift into a challenging and ambitious new undertaking called the Bloomberg American Health Initiative (BAHI). According to Joshua Sharfstein, the initiative’s director, the overarching goal of the initiative is to bring the “public health way of thinking” to bear on five complex and difficult health problems, including addiction and overdose, adolescent health, environmental challenges, violence, and obesity and the food system.

The Public Health Way of Thinking

Asked about what makes the public health way of thinking so valuable or effective, Sharfstein said it’s the focus on outcomes and data, on understanding a problem without regard to ideologies and using this information to inform policies and strategies. He also includes engaging with communities as an integral part of this public health approach.

Elements of the Initiative

The BAHI has many elements related to education, research, and practice including a fellows program in which it intends to provide scholarships to 60 individuals each year who will receive masters or doctoral level training in public health. As part of the fellows program, trainees must commit to return to their sponsoring local organizations to apply their public health training for at least one year or more.

Real World & Ivory Tower

Sharfstein views the new initiative as primarily focused not on any one element but overall on having an impact and making a difference on the five selected problems. In that sense, the initiative even though run by an academic institution is more real-world than ivory tower. From descriptions of the text in press releases and on the website, the BAHI can be understood as the effort of a school of public health trying to help the actual field of public health make a real difference in the public’s health.

Real World Focus

As evidence of this real-world focus, 1) multiple organizations devoted to the selected problems were invited to the first summit meeting of the group held in late November, 2) the program has made grants to investigators interested in data translation activities, and 3) it has supported faculty members to spend at least 100 hours working on the community front lines. In addition, 4) the initiative has hired Amanda Latimore, to serve as the Public Sector Initiatives Lead where she works directly with public officials to support evidence based practice, policy, and programs.
A special supplement to Public Health Reports published at the end of 2018 describes the origins and purpose of the BAHI and presents the latest thinking about approaches to the five complex problems being targeted by the initiative. These papers are the products of special symposia sponsored by the Bloomberg group on each of the topics which brought together key individuals working on these problems to help create action plans. The link to the supplemental issue is https://bit.ly/2RkQ1rU

Cross-Cutting Activities

In addition to the five target problems, the initiative is also calling attention to three cross-cutting activities which can influence all five of the problem areas, namely 1) generating evidence which is new, more relevant and useful for policy makers and practitioners, 2) placing a higher priority on addressing health equity, and 3) maximizing the use of policy intervention as an effective means of achieving widespread health impact.

Summit Meeting

At the Bloomberg Summit meeting in late November, the theme was From Local Action to National Impact: Overcoming Challenges and Improving Health. In attendance were an estimated 350 persons including national leaders, local practitioners, policymakers, innovators and allies from a wide range of fields and disciplines. The conference was a very polished and professionally executed affair with a series of multimedia presentations in a variety of formats with speakers from multiple organizations with different stories to tell about their challenges and mostly their successes.

A 3 by 5 Initiative

Attendees were able to network and hear many examples of successes in addressing the five targeted problems the initiative is focused on. In addition, videos were shown to identify 5 actions which could be taken in 5 years to address each of the 5 topic areas which are the focus of the initiative. To listen to a taped version of the conference, click here https://bit.ly/2SjOz5H

According to BAHI, by training individuals while also strengthening local organizations, the BAHI is building a network of individuals and organizations across the country — a network that reaches far beyond the traditional world of public health. Firmly rooted within communities and involving direct collaboration between national and local partners, Fellows, and the Johns Hopkins Bloomberg School of Public Health, the BAHI is an ambitious effort to tackle some of society’s thorniest problems.

"The conference was a very polished and professionally executed affair..."

"...an ambitious effort to tackle some of society’s thorniest problems."
**Notes on People**

**Died:** Dionisio Herrera, on December 4, 2018. Dr Herrera was the director of the Training Programs in Epidemiology and Public Health Interventions Network (TEPHINET), a global network of 71 field epidemiology training programs with a presence in more than 100 countries. In paying tribute to him his colleagues noted their “unspeakable sadness” that the global field epidemiology community lost a visionary leader, a nurturing mentor, fierce champion and generous friend.

**Resigned:** Kristy Bradley, as state epidemiologist in Oklahoma since 2005. According to media reports, she was forced to resign for reasons not revealed publicly. Last year Bradley had questioned how federal monies were being spent in the state. The health department says her forced resignation had nothing to do with any previous events.

**Appointed:** Thomas Dobbs, as Mississippi state health officer. Dr Dobbs was serving in the position on an interim basis and is the former state epidemiologist in Mississippi. In making the appointment, the chair of the state board of health said the department is “privileged to have someone of Dr Dobbs’ experience and caliber to lead our health departments as we continue to face challenges and changes.”

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**Elsevier cont'd from page 9**

- Review articles.
- Reports of methodological developments and innovations. We give highest priority to those that focus on the concepts, ideas and philosophical foundations of epidemiologic methods
- Teaching articles: up-to-date discussions of epidemiological methods and practices that achieve excellence in explanation, and that are suitable for use in the classroom or for continuing education.
- Validation studies to inform quantitative bias (uncertainty, sensitivity) analyses.
- Commentaries (usually invited).
- Editorials (usually invited).
- Letters to the editor that comment on articles recently published in the journal.

For other types of articles, please contact the Editor-in-Chief before submission. The journal can be found online at: [https://bit.ly/2DnBlAg](https://bit.ly/2DnBlAg)
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 year. Thus an online copy exists on our website that is updated regularly. This year we will print upcoming events in the Monitor monthly. To view the full year please go to: [http://www.epimonitor.net/Events](http://www.epimonitor.net/Events)

### February 2019

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
<th>Location</th>
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<tbody>
<tr>
<td>February 4-5</td>
<td>Conference: 2019 National Health Policy Conference</td>
<td>/ Academy Health / Washington, DC</td>
</tr>
<tr>
<td>February 4-8</td>
<td>Short Course: Introduction to Epidemiology</td>
<td>/ University of Bristol / Bristol, England</td>
</tr>
<tr>
<td>February 5-7</td>
<td>Conference: 2019 Joint PulseNet/OutbreakNet West Coast Regional Meeting</td>
<td>/ NACCHO - National Association of County &amp; City Health Officials / San Diego, CA</td>
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<tr>
<td>February 11-13</td>
<td>Short Course: Mendelian Randomization</td>
<td>/ University of Bristol / Bristol, England</td>
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<tr>
<td>February 11-14</td>
<td>Short Course: Analyzing Risk</td>
<td>/ Harvard University / Boston, MA</td>
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<tr>
<td>February 18-22</td>
<td>Short Course: Advanced Clinical Trials</td>
<td>/ Erasmus MC / Rotterdam, The Netherlands</td>
</tr>
<tr>
<td>February 18-24</td>
<td>Short Course: Mathematical Models for Infectious Disease Dynamics</td>
<td>/ Wellcome Trust / Cambridgeshire, England</td>
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<tr>
<td>February 18-25</td>
<td>Short Course: Infectious Disease Epidemiology &amp; Global Health Policy 2019</td>
<td>/ University College London / London, England</td>
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<tr>
<td>February 19-20</td>
<td>Short Course: Introduction to Stata</td>
<td>/ Global Public Health Research Foundation / Uttara, Dhaka</td>
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<tr>
<td>February 22-24</td>
<td>Short Course: Infectious Disease Modeling</td>
<td>/ Global Public Health Research Foundation / Uttara, Dhaka</td>
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<tr>
<td>February 25 - Mar 1</td>
<td>Short Course: Introduction to Qualitative Research Methods</td>
<td>/ University of Bristol / Bristol, England</td>
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Have you checked out the Near Term Epidemiology Event Calendar? Here are some highlights:

**February TBA**

<table>
<thead>
<tr>
<th>Event Title</th>
<th>Location</th>
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<tbody>
<tr>
<td>Short Course: Using R for Statistics in Medical Research</td>
<td>Erasmus MC / Rotterdam, The Netherlands</td>
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**February 25 - March 1**

<table>
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<tr>
<th>Event Title</th>
<th>Location</th>
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<tr>
<td>Conference: EpiLifestyles 2019 Scientific Session</td>
<td>American Heart Association / Houston, TX</td>
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**March 2019**

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<tr>
<th>Date</th>
<th>Event Title</th>
<th>Location</th>
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<tbody>
<tr>
<td>March 1-3</td>
<td>Short Course: Epidemiology and Public Health</td>
<td>Global Public Health Research Foundation / Uttara, Dhaka</td>
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<tr>
<td>March 4-8</td>
<td>Short Course: Intensive Course in Applied Epidemiology</td>
<td>University of Aberdeen / Aberdeen, Scotland</td>
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<tr>
<td>March 5-8</td>
<td>Conference: EpiLifestyles 2019 Scientific Session</td>
<td>American Heart Association / Houston, TX</td>
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<tr>
<td>March 6-8</td>
<td>Short Course: Quality of Life Measurement</td>
<td>Erasmus MC / Rotterdam, The Netherlands</td>
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<tr>
<td>March 10-12</td>
<td>Conference: 43rd Annual ASPO Conference</td>
<td>American Society of Preventive Oncology / Tampa, FL</td>
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<tr>
<td>March 11-29</td>
<td>Short Course: Perinatal Epidemiology &amp; Maternal Health</td>
<td>University College London / London, England</td>
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<td>March 14-15</td>
<td>Short Course: Multiple Imputation for Missing Data</td>
<td>University of Bristol / Bristol, England</td>
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<tr>
<td>March 17</td>
<td>Short Course: Advanced Multiple Imputation for Missing Data</td>
<td>University of Bristol / Bristol, England</td>
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<tr>
<td>March 17-21</td>
<td>Conference: Epigenetics and Human Disease (X5)</td>
<td>Multiple Sponsors / Banff, Canada</td>
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<tr>
<td>March 18-19</td>
<td>Winter Program: CGEpi Winter School</td>
<td>Institute for Medical Information Processing, Biometry, and Epidemiology / Munich, Germany</td>
</tr>
<tr>
<td>March 19-21</td>
<td>Conference: 2019 ACHI Conference</td>
<td>Association for Community Health Improvement / Chicago, IL</td>
</tr>
<tr>
<td>March 27-28</td>
<td>Conference: 2019 Health Datapalooza</td>
<td>Academy Health / Washington, DC</td>
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</table>
March 2019 continued

**Conference: 2019 SEVPM Conference & Annual General Meeting** / Society for Veterinary Epidemiology & Preventive Medicine / Utrecht, The Netherlands

**Conference: 92nd Annual AES Conference** / American Epidemiological Society / Los Angeles, CA

March 29 [link: https://tinyurl.com/m3ark7y]
**Meeting: Joint Meeting MAC-EPID & ITiMS** / University of Michigan / Ann Arbor, MI

March 29 [link: https://bit.ly/2zVe6eV]
**Conference: Michigan Public Health Association Epidemiology Conference** / Michigan Public Health Association / East Lansing, MI

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The successful candidate will be a highly respected leader with a strong record of funded research in an area related to public health and will have the necessary record to be appointed as a faculty member at the level of Professor on the RSPH faculty. We encourage applicants from diverse backgrounds and with diverse research interests.

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Applications will be kept confidential and references will not be contacted without the permission of applicants.

The starting date is July 1, 2019 (negotiable) and salary is commensurate with qualifications. Review of applications will begin immediately and continue until the position is filled.
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