Assistant Secretary for Health ADM Brett Giroir, SG VADM Jerome Adams, Deputy SG RADM Sylvia Trent-Adams, Director DCCPR RADM Joan Hunter, and Chief Scientist Officer CAPT John Eckert with Scientist Officers at the 2018 USPHS Symposium.
On Saturday, April 21, 2018, more than 100 USPHS Commissioned Corps officers, representing several categories and stationed across the nation, gathered in Atlanta to remember CDR Timothy Cunningham at the Celebration of Life Service held in his memory. Held at the Morehouse College Martin Luther King, Jr. International Chapel, the service was also live-streamed so that loved ones and colleagues who could not attend in person could participate. Several leaders from the Centers for Disease Control and Prevention (CDC) and the USPHS were in attendance: Dr. Robert Redfield (Director, CDC), RADM Anne Schuchat (Deputy Director, CDC), Dr. Ursula Bauer (Director, CDC National Center for Chronic Disease Prevention and Health Promotion [NCCDPHP]), RADM Wanda Barfield (Director, Division of Reproductive Health, CDC NCCDPHP), RADM Michael Iademarco (Director, CDC Center for Surveillance, Epidemiology, and Laboratory Services [CSELS]), RADM Robin Ikeda (Director, CDC Office of Noncommunicable Diseases, Injury, and Environmental Health), RADM William Mac Kenzie (Deputy Director for Science, CSELS), RADM (ret.) Helena Mishoe, (former Scientist Chief Professional Officer), and RADM Stephen Redd (Director, CDC Office of Public Health Preparedness and Response). CAPT Holly Williams served as Officer in Charge, leading 16 officers in a funeral honor guard to receive CDR Cunningham’s casket into the chapel.

CDR Cunningham’s parents, COL (ret.) Terrell and Mrs. Tia-Juana Cunningham, graciously invited officers to attend the private burial service on Monday, April 23, 2018. CAPT Holly Williams led 24 officers in a funeral honor guard at the private service as the Cunningham family paid their last respects. RADM Barfield, as the senior presiding USPHS Commissioned Corps officer in attendance, led formal military funeral honors and presented the United States flag to the Cunningham family.
Pictured above, USPHS Commissioned Corps funeral honor guard at the Celebration of Life Service (by rank/last name): CAPTs Holly Williams (Officer in Charge), Robin Hunter-Buskey, Mehran Massoudi, Alan Peterson, Jennifer Williams, and Mildred Williams-Johnson; CDRs Alexander Crosby, Indira Wallace Harris, David Huang, Eva McLanahan, Paula Washington, and Shauna Mettee Zarecki; LCDRs Jamar Barnes, Jason Dailey, and Folasade Kembi; LT Francis Annor.

Pictured left, USPHS Commissioned Corps funeral honor guard at the private burial service (by rank/last name): RADM Wanda Barfield (senior presiding USPHS Commissioned Corps officer); CAPTs Holly Williams (Officer in Charge), Marcella Law, Jennifer Williams, and Mildred Williams-Johnson; CDRs Francisca Abanyie, Kamil Barbour, LaMar Henderson, Eva McLanahan, and Paula Washington; LCDRs Joanna Gaines, NaTasha Hollis, Asha Ivey-Stevenson, Shane Jack, Jennifer Lind, Iman Martin, Rashid Njai, Erika Odom, Ekwutosi Okoroh, Katrina Sloan, and Marcienne Wright; LTs Alaine Knipes, Colleen Scott, and Tanesha Tutt.
The Scientist Officer,

Community Service

Scientist officer LCDR Erika Odom, President of the Atlanta Commissioned Officers Association (ACOA), has described CDR Cunningham as an impeccable scientist, fierce leader, and an officer of excellence, who demonstrated an intense dedication to family and community and to the USPHS Commissioned Corps. He served with ACOA as a volunteer with the USO, the Atlanta Community Food Bank, St. Francis Table Soup Kitchen, and the United Methodist Children’s Home. From 2016–2017, CDR Cunningham also served as ACOA President. His impact on the greater Atlanta community reached far and wide through ACOA and other roles, such as his service as part of the esteemed leadership development and community education program, LEAD Atlanta (https://www.leadershipatlanta.org/LEADAtlanta). He was recognized in 2017 by the Atlanta Business Chronicle as one of the “40 Under 40” rising stars.

SciPAC Mentorship

CDR Cunningham mentored many junior Scientist Officers throughout his career. LCDR Marcienne Wright, his formal SciPAC mentee, noted that CDR Cunningham’s mentorship, formal and informal, strengthened several officers’ promotion packages. In addition to mentoring LCDR Wright, CDR Cunningham mentored a number of other Scientist officers, including LCDRs Iram Hassan, NaTasha Hollis, Jonetta Mpofu, Rashid Njai, Scott Steffen, Nancy Tian, and LT Alesha Harris. CDR Cunningham’s guidance improved officer core competencies, as detailed in the Scientist Category benchmarks, and facilitated effective presentation of these core competencies in their promotion packages. CDR Cunningham never stopped mentoring, inspiring, and advising Scientist officers on how to achieve success within the USPHS Commissioned Corps.

SciPAC Service

CDR Cunningham served as Co-Chair of the Visibility Subcommittee since 2016. He led the Atlanta Social Team, organizing a record number of social events for Scientist Officers in Atlanta, including SciPAC Trivia Nights at Mellow Mushroom and Atlanta BeltLine Walks. Additionally, he helped organize the first-ever SciPAC Mardi Gras party, which was attended by about 20 Scientist Officers. CDR Cunningham was also one of the developers of the SciPAC Seminar Series. He regularly represented SciPAC at annual USPHS Scientific and Training Symposia, presenting his work in various sessions, including at the 2017 Symposium held in Chattanooga, TN.

(Continued on page 5)
Leadership in Epidemiology

In his most recent position, CDR Cunningham served as team lead for the CDC State Chronic Disease Assignee Program. In that role, he supervised and mentored USPHS officers and civilian employees assigned to state health departments in Alabama, Arizona, Colorado, Illinois, Indiana, New Hampshire, and Nevada, and served as technical monitor for the CDC National Mentoring Program in Applied Chronic Disease Epidemiology. This leadership role gave CDR Cunningham the perfect platform to focus his mentorship on the development of other CDC epidemiologists. His mentorship helped chronic disease epidemiologists improve their skills, so that state health departments could increase their abilities to address chronic disease health disparities. CDR Cunningham’s last major publication, *Vital Signs: Racial Disparities in Age-Specific Mortality Among Blacks or African Americans — United States, 1999–2015 (MMWR May 5, 2017 / 66(17):444–456)*, was highlighted by the *New York Times* and *NPR*, among other major media outlets. He was one of the most prolific authors from his CDC Epidemiologic Intelligence Service fellowship cohort, with over 30 peer-reviewed first- and co-authored studies published to date. CDR Cunningham’s impact on understanding and combating health disparities will be long lasting.

CDR Cunningham’s Legacy

COL and Mrs. Cunningham expressed their appreciation to USPHS Commissioned Corps officers following the services with this note: “Thank you for everything you all have done to make Tim’s memorial service beautiful and special in every way. We were very pleased.” They have also instituted two charitable donation opportunities to honor CDR Cunningham’s legacy:

| Morehouse College  
Office of Institutional Advancement  
www.giving.morehouse.edu |
|------------------------------------------------------------------|

Memo: Timothy Cunningham, ’04

The Commander Timothy J. Cunningham, ScD, MPH, Endowment for Homeless Ministry
Atlanta First United Methodist Church
www.atlantafirstumc.org/give

Our CPO, CAPT John Eckert, stated that CDR Cunningham was a model PHS Scientist officer, who embodied the mission of the USPHS Commissioned Corps, and whose example could guide us in reflecting on our own contributions to the mission as advocates for populations in need to protect, promote, and advance the health and safety of our nation. CDR Cunningham truly represented Scientist officers and our service with pride and distinction. In 2017, he was the single Scientist officer across all ranks to earn the highly competitive Exceptional Proficiency Promotion. This achievement is a testament to his focus and determination to succeed as a Commissioned Corps officer. CDR Cunningham is truly a model to many.

At the Celebration of Life Service, we were reminded by one of the speakers to tell our loved ones often how much they are valued and loved. It is clear from the overwhelming outpouring of support in the past months that CDR Cunningham is deeply valued and loved, and missed.

By LCDR Marcienne Wright, LCDR Zewditu Demissie, CDR Kamil Barbour, CDR Deborah Dee, LCDR NaTasha Hollis, and LCDR Erika Odom

*Note: This tribute to CDR Timothy Cunningham reflects the personal thoughts of the authors
**BACKGROUND.** Publishing impactful research to fill important knowledge gaps is one of the many ways Scientist Officers regularly contribute to the missions of agencies to which USPHS Commissioned Corps officers are assigned. Earlier this year, the SciPAC Visibility Subcommittee’s Manuscript Highlights Team collaborated with the Science Subcommittee’s Bibliography Team to standardize a systematic web-based search for Scientist Officer publications written in 2017.

**RESULTS.** A total of 496 publications (e.g., peer-reviewed articles or other examples of primary research) were identified across 151 Scientist Officers, regardless of the level of authorship. Publications spanned an eclectic range of public health topics (Figure). Both teams will be using these results to inform ongoing highlighting and bibliography initiatives. For instance, this year, the Science Subcommittee’s Bibliography Team is supplementing these data with self-reported information on other types of publications, such as book chapters, government reports, conference proceedings, and briefings to Congress.

**METHODS.** Members of the Manuscript Highlights Team were each assigned a list of 30 to 40 Scientists (total N=330). Standard search criteria tailored for 3 different search engines (PubMed, Google Scholar, Scopus) were provided, and members were asked to conduct searches using at least two different platforms for cross-validation purposes.

**ON THE NEXT PAGE** we spotlight a subset of publications from 2017 on which Scientist Officers served as the lead or senior author, as evaluated by the Manuscript Highlights team for their novelty, impact, and contribution to the field. These works provide a brief glimpse into how the Scientist Category is at the forefront of conducting and disseminating research of regional, national, and international public health importance. We hope one or more of these topics resonates with your own interests, or that you learn something new. As this is only a subset, please stay tuned to learn about the other high-impact works we identified!

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**Figure.** Word Cloud illustrating the top 250 terms captured from 496 publication titles, as authored by Scientist Officers in 2017. Font sizes are weighted to word frequency.

*Challenge: can you zoom-in and find “USPHS”?* (Continued on page 8)
In this multinational study involving the U.S. Centers for Disease Control and Prevention (CDC) and global health partners from 47 countries, lead author CDR A. Danielle Iuliano and colleagues calculated global estimates of influenza-associated respiratory mortality by developing an innovative statistical model that used vital records and viral surveillance data and adjusted for differences in risk of respiratory infection mortality between countries. Specifically, researchers calculated annual seasonal influenza-associated respiratory deaths for 33 countries that had death records and seasonal influenza surveillance information for a minimum of four years between 1999-2015, and modeling was used to estimate the number of flu-associated respiratory deaths for 185 countries worldwide.

Notably, the authors found that between 291,000 and 646,000 people die from seasonal influenza-linked respiratory illnesses each year. These estimates represent a critical contribution to the field of global influenza surveillance by updating previous global influenza mortality estimates, which were lower and were derived more than one decade ago. As stated in the study, “Since these estimates were made available by [the World Health Organization], the number of countries with capacity to calculate national estimates for seasonal influenza-associated excess mortality has increased.” This investigation also assessed country-specific estimates for influenza-associated respiratory deaths by different age groups (e.g. younger than 65 years, 65-74 years, 75 years and older). For instance, those aged 75 years or older and people living in sub-Saharan African countries experienced the highest rates of flu-associated respiratory deaths.

CDR Iuliano emphasizes that, “This work adds to a growing global understanding of the burden of influenza and populations at highest risk [...] it builds the evidence base for influenza vaccination programs in other countries.” As of December 2017, these data are now available to inform influenza prevention and control programs worldwide.

When the first cases of Zika virus infection appeared in Puerto Rico in late 2015, knowledge regarding the spectrum of disease caused by Zika was still very limited. Despite high rates of asymptomatic infections and mild symptoms, reports indicated a potential association with congenital birth defects, as well as a range of neurologic disorders, such as Guillain-Barré syndrome (GBS), following infection among adults. GBS is an uncommon autoimmune disorder characterized by progressive weakness and diminished deep tendon reflexes. During more than 500 days of emergency operations, Epidemiology Team Lead LCDR Tyler Sharp and colleagues prioritized the public health response, while also implementing investigations to lead the science on Zika-associated neuropathy.

For this case-control investigation, senior author LCDR Sharp and colleagues found that acute Zika virus infection, confirmed by RT-PCR, was a risk factor for developing GBS (23% case-patients vs 4% controls; mOR = 16.0 [2.1-120.6]). Notably, three risk factors for GBS were identified: acute illness within the previous 2 months, any laboratory evidence of Zika virus infection, and acute Zika virus infection confirmed by RT-PCR. The authors stated, “During Zika virus outbreaks, clinical suspicion should be elevated to improve GBS patient prognosis through prompt diagnosis and treatment.” This novel finding contributes important evidence for adding Zika to a short list of etiologies associated with GBS (e.g., Campylobacter jejuni, 1976 Swine Flu vaccine).

According to the study’s lead author, Emilio Dirlikov, LCDR Sharp was a critical contributor to the rigorous, evidence-based public health practice and science used for their study. Throughout the process, Sharp was also “an incredible mentor, fielding questions and engaging productive discussions, even late into the evenings at CDC Dengue Branch (San Juan). Through his guidance, we have the most complete picture of Zika-associated neuropathy.”
Secondhand Exposure to Electronic Cigarette Aerosol Among US Youths

Electronic cigarettes (e-cigarettes) are now the most commonly used tobacco product among U.S. youth, surpassing conventional cigarettes as of 2014. For this investigation, LT Teresa Wang and colleagues used data from the 2015 National Youth Tobacco Survey to document the extent to which US youth are exposed to secondhand e-cigarette aerosol.

Specifically, they estimated about 6.5 million middle and high school students in grades 6-12, or approximately 1 in 4 U.S. youth, were exposed to secondhand e-cigarette aerosol in public places in 2015. This includes about 4.4 million students who are not current e-cigarette users, and more than 1 million students who are not exposed to secondhand smoke from combustible tobacco products like cigarettes, cigars, and hookahs. “To protect youth from both secondhand smoke and secondhand aerosol, smoke-free policies can be modernized to include e-cigarettes,” said LT Teresa Wang.

“These policies can maintain current standards for clean indoor air, reduce the potential for renormalizing tobacco product use, and prevent involuntary exposure to nicotine and other emissions from e-cigarettes.”

This study has since been used by state and local public health practitioners working to modernize their public indoor smoke-free policies to include e-cigarettes, and is an example of how science can be effectively translated into action to protect the general public from an emerging public health concern.

Economic Insecurity and Intimate Partner and Sexual Violence Victimization

Using data from the 2010 National Intimate Partner and Sexual Violence Survey, CDR Matthew Breiding and colleagues investigated the association between economic insecurity and intimate partner and sexual violence victimization. CDR Breiding and colleagues noted that previous studies have consistently associated low socioeconomic status with both intimate partner violence (IPV) and sexual violence (SV) victimization, but that the current study is very important since the indicators used (food insecurity and housing insecurity) are conceptually distinct social determinants of health.

CDR Breiding and colleagues found that women and men who experienced recent economic insecurity (a variable that combined food insecurity and housing insecurity) were more likely to have experienced IPV and SV, even after controlling for other important sociodemographic variables. The study explained that economic insecurity might place people at a higher risk of IPV and SV because it may increase the risk of exposure (for example living in multiple temporary locations) of victims to perpetrators looking for vulnerable targets.

But the good news is that “both IPV and SV are preventable,” wrote CDR Breiding and colleagues, who also suggested that prevention strategies that improve economic security and stability for families may help reduce the risk of IPV and SV.

(Continued on page 10)
CDR Robin Toblin and colleagues published results of a study that surveyed 627 active-duty soldiers 4 months after their deployment to Afghanistan and again 3 months later. The study examined the perception that anger reactions (e.g., yelling, throwing things, threatening people, hitting people) may be helpful in performing occupation-related duties (e.g., while deployed to a combat environment), and whether that perception was associated with mental health problems, somatic symptoms, and/or functioning. The idea for the study stemmed from the high prevalence of anger reactions and aggression in the current active-duty soldier population, and existing Walter Reed Army Institute of Research (WRAIR) research activities related to anger. When examining anger reactions over time, CDR Toblin and colleagues identified four groups of latent classes: low stable (resilient), high stable (chronic), decreasing over time (improved), and increasing over time (delayed problems). For two of these groups (chronic and delayed problems), perceiving anger reactions as helpful was closely related to aggressive behaviors. Perceiving anger reactions as helpful was also associated with worse mental health symptoms. CDR Toblin noted, “These findings showed that aggressive behaviors are connected to other bad outcomes, and are not beneficial in any environment.” Lessons from these findings have been incorporated into current leadership military training for new soldiers. CDR Toblin went on to add, “There are implications for soldiers, leaders, and clinicians, and more work is needed to convey these findings to a broader audience and share best practices for coping with anger (for example, through the use of mindfulness).” In the future, it may be interesting to further assess how these findings are similar to or different from civilian populations.

References


By LT Teresa Wang, LT Shayne Gallaway, LT Francis Annor, CAPT Fuyuen Yip, LT Alaine Knipes, LT Jessica Tomov, LCDR Angela Thompson-Paul, LCDR Shondelle Wilson-Frederick, LCDR Jean Ko, CDR David Huang, and CDR Kamil Barbour
This year’s Scientist category day was held in Dallas, TX, home of great barbecue, sports, and for us Scientists, bowling! Scientists from a variety of states and agencies gathered to discuss topics ranging from preparedness, promotion, deployments, and mentorship, to Space A Travel, leadership, CDC TRAIN (CDC’s External National Learning Network for Free Training) and the Medical Reserve Corps. The day also included reflective moments, such as during CAPT John Eckert’s CPO question and answer session, and a somber tribute to our beloved colleague CDR Timothy Cunningham.

In this year’s keynote address, speakers from the Division of Regional and Local Health Operations of the Texas Department of State Health Services, Jeffery Hooghem, Director of the Health Emergency Preparedness and Response Section and David Gruber, Associate Commissioner, gave attendees an in-depth look at how Texas prepares for and responds to public health emergencies. In their discussion on The Science of Health Preparedness and Response: A View from Texas, Hooghem and Gruber used examples from Hurricane Harvey to demonstrate how the state’s intricate emergency response system allowed local, state, and federal officials to coordinate response efforts and address public needs.

Following the keynote address, the Agency Networking session allowed officers to learn about the various agencies and roles in which Scientists currently serve. Approximately 50 officers participated in the Agency Networking session, which was planned by LT Alesha Harris, LCDR Jorge G. Muñiz Ortiz, CDR Michelle Rodriguez, and CDR Marco Bennett. The purpose of this event was for officers to share knowledge about their respective agencies with officers interested in knowing more about them. Agencies represented included the DoD, EPA, FDA, CDC, NIH, National Park Service, and USDA. In addition, officers discussed their roles in HHS and Commissioned Corps Headquarters. The event finished with CAPT DeLoris Hunter giving a detailed description of LCDR Jonathan Leshin’s transition from the EPA to the FDA and his work at his new agency, and LT Michelle Johnson highlighting the amazing work CAPT Margo Riggs is doing in Africa.

After a long day of speakers, networking, and hearing about the state of the category, officers went to Bowlmor Lanes for the Scientist Social. The social provided an opportunity for scientist officers to get to know one another in a more informal atmosphere. LT Andrew P. Brown commented that he enjoyed meeting new officers and had an opportunity to speak with CAPT Eckert face to face for the first time since being called to active duty. Many partook in bowling, and LCDR Shayne Gallaway showed off his bowling skills and had the high score. The rest just had fun trying to keep the bowling balls out of the gutter. In addition to bowling, there were arcade games and corn hole. No one went hungry, as there were lots of hors d’oeuvres, including gigantic German pretzels, chili cheese dogs, wings, nachos, and quesadillas, all generously provided by SciPAC.

By LT Tanesha G. Tutt, LT Andrew P. Brown, LCDR Jorge G. Muñiz Ortiz
Above are Scientist Officers enjoying each other’s company at the 2018 USPHS Symposium SciPAC social.
When did you join the USPHS?

I was a fellow at the Centers for Disease Control and Prevention (CDC) for one year in 2002. During that year, I spoke to different Officers in the Commissioned Corps and was able to see Officers in action following 9/11. The esprit de corps of the Officers really impressed me. I joined the Commissioned Corps in 2003 as an Epidemic Intelligence Service Officer at CDC, and worked as a state assignee for 2 years at the Georgia Public Health Department, performing both chronic and infectious disease work.

Could you share a little about your work at the National Center on Birth Defects and Developmental Disabilities?

I work as the branch chief of the Epidemiology and Surveillance Branch in the Division of Blood Disorders (DBD), within the National Center on Birth Defects and Developmental Disabilities (NCBDDD). We work to reduce the public health burden of blood disorders through 1) surveillance that helps us better understand complications due to blood disorders; 2) health education and communication with consumers and providers; and 3) the implementation and evaluation of prevention programs or strategies. The blood disorders we work on in the branch are hemophilia, thalassemia, venous thromboembolism (or blood clots), and sickle cell disease.

Are there any noteworthy accomplishments you’d like to share?

The hemoglobinopathies work within our branch was recently chosen as a topic to discuss with our Surgeon General, VADM Jerome M. Adams. In our meeting, we heard about the OSG priorities in opioid addiction and health and the economy. We shared possible strategies to increase the impact of our work. He is a true leader.

Can you talk about an opportunity (training, volunteering, deployment, etc.) that greatly shaped your career as an Officer?

After working in reproductive health for 7 years, I did a 4-month detail in this division in 2012. The detail was a new subject area, but an area of growth for me in terms of learning management and operations. When the call for the branch chief position came about in 2015, I was selected. The lesson learned from it was to take opportunities, especially if they are outside your comfort zone, because that...
is where you find growth, excitement, and more opportunities.

**What would you like to say about the “State of the Corps” today?**

The Corps has gone through enormous changes in the past 15 years. When I came in, the Corps was still transitioning from wearing uniforms on a weekly to a daily basis. We have so many dedicated, smart scientists in our category and as a result, our category has kept up with the changes and challenges. Moving forward, I think we have to keep an open mind and know that we will still need to pivot and be strategic with the changes.

*By LCDR Israel Cross*
Space-A Travel – From the West to the East and Back Again

Space Available Travel, commonly known as “Space-A” travel, is one of the best benefits available to Officers and their families. If you are willing to exercise a bit of flexibility in schedule, you and your family can take good advantage of Space-A travel and fly to many wonderful locations, at little to no cost.

Many Officers have flown Space-A from the US East Coast to Germany or Spain, but there are also many Space-A flights from the US West Coast to Asia to be explored. Among them, the Seattle-Japan route is quite easy to get on. My wife and I recently used this route to fly from Seattle to Japan. From Japan we also took a Space-A flight to visit Singapore.

Sleepless in Seattle

Air Mobility Command (AMC) flights in/out of Seattle-Tacoma International Airport (SeaTac) serve bases in Japan and Korea exclusively. Usually, there are three flights each week (Sunday, Tuesday, and Thursday). The monthly schedule is posted on the SeaTac AMC Passenger Terminal Facebook page the last week of every month for the upcoming month (https://www.facebook.com/SeaTacAmcPassengerTerminal/). On the Facebook page, you can also find more information about check-in time, Space-A roll calls, etc. The USO lounge at the SeaTac International Airport is open 24/7 and provides hot food and snacks, five big screen TVs, bunk room, a theater lounge, showers, free Internet access and a separate family-friendly room.

My wife and I arrived in Seattle on a Friday. Since the Space-A flight we signed up for through Take-a-Hop (http://www.takeahop.com) was scheduled to leave on Sunday morning, we took the opportunity to explore Seattle and got together with some old friends, including an Officer who graduated in the same OBC class with me!

We stayed at the airport USO lounge Saturday night because the flight was scheduled to leave very early the next morning. In fact, we had to get ready for roll call at around 0400 hours. However, the whole roll call/boarding process was stress free because we did not have to compete for seats - there were about 130 seats available on this large Boeing 707 jet airliner for the approximately 50 passengers traveling that flight!

Misawa and Tokyo, Japan

After about 10 hours in the air, we finally landed at snow-covered Misawa Air Force Base (AFB). A few of us got off at this stop. The plane then took off for Osan, South Korea. My wife and I wanted to meet our fami-

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lies in Singapore, so we decided to get off and take another Space-A flight from Japan to Singapore. Misawa AFB does not have Space-A flights to Singapore, so we had to get to Yokota AFB in Tokyo. Luckily, the public transportation in Japan is very convenient. We took the bullet train from Misawa to Tokyo. We spent several days in Tokyo for sightseeing while waiting to get on a Space-A flight. We visited many interesting sites, including the Tsukiji fish market (the biggest fish market in the world), Ueno Park (a very large and beautiful public park), and the National Museum of Emerging Science and Innovation (Miraikan), where we enjoyed watching the 10-minute demonstration of Honda’s ASIMO (Advanced Step in Innovative Mobility). Also, we were surprised to see so many 7-Eleven stores in Tokyo, pretty much one on every street corner. The 7-Eleven stores in Tokyo elevate the mere notion of convenience. Mostly importantly to me, they offer free Wi-Fi. I was able to get online and book hotels, use Google Maps to get directions, and check Space-A flight schedules on Facebook.

Yokota AFB is a large AFB. The hotel on base was full when we got there, so we stayed at a hotel outside of the base and near the train station.
There are frequent Space-A flights between Yokota AFB and Singapore Paya Lebar Air Base, typically three flights each week. We had no problem getting on the plane, which they call “Combi” because it has cargo in front and seats in the back.

**Singapore – the Garden City**

The Garden City was farther from Japan than I thought. It took about eight hours for the Combi to land in this tropical paradise. What impressed me the most, more than cleanliness and beautiful flowers/trees everywhere, was its diversity. Here, residents appreciate the cultural diversity and share ways to promote understanding and harmonious living. Of course, we took in all this tiny island state had to offer, including the famed Marina Bay, the colorful and futuristic Gardens by the Bay, the iconic Chinatown, and the Night Safari, the world’s first nocturnal zoo.

**Your next adventure?**

Scheduling the return flight to Seattle was also very smooth. We simply reversed the Space-A route on our return trip, and did not encounter major headaches at either Singapore Paya Lebar Air Base or Yokota AFB. In 2020, Tokyo will host the Summer Olympic Games. This might be a good reason to visit if you have not been to Japan or anywhere else in Asia. You can take your whole family for a Space-A adventure. Over the years, Space-A has become more family friendly, allowing for easier travel with young children. With the right planning, Space-A Travel can be the best way to take a trip with your family.

*By LCDR Oliver Ou*
The SGHG was established in 1993 by the Surgeon General (SG) and the United States Public Health Service (USPHS). Its goals are to provide valuable service to the Department of Health and Human Services (HHS), enhance visibility of the USPHS Commissioned Corps among HHS and non-HHS programs and organizations, and engender esprit de corps. The SGHG represents the USPHS Commissioned Corps by rendering appropriate honors of the uniformed services, maintaining exceptionally high standards of appearance, and conducting ceremonial duties.

The SGHG consists of more than 40 officers from the Washington, DC, metropolitan area to provide ceremonial support at events around the Capital region. The term for SGHG members is 3 years. Each officer is required to perform at 25% of the requested events annually, which currently results in a member participating in an average of 4-5 events per year. In addition, members must attend 50% of the trainings. Most events are in the DC area; thus, it can be advantageous and convenient for SGHG applicants and members to live in the region. To ensure an officer’s commitment, there is a six-month probationary membership before one can apply for active membership. A member is eligi-

For the first time in history, USPHS, led by the SGHG, participated in the National Independence Day Parade in Washington, DC, on July 4, 2018. Front row, Left to Right: LCDR Richard Johnson (HSO); Scientist Officers CDR Eric Zhou and LCDR Iman Martin; and Pharmacist Officers LCDR Casmir Ogbonna, CDR Mandy Kwong, and LT Tramara Dam. (Photographer: CDR Kun Shen).

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ble for the Special Assignment Award after successfully completing 30 service days.

It has been a very exciting experience for me to be an SGHG member. Thus far, I have participated in over 20 events. The events included leading the PHS formation team during the National Independence Day Parade in Washington, DC; presenting the USPHS flag during the Veteran’s Day observance at Arlington National Cemetery for the first time in history; and presenting the colors at the March 2018 swearing-in ceremony for Assistant Secretary for Health, ADM Brett Giroir. It has been a great honor to be part of the historic events and to celebrate joyful moments and listen to senior officers’ stories about their PHS careers at various promotion and retirement ceremonies. If you are in the DC area and are interested in becoming an SGHG member, please visit [http://www.usphs.gov/aboutus/honorcadre.aspx](http://www.usphs.gov/aboutus/honorcadre.aspx), and feel free to contact me at zhoue@niaid.nih.gov or CDR Kun Shen at Kun.Shen@fda.hhs.gov.

By CDR Eric Zhou

CDR Eric Zhou and CDR Rebecca Bunnell (HSO) presented the USPHS flag for the first time ever during the Veteran’s Day observance, which was led by Vice President Mike Pence, at Arlington National Cemetery on November 11, 2017.
The Regional Incident Support Team (RIST) - National Capital Region (NCR) was established in 2009 as a Tier 1 team to respond to and support public health emergencies, threats of national significance, and natural/human caused adverse events in the national capital region. Currently, RIST-NCR is composed of 30 trained USPHS Officer responders who are ready to be deployed within twelve (12) hours of activation, and the team currently includes the following Scientist Officers: CAPT Sally Hu (RIST-NCR Team Commander), CDR Qiao Bobo, CDR Chekesha Clingman, LCDR Jessica Cleck-Derenick, CDR Judy Facey, CDR Charlene Maddox, and CDR Sukhminder K. Sandhu. Since its establishment, RIST-NCR has responded to and supported over 52 public health emergencies and significant events.

From August to December 2017, RIST-NCR deployed 17 Officers serving different needs in Texas, Florida, and Puerto Rico, as well as the Washington metropolitan area, in support of responses to Hurricanes Harvey, Irma, and Maria. RIST-NCR members were asked to augment key positions outside their normal training and deployment roles to support the hurricane response efforts. Durations of deployment varied from 1 week to 4 weeks, with an average of 2 weeks for each officer.

In the Washington, DC area, RIST-NCR Officers deployed to the HHS Secretary’s Operation Center (SOC); HHS Mission Support Center in Frederick, MD; and the FEMA headquarters. The Officers worked with multiple Operating Divisions and Staff Divisions, including the Emergency Management Group (EMG), Resource Mobilization Section, Critical Infrastructure Protection Branch, and Information Management Group. Officers served diverse functions, from preparing rosters, writing health advisories and safety plans, monitoring deployed personnel, tracking resources, allocating critical supplies (such as fuel) to those who needed them most, facilitating information management, functioning as liaisons to private industry, and preparing senior leadership briefings and situation reports.

CDRs Qiao Bobo, Chekesha Clingman, and Charlene Maddox were deployed to the SOC in Washington, DC, for 11-12 days as Critical Infrastructure and Protection (CIP) Duty Officers. Staffing the CIP desk, they provided daily situation update briefs and maintained the information dashboard. They tracked and coordinated fuel, oxygen, and other critical medical supplies to hospitals, and they prioritized requests from hospital and medical supply distributors and manufacturing companies for these supplies. On behalf of CIP, they worked alongside Centers for Disease Control and Prevention (CDC), Food and Drug Administration (FDA), SOC EMG, Federal Emergency Management Agency (FEMA), and

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non-profit organizations to address requests for resources and information related to the Puerto Rico facilities’ access to critical medical supplies, including medical grade oxygen, fuel, water, and diesel, helping to prevent medical supply shortages in Puerto Rico and nationwide.

CDR Sukhminder K. Sandhu and LCDR Jessica Cleck-Derenick were deployed for 10-14 days to the SOC EMG Information Management Group (IMG) and worked 12+ hour shifts, with CDR Sandhu also being deployed to FEMA for the first 3 days, serving as a Public Health Specialist Technician. Within the IMG, CDR Sandhu helped lead the Storyboards that were created every 4 hours around the clock to keep officials updated on the response in Puerto Rico and the U.S. Virgin Islands. She also assisted in developing the daily HHS Senior Leadership Briefings, which were provided to the acting HHS Secretary. One of the key areas in which CDR Sandhu provided her expertise was working with her colleagues to help define data sources for the report, and to ensure consistency across teams and time. LCDR Cleck-Derenick was responsible for collecting information throughout the deployment and pushing it out to those who required it (e.g., Incident Response Coordination Team [IRCT] and state and local officials). Within the IMG, she was responsible for resource tracking, which involved monitoring the activation, deployment, and demobilization of resources throughout the response. LCDR Cleck-Derenick was also responsible for creating the Situation Report, a detailed 12-hour report that was distributed to all HHS stakeholders, providing them with much-needed information regarding the incident and the federal, state, and local responses.

CDR Judy Facey was also deployed to the SOC EMG, serving as the EMG Safety Officer. CDR Facey helped draft the Hazard Exposure Risk Assessment (HERA), Health and Safety Plan (HASP), HERA Puerto Rico - Zika, HERA 2017 Irma - Caribbean, HHS Zika Health Advisory, HHS FEMA Advisory Floodwaters, and the Health Advisory FAQ on Scabies and Lice. She worked closely with the EMG Chief Medical Officer to ensure that all hospitalization, outbreaks, and injuries (car crashes, etc.) were tracked and reported in a timely manner to the EMG Manager and to HHS Safety. In addition, she worked with HHS Safety to ensure that all Employees’ Compensation Operations and Management Portal reports were filed on a timely manner and all incidents that have to be reported to the Occupational Safety and Health Administration were done in the allotted timeframe.

Officers interested in serving on a RIST should contact team leadership regarding their specific eligibility requirements and the application process as well as expectations for serving as team member.

**By CDR Sukhminder K. Sandhu, CDR Qiao Bobo, CDR Chekesha Clingman, CDR Judy Facey, CDR Charlene Maddox, LCDR Jessica Cleck-Derenick, CAPT Sally Hu**
LCDR Leigh Ann Miller, pictured above, serves as Associate Director for Science at CDC Namibia. On 16 March 2018, LCDR Miller presented on the history of Namibia’s Field Epidemiology and Laboratory Training Program (NamFELTP) to U.S. Ambassador Lisa Johnson, along with Ministry of Health and Social Services (MOHSS) leadership. LCDR Miller reviewed, advised, and rehearsed four NamFELTP alumni residents who gave presentations on outbreak investigations and evaluations. LCDR Miller participated as an Epidemiology Advisor in two of the outbreak investigations presented for Hepatitis E and anthrax among wildlife. This presentation was a special assignment for CDC Namibia to highlight its workforce development support and collaboration with partners Namibia’s MOHSS and University of Namibia, where LCDR Miller holds an Adjunct Faculty appointment.

**SciPAC Fist Bump for LCDR Leigh Ann Miller & LT Tanesha Tutt**

LT Tanesha Tutt, pictured below, received the DeKalb County Public Schools Torch Bearers’ Award for Excellence in Science Education. This award is the result of her work in coordinating Commissioned Corps officer volunteers with district science education activities. LT Tutt stated that “not only is this award for me, but for all the Officers who have dedicated their time to serve the students, faculty, and staff of the district.”

By LCDR Shondelle Wilson-Frederick

The Scientist Officer, Page 22
In April 2018, 33 Officers were commissioned into the Public Health Service during the 102nd USPHS Commissioned Corps Officer Basic Course (OBC). Among them, five were Scientist Officers. Our newest Scientist Officers are LTs Prince Awuah (FDA), Lacreisha Ejike-King (FDA), Sean Marcisin (FDA), Nana Wilson (CDC), and Lauren Woodard (FDA).

On April 13, 2018, our Chief Scientist Officer, CAPT John Eckert, together with Chief Pharmacy Officer, RADM Pamela Schweitzer, welcomed all new Officers, including the Scientist Officers, into the Public Health Service during the CPO/PAC (Chief Professional Officer/Professional Advisory Committee) Chair Meet and Greet. CAPT Eckert presented each of the Scientist Officers with his personal challenge coin, talked about his career path, and answered questions from the new Officers. Following the meet and greet, CAPT Eckert delivered a presentation on the background, responsibility, and function of the CPOs and CPO board, and introduced the CPO of each of the 11 categories by photo, personality, and interests. The SciPAC (Scientist Professional Advisory Committee) Recruitment and Retention Subcommittee Co-chair, CDR Qiao Bobo, was also present to greet the new Scientist Officers. She later sent them a welcome flyer for new Scientist Officers with information on our monthly SciPAC calls and resources they can draw on for assistance as they start their new endeavors as a USPHS Scientist Officer. The welcome flyer was developed recently by LTs Sharoda Dasgupta and Alaine Knipes for the SciPAC Recruitment and Retention Subcommittee.

CDRs Gelio Alves and Arlin Hatch, LCDRs Tyann Blessington and Shondelle Wilson-Frederick, members of the SciPAC OBC Representation and Recruitment Team, attended the OBC Open House and Graduation Ceremony and welcomed the newly commissioned Scientist Officers, answered their questions, and invited them to participate in SciPAC activities, including mentoring, the Peer Support Network, and new CAD seminars. The OBC Representation and Recruitment Team is one of the nine teams under the Recruitment and Retention Subcommittee, which is chaired by CDR Anne Purfield along with co-chairs CDR Qiao Bobo and LCDR Erika Odom. The team consists of Scientists in the DC area willing to dedicate their time to meet newly commissioned Scientist Officers.

Pictured right is a photo from the OBC 102 Newly Commissioned Scientist Officers (Meet/Greet Event).

Left to Right: LT Prince Awuah; LT Lauren Woodard, RADM Pamela Schweitzer (Chief Pharmacy), CAPT John Eckert (Chief Scientist), LT Nana Wilson, LT Sean Marcisin, LT Lacreisha Ejike-King, and CDR Qiao Bobo (SciPAC representative).
As a representative of the SciPAC Recruitment and Retention Subcommittee, CDR Bobo welcomed the new Scientist Officers at a Meet and Greet ceremony. CDR Bobo knew and met one of the five new Scientist Officers, LT Lacreisha Ejike-King, a few weeks before the OBC, through her work with the Recruitment Team led by LCDR Shondelle Wilson-Frederick and LT Danny Benbassat, as well as the Peer Support Network Team led by LT Colleen Scott (both teams are under the Recruitment and Retention Subcommittee). CDR Bobo looked forward to seeing LT Ejike-King again on April 13, when LT Ejike-King would be in uniform. CDR Bobo asked LT Ejike-King if she would like to share her thoughts on the OBC and associated experiences. Below are her reflections:

According to Lao Tzu, "The journey of a thousand miles begins with one step." My USPHS journey began as I attended OBC 102 in Potomac, Maryland, in April 2018. Honestly, I felt that April 8th couldn’t get here quick enough because this long-time dream was finally coming to fruition. Though I was excited, I must say that I was a little anxious about what to expect during the time away from my family and my job. I’m sure that my binge watching of armed forces boot camp videos on YouTube didn’t help matters much.

As I reflect on my OBC stint, I realize that I witnessed the Corps’ core values being exhibited daily. I saw leadership not only among those who served in official leadership positions but also in others who were respectful of and receptive to others’ input and supporting the greatness of others.

In addition to my formal classroom learning, I found myself on an emotional journey of what becoming a Commissioned Corps officer truly means to me. One moment, in particular, stands out in my memory. Standing in formation during morning colors on the day I first donned my khakis, I became misty-eyed as the National Anthem sounded. This caught me off guard because I am not normally an emotional person. I thought of what I now represent and who I now represent, as well as how proud and grateful I am to have this opportunity.

The SciPAC OBC Representation and Recruitment Team is always looking for additional volunteers to serve as SciPAC representatives for future
OBC Open Houses, Meet and Greet events, and graduation ceremonies. If you are stationed in or visiting the DC area and would like to volunteer, send an email with subject line, “SciPAC OBC Volunteer,” to LCDR Blessington at Tyann.Blessington@fda.hhs.gov.

By CDR Qiao Bobo, CDR Anne Purfield, LCDR Tyann Blessington, LCDR Erika Odom, and LT Lacreisha Ejike-King
My name is LT Patrick Sears and I am a newly commissioned Scientist Officer. I am a clinical psychologist assigned to the Federal Bureau of Prisons. I live in the Midwest in an area in which few USPHS Officers serve, and I am frequently asked by civilians and armed service members about our service. However, I find myself skirting around some of their questions: “Yes, I am a Commissioned Officer, I wear a uniform, I hold military rank, I receive military pay and benefits, and I serve the Surgeon General of the United States. No, I am not trained in arms. Am I military? Well, um...[as I avoid directly answering the question by talking about the seven Uniformed Services].”

Being new to the USPHS, I thought I must be missing something. However, I discovered that I received a variety of responses when I asked other Commissioned Corps Officers if they considered the USPHS a military service. I wondered what the difference was between the military and a uniformed service. While reading through the letters that the Commissioned Officers Association (COA) submits on behalf of the USPHS, I noticed the following U.S. Code is routinely referenced during their advocacy efforts:

5 U.S. Code § 8331 – Definitions:

(13) “military service” means honorable active service

   (A) in the armed forces

   (B) in the Regular or Reserve Corps of the Public Health Service after June 30, 1960

   (C) as a commissioned officer of the Environmental Science Services Administration after June 30, 1961

Corps Officers receive reminders to wear their uniforms, stay deployable, and maintain a healthy bodyweight. Is this a component of the Corps that is being reenvisioned or, if we are considered a military service, are we being asked to remember who we are? With the COA using the U.S. Code to define and advocate for the USPHS, should we be doing the same? Is this information we can use to champion the Corps and advocate for ourselves?

Note from SciPAC Newsletter Editors: Do you have a response to the questions posed in LT Sear’s article? If so, please submit to scipacnewsletter@gmail.com by October 1, 2018, and your response will appear in the next SciPAC Newsletter.

By LT Patrick Sears
With tight travel budgets and resources, opportunities for in-person deployment training can be difficult to find. Three Scientist Officers, LCDR Jessica Cleck-Derenick, CDR Adrienne Goodrich-Doctor, and CDR David Huang, recently took advantage of a US Fire Academy (USFA) Type 3 Incident Management Team course (O-305), which is designed to be a pre-requisite course for members of the Incident Response Coordination Team (IRCT). Offered at the HHS Mission Support Center in Frederick, Maryland, from April 2 – 6, the course provided skills and tools to better serve with the Assistant Secretary for Preparedness and Response (ASPR) Office of Emergency Management (OEM) in managing large-scale or complex emergency incidents (i.e., deployments for both planned and unplanned events).

The course consisted of lectures on leadership and team dynamics, as well as the full planning cycle, followed by two full days of simulated events (both planned and unplanned) and a final exam. To respond to the simulated events, participants were split into four IRCT teams assigned
an IRCT role. For example, LCDR Cleck-Derenick served as Operations Section Chief, CDR Goodrich-Doctor served as Planning Section Chief, and CDR Huang served as Resource Unit Lead (under Planning). Experienced mentors who are permanent or intermittent employees of ASPR and the IRCT provided valuable guidance and feedback throughout the course, adding significant value to the experience. Even though most of the attendees, including the three Scientist Officers in attendance, had previously deployed to the IRCT or Emergency Management Group during the busy 2017 hurricane season as Tier 1 deployment team members, participants agreed that the course was worthwhile and provided excellent preparation to be even more effective in their respective deployment roles in the future.

By CDR David Huang, CDR Adrienne Goodrich-Doctor, and LCDR Jessica Cleck-Derenick
DC Area: The Science of Flu

On March 7, 2018, the Smithsonian’s National Museum of Natural History held an interactive evening event to commemorate the 100th anniversary of the 1918 influenza pandemic. Four Scientist Officers, their families, and friends attended the event. Activities illustrating the spread of infectious disease, vaccine development, and prevention strategies were available for both children and adults. Additionally, the museum hosted sessions addressing the challenges of the flu and other viral illnesses threatening public health today.

DC Area: Matchbox Happy Hour

On April 11, 2018, Scientist Officers relaxed with each other over drink and food at Matchbox in Rockville, MD. Ten officers were in attendance, including officers stationed in Baltimore, and our own CPO, CAPT John Eckert. Officers had a chance to bond and network while enjoying unseasonably warm weather around a fire pit. A great time was had by all!

DC Area: Spring Picnic

On May 12, 2018, Scientist Officers and family members celebrated the spring weather with a picnic at Cabin John Park in Bethesda, MD. Approximately 15 Scientist Officers and family members stopped by to socialize, enjoy a snack, and play in the park. Officers had the opportunity to meet each other’s family and friends and take a ride on the Cabin John amusement train.

(Continued on page 30)
Surgeon General’s Run/Walk and Public Health Expo in Dallas, TX

On June 7, 2018, Scientist Officers participated in a Public Health Expo event held alongside the Surgeon General’s Run/Walk in Dallas. Scientist Officers prepared and discussed preparedness steps and recommendations with the public and fellow officers. LCDRs Tyann Blessington, Luz Rivera, and Colleen Scott, and LT Lacreisha Ejike-King identified, collected, and presented guidance documents for children and adults covering a range of topics including extreme heat, floods, power outages, hurricanes, tornados, pet care during disasters, and family preparedness kits. Visitors to the booth were welcome to take a copy of the government-based guidance documents. Visitors were also provided stickers and party favor flashlights.

(Continued on page 31)
Atlanta Team Trivia Social Events

The Atlanta Socials Team hosted a Team Trivia event on March 28, 2018. A total of 12 officers attended the event, including officers on deployment for the medical evacuee operations and our CPO CAPT John Eckert. Not only did the team have a fun time socializing with one another, but won second place in the trivia event.

Scientist officers gathered again on July 18, 2018, for another great night of trivia. LT Jessica Tomov, LCDR Zewditu Demissie, and CDR Kamil Barbour tried to bring home another win for Team SciPAC. While they had a near-perfect first round, the second round did them in. Nonetheless, these trivia regulars had a fun night of socializing.

Fun trivia fact

Question: What does a lepidopterist study?

Answer: Butterflies and moths

By LCDRs Jonathan Leshin and Zewditu Demissie


Pictured above are Officers at the July 2018 trivia event. From left to right: LT Jessica Tomov, LCDR Zewditu Demissie, and CDR Kamil Barbour.
Suicide Prevention

There are just under 45,000 suicide deaths a year in the United States – slightly higher than the number of opioid deaths. This equates to one suicide every 16 minutes. Suicide is the 10th leading cause of death in the United States, but for the age range our officers, it is in the top five. The three most common causes of suicide are firearms (51%), suffocation (including hanging; 26%), and poisoning (including overdose; 15%). For every suicide, there are 25 attempts.

The shadow of suicide deaths is long. A recent study by the president of the American Association of Suicidology found that there are 135 people affected by each suicide, leading to 5.5 million people exposed to suicide per year (Cerel, 2018). The lifetime risk of knowing someone who committed suicide is estimated to be between 40%-57%. These deaths are intensely painful for loved ones, who themselves are at increased risk for depression, psychiatric hospitalization, and suicide.

One key action we can take as officers charged with protecting the public’s health is to intervene when we observe behaviors associated with suicide risk in our family, friends, fellow officers, and colleagues. Time matters when it comes to suicide prevention; the majority of suicides happen within 5 minutes to 24 hours following a person’s decision to kill themselves. The first three hours are the most critical.

Risk behaviors that might signal a problem:
- Behaviors that impair performance
- Worsening hygiene or appearance
- Significant relationship problems
- Persistent problems with sleep
- Reckless or dangerous behaviors
- Significant distress
- Drinking too much alcohol
- Misusing substances
- Withdrawal from family and friends
- Rage
- Severe guilt or hopelessness

Acute behaviors requiring immediate attention:
- Significant behavior change following a painful incident
- Talking or joking about not wanting to be alive
- Talking about people being better off without them
- Talking about suicide
- Researching ways to commit suicide
- Giving away possessions
- Saying goodbye

When encountering risky or potentially life-threatening behavior, also look for intoxication, which is involved in one in four suicide deaths.
Above all, be on the lookout for changes from someone’s baseline. This is often the best indicator that something is “off” and is worth inquiring about further.

If you see some of the early warning signs, get the person help early: help them obtain free therapy sessions from their OPDIV’s employee assistance program or Military One Source, help them pursue behavioral health treatment, and talk to the person’s chain of command and/or their family.

If you don’t know how to handle a situation, call or chat online with a suicide hotline, as they also provide help for bystanders. The national line is 1-800-273-TALK (8255) and the link is http://suicidepreventionlifeline.org.

If you think a person is at imminent risk, be sure to ask direct questions, as uncomfortable as it may feel. Ask either, “Are you thinking about committing suicide?” or “Are you thinking about killing yourself?” If they answer yes, ask “Do you have a plan?” If the answer is no, get them help right away through the suicide hotline above or driving/walking them to behavioral health. If the answer is yes, they have a plan, do NOT leave them alone, even for an instant. Drive or walk them to the emergency room of your closest hospital or call 911 and do not leave until they are in the hands of a medical professional.

Suicide is devastating. Get to know each other. Look out for each other. Intervene.

Suicide is preventable. Learn more and join the fight.

Recommended Websites:
- http://www.cdc.gov/features/preventingsuicide.index.htm
- http://www.suicidology.org
- http://afsp.org

Recommended Reading:
- Darkness Visible by William Styron
- Walk to fight suicide through American Foundation for Suicide Prevention Out of the Darkness Walks:
  - Washington, DC: October 20, 2018
  - Atlanta: November 4, 2018

By CDR Robin Toblin
Congratulations to all of the newly promoted Scientist officers!!

The Scientist Officer

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