



University of California
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This issue *e-IHPS* Profile:

Laura A. Schmidt, MSW, MPH, PhD

**Associate Professor, Institute for Health Policy Studies
and Department of Anthropology, History and Social Medicine**

Dr Laura Schmidt's goal as a researcher and educator is to help us think about the problems of health policy in fundamentally new ways. Sometimes it's possible to do this by gathering and reporting statistics that go against our regular assumptions about the causes and consequences of poor health. For example, many people don't realize that African-Americans, on the whole, have lower rates of alcohol consumption than white Americans. Or that welfare mothers have the same rates of alcohol problems as comparable groups in the general population. It's also possible to rethink assumptions by studying the process of decision-making and public debate itself. By studying the recent history of debates over the health care market and welfare reform, Laura has been able to cast a new light on how things change and therefore, what the possibilities are today for bringing about constructive policy changes.



Rethinking the Health Care Market

How was that America wound up with a competitive health care market rather than some other kind of system, like a national health insurance system? This is one of the key questions that Laura has tried to understand from a sociological and health policy perspective. She spent many years doing historical research in government, trade group and health care association archives to trace back the debate over health reform to the early 1970s, when the idea of competition in health care first came up. Then she followed the course of history forward to today, to understand why some alternatives for health reform failed and the idea of the market became national policy.

Most of us assume that the reason we have a competitive health care system is to control rising costs. But then why have health care costs continued to climb, even after introducing competition into health care? Laura's work shows that there are other reasons for the move to market-oriented health care. The idea of the market resonates with some key American values, such as freedom of choice, innovation and small government. And it serves the interests of some of the key stakeholders in the health care system, such as large health care purchasers and insurance companies.

Addiction and Welfare Reform

Welfare reform in 1996 brought about sweeping changes in America's system of relief for the poor. Ten years later, on the anniversary of welfare reform, where do we stand? As Principal Investigator of the NIH-funded *Welfare Client Longitudinal Study*, Laura has been studying the impact of reform on people with substance abuse problems in California. Welfare reform was the first time that public aid agencies set about to address addiction problems with new policies to get clients into addiction treatment and to remove addicts from aid if they refused to stop using drugs and attend treatment programs.

What Laura and her team have learned is that most states and counties have not done such a good job of linking substance abusers with treatment despite the pressures to move these individuals into the work force. Even where policymakers put official procedures in place for substance abuse screening and identification, most welfare workers do not do a very good job at addressing substance abuse problems in their clientele. If substance abusers don't have their problems addressed while they are on aid, they may reach the new welfare system's 5-year permanent time limit without having developed the capacity for economic self-sufficiency. Laura and her team are currently seeking funding to study this important unintended consequence of reform.

The Substance Abuse Treatment Gap

On a national basis, only about 10 or 15% of people with clinically significant substance use disorders have received professional treatment for the problem. In a series of national studies, Laura and her colleagues at Brandeis University and the New England Research Institutes have been investigating why this is the case and possible new ways to improve access to addiction treatment. Part of the problem lies in the fact that many people with substance use disorders do not feel the need for treatment or fear being stigmatized. But part of the problem lies in the lack of insurance coverage for treatment. Many insurers are cutting back on coverage for addiction treatment, and when insurance is tied to employment, people with serious addiction problems may be uncovered due to the loss of employment.

Alcohol, Development and Health Disparities

There are vast differences in the burden of alcohol and drug abuse within economic groups in the US. But the differences are even greater across societies around globe that are at different levels of economic development. It is a sad fact that when societies undergo economic development, they become more burdened by addiction-related problems. Through her work with international colleagues and the World Health Organization, Laura has been trying to better understand the connection between alcohol problems and economic development, and how we might mitigate the growing burden of these problems on nations undergoing development. At least part of the answer lies in pursuing stricter controls on the marketing of alcohol to people in developing countries.

In populations that are chronically undernourished and impoverished, heavy alcohol consumption can exacerbate existing health problems and work impairments, it can draw income away from households that would otherwise go to food and medical care, and it often becomes a mark of social stigma. The most effective and cost-effective policy solutions may involve controls on alcoholic beverages at the point of sales and countermeasures against drinking and driving.

Dr. Laura Schmidt is a sociologist who came to the Institute two years ago. She is a native Californian with two children, Adam (12) and Eliza (4 3/4). Her husband Bill is an environmental toxicologist who founded the software company, *GetActive* (now *Convio*), which brings political organizing tools to the web. Both Bill and Laura are dedicated swimmers and during their years together in graduate school at Berkeley, they invented an underwater backpack for their forays into the wilderness. Laura is also known for her unusual knitting designs – produced under the auspices of *Schmidt's Knits*.



Laura and Eliza



Eliza, Laura, Adam, Bill



Laura and Adam

We Want you!

- Please send in material for Issue #4 by July 16, 2007
- Feedback on our newsletter? We want your input!
- Writers for e-IHPS columns
- Please contact:
annie.larson@ucsf.edu

A Busy Year for the California Health Benefits Review Program

2007 is proving to be a very busy year for IHPS faculty and staff who work on the California Health Benefits Review Program (CHBRP). Established in 2002, CHBRP responds to requests from the California State Legislature to provide independent analysis of the medical, financial, and public health impacts of proposed health insurance benefit mandates and repeals. The program is administered by a small staff in the University of California's Office of the President that works with faculty and staff from several UC campuses and other universities in California as well as actuarial consultants. IHPS's Ed Yelin is CHBRP's Vice Chair for medical effectiveness and Janet Coffman is CHBRP's principal analyst for medical effectiveness. Wade Aubry and Pat Franks also work on CHBRP's medical effectiveness analyses. Hal Luft was CHBRP's founding Vice Chair for medical effectiveness and worked on the program prior to taking a sabbatical this year.

Since the beginning of 2007, CHBRP has issued reports on seven bills and will write reports on at least two more bills in the coming months. Four of the completed reports address bills that would mandate coverage for four particular services: acupuncture, smoking cessation treatments, the human papillomavirus virus vaccine, and hearing aids for children. The other three reports concern bills that would mandate parity in coverage for mental health and substance abuse services, repeal the coverage exclusion for illnesses and injuries incident to alcohol or drug abuse, and permit out-of-state carriers to sell policies that do not conform to laws that govern California health plans. Forthcoming reports will address a bill that would mandate coverage for special food products for children with inborn errors of metabolism (i.e., genetic disorders that prevent children from digesting food appropriately) and a bill that would allow health plans to sell policies that do not cover all mandated health care services.

CHBRP reports issued in 2007 and in previous years are available at CHBRP's web site: <http://www.chbrp.org/index.html>. If you have questions about the program, please contact Janet at Janet.Coffman@ucsf.edu.

Comings & Goings

Guydish Fellow, **JongSerl Chun** has been promoted to Specialist title through Langley Porter Psychiatric Institute (LPPI), effective June 1.

Welcome, **Mable Chan** (Guydish): Programmer/Analyst I, 50% time.

Welcome, **Simran Sabherwal**, Research Assistant (Kreger).

Thomas Davis, has moved to other endeavors, and has taken another job.

Abigail Publico will be leaving as of July 16.

Gorette Amaral will be leaving on June 30. Gorette is working at the Kaiser Division of Research.

WOW! Pat Franks is Retiring! Her official "last day" is June 28th, however, Pat will be back later in the summer on a part time basis. She does have some very interesting retirement plans, which she will share with us at a later date.....Stay tuned!

And now, a drum roll please !!!!!!!!!!! We proudly announce the launching of our new IHPS website!!!

<http://www.ihps.medschool.ucsf.edu>

Although the website will continue to be refined, the site, is ready for prime time. Please check it out and let us have your feedback. Note particularly information about our celebration events in September, which we'll update regularly with more detailed plans. Please provide any comments or corrections to **Lena Libatique** (lena.libatique@ucsf.edu). In addition to the new "Special Events" page, this website has many other features which our old website didn't, such as: An Administrative Resources section, including links to IHPS info on: Contracts and Grants, Human Resources, Purchasing, Funding Opportunities, with links to other funding agencies, local, state and federal, and.....

- Archives of past issues of the *e-IHPS* newsletter
- Great info and pictures of our faculty and staff, their research, and links to Pub Med.
- Administrative Resources, Links to Timesheets, Seminars, who's who in the Core, among just to mention a few.

IHPS would like to say a tremendous thank you to **Lena Libatique**, who has truly been the heart and soul behind our website effort-working with the School of Medicine web designers, learning the web software, gently prodding all of us to submit needed information, then artistically formatting that information and creating "links" as needed, and finally making and implementing suggestions about design and presentation of material. We also want to thank all of you for your cooperation in providing the requested information to Lena.

Awards, Publications & Announcements

Academy Health Award winners include: John Hsu, MD, MBA, MSCE, Department of Epidemiology and Biostatistics, for his lead authorship on "Unintended Consequences of Caps on Medicare Drug Benefits," which appeared in the June 1, 2006 issue of the *New England Journal of Medicine*. This article was co-authored by Mary Price, MA, Jie Huang, Ph.D, Richard Brand, Ph.D., Vicki Fung, BA, Rita Hui, Pharm.D., Bruce Fireman, MA, Joseph P. Newhouse, Ph.D., and Joseph V. Selby, MD, MPH.

The "Prevent AIDS: Network for Cost-Effectiveness Analysis" (PANCEA) project is a 5-country study funded by the US NIH to improve HIV prevention funding allocation in low and middle-income countries. Principal Investigator **Jim G. Kahn, MD, MPH**, along with first author **Elliot Marseille, Dr. PH**, collaborated with research teams in the countries to collect 2003 and 2004 cost and output data from 206 HIV prevention programs of six types (e.g., HIV testing, sex worker programs, preventing mother-to-child transmission). The countries were India, Mexico, Russia, South Africa and Uganda. The work will be published in the online open access journal *BMC Health Services Research*. The study found that across many countries and HIV prevention types, larger programs use money more efficiently. Each doubling the scale of a prevention program reduces unit service costs on average by a third. Some large programs are 10 - 100 times more efficient than the smallest programs. The article will come out July 12.

Update on the Celebration of Philip R. Lee:



As part of the renaming of the Institute to the Philip R. Lee Institute for Health Policy Studies this fall, we will be sponsoring a Health Policy Symposium: "Looking Back & Looking Forward", on September 24th. The Symposium will focus on important issues in which Dr. Lee made a major impact: Health access, population health & diversity, and reproductive health and HIV/AIDS.

On September 25th, we will spend the afternoon sharing stories and memories of Dr. Phil Lee.

Confirmed speakers include: Eugene Washington, MD, UCSF Vice Chancellor, Anne Firth Murray, former Directory of the Global Fund for Women, Peter Budetti, MD, Professor of Public Health, and Chair, Department of Health Administration and Policy at the College of Public Health, University of Oklahoma Health Sciences Center; Melanie Tervalon, MD, Director of Kaiser's Institute on Culturally Competent Care; Tom Oliver, MD, University of Maryland; Faith Mitchell, Ph.D., Associate Director, Grantmakers in Health; Neal Halfon, MD, UCLA; Connie Celum, MD, University of Washington.

We are also continuing our efforts at establishing the Philip R. Lee Fellowship in Health Policy as part of Dr. Lee's legacy of mentoring and teaching.

September Event Update:

The IHPS Beautification Committee has narrowed color selections, and will be making the final decisions this week. Next steps: walk through with Shannon Mitchell, the color consultant working with us, and then work with Facilities Management to schedule the work for July or early August. Also during July, our new front reception desk, designed by Peter Fehler of Berkeley, will be installed. Additional changes for the main entryway include a redesign shielding the kitchen entrance from the main entryway, and a new mail distribution set-up. We are also planning large bulletin boards for the second entryway where people can post recent travel and kid pictures, etc. Once the painting is done, we'll be scheduling a couple of general clean-up days so all can "pitch in" to tidy up both common and cubicle/office areas.

We will also be pursuing a longer term effort to procure artwork for the walls, both in the entryway and throughout. *We are looking for black & white photographs and/or photographers who might like to display their b&w work, or perhaps take photographs of IHPS personnel engaged in their work in the field. Suggestions or recommendations would be appreciated.*

The goal is to finish major work by end of August, so that our new look will coincide with the Philip Lee event in September, and with our new name: the Philip R. Lee Institute for Health Policy Studies.

Celebration Food committee:

The celebration food committee will be doing a walk-through of the facilities at Mission Bay, where we will hold the September 24th & 25th event. Sampling some of the menu (ie. food & wine) items will occur in mid-July. As food has been an IHPS "signature", we are looking forward to assuring that the event will be a success "gastronomically" as well as intellectually, a homecoming for many of Dr. Lee's mentees.

We are very fortunate to have former IHPS staffer, Pam Weatherford, is working with us on planning the event. Since leaving IHPS, Pam has developed an extensive list of events she has managed, most recently, the very successful Berkeley International Food Festival. Pam is very talented and has a great sense of humor, which will come in handy over the coming months!



ARTISTS' CORNER

Dance—it's what I like to use all the time I don't have for. —Angelina Nikol

This issue we are excited to include an interview with our featured artist, **Angelina Nikol**. Angelina is a research assistant with Michael Cabanas' group on the Trial of Infant Probiotic Supplementation (TIPS Study) to prevent asthma.

e-IHPS captures Angelina's thoughts on art, life, and her frank take on juggling being an artist, and a single mom, while working full time.

L: How long have you been (singing, writing, acting, dancing, fishing, etc.?)

AN: *Too long.*

The story goes like this: I was two years old, and some ballet or other was playing on the public television station. I pointed at the television and said to my mother, "I wanna do that!" or some other kind of baby babble that was mistaken as a declaration of my predisposition, and determination, for dance.

And that was it. I started taking ballet classes at the YMCA when I was 3 years old—of which my biggest memories are:

- 1) pretending to be a tiger by crawling on the floor and growling,*
- 2) drinking these tiny cans of pineapple juice after class that my mom would buy me from a vending machine for 25 cents.*

I trained at various studios throughout my childhood and early teens. Eventually I joined the Pasadena Dance Theater (a junior ballet company) when I was about 13, became a soloist at about 16, and then quit dancing "forever."



But don't be sad. I actually only quit for about 6 years. Once I started going to college I became exposed to the

wild world of modern dance and choreography. Can I get a "yee-haw!"? Thank you. I won't try to explain what modern dance is. Please feel free to look it up. I got an MFA in it though. Which is very hip, very now. AL: What is your creative process like, i.e., do you have a regular schedule when you rehearse, write, whatever?

AN: *My creative process is free like the wind and tumultuous like the sea. No, it's more sweaty. Like the guy who lives across the hall from me. It's Human and Ugly. Tired.*

Unsure. Sometimes there are ideas, and I try to write them down. Sometimes there are no ideas, and my mind is an Idea Desert. And there is sand blowing into my eyes and it's hot. As a performer, I call on my life experience, my technique. As a choreographer I often call on the life experience of others as well. I try to go to classes on the weekends, and, if I have a show coming up, I rehearse nights and weekends.

"Dance—it's what I like to use all the time I don't have for."

AL: Who are your influences? What performers or artists do you admire?

AN: *Ingmar Bergman, David Lynch, Roy Andersson, Jean-Pierre Jeune, and Marc Caro.*

I know what you're thinking, "Hey! Those aren't dancers, those are directors!" Whiners! Okay here: Pina Bausch.

What these artists have in common is an episodic, disjointed, and uncomfortable view of reality. They create work that touches the soul indirectly, and makes you want to hate it. I love that! Did I mention my heavy theatrical

slant? No? Well, I'm a fan of props, weird circumstances, and text in dance. I don't watch ballet anymore. When I do, I am bored.

AL: Is /was there someone in your family, biological or extended, who encouraged you?

AN: *Hello? Mother? Pineapple juice? Weren't you listening?*

My mom put a lot of time and money into my dance training, so I must credit her for that and for driving all over Los Angeles in order to get me to the best studios possible. Also, I come

from a whole family of disgruntled artist types, and I am proud to join their ranks. For some odd reason we see art as a fundamental part of life and education, and we like to put lots of money we don't have into it. Then later we get into the "real world" and are horrified. I practice this technique with my own daughter, so that one day she too can also be disgruntled and horrified. And I will feel like I have completed my job as a mother.

AL: What inspires you?

People do. Their idiocy and their beauty. The way they keep going, repeat, like the Energizer Bunny. The way they don't know I'm watching, or don't care.

A short man walks with tight precision and firm direction across Church Street to where I am waiting at the bus stop. He wears a fedora and a striped suit, like some character in a film noir.

Above: Angelina in "Draft"

Left: Angelina, age 15

(Artist's Corner, con'td)

When he reaches the railing at the edge of the sidewalk, he turns abruptly, unfolds his newspaper sharply (with a flick!), leans back on the railing, and becomes instantly motionless.

I imagine a flock of such people doing these same motions. In unison. In canon. In retrograde. Slow motion. This plays in my head until the bus arrives.

I am in one of my rehearsals and have just given my dancers a 5 minute break. One of them mentions her new pedicure. Later, I tell the dancers I have decided to make a dance phrase titled "Rebecca's painted toenails." And I do.

How do you balance your creative endeavors with working at IHPS full time?

I don't. What's all this talk about balance? Working full time at UC is not at all conducive to being creatively balanced. Add to that being a single mom of a freakin' teenager? Please.

Most of the time I can't even hear myself think. And trying to not just move, but also dance and create after sitting in a chair all day?

It's a better person than I who manages to find balance in that. If you'd like to know why I keep it up despite the obstacles, it's because I have No Choice. I can't NOT dance. If I don't dance, I get weird, which is something nobody needs to see.

AL: What are you working on now?

AN: *I am currently working with Barely Complete Productions. We are putting together a three-choreographer show that will rear its ugly head in mid-October at CounterPulse in SF (on Mission @ 9th Street). You should come make fun of me.*

Anything else you want to say?

Really?

Supercalifragilisticexpialidocious!

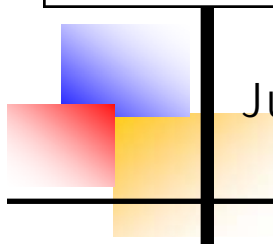
Even though the sound of it

Is something quite atrocious

If you say it loud enough

You'll always sound precocious

Supercalifragilisticexpialidocious!



June-July 2007

- ♣ Health Policy Seminars Mondays 12-1:30 PM
- ♦ IHPS Grand Rounds Monthly at Noon Room 263

• Sun	Mon	Tue	Wed	Thu	Fri	Sat
June 24	25	26	27	28	29	30
July 1	July 2	3	July 4 UCSF holiday	5	6	7
8	9 IHPS Faculty Mtg. 9-10:30 AM	10	11	12	13	14
15	16 ♦ Grand Rounds w/ Diane Rittenhouse, MD	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				