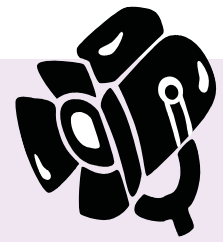


# Member Spotlight

Elena Andersen, PhD



Elena Andersen, PhD, APTR member since 2004, is currently the Professor and Chair of Epidemiology & Biostatistics at the University of Florida College of Public Health & Health Professions. Born and raised in Seattle, Dr. Andersen was advised to pursue nursing

after graduating from high school. She went against her counselor's advice and decided to begin her college career as a student at the University of Washington majoring in Oceanography. After taking a few left turns, she ultimately received her undergraduate degree in Spanish language and history and subsequently followed with a Masters degree in History. Her first position, as a research assistant, involved programs and questions on female prostitution and drug use. Dr. Andersen describes this experience as a "real eye opener on human behavior and the link to early child and adolescent experiences."

After moving on to new projects as the old ones finished

and managing research for King County Emergency Medical Services in Seattle she ultimately decided to pursue a degree in epidemiology. She believes that the benefit of being involved in data collection, interviewing, and research support for a decade, as a research assistant, has always been a real plus to her work as an epidemiologist.

Dr. Andersen who began her APTR funded project in 2004 entitled "The Public Health of Caregiving" took a few minutes to discuss with us the inner workings of the University of Florida's Department of Epidemiology and Biostatistics, her research project and the effect it has had on her career, and her advice to future epidemiologist.

*Tell us a little about your position as the Professor and Chair at the University of Florida.*

I had the good fortune to come to a brand new developing program in public health that was composing with an existing mature college of rehabilitation programs and clinical and health psychology. I have worked in research involving aging, disability, and rehabilitation, so this was the perfect place to put all those disciplines and ideas together. We planned first a Division of epidemiology, then a Department of Epidemiology and Biostatistics. I have been here nearly three years, and the Department was established in July of 2006. I continue to work with colleagues and projects from other parts of the country and these colleagues, and new ones at the University of Florida, make it possible for me to work on a fair amount on peer-reviewed and other

dissemination products.

*Can you describe your Department and student demographics?*

Currently our Department has nine full-time faculty plus we "host" a division of environmental health that has three full-time and a larger group of part-time faculty members. Currently, we have masters of public health students in both of our major areas (epidemiology and biostatistics) and this year we have about 50 full time graduate students. Our proposals for two PhD program, one in each topic, are headed for their final permission with the state's Board of Governor's. We expect to have both of those programs beginning in fall of 2008.

*Tell us about your current research project?*

The project funded has been one of the most interesting of my career. The work arose from the Healthy People 2010 workgroups on disability (HP2010 Chapter six) and the emerging "agenda" in disability and public health that includes caregiving. I answered a call for proposal that was entitled "the public health of caregiving" in one of the most basic ways that epidemiologists tackle – how do we provide descriptive epidemiology about caregiving. That is, questions started with person, place, and time. In order to describe the magnitude of caregiving and outcomes, we need to tackle surveillance data. The ATPR project has been all about how to ask the right questions to provide those basic answers of magnitude and outcomes. We had the opportunity to propose questions for surveillance based on advice from stakeholders, and then add them to the Behavioral Risk Factor Surveillance System

(BRFSS) in one state – North Carolina. The BRFSS is the world’s largest telephone survey, and in addition to core questions used by all states (and supported by the CDC), states can choose to monitor the health of their adult populations for other aspects – in this case caregiving. We asked 5,859 North Carolina adults a screening question about caregiving for other persons, and 895 individuals completed the caregiver module – the (weighted) prevalence of caregiving was 15.3%. We also asked 401 people a longer set of questions about detailed aspects of caregiving in a follow back interview. In addition to the report that describes the module, we have also examined caregivers of older adults with cognitive impairment, and predictors of injury among caregivers.

*What have you enjoyed most about your current research project?*

The issue of caregiving seems to resonate with many Americans and with groups involved in policy, research, and service delivery. We are looking at caregiving in the broad strokes – at the population level. So we continue to learn a good deal from researchers and laypeople who know much more about the details about certain kinds of caregiving, for example of children with disabilities, or adults with dementia. But the broader strokes precipitate a discussion of the public health implications of caregiving. I very much enjoy the conversations that this research has precipitated. Typically, research ends with peer-reviewed publications and a report – this one has precipitated many opportunities for dissemination beyond these typical outlets, including to national caregiving groups, health departments, and the disability community.

*Are there new or additional research projects that you will naturally develop from your current study?*

The caregiving ATPR project has

Read the July 1, 2007  
Morbidity and Mortality  
Report (MMWR) reprint  
on Dr. Andersen’s research.  
The article is titled  
“Characteristics and Health  
of Caregivers and Care  
Recipients.”

Go to:  
[www.aptrweb.org](http://www.aptrweb.org).  
Click on In the News

a great “next step” – we will be applying the Caregiver module to the BRFSS in Florida in 2008 as part of our CDC state disability and health project.

*How did you learn about APTR-CDC Cooperative Agreement opportunities?*

Before I came to the University of Florida I had been funded for research via another CDC program, a Prevention Research Center (at Saint Louis University). I seem to be hooked into regular notices for such mechanisms – and found the specific call for proposals on caregiving very soon after it was released.

*What effect has the award had on your career as a researcher?*

This award has provided me an opportunity to go beyond research activities I typically have performed. Public health research really should fit into the activities of assessment, policy, and assurance, but this is the first work I’ve been involved in where the assessment function is so intimately linked to the other core public health functions.

*For early career professionals who are interested in pursuing a career in epidemiology and biostatistics, any words of advice?*

Basically, my job involves being paid to learn. I cannot imagine

a better career! Epidemiology and biostatistics are training programs that ask for a fairly strong quantitative background, and both are amenable to working in diverse content areas. I consider both disciplines to provide a “toolkit” for work in research and/or public health. I recommend people sample the disciplines with a graduate course or two, and then decide if the full degree is of interest to them. A number of programs, including the University of Florida, have ways to begin learning in a distance format. Most people who love public health as a career “find it” later – and don’t start out planning to be an epidemiologist in high school, for example. So try out a little of what we offer.

*If you were not an epidemiologist what would you be doing?*

I think I’d be asking questions in some other type of career. I think my personality includes curiosity and a love of scientific methods, but I’m not sure where that would have placed me. Probably not sales or politics! I don’t have the communication skills or patience required by either career.

## About APTR Research Funding Opportunities

APTR and the Center for Disease Control and Prevention (CDC) offer several research opportunities each year to current Institutional Members of APTR.

### Eligibility

In order to apply for research funding, you must be an Individual member from a current APTR Institutional Member organization or the liaison to a current APTR Institutional Member

Learn more about funding opportunities at:  
[www.aptrweb.org](http://www.aptrweb.org)