1. **Principal Investigator:** Zucker, Robert  
**Title:** Effects of Childhood Adversity in Deployed Soldiers on Substance Abuse (KT1) Related Problems  
**Presenters:** O. Krugilachenko, T. Nickelsen, A. King, I. Libezon

Department of Psychiatry, University of Michigan, Ann Arbor MI, USA, 48109

**OBJECTIVE:**  
To study the relation between childhood adversity, family alcohol history and substance abuse problems in a representative sample of Ohio Army National Guard soldiers.

**METHOD:**  
We used data from a random sample of 1,341 National Guard soldiers enrolled in a pre- and post-deployment (Iraq or Afghanistan) longitudinal study (collected during November 2008-November 2009). We studied the influence of forms of childhood maltreatment, and having an adult with a substance use disorder or serious mental illness in the childhood home, on the development of substance abuse in combat-zone deployed soldiers, using logistic regression.

**RESULTS:**  
Childhood physical maltreatment was associated with risk for developing alcohol abuse OR = 1.7 (95% CI 1.2 – 2.4, p<.005). The relationship remained significant while controlling for age, gender, and report of having an adult with substance-use disorder or serious mental illness in the childhood home, which added independent risk (OR = 1.5, 95% CI 1.1 – 2.1). In contrast, childhood emotional and childhood sexual maltreatment were not correlated with development of substance abuse.

**CONCLUSIONS:**  
Deployed soldiers with history of childhood physical maltreatment were at increased risk for substance dependence problems. Future research is needed to develop evidenced-based interventions for service members with history of childhood physical maltreatment and substance use history in family, that can be used for prevention of substance abuse problems among soldiers.

(Supported by Fogarty grant #D43 TW009310).

2. **Principal Investigator:** He, Jiang
**Title:** Resequencing Epithelial Sodium Channel Genes Identifies Rare Variants Associated with Blood Pressure Salt-Sensitivity: The GenSalt Study  
**Presenter:** Xiaoying Gu

**Background** The association between rare variants and blood pressure (BP) salt-sensitivity has not been clearly delineated. A resequencing study of renal epithelial sodium channel (ENaC) genes was conducted to identify rare variants associated with BP salt-sensitivity.

**Methods** The Genetic Epidemiology Network of Salt-Sensitivity (GenSalt) study was conducted among 1,906 participants who underwent a 7-day low-sodium followed by a 7-day high-sodium feeding study. The 300 most salt-sensitive and 300 most salt-resistant GenSalt participants were selected for the resequencing study. Three ENaC genes (SCNN1A, SCNN1B, and SCNN1G) were resequenced using capillary-based sequencing methods. Traditional burden tests were utilized to examine association between rare variants and BP salt-sensitivity. Associations of low-frequency and common variants were tested using single-marker analyses.

**Results** An association between rare variants in the SCNN1A gene and BP salt-sensitivity was identified after Bonferroni correction (P=0.009). Carriers of SCNN1A rare variants had a 0.52 [95% confidence interval (CI): 0.32-0.85] decreased odds of blood pressure (BP) salt-sensitivity compared with non-carriers. Neither SCNN1B nor SCNN1G associated with salt-sensitivity of BP in rare variant analyses (P=0.65 and 0.48, respectively). In single marker analyses, three independent common variants in SCNN1A, rs11614164, rs4764586, and rs3741914, associated with salt-sensitivity after Bonferroni correction (P=4.4×10^-4, 1.1×10^-8, and 1.3×10^-3). Each copy of the minor allele of rs4764586 was associated with a 1.36-fold (95% CI: 1.23-1.52) increased odds of salt-sensitivity, whereas each copy of the minor allele of rs11614164 and rs3741914 was associated with 0.68-fold (95% CI: 0.55-0.84) and 0.69-fold (95% CI: 0.54-0.86) decreased odds of salt-sensitivity, respectively.

**Conclusions** This study demonstrated for the first time a relationship between rare variants in the ENaC pathway and BP salt-sensitivity. Future replication and functional studies are needed to confirm the findings in this study.

3. **Principal Investigator:** DeRouen, Timothy  
**Title:** Metabolic Syndrome, Maternal Nutrition and the Risk for Orofacial Clefts  
**Presenter:** Araya Pisek
Orofacial clefts (OFCs) are among the most common congenital anomalies, occurring in approximately 1 in every 700 to 1000 live births worldwide. Children born with OFCs need multidisciplinary specialized care from birth until adulthood. OFCs have a multifactorial etiology, involving a combination of both genetic and environment risk factors that include maternal behavioral and health characteristics and maternal nutrition.

Metabolic syndrome (MetS) is the cluster of metabolically related cardiovascular risk factors which predict diabetes. Common criteria of MetS are obesity, elevated triglycerides, reduced HDL cholesterol, elevated blood pressure, and elevated plasma glucose. Several studies indicated that the single marker of MetS might, alone or in combination with others, increase the risk of congenital defects such as OFCs. Evidence is increasing that micronutrients in the periconceptional period affect pregnancy outcome by altering maternal and fetal metabolism. OFCs may occur through either an excess or deficiency via molecular-biological processes. The specific nutrients, such as folate, vitamin B12, and correlates such as increased homocysteine (Hcy) associated with OFCs have not been well-studied.

Dietary pattern analysis is a holistic approach to examining diet quality by identifying the frequency and amount of consumption of food groups and linking these patterns to disease risk. Several studies show that a healthy maternal dietary pattern is associated with a reduced risk of spina bifida and neural tube defects (NTD) in offspring and OFCs risk.

Our overall goal is to determine if maternal MetS, or maternal nutritional status is associated with the risk OFCs. We will conduct a case-control study in Khon Kaen, Thailand, among 350 mothers with children > 2 months to < 5 years and 4 month of age. We will recruit 175 cases from the Cleft Center in Khon Kaen University (KKU) hospital, and 175 controls from the well-baby clinic of the same hospital matched on date of birth and mother’s education. We will collect blood samples, measure maternal anthropometrics, and administer a maternal health and food frequency questionnaire (FFQ) to estimate the associations between maternal nutritional status, dietary pattern and metabolic status and CL/P. The understanding we will gain about the role of MetS micronutrient status and dietary pattern and their association with CL/P may give us useful information about how we can modify periconceptional health advice on maternal health and diet and contribute to the prevention of OFCs.

4. **Principal Investigator**: Wyatt, Gail  
**Title**: Building a Career Based on University of California, Los Angeles (UCLA) - South African (SA) Mentoring
Presenter: Dr. Lufuno Makhado, Ph.D

The University of California, Los Angeles (UCLA)-South African (SA) Trauma Research Training Program, mainly known as “Phodiso” Meaning “Healing” in Setswana (South African Language), Prepares future investigators to conduct research on “Psychological trauma and injury exposure in the context of South Africa’s high levels of interpersonal and community violence and intentional injuries.” It is an international collaboration between University of California, Los Angeles and the South African Research Consortium. The purpose of Phodiso training program is to increase the number of well-trained South African trauma researchers who will conduct psychobiological research including neuropsychiatric methods, translate research findings to culturally congruent trauma and injury prevention and treatment program and to facilitate the building of community capacity and infrastructure that benefit the people of South Africa. The program had trained 8 and 4 post-doctoral scholars in the period 2006-2010 and 2011-2015 respectively. The phodiso’s achievements include the development of credible and reputable researchers, growth of scholars academically and administratively, facilitated and disseminated Phodiso material to other staff/students, and published a special issue on Trauma and Mental Health in South Africa. Phodiso is also on its 3rd cycle and had accepted its 1st scholar for 2017/2018 period.

Keywords: Trauma, Mental Health, Research training Program, UCLA, SA

5. Principal Investigator: Raskin, Ilya
   Title: Development and characterization of high phenolics lettuce varieties as anti-diabetic functional foods
   Presenters: Shukhratdzhon Satorov1,2, Csanad Gurdon2, Alexander Poulev2, Vyacheslav Dushenkov3 and Ilya Raskin2

1 Institute of Preventive Medicine, Dushanbe, Tajikistan
2 Department of Plant Biology, Rutgers, The State University of New Jersey, New Brunswick, NJ
3 Biology Unit, Eugenio de Maria Hostos Community College, CUNY, Bronx, NY

Abstract
Our goal is to develop lettuce (Lactuca sativa) varieties with anti-diabetic potential, when consumed as fresh produce or botanical extract. Lettuce is one of the most commonly consumed vegetables in the US, with low calorie content and a low glycemic index. While intensive breeding has added important agronomic traits to lettuce, little has been done to improve the health benefits of this major crop. Previously, red lettuce cultivars with high phenolic content (phenolic acids and flavonoids) were developed in
our laboratory from existing red lettuce lines. Extracts of these red lines were shown to have anti-diabetic properties in vitro and in vivo. We now report the identification of novel lettuce mutants with altered flavonoid profiles from an ethyl-methanesulfonate-mutagenized red lettuce population. One of the characterized mutants, Kaempferol+ (Kf+) has elevated levels of kaempferol, a flavonol with anti-diabetic, anti-obesity and anti-inflammatory effects. Kaempferol is present at low to non-detectable levels in lettuce varieties, including the parent red line of Kf+. We will test the effects of Kf+ extract on metabolic syndrome in vivo, and compare its efficacy to the first generation of high phenolics lettuce varieties.

6. **Principal Investigator:** Cottler, Linda B.  
**Title:** Fifteen Years of Research Capacity Building in India  
**Presenter:** Linda B. Cottler

Behavioral and brain disorders across the lifespan contribute to the disease burden in developing and low and middle income countries (LMIC), yet they receive little attention especially, research training related to these conditions. There is a crucial need for strengthening research capacity at the individual, institutional and country levels in LMICs to mitigate the burden of non-communicable diseases. With the support of the Fogarty International Center, in 2001 we initiated our first research capacity building efforts in India (2001-2011) partnering with the National Institute of Mental Health and Neuro Sciences (NIMHANS), Bangalore. Fifteen short and long-term fellows from India with a MD or PhD received Post-Doctoral Training in areas ranging from social, psychiatric and genetic epidemiology to neuro-imaging. Building on the capacity that was built at NIMHANS, in our second Fogarty training program on non-communicable diseases (2011-2017), we expanded our research capacity to the NorthEast Region (Assam and Sikkim) of India where the need for mentoring is great. In this second training program, moved from Washington University to the University of Florida, eighteen fellows pursued their training and have returned to India. The Indo-US team has made considerable progress in building research capacity in India. In total 32 fellows from India received training at Washington University/University of Florida. As of February, 2017, the post-training outcomes for these fellows include 649 publications in peer reviewed journals, 160 research grants from the Government of India and NIH, and 122 awards and honors recognizing their contribution to their field. Advanced in-country support has strengthened and sustained training efforts (Cottler et al, 2015). We will summarize our fifteen years of capacity building efforts in India, lessons learned, challenges in implementing capacity building programs and strategies to overcome obstacles and ensure long-term sustainability.

7. **Principal Investigator:** Raskin, Ilya  
**Title:** Integrated approach to botanical therapeutics research training in Tajikistan  
**Presenters:** Vyacheslav Dushenkov1, Shuhkratdzhon Satorov2, Ilya Raskin3  
Fogarty International Center of the NIH Award Number D43TW009672

1) Eugenio María de Hostos Community College CUNY, USA;  
2) Center for Preventive Medicine, Tajikistan;  
3) Rutgers, The State University of New Jersey, USA

The Center for Botanicals and Metabolic Syndrome in Tajikistan (CBMS-T) was established in 2014 to integrate, in a culturally sensitive way, intensive training in Western science with extensive knowledge of traditional botanical medicines in Central Asia. CBMS-T serves as a core for a comprehensive training program for predoctorate and postdoctorate fellows. It uses an integrated approach combining in-country training, out-of-country fellowships and extensive online resources to train seven PhD candidates and five postdoctorate fellows, out of which two graduated in 2016. We have also attracted associate trainees to the program. Over 2000 students, researchers, professors, medical doctors and university administrators attended eight keynote lectures presented by US scientists. Two CBMS-T International Workshops on Botanicals & Metabolic Syndrome were conducted in 2015 and 2016. They were focused on our trainees’ progress and also attracted local researchers and students. An on-line educational hub has been established (http://cbms.rutgers.edu/). This comprehensive and easy-to-navigate site plays a central role in training and communications between CBMS-T faculty and trainees. CBMS-T research projects focus on local, traditionally used medicinal plants and on plants known for high content of bioactive natural products. CBMS-T trainees presented at 26 national and international conferences, published four books and brochures, three articles in peer reviewed regional journals, two articles in international peer reviewed journals, and submitted two Tajik and one European patent applications.

Partially because of the educational activities of CBMS-T in the country, the President of Tajikistan declared research and development of botanical medicines a national priority economic area under his personal control. Three Tajik research institutes merged into a new Institute of Botany, Plant Physiology and Genetics for better coordination of botanical research and development. Dr. Akobir Mirzorakhimov, a member of the CBMS-T advisory committee, was appointed a director of this new Institute. In addition, a CBMS-T postdoctoral fellow, Dr. Shifo Kurbonbekova, became Director of the newly
formed National Laboratory of Medicinal Plants (NLMP) and a new research and development center “Pharmacia” dedicated to botanical research was established in the Avicenna Tajik State Medical University, which is the main partner institution for CBMS-T. The main mission of NLMP and Pharmacia is to develop botanical therapeutics from local sources. Finally, the Tajik Research Institute of Preventive Medicine has provided matching funds to send one CBMS-T Ph.D. trainee to Rutgers University for at least two years of intensive laboratory training.

8. **Principal Investigator:** DeRouen, Timothy A.
   **Title:** Metabolic Syndrome, Maternal Nutrition and the Risk for Orofacial Clefts
   **Presenter:** Araya Pisek

Orofacial clefts (OFCs) are among the most common congenital anomalies, occurring in approximately 1 in every 700 to 1000 live births worldwide. Children born with OFCs need multidisciplinary specialized care from birth until adulthood. OFCs have a multifactorial etiology, involving a combination of both genetic and environment risk factors that include maternal behavioral and health characteristics and maternal nutrition.

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and 175 controls from the well-baby clinic of the same hospital matched on date of birth and mother’s education. We will collect blood samples, measure maternal anthropometrics, and administer a maternal health and food frequency questionnaire (FFQ) to estimate the associations between maternal nutritional status, dietary pattern and metabolic status and CL/P. The understanding we will gain about the role of MetS micronutrient status and dietary pattern and their association with CL/P may give us useful information about how we can modify periconceptional health advice on maternal health and diet and contribute to the prevention of OFCs.

9. **Principal Investigator:** Olopade, Olufunmilayo  
**Title:** Effects of a Multi-level Intervention on the Physical Activity Behaviors of In-school Adolescents in Oyo State, Nigeria  
**Presenters:** Mojisola M. Oluwasanu, MPH, M.Sc.; Oladimeji Oladepo, MPH, PhD; and Olufunmilayo I. Olopade, MBBS, FACP  
Faculty of Public Health, University of Ibadan, Oyo State, Nigeria and University of Chicago Pritzker School of Medicine, Chicago, Illinois, USA

Physical inactivity contributes significantly to the burden of non communicable diseases (NCDs); it is the fourth leading cause of death worldwide.1, 2 Patterns of physical activity in adulthood are often established during adolescence.3 Sedentary behaviours in the early years could influence the development of diseases later in life.4 Studies on physical activity in Nigeria have focused largely on individual behaviours, none have assessed the effectiveness of school-based interventions in promoting physical activity and fitness in children and adolescents.5,6,7 Systematic review of studies found strong evidence that multi level interventions and policies improved physical activity among young people.8 Evidence is lacking in Nigeria.

10. **Principal Investigator:** Nimgaonkar, Vishwajit  
**Title:** Cross-fertilized research training for new investigators in Egypt and India  
**Presenters:** Vishwajit L Nimgaonkar¹, Hader Mansour¹, Smita N Deshpande².  
¹ University of Pittsburgh, Pittsburgh and ² PGIMER/ Dr RML Hospital, Delhi.

**Goals of our program (2014-2019):** Across India and Egypt, we will train motivated post-graduate individuals, who will conduct research into novel, effective pharmacological interventions for schizophrenia (SZ). We will seek trainees in psychiatry and allied specialities. We will focus on medical schools. Inculcating a research ethos in these settings will not only aid individual researchers; it will also have a ‘multiplier effect’ by exposing students to well-trained and highly motivated faculty. Recognizing the
aspirations of new investigators and clinical practitioners in developing countries, we will provide an array of opportunities for potential trainees, including an ethics track, a track for laboratory-based training and Advanced in-country research awards. The research will build on our ongoing funded programs. We will maximize local resources and practices to ensure sustainability and increase impact. We propose to train medium term trainees (6 months, N=40) and long term trainees (2-3 years, N=4-6).

Progress of our program: Significant progress has been made toward all the aims. We have received applications and have selected trainees annually following competitive interviews. To date, 26 medium term trainees have completed training and we have enrolled 3 long term trainees. We have awarded 3 Advanced in-country research awards. Last November, at the invitation of the Indian Council of Medical Research (ICMR), we jointly conducted a ‘grantathon’ to train new faculty in research methods and grant writing. We trained 24 individuals, who have jointly submitted 12 grant applications to ICMR. We intend to accelerate these activities for the remainder of our funding period.

11. Principal Investigator: Hyder, Adnan
Title: Building Institutional Capacity for Injury and Trauma Research: A Case Study from Uganda
Presenters: Abdulgafoor M. Bachani1; Nino Paichadze1; David Bishai1; Stephen Wegener3; Nazarius Mbona Tumwesigye2; David Guwatudde2; Lynn Atuyambe2, Olive Kobusingye2, Adnan A. Hyder1. 1Johns Hopkins International Injury Research Unit, Johns Hopkins Bloomberg School of Public Health, USA; 2Makerere University School of Public Health, Uganda; 3Johns Hopkins University School of Medicine, USA.

Background Despite the high burden of injuries, they have largely been overlooked in global health research. One of the reasons for this is that in many developing countries there is limited supply of trained human resources for addressing injury research. Uganda is one such country where two critical gaps in addressing the lifelong consequences of trauma, injuries and disability are the lack of trained human resources and the lack of data.

Objectives Through an innovative model of sustainable development, the Johns Hopkins University-Makerere University Chronic Consequences of Trauma, Injuries and Disability in Uganda (JHU-MU Chronic TRIAD) program aims to strengthen research capacity on the long-term health and economic consequences of trauma, injuries and disability across the lifespan in Uganda. Since 2012, the program has been working to 1) develop a core group of researchers focused on Chronic TRIAD at MU; 2) promote research around key national priorities for Chronic TRIAD; 3) establish a national forum on
Chronic TRIAD; and 4) create a program for research on the lifelong impact of trauma, injuries and disability at MU School of Public Health (MakSPH).

**Results** The program has had early success and for the first time there is new MPH track at the MakSPH that focuses on trauma, injuries and disability. Four cohorts have been enrolled in the 2-year TRIAD fellowship. As part of their fellowship, trainees have conducted independent research on a variety of topics of direct relevance to understanding and addressing the burden of trauma, injuries and disability in Uganda. The program has offered additional training opportunities to students, faculty and staff at MU through short-term workshops. The program has also promoted national dialogue on the issue through Uganda Injury Forum and has hosted two symposia.

**Conclusions** Through this program we have built local capacity that will be critical in bridging a national gap and a step toward addressing the burden of trauma, injuries, and disability in Uganda.

**Keywords** trauma, injury, disability, capacity development

12. **Principal Investigator:** Vlahos, Penny  
**Title:** Identifying Contributing Factors to the Progression of Chronic Kidney Disease of Unknown Etiology in Sri Lanka  
**Presenters:** Vlahos¹, Stephen Schensul², Jean Schensul², Lalarukh Haider², Center Rohana Chandrajith³, Kalinga Silva³, Nishantha Nanayakkara⁴  
¹University of Connecticut Department of Marine Sciences & Environmental Engineering, ²University of Connecticut Health Center, ³University of Peradeniya Department of Geosciences, ⁴University of Peradeniya Medical School, Shuchi Anand, Stanford University

Over the last two decades there has been a rapid increase in chronic kidney disease of unknown etiology (CKDu) that has emerged in rural, arid, agricultural lowland regions in multiple countries not associated with diabetes or hypertension. These regions report 15 to 25% prevalence among men and women between the ages of 30 to 60. CKD and CKDu are progressive and irreversible diseases resulting in renal failure and death unless dialysis or a kidney transplant is available. Here we use a multidisciplinary approach to track the rate of progression of individuals with stage 3 CKDu as identified through national screening efforts. The study focuses on the north central region of Wilgamuwa. To date 225 potential participants have been identified and initial GIS analysis of land use and distribution have been conducted. Initial analysis of target organic compounds
in air and metals and nutrients in soil have also been completed. Detailed methodology is summarized here.

13. Principal Investigator: El Hajj Fuleihan, Ghada  
Title: A Graduate Journey  
Presenter: Marlene Chakhtoura

This poster illustrates the success story of the first Scholars in Health Research Program (SHARP) graduate.

Marlene Chakhtoura, MD, was the first graduate of the Master of Sciences Degree in Health Research (SHARP MS), in November 2015. As a SHARP student and as a research fellow at the Calcium Metabolism and Osteoporosis Program (mentor: Ghada El Hajj Fuleihan MD, MPH), Dr Chakhtoura completed several projects related to osteoporosis and vitamin D. She contributed to the finalization of the Lebanese Osteoporosis Guidelines, and wrote a paper on the treatment model adopted in Lebanon. She wrote the protocol of an ongoing large trial on vitamin D replacement in pregnant women. She conducted 3 systematic reviews. One of them was her thesis project, on vitamin D replacement in the Middle East and North Africa region, will guide vitamin D replacement guidelines in the region. The two others, in addition to an ongoing third one, revolve around vitamin D replacement in bariatric surgery, and will impact guidelines in this specific population.

Dr Chakhtoura was recruited as a faculty at the American University of Beirut. In addition to her clinical duties in Endocrinology, she is responsible of establishing a medical weight management program, leading both the clinical and the research activities. Given fund of knowledge in health sciences quantitative methods and her research training, Dr Chakhtoura was selected to lead the Research Fellowship Program at AUB, a program dedicated to ensure appropriate training of research fellows working in different specialties. In addition, she is currently the Assistant Director of the SHARP summer certificate course.

This journey clearly demonstrates that research skills acquired in SHARP are invested to improve and advance the health care agenda for non-communicable diseases, osteoporosis, obesity and the link between them in this case. The final endpoint is to generate policies and guidelines in these disciplines at the national and international level, and to disseminate good clinical practice in research.

14. Principal Investigator: Wyatt, Gail
Title: Developing a research agenda in South Africa: The Scholar's perspective

Presenters: Mashudu Davahna-Maselesele, PhD; University of the NorthWest Mafikeng Campus, South Africa; Naseema Vawda, PhD; University of KwaZulu Natal, South Africa; Gail Wyatt, PhD, University of California Los Angeles; Norweeta Milburn, University of California Los Angeles

NIH Fogarty Grant 3 D43TW007278

Before the Phodiso (Healing) UCLA-South Africa was founded 12 years ago, South Africa faced socio-economic and health challenges as the country sought to overcome Apartheid. Due to the high rates of multi-morbidities present, including both communicable and non-communicable diseases, there is very little funding available for mental health issues. This is compounded by shortages of researchers, clinicians, and poor infrastructure especially in investigators serving populations and many positions that did not guarantee tenure. The role of the Phodiso programme in promoting pertinent mental health research, developing researchers and their career and other opportunities is highlighted in the presentation. One of the major hurdles to overcome by funding the research of scholars selected for the program was to encourage across campus and university collaborations and to foster opportunities to conduct research on topics such as culturally relevant measurement development that had been overlooked in the past. In its 12th year, other pre-doctoral students are conducting secondary data analysis in the Phodiso datasets while at UCLA. We are one of few programs with a “pipeline grant” which feeds Phodiso. Our graduates continue to lecture and collaborate on trauma informed topics and effects on mental health. In so doing The Phodiso model has been successful in increasing the breadth and depth of investigators in areas of trauma and mental health.

15. Principal Investigator: Zucker, Robert

Title: Early Screening for Alcohol Use Among Youth in Ukraine

Presenter: T Nickelsen (1,2), V Burlaka (3), RA Zucker (2), Myra Kim (2), O Krugilachenko (2), & MA Walton (2)

Center for Medical and Psychological Rehabilitation ZLAGODA (1), Vinnytsia, Ukraine, Department of Psychiatry, University of Michigan, Ann Arbor MI, USA, 48109 (2), and Department of Social Work, University of Mississippi, University, MS, 38677(3).

Supported by NIH/Fogarty grant #D43 TW009310.

Objective: Data regarding alcohol use among children and adolescents in Ukraine is generally lacking. This study examined rates and correlates of alcohol use among youth (ages 8-17) in Ukraine presenting to primary care clinics.
Method: Youth presenting to primary care clinics for annual exams were systematically sampled by age (8-17), gender, and rural/urban residence to complete an anonymous survey (n=1002). Participants received a lottery ticket (50 randomly selected children received $10 prizes). Bivariate and multivariate logistic regression analyses were used to examine correlates of no drinking, any alcohol use (no binge drinking), and binge drinking (any binge drinking) across elementary, middle, and high school.

Results: Overall, 57.3% (n=574) were non-drinkers, 36.4% were alcohol users (n=365), and 6.3% (n=63) were binge drinkers; the majority of binge drinkers were in high school 95% (n=59). In bivariate analyses, male gender, cigarette and/or marijuana use, friends’ substance use, and anxiety and/or depression were consistently associated with alcohol use. Among elementary school children, logistic regression showed that friends’ alcohol use increased the likelihood of any alcohol use as compared to not drinking. For middle school children, greater father’s education, friends’ alcohol use, and cigarette smoking were associated with greater risk for any alcohol use as compared to not drinking. For high school children, greater mother’s education, and friends’ alcohol use were associated with greater risk for any alcohol use as compared to not drinking; when comparing drinking groups, binge drinkers were more likely to be male gender, use cigarettes and marijuana, and report friends’ alcohol use than those reporting alcohol use.

Conclusions: Findings suggest routine screening and early intervention programs should be integrated into annual physicals for youth in the Ukraine, particularly among high school students. Such programs should focus on addressing alcohol and other substance use, mental health factors related to substance use (e.g., coping with negative affect), and social influences.

16. Principal Investigator: Weiss, Bahr
   Title: Urbanization and Mental Health Among Vietnamese Children
   Presenter: Bahr Weiss, Vanderbilt University. Minh Dang, Vietnam National University, Amie Pollack, Vanderbilt University.

Many LMIC are experiencing rapid economic development. However, this rapid development often comes at a cost, and typically is accompanied by a number of potentially harmful correlates, including rapid, uncontrolled urbanization (Cheung, 2013). Most studies of the effects of urbanization have focused on adults, yet children’s mental health may be a domain particularly sensitive to the effects of urbanization, given children’s relative lack of control over their environment and their developmental staging (Kieling & Rohde, 2012). In addition, most studies of urbanization have focused
on comparison of urban vs. rural populations but there is strong evidence that “urbanization” is not unidimensional, and does not affect all people in a neighborhood equally.

The purpose of the present study was to assess relations between urbanization factors, and child mental health, in a rapidly developing and urbanizing country, Vietnam. Participants included 1,314 parents, and 591 children aged 12 or greater reporting on themselves. Potential participants were randomly selected (a) from 10 (of 63) provinces in Vietnam, (b) 60 sites, (c) from public population registers so as to be nationally representative. Measures included the (a) Urbanization Factors Questionnaire (UFQ) which assesses four factors related to urbanization: (a) Crime; (b) Physical Environment (e.g., pollution; noise); (c) “Sleaze“ (e.g., karoke bars; “by the hour” hotels); (d) Neighbor Social Support (e.g., neighbors willing to loan a motorbike), and (b) the Child Behavior Checklist-VN (CBCL; Achenbach & Rescorla, 2012) which assesses child mental health problems.

All four urbanization factors showed significant total relations to both internalizing (e.g., anxiety, depression) and externalizing (e.g., aggression) mental health symptoms among the children. However, only (a) low levels of supportive neighbors, and (b) neighborhood “sleaze” showed significant unique relations to child mental health, suggesting that social factors associated with urbanization may be more important the physical (e.g., pollution; noise) factors. This suggests that developing social neighborhood relationships may be an important approach to consider when attempting to combat the effects of urbanization on child mental health.