

Yvette Cozier: Hello, everyone. My name is Yvette Cozier, Associate Dean for Diversity, Equity, Inclusion, and Justice at Boston University School of Public Health. Thank you for joining us for this Public Health Conversation Starter. Today's conversation is part of our SPH Reads series. SPH Reads is a school-wide reading program hosted by the Office of Diversity, Equity, Inclusion, and Justice. It aims to encourage critical thought and discussion among all members of the BUSPH community, and is centered on a carefully chosen, thought-provoking book. The selection for the 2025-2026 academic year is *Ripples of Hope in the Mississippi Delta*, charting the Health Equity Policy Agenda, written by David K. Jones and edited by Deborah Bingham, Nicole Huberfeld, and Sarah Gordon. Today, I have the privilege of speaking with Sudheer Kutha who is the Chronic Disease Epidemiology Team Lead in the Office of Preventive Health at the Mississippi State Department of Health, where they tackle the significant burden of chronic diseases in one of the nation's most underserved states. He addresses critical public health challenges, including diabetes, cancer, and cardiovascular diseases, using his expertise and data analysis to guide evidence-based interventions that enhance access to care and improve health outcomes statewide. Through his unique combination of data-driven strategies and strong engagement with community programs, Sudhir has emerged as a nationally recognized leader for his continuous contributions to advancing public health in Mississippi. As the epidemiology section chair for the Mississippi Public Health Association, he leads capacity-building initiatives through workshops and cultural competency training. His advocacy efforts extend to the national level, emphasizing the chronic disease burden and the need to improve healthcare access for rural populations in Mississippi, with a focus on reducing health disparities. Sadir, thank you for being with us today.

Sudheer Koutha: Thank you so much for inviting, and that's a great introduction, and thank you so much for introducing this book, *Ripples of Hope*. I did not completely read it, but I kind of am on the process of completing it, but it's a really great book, and it, I mean, coincided with a lot of public health activities that we do in Mississippi.

Yvette Cozier: Yes, well, thank you. I'm glad that you're enjoying the book, and I will just note for those who watch this later that David Jones was a professor at Boston University School of Public Health in the Department of Health Law Policy and Management. And, who, died, at a very early and unexpectedly in 2021. But, his work was really intended to trace the steps of RFK Sr, RFK Sr. In understanding the drivers of poverty, and by doing so, embedding within the communities to find different ways, to ameliorate, the burden. So thank you, I'm so glad that, that you are enjoying the book. So, just to start.

Sudheer Koutha: You're welcome.

Can you please share a bit about your background and work? How did you get involved in preventive health as a career?

Sudheer Koutha: So, I'm a trained dentist in India. And we used to do a lot of public health dentistry activities across the place where we are living, where we are going to school at. Even though I enjoy a lot of clinical dentistry, I kind of...had more satisfaction when I go to the people, when I talk to the people, and when I listen or understand their needs, and tell them about, oral health, and also some lifestyle changes to maintain their oral health and all. So that motivated me to choose public health as my major in my post-graduation in University of Southern Mississippi here in the state of Mississippi. Later, I felt... I got an opportunity as an internship in Office of Oral Health, and later I got promoted to chronic disease. As an epidemiologist. So, you know, through my journey, I always use my past experiences and tried to address the real needs of the community, and focus on prevention rather than cure, which is why I'm in Office of Preventive Health now.

Yvette Cozier: Great, well, that's wonderful, and, I just, I'll bring this up a little bit later as well, but, just the oral, colon sort of link, right? We're talking about digestive systems here that... so your work and moving into this area, it was not that... not that far a track, right? But also recognizing that a lot of the skill you brought from, from your background in oral health and dentistry. So, and our next question is, given ever-changing health challenges, how do you prioritize which chronic diseases to focus on in Mississippi?

Sudheer Koutha: So, always for all these public health strategies or planning, data is the key. So, we usually observe the baseline data, or the burden data for each of the chronic disease areas, and also understand the high-risk areas in the state, and also estimate the needs of the community based on the current social determinants of health. So, prioritizing the chronic disease depends on the, intensity of the disease, or the... or the current situation of the, community, and also the funding areas. Especially, for example, we... carefully target the low-hanging fruits, to make a big impact in the society. For example, diabetes is considered priority, for the health department because it is in... it is involved with a lot of complications and use, Better situations for several other chronic disease areas, apart from just diabetes.

Yvette Cozier: Yeah, so, I'm... so diabetes, is, that and what are some of the other, unique public health challenges that face, Mississippi?

Sudheer Koutha: So, Mississippi is having a higher chronic disease burden. And at the state with, predominantly rural population and more underserved population in the country, there are a lot of, access to care, complications apart from transportation, insurance, and poverty. So these are some of the, situations in Mississippi, those are a little challenging,

and we are trying to give some access to care opportunities, and by planning or integrating with, modern, data needs.

Yvette Cozier: Okay, yeah. So, just going back to something that you were saying just a few minutes ago, so you look at, you know, the... your work is data-driven, right? And it's, again, it's very exciting, from epidemiologist to epidemiologist to get to talk about this in the context of SBH reads. So can you, can you talk a little bit more for, those of the students who might see this, who are, who are quantitatively driven and, don't necessarily understand how their work hits the community, or how interacting with the community is important. So, can you talk a little bit more about your data analysis and design.

Sudheer Koutha: Sure

Yvette Cozier: I think those.

Sudheer Koutha: I always train my juniors or the interns that we need to understand the topography of the place that we are working on, like, like the geography and the historical, situations where the country or the... where the state is brought into, or the... for example, in one of my analysis when I, overlaid the risk factors, burden, and several social determinants of health, when I observed the high-risk areas, the counties across... along the Mississippi River border are having higher risk of chronic disease burden when compared to the other counties on the east. So, some of these analyses are a little interesting, and I'm looking forward to analyze or do some data analysis with the other counties of the other states across the Mississippi River border, and that would lead to some new discovery, or... or a situation where we need to address that. In order to change the lifestyles, or change the chronic disease patterns in the United States. And similarly, coming back to your question, so to the students, so it's not... not completely about data, it's not completely about how greatly you do the data, but at the same time, how is our data being useful to the community? And are we reaching out to the needs of the community, and is it, is our work making impact. So... so for me personally, dentist, public health person combination is a good one to understand the needs of the people and to address them. With the data insights.

Yvette Cozier: Great, thank you. So, can you, share an example of one of your data-driven initiatives that significantly improved health outcomes with a target demographic.

Sudheer Koutha: So, in one of our previous grants, we did an initiative called Chronic Disease Quality Improvement Initiative in the Mississippi Delta region. So, Mississippi Delta region is known for its, you know, poverty and poor chronic disease outcomes. So we identified several high-risk zones and partnered with the federally qualified health centers, or the health systems in the Delta region, and we continuously monitor the patients with

higher levels of blood pressure. And then referred them to the lifestyle change programs and medications, put them on medications, and followed them through a part of... period of, like, 4 or 5 years. So every year, we see an increase in the number of individuals whose hypertension is in control over the past, like, 4 or 5 years, so that is one of our successes, and we are continuing that during this period with the title of Mississippi Alliance for Cardiovascular Health, and we are in the second year of our grant period. And I'm very glad I'm being a part of that project, and that is changing the lives of several Delta people in Mississippi.

Yvette Cozier: Yeah, no, that's wonderful. If you can bring those chronic illnesses, hypertension, diabetes, under control, that, again, can block off so many other conditions that we stem from that. That's wonderful, thank you. So, how do you measure your progress and success in your work? So, using your previous example as, you know, stemming from that, how do you measure the success, both in terms of the community impact and data collection? How do you, what's your surveillance, and follow-up like?

Sudheer Koutha: So, our data collection and our surveillance should definitely make an impact in community. That is when we feel some kind of success. When it comes to the work, or the professional success, the quality of data because in older days, I mean, nowadays, we got the internet, and a lot of, e-surveys are... have been, taking place, but older days it was paper, and some of the areas also do not have some internet in Mississippi, so maintaining the quality of the data, and also addressing the community needs and meeting their expectations is a success for me. But at the same time, being professionally updated with a lot of, advancements in the, epidemiology, or the new techniques in epidemiology in several scientific journals, especially in the AI generation, is also one of the key points to success in epidemiology and public health.

Yvette Cozier: Yeah, yeah, exactly. Thank you. And so, when you're collecting and analyzing your health data in these communities, talk a little bit more about some of the challenges. For example, you mentioned, like, internet availability. What are some of challenges you've had.

Sudheer Koutha: Definitely in rural states like Mississippi, internet and people being adherent to internet and cell phone is one of the specific challenges that we always face with, and when there is a lot of paper-based surveys, the data entry and maintaining the data per HIPAA regulations is a little bit challenging. Apart from that, being understaffed, in Mississippi State Health Department currently, so that... that is the real challenge for us in navigating or streamlining the data, but at the same time, thanks to the internet or the electronic records, it makes our life easy.

Yvette Cozier: Yeah, yeah, exactly. So another question, that I can imagine, a student in public health, or even, you know, a seasoned veteran in public health and epidemiology. who've never directly engaged with communities. How do you start that process? How do you engage directly, with communities? Get... build their trust?

Sudheer Koutha: Yes, building that trust is really, really important in... in public health, when we do... when we are working with several rural communities, especially in the state of Mississippi. Firstly, it's always good to reach out to the local leaders, and then try to have a conversation with them, try to explain the needs of the healthy lifestyles, especially in some of the churches, or some barbershops. So, we have a program called barbershops, where the barbers usually tell about the importance of blood pressure screening, prostate cancer screenings for the individuals, which is little influential and which is impactful in the current day needs of the state.

Yvette Cozier: Yeah, so going to those community centers where people Trust.

Sudheer Koutha: Yes, also the coalitions. For example, Mississippi Comprehensive Cancer Control Program is always depending on coalitions, where the local coalition leaders team up with the local leaders, or the local organizations, or the stakeholders, and then, give those resources for them, and engage them in community screenings, as well as the lifestyle change programs. That is really impactful. And also, we regularly have the Mississippi Cancer Caregivers and Survivors Conference, where all the caregivers and survivors are brought to one umbrella, and they are trained, entertained, and given a lot of hope and courage to complete their, thoughts, and, you know, that is a really a wonderful, countries that I look forward to every year.

Yvette Cozier: Nice, nice. And, so going from the community to the local public health, professionals. I noted in the introduction that you lead a lot of capacity building initiatives and workshops and cultural competency training, and so, just a question about, how important are those workshops and cultural competency training? How does that enhance the work?

Sudheer Koutha: So, when I was in oral health as an epidemiologist, we used to do those trainings in some of the community colleges in the state, where we explain the need for a tailored approach for the specific audience, or the specific patient group. It's just because, I'm from India, I cannot behave at, like, a person from that place, or ... I cannot get those principles in my clinical practice. I need to understand the needs of the current community where I am in, and then speak in the language that is close to their understanding, or they've... just to avoid those barriers, and that is more important in maintaining that competency, and also, for the... we used to do a lot of trainings for the young professionals,

or the students, being a part of MPHA, so we kind of introduced them to several areas of public health, explaining them the benchmarks of each level of epidemiology as a career, and then making sure they go in those directions where they learn those public health principles, implement them, present them, and then, get to the next level. Which is a yearly thing for us. Every year we do a, professional or career building workshop as a part of MPHA conference. Every year, it's wonderful to see people joining in our, agency and working for the, people of Mississippi.

Yvette Cozier: And just to clarify, the MPHA is the Mississippi Public Health.

Sudheer Koutha: Public Health Association.

Yvette Cozier: Great, thank you. We have a Massachusetts Public Health Association, too. Turning a little bit to, policy, what innovations or policy changes do you believe could transform chronic disease prevention in rural, underserved areas, including the Mississippi Delta?

Sudheer Koutha: So, specifically for chronic disease, it's not an overnight thing, or a one- or two-year thing, it's a... it's a generational thing, probably. And adapting to the healthy lifestyles is not always easy for every community, especially in states such as Mississippi. We are trying our best to, educate as many as people and at the same time, in one of our comparison or analysis, when I compared two most rural states with Mississippi some of the rural states in Northeast, like Vermont and Maine, they are most rural... considered most rural in the States, but, they have a higher high school education... higher number of individuals with high school education than in Mississippi, so probably the education, or improving the, standards in the education, can really do a lot of wonders in the long run. At the same time, us being, health department staff, we try to educate a lot of, as many as people we could, in order to implement or adapt the healthy lifestyles, especially in addressing some of the challenges of the states, like obesity, colorectal cancer mortalities, and also smoking rates, even though they are falling, eventually, there are more number of people dying with lung cancer in... especially in Mississippi Delta region.

Yvette Cozier: Okay, yeah, I understand that. Thank you. And so, another question, again, focusing back on students, what advice do you have for current public health students who might be interested in getting involved in preventive health and aiding underserved communities?

Sudheer Koutha: So, public health is not just a profession, it's a passion for... to, you know, empower communities and uplift the communities, to the healthy situations. It's a philosophy-based thing where you need to face the challenges and also experience the worst in order to make the society better. So, I would definitely suggest for them to be

prepared for the challenging situations, but at the same time, keep our hopes high and motivate ourselves to enhance the opportunities and lifestyles of the communities, which use the Health for All policy and also, gives you an eternal satisfaction, yourself. We need to experience it, rather than... and I completely tell about it.

Yvette Cozier: Very, very well said. And so my very last question, goes back to the book. And so, from what you've read so far of the book, would you share any of your impressions about it? Those things that are most accurate, those things.

Sudheer Koutha: So, I read about the geographical disparities, or the cultural disparities that we are currently working on, and the historical things that happen in the state of Mississippi, especially the ripple, so whenever we have the strong commitment, towards the society, or to uplift the health of the people that where we are living in, that idea itself creates ripples, and it will reach its own destination, like how we are meeting today, I cannot imagine.

Yvette Cozier: Exactly, exactly. And the one line that I keep hearing in my head about the book is really one of the first lines in the first chapter, and that is, health equity is possible. And, I see from your work it is possible you are a ripple, and you know, I so appreciate the work that you're doing, in the Delta.

Sudheer Koutha: Thank you so much, and it's a pleasure to be a part of these conversations, and possibly many of them will, inspire, or reach out to me if they need any resources, or guide me, or train me if I need some of them, or, you know, it's... it's a good opportunity to meet some of the good personalities are pioneers in epidemiology and public health and it was great interacting with you, Dr. Cozier.

Yvette Cozier: Same here. Thank you so much for all that you're doing. Thank you for joining us today.

Sudheer Koutha: Awesome, thank you so much. Thank you all. Bye.