



# Kellogg Health Scholars

Connecting Academe, Community, and Policy

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October 2010

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**About this newsletter...**

The Kellogg Connection is a monthly electronic newsletter that celebrates the work of W.K. Kellogg program graduates. Kellogg Health Scholars in Health Disparities, Community Health Scholars, and Fellows in Health Research and Health Policy. Congressional Health Fellows.

**KConnection** is the Kellogg Health Scholars Program, a program of the Center for Advanced Health Policy (CFAH).

**Maria Briones-Jordan**  
**Brandon Moore**  
Manager

**Dr. Portia Cole**, Scholars in Health Disparities Program alumna, was recently appointed to a four-year term as a member of the Legislative/Policy Subcommittee of the Minority Health and Health Equity Advisory Committee (MHHEAC), advising Virginia State Health Commissioner, Dr. Karen Remley, on minority health policy. MHHEAC was created by the Virginia State Health Commissioner in 1990 to ensure that the health priorities and health concerns of Virginia's minority populations were adequately addressed by the Virginia Department of Health. The MHHEAC consists of community leaders and health/human services professionals from across the state. In her role as Legislative/Policy Subcommittee member, Dr. Cole identifies limitations associated with existing health care laws and makes recommendations to the Commissioner to improve accessibility and delivery of health services to minority populations throughout the Commonwealth.

**Dr. Clarence (Lance) Gravlee**, CHSP alumnus, along with collaborators in Puerto Rico and Tallahassee, were featured in the September 17 issue of the Chronicle of Higher Education: <http://chronicle.com/article/To-Battle-a-Plague-an-Anth/124337/>. Also, Dr. Gravlee was interviewed by NPR on September 29<sup>th</sup> about this research: <http://www.npr.org/templates/story/story.php?storyId=130212972>

**Dr. Patricia Miranda**, Kellogg Health Scholars Program alumna, recently accepted the position of Assistant Professor of Health Policy and Administration (tenure-track), The Pennsylvania State University. She was also the lead author on a paper, "Policy implications of early onset breast cancer among Mexican-origin women," published online on *Cancer*, which was the basis of an article published in The Houston Chronicle, [Mexican-American women are diagnosed with breast cancer at a significantly younger age than Caucasian women, a surprising finding from a new study that raises more questions about the recent push to delay routine screening.](#)

**Dr. Scott Rhodes**, Community Health Scholars Program (CHSP) alumnus, has been promoted to Professor with tenure. Dr. Rhodes has also been appointed Section Head for the Section on Society and Health within the Department of Social Sciences and Health Policy.

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## **ANNOUNCEMENTS**

**KHSP activities happening at the upcoming American Public Health Association Annual Meeting, November 6-10, 2010, Denver, Colorado** (all activities below are in the Colorado Convention Center)-

- **CHSP/KHSP Reunion Breakfast:** You are invited to attend this event on Monday morning, November 8<sup>th</sup>, at 6:30a. Great time to catch-up. Please RSVP (yes or no), click here: <http://doodle.com/participation.html?pollId=2iekstucm3msgzza>
- **The KHSP Booth:** Scholars and Alums, please sign up today to help staff the KHSP Booth (#1826) in the Exhibit Hall. To select a time slot, click here <http://doodle.com/participation.html?pollId=rtz4grwas46gkgyr> -maximum of two people per time slot to avoid congestion in the booth.
- **CBPH Caucus & Latino Caucus Celebration of Community and Culture**, at the Denver Art Museum, co-hosted with the Center for African American Health. Dinner and dancing. Save the

To contribute info resources or ann to Kellogg Conne [kconnection@cfah.org](mailto:kconnection@cfah.org)

CFAH identifies & disseminates sta science evidence influence of beha and economic fa disease and well purpose is to sup decision-making and strengthen relationships amr researchers and policymakers. Cf unrestricted fund number of found: principally The A Foundation, and funding from the Kellogg Foundati contact CFAH, e- [info@cfah.org](mailto:info@cfah.org), ca 387-2829 or visit at [www.cfah.org](http://www.cfah.org).

#### Do We Have Yo Updated Contac Information?

Please update o your email or ma has changed or v We want to keep Scholars network date and well-co possible! Please changes to [mbjones@cfah.org](mailto:mbjones@cfah.org) [healthscholars@cfah.org](mailto:healthscholars@cfah.org)

- Date - Monday evening, November 8<sup>th</sup>, at 5:30-10p. More information and tickets forthcoming.
- **The Scholarship of CBPR: W. K. Kellogg Health Scholars** - Kellogg Health Scholars and Alums will be presenting on Wednesday, November 10<sup>th</sup>, at 8:30a during the Session #5030, (<http://apha.confex.com/apha/138am/webprogram/Session29699.html>). This session is sponsored by the Community-Based Public Health Caucus.
- **Invited Oral Session: 10<sup>th</sup> Anniversary-CBPH Caucus:** Where we've been; Where we're going; How to get there, (<http://apha.confex.com/apha/138am/webprogram/Session30994.html>) will be presented on Tuesday, November 9<sup>th</sup>, at 8:30a; includes two presentations by community-academic partners, including youth presenters. One presentation is by **KHSP Alum, Keon Gilbert, DrPH**, and his community partner, **Elvira Mebane**, with youth from United Voices of Efland-Cheeks, along with UNC training site leaders, **Eugenia Eng, MPH, DrPH**, and **Alexandra Lightfoot, EdD**.
- **How about you?** Are you presenting? Please message Barb Watson to get on the list, [bjwatson@umich.edu](mailto:bjwatson@umich.edu).

### Announcing the Mentoring Program as part of the Academy of Health Behavior 2011 meeting: The Art and Science of Community-Based Participatory Research (CBPR): Methods, Measures and Evidence for Health Behavior Change

In addition to the Call for Abstracts to be peer-reviewed for poster presentation at the 2011 meeting in Hilton Head, South Carolina (available at <http://www.aahb.org/EARLYCallforAbstracts.html> and due by October 27<sup>th</sup>, 2010), the American Academy of Health Behavior also announces a Call for Applicants for a mentoring program partially supported by the National Center for Minority Health and Health Disparities and in partnership with the Kellogg Health Scholars Program that will be launched in conjunction with the 2011 meeting.

The **American Academy of Health Behavior (AAHB)** and the **Kellogg Health Scholars Program** have teamed together to provide a 12-month mentoring opportunity to a competitive pool of junior level health behavior researchers. The purpose of the mentoring program is to mentor early career investigators in the production of high-quality scholarly products that address minority health concerns and health disparities using CBPR.

- In this 12-month mentoring program, mentors and mentees will develop a shared CBPR research project in collaboration with one or more community partners.
- **Mentors** will be senior investigators from [AAHB](http://www.aahb.org) (if not already a member, mentors must become a member by January, 2011).
- **Mentees** will be current scholars or alumni of the [Kellogg Health Scholars Program](http://www.kellogghealthscholars.org) (or its legacy programs, *Community Health Scholars Program* and *Scholars in Health Disparities Program*) with an interest in minority health and/or health disparities research and CBPR.

Submit an "intent to apply as a mentee" email to [jrath@umd.edu](mailto:jrath@umd.edu) by Nov. 1, 2010; Application deadline by December 3, 2010. Questions can be referred to Dr. Jessica M. Rath, PhD, MPH, CHES, AAHB/Kellogg Mentoring Program Coordinator, [jrath@umd.edu](mailto:jrath@umd.edu), 301 405-2381

- For more information and the mentee application, click: <http://tinyurl.com/2ebs32l>.
- For more information and the mentor application, click: <http://tinyurl.com/262nph6>.

~Funding for this conference is made possible (in part) by 1R13MD005702-01 from the National Center on Minority Health and Health Disparities (NCMHD). The views expressed in the written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the department of Health and Human Services, nor does mention by trade names, commercial practices, or organizations imply endorsement by the U.S. Government.~

**To find out the Health Equity Provisions in the Health Reform Law --** Grants for workforce, prevention, quality, and research Commissions and advisory groups opportunities Quality measures development Strengthening existing programs and creating new ones Prevention and wellness initiatives Infrastructure development Research opportunities focused on health disparities Increasing diversity and cultural/linguistic competence - click: <http://tinyurl.com/3x6thn3>.

**Save the Date! The 2010 Kellogg Health Scholars Program Annual Meeting** will be held **June 1 through June 3** in Washington, DC. Details to follow.

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**SPOTLIGHT ON KELLOGG SCHOLARS NETWORK**

## Meet Kellogg Health Scholars Program alumna, **Kellee White, PhD...**

Dr. Kellee White is an Assistant Professor of Epidemiology and Biostatistics at the University of South Carolina's Arnold School of Public Health. Dr. White received her BA in Sociology at Vassar College and an MPH in Sociomedical Sciences and a PhD in Epidemiology from Columbia University Mailman School of Public Health. She completed her post-doctoral training as a Kellogg Health Scholar in the Multidisciplinary Track at the Harvard School of Public Health from 2008-2010.

Dr. White believes that the neighborhoods and communities where one is born, grows up, lives, works, and age has a tremendous influence on health. Her research examines the contribution of racial/ethnic residential segregation to health status, health risk, and health disparities. Also, she is interested in the conceptual, methodological, and analytical issues concerning examining racial/ethnic residential segregation and health.

During her two-year fellowship, Dr. White further refined her research agenda to focus on the structural causes of cardiovascular health disparities. Toward this end, she has been involved with the following research projects: 1) investigating the impact of multiple levels of discrimination (e.g. racial/ethnic residential segregation and perceptions of racial discrimination) on cardiovascular disease disparities; 2) exploring the accumulation of social and economic disadvantage over the life course and its impact on later cardiovascular risk; and 3) examining the influence of neighborhood context on management of cardiovascular risk factors.

KHSP has overall strengthened Dr. White's methodological approach to exploring neighborhoods and health. Dr. White says, "participating in the fellowship has fostered multidisciplinary collaborations and enhanced analytical skills necessary to conduct innovative research." She attributes the programs mission of connecting scholars with community partners and policy makers as a springboard for future success. According to Dr. White, she has had the opportunity to work with distinguished faculty members who have demonstrated a unique synergy between academic public health and partnerships with community organizations, private foundations, and government agencies to improve the public's health needs. In the future, she plans to continue to work with advocacy groups such as local Fair Housing Councils to develop research and policies seeking to advance health and neighborhood equity to ameliorate racial/ethnic health disparities.

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## Archived KHSP E-Workshops

The archived KHSP e-workshops are taped from the live e-workshops of the Kellogg Health Scholars. These live electronic workshops are intended to bring Kellogg Health Scholars together between face-to-face networking meetings to explore topics of mutual interest. Its purpose is to form closer networks between the Kellogg Health Scholars and to provide to them and the Kellogg Community of Scholars support and resources for career development.

Access to archived e-workshops is STRICTLY LIMITED to Kellogg Health Scholars, Kellogg Fellows in Health Policy Research (current and alumni), Scholars in Health Disparities and Community Health Scholars program alumni and H. Jack Geiger Congressional Health Policy Fellows program alumni. The contents of these e-workshops are confidential. These archived presentations should not be accessed, copied or forwarded by/to any individuals other than group of scholars, fellows and scholar/fellow alumni that have been identified.

**To listen to the archived presentations and download materials**, visit the KHSP members area at <http://www.kellogghealthscholars.org/members/login.cfm>. For login and passcode information, please contact Brandon Moore ([bmoore@cfah.org](mailto:bmoore@cfah.org)) or Marie Briones-Jones ([mbjones@cfah.org](mailto:mbjones@cfah.org)).

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## FUNDING

### **California Breast Cancer Research Program**

#### **"An Integrated Approach to Understanding Behavioral, Social, and Physical Environment Factors and Breast Cancer among Immigrants"**

**Deadline: December 14, 2010**

We have opened a call for proposals for pilot studies to describe the changes in behavior, social and physical environment that may cause the dramatic increase in breast cancer risk that occurs as people immigrate to and remain in California. Up to \$1.2 million dollars will be awarded, with preference given to transdisciplinary projects. For a description of our groundbreaking multi-million research initiatives on the

role of the environment in breast cancer and the disparities of the disease, see the [press release](#). Applications must be submitted through our online application process, hosted by [proposalCentral](#). Information is also available on our website in the [SRI Call for Applications](#). Questions and other inquiries may be directed to [SRI@cabreastcancer.org](mailto:SRI@cabreastcancer.org).

### **National Cancer Institute**

#### **Enabling Community Use of Data for Cancer Prevention and Control**

**Deadline: November 12, 2010**

Description of Event: Using data available through the National Cancer Institute's (NCI) Division of Cancer Control and Population Sciences (DCCPS) and their partners, develop prototype web and/or mobile communication technology applications to enable communities' use of population data for cancer prevention and control. DCCPS supports research in behavioral science, cancer surveillance, health services, epidemiology, and survivorship. Data from this research provides important insight into the burden of cancer in the population, cancer risk behavior, access to care, use of health services, and cancer-related knowledge, attitudes and behavior. The NCI's PopSciGrid Consumer Health Information Portal, which supports transparency, scientific collaboration, and community participation in cancer prevention and control, provides an example of the kind of applications that are encouraged for this challenge. Based on a conceptual framework for cyber-enabled collection, harmonization, and analysis of population health data, the PopSciGrid Portal will demonstrate how disparate cancer-related data (tobacco prevalence and policy data) can be integrated, visualized, and communicated to engage and empower communities and public health decision-makers. For this challenge, we are calling for entrepreneurs, developers, and health scientists to develop creative, innovative and engaging applications that build upon the behavioral and communication science evidence-base to deliver population health data to communities for cancer prevention and control activities. Multidisciplinary teams to represent technical and scientific expertise are encouraged. Data from DCCPS resources may be used alone or in combination with other available data resources to better inform cancer prevention and control for consumers, providers, researchers, and policymakers.

Successful applications may:

- Develop innovative approaches for data harmonization, aggregation and/or data visualization to enable real time access to cancer-related data.
- Develop novel analytic techniques or tools to improve the reliability and utility of data from multiple sources (e.g., behavioral/social science, biomedical, census/demographic, economic) and to facilitate data availability.
- Promote apomediation of cancer data between public health entities and communities (see <http://p2pfoundation.net/Apomediation> for more information).
- Integrate and enable analysis of cancer data at multiple levels of abstraction using advanced computational methods, such as statistical modeling of cancer prevention and control interventions and their effects on population trends in cancer burden (see <http://cisnet.cancer.gov/> for examples).
- Harmonize multiple datasets (e.g., behavioral, biomedical, clinical health records, policy...) on NCI's cancer Biomedical Informatics Grid (caBIG®) using appropriate data standards and protocols.

We encourage the development of web-based tools or applications to integrate cancer-relevant data from one or more of the following data resources with data available through the Community Health Data Initiative (<http://www.hhs.gov/open/datasets/index.html>):

- **Behavioral Risk Factor Surveillance System:** The Behavioral Risk Factor Surveillance System (BRFSS) is a state-based system of health surveys that collects information on health risk behaviors, preventive health practices, and health care access primarily related to chronic disease and injury. (<http://www.cdc.gov/brfss/about.htm>)
- **National Health Interview Survey - Cancer Control Topical Module:** The National Health Interview Survey (NHIS) is an annual national survey of U.S. households conducted by the National Center for Health Statistics to track population determinants of and trends in use of cancer screening tests and participation in cancer prevention behavior (<http://appliedresearch.cancer.gov/surveys/nhis/>).
- **Health Information National Trends Survey:** The Health Information National Trends Survey (HINTS) collects nationally representative data on U.S. adults' knowledge about cancer, cancer communication experiences, health information seeking, and cancer-related behaviors (<http://hints.cancer.gov>).
- **National Health and Nutrition Examination Survey:** The National Health and Nutrition Examination Survey (NHANES) collects data through interview and physical examination on the

health and nutritional status of adults and children in the U.S.

(<http://riskfactor.cancer.gov/studies/nhanes/>).

- **SEER-Medicare Datasets:** The SEER-Medicare datasets link clinical SEER registry data to Medicare claims (<http://healthservices.cancer.gov/seermedicare/>).
- **Surveillance, Epidemiology, and End Results (SEER) Program:** The National Cancer Institute's (NCI) Surveillance, Epidemiology, and End Results (SEER) Program collects cancer incidence and survival data from population-based cancer registries in the U.S. (<http://seer.cancer.gov>).
- **Tobacco Use Supplement to the Current Population Survey:** The Tobacco Use Supplement to the Current Population Survey (TUS-CPS), sponsored by the NCI, collects national and state level data on tobacco use in the U.S. (<http://riskfactor.cancer.gov/studies/tus-cps/>).

Other relevant data resources include the following:

- **Breast Cancer Surveillance Consortium:** The Breast Cancer Surveillance Consortium provides data relevant to the biology of breast cancer and the delivery and quality of breast cancer screening (<http://breastscreening.cancer.gov/>).
- **California Health Interview Survey:** The California Health Interview Survey (CHIS) collects population-based, health-related data from households in California (<http://appliedresearch.cancer.gov/surveys/chis/>).
- **Cancer Genetics Network:** The Cancer Genetics Network (CGN) provides data on the genetic basis cancer susceptibility in humans (<http://epi.grants.cancer.gov/CGN>).
- **Cancer Survivor Prevalence Data:** Cancer Survivor Prevalence Data draws on Surveillance, Epidemiology, and End Results (SEER) registry data to provide survival prevalence estimates representing five U.S. states (Connecticut, Hawaii, Iowa, New Mexico, and Utah), and four standard metropolitan statistical areas (Atlanta, Detroit, San Francisco-Oakland, and Seattle-Puget Sound). (<http://survivorship.cancer.gov/prevalence/index.html>).
- **Geographic Information System for Breast Cancer Studies on Long Island:** The Geographic Information System for Breast Cancer Studies on Long Island (LI GIS) is a unique tool that enables investigators to examine potential relationships between breast cancer risk and environmental exposures (<http://li-gis.cancer.gov/default.html>).
- **HMO Cancer Research Network (CRN):** The HMO Cancer Research Network (CRN) provides cancer-relevant, clinical data including data on behavioral risk factors, cancer prevention, early detection, treatment, and long-term care (<http://crn.cancer.gov/>).

**Will you be providing an award?** Yes

**If yes, what will you be providing as an award?**

Two travel awards to the 2011 Hawaii International Conference on System Sciences will be granted to recognize outstanding applications: <http://www.hicss.hawaii.edu/> <<http://www.hicss.hawaii.edu/>> . Travel awards will cover the cost of conference registration, travel, four nights lodging at the conference venue, and per diem. Winning applications will be presented by the Entrants at the 2011 Hawaii International Conference on System Sciences. Winning apps will also be promoted at NCI.

**Deadline for Submissions:** November 12, 2010

**Judging Details:** All entries will be reviewed by a panel convened by the NCI Division of Cancer Control and Population Sciences and evaluated according to the following criteria:

1. Enables community stakeholder access to cancer-related datasets.
2. Has the potential to improve the health and/or health behavior of communities.
3. Platform neutrality (can be accessed by simple web browser or mobile device).
4. Application quality, usability, and accessibility (should also meet objectives for federal compliance guidelines for information technology as addressed by Section 508 of the Rehabilitation Act of 1973: <http://www.section508.gov/>).
6. Originality and creativity.
7. Potential for further development and use.
8. Potential to engage and motivate target audience.

**Contact:** Abdul R. Shaikh, PhD, MHSc. Program Director, Health Communication and Informatics Research Branch, DCCPS, NCI.

<https://ui.constantcontact.com/rnavmap/em/ecampaign/shaikhab@mail.nih.gov>

**Links and Other Resources:** Health and Human Services (HHS) Open Government:

(<http://www.hhs.gov/open/> )

o Community Health Data Initiative:

(<http://www.hhs.gov/open/plan/opengovernmentplan/initiatives/initiative.html>)

National Cancer Institute - NCI (<http://www.cancer.gov/>).

o Division of Cancer Control and Population Sciences: <http://cancercontrol.cancer.gov/>

- o Applied Research Program: <http://appliedresearch.cancer.gov/>
- o Behavioral Research Program: <http://dccps.nci.nih.gov/brp/>
- § Health Communication and Informatics Research Branch: <http://cancercontrol.cancer.gov/hcirb/>  
<<http://cancercontrol.cancer.gov/hcirb/>>
- o Surveillance Research Program: <http://dccps.nci.nih.gov/brp/>
- o Epidemiology and Genetics Research Program: <http://epi.grants.cancer.gov/>
- o caBIG® - Cancer Biomedical Informatics Grid: <http://cabig.cancer.gov/>
- o NCI Office on Cancer Survivorship: <http://cancercontrol.cancer.gov/ocs/>
- o NCI Office of Communications and Education: <http://www.cancer.gov/aboutnci/office-of-communications>
- § Making Health Communication Programs Work: <http://www.cancer.gov/pinkbook>
- National Center for Health Statistics (NCHS): <http://www.cdc.gov/nchs/> <<http://www.cdc.gov/nchs/>>
- Current Population Survey: <http://www.census.gov/cps/> <<http://www.census.gov/cps/>>
- Centers for Disease Control and Prevention: <http://www.cdc.gov> <<http://www.cdc.gov>>

**Additional Terms and Conditions:** The following terms and conditions govern the submission of a technology by a submitting party ("Entrant") to the Enabling Community Use of Data for Cancer Prevention and Control Challenge (the "Challenge") sponsored by the Division of Cancer Control and Population Sciences of the National Cancer Institute (the "Sponsor") with offices at 6130 Executive Blvd., Rockville, MD 20892.

#### 1. ELIGIBILITY.

**1. Entrants.** Each Entrant must satisfy the following eligibility criteria:

- The Challenge is open only to residents of the fifty (50) United States (plus the District of Columbia, Puerto Rico, the U.S. Virgin Islands, Guam, and American Samoa) who are at least 18 years old at the time of entry (or teams of eligible individuals), and corporations or organizations located in the United States (including the District of Columbia, Puerto Rico, Guam, American Samoa and the U.S. Virgin Islands).
- Individuals submitting on behalf of corporations and nonprofit organizations must meet the eligibility requirements for individual Entrants. An individual may join more than one team, corporation or nonprofit organization. Employees of the National Cancer Institute and the judges or any other company or individual involved with the design, production, execution, or distribution of the Challenge and their immediate family (spouse, parents and step-parents, siblings and step-siblings, and children and step-children) and household members (people who share the same residence at least three (3) months out of the year) are not eligible to participate. The Challenge is subject to applicable federal regulations and laws. The challenge is void where otherwise prohibited by law. Participation constitutes the Entrant's full and unconditional agreement to these rules. Judges decisions are final and binding in all matters related to the Challenge. Eligibility for awards is contingent upon meeting the requirements described herein.

**2. Sponsor and Administrator.** The Sponsor makes all decisions related to the development, management, implementation and evaluation of entries to the Challenge.

**3. Challenge Submission Period.** The Challenge Submission Period begins on **September 21, 2010**, at 2:00 PM Eastern Standard Time ("EST") and ends on **November 12, 2010**, at 5:00 PM Eastern Standard Time ("EDT").

**4. Submission Requirements.** Submissions **must** be web and/or mobile communication technology software applications that use cancer-related data as described herein.

**In addition to the required use of cancer-related data**, submissions may optionally use any other data set(s) provided at [www.data.gov](http://www.data.gov). Submissions need not include ALL data fields available in a particular dataset; however, inclusion of key metrics relevant to cancer prevention and control (e.g. metrics related to cancer prevention, screening, treatment, quality of life, morbidity, and mortality) are required. Applications that allow consumers to dynamically filter, sort, or otherwise manipulate data to make personalized choices are encouraged. Prototype and applications should meet objectives for federal compliance guidelines for information technology (see Section 508 of the Rehabilitation Act of 1973 for more information. <http://www.section508.gov/>). Submissions may be software tools for the web, personal computer, a mobile handheld device, console, or any software platform broadly available to the public. Submissions must be applications or tools that empower users to access, visualize, sort, mash, track, or otherwise better understand data in ways that will inform cancer-relevant user behavior. Submissions must be made available free of charge to the public for one year following the announcement of winners.

If the software tool is not accessible by the Judges for review purposes via the web with a URL, a link to a video of the working tool must be submitted. In such case, the Judges have the right to request access to the Submission to verify any criteria about the software tool. A Submission may be disqualified if it does not function as expressed in the video and/or text description. All Submissions must be submitted

for evaluation by November, 12, 2010 at 5:00 p.m. EST. Once a submission is submitted, the Entrant is prohibited from making any changes or alterations to the submission until the judging is final. The approximate date the judging will be complete in early December.

## **2. ENTRIES.**

By submitting an entry in response to the Challenge, each Entrant represents and warrants that (a) the Entrant is the sole creator of the entry, (b) the Entrant has not assigned intellectual property rights in the entry, or any portion thereof, to another person, (c) the entry does not violate any applicable law, (d) the entry does not infringe or violate intellectual property rights held by any third person; (e) entries comply with appropriate policies, procedures and protections for access to relevant data sets to ensure all privacy requirements, intellectual property considerations, and institutional/sponsor restrictions are met; (f) its use of data obtained from the Sponsor or Sponsor's partners will not allow the identification of an individual human subject from whom the Sponsor or Sponsor's partners obtained such data. By entering, each Entrant agrees to: (a) comply with and be bound by the Official Rules and the decisions of the Sponsor, and/or the judges which are binding and final in all matters relating to the Challenge; (b) release and hold harmless the Sponsor and affiliated companies from any claims, expenses, and liability, including but not limited to infringement of copyright, trademark, or other intellectual property rights, property damage, or death or personal injury arising out of or relating to the Challenge, (c) indemnify, defend and hold harmless the Sponsor and Administrator from and against any and all claims, expenses, and liabilities arising from or relating to participation in the Challenge.

## **3. LICENSE.**

For purposes of showcasing opportunities to harmonize, visualize, and communicate data for cancer prevention and control, upon submission of their entry, Entrants grant the Sponsor, its agents, and contractors, a royalty-free, non-exclusive, worldwide license to use, copy, and display publicly, the submitted materials for a period of one year after the public announcement of the winners of the Challenge.

## **4. LIMITATION OF LIABILITY.**

The Sponsors and the judges are not responsible for: (1) any incorrect or inaccurate information, whether caused by Entrants, printing errors or equipment or programming associated with the Challenge; (2) technical failures, including, but not limited to, disconnections in network hardware or software or phone lines, interruptions, or other malfunctions (3) unauthorized human intervention in any part of the entry process or the Challenge; (4) technical or human error which may occur in the administration of the Challenge or the processing of entries; or (5) any injury to persons or damage or property which may be caused by participation in the Challenge including, but not limited to, receipt or use or misuse of any award. If for any reason an Entrant's submission is confirmed to have been erroneously destroyed, deleted, lost, or otherwise corrupted, the Entrant's sole resolution is to submit another entry to the Challenge. No more than the stated number of awards will be granted.

## **National Institutes of Health**

### **Loan Repayment**

**Deadline: November 15, 2010, 8:00 p.m. Eastern**

The 2011 application cycle for the National Institutes of Health's Loan Repayment Programs is now open, and applications can be found online at [www.lrp.nih.gov](http://www.lrp.nih.gov). The LRP's repay the outstanding student loans of researchers who are or will be conducting nonprofit biomedical or behavioral research, and opportunities are available in five research areas: clinical, pediatric, health disparities, contraception and infertility and clinical research for individuals from disadvantaged backgrounds. Applications will be accepted until 8:00 p.m. Eastern time on November 15, 2010. BENEFITS: New LRP contracts are awarded for a two-year period and repay up to \$35,000 of qualified educational debt annually. Tax offsets also are provided as an additional benefit. Participants may apply for competitive renewals, which are issued for one or two years. Undergraduate, graduate, medical school, and other health professional school loans qualify for repayment. An NIH grant or other NIH funding is not required to apply for or participate in the LRP's. ELIGIBILITY: Applicants must possess a doctoral-level degree (with the exception of the contraception and infertility research LRP); be a U.S. citizen, national or permanent resident; devote 20 hours or more per week to conducting qualified research funded by a domestic nonprofit, university or government entity; and have qualified educational loan debt equal to or exceeding 20 percent of their institutional base salary. AWARDS: Each year, nearly 1,600 research scientists benefit from the more than \$70 million NIH invests in their careers through the extramural LRP's. Twenty-six percent of awards are made to individuals within one to five years of receiving their doctoral degree. More than 75 percent of awards go to individuals within 10 years of receiving their doctoral degree. Approximately 40 percent of new applications and 70 percent of renewal applications are funded.

For guidance on the application process and NIH Institute and Center (IC) research priorities, potential

applicants should review Tips for Completing a Competitive Application at [http://www.lrp.nih.gov/pdf/0310\\_1\\_application\\_tips.pdf](http://www.lrp.nih.gov/pdf/0310_1_application_tips.pdf) and contact an IC LRP liaison. The list of ICs and their liaisons can be found at [http://www.lrp.nih.gov/contact\\_us/contact\\_list.aspx](http://www.lrp.nih.gov/contact_us/contact_list.aspx). QUESTIONS? Visit the LRP website at [www.lrp.nih.gov](http://www.lrp.nih.gov) for more information and to access the online application. For additional assistance, call or e-mail the LRP Information Center at (866) 849-4047 or [lrp@nih.gov](mailto:lrp@nih.gov). Also, receive application cycle updates through Twitter @NIH\_LRP or [www.twitter.com/NIH\\_LRP](http://www.twitter.com/NIH_LRP).

## **National Institutes of Health**

### **Enhancing Peer Review**

#### **Major changes for grant applicants!**

Shorter page limits ... restructured forms ... new instructions

For application submissions due on or after January 25, 2010, the time is now to **find out how --** [http://enhancing-peer-review.nih.gov/restructured\\_applications.html](http://enhancing-peer-review.nih.gov/restructured_applications.html).

### **NIH Regional Seminars on Program Funding and Grants Administration**

<http://grants.nih.gov/grants/seminars.htm#presenter>

2011 Locations Announced!

Each year, the Office of Extramural Research (OER) sponsors two NIH Regional Seminars on Program Funding and Grants. These seminars are intended to help demystify the application and review process, clarify Federal regulations and policies, and highlight current areas of special interest or concern. The seminars serve the NIH mission of providing education and training for the next generation of biomedical and behavioral scientist. NIH policy, grants management, review and program staff provide a broad array of expertise and encourage personal interaction between themselves and seminar participants. The seminars are appropriate for grants administrators, researchers new to NIH, and graduate students. OR, consider having NIH come to your institution: <http://grants.nih.gov/grants/presenter.htm> .

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## **CALL FOR SUBMISSIONS**

### **Call for Comments -- National Institutes of Health**

#### **Draft Strategic Plan for NIH Obesity Research**

**Deadline: October 14, 2010**

Inputs are invited on a strategic planning effort for obesity research. The NIH Obesity Research Task Force has been developing an updated Strategic Plan for NIH Obesity Research, to reflect the rapid progress in obesity research and new scientific opportunities that have emerged in the years since NIH published its first Strategic Plan for research in this important area. The new draft Strategic Plan will be available for scientific and public comment on the Internet for a one-month period, beginning on September 14, 2010. We hope that you will visit the website to read the draft Strategic Plan, at <http://obesityresearch.nih.gov/About/strategic-plan.htm>. There is a special e-mail address on the website for sending comments on the draft. Please also forward this information to anyone else to whom it may be of interest.

### **Call for Proposals - National Institutes of Health**

#### **4<sup>th</sup> Annual NIH Conference on the**

#### **Science of Dissemination and Implementation: Policy and Practice**

**Bethesda North Marriott Hotel & Conference Center**

**5701 Marinelli Road**

**Bethesda, MD**

**March 21-22, 2011**

**Deadline: November 12, 2010, 5:00 p.m. Pacific Time**

To meet the goal of the conference-to stimulate conversation among researchers and experts in the field-the conference will include Panels of scientific leaders, and include Think Tanks in addition to traditional Plenary Sessions, Concurrent Oral Presentation Sessions and Poster Sessions. Sessions will be structured to encourage interaction and networking between participants. Applicants are encouraged to submit abstracts for oral presentations/panels, posters, and think tanks (which applicants will lead). For proposal submission instructions and to register for the conference, please [click here](#) or visit <http://conferences.thehillgroup.com/obssr/DI2011/index.html>.

### **Call for Submissions -- CES4Health.info**

**Diverse products of CBPR focused on immigrant and refugee health for themed edition of**

[http://CES4Health.info/!](http://CES4Health.info/)

**Deadline: December 1, 2010**

CES4Health.info is an exciting new online mechanism for peer-reviewed publication and dissemination of products of CBPR that are in forms other than journal articles, including photovoice exhibits, policy briefs, toolkits, training manuals, videos and more. We encourage members of the CHSP community to submit products for review and apply to be a peer reviewers. Submissions are considered at any time, but those for the themed edition must be received by Dec 1

### **Call for Papers - Health Psychology**

#### **Special Series on Health Disparities**

**Deadlines: January 15, 2011 and February 15, 2011**

Based on your work in health disparities, we wanted to let you know about a new Special Series on Health Disparities that we are initiating for Health Psychology. We will publish special sections, 2-3 times a year, each consisting of 3-4 papers on a specific theme (e.g., socioeconomic status, immigration and health, disparities related to specific conditions or settings). Empirical papers are preferred although theoretical or review papers will also be considered if they make a unique contribution to understanding disparities. The goal of this special series is to encourage research that seeks to explain or address disparities, not merely to report serendipitous differences among groups. Papers across the lifespan, including pediatric samples, are encouraged. If you have papers that fit this call, we hope that you will consider sending them to us for consideration. We also hope that you will distribute the attached flyer to colleagues who may have relevant papers. There are two themes for 2011:

1). Infectious Diseases. Papers for this special series should focus on emerging public health issues such as hospital superbugs, the H1N1 pandemic, and common infections that have wide health implications (e.g. cytomegalovirus), but excluding infections that are primarily sexually transmitted (e.g., HIV, HPV). Examples of relevant topics include but are not limited to: social determinants of infection prevalence/incidence, predictors of protective behaviors (e.g. hygiene, vaccine uptake), and biopsychosocial mechanisms relevant to infectious disease susceptibility. The deadline for submitting papers for this special series is **January 15, 2011**.

2). Cancer. Papers for this special series should focus on explaining or intervening in an area of cancer disparities. Examples of relevant topics include but are not limited to: randomized clinical trials designed to impact prevention or treatment behavior, interactions among genetic and behavioral aspects in diagnosis and treatment, methods to facilitate recruitment to and participation in cancer treatment clinical trials, and factors related to obtaining informed consent for use of biospecimens among diverse groups. The deadline for submitting papers for this special series is **February 15, 2011**.

Authors should contact Anne Kazak, Ph.D. [kazak@email.chop.edu](mailto:kazak@email.chop.edu) and Elizabeth Klonoff, Ph.D. [eklonoff@sunstroke.sdsu.edu](mailto:eklonoff@sunstroke.sdsu.edu) for Cancer papers or Jos Bosch [j.a.bosch@bham.ac.uk](mailto:j.a.bosch@bham.ac.uk) for infectious disease papers to discuss potential manuscripts. Papers should be prepared in full accord with the Health Psychology Instructions to Authors and submitted through the Journal portal. All submissions will be peer reviewed, with 3-4 selected for publication in the special section. Some papers not included in a specific special section may be accepted for publication in Health Psychology as regular papers. Please indicate in the cover letter accompanying your manuscript that you would like to have the paper considered for the Special Series on Health Disparities.

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## **CAREER DEVELOPMENT**

### **Call for Reviewers - Health Resources and Services Administration (HRSA)**

<http://www.hrsa.gov/grants/reviewers>

Consider Becoming a HRSA Grant Reviewer! We are looking for doctors, dentists, nurses, pharmacists, nutritionists, medical/health educators, health researchers, psychologists, social workers, health administrators, allied health providers, economists, physician assistants, patient navigators, health facility architects and engineers, and others with experience in health care. Learn more -- read a letter from the Administrator. HRSA needs new and experienced grant reviewers with expertise in

- \* Health professions training
- \* HIV/AIDS
- \* Maternal and child health
- \* Organ transplantation
- \* Primary care for underserved people
- \* Rural health

Grant reviewers help HRSA select the best programs from competitive groups of applicants. Reviewers are chosen for specific grant programs based on their knowledge, education and experience. Grant

review panels are selected to reflect diversity of ethnicity, gender, experience and geography. Reviewers use their expertise to objectively evaluate and score applications against published evaluation criteria. Reviewers gain understanding of the grant-making process while enjoying the opportunity to network with colleagues. HRSA grant reviews usually are held in the Washington, DC metropolitan area and last for 3 to 5 days. Some reviews are conducted via teleconference or field reader reviews (a type of objective review approach where reviewers independently review applications from where they are based, with no group discussion of the applications). HRSA makes all logistical arrangements and pays for travel expenses and other costs. Each reviewer receives an honorarium.

**Call for Papers - Maternal and Child Health Journal  
Deadline: September 10, 2010**

We are putting together a supplement for submission to the Maternal and Child Health Journal, devoted to national, regional and state-level analyses of the 2007 National Survey of Children's Health (NSCH). If you are interested in contributing to the articles for this proposed supplement, please contact either Drs. Michael Kogan ([mkogan@hrsa.gov](mailto:mkogan@hrsa.gov)) Reem Ghandour ([rghandour@hrsa.gov](mailto:rghandour@hrsa.gov)) or Ashley Schempf ([aschempf@hrsa.gov](mailto:aschempf@hrsa.gov)). At this point, only a proposed title, authorship list, and up to one page outlining your research are required, however data analysis results are welcome. Please send this information by September 10, 2010. The submissions will be evaluated based on contributions to the literature, soundness of proposed methods, and level of analysis (national, regional, or state). We would also welcome proposals that examine time trends and their determinants between the 2003 and 2007 National Surveys of Children's Health. We will contact you within two weeks if your topic has been selected, and a schedule for completing the manuscripts will be determined. Sponsored by the Health <http://www.mchb.hrsa.gov> Resources and Services Administration's Maternal and Child Health Bureau, the 2007 NSCH is the second such survey to be conducted and examines the physical and emotional health of children ages 0-17 years of age. Special emphasis is placed on factors that may relate to well-being of children, including medical homes, family interactions, parental health, school and after-school experiences, and safe neighborhoods. The survey includes data for 91,642 children (about 1,700 per state). The data can be accessed either through: <http://www.nschdata.org/Content/Default.aspx> or <http://www.cdc.gov/nchs/slait/nsch.htm>. If you work in a state or local MCH department, the Health Resources and Services Administration's Maternal and Child Health Bureau and the Centers for Disease Control and Prevention are sponsoring a program to assist people with writing manuscripts for publication. If your topic is chosen, and would like assistance in preparing a manuscript on state-level data from this data set, please contact Michael Kogan.

**Call for Nominations - Kellogg Fellows Leadership Alliance (KFLA)  
Matusak Courageous Leadership and Ray Gatchalian Spirit of Leadership Awards  
Deadline: September 15, 2010**

Every two years the KFLA uses its Forum to honor two individuals for their leadership. Through these awards we endeavor to recognize models of courageous leadership, both within our alumni network and the broader communities in which Fellows are active. Nominations for both the "Courageous Leadership Award" and the "Spirit of Leadership Award" are being accepted through September 15, 2010. Download the forms and nominate someone today!

**Call for Abstracts -- African Regional Conference on Community University Partnerships and  
Community Based Research  
Cheikh Anta Diop University  
Dakar, Senegal  
March 25-26, 2011,  
Deadline: September 30, 2010**

The Cheikh Anta Diop University of Dakar (UCAD) in collaboration with The Community University Partnership Programme (CUPP) at the University of Brighton and the Sub-Saharan Africa Participatory Research Network (REPAS) are organizing a conference on Community University Partnerships. The conference will take place at the UCAD II Conference Center, Cheikh Anta Diop University Dakar in Senegal and will be presided over by the Senegalese Head of State, his Excellency President Abdoulaye Wade. Aim: The purpose of the conference is to bring together students, scholars, civil society organizations and local communities to exchange experiences and practices of community-university partnership activities with a focus on the Africa region. The conference forms part of a joint British Council funded project on Student Community Engagement for Employability and Entrepreneurship with concrete examples from the Africa Region. Themes: Within the broad theme of Community University partnerships we invite traditional academic papers, policy and practice papers and

demonstration projects related (although not necessarily limited) to the following settings and sub-themes:

- \* Students participation and involvement in local empowerment programmes;
- \* Implementation of Students Research Projects in local Communities;
- \* Societal impact of student research projects in local communities;
- \* Lessons learnt from student-community interaction;
- \* Adult Education and Development in Africa;
- \* Universities and Development.

Guidelines for abstracts: Presenters are asked to submit a 300-word abstract of their presentation by September 30th 2010. The abstract should also indicate the relation of the presentation to the above themes, as well as the format of the presentation. We particularly encourage joint submissions from academics and community practitioners or from students who have participated in community university activities. Abstracts can be submitted in English or French. Please, send your abstract as a Word attachment including a short bio to: [kane\\_lamine@hotmail.com](mailto:kane_lamine@hotmail.com); subject line: UCAD-CUPP Regional Conference/ Call for Papers Sessions. All sessions will last 90 minutes and will be designated in four categories:

- \* Workshops
- \* Dramatic presentations
- \* Paper/project presentations
- \* Roundtables

**Workshops** - The goal of a participatory, experiential workshop is the involvement of workshop participants in a discussion or other exercise designed to learn, communicate, debate, etc. We encourage workshops that are led jointly by academic and community based colleagues. Workshop presentations should be limited to the first 30 minutes of the workshop period and proposals should indicate how leaders intend to involve others in discussions or activities.

**Dramatic presentations** - This category includes a variety of dramatic representations, including theatre, video, poetry, role-playing, music, or a combination of different genres. The session should allow audience participation, be it during the performance (e.g. forum theatre) or after it.

**Paper/Project Presentations** - These sessions are designed for people to present their research, projects, ideas, accomplishment and failures. It could be a description of a project, a completed research, a study in progress, or a theoretical discussion. Qualifying presentations will be grouped together based on subject, geography or other thematic considerations by the committee. Each session will have 2 presentations of 20 minutes each, with approximately 50 minutes for Q&A and discussion.

**Roundtables** - Roundtables rely prominently on the ideas of four or five panellists, facilitated by a moderator. Adequate time should be allotted for audience participation and Q&A, but it need not be the primary focus, as in a participatory workshop. Priority will be given to panels that reflect diversity of opinions, backgrounds and geography. **Submission of papers:** Presenters who would like their papers to be considered for inclusion in a post-conference publication are asked to send their paper before December 30th 2010. Papers should not exceed 3,500 words (excluding references).

All papers will be subjected to an anonymous, full refereeing process before publication. For more information, visit <http://bit.ly/aznUOU>

**Call for Papers - American Journal of Public Health  
Science and Policy Issues in Environmental Justice  
Deadline: October 1, 2010**

The American Journal of Public Health (AJPH) intends to publish a theme issue on the science of environmental justice and health disparities and the policy applications of science to address environmental justice. Papers are invited on the following topic areas: state of the science and knowledge on factors that contribute to environmental injustice and environmental health disparities in minority, low income and tribal populations. We also invite original research papers featuring the contributions of social context to differential environmental exposures in vulnerable populations, community or population group vulnerability to environmental hazards, and risk/health impacts resulting from environmental exposures. Other topics of interest are analytic and decision-making tools and frameworks for incorporating environmental justice into environmental health policy. Case studies of successful incorporation of environmental justice principles in environmental decision making, integrated strategies in research and policy to develop effective interventions, or other promising practices are also invited. All selected authors are encouraged to consider the different categories of manuscripts as indicated on the AJPH website.

All manuscripts will undergo the standard peer review process by the AJPH editors and peer referees as defined by AJPH policy. Manuscripts will be due to the Journal on October 1, 2010, and can be submitted at <http://submit.ajph.org>. For more information about this supplement please contact the guest

editors at [Symposiumpapers@epa.gov](mailto:Symposiumpapers@epa.gov). Guest Editors: Devon Payne-Sturges, DrPH, National Center for Environmental Research, US Environmental Protection Agency; Onyemaechi Nweke, DrPH, Office of Environmental Justice, US Environmental Protection Agency; Irene Dankwa-Mullan, MD MPH, National Institutes of Health, National Center on Minority Health and Health Disparities.

**Call for Workshops -- 2011 National Farmworker Health Conference  
Manejo del Crecimiento (Managing Growth): Migrant Health Programs and Partners  
Delray Beach Marriott, FL**

**May 11-13, 2011**

**Deadline: October 1, 2010**

**Submit Workshop Proposal**

Conference Overview: Health care reform will bring many changes to the health care system and will lead the way for a transformation of how health care is delivered in the United States and the territories. Community, migrant, homeless, and public housing programs will be looked upon to expand services for 45 million patients by 2015. This unprecedented growth under health care reform will require that migrant health programs are aware of the opportunities, the challenges, and the paths to managing growth for their organizations, their patients, and their communities. We at NACHC are planning a 2011 National Farmworker Health Conference that will assist the migrant health community meet those challenges. We invite you to join us in our efforts and submit workshop proposals on the following topics and others that you may find of relevance to the migrant health programs and migrant and seasonal farmworker populations:

Program Specific

Health Care Reform (HCR)

Portability

Funding Opportunities

Shortage designation

Pesticides

Occupational Safety Health Administration (OSHA)

U.S. Department of Agriculture Programs(USDA)

Medicaid/Children's Health Insurance Program (CHIP)/Medicare

National Advisory Council on Migrant Health

Medical Homes/Accountable Care Organizations

Farmworker (FW) program partners/advocacy

Operations Specific

EHR meaningful use

Planning for growth - successful applications (migrant)

Integrated delivery services

Outreach

Community Health Worker (CHW)/Promotoras

Accreditations

Board

Migrant Health (MH) 101

Clinical

Performance measures

Health Plan

Telehealth

Delivery models

Behavioral/substance abuse

Population Disease management

Submission Deadline: The deadline for the final round in the Call for Workshops for the 2010 National Farmworker Health (Farmworker) Conference is October 1, 2010. Submission Process: To submit your

workshop proposal for the 2011 Farmworker Conference, go to [www.NACHCLiveLEARNING.com](http://www.NACHCLiveLEARNING.com) and click, Submit Workshop Proposal. Or, click [here](#). For more information, contact: John Ruiz [jruiz@nachc.com](mailto:jruiz@nachc.com) or Carla Brathwaite [cbrathwaite@nachc.com](mailto:cbrathwaite@nachc.com), or call(301) 347-0400.

### **CES4Health.info**

**Deadline: December 1, 2010**

Do you -- or your faculty, students or community colleagues -- have products from community-based participatory research, service-learning or other community-engaged projects focused on immigrant and refugee health that are in forms other than journal articles? CES4Health.info is an online mechanism for peer-reviewing, publishing and disseminating diverse products of community-engaged scholarship (CES) that are in forms other than journal articles. The results of CES are often disseminated through diverse products that are accessible and useful to community members and policy makers, such as photovoice exhibits, policy briefs, educational videos and podcasts. CES also often leads to the development of tools that can assist others in implementing or adapting the project in their communities, such as assessment instruments, instructional manuals and patient education materials. For example, a journal article might present data on the effectiveness of a community intervention for increasing cervical cancer screening among Hmong women, but would not provide a detailed description of the intervention, how it could be implemented elsewhere, how to train individuals to deliver it, or how to gain the attention of policy makers who might provide resources to take it to scale state-wide. This sort of information, however, in the form of products such as resource guides, training manuals, educational DVDs and policy reports, is critical to communities that may wish to act upon it. By disseminating an array of products that have been reviewed and deemed to be high quality by community and academic peers, CES4Health.info provides individuals working to improve health in their communities with accessible, useful information that they typically cannot find in journals. The first 20 products published through CES4Health.info - including an educational film about health disparities in post-Katrina New Orleans and an evidence-based online curriculum for developing community-based participatory research partnerships - reflect the depth and breadth of knowledge made possible through community-engaged scholarship. CES4Health.info provides authors with a meaningful measure of impact by tracking how often their product is accessed and how it is used. Authors can note products in the peer-reviewed publications section of their curriculum vitae or resume. The Editor also notifies individuals named by the author (e.g., dean, promotion and tenure committee chair, supervisor) about the publication and the rigor of the peer review process. CES4Health.info is publishing a set of diverse products of community-engaged scholarship in immigrant and refugee health in Spring 2011. Submissions are due December 1, 2010 and involve completing an online application and uploading the product or providing a link to it. Products in English from anywhere in the world will be considered. For questions about product submission or the appropriateness of a product, visit the Author Frequently Asked Questions page at <http://www.ces4health.info/faq/author-faq.aspx> or contact Editor Cathy Jordan at [editor@CES4Health.info](mailto:editor@CES4Health.info). For more information about the development of this unique publication outlet, read the article CES4Health: Development of a Peer-Review Mechanism for Disseminating Innovative Products of Community-Engaged Scholarship appearing in the International Journal of Prevention Practice and Research.

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## **CONFERENCES AND EVENTS**

### **Community-Based Public Health Caucus - APHA Learning Institutes Building Bridges from CBPR to Collaborative Community Policymaking - LI #1007 Denver, CO**

**November 6, 2010, 1:30 p.m.-5:00 p.m.**

This learning institute will explore how collaborative community-driven policy design can provide an empowering bridge between research and action. It will also help participants understand how to navigate that bridge by discussing the continuum of community-engaged research and policy advocacy, and the need to structure partnerships in accord with specific kinds of community action/research objectives, with close attention to the equitable structuring of power relationships.

#### Presenters:

**Cassandra Ritas, MPP**, Peoples Policy Institute

Collaborative policy design for community-based health partnerships.

**Kent Key, BBA**, Flint Odyssey House Health Awareness Center

How current institutional practices/policies may threaten the existence of authentic CBPR partnerships, policy and products: A community perspective

**Shawn D. Kimmel PhD**, Center for Community-driven Policymaking

Key challenges to structuring effective frameworks for community-driven policy research  
To attend the APHA-LI courses, a separate registration fee of \$200 is required. The APHA 2010 Annual Meeting registration opens June 1. Registration information may be accessed on this date at [www.apha.org/meetings/registration](http://www.apha.org/meetings/registration). Contact Shawn Kimmel at [skimmel@umich.edu](mailto:skimmel@umich.edu) with any questions.

### **ESRI Health GIS Conference**

**Westin Tabor**

**Denver, CO**

**October 18-20, 2010**

Esri Health GIS Conference. The conference is your opportunity to network, exchange ideas, and learn firsthand how geospatial technology is shaping global health.

A knowledgeable group of speakers will join us:

- [Michael Byrne](#) - Geographic Information Officer, Federal Communications Commission
- [Amy Hillier](#) - Assistant Professor, PennDesign Department of City and Regional Planning
- [Michael S. Johnson](#) - Director, Utility for Care Data Analysis, Kaiser Foundation Health Plan, Inc.

You can also hear paper presentations and attend technical workshops on enterprise GIS as well as GIS for routing and location, spatial statistics, or the Web. To register:

[http://www.esri.com/events/health/registration/index.html?utm\\_medium=esriemail](http://www.esri.com/events/health/registration/index.html?utm_medium=esriemail).

### **Kellogg Fellows Leadership Alliance**

**Race, Ethnicity & Ancestry and Mobility, Migration & Human Rights**

***A 21st Century Leadership Vision on Justice, Rights & Equity***

**November 10-13, 2010**

**Santa Ana Pueblo, NM**

**Deadline: October 15, 2010**

Join leaders from the Kellogg Fellows network and the Annie E. Casey Fellows to engage in the dynamic issues of race, ethnicity, ancestry and migration and to discover the opportunities for innovation, coalition building and leadership capacity development to advance your work and amplify its impact.

Presentations and facilitated dialogues are designed to increase knowledge about current trends and issues and to encourage leaders to incorporate the knowledge gained and tools learned into their own communities in order to secure justice, rights & equity. Casey and Kellogg Fellows will co-present and co-facilitate workshops on racialization, ancestry and self-determination, immigration and migration, all focusing on the social policies and structural dimensions that affect families and communities.

Participants will have a rare opportunity to explore the complex issues of community and identity through a visit to a feast day celebration at the Jemez Pueblo. Our own Kellogg Fellow, Benny Shendo (KNLP-16) is a member of the Jemez Pueblo and will provide insight into the significance of the celebrations.

The Pueblo only opens its doors once a year for this particular event and we are honored to have the opportunity to bring the Kellogg and Casey communities to share this special day with the Jemez community.

**Dates:** November 10 (6 p.m. Reception) to November 13 (departure day)

**Participants:** Kellogg and Annie E. Casey Fellows

**Registration cost:** Subsidized cost for Kellogg Fellows is \$325 (\$700 for collaborators and guests) (Includes three nights lodging, most meals, conference materials, and transportation to the Jemez Pueblo. Not included: Flight and ground transportation to Hyatt Tamaya)

Limited scholarships are available. Email [michelle@kelloggfellows.org](mailto:michelle@kelloggfellows.org) for information.

Thank you to our supporters who make the registration subsidy and scholarship program possible!

**Location:** Hyatt Tamaya at the Santa Ana Pueblo, New Mexico

(35 miles north of the Albuquerque airport)

**Travel options to the Hyatt Tamaya:** Rental car, taxi, or shuttle

(Suggested shuttle at NewMexi Tour: 888-355-8687 [newmexitour@yahoo.com](mailto:newmexitour@yahoo.com))

**Registration deadline:** [Register online](#) by October 15 to secure your hotel room.

### **Kellogg Fellows Leadership Alliance**

**Forum 11: Civic Engagement - Leadership for the Common Good**

**Washington, DC**

**March 2-5, 2011**

In the fourth biannual Forum, KFLA focuses on the courageous choices involved in civic engagement as a continuation of our exploration of the **Intersection of Hope and Action** (Forum '09), **Democracy** (Forum '07), and **Building Currents** (Forum '05).

Your 2011 program uses the backdrop of Washington DC to tease the threads of civic engagement in

four tracks:

[Education](#)  
[Health](#)

[Environment](#)  
[Justice](#)

Each one links processes, policies and products as they intrinsically relate to civic engagement as well as the inherent interdependencies between track themes. Far from just focusing on national movements, Fellows and a mentee will experience Forum through diverse expressions of participation as it is practiced globally, from international organizations to local grassroots movements.

*An Event For Impact*

Our Forum team has planned an experiential, professional conference for Kellogg Fellows, collaborators, and importantly, your mentees, to engage in meaningful discourse about civic participation- what it means, what it can accomplish, and how it is passed from one generation to the next. A dynamic Forum '11 program has been designed around four goals:

**CONNECT, COLLABORATE WITH, AND ENGAGE NEW COMMUNITIES**

Forum activities and conversations will strengthen networks between individuals within an affinity group and across affinity groups, including Kellogg Fellows, alum from other fellowship groups, mentees, and collaborative partners, to further our capacity to serve one another.

**PROVIDE SKILL-BUILDING OPPORTUNITIES**

Forum is a means to strengthen skills by exploring what promotes civic engagement in other cultures and communities, and by examining best practices that can be adapted elsewhere.

**CATALYZE CIVIC ENGAGEMENT**

Forum is designed to inspire individuals and organizations to act through a deeper understanding of civic engagement and mobilize to step-up involvement in community building, public decision-making, and the democratic process.

**CREATE IMPACT**

Each track at Forum will take a critical look at process, policy, and products in regards to how they can impact the civic engagement of attendees, the host community, and the communities into which we disperse after Forum.

Announcement details at <http://www.kfla.org/programs/?p=p&c=194>.

**National Institutes of Health**

**4<sup>th</sup> Annual NIH Conference on the**

**Science of Dissemination and Implementation: Policy and Practice**

**Bethesda North Marriott Hotel & Conference Center**

**5701 Marinelli Road**

**Bethesda, MD**

**March 21-22, 2011**

**Deadline: February 18, 2011, 11:59 p.m. Eastern Time**

There is no fee to register for this conference. Please note: this year's conference will NOT be available for viewing online. Conference registration deadline: 11:59 PM Eastern Time on February 18, 2011.

There is a recognized need to close the gap between research evidence and clinical and public health practice and policy. How is this best accomplished? Dissemination and implementation research in health seeks to answer this question, and is gaining momentum as a field of scientific inquiry. The goal of the annual NIH Conference on the Science of Dissemination and Implementation is to facilitate growth in the research base by providing a forum for communicating and networking about the science of dissemination and implementation. Researchers, evaluators and implementers who are interested in identifying opportunities and strategies for overcoming obstacles for dissemination and implementation research/evaluation are encouraged to attend this meeting. The goal is to engage in dialog, exchange ideas, explore contemporary topics and challenge one another to identify and test research approaches that will advance dissemination and implementation science.

**Society for the Analysis of African American Public Health Issues 2010 Annual Meeting**

**Hyatt Regency Celestial Ballroom H**

**November 6, 2010 (in conjunction with the APHA Annual Meeting)**

**Denver, CO**

**Save the Date!**

SAAAPH Annual Meeting Agenda

8:00-8:30 -- Breakfast

8:30-8:35 - Welcome, Chandra Ford, SAAPHI President (and Kellogg Health Scholars Program alumna)

8:35-10:30 -- "Critical Race Theory: What is it and how does it apply to public health?"

Moderator: Rebecca Hasson, SAAPHI President-Elect (and Kellogg Health Scholar)

\* Collins Airhihenbwa- Pennsylvania State University

\* Chandra Ford- University of California Los Angeles  
\* Camara Phyllis Jones- Centers for Disease Control and Prevention  
\* Jay Pearson- University of California San Francisco (Kellogg Health Scholar)  
10:30-10:45 -- Break  
10:45-11:45 -- Scientific Symposium, Moderator: Valerie Rock, SAAPHI Scientific Review Committee  
§ Presenter #1  
§ Presenter #2  
§ Presenter #3  
§ Presenter #4  
11:45-12:00 -- Presentation of Student Awards, Jessie Richardson-Hood, SAAPHI Scientific Review Committee  
12:00-1:00 -- Lunch  
1:00-2:45 -- Business meeting  
2:45-3:00 -- SAAPHI President's Remarks and Rewards  
3:00 -- Meeting Concludes  
3:00-5:00 -- APHA candidate forum - on your own  
4:00-6:00 -- APHA policy meetings - on your own  
6:00-8:00 -- Robert Wood Johnson Foundation New Connections Reception

### **University of Maryland**

#### **Public Responsibility in Medicine & Research (PRIM&R): Presents 2010 Pre-Conference Workshop**

Listening to the Voices of Minorities and Researchers on Building Trust and Capacity for Respectful Engagement pre-conference program. This program is critical to all research professionals looking to bolster their understanding of community-engaged research. The pre-conference program features a curriculum designed to build capacity to engage minority participants in research. This full-day program will include both didactic and experiential components from the NIH Bioethics Research Infrastructure Initiative: Building Trust Between Minorities and Researchers. In the morning, the principal investigators of this initiative will discuss the results of a survey of researchers and IRB members concerning their experience with minority participation in research. They will then present components of their curriculum aimed at building the capacity of researchers and IRBs to engage more effectively with minority communities. In the afternoon, the faculty will present selected results from a national survey of African Americans and Latinos, followed by an interactive session based on a curriculum for community members. This workshop is one of several educational programs that PRIM&R will offer in collaboration with the University of Maryland as part of a research grant awarded by the National Center on Minority Health and Health Disparities of the NIH. Faculty: Stephen B. Thomas, PhD and Sandra Crouse Quinn, PhD The University of Maryland Center for Health Equity and the School of Public Health  
<http://healthequity.umd.edu/>. CLICK BELOW FOR DETAILS:

[http://www.magnetmail.net/actions/email\\_web\\_version.cfm?recipient\\_id=625348294&message\\_id=1116533&user\\_id=PRIMR](http://www.magnetmail.net/actions/email_web_version.cfm?recipient_id=625348294&message_id=1116533&user_id=PRIMR)

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## **RESOURCES**

### **Publications**

**Census Bureau Releases Report - September 2010  
Income, Poverty, and Health Insurance Coverage in the United States: 2009  
Available online PDF [88p.] at <http://bit.ly/bv3dOx>**

DeNavas-Walt, Carmen, Bernadette D. Proctor, and Jessica C. Smith

U.S. Census Bureau, Current Population Reports, P60-238

U.S. Government Printing Office, Washington, DC, 2010.

".....This report presents data on income, poverty, and health insurance coverage in the United States based on information collected in the 2010 and earlier Current Population Survey Annual Social and Economic Supplements (CPS ASEC) conducted by the U.S. Census Bureau.

Summary of findings:

- The median household income in 2009 was not statistically different from the 2008 median in real terms.<sup>1</sup>
  - The poverty rate increased between 2008 and 2009.
  - The uninsured rate and number of people without health insurance increased between 2008 and 2009.
- These results were not uniform across groups "

## Reports and Data Tables

- [News Release | Spanish](#)
- Current Population Survey (CPS):  
[Income, Poverty and Health Insurance Coverage in the United States: 2009 \[PDF\]](#)  
[Income data](#)  
[Poverty data](#)  
[Health Insurance data](#)

## Presentations

- Stan Rolark (Introduction) [Biography](#)
- David Johnson (Data presentation)  
[Remarks \[doc\]](#) | [Slides \[pdf\]](#) | [Slides with Plot Points \[pdf\]](#)

## Fact Sheets

- [Income and Poverty Fact Sheet \[PDF\]](#)
- [Health Insurance Fact Sheet \[PDF\]](#)

## Other

- [Census Bureau Blog Entry: Income, Poverty and Health Insurance](#)

**Handbook of Engaged Scholarship Now Available!** CCPH members save 25% on these 2 volumes published by Michigan State University Press. Contributors capture the rich diversity of institutions and partnerships that characterize the contemporary landscape and the future of engaged scholarship. For Volume 1 table of contents, click here: [http://msupress.msu.edu/pdfs/handbook%20vol%201\\_contents.pdf](http://msupress.msu.edu/pdfs/handbook%20vol%201_contents.pdf). For Volume 2 table of contents, click here [link to [http://msupress.msu.edu/pdfs/handbook%20vol%202\\_contents.pdf](http://msupress.msu.edu/pdfs/handbook%20vol%202_contents.pdf). Not yet a CCPH member? Join today at <http://depts.washington.edu/ccph/members.html#BecomeAMember>. Visit <http://depts.washington.edu/ccph/books.html> for info on the many publication discounts that CCPH members enjoy!

## Handbook on impact evaluation : quantitative methods and practices

Available online PDF [262p.] at: <http://bit.ly/b5x0b4>

Shahidur R. Khandker, Gayatri B. Koolwal, Hussain A. Samad

2010 The International Bank for Reconstruction and Development / The World Bank

".....This book reviews quantitative methods and models of impact evaluation. The formal literature on impact evaluation methods and practices is large, with a few useful overviews. Yet there is a need to put the theory into practice in a hands-on fashion for practitioners. This book also details challenges and goals in other realms of evaluation, including monitoring and evaluation (M&E), operational evaluation, and mixed-methods approaches combining quantitative and qualitative analyses.

This book is organized as follows

- **Chapter two** reviews the basic issues pertaining to an evaluation of an intervention to reach certain targets and goals. It distinguishes impact evaluation from related concepts such as M&E, operational evaluation, qualitative versus quantitative evaluation, and ex-ante versus ex post impact evaluation.
- **Chapter three** focuses on the experimental design of an impact evaluation, discussing its strengths and shortcomings. Various non-experimental methods exist as well, each of which are discussed in turn through chapters four to seven.
- **Chapter four** examines matching methods, including the propensity score matching technique.
- **Chapter five** deal with double-difference methods in the context of panel data, which relax some of the assumptions on the potential sources of selection bias.
- **Chapter six** reviews the instrumental variable method, which further relaxes assumptions on self-selection.
- **Chapter seven** examines regression discontinuity and pipeline methods, which exploit the design of the program itself as potential sources of identification of program impacts.
- **Chapter eight** presents a discussion of how distributional impacts of programs can be measured, including new techniques related to quintile regression.
- **Chapter nine** discusses structural approaches to program evaluation, including economic models that can lay the groundwork for estimating direct and indirect effects of a program.
- Finally, **chapter ten** discusses the strengths and weaknesses of experimental and non-experimental methods and also highlights the usefulness of impact evaluation tools in policy making....."

## **Linking Health Inequality and Environmental Justice: Articulating a Precautionary Framework for Research and Action**

**Link to article:** <http://www.liebertonline.com/doi/full/10.1089/env.2009.0044>

Sarah E.L. Wakefield, Jamie Baxter. Environmental Justice. September 2010, 3(3): 95-102.  
doi:10.1089/env.2009.0044.

**Abstract:** This article draws together three issues: the environment, health, and (in)justice with the overall purpose of articulating an agenda for policy and research that works towards improved justice and sustainability in the environmental health arena. Considerable research in the United States and elsewhere has shown that both environmental exposures and poor health are more prevalent in populations that are marginalized by race and social class (typically measured as income). The logical next step has been to attempt to establish concrete cause-effect links between health effects and environmental exposures in order to mobilize government action to reduce these disparities. However, we caution against pursuing such causal links alone as a necessary precondition for just and sustainable environmental health policy. We instead argue for a framework that considers both environmental justice and health inequality in terms of compounded disadvantage at the community level. We support a precautionary approach to action that simultaneously pays due attention to the processes leading to injustices/inequities as well as remediating current patterns of injustice/inequity.

## **National Health Policy Forum**

### **High Hopes: Public Health Approaches to Reducing the Need for Health Care**

**Michele J. Orza, ScD, September 27, 2010**

[http://nhpf.org/library/background-papers/BP78\\_PublicHealthApproaches\\_09-27-10.pdf](http://nhpf.org/library/background-papers/BP78_PublicHealthApproaches_09-27-10.pdf)

**Summary:** Driven in part by a desire to contain health care costs, policymakers are looking beyond medical care for opportunities to reduce the need for expensive services. This paper briefly reviews current public health concepts and strategies for improving health that emphasize nonmedical factors such as behavior, socioeconomic status, and environment. It also provides examples of how these concepts and strategies undergird many of the public health provisions of the Patient Protection and Affordable Care Act, other legislation, and several programs and initiatives. These concepts include prevention, health in all policies, global health, the One Health Initiative, and climate change and health.

## **Prevention Institute**

### **Prevention is Primary: Strategies for Community Well-Being, 2<sup>nd</sup> edition**

<http://www.preventioninstitute.org/component/jlibrary/article/id-102/127.html>

Prevention Institute <<http://preventioninstitute.org/>> is pleased to announce the updated and revised Second Edition of "Prevention is Primary: Strategies for Community Well-Being." Written for a broad audience, Prevention is Primary arrives in time to prepare public health advocates, the primary care workforce, and community-based organizations to fully participate in the new national conversation on health. Equipped with best-practices, concrete prevention tools, and strategies to strengthen community efforts, Prevention is Primary helps you to:

\*Expand your application of primary prevention\* with a new chapter, "Mental Health in the Realm of Primary Prevention" (Kellogg Health Scholars Program alumni Anita Wells, GiShawn Mance and Taqi Tirmazi), including strategies to address mental health needs of veterans returning from Iraq and Afghanistan.

\*Connect safety to prevention\* with a fully updated and revised chapter on "A Public Health Approach to Preventing Violence" (Deborah Prothrow-Stith and Rachel Davis).

\*Prepare to address industry practices\* with a new chapter on "The Impact of Corporate Practice on Health and Health Policy" (Nicholas Freudenberg and Sandro Galea); including a sidebar on the work of international infant feeding pioneer, Patti Rundall.

Emphasizing the importance of cross-disciplinary collaboration, Prevention is Primary covers a broad set of topics and examples, making it accessible and useful for both students and professionals in the fields of health policy, social policy, and medicine, to name a few. The text describes the overarching foundation and principles guiding primary prevention efforts and highlights prevention practice through a range of social and health issues, including chronic disease, HIV, violence and mental health. Order your copy today from our website and receive fifteen dollars off the cover price. And let us know what you think!

[https://org2.democracynaction.org/o/5902/t/8278/shop/item.jsp?storefront\\_KEY=139&t=&store\\_item\\_KEY=619>%20<raquel@preventioninstitute.org?subject=Prevention%20is%20Primary,%202nd%20edition](https://org2.democracynaction.org/o/5902/t/8278/shop/item.jsp?storefront_KEY=139&t=&store_item_KEY=619>%20<raquel@preventioninstitute.org?subject=Prevention%20is%20Primary,%202nd%20edition)

## **Segregation and Exposure to High Poverty Schools in Large Metropolitan Areas: 2008-09**

**Available online PDF [23p.] at: <http://bit.ly/bG8xAd>**

Nancy McArdle, Theresa Osypuk, and Dolores Acevedo-García

Diversitydata.org and Harvard School of Public Health supported by the W.K. Kellogg Foundation  
September 2010

*A new report published by [www.diversitydata.org](http://www.diversitydata.org), ranks public, primary schools in the 100 largest U.S. metropolitan according to racial/ethnic segregation and exposure to concentrated poverty schools.*

".....Schools are a key environment influencing child development, and research has documented the negative effects of concentrated poverty schools as well as the advantages of racially/ethnically diverse learning environments. This report describes patterns of school segregation and poverty concentration of 30,989 public primary schools in the 100 largest metropolitan areas for the 2008-09 school year.

Findings include:

- Enrollment is already "majority-minority" nationally but differs substantially across regions, with the West being almost two-thirds minority.
- Residential segregation and school assignment plans lead to high levels of school racial segregation, particularly for blacks.
- Metropolitan areas with the highest school poverty rates are concentrated in California and the Deep South.
- 43 percent of black and Hispanic students attend schools with poverty rates over 80 percent, compared to 4 percent of white students.
- Even within the same metro areas, black and Hispanic students attend schools with dramatically higher poverty rates than whites or Asians.
- Bridgeport and Hartford have the largest disparities.
- To address inequalities, policies must lead to stronger enforcement of fair housing laws, improving school and neighborhood quality, and allowing students to cross district boundaries to attend better schools.

The report is based on data drawn the diversitydata.org website. Designed for use by the public, the media, and researchers, diversitydata.org goes beyond many similar demographic websites by including information on school characteristics such as racial/ethnic composition, segregation, and exposure to high-poverty schools, as well as information on health, education, neighborhood conditions, and housing opportunities. Additionally, the website has interactive features allowing any user to easily create profiles for specific metropolitan areas, as well as customized rankings according to chosen indicators. ...."

Website: <http://diversitydata.sph.harvard.edu/>

### **The Kaiser Family Foundation**

#### **[Health Reform and Communities of Color: Implications for Racial and Ethnic Health Disparities.](#)**

This issue brief examines the key provisions of the 2010 health reform law that will expand health coverage and improve access to care for people of color. It also looks at some of the other provisions that will likely have either a direct or indirect impact on health disparities.

### **The Kaiser Family Foundation's Commission on Medicaid and the Uninsured**

#### **[Community Health Centers: Opportunities and Challenges of Health Reform](#)**

<http://www.kff.org/uninsured/8098.cfm>

[Community Health Centers: Opportunities and Challenges of Health Reform](#) describes the provisions of the new health reform law that affect community health centers, including increased funding designed to expand the number of health centers, health insurance expansions that will significantly reduce the number of health center patients without insurance, and strategies aimed at increasing the primary care workforce. The brief also discusses some of the opportunities and challenges for the health centers, such as the task of recruiting and retaining qualified health professionals, the need to establish networks and referral arrangements and the renewed focus on prevention and public health that has long been at the core of health centers' work. Community health centers play an important role in our health care system-nearly 1,100 federally funded health centers provided comprehensive primary health care to more than 17.1 million people from medically underserved populations in 2008. The [report](#) was prepared by researchers at the Kaiser Family Foundation and the Geiger Gibson/RCHN Community Health Foundation Research Collaborative at The George Washington University School of Public Health and Health Services.

### **Websites**

#### **TESS**

**Time-Sharing Experiments for the Social Sciences**

<http://tess.experimentcentral.org/>

TESS is a great resource for social psychologists. Time-sharing Experiments for the Social Sciences (TESS) is an NSF-supported infrastructure project that enables scholars (including graduate students, post-docs, and faculty) to conduct original experiments on nationally representative samples at no cost to the investigator. TESS proposals are peer-reviewed, and successful projects are fielded using a nationally-representative Internet survey panel (Knowledge Networks). This platform offers the opportunity for surveys of the general United States population, as well as specific subpopulations that are often challenging for researchers to study. The application process is simple, and the turn-around time is generally quite fast -- and our expanded capabilities mean that scholars can now conduct more complicated experiments than in the past.

## **Others**

### **Break Free Alliance**

[www.breakfreealliance.org](http://www.breakfreealliance.org)

Break Free Alliance is a national network of tobacco control experts and organizations who provide service to low socioeconomic status populations. The Alliance is one of six national networks making up the National Networks Consortium funded by the Centers for Disease Control and Prevention, Office on Smoking and Health. The focus of the Alliance is on developing recommendations and resources for populations with high tobacco use prevalence rates including the incarcerated, homeless, and individuals in substance abuse treatment. Please contact us if you have an interest in studying tobacco use in these specific populations. I'm currently putting together a searchable directory of those with expertise in addressing tobacco issues among low SES populations, so please do let me know if you are doing research in this area and would like to be listed. Additionally, we will be attending the APHA Annual meeting and would be interested in taking the opportunity to meet with researchers to discuss future opportunities. Please contact Lisa Houston at [lhouston@healthedcouncil.org](mailto:lhouston@healthedcouncil.org) or 916-556-3344. Visit us online at [www.breakfreealliance.org](http://www.breakfreealliance.org) and you can also sign up to become an Alliance stakeholder/partner if interested.

### **CCPH Online Database of Faculty Mentors & Portfolio Reviewers**

Are You Going Up for Promotion or Tenure This Year? The CCPH Online Database of Faculty Mentors & Portfolio Reviewers support individuals who are pursuing community-engaged careers in the academy. Community-engaged graduate students, post-docs and faculty are able to search the site for potential mentors and portfolio reviewers. Are you a community-engaged faculty member who is committed to the success of those coming through the pipeline behind you? Apply to be listed in the database. For details, visit <http://www.facultydatabase.info/>. The CCPH Community-Engaged Scholarship Toolkit provides tips, tools and strategies for "making the best case" for promotion and tenure: <http://www.communityengagedscholarship.info>.

### **Joint Center for Political and Economic Studies**

#### **Webinar on Patient Protection and Affordable Care Act of 2010: Advancing Health Equity for Racially and Ethnically Diverse Populations**

The Joint Center for Political and Economic Studies released a [webinar](#) for their report [Patient Protection and Affordable Care Act of 2010: Advancing Health Equity for Racially and Ethnically Diverse Populations](#). The 90-minute webinar provides a synopsis of the report along with commentary to show how populations of color are affected by the Affordable Care Act. The report provides a comprehensive look at how health reform addresses health inequities, identifying areas where the law may reduce health inequities, as well as areas where more work is needed.

### **Wellesley Institute, Toronto, Canada**

#### **Community Based Research Workshops**

Due to popular demand, Wellesley Institute in Toronto had made its community-based research (CBR) and capacity-building workshop materials freely available for public use.

**Brief History:** Wellesley Institute (WI) offered a successful CBR and capacity-building program for local researchers over a number of years. Over twenty workshops were delivered on topics spanning both the conceptual (e.g., ethics, theories in health promotion, methods, etc.) and practical aspects of CBR and capacity-building (e.g., how to conduct a literature review, how to run a focus group, how to analyze data, etc.). The workshops were very well-attended and addressed the need for local training in research and policy at an affordable price.

**Current Situation:** In 2009, WI shifted its strategic direction to focus more on population health and undertake research that more closely addresses this new focus. However, given the popularity of the

workshops and the ongoing need and demand for training in CBR and capacity-building, WI has made the workshop materials (including presentations, trainers guides and other resources) available on its website for easy downloading and adaptation to suit the needs of diverse audiences. While WI realizes that the real value of workshops is in the interaction that takes place face-to-face, the hope is that this material will still be useful for others to develop for their own purposes.

Below is a list of workshop titles - see attachments for descriptions.

For CBR workshop materials, go to <http://bit.ly/aQb0ot>

For capacity-building workshop materials, go to <http://bit.ly/br0M0Z>

Creative Commons License -- The workshops are available free for download. WI encourages the circulation of the materials as widely as possible under the open access publishing license.

Users are welcome to download, copy, distribute and transmit this work electronically or in any other format subject to the conditions set out in the Creative Commons I Attribution-Noncommercial-Alike 2.5 Canada License. In particular:

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\*Non-commercial - You may not use this work for commercial purposes.

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For full description of the license please visit <http://creativecommons.org/licenses/by-nc-sa/2.5/ca/>

#### CBR workshops

CBR 101 Introduction to Community Based Research (CBR) CBR 102 Ethical Issues in Community Based Research CBR 104 How to Run a Focus Group CBR 105 How to Conduct a Research Interview CBR 106 Developing a Client Satisfaction Survey CBR 107 How to do a Literature Review CBR 202 - Theories in Health Promotion CBR 206 -Writing Effective Letters of Intent CBR 207 Writing Effective CBR Proposals

CBR-209 Community-Based Research in Ethnoracial Communities CBR 210 Conducting CBR with Homeless Communities

CBR221 Introduction to Survey Data Analysis CBR 301 Using Community-Based Research to Affect Public Policy CBR 302 Qualitative Methods and Analysis CBR 303 Developing Survey Tools in CBR CBR 304 A Participatory Approach to Programme Evaluation CBR 306 Using Media to Drive Public Policy CBR 308 Policy Analysis from a Community Perspective CBR 310 Delivering a Policy Presentation

#### Capacity-building workshops

CAP 101 Recharge! Build Your Personal Capacity for Leadership CAP 102 Valuing Diversity CAP 103 Writing a Grant Proposal CAP 104 Introduction to Project Management CAP 105 Build Successful Alliances, Coalitions & Partnerships CAP 106 Intro to Financial Management CAP 107 Become an Effective Community CAP 108 Effective Meeting & Facilitation Skills CAP 109 Strategic Planning CAP 110 The Fine Art of Volunteer Management CAP 111 Introduction to Marketing for Non-Profits CAP 112 All About Advocacy CAP 113 Introduction to Performance Management CAP 114 Board Governance CAP 115 Introduction to Program Evaluation CAP 116 Introduction to Information Technology for Non-Profits CAP 119 Effective Supervisory Skills CAP 122 Strategies for Managing Conflict CAP 200 Letting Go of Conflict CAP 213 Conducting Performance Management Discussions

### **Social Aetiology of Mental Illness**

#### **Inaugural webinar series**

#### **Tuesdays from 11:00 a.m. to 12:00 noon Eastern**

The Social Aetiology of Mental Illness (SAMI) Training Program launches its series of webinars. SAMI is based at the Centre for Addiction and Mental Health and the University of Toronto, but includes international partners from across the globe. Funded by a strategic training grant from the CIHR, SAMI is the first centre of excellence for the study of the social determinants of mental health and addictions issues and problems. To ensure that our European and Latin American colleagues are able to attend, SAMI webinars are scheduled from 11:00 a.m. to 12:00 noon Toronto time, on Tuesdays. To register for a webinar, please visit our webinar page, which is located at:

<https://knowledgex.camh.net/researchers/areas/sami/program/Pages/webinar.aspx>.

### **U.S. Census Bureau**

#### **American Community Survey (ACS) e-Tutorial**

[http://www.census.gov/acs/www/guidance for data users/e tutorial/](http://www.census.gov/acs/www/guidance%20for%20data%20users/e%20tutorial/)

The U.S Census Bureau is pleased to announce the release of the American Community Survey (ACS) e-Tutorial. This interactive program will assist users by educating them on a wide range of topics, such as how communities benefit from participation and how to access data using American FactFinder (AFF). You can access the e-Tutorial directly [here](#) or go to the main ACS site [www.census.gov/acs](http://www.census.gov/acs) and

view the menu under "Guidance for Data Users." Correction to the ACS e-mail update regarding the Federal Register Notice: Although the web address appeared correctly, the link to the web page did not work properly for some users. To view the Federal Register notice, go to: [http://www.census.gov/acs/www/about\\_the\\_survey/operations\\_and\\_administration/](http://www.census.gov/acs/www/about_the_survey/operations_and_administration/). If you experience additional difficulties, please let us know.

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