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The Kellogg Connection is a monthly electronic newsletter that connects W.K. Kellogg programs: Kellogg Health Scholars, Scholars in Health Disparities, Community Health Scholars, Kellogg Fellows in Health Policy Research and H. Jack Geiger Congressional Health Policy Fellows.

KConnection is produced by the Kellogg Health Scholars Program, a program of the [Center for Advancing Health \(CFAH\)](#).

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SOUNDING BOARD

Congratulations Kellogg Scholars and Fellows

Barbara Krimgold was recently elected to serve as an International Society for Equity in Health (ISEqH) board member from 2012-2014.

Dr. Patricia Miranda, Kellogg Health Scholars Program alumna, recently published the article entitled "Breast Cancer Screening Trends in the United States and ethnicity" in the *Cancer, Epidemiology, Biomarkers & Prevention*, published online first, December 6, 2011; doi: 10.1158/1055-9965.EPI-11-0873. <http://cebp.aacrjournals.org/content/early/2011/12/06/1055-9965.EPI-11-0873.abstract>.

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ANNOUNCEMENTS

Mark your calendars! The 2012 KHSP Annual Meeting will be held June 6-8, 2012, at Hotel Palomar in Washington, DC. Annual meeting details are forthcoming.

Opportunity to disseminate your research findings -- The Center for Advancing Health's Health Behavior News Service (HBNS) is on the lookout for the latest research on health disparities and population health. HBNS looks to Kellogg Scholars (current and alums) and Fellows for original, health-related research such as randomized controlled trials, surveys and large pilot programs that bring attention to, explore causes of, and demonstrate interventions for health disparities. If a peer-reviewed journal has accepted your study for future publications, please email your manuscript or early draft to Marie Briones-Jones (mbjones@cfah.org) and Barbara Krimgold (bkrimgold@cfah.org). Barbara and Marie will share it with Kelly Malcom, HBNS editor, to see if your study fits the news service niche.

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SPOTLIGHT ON KELLOGG SCHOLARS NETWORK

Meet Community Health Scholars Program alumnus, Scott D. Rhodes, PhD, MPH, CHES...

Dr. Scott Rhodes is a public health scientist, whose research focuses on community development, community-campus partnerships, and health promotion and disease prevention in both rural and urban communities. He received his BA in Government at the College of William and Mary, his MPH in Health Administration at the University of South Carolina, and his PhD in Health Behavior at the University of Alabama at Birmingham. Dr. Rhodes research explores sexual health; HIV and sexually transmitted disease (STD) prevention; and health disparities among vulnerable communities, including substance use and obesity. He has extensive experience working with Latino communities; urban African American adolescents; persons living with HIV and AIDS; men of color; self-identified gay and bisexual men; and men who have sex with men (MSM).

As a Kellogg Community Health Scholar from 2001-2003 at the University of North Carolina-Chapel Hill (UNC), Dr. Rhodes worked on several projects including Men as

Question?
Have you moved?
Have you found a new job?
Is there a research question you would like feedback on?
Any recent publications?
Do you have any experience or advice to share?
Let us know! Email: healthscholars@cfah.org

Contributions:
To contribute information, resources or announcements to Kellogg Connection, e-mail kconnection@cfah.org.

Do We Have Your Most Updated Contact Information?

Please update our files if your email or mailing address has changed or will change. We want to keep our Scholars network as up-to-date and well-connected as possible! Please send any changes to mbjones@cfah.org or healthscholars@cfah.org.

Navigators (MAN) for Health, HoMBReS, and CyBER M4M. MAN for Health addressed the priorities of 3 coalition partners to improve chronic disease and sexual health outcomes among African American and Latino men through multilevel interventions. The second project, in close partnership with the Chatham Social Health Council, was designed to reduce the risk of HIV and STD infection among immigrant Latino men through the HoMBReS intervention (Hombres Manteniendo Bienestar y Relaciones Saludables or Men maintaining wellness and healthy relationships). In a final project, Dr. Rhodes partnered with Triad Health Project in Greensboro to pilot test an HIV prevention intervention for MSM who use the Internet for social and sexual networking. Dr. Rhodes is currently Principal Investigator on multiple projects including several in collaboration with his UNC partners to continue the work of HoMBReS. Recently, Dr. Rhodes was funded by CDC to explore the use of community-academic partnerships to reduce STD disparities in 4 US communities.

Last year, Dr. Rhodes was promoted to Professor with tenure within the Department of Social Sciences and Health Policy at Wake Forest University School of Medicine. Recently, Dr. Rhodes was awarded fellow status by the Board of Directors of the American Academy of Health Behavior (AAHB). Dr. Rhodes also is the mentor of the KHSP Sexual Reproductive Health Thematic Group and to Shalon Irving (KHSP 2009-2011) as part of the AAHB Mentoring Program.

"The experience at UNC as a Kellogg Scholar and with Geni Eng, and really many people associated with the Community Track, built a firm foundation. I continue to grow and learn from our research and our partners, but I am grateful for the network, those who continue to provide guidance, ideas, and perspectives on how to do this work authentically and what really matters at the end of the day. I learn so much at every Scholar gathering and hope that someday I can help and support other researchers the way I have been helped and supported, intellectually and emotionally. CBPR isn't merely an approach to more informed and better research; it is fair and just, and I am lucky to have had the exposure to CBPR and the unconditional support of those with tremendous expertise in CBPR. I think it is paying off in the communities I am part of and work in partnership with."

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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 <http://bit.ly/f8TRa1>. For login and passcode information, please contact Brandon Moore at bmoore@cfah.org.

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FUNDING

Center for Poverty Research, UC Davis
Deadline: January 31, 2012, 5:00 pm (Pacific)
The Center for Poverty Research at UC Davis announces its 2012-13 small grants competition. With core funding from the Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, the Center will award up to five grants of up to \$20,000 each for research in the areas educational programs; children

and the intergenerational transmission of poverty; and immigration and poverty. Preference will be given to junior scholars from all disciplines. Applications are due on or before January 31, 2012. Application instructions and more information are available at <http://bit.ly/zGR9Yy>. Address questions to poverty@ucdavis.edu

Community-Campus Partnerships for Health 15th Anniversary Conference
Community-Campus Partnerships as a Strategy for Social Justice: Where We've Been & Where We Need to Go

Bobby Gottlieb Scholarship Fund and Financial Support for Community-Based Participants in Selected Areas of Texas

Deadline: January 23, 2012

Community-Campus Partnerships for Health's 15th Anniversary Conference takes place Apr 18-21, 2012 in Houston, TX USA. The theme is "Community-Campus Partnerships as a Strategy for Social Justice: Where We've Been & Where We Need to Go."

Eliminating inequities and injustices in the world begins within ourselves, our organizations and our partnerships. Toward that end, we are committed to breaking down financial and other barriers to participation in CCPH. We are pleased to announce two opportunities to help off-set registration, lodging and travel expenses for those otherwise unable to attend the conference. Please see details below regarding eligibility and how to apply.

Applications for both are due Jan 23 and decisions will be made by Feb 1.

(1) Bobby Gottlieb Scholarship Fund

In January 2010, the CCPH Board of Directors established the Bobby Gottlieb Scholarship Fund in recognition of Bobby Gottlieb's exemplary leadership as 2008-2009 CCPH board chair and her unparalleled commitment to ensuring that CCPH be an inclusive organization. Individuals traveling to the CCPH conference from Canada, Mexico or the U.S. may request support from the Fund to defray their conference expenses. For details, visit <http://bit.ly/ui4a9Z>. To make a tax-deductible donation to the Fund, visit <http://bit.ly/b9nBuV>.

(2) Financial Support for Community-Based Participants in Selected Areas of Texas

Thanks to the generous support of St. Luke's Episcopal Health Charities in Houston, TX, funding is available to help off-set conference expenses for selected community-based participants who live within the 57-county Episcopal Diocese of Texas (see www.slehc.org/Operations/About_Us/upload/57COUNTIES.pdf). Individuals who are full-time students or employed by a higher educational institution or government-based agency are not eligible to apply. For details, visit <http://bit.ly/rwO8bN>. Whether you are directly involved in community-based participatory research, service-learning or other community-academic partnerships - or are working to ensure the conditions are in place for such partnerships to thrive and have impact - the conference is designed to challenge and inspire you! Regardless of the social justice issue you are passionate about - health equity, education, environmental justice, food security, sustainability, indigenous rights and so forth - together we will explore how to leverage partnerships to create change. Conference highlights include:

- * Intensive pre-conference workshops, skill-building workshops, educational exhibits, thematic poster presentations, community site visits and many opportunities for informal networking

- * A plenary participatory performance by El Teatro Lucha de Salud del Barrio, a dynamic group that is applying Paulo Freire's philosophy of education and Augusto Boal's Theatre of the Oppressed to advance environmental justice in Texas.

- * A special celebration with our major conference partner, St. Luke's Episcopal Health Charities, the area's largest charity focused solely on health and well-being and also marking its 15th anniversary in 2012

- * An opportunity to explore Houston, with its many community-campus partnerships, tourist attractions, and warm and sunny spring climate

KEEP THESE IMPORTANT DEADLINES IN MIND: February 3rd for early-bird conference registration rate March 23rd for hotel reservations at the discounted conference rate April 10th for advance conference registration.

QUESTIONS? Visit the conference homepage at <http://bit.ly/hFPPIr> or contact Shelly Tolo at toloevents@aol.com or 1 (206) 962-0012. Follow the latest conference developments on twitter at <http://twitter.com/CCPHconference>. The CCPH Conference Planning Committee, <http://bit.ly/iksfSq>

Native People for Cancer Control

Native People for Cancer Control Community Grants

Deadline: January 13, 2012

Native People for Cancer Control, based at the University of Washington's Partnership for Native Health program, is funded by the National Cancer Institute to enhance existing relationships and build new bridges for community-based participatory research, training, and education to improve American Indian and Alaska Native health. Native People for Cancer Control and the Institute of Translational Health Science invite applications addressing issues in cancer education, prevention, screening, and treatment among American Indians and Alaska Natives living in the states of Washington, Wyoming, Alaska, Montana, Idaho, Oregon, North Dakota, and South Dakota. Applications from Tribes, Tribal or community-based organizations may propose projects involving cancer education, advocacy, prevention, screening, and treatment. Grants may also be used to support conference agendas that examine key issues relating to cancer and Native populations and/or to send staff to cancer related trainings and conferences. Proposals should describe short-term projects that can be conducted with a one-time award of up to \$3500. The deadline to apply is Jan 13, 2012. Funded activities must be completed by May 31, 2012. The award can be used for costs such as personnel, supplies, and incentives. Computer equipment, direct patient services, and indirect costs cannot be paid by Community Grant funding. Only one application per organization may be submitted for review. For details, visit <https://www.iths.org/funding/NPCC>.

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CALL FOR SUBMISSIONS

Call for Submissions - AcademyHealth

2012 Annual Research Meeting (ARM)

Orlando, FL

June 24-26, 2012

Deadline: January 12, 2012 (5:00 pm EST)

The AcademyHealth Annual Research Meeting (ARM) call for abstracts is now open. This conference, which will be held June 24-26 in Orlando, Florida, is the premier forum for health services research. This year the ARM is organized around 18 [themes](#), and abstracts are invited for four categories: call for papers, call for posters, call for research panels, and call for policy roundtables. The deadline for submitting abstracts is January 12 at 5:00 p.m. A large portion of the conference agenda is determined through the call for abstracts, so this is a great opportunity for researchers to present their findings to providers and policymakers that can help turn research into action. For more information about the conference and to find detailed instructions on the abstract submission process, please visit the

AcademyHealth website at www.academyhealth.org/arm.

Call for Abstracts - *Journal of Health Care for the Poor and Underserved* and Aetna Foundation

Book on "Obesity Interventions with Underserved U.S. Populations: Evidence and Directions"

Deadline: January 23, 2012

A book, Obesity Interventions with Underserved U.S. Populations: Evidence and Directions, to be published in early 2013 by Johns Hopkins University Press, will be a collection of papers in the area of obesity/overweight prevention/reduction in underserved communities in the U.S. This notice is a Call for Abstracts. The editorial team and Advisory Board will select among the abstracts, looking for those of the highest quality that also are likely to contribute to making the book a cohesive whole: the authors of those abstracts will be invited to submit full papers for blind peer review. Abstracts should be no longer than 250 words (excluding references). They should be sent, together with complete author contact information, to Journaladministratio@mmc.edu no later than 11:59 p.m. on January 23rd, 2012. Full invited papers will be due no later than 11:59 p.m. on March 15, 2012. Inquiries may be directed to Ms. Naa Amponsah at (800) 669-1269 or journalquestion@mmc.edu. The editorial office for this book is the Journal of Health Care for the Poor and Underserved (JHCPU) and the sponsoring organization is the Aetna Foundation. The editor is Virginia M. Brennan, PhD, MA (Meharry Medical College) and the Guest Editors are Shiriki Kumanyika, PhD, MPH (UPenn Perelman SOM) and Ruth Zambrana, PhD (U. of Maryland, College Park). We welcome

submissions that establish the state of the art for some part of the obesity/overweight epidemic in underserved U.S. communities, with an emphasis on solutions. Such state-of-the-art papers might take the form of Literature Reviews that encompass what is known and what still must be learned in order to overcome the epidemic for some particular population; Commentaries on the development of the obesity/overweight epidemic in the U.S. and/or how to overcome it; or Reports from the Field that describe innovative and effective programs in underserved communities. Literature Reviews: We strongly encourage authors with suitable expertise to submit Literature Reviews. The 250-word abstracts submitted for the January 23rd deadline proposing Literature Reviews on the prevention and reduction of obesity in one or more minority or other underserved population in the U.S. should:

- (a) State the particular problem being addressed.
- (b) State the intention to review what interventions to address the problem have been evaluated; the nature of those evaluations; and the results of those evaluations; as well as to review what sorts of interventions still must be evaluated - i.e., ones for which the evidence is not firm as to the intervention's effectiveness.
- (c) Fit into the general framework for this book: We would like authors of articles for this book to take a systems perspective, identifying ways that contextual factors bear upon the epidemic of overweight/obesity in underserved communities in the U.S. and on interventions to address these problems.

In evaluating Literature Reviews (the full papers), the reviewers, editors, and advisory board will look for papers that:

- (a) enumerate their search criteria, enumerate the date range considered, and name the databases consulted;
- (b) discuss what the applications of the work reviewed to the real world are, and how broadly the conclusions might ultimately be generalized (as well as discussing the status of the work in terms of certainty as to causal relationships identified);
- (c) explicitly say whether socioeconomic status (solely, or along with other demographic parameters) was taken into account in selecting work for review; and
- (d) are tied to one or more of these contextual domains:
 - * Characteristics of target population
 - * Interpersonal variables (e.g., family patterns)
 - * Organizational variables (characteristics of the organization delivering the intervention)
 - * Ethnically-specific and/or general social norms and culture
 - * Larger political and economic forces.
- (e) are between 2,000 and 10,000 words long.

Not all of this must be covered in abstracts for Literature Reviews, but the abstract should indicate that the fully written paper will meet these criteria.

Commentaries: The 250-word abstracts submitted for the January 23rd deadline proposing Commentaries should address a particular topic within the overall area of obesity/overweight reduction/prevention in underserved U.S. communities. The abstracts should provide a good idea of the argument the author will make in the full paper. We will look for emphasis on context in these abstracts as well. Commentaries (the full papers) should provide an overview of a particular topic within the overall area of obesity/overweight reduction/prevention in underserved U.S. communities, with appropriate references to the empirical literature, and then take a position on it. We will look for emphasis on context in these papers as well. Full papers should be 1,000-4,000 words. Reports from the Field: For this volume, Reports from the Field are descriptive accounts of programs and other interventions, or of new policies in the area of obesity/overweight prevention/reduction in one or more underserved U.S. communities. While still hewing to the highest standards for timeliness and accuracy, Reports are not structured as research papers and do not contain statistical analyses. Programs and policies that are notable for their innovation, their success, and their replicability will especially interest us. Full papers should be no longer than 2,000 words. The 250-word abstracts submitted for the January 23rd deadline proposing Reports from the Field should reflect these characteristics and draw attention to the noteworthiness of the program or policy being described, in view of what is already well-established. Emphasis on and description of the larger context in which the program or policy is implemented (and why that context is important to consider) is welcome. Why did you do this (what evidence compelled you to design this program or policy)? What exactly did you do? What happened? Would you do anything differently if you had the opportunity to do it again? Do you think this can work in other communities? Why or why not? Statistical analyses are not suitable given the descriptive nature of Reports from the Field, although some descriptive statistics may be included. To develop a topic, choosing among (or

combining several of) the following population parameters may prove helpful. While the book will be organized in terms of race/ethnicity, we also welcome work that - while including information about race/ethnicity - also bear on other characteristics of underserved populations, including sexual orientation [LGBT], mental health and cognitive development, disability, and others.

Race/ethnicity

- * African American (or Black)
- * Latino (or Hispanic) broken down by subgroups
- * Non-Hispanic White (or White)
- * American Indian/Alaska Native, broken down by subgroups
- * Pacific Islander, broken down by subgroups
- * Asian Americans, broken down by subgroups
- * Multi-ethnic perspectives

Age groups

- _ * Children (pre-school, school age, or combined)
- * Adolescents
- * Adults
- * Reproductive-aged women (including pregnancy, post-partum, gestational influences, and infancy)
- * Elderly

Other demographic characteristics

- _ * Geographic regions
- * Urban areas
- * Rural areas
- * Groups with low socioeconomic status

Call for Papers and Other Items - ***Living Knowledge Journal of Community-Based Research***

10th Issue Theme - Re-imagining Research Relationships: Co-creating Knowledge in a Democratic Society

Deadline: January 30, 2012

The theme of the 10th issue of the Living Knowledge Journal of Community-Based Research is "Re-imagining Research Relationships: Co-creating Knowledge in a Democratic Society." The journal welcomes the contribution of reports, articles, news, press releases and clippings, letters, contribution to discussions, job offers, internships etc. To simplify your contribution you can send your press releases, headlines, brief information or news. Reports and detailed articles should follow the editorial guidelines for the journal: <http://bit.ly/uO9ssc> Here's a link to the May 2011 issue: <http://bit.ly/uPGeGe>. Please note that the journal is not a peer reviewed scientific publication. Its purpose is to disseminate informative articles and reports that represent the current work of Science Shops and similar organisations in the field of community based research. The deadline is Jan 30. Please send your contributions to: Norbert Steinhaus, norbert.steinhaus@wilabonn.de. The Living Knowledge Network aims to give citizens access to scientific research. Check out its new website at <http://bit.ly/uCZSdV>.

Call for Abstracts - 140th American Public Health Association, Community-Based Public Health Caucus

Theme: Prevention and Wellness Across the Lifespan

San Francisco, CA

October 27-31, 2012

Deadline: February 6, 2012

<http://apha.confex.com/apha/140am/cbph.htm>

The Community-Based Public Health Caucus invites abstracts related to the science and practice of community-based public health for the 140th American Public Health Association Meeting and Exposition to be held from October 27-October 31, in San Francisco, CA. The theme of the 2012 meeting is "Prevention and Wellness Across the Lifespan" and we have particular interest in abstracts and proposals that reflect this theme. Overview of the Community-based Public Health Caucus: The Community-Based Public Health Caucus, approved by the APHA Executive Board in 2001, is guided by the belief that community lies at the heart of public health, and that research protocols and interventions work best when they are rooted in the values, knowledge, expertise, and interests of the community. We believe that health

encompasses the physical, mental, spiritual, social, environmental, and economic well-being of a community and its members. We recognize the power of equal partnerships connecting community members, community-based organizations, academic institutions, and health agencies in order to address the myriad of health issues affecting communities today. We understand that, in order for these partnerships to be equal, and for interventions and research to be community-based, community members must participate fully in the identification of health issues as well as in the selection, design, data collection and analysis, implementation and evaluation of programs that address these issues. Further information about the Caucus and its guiding principles can be found at www.cbphcaucus.org.

We invite abstracts that advance our knowledge of community-academic partnering in multi-disciplinary collaboration and a diversity of community-based public health activities, including basic and applied research projects, interventions, teaching and service learning projects. Of particular interest are presentations of initiatives that put community-based organizations in the lead position. Presentations that provide participants with enhanced knowledge and skills to conduct community-based public health activities as well as those that explicitly describe the application of community-based participatory research (CBPR) to promoting healthy communities especially through policy change and decision-making at the local, state and federal level, are also of great interest. We are particularly interested in abstracts that address:

- Academic-community partnerships: the good, the bad, and the ugly
- Benefits & power of partnerships
- Community Voices: community member perspectives on community-academic partnerships and CBPR (presenting author must be a community member)
- Developing community faculty and community partners
- Developing gold standards for CBP
- Healthy community promote healthy minds & bodies
- Healthy virtual/Internet communities
- Lessons learned from community-based participatory research projects
- Measures, methods, and evaluation in CBPR
- Student/youth presentations (presenting author must be a student/youth)
- The importance of community involvement in research
- The role of community partners in community based public health
- The scholarship of CBPR (presenting author must be a Kellogg Health Scholar)

We are also looking for abstracts on efforts to use community-university partnerships or other types of collaborations, the development of partnerships, capacity-building, research translation into practice and/or policy, and innovative strategies, programs, models, and best practices to address community based public health issues.

Abstract Review Process: All abstracts are peer-reviewed by both community and academic members of the Caucus. They will be considered for oral, poster or roundtable presentation, unless authors indicate a preference. Abstracts are evaluated for their quality and the degree to which their content is consistent with the principles of the Community-Based Public Health Caucus and the 2012 APHA Meeting theme, Prevention and Wellness Across the Lifespan. If your abstract is accepted for presentation, you are required to present material as stated in the peer-reviewed abstract.

Instructions for full session proposals: We also invite submissions of PROPOSALS FOR FULL SESSIONS (90 minutes). These sessions will consist of five to six presentations (plus a moderator if necessary) that share a common theme, ideally related to the meeting theme, Prevention and Wellness Across the Lifespan. Please note that each individual abstract to be included in a full session must be submitted through the APHA electronic abstract submission process. Each abstract will be reviewed independently, and be subject to the same blind peer-review process as other abstracts. Due to limited number of sessions available for oral presentations, in order for a full session proposal to be considered, each individual abstract from the proposed full session must be accepted on its own merit. If all abstracts are not accepted, the full session will not be considered. However, the individually accepted abstracts will be considered for presentation together within another topic area session. In addition to each individual abstract submission, a one-page overview of the proposed full session must be submitted directly to the planner via electronic mail at: cbphc2012@gmail.com.

This one-page overview should include:

1. Full session title
2. Name of the lead facilitator and the contact person for the full session

3. Brief overview of the full session and how the individual abstracts are integrated
4. List the individual abstracts for the full session in presentation order, including the following information: abstract number; abstract titles; author(s); time allocated for each presentation (including discussion).

Funding Available: We are most interested in abstracts submitted for presentation by community-academic partners. Limited funding is available through the CBPH Caucus for co-authors from community-based organizations whose abstracts are accepted for presentation during the 2012 meeting.

Opportunities for Youth Involved in CBPH Endeavors!!! Limited stipends are available through the CBPH Caucus for students who present during the 2012 meeting. Students under 17 must be accompanied by a chaperone. We value young people as the next generation of CBPH activists. True to our vision, we work to support young activists and encourage their attendance to APHA. We ask community-academic partnerships that involve students to please support these students in co-presenting especially, but not limited to, roundtable or poster-sessions (e.g., high school students participating in community-based public health research or activism). Young people 13-25 can participate and become active in the CBPH Caucus Youth Council (see www.cbphcaucus.org for more information). Continuing Education Credit:

APHA values the ability to provide continuing education credit to physicians, nurses, health educators and those certified in public health at its annual meeting. Please complete all required information when submitting an abstract so members can claim credit for attending your session. These credits are necessary for members to keep their licenses and credentials. For a session to be eligible for Continuing Education Credit, each presenter must provide:

- 1) an abstract free of trade and/or commercial product names
- 2) at least one MEASURABLE objective (DO NOT USE understand or to learn as objectives, they are not measurable). Examples of Acceptable Measurable Action Words: Explain, Demonstrate, Analyze, Formulate, Discuss, Compare, Differentiate, Describe, Name, Assess, Evaluate, Identify, Design, Define or List.
- 3) A signed Conflict of Interest (Disclosure) form with a relevant Qualification Statement. See an example of an acceptable Qualification Statement on the online Disclosure form. Contact Annette Ferebee at annette.ferebee@apha.org if you have any questions concerning continuing education credit. Contact the program planner for all other questions.

Contact Information: Please feel free to contact the program planners Jim Amell, jwamell@cahs.colostate.edu, or Mysha Wynn, projectmomentumexcel@yahoo.com, should you have questions regarding your submission.

Call for CBPH Caucus Peer Reviewers

Deadline: January 23, 2012

The Community Based Public Health Caucus is looking for peer reviewers (community and academic) to review abstracts for the American Public Health Association Annual Meeting in 2012. The theme of the 2012 meeting is "*Prevention and Wellness Across the Lifespan*".

If you are interested in serving as a reviewer (abstract review will take place from February 28 to March 12, 2012), please send an email to Jim.Amell@colostate.edu with the following information by January 23, 2012.

- Name
- Email address (this address is where we will send correspondence to you)
- Are you a community or academic reviewer?
- What are your areas of expertise? (e.g., CBPR, cancer, health disparities) please provide three to five key words as we will use this information in the review assignments.

Call for Abstracts - 140th APHA Annual Meeting, Latino Caucus

Theme: Prevention and Wellness Across the Lifespan

San Francisco, CA

October 27-31, 2012

Deadline: February 6, 2012

<http://apha.confex.com/apha/140am/oasys.epl>

The Latino Caucus requests the submission of original research and interventions in the Latino community for dissemination at the 140th APHA Annual Meeting. The theme,

Prevention and Wellness Across the Lifespan, presents an opportunity to discuss the unique challenges and opportunities for prevention and protection across the lifespan in order to have the most positive impact on health (both physical and mental) at all ages. To accomplish this goal, government agencies, community organizations, schools, healthcare organizations and other community members must work together in a comprehensive approach. It is important to discuss how prevention and wellness fits into the current plan for health care reform and what additional reform will be necessary in order to achieve desirable health outcomes. The Scientific Program Subcommittee of the APHA Latino Caucus particularly encourages established and emerging Latino scholars, practitioners and graduate students to submit their research. Please submit scientific papers that address questions of the complex intersections of prevention and wellness, community resources, structural inequality, gender, geography and ethnicity and the impact of these intersections across the lifespan such as for children, adolescents, mid-life and older adults. We are looking for innovative approaches to address prevention and wellness in the Latino community. Electronic submission is required (<http://apha.confex.com/apha/140am/oasys.epl>). The abstracts will be organized into one of the following: oral presentation, roundtable discussion, and poster session.

- Addressing weight management/preventing obesity in the Latino community across the life course (e.g. safe recreational space for Latino adolescents, the marriage of urban planners and public health professionals)
- Differential strategies for active living in Latino communities that are most responsive to their resources, circumstances and preferences (e.g. urban, rural, migrants)
- Innovative technologies to promote health and wellness in Latino adolescents and young adults (e.g. the role of social media, handheld devices)
- Intergenerational wellness projects: Family as health caretakers and transmitters of health information (e.g. the role of mothers as food gatekeepers)
- Interrogating the role of prevention & wellness policy - where does health care reform matter for Latinos across the life course? (e.g. access to health care and insurance for those employed in small businesses, seasonal workers such as in construction, agricultural work including citizens, long-term immigrants, etc.)
- Life course interventions to promote preventive screenings (e.g. STI's, mammogram/pap smear, colorectal/prostate cancer) across multiple contexts (e.g. schools as sites of prevention for K -12, neighborhood health centers, mobile vans, public health clinics)
- Prevention strategies to improve food choices and food selection options in Latino community infrastructure to enhance wellness (e.g. food environment in schools, small food stores and supermarkets)
- Promotoras as key community prevention and wellness providers (e.g. evidence-based interventions with lay health workers)
- The role of depression and social support in the prevention of chronic conditions across the lifespan (e.g. adult women and diabetes management)
- The role of discrimination and mental health among Latinos (e.g. how do current attitudes and policies on immigrant surveillance/policing impact the mental health of Mexican Americans, Mexicans and other Latinos)

We strongly encourage students to submit their abstracts, and to indicate their student status in the appropriate checkbox. We will select the best student abstract for recognition at our annual awards program! For more information, contact the program planners: Ruth Enid Zambrana, rzambran@umd.edu, and Patricia Y. Miranda, pym1@psu.edu. Please note that all abstracts are peer-reviewed and evaluated using the following criteria:

- Clarity of presentation: statement of problem, relevance, methods, results, and conclusions
- Quality and completeness of reported findings
- Originality and implications of findings to research, practice, and/or policy

Continuing Education Credit: APHA values the ability to provide continuing education credit to physicians, nurses, health educators and those certified in public health at its annual meeting. Please complete all required information when submitting an abstract so members can claim credit for attending your session. These credits are necessary for members to keep their licenses and credentials.

For a session to be eligible for Continuing Education Credit, each presenter must provide:

- 1) an abstract free of trade and/or commercial product names;
- 2) at least one MEASURABLE objective (DO NOT USE understand or to learn as objectives, they are not measurable; examples of acceptable measurable action words: explain, demonstrate, analyze, formulate, discuss, compare, differentiate, describe, name, assess, evaluate, identify, design, define or list);
- 3) A signed Conflict of Interest (Disclosure) form with a relevant Qualification Statement. See an example of an acceptable Qualification Statement on the online Disclosure form.

Call for Abstracts - Moffitt Cancer Center

8th Biennial Conference - Cancer, Culture and Literacy: Advancing Communications

Sheraton Sand Key Resort

Clearwater Beach, FL

May 17-19, 2012

Deadline: February 6, 2012

The Cancer, Culture, and Literacy Conference offers extraordinary networking and learning opportunities for individuals wanting to learn more about the roles of culture, language, and literacy in cancer health disparities and in the design, implementation, and evaluation of cancer communications, programs, and educational interventions. This three-day conference offers a number of interactive activities including pre-conference skill-building workshops, plenary and breakout sessions, breakfast roundtables, and a poster session. The conference curriculum features community-based participatory research (CBPR) approaches, methods to inform or describe the development and evaluation of cancer education media/materials and interventions, and new technologies to advance cancer communications. Call for abstracts: We seek abstracts that describe interventions and activities that address cancer health disparities and utilize advanced communications through the integration of culture and literacy in education, research, community partnership programs, and survivorship across the continuum of cancer care. Abstract submission deadline is February 06, 2012. Notifications will be made by March 16, 2012. All abstracts must be submitted electronically. Abstracts are limited to 250 words and should be structured using the following headers:

- Background
- Methods
- Results
- Conclusion

Abstract submissions must fit within at least one of the following four conference themes, or tracks:

- Communications and Technologies
- Research, Measurement, and Evaluation
- Theory and Practice
- Training and Education

Click [here](#) to submit <http://bit.ly/xowv0u>

Conference Contacts:

Website: www.MOFFITT.org/ccl

Email: CCL2012@moffitt.org

Phone: 813-745-6031

Call for Abstracts - Spirit of 1848 for APHA 2012

Theme: Prevention and Wellness Across the Lifespan

San Francisco, CA

October 27-30, 2012

Deadline: February 8, 2012

<http://www.apha.org/meetings/sessions/>.

The theme of the APHA 2012 140th annual meeting ("Prevention and Wellness Across the Lifespan," San Francisco, CA, Oct 27-31, 2012) is one that we seek to place in its larger societal context, paying heed to level & spatiotemporal scale (i.e., lifespan of individuals, of neighborhoods & communities, and of historical generations at the national and global level). Moreover, in addition to our usual focus on ensuring speaker diversity in relation to race/ethnicity and gender, we also plan to include speakers ranging from the

rising generation of youth, with their often wonderfully audacious impatience to create a better world, to our elders who are rich with experience, knowing we can learn much from both. As usual, we are organizing 4 oral sessions and 1 poster session, together addressing the 3 themes of our caucus, which concern the inextricable links between social justice and public health, as manifested in: the politics of public health data, social history of public health, and progressive pedagogy. Abstracts for the Spirit of 1848 sessions are due on Wednesday, February 8, 2012 (with abstract submission opening on Friday, December 16, 2011); all relevant instructions can be found at the APHA abstract submission website; see: <http://www.apha.org/meetings/sessions/>.

Call for Abstracts - 2012 Disparities Research Interest Group Annual Meeting (held in conjunction with AcademyHealth's Annual Research Meeting)

Orlando, FL

June 23, 2012

Deadline: February 15, 2012

The Disparities Interest Group is seeking abstracts to be considered for presentation at the 2012 Disparities Research Interest Group Annual Meeting, held on June 23 in conjunction with AcademyHealth's [Annual Research Meeting \(ARM\)](#). The [call for abstracts](#) offers researchers, policymakers, and practitioners the opportunity to disseminate research on topics that may not be featured during the ARM*. Specifically, the papers presented during this meeting will emphasize the unique challenges of developing interventions to reduce health care disparities. Papers are also being sought innovative methodological approaches in disparities research on health outcomes, health care delivery, and health policy. **Criteria for Evaluating Submissions:** Submissions will undergo a blind peer review and will be evaluated by the following criteria: (1) importance of the topic for advancing health disparities research; (2) appropriateness of techniques and methods; (3) quality and originality; (4) policy and practice implications; and (5) clarity of writing and presentation. **Abstract Submission:** December 1, 2011 to February 15, 2012. Abstracts must be submitted online by February 15, 2012 to be considered for presentation. Papers not selected for oral presentation will be considered for poster presentation. Notifications will be sent in late March. Visit the Disparities Interest Group Web site for submission instructions, or contact [Tracy Rausch](#). * Please note that if you wish to submit an abstract to the Annual Research Meeting and the Disparities Interest Group meeting, you must submit separately to each. Submission to one meeting does not imply review by the other.

Call for Expressions of Interest - ***Journal of Community & Applied Social Psychology***

Theme: Ageing and Community

Deadline: February 15, 2012

The Journal of Community & Applied Social Psychology invites expressions of interest from individual, pairs, or teams of potential guest-editors, to guest-edit a special issue of the journal on the theme of "Ageing and Community" (Guest-editors have scope to modify the title and focus, within this broad theme). Expressions of interest should include (i) a 2-3 page proposal indicating aims, scope, potential topics and potential authors; (ii) brief CV(s) demonstrating the suitability of the proposed guest editor(s).

Submit expressions of interest to the Editor, Flora Cornish (f.cornish@lse.ac.uk) by 15 February 2012. For more information about the journal, see <http://bit.ly/Agq0Or>

Call for Nominations -- New England Resource Center for Higher Education

2012 Ernest A. Lynton Award for Scholarship for Engagement for Early Career Faculty

Deadline: April 27, 2012

Nominations are due Apr 27 for the 2012 Ernest A. Lynton Award for the Scholarship of Engagement for Early Career Faculty sponsored by the New England Resource Center for Higher Education (NERCHE). The annual Ernest A. Lynton Award for the Scholarship of Engagement for Early Career Faculty recognizes a faculty member who is pre-tenure at tenure-granting campuses or early career (i.e., within the first six years) at campuses with long-term contracts and who connects his or her teaching, research, and service to community engagement. Community engagement describes the collaboration between faculty and their larger communities (local, regional/state, national, global) for the mutually beneficial exchange of knowledge and resources in a context of partnership and

reciprocity.

--Carnegie Foundation for the Advancement of Teaching

The Lynton Award emphasizes community-based scholarly work across faculty roles. The scholarship of engagement (also known as outreach scholarship, public scholarship, scholarship for the common good, community-based scholarship, and community-engaged scholarship) represents an integrated view of faculty roles in which teaching, research/creative activity, and service overlap and are mutually reinforcing, is characterized by scholarly work tied to a faculty member's expertise, is of benefit to the external community, is visible and shared with community stakeholders, and reflects the mission of the institution. In addition, NERCHE conceptualizes scholarly engagement in terms of social justice in a diverse democracy. The award will be presented at the 18th Annual Conference of the Coalition of Urban and Metropolitan Universities (CUMU) which will be held from October 13-16, 2012, at the University of Tennessee at Chattanooga. CUMU is a co-sponsor of the Award. The recipient of the award will have several opportunities to disseminate his or her community based work, including presenting at the CUMU conference, publishing in the Metropolitan Universities Journal, and participating in one or more of NERCHE's webinars focused on community-based scholarly work.

2012 Lynton Award Nominations:

* Nominations can be made by academic colleagues, administrators, students, and community partners.

* More than one faculty member from a single college or university may be nominated. Please complete separate applications for each nominee.

Nominators will submit nominations via an online application. To submit an application, please see the Application Instructions. Application Deadline: Friday, April 27, 2012. If you have any questions regarding the Lynton Award, please contact NERCHE via email at nerche@umb.edu or by phone at (617) 287-7740. For more information, visit <http://bit.ly/A5r0Wc>

Call for Papers - **Journal of Mixed Methods Research**

For information on the Journal's latest Call for Papers, visit http://www.sagepub.com/upm-data/32368_JMMR_general_CFP_101309.pdf.

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CAREER DEVELOPMENT

American Public Health Association

2013 APHA Public Health Fellowship in Government

Deadline: April 9, 2012

The American Public Health Association (APHA) has issued a call for applications for the 2013 APHA Public Health Fellowship in Government. This is the sixth year that APHA is offering this fellowship.

Candidates must have strong public health credentials and be interested in spending one year in Washington, D.C. working in a congressional office on legislative and policy issues related to health, the environment or other public health concerns. The fellowship will begin in January 2013 and continue through December 2013. The fellowship provides a unique learning experience and demonstrates the value and need for basing policy on sound science. Throughout the year, the fellow will gain a practical knowledge in government and how the public policy process works. Applications and additional information are available at <http://bit.ly/z6nZpE>. The application, including a CV and three letters of recommendation, are due to APHA by April 9, 2012.

All candidates:

1. must be APHA members
2. have five years experience as a public health professional beyond graduate or medical training
3. have a graduate degree in a public health or a related discipline.

American Statistical Association/National Science Foundation/Bureau of Labor Statistics

Senior Research Fellow Program

Deadline: January 27, 2012

Are you interested in conducting research at BLS? If so, consider applying for our Senior Research Fellow Program. Proposals are due January 27, 2012, so there's plenty of time left to apply! The fellowship program is a great opportunity to extend your research to a new domain. The program's main objective is to facilitate collaboration between

academic scholars and government researchers in fields such as statistics, economics, survey methodology, and social science. Research Fellows have an opportunity to expand their work to address some of the methodological problems and analytic challenges BLS faces. Fellows are funded to conduct research at the BLS headquarters in Washington, DC, use BLS data and facilities, and work closely with BLS staff. Fellowship applicants should have a recognized research record and considerable expertise in their area of proposed research. Applicants must submit a detailed research proposal, which will be evaluated on the applicability of the research to BLS programs, the value of the proposed research to science, and the quality of the applicant's research record. Applicants do not need to be US Citizens, but they must be affiliated with a US institution (such as a university). US Government employees are not eligible. We encourage interested researchers to contact us before submitting a proposal for assistance in tailoring the proposed topic to best utilize your skills and interests in addressing BLS issues. There is more information available on our website at http://www.bls.gov/osmr/asa_nsf_bls_fellowship_info.htm or in our brochure at <http://www.amstat.org/careers/pdfs/ASANSFBLSFellowshipProgram.pdf>. The Bureau of Labor Statistics (BLS) coordinates our Senior Research Fellow Program in cooperation with the American Statistical Association <<http://www.amstat.org/>> (ASA), under a grant from the National Science Foundation <<http://www.nsf.gov/>> (NSF). Please contact Jean Fox (Fox.jean@bls.gov) if you have any questions.

CIHR ACHIEVE Research Partnership, Toronto, Canada
Postdoctoral Fellowship Opportunity -- The ACHIEVE Research Partnership: Action for Health Equity Interventions
Deadline: February 13, 2012

The ACHIEVE Research Partnership: Action for Health Equity Interventions

Focus on macro-social interventions to reduce health inequities.

Approach: We are motivated by the CIHR's goal to produce the next generation of "creative agents for change," and by the Institute of Population and Public Health's call for interventions research, defined as "the use of scientific methods to produce knowledge about policy and program interventions that operate within or outside of the health sector and have the potential to impact health at the population level." To marry these two priorities and ensure that interventions research leads to better interventions, ACHIEVE will be explicit in promoting a community of practice and a philosophy of engaged scholarship, which the Big Ten universities has recently endorsed as "the partnership of university knowledge and resources with those of the public and private sectors to enrich scholarship, research, and creative activity; enhance curriculum, teaching, and learning; prepare educated, engaged citizens; strengthen democratic values and civic responsibility; address critical societal issues; and contribute to the public good. ACHIEVE will offer an intensive 24 month, collaborative curriculum for new researchers to develop the following competencies that are typically unavailable through traditional graduate training, yet necessary for closing the gap between *measuring* urban health disparities and "reducing" them:

- Population Health Interventions Research (PHIR): Often, population health research focuses on measuring the extent of health disparities, rather than generating and testing effective interventions. This program will emphasize the need for interventions research aimed to "illuminate solutions to complex problems and facilitate sustainability;" and
- Community Engagement Partnerships: ACHIEVE will prepare researchers for careers both within and outside the academy. The program will prioritize experiences to work effectively with, and to be relevant to inner city health service providers, policy-makers, and advocates.

Rationale: The World Health Organization Commission on Social Determinants of Health has called global action on health inequities an "ethical imperative." The need - and potential - for Canada to participate in this effort are great. During the 20th century, Canadians distinguished ourselves as international leaders in both promoting universal access to health care and illuminating the influence of potentially modifiable social, economic, and political factors on individual and population health. Over the last three decades, however, we have fallen behind other nations in mounting innovative, coordinated, and evidence-informed policy and program interventions to reduce health disparities. Across the spectrum of health conditions, lower income and socially marginalized groups in Canada continue to face highest rates of illness and experience greatest unmet need for health care services. Lack of action on the social determinants of health in this country has been attributed to weak models for (1) generating multi-dimensional evidence of 'what works best' in Canada and (2) engaging across sectors to

meet the complex needs of vulnerable groups.

Particular focus on macro-social drivers of health inequity: Several faculty and research projects focus on macro-social interventions for reducing health inequities. We are seeking one or more postdoctoral fellows with an interest in gaining experience on innovative research methods to examine whether and how macro-social factors (e.g., welfare state, labor policies, health sector coverage, etc) impact upon health inequity across countries. One project focusing on this research agenda, for example, examines the ability of OECD member states to cope with the current economic crisis is in part determined by their "welfare state regimes" (i.e., the integrated mix, at the national level, of systems that provide social protection). Social epidemiology has shown that countries with weak welfare states (i.e., with low levels of social transfers, education, health services, social protection and active labor market policies) show higher levels of mortality and morbidity although their impact on health inequalities is controversial. Yet despite substantial aggregate evidence in support of the relationship between welfare regimes and health across wealthy countries (even with some controversies and paradoxes), the specific mechanisms by means of which welfare regimes have an impact on health remain invisible when broad categories are used to predict individual level survey data. This research agenda will yield evidence to suggest priority policy options.

Program Information:

- Two-year term: September 2012 - August 2014
- Stipend: Based on CIHR guidelines for qualified candidates
- Fellows are required to complete all training program components within the two years.
- 3-5 Fellows may be accepted for the 2012-2014 term
- Fellows are required to work onsite in Toronto, Canada
- Deadline to apply: February 13, 2012
- Decision announcements: May 2012

Eligibility:

- PhD completed within the past 3 years OR Health professional degree* + Master's level degree (Master's degree completed within the past three years)
- If you are currently completing your PhD/ Master's degree, you must expect to complete all requirements of this degree by September 1, 2012. Acceptance to the program cannot be deferred.
- Interruptions in your post-PhD/post-Master's degree research training may be taken into account in determining eligibility; please describe any interruptions in your cover letter.
- Recipients already holding a post-PhD award from a federal source for a term of three years are not eligible to apply.
- Canadian and international applications are welcome

How to Apply: Please provide the following information & documents when applying for the ACHIEVE Post-Doctoral Fellowship. Submit your application either by email to ACHIEVE@smh.ca as one PDF file (preferred) or by mail/courier with single sided documents with no staples; see address listed below.

1. Applicant Information Form <<http://www.stmichaelshospital.com/pdf/crich/achieve-application-form.doc>>

2. Cover Letter: Please see below for directions.

3. CV

4. All transcripts, including undergraduate work. Copies acceptable.

5. At least three written references. Submitted by the applicant as part of the application package.

* Letters should speak about the suitability of the applicant for this program, considering the focus on interventions research, community and partner engagement, methodological innovations, and research linked to practical change.

* One letter should be written by the thesis supervisor or current research mentor/supervisor.

* One letter of reference should be written by a representative of a community-based agency and/or policy-maker organization.

6. Two writing samples (maximum 30 pages per document). At least one single author sample is suggested.

Cover Letter: Please address the following questions in your cover letter. Address your cover letter to Dr Patricia O'Campo, Director, Centre for Research on Inner City Health. See mailing address below.

· What research topics do you wish to address during your Fellowship? Describe how the research environment at CRICH will facilitate this work.

· Describe your knowledge, experience, and interests related to social determinants of health and health equity interventions research. How has your training prepared you for a

successful research career aimed at reducing health inequities? Please provide specific examples in your cover letter. Describe your achievements (e.g. publications, presentations, grants, other research) in *population health research* or a *relevant complementary research discipline.*

- ACHIEVE is concerned with how research can help to improve practical outcomes for urban populations. In your opinion, what strategies are likely to be effective in moving research into practice? Do you have experience with these strategies? What skills and strategies would you like to develop during your Fellowship?

- Explain why you think you are a good fit for ACHIEVE.

- If you self-identify as Aboriginal and are interested in Aboriginal health research, please describe your experience with Aboriginal community engagement and Aboriginal health knowledge. Candidates will be assessed on their knowledge of Indigenous approaches to health (broadly defined), their effectiveness and experience in Aboriginal community engagement, and their capacity to participate in and benefit from the ACHIEVE curriculum.

- If applicable, describe any clinical responsibilities you will have to maintain during your fellowship. Please describe in terms of time commitments away from research.

- Describe sources and amount of co-funding that you will hold during the Fellowship.

What restrictions, if any, are placed on these funds? (e.g. time restrictions, need for cost sharing to allow dedicated research time).

- If applicable, describe any interruptions to your research training (e.g., maternity leave, extended illness) How to Submit Your Application -- Submit applications in one of the following ways:

1. PREFERRED: By email to ACHIEVE@smh.ca: Combine all the required documents (*in the order listed above*) into a single PDF file. Multiple documents will not be accepted.

2. By mail or courier: Documents should be single sided, with *no staples.* See mailing addresses below.

Mailing Address:

Attn: Alix Holtby

CIHR ACHIEVE Research Partnership

Centre for Research on Inner City Health St. Michael's Hospital 30 Bond Street Toronto, Ontario M5B 1W8, Canada

Courier Address:

Attn: Alix Holtby

Centre for Research on Inner City Health

209 Victoria Street, third floor

Toronto, Ontario

M5C 1N8, Canada

For more information visit: www.crich.ca under the "Education" tab.

Community Catalyst, Boston, MA

Field Coordinator

The Field Coordinator provides and coordinates a broad range of technical assistance to state and local consumer organizations. These services include policy analysis, campaign strategy assistance, and assistance in designing targeted community organizing efforts, training, coalition-building, fundraising and communications. For more information, please visit the Employment section of Community Catalyst's website at

http://www.communitycatalyst.org/about_us/employment_opportunities?id=0004.

Columbia University, Teachers College

Assistant Professor, Health Education (Tenure-track)

Teachers College is seeking a scholar who will provide intellectual leadership in the area of school health education, given our intent to develop a new school health education track within the Program in Health Education over the coming years. The candidate will teach four courses during the academic year. Desired, but not required, is the ability to teach Biostatistics, Environmental Health, or Health Services Administration; summer teaching is optional. The candidate must also provide academic advisement for students in the Program in Health Education. Responsibilities include delivering a high quality master's level education to those seeking to be employed as school health educators; and, supporting doctoral student education-including the essential task of sponsoring dissertations both within and beyond the school health area. It is also desirable for candidates to have a record and/or show promise for active engagement in a program of grant-funded research in the area of school health, or child and adolescent health issues.

These external funding opportunities may be pursued-either individually, or in tandem with senior faculty-to support research, as well as training. Complete job description, including responsibilities, requirements, and application guidelines can be found on: <http://www.tc.edu/dean> under faculty searches. <http://www.tc.columbia.edu/>

CommonHealth ACTION

Senior Program Manager -- Mississippi Technical Assistance Lead

CommonHealth ACTION (CHA) is a national, nonprofit public health organization that works with national organizations and community-based partners to create conditions in which all people have equal opportunities to achieve optimal health. To achieve its mission, CHA designs and facilitates community-level programming, provides tailored technical assistance services, engages in research, writing, and evaluation, and offers a range of support to community groups and funding organizations interested in innovative and effective public health practice. GENERAL RESPONSIBILITIES: The Senior Program Manager (SPM) leads the management and implementation of CommonHealth ACTION's (CHA) Mississippi-focused technical assistance. The SPM works independently and collaboratively with CHA's DC-based staff to develop, manage and implement activities in the following areas: public health programming, community-based technical assistance, research and evaluation, resource development, grant and contract management and report writing, community-based organizational development, community engagement, and meeting development and implementation. Other responsibilities include supporting communications activities, serving as liaison and CHA representative at meetings in Mississippi and nationally, establishing and maintaining partnerships to advance CHA's mission.

The Senior Program Manager position requires excellent analytical, interpersonal, organizational and writing skills as well as discretion, sound independent judgment, the ability to work across sectors and races and political acumen. The ideal candidate will have extensive experience working in Mississippi at the local level, while understanding the statewide political context that shapes and frames policy. In addition, the SPM should have extensive knowledge of local challenges faced by community based organizations; have a commitment to equity, the well-being of children and families and community capacity building; and be familiar with racial healing methodology. WORK DUTIES MAY INCLUDE, BUT ARE NOT LIMITED TO:

- *Develop and effectively manage program timelines to ensure timely completion of program deliverables. This includes monitoring ongoing scopes of work to ensure accuracy of CHA activities vis-à-vis contractual and grant commitments for Mississippi focused work.
- *Manage programmatic budget to ensure effective use of grant funds. This includes reconciling the line item budget on a monthly basis and ensuring accuracy of financial reporting. Adhere to CHA's administrative and recordkeeping guidelines to support accurate bookkeeping and documentation of activities.
- *Provide in-person, online and phone-based technical assistance to Mississippi-based grantees. This requires building trust, communication, and healthy relationships with leaders of grantee organizations. This technical assistance will be ongoing and will vary (e.g. proactive; responsive).
- *Lead collaborative development of long and short-term program planning in conjunction with CHA and foundation staff.
- *Effectively engage CHA staff assets to support the ongoing work of Mississippi-based local grantees and build community and organizational capacity.
- *Document Mississippi-based activities for publication and reporting.
- *Lead the development of grants applications and reports through collaborative writing and editing.
- *Manage relationships with contractors.
- *Establish and maintain the CHA MS-based satellite office with support from DC-based administrative staff and Office Manager.
- *Participate in CHA organizational planning activities in-person, on conference calls and via Skype.
- *Lead the development and dissemination of online and hardcopy programmatic materials. This includes leading the collaborative development of an online networking and information sharing platform for grantees.
- *Develop PowerPoint presentations, brochures or other materials for use during program-related activities and for presentation at professional conferences.
- *Manage and coordinate programmatic meetings/events including managing logistical contractors.

- *Facilitate small and large group meetings.
- *Develop regular and timely programmatic updates for inclusion on CommonHealth ACTION's Web site.
- *Lead the collaborative development of survey, monitoring and evaluation tools.
- *Serve as programmatic liaison to foundation staff including, participating in planning meetings and call.
- *Develop and maintain an effective "resource relationship" with the DC-based Program Associate. This includes managing information, resources, time and opportunities that allow the PA to work effectively.
- *Expose grantees to topically relevant, emerging and existing evidence-base to support programmatic work.
- *Work to connect CHA's MS-based efforts to other CHA programs as well as initiatives of current and potential national partners.

EMPLOYMENT STANDARDS & CONDITIONS -- REQUIRED EDUCATION AND EXPERIENCE: Graduate degree in relevant professional field with a minimum of 20 years experience working on public health-related, management, and/or community-based issues.

*Experience working in Mississippi on community-based collaborative efforts and with non-profit organizations

*Familiarity with political context in the state of MS

*Familiarity with determinants of health and economic inequities

*Experience with community capacity building efforts

*Familiarity with leadership development methodology

*Strong understanding of grants and program management

*Demonstrated interest and/or strong understanding of public health issues

*Knowledge of community-based technical assistance

*Willingness to engage in continuous learning and training

*Demonstrated professional and political aptitude

*Knowledge of Mississippi's history, culture, and geography are a plus

HIRING SALARY RANGE & BENEFITS: \$84,000 to \$89,000 (Contingent upon available funding) plus competitive benefit package with annual leave, health/dental/vision insurance and retirement contributions (403B).

JOB CLASSIFICATION: Exempt

RESOURCE RELATIONSHIP: The CHA President will serve as the lead resource person for the SPM.

JOB LOCATION: The Senior Program Manager will be based in the Jackson, Mississippi Metropolitan Area. A CHA satellite office will be made available in the Jackson Metro Area. The SPM will be expected to work primarily in the CHA satellite office when not on travel although some telework is allowable.

ESTIMATED START DATE: February 1st, 2012 - March 1, 2012

TRAVEL: Domestic travel is required for this full-time position. Estimated travel: 50% annually (Approx 35% in-state travel/15% nationwide travel). A reliable automobile, insurance, and a valid driver's license are required for local travel.

POINT OF CONTACT: John Wesley, Office Manager/HR Specialist

HOW TO APPLY: Please submit a resume/CV and salary requirements to: jwesley@commonhealthaction.org. Please place "Senior Program Manager Mississippi" in the subject line of the email when applying. NO PHONE CALLS PLEASE. Do to the large number of applicants, only successful candidates will be contacted. CommonHealth ACTION values a respectful, collaborative work environment. We establish and maintain trustful relationships with all staff, contractors, funders, and partners. We believe that hard work, a focus on quality, and a passion for the public's health are required to improve the well-being of individuals, families, and communities. CHA looks to all staff to contribute to the effective implementation of programmatic activities and the successful growth of the organization.

Health and Human Services, City of Hartford, CT
Health Director

Deadline: January 31, 2012

In the past 5-10 years, HHS Hartford has become increasingly engaged with concerns of health equity: <http://index.healthequityalliance.us/>. This job opening is ideal for someone with leadership and vision to solidify approaching population health through the lens of equity and justice. Health and Human Services Director Salary Range: \$103,040 - \$156,800/ANNUALLY. POSITION: Under general direction, oversees the governance and operations for the management of the Health and Human Services Department. This

position will carry out assigned duties by planning, directing and implementing city-wide health and human services programs. The successful candidate must have extensive knowledge of health and human services in a diversified urban setting. This position is in the unclassified service and incumbent is appointed and serves at the pleasure of the Mayor in accordance with Chapters IV and V of the City Charter. Incumbent reports to the Chief Operating Officer. City of Hartford residency required within six (6) months of appointment. QUALIFICATIONS: Master's degree in public health from an accredited college or university with a major in local public health administration, and ten years of increasingly responsible managerial experience in public health and/or human services. Knowledge of Principles and practices of public health and human services administration. Federal, state and local public health laws, ordinances, and rules and regulations. Principles and practices of public administration, including human resources development and management, budgeting, and financial planning. Health and human services issues related to an urban population. Trends and directional developments in health and human services. Principles and techniques of high-quality customer services and customer relationship management. Principles and practices of developing and implementing a public health communication plan that is clear, concise, and responsive. Principles and practices of long-range planning for public health and human services. Skill and Ability to Serve as the City's expert in health and human services.

Provide administrative and professional leadership in evaluating complex public health and human services strategies and developing approaches that maximize return on investment, contain costs, and improve operations and services. Identify and respond to public health and human services issues, concerns and needs; analyze problems and develop integrated, efficient, and cost effective solutions.

Collaborate, build consensus, and negotiate among a wide variety of customers with differing public health and human services needs. Understand, interpret, explain, and appropriately apply City, state, and federal laws, regulations, and court decisions applicable to the area of public health and human services.

Present information, proposals, and recommendations clearly and persuasively in public settings.

Prepare clear, concise and comprehensive reports, studies and other written materials. Exercise sound judgment in dealing with sensitive, complex, and confidential issues and situations. The Human Resources Department provides reasonable accommodations to persons with disabilities in accordance with the Americans with Disabilities Act (ADA). If you need an accommodation in the application, please contact the Human Resources Department. Interested candidates should submit a letter of interest and resume to:

Miguel Matos
c/o Office of the Chief Operating Officer
550 Main Street, Hartford, CT 06103
or e-mail matom002@hartford.gov

APPLICATIONS WILL BE ACCEPTED UNTIL Tuesday, January 31, 2012

EMPLOYMENT BENEFITS: For applications go to www.hartford.gov/personnel or VETERAN'S PREFERENCE:

- Health Plan and Hospitalization DEPARTMENT OF HUMAN RESOURCES Preferential Points may be given to
- Paid Vacations and Holidays MUNICIPAL BUILDING Eligible Veterans. Check with the
- Retirement Plan 550 MAIN STREET Department of Human Resources.
- Group Life Insurance HARTFORD, CONNECTICUT 06103 CHANGE OF ADDRESS: It is
- Sick Leave TELEPHONE (860) 757-9800

It is your responsibility to notify the Department of Human Resources of any Change of Address on your application.

Massachusetts General Hospital, Disparities Solutions Center
2012-2013 Disparities Leadership Program
Deadline: February 24, 2012

The Disparities Solutions Center at Massachusetts General Hospital is now accepting applications for the 2012-2013 Disparities Leadership Program (DLP). This year-long executive education program is designed for leaders from hospitals, health plans, and other health care organizations who wish to implement practical strategies to

identify and address racial and ethnic disparities in health care, particularly through quality improvement. Applications are due February 24, 2012. To download application materials or for more information, please visit the Disparities Solutions Center [website here](#) or contact Aswita Tan-McGrory at atanmcgrory@partners.org.

NIH/NCMHD Minority Health and Health Disparities International Research Training (MHIRT) Latino Mental Health Research Training Program (for undergraduate and predoctoral level students)
Mexico

June 3 to August 18, 2012

Deadline: February 1, 2012

The USC on-line application for the NIH/NCMHD-funded Minority Health and Health Disparities International Research Training (MHIRT) Latino Mental Health Research Training Program is now open. Deadline is on Feb. 1, 2012. Undergraduate and pre-doctoral level students interested in conducting psychological research in Mexico Summer 2012, in working with Latino populations are encouraged to apply. Please announce this summer research opportunity to your interested juniors, seniors and doctoral students. Dates are June 3-August 18, 2012, with an understanding that some participants might not be able to start during the first week. Application deadline is February 1, 2012. Questions: Please contact Monina Letargo, Administrative Assistant, monina.letargo@usc.edu / 213-740-6312. Excerpt from project description (from dornsife.usc.edu/latino-mental-health)
Training Program Description: Cohorts will be comprised of nine undergraduate and three pre-doctoral

trainees. The program will take place throughout the course of 11 weeks, and is comprised of an intensive one-week training seminar at USC, and a 10-week training program in Puebla México.

Funding : Project funds cover trainee transportation (e.g., to and from Mexico), and living expenses (i.e., food and housing) throughout the course of the program. In addition, trainees are given a monthly stipend to help defray living expenses based on academic level experience. Undergraduates (Juniors/Seniors) \$1000/month. Pre-doctoral level degree \$1900/month. Minimum Requirements: Acceptance criteria for the LMH training program include:

- 3.0 GPA or better
- Research career orientation
- Excellent Spanish language oral and written skills
- Background in statistics
- Undergraduates with junior or senior class standing for 2011-2012 academic year, post-baccalaureate/master level degree students, and pre-doctoral level students.
- Must be a U.S. citizen, non-citizen national (generally persons born in outlying possessions of the U.S.), or a permanent resident (i.e., possess a currently valid Alien Registration Receipt Card I-551, or other legal verification of such status)
- Must be from a health disparity population. Specifically, must be African American, Asian American, Latino/Hispanic American, Native American, Alaskan Native, Native Hawaiian or Pacific Islander.

Application Procedure: Prospective trainees should complete the on-line application form <<http://dornsife.usc.edu/latino-mental-health/application/online-application.cfm>>.

- Program application
- Statement of purpose, describing rationale for applying to the program, long-term professional goals, and specific research interests. Statement should be no more than 1,250 words (approximately 2 single-spaced Word pages) in 12 point Times New Roman font.
- Curriculum vitae/resume (example of CV <<http://www.gradview.com/careers/cv.html>>)

National Institutes of Health, Office of Behavioral and Social Science Research
2012 Training Institute for Dissemination and Implementation Research in Health (TIDIRH)
Dolce Hayes Mansion
San Jose, California
July 9-13, 2012
Deadline: March 2, 2012

One of the most critical issues impeding improvements in public health today is the enormous gap between what we know can optimize health and healthcare and what actually gets used and implemented in every day practice. The science of dissemination and implementation (D&I) seeks to address this gap by understanding how to best ensure that evidence-based strategies to improve health and prevent disease are effectively delivered in clinical and public health practice. Institute Goals: The Office of Behavioral and Social Sciences Research, National Institutes of Health, in partnership with the National Cancer Institute, the National Institute of Mental Health, and the U.S. Department of Veterans Affairs, is sponsoring this 5-day training institute to provide participants with a thorough grounding in conducting dissemination and implementation research in health. Faculty and guest lecturers will consist of leading experts (practitioners and teachers) in theory, implementation and evaluation approaches to D&I, creating partnerships and multi-level transdisciplinary research teams, research design, methods and analyses appropriate for D&I investigations and conducting research at different and multiple levels of interventions (e.g., clinical, community, policy). Participant Eligibility Requirements: This training is designed for investigators at any career stage interested in conducting Dissemination and Implementation (D&I) research

<<http://conferences.thehillgroup.com/OBSSRinstitutes/TIDIRH2012/index.html#definitions>>.

To be eligible, participants must NOT have received R18, R01 or R01-equivalent funding as a principal investigator for D&I research. Note, investigators who have received an R01 or equivalent are eligible, as long as the funding was not specifically for D&I research. Preference will be given to applicants who demonstrate experience with, or potential for, working effectively in transdisciplinary teams and who have strong partnerships with-or are embedded within-healthcare delivery or community-based organization settings. We seek a balance of both junior and senior investigators, with the overall goal of bringing new people into the field of D&I research. In addition, to be eligible, participants must meet all of the following criteria:

- * Hold a doctoral level degree (PhD, ScD, MD, DrPH, DO, DVM, DNSc, DrPH, etc.).

- * Have demonstrated experience and expertise in health science (e.g., medicine, behavioral medicine, nursing, medical anthropology, health economics, health policy).

- * Have a feasible D&I research concept to bring to the institute and develop throughout the week. This should be a project the applicant is seriously interested in conducting and/or submitting for funding.

- * Federal employees are not eligible with the exception of individuals whose position allow them to receive grants and function as independent researchers (e.g., VA research investigators).

- * Be willing and able to attend the entire training 5-day institute, if accepted.

Applicants are NOT required to be citizens, permanent residents, or non-citizen nationals of the United States. However, expenses will only be paid for domestic travel within the U.S. (domestic air/train fare, lodging during the institute, government per diem rate for meals not provided, and domestic ground transportation/airport transfers). For more information and instructions for how to apply, please visit our webpage:

<http://conferences.thehillgroup.com/OBSSRinstitutes/TIDIRH2012/index.html>.

Northeastern University, Department of Health Sciences, Boston, MA
Tenure Track Faculty Position in Environmental Health

The Bouvé College of Health Sciences at Northeastern University invites applications for a new tenure track faculty position in Environmental Health with an appointment in the Department of Health Sciences, starting in September, 2012. The college is recruiting an Environmental Health tenure track faculty member to be affiliated primarily with the Master of Public Health in Urban Health Program, and to contribute to teaching, research, and other scholarly activities with faculty in the Department of Health Sciences. The MPH Program in Urban Health is committed to the education and development of competent public health researchers and practitioners. This academic position is tenure-track at the level of Assistant or Associate Professor, depending on the qualifications of the candidate. Outstanding candidates will also be considered for a Full Professor rank with the option of obtaining tenure upon entry.

Responsibilities: Principal responsibilities include development of a high-quality, independent research program, instruction and mentoring of students enrolled in departmental programs, and University and professional service. Qualifications:

Candidates are expected to possess a doctoral degree in environmental health or a relevant field. Additionally, an MPH degree and expertise in urban health issues are highly desirable. Candidates should demonstrate the potential to establish and maintain an active research program as evidenced by external grant funding and a record of peer-

reviewed publications commensurate with their academic experience. Candidates should also demonstrate the potential for outstanding teaching and mentoring of students.

Additional Information: The Bouvé College of Health Sciences offers six majors in three schools - health professions, nursing, and pharmacy - that include 276 faculty with expertise in public health, applied psychology, speech audiology, nursing, physician assistance, pharmacy, and physical therapy; all with an interdisciplinary emphasis. The Department of Health Sciences is home to Northeastern's MPH Program in Urban Health. In addition to the MPH Program, the department consists of an undergraduate program in Health Sciences, a Masters program in Exercise Sciences and PhD program in Personal Health Informatics (in collaboration with the College of Computer and Information Science). The Department is home to the Center for Population Health and Health Disparities and is enhanced by the presence of collaborating organizations including the Institute on Urban Health Research, which has longstanding collaborations with the Boston Public Health Commission, the Mass. Department of Public Health and a host of local community based agencies; and the Center for Community Health Education Research and Service (CCHERS) - a network of 15 academic health centers in Boston. The Department is currently designing a PhD program in population health and the new faculty member can be instrumental in shaping this program. Since 2008, department faculty has been awarded over \$26 million in NIH grants. The University houses the Northeastern Environmental Justice Research Collaborative and the NIH funded Puerto Rico Testsite for Exploring Contamination Threats (PROTECT) Center which is a collaboration of faculty experts in engineering, public health, and biomedical and environmental sciences. In addition, the University is building the George J. Kostas Research Institute for Homeland Security. There are also ample resources for collaborative training and research within the Boston area. The University has strong ties to the local and state health departments and is located four blocks from the Longwood Medical Area (encompassing Harvard Medical School and School of Public Health, Children's Hospital Boston, Brigham & Women's Hospital, and Beth Israel Deaconess Medical Center) and eight blocks from the Boston University Schools of Medicine and Public Health and the Boston Medical Center.

Application Information: Applications will be reviewed beginning November 1st and will continue until the position is filled. The expected start date of this position will be September 1, 2012. Applications must be submitted on-line by visiting the Provost website at: www.northeastern.edu/provost/faculty/positions.html. Click on 'Access Faculty Positions.' Applications must include a cover letter, a statement of current and future research interests, curriculum vitae, and contact information for at least three references. More information regarding this position may be obtained by contacting the Chair of the search committee: Shan Mohammed MD, MPH at s.mohammed@neu.edu

Pennsylvania State University

Postdoctoral Scholar in Health-Environment

Dr. Brian King (Department of Geography, Penn State University) is recruiting a postdoctoral scholar beginning August, 2012, to work on health-environment research. The individual will be expected to work as an assistant on a National Science Foundation supported project (GSS-1056683) Political Ecologies of Health: Coupling Livelihood and Environment Responses to HIV/AIDS. The project is specifically designed to address how livelihood systems in rural South Africa adjust in response to HIV/AIDS; how livelihood responses to HIV/AIDS rework access patterns and the rules governing resource use; and variations in intra-household and intra-community livelihood responses to HIV/AIDS. Responsibilities will include travel to South Africa to complete data collection, data coding, and analysis. The postdoctoral scholar will also assist with literature searches and reviews, academic publishing and conference presentations, and engagement with research and educational partners in South Africa and the United States. Questions about the position can be directed to Brian King (king@psu.edu). The position will begin August 2012 and will be for two years (academic years 2012 - 2014), depending upon performance and continuation of funding. A Ph.D. in geography or a related discipline is expected. Applicants with previous research experience, familiarity with quantitative and qualitative methods, and interest in South Africa and health research will be particularly competitive. Salary and benefits commensurate with experience. Applications should include a letter describing research interests and experience, a complete curriculum vita, up to three reprints, and three letters of recommendation. Submit all materials electronically to mpr5@psu.edu (please note in the subject line: Postdoctoral position). Review of applications will begin on February 6, 2012.

University of Maryland, School of Public Health, Department of Epidemiology and Biostatistics

Tenure-track Faculty in Epidemiology (3 Openings)

We are searching for two epidemiology tenure-track faculty, and one tenure-track biostatistician.

The Department of Epidemiology and Biostatistics, School of Public Health, University of Maryland, College Park (<http://www.sph.umd.edu/EPIB>) invites applications for open rank tenure-track positions in epidemiology. These positions represent a unique opportunity to join a growing department in a fully accredited School of Public Health. Research areas of particular interest to the department include, but are not limited to, social and behavioral factors in health and epidemiology of cardiovascular disease, cancer, infectious diseases (such as HIV/AIDS), and obesity. Special emphasis on diet/nutrition, physical activity, and application of epidemiologic methods to develop and evaluate disease prevention and health promotion interventions for translational research is desirable. If you have questions, please contact the search committee chair, Dr. Jane Clark: Jane E. Clark, Ph.D.

Professor & ADVANCE Professor

Director, Cognitive Motor Neuroscience Labs Department of Kinesiology School of Public Health Neuroscience & Cognitive Science Program University of Maryland College Park, MD 20742-2611

Office: SPH 2341 |301.405.2452 (voice) |

fax: 301.405.5578

jeclark@UMD.EDU

University of Tennessee, Knoxville, Department of Public Health, College of Education, Health, and Human Sciences

Assistant/Associate Professor of Community Health Education

POSITION: The Department of Public Health at the University of Tennessee, Knoxville is seeking applicants for the position of Assistant/Associate Professor with expertise in community health education. This is a full-time, tenure-track, academic-year (9-month) position with appointment beginning August 2012 or later. Minority applicants are encouraged to apply. **QUALIFICATIONS:** Required: Earned doctorate in a relevant discipline; published research in refereed journals; an established research agenda with external funding; and experience with community health planning, programming and/or policy. Desired: Certification as a Health Education Specialist (CHES); experience advising and teaching public health master's and doctoral students; experience with advocacy, social marketing, and/or working in community-based settings; and a research focus that builds on and extends existing strengths of the department. The Knoxville campus of the University of Tennessee is seeking candidates who have the ability to contribute in meaningful ways to the diversity and intercultural goals of the University.

RESPONSIBILITIES: Primary responsibilities include maintaining a successful record of scholarly activity, including research, publication and grant awards; teaching courses related to community health education to master's and doctoral students (no undergraduate teaching required); and professional leadership, academic advising, and service within the university and region. Teaching loads are typically one course per semester, allowing substantial time for carrying out a research agenda with full salary coverage.

DEPARTMENT, UNIVERSITY AND COMMUNITY: The Department of Public health offers an accredited MPH degree with three concentrations (community health education, health planning/administration, and veterinary public health) and a PhD in Health Behavior and Health Education. The Department attracts a national and international student body and provides extensive support for both student and faculty interests. The University of Tennessee, Knoxville, is the state's flagship research institution, a campus of choice for outstanding undergraduates, and a premier graduate institution. As a land-grant university, it is committed to excellence in scholarship, learning, and service, and aims to enrich and elevate society. The University welcomes people of all races, genders, creeds, cultures, and sexual orientations, and values intellectual curiosity, pursuit of knowledge, and academic freedom and integrity. The City of Knoxville is situated in a valley between the Great Smoky Mountain National Park and the Cumberland Plateau, areas of great beauty and among the most biodiverse in the U.S. Knoxville is a metro area of 650,000, offering many amenities of urban life. **SALARY:** Competitive and commensurate with candidate's experience and credentials. **APPLICATION:** Review of applications will begin in January 2012 and will continue until the position is filled. Please

submit application as a *single pdf document*. The application should include a letter of application addressing the required and desired qualifications stated in the position announcement; a curriculum vitae; and the names and contact information of three references. *Send application to Wendy Smith at wsmith12@utk.edu*. Inquiries regarding the position should be sent to Clea McNeely, DrPH, 1914 Andy Holt Avenue (HPR 390), Knoxville, TN 37996, (865) 974-5041, cmcneely@utk.edu. For more information: http://www.kellogghealthscholars.org/news/kconnection/Volume10-2012/FAQs_about_community_health_education_position.pdf.

Winston-Salem State University
Open Rank Position in Community Psychology
Open Rank Position in Clinical Psychology
Deadline: February 3, 2012

Winston-Salem State University, a premier comprehensive university, is one of the 17 constituent institutions comprising the University of North Carolina. The university enrolls approximately 6,400 students in more than 40 bachelor's degree programs and ten master's degree programs. Winston-Salem State University is located in the Piedmont Triad area of North Carolina with Greensboro to the east and High Point to the south, with close proximity to Charlotte. Winston-Salem, a city of approximately 180,000, was recently ranked as one of the top 50 cities worldwide in quality of life by Mercer Human Resources Consulting. The College of Arts and Sciences invite applications for a tenure-track psychology position within the department of Behavioral Science and Social Work. Nine-month position; open rank.

Two open positions: Open Rank Position in Community Psychology and Open Rank Position in Clinical Psychology. For complete position description and to apply online access <https://jobs.wssu.edu>. Close Date: February 3, 2012. Tentative Start Date: August 15, 2012. Application Process: (1) Complete online application; (2) Submit the following documents online: letter of application, curriculum vitae, with contact information for references, statement of teaching philosophy; (3) Mail the following to the address listed below: three current letters of reference, official transcripts of all college-level work, and evaluation of all foreign (non-US) transcripts an appropriate agency.

World Health Organization, Geneva, Switzerland
Director Chronic Diseases and Health Promotion Department, NMH/CHP - D1 WHO position
Vacancy notice HQ/11/NMH/FT421
Deadline: January 31, 2012

".....To provide leadership and direction for global, regional and national efforts to promote health and to prevent and control major chronic diseases. Primary Objectives include: Advocating for health promotion and chronic disease prevention and control; promoting health, especially for poor and disadvantaged populations; slowing and reversing the adverse trends in the common chronic disease risk factors; preventing premature deaths and avoiding unnecessary disability due to major chronic diseases cardiovascular diseases, cancer, diabetes and chronic respiratory diseases; and preventing blindness and deafness..." Website: <http://bit.ly/z7YDmJ>.

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CONFERENCES AND EVENTS

American Academy of Health Behavior
Applications of Technology in Health Behavior Interventions and Research
Four Seasons Hotel
Austin, TX
March 18-21, 2012

AAHB Conference Registration is NOW OPEN! Please join us for the next AAHB annual scientific meeting, March 18-21, 2012 for Applications of Technology in Health Behavior Interventions and Research at the Four Seasons Hotel in Austin, Texas. I'm pleased to announce that the registration for the 2012 Annual Meeting is now open: http://www.aahb.org/Meeting_Info_2012.html. Thanks to Herb Severson, the 2012 Program Chair and the hard work of the 2012 Conference Planning Committee**, we have a fabulous program planned for this year!! The theme of the meeting is Applications of Technology in Health Behavior Research and as is our tradition, the program is packed

full of amazing researchers and scholars doing amazing things in the field of health behavior research. Please visit the website today and register for 2012 meeting!

Breast Cancer Action

Free Webinar -- New Report on Breast Cancer and the Environment: A Briefing for Advocates

January 24, 2012 from 2:00 p.m.-3:00 p.m. (PST) or January 25, 2012 from 10:00 a.m.-11:00 a.m. (PST)

Last month Breast Cancer Action attended the annual San Antonio Breast Cancer Symposium (SABCS) as patient advocates; the eyes, ears-and mouthpiece-of breast cancer patients. SABCS is an international conference focused on new developments in breast cancer research and treatment. One of the highly anticipated reports at SABCS was the long-awaited Breast Cancer and the Environment: A Life Course Approach report by Institute of Medicine (IOM). The report, paid for by Susan G. Komen for the Cure, reviewed the current evidence on breast cancer and the environment and made recommendations on actions that women might take to reduce their risk as well as encouraging further research on this issue. This January 24th & 25th, join us for a free webinar: New Report on Breast Cancer and the Environment: A Briefing for Advocates featuring Karuna Jaggar, Executive Director of Breast Cancer Action and Tracy Weitz, PhD, MPA, Assistant Professor, Department of Obstetrics, Gynecology & Reproductive Sciences and Director of the Advancing New Standards in Reproductive Health. The webinar will provide:

- * BCAction's commentary and analysis of the IOM report on breast cancer and the environment
- * A summary of where the report got it right and where it missed the mark
- * A focus on the limits of individual behavior and the policy changes required to reduce these exposures to toxins that may be contributing to the skyrocketing rates of breast and other cancers
- * Review the committee's recommendations and discuss how advocates can move these recommendations forward

Join us on Tuesday, January 24th <<https://www3.gotomeeting.com/register/871578294>> or Wednesday, January 25th <<https://www3.gotomeeting.com/register/734866230>> for this free one-hour webinar to understand the role that advocates can play in turning the tide on the breast cancer epidemic. Register for Tuesday January 24th, 2012 webinar: 2pm-3pm (Pacific Standard time) <<https://www3.gotomeeting.com/register/871578294>>. Register for Wednesday January 25th, 2012 webinar: 10am-11am (Pacific Standard Time)<<https://www3.gotomeeting.com/register/734866230>>. For your convenience, we are offering the webinar at two different times. Click on the links above to register for the time and day that works for you.

Community-Campus Partnerships for Health

15th Anniversary Conference - Community-Campus Partnerships as a Strategy for Social Justice: Where We've Been & Where We Need to Go
Houston, TX

April 18-21, 2012

Deadline (early-bird): February 3, 2012

Online registration is now open for Community-Campus Partnerships for Health's 15th Anniversary Conference, April 18-21, 2012 in Houston, Texas USA! Register by February 3rd to receive discounted early-bird registration rates: <http://bit.ly/uLxLPf>. The conference, "Community-Campus Partnerships as a Strategy for Social Justice: Where We've Been & Where We Need to Go" promises to be CCPH's best yet as hundreds of community and campus partners convene for 4 days of skill-building, networking and agenda-setting! Whether you are directly involved in community-based participatory research, service-learning or other community-academic partnerships - or are working to ensure the conditions are in place for such partnerships to thrive and have impact - the conference will challenge and inspire you! Regardless of the social justice issue you are passionate about - health equity, education, environmental justice, food security, sustainability, indigenous rights and more - together we will explore how to leverage partnerships to create change. Conference highlights include:

- * A stellar line-up of pre-conference workshops on such topics as "Methods & Measures to Evaluate the Effectiveness of CBPR Partnerships to Improve Health Equity" and "Policy Analysis: A Tool for Translating Research to Policy, Deepening Partnerships & Creating

Healthy Communities"

* Skill-building workshops, educational exhibits, community site visits and many opportunities for informal networking!

* A special celebration with our major conference partner, St. Luke's Episcopal Health Charities, the area's largest charity focused solely on health and well-being and also marking its 15th anniversary in 2012!

* A one-year individual premium membership in CCPH with your conference registration for those of you who are not already members!

Houston is an ideal location for the conference, with its many community-campus partnerships, tourist attractions, and warm and sunny spring climate! The 4th largest city in the U.S. is a multi-cultural destination for food, culture and green space. REGISTER TODAY! To register, visit <http://bit.ly/uLxLPf>

RESERVE YOUR HOTEL ROOM TODAY! For information about hotel reservations and transportation options, please visit <http://bit.ly/p4F92u> The deadline to reserve a hotel room at the conference discount rate is March 23rd. KEEP THESE IMPORTANT DEADLINES IN MIND: February 3rd for early-bird conference registration rate March 23rd for hotel reservations at the discounted conference rate April 10th for advance conference registration. QUESTIONS? Visit the conference homepage at <http://bit.ly/hFPPIr> or contact Shelly Tolo at toloevents@aol.com or 1 (206) 962-0012.

Follow the latest conference development on twitter at <http://twitter.com/CCPHconference>.

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RESOURCES

Publications

[¿A Dónde Vamos?](#),

National Council of La Raza

The National Council of La Raza produced [¿A Dónde Vamos?](#), a report that provides an extensive analysis of the growing HIV/AIDS crisis among Latino subgroups in the U.S. and offers an analysis of the Hispanic HIV/AIDS crisis that includes social, cultural, and structural-environmental factors. The report concludes with recommendations for the prevention and treatment of HIV and AIDS through community-based research and direct service in the Hispanic community.

CBPR Variable Matrix: Research for Improved Health in Academic/Community Partnerships

Cynthia Pearson, Bonnie Duran, Julie Lucero, Jennifer Sandoval, John Oetzel, Greg Tafoya, Lorenda Belone, Magdalena Avila, Diane Martin, Nina Wallerstein, Sarah Hicks

CES4Health!

<http://bit.ly/sYoF50>

"CBPR Variable Matrix: Research for Improved Health in Academic/Community Partnerships" is the latest product of community-engaged scholarship to be peer-reviewed and published through CES4Health!

Excerpted Abstract: To advance community-engaged research, investigators from the Universities of New Mexico and Washington and the National Congress of American Indians Policy Research Center, in collaboration with a National Advisory Board of academic and community experts, created a variable matrix to support a previously published conceptual logic model of community-based participatory research (CBPR) processes and outcomes. The variable matrix provides measurements to support the four dimensions of CBPR characteristics and relationships within each domain of the interactive CBPR model. First, contextual factors shape the nature of the research and the conditions under which partnerships can develop and be sustained. Next, group dynamics, consisting of three sub-dimensions, structural factors (i.e., collaborative agreements), individual partner characteristics, and relational dynamics (i.e., group decision-making); interact with contextual factors to co-produce the intervention and its research design. Finally, CBPR system changes and health outcomes result directly from the research. In sum, we provide items and scales from over 46 instruments representing 60% of the 40 domains in the CBPR logic model.

How can the health equity impact of universal policies be evaluated?

Insights into approaches and next steps

Edited by Beth Milton, May Moonan, David Taylor-Robinson, Margaret Whitehead

http://www.euro.who.int/_data/assets/pdf_file/0019/155062/E95912.pdf

Synthesis of discussions from an Expert Group Meeting. A joint publication between the WHO European Office for Investment for Health and Development, Venice, Italy and the Liverpool WHO Collaborating Centre for Policy Research on Social Determinants of Health

Held at the University of Liverpool, 24 November 2010

This report presents arguments and case studies from an expert group meeting convened to clarify the importance and challenges of evaluating universal policies, and to outline potential approaches to assessing the impact of universal policies on health inequities. It also identifies key research and policy questions that need evaluating as a matter of priority, and sets the agenda for partnership working to develop these methods further.

Housing and Health Care Go Hand in Hand

Raphael Bostic and Risa Lavizzo-Mourey, Special to Roll Call, Dec 15, 2011

Maryland's Shady Grove Station is just 30 minutes from Union Station on Washington's Metro Red

Line, but when it comes to the health of these communities, the distance is worlds apart. Residents near Shady Grove can expect to live nine years longer than those living near Union Station. The differences are shaped by many factors, but most have little to do with medical care. In fact, health and longevity are more strongly influenced by social, economic and physical environments than by what happens in the doctor's office.

Housing and Urban Development Secretary Shaun Donovan underscored the critical role of neighborhoods and communities in health and the need for action at a recent conference in Detroit, noting, "You can predict the life expectancy of a child by the ZIP code in which they grow up. This is wrong." Policymakers have spent years improving access to care. And rightly so. But we now know that the social, economic and physical factors that shape our everyday lives are even more important. A critical factor is affordable housing in good neighborhoods. As the research group Children's HealthWatch aptly states: "A safe, decent, affordable home is like a vaccine it literally keeps children healthy." HUD's Moving to Opportunity demonstration project, intended to uncover the effects of neighborhoods on a range of measures, recently published findings in the New England Journal of Medicine showing that poor women who were given the opportunity to live in safer, more affluent neighborhoods had lower rates of obesity, diabetes, psychological distress and major depression than those who did not take that opportunity. This suggests long-term investments in improving neighborhoods may help improve the health outcomes of poor families. Another study, conducted in Southwest Baltimore and published in Health Affairs, found that racial differences in hypertension, diabetes and obesity among women either vanished or substantially narrowed when researchers took into account where people lived. Neighborhoods matter. For years, the health and affordable housing sectors have worked on parallel but separate tracks to improve the lives of low-income people. The affordable housing sector focused on improving neighborhoods suffering from poverty, overcrowded housing and high unemployment. The

health sector focused on combating poor health, including high rates of obesity, asthma and chronic disease. We worked side by side in many of the same neighborhoods but have rarely collaborated. If real progress is to be made toward improving the health and quality of life for millions of Americans, this must change. The evidence makes one point clear: Housing policy is health policy. The affordable housing and health sectors must stop working in silos and work together. We have begun this journey. Until recently, HUD did not focus on the potential health benefits of its programs, but it now considers improved health outcomes a strategic goal and is creating initiatives designed to transform social, economic and

environmental conditions. Signature efforts such as the Neighborhood Revitalization Initiative, Choice Neighborhoods, and Strong Cities, Strong Communities seek to improve places where people live. Others, including the Housing Choice Voucher and Housing Opportunities for Persons with AIDS, create links between housing, quality educational opportunities and jobs, safer streets and quality health care to help ensure that housing inoculates as many people as possible. The good news is that there are already successful collaborations and that these efforts yield cost savings. In Seattle, public health and housing leaders are working together to reduce allergens in low-income homes that

can cause asthma, a scourge of low-income children that results in an estimated 13 million missed school days and \$3.2 billion in treatment costs. Mercy Housing a nonprofit affordable housing developer - found that its San Francisco Mission Creek Senior Apartments have created a healthier environment for seniors and are saving the city almost \$1.5 million a year, according to another Health Affairs study. At a time when we must do more with less, creating similar partnerships makes fiscal sense. An unhealthy workforce adds to health care costs and is less productive. Preventing disease is cheaper than treating illness. Yet while current collaborations are encouraging, we need to do more to make sure health is in all policies. Housing leaders and community developers must make health improvement part of their blueprint. And the health sector must work with them to build healthy communities where the healthy choice is the easy choice. How do we move forward? We propose creating an ongoing partnership between the health and housing sectors to make sure housing and community development activities are optimally designed to improve residents' health. The affordable housing sector contributes the ability to develop affordable housing and improve neighborhoods, and the health sector supplies the research and expertise about health impacts. HUD and the Robert Wood Johnson Foundation are ready to move forward, and we hope that others will join us. Raphael Bostic is assistant secretary for policy development and research at the Department of Housing and Urban Development. Risa Lavizzo-Mourey is president and CEO of the Robert Wood Johnson Foundation.

http://blog.rwjf.org/publichealth/2011/12/15/housing-policy-is-health-policy-newpublichealth-qa-with-huds-raphael-bostic/?cid=XEM_737486

Website

Centers for Disease Control and Prevention
Epiinfo7

<http://wwwn.cdc.gov/epiinfo/>

Physicians, nurses, epidemiologists, and other public health workers lacking a background in information technology often have a need for simple tools that allow the rapid creation of data collection instruments and data analysis, visualization, and reporting using epidemiologic methods. Epi Info™, a suite of lightweight software tools, delivers core ad-hoc epidemiologic functionality without the complexity or expense of large, enterprise applications. Epi Info™ is easily used in places with limited network connectivity or limited resources for commercial software and professional IT support. Epi Info™ is flexible, scalable, and free while enabling data collection, advanced statistical analyses, and geographic information system (GIS) mapping capability. Since its initial release, Epi Info™ users have self-registered in over 181 countries covering all continents including Antarctica. Epi Info™ has been translated in more than 13 languages. More than one million users are estimated.

Launch of the new Health Systems Evidence website: McMaster Health Forum

<http://bit.ly/tdZgSi>

Health Systems Evidence is a valuable resource for policymakers, stakeholders and researchers seeking to address today's most pressing health challenges. It provides answers on questions about how to strengthen or reform health systems, or how to get cost-effective programs, services and drugs to those who need them. The redeveloped website offers numerous enhancements, including new open search and advanced search functionalities, and is available in seven languages: Arabic, Chinese, English, French, Portuguese, Russian and Spanish. Health Systems Evidence, a continuously updated repository of syntheses of research evidence about health system governance, financial and delivery arrangements, has expanded dramatically since its launch less than two years ago. It also includes syntheses of research about implementation strategies that can support change in health systems, and is now adding economic evaluations in these same domains, descriptions of health system reforms, and descriptions of health systems. The database currently contains nearly 2,000 records that are coded with additional details such as the quality of the synthesis, how recently the search for the studies was conducted, and the countries in which the studies included in the synthesis were conducted. Key findings of the documents are available through links to user-friendly summaries written by any of nine groups in the world. Other enhancements added with the relaunch of Health Systems Evidence include a comprehensive synonyms

dictionary that cuts through the different jargon in use within and across countries, a filter that allows users to identify evidence that targets low- and middle-income countries, and a customizable evidence service that will provide monthly email alerts identifying new documents available in the database specific to someone's individual interests. Video tutorial about Health Systems Evidence - McMaster Health Forum <http://bit.ly/tf88y9> on how to make the best use of the site is provided, which will assist users to rapidly identify the best available research on a particular health system topic.

Health Systems Evidence is supported by a collaboration with the Program in Policy Decision-making at McMaster University, Cochrane Canada and its Policy Liaison Office, the Health Information Research Unit's McMaster PLUS and McMaster Search Filters, and Rx for Change. Translations of the site into the six languages other than English is supported by World Health Organization (WHO) regional offices for the Americas (Pan American Health Organization PAHO/WHO), Europe and the Eastern Mediterranean, the American University of Beirut and the Evidence-Based Medicine Centre at Lanzhou University in China.

Others

Community-Campus Partnerships for Health

Achieving the Promise of Community-Engaged Health Disparities Research: A National Community Partner Forum

Nearly 100 community leaders from across the U.S. convened Dec 5 - 7, 2011 in Boston for "Achieving the Promise of Community-Engaged Health Disparities Research: A National Community Partner Forum." Co-sponsored by Community Campus Partnerships for Health and the Center for Community Health Education, Research & Service with funding from the National Institute of Minority Health & Health Disparities, the forum focused on 4 priority areas for action: Community review of proposed research, governance structures for research, community engagement in all phases of the research process and funding community infrastructure needed to conduct research. The forum ended on a high note as attendees made recommendations, formed workgroups, deepened relationships and pledged to re-convene in Dec 2012 in Washington DC. Visit the forum webpage at <http://bit.ly/uCu3r5> to view the forum agenda, planning committee info, participant bios, photos and a slide show. Forum proceedings and other products will be posted on the site as they become available.

Documentary Film on DVD: Planting Healthy Roots

Planting Healthy Roots is a documentary film about the formation and implementation of the *Right Choice, Fresh Start Farmers' Market* in Orangeburg, South Carolina. The *Right Choice, Fresh Start Farmers' Market*, the first farmers' market in South Carolina - and among the first in the country - to partner with a federally qualified health center (Family Health Centers Inc.), opened in Orangeburg in early June 2011. The goal of the market is to increase access to and consumption of healthy foods among people living in rural areas and increase economic opportunity for small-scale rural farmers in South Carolina. Dr. Darcy Freedman, a researcher in the College of Social Work at the University of South Carolina who led the move to create the farmers' market, and Dr. Heather Brandt, a researcher in the Arnold School of Public Health at the University of South Carolina, teamed up with Professor Laura Kissel and two student filmmakers, Trey Murphy and Tim Jacobs, in the Media Arts Program at the University of South Carolina to produce a film documenting the formation and implementation of the market. They used personal stories, community profiles and expert interviews to showcase the market and describe the formation and implementation. The market is supported by a grant from the Centers for Disease Control and Prevention and the National Cancer Institute to the South Carolina Cancer Prevention and Control Research Network at the University of South Carolina. Freedman, Brandt, and Kissel received funding from the USC Science and Health Communication Research Group to make the documentary film about the market.

Planting Healthy Roots premiered at two community film screenings held in Orangeburg in October 2011 and on the campus of the University of South Carolina as part of a regular meeting of the Science and Health Communication Research Group in December 2011. Future screenings are planned in South Carolina and at professional meetings in 2012. FREE DVDs of *Planting Healthy Roots* are available to those interested in learning more about the formation and implementation of the health center-based farmers' market. The film may be of interest to those who use community-based participatory approaches,

those who work in the area of food access, those interested in starting a farmers' market, those partnering with federally qualified health centers on projects/programs addressing nutrition for cancer prevention, and/or those interested in coalition model filmmaking (e.g., Abrash and Whiteman) methods. To receive a FREE DVD of the *Planting Healthy Roots* documentary film, please go to <http://www.surveymonkey.com/s/QRKMGW2> to complete a brief survey. Your DVD will be sent within 1-2 weeks depending on shipping time. If you receive a free DVD of the film, in March 2012, you will receive a follow-up email asking you to complete a brief assessment of the film regarding its quality and overall utility. You will also be asked about how you used the film. We hope that you will participate in the follow-up assessment if you request and receive a copy. Your feedback is valued and will be helpful in guiding future efforts. The documentary film will be available through Youtube and other online outlets in late spring 2012. If you have questions, please contact Dr. Freedman at darcy.freedman@sc.edu or 803.777.1326 or Dr. Brandt at hbrandt@sc.edu or 803.777.4561.

NIH Launches First Online Genetics Course for Social and Behavioral Scientist

A new genetics educational program(<http://www.nchpeg.org/bssr/>) will provide social and behavioral scientists with sufficient genetics background to allow them to engage effectively in interdisciplinary research with genetics researchers. The Office of Behavioral and Social Sciences Research (OBSSR) at the National Institutes of Health, partnered with the National Coalition for Health Professional Education in Genetics to create the free, Web-based project. Increasingly, scientific outcomes are not fully explained by genetic, environmental, or social factors alone or as independent contributors. Instead, public health advances and scientific breakthroughs tend to rely on transdisciplinary teams of social scientists and genetic researchers. This creates a greater need among social and behavioral scientists for an understanding of the complexity of the genetic contribution to health, disease and behaviors. The overarching goal of the course, Genetics and Social Science: Expanding Transdisciplinary Research, is to improve these scientists' genetics literacy in several key areas, broadly grouped into conversation, imagination, evaluation and integration. The course will provide sufficient knowledge to support the integration of genetics concepts in the behavioral or social scientist's own research and will allow for collaborative studies with geneticists. The course will provide users with the ability to conceive of progressive but feasible studies. Scientists will develop the skills necessary to assess genetics research for validity and utility. Because behavioral and social scientists have a very large breadth of expertise, the course focuses on core concepts that are applicable to most scientists, no matter where they are in their careers or training. The course was developed by an advisory committee with experts from a wide range of areas, including addiction, psychiatry, anthropology, obesity, clinical genetics, and race and ethnicity. The core areas are: variation (e.g., sources of genetic variation, biological pathways); gene-environment interaction; population issues; clinical issues (e.g., family history) and research issues (e.g., data sharing). The course was developed based on adult learning theory, which focuses on active learning and self-direction, allowing for users to choose their own path through the interactive content. "We're very pleased with the pilot program," said Dr. Robert M. Kaplan, director of OBSSR. "It's the first of its kind, and it fills a need for this type of training and education which has existed for some time in the research community." Scientists using the online course can choose to learn through four case studies--tobacco, obesity, major depression, and breast cancer. The interactive case studies build the scientist's knowledge and comfort with the concepts in a stepwise manner. The general structure for each case study includes a statement of the problem, an interactive review of the pertinent literature, a discussion of the approach to research in this area, exercises to develop the next research question, opportunities for collaboration and a discussion of the clinical implications. Each case study will link to specific core concepts (variation, gene-environment interaction, population, clinical or research issues) to allow the user to determine his or her learning style. Please visit [<http://www.nchpeg.org/bssr/>](http://www.nchpeg.org/bssr/) to experience the online course, Genetics and Social Science: Expanding Transdisciplinary Research.

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ABOUT THIS NEWSLETTER

To contribute information, resources or announcements to Kellogg Connection, e-mail kconnection@cfah.org. The Kellogg Connection is a monthly electronic newsletter that connects W.K. Kellogg programs: Kellogg Health Scholars, Scholars in Health Disparities, Community Health Scholars, Kellogg Fellows in Health Policy Research and H. Jack Geiger Congressional Health Policy Fellows.

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The Kellogg Health Scholars Program is a program of the Center for Advancing Health (CFAH). Since its founding in 1992, The Center for Advancing Health (CFAH) has worked to translate complex scientific evidence into information, policies and programs that will ensure that each person can make good decisions about their health and interact effectively with their health care providers. CFAH receives unrestricted funding from a number of foundations, principally The Annenberg Foundation, and restricted funding from the W. K. Kellogg Foundation. To contact CFAH, e-mail us at info@cfah.org, call us at (202) 387-2829 or visit our website at www.cfah.org.

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