

Dr. Natasha Williams, H. Jack Geiger Congressional Health Policy Fellows Program alumna, recently passed the Maryland bar exam. Dr. Williams scored high marks that she was waived into the District of Columbia.



ANNOUNCEMENTS

Mark Your Calendars! The Kellogg Health Scholars Program annual meeting will be held May 19-21, 2008, in Washington, DC. Meeting details are forthcoming.

2008-2010 Cohort of the Kellogg Health Scholars Program. We are pleased to inform you that we have a reasonable expectation of being able to recruit this year for a 2008-2010 cohort, which will begin in fall 2008. In late November, we hope to be inviting applications for the program (with a deadline early in 2008). Unless we are informed otherwise, you can expect to receive a notice on a 2008-2010 Call for Applications. In the meantime, information is available at: <http://www.kellogghealthscholars.org>. For information regarding specific tracks: Community Track - Saundra Bailey, voice 734-647-3065, fax: 734-936-0927, email saundrab@umich.edu; Multidisciplinary Track - Marie Briones-Jones, voice 202-387-2829, fax 202-387-2857, email mbjones@cfah.org. Please feel free to pass along this information to interested individuals.

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 dtorresen@cfah.org or mbjones@cfah.org.



SPOTLIGHT ON KELLOGG SCHOLARS NETWORK

Meet Scholars in Health Disparities Program alumna, **Carlotta M. Arthur, Ph.D...**

Dr. Carlotta M. Arthur is a Program Officer in Higher Education, Liberal Arts Colleges at the Andrew W. Mellon Foundation in New York City. Carlotta's program area includes HBCUs and Appalachian Colleges. She received a B.S. in Metallurgical Engineering from Purdue University, and an M.A. in Psychology and a Ph.D. in Clinical Psychology from the State University of New York at Stony Brook. Carlotta completed a Clinical Health Psychology internship at the University of Texas Medical Branch in Galveston, TX, and is a Licensed Psychologist in the State of New York. Dr. Arthur was a member of the inaugural cohort of the W.K. Kellogg Postdoctoral Scholars in Minority Health Disparities at the Harvard School of Public Health from 2001 to 2003, and is now a member of the National Advisory Committee for the Scholars program. Her early research examined the relationships between psychosocial factors and cardiovascular reactivity to psychological stress among African Americans and Caribbean Americans. Carlotta's current research continues to focus on psychosocial factors/determinants of mental and physical health and health inequities among members of the African Diaspora. Recent projects include a study that examines social and cultural factors in perceptions of mental illness among Jamaicans. Primary goals of this project are to improve mental health service provision to underserved populations in Jamaica, and to provide a leverage point for similar work with growing populations of the African Diaspora in the U.S. Carlotta also has a strong interest in the stress and coping of Black women. Carlotta has been a faculty member at Meharry Medical College, an HBCU in Nashville, TN and was also owner of *Just Relax...* a small business that provided research-based, culturally appropriate stress management seminars to community organizations and corporations. She joined Smith College as an Andrew W. Mellon Fellow in the Department of Afro-American Studies in 2005, and began her current position at the Andrew W. Mellon Foundation in July of 2007.



FUNDING

**National Institutes of Health
NIH Partners in Research Program (R03)
RFA-OD-07-001**

Letters of Intent Receipt Date(s): December 12, 2007

NOTE: On time submission requires that applications be successfully submitted to Grants.gov no later than 5:00 p.m. local time (of the applicant institution/organization).

Application Submission/Receipt Date(s): January 11, 2008

This funding opportunity announcement (FOA) solicits research grant applications from academic/scientific institutions and community organizations that propose to forge partnerships (1) to study methods and strategies to engage and inform the public regarding health science in order to improve public understanding of the methods and benefits of publicly funded research, and (2) to increase scientists understanding of and outreach to the public in their research efforts. The purpose of the NIH Partners in Research program is to support two-year pilot and/or feasibility research studies of innovative activities designed to improve public understanding of biomedical and behavioral science, develop strategies for promoting collaboration between scientists and the community to improve the health of the public, and to identify the conditions (e.g., settings and approaches) that will enhance the effectiveness of such activities. Announcement details at <http://grants.nih.gov/grants/guide/rfa-files/RFA-OD-07-001.html>.

**National Institutes of Health
2008 NIH Director's Pioneer Award Program (DP1)
RFA-RM-08-013**

Opening Date: December 16, 2007 (Earliest date an application may be submitted to Grants.gov)

Letters of Intent Receipt Date(s): Not applicable.

NOTE: On time submission requires that applications be successfully submitted to Grants.gov no later than 5:00 p.m. local time (of the applicant institution/organization).

Application Submission/Receipt Date: January 16, 2008

Reference Letter Submission/Receipt Dates: December 18, 2007 – 5:00 p.m. (EST) January 16, 2008

The NIH Director's Pioneer Award Program is meant to complement NIH's traditional, investigator-initiated grant programs by supporting individual scientists of exceptional creativity who propose pioneering and possibly transformative approaches to major contemporary challenges that have the potential to produce a major impact in a broad area of biomedical or behavioral research. To be considered pioneering, the proposed research must reflect ideas substantially different from those already being pursued in the investigator's laboratory or elsewhere. **PURPOSE:** The National Institutes of Health (NIH) is engaged in a series of initiatives, collectively known as the "NIH Roadmap for Medical Research" <http://nihroadmap.nih.gov> to help enable the agency to sustain its historic record of making cutting-edge contributions to biomedical and behavioral sciences. The NIH Director's Pioneer Award Program, is a [High-Risk Research](#) initiative of [Research Teams of the Future](#). The term "pioneering" is used to describe highly innovative approaches that have the potential to produce an unusually high impact in a broad area of biomedical and behavioral research, and the term "award" is used to mean a grant for conducting research, rather than a reward for past achievements. Announcement details at <http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-08-013.html>.

**National Institutes of Health
2008 NIH Director's New Innovator Award Program (DP2)
Current Closing Date for Applications: Mar. 31, 2008**

Purpose. The NIH Director's New Innovator Award

(http://grants.nih.gov/grants/new_investigators/innovator_award/) was created in 2007 to support a small number of new investigators of exceptional creativity who propose bold and highly innovative new research approaches that have the potential to produce a major impact on broad, important problems in

biomedical and behavioral research. The research proposed need not be in a conventional biomedical or behavioral discipline but must be relevant to the mission of NIH. The New Innovator Awards complement ongoing efforts by NIH and its institutes and centers to fund new investigators through R01 grants, which continue to be the major sources of NIH support for new investigators. Thirty New Innovator Awards were made in 2007. -Mechanism of Support. This Funding Opportunity Announcement (FOA) will utilize the DP2 grant mechanism -Funds Available and Anticipated Number of Awards. Total funding available is approximately \$55 million for the five-year period. It is anticipated that up to 24 awards will be made in 2008. Announcement details at: <http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-08-014.html>.

National Institutes of Health

Mentored Research Scientist Development Award (K01)

PA-06-001

Current Closing Date for Applications: January 7, 2009; Multiple Receipt Dates – See Link to Full Announcement for details.

The goals of NIH-supported career development programs are to help ensure that diverse pools of highly trained scientists are available in adequate numbers and in appropriate research areas to address the Nation's biomedical, behavioral, and clinical research needs. - The purpose of the Mentored Research Scientist Development Award (K01) is to provide support and protected time (three, four, or five years) for an intensive, supervised career development experience in the biomedical, behavioral, or clinical sciences leading to research independence. Awards are not renewable, nor are they transferable from one principal investigator to another. - The K01 application may be submitted on behalf of the candidate (principal investigator) by any domestic for-profit or non-profit institution/organization, or public or private institutions, such as universities, colleges, hospitals and laboratories. Foreign institutions are not eligible to apply. - Candidates must be U.S. citizens or non-citizen nationals, or an individual lawfully admitted for permanent residence, who hold a research or health-professional doctoral degree or its equivalent and can commit a minimum of 75% of full-time professional effort conducting research and relevant career development activities specified in the application. Receipt of prior support may impact on eligibility. - The candidate must demonstrate and justify the need for a three, four, or five-year period of additional supervised research experience. Planning, direction, and execution of the proposed career development program and research project will be the responsibility of the candidate and his/her mentor. - The proposed career development experience must be in a research area new to the applicant and/or one in which an additional supervised research experience will substantially augment the research capabilities of the applicant. - The candidate should provide a plan and proposed timeline for achieving independent research support by the end of the award period. - The amount funded as salary for a career development award is not uniform throughout the NIH participating Institutes and Centers (ICs); therefore, the applicant is strongly advised to contact the relevant IC for any distinct guidelines, requirements, and allowable funds (see website referenced in Section VII for IC contacts). - The total amount to be awarded and the number of anticipated awards will depend upon the quality, duration, and costs of the applications received as determined by the peer review process, available funds and program priorities. - The candidate for this K01 award may not concurrently apply for or have an award pending for another NIH career development award. Up to two revisions of an application will be accepted. - Applications must be submitted on or before the receipt dates described at <http://grants.nih.gov/grants/funding/submissionschedule.htm>. - Special Note: The participating NIH ICs may have distinctive guidelines, requirements, and funding amounts for this announcement in order to accommodate the career development needs of researchers working in fields related to their specific research missions. Candidates are therefore strongly encouraged to contact the staff person in the relevant Institute or Center listed under Section VII prior to preparing an application to discuss issues of eligibility, program relevance, and review the specific provisions of this award. - See Section IV for application and submission information. - Telecommunications for the hearing impaired is available at: TTY 301-451-0088. Announcement details at <http://grants.nih.gov/grants/guide/pa-files/PA-06-001.html>.

National Institutes of Health

Mentored Quantitative Research Development Award (K25)

PA-06-087

Current Closing Date for Applications; May 7, 2009; Multiple Receipt Dates - See Link to Full Announcement for details.

The goals of NIH-supported research training and career development programs are to help ensure that diverse pools of highly trained scientists are available in adequate numbers and in appropriate research areas to address the Nation's biomedical, behavioral, and clinical research needs. NIH mentored career development awards provide mentored research experiences to gain additional expertise in a new research area or in an area that will significantly enhance an investigator's research capabilities. It is expected that the mentored research and career development experience will lead to an independent and productive research career. Announcement details at <http://grants.nih.gov/grants/guide/pa-files/PA-06-087.html>.

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CALL FOR SUBMISSIONS

**The Intercultural Cancer Council and Baylor College of Medicine
Biennial Symposium on Minorities, the Medically Underserved & Cancer: Charting A New
Course Together: Quality Health Care for All
Professional, Student and CERP Abstracts
Deadline: November 15, 2007**

The Intercultural Cancer Council and Baylor College of Medicine invite abstracts for papers that address the theme of the *11th Biennial Symposium on Minorities, the Medically Underserved & Cancer: Charting A New Course Together: Quality Health Care for All*. We invite papers that specifically address the following: *Basic, clinical, and behavioral research; *Community-based program research and evaluation; *Community-based participatory research; *Health services research; *Health policy research. We are interested in papers addressing the disproportionate impact of cancer on racial, ethnic and medically underserved populations. Appropriate topics include: *Major cancer sites, or cancer sites with disparate rates for specific population groups; *Cultural competency; *Community and faith-based health interventions; *Diet, nutrition and obesity; *Environmental factors; *Family history and genetics; *Health services research (including access and quality of care) and health statistics; *Public health policy; children and elderly; *Quality of life and end of life concerns; *Survivorship and caregivers; *Tobacco. Cancer Education Resources Program (CERP): You are also invited to submit your cancer education resource(s) for consideration for oral, panel or poster presentation supporting the theme of the conference. Your organization will be responsible for any cost associated with providing and shipping materials or personnel needed to present your workshop. The Cancer Education Resources Program selection committee is especially interested in the following: *community-based participatory research partnership or collaboration; *community-based education and screening programs; *cancer survivor support group strategies; *faith-based and/or spiritual community health ministries and programs; *computer-based learning aids, databases or other informative services. See <http://iccnetwork.org/symposium> to learn more or submit an abstract and forward this message to others whom you feel would be interested in participating.

Request for Information (RFI): To Solicit Input and Ideas on Priorities in Basic Behavioral and Social Sciences Research

Notice Number: NOT-OD-08-008

Response Date: November 26, 2007

Issued by National Institutes of Health, Office of the Director, Office of Portfolio Analysis and Strategic Initiatives (OPASI), <http://opasi.nih.gov>; and the Office of Behavioral and Social Sciences Research (OBSSR), <http://obssr.od.nih.gov/>.

The NIH is seeking input from the scientific community, health professionals, patient advocates, and the general public about current and emerging priorities in basic Behavioral and Social Sciences Research (bBSSR) that may offer potential for improving and accelerating health research and its impact on the health of the Nation. This information will aid OPASI, working with OBSSR expertise, in developing a congressionally-requested strategic plan for bBSSR at the NIH. Relevant text from the House Appropriations Committee request is available at <http://www.bBSSRresponse.com/>. BACKGROUND: The National Institutes of Health (NIH) is the world leader in funding biomedical and behavioral research to improve health. It consists of 27 Institutes and Centers (ICs) and the Office of the Director, which includes

several programmatic Offices, each of which coordinates NIH activities in cross-cutting areas that are important to the missions of all the ICs. The Office of Portfolio Analysis and Strategic Initiatives (OPASI) provides NIH and its ICs with the methods and information necessary to manage their large and complex scientific portfolios, identifies – in concert with multiple other inputs – important areas of emerging scientific opportunities or rising public health challenges, and assists in the acceleration of investments in these areas, focusing on those involving multiple ICs. The Office currently has three divisions tasked with coordination, resource development, and evaluation. The Office of Behavioral and Social Sciences Research (OBSSR) serves as the NIH focal point for research on behavioral, social, and lifestyle factors in the causation, treatment, and prevention of diseases. As such, the Office advises and consults on these topics with NIH scientists and others within and outside the federal government, and plays a key role in promoting and enhancing basic and applied behavioral and social sciences research across all of NIH. Basic research in the behavioral and social sciences is designed to further our understanding of fundamental mechanisms and patterns of behavioral and social functioning relevant to the Nation's health and well-being, and as they interact with each other, with biology and the environment. As is the case with basic biomedical research, basic behavioral and social sciences research is designed to elucidate knowledge about underlying mechanisms and processes, knowledge that is fundamental to improving the understanding, explanation, observation, prediction, prevention, and management of illnesses, as well as the promotion of optimal health and well being. The range of focus includes different “granularity” or levels of complexity. Basic behavioral and social sciences research involves both human and animal studies and spans the full range of scientific inquiry, from processes within the intra-individual level (“under the skin”), to mechanisms “outside the skin” that explain inter-individual, group, organizational, community, population, macroeconomic and other systems level patterns of collective behavior. While the primary focus of basic BSSR must ultimately be directly relevant to behavioral and social factors, the domains and units of analysis can include intra-organismic as well as inter-organismic factors (“cells to society”), over varying units of time from nanoseconds to centuries, and including lifespan developmental phases and phenomena that may occur within and across generations. An expanded definition of bBSSR can be found here: <http://www.bBSSRresponse.com/>. The current request for information supplements previous efforts to identify bBSSR priorities, including reports from the Institute of Medicine and National Research Council of the National Academies of Sciences, and most notably, a report from the Working Group of the NIH Advisory Committee to the Director on Research Opportunities in the Basic Behavioral and Social Sciences (2004), which includes descriptions of ICs' portfolios in bBSSR and identifies future bBSSR opportunities for NIH. These sources and a summary of the Working Group's identified priorities can be viewed at <http://www.bBSSRresponse.com/>. INFORMATION REQUESTED: This RFI invites the scientific community, health professionals, patient advocates, and the general public to respond to the following questions: 1) What are the existing essential/foundational research topics already being supported and in need of continued support or further development (i.e. core areas of bBSSR)? What existing areas need to be phased out or dropped? 2) What exciting new emergent areas of bBSSR are likely to significantly advance the NIH mission and address pressing biomedical and public health needs? What areas are not being addressed that ought to be addressed because they will likely lead to important or perhaps even breakthrough insights that will ultimately improve the Nations health and well-being? We welcome identification of priority areas that cut across the missions of multiple NIH Institutes and Centers (e.g. understanding fundamental mechanisms in human motivation and goal directed behaviors), as well as specific examples of basic research that fit the mission of a particular IC. RESPONSES: Responses will be accepted through November 26, 2007 and can be entered at the following web site: <http://www.bBSSRresponse.com/>. Formal acknowledgement of receipt of responses will not be made beyond that provided by the survey utility. This RFI shall not be construed as a solicitation for applications or as an obligation on the part of the government. The government will not pay for the preparation of any information submitted. Responders should be aware that the information provided will be analyzed and may appear in various reports. Additionally, the government cannot guarantee the confidentiality of the information provided. INQUIRIES: Questions about this request for information may be directed to: Deborah H. Olster, Ph.D., Deputy Director, Office of Behavioral and Social Sciences Research, National Institutes of Health, Building 31, Room B1C19, 31 Center Drive, Bethesda, MD 20892-2027, Tel: 301-402-1147, FAX: 301-402-1150, E-mail: OlsterD@od.nih.gov; or James P. Stansbury, Ph.D., M.P.H., AAAS Fellow, Office of Behavioral and Social Sciences Research, National Institutes of Health, Building 31, Room B1C19, 31 Center Drive, Bethesda, MD 20892-2027, Tel: 301-402-3930, FAX: 301-402-1150, E-mail: stansburyj@od.nih.gov.

Call for Papers: The Eleventh International Conference On Social Stress Research

La Fonda Hotel

Santa Fe, New Mexico

May 31-June 2, 2008

Deadline: December 10, 2007

The Eleventh International Conference on Social Stress Research will be held May 31 - June 2, 2008 in Santa Fe, New Mexico at the La Fonda Hotel. The International Conference on Social Stress has become an important conference for scholars working in the area of stress and health and a major forum for sharing new research that incorporates components of the stress process. The stress conferences, which are sponsored by the University of New Hampshire, are held approximately every two years and attract the leading scholars in the field. Previous conferences have been held in London, England; Venice, Italy; Honolulu, Hawaii; Budapest, Hungary; Montreal, Canada; and Portsmouth, New Hampshire. The conference is being organized and directed by Professors Heather Turner, Karen Van Gundy, and Catherine Moran in the Department of Sociology at UNH. The 2008 conference keynote speakers will be Dr. Leonard Pearlin and Dr. Jane McLeod. Previous keynote speakers have included Ronald Kessler, Bruce Dohrenwend, Howard Kaplan, George Brown, Robert Weiss, Michael Rutter, Hamilton McCubbin, Peggy Thoits, R. Jay Turner, Carol Aneshensel, Elizabeth Meneghan, Bruce Link, Blair Wheaton, James House, Allan Horwitz, William Avison, and Linda George. The final program for the 2008 conference will be based on the content of submissions. Sessions involving the following themes are likely: childhood/adolescent stress and adversity; stressors across the life course; work and unemployment stressors; stress in family contexts; gender and stress; race, ethnicity and culture; traumatic and catastrophic stressors; and neighborhood contexts of stress. To be considered for presentation, papers (or extended abstracts) must be received by December 10, 2007. Further information regarding the conference and the 2008 registration forms can be found on our website:

<http://www.unh.edu/stressconference>. Send all papers and abstracts to: Dr. Catherine Moran, Conference Coordinator, Department of Sociology, Horton Social Science Center, University of New Hampshire, Durham, NH 03824, clmoran@cisunix.unh.edu.

Conference/Call for Proposals: Center for Race and Ethnicity, Rutgers University, New Brunswick, NJ

DNA, Race and History

April 18-19, 2008

Deadline: December 15, 2007

Organizers:

- Keith Wailoo, Director, Center for Race and Ethnicity/History/Health Policy, Rutgers
- Mia Bay, Associate Director, Center for Race and Ethnicity/History, Rutgers
- Catherine Lee, Sociology, Rutgers
- Alondra Nelson, African-American Studies, American Studies, and Sociology, Yale

Although scholars have long agreed that race is a social rather than genetic or biological reality, recent trends in DNA analysis have blurred this distinction. Today, genetic markers are discussed often as a proxy for race and ethnicity, lending renewed authority to biological conceptions of human difference. Employed for diverse purposes including genealogy, anthropology, evolutionary biology, and public history, genetic evidence promises to reshape understandings of individual and collective ancestry, the histories of particular social groups, and the significance of race in history and in the present. Across societies, genetic evidence is being called upon to perform a kind of racially-charged cultural work – to repair and recast the past, and to reshape identity in the present. This conference brings together scholars from a wide range of disciplines – history, cultural studies, genetics, law, medicine, anthropology, ethnic studies, sociology, and other fields – to examine the emerging and often contested connections between race, DNA, and history. We welcome papers on a variety of topics, including the historical use of DNA in biomedicine and the social sciences, the implications of the use of DNA in law, epidemiology, and other fields, the historical uses and misuses of genetic information, the way in which genetic testing is reshaping understandings of group identity, both within and across cultural and national boundaries, and the cultural, ethical, social, and philosophical challenges raised by relying upon DNA to resolve questions of history and identity. The DNA, RACE, AND HISTORY conference will consist of a series of intensive panel discussions of short

pre-circulated papers (15-30 pages). Paper proposals (DUE by DECEMBER 15, 2007) should be no more than 1-2 pages in length, should engage intersections between race, history, and the mapping, testing, analysis, and cultural meanings of DNA in and beyond the United States, and should provide a platform for broad, cross-disciplinary discussion. Travel and accommodation expenses relating to conference will be covered by the Center for Race and Ethnicity. Interested participants are asked to submit their paper proposals to the Center at raceethnicity@sas.rutgers.edu. We expect that an edited volume will be published from the proceedings.

**Call for Abstracts: The Minority Student Caucus at the University of North Carolina School of Public Health, The 29th Annual Minority Health Conference
"The Impact of Poverty, Culture, and Environment on Minority Health"
February 29, 2008**

Deadline: January 11, 2008

The Minority Student Caucus at the University of North Carolina School of Public Health invites you to submit abstracts for the poster presentations during the 29th Annual Minority Health Conference on February 29, 2008. *All abstracts must be received by January 11, 2008. Please submit your abstract online by visiting: <http://minority.unc.edu/sph/minconf/2008/abstracts/>. Presenters will be notified of acceptance by January 25, 2008. All presenters are expected to register for the Conference. If you have any questions, please contact Kristal Raymond at raymon@email.unc.edu. For information about the conference, please visit <http://minority.unc.edu/sph/minconf/2008/>.

**Call for Papers: Journal of Prevention and Intervention in the Community
Special issue on Community Violence Prevention and Intervention Strategies for Children and Adolescents**

Deadline: January 15, 2008

Journal of Prevention and Intervention in the Community invites papers for a special issue on Community Violence Prevention and Intervention Strategies for Children and Adolescents. Papers are sought that describe effective interventions to prevent or mitigate exposure to community violence and its associated negative effects on psychosocial well-being of youths. Developmentally-informed and empirical papers are encouraged. Examples of relevant topics may include, but are not limited to, 1. Efficacy and effectiveness research on intervention and prevention programs; 2. School-based efforts to identify and treat youths; 3. Culturally adapted interventions; 4. Outcome research on policy collaborations; 5. Empirical research that informs the development of interventions. Editors: Patrick J. Fowler, Jordan M. Braciszewski (Wayne State University). Manuscripts submitted must conform to the formatting and writing style requirements of APA Publication Manual (5th edition). Proposals must be no longer than 20 pages, double-spaced; including references, tables, and figures. Inquires regarding the special issue should be directed to Patrick Fowler (pfowler@wayne.edu). Submit final manuscripts to Patrick Fowler via email.

**Call for Abstracts: Society for Epidemiologic Research (SER)
Annual meeting on race and class inequalities in health
Chicago, IL
June 24-27**

Deadline: February 1, 2008 (11:59 p.m. EST)

We are looking for conceptual and data-based papers for presentation at the annual Society for Epidemiologic Research (SER) meeting in 2008. The overall theme of the SER meetings is the social determinants of health. There will be a contributed paper session on Race and Class Inequalities in Health and we encourage those of you working in this area to submit abstracts of your work. Accepted abstracts will be distributed at the June meeting and will also be published in a Supplement issue of the American Journal of Epidemiology. Abstracts must be submitted online at the following web address: <http://epiresearch.org/abstracts/>. For inquiries about this specific session on Race and Class Inequalities in Health, contact Irene Yen (irene.yen@ucsf.edu) or Pat O'Campo (pat.ocampo@utoronto.ca). For information about the conference, please visit the SER website www.epiresearch.org.

Call for Nominations: Community-Campus Partnerships for Health (CCPH) Annual Award

Deadline: February 12, 2008

<http://depts.washington.edu/ccph/awards.html>

The CCPH Annual Award recognizes exemplary partnerships between communities and higher educational institutions that build on each other's strengths to improve higher education, civic engagement, and the overall health of communities. The intent of the award is to highlight the power and potential of community-campus partnerships as a strategy for social justice. The award recognizes partnerships that are striving to achieve the systems and policy changes needed to overcome the root causes of health, social and economic inequalities. Award-winning partnerships embody the CCPH principles of partnership (see <http://depts.washington.edu/ccph/principles.html#principles>). Partnerships must nominate themselves and need not be members of CCPH. We welcome nominations in English from any country or nation. Public recognition of the award-winning partnership's achievements will be made at an award presentation ceremony at the 3rd Community-University Exposition (CUexpo) Conference, May 4-7, 2008 in Victoria, British Columbia, Canada. In lieu of our own major conference in 2008, we are delighted to be a core sponsor of CUexpo and thrilled that conference organizers have graciously agreed to provide the ideal venue for presenting the award. We hope you will plan to join us for the conference whether you submit an award nomination or not! Session proposals are due November 15, 2007 - details at <http://www.cuexpo08.ca/>. Learn more about the CCPH Annual Award - including instructions for submitting a nomination, information on past award recipients and honorable mentions, and answers to frequently asked questions - at <http://depts.washington.edu/ccph/awards.html>. Questions about the CCPH Annual Award should be sent to award06@u.washington.edu.

**Call for Papers -- Race and Disparities: A Research Forum
Cape Town, South Africa
July 14-16, 2008**

Deadline for abstract submission: December 1, 2007

This will be an interdisciplinary forum exploring various facets of inequity along lines of race, class, gender, and other differences between people. Details at <http://www.learningcirclesnetwork.com>.

**Call for Papers – Department of History at the University of Texas at Austin
Making Race, Making Health: Historical Approaches to Race, Medicine, and Public Health
November 13-15, 2008
Texas**

Deadline for submission: January 15, 2008

Announcement ID: 158946

<http://www.h-net.org/announce/geography.cgi?geography=United%20States&location=Texas>

<http://www.h-net.org/announce/geography.cgi?geography=United%20States>

The Department of History at the University of Texas at Austin announces an upcoming conference, "Making Race, Making Health: Historical Approaches to Race, Medicine, and Public Health," to be held November 13-15, 2008. Paper topics are not limited to national field or geographic area and proposals that explore a particular topic within a diasporic, imperial, or transnational framework are welcome. We are interested in generating a dynamic conversation among scholars around the following themes: the interconnectedness between medical knowledge, medical practice, and processes of racialization; race, difference, and power within public health discourse and policy; inequality, activism, and health; and diagnostic and therapeutic regimes as sites of contestation. We invite proposals for individual papers on topics including, but not limited to: *Health and medical care in slave and/or post-emancipation societies; *Medicine and public health in colonial settings; *Racial politics of the production of medical knowledge; *Racial disparities in health care; *Encounters between professional and popular medicine; *Race and mental health; *Medicalization of racial difference; *Medicine, health and European-indigenous contact; *Medicine and American expansion/conquest/empire; *Racial politics of medical and public health responses to epidemics and disasters; *Diasporic dimensions of healing practices; *Race and reproductive freedom/control. Please send an abstract (of no more than 250 words) and a CV, by January 15, 2008, to: University of Texas at Austin, Department of History ? Making Race, Making Health Conference 1, University Station B7000, Austin, TX 78712-0220. For more information, e-mail msummers@mail.utexas.edu.

**Call for Abstracts – XVIII IEA World Congress of Epidemiology
Epidemiology in the Construction of Health for All: Tools for a Changing World
Porto Alegre - Brazil
September 20-24, 2008**

Deadline for abstract submission: February 15, 2008

IEA International Epidemiological Association

ABRASCO, the Brazilian Association of Collective Health

Website: <http://www.epi2008.com.br/ingles/index.php>

Call for abstracts: <http://www.epi2008.com.br/ingles/trabalhos/index.php>

Construction: Epidemiology is one of several disciplines, and epidemiologists one of several categories of social actors involved in improving population health. The word construction emphasizes the key role of epidemiology, a discipline which integrates those around it, in this multi- and trans-disciplinary task. Health for All: In reemphasizing this now traditional motto, we highlight epidemiology's role at national and local levels in developing, maintaining and renovating systems offering health care to whole populations. Within this context, issues related to equity and to inclusion of disadvantaged population groups are essential. The recent Brazilian experience with a universal health system will be highlighted. Tools: Epidemiology is largely about tools for studying disease frequency, for establishing exposure-disease relationships, for testing health interventions and for evaluating health systems. The idea of tools also extends to the construction and evaluation of preventive and curative health services, so as to permit health workers at all levels to provide evidence-based care. Changing World: The Congress will highlight the many changes occurring in the early 21st Century: demographic and epidemiological transitions; environmental alterations; the growth in research capacity for addressing health problems around the world; and the widening gap in health status between the rich and poor found both between and within nations and accompanied by a global divide in access to the benefits of scientific progress. Possible topics are: * Collaboration between epidemiology and other research disciplines; * Epidemiologists and policy-makers: how to work together; * Access to scientific information; * Epidemiology and the Millennium Development Goals; * Epidemiology and primary health care; * International and intra-national inequalities in health; * What can other countries learn from the successes and failures of the Brazilian experience? * Epidemiology in health systems and policy research; * Epidemiology in the development, implementation and evaluation of clinical and public health guidelines; * Epidemiological methods for decentralized health management; * Translation of research findings into practice; * Health promotion, disease prevention and surveillance for non-communicable diseases; * New paradigms for disease causation: from the molecule to the population; * Life course epidemiology; * Global trends in health and in its determinants; * New exposures and new diseases; * Terrorism and violence: threats to public health; * The eminence of new pandemics; * Environmental change and public health; * Managing noncommunicable diseases in low and middle-income countries.

Call for Papers – *Humanity & Society*

Special issue: Social Inequalities and Health

Deadline for submission: May 1, 2008

Humanity & Society, the Journal of the Association for Humanist Sociology, plans a special issue devoted to Social Inequalities and Health. In many nations the economic and political changes associated with increasing economic globalization have been seen as heightening social inequalities with potential negative effects on health outcomes. This has led to a flurry of research and policy activity concerned with reducing these social and health inequalities. Such activity has taken two separate but related forms.

The first is an increased interest in what is termed the social determinants of health. These factors are identified as the economic and social factors that shape health. Much of this work has been concerned with specifying the parameters by which these social determinants of health come to shape health. It has been less concerned with identifying the political, economic, and social forces that shape the quality of these social determinants of health. The second form of work specifies the political, economic, and social forces that shape these social determinants of health and how these forces represent systematic inequalities in power and influence within a society. This work is explicitly concerned with the political economy of health and devotes attention to issues of public policy and its development, the sources of public policy development, and the means by which these forces can be influenced in the service of health. Papers are invited that will draw upon these two areas of research activity and should focus on various aspects of how social inequalities come about and how they are linked to health outcomes. These

papers must incorporate a concern with each of the following: - social inequalities and differing living conditions and how these result in health inequalities (a social determinants of health perspective); - public policies and how these shape the presence of social inequalities and health inequalities (a public policy point of view); - the roles the State, market economy, and civil society play in shaping the distribution of political, economic, and social resources (a political economy analysis); and - an examination of these issues within a framework that considers the political, economic, and social forces that lead to jurisdictional differences in health outcomes (a comparative perspective). Manuscripts should not exceed 30 double-spaced pages of text plus notes and should follow the "Notes to Contributors" guidelines supplied at <http://www.humanistsociology.org>. Papers should be submitted via email to Ann Goetting, the Executive Editor, at humanityandsociety@wku.edu. Identify submissions with keyword: Health Inequality. Address queries to Dennis Raphael at draphael@yorku.ca. Deadline for submission is May 1, 2008. Estimated Publication Date: February 2009.

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CAREER DEVELOPMENT

American Heart Association, Dallas, TX Deputy Chief Science Officer

Immediate Supervisor: Chief Science Officer

FUNCTION: Reporting to the Chief Science Officer (CSO), this position is responsible for assisting the CSO with staff oversight of cardiovascular and stroke science. This includes: examination and development of medical and scientific issues; preparation of scientific positions; strategic science management of the scientific, medical, and healthcare initiatives of the association through interaction with science leadership, Council and Interdisciplinary Working Group (IWG) leadership, and appropriate staff; supporting strategic partnerships and serving as the liaison to other identified organizations; and acting as an AHA spokesperson for scientific, medical, and healthcare issues as needed, in conjunction with the President, CEO and CSO. **MAJOR DUTIES:** 1. Participates in the formulation of association policy, science direction, and strategic goals in conjunction with the CSO, COO, and the Administrative Cabinet. Final policy determinations are made by SACC and the Board of Directors. 2. Performs analysis and monitoring of the state of CV science knowledge with the CSO, sets priorities, and makes judgment calls on when to recommend that information move into needed positions, statements, specific programs, and communications activities. 3. Develops and executes, in conjunction with the Chief Science Officer, the COO, the EVP of Advocacy and the EVP of Healthcare Markets, the AHA strategy for improving the quality of care delivered in the US healthcare system. Provides internal science leadership to implementation of AHA Quality initiatives, supports relationship with partners in Quality, and represents the AHA at meetings with external and Federal partners. 4. Maintains close liaison with science volunteer leadership in Quality and Outcomes and other areas as appropriate, especially the science committees and council/IWG chairpersons, collaborates fully with the CSO and the VP of Science Operations and ensures a seamless partnership with staff scientists on a routine basis. 5. Evaluates strategic partnerships with other key healthcare and science organizations and implements and supports these partnerships as the AHA's liaison to those organizations as assigned. 6. In partnership with the CSO and Advocacy staff, plays a role in advocacy issues involving quality, biomedical research and science policy. 7. Provides regular ongoing guidance to staff scientists, healthcare markets staff, research staff and other National Center staff regarding medical, science and healthcare issues. 8. Serves as a member of specific volunteer and staff teams as identified by the CSO and COO. 9. Participates as a partner with the CSO, COO and Chief Executive Officer in development of strategic alliances and major gifts supporting research and science programs. **MINIMUM QUALIFICATIONS:** Position requires science/medical credentials at the doctoral level (M.D. degree); extensive science and clinical experience; a recognized reputation in medical and scientific circles; and a knowledge of the AHA and of external science, healthcare, government, and quality agencies. **ESSENTIAL COMPETENCIES:** Interpersonal Skills...ability to provide information, listen openly, send convincing messages to build support for ideas and objectives and to diplomatically negotiate and resolve disagreements; successfully fulfills the staff role by working through volunteer leadership. Credibility...capacity to inspire confidence in his/her professional abilities and in the AHA; known to be knowledgeable in both the scientific and clinical fields. Integrity...known to be intellectually honest and to hold him/herself to very high standards. Conceptual

thinking...identifies the broader significance of trends and events for the whole organization and remains focused on the big picture when addressing the details of specific issues and situations. Team Builder...ability to build cohesive and effective teams in a climate of openness and honesty. Team Player...capacity to establish collaborative relationships with multiple types of individuals. Politically Astute...ability to assemble the appropriate mix of constituents to accomplish objectives and to build formal and informal networks to influence outcomes. For more information and to apply for the position please contact: Gloria Blassingille, SPHR, National Center Staffing Director, Staffing and Employment Human Resources, American Heart Association, National Center, 7272 Greenville Avenue, Dallas, TX 75231-4596, gloria.blassingille@heart.org.

**American Heart Association, Dallas, TX
Director, Global Strategies**

FUNCTION – SCOPE STATEMENT: Plans, coordinates and manages coordination of strategies to accomplish Association goals related to AHA global initiatives. Leads the development of the integrated strategy for AHA's activities in the international marketplace. Oversees the development of plans and timelines and monitors integrated international activities. Provides staff leadership to staff international project team to assure strategy coordination and integration. Coordinates strategy with Market Leaders and other staff who have responsibility for functional area strategy. Staffs the AHA International Committee. MAJOR RESPONSIBILITIES: With AHA staff international team, the Market Leaders and the International Committee, develops overall strategic direction for global strategies. In conjunction with the staff international team, manages the overall strategy and forecasts future resource requirements for global strategies. Works collaboratively with internal departments and external agencies retained to support global strategy development. Staffs the International Committee, providing guidance to volunteers charged with overseeing AHA's international activities. Assures integration of global strategies with appropriate American Heart Association staff and business units. Oversees cross-functional project teams to ensure strategic goals are being met. Manages the International Committee and Paul Dudley White Endowment budgets. Oversees utilization of initiative resources and costs to ensure adherence to project budget. Works with departments that are implementing various aspects of activities to assure budget adherence. Maintains effective communications with Chief Operating Officer, Market Leaders, internal groups, internal departments, and all facets of the American Heart Association, including Affiliate staff, board members and volunteers. Directs internal communication plans and tools to assure volunteers and staff are informed about key aspects of global initiatives. Anticipates and avoids or minimizes potential problems by maintaining current knowledge of overall project status. Serves as a knowledge resource on external news, trends, and activities in the global arena and shares information as appropriate with key stakeholders within AHA. Works collaboratively with Strategic Planning staff. Oversees global strategies documentation and deliverables in accordance with American Heart Association project management methodology and ensures audit trails are in place for each project. Provides regular report updates on movement toward project goals and objectives. Serves as Liaison with World Heart Federation, Interamerican Heart Foundation and Interamerican Society of Cardiology. ENVIRONMENTAL AND WORKING CONDITIONS: Normal Internal office environment. This position requires the ability to travel within assigned territory and travel outside territory to attend outdoor event-related activities and training sessions, which may involve overnight stays and/or weekends. PHYSICAL AND MENTAL REQUIREMENTS: Physical requirements include: sight, hearing, sitting, standing, bending, or squatting for most of the day; skills essential for successful communications include: speaking over the phone and writing. Ability to interact and communicate with customers, and to clearly and concisely exchange ideas, facts and information. Ability to effectively plan and manage workflow, work on multiple projects simultaneously and manage project details with limited supervision. Must be able to lift up to 20 pounds with the expectation that items in excess of 20 pounds would be broken down into smaller components or additional assistance is required before lifting. Ability to conceptualize, reason through problems, make effective decisions and develop alternative solution and provide excellent customer service while ensuring compliance with the American Heart Association's policies and procedures. MINIMUM QUALIFICATIONS: Bachelor's degree in business administration or related field; Eight or more years experience involving structured corporate level project management of similar size organization; Eight or more years experience involving corporate level strategic planning of similar size organization; Familiarity with general business principles and practices; Demonstrated experience working with cross-functional team on a corporate level; Possesses strong consultation and negotiation

skills; Demonstrated ability to manage multiple major projects simultaneously and meet deadlines; Possesses strong teambuilding and facilitation skills; Skilled in written and oral communications; Able to interact professionally with all levels of staff, volunteers, professionals and the general public; Demonstrated ability to plan and conduct meetings, producing necessary outcomes through a thorough, collaborative group process; Ability to work independently and make appropriate, effective decisions related to project management responsibilities; Possesses strong consensus-building skills International experience desired; Experience with PC office automation tools, including the advanced features of MS Office Professional Suite; Willingness and ability to travel throughout the United States and internationally on commercial airlines as needed. COMPETENCIES: Core Competencies – All Positions

Judgment/Decision Making: Demonstrates consistent logic, rationality, and objectivity in decision making. Achieves balance between quick decisiveness and slower, more thorough approaches, i.e., is neither indecisive nor a hip-shooter. Shows common sense. Anticipates consequences of decisions.

Communication – Oral: Communicates effectively one to one, in small groups and in public speaking contexts. Demonstrates fluency, “quickness on one’s feet,” clear organization of thought processes, and command of the language. Easily articulates vision and standards. Keeps people informed.

Organization/Planning: Plans, organizes, schedules, and budgets in an efficient, productive manner. Focuses on key priorities. Effectively juggles multiple projects. Anticipates reasonable contingencies. Pays appropriate attention to detail. Manages personal time well.

Intelligence: Understands and absorbs new information. Stays current with developments in our field. Expects others to stay current with developments in the field. Frequently shares new knowledge with others. Integrates new information to enhance existing models or create new ones. Helps others translate new information into practical application in our area.

Customer Focus: Regularly monitors customer satisfaction. Meets internal and external customer needs in ways that provide satisfaction and excellent results for the customer. Establishes “partner” relationships with customers. Regarded as visible and accessible by customers.

Integrity: “Ironclad.” Does not cut corners, ethically. Remains consistent in terms of what one says and does and in terms of behavior toward others. Earns trust of coworkers. Maintains confidences. Puts organization’s interests above self. Does what is right, not what is politically expedient. “Fights fair.” Intellectually honest; does not “play games” with facts to win a point.

Initiative: Seeks out and seizes opportunities, goes beyond the “call of duty,” finds ways to surmount barriers. Resourceful action-oriented “doer,” achieving results despite lack of resources. Restimulates languishing projects. Shows bias for action (“do it now”).

Collaboration/Teamwork: Cooperates with staff at all levels of the organization. Willingly reaches out to staff, volunteers and customers to proactively share information, knowledge, expertise, and time with others to achieve common goals. Works to overcome geographic, departmental, and/or Affiliate boundaries and establishes cohesive, effective relationships with peers. Enthusiastically supports the common goals and mission of the organization. Shares credit.

Additional Core Competencies – Managerial Positions **Strategic Skills:** Determines opportunities and threats through comprehensive analysis of current and future trends. Accurately assesses own organization’s competitive strengths and vulnerabilities. Make tactical and strategic adjustments, incorporating new data. Comprehends the “big picture.” Reads latest books and articles on strategy. (This competency will be evaluated for selected executive level positions).

Selecting “A” Players (Topgrading/Staff Development): Top-grading through effectively recruiting and selecting not less than 90% “A Players” (not more than 10% mis-hires).

Coaching/Training: Actively and successfully trains and coaches people for current assignments, and develops them for promotion into positions in which they succeed. Provides challenging assignments. A people builder.

Performance Management: Fosters high levels of accountability through fair, hard-hitting performance management system. Measures performance thoroughly. Reinforces integrity in the system by personally monitoring performance of subordinates (without “over-supervising”), and rating/ranking people honestly (no “gifts,” no taking the easy way out”). Ties in reward systems (*pay, promotion, removal). Free with deserved praise and recognition. Constructive in criticism. Provides frequent feedback.

Other Competencies (Specific To This Position) **Pragmatism:** Generates sensible, realistic, practical solutions to problems.

Self-Awareness: Recognizes own strengths, weaker points and areas for improvement. Is not defensive, does not rationalize mistakes or blame others for own failures. Learns from mistakes.

Adaptability/Mature Response: Adjusts quickly to changing priorities. Copes effectively with complexity. **Listening:** Understands impact of one’s behavior on others. Empathetic and patient. Active listener.

Communication – Written: Writes clear, precise, well-organized e-mails, memos, letters and proposals while using appropriate vocabulary, grammar, and word usage, and creating the appropriate

“flavor”. **Analysis Skills:** Identifies significant problems and opportunities. Analyzes problems in depth. Relates and compares data from different sources. Sorts the “wheat from the chaff,” determining root causes and subtle relationships among data from various sources. Exhibits a probing mind. Achieves penetrating insights. For more information and to apply for the position please contact: Gloria Blassingille, SPHR, National Center Staffing Director, Staffing and Employment, Human Resources, American Heart Association, National Center, 7272 Greenville Avenue, Dallas, TX 75231-4596, gloria.blassingille@heart.org.

**Brookdale Center for Healthy Aging and Longevity, Hunter College, City University of New York
Associate Director for Research (Associate or Full Professor)**

POSITION DESCRIPTION: Brookdale Center for Healthy Aging and Longevity (BCHAL) is a multi-disciplinary center of excellence dedicated to the advancement of successful aging and longevity through research, education and evaluation of evidence-based models of practice and policy. BCHAL seeks an Associate Director for Research to lead significant new initiatives in applied research, evaluation and demonstration projects to advance its mission. The Associate Director of Research will have a joint faculty appointment in the Urban Public Health Program and will have teaching responsibilities. Responsibilities include but are not limited to:

- Partner with the Executive Director in the development of significant multidisciplinary research grants and educational initiatives leading to new research projects in healthy aging and longevity.
- Develop a research agenda and grant development plan for evidence-based programs focusing on healthy aging in the urban environment in consultation with the Executive and Associate Directors, Senior Research Fellows, Faculty Associates, and consultants.
- Design, initiate, undertake and manage externally-funded research projects, responding to federal, state and local research opportunities and priorities.
- Facilitate interdisciplinary research collaborations by developing ongoing relationships with senior fellows, faculty associates, faculty and BCHAL staff within Hunter College, policy and service organizations and other academic and research institutions.
- Play lead role in identifying appropriate funding opportunities via governmental foundation grants and contracts.
- Oversee the proposal development and submission process by working with the Manager of External Projects.
- Coordinate the evaluation of funded projects and contract programs.
- Develop and implement programs for staff development in research and evaluation, including staff mentoring, consulting and in-house workshops.
- Work with the Executive Director, Brookdale and Hunter College staff to advance the research mission through research dissemination including position papers, newsletters, and press releases.
- Supervise research and administrative assistants.

QUALIFICATION REQUIREMENTS:

- A candidate must possess an earned doctorate within fields such as health policy, public health, gerontology, or other social, behavioral, health science, or related field preferred.
- Broad knowledge of the field of gerontology and a related disciplinary field.
- Track record of relevant publications and research in aging and health in urban settings: areas of interest should include aging and disparities in health; development and evaluation of community health interventions for older people; or chronic disease management.
- At least 5 years of increasingly responsible experience as a researcher, including substantial project management experience and successful grant development experience.
- Strong applied research and evaluation skills with working knowledge of computerized statistical, data management, and research packages; interest and knowledge of Geographical Information Systems (GIS) a plus.
- Independent initiative and superior administrative, communications, writing and interpersonal skills.
- Ability to lead and work as member of a university research team.
- Demonstrated research track record.
- Success in applying for external funding.

TO APPLY: Send resume, cover letter and three references to: Marianne C. Fahs, PhD, MPH, Professor of Urban Public Health, Rose Dobrof Acting Executive Director, Brookdale Center for Healthy Aging & Longevity, Hunter College, City University of New York, 425 East 25th Street, Room 1312 North, New York, NY 10010-2590, Tel: 212 481-5420, Fax: 212 481-3791, 212 481-3780 Edith Henry, Receptionist.

California Departments of Health Care Services and Public Health, Office of Women’s Health (OWH)

Research Scientist III (Women’s Health Specialist)

Salary: \$5797 - \$7044 monthly

The Office of Women’s Health (OWH) of the California Departments of Health Care Services and Public Health is recruiting for a researcher who will develop and implement projects to increase the quality and quantity of scientific data related to women’s health in California. The Research Scientist is responsible

for identifying data analyses opportunities, conducting analyses, and making recommendations based on these analyses all with the goal of identifying emerging issues in women's health important to California's diverse population. S/he coordinates the multi-disciplinary interdepartmental California Women's Health Survey group: a collaboration of the departments of Health Care Services, Public Health, Social Services as well as other state departments and private entities. The Research Scientist is responsible for the analysis and writing of OWH publications. Recent OWH publications include the California Women's Health Report 2007 and the Data Points 2003-2004. For additional information on the Office of Women's Health, see our website at <http://www.dhs.ca.gov/director/owh>. Interested applicants should send a cover letter and resume/CV, in a single word or pdf file, to Tinah.Concepcion@dhcs.ca.gov. No phone calls, please. Successful candidates will be required to take a California Departments of Health Care Services and Public Health exam for the Research Scientist III classification. For specifics on minimum qualifications for the exam, see <http://jobs.spb.ca.gov/openxrd.cfm?exc=4HA1F>.

**Center for AIDS Prevention Studies (CAPS) and the UCSF AIDS Research Institute (ARI) Traineeships in AIDS Prevention Studies (TAPS) Program Postdoctoral Fellowships
Deadline: December 1, 2007**

The Center for AIDS Prevention Studies (CAPS) and the UCSF AIDS Research Institute (ARI) are offering an exciting fellowship to MD- and PhD-level scholars wishing to engage in HIV-related research. The Traineeships in AIDS Prevention Studies (TAPS) Program is inviting applications for two- and three-year postdoctoral fellowships in studies relating to the prevention of AIDS. Offered through the UCSF Department of Medicine with funding from the National Institute of Mental Health (NIMH), the TAPS fellowship is located at the Center for AIDS Prevention Studies (CAPS). CAPS represents a unique collaboration between university, government, community-based and private local agencies. It is part of the UCSF AIDS Research Institute (ARI, <http://ari.ucsf.edu/>), and houses the AIDS Research Policy Center (ARPC). CAPS' numerous partnerships include the following: *The University of California, San Francisco** (UCSF)*, trains investigators and conducts research in behavioral sciences, clinical epidemiology, biostatistics, medical ethics, and health policy. *The AIDS Policy Research Center (APRC)* conducts policy research, evaluates policy interventions, and facilitates progressive interaction between UCSF research and policy at the international, national, state and local level. *The Institute for Global Health (IGH)* conducts multidisciplinary international research and develops and evaluates policies aimed at improving health and increasing access to effective and affordable health services worldwide. *The Women's Global Health Imperative (WGHI)* studies HIV and sexually transmitted infections in the context of reproductive health, emphasizing microbicides and female-controlled prevention methods, economic opportunity as part of HIV prevention, promotion of human rights and prevention of maternal mortality. *The San Francisco Department of Public Health** (SFDPH)* provides expertise in applied epidemiology and HIV prevention research, HIV/AIDS and STD surveillance, AIDS prevention education, and HIV health services, as well as offering sites for research, access to surveillance data, and target populations. *The Positive Health Program (PHP) at San Francisco General Hospital (SFGH)* leads clinical studies on new HIV treatments, drug resistance, regimen design, treatment interruption, long-term non-progression, therapeutic vaccines, HIV/TB co-infection and HIV/malaria co-infection. AIDS PREVENTION STUDIES FELLOWSHIP PROGRAM The Traineeships in AIDS Prevention Studies (TAPS) program trains scientists for academic and public health careers. Candidates must have a PhD, MD, or equivalent doctorate degree. The program is suitable for those who have recently completed their training, and for those who are already faculty members of academic or clinical departments. The Center for AIDS Prevention Studies, with its unique combination of institutional resources situated in a region with a high prevalence of HIV infection, provides an excellent environment for postdoctoral training. To accomplish its goal, the Center offers Fellows supplementary academic preparation in research methods, public health, AIDS, and other specific learning objectives, and gives them several closely supervised experiences in AIDS prevention research. Fellows who already have a Master of Public Health [MPH] degree or its equivalent may complete the program in two years; those who do not will be required to complete the MPH degree at UC Berkeley in the first year, followed by two years of research training. The option of completing a 2-year Master's in Clinical Research at UCSF is also available as an alternative to the MPH. All incoming fellows are encouraged to take the 10-week TICR postdoctoral training course in clinical research. <http://www.epibiostat.ucsf.edu/courses/summerworkshop.html>. At the end of the training program each Fellow will have: *completed the MPH degree or its equivalent; *taken advanced courses in research methods, statistics and other topics relevant to his or her major fields of interest; *participated in

and led numerous seminars on research topics within CAPS, as well as in the formal teaching programs of the University; *designed several research protocols and completed at least one significant research project under the direction of a faculty mentor; and *made presentations at national or international meetings, and submitted several papers for publication. All recipients of NIH research fellowships must sign an agreement with the NIH that they will fulfill a "service payback" commitment in return for their postdoctoral support. Under the provisions of this commitment, postdoctoral fellows in the first 12 months of their training program will incur an obligation which can be satisfied by an additional 12 months of NIH-supported research training or an equal number of months of health-related research or teaching. Individuals completing two years of postdoctoral support have no further service obligations stemming from postdoctoral support. Trainees who complete less than two years of training may be liable for a financial payback obligation for part or all NIH-funded training. FELLOWSHIP SUPPORT: Each Fellow will be provided with logistic support including a computer, travel to at least one annual professional meeting, health insurance, and other support as required to make the training experience productive. Federal stipends range from \$36,996 annually for persons with no relevant postdoctoral experience through \$43,428 for those with three years of experience up to a maximum of \$51,036 for seven or more years of experience. The costs of the Master's degree, if required, will also be covered by the fellowship. Unless other arrangements are more suitable, all Fellows will use the modern and fully equipped office facilities occupied by CAPS in downtown San Francisco. ELIGIBILITY: To be eligible for the fellowship, applicants must have a PhD, MD, or equivalent degree, and must be an American citizen, a non-citizen national of the U.S. (e.g., American Samoa), or have been lawfully admitted to the U.S. for permanent residence and have an Alien Registration Receipt Card (I-151 or I-551). The most important selection criteria will be evidence of superior qualifications and productivity, demonstrated interest in AIDS prevention research, and career goals that can clearly benefit from the fellowship program. Candidates who are members of a minority ethnic group are strongly encouraged to apply. APPLICATION PROCESS: The fellowship program starts on July 1st of each year. Applications for 2008 should be submitted, at the latest, by December 1, 2007; an application decision will be announced by March, 2008. The Master of Public Health degree program requires a separate application, due December 1, 2007. You may obtain information regarding the MPH Program at the Berkeley campus of the University of California by calling the School of Public Health at 510/643-0881, or sending your name and address to sphinfo@socrates.berkeley.edu. You can also find information about UCB School of Public Health admissions on the Internet at the following web site: <http://sph.berkeley.edu/>. Information about the UCSF Master's in Clinical Research is available at <http://www.epibiostat.ucsf.edu/courses/masters.html>. Further questions about the Center for AIDS Prevention Studies research training program and requests for applications should be directed to: Rochelle Blanco, UCSF - TAPS Fellowship Program, Rochelle.blanco@ucsf.edu, 415-597-9260.

**Charlotte Ellertson Social Science Postdoctoral Fellowship in Abortion and Reproductive Health
Deadline: December 3, 2007**

We are delighted to share the call for applications for the 2008-2010 cohort of the Charlotte Ellertson Social Science Postdoctoral Fellowship in Abortion and Reproductive Health - and would like to ask for your help in recruiting strong candidates. Support for research in this area of great policy significance is largely absent, and trained researchers who focus in it are scarce. The fellowship aims to support promising social science and public health researchers who can study abortion and reproductive health from the perspective of their own disciplines and who can bridge the divide between research, policy and practice. Fellows engage in independent and guided research, tap into the network of researchers, service providers and advocates at each fellowship site, and interact with policy organizations. We seek applicants who are committed to working on abortion and to developing careers that include a focus on abortion research and policy. We are recruiting five fellows for the 2008-2010 fellowship cohort; one at each of the fellowship sites: : Columbia University <<http://www.mailman.hs.columbia.edu/popfam/>> , the Guttmacher Institute <<http://www.guttmacher.org/>> , Ibis Reproductive Health <<http://www.ibisreproductivehealth.org/>>, Johns Hopkins University <<http://www.jhsph.edu/dept/pfrh/>> , and the University of California, San Francisco <<http://crhrp.ucsf.edu/>> . Fellowships begin no later than September 30, 2008 and are awarded for two years, with the second year contingent upon successful completion of the first. Applications for the fellowship are accepted on line (at <http://www.ibisreproductivehealth.org/projects/fellowship/>) and must be received by 11:59 p.m. PST, Monday, December 3rd, 2007. We will announce fellowship awards on March 3rd, 2008.

**The City University Of New York Career Opportunity
Assistant, Associate or Full Professor, Medical (Clinical)
Location/Department Sophie Davis School of Biomedical
Education - Community Health and Social Medicine (CHASM)
College Web Site www.ccnyc.cuny.edu
Notice Number FY13731**

Closing Date Open until filled

Compensation Commensurate with qualifications and experience.

POSITION DESCRIPTION AND DUTIES: The CUNY Medical School is a seven-year integrated curriculum that leads to Bachelor of Science and Doctor of Medicine degrees. Founded in 1973 and located on the City College Campus, the School's primary mission is to expand access to medical careers for under represented minorities and economically disadvantaged inner city youth and to encourage and prepare students to provide primary care in under served communities of New York. Community Health and Social Medicine (CHASM) is responsible for delivering education and training in epidemiology, community and primary care medicine, health policy, and medical decision making. Responsibilities include: *Work with affiliated community health centers in delivering a practice-based educational experience that introduces students to the practice of community-based primary care. *Coordinate the curriculum, deliver lectures, and oversee the delivery of this course. *Develop scholarship and grant making appropriate to the Department's focus on primary care health service research and or population health. *Participate in the administrative work of the Department and the School. **QUALIFICATION REQUIREMENTS:** Board certified primary care M.D. with strong and multifaceted background of academic endeavor/scholarship; MPH or academic fellowship training is highly desirable. Demonstrated abilities in conducting population-based and/or primary care oriented health services research. Established record of scholarship and grant-funding commensurate with level appointment in this tenure track position. Evidence of commitment to the School and Departmental educational mission. **TO APPLY:** Send a curriculum vitae, a supporting letter identifying research and teaching experience and a list of four references to: Chair Faculty Search Committee Department of Community Health and Social Medicine 138th Street and Convent Avenue, Harris Suite 400 New York, N.Y. 10031.

**The City University of New York, Doctor of Public Health (DPH) Program
Recruiting Students for Fall 2008**

Deadline for Fall 2008: March 1, 2008

The new Doctor of Public Health (DPH) program at City University of New York is recruiting students. In Fall 2008, they'll be accepting a second class of students into DPH tracks in (1) Community, Health and Society and (2) Epidemiology. In coming years, they'll also be enrolling students in tracks in Environmental and Occupational Health, and Health Policy and Management. The DPH has several distinct themes. Its topical focus is on urban health and our program is designed to prepare public health researchers and leaders who can study, plan and evaluate complex urban health problems and design multi-level interventions and policies to promote urban health. The curriculum is interdisciplinary and they are especially interested in the links between public health and social justice. The faculty is drawn from several CUNY campuses and housed at the Graduate Center, CUNY's doctoral unit. They work closely with community organizations, municipal agencies and other partners in their research, service and teaching. The DPH program accepts full and part time students and classes are offered in the late afternoon and evenings to accommodate students who work. Tuition is \$325 per credit for NY State and \$560 per credit for out-of state residents and we offer some financial support to most students. Applicants are expected to have already earned an MPH or equivalent degree and the DPH is 60 additional credits. The deadline for applications for Fall 2008 is March 1, 2008. For more information, visit http://web.gc.cuny.edu/ClinicalDoctoral/ph/about_doctor_of_public_health.htm or contact the program's interim director, Nicholas Freudenberg at nfreuden@hunter.cuny.edu or 212-481-4363.

City University of New York, Hunter College

Four Tenure Track Faculty Job Openings in Public Health, Fall 2008

Hunter College of the City University of New York seeks four new tenure track faculty members for Fall 2008. These positions are part of the CUNY Chancellor's Initiative to create a CUNY School of Public Health at Hunter College by 2010. The School will focus on improving the health of urban populations,

emphasize multilevel and intersectoral investigations of complex urban health problems, work closely with city agencies and community organizations and integrate public health and social justice perspectives. The School will bring together existing public health programs at Brooklyn, Hunter and Lehman Colleges and faculty with interests in public health from the Graduate Center and other CUNY campuses. In Fall 2007, the CUNY Graduate Center launched a Doctor of Public Health program that will also be part of the new School of Public Health. With more than 240,000 students, 5,000 faculty and 23 campuses, City University of New York is the largest urban public university in the nation.

1. Demographer/epidemiologist Assistant/Associate Professor, tenure track

Responsibilities: Teach courses in public health and demography; participate in or lead interdisciplinary research teams that will develop and obtain funding for investigations on topics at the intersection of public health and demography; and assist in the development and implementation of Masters and doctoral training in public health and demography. For more information see

<<http://hr.hunter.cuny.edu/jobs/facultyjobs.html#FY13977>>. Requirements: Preference to candidates with degrees and formal training in demography and epidemiology; doctorate in either public health, demography, or a related discipline; demonstrated record of demographically-oriented grants and publication, and ability to teach core epidemiology and demography courses. Topics of interest include health disparities, life course influences on fertility and mortality, and the use of biomarkers in epidemiological and demographic research.

2. Epidemiologist Assistant/Associate/Full Professor, tenure track

Responsibilities: Help to develop new MPH and DPH degree programs in Epidemiology and Biostatistics, with a focus on urban populations; teach graduate courses in epidemiology and help to develop new courses, as needed; lead, participate in and seek funding for interdisciplinary research teams that will conduct epidemiological studies of urban health. For more information see

<<http://hr.hunter.cuny.edu/jobs/facultyjobs.html#FY14119>>. Requirements: Doctorate in epidemiology or closely related field; graduate teaching experience in epidemiology; experience supervising graduate students; record of grants and publications (commensurate with experience) on chronic or infectious diseases, violence, substance use, reproductive health, mental health, physical environment or other urban health issues. Research experience in community, public health or other non-academic settings desirable.

3. Biostatistician Assistant/Associate/Full Professor tenure track

Responsibilities: Help develop a new master of public health (MPH) degree program in Epidemiology and Biostatistics, with focus on urban populations, teach graduate courses in biostatistics, and develop new courses, as needed, participate in and seek funding for interdisciplinary urban health research teams. For more information see <<http://hr.hunter.cuny.edu/jobs/facultyjobs.html#FY14120>>. Requirements: Doctorate in biostatistics, statistics or closely related field; graduate teaching experience in biostatistics, statistics or related field; experience supervising graduate students; and a record of grants and publications (commensurate with experience). Research experience in applying and developing statistical methods relevant to the study of urban populations and applicants with experience in public health practice settings such as health departments, voluntary health organizations or federal agencies are desirable. Interested candidates should submit – in electronic form -- a CV, cover letter including a description of their research accomplishments and goals and which position they seek, three recent articles or manuscripts, and the names and contact information of three references via e-mail to: Susan Klitzman, MPH, DrPH, Search Committee Chair, Urban Public Health Program, Hunter College, CUNY, 425 East 25th Street, New York, NY 10010 Email: sklitzma@hunter.cuny.edu.

4. Health Policy and Management, Assistant/Associate or Full professor tenure track

Responsibilities: Help develop new MPH and DPH programs in Public Health Policy and Management, with a focus on urban settings; teach MPH and DPH courses in health policy and management and help to develop new courses, as needed; lead, participate in and seek funding for interdisciplinary research teams that will conduct health services, health policy and related studies in urban settings The Public Health Policy and Management track will focus on public health policy and prepare public health managers, policy analysts and policy advocates who can work in urban settings and lead and analyze intersectoral approaches to improving the health of urban populations. For more information, see <http://hr.hunter.cuny.edu/jobs/facultyjobs.html#FY14285>. Requirements: Doctorate in public health, public policy, health services administration or a related field; graduate teaching experience; experience supervising graduate students; and a record of grants and publications (commensurate with experience) on such issues as: urban health care systems, health impact assessment, urban public health policy, or

intersectoral approaches to municipal services. At least five years professional experience in public health management or policy analysis highly desirable. Interested candidates should submit – in electronic form -- a CV, cover letter including a description of their research accomplishments and goals and which position they seek, three recent articles or manuscripts, and the names and contact information of three references via e-mail to: Nicholas Freudenberg, DrPH, HPM Search Committee Chair, Urban Public Health Program, Hunter College, CUNY, 425 East 25th Street, New York, NY 10010 Email: <mailto:nfreuden@hunter.cuny.edu>.

Concordia University, Montreal, Quebec, Canada

Tenure Track Position

Applications will be reviewed beginning November 1, 2007.

The graduate program in Human Systems Intervention at Concordia University in Montreal, Quebec, Canada is inviting applications for a tenure track position. Our program takes an action research and systems approach to communities and organizations. For more information on the program go to: <http://artsandscience1.concordia.ca/ahsc/Goals.shtml>. For the job announcement, go to http://artsandscience1.concordia.ca/ahsc/FT_Faculty_Positions.shtml. If you have any questions, please contact Warren Linds at w.linds@sasktel.net.

Dana-Farber Cancer Institute, Boston, MA

Director, Health Disparities Program

The Dana Farber Cancer Institute (DFCI), a federally designated Comprehensive Cancer Center and a principal teaching affiliate of Harvard Medical School, seeks an exceptional public health researcher/academician and entrepreneurial leader to serve as Director of the Health Disparities Program. DFCI has been actively working to diversify its patient population by introducing programs into the organization's continuum of care that address disparities in information, access and understanding of cancer prevention, as well as treatment outcomes that are experienced by high-risk and underserved communities. The Institute is making strides to increase awareness and understanding of research and clinical trials that can lead to improvements in cancer care. The Director of the Health Disparities Program will report jointly to the Deputy Director of the Center for Community-Based Research (CCBR) and to the Vice President for External Affairs. The CCBR conducts research aimed at cancer prevention and control has a particular focus on the development and evaluation of effective interventions to modify behaviors, policies and practices that will reduce cancer risk and to provide increased access to and comprehension of cancer risk information. The Health Disparities Program will function as the key organizing unit that supports efforts at DFCI to decrease health disparities. The Director will lead the DFCI efforts to both amass and provide information needed to reduce health disparities in cancer, as well as to evaluate existing efforts at the Institute. S/he will also be responsible for developing a research program in collaboration with the CCBR and the disease programs. The Director will collaborate closely with his/her colleagues working on similar initiatives at the Dana Farber/Harvard Cancer Center (DFHCC). The DFHCC, the largest comprehensive cancer center in the world, is a consortium of seven Harvard affiliated medical centers. S/he will also be expected to work with individuals working on these issues at the city, state and federal level. A key role for this position will be to develop a plan for the sustainability of the Program. In 1947, the late Sidney Farber, MD, founded a Children's Cancer Research Foundation dedicated to providing children with cancer with compassionate, state-of-the-art treatment and simultaneously developing the cancer preventatives, treatments, and cures of the future. The Institute officially expanded its programs to include patients of all ages in 1969, and in 1974 became known as the Sidney Farber Cancer Center in honor of its founder. The long-term support of the Charles A. Dana Foundation was acknowledged by incorporating the Institute under its present name in 1983. The mission of the Dana-Farber Cancer Institute is "to provide expert, compassionate care to children and adults with cancer while advancing the understanding, diagnosis, treatment, cure, and prevention of cancer and related diseases." The Institute also provides training for new generations of physicians and scientists, designs programs that promote public health particularly among high-risk and underserved populations, and disseminates innovative patient therapies and scientific discoveries to its target community across the United States and throughout the world. Today, the Institute employs more than 3,200 people supporting more than 200,000 patient visits a year, and some 600 clinical trials. DFCI is internationally renowned for its blending of research and clinical excellence which uniquely positions it to bring novel therapies that prove beneficial and safe in the laboratory setting into clinical use. **GOALS and**

OBJECTIVES for the DFCI HEALTH DISPARITIES PROGRAM Health disparities are found in all aspects of the cancer continuum (cancer prevention to palliative care) and are not simply an area of academic inquiry. On both a conceptual and practical level, the issue of health disparities cuts across many service areas within the DFCI and as such, health disparities are addressed in a variety of ways throughout the Institute. The Health Disparities Program will focus on identification and facilitation of activities throughout the Institute that may have an effect on disparities. The vision for DFCI's Health Disparities Program is to enhance and expand the DFCI's role as a national leader in the effort to eliminate cancer disparities. To achieve this, DFCI has as a goal to leverage the world-class research and patient care resources available throughout DFCI, its affiliates and collaborators, to help provide optimal care and state-of-the-art treatment for those facing disparities related to race/ethnicity or socioeconomic position. The DFCI Health Disparities Program will become an evaluation/research resource that will facilitate DFCI's effort to become a best-practice model for amassing the institutional commitment, knowledge and resources needed to eliminate racial/ethnic and socioeconomic disparities in cancer. To achieve the vision and goals outlined above, the Health Disparities Program will be developed as an in-depth resource center to support Institute-wide initiatives and research on racial and ethnic disparities and track progress on new evidence-based initiatives. The Health Disparities Program will be responsible for developing a customer-friendly health disparities research information resource center to facilitate researcher efforts to access national, state and local databases on racial and ethnic disparities in cancer. The program will also convene a DFCI working group to develop community and clinical indicators that can be used to monitor racial and ethnic disparities in cancer prevention, screening, occurrence and clinical care. A central contribution of the Program will be to develop a large and vibrant Community-Based Cancer Education Registry, that will provide continuity and continued affiliation with DFCI to the thousands of participants in our community-based research studies following study completion. It will also create a recruitment resource that other DFCI researchers can utilize to increase the diversity of their study populations and to answer questions related to cancer disparities. The Registry has great potential to add significant economy of scale for investigators who would like to add new components to their studies that will help to identify factors that impact on cancer prevention and screening behaviors. In addition, the Registry will be an educational resource for community members who are enrolled in DFCI studies. The Program will also be responsible for maintaining Institute-wide knowledge of disparities initiatives, tracking their progress, and reporting on them through periodic updates to the Executive Committee on Health Disparities and submission of an annual written report to the Trustees Community Program Committee.

CHALLENGES FOR THE NEW DIRECTOR OF THE DFCI HEALTH DISPARITIES PROGRAM:

- **Lead the Development of a Program which will Serve as an Information Resource** Serve as a clearinghouse on initiatives, policies and programs to reduce racial and ethnic disparities in cancer, within DFCI and externally. Develop a culturally appropriate library/repository of information and/or website on cancer prevention, care, treatment options, alternative therapies, innovative treatments etc. that may be of particular interest to diverse populations. Assist DFCI researchers to design study protocols that foster participation by minority and lower income populations. Support DFCI researchers' access to diverse databases from within the Institute, and local, state and national sources on racial/ethnic and socioeconomic disparities in cancer research, treatment, and outcomes. Assist in DFCI-wide efforts to comply with the Boston Public Health Commission's regulations pertaining to data collection requirements, quality improvement efforts, and patient satisfaction, as requested by the Office of External Affairs. Develop and implement a coordinated, comprehensive and multi-faceted marketing and communications work plan that could include, but is not limited to speeches, presentations and media placement.
- **Evaluate DFCI Programs that have been Developed to Address Disparities** Develop indicators to measure community-level and clinical cancer disparities, and assess changes in these indicators over time. Tasks related to this goal include: Developing Institute-wide benchmarks on health disparities and track changes at DFCI. Tracking changes in breast, cervical and prostate cancer rates and other disease areas that occur in Boston, and nationally, for racial and ethnic minority populations, and in relation to whites, and the population as a whole. Examining access to care, quality of care and continuity of care obtained by minority patients compared to others to determine whether or not differences exist and identify mechanisms for ameliorating these disparities. Evaluate DFCI initiatives that aim to eliminate disparities in cancer education, screening, diagnosis, quality of care, continuity of care and outcomes. Programs to be evaluated initially include, but are not limited to, the Patient Navigator Program and Prostate Cancer Screening Program. Provide an evaluation resource for any unit within DFCI (e.g. HR, Office of Diversity, Nursing and Patient Care Services) that has developed disparities-

related programs. Determine best practices in health disparities evaluation research and design appropriate evaluation models for DFCI disparities program evaluation initiatives. Evaluate the extent to which DFCI patients from all racial and ethnic backgrounds and socio-economic strata have access to information, education and support that

allows them to make informed decisions about participation in clinical treatment trials. • **Develop a**

Comprehensive Data Repository and Research Agenda on Health Disparities Develop and maintain a Health Disparities Community-Based Cancer Education Registry, consisting of individuals who have participated in community-based research and are willing to be contacted for future studies. Members of the registry will provide consent to be invited to participate in other studies at DFCI, and will receive ongoing educational mailings, resource materials, and invitations to community events sponsored by DFCI. The Registry can be accessed by DFCI researchers who are interested in studying issues related to disparities. Oversee the development of a database characterizing participants in the Community-Based Cancer Education Registry, so that investigators can: (1) identify and approach different population groups for relevant studies; (2) develop new, translational study ideas that may directly address health disparities; and (3) identify opportunities to collaborate with investigators on funded community-based studies to add new components that will help to identify factors that impact on cancer prevention and screening behaviors and provide opportunities for biomarker collection. **PERFORMANCE MEASURES** In order to ensure that the Health Disparities Program will achieve its goals, the following indicators will be used to monitor performance: • Establishment and utilization levels of Health Disparities Program Information Resource Center; • Number of evaluations of DFCI disparities programs conducted; • Number of collaborative studies formed with community-based investigators; • Number of research publications and grants resulting from use of the Registry; • Number of research publications and grants related to health disparities; • Number of people enrolled in the Community Cancer Education Registry; • Dollar amount (or % increase) of new sources of funding related to disparities secured from federal, corporate and/or foundation sources; • Improved data collection allowing for better measurement and tracking of health disparities. **Qualifications:** • Strong academic credentials (Ph.D. required); • Expertise in health disparities and/or health policy research; • Demonstrated leadership and management skills; • Strong facilitation, coalition-building and communication skills (oral, writing); • Experience in securing external research funding. **TO APPLY** All inquiries, nominations, and applications should be directed in confidence to: Denise Gaffney, Vice President or Stephanie Fidel, Senior Associate, Isaacson, Miller, 334 Boylston Street, Suite 500, Boston, Massachusetts 02116, 617-262-6500. Please submit application materials to 3371@imsearch.com.

General Preventive Medicine Residency Program, University of Colorado Health Sciences Center

Visit Scholar Openings (2) for 2008-09 and 2009-20

<http://pmb.uchsc.edu/PMResidency/index.html>

The General Preventive Medicine Residency Program, University of Colorado Health Sciences Center seeks two visiting scholars, for the academic years of 2008-09 and 2009-10. Visiting scholars will teach courses and seminars and mentor student research relevant to health disparities, teach and model cultural competency, and provide consultation on enhancing the cultural, ethnic, and racial diversity of the faculty, residents, and curriculum. Topics for the course and the presentation related to health disparities, minority health issues, rural health disparities, migrant health issues, cultural competency, or disparities among aging populations are all welcome. Salary commensurate with time commitment and qualifications. We seek scholars with training in preventive medicine or an advanced degree in public health or a related field, teaching experience at a graduate level, and scholarship in an area relevant to health disparities. Visiting scholars will come to Denver during the 2008-09 and 2009-10 academic years for 1 to 4 months. If you are interested, please send us a CV and a note about your availability and interests. We would also be happy to receive ideas you might have for others who might serve.

Harvard School of Public Health, Department of Epidemiology

Assistant or Associate Professor of Reproductive and Perinatal Epidemiology

The Department of Epidemiology at the Harvard School of Public Health (HSPH) seeks candidates for the tenure-ladder position of assistant or associate professor. The successful candidate will conduct research in the area of reproductive and/or perinatal epidemiology. General emphasis in research will be on the design, implementation, and analysis of population-based studies to establish the causes and

preventability of unfavorable reproductive and perinatal outcomes, as well as long-term consequences, both for the mother and the offspring of reproductive and perinatal events. Interest and experience in conducting such studies in developing countries is a particular strength. In addition to developing an independent program of research, the successful candidate will be expected to participate in collaborative research activities within the department. The successful candidate will be responsible for teaching and for student supervision, which will encompass the direction of doctoral students in their dissertation research and student advising at the master's and doctoral levels. The successful applicant will hold a doctoral degree in epidemiology or in another relevant area of public health, or a medical degree and formal training in epidemiology. Please send a letter of application, including a statement of current and future research interests, curriculum vitae, sample publications, and the names of three referees to the following address. Applicants should ask their three referees to write independently to this address: Chair, Search Committee for Assistant or Associate Professor of Reproductive and Perinatal Epidemiology, c/o Michelle Coleman, Department of Epidemiology, Harvard School of Public Health, 677 Huntington Avenue, Boston, MA 02115.

**Health Resources and Services Administration
Minority Faculty Fellowships
HRSA-08-060**

Deadline: Dec 14, 2007

Minority Faculty Fellowship Program grants increase the number of under represented minority individuals who are members of the faculty in a health profession school. The grants enable schools to provide a stipend and a training allowance to the faculty fellow. Grantees must: (1) Identify, recruit and select individuals who are underrepresented racial minorities in the health professions for teaching, administration, or research positions at a health professions institution; (2) Provide such individuals with the skills necessary for tenured faculty positions, which may include training in pedagogy, program administration, design and conduct of research, grant writing, and the preparation of articles suitable for publication in peer review journals; (3) Assist individuals in preparation for an academic career by providing services such as counseling; and (4) Provide health services to rural or medically underserved populations. *This program is not included in the President's budget for 2008. Potential applicants for funds should consider this announcement provisional until final Congressional action is taken. Updated information will be available on the HRSA website. Announcement details at <https://grants.hrsa.gov/webExternal/SFO.asp?ID=74576F12-84ED-4702-A2D6-9C3C43EAC7B1>.

**InterAction, Washington, DC
Pandemic Coordinator**

The incumbent will lead InterAction's efforts to improve the capacity of the non-governmental organisation (NGO) community to respond to a highly pathogenic influenza pandemic. S/he should have a minimum of 10 years experience (including four years in the field) in international relief work. Announcement details at <http://www.comminit.com/en/node/265040>.

**International Partnership for Microbicides (IPM), Silver Spring, MD
Director of Communications**

The incumbent will be responsible for managing the daily operations of the organisation's global communications team and for implementing the global communications and advocacy strategy. S/he will be a superior writer, an exceptional manager, and a skilled diplomat with outstanding experience in media relations. Announcement details at <http://www.comminit.com/en/node/264984>.

**International Resources Group (IRG)/USAID, Washington, DC
Writer/Editor and Research Analyst**

The post holder will be responsible for writing, editing, and coordinating documentation and presentation materials for senior officials. S/he should have two to four years research, writing, and editorial experience. Announcement details at <http://www.comminit.com/en/node/264304>.

**The Johns Hopkins Bloomberg School of Public Health, Department of Epidemiology
Assistant Professor (Cancer Health Disparities Research Program)
Deadline: February 1, 2008**

The Department of Epidemiology at the Johns Hopkins Bloomberg School of Public Health seeks candidates for a tenure track Assistant Professor in the Cancer Health Disparities Research Program. The mission of the program is to advance the knowledge base toward eliminating disparities in the prevention and treatment of cancer. We endeavor to understand determinants of racial/ethnic disparities in cancer incidence and mortality, and to rigorously evaluate interventions directed to "disparities populations". The Department of Epidemiology is one of the oldest and largest departments of epidemiology in the world. It has over 200 doctoral and masters students and a diverse research program directed by 80+ faculty members. Applicants should demonstrate experience in the application and teaching of epidemiological methods in community-oriented cancer control research as well as a commitment to multi-disciplinary, collaborative work. Applicants should also demonstrate experience in the examination of the effect(s) of relevant exposures (physical and social environment, genetics, etc.) on health disparities. Preference will be given to candidates with a strong record of peer-reviewed publications and competitive funding. Applicants should have a doctorate in epidemiology or a related discipline such as social and behavioral sciences, medicine, nursing, genetics or human biology. Interested applicants should send their curriculum vitae and the names of three references by February 1, 2008 to: Jonathan M. Samet, M.D., M.S., Professor and Chair, Department of Epidemiology, Johns Hopkins Bloomberg School of Public Health, 615 N. Wolfe Street, Suite W6041, Baltimore, Maryland 21205.

Keele University, Staffordshire, UK

PhD Research Studentships

New Dynamics of Ageing (NDA)

Promoting Independence and Social Engagement among Older People in Disadvantaged Communities project

Deadline: November 19, 2008

Arising from a successful grant application, an exciting opportunity exists to join a multidisciplinary team of researchers at Keele University. The project forms part of the New Dynamics of Ageing (NDA) programme - a five-year multidisciplinary research initiative with the ultimate aim of improving quality of life of older people. The programme is a unique collaboration between five UK Research Councils - ESRC, EPSRC, BBSRC, MRC and AHRC - and is the largest and most ambitious research programme on ageing ever mounted in the UK (further details at <http://newdynamics.group.shef.ac.uk/>). PROJECT SUMMARY: Three PhD studentships are available to support a research project, which aims to increase understanding of the social, health and psychological processes involved in promoting independence and social engagement among older people in disadvantaged urban communities. The participatory research design will examine four different forms of community initiative in deprived neighbourhoods of Manchester. It connects with the NDA programme themes of 'active ageing', 'autonomy and independence' and 'locality, place and participation'. The research will be interdisciplinary (informed by theoretical work in social and environmental gerontology, social/community psychology, health technology and community health) and collaborative (with partners from statutory and voluntary agencies). It aims to advance theoretical understanding of the social and community basis of active ageing and to develop policy guidelines for its promotion. The research seeks to clarify the issues older people identify as important and the particular processes involved in promoting active ageing through different community initiatives. A longer project summary and further details of potential PhD projects can be accessed at: <http://www.keele.ac.uk/gradschool/fundingkeele.htm>. However, the precise themes to be addressed in the projects are a matter for negotiation between supervisory teams and successful applicants. Applications are invited from highly motivated graduates who have, or expect to gain, at least an MA/MSc or upper second class degree, who have a background in Healthcare, Sociology, Social Policy, Psychology or in another related subject. Candidates with a relevant Masters degree from an ESRC-recognised programme are strongly encouraged to apply. The studentships will commence in January 2008, for three years leading to the award of a PhD. You will be joining a thriving community of around 40 postgraduate research students within the Research Institute for Life Course Studies, which aims to support and stimulate high quality research and enterprise by bringing together a multidisciplinary group of researchers working on a range of health and social concerns across the life course, from childhood through to old age. It draws on existing strengths at Keele in the fields of ageing (with one of the largest groups of researchers working in the field of gerontology in the UK), health, rehabilitation and well-being, children and families, and psychology. The studentships cover a bursary (£12,600) and tuition

fees at the UK/EU rate for 3 years. Informal enquiries and additional information may be directed by email to Professor Michael Murray: m.murray@keele.ac.uk. Please send a completed Application for a Research Studentship (found here: <http://www.keele.ac.uk/gradschool/documents/research%20studentship%20application%20form.doc>), and a completed application form (found here: <http://www.keele.ac.uk/gradschool/prospectus/appform.htm>) with a detailed CV and the names and addresses of two academic referees to: The Graduate School, Keele University, Staffordshire ST5 5AZ. Closing date for applications: Monday 19th November 2007. Interview date for shortlisted applicants: Date or dates in December 2007 (tbc). Start date for studentships: Monday 21st January 2008, or as soon after this date as possible.

**Keele University, Staffordshire, UK
Research Institute for Life Course Studies
Faculty of Humanities and Social Sciences**

Research Fellow

Starting salary: Grade 7 £27,466 (3 Year Fixed-Term)

Deadline: November 14, 2007

The Research Institute for Life Course Studies requires a Research Fellow to compliment the research activities of the "Promoting independence and social engagement among older people in disadvantaged communities" project recently awarded as part of the UK research councils' New Dynamics of Ageing programme which will commence in January 2008. The research team is led by Professor Michael Murray, and includes an interdisciplinary group of researchers on ageing located within the University's Research Institute for Life Course Studies. You will be involved in all stages of the project, and will carry out a range of duties connected with producing the deliverables specified in this project, including data collection, and a range of reporting and dissemination activities. For further information about the Institute for Life Course Studies please refer to the following website: <http://www.keele.ac.uk/research/lcs/>. Full job packs are available from the Human Resources Department, Keele University, Keele, Staffordshire, ST5 5BG. Fax: 01782 583471 or e-mail vacancies@keele.ac.uk or <http://www.keele.ac.uk/depts/uso/hr/cwisvacs.htm>. Please quote post reference: RE07/20.

**La Clínica del Pueblo, Washington, DC
Executive Director**

La Clínica del Pueblo, located in Washington, DC, was founded in 1983 as a direct response to the health care needs of Latino immigrants (predominately Central American refugees), many of whom had suffered greatly from human rights violations, war violence, and a treacherous journey to the US. La Clínica began as a one-doctor, one-room clinic operating one night per week and has become known in Latino communities, both locally and abroad, as a place for hope and healing. Today, La Clínica has over 80 culturally competent staff members, around 100 volunteers, and operates six days a week. In 2006, La Clínica provided more than 55,000 services to over 7,500 individuals with annual budget of \$6 million. All direct service staff are bilingual and culturally competent, as are the majority of the board, management, administrative and support staff members. The clinic was awarded Federally Qualified Health Center (FQHC) status by federal CMS in Summer 2007 and will be adding a second clinic site and doubling patients served in the next two years. www.lcdp.org. The prospective Executive Director must be an engaging leader and experienced manager who excels at balancing internal management with external impact and visibility; a track record of effective leadership in social justice, human rights, and health equity issues is desirable. She/he will be replacing La Clínica's first and only Executive Director, Dr. Juan Romagoza, and must help guide/lead the organization through the final phases of that transition. As the CEO of an FQHC and steward of a beloved community-based institution, the Executive Director must be an outstanding community leader, health equity visionary, seasoned fundraiser, and bilingual communicator who is able to convey effectively the mission and activities of La Clínica to many diverse audiences. The ED must have the fiscal and management skills necessary to ensure La Clínica's successful transition to an FQHC with multiple sites. MD is not required. Fluently bilingual in Spanish and English is required. Send all inquiries to kathleenamaloy@gmail.com.

**Medical College of Wisconsin, Graduate School of Biomedical Sciences, Department of
Population Health
PhD Program in Public and Community Health**

Applications now being accepted for Fall 2008.

We are pleased to announce that an innovative, new PhD Program in Public and Community Health is being offered by the Medical College of Wisconsin, Graduate School of Biomedical Sciences, Department of Population Health. The purpose of the program is to transform the research paradigm in public and community health by educating a new generation of researchers who will integrate the rigors of the traditional public health sciences with the essential components of community health improvement through participation and partnership. The program offers financial support to candidates in good academic standing that includes a complete tuition scholarship, a stipend for living expenses and health insurance. Applications are now being accepted for Fall 2008 at www.mcw.edu/gradschool. Please contact us for additional information. Cheryl A. Maurana, PhD, Program Director and Professor of Population Health, PhD Program in Public and Community Health, 8701 Watertown Plank Road, P.O. Box 26509, Milwaukee, WI 53226-0509, P: (414) 456-4517, E: phdpch@mcw.edu, W: www.mcw.edu/phdpch.

National Indian Child Welfare Association (NICWA), Portland, Oregon Director of Research (PhD)

Salary range: \$63,000-\$75,000-Level III

Supervisor: Senior Program Director

The National Indian Child Welfare Association (NICWA) is looking for a Director of Research. See details below and at http://www.nicwa.org/careers/director_of_research/. NICWA is a private, non-profit, membership organization based in Portland, Oregon. NICWA is a national voice for American Indian children and families. They are the only national American Indian organization focused specifically on the tribal capacity to prevent child abuse and neglect. Their members include tribes, individuals both Indian and non-Indian and private organizations from around the United States concerned with American Indian child and family issues. Their board of directors is made up of 26 American Indians, and they have a staff of 24, most of whom are American Indians. **RESPONSIBILITIES:** The Director of Research for the National Indian Child Welfare Association acts as principle investigator for NICWA research and evaluation projects and is responsible for guiding research design, methodology, data analysis, and reporting for NICWA research and evaluation activities. This position has overall responsibility for the management, control, and delivery of all aspects of this program and must carry out the following specific responsibilities: **Research** -- Ensures that all contracted and NICWA performed research activities are 1) developed according to methods that are academically rigorous and conducted in an ethical and professional manner, including protocols related to IRB approval; 2) include academically rigorous and culturally appropriate evaluation designs for NICWA projects and contracted services; 3) staffed with qualified researchers whether its NICWA staff or contracted researchers; and 4) conducted so that all NICWA partners understand NICWAs expectations for the respective research project and how this impacts the development and implementation of the project 5) inclusive of community based participation. Ensures that NICWA keeps abreast of emerging research that best supports existing work or development of new projects. **Management** -- Ensures sound management of the programs services and administrative duties, including implementation of all contracted and NICWA performed research activities in accordance with organizational goals and objectives, grants and contracts requirements, financial issues, and interagency planning and relationships. **Supervision** -- Directly supervises personnel activities for research program staff. **Duties** -- Assists the Executive Director, Senior Program Director and research staff in establishing research priorities. Develops timelines and deliverables for NICWA research and evaluation projects in coordination with NICWA program directors, partner agencies, funders and researchers. Schedules meetings, develops agendas and other information needed to conduct effective work meetings with NICWA staff, researchers, funders and partner agencies. Develops and manages research project budgets, reviews expenditures at least monthly, and reports variances to the senior program director. Manages and plans for the effective use of NICWA and contracted research staff, including support to NICWA researchers in their efforts to conduct research projects, such as helping them with questions about research methodology, clarification on NICWA expectations, addressing barriers to the successful completion of NICWA research projects, and guiding them in designing and implementing research projects that reflect NICWA priorities and expectations. Maintains effective and timely communication with NICWA staff, partner agencies, funders and researchers regarding NICWA research activities. Prepares reports and other written information as required by any contract or grant. Coordinates the dissemination of information on NICWA research projects to tribal leaders, Indian programs, policymakers, federal and state agencies, partner agencies, funders, NICWA

staff, NICWA Board of Directors and other individuals or entities in a timely manner. Identifies key individuals and entities that can assist NICWA research activities and coordinates their involvement when appropriate. Maintains professional working relationships with NICWA researchers, partner agencies, consultants, funders and other groups, such as professionals in the child welfare field and tribal leadership and program staff. Assists in the tracking of national trends in research related to NICWA research priorities and funding opportunities to be continuously apprised of the most current and relevant information on research that impacts Indian children and families. Works with the Executive Director, Senior Program Director, Development Manager and research staff to develop funding proposals to support NICWA research activities. Adheres to NICWA policy regarding ownership of data, respect for tribal sovereignty and community participation in research and evaluation activities. Performs other duties as assigned, such as representing NICWA on various external and internal teams and committees, and participates in development activities. **QUALIFICATIONS:** Has a doctorate degree in social work or related human services field; Has demonstrated skills and knowledge of advanced research methodologies, both qualitative and quantitative; Has extensive experience in conducting research in American Indian human services settings; Has extensive knowledge of Indian culture, social service systems, including child welfare, mental health and juvenile justice; Has ability to meet with, solicit cooperation of and deal effectively with people at various levels, e.g., tribal representatives, funders, program directors, state and federal officials, consultants, etc.; Has demonstrated skills in performing technical writing, including funding proposals and reports on research findings; Has advanced knowledge and experience with research software; Has demonstrated use of analytical, planning and project management skills; Has ability to work in a team environment, both in leadership and peer relationships; Have strong organizational skills; Has demonstrated ability to communicate both orally and in writing in an effective, professional and timely manner; Can capably operate a variety of office equipment, such as computer, photocopier, printer, etc.; Able to travel up to 25% of work year.

**National Institutes of Health
Loan Repayment Programs
Deadline: December 1, 2007**

NIH is inviting health professionals engaged in biomedical and behavioral research to apply online for a loan repayment award. The loan repayment programs (LRPs) are a vital component of our nation's efforts to recruit and retain highly qualified professionals to careers in research. NIH annually awards loan repayment contracts to approximately 1,600 health professionals with an average award of \$52,000. More than 50% of the awards are made to individuals less than 5 years out of school. Approximately 40% of all new applicants are funded and 70% of renewals are funded. The LRP application cycle is open through December 1. NIH will repay up to \$35,000 annually of qualified educational debt for health professionals pursuing careers in one of the five Loan Repayment Programs (LRPs). The programs also provide coverage for Federal and state tax liabilities. To qualify, applicants must possess a doctoral-level degree, devote an average of 20 hours per week or more to research funded by a non-profit organization, university, or government entity (NIH grant support is not required). Applicants must also have outstanding educational loan debt equal to at least 20% of their institutional base salary and be U.S. citizen or permanent resident. All applications for 2008 awards must be submitted online by 8:00 p.m. EST, December 1, 2007. To access the online application or for program information, please visit the LRP Web site at www.lrp.nih.gov. For assistance call the Helpline at 866.849.4047 or send email inquiries to lrp@nih.gov.

**New York University, Department of Nutrition, Food Studies and Public Health
Assistant/Associate Professor (Tenure-track)
New Position for September 2008**

Review of applications begins November 1, 2007 and continues until the position is filled.

The Department of Nutrition, Food Studies and Public Health at New York University invites applications from candidates with an advanced degree in Public Health for a new tenure-track faculty appointment at the rank of Assistant/Associate professor to start Fall 2008. The position requires an active and productive research program, student advising, service to the university and the community, and teaching of undergraduate and graduate courses in Public Health. We particularly seek candidates with teaching and research experience with Public Health methodology such as informatics and geographic information systems. Such skills could serve as valuable research resources, as well as great assets in building our

graduate programs. Research experience with international or community-based/disease prevention programs in an urban setting is also desirable. **QUALIFICATIONS:** Earned doctoral degree in public health or doctoral degree in a related discipline with a master's degree in public health. Have a strong record of publication, research, and external funding; experience in conducting community-based public health research studies; strong interest in teaching, advising and mentoring students. Candidates should send a cover letter discussing qualifications, a curriculum vitae, and the names and telephone numbers of five references to: Professor Sally Guttmacher, 35 West 4th Street, 10th Floor, New York, NY 10012-1172. Tel: (212) 998-5580. Fax: (212) 995-4194. Email: nutrition@nyu.edu (subject: faculty search). For further information, visit <http://steinhardt.nyu.edu/nutrition>.

Northeastern University (Boston, MA), Bouvé College of Health Sciences, Department of Health Sciences

Tenured Associate/Full Professor and Chair, Department of Health Sciences

Deadline: January 15, 2008

Come join our new interdisciplinary graduate program focused on urban public health! The Department of Health Sciences is seeking a senior faculty member committed to urban, community, and public health, to provide leadership for the department and to Bouvé College's initiatives in urban health and interdisciplinary education. Bouvé College is one of six colleges at Northeastern University and is housed in the new Behrakis Health Sciences Center. The College, comprised of three schools, Nursing, Pharmacy and Health Professions, prepares students for health science careers in nine undergraduate and 29 graduate majors. The comprehensive array of skills, expertise and professions present in the Bouvé College of Health Sciences are found at few institutions. The Department of Health Sciences consists of an undergraduate program in Health Sciences, an MPH program in urban health and a Masters program in Exercise Sciences. The Health Sciences program is designed to prepare undergraduate students for post graduate education in medicine, public health, and the health professions by giving them a strong foundation in the basic sciences, liberal arts, and urban/public health. A new MPH program in urban health has just been approved and will be accepting the first class of students in September 2008. The Department is enhanced by the presence of the Institute on Urban Health Research and the Center for Community Health Education Research and Service (CCHERS)--a network of 15 academic health centers in Boston. The Chair will have demonstrated academic and leadership experience; a strong record of funded research and publications in urban and/or community health; and experience with undergraduate and graduate teaching. Areas of expertise are open and include epidemiology, biostatistics, health education, health administration, health policy, health behavior, and/or health disparities. The Chair will play a leadership role in enhancing Bouvé's standing in community and public health and further strengthening a strong research oriented faculty. Qualifications for this position: (1) An earned doctorate in public health, health professions, medical sciences or social sciences is required and an MPH is desirable, (2) an excellent record of college teaching in areas of public and/or community health, (3) an excellent record of accomplishment including scholarly publications and external research funding, (4) demonstrated leadership in administering an academic/research program and community engagement, and (5) demonstrated experience and commitment to supporting a diverse faculty, staff and student environment. Salary is competitive and rank is commensurate with experience and qualifications. Application materials are due January 15th, 2008 and include: 1) CV, 2) letter of intent, 3) names and contact information of references, and 4) 2-3 published research articles that exemplify the applicant's most recent work. Northeastern University values diversity and particularly welcomes applications from members of historically underrepresented groups including women and persons with disabilities. Application Procedure: Please send application materials electronically to: Dr. Hortensia Amaro, Search Committee Chair, Distinguished Professor, Department of Health Sciences and Director, Institute on Urban Health Research, h.amaro@neu.edu.

PolicyLink, Oakland, CA

Senior Associate - Health Policy

100% FTE

Salary Commensurate with experience

This professional level position, available immediately, is an exciting opportunity to join the staff at PolicyLink. PolicyLink is a national research and action institute that works collaboratively to develop and implement local, state, and federal policies to achieve economic and social equity. Please visit our

website at www.policylink.org. Essential Responsibilities: The successful candidate will be a key staff member of the new PolicyLink Center for Health and Place. They will develop, in collaboration with executive and senior level colleagues, an understanding of the field of health and place, and will investigate strategic opportunities for research, capacity building, policy development and advocacy across the country. As appropriate, the Senior Associate will supervise staff and work collaboratively with project partners. They will build relationships with staff at key foundations, practitioners, business leaders, organizations, and other stakeholders. As needed, the Senior Associate will make presentations and develop written reports. Qualifications/skills: • Experience in public health and/or public policy. Minimum of 7 years of professional experience. • Advanced degree, such as MPP, MPA, MPH, or MSW. • Strong written and verbal communication skills and analytical skills. • Experience with qualitative and quantitative research, outreach and coalition building, and writing reports and articles. • Experience building relationships with, and providing technical support to, partner organizations and stakeholders. • Commitment to economic and social equity issues. • demonstrated ability to work as a self-starting member of a team. To Apply: Send Resume, Cover Letter, and three professional references to: PolicyLink – Senior Associate Search Committee, 1438 Webster Street, Suite 303, Oakland, CA 94612 or: Fax to 510-587-1113 or e-mail to jobs@policylink.org (include subject line: "[your name]" Senior Associate). Position open until filled. Excellent benefits including paid vacation, health, vision, and dental insurance and 401(k) retirement plan.

**Population Reference Bureau, Washington, DC
Technical Director, Population, Health, and the Environment**

The post holder will manage the existing Public, Health and Environment (PHE) programme and be responsible for developing a sustainable programme of PHE activities for the future. S/he should have an outstanding understanding of the links between population, health, and the environment. Announcement details at <http://www.comminit.com/en/node/264303>.

**Self-Help Network: Center for Community Support and Research, Wichita State University
Senior Researcher**

Applications will be reviewed beginning November 1, 2007.

Senior Researcher position available with the Self-Help Network: Center for Community Support and Research at Wichita State University which requires a PhD or a Masters degree with 3 years immediately recent experience doing research. Excellent benefits and salary commensurate with experience and qualifications. Application Process: For complete position description, required qualifications, and for full consideration, applicants must complete the on-line application at https://www.hrepartners.com/jobs/wsu_jobs.htm. The consideration of applications will continue until position is filled. WSU is an EEO/AA employer.

**University of California, Berkeley
Faculty Position (Tenure-track or tenure level)
Deadline: November 30, 2007**

BACKGROUND: The University of California, Berkeley invites applications for a faculty position (tenure-track or tenure level) in either of the following two areas: (1) Neighborhoods and the Social Ecology of Health Disparities; and (2) Community Based Interventions and Health Disparities. The professorial rank is open, but preference will be given to candidates who have received their doctoral degree within the last 12 years. The anticipated starting date is July 1, 2008. The search is part of the newly approved interdisciplinary Berkeley Diversity Research Initiative and will be conducted under the auspices of the Diversity and Health Disparities cluster of this initiative. Applicants may read about the Berkeley Diversity Research Initiative and the Health Disparities cluster at the website: <http://bdri.berkeley.edu>. The search will be conducted with the participation of the Schools of Public Health and Social Welfare. The successful candidate will hold a faculty appointment in a department to be determined by the candidate's preferences, disciplinary training, and departmental fit. QUALIFICATIONS: Candidates are expected to have a doctoral degree by July 1, 2008 in Public Health, Social Welfare, Sociology, Psychology, Anthropology, Economics, or in interdisciplinary fields with substantial preparation in social sciences and health research and teaching. DUTIES: Their work should focus on how neighborhoods and community characteristics impact health disparities in multi-ethnic and diverse racial groups. Specifically candidates are expected to work in either of the following areas: (1) analyzing the impact of place or neighborhood

characteristics such as physical environment, social inequality, racism, and segregation, on health status and behavior or on other relevant variables such as social capital, and neighborhood perceptions of risk or trust; (2) developing and testing models of neighborhood or community level interventions that impact the social determinants of health and reduce health inequities or related variables among multi-ethnic or multiracial population groups. The university is particularly interested in candidates who have experience working with students from diverse backgrounds and a demonstrated commitment to improving access to higher education for disadvantaged students. SALARY: Dependent upon individual qualifications. APPLY: Please self-register and upload or email PDFs, or submit: a letter of interest, a CV, three letters of reference, and up to three significant writing samples. Please direct referees to the University's statement on confidentiality, found at www.chance.berkeley.edu/apo/evalotr.html. Qualified women and members of underrepresented minority groups are strongly urged to apply: The self-registration URL (preferred): <http://esph.berkeley.edu:80/candidate/selfRegister.php?i=41>. After you self-register and upload your material, you should see a URL you may provide to your letters of reference writers where they may upload PDFs of those letters. Email address: gfleitas@berkeley.edu You may also mail the requested materials to: Diversity and Health Disparities Search Committee, c/o Gladys Fleitas, School of Public Health, University of California, Berkeley, 50 University Hall, Berkeley, California 94720-7360.

**University of California Irvine
Director, Program in Public Health**

Applications received by November 1, 2007 will receive priority review. Position will remain open until filled.

The University of California, Irvine, is recruiting a founding Director for the Program in Public Health in the College of Health Sciences. The Director will provide academic and administrative leadership for a rapidly growing program that is committed to building outstanding research and teaching programs. The Director will be expected to prepare the program as soon as possible for accreditation by CEPH as a formal Program in Public Health and to build the program to School status within five to seven years. (A complete description of the College can be found at <http://www.cohs.uci.edu/>.) The Position of Director requires a nationally-recognized scientist in academic public health to (1) consolidate the significant existing strengths in public health research across the campus, identify priority areas for future research activity, and establish an international reputation in public health research and training at UCI; (2) develop a fully interdisciplinary, high-quality CEPH accredited graduate program; and (3) support the continued development of an existing, well-subscribed undergraduate program. The successful applicant must have a nationally-recognized research record, diverse administrative and leadership skills and experience, and a distinguished academic stature sufficient to be appointed at the level of Professor with tenure. The successful candidate will join a dynamic community at UCI and provide leadership in advancing the diversity of the college's faculty, staff, students and programs. A cover letter, complete curriculum vitae, 1-page summary of research activities, and list of 5 references should be submitted via electronic copy to the chair of the search committee, Vice Provost, Michael P. Clark, at Email: dphsrch@uci.edu, Subject Line: Search for Public Health Director. For questions or further information about the position contact the committee chair by e-mail via that address or at Vice Provost Michael P. Clark, Chair, Search Committee for Director of Public Health, Office of the Executive Vice Chancellor and Provost, 535 Aldrich Hall, University of California, Irvine 92697, Phone: (949) 824-8923 or (949) 824-4501.

**University of California, Los Angeles, School of Public Health
Assistant/Associate Professor – Health Policy
Department of Community Health Sciences and Department of Health Services
School of Public Health**

DESCRIPTION: The UCLA School of Public Health seeks to fill a tenure-track faculty position in health policy, with an emphasis on domestic or global public health or health care policy. Appointment will most likely be at the assistant or associate professor level, although candidates at all levels will be considered. The successful candidate may be appointed in the Department of Health Services or the Department of Community Health Sciences. Our multidisciplinary faculty has a strong record of ongoing research and graduate education (M.P.H., M.S., Ph.D., and Dr.P.H. programs). Faculty have many opportunities for collaborative research within the School of Public Health and with other academic units and research centers, as well as with many organizations and with agencies at all levels of government. Departmental

websites: www.ph.ucla.edu/chs and www.ph.ucla.edu/hs. QUALIFICATION: Candidates must have a doctoral degree and demonstrate: substantial independent research in the social, political, policy, economic, and/or psychological dimensions of health policy. They must also demonstrate prior success in scholarly publications, strong potential for funded research, and interdisciplinary collaborations, as well as excellence in teaching. TO APPLY: Send curriculum vitae, statement of research interests, and contact information for at least three references to the address below. Review of applications will commence immediately and continue until the position is filled. E. Richard Brown, Ph.D. Chair, Health Policy Search Committee, Director, UCLA Center for Health Policy Research, 10960 Wilshire Blvd., Suite 1550, Los Angeles, California 90024, Email: erbrown@ucla.edu.

**University of Maryland College Park, Department of Epidemiology and Biostatistics
Tenure-Track Position in Epidemiology, School of Public Health
Applications will be reviewed beginning November 30, 2007.**

The Department of Epidemiology and Biostatistics is seeking a tenure-track position in Epidemiology in our new School of Public Health. The Department's mission is to improve health and reduce health disparities in local communities, the state of Maryland, and the nation. We accomplish this by using established epidemiological and quantitative methods, as well as developing new scientifically grounded approaches, that are applied predominately to identifying determinants of health and discovering and evaluating primary and secondary prevention strategies for chronic diseases. We offer the MPH degree in the concentrations of Epidemiology and Biostatistics and also a PhD in Epidemiology. The position represents a unique opportunity to join a growing department and make important contributions to an exciting research agenda and graduate student training program. QUALIFICATIONS: Candidates must possess a doctorate in Epidemiology from an accredited School of Public Health. A record of professional publications and activities in epidemiology-related work that supports a tenure-track position at the Assistant Professor rank is required. Candidates must also demonstrate potential for developing a strong program of externally funded research. Research interests and expertise should align with those of the department and focus on population-based studies. 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, diabetes, and obesity. Special emphasis on health disparities, disease prevention, nutrition and health promotion is desirable. Previous teaching experience, along with interests and ability to teach intermediate or advanced graduate level epidemiologic methods courses, is preferred. Demonstration of collaborative work is highly desirable. RESPONSIBILITIES: Successful candidates are expected to be actively involved in extramural-funded, multidisciplinary research (or demonstrate the potential for such activity), teach intermediate or advanced graduate level epidemiology courses, mentor graduate students, and engage in service. Effective interpersonal, communication, and collaborative skills are essential. SALARY and APPOINTMENT DATE: This is a 12-month tenure-track appointment with guaranteed salary in the mid-\$60,000 for Assistant Professor with options for increased salary with extramural funding. The appointments are scheduled to begin August 17, 2008. APPLICATION: For full consideration, applicants should submit a letter of application clearly indicating how they meet the qualifications described above, current research interests and future research plans, a current curriculum vitae, and contact information for three references. Review of applications will begin November 30, 2007 and continue until the position is filled. Application materials should be sent electronically to: Tina Madison at vigil@umd.edu.

University of Maryland-College Park School of Public Health's Department of Epidemiology and Biostatistics

Associate Professor (Tenure-track) in Biostatistics

Associate Professor (Tenured) in Biostatistics

Assistant Professor (Tenure-track) in Epidemiology

Electronic applications received by December 1, 2007 will receive best consideration.

Our Department examines and applies established epidemiological and quantitative methods, and new scientifically grounded approaches, to address health determinants. We offer an MPH degree with concentrations in Epidemiology and Biostatistics, and a PhD in Epidemiology. These positions represent a unique opportunity to join a growing department and contribute to an exciting research agenda and graduate student training program. Successful candidates should demonstrate the potential to establish and maintain external funding for a multidisciplinary research agenda. They will have a commitment to

excellence in teaching and advising graduate students, teach graduate level courses, recruit and mentor graduate students, and engage in university and professional service. Effective interpersonal, communication, and collaborative skills are essential. These are 12-month tenure-track appointments with guaranteed salaries in the mid-\$60,000 for Assistant Professor with options for increased salary with extramural funding. The appointments are scheduled to begin August 17, 2008. For application information, please visit <http://www.sph.umd.edu/home/jobs.cfm>.

**The University of Texas M. D. Anderson Cancer Center, Department of Health Disparities
Full, Associate, and Assistant Professors**

The University of Texas M. D. Anderson Cancer Center, Department of Health Disparities Research, is accepting applications for several open-rank tenured/tenure-track faculty in any area of health disparities research. Candidates must have a strong record or promise of scholarly achievement and extramural funding. We are particularly interested in individuals with expertise in population-based social, environmental, or geographic science; anthropological/qualitative science; community-based participatory research; or implementation and dissemination science. However, applications from all areas of expertise are welcome. Qualifications include a doctoral degree in sociology, epidemiology, public health, psychology, demography, anthropology, geography, communications, or related field. These positions are fully funded, with an obligation for only 30% extramural support following the third year of appointment. Salary is extremely competitive and commensurate with experience. M. D. Anderson offers very generous start-up packages and excellent benefits. Successful candidates will be expected to conduct research with the ultimate goal of eliminating cancer-related disparities with a particular focus on minority and underserved populations. The Department of Health Disparities Research (www.mdanderson.org/healthdisparities) provides unusually rich opportunities for disparities research and an exceptional infrastructure. Multidisciplinary opportunities in both community-based and clinical research are readily available. The Department of Health Disparities Research is undergoing rapid growth and currently comprises 8 faculty and 2 joint faculty. The Department includes the Center for Research on Minority Health, one of the country's leading centers addressing cancer-related disparities. The M. D. Anderson Cancer Center is located within the Texas Medical Center, the largest medical center in the world. Houston is a dynamic, multicultural city with a very affordable cost of living. Applications will be accepted and reviewed until the positions are filled. To apply, please email a cover letter, curriculum vita and the names and contact information for at least three academic references to: David W. Wetter, Ph.D., Professor and Chairdwetter@mdanderson.org.

**Virginia Commonwealth University, Department of Social and Behavioral Health
Two Associate/Full Professors (tenure-track)**

Virginia Commonwealth University invites applications for two full-time Associate/Full Professors in its new Department of Social and Behavioral Health. This is a 12-month tenure track faculty position for candidates with academic credentials consistent with appointment as an associate or full professor. The Department's mission is to bring a multidisciplinary faculty together to promote research and scholarship that addresses how social, behavioral and cultural factors affect health and healthcare outcomes at the individual and population levels. The department is one of five departments in the developing school of public health located on the campus of the Medical College of Virginia, (which includes the Schools of Medicine, Dentistry, Pharmacy, Nursing, and Allied Health). We seek applications from creative, innovative individuals who want to share in creating a department with an innovative vision of public health and a commitment to excellence in research and scholarship. Candidates should have a doctoral degree in public health or a social or behavioral science (e.g., sociology, anthropology, psychology) with a focus on health. The successful applicant will have current national-level, external grant funding and demonstrated, sustained success as a principal investigator. Successful candidates must also have a strong record of peer-reviewed publications. Applicants are specifically sought who have expertise in behavioral and structural interventions and individuals whose research targets health disparities and incorporates a community-based participatory approach. Individuals who study the translation and dissemination of health-related innovations and/or employ multi-level or network approaches are also encouraged to apply. Applicants with a research focus in AIDS, diabetes and cardiovascular disease are of particular interest. The successful candidate will be expected to bring and continue development of their research program and to teach in the department's graduate programs. The position will provide opportunities for diverse research experiences in a highly supportive collegial environment with potential

for growth. The positions offer a competitive salary, excellent benefits and a generous start-up package. Interested candidates should submit a cover letter describing their research program and graduate teaching experience, a curriculum vitae, and a list of three referees to: Laura A. Siminoff, Ph.D., Professor and Chair, Department of Social and Behavioral Health, School of Medicine, Virginia Commonwealth University, P. O. Box 980149, Richmond, VA 23298. Applicants are encouraged to send their applications electronically to: lasiminoff@vcu.edu. The position will remain open until filled.

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CONFERENCES AND EVENTS

**National Committee for Quality Assurance
Breakthroughs in Reducing Health Disparities
Capital Hilton
1001 16th Street, NW, Washington, DC
November 12-13, 2007, Capital Hilton
For more information and to register: www.ncqa.org**

**The Grant Training Center
Professional Grant Development Workshop
Master the techniques of writing superior and winning proposals: Proposal Writing I
George Washington University
Mt Vernon Campus
Washington, DC
November 28 - 30, 2007**

<http://www.granttrainingcenter.com/>

This intensive three-day grant proposal workshop is geared for: 1) those who wish to strengthen their grant writing skills and 2) beginners who wish to acquire and master the techniques of preparing, writing and winning proposals from various funding agencies. The center of attention will be on how to effectively tell the story that leads to funding, be it for the researcher in the sciences and social sciences, educator and non-profit professional. Participants Will Learn How To: *Comprehend the diversity of the grant funding community; * Research and identify potential funding sources; *Create the right fit with the funding agency; *Address the guidelines of proposals; *Identify and effectively write the key elements of a proposal; *Integrate each component of the grant into the final product; *Develop focused and realistic budgets; *Package professional grants submissions. REGISTRATION: Space is limited, and since this class fills-up quickly, it is on a first-come-first serve basis. Workshop fee: \$595.00, including tuition, materials, certificate of completion, and continental breakfast. Rebate of \$50.00 per person is given for two or more registrants from the same organization. Click here to register:

<http://www.granttrainingcenter.com>.

**NYU Master's Program in Global Public Health Presents: Dr. Helen Epstein on "The Invisible Cure: Africa, the West, & the Fight Against AIDS"
King Juan Carlos I Center, Auditorium
53 Washington Square South
7:00 PM - 9:00 PM
December 3, 2007**

Free and open to the public

RSVP online at www.nyu.edu/mph/events

In her recent book "The Invisible Cure: Africa, the West, and the Fight Against AIDS", noted author and public health specialist Dr. Helen Epstein overturned many of our received notions about why AIDS is rampant in Africa and what to do about it. Join us for a special evening featuring a presentation from Dr. Epstein and a discussion with the author of what is likely one of the most significant books on AIDS published in recent times. Hosted and moderated by Professor John Gershman, Clinical Associate Professor of Public Service & Director of Undergraduate Programs at NYU Wagner Graduate School of Public Service; Associate Director, NYU Master's Program in Global Public Health. In 1993, Helen

Epstein, a scientist working with a biotechnology company searching for an AIDS vaccine, moved to Uganda, where she witnessed firsthand the suffering caused by the epidemic. In her unsparing and illuminating account of this global disease, she describes how international health experts, governments, and ordinary Africans have struggled to understand the rapid and devastating spread of the disease in Africa, and traces the changes wrought by new medical developments and emerging political realities. It is an account of scientific discovery and intrigue with implications far beyond the fight against one tragic disease. The AIDS epidemic is partly a consequence of the rapid transition of African societies from an agrarian past to an impoverished present. Millions of African people have yet to find a place in an increasingly globalized world, and their poverty and social dislocation have generated an earthquake in gender relations that deeply affects the spread of HIV. But Epstein argues that there are solutions to this crisis, and some of the most effective ones may be simpler than many people assume. "Provocative, passionate and incisive, this may be the most important book on AIDS published... indeed, it may even save lives." (Publishers Weekly).

**Swan Interprofessional Institute, UK BioSocial Society and Wellcome Trust-funded REG Project
"Unhealthy Professional Boundaries: Working Together in Health and Social Care:**

Goodenough College

London, UK

December 4-5, 2007

Interdisciplinary research is a radical departure from the more traditional, uni-disciplinary approach to health and social care research which the US National Institutes of Health recently described as "a series of cottage industries, lumping researchers into broad areas of scientific interest and then grouping them into distinct, departmentally based specialities". Moreover, they concluded that these "traditional divisions... impede the pace of scientific discovery", particularly given the widespread recognition that "the study of human biology and behaviour is a wonderfully dynamic process". To lower these artificial institutional barriers and advance health and social care research, health researchers have sought to promote and support interdisciplinarity – an approach which draws on the expertise and perspectives of different physical, natural and social science disciplines to generate innovative insights into the aetiology of disease and the effective organisation of health and social care services. At the same time that health and social care researchers were recognising the importance of adopting an interdisciplinary approach to bring together complementary perspectives from a wider range of scientific disciplines, there have been growing calls from service providers and policy-makers for health and social care professionals to work more closely together. The aim of what has become known as an "interprofessional approach" to health and social care delivery is to provide a service that has greater coherence and continuity for service users whose needs are often complex and require input from more than one practitioner. However, there are a number of challenges facing health and social care researchers and professionals when working together, and there is much to be learnt about how these challenges might be overcome. With this in mind, the Interprofessional Institute at the South West Academic Network (a tripartite strategic alliance between Kingston University, St George's and Royal Holloway at the University of London) has organised this conference in collaboration with the Goodenough College, the UK BioSocial Society and the Wellcome Trust-funded REG Project. The Conference includes plenary presentations from 8 international speakers working at the forefront of interdisciplinary research into health and social care, and 24 parallel sessions of proffered papers and related workshops on specific areas of health and social care practice to discuss how challenges to interprofessional practice might be overcome. The conference will appeal to: health and social care practitioners, managers and policy makers; Researchers; academics; and students interested in interdisciplinary research. For further information please go to: <http://www.goodenough.ac.uk/conferences.html>.

PolicyLink

Regional Equity '08: The Third National Summit on Equitable Development, Social Justice, and Smart Growth

New Orleans, LA

March 5-7, 2008

The nation's premiere gathering of equity advocates is just four short months away. [Online registration](#) is now open for "Regional Equity '08: The Third National Summit on Equitable Development, Social Justice, and Smart Growth" from March 5-7, 2008, in New Orleans. Save 25 percent if you [sign up early](#) !

**Save the Date! Xavier University of Louisiana College of Pharmacy, Center for Minority Health & Health Disparities Research and Education
2nd Annual Health Disparities Conference
Improving Medical Effectiveness and Health Outcomes to Eliminate Health Disparities through Multidisciplinary Collaborations
Westin at Canal Place (formerly the Wyndham)
New Orleans, Louisiana
April 10-12, 2008**

There is no fee to attend. Restriction is required for planning purposes.

Education Credits: CE, CEU, and CME credit will be available at no cost to attendees.

Information: <http://xula08.the1joshuagroup.com>

Invited Keynotes: John O. Agwunobi, MD, MBA, MPH (invited), Snior Vice President and President for Professional Services Division, Wal-Mart; Ronald A. Williams, MS (invited), President and Chief Executive Officer, Aetna Healthcare; Reed V. Tuckson, MD (invited), Executive VP and Chief of Medical Affairs, United HealthCare Group. This conference is expected to attract participants from clinical, research, and community audiences whose work incorporates the use of mid-level providers in an interdisciplinary manner to eliminate health disparities. Participants will include clinicians (pharmacists, nurses, physician assistants, other allied health professionals, and physicians), social workers, health policy makers, health educators, researchers, and public and community health leaders. Special Event: A Friday Community Health Forum will be presented by conference attendees and health care providers in the Greater New Orleans area to address health disparities related issues, and will prepare those in attendance on how to become better self health advocates. Presentations: This conference will present, examine and create replicable cross-disciplinary collaborative models, networks, and strategies that integrate all levels of providers to improve health outcomes, increase medical effectiveness, and eliminate health disparities. Secretariat: The 1Joshua Group, LLC, 1513 East Cleveland Avenue, Bldg 100-B, Suite 110, Atlanta, GA 30344-6947, 404.559.6191, 404.559.6198 – fax, <http://xula08.the1joshuagroup.com>, <http://www.the1joshuagroup.com>.

**2008 Community Voices Freedoms Voice Conference & Soledad O'brien Freedom's Voice Awards Gala
Atlanta, GA
April 9-11, 2008**

The Community Voices Freedoms Voice Conference is an unprecedented assembly of national leaders in health care disparities and civil rights. Participants will present the latest research on these issues and disparities and best practices for reaching those living in poor urban and rural areas or re-entering life after prison, immigrants, and the homeless. The three-day conference will conclude with a gala event at the High Museum of Art on April 11, 2008, where Dr. John E. Maupin, Jr., President of Morehouse School of Medicine, and Dr. Henrie M. Treadwell, director of Community Voices, will honor one of our nation's leading voices, CNN anchor and special correspondent Soledad O'Brien, with the Soledad O'Brien Freedoms Voice Award. The award was created to recognize her accomplishments and willingness to be a voice for the voiceless in our society, and her determination to cover stories that might otherwise go untold. It will be given annually to mid-career professionals who serve as catalysts for social change in their given fields. In years to come, Ms. O'Brien will guide an advisory committee in naming future recipients for the award who, like her, have worked tirelessly and effectively to expose problems our society has not wanted to face. This spectacular black-tie event will be hosted by an esteemed advisory board led by Ms. O'Brien, and co-chaired by philanthropist and actor Jane Fonda; Joseph Stewart, Trustee of the W.K. Kellogg Foundation and former Vice-President of Corporate Affairs for the Kellogg Company; and CNN Worldwide President Jim Walton. Invited guests will include local, state, and national officials, business leaders, media and entertainment industry leaders, performing artists, renowned policy experts from the Freedom's Voice conference, and other opinion and thought leaders. During the gala, Community Voices and the Morehouse School of Medicine will also announce their progress towards securing a \$5 million endowment for an Endowed Program in Health Policy. The money, to be raised over the next three years through donor sponsorships of Freedoms Voice events, will fund a Health Policy Program Chair, two Post-Graduate Fellowships, and future Freedoms Voice conferences. For more

information, visit www.communityvoices.org or
<http://guest.cvent.com/EVENTS/Info/Summary.aspx?i=00954c86-0d43-491c-b2ba-9f304560cd3f>.

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RESOURCES

Publications

"A Community Coalition Board Creates a Set of Values for Community-based Research."

Dr. Daniel Blumenthal, *Preventing Chronic Disease*, Volume 3, Issue 1, January 2006

http://www.cdc.gov/pcd/issues/2006/jan/05_0068.htm

This article is an example of a community case study in which the community truly is responsible for setting the research agenda.

Black AIDS Institute

[We're the Ones We've Been Waiting For: The State of AIDS in Black America ... and What We're Doing About It](http://www.blackaids.org/image_uploads/article_381.pdf)

http://www.blackaids.org/image_uploads/article_381.pdf

This study assesses the impact of AIDS on the African-American community. The report offers statistical data on HIV and AIDS prevalence in the U.S., describes the current state of AIDS mobilization, and issues a call to action.

Centers for Disease Control and Prevention

[HIV/AIDS Among Hispanics—United States, 2001-2005](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5640a4.htm)

<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5640a4.htm>

This publication shows that HIV-positive Hispanics living in the U.S. contract the virus through various transmission routes that are dependent on where they were born. It also demonstrates that HIV diagnoses declined by 4.7 percent in Hispanic men and 13 percent in Hispanic women from 2001-2004.

Future Health Consequences of the Current Decline in US Household Income

Steven H. Woolf. *JAMA*. 2007;298:1931-1933.

<http://jama.ama-assn.org/cgi/content/full/298/16/1931>

Today's clinicians and health care leaders are perhaps unaware of the decline in household income and the widening of income disparities that are occurring in the United States. The effects of these trends may not become apparent in hospitals or examination rooms until late in the careers of today's physicians or in their children's generation, but the potentially harmful influence on the health care system and, ultimately, on patients deserves attention now. Income is a significant determinant of health. The connections between poverty and disease have been well documented, but even modest reductions in income among more affluent persons can also influence health...For full text, <http://jama.ama-assn.org/cgi/content/full/298/16/1931>.

Resources for black-white differentials in wealth and asset ownerships:

U.S. Census Bureau

"Net worth and asset ownership of households: 1998 and 2000"

<http://www.census.gov/prod/2003pubs/p70-88.pdf>

Tables are available at: http://www.census.gov/hhes/www/wealth/1998_2000_tables.html. Other Census publications on wealth: <http://www.census.gov/hhes/www/wealth/publications.html>.

Levy Economics Institute of Bard College

<http://www.levy.org/diw.aspx>

They have a research program focusing on the distribution of income and wealth. They have a variety of papers posted at their site (many by Edward Wolff), e.g., Recent trends in household

wealth in the United States: Rising debt and the middle-class squeeze by Edward N. Wolff.

Panel Study of Income Dynamics (PSID)

<http://psidonline.isr.umich.edu/Publications/Papers/>

The Panel Study of Income Dynamics (PSID) also releases periodic reports summarizing wealth and asset ownership by race. However, be aware that the PSID undersamples households at the top of the income/wealth distribution. Two recent reports that are available at their website:

<http://psidonline.isr.umich.edu/Publications/Papers/>. PSID Trends in household wealth dynamics, 2001-2003. (July 2005) Elena Gouskova and Frank Stafford. PSID Trends in household wealth dynamics, 1999-2001. (September, 2002) Elena Gouskova and Frank Stafford.

Inequalities in health in Scotland: what are they and what can we do about them

Sally Macintyre, Occasional Paper Number 17- October 2007

MRC Social and Public Health Sciences Unit

Available online PDF [19p.] at:

<http://www.sphsu.mrc.ac.uk/files/File/reports/OP017.pdf>

In this paper she outlines key facts about socio-economic inequalities in health in Scotland.

She recommends key principles for effective policies to reduce inequalities in health. These include: * Maintaining and extending equity in health and welfare systems; * Levelling up, not down; *Reducing inequalities in life circumstances, especially education, employment, and income; *Prioritising early years interventions, and families with children. Summarising lessons learnt from research on how best to reduce inequalities in health, the paper recommends putting a high priority on changes in the physical and social environment (for example, building and planning regulations, fiscal policies, and reducing price barriers to health-promoting goods and services), rather than information-based campaigns or interventions which require people to opt in.

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Inequalities in health in Scotland: what are they and what can we do about them?

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Possibly competing goals

Appendix 1: Chronology of selected reports and actions on inequalities in health in the UK

References

"Intergenerational Neighborhood-Type Mobility: Examining Differences Between Blacks and Whites." Thomas P. Vartanian, Page Walker Buck, and Philip Gleason, *Housing Studies*, September 2007.

<http://www.informaworld.com/smpp/title~content=g781535511~db=all>

Using sibling data from the Panel Study of Income Dynamics linked with U.S. Census data, the authors examine whether the quality of a person's childhood neighborhood influences where one resides as an adult. Descriptively, the study finds that childhood neighborhood conditions of black and white children are vastly different. Few whites live in the most disadvantaged neighborhoods, and few blacks live in the most advantaged neighborhoods. Using a sibling fixed effects regression model, the authors find that living in a disadvantaged neighborhood as a child negatively influences the quality of the neighborhood one lives in as an adult. These neighborhood effects are particularly strong among children who grow up in the most disadvantaged neighborhoods.

Joint Center for Political and Economic Studies publications:

Race, Stress, and Social Support: Addressing the Crisis in Black Infant Mortality

Maternal Nutrition and Infant Mortality in the Context of Ralationality

Inequality Matters: Infrant Mortality in the Global Village

http://www.jointcenter.org/publications_recent_publications/health

These publications offer background statistics and analysis of the racial disparities associated with the high infant mortality rate in black women. The reports also offer recommendations for changes in public policy that can positively affect maternal and child health.

Scientifically correct racism: health studies' unintended effects against minority groups
Daniel La Parra and Miguel Angel Mateo, University of Alicante, Spain, Language and Intercultural Communication. Vol. 7, No. 2, 2007. ISSN 1470-8477, pp. 152-162

Full text: <http://hdl.handle.net/10045/1957>

PDF [11p.] at: <http://rua.ua.es:8080/dspace/bitstream/10045/1957/1/laic0070152.pdf>

Abstract: The present paper analyses press releases, news reports and health plans to show how health communication functions in perpetuating dominant racist structures. The paper is mainly concerned with how normal science and health practices can become an instrument for justifying racism and reproducing it in our societies. The examples demonstrate that even when all forms of explicit racism are avoided, health communication can have identifiable racist consequences in people's lives.

Social Medicine's latest issue at

<http://journals.sfu.ca/socialmedicine/index.php/socialmedicine>.

You are invited to review the Table of Contents here and then visit their web site to review articles and items of interest. This issue is published as part of an international initiative of over 200 journals organized by the Council of Science Editors (www.councilscienceeditors.org) to publish articles on Poverty and Human Development.

The Robert Wood Johnson Foundation, The Synthesis Project

[Racial and Ethnic Disparities in Access to and Quality of Health Care](http://www.rwjf.org/pr/synthesis/reports_and_briefs/pdf/no12_researchreport.pdf)

http://www.rwjf.org/pr/synthesis/reports_and_briefs/pdf/no12_researchreport.pdf

This report, authored by Dr. José Escarce, identifies the causes behind racial and ethnic disparities in health care access and quality. One of the key findings shows that Spanish-speaking Hispanics are most likely to lack access to health care when compared to other ethnic groups.

The social determinants of health: Developing an evidence base for political action

Final Report from Measurement and Evidence Knowledge Network

Michael P. Kelly (Co-chair) - Josiane Bonnefoy (Co-chair)

World Health Organization - Commission on the Social Determinants of Health, 2007

Available online as PDF file [165p.] at:

http://www.who.int/social_determinants/resources/mekn_report_10oct07.pdf

".....This report begins by identifying six problems which make developing the evidence base on the social determinants of health potentially difficult. These are: - lack of precision in specifying causal pathways; - merging the causes of health improvement with the causes of health inequities; - lack of clarity about health gradients and health gaps; - inadequacies in the descriptions of the axes of social differentiation in populations; - the impact of context on interpreting evidence and on the concepts used to gather evidence; and - the problems of getting knowledge into action. In order to overcome these difficulties a number of principles are described which help move the measurement of the social determinants forward. These relate to defining equity as a value; taking an evidence based approach; being methodologically diverse; differentiating between health differences, health gaps and health gradients; clarifying the causal pathways; taking both a structural and a dynamic approach to understanding social systems; and explicating potential bias. The report proceeds by describing in detail what the evidence based approach entails including reference to equity proofing. The implications of methodological diversity are also explored. A framework for developing, implementing, monitoring and evaluating policy is outlined. At the centre of the framework is the policy-making process which is described beginning with a consideration of the challenges of policies relating to the social determinants. These include the multi-causal nature of the social determinants themselves, the fact that social determinants operate over the whole of the life course which is a considerably longer time frame than most political initiatives, the need to work intersectorally, and the removal of the nation state as the major locus of policy-making in many parts of the world. The ways to make the case for policies are described and appropriate entry points and communications strategies are identified. The next four elements of the framework are outlined in turn: (a) evidence generation, (b) evidence synthesis and guidance

development, (c) implementation and evaluation, and (d) learning from practice. Finally the report describes the principal ways in which policies relating to the social determinants may be monitored....”

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The Tobacco Research Network on Disparities (TReND), sponsored by the National Cancer Institute and the American Legacy Foundation

Conceptual And Methodological Issues For Research On Tobacco-Related Health Disparities

<http://dcccps.nci.nih.gov/tcrb/trend/index.html>

Conceptual And Methodological Issues For Research On Tobacco-Related Health Disparities was initiated to address some of the methodological, conceptual, and practical challenges that impact our ability to reduce tobacco-related health disparities. In these papers, the authors: · critically examine transdisciplinary and integrated models for investigating tobacco-related health disparities; · raise questions about the validity, reliability, and relevance of constructs, measures, and methods for low socioeconomic status and/or minority racial/ethnic groups; and · challenge our assumptions about the relevance of current policy and other intervention approaches to tobacco control among groups who experience and suffer from tobacco-related health disparities. We invite you to review these papers and encourage you to build on this research. These papers can be accessed at:

<http://dcccps.nci.nih.gov/tcrb/trend/index.html>.

Why Epidemiologists Cannot Afford to Ignore Poverty.[Editorial] Krieger N. Epidemiology 2007; 18(6):658-663.

For further information see item #16 at:

<http://www.hsph.harvard.edu/thegeocodingproject/webpage/monograph/publications.htm>

