



Kellogg Health Scholars

Connecting Academe, Community, and Policy

In This Issue

KConnection

June 2009

Sounding Board

SOUNDING BOARD

Spotlight

Congratulations Kellogg Scholars and Fellows

E-Workshops

Funding

Career Development

Conferences and Events

Resources

Quick Links

Kellogg Health Scholars Program Website

KConnection is produced by the Kellogg Health Scholars Program, a program of the Center for Advancing Health.

Maria Briones-Jones, Editor
Brandon Moore, Production Manager

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.

Dr. Shalon Irving, 2009-2011 Kellogg Health Scholar, earned her Master's in Public Health from Johns Hopkins University on May 20.
Dr. Iveris Martinez, Community Health Scholar Program alumna, recently married her high school sweetheart, Carlos Miranda. They are expecting their first child, a boy, at the end of September. Dr. Martinez was also recently promoted to Director of the Medicine & Society Program, which is one of two divisions in the new Department of Humanities, Health & Society at the Florida International University College of Medicine. Dr. Martinez also has three publications so far this year:

Martinez IL "Aging in Exile: Family support and emotional well-being among older Cuban immigrants in the United States" Forthcoming chapter In: Sokolovsky J, (ed.), *The Cultural Context of Aging: Worldwide Perspectives*

, Westport, CT: Bergin & Garvey, 3rd edition, 2009.

Martinez IL, Carter-Pokras O, Brown, Pamela B. "Addressing the Challenges of Latino Health Research:

Community-based approaches in an emergent urban community" *Journal of the National Medical Association*, forthcoming September 2009.

Martinez IL, Kim K, Tanner E, Fried L, Seeman T "Ethnic and Class Variations in Promoting Social Activities among Older Adults" *Activities, Adaptation and Aging*, Forthcoming July 2009.

Dr. Kevin Robinson, Community Health Scholars Program alumnus, was appointed to the Alexandra Grange Hawkins Lectureship in Social Work for a three-year term (2009-10 through 2012-13) appointment during the May 17, 2009 Bryn Mawr College's commencement ceremony. The Lectureship was created to recognize and "honor a fine teacher at the Graduate School of Social Work and Social Research"; and was made possible by a gift from Alexandra Grange Hawkins, who was a member of the undergraduate class of 1938 at Bryn Mawr College. On receiving the appointment, Dr. Robinson said "This was TRULY an unexpected award, and I am extremely honored."

Dr. Lisa Benz Scott, Community Health Scholar Program alumna, has co-authored a book chapter coming out within a large (encyclopedia size) book due for release May 29, 2009. The book chapter focuses on telehealth models of care delivery that involve community health workers combined with mobile kiosks to screen and monitor vital signs for chronic disease among underserved communities. It includes lessons learned from past community-based participatory e-health projects. It has CBPR principles/fundamentals integrated. This work is co-authored by Dr. Benz Scott, her Dean (Dr. Craig Lehmann), and a wonderful member of their staff (Mrs. Jean Marie Giacini):

Lehmann C, **Benz Scott L**, Giacini J. (2009) E-Health Technology for Detecting and

Managing Chronic Disease.
Handbook of Research on Information Technology Management and Clinical Data Administration in Healthcare.

IGI Global Publishing. Details on the book chapter as well as excerpts for the book press release could be found under RESOURCES below.

Dr. Dionne Smith Coker-Appiah, Kellogg Health Scholars Program alumna, has an article recently accepted for publication: **Dionne Smith Coker-Appiah, PhD, MAEd**, Aletha Y. Akers, M.D. M.P.H., Bahby Banks, M.P.H., Tashuna Albritton, MSW, Karyn Leniek, M.D., Mysha Wynn, MA, Selena E. Youmans, B.A., Donald Parker, BA, Arlinda Ellison, MS, RHEd, Stacey Henderson, MEd, Doris Stith, BA, Barbara Council, Patricia Oxendine-Pitt, BA, Giselle Corbie-Smith, M.D., M.Sc. "In Their Own Voices: Rural African American Youth Speak Out About Community-Based HIV Prevention Interventions." *Journal: Progress in Community Health Partnerships: Research, Education and Action*, July 27, 2009.

Alek Sripipatana, Kellogg Fellows in Health Policy Research Program alumnus, successfully defended on June 11 his dissertation entitled "Factors Promoting Health and Preventive Health Service Use Among Older Chinese Americans."

[back to top](#)

SPOTLIGHT ON KELLOGG SCHOLARS NETWORK

Meet Community Health Scholars Program alumna, **Idethia Shevon Harvey, DrPH...**

Dr. Idethia Shevon Harvey is an Assistant Professor in the Department of Kinesiology and Community at the University of Illinois at Urbana-Champaign. She has a BS in Ceramic Engineering from Clemson University, a MPH from Morehouse School of Medicine, and a DrPH in Behavioral and Community Health Sciences from the University of Pittsburgh. Dr. Harvey completed her postdoctoral training at the University of Michigan, School of Public Health.

Dr. Harvey investigates the effect of social support and social networks in health behavioral changes among baby boomers and older minority women. In addition, Shevon employed a community-based participatory research approach to examine social determinants of health, focusing on how social justice issues were linked to health behaviors in rural Illinois.

Since starting her position at the University of Illinois at Urbana-Champaign, Shevon secured both external and internal funding. She is the Principal Investigator of the "Social Approaches to Healthy Behavior among Older African American and White Women Study," a pilot designed to assess the influence of perceived social support and behavioral changes among older African American and white women; the "Afya Project," a civic commitment initiative through UIUC that focuses on the health and well-being of African American women in Champaign County, Illinois; and the "Girl POWERED" project, an intervention designed to determine the efficacy of a campus community based intervention using translational research principles to prevent obesity. Dr. Harvey is also the co-PI of the following research grants: The Leisure-based Self-care Practices and Health of African Americans and Whites in Centralia, Illinois and Living Well with Chronic Disease.

Dr. Harvey is a member of the KHSP Thematic Group on Aging. For the past two years, Shevon has been the co-program planner for the Community-Based Public Health Caucus of APHA For the 2009 program along with her community co-chair Plucedia Williams from

Healthy African American Families II in Los Angeles, Dr. Harvey organized the review of abstracts and the program schedule. This year 142 abstracts were submitted and reviewed (by community and academic members of the caucus); 63 abstracts were accepted for 9 sessions (6 oral, 1 roundtable, 2 poster).

Says Dr. Harvey, "As an alumnus from the KHSP, I gained valuable skills and experience applying the principles of community-based participatory research (CBPR) in the field of public health. As an outgrowth of my continuing commitment to CBPR, I am currently working with community-based organizations in rural IL, and campus recreation centers and a free-health clinic in Champaign."

[back to top](#)

Archived KHSP E-Workshops

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

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

To listen to the archived presentations and download materials, click <http://www.cfah.org/workshops/login.asp>. For login and passcode information, please contact Brandon Moore at bmoore@cfah.org.

[back to top](#)

FUNDING

B Free CEED: National Center of Excellence in the Elimination of Hepatitis B Disparities (B Free CEED)

Year 3 Legacy Pilot Projects

Deadline: August 14, 2009 (midnight PST)

The B Free CEED: National Center of Excellence in the Elimination of Hepatitis B Disparities (B Free CEED) is pleased to announce the availability of funding opportunities for their Year 3 Legacy Pilot Projects. B Free CEED's mission is to serve as a national resource and expert center for the development, evaluation, and dissemination of evidence-based best practices that contribute to eliminating hepatitis B-related disparities among Asian Pacific Islanders (API). A coalition of NYU School of Medicine and local and national agencies, B Free CEED is one of eighteen Centers of Excellence in the Elimination of Disparities funded in 2007 under the Racial and Ethnic Approaches to Community Health Across the U.S. (REACH U.S.) program of the Centers for Disease Control and Prevention (CDC). Partners include Charles B. Wang Community Health Center, Korean Community Services of Metropolitan New York, Inc, American Cancer Society-Eastern Division, Asian Initiative, NYC Health and Hospital Corporation, and the Asian American Hepatitis B Program/B Free NYC. Currently, B Free CEED is developing initiatives in the New York metropolitan area, including a social marketing campaign that raises hepatitis B awareness in the Chinese and Korean communities and a collaborative care model, with the goal to disseminate these activities as best practices to other API communities across the U.S. ***About the Legacy Pilot Projects*** -- The B Free CEED is committed to allocating \$500,000 to fund Legacy Pilot Projects over a five-year period to support community-based participatory research projects dedicated to eliminating hepatitis B disparities in API communities. Pilot awards range from \$25,000 to \$40,000 of support for a ***one-year period***. There may be an option for additional year(s) of funding depending on demonstrated productivity and need. Grantees will have priority to access technical and consultation support of the B Free CEED coalition. Each year, the B Free CEED will fund two to four Legacy Pilot Projects. ***Who Can Apply*** --

The call for proposals is open to all community-based organizations, coalitions, health care organizations, social service organizations, health researchers, health professionals, and community advocates who currently work on or are interested in developing activities that address hepatitis B disparities in the API communities. *Organizations and coalitions interested in applying must be non-profits with a 501 (c) 3 status. Interested applicants who are currently receiving funds through any REACH US program are NOT eligible to apply.* Activities that are eligible for funding include but are not limited to:

- * Community needs assessments
- * Community asset mapping
- * Health impact assessments
- * Conducting trainings and workshops for different stakeholders
- * Initiation of relevant community-based or systems level activities
- * Local start-up activities of a community coalition
- * Synthesis of evidence or practice-based approaches in a specific area
- * Develop or adopt culturally appropriate assessment instruments or methodologies
- * Adapting B Free CEED local activities to other API groups

For Year 3 funding, we are giving special consideration to proposals that:

- (1) Expand the B Free CEED social marketing campaign to other API communities, including Southeast Asian and South Asian communities;
- (2) Develop targeted outreach campaigns using Web 2.0 and social media; or
- (3) Identify best practices through evaluation of current hepatitis B activities

Past Legacy Pilot Projects have included capacity building and infrastructure development in Houston, Texas and Edison, New Jersey, assessing availability of hepatitis B services in small cities, and adapting B Free CEED social marketing activities in the Pacific Islander communities in Southern California and Vietnamese community in Northern Virginia. For more information on our Projects, visit: <http://bfree.med.nyu.edu/projects/legacy-projects>.

The following costs will **NOT** be funded through the Legacy Pilot Project Grants:

- * Indirect costs
- * Clinical services (screening and vaccination)
- * Equipment

Requirements of Legacy Pilot Project Awardees -- The award period is from October 1st, 2009 to September 30th, 2010. During this one year period, Legacy Pilot Projects are required to:

- * After notification of award, include any revisions to the proposal as advised by Project Manager (if needed)
- * Complete a Memorandum of Understanding (MOU) with Project Manager
- * Conduct at least one conference call a month with Project Manager to provide updates
- * Complete progress report tables as required by the CDC REACH US Progress Reports. These progress reports are tentatively due in April 2010 and October 2010.
- * Complete a mid-year report of the Legacy Pilot Project
- * Submit a copy of any materials or data produced through the Legacy Pilot Project Funding
- * Complete a final report of the Legacy Pilot Project
- * Complete an end of year evaluation with B Free CEED External Evaluation Team

Application Instructions -- If you are interested in applying, please complete the following:

- (1) Legacy Pilot Project Application (Available here: <http://hepatitis.med.nyu.edu/projects/legacy-projects>)
- (2) Project Proposal (3-page maximum). The proposal should address the following:
 - * A statement of goals and specific aims
 - * Organizational capacity
 - * Data collection plans and methods (if applicable)
 - * Feasibility of the study
 - * Sustainability beyond the one-year funding period

(3) Budget and budget justification (not included in the 3 page proposal)

Please send the application to Dr. Simona Kwon, B Free CEED Program Manager, by email at simona.kwon@nyumc.org. If possible, please try to send the application as one PDF file.

Because of the amount of applications we receive, please limit your application to the criteria listed above. Extra materials will not be reviewed by our Legacy Pilot Project Review Committee. Incomplete applications will also not be considered for review. We will be accepting applications until *Friday, August 14, 2009, midnight PST*.

Important Application Dates:

AUGUST 14, 2009: LAST DAY TO SUBMIT APPLICATIONS

AUGUST 17 - 21 2009: APPLICANTS RECEIVE CONFIRMATION THAT APPLICATION HAS BEEN RECEIVED

AUGUST 14 - SEPTEMBER 14, 2009: COMMITTEE REVIEW OF APPLICATIONS
SEPTEMBER 25, 2009: APPLICANTS ARE NOTIFIED OF STATUS
OCTOBER 1, 2009: PROJECT PERIOD BEGINS
Any questions about the Legacy Pilot Projects should be directed to Dr. Kwon at simona.kwon@nyumc.org or 212-263-3026.

**Economic and Social Research Council of the United Kingdom
Comparative Cross-National Research Methods**

Deadline: August 25, 2009 (4:00 p.m.)

<http://www.email-logix.co.uk/link.php?M=145874&N=405&L=296&F=H>

The ESRC welcomes applications under the Initiative on Comparative Cross-National Research Methods. This Initiative is aimed at generating expertise and knowledge relevant to methodological development in comparative cross-national research and advancing understanding of the implementation of best practice. It is not focused on any particular methodological approach and will fund high-quality proposals from qualitative, quantitative, and mixed methods researchers. Training and capacity building will be a significant component of each project. Applications may also include funding for a research-linked studentship (+3 awards).. The closing date for receipt of research proposals is 4 pm Tuesday 25 August 2009. Applications must be submitted by an eligible institution in the UK. Up to 30% of the directs may be paid to an overseas (e.g., USA researcher). See http://www.esrcsocietytoday.ac.uk/ESRCInfoCentre/opportunities/international/inc_of_Coinvest.aspx.

**The Robert Wood Johnson Foundation (RWJF) New Connections Call for Proposals
Active Living Research**

Two types of grants available - Research and Publication Grants

The Active Living Research 2009 RWJF New Connections Call for Proposals focuses on studies of policy and environmental strategies for increasing physical activity, decreasing sedentary behaviors and preventing obesity among children and adolescents. Target populations include children and adolescents ages 3 to 18 that are at greatest risk for obesity: African-American, Latino, Native American, Asian American and Pacific Islander children and children who live in under-resourced and/or lower-income communities. This funding opportunity is for new investigators (defined as individuals who received their doctorate or terminal degree within the last seven years) from historically disadvantaged and underrepresented communities. Two types of grants are available through this funding opportunity: Research and Publication Grants.

(1) Research grants (up to four research grants of up to \$75,000 each for 12-18 months will be awarded in this category). Research grants can be either: a. Small-scale studies to identify and evaluate environmental determinants or evaluate promising changes to physical activity environments or policies in a variety of settings; OR b. Macro-level analyses of policies and environmental approaches that impact children's physical activity and sedentary behaviors.

(2) Publication grants to support scientific manuscripts relevant to Active Living Researches overall mission that will contribute to the applicant's scholarly productivity (up to three publication grants of up to \$12,000 each for 12 months will be awarded in this category).

All proposals for both research grants and publication grants must be submitted online through the RWJF Grant making Online system by 1pm PT on Wednesday, July 29, 2009. To view the Call for Proposals, please go to

<http://www.activelivingresearch.org/alr/grantsearch/grantopportunities>. For detailed formatting instructions and to prepare and submit your proposal, please go to

<http://grantmaking.rwjf.org/papnci2>. Investigators who meet the specific eligibility criteria for this CFP also are eligible and encouraged to apply for other ALR grant opportunities. To learn more about the Active Living Research program, including the Active Living Research 2009 RWJF New Connections Call for Proposals, please visit the program website at

<http://www.activelivingresearch.org>. Active Living Research (ALR) is an RWJF national program managing a new \$15.4- million authorization over five years for research on environments and policies that support physical activity among children and families. The goals of the ALR program are to: establish a strong research base regarding policy and environmental factors that influence physical activity and healthy weight status in children, as well as effective policy and environmental strategies for reversing the childhood obesity epidemic; build a vibrant, multidisciplinary field of research and a diverse network of researchers; and ensure that findings are effectively communicated to inform policy debates

and guide the development of effective solutions. Active Living Research seeks scientifically rigorous, solution-oriented proposals from investigators and scholars representing diverse disciplines and backgrounds. The program's overall aim is to provide decision- and policy-makers with evidence to accelerate effective action to reverse the epidemic of childhood obesity. For more information or personal assistance, please contact Debbie Lou, Program Analyst for Active Living Research, at 619-260-6636 or dlou@projects.sdsu.edu

[back to top](#)

Career Development

American Public Health Association 2010 APHA Public Health Fellowship in Government Deadline: June 22, 2009

http://action.apha.org/site/R?i=f6YiIUALW_Nk0UwtZC6h3A.

This is the third year that APHA has offered this fellowship. APHA is looking for candidates with strong public health credentials who wish to spend one year in Washington, D.C. working in a congressional office on legislative and policy issues related to health, the environment or other critical public health issues. The fellowship will begin in January 2010 and continue through December 2010. The fellowship is designed to provide a unique public policy learning experience, to demonstrate the value of science-government interaction, and to make practical contributions to enhancing public health science and practical knowledge in government. Applications and additional information are available at <http://action.apha.org/site/R?i=3U0UU4CoNub8YEr8MGQ-QA>. The application, including CV and three letters of recommendation, are due to APHA by June 22, 2009. All candidates: 1. must be APHA members; 2. have five years of experience in a public health position 3. have a graduate degree in a public health discipline. Please forward this email to anyone who you believe may be eligible and interested. For more information, contact Susan Polan, Associate Executive Director of Public Affairs and Advocacy at APHA, at susan.polan@apha.org or (202)777-2510.

Brown University, Department of Community Health Postdoctoral Research Associate in Community-based Nutrition and Obesity Prevention Research

The Brown University Department of Community Health is seeking a Postdoctoral Research Associate to join the Institute for Community Health Promotion, a vibrant research team doing community-based intervention research in the areas of obesity prevention, dietary and physical activity change with adults, children, families and the built environment. The appointment begins July 1, 2009 and is initially for one year; second year appointments are negotiated between associate and supervisor. The position will entail involvement in planning, implementing and evaluating intervention research studies, conducting focused research on related topics, writing manuscripts and preparation of grant applications. Mentoring from senior faculty will be provided. The successful candidate must be a highly motivated individual with demonstrated experience in research related to the above areas. Successful applicants are expected to have the ability to work independently. Strong verbal and written communication skills are required. Minimum requirements include a PhD with high level of academic achievement and a strong background in public health, community health, behavioral medicine, health communications, nutrition, physical activity, or a related field. Prior work with ethnic minorities and other underserved populations is a plus. Publications in national journals are a plus. Competitive salary, dependent on experience, and benefits are provided. Brown University is an EEO/AA employer and encourages applications from minorities and women. Review of applications will begin immediately and will continue until the position is filled or the search is closed. Please send curriculum vitae and the names of two references to: Kim M. Gans, PhD, Search Chair, Brown University, Box G-121S-8, Providence, RI 02912 Kim_Gans@brown.edu. For further information/applications please contact Dr. Gans or Leslie_Strolla@Brown.edu.

**Center for Research on Inner City Health , Toronto, Ontario, Canada
2009 Post-Doctoral Fellowships in Health Equity Research: Call for Applications
Deadline: June 15, 2009 (First application review)., Note: In consideration of the short
timeline associated with this start-up year of funding late applications will be accepted**

and reviewed until July 15, 2009 or until all positions are filled.

A new CIHR Strategic Training Program in Health Research

The ACHIEVE Research Partnership: Action for Health Equity Interventions

In September 2009, the Centre for Research on Inner City Health (www.crich.ca) at St.

Michaels Hospital (A University of Toronto teaching hospital) will launch a new post-doctoral training program focused on interventions research and partner-engaged research to reduce inner city health disparities. 4-6 Fellows will be admitted annually.

Post-Doctoral Fellowships Information -- Eligibility: Requirement: PhD and/or MD completion.

For MDs applicants, additional completion of Masters level (or PhD) degrees preferred, to ensure the candidate has advanced research skills. However, ACHIEVE also aims to build capacity related to interventions research for marginalized populations in the absence of advanced research training among MD applicants, practical experience with marginalized populations will be strongly considered. Term: September, 2009 - August 2011. Stipend: up to \$50,000 per year, for two years. Location: Based at Centre for Research on Inner City Health (Li Ka Shing Knowledge Institute, St. Michaels Hospital), and Agency Partner Locations.

Fellows are required to complete all training program components within the two years. (See curriculum outline below). The Training Program must be notified of all other awards that are held or obtained during the fellowship period. Top-ups will be allowed up to the maximum allowed by CIHR. How to Apply

1. Cover Letter

-Describe your research interests and professional goals & specifically how these would be advanced through participation in the ACHIEVE Research Partnership and engagement in the ACHIEVE curriculum;

-Describe your research and/or practical experience related to the needs of marginalized populations and/or urban health inequities;

-Proposed ACHIEVE Mentor -- whom you wish to work with, and why. (Faculty list is below)

-Proposed linkages to Agency Partner(s) (optional)

-At least three written references. One letter should be written by the thesis supervisor or current research mentor/supervisor. It is encouraged that one letter of reference should be written by a representative of a community-based agency and/or policy-maker organization. Letters of reference should speak about the suitability of the applicant for this program considering the focus on interventions research, community and partner engagement, methodological

innovations, and research linked to practical change.

2. CV

3. Two (2) writing samples

4. Transcripts (including undergraduate work) -- copies acceptable.

Mailing Address: Courier Address:

CIHR ACHIEVE Research Partnership

c/o Brigitte Williams

Center for Research on Inner City Health

70 Richmond Street East,

4th Floor

St. Michaels Hospital

Toronto, ON M5C 1N8

30 Bond Street Tel: 416-864-6060 x2528

Toronto, Ontario M5B 1W8 Fax: 416-864-5485

Email: WilliamsBr@smh.toronto.on.ca

About the Program: Note: Funding to launch the ACHIEVE Research Partnership was announced in April 2009.

Our website will not be available until Summer 2009. For more information about the program, please read the document attached. For more information contact Kelly Murphy at

murphyke@smh.toronto.on.ca/416-864-6060x337

Community Catalyst

Director, Health Equity Campaign

The Organization: Community Catalyst is a not-for-profit consumer advocacy organization working to build a national health justice movement. The organization develops new approaches to strengthen the voices of consumers and communities, organize vulnerable constituencies, and build the kinds of organizations and coalitions that can advocate effectively for health care reforms. Our staff provides advice, information, and tools that help communities, consumer groups, providers, foundations, and progressive policymakers work

together to lead health systems change. They work with consumer and community groups in more than 30 states that are advocating for -- and winning -- health policy and system reforms which benefit consumers. The Position: Community Catalyst is seeking a director, Health Equity Campaign to be a leader and catalyst in the design and implementation of a successful, cutting-edge health advocacy campaign dealing with the unique health care and access issues facing low-income minority and immigrant populations, particularly during the current debate on national health reform. Job Responsibilities:

- * Build and sustain coalitions and strategic alliances by developing relationships with key minority and immigrant-focused organizations.
- * Develop a policy agenda around issues critical to low-income minority and immigrant populations and the organizations working with them.
- * Broaden the connections and engage a broader set of organizations and interests that share some or all of the advocacy goals; e.g., hospitals, community health centers, public health experts, Medicaid HMOs, labor, business, to discuss policy and strategy.
- * Facilitate the creation of a strategy to support federal reform that affects communities of color and low income communities.
- * Plan and oversee campaign outreach activities, including educational sessions, briefings, and other training activities.
- * Assist Community Catalyst development team with project related fundraising.
- * Some travel is required.

Qualifications:

- * Significant leadership responsibility for managing broad coalitions of stakeholders and unifying various groups around a common mission and vision.
- * Knowledge of the unique experiences, concerns and needs of under-represented racial/ethnic/economic populations.
- * Sound political judgment.
- * Understanding of health policy issues that disproportionately affect low-income communities and communities of color including Medicaid and racial and ethnic health disparities.
- * Experience running issue campaigns.
- * Strong written, verbal and interpersonal skills.
- * Ability to work as part of a team and independently.
- * Minimum of a Bachelor's Degree and 7 years of professional organizing and/or health advocacy or other relevant experience years. Master's Degree Preferred.
- * Project management skills.

Qualified candidates from diverse personal, cultural, and ethnic backgrounds are encouraged to apply. Salary & Benefits:

- * Competitive salary;
- * Generous paid time off policy;
- * Robust benefits package;
- * Convenient downtown Boston location;

Applicants should submit a resume with a one page cover letter briefly summarizing their interest in and qualifications for the position to:

jobs@communitycatalyst.org. Please type 'Director, Health Equity Campaign' in the Subject line. For more information on Community Catalyst please go to www.communitycatalyst.org. CUNY Institute for Demographic Research, Baruch College, City University of New York Postdoctoral Researcher

The CUNY Institute for Demographic Research, located at Baruch College, City University of New York, is seeking a postdoctoral researcher to work on a project that examines the biological pathways linking social and economic factors to health. The candidate should have strong methodological skills and experience in working with large survey data sets. Appointment is for one year, with possible renewal, to begin in September 2009. Ph.D. in Epidemiology, Demography, Psychology, Sociology, Economics, or related discipline required. Please contact Jennifer Dowd at jdowd@hunter.cuny.edu with any questions. To apply, please go to: http://www.rfcuny.org/hr/pvn/cgi-bin/show_job.asp?pvn=REA-817.

Health Education & Behavior, Official journal of the Society for Public Health Education (SOPHE)

Editor-in-Chief

Deadline: July 31, 2009

Published bimonthly, Health Education & Behavior is an official journal of the Society for Public Health Education (SOPHE) that explores social and behavioral changes as they affect health status and quality of life. Journal topics include but are not limited to:

- The processes of planning, implementing, managing, and assessing health education and social-behavioral interventions.
- Empirical research, case studies, program evaluations, and literature reviews related to social and behavioral health, health education, and health communications.
- Discussions of theories of health behavior and health status.
- Programs and initiatives that foster professional preparation and development of health educators.
- Evidence-based strategies that promote linkages between health promotion researchers and practitioners and enhance the translation/dissemination of empirical research into practice.

Regular features include Perspectives, which offers thoughtful insights into complex subjects

and Practice Notes, which summarizes innovative programs in health education. Now in its 36th volume, Health Education & Behavior (formerly Health Education Quarterly and Health Education Monographs) is an essential resource for behavioral scientists, community organizers, public health and community planners, social scientists, social workers, hospital administrators, nurses, physicians, and others. The journal is published by Sage Publications (Thousand Oaks, CA) and is disseminated online and in print to 2100 SOPHE members and more than 675 institutions, libraries and consortia. The editor-in-chief's responsibilities include periodically revisiting the journal's mission; soliciting articles, overseeing the peer review process, and editing submissions in a timely manner; managing an effective editorial board; and collaborating with the publisher to increase the journal's visibility and readership. A stipend is provided. The official start date for the new editor will be 2011, but there will be a 6-month period during which the new editor will begin handling new manuscripts in June 2010 to insure a smooth transition for the February 2011 issue. The editor will participate in a comprehensive editorial orientation conducted by the publisher that includes an overview of the online editorial management system. The successful applicant will be a National SOPHE member, have an earned doctorate in Health Education, Health Behavior, or a related social/behavioral science field (e.g., Community Psychology, Health Psychology, Medical Sociology, Medical Anthropology); have an outstanding record of academic and research accomplishments in community/public health; and demonstrated experience with the editorial process (as editor, associate editor, or editorial board member).

Applications must be submitted by July 31, 2009, and include the following materials:

- A two-page description of the candidate's vision for Health Education & Behavior
- A current curriculum vitae, including applicant's publications
- Copies of two of the applicant's representative peer-reviewed publications
- A statement from an administrator of the applicant's institution or organization describing support for the appointment.

Send application to: HEB Journal Editor-in-Chief Search, Society for Public Health Education, 10 G St, NE, Suite 605, Washington, DC 20002; eauld@sophe.org

Questions - Contact: Michelle Kegler, DrPH, SOPHE Trustee for Publications and Communications, Phone: (404)712-9957 Email: mkegler@sph.emory.edu

**Indiana University-Bloomington, Department of Applied Health Science
Assistant/Associate Professor, Public Health, Epidemiology, Tenure-track
Deadline: November 1, 2009**

Must have doctoral degree in epidemiology and background in chronic disease and/or injury prevention. Must have established or clear potential for developing and sustaining an active and collaborative research agenda in an area specific to chronic disease and/or injury prevention. MPH degree is also desirable. Must show strong record of acquiring grants and contracts. The selected faculty member will contribute actively to the research, teaching and service missions of the Department and will maintain an active research agenda and publication record. Faculty will also serve on departmental and school committees and remain actively involved in professional organizations. Deadline is November 1, 2009 or until a suitable candidate is identified. Send letter of application which includes a brief statement of professional objectives, complete curriculum vitae, and a list of at least three references. Only finalists will be asked to contact references to obtain support letters. Applications should be addressed to: Dr. Michael Reece, Chair, Search and Screen Committee, Department of Applied Health Science, HPER 116, Indiana University, Bloomington, IN 47405; telephone: (812) 855-0068 or (812) 855-3627; e-mail: mireece@indiana.edu (e-mail contact is preferred for inquiries related to position). The School of HPER Web site is located at: <http://www.hper.indiana.edu>.

National Cancer Institute, Basic and Biobehavioral Research Branch (BBRB) within the Behavioral Research Program, Division of Cancer Control and Population Sciences
Full-time and Consultant Positions (for individuals with Doctoral level training)

The National Cancer Institute's Basic and Biobehavioral Research Branch (BBRB) within the Behavioral Research Program, Division of Cancer Control and Population Sciences, seeks scientific experts to support the development of new areas of research emphasis and the expansion of its research portfolio. The BBRB provides leadership and support for the study of fundamental behavioral, psychological, and social processes, interactions of those processes with biological factors, and their subsequent impact on cancer. Relevant experts from academia or industry can contribute to the development of a national research agenda in the

basic behavioral and biobehavioral sciences. Experts may contribute to: Comprehensive analyses of existing literature and publication of state-of-the-science perspectives in high impact peer reviewed journals; Cultivation of scientific collaborations among public, private, and academic stakeholders; and Development of scientific workshops, conferences, and symposia. Scientists can pursue collaborative work on new or on-going research that supports the BBRB mission. Substantial resources for secondary data analyses of national and state survey data are available. Full-time and consultant positions exist for dynamic, collaborative scientists with: Doctoral level training (Ph.D., Sc.D., Dr.P.H., M.D. or equivalent); Substantial research experience in a basic behavioral, psychological, or social science, basic biological research, clinical science, and/or other relevant scientific disciplines; and Evidence of an ability to apply expertise to emerging issues in cancer prevention and control. Scientists with expertise in behavioral neuroscience, stress biology, behavioral genetics, and biological mechanisms associated with individual differences in social, behavioral, and psychological characteristics are highly sought. Expertise working in transdisciplinary research teams is preferred, as is exceptional proficiency in methodological approaches that bridge the basic to applied research continuum. The work site location is the Washington, D.C. suburb of Rockville, Maryland. Salaries are competitive and commensurate with experience; excellent benefits are provided; a relocation package is negotiable. All applicants will receive consideration without regard to race, color, gender, national origin, age, religion, disability, or sexual orientation. NCI/NIH is an equal opportunity employer. For additional information about opportunities to support a national research agenda in basic behavioral and biobehavioral science at the National Cancer Institute, please contact: Paige Green McDonald, PhD, MPH Chief, Basic and Biobehavioral Research Branch, Phone: (301) 435-5037; Email: pm252v@nih.gov. To learn more about the BBRB mission, please visit: <http://dccps.nci.nih.gov/bbrb/about.html>.

**National Cancer Institute, Center to Reduce Cancer Health Disparities (CRCHD)
Deputy Director**

Deadline: July 29, 2009

The National Cancer Institute's Center to Reduce Cancer Health Disparities (CRCHD) <<http://crchd.cancer.gov/>> has re-opened the position for Deputy Director. Closing date for this position announcement is July 29, 2009. Due to a new evaluation process, if you previously applied for this position and would like to be considered, we invite you to re-apply. This is a key, supervisory health scientist administrator position to direct and lead our NCI-wide cancer health disparities reporting, and strategic planning and implementation efforts, as well as fiscal and administrative management of CRCHD functions. The incumbent will also assist the CRCHD Director with the planning, direction, implementation and evaluation of our multi-disciplinary, cross-organizational research and training programs in cancer health disparities within the Center. These research and training programs focus on the cancers that are more serious or prevalent in racial/ethnically diverse and underserved populations, and on advancing the development of the cancer research continuum for these cancers. We hope you will encourage your colleagues to consider this opportunity to help lead NCI/CRCHD's efforts to reduce the unequal burden of cancer and train the next generation of competitive researchers in cancer and cancer health disparities research. Please share this announcement with colleagues and others who may be interested in joining this exciting and dynamic team of scientists working to overcome cancer health disparities. For information about the position and how to apply, please visit USAjobs.gov <http://tiny.cc/Ypr97>.

**National Center for Health Statistics (CDC), Office of Research and Methodology
Service Fellow**

Deadline: July 30, 2009

For more information, contact Ms. Meena Khare at MKhare@cdc.gov. If you would like to apply or know of anyone who would be interested in this position, the full announcement for the fellowship may be found at: http://www.cdc.gov/nchs/about/fellowship_survey_methodology.htm. Among other duties, the Fellow will be responsible for conducting original and meaningful research on statistical designs to provide a reliable base for investigation of statistical validity, stability, and precision of measures from complex survey data. The incumbent will prepare and submit for publication the results of his or her efforts. This fellowship opportunity is open to all citizens of the United States or legal permanent residents with a work authorization. Applicants must have a master or doctoral degree or equivalent obtained from a recognized college or university. Applicants

must also have 3-5 years of work or research experience in statistical and survey methodology. To be considered for this position, all application materials must be postmarked by July 30, 2009.

Pay Plan: GS - 12/13

Appointment Term: Initial 24-month appointment, with the potential for extension.

Salary: From 73,100.00 to 113,007.00 USD per year

Location: Hyattsville, MD

Opening Date: 5/20/2009

Closing date: 7/30/2009

National Institutes of Health

Director, Office of Behavioral and Social Sciences Research

Closing Date: August 31, 2009

<http://obsr.od.nih.gov>

<http://www.jobs.nih.gov/vacancies/executive.htm>

The National Institutes of Health (NIH) invites applications for the currently vacant position of Director of the Office of Behavioral and Social Sciences Research (OBSSR). The official announcement is posted at <http://www.jobs.nih.gov/vacancies/executive.htm>. Candidates should submit their applications not later than August 31, 2009. The Director, who also functions as the NIH Associate Director for Behavioral and Social Sciences Research, serves as the NIH focal point for establishing agency-wide policies and goals in behavioral and social sciences research, coordinates the activities undertaken in the performance of this research, and provides advice and staff support to the NIH Director, Deputy Director, and Division of Program Coordination, Planning, and Strategic Initiatives within the Office of the Director. The position functions as a liaison between the NIH and the extramural behavioral and biomedical research communities; and with other Federal agencies, academic and scientific societies, national voluntary health agencies, the media, and the general public on matters pertaining to behavioral and social sciences research. Specifically, the Director is responsible for: (1) advising the NIH Director and other key officials on matters relating to research on the role of behavioral and social factors in the promotion of health and prevention of disease; (2) fostering research projects in the behavioral and social sciences conducted or supported by the NIH Institutes and Centers (ICs); and (3) working collaboratively with the ICs to develop new research and training programs in the behavioral and social sciences. The Director, OBSSR, manages a staff, demonstrating commitment to work force diversity enhancement. The OBSSR employs approximately 14 full time positions: 9 scientific staff, 2 program analysts, 1 communications specialist, and 2 support staff, and has a FY 2009 estimated budget of more than \$27M. HOW TO APPLY: Applicants must submit a current CV and bibliography electronically to Ms. Regina Reiter at SeniorRe@od.nih.gov (301- 402-1130). In addition, applicants are strongly encouraged to prepare a supplemental narrative statement that addresses the qualifications requirements (see the official announcement), and to provide the names, titles, and telephone numbers of 4-5 references.

Native Elder Research Center, Resource Center for Minority Aging Research

Native Investigator Development Program

The purpose of this solicitation is to recruit American Indian and Alaska Native junior faculty (MD, PhD) to apply to join the next 2-year cohort of the Native Investigator Development Program, which is an academic career development program in the Resource Center for Minority Aging Research at the University of Colorado Denver. For more information and application: http://aianp.uchsc.edu/nerc/application_process.htm.

Seattle & King County, Assessment, Policy Development and Evaluation (APDE) unit in Public Health

Two Openings: Chief of Assessment, Policy Development & Evaluation for Public Health and Assistant Chief of Assessment, Policy Development & Evaluation for Public Health

The Assessment, Policy Development and Evaluation (APDE) unit in Public Health - Seattle & King County is a nationally recognized leader in community health assessment. APDE'S primary role is to provide health assessment data and analysis to inform planning, policies, and actions, and develop innovative interventions that improve the health of King County residents. Analysis and elimination of health disparities is central to our work. In partnership with community organizations and agency staff, we use and develop state-of-the-art techniques for the collection and analysis of data, and the development and assessment of effective population-based interventions

(1) Chief of Assessment, Policy Development & Evaluation (APDE) for Public Health - Seattle & King County

The Chief of the Assessment, Policy Development and Evaluation Unit (APDE), in the Office of Director, will provide leadership, vision and direction for the Unit. The Chief must be an innovative and outstanding leader with strong management, strategic planning, public health expertise, and research skills. The Chief will be responsible for overseeing epidemiology, assessment, policy development, program planning, research and evaluation activities within the APDE unit and coordinating and providing technical assistance with these activities throughout the department. The Chief will keep abreast of current technical developments in epidemiology, community health assessment, planning methods and public health policy keeping the department and its staff at the forefront of these activities. The Chief will further the department's implementation of its Operational Master Plan (OMP) by developing, strengthening and coordinating a strategic approach to policy development across the department; introducing economic analysis as a routine component of assessment, evaluation and policy development activities; strengthening data collection and analysis; building capacity for program evaluation across the department; and improving strategic planning.

QUALIFICATIONS: * PhD in health sciences. * Demonstrated experience managing and/or leading a group of professionals analogous to the work described in this job announcement. * Demonstrated experience and skills leading and/or performing assessment and epidemiological analysis and presenting findings. * Knowledge and skill leading and/or performing program evaluation and presenting findings. * Demonstrated experience fostering evidence-based policy development in health care, public health, promotion of healthy living, provision of high quality health care, and/or related fields.

(2) Assistant Chief of Assessment, Policy Development & Evaluation (APDE) for Public Health - Seattle & King County

The Assistant Chief leads the unit's quantitative community health assessment and evaluation activities. This position requires an individual with strong evaluation, epidemiological, communication, supervisory and leadership skills, who is at ease in an environment that demands and supports rigorous science. The successful applicant should have highly developed skill in classic descriptive epidemiology as well as a commitment to support relevant novel applications, such as geospatial analysis, as necessary. A requirement for the position is the ability to translate research findings into clear and concise public health information for a variety of non-technical audiences.

POSITIONS ARE CURRENTLY POSTED ON THE COUNTY JOB OPPORTUNITIES WEBSITE. TO APPLY: <http://www.kingcounty.gov/healthservices/health/jobs.aspx>.

SUPPLEMENTAL INFORMATION Public Health - Seattle King County is a department of King County government. For more information about the department, visit its web page.

<http://www.kingcounty.gov/health>. Past reports such as Community Health Indicators and The Health of King

County produced by this unit are found at this web site:

<http://www.kingcounty.gov/healthservices/health/data>. Public Health's Operational Master Plan link: <http://www.kingcounty.gov/health/publichealthmasterplan>

Society for Public Health Education (SOPHE), Washington, DC

Two Openings: Project Director, Public Health Policy and Project Coordinator

(1) Project Director, Public Health Policy

Summary: Provide leadership to SOPHE cooperative agreement to educate policymakers regarding chronic disease and lead SOPHE's policy advocacy efforts on health promotion and health equity. Responsibilities:

1. Provide support to SOPHE's cooperative agreement on educating state policy makers on chronic disease, wellness, and health disparities by providing assistance and leadership to such activities as:

* Organizing, implementing and evaluating SOPHE's State Health Policy Institutes (I and II); * Providing guidance and technical assistance to SOPHE's State Health Policy Experts; * Planning sessions on state health policy and chronic disease at SOPHE's Midyear and Annual Meetings; * Developing policy briefs and other materials for state policy makers; * Working with national cooperative agreement partners to plan, implement and evaluate webinars and meetings on state policies in chronic disease; * Draft project reports, program budgets and interact with the project officers. 2. Lead SOPHE's federal advocacy activities that address and promote public health education programs such as:

* Creating and distributing electronic policy alerts to members; * Organizing and coordinating Hill briefings; * Collaborating with other public health organizations on joint advocacy agendas;

* Developing and enhancing relationships with House and Senate staffers; * Tracking and reporting federal public health policy activities; * Staffing SOPHE's advocacy committee. 3. Work with the National Racial and Ethnic Approaches to Community Health (REACH) Coalition to develop its infrastructure, educate policymakers, identify funding sources, and develop a strategic plan. 4. Provide leadership to planning the Annual Health Education Advocacy Summit in Washington, DC, in conjunction with SOPHE partners. Provide strategic advice and leadership in terms of advocacy positioning, message development, targeted outreach. 5. Assist in the planning and implementation of SOPHE Midyear and Annual Meetings and onsite support. 6. Assist in the development, implementation, and evaluation of SOPHE's strategic plan. 7. Staff SOPHE committees as requested. 8. Assist in resource development and grant writing to support the achievement of SOPHE's mission and strategic plan. 9. Other duties as requested. Qualifications: * Master's degree in public health, health education (or related field) with at least 2 years of post-graduation experience involving policy analysis and advocacy at the federal and/or state level; Or Bachelor's degree in government relations, political science (or related field) with a minimum of 5 years experience in public health policy and advocacy at the federal and/or state level.

* Excellent organizational, writing and public speaking skills. * Strong working knowledge of Congress and regulatory agencies. * Preferably, experience working with federal legislative staff and organizing Hill briefings. * Experience in grants management. * Sound knowledge of health disparities, public health promotion and community health efforts. * Demonstrated experience in working with coalitions for policy/systems change. * Experience working with coalitions, boards, committees or workgroups. * Ability to work and reason independently, as well as within a team. * Certified Health Education Specialist a plus. * Ability to travel.

(2) Project Coordinator : NEWLY CREATED POSITION

Summary: Help plan and provide technical assistance to national partners to support the initiatives of CDC's Healthy Communities program. Work with staff and grantees from Y-USA, National Recreation and Parks Association, National Association of Chronic Disease Directors, and National Association of City and County Health Officials (Category A partners) to help accomplish policy and environmental changes that support healthy lifestyles. Provide assistance on SOPHE meetings and serve as an ambassador to selected national coalitions and partners. Responsibilities: 1. Coordinate SOPHE's activities related to the ACHIEVE program. 2. Lead and facilitate the ACHIEVE translation and dissemination workgroup. 3. Assist with writing, developing and distributing technical assistance resources and other products tailored to the needs of various stakeholders and community groups related to chronic disease prevention, specifically focusing on policy/systems level interventions that support healthy lifestyles. 4. Write articles related to the ACHIEVE program to be published in SOPHE and CDC newsletters featuring environmental and systems changes from community partners. 5. Provide support for conference calls, face to face meetings, minutes, and other opportunities for project direction and input. 6. Help disseminate success strategies and lessons learned in community based engagement for chronic disease prevention as published in SOPHE journals and other publications to federal policymakers and other stakeholders. 7. Support planning of sessions at SOPHE national meetings and to chapters focusing on policy/systems level changes to enhance healthy communities, including training objectives, speaker communication, preparation of materials, and evaluations. 8. Assist in planning, implementing and evaluating webinars and other opportunities for distance based training for project grantees and communities, as well as Action Institutes sponsored by other partners. 9. Help develop online systems for conducting partner needs

assessments and collecting data for project evaluation and reporting. 10. Participate in meetings and conference calls with CDC and partners as required; draft required CDC project reports. 11. Assist with other SOPHE activities and duties upon request. Funding: This position is supported by a cooperative agreement from the Centers for Disease Control and Prevention through 9/2013. Qualifications: * Master's degree in health education or public health required;

certified health education specialist (CHES) preferred. * 2-3 years experience at the community level, working in coalitions and with community partners. * Strong interpersonal, verbal/written communication and presentation skills.

* Experience facilitating meetings, conference calls and workgroups. * Strong computer skills, particularly in Microsoft Word, Excel, PowerPoint, and online survey instruments. * Experience writing and managing grants/reports a plus.

* Ability to work and reason independently, as well as within a team. * Detail oriented and ability to follow tasks through to completion. * demonstrated ability to multi-task * Ability to

perform under pressure and meet deadlines.

SEND RESUME AND REFERENCES TO: Email: info@sophe.org; By mail to: SOPHE Human Resources, 10 G St, NE, #605, Washington, DC 20002; NO PHONE CALLS PLEASE. About SOPHE: SOPHE is a non-profit professional organization founded in 1950 to promote the health of all people by: stimulating research on the theory and practice of health education; supporting high quality performance standards for the practice of health education and health promotion; advocating for policy and legislation affecting health education and health promotion; and developing and promoting standards for professional preparation of health education professionals. See www.sophe.org.

University of Texas Medical Branch, Center to Eliminate Health Disparities, Galveston, TX

Program Manager

The Center to Eliminate Health Disparities at the University of Texas Medical Branch in Galveston currently has a job opening for a Program Manager, working on issues of health disparities and social determinants of health in research and interventions. The job is now posted on the UTMB website (www.utmb.edu) job # 18031, and people should apply on that website. They can see our Center's activities and programs of work at www.utmb.edu/cehd. We plan to begin interviews as soon as possible and hire when we have identified an appropriate candidate. Job Description:: To provide expertise in the planning, implementation and evaluation of health disparities programs in the Center to Eliminate Health Disparities under the direction of the Acting Director of the Center. Specific Job Related Duties: Directs program development and evaluation processes. Collaborates with other departments, organizations and agencies in developing programs addressing health disparities. Seeks grant opportunities and prepares grants to help further activities related to health disparities and social determinants of health at UTMB.

Salary Range: From \$49,434.00 To \$81,566.00 Annually, depending on qualifications.

Preferred Work Experience: Three years of related experience. Background in both health disparities and social determinants of health. Experience in seeking grant opportunities and preparing grants. Preferred Skill/Competency: An understanding of the role of social justice and community engagement in addressing health disparities. Excellent written and verbal communication skills. Facility with basic Microsoft Office products Desktop research skills and ability to synthesize information quickly. The ability to work effectively in a team setting Attention to detail and flexibility in task management.

Education: Minimum Master's Degree in Public Health, Healthcare Administration, Social Work or related field or equivalent.

[back to top](#)

Conferences and Events

American Cancer Society, 2009 Disparities Conference

HEALTH EQUITY: Through The Cancer Lens

Mandalay Bay Hotel

Las Vegas, Nevada

July 28-29

Join us for the Office of Health Disparities of the American Cancer Society's third conference on health disparities, Health Equity: Through the Cancer Lens. This year we move beyond description to action. Our conference begins with a combined general plenary session, in which we will present consensus recommendations on cancer disparities in underserved populations as part of our collaboration with the National Medical Association (NMA). From there, we will combine research, practice, academia, and community efforts to focus on best practices from an advocacy, community intervention, and communication perspective. We will answer key questions, including:

What strategies are successful in increasing prevention and/or early detection of breast, cervical, and colorectal cancer?

What strategies are successful in improving the availability of quality treatment, prolonging survivorship, and enhancing quality of life?

What initiatives have been successful in reducing obesity and smoking rates?

What policies have been most effective at promoting health equity and how can they be implemented at the local, state, and federal level?

How do we address the social determinants of health to improve cancer outcomes?

What health messages and communications delivery mechanisms have been effective in raising cancer awareness and changing individual behavior?

Register online at www.TheCancerLens.org.

**American Public Health Association, 137th Annual Meeting & Exposition
Water and Public Health: The 21st Century Challenge
Philadelphia, PA**

November 7-11, 2009

Join the American Public Health Association in Philadelphia, Pennsylvania for the 137th Annual Meeting & Exposition. From November 7-11, 2009 attend the most important public health event of the year. Now, more than ever, is the time for the public health community to come together and embrace the opportunities and potential for change facing our nation. This year's theme, Water and Public Health: the 21st Century Challenge, reminds us that water is a limited resource, the demands for which are fast increasing. In the US, utility workers, scientists, sanitarians, engineers, government officials and many others work around the clock to provide safe and clean drinking water to homes and businesses and are struggling to keep up with demand without compromising water supplies for future generations. Their efforts impact numerous aspects of society including the health of individuals, ecosystems, and the nation's economy. Housing and Registration - Open June 1, 2009. Why attend this year's meeting?

Network - 12,000 public health colleagues

Benefit - Dynamic Opening and Closing General Sessions

Discover - 700 exhibit booths with the latest products and services

Engage - 1,000 cutting edge scientific sessions

Achieve - Continuing Education Credits

Celebrate - Public Health Awards Reception & Ceremony

Learn - Daily Poster Sessions

Advance - Job Opportunities at the Public Health CareerMart

Enjoy - Musical extravaganza with the "Sounds of Philadelphia"

Opening General Session: On Sunday, November 8 join us for an inspiring Opening General session, keynoted by Celine Cousteau, granddaughter of the legendary Jacques Cousteau, exploring some of the many challenges we face in protecting, conserving and managing our oceans and fresh water supplies. For more information visit www.apha.org/meetings.

Virginia Health Equity

"Advancing Health Equity: From Theory to Practice"

Richmond, VA

September 10-11, 2009

Social determinants of health-- the social, economic, and environmental characteristics of where we live-- can significantly impact the health of a community. Michael Royster, MD, MPH (CHSP 2002 at UNC School of Public Health) is director of the Office of Minority Health and Public Health Policy in the Virginia Department of Health and is co-chairing a statewide conference to examine how these issues affect health equity. The aim of the Virginia Health Equity conference, "Advancing Health Equity: From Theory to Practice," is to increase participants' knowledge and ability to advance health equity through healthy community design. The need for such a collaborative effort is compelling: women of childbearing age living in low-income communities in Virginia have two to five times higher rates of preterm births and infant mortality than do women living in more advantaged communities; children living in substandard and low quality housing suffer higher rates of asthma; and inequities in obesity rates are strongly related to the increased likelihood that socially disadvantaged populations live in unsafe neighborhoods and have decreased opportunities for health. Please join us on September 10-11, 2009 in Richmond, Virginia as nationally recognized speakers increase awareness of health equity and how the built environment/community design and other social and economic factors affect it and highlight promising strategies to promote equitable health outcomes.

Resources

Publications

E-Health Technology for Detecting and Managing Chronic Disease in Handbook of Research on Information Technology Management and Clinical Data Administration in Healthcare

Lehmann, C; Benz Scott, L; Giacini, J. (2009). IGI Global Publishing
Handbook of Research on Information Technology Management and Clinical Data
Administration in Healthcare

ISBN: 978-1-60566-356-2; 1,142 pp; May 2009

Published under Medical Information Science Reference an imprint of IGI Global,
<http://www.igi-global.com/reference/details.asp?id=33422>

DESCRIPTION: Advances in information technology have brought about a revolution in healthcare, enabling medical personnel to have round-the-clock access to clinical data regardless of geographic location. The Handbook of Research on Information Technology Management and Clinical Data Administration in Healthcare provides researchers, educators, students, and industry practitioners with new research, practical experiences, challenges, and opportunities within healthcare data management. A comprehensive reference source within the medical technology field, this Handbook of Research presents tools and techniques in all aspects of IT management and clinical data administration in healthcare.

Epi + demos + cracy: Linking Political Systems and Priorities to the Magnitude of Health Inequities--Evidence, Gaps, and a Research Agenda

Epidemiologic Reviews 2009; doi: 10.1093/epirev/mxp002 (accepted for publication April 8, 2009; published on line May 27, 2009)

Jason Beckfield; Nancy Krieger

A new focus within both social epidemiology and political sociology investigates how political systems and priorities shape health inequities. To advance-and better integrate-research on political determinants of health inequities, the authors conducted a systematic search of the ISI Web of Knowledge and PubMed databases and identified 45 studies, commencing in 1992, that explicitly and empirically tested, in relation to an a priori political hypothesis, for either 1) changes in the magnitude of health inequities or 2) significant cross-national differences in the magnitude of health inequities. Overall, 84% of the studies focused on the global North, and all clustered around 4 political factors: 1) the transition to a capitalist economy; 2) neoliberal restructuring; 3) welfare states; and 4) political incorporation of subordinated racial/ethnic, indigenous, and gender groups. The evidence suggested that the first 2 factors probably increase health inequities, the third is inconsistently related, and the fourth helps reduce them. In this review, the authors critically summarize these studies' findings, consider methodological limitations, and propose a research agenda-with careful attention to spatiotemporal scale, level, time frame (e.g., life course, historical generation), choice of health outcomes, inclusion of politics, and specification of political mechanisms-to address the enormous gaps in knowledge that were identified.

democracy · epidemiology · health status · health status disparities · politics · public health · social class · socioeconomic factors

free-access links to the online article:

Abstract::

<http://epirev.oxfordjournals.org/cgi/content/abstract/mxp002?ijkey=xaXqimZNzdGpbSc&keytype=e=ref>

Full Text:

<http://epirev.oxfordjournals.org/cgi/content/full/mxp002?ijkey=xaXqimZNzdGpbSc&keytype=ref>

PDF:
<http://epirev.oxfordjournals.org/cgi/reprint/mxp002?ijkey=xaXqimZNzdGpbSc&keytype=ref>

Two Publications:

Trends in Child Health 1997-2006: Assessing Racial/Ethnic Disparities in Low Birthweight

http://www.jointcenter.org/publications_recent_publications/health/trends_in_child_health_1997_2006_assessing_racial_ethnic_disparities_in_low_birthweight

Trends in Child Health 1997-2006: Assessing Racial/Ethnic Disparities in Asthma
http://www.jointcenter.org/publications_recent_publications/health/trends_in_child_health_1997_2006_assessing_racial_ethnic_disparities_in_asthma

The Joint Center for Political and Economic Studies recently published its second series of disparities reports. The first, Trends in Child Health 1997-2006: Assessing Racial/Ethnic Disparities in Low Birthweight looks at the prevalence of low birthweight among Hispanic, African American, and white children under age 18. The second, Trends in Child Health 1997-2006: Assessing Racial/Ethnic Disparities in Asthma, examines disparities in the rates of asthma between African American, Hispanic, and white children under age 18.

Networking in Public Health: Exploring the value of networks to the National Collaborating Centres for Public Health

Paula Robeson RN, MScN

National Collaborating Centre for Methods and Tools

Funded by the Public Health Agency of Canada Affiliated with McMaster University - April, 2009

Available online as PDF file [83p.] at:

http://www.nccmt.ca/pubs/NetworkingPaperApr09EN_WEB.pdf

This paper explores the potential of networks to further the goals of the national program, in particular, the promotion of evidence-informed decision making (EIDM) and knowledge management (including sharing and co-creation) in public health. While the NCCPH has a primary interest in strengthening public health in Canada, the background information and practical tools presented in this paper will also interest other sectors with the potential to impact population health (e.g. education, justice, urban planning and transportation). The development of this paper was informed by a review of relevant literature and the valuable contribution of key informants and peer reviewers. (A more detailed description of the methodology can be found in Appendix A.) Although multiple frameworks have been identified (including network lifecycles, levels and characteristics; networks as complex adaptive systems; and communities of practice), the following factors are consistently recognized as critical to network success:

- Establish clear purpose and goals.
- Address the "hierarchy of needs."
- Include a culture of trust in stated core values.
- Fulfill specific role functions such as effective leadership, a core group, skilled facilitation, sponsorship, knowledge brokerage and community membership.
- Maintain a flexible infrastructure.
- Establish supportive processes.
- Balance homogeneity and heterogeneity.
- Secure adequate resources.
- Demonstrate value

Contents

Executive Summary

Introduction .

Background .

Definition . .

Network types

Understanding structure

Network models

Value of Networks

Knowledge management, translation and exchange, and the diffusion of innovations

Multi-level value

Keys to Success

Evaluating Networks

Methods and Tools for Networking

Existing Networks of Interest to the NCCPH

Conclusion .

Reference List .

Annendix A· Methodology

Appendix B: Glossary of Terms
Appendix C: Networking Methods and Tools
Technological tools
Appendix D: Existing Networks for Potential Linkage With NCCPH
Canadian Networks and Organizations - Health-related .
Other Canadian Networks and Organizations - Knowledge Transfer-related
International Networks
Appendix E: Limitations

Pathways, Spring 2009

The spring issue of Pathways asks what we can learn about fighting poverty and inequality from initiatives around the world. It also includes articles on gender inequality in the workplace, a look at the urban farming movement, and other cutting-edge research!

Click here to access the full Winter 2009 issue, or go to:

http://www.stanford.edu/group/scspi/media_magazines.html

Or access the articles individually:

Editors' Note by David Grusky and Christopher Wimer

TRENDS

Getting to Equal: Progress, Pitfalls, and Policy Solutions on the Road to Gender Parity in the Workplace

Have we "stalled out" in the historic march toward gender equality in the workplace? Pamela Stone weighs the evidence and makes the case for a new way forward.

RESEARCH IN BRIEF

New research developments

A surprising trend in wealth inequality, the biological determinants of poor children's academic performance, the long-term effects of job displacement, and other cutting-edge research.

GOING GLOBAL: ANTIPOVERTY LESSONS FROM AROUND THE WORLD

Flexicurity

Joshua Cohen and Charles Sabel argue that the time has come to build a 21st century labor market modeled on key principles of Denmark's "flexicurity" system.

Pro-Poor Stimulus: Lessons from the Developing World

Martin Ravallion looks to antipoverty programs in developing countries to understand how developed nations like the United States can provide stimulus while reducing long-term poverty.

Combating Poverty by Building Assets: Lessons from Around the World

Ray Boshara describes the key features of asset-building programs throughout the world and examines how the United States can apply them to achieve economic security for the poor.

Northern Exposure: Learning from Canada's Response to Winner-Take-All Inequality

Jacob S. Hacker describes how the United States and Canada have taken two different roads and why the Canadian road provides lessons that the United States might take to heart.

INTERVENTIONS

Spotlight On...Growing Power and the Urban Farming Movement

In our new "Spotlight On" feature, we talk with Growing Power's Will and Erika Allen about the potential and future of urban agriculture in combating poverty.

Sign up here for hard copy delivery or PDF notification for future Pathways issues.

Patriarchy, masculinities and healthinequalities

Alex Scott-Samuel

Gaceta Sanitaria.2009;23(2):159-160

<http://pcwww.liv.ac.uk/~alexss/patriarchy.pdf>

Racial/Ethnic Integration and Child Health Disparities

Edited by Chester Hartman and Gregory D. Squires

Racial integration, and policies intended to achieve greater integration, continue to generate controversy in the United States, with some of the most heated debates taking place among long-standing advocates of racial equality. Today, many nonwhites express what has been referred to as "integration exhaustion" as they question the value of integration in today's world. And many whites exhibit what has been labeled "race fatigue," arguing that we have done enough to reconcile the races. Many policies have been implemented in efforts to open up traditionally restricted neighborhoods, while others have been designed to diversify traditionally poor, often nonwhite, neighborhoods. Still, racial segregation persists, along with

the many social costs of such patterns of uneven development. This book explores both long-standing and emerging controversies over the nation's ongoing struggles with discrimination and segregation. More urgently, it offers guidance on how these barriers can be overcome to achieve truly balanced and integrated living patterns.

**Reducing health inequities through action on the social determinants of health
SIXTY-SECOND WORLD HEALTH ASSEMBLY - WHA62.14 - Agenda item 12.5
22 May 2009**

Available online as PDF file at: http://apps.who.int/gb/ebwha/pdf_files/A62/A62_R14-en.pdf
"....Confirming the importance of addressing the wider determinants of health and considering the actions and recommendations set out in the series of international health promotion conferences, from the Ottawa Charter on Health Promotion to the Bangkok Charter for Health Promotion in a Globalized World, making the promotion of health central to the global development agenda as a core responsibility of all governments,...." CALLS UPON the international community, including United Nations agencies, intergovernmental bodies, civil society and the private sector:

- (1) to take note of the final report of the Commission on Social Determinants of Health and its recommendations;
- (2) to take action in collaboration with WHO's Member States and the WHO Secretariat on assessing the impacts of policies and programmes on health inequities and on addressing the social determinants of health;
- (3) to work closely with WHO's Member States and the WHO Secretariat on measures to enhance health equity in all policies in order to improve health for the entire population and reduce inequities;
- (4) to consider health equity in working towards achievement of the core global development goals and to develop indicators to monitor progress, and to consider strengthening international collaboration in addressing the social determinants of health and in reducing health inequities;

URGES Member States:

- (1) to tackle the health inequities within and across countries through political commitment on the main principles of "closing the gap in a generation" as a national concern, as is appropriate, and to coordinate and manage intersectoral action for health in order to mainstream health equity in all policies, where appropriate, by using health and health equity impact assessment tools;
- (2) to develop and implement goals and strategies to improve public health with a focus on health inequities;
- (3) to take into account health equity in all national policies that address social determinants of health, and to consider developing and strengthening universal comprehensive social protection policies, including health promotion, disease prevention and health care, and promoting availability of and access to goods and services essential to health and well-being;
- (4) to ensure dialogue and cooperation among relevant sectors with the aim of integrating a consideration of health into relevant public policies and enhancing intersectoral action;
- (5) to increase awareness among public and private health providers on how to take account of social determinants when delivering care to their patients;
- (6) to contribute to the improvement of the daily living conditions contributing to health and social well-being across the lifespan by involving all relevant partners, including civil society and the private sector;
- (7) to contribute to the empowerment of individuals and groups, especially those who are marginalized, and take steps to improve the societal conditions that affect their health;
- (8) to generate new, or make use of existing, methods and evidence, tailored to national contexts in order to address the social determinants and social gradients of health and health inequities;
- (9) to develop, make use of, and if necessary, improve health information systems and research capacity in order to monitor and measure the health of national populations, with disaggregated data such as age, gender, ethnicity, race, caste, occupation, education, income and employment where national law and context permits so that health inequities can be detected and the impact of policies on health equity measured....."

The New Yorker, Annals of Medicine

The Cost Conundrum: What a Texas town could teach us about health care

Atul Gawande

http://www.newyorker.com/reporting/2009/06/01/090601fa_fact_gawande

**The Robert Wood Johnson Foundation Commission to Build a Healthier America
Race and Socioeconomic Factors Affect Opportunities for Better Health**

[http://www.commissiononhealth.org/PDF/506edea1-f160-4728-9539-aba2357047e3/Issue%20](http://www.commissiononhealth.org/PDF/506edea1-f160-4728-9539-aba2357047e3/Issue%20Brief205%20April%2009%20-%20Race%20and%20Socioeconomic%20Factors.pdf)

Brief205%20April%2009%20-%20Race%20and%20Socioeconomic%20Factors.pdf The Robert Wood Johnson Foundation's Commission to Build a Healthier America has released its latest issue brief, Race and Socioeconomic Factors Affect Opportunities for Better Health. The brief examines how both race and modifiable social factors such as education, income, and the condition of the neighborhoods where people live, play a role in health care disparities.

Women's Health Research Network

New Primer on Community Based Research "Our Common Ground: Cultivating Women's Health Through Community Based Research"

The Women's Health Research Network is excited to announce the launch of a new primer on Community Based Research (CBR)! Entitled Our Common Ground: Cultivating Women's Health Through Community Based Research, this wonderful resource is a research guide rooted in the experiences and practices of community researchers, designed to give readers a solid understanding of the CBR process and how it can be applied to enhance research on all levels. To download this new resource, visit <http://www.whrn.ca/our-common-ground.php>.

Web site

Annie E. Casey Foundation

Kids Count

<http://datacenter.kidscount.org/>

The Annie E. Casey Foundation recently updated its online database, Kids Count, which contains state-, city-, and now community-level data for more than 100 measures of child well-being. This database can generate custom reports for specific geographic areas and compare them based on a particular topic (for example, poverty, education, and health/health insurance). According to new data in the database, more than half of children living in Los Angeles, San Francisco, New York City, and Dallas live with at least one foreign-born parent; and many of these children lack health insurance. To view and use this database, click <http://datacenter.kidscount.org/>.

Community Guide - Redesigned Website

www.thecommunityguide.org

We are delighted to announce that, after a short time of testing the new look and functionality, the redesigned Community Guide website officially launched today! The address is the same, www.thecommunityguide.org; but those who visit will find a new look, improved navigation and additional content. After much hard work, we have achieved a much greater measure of success in providing user-friendly access to Task Force recommendations and findings.

Kellogg Fellows Leadership Alliance, Inc. (KFLA)

KFLA Courageous Leadership Blog

www.kfla.org/blog

KFLA is proud to announce the launch of our new blog site: Courageous Leadership Blog: Celebrating courageous leadership by encouraging the leaders of today and inspiring the leaders of tomorrow.

You'll want to be sure to bookmark this site, www.kfla.org/blog, and check in frequently as it will feature posts from your peer Kellogg Fellows and Advisors concerning the meaning of courage, leadership and the synthesis of the two.

As the blog is intended to be a conversational forum, please feel free to take an active participatory role. You are invited to read each post, comment on them, and even write your own if you are so inspired. Invite other leaders in your circle to participate in this powerful discussion board. All are encouraged to join in this opportunity.

Supercourse

www.bihalex.org/supercourse

The Supercourse is a collection of over 36,000 lectures, by over 58,000 faculty from some 175 countries. These lectures cover various aspects of global health, including some on history of medicine and public health. This is a totally free resource for all interested parties. It is indexed by topic and presenter. The URL for this resource is: www.bibalex.org/supercourse. They are still accepting power point lectures as this Supercourse continues to grow.

Others

Research University Civic Engagement Network (TRUCEN) Toolkit on Engaged Scholarship

The Research University Civic Engagement Network (TRUCEN) has recently released an online toolkit on engaged scholarship comprised of an annotated bibliography of published articles, links to online resources, and a set of original essays. <http://tiny.cc/Tn1gG>. A number of community-engaged scholarship (CES) resources from Community-Campus Partnerships for Health (CCPH) are highlighted, including:

*The Community-Engaged Scholarship (CES) Toolkit, designed to provide community-engaged health professional faculty with a set of tools to carefully plan and document their community-engaged scholarship and produce strong portfolios for promotion and tenure. <http://www.communityengagedscholarship.info>

*Portfolio excerpts from community-engaged faculty members who have been promoted and/or tenured. <http://depts.washington.edu/ccph/toolkit-portexamples.html>

*The CES review, promotion and tenure (RPT) package that includes 8 characteristics of quality CES, a sample dossier for presenting CES work to RPT committees, and a group exercise simulating an RPT committee process that can be used as an educational tool with RPT committees. http://depts.washington.edu/ccph/pdf_files/CES_RPT_Package.pdf

*The Building Capacity for Community Engagement: Institutional Self-Assessment that is designed to assess the capacity of a given higher educational institution (or unit therein) for community engagement and CES, and to identify opportunities for action. http://depts.washington.edu/ccph/pdf_files/self-assessment-copyright.pdf

*Faculty for the Engaged Campus, a national initiative of CCPH in partnership with the University of Minnesota and the University of North Carolina at Chapel Hill aims to strengthen community-engaged career paths in the academy, supported by a grant from the Fund for the Improvement of Postsecondary Education (FIPSE) in the US Department of Education. <http://depts.washington.edu/ccph/faculty-engaged.html>

One of the original essays, "Practical tools for overcoming the challenges of advancing your career as an engaged scholar" is authored by Cathy Jordan, Co-Director of Faculty for the Engaged Campus. <http://tiny.cc/HXIDr>.

[back to top](#)