



Kellogg Health Scholars

Connecting Academe, Community, and Policy

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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 connected as possible! Please send any changes to mbjones@cfah.org or healthscholars@cfah.org.

KConnection

October 2009

SOUNDING BOARD

Congratulations Kellogg Scholars and Fellows

Dr. Roberta Downing, Community Health Scholars Program alumna, recently accepted a job on the legislative team at the Center on Budget and Policy Priorities.

Dr. Betty Izumi, Kellogg Health Scholar, announces that she has accepted a tenure-track faculty position (Assistant Professor) at Portland State University in the School of Community Health, which will start March 2010. Dr. Izumi also has published a paper: **Izumi, BT., Wright, DW, Hamm, MW. (2009) Farm to school programs: exploring the role of regionally-based food distributors in alternative agrifood networks.** Agriculture and Human Values. Published online 26 July 2009. Available on SpringerLink, <http://www.springerlink.com/openurl.asp?genre=article&id=doi:10.1007/s10460-009-9221-x>

Dr. Lovell Jones, Kellogg Health Scholars Program University of Texas M.D. Anderson Cancer Center training site director, was interviewed last month on a local community program called "Crossroads." The show focused on health reform and health disparities and was presented in two segments. The first is on health reform and the second segment is a combination of both health reform and health disparities. Segment One:

<http://abclocal.go.com/ktrk/video?id=7041339>. Segment Two:
<http://abclocal.go.com/ktrk/video?id=7041342>

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ANNOUNCEMENTS

The Kellogg Health Scholars Program is now accepting applications for its 2010-2012 cohort!

Application deadline is December 2, 2009 (5:00 p.m. Eastern). ONLY online applications are accepted. Go to www.kellogghealthscholars.org for more information and to access the online application. Please pass this information along to interested, eligible individuals!

There are several KHSP activities at the American Public Health Association Annual Meeting, November 7 to 11, 2009, in Philadelphia, Pennsylvania.

- **KHSP/CHSP Reunion Breakfast:** You are invited to attend this event on Monday morning, November 9th, at 6:30a in the Philadelphia Marriott. Great time to catch-up and eat Kellogg cornflakes! To reply (yes or no), click here:<http://www.doodle.com/fct4crsafv4zbt7e>.
- **Scholars and Alums at the KHSP Booth:** Please sign up today to help staff the KHSP booth (#1617) in the Exhibit Hall. Click here<http://www.doodle.com/icph6ykefh9q63teto> to select a time slot-only one person per time slot to avoid congestion in the booth.
- **Kellogg Health Scholars and alums** will be presenting on Tuesday, November 10th, at 4:30 pm, during Session #4354.0 The Scholarship of CBPR: W.K. Kellogg Health Scholars(<http://apha.confex.com/apha/137am/webprogram/Session25582.html>) sponsored by the Community-Based Public Health (CBPH) Caucus. A 2009 Session Planner co-chair for the CRPH Caucus was Kellogg scholar-alum Dr. Shevon Harvey. For

more information about the Caucus, visit their website at <http://www.cbphcaucus.org>.

KHSP Healthy People 2020 Working Group has established an email listserv address: KHSP-HP2020wg@umich.edu. This working group is a subgroup of the larger SDOH (Social Determinants of Health) interest group that met together at the KHSP meeting this past June in Washington, DC. The working group is focused on developing recommendations re: integrating SDOH more effectively into the overall structure of the final plan for Healthy People 2020, which will be released near the end of 2010. If you are interested in joining the group, please contact Dr. Shawn Kimmel, Kellogg Health Scholars Program alumnus. Dr. Kimmel's email address and phone number are skimmel@umich.edu and 313-537-4830.

Save the Date! The 2010 Kellogg Health Scholars Program Annual Meeting will be held **June 9 through June 11, 2010** in Washington, DC. Details to follow.

Mark Your Calendars! 8th Disparities in Health in America Workshop scheduled for **June 21 through June 26, 2010** at the University of Texas M. D. Anderson Cancer Center in Houston, Texas. Details to follow.

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SPOTLIGHT ON KELLOGG SCHOLARS NETWORK

Meet Kellogg Health Scholars Program alumna, **D. Phuong (Phoenix) Do, Ph.D...**

Dr. Phoenix Do recently accepted a position as Assistant Professor in the Department of Health Services Policy and Management at the University of South Carolina's Arnold School of Public Health. A Health Disparities Scholar with the National Center on Minority Health and Health Disparities (NCMHD), Dr. Do received her B.S. in Civil Engineering from the University of California at Los Angeles (UCLA) and her M.Phil. and Ph.D. in Policy Analysis from The RAND Graduate School.

Broadly speaking, her research interests include the social determinants of health, racial health disparities, neighborhood context, quantitative methodologies, and their intersections. Her current projects include re-examining the concept and meaning of race in the context of interpreting the race coefficient in racial health disparities studies, investigating the extent to which metropolitan-level racial segregation and neighborhood poverty interact to impact health and racial health disparities between blacks and whites, and accounting for the dynamics of income and neighborhood context across the life-course in their relationship to health outcomes. She is particularly interested in causal modeling and using a multi-level, life-course approach to help account for the persistent black/white health gap. Dr. Do was recently awarded an NIH R21 grant, "Marginal Structural Modeling: Towards Recovering Causal Estimates of Neighborhood Poverty on Health and Mortality", which takes a life-course approach to recovering the effects of neighborhood poverty in the presence of time-varying factors (e.g., income, employment status) that are simultaneously mediators and confounders.

As a postdoctoral health disparities research scholar in the KHSP Multidisciplinary Track at the University of Michigan Institute for Social Research (2006-2008), Dr. Do worked with Ana Diez-Roux and George Kaplan on studies that examined the link between neighborhood stressors and cortisol profiles, and the influences of psychosocial factors on early markers of endothelia dysfunction, respectively.

Dr. Do credits her experience in the KHSP for helping her develop her skills and knowledge as a health disparities researcher. She writes, "The Kellogg Program gave me the incredible opportunity to collaborate with and learn from some of the leading researchers examining the social determinants of health and health disparities and the impact of the social and physical environments on health. However, the program did not only offer valuable research experience; it also gave me the opportunity to become engaged and participate in the policy process in Washington, DC. Kellogg was instrumental in helping make the connection between rigorous research and policy formation aimed at reducing health disparities."

She adds, "Aside from the remarkable research and policy experience offered during the postdoctoral program, one of the most unique and strongest aspects of KHSP is the continued support it offers to each one of us after we complete the program. It is a tremendous advantage to be part of such a talented and cross-disciplinary group that is so generous in sharing expertise, helping make connections, and supporting our research and career efforts."

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Archived KHSP E-Workshops

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

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

To listen to the archived presentations and download materials, visit the Archived Workshops page in the members-only section of the KHSP website at <http://www.kellogghealthscholars.org/members/login.cfm>. For login and passcode information, please contact Brandon Moore at bmoore@cfah.org or call (202) 387-2829.

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FUNDING

California Breast Cancer Research Program (CBCRP)

Translational Research

LOIs deadline: October 21, 2009

CBCRP is committed to supporting research on a critical path for practical application, with the greatest potential for major impact in the areas of (1) prevention, detection, diagnosis, or treatment of breast cancer; (2) improved quality of life for survivors, and/or reduction in the community and social burden caused by the disease in California; or (3) advances in medical practices, health systems changes, health policies, or environmental modifications. [Background information](#) on our Translational Research Awards.

Review the [Call for Applications](#). Review the [application materials](#).

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CALL FOR SUBMISSIONS

Call for Papers - *Community Development: Journal of the Community Development Society* Special Issue on Community Development Approaches to Improving Public Health

Deadline: October 31, 2009

A special issue of *Community Development: Journal of the Community Development Society* is being organized to highlight papers that describe, analyze, and interpret innovative community development strategies to create healthier environments and improve public health. Across America, it has become clear that ill-considered land use, economic development and redevelopment planning decisions are having an adverse effect on public health. Land use planning, economic development and redevelopment have long operated in isolation from public health, and as a result, we allowed have places to be built where the following conditions are common:

- Communities built exclusively for auto-based transportation where walking and cycling to school, to work, or for pleasure is difficult and often dangerous;
- sprawling low density places, where mixed use is discouraged and grocery stores and jobs are far from residential areas;
- Places in which parks and playgrounds are rare and often non-existent;
- Schools and houses that are built near major sources of pollution;

- School yards and indoor recreational facilities which stay locked and unavailable for community use on evening and weekends.
- Such unhealthy environments have contributed to the dramatic increase in chronic diseases as obesity, diabetes and asthma. In low income neighborhoods, where these environmental problems are more pronounced, residents live markedly shorter and unhealthier lives than those in well to do neighborhoods.
- In face of this reality, the disconnected fields of public health, city planning and economic development and redevelopment are beginning to work together more effectively to build healthier environments. Local governments, private developers, and community groups are creating new policies, programs, and developments that improve community health outcomes--by ensuring that farmers' markets and neighborhood grocery stores are supported, for instance, or by promoting sidewalks, parks and other environmental components that encourage physical activity. Getting these public agencies and private entities to re-imagine their missions and to work together, and to do so effectively, to build healthier and more sustainable places, is a task that requires a great deal of tenacity, creativity, and effort. It also takes continual learning and tactical innovation. This special issue of ... will examine the efforts of these community development approaches to building healthier environments. We invite the submission of papers that examine innovative techniques and approaches used by local governments, community advocates, and the private sector to improve food access, promote mixed use development, increase physical activity opportunities, and ameliorate air quality. Persons interested in contributing a paper to this issue should send a 250 word abstract to Robert Ogilvie, via e-mail: rogilvie@phlpnet.org indicating the specific topic, methodology or approach, and relevance for the Community Development Approaches to Improving Public Health issue to the Guest Editor by October 31, 2009. Publication of this issue is planned for 2010

Call for Abstracts -- Alliances for Global Health Education: Learning from South-South Collaboration, Learning from South-South Collaboration

1st Latin American and Caribbean Conference on Global Health

Hosted at: Instituto Nacional de Salud Pública (INSP)

Cuernavaca, Mexico - April 9 - 11, 2010

Deadline: November 1, 2009, 11:59 pm Eastern Time

Website: <http://globalhealthedu.org/events/alliances/Pages/default.aspx>

The program analyzes the differences between South/South collaborations and traditional North/South alliances, examines successes and obstacles to effective functioning of these partnerships and culls lessons that can be learned and adopted by the North.

Awards: Recognition for Global Health Activities & Scholarships Awarded for Leadership and Excellence

<http://globalhealthedu.org/EVENTS/ALLIANCES/Pages/Awards.aspx>

Call for abstracts: <http://globalhealthedu.org/events/alliances/Pages/CallForAbstracts.aspx>

Keynote Speaker: Paulo Buss, Oswaldo Cruz Foundation (Fiocruz)

Dr. Paulo Buss is President of the Oswaldo Cruz Foundation, Brazil's national institute of health which provides community services throughout Brazil and postgraduate medical training in public health.

Plenary Panels:

- Interdisciplinary Approaches to Global Health Education:
Beyond the traditional medical model
- Lessons Learned from A(H1N1) Virus
- Role of Institutional Alliances in Advancing Global Health Education
- Ethics and Equity Issues of Collaborations for Global Health
- Social Determinants of Health
- Global Health Diplomacy

Invited Speakers Include: Marco Akerman, Pan American Health Organization; Jack Bryant, World Health Organization; Pierre Buekens, Tulane University; Paulo Buss, Oswaldo Cruz Foundation; Julio Frenk, Harvard University; Mauricio Hernandez, Mexico Ministry of Health; King Holmes, University of Washington; Ilona Kickbusch, Graduation Inst. of Intl Dev. Studies, Geneva; Pablo Kuri, Mexico Secretariat of Health; Laura Magaña, Instituto de Salud; Tom Novotny, San Diego State University; Walter Patrick, South Asian Partners for Global Health; Mirta Roses, Pan American Health Organization; Jeanette Vega, Undersecretary of Public Health, Chile.

Contact: Global Health INSP Cuernavaca, Morelos MEXICO, Tel . (52-777) 329 3000 Ext. 5205 y 5206 Fax: (777) 311 1156 saludglobal@insp.mx

**Call for Proposals -- National Institutes of Health, 3rd Annual Conference
Science of Dissemination and Implementation: Methods and Measurement
Hyatt Regency Bethesda
One Bethesda Metro Center 7400 Wisconsin Avenue
Bethesda, MD
March 15-16, 2010**

Deadline: November 6, 2009 (5:00 p.m. Pacific)

There is no fee to register for this conference. Please note: this year's conference will NOT be available for viewing online. There is a recognized need to close the gap between research evidence and clinical and public health practice, but how is this best accomplished? although emerging as a field of research in health and medicine, dissemination and implementation science is as yet underdeveloped. A forum is needed to facilitate growth in the science of dissemination and implementation. Researchers and evaluators who are interested in identifying opportunities and obstacles for dissemination and implementation research/evaluation are encouraged to attend this meeting. The goal is to engage in dialogue, exchange ideas, explore contemporary topics and challenge one another to identify and test research designs, methods and measurement that will advance dissemination and implementation science. To meet the goal of this year's conference-to stimulate conversation among researchers and experts in the field-the conference will again include Think Tanks in addition to traditional Plenary Sessions, Concurrent Oral Presentation Sessions and Poster Sessions. Sessions will be structured to encourage interaction and networking between participants. Applicants are encouraged to submit abstracts for oral presentations/panels, posters, and think tanks (which applicants will lead). Descriptions of each type of session, and instructions for Abstract submission, are described in the [Call for Proposals tab](#). Proposal Submission Deadline: **5 PM Pacific Time on November 6, 2009**. Conference Registration Deadline: **Midnight Pacific Time February 12, 2010**. For details, visit <http://conferences.thehillgroup.com/obssr/DI2010/about.html>.

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CAREER DEVELOPMENT

**American University, Washington, DC
Department Chair, Professor of Sociology
Applications review begin: October 10, 2009**

The Department of Sociology at American University, college of Arts and Sciences, invites applications for a Professor or Associate Professor of Sociology and Chair of the Department to begin the fall semester 2010. Duties of the position include chairing the Department of Sociology and teaching two courses, one of them at the graduate level in the applicant's area of specialization. The area of specialization sought is the sociology of health and illness with an emphasis on risk. The individual must have a national reputation based on funded research and publication in the area of specialization. The successful applicant will be expected to lead the Department in the development of the health specialization in terms of research, curriculum, and future faculty recruitment. In addition to an MA degree program and a Graduate Certificate in Social Research, the Department has established a new Graduate Certificate in Public Sociology and would welcome a specialization in public/applied sociology or social policy related to the sociology of health. Qualifications for the position include: PhD, evidence of excellent teaching, and a strong record of externally funded research and publication in the areas of specialization. Administrative experience and demonstrated leadership skill at the departmental or research unit level are also expected. American University seeks highly dedicated teachers and scholars who are deeply committed to interdisciplinary learning, the application of new technologies in teaching and scholarship, and to the preparation of students for life in a diverse and rapidly changing global society. Send curriculum vitae, letter describing research and teaching experience, and three letters of reference to: Chair, Search Committee, Department of Sociology, American University, 4400 Massachusetts Avenue NW, Washington, DC 20016. Review of applications will begin October 10, 2009 and will continue until the position is filled. American University is an equal opportunity, affirmative action institution; minority and women candidates are strongly encouraged to apply.

Tenure-track Faculty Position

The Center for Reducing Health Disparities at Case Western Reserve University is seeking an MD or PhD to join a productive group of scholars committed to understanding and addressing health disparities. The Center recently received a \$6 million program project grant from the National Institutes of Health to study health disparities related to hypertension and kidney disease. The Center also leads the Community Engagement Core of Case Western's Clinical and Translational Science Award. Current areas of expertise include quality improvement, community-based participatory research, cancer prevention, linguistic barriers, organ donation, end of life care, and medical-legal interventions. More information is available at www.ReduceDisparity.org. The successful candidate will collaborate with other faculty, community organizations, and government agencies to develop and test interventions to reduce health disparities. MD's will also have a clinical appointment at the MetroHealth System Campus of Case Western Reserve University. Clinical departments that are especially strong at MetroHealth include internal medicine, pediatrics, emergency and trauma care, obstetrics, cancer, and physical medicine and rehabilitation. Both MD's and PhD's will have opportunities for teaching. Case Western Reserve University, ranked among the top 15 nationally in NIH funding, has renowned faculty in health services research, epidemiology, biostatistics, health economics, biomedical ethics, medical anthropology, and sociology. There is a growing awareness of the importance of addressing health disparities not only among Cleveland's health care providers but also among its political and business leaders. Cleveland has been rated as one of the most livable cities in the United States because of its world-class cultural institutions, ample recreational opportunities, and affordable housing. Recruited faculty will be expected to establish an externally funded research program. Excellent salary and start-up packages are available with academic rank commensurate with experience. Please send C.V., list of references, a recent paper, and description of research interests to Cydney Johnson, MPA, Coordinator, Center for Reducing Health Disparities, Case Western Reserve University, MetroHealth Medical Center, 2500 MetroHealth Drive, Cleveland, Ohio 44109; E mail cjohnson3@metrohealth.org.

echo, Ontario, Canada

Knowledge Translation Specialist, Policy and Research

Deadline: October 16, 2009

Make a difference in women's health in Ontario. We are an agency of the Ministry of Health and Long-Term Care with a mandate to promote health, wellbeing, and equity for women through sex/gender-specific information, approaches, research, education and awareness. At a critical time for our health care system, Echo will improve women's health and well-being by focusing on women's unique health needs and issues, developing and supporting innovative programs, educating health professionals, and motivating behaviour change through health information. As the provincial advisor on women's health to the Government of Ontario, we are working to ensure Ontario is at the forefront of improving women's health. [Knowledge Translation Specialist, Policy and Research](#): As a member of the Knowledge Translation team, you will help to build and deliver the strategies and plans to disseminate research and health information to women in Ontario. This includes providing expert advice in methodologies and tools in the field of knowledge mobilization, researching knowledge mobilization strategies, researching and advising on policy, liaising with agencies, researchers, and other partners, and supporting web-based activities to reach diverse audiences of women in the province. You will be part of the exciting process of developing and finalizing program plans, applying your expertise and abilities to shape policy and the application of research to the health needs of women in Ontario. You have 5 or more years' policy and research experience preferably in health care delivery, health research, or another easily transferable field, complemented by a Masters or PhD degree in a related field. Your well-honed research and writing skills enable you to clearly identify program goals, translate plans into deliverables, track progress, and manage issues. In addition to being able to manage multiple projects, you are versatile and flexible in your ability to both anticipate and modify your work plans to meet evolving priorities. Fully knowledgeable in computer applications, you are current with the most effective means of knowledge mobilization. Excellent oral and written communication in English is essential, and French language skills are a definite asset. We are building a diverse, highly energized, professional and committed team, and we offer attractive and competitive compensation. Interested and qualified candidates are invited to submit a resume and covering letter no later than **October 16th, 2009** to: echohr@iio.on.ca.

Policy Analyst

http://www.nashp.org/_catdisp_page.cfm?LID=126

Position Description: The National Academy for State Health Policy is seeking a policy analyst to join the Portland ME, or Washington, DC, offices. Applicants should possess substantive knowledge in one or more of the following areas: health information technology, health care delivery system improvement, and public sector health care policy issues. Applicants should demonstrate strong analytic, writing, and organizational skills. In addition, successful applicants will demonstrate the ability to work with state officials, other healthcare stakeholders and NASHP staff, to successfully provide technical assistance, complete policy analyses, plan web-based and in-person meetings, and carry out other program activities consistent with the mission of the organization. Work involves qualitative and quantitative policy research and analysis, as well as other activities necessary to successfully complete assigned projects. Some out of state travel may be required. *Specific responsibilities include:*

- Participate in the design, preparation, writing, editing, and publication of written materials, including briefs, reports, proposals, and special publications.
- Assist in developing and implementing technical assistance and policy support activities for state officials and program administrators such as state HIT coordinators, Medicaid directors, public health program directors, governors' health policy advisors.
- Assist in the design and conduct of studies and analyses including literature reviews and syntheses, financial analyses, analysis of state programs, surveys, key informant interviews, case studies, and focus groups.
- *Plan meeting agendas ranging from small conference calls and advisory group meetings, to small invitational in-person meetings, to web-casts or symposia with a large audience.
- Provide staff support to NASHP steering committees and participate in NASHP staff teams to plan and implement NASHP's annual conference, including responsibility for planning workshop content and securing speakers.
- Stay abreast of relevant literature, national policy, and state activity relevant to project work, taking the initiative to both identify emerging trends in policy and practice and leaders and innovators in state government.
- Attend relevant meetings and conferences.
- Actively participate in efforts to improve individual and team quality of performance. Participate in staff/team meetings and training. Work with others to coordinate agency-wide communication and problem solving.

Qualifications:

- Minimum qualifications for a policy analyst include a masters or other graduate degree in public policy, public health, or related degree, or comparable related work experience.
- Experience with state government, either through direct work experience or policy or analytic experience closely tied to state programs, preferred.
- Knowledge of and experience in health policy and health information technology preferred.
- Excellent writing and communication skills, and strong analytical skills required.
- Ability to manage complex workload and balance assignments to achieve quality results in a timely manner
- Ability to create and sustain positive working relationships with staff and diverse constituencies and work independently as well as collaboratively.

Salary will depend on qualifications and experience.

About NASHP-- The National Academy for State Health Policy (NASHP) is an independent academy of state health policy makers working together to identify emerging issues, develop policy solutions, and improve state health policy and practice. NASHP provides a forum for constructive, nonpartisan work across branches and agencies of state government on critical health issues facing states. We are a non-profit, non-partisan organization dedicated to helping states achieve excellence in health policy and practice. NASHP has offices in Portland, ME, and Washington, DC. (For additional information on NASHP, visit www.nashp.org.) *To Apply:* Those interested in applying for this position should e-mail a cover letter and resume to: search@nashp.org. NO PHONE CALLS ACCEPTED

National Association of County and City Health Officials, Washington, DC

Two Openings: Health Equity Associate and Health Equity Senior Analyst

The National Association of County and City Health Officials (NACCHO) located in Washington, DC is recruiting to add to our Health Equity Team. The two positions available are a Health Equity

Associate and a Health Equity Senior Analyst. Both positions are listed online:

* Senior Analyst in Health Equity: <http://www.naccho.org/careers/details.cfm?pageid=103125>

* Program Associate in Health Equity: <http://www.naccho.org/careers/details.cfm?pageid=100071>

Please visit our website www.naccho.org<<http://www.naccho.org>>, to learn more about our organization.

Please forward this e-mail on to associates who are looking for a new opportunity in the DC area.

National Cancer Institute, Health Services and Economics Branch, Applied Research Program

Health Services Researcher (2 Openings)

The National Cancer Institute (NCI), a major research component of the National Institutes of Health (NIH) and Department of Health and Human Services (DHHS), is conducting a national search for two positions in Health Services Research in the Health Services and Economics Branch (HSEB) within the Applied Research Program (ARP). The mission of the HSEB is to support, conduct, and coordinate research on the dissemination of effective cancer-related health services into community practice, including the sponsorship, support and conduct of comparative effectiveness research. This is done through the study of demographic, social, economic, and health system factors as they relate to providing effective and efficient preventive, screening, diagnostic, and treatment services for cancer. The ultimate purpose of this research is to improve cancer outcomes, reduce cancer-related health disparities, and reduce the burden of cancer to patients, their families, and society. The Branch carries out its mission by monitoring cancer-related health services utilization and outcomes among individuals in the general population and among selected population subgroups; monitoring the dissemination and effective delivery of cancer-related health services by community-based health care providers and health care delivery organizations; assessing the role of economic factors related to the equitable, efficient, and effective provision of cancer-related health services; developing and disseminating data resources to support policy-relevant research on economic and health services research questions across the cancer continuum and developing and improving the methods and techniques of economics and health services research related to cancer. To obtain more information on the activities of HSEB, visit <http://healthservices.cancer.gov/about/>. The incumbent provides support, direction and leadership in planning, guiding, and encouraging a program of research in four major areas:

- 1) Evaluating and understanding the diffusion of emerging technologies including electronic medical records, genetic tests, biomarkers, advanced imaging, and targeted drugs. Background and experience in technology assessment, including cost-effectiveness analysis of interest.
- 2) Conceptualizing, developing and managing national research initiatives to monitor and evaluate the dissemination and use of cancer-related preventive, screening and treatment interventions. Development of data systems, methods, study design and logistics for comparative effectiveness research studies, and dissemination and implementation of research results from such studies.
- 3) Advanced epidemiological, statistical and econometric methods including adjusting for cofounders and selection bias in observational data, biostatistical and econometric methods for analyzing cost and quality of life data that have non-normal distribution and/or censored data. This would include a focus on methods related to system level analyses (such as multi-level analysis), and methods related to the validation of risk models, biomarkers, and diagnostic tests in large populations.
- 4) Leading and/or participating in small teams to conceptualize research topics, analyze data and publish research reports in the peer reviewed literature and summarize research findings in reports, web pages and fact sheets.

Specific projects will depend upon the background, experience, and research interests of the incumbent. The duties of the incumbent include grants and contracts management, the management of large collaborative research networks, the development of research protocols, design and development of surveys and questionnaires, the development of methods for data collection, building and managing analytical data bases, and descriptive and multivariate statistical analysis of data. This challenging and highly visible role requires broad scientific expertise, a passion for public service, a commitment to collaboration, and an ability to develop effective strategies for overcoming barriers to scientific progress and its application. The successful applicant will be an experienced scientist (Ph.D. or equivalent-level training required) with experience, excellent communication skills and a record of peer-reviewed publications. The incumbent should have advanced training in health services and methods, and experience in applying these research methods to the fields of surveillance, comparative effectiveness, or health economics research. This position is a career position with the U.S. government and requires that the applicant is a citizen of the U.S. The salary range for this position will be negotiable but is

anticipated to be at the level of GS 13/14. Letters of interest and vitae may be submitted immediately to Martin Brown, PhD, Chief, HSEB, ARP, DCCPS, 6130 Executive Blvd, Room 4005, Bethesda, MD 20892-7344, mbrown@mail.nih.gov, or by fax (301) 435-3710. Selection for this position will be based solely on merit, with no discrimination for non-merit reasons such as race, color, gender, national origin, age, religion, sexual orientation, or physical or mental disability.

**Office of Healthy Carolinians (OHC), Chronic Disease and Injury Section, DPH, DHHS
Director, OHC**

The Office of Healthy Carolinians (OHC), located within the Chronic Disease and Injury section, DPH, DHHS, is responsible for four main programs that span across the Division of Public Health: Healthy

Carolinians, Community Health Assessment, NC Health Objective Metrics, and Health Education. In addition to the Director's position, staff of OHC includes an Operations Manager who also serves as the Director of Health Education, five regional consultants, professional program support, administrative office support, and part-time positions. Healthy Carolinians, community health assessment and development, and tracking and evaluation of NC Health Objective progress are critical components to a strong infrastructure that enables the public health system to prepare for and respond to chronic diseases, emerging communicable diseases, and other threats to the public's health. Healthy Carolinians: The Office of Healthy Carolinians provides the oversight and direction for the Healthy Carolinians network across the state. At the state level, the OHC supports the Governor's Task Force for Healthy Carolinians (GTF) and is responsible for the work of the Task Force. The GTF is established through Executive Order. The responsibilities of the GTF are to: develop North Carolina Health Objectives; advise the Secretary of DHHS and State Health Director about community health improvement; provide a public forum for the Preventive Health Block Grant; and determine certification of the local Healthy Carolinians Partnerships. At the local level, Healthy Carolinians partnerships have been established in most of North Carolina's 100 counties. These partnerships implement a public-private, community-based process by

which county leaders and organizations collaborate to identify and address their community's major health and safety challenges. Healthy Carolinians partnerships strengthen the public's participation in

shaping the community's health plans, activities and outcomes. Community Health Assessment: The State of NC mandates that local Health Departments implement a Community Health Assessment (CHA), one of the core functions of public health, every four years. In each of the interim years local Health Departments are required to submit a State of the County's Health (SOTCH) Report. Health Departments are expected to involve their local Healthy Carolinians Partnership in implementing the Community Health Assessment for their county. OHC is responsible for guiding and supporting local Health Departments so that they meet the statewide standards for Community Health Assessment and SOTCH reports. OHC is responsible for building Community Health Assessment capacity by providing technical assistance and training to staff of local Health Departments and members of local Healthy Carolinians Partnerships. North Carolina Health Objectives: Through the request of the NC Governor's Task Force for Healthy Carolinians, OHC will be responsible for facilitating the development and monitoring of NC's 2020 Health

Objectives. The OHC will take responsibility for engaging communities in the development of 2020 objectives and then in providing technical assistance, in collaboration with the statewide health promotion team at DPH and LHDs, in implementing evidenced-based strategies. Such strategies will include those noted in the state-wide Prevention Action Plan. The Prevention Action Plan has been developed in collaboration between DPH and the NC Institute of Medicine and it will be released on October 8, 2009. In addition, the OHC will be responsible for monitoring of progress in meeting the NC Health Objectives.

Health Education: The mission of health education is to "enable individuals and communities to achieve healthy lifestyles." The OHC is responsible for providing vision, leadership, and direction in health education across the state as well as the provision of technical assistance in collaboration with DPH and the statewide health promotion team that works with LHDs. Primary Purpose of Position: The Director of the OHC directs the overall management of Healthy Carolinians, serves as senior staff person to the Governor's Task Force for Healthy Carolinians, and provides vision and leadership to the development and monitoring of the North Carolina Health Objectives. In addition, this position is responsible for collaborating with local Health Departments and the statewide health promotion team to implement

evidence-based strategies to meet prioritized NC Health Objectives at the local community level. Additional responsibilities resource development and strategic planning with all state public health programs to best meet the NC Health Objectives. The primary purposes of this position include:

- Facilitating the development and monitoring of NC Health Objectives, aligning with the national Healthy People objectives

- Establishing goals and vision for Healthy Carolinian programs to facilitate success in meeting health objectives for the state

- Working with the leadership of the State Center for Health Statistics to monitor progress from LHD and local communities in meeting health objectives, including roll-up of data for state-level analysis

- Supporting the work of the executive order mandated Governor's Task Force for Healthy Carolinians, including securing resources to support health objective metrics, Healthy Carolinians and community health assessment

- Supervising Operations Manager of OHC in his/her management of centralized and regional staff

- Writing grants, managing budgets and contracts and providing administrative leadership

- Working with other Public Health leaders and funders to integrate programs and resources when possible

- Facilitate collaboration with local Health Department and statewide health promotion team

- Provide data management and epidemiological expertise to evaluation and monitoring of NC Health Objectives

Knowledge, Skills & Abilities and Training & Experiences Requirements: Knowledge, Skills & Abilities --

- High level of leadership skills and abilities for community health improvement and comprehensive planning between state and local public health and implement NC Health Objectives

- Thorough knowledge of the principles and practices of public health, including epidemiology, community mobilization, media, marketing and social marketing, policy development, resource development, and budget management

- Skills necessary to build collaboration between Healthy Carolinians, local Health Departments and other key health partners within the state

- Thorough knowledge of health objective establishment, monitoring, and evaluation including data management and epidemiological oversight

- Thorough knowledge of community health assessment, program planning, and evaluation

- Thorough knowledge of principles and practices of administration and management of public health programs and staff

- Considerable knowledge of the programs and objectives of the various sections in the Division of Public Health, other Divisions in DHHS, and other state agencies that relate to health objectives

- Considerable knowledge of resource development (proposal development, legislative appropriations, etc.)

- Ability to plan, supervise, and coordinate a statewide programs

- General knowledge of the department's budget, contracts, and purchasing procedures

- Experience in developing and coordinating plans and policies, resources, and mission as well as goals, vision, and expectations of agency or program; prepares and updates plans and priorities

- The ability to work with people with diverse backgrounds and education within a community

Minimum Training and Experience: A Master's Degree in Public Health or related degree and four years experience in public health, including 2 years of management and supervision; or graduation from a four-year college or university with a major in public health and six years of experience in public health,

including 3 years of management and supervision; or an equivalent combination of education and experience. The Director of the Office of Healthy Carolinians directs the overall management of Healthy Carolinians, serves as senior staff person to the Governor's Task Force for Healthy Carolinians, and provides vision and leadership to the development and monitoring of North Carolina's Health Objectives. In addition, this position is responsible for collaborating with local Health Departments and the statewide health promotion team to implement evidence-based

strategies to meet prioritized NC Health Objectives at the local community level. Additional responsibilities resource development and strategic planning with all state public health programs to best meet the NC Health Objectives. For more information, see the attached job description and link to posting below...

<http://osp.its.state.nc.us/positiondetail.asp?vacancykey=4482-60041105&DHHSN1IMRFR=4480&printit=no> and

<http://osp.its.state.nc.us/positiondetail.asp?vacancykey=4482-60041105&DHHSNUMBER=4480&printit=no>

Oregon Public Health Division

Research Analyst

A Research Analyst position will soon be open in the Oregon Public Health Division to provide evaluation design, data collection, analysis, and program evaluation support to Maternal and Child Health (MCH) programs. Major duties will include: *Design program evaluation plans, implement evaluations, analyze data and generate reports. *Compile and analyze data from multiple sources, including both quantitative and qualitative data. *Provide consultation to the MCH program staff in the areas of evaluation, data collection, analysis and interpretation. Salary: \$3547 - \$4951 per month. Start date: as soon as possible. If you have questions please call Ken Rosenberg ken.d.rosenberg@state.or.us . Kathryn Broderick kathryn.broderick@state.or.us; 971-673-0228).

Para Los Niños, Los Angeles, CA

Program Director for Best Start LA

About Para Los Niños:Para Los Niños is a nonprofit family service organization designed to bring children from some of Los Angeles' most challenging communities out of poverty and onto brighter, more successful futures.

What is Best Start LA?Best Start LA is a \$125 million, multi-year investment created by First 5 LA that aims to shape, strengthen and support five Los Angeles County Communities by building resources and providing access to activities that improve the well-being, development and care experienced by pregnant women, parents of newborns and children age 3 and under. The Para Los Niños mission for Best Start LA is to ensure that stakeholders in the community steer the initiative. At its foundation will be a rich collaboration of diverse stakeholders, service providers, civic leaders, networks, parent groups and neighbors. Para Los Niños will also focus on community mobilization which is vital to the ultimate success of Best Start LA and must be driven by the community itself.

Program Director Function:The Best Start LA Partnership Program Director reports to Para Los Niños' Vice President/COO and is responsible for working with Best Start LA Partnership and First 5 LA staff, coordinating partnership initiatives; and acting as a liaison for Best Start LA Partnership members, task forces, and other stakeholders in the Best Start LA Partnership process. The Program Director will assist in facilitating the processes and activities of the partnership in order to ensure the long-term success and sustainability of Best Start LA Partnership outcomes and objectives.

Qualifications:Master's degree in Nonprofit Leadership, Urban Planning, Social Work, Public Health or related field; 5 years of high level management and supervision in community mobilization/partnerships. Strong leadership skills desired with a solid foundation in community mobilization/partnership formation.

Strong organizational agility with proven track record of successful project oversight on long-range planning process implemented in a complex, diverse, community and an ever-changing environment. Experience cultivating relationships with and convening community partnerships. Extensive experience with community-driven, grassroots initiatives requiring intensive collaboration and partnership. Excellent project management and negotiation skills. Background and experience in facilitating and planning, team-building and leadership-development practices. Demonstrated experience using strategic thinking and analytical skills to translate concepts and ideas into innovative, tangible and actionable strategies and actions. Excellent written and oral communication skills.

Salary:Negotiable, depending on education and experience

Status:Exempt / Full-time

Benefits:PLN offers an excellent executive benefit package, which includes full health, dental and life insurance, vacation, sick days, holidays and 401k plan.

Please visit our website, www.paralosninos.org for complete Job Description. All interested candidates should submit their resume and cover letter to hr@paralosninos.org, ATTN: Lizeth Diaz.

The Association for Prevention Teaching and Research (APTR) and Office of Disease Prevention and Health Promotion (ODPHP) Fellowship Program

Four New Fellowship Position

For information regarding the fellowship and to download an application package visit

http://aptrweb.org/prof_dev/fellowships_HCF.html.

University of Iowa, Department of Anthropology

Assistant Professor rank (Tenure-track)

Application screening begins: December 7, 2009

The University of Iowa, Department of Anthropology, invites applications for a tenure-track position in medical anthropology, at the rank of assistant professor, beginning August 2010. Requirements include Ph.D. in hand by August 1, 2010, an established publication record, a strong research program, a record of external grant support and previous teaching experience. Postdoctoral or equivalent experience is preferred though not required. Applicants whose topical and geographical foci complement expertise represented by the two medical anthropologists on the faculty are especially welcome. See department website (<http://www.uiowa.edu/~anthro>) for current faculty strengths. Teaching load is four courses per year including one large introductory course to be taught once each academic year, as well as undergraduate and graduate courses in the candidate's areas of expertise. Salary is commensurate with experience. The Department and the College of Liberal Arts and Sciences are strongly committed to gender and ethnic diversity; the strategic plans of the University and College reflect this commitment. Women and members of minorities are especially encouraged to apply. The University of Iowa is an affirmative action/equal opportunity employer. Applicants must apply online at the following website (<http://jobs.uiowa.edu/>) and refer to requisition number 57208. Electronic attachments to the online application must include a cover letter (with details of applicant's research program, previous teaching experience and prospective courses), a curriculum vitae, and name and contact information for three references. Hard copies of representative publications and any other supporting materials may be sent to: Scott Schnell, Medical Anthropology Search Committee Chair, Department of Anthropology, University of Iowa, Iowa City, IA 52242. Screening of applications begin on December 7, 2009 and will continue until the position is filled.

University of New Orleans, Center for Hazards Assessment, Response and Technology (UNO-CHART) Department of Sociology, College of Liberal Arts

Director

The University of New Orleans is seeking a Director for UNO-CHART, to begin fall, 2010 upon the retirement of its founding director. The appointment will be at the rank of a tenure-track Associate or Full Professor of Sociology. UNO-CHART is a mature, strong, large applied social science research center. The focus is community collaboration that supports Louisiana communities to reduce their risk to storm hazards and to build resiliency while developing best practices for national and international dissemination. The Center is seeking a sociologist with specialization in applied research in community, social justice and hazards. Complementary sociology specialties desired include environmental sociology, cross cultural, social movements and political economy. Applicants must have a proven record of successful research funding, established record of scholarship, management of multi-researcher, multi-disciplinary research projects, preferably in an administrative research center role. They should have experience and success in collaborations with community stakeholders, natural scientists/engineers, and government agency officials in an equitable, collaborative manner. The location of the center in New Orleans at a major gateway to the entire Gulf Coast region offers a powerful setting for resiliency/vulnerability research for both storm response and climate change applications and affords unique opportunities to explore research partnerships regionally, nationally, and internationally. Salary: commensurate with qualifications and experience. Letter of application, C.V. and the names of three references should be directed to David Allen, Chair, Dept. of Sociology, UNO, New Orleans, LA 70148 or dahall@uno.edu for review by Search Committee. Review will begin December 1, 2009 and continue until position is filled unless unforeseen budget constraints delay appointment. UNO is an EEO and AA employer. Further information about UNO-CHART available at <http://www.chart.uno.edu>.

University of Rochester's Center for the Study ad Prevention of Suicide and San Jose State University

Third Annual Training Institute

Community-Based Participatory Research Approaches to Sustaining Healthy Families and Multicultural Communities

San Jose, California

February 6-10, 2010

Deadline: November 18, 2009

The University of Rochester's Center for the Study and Prevention of Suicide, in partnership with San José State University, is pleased to announce the Third Annual Training Institute on community-partnered research. This year's Institute, *Community-Based Participatory Research Approaches to Sustaining Healthy Families and Multicultural Communities*, will be held on February 6-10, 2010 in San José, California. The training institute is designed for research teams comprised of academic and community member investigators. Community-academic partners seeking to advance their collaborative public health and preventive research are welcome to apply. Research projects focusing on behavioral, social, and environmental factors promoting health and preventing adverse health outcomes among people whose lifestyles represent the cultural mosaic of communities are encouraged. Lifestyle, family turmoil, community violence, psychological and personal distress, and adverse life events are a few examples of factors that could be a research focus for attending teams. Innovative health services and interventions research topics, for instance, to evaluate effectiveness of known interventions with ethnic populations or to enhance the capacity for interventions research in new settings, will also be considered. This forum is designed to support related National Institutes of Health (NIH) research priorities. The program will develop knowledge about effective collaborative teams and skills in writing peer-reviewed grants to the National Institutes of Health (NIH) and other comparable funding agencies, to advance community-integrated and community-led research programs addressing their priority areas. Junior investigators with completed doctorates, or experienced researchers and community members seeking to expand their expertise in conducting community-based participatory research, are eligible to apply. ***Further information and applications are available at www.rochesterpreventsuicide.org. Applications are due November 18, 2009.***

**University of Tennessee, Knoxville
Assistant Professor of Counseling Psychology (Tenure-track)
Application review begins: November 16, 2009**

The Department of Psychology at the University of Tennessee, Knoxville, invites applications for a tenure-track position of Assistant Professor of Counseling Psychology for the academic year beginning in August, 2010. The department encompasses a diversity of theoretical orientations, and matriculated graduate students are selected from a wide and diverse group of applicants from across the nation and around the world. Candidates must have a Ph.D. from an APA-accredited program, a strong research record, enthusiasm for teaching at the graduate and undergraduate level, potential for extramural research funding, and be license-eligible in Tennessee. Candidates with solid publication records, demonstrated potential for extramural funding, and experience in graduate education are encouraged to apply. Position responsibilities include research, teaching at both undergraduate and graduate levels, and graduate training. While the search is open to all areas, preference will be given to those who can contribute to the Program's emphasis in multicultural psychology, training in social justice advocacy and research, and clinical supervision. The successful candidate will be expected to develop an extramurally funded research program. Women and minorities are especially encouraged to apply. The University of Tennessee, Knoxville, is the state's flagship research institution, a campus of choice for outstanding undergraduates, and a premier graduate institution. As a land-grant University, it is committed to excellence in learning, scholarship, and engagement with society. In all its activities, the University aims to advance the frontiers of human knowledge and enrich and elevate society. The University welcomes and honors people of all races, creeds, cultures, and sexual orientations, and values intellectual curiosity, pursuit of knowledge, and academic freedom and integrity. The University intends that its graduates will promote the values and institutions of representative democracy, and be prepared to lead lives of personal integrity and civic responsibility. Review of applications will begin November 16 and continue until the position is filled. Applicants should submit their vita, statement of research interests, summary of teaching experiences and evaluations, 3-5 representative publications, and three letters of recommendation to the Chair, Counseling Search Committee, c/o Ms. Connie Ogle, Department of Psychology, University of Tennessee, Knoxville, TN 37996-0900.

**University of Washington, Department of Family Medicine, Seattle, Washington
Assistant, Associate or Full Professor Level Faculty Position (Full-time) in Research**

The University of Washington Department of Family Medicine seeks a full-time faculty to join our Research Section at the assistant, associate, or full professor level. The principal responsibility of this faculty position will be to build a strong program of research in clinical practices throughout the five-state region served by the University of Washington. This position will be linked with the University of Washington's Institute for Translational Health Sciences (ITHS) Community Outreach

and Research Translation Core (CORT) efforts within the Department of Family Medicine. This faculty member will work closely and collaboratively with ITHS and CORT leadership and staff as well as Departmental faculty and staff. We seek a clinician-scientist (MD) or a basic scientist (PhD) with excellent core skills in clinical epidemiology, and demonstrated expertise in practice-based research in primary care clinical settings. The ability to secure external research funding is essential, as is the ability to effectively communicate findings to policy makers and other stakeholders. Additional responsibilities will include mentoring and training students, residents, fellows, and non-research faculty, and, for clinicians, limited clinical practice and clinical instruction. Appointment will be at the assistant, associate, or full professor level (depending on experience and qualifications) in the clinician-scientist pathway, with salary appropriate for faculty rank. University of Washington faculty engage in teaching, research and service. The University is dedicated to the goal of building a culturally diverse and pluralistic faculty and staff committed to teaching and working in a multicultural environment and strongly encourages applications from women, minorities, individuals with disabilities and covered veterans. The position will remain open until filled. Applications, including a letter of interest and CV, or requests for further information should be directed to: James E. Davis, MD, MS, Professor and Chair, University of Washington Department of Family Medicine, Box 356390, Seattle, WA 98195, 206-543-3101, jedavis3@u.washington.edu

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CONFERENCES AND EVENTS

American Public Health Association Annual Meeting and Exposition

Philadelphia, OA

November 7-11, 2009

Join your colleagues for the most important public health event of the year. The APHA 137th Annual Meeting and Exposition will take place in Philadelphia at the Pennsylvania Convention Center. For more information about the meeting, [click here](#). To register for the meeting, [click here](#).

Global Health Forum for Health Research 2009

"Because Health Equity is a Priority"

International Convention Center

Havana, Cuba

November 16-20, 2009 Cuba

The Global Forum for Health Research (GFHR), an independent international organization committed to demonstrating the essential role of research and innovation for health and health equity, benefiting poor and marginalized populations, will be holding its Forum for Health Research in Havana, Cuba this year.

For more information,

<http://www.medicaleducationfutures.org/uploads/GlobalForumEmailAlert.pdf> .

To register online, please <http://www.globalforumhealth.org/>.

Medical University of South Carolina, Morehouse School of Medicine, Congressional Tri-Caucus

Conference on Health Disparities

3rd Annual Conference on Health Disparities

Hyatt Regency Atlanta

Atlanta, GA

December 2-5, 2009, 9:00 a.m.-6:00 p.m.

The conference will focus on bringing equity and justice to health care reform. Conference details at <http://www.msm.edu/Documents/Community/HealthDisp2009-for%20web.pdf>. To register: http://www.msm.edu/Events/Health_Disparities_Conference.htm.

New England Regional Minority Health Committee, New England Regional Minority Health Conference, Eliminating Racial and Ethnic Disparities by 2010

From Disparities to Equity: The Power to Make Change

Westin Hotel

Providence, RI

October 14-16, 2009

[New England Regional Minority Health Conference](#)

On October 14, 15 & 16, 2009 the New England Regional Minority Health Committee is proud to host the sixth biennial New England Regional Minority Health Conference at the Westin Hotel in Providence , Rhode Island . This conference, and the two year planning process, represents an historic collaboration that helps to influence the national agenda as it pertains to the elimination of racial and ethnic health disparities. Holding this biannual conference since 1999, in each of the six New England states, has established this regional initiative and this Conference as one of the pre-eminent gatherings on minority health issues in the United States. For more information about the conference, [click here](#). To register for the conference, [click here](#).

NYU Master's Program in Global Public Health

Health Policy: Innovation and Inequalities-Experiences from Brazil

Jurow Hall, 100 Washington Square East

Monday, October 26, 5:00-6:30pm

Free and open to the public.

http://www.nyu.edu/mpph/events/event.html?e_id=1902 -- RSVP Online

Brazil is one of only a few middle income countries with a universal rights-based public health system and is well-known for its innovative approaches to a number of public health problems. At the same time, there remain considerable geographic, socio-economic, and racial/ethnic inequalities in health status and its determinants throughout the country. This panel brings together leading Brazilian experts who will discuss the extent of inequalities in health in the country and present several health policy innovations (such as the national HIV/AIDS program and training human resources for health) designed to tackle such inequalities. Join Dr. Naomar Almeida-Filho, Rector of the Federal University of Bahia (UFBA), Dr. Emilio José Castro e Silva, Director of International Relations at UFBA, and Inês Dourado, Professor at UFBA's Institute for Collective Health for an engaging discussion of the progress and remaining challenges facing their country's ongoing development of a universal health system. Featuring: Naomar Monteiro de Almeida Filho, MD, PhD, Rector and Professor, Universidade Federal da Bahia (Brazil); Dr. Emílio José de Castro Silva, MD, PhD, Director of Office of International Affairs and Professor, Universidade Federal da Bahia; Dr. Inês Dourado, MD, PhD, Professor, Instituto de Saúde Coletiva/ Universidade Federal da Bahia. Moderated by: Dr. James Macinko, Director, NYU Master's Program in Global Public Health; Associate Professor of Public Health, NYU Steinhardt School of Culture, Education and Human Development.

The Gerontological Society of America

62nd Annual Scientific Meeting

November 18-22, 2009

Atlanta, GA

This year we welcome our meeting-goers to Atlanta, Georgia. The theme for GSA's 62nd Annual Meeting is "Creative Approaches to Healthy Aging". This topic reaches across all of GSA's professional sections and embraces the interdisciplinary nature of its membership - challenging each of us to look at the goals of our work somewhat differently. GSA's Annual Scientific Meeting brings together more than 3,500 of the brightest minds in the field of aging. This meeting is the premier gathering of gerontologists from both the United States and around the world. They participate in over 400 scientific sessions including symposia, paper, and poster presentations. Registration: Online registration is now available. Visit the [Attendee Registration](#) page to register today!

Save the Date - Engelberg Center for Health Care Reform at Brookings Institution

National Conference on Measuring and Advancing Health Care Equity Through Data Collection, Quality Improvement and Public Reporting

National Press Club

529 14th Street, NW

Washington, DC

8:00 a.m. - 5:00 p.m.

March 25, 2010

Hosted by the Engelberg Center for Health Care Reform at Brookings, this national conference will bring together multiple stakeholders to advance strategies for improved data collection, integration and utilization activities, as well as disparities measurement, to promote health care equity. Specifically, the conference will aim to identify tested best practices relative to collecting and reporting race/ethnicity and primary language identifiers through various modes and identifv

practical, consensus-driven steps to measure and use race/ethnicity and primary language data to improve quality of care. A formal invitation and registration information will follow in the next few months.

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RESOURCES

Publications

Families USA Fact Sheet

Health Coverage in Communities of Color: Talking about the New Census Numbers

<http://www.familiesusa.org/assets/pdfs/minority-health-census-sept-2009.pdf>

This new fact sheet takes a closer look at the latest data and finds that communities of color continue to bear the brunt of the uninsured crisis. This fact sheet looks at who is uninsured, who is living in poverty, and why public programs are vital to communities of color.

Institute of Medicine

[Focusing on Children's Health: Community Approaches to Addressing Health Disparities](#)

The Institute of Medicine's recent report, [Focusing on Children's Health: Community Approaches to Addressing Health Disparities](#), describes the evidence linking early childhood life conditions and adult health; discusses the contribution of the early structural and social aspects in children's lives to observed racial and ethnic disparities in health; and highlights successful models that engage both community factors and health care to affect the child's development over life.

J Epidemiol Community Health. Published Online First: 19 August 2009.

doi:10.1136/jech.2008.082743

Tackling the wider social determinants of health and health inequalities: evidence from systematic reviews

Clare Bambra¹ , Marcia Gibson² , Sowden Amanda³ , Kath Wright⁴ , Margaret Whitehead⁵ , Mark Petticrew⁶, 1 University of Durham, United Kingdom; 2 MRC Glasgow, United Kingdom; 3 University of York, United Kingdom; 4 York, United Kingdom; 5 University of Liverpool, United Kingdom; 6 LSHTM, United Kingdom

ABSTRACT: *Background:* There is increasing pressure to tackle the wider social determinants of health, through the implementation of appropriate interventions. However, turning these demands for better evidence about interventions around the social determinants of health into action requires identifying what we already know and highlighting the evidence gaps. *Methods:* Systematic review methodology was used to identify systematic reviews (from 2000-2007, developed countries only) that described the health effects of any intervention based on the wider social determinants of health: water and sanitation, agriculture and food, access to health and social care services, unemployment and welfare, work conditions, housing and living environment, education, and transport. *Results:* Thirty systematic reviews were identified. Certain categories of intervention may impact positively on health, in particular interventions in the fields of housing and work. However, there were clear gaps in the evidence, and the effects of interventions on health inequalities were unclear. *Conclusion:* Intervention studies which address inequalities in health are a priority area for future public health research. Downloadable pdf at: <http://jech.bmjjournals.org/cgi/content/abstract/jech.2008.082743v1>.

National Center on Minority Health and Health Disparities (NCMHD)

[Moving Science to Practice and Policy: Addressing Inequities through a Focus on Place](#)

National Center on Minority Health and Health Disparities has recently released the first videocast, [Moving Science to Practice and Policy: Addressing Inequities through a Focus on Place](#), as part of the NIH's monthly Health Disparities Seminar Series. In the videocast, Dr. Brian Smedley speaks about the negative effects of racial and socioeconomic segregation on health. He also highlights some of the challenges and opportunities in applying research to policies and practices that address health inequities and improve health opportunities. The National Center on Minority Health and Health Disparities funds the seminar series. Their goal is to disseminate information on advances and gaps in health disparities, and current issues in health disparities research.

Report: S. Braveman P, Sadegh-Nobari T, Grossman-Kahn R and Dekker M. Education Matters for Health. Issue Brief 6: Education and Health.

<http://www.rwjf.org/files/research/commission2009eduhealth.pdf>

Education can influence health in many ways. This issue brief, prepared by the Robert Wood Johnson Foundation Commission to Build a Healthier America, examines three major interrelated pathways through which educational attainment is linked with health, health knowledge and behaviors; employment and income; and social and psychological factors, including sense of control, social standing and social support. In addition, this brief explores how educational attainment affects health across generations, examining the links between parents' education and the social and economic advantages it represents, and their children's health and social advantages, including opportunities for educational attainment.

<http://www.rwjf.org/pr/product.jsp?id=48252>

The Disparity Reducing Advances Project

Equity Policies: A Review of the Recommendations,

The Disparity Reducing Advances Project released [Equity Policies: A Review of the Recommendations](#), a compilation of 27 reports, memos, and briefs that identify action steps for creating health equity. Each piece highlights recommendations, strategies, and/or priorities for health equity.

World Health Organization

Commissioned Discussion paper

Priorities for research on equity and health: Implications for global and national priority setting and the role of WHO to take the health equity research agenda forward

Piroska Östlin (Task Force coordinator and core author), Department of Public Health Sciences, Division of Global Health, Karolinska Institute, Sweden; Ted Schrecker (core author), Department of Epidemiology and Community Medicine and Institute of Population Health, University of Ottawa, Canada; Ritu Sadana (core author), Equity Analysis and Research Unit, Department of Ethics, Equity, Trade and Human Rights, Information, Evidence and Research Cluster, World Health Organization; Josiane Bonnefoy, Ministry of Health, Chile; Lucy Gilson, University of Cape Town, South Africa and London School of Hygiene and Tropical Medicine, United Kingdom; Clyde Hertzman, Human Early Learning Partnership (HELP), University of British Columbia, Canada; Michael P. Kelly, Centre for Public Health Excellence, National Institute for Health and Clinical Excellence, United Kingdom; Tord Kjellström, National Centre for Epidemiology and Population Health, Australian National University, Canberra, Australia; Ronald Labonté, Department of Epidemiology and Community Medicine and Institute of Population Health, University of Ottawa, Canada; Olle Lundberg, Centre for Health Equity Studies, Stockholm, Sweden
Carles Muntaner, Social Equity and Health Section, Centre for Addiction and Mental Health and Bloomberg Faculty of Nursing and Dalla Lana School of Public Health, University of Toronto, Canada;

Jennie Popay, Division of Health Research, Lancaster University, United Kingdom; Gita Sen, Indian Institute of Management, Centre for Public Policy, Bangalore, India; Ziba Vaghri, Human Early Learning Partnership (HELP), University of British Columbia, Canada. The discussion paper is available as PDF file [38p.] at

[http://www.globalhealthequity.ca/electronic%20library/Priorities%20for%20research%20on%20eq](http://www.globalhealthequity.ca/electronic%20library/Priorities%20for%20research%20on%20equity%20and%20health.pdf)

[uity%20and%20health.pdf](http://www.globalhealthequity.ca/electronic%20library/Priorities%20for%20research%20on%20equity%20and%20health.pdf). "...The report of the WHO Commission on Social Determinants of Health was released in August, 2008. Subsequently, a group led by Sweden's Piroska Östlin, comprising 14 researchers who were actively involved with the Knowledge Networks that supported the Commission, was commissioned by WHO to update an earlier (2005) report on priorities for health equity research. The new (**September 9, 2009**) discussion paper observes that: "The bulk of global health research has focused on biological disciplines, to develop medical solutions, to be provided through clinical, individual patient care. The past two decades have witnessed a rise in a new public health paradigm, enlarging disciplinary perspectives, stakeholder analysis, and recognition that health systems can be designed more effectively through new knowledge. This paradigm shift represents a second wave of global health research. With the 10/90 gap embraced by many organisations as an objective to be reversed and the CSDH's report widely distributed, among other contemporary efforts, this paper argues that we are on the cusp of a third wave in global health research, one that explicitly links broader social, political and economic determinants with improvements in equity in health within and across countries

Others

National Cancer Institute

Health Disparities Calculator (HD*Calc)

<http://seer.cancer.gov/hdcalc/>

The National Cancer Institute launched the **Health Disparities Calculator (HD*Calc)**. The calculator-statistical software that generates multiple summary measures for evaluating and monitoring health disparities-can be used either as an extension of SEER*Stat, which allows users to import Surveillance, Epidemiology, and End Results (SEER) data or on its own with other population-based health data, such as from the National Health Interview Survey, California Health Interview Survey, Tobacco Use Supplement to the Current Population Survey, and National Health and Nutrition Examination Survey. The intended audience for HD*Calc includes anyone interested in health and cancer-related disparities, as well as those interested in learning about summary measures of health disparities. Data such as cancer rates, survival, and stage at diagnosis, which are categorized by groups such as ethnicity, race, socioeconomic status and geographic areas, can be used with HD*Calc to generate 11 absolute and relative summary measures of disparity. The output can be presented in both tabular and graphic formats, which will allow users to specify various conditions and formats. HD*Calc also provides pair-wise comparisons that allow users to explore underlying trends in the data. This application extends the work published in the National Cancer Institute Surveillance Monograph Series entitled Methods for Measuring Cancer Disparities, which evaluates measures of health disparities included in HD*Calc. The monograph discusses major issues that may affect the choice of summary measures of disparity and systematically reviews methods used in health disparities research. **HD*Calc is located on the SEER Web site, at <http://seer.cancer.gov/hdcalc/>.** This work is supported by the Surveillance Research Program (SRP) and Applied Research Program (ARP) within the Division of Cancer Control and Population Sciences (DCCPS) at the National Cancer Institute (NCI).

Urban Institute

Children of Migrants Data Tool

<http://datatool.urban.org/charts/datatool/pages.cfm>

Generate charts on the characteristics of children, age 0 to 17, for the United States and for the 50 states and the District of Columbia. Data come from the 2005 and 2006 American Community Survey.

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