Career Statement

“The University of Minnesota, founded in the belief that all people are enriched by understanding, is dedicated to the advancement of learning and the search for truth; to the sharing of this knowledge through education for a diverse community; and to the application of this knowledge to benefit the people of the state, the nation, and the world.”

“The mission of the Department of Pediatrics is to generate new knowledge through research, to apply this new knowledge to the highest quality health care for the prevention and treatment of illness in children, and to provide the best possible education of the next generation of medical students, physicians and other health professionals in childhood disease prevention, treatment, research, and advocacy. Through this mission the Department seeks to improve the lives of children in our community, nation and the world.”

“The mission of the Children, Youth and Family Consortium is to build the capacity of the University of Minnesota and Minnesota’s communities to use research, influence policy, and enhance practice to advance the well-being of Minnesota’s children, youth and families.”

At the beginning of my career I probably would not have stated my personal career mission using land grant language such as “to benefit the people,” but I now enthusiastically do. My mission is best stated: To use my expertise in child psychology, brain development, family functioning, and effective interdisciplinary and community collaborations to create, disseminate and apply knowledge to improve the well-being of children and families, prepare students for work in changing and challenged communities, and encourage policies that support the healthy development of all children and families. Incorporating this mission into my research, education and service activities provides cohesion to my work and enables me to be as efficient, productive and effective as I can be.

My career has had two phases, the first giving birth to and grounding the second. I feel that it is important to describe this transformation so reviewers may put my goals and accomplishments in context.

I came to the University of Minnesota in 1992 as a pediatric neuropsychology post-doctoral fellow. I was interested in neurotoxicology as I had completed graduate research on neuropsychological sequelae of exposure to hard metals and solvents in factory employees. I was interested in applying my interests to children and pursuing a research program studying developmental effects of toxicants such as lead.

In 1993 I had my first opportunity to work on these issues when residents of the Phillips Neighborhood approached Amos Dienard, then Director of the Community University Health Care Center, to request that the University work with the neighborhood to address lead exposure. Amos recruited several faculty including my supervisor, Elsa Shapiro, who invited me to be part of some initial community meetings to explore community health issues with Phillips residents. What followed was a 10-year long, sometimes arduous, always powerful and genuine, democratic partnership among researchers in five University departments, neighborhood residents, Honeywell Foundation, Valspar Paint Company, city and state Departments of Health, community-based organizations and State Representative Karen Clark (Phillips Neighborhood Healthy Housing Collaborative). The community did not ask for and
was frankly distrustful of research. Through a process of building trust and co-learning during which researchers listened to community concerns and community members listened to what researchers had to offer, we decided as a group to pursue two Community-Based Participatory Research (CBPR) projects addressing two major community questions: “How can we effectively prevent lead poisoning in our children?” and “What is lead doing to our children?” I describe these projects and my roles in writing the federal grants and directing the projects in my statement on Research and Scholarship.

This community experience resulted in a transformation that has led to personal and professional growth and positive changes in my career path and goals. I am intellectually curious about children’s environmental health, but I am passionate about the power of community-University partnerships that not only benefit communities, but enhance the science. I feel strongly that because of community-engagement, my research produced more valid and reliable results through improved recruitment and retention rates, heightened cultural sensitivity, and increased trust resulting in participants sharing important, sensitive information. I feel equally strongly that my research has made an important impact, both on the discipline as I and my colleagues publish in peer reviewed journals, and on the health and well-being of the community as we share the findings from our work and co-create interventions grounded in our research. I address my dissemination and impact plan further in my statement on Research and Scholarship.

My passion for this collaborative work led me to invite my “community research partner,” Susan Gust (see letter of support), to develop a small but respected campus initiative called GRASS Routes (Grass Roots Activism, Sciences and Scholarship). We were joined by philosophy professor Naomi Scheman, nurtured by Associate Vice President for Public Engagement Victor Bloomfield (then Vice Provost for Research and Associate Dean of the Graduate School), and ultimately taken in and housed within the office of Robert Jones, Senior Vice President for System Academic Administration. Our goals were to facilitate community-University research and educational partnerships by: preparing faculty and students for community work; linking communities with campus resources; mentoring partnerships; supporting the dissemination of collaborative research findings to community stakeholders; and working to change policies, climate, and practices at the University and across higher education that create barriers for community-engaged scholars.

GRASS Routes work was immensely fulfilling, yet the demands of my position limited my ability to fully pursue this passion. In 2004, the position of Director of the Children, Youth and Family Consortium (CYFC; http://www.cyfc.umn.edu) became available. I believed that this position would allow me to unite my passions for children and for partnerships and provide me with a position from which I could effectively make systemic change, utilize research to influence practice and policy, and contribute to community health and well-being through interdisciplinary and community collaborations. I was right.

Although the CYFC directorship does not require a faculty appointment, I chose to retain my faculty appointment and continue my scholarly work because my identity is as an academic and because I believe my status as a scholar enhances the credibility of CYFC’s work overall. I continue to conduct research and I continue to contribute to the education of our Pediatrics
and Neuropsychology trainees, as well as other students in the Academic Health Center, through didactic teaching and guest lectures. I do miss patient care and clinical training, but I truly believe that I more effectively contribute to the improvement of the lives of children and the overall health of communities through my community-engaged work.

I believe my faculty role within the Department of Pediatrics is mutually beneficial. As I mentioned above, the work of CYFC is given additional credibility because I am a scholar. My continued involvement in CBPR and my work with CYFC are valuable to the Department of Pediatrics because community-engaged scholars and centers like CYFC incubate interdisciplinary and community collaborations and translate University research for public audiences, resulting in an increase in both the public’s knowledge and its trust in research and the University. These public stakeholders include policy makers who make higher education and health care policy and appropriations decisions, practitioners who treat our patients in the community, parents of our patients, and potential research participants, particularly those from communities of color that are increasingly required by NIH to be represented in research such as clinical trials.

I am excited to further explore this second phase of my career. I will continue to use my disciplinary expertise and passion for partnership to create, disseminate and apply knowledge to improve the well-being of children and families, prepare students for work in changing and challenged communities, and encourage policies that support the development of all children and families. In the short-term, I look to the creation of the new Children’s Hospital as an opportunity for me to help create trust bridges and collaborative research and educational partnerships between the Department of Pediatrics and the community. I also look forward to continued work in the Center for Neurobehavioral Development (in which I am a core faculty member) to enhance its capacity for public dissemination and community partnership.