



# PARTNERSHIP MATTERS

## IN HEALTH CARE, GAP BETWEEN RICH AND POOR PERSISTS, WHO SAYS

*Excerpted from an article By ELISABETH MALKIN in the November 11, 2004 Issue of The New York Times*

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Despite significant gains in medical science, disparities in public health persist between rich and poor countries, the World Health Organization (WHO) said in a report released on November 10 in Mexico City. The report, released prior to a WHO meeting of health ministers from 30 countries, called for more research into how health care is delivered. "Half of the world's deaths could be prevented with simple and cost-effective interventions," said the report. "But not enough is known about how to make these more widely available to the people who need them," it continued. The study said that inadequate health systems in developing countries had been a constraint in global programs to fight AIDS, tuberculosis and malaria. "Countries with few resources struggle with creaking infrastructure, inadequate financing, migrating doctors and nurses and lack of basic information on health indicators," the study's authors concluded.

The study pointed to market reforms in the health sector, promoted by the World Bank in the 1980's, as one reason for steadily weakening public health systems in developing countries. The push toward privatization might have accentuated disparities in the health care available to rich and poor, the report said. It also pointed to "gross inequities in the research process at both global and national levels" and said treatments in the developing world must be tailored to local conditions. For example, the report cited a study in Haiti that found that babies born to mothers treated with antiretroviral drugs to prevent the transmission of H.I.V. might then die of congenital syphilis. A second report released by the Global Forum for Health Research, a Geneva-based nonprofit group, found that spending on health research rose from \$84.9 billion in 1998 to \$105.9 billion in 2001. Despite this, there has been little headway in closing the gap between rich and poor countries in financing for research into the infectious diseases that disproportionately affect developing countries, like malaria and tuberculosis, the report said.

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## MICHAEL MOORE'S NEXT TARGET: US HEALTH CARE

*Excerpted from an article by Bruce Japsen in the September 30, 2004 issue of*

*The Chicago Tribune*

The latest buzz in the health-care industry has nothing to do with new drugs or medical treatments. It's all about moviemaker Michael Moore and where he's lurking these days. Some of the nation's biggest drug manufacturers and health insurance plans confirm they have issued warnings to their sales representatives and other employees in recent weeks, telling them to be on the lookout for the shaggy filmmaker in his trademark baseball cap. And, under no circumstances, are they to talk to Moore.

The industry's red alert was prompted by word that Moore plans to aim his camera lens at the health-care industry, much as he did with other targets, most recently President Bush in "Fahrenheit 9/11." The \$100 million box office documentary-style film presented Bush's war on terror as ill-advised and corrupt, angering the president's supporters while drawing cheers from Bush foes. The planned movie, tentatively titled "Sicko," is expected to focus on health-care industry business practices, specifically those of the managed-care and pharmaceutical industries, which have both been mentioned in Moore's recent speeches and interviews, his spokesman said.

[http://www.chicagotribune.com/business/chi-0409300280sep30\\_1\\_6096839\\_story](http://www.chicagotribune.com/business/chi-0409300280sep30_1_6096839_story)

## MESSAGE FROM OUR EXECUTIVE DIRECTOR



Much of the work of Community-Campus Partnerships for Health and our members centers around changing organizations – whether changing the curriculum of health professional schools to be more community-based, changing the priorities and processes of funding agencies to embrace community-based participatory research, or changing the culture of academic institutions to encourage and support authentic partnerships with communities, for example. What can we learn from the organizational change literature that can help us be more strategic and effective in our efforts? Kotter’s model of organizational change has captured our attention because it is widely accepted, it forms the basis of an emerging model of change in higher education, and it has been successfully used to describe the actual change process in a variety of contexts. Kotter describes eight essential steps to achieve sustained organizational change. We encourage you to take a moment to reflect on the work you are doing to change the status quo, to change the system. Have you considered these steps and how critical they may be to your success? Have you discussed these with your partners? Have you anticipated them and developed a strategy for putting them in place?

**1: Establish a need for change and a sense of urgency.** A compelling need and sense of urgency help to catapult a group into action and to convince key individuals to take the proposed changes seriously. Why is the change you are working towards so critical? How is it – or can it – be linked to the strategic priorities and directions expressed by the organization you seek to change?

**2: Form a powerful guiding coalition and equip it with resources.** Who is involved in the change effort? Their positions, their level of respect and authority, their level of involvement and support is absolutely critical to success. Who are the opinion leaders and how might you engage them? What resources are needed to achieve change and how might they be obtained? Are there additional people or organizations that could bring knowledge, political savvy, money or other resources to the table?

**3: Create a clear vision and plan for achieving and evaluating achievement of vision.** According to Kotter, “Whenever you cannot describe the vision driving a change initiative in 5 minutes or less and get a reaction that signifies both understanding and interest, you are in trouble.”

**4: Communicate the vision.** How are you communicating your vision of the future, its rationale and the steps needed to get you there? Are you framing your vision in language that will resonate with the organization’s decision makers? Is the vision being consistently communicated by many different people?

**5: Empower others for broad-based action.** Stakeholder buy-in is of paramount importance in any change process. Who are the stakeholders in your work? How are you engaging and involving them in the change process?

**6: Plan for and create short-term wins.** Colleagues will likely view the proposed changes more positively if they see evidence that the changes are having a positive impact, even if it is a modest one. Are you documenting these successes and communicating them effectively?

**7: Consolidate gains and produce more change.** At this point, tangible and significant changes should be evident and should build upon each other.

**8: Anchor new changes in the culture.** A change is not considered anchored until it becomes “the way we do things around here.” This requires infrastructure, resources and ongoing dialogue and reinforcement of the changes. How are you telling the story of how one success has led to another until it seemingly has a life of its own? How is the new reality being conveyed broadly and consistently? Kotter’s change model provides a simple but helpful framework for thinking through these issues. As we work individually and collectively to create new realities, we hope that CCPH – through this newsletter, discussion groups, conferences, the website and other venues — provides a forum for sharing experiences; understanding what works, what doesn’t and why; and renewing our enthusiasm and commitment to keep moving forward to achieve our goals.

**Selected Resources:** 1. Bencivenga, Jim. John Kotter on Leadership, Management and Change. *School Administrator*. v59 n2 p36-40 Feb 2002. 2. Kotter JP. *Leading change*. Boston: Harvard Business School Press, 1996. 3. Eckel, P. D. Assessing change and transformation in higher education: an essential task for leaders. *Metropolitan Universities*, 13(2), 80-93, 2002.

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The Global Forum, which will hold its own meeting parallel to the WHO conference, said that less than 10 percent of spending on health research goes to study 90 percent of the world’s diseases. “Very few infectious diseases are getting sufficient attention,” said Stephen Matlin, the group’s executive director. “They remain neglected diseases.” Pharmaceutical companies account for 48 percent of the spending for medical research, reflecting in part the increased cost of bringing a drug to market. The public sector, led by rising budgets at the National Institutes of Health in the United States, spends 44 percent of all research funds. Private foundations and universities account for the other 8 percent. Pharmaceutical companies are reluctant to release information about their research, Mr. Matlin said, but the evidence is that much of their spending goes to developing therapies for noncommunicable diseases prevalent in wealthier countries. Mr. Matlin pointed to mergers that have left the industry in the hands of a few companies and speculated that “it may be that larger companies are getting less innovative.” “Our direct concern is to see an increase in spending on infectious diseases in low- and middle-income countries and to change priorities,” he said.



## MEMBERSHIP MATTERS



### Give the Gift of CCPH Membership

During the holidays it can be difficult to find that unique gift that keeps giving throughout the year to a valued friend or colleague. A membership to CCPH is a great way to do both! And it's easy! To give the gift of membership, you can visit us online at <http://depts.washington.edu/ccph/members.html#BecomeAMember> to learn about the different ways to join or renew an existing membership. If you have any questions about membership processing, the status of your membership or about which membership is the right gift, please contact us at [ccphuw@u.washington.edu](mailto:ccphuw@u.washington.edu) or (206) 543-8178.

### Fall "Member-Get-A-Member" Campaign!

More CCPH members means a diversity of viewpoints, ideas and perspectives and a stronger voice to influence policies that affect community-campus partnerships. When you recruit new members you'll also reward yourself. When you recruit a new CCPH member, both you and the new member will be entered into a drawing for \$100 CCPH dollars. These dollars can be used to purchase CCPH products, such as publications, registrations for CCPH events and additional memberships. In addition, the CCPH member who recruits the most new members will receive \$150 CCPH dollars! Start recruiting now - this special ends on January 30<sup>th</sup>, 2005!

Just refer your colleagues to join online by credit card: <http://www.regonline.com/eventinfo.asp?EventId=8776> or by check: [http://depts.washington.edu/ccph/pdf\\_files/Jan2004.membbrocpdf.pdf](http://depts.washington.edu/ccph/pdf_files/Jan2004.membbrocpdf.pdf)

Make sure the new member enters your name in the application section, "How did you hear about CCPH?" If you have any questions, or would like us to send you some CCPH membership brochures, please contact us at (206) 543-8178 or [ccphuw@u.washington.edu](mailto:ccphuw@u.washington.edu).

## 4TH ANNUAL CCPH AWARD

### Call for Nominations - Deadline: Dec. 8!

The CCPH Award recognizes exemplary partnerships between communities and health professional schools that build on each other's strengths to improve health professional education, civic responsibility, and the overall health of communities. Partnerships may nominate themselves and need not be members of CCPH. Nominations from any country or nation are welcome. For more details and submission guidelines, see <http://depts.washington.edu/ccph/awards.html>.



*Partnership representatives from the Galveston County Community Health Access Program receiving the 3rd Annual CCPH award at this year's CCPH conference in Atlanta, Georgia that took place October 6-10, 2004.*

For more information on past CCPH Annual Award Winners, visit <http://depts.washington.edu/ccph/awardsrecipients.html>

## Clinical Prevention and Population Health Curriculum Framework Released

The framework is the initial product of the Healthy People Curriculum Task Force formed to accomplish the Healthy People 2010 goal of increasing the prevention content of clinical health professional education. Community-Campus Partnerships for Health has been serving as a resource to the Task Force, represented by CCPH executive director Sarena D. Seifer and CCPH senior consultant Suzanne Cashman. The full-text article and one of three accompanying editorials appearing in the December 2004 issue of the American Journal of Preventive Medicine is available for free online at <http://www.ajpm-online.net/> To learn more about the Task Force, visit <http://depts.washington.edu/ccph/healthypeople.html>

To put the curriculum framework into practice, we recommend the CCPH publication, "Advancing the Healthy People 2010 Objectives through Community-Based Education: A Curriculum Planning Guide." For more information, visit <http://depts.washington.edu/ccph/guide-healthypeople.html>



## SUBMISSION GUIDELINES

We welcome announcements, comments and questions from you! Please forward them to the PM Editor at [ccphpm@u.washington.edu](mailto:ccphpm@u.washington.edu). Below are some simple submission guidelines:

- Please limit announcements and questions to not more than 150 words. As for articles and editorials, not more than 250 words;
- Provide the names of all authors, their current institutional affiliations and/or photos;
- Explain all abbreviations and unusual terms when first used.





## UPCOMING EVENTS!

### CCPH SPONSORED EVENTS

For more event listings, see CCPH's website at <http://depts.washington.edu/ccph/conferences.html>

**March 1-3, 2005: Visit the CCPH exhibit at the 19th National Conference on Chronic Disease Prevention and Control: Health Disparities: Progress, Challenges, and Opportunities** in Atlanta, Georgia. This conference will focus on efforts to eliminate disparities and will explore more rigorous approaches for accomplishing the Healthy People 2010 objectives. The major goal of the conference is to accelerate the rate of progress in improving the lives for those at highest risk for poor health, including racial and ethnic minorities, and low-income and less educated populations. To learn more about the CDC conference, visit <http://www.cdc.gov/nccdphp/conference>.

• **3-5, 2004: Community Health Solutions- Keeping the Drive Alive**, the second joint conference of the Association for Community Health Improvement (ACHI) and Communities Joined in Action (CJA) in Tampa, Florida. CCPH will be facilitating an interactive workshop entitled "Health Institutions as Economic and Community Anchors: Case Studies and Practical Strategies" at the conference. Visit the web site for the latest information and on-line registration: <http://www.communityhlth.org/communityhlth/conference/annual.html> or <http://www.cjaonline.net>. To learn more about the project on which the presentation is based, visit <http://depts.washington.edu/ccph/anchors.html>

### OTHER EVENTS

**December 7-8, 2004: Diabetes Education Partnership Meeting** in Atlanta, Georgia. The National Diabetes Education Program (NDEP) announces its fourth Partnership Network meeting, "Linking Hands Linking Partnerships, LINKS: Learn to Implement NDEP's Knowledge and Successes". The meeting will consist of general plenary sessions, skills-building break out sessions, interactive activities, and exhibits. <http://www.ndeppn2004.org/>

• **7-8, 2004: Tenth Annual Maternal and Child Health Epidemiology Conference** in Atlanta, Georgia. Maternal and Child Health (MCH) Epidemiology conference organizers invite you to join MCH professionals in sharing experiences, enhancing knowledge, and generating new ideas for improved MCH data use and informed policymaking. [http://www.cdc.gov/reproductivehealth/MCHEpi/2004/04\\_mchepi\\_about.htm](http://www.cdc.gov/reproductivehealth/MCHEpi/2004/04_mchepi_about.htm)

**January 4-6, 2005: Continuing Education In Health Promotion Course Offerings: Systematic Review and Evidence Mapping** in Houston, Texas. This course prepares participants to evaluate the quality of published reviews and to assess and summarize research findings from sets of studies defined by a conceptual framework. <http://www.sph.uth.tmc.edu/cehp>

• **8-12, 2005: The American Correctional Association Winter Conference** in Phoenix, Arizona. Workshops include: 'Updates on Public Health/Corrections Collaborations for Infectious Diseases'; 'Planning for Discharge of HIV Inmates: A Program that Works'; 'Community Based Partnerships and Outcome Based Intervention Strategies for Juvenile Offenders'; 'A Call to Justice - Corrections and People of Color, the Physically and Mentally Challenged'; 'Working with Juvenile Substance Abusers: The Ohio Approach'; 'Implementing the Action Steps from the Surgeon General's Call to Action: Jails'. <http://www.aca.org/conferences/winter05/planning.asp>

• **10-14, 2005: Continuing Education In Health Promotion Course Offerings: Intervention Mapping** in Houston, Texas. Intervention Mapping (IM) offers a step-by-step program to make theory practical and for creating effective interventions, using the best information from the behavioral and social sciences. <http://www.sph.uth.tmc.edu/cehp>.

• **13-15, 2005: Civic Education Conference** in Reno, Nevada. <http://www.civicedconf.org/practice.html>

• **18-20, 2005: International Conference: Education for a Sustainable Future** in Ahmedabad, India. <http://www.cceindia.org/esf>

**March 3, 2005: FREE WEBCAST on Health Disparities & The Body Politic: Policy, Research, Data, & Government Responsibility.** First of three international symposia sponsored by the Harvard School of Public Health. For free registration & information on accessing free webcast, see website at: <http://hsph.harvard.edu/disparities>.

## ANNOUNCEMENTS

**National Drunk and Drugged Driving Prevention Month, December 2004** Alcohol-related motor vehicle crashes kill someone every 30 minutes and nonfatally injure someone every two minutes. Drugs other than alcohol (e.g., marijuana and cocaine) have been identified as factors in 18% of motor vehicle driver deaths. Other drugs are generally used in combination with alcohol. National Commission Against Drunk Driving - <http://www.3dmonth.org/index.cfm> CDC - <http://www.cdc.gov/ncipc/factsheets/driving.htm>

### Participate in a Scaling Up Youth Voice Survey

The information collected from these surveys will be used to assist and encourage organizations, schools, and communities in their efforts to involve young people in meaningful, positive decision-making roles and activities. To take the survey, visit: <http://www.surveymonkey.com/s.asp?u=23894687695>

**The National Health Service (NHSC) Ready Responder Commissioned Officer Program Seeking New Sites** The program is currently looking for new sites that currently utilize community health nurses who can utilize a community health nurse at little or no cost to their organization. Please contact Felice Vargo, NHSC Consultant at (317) 826-9390.

**January-April 2005 Online Course - Spanish for Health Professionals - Deadline: Dec. 17, 2004** The Office of Continuing Education at the University of North Carolina School of Public Health is pleased to announce "Spanish for Health Professionals-Parts I and II." Part I: January 12-April 15, 2005 and Part II: January 12-April 15, 2005. <http://www.sph.unc.edu/oce/spanish>

**2005 Global Health Electives & Scholarships** Four or eight week electives in Bolivia, Ecuador, India, Mexico and South Africa are now open for applications. Electives open to medical, pre-medical, nursing and other health science students, as well as RNs, PHNs, PAs, EMTs and gap year pre-meds. <http://cfhi-news.c.topica.com/maacL4JabaZofaaaaabaeQytn/>

**Google Inc. Adds a New Search Service Aimed at Scientists and Academic Researchers** Google Scholar, is a result of the company's collaboration with a number of scientific and academic publishers and is intended as a first stop for researchers looking for scholarly literature like peer-reviewed papers, books, abstracts and technical reports. The new Google service includes a listing of scientific citations as well as ways to find materials at libraries that are not online. <http://scholar.google.com/>

**Health Leadership Program Offered in Canada** The 2005 offering of the University of Toronto's Health Leadership Program begins February 7, 2005. This program helps senior health care executives and clinicians address the system's challenges by translating their leadership potential into leadership ability. <http://www.rotmanexecutive.com/hlp>

## GRANTS ALERT!

### Grants to Expand Substance Abuse Treatment Capacity in Targeted Areas of Need - Deadline: Jan. 13, 2005

The purpose of the grants program is to expand and/or enhance the community's ability to provide a comprehensive, integrated, and community-based response to a targeted, well-documented substance abuse treatment capacity problem and/or improve the quality and intensity of services. [http://www.samhsa.gov/grants/2005/nofa/ti05003\\_TCE.aspx](http://www.samhsa.gov/grants/2005/nofa/ti05003_TCE.aspx)

**Interdisciplinary Training Grants: Behavior, Environment and Biology - Deadline: Jan. 14, 2005** The grant will support the establishment of innovative programs that provide formal coursework and research training in a new interdisciplinary field to individuals holding advanced degrees in a different discipline. <http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-05-010.html>

**Research Grants To Prevent Unintentional Injuries - Deadline: Jan. 25, 2005** A few of the purposes of this program are to build the scientific base for the prevention and control of fatal and nonfatal injuries and related disabilities. <http://a257.g.akamaitech.net/7/257/2422/06jun20041800/edocket.access.gpo.gov/2004/04-24025.htm>

### Grants for Native American and Native American Caregiver Support Program - Deadline: Jan. 31, 2005

Eligible applicants: Native American tribal governments (Federally recognized) The goal of these programs is to increase home and community based services to older Indians and Alaska Natives which respond to local needs and are consistent with evidence-based prevention practices. <http://www.fedgrants.gov/Applicants/HHS/AoA/CM/HHS-AoA-05-01/Grant.html>

### Civil Justice Foundation Grants - Deadline: Feb. 15, 2005

Grants available to progressive grassroots organizations seeking systemic change in civil justice. <http://www.atla.org/foundations/civiljus/grants.aspx>

**Family Planning Services Grants - Deadline: March 1, 2005** This announcement seeks applications from public and nonprofit private entities to establish and operate voluntary family planning services projects, which shall provide family planning services to all persons desiring such services. <http://frwebgate3.access.gpo.gov/cgi-bin/waisgate.cgi?WAISdocID=7554891184+0+0+0&WAISSaction=retrieve>

### Youth Service America Announces the Availability of Hundreds of Grants Supporting National Youth Service (NYS) Day April 15-17, 2005

The purpose of the grants is to implement community service projects surrounding NYS Day, the largest service event in the world. <http://www.YSA.org>

## CALLS FOR SUBMISSIONS

### **Pathways to Health Professions Program - Deadline: Dec. 17, 2004**

The intent of Health Resources and Services Administration's Program is to support the continuation and development of innovative, culturally competent approaches that encourage underrepresented minority and disadvantaged students in colleges and universities, community colleges, elementary, middle, and high schools to pursue a career in a health or allied health field. <https://grants.hrsa.gov/webExternal/SFO.asp?ID=8794655C-0AB4-4FF5-8000-8609AC815C38>

### **Call for Papers for International Conference - Deadline:**

**Jan. 10, 2005** 4th International Conference on Health Economics, Management and Policy on June 2-5, 2005 in Athens, Greece. <http://www.atiner.gr>

### **Call for Conference Presentations - Deadline: March 31,**

**2005** In October 2005, the second international, trilingual conference on Health Promoting Universities will be held in Edmonton, Alberta, Canada. The conference will promote a comprehensive approach to the creation and maintenance of health-promoting universities and colleges from the perspective of people in all areas of campus life.

<http://www.nursing.ualberta.ca/homepage.nsf/all/FA0491420247FF1F87256F58006434AD> PM readers might also be interested in a paper on Health Promoting Universities that was presented at the Community-Campus Partnerships for Health conference in 2001: "Health Promoting Universities: Policy and Practice - A UK Perspective" written by Mark Dooris Department of Health Studies, University of Central Lancashire. The paper is at <http://depts.washington.edu/ccph/guide.html#Publications> (scroll down until you see CCPH Conference 2001: Commissioned Papers in the left-hand column). Mark's university also hosts a Health Promoting Universities listserv - see <http://www.jiscmail.ac.uk/lists/hpu.html> For Healthy Campus weblinks, visit <http://depts.washington.edu/ccph/links.html#HealthyCampus>

### **Peace Corps Internships - Deadline: Not specified**

The Peace Corps is seeking students interested in international health, clinical medicine, epidemiology, and health systems quality improvement. They are offering rotating internships for students (up to 3 months in length) in medical, dental, public health, nursing, and other health specialties in its Office of Medical Services, located at Peace Corps headquarters in Washington, D.C. For more information, contact Paul Jung, MD, MPH, at 202-692-1517 or [pjung@peacecorps.gov](mailto:pjung@peacecorps.gov).

## PUBLICATIONS

### **Learning from Others: A Literature Review and How-To Guide from The Health Professions Partnership Initiative (HPPI)**

This literature review, recently released by HPPI, a CCPH member, features examples of educational partnerships for K-12 schools, universities, medical institutions, community organization, and others interested in increasing minority representation in the health careers. It also displays how a variety of concepts may be applied in education-pipeline partnerships. The publication is free and can be downloaded in PDF form at

[https://services.aamc.org/Publications/index.cfm?fuseaction=Product.displayForm&prd\\_id=112&prv\\_id=127](https://services.aamc.org/Publications/index.cfm?fuseaction=Product.displayForm&prd_id=112&prv_id=127)

### **Political and Economic Determinants of Population**

#### **Health and Well-Being: Controversies and Developments**

edited by Vincent Navarro and Carles Muntaner. This new book is an extremely important compilation of papers that get directly to the root of what the social determinants of health are about. It can be seen as a companion piece to the earlier "The Political Economy of Social Inequalities: Consequences for Health and Quality of Life." <http://www.baywood.com/books/previewbook.asp?id=0-89503-279-1>

### **Electronic Newsletter on Rx Outreach**

Volunteers in Health Care is happy to support a new patient assistance program, Rx Outreach, the country's first prescription drug assistance program for generic drugs. Rx Outreach offers more than 50 different FDA-approved generic medications for health problems such as diabetes, asthma, high blood pressure, breast cancer, and depression. <http://www.rxassist.org>

### **The State of Aging and Health in America 2004**

This report assesses the health status and health behaviors of U.S. adults aged 65 and older, and makes recommendations to improve the mental and physical health of all Americans in their later years. The report includes national- and state-based report cards that examine 15 key indicators of older adult health; calls to action linked to the 15 key indicators; a spotlight on physical activity; a spotlight on the nation's health-care workforce; and state examples that highlight how states are engaging in innovative efforts to improve the health and quality of life of older Americans. [http://www.cdc.gov/aging/pdf/State\\_of\\_Aging\\_and\\_Health\\_in\\_America\\_2004.pdf](http://www.cdc.gov/aging/pdf/State_of_Aging_and_Health_in_America_2004.pdf)

### **An Approach to Studying Social Disparities in Health and Health Care**

- American Journal of Public Health, December 2004, Vol 94, No. 12. With this article, the authors propose an approach to studying and monitoring social disparities in health and health care, using prenatal care as an example. <http://www.ajph.org/cgi/content/abstract/94/12/2139?etoc>



MISSION: TO FOSTER PARTNERSHIPS BETWEEN COMMUNITIES AND EDUCATIONAL INSTITUTIONS THAT BUILD ON EACH OTHER'S STRENGTHS AND DEVELOP THEIR ROLES AS CHANGE AGENTS FOR IMPROVING HEALTH PROFESSIONS EDUCATION, CIVIC RESPONSIBILITY AND THE OVERALL HEALTH OF COMMUNITIES

