



PARTNERSHIP MATTERS

HHS REPORT FINDS HEALTH IMPROVES FOR MOST RACIAL, ETHNIC GROUPS BUT DISPARITIES REMAIN IN SOME AREAS

March 22, 2002

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HHS Secretary Tommy G. Thompson has released a new report that shows significant improvements in the health of racial and ethnic minorities, but also indicates that important disparities in health persist among different populations.

The report presents national trends in racial and ethnic-specific rates for 17 health status indicators during the 1990s. All racial and ethnic groups experienced improvements in rates for 10 of the 17 indicators. At the same time, the report also shows that despite these overall improvements, in some areas the disparities for ethnic and racial minorities remained the same or even increased.

"Our goal is to eliminate disparities in health among all population groups by 2010," Secretary Thompson said. "While we are making progress, this report shows how far we still have to go."

The report is part of Healthy People 2000, an HHS-led effort to set health goals for each decade and then measure progress toward achieving them. The indicators reflect various aspects of health and include infant mortality, teen births, prenatal care, low birthweight as well as death rates for all causes, and for heart disease, stroke, lung and breast cancer, suicide, homicide, motor vehicle crashes, and work-related injuries. Infectious diseases such as tuberculosis and syphilis are also included. The percent of children in poverty and the percent of the population living in communities with poor air quality round out the set of measures developed to allow comparisons among national, state and local areas on a broad set of health indicators.

One of the goals of the Healthy People Initiative is to reduce disparities in health. Notable progress was made in reducing the gap in syphilis case rates and stroke death rates. However, for about half of the indicators the disparities improved only slightly, and disparities actually widened substantially for work-related injury deaths, motor vehicle crash deaths and suicide.

All racial and ethnic groups experienced improvement in rates for 10 of the indicators: prenatal care; infant mortality; teen births; death rates for heart disease, homicide, motor vehicle crashes, and work-related injuries; the tuberculosis case rate; syphilis case rate; and poor air quality. For five more indicators- total death rate and death rates for stroke, lung cancer, breast cancer, and suicide -- there was improvement in rates for all groups except American Indians or Alaska Natives. The percent of children under 18 years old living in poverty improved for all groups except Asians or Pacific Islanders, and the percent of low birthweight infants improved only for black non-Hispanics.

HHS agencies are now working on Healthy People 2010, the nation's public health agenda for the current decade, and have identified a set of Leading Health Indicators that are being tracked nationwide and in states and communities. While the goals of Healthy People 2000 aimed at reducing disparities, the Healthy People 2010 plan aims at the elimination of disparities in health among all population groups.

The report, "Trends in Racial and Ethnic-Specific Rates for the Health Status Indicators: United States, 1990-1998," can be viewed or downloaded at <http://www.cdc.gov/nchs>. CDC today also will issue a related study, "Recent Trends in Mortality Rates for Four Major Cancers, by Sex and Race/Ethnicity -United States, 1990 - 1998." That study will be available at <http://www.cdc.gov/mmwr/>.

Information on Healthy People 2010 is available at <http://www.health.gov/healthypeople/>.

Information on CCPH's Health for All initiative, which promotes community-campus partnerships that advance the Healthy People 2010 objectives is available at www.futurehealth.ucsf.edu/ccph/healthforall.html

Note: All HHS press releases, fact sheets and other press materials are available at <http://www.hhs.gov/news>.

MESSAGE FROM OUR EXECUTIVE DIRECTOR

Prominent in CCPH's 5-year strategic plan is to build the capacity of communities and health professional schools to engage each other in authentic partnerships. We seek to accomplish this goal in a number of tangible ways. In this issue, I'd like to highlight two of these: sponsoring high-quality conferences and training institutes, and coaching partnerships to fully realize their potential.

Sponsoring high-quality conferences and training institutes

CCPH conference and institutes draw on our member's expertise, follow principles of adult learning, and provide plenty of opportunities for informal networking! Our annual conference is the premier training and networking event for community and campus leaders who are building in community campus partnerships, involved in health professions education or desire to improve the overall health of communities. Registration is now open for our 6th annual conference, May 4-7, 2002 in Miami. *For more information, visit futurehealth.ucsf.edu/ccph.html or contact CCPH program director Piper Krauel at piperk@itsa.ucsf.edu or by phone at 415-502-7933.*

Our annual service-learning institutes are for campus-based and community-based health professions faculty who wish to integrate service-learning into their courses. With a peer network of more than 100 alumni, a peer-reviewed article documenting our outcomes [<http://www.academicmedicine.org/cgi/content/full/75/5/533>] and a growing number of disciplines participating, the institute series is having a significant impact on the field of service-learning in the health professions. Applications are due 5/15 for this summer's institute, June 15-18 in Leavenworth, WA. For more information, visit futurehealth.ucsf.edu/ccph.html or contact CCPH program director Piper Krauel at piperk@itsa.ucsf.edu or by phone at 415-502-7933.

Coaching partnerships to fully realize their full potential.

The CCPH Mentor Network -our training and technical assistance network -is comprised of individuals from higher education, health professions, and community-based organizations who have experience, expertise and proven records of success in important areas related to community-campus partnerships.

Community-Campus Partnerships for Health's Mentor Network is scheduling fall trainings and consultations. If your campus or community organization is engaged in service-learning, community-based participatory research, or other community-campus partnership strategies (or wants to be!), this inter-

disciplinary team of CCPH mentors are available to give presentations, design and lead training workshops, conduct external evaluations and provide telephone or on-site technical assistance. CCPH mentors -- skilled and actively involved in such areas as service-learning, community-campus partnership building, leadership development, faculty development, program evaluation, strategic planning and fundraising --can help you meet your goals and fully realize your partnership's potential.

Here are just a few examples of Mentor Network activities:

In January 2002, Mentor Pat Bailey, professor emeritus at the University of Scranton, facilitated a 2-day training workshop at Hunter-Bellevue School of Nursing in New York City. The workshop focused on strategies for developing and sustaining urban community-campus partnerships. Hunter has received a grant to develop a community-based nursing education curriculum. Pat, along with CCPH staff, will provide ongoing consultation.

In April 2002, Mentor Annette Canfield from the Center for Healthy Communities in Dayton, OH will facilitate a 2-day training workshop for faculty, students and community partners at the University of Kentucky. The goal: to develop an interdisciplinary service-learning partnerships that address the health needs of underserved communities and work toward eliminating health disparities.

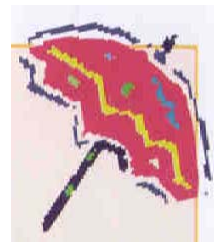
In May 2002, Mentor Lorine Spencer, faculty from Georgia State University will be working with the Yakima Valley Farmworkers Clinic in Washington State to facilitate a partnership involving high schools, colleges and universities. The goal: to increase the number of underrepresented minorities from the Yakima Valley that pursue higher education and health careers.

For more information and training scenarios, visit <http://futurehealth.ucsf.edu/ccph/mentor.html>

To schedule a training or consultation, or for more information, contact CCPH Mentor Network coordinator Rachel Vaughn at rvaughn@u.washington.edu or by phone at (206) 543-8010.



**Join us at the 6th Annual Conference
May 4-7, 2002 in Miami, FL**
For more information, visit <http://www.futurehealth.ucsf.edu/nationalconference.html>.
To register, visit: www.meetingmatters.com



MEMBERS IN ACTION!

Dear CCPH members,

One of the concerns we hear from community partners is that community agencies invest time and energy to work with service-learning students, only to have the students disappear after a quarter or semester. Then, they have to retrain a new batch of students, or deal with filling the void that is left when the students are gone.

Several months ago, we asked CCPH members to share what they have done to successfully overcome this challenge. Below is a compilation of their responses. Thanks to everyone who responded!

Our institution has used a couple of approaches, one is that the students have set up their own (with institutional support) community service projects which have boards or steering committees and recruitment of new students from each incoming class. In this way, several projects to provide health care to homeless and other underserved populations have been sustained for as long as 12 years. The other approach for activities which are more curriculum related is take on projects that community programs want to do, but can't within their limited resources and to try to leave them with a product, i.e., health education materials, when the student work is finished. We also assume responsibility for a large part of the preparation of our students so that it is not such a burden to the community programs.

Judy Lewis, LewisJ@NSO.UCHC.EDU
 Director, Community Based Education
 Department of Community Medicine
 University of Connecticut School of Medicine
 phone (860)679-3458

At Tulane University School of Medicine we require our first year students to do 20 hours of service learning as part of Foundations in Medicine I. Students in Foundations in Medicine II get bonus credit for service learning. A complete description of the program can be found in: Burrows, Chauvin, Lazarus, Chehardy "Required Service Learning for Medical Students: Program Description and Student Response, Teaching and Learning in Medicine, Volume 11, no 4, 1999, pp.223-231, including the information below.

We have struggled with the same issue in our program and had some success in solving it. We allow students to claim service learning credit hours for work performed over the summer only for those programs to which the institution has an ongoing commitment to support.

All of our service learning projects are student initiated and led. Some involve time limited activities like teaching K-12 students, so the summer is not an issue. Some, such as administering

tuberculin skin tests in homeless shelters are ongoing. Those are the types of projects that students who work over the summer continue to get credit for, including entering students (who frequently spend the summer in New Orleans taking public health classes) and students staying in town between the first and second year. We don't give credit for projects done through groups that are not directly connected to our service learning programs, though students may get credit for these during the year. All requests for credit must be pre-approved by our director of community programs. Thank you for raising this important issue and for sharing the responses.

Cathy J. Lazarus
 Director, Foundations in Medicine Program
 Tulane University School of Medicine

East Carolina University has found that a strong community partnership overcomes filling this void. The "student" projects are "owned" by the community, the students serve as a resource in partnering with the community to address the requested "need". The Interdisciplinary Rural Health Training Program at ECU has used two strategies to assist with sustaining "projects":

- 1) University faculty which are placed in the rural community to coordinate student activity across the disciplines training in those regions
- 2) A Community Advisory Council which guides the IRHTP curriculum and student activity. The "projects" may change but we have found that we have threaded foci across time spans i.e. breast cancer, agro-medicine, diabetes etc. These foci were selected by the community and they have provided students a learning opportunity, while at the same time the community has used the student project "base" to obtain financial resources for further program development.

Annette Greer,
GREERA@mail.ecu.edu

In many partnerships, the students and the group in need are the parties that need to interact for the partnership to function. When the personnel one of these parties is inevitably changing it poses the problem you raised.

The initiation and ownership of community projects by the students has had tremendous energy which can't be provided by any of the other partners in the mix. The trend toward community-based learning is not a straight line, but has a history that flows from more than one source.

Judy Lewis's answers delineate methods that represent two of those sources. They often work for prolonged periods of time; yet they can be fragile.

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MEMBERS IN ACTION!

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Her statements: "Students have set up their own (with institutional support) community service projects which have boards or steering committees and recruitment of new students from each incoming class. In this way, several projects to provide health care to homeless and other underserved populations have been sustained for as long as 12 years. The other approach for activities which are more curriculum related is take on projects that community programs want to do, but can't within their limited resources and to try to leave them with a product when the student work is finished. We also assume responsibility for a large part of the preparation of our students so that it is not such a burden to the community programs. "

It is imperative that the academic institutions take responsibility for the students' learning and reflection as well as their preparation. Passing the baton of a successful program to new students requires effort and resources on the part of the School as well as the student group.

Connecticut's program provides especially generous institutional support and has come to grips with turnover, but the School's "presence" necessarily reduces the autonomy and responsibility of student-owned projects. Students who first see themselves as change agents may come to feel that they are "just students" after all. If that happens, new recruitment may falter, and an important community constituency may be disappointed or become disillusioned. Usually, the School takes the hit.

Agency-partners are often secondary intermediaries and there are actually four parties to deal with, rather than three. Students; Academia; Agency; and the "public in need." That implies a lot of potential for conflicting objectives. CCPH wouldn't need to exist if that were not the case.

Finally, in our medical school, until recently most of the community learning has been "student-owned and operated" and has had its consequent ups and downs. A successful attempt to formalize their activities in the 1980's met with mixed results and student interest waned, but in the long run, formalization brought grants that generated a real presence and influence of the University in communities that needed help and got it. Many are now independent of the need for the University and its students, the "founders" of the partnerships.

In recent years our School, like Connecticut, has initiated short-term scholarly activities based in the community with partner-agencies or groups for interested students. These promise less and often yield more than the broader projects initiated by activist students of the past. Students in this program prepare for their study and learn about illness in populations and the environmental and social soil the illnesses grow in. They address questions with potentially achievable answers, based on preliminary estimations of the yield. Funding for this effort is hand-to-mouth as yet.

Some lessons in all this are:

1. It is important for students in the helping professions to learn in the communities whose citizens they will inevitably serve.
2. It takes a lot of work on all parties' part.
3. Students need some "ownership" to stay involved and to pass the baton.
4. Schools need to teach, yet stand side-by-side with their students
5. All the cards must be on the table in communication with community constituencies, and it must be a continuing process.
6. Partnerships should be formalized if at all possible, with written "understandings."
7. Grant support is necessary but not sufficient.

Lewis Lefkowitz
LBLJR@aol.com

Our program has a linked course series through the UCLA School of Public Health and Department of Psychiatry that trains the students who serve as interns for our program. A core faculty group, on which one of my staff members serves, oversees this three-course series that has been institutionalized so that we are assured at least 100 new trained students per year, each of who will spend six months minimum as an intern for our program.

Allen Miller
amiller@copepartners.org

Dear CCPH,

I'm an assistant professor at the Medical College of Wisconsin, and I'm working on a project that involves assessing undergraduate medical school community health curricula. Specifically, I'm interested in 1) how many medical schools offer a community health curriculum, 2) if the curriculum is part of clerkship/rotation or if it is a free-standing course, and 3) what the goals/objectives of the curriculum are.

If you belong to a medical school that offers a community health curriculum I'd greatly appreciate hearing from you. If your community health curriculum is fairly extensive, you can direct me to an appropriate web page and I can get the information myself. I will gladly post a summary of my findings on this listserv.

Thank you in advance to all of you who reply to this information request,

Barbra Beck, Ph.D.
 Department of Family and Community Medicine
 Medical College of Wisconsin
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UPCOMING EVENTS IN 2002!



CCPH Sponsored Events

April 4-5-The 2nd Annual Statewide Conference "Civic Engagement Today & Tomorrow: Critical Issues in a Changing World," cosponsored by CCPH and Massachusetts Campus Compact in Amherst, MA. *For more information, email Barbara Canyes at barbara.canyes@tufts.edu or Gretchen Daggett at GVDAGGETT@aol.com or visit <http://www.tufts.edu/as/macc/>*

April 17-19-The 5th Annual Continuums of Service conference, "Activists, Intellectuals, Servants Together: Engaging Campuses with Communities," cosponsored by CCPH and the Western Region Campus Compact Consortium in Portland, OR. CCPH is sponsoring a pre-conference workshop. The agenda will include an opportunity for Western Regional CPPH members and

prospective members to meet. *Online registration at <http://www.ac.wvu.edu/~campcomp/cos>*

May 4-7-CCPH's 6th annual conference, Hotel Intercontinental, Miami, FL. The conference will focus on the PARTNERSHIP as the leverage point for change in communities and higher educational institutions. *Details available at <http://futurehealth.ucsf.edu/ccph/nationalconference.html>*

June 15-18-6th annual introductory service-learning institute: at the Sleeping Lady, Leavenworth WA. (Cascade Mountains)

Applications are due by Wednesday, May 15, 2002. *To obtain applications, visit <http://futurehealth.ucsf.edu/ccph/projects.html#fsli> - or call CCPH's fax-on-demand service at 1 (888) 267-9183 and select document # 206. To learn more, visit our website at futurehealth.ucsf.edu/ccph.html or contact Program Director Piper Krauel at (415) 502-7933 or piperk@itsa.ucsf.edu*

Other events

The **American Association of Community Colleges** is sponsoring a series of regional service learning workshops for community colleges in 2002. The workshops will feature hands-on learning and strategies to implement service learning programs on campuses and in communities. Dates, locations, and contact information are as follows:

April 13-Sacramento City College, Sacramento, CA. *Contact: Megan Seely at (916) 650-2918 or seelym@scc.losrios.cc.ca.us*

June 12-Raritan Valley Community College, Somerville, NJ. *Contact: Lori Moog at (908) 526-1200 or lmoog@raritanval.edu*

June 14-Prince George's Community College, Largo, MD. *Contact: Betty Habershon at (301) 322-0713 or bhab@pg.cc.md.us*

These workshops are a feature of AACC's national project, Community Colleges Broadening Horizons through Service Learning, funded by the Corporation for National and Community Service. *For more information, resources, and publications, visit at <http://www.aacc.nche.edu/servicelearning>*

April 19-21- "Pathways to Change:" International Conference on Transforming Math and Science Education in the K16 Continuum, at the Doubletree Hotel, Crystal City, Arlington, VA. Sponsored by the Science, Technology, Engineering and Mathematics Teacher Education Collaborative Lead Institution: University of Massachusetts Amherst. Pathways to Change focuses on transforming college math and science teaching for all students, and especially for the future K12 teachers who will prepare the next generations of college students. Examples of such changes are inquiry-based teaching, group work (cooperative learning), alternative assessment, and the use of educational technology. Another example is the use of peer teaching or working with younger students to improve student learning and to stimulate thinking about teaching as a career. *For more information and to register: visit www.stemtec.org/pathways or email pathways@stemtec.org or call (413)545-0453; or fax (413)545-1671.*

April 25-26-The Changing Health Care System: An Anglo-American Dialogue, New York City Symposium. Co-Sponsored by The New York Academy of Medicine & The Royal Society of Medicine. In spite of the immense differences among the world's various health care systems, many industrialized nations consider financing, access, and quality to be the most important issues in health care delivery. This conference will bring together senior representatives of the health care system, economic, political, and education infrastructures of the United Kingdom and the United States to compare and contrast the British and American systems in order to benefit from the experience of each of these two cultures. This event will focus on universal access to health care, financing health care delivery, quality of care, and the changing role of the physician. *For further information, please call the medical education office at (212) 822-7273, or the Program Coordinator, Janice Flecha at (212) 822-7204, fax (212) 822-7338, or via e-mail at jflecha@nyam.org. See the full program and register for the event online at: <http://www.nyam.org/events/hcaresystem.shtml>*

May 17-18- "Public Health Ethics: Towards a Research Agenda" is an International symposium and workshop, at the Victoria College University of Toronto, Canada. This interdisciplinary symposium and workshop is the first of its kind to bring together those involved in public health, bioethics, law and policy-making. With plenary sessions by key figures followed by participatory workshops, the symposium aims to (1) explore major issues in public health ethics; and (2) identify a research agenda for this emerging field. This meeting represents a unique opportunity to forge an international dialogue about public health ethics that will continue well into the new millennium. *For more information and registration materials, please contact: Alison Thompson at (416) 813-1500 ext. 4418 or email at ali.thompson@utoronto.ca*



ANNOUNCEMENTS

Faculty Position in Social and Behavioral Interventions School of Public Health, University of California, Berkeley

The School of Public Health at the University of California at Berkeley invites applications for a new faculty position at the assistant professor level (tenure-track) with research interest and expertise in the design, implementation, and evaluation of community-based interventions in multicultural communities.

Given the racial and ethnic diversity of the San Francisco Bay Area, the prospective candidate will be in an excellent position to collaborate with state and local agencies and community-based organizations in the development of programs and policies to improve the health status of California residents. In addition to mentoring master's degree and doctoral students in this area, it is anticipated that the prospective candidate will work to stimulate research/training collaborations with faculty members in other units in the School of Public Health and the wider Berkeley campus. The position is available beginning Fall 2002.

QUALIFICATIONS-Candidates for this position must have a Ph.D. or equivalent in social psychology, psychology, sociology, epidemiology, or related disciplines in the social sciences or public health, with additional training and expertise in the design, implementation, and evaluation of community-based interventions in diverse populations. The ideal candidate will have multidisciplinary training in the social and health sciences.

DESCRIPTION OF DUTIES-Conduct research in the design, implementation, and evaluation of community-based interventions in multicultural communities. Assist in fostering research and training collaborations among colleagues in the School of Public Health and the Departments of Social and Behavioral Sciences on the Berkeley campus.

Develop and teach upper division and graduate level courses in health and social behavior, with a particular focus on the design, implementation, and evaluation of community-based interventions in multicultural communities. Teach and participate in other courses and seminars in the School of Public Health. Serve as an advisor to students enrolled in the Masters and Doctoral programs in the School of Public Health. Supervise doctoral and postdoctoral research in the School of Public Health. Participate in the Health and Social Behavior Program.

Perform appropriate committee and professional service within and outside the University. Assist in fostering collaborations with state and local agencies and community-based organizations in the development of programs and policies to improve the health of California residents.

APPLY-Applicants are invited to submit a statement of interest and qualifications, detailed curriculum vitae, bibliography, and

the names, addresses, and telephone numbers of three references to: *William A. Satariano, Ph.D., MPH, Professor of Epidemiology and Director, Health and Social Behavior Program, School of Public Health, University of California, Berkeley, Berkeley, CA 94720. Deadline for the submission of applications is April 30, 2002.*

Journal of The American Medical Women's Association (JAMWA) Seeking New Editor-In-Chief

Wendy Chavkin, MD, MPH, has recently announced her decision to resign as Editor-in-Chief of JAMWA, a position she has held since 1994. Dr. Chavkin, a Professor of Clinical Public Health and Obstetrics and Gynecology at Columbia University's Mailman School of Public Health, is stepping down from JAMWA to devote more time to policy research on reproductive health. AMWA has recently launched a search for a new Editor-in-Chief. *A copy of the position description can be viewed at http://www.amwa-doc.org/publications/JAMWAed_search.htm*

UCSF Center for Lesbian Health Seeks 2002 Fellowship Applicants

The UCSF Center for Lesbian Health Research is offering two paid fellowship positions for undergraduate or graduate students interested in the health and wellness issues of lesbians, bisexual women, and transgendered individuals. **Deadline for submitting applications is April 15, 2002.** Applicants will be notified no later than May 1, 2002.

Faculty members at the UCSF Center conduct research, education, training and public service to enhance clinical practice and inform policy makers about the health care needs and delivery of services to lesbians, bisexual women and transgendered individuals and their families. Patricia Robertson, MD, UCSF professor of obstetrics and gynecology co-directs the Center. *For more information or to request an application, contact Sue Dibble at sdibble@itsa.ucsf.edu or Betty L. Sullivan at BettyS@sullcomm.com (415) 826-3154 x 25.*

California Health Care Fellowships

Application Deadline is May 21, 2002.

The CHCF Health Care Leadership Program is a two-year fellowship designed to offer clinically trained health care professionals the experiences, competencies, and skills necessary for effective vision and leadership in the health-care system. The program is sponsored by the California Health Care Foundation (<http://www.chcf.org/>) and administered by the Center for the Health Professions at the University of California, San Francisco. *(continued on next page)*

ANNOUNCEMENTS

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Twenty-five health-care professionals with strategic leadership roles in California's health care system are selected annually for the program. Fellows participate in a part-time program designed to allow them to continue in their current management role while receiving focused and intensive training.

The program seeks to recruit a diverse class of fellows from a variety of settings such as health plans, community clinics, group practices, hospitals, academic medical centers, and public health settings. The program is open to professionals in the fields of medicine, nursing, dentistry, pharmacy, and mental health who live and work in California.

Selection criteria, participation requirements, and application guidelines and forms can be downloaded from <http://futurehealth.ucsf.edu/futureleaders/>.

NIH Seeks Comments on Data Sharing Policy

The National Institutes of Health (NIH) is requesting comments from the research community on its proposed data sharing guidance. NIH policy will require all applicants for research awards to submit a data-sharing plan with their applications, or to state explicitly why data sharing is not possible. The proposed statement is consistent with long standing NIH policies promoting open communication and sharing of research data and tools, to the maximum extent possible and consistent with protection of the confidentiality of human

subjects, intellectual property, or other. *Information: Stephen Heinig at sheinig@aamc.org or call (202)828-0488. The complete story is at http://www.aamc.org/advocacy/washhigh/02mar08/_5.htm.*

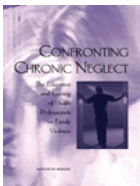
Visiting Scholars Sought in Denver

The Program of Excellence at the MSPH program at the University of Colorado Health Sciences Center seeks visiting scholars and consultants. It offers a five-year grant from the Colorado Commission on Higher Education to increase recruitment and retention of a more diverse faculty and student body. There are monies for visiting scholars who can come for up to three months to teach faculty and students on this topic or on public health topics related to issues of minority health, access to care, cultural competence, diversity within our curricula, or other subjects related to diversity and public health.

The grant also provides for consultants in the area of diversity and public health as well as in the areas of distance education and the development of specialty tracks. The first track will be developed in health promotion.

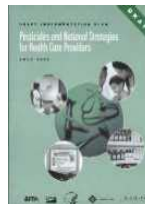
Visitors and consultants are needed as soon as possible, as well as for over the next 4 1/2 years. Please send your CV and a note about your availability and interests if you are interested. *For more information, contact: Victoria ("Tori") Baker at Victoria.Baker@uchsc.edu or call (303) 315-0634 (v)*

PUBLICATIONS



Confronting Chronic Neglect: The Education and Training of Health Professionals on Family Violence published by the Institute of Medicine is available online as open book at: <http://www.nap.edu/books/0309074312/html/>

The 2002 Directory of Training Programs in Health Services Research and Health Policy is available at <http://www.academyhealth.org/directory/search.cfm>. With more than 115 programs profiled, this new, updated version responds to a growing interest in health services research and health policy and increasing demand for information about Post Baccalaureate certificates, Master's programs, Doctoral programs, and Postdoctoral programs in these fields. It has been expanded to include health policy research programs and the health policy tracks in public policy programs as well as the core health services research programs included in our two earlier editions-1997 and 1992. While the 2002 edition does not include international programs, other than the eight Canadian programs profiled, future editions may be expanded to include programs outside North America. Print copies will be available this spring. *To purchase a copy please send an e-mail to hsrdirectory@ahsrhp.org.*



The National Environmental Education & Training Foundation (NEETF) is pleased to announce the availability of a new publication that provides a snapshot of how nursing professionals successfully carry out environmental health activities. **'Nurses and Environmental Health: Success Through Action; Illustrations From Across the Nation,'** presents examples of effective initiatives that can serve as models. Developed in partnership with the Agency for Toxic Substances and Disease Registry (ATSDR), this publication is intended as a source book for advancing environmental health activities to improve health care in the United States. Currently available as a draft, the final version is expected in autumn 2002.

View the draft publication at <http://www.neetf.org/Health/publications.shtm>. For information on NEETF's Health & Environment Program, visit <http://www.neetf.org/Health/index.shtm>

GRANTS ALERT!

Starbucks Foundation Accepting Application for Literacy Grants. **Deadline: April 1 and October 1, 2002**

A program of Starbucks Coffee, the Starbucks Foundation awards Opportunity Grants of up to \$10,000 to nonprofit 501(c)(3) literacy organizations located in North America. Priority is given to organizations that serve low-income, underserved children or youth, and that have an ongoing relationship involving Starbucks and its employees. The foundation uses the following qualifying criteria in choosing projects to fund: creativity in its approach to learning; support of diverse communities; outreach to at-risk, economically underserved populations in non-traditional learning environments or as part of school-based programs; inclusiveness in its policies and practices regarding physical abilities, gender, race, age, sexual orientation, ethnic origin, or creed; and creative involvement of a Starbucks business unit and its employees.

Partner Participation involving Starbucks employees is a key criterion for opportunity grants. Proposals that receive funding must demonstrate significant engagement on the local level between Starbucks partners and the literacy organization or program. The Starbucks Foundation Web site provides ideas on how to engage Starbucks partners. For complete guidelines and qualifying criteria, visit <http://www.starbucks.com/aboutus/grantinfo.asp>. *Contact: Starbucks Foundation, P.O. Box 3824, Seattle, Washington 98124*

Ingenuity Grants Available for Multi-Sites

Multi-site RIF (Reading is Fundamental) programs are eligible to apply for the Ingenuity Grant Program to develop demonstration programs that strengthen community-focused reading programs, enhance community outreach, and foster significant collaboration. The Ingenuity Grants are one component of the partnership between RIF and Coca Cola, Inc. Read more about the RIF/Coca Cola partnership at: www.rif.org/partnership.html. Application forms must be received by RIF's national office **no later than April 8, 2002**. *Download the application materials at: www.rif.org/about/pdfs/RIFGrants.pdf.*

National Rising Scholars Award. **Deadline: April 15, 2002**

The Kellogg Forum on Higher Education for the Public Good is sponsoring up to five awards for pre-tenured faculty, young practitioners, and advanced graduate students in any discipline in U.S. higher education institutions who engage in research that explores higher education's role in serving the public good. *Details at <http://content.sciencewise.com/content/index.cfm?objectid=10097>*

Building Translational Research in Behavioral Science Primary Sponsor: National Institute of Mental Health **Deadline: April 17, 2002**

The National Institute of Mental Health (NIMH) and the National Institute on Drug Abuse (NIDA) seek to encourage the development of collaborative partnerships between scientists who study basic behavioral processes and those who study the etiology, diag-

nosis, treatment, and prevention of mental and behavioral disorders (including drug abuse and addiction) and the delivery of services to those suffering from those disorders. *Additional information can be found at <http://content.sciencewise.com/content/index.cfm?objectid=10080>*

Partnerships for Innovation (PFI)

Deadline for full proposal: May 7, 2002

The goals of the Partnerships for Innovation Program are to: 1) stimulate the transformation of knowledge created by the national research and education enterprise into innovations that create new wealth, build strong local, regional and national economies and improve the national well-being; 2) broaden the participation of all types of academic institutions and all citizens in NSF activities to more fully meet the broad workforce needs of the national innovation enterprise; and 3) catalyze or enhance enabling infrastructure necessary to foster and sustain innovation in the long-term. *For details, visit <http://content.sciencewise.com/content/index.cfm?objectid=10099>*

Science, Technology, Engineering, and Mathematics Talent Expansion Program (STEP). **Deadline: June 3, 2002**

The Science, Technology, Engineering, and Mathematics Talent Expansion Program (STEP) seeks to increase the number of students (U.S. citizens or permanent residents) pursuing and receiving associates or baccalaureate degrees in established or emerging fields within science, technology, engineering, and mathematics (STEM). For FY02, given the limited funding available to STEP, proposals are solicited which provide for planning and pilot efforts at academic institutions. *Details at <http://content.sciencewise.com/content/index.cfm?objectid=10481>*

Community Coalitions Invited to Apply for 2002 Drug-Free Communities Support Program

Deadline: April 24, 2002

The Office of Juvenile Justice and Delinquency Prevention (OJJDP) has issued a program announcement for the fiscal year 2002 Drug-Free Communities Support Program, which it administers for the Office of National Drug Control Policy.

The complete application package can be obtained at <http://ojjdp.ncjrs.org/dfcs/> or by contacting OJJDP's Juvenile Justice Clearinghouse at (800) 638-8736 or email at puborder@ncjrs.org (Use document number when ordering: SL 000510) To obtain additional information, please contact: Lauren Ziegler at (202) 616-8988 or email at zieglerl@ojp.usdoj.gov

CALLS FOR ABSTRACT/NOMINATIONS

Collaborative Activities Between Public Health Agencies and Academic Institutions of Higher Learning

A poster session exhibiting successful community-based collaborative activities between public health practice agencies and academic institutions of higher learning will be displayed as part of the NACCHO Annual Conference in New Orleans, LA, July 10 – 13, 2002 and/or the ASTHO Annual Conference in Nashville, TN, September 10 – 13, 2002.

Abstracts for the poster session are being solicited from public health practice agencies (state and local public health agencies, managed care organizations, etc.) engaged in collaborative activities with academic institutions (universities, colleges, and schools of public health, nursing, and medicine). This includes joint population-based activities in research, technical support, education, and training. It does not include clinical residencies or rotations. All abstracts must be jointly authored by the practice setting and the academic institutions.

The poster should be a graphic representation of a project. Findings should be illustrated by displaying graphs, photographs, diagrams, and some text with key points highlighted with bullets. Complete papers cannot be posted. Only the abstracts receiving the top three scores will exhibit posters. Cash awards will be presented to the public health practice agencies contributing the abstracts that best depict the linkage between a public health agency and an academic institution. If the public health practice agency is unable to accept cash, other arrangements can be made.

The deadline for submitting abstracts is May 3, 2002. If your abstract is chosen for a poster presentation at the meeting, you will be notified via telephone by June 7, 2002. *For more detailed information or any other questions, please contact Chris Day, Council on Linkages Between Academia and Public Health Practice, (202) 898-5600, ext. 3017; FAX: (202) 898-5609; or e-mail: cday@phf.org.*

The World Confederation for Physical Therapy has issued a call for abstracts for platform, poster, and other presentations for the 14th International Congress in Barcelona, Spain, June 7-12, 2003. Categories of presentations for the Congress include research reports, special-interest reports, and professional resources, which includes computer-based programs, materials displays, and audio-visual presentations. **All abstracts must be submitted in English by Sept 15, 2002**, using the Congress abstract form, which is available at www.wcpt.org/downloads/abstcall.pdf. *For more information on the Congress and the abstract submission process go to www.wcpt.org/programme/.*

Nominations Invited for Reebok Human Rights Award

Deadline: May 31, 2002

Established in 1988, the Reebok Human Rights Award honors young people from the United States and around the world who have made significant contributions to the cause of human rights, often against great odds. The award is designed to draw positive, international attention to the awardees and to support their work in human rights. A \$50,000 grant is given to further the work of each award recipient.

Nominees must be working on an issue that directly relates to the United Nations Universal Declaration of Human Rights; cannot advocate violence or belong to an organization that advocates violence; and cannot be more than 30 years of age as of December 31, 2002. The award will be given to an individual, based on personal achievement and commitment. Women and men of all races, ethnic groups, nationalities, and religions are eligible to be nominated; groups and organizations and individuals who are deceased are not eligible.

Nomination guidelines and forms are available at <http://www.reebok.com/humanrights>. For additional information, contact: Reebok Human Rights Award Program, Reebok International Ltd., 1895 J.W. Foster Blvd., Canton, MA 02021 or call (781) 401-4910 or Fax: (781) 401-4806 or email at humanrights@reebok.com



CCPH's mission is 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.

