You are receiving this newsletter because you're affiliated with the UCSF CTSI Community Engagement Program or have contacted us for consultation, training, or resources on community-engaged research. If you’d rather not receive this bi-monthly eNewsletter, please reply to this email with a kind message to that effect.

We want to know what our readers think! Here’s our quick eNews survey – just 7 easy questions to give us feedback on this newsletter. We want to hear from you! Thanks!

Send us any information you’d like distributed next time. The deadline for submissions to the September 2009 (CE) eNews is Monday, September 14th. Now you can read archived Community Engagement Program eNewsletters.

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Click here to read about Community Engagement Program services (consultation, training, registry, linkage).

1. **Community Engagement Program Calendar**

UPCOMING GROUP CONSULTATIONS
Wednesday, July 22, 2009

No CE Consultations – All-Day CTSI Retreat

Wednesday, August 26, 2009

9:00       CE Business
           CE program faculty, staff and community members

9:30 – 12:00 Consultations

Reminder:
If you’d like to request a consultation, please use one of these links:

- For UCSF researchers: http://ctsi.ucsf.edu/ce/request/
- For community members: http://ctsi.ucsf.edu/ce/request/community.php

2. CE Program News and Announcements

- CE Honors News
  Recognition for the outstanding work of CE faculty and community members.

  Congratulations to Rena Pasick, DrPH, who has received American Journal of Health Promotion’s, Robert F. Allen Symbol of H.O.P.E. (Helping Other People Through Empowerment) Award. This award honors individuals who have made outstanding contributions to promoting cultural diversity within health promotion or who have demonstrated significant achievement in serving the health promotion needs of underserved populations. The purposes of this award are to (1) reward those who have devoted their careers to serving underserved populations and promoting cross-cultural harmony, (2) disseminate innovative and effective strategies to do this, and (3) increase the attention directed toward these efforts within the health promotion community.

- CE Publications and Broadcast News
  Recent publications by Community Engagement Program community partners and faculty.

  Dean Schillinger, MD was featured on the Radio Bilingüe program, Linea Abierta. The show, conducted in Spanish, also featured a panel of patients sharing their experiences living with diabetes, along with Javier Carrillo of the California Diabetes Program. The program covered health promoting behaviors to prevent and control diabetes and discussion on the type 2 diabetes epidemic as it affects Latinos. There was also a Q & A period at the end where callers joined the discussion from Merced, Bakersfield, Chicago, Washington State and other areas.
To hear this portion of the show, fast forward past the first 10 minutes of news/program updates.

New America Media, an ethnic media consortium, featured diabetes work of Schillinger and colleagues from the Center for Vulnerable Populations in these articles.

- Managing Diabetes with a Phone Call (New America Media)
- San Francisco Rings in With: Touch-Tone Care for Diabetes Patients
- Managing Diabetes with a Phone Call (One Viet)

Michael Potter, MD, has collaborated with staff in a variety of primary care practice settings to study interventions that aim to increase rates of colorectal cancer screening. In one study, the clinics were also partnering with a volunteer advocacy organization. These two recently published articles describe the collaborating parties, the interventions and what makes them successful.


**Offering annual fecal occult blood tests at annual flu shot clinics increases colorectal cancer screening rates.**

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☐ CE Training News

FOR COMMUNITY-BASED ORGANIZATIONS

The CE program now offers an orientation to research and evaluation: *CBOs Engaged in Research and Evaluation – Introduction to Creating Your Own Evidence.* Developed in collaboration with San Francisco State University’s Health Equity Initiative, these trainings are now available to individual community-based organizations and small groups of agency representatives. Email us to request training or learn more.

☐ CE Community Clinician Registry News

With the help of UCSF faculty and community partners, CE and the Collaborative Research Network have developed a survey to gather information about community clinicians’ practice environments, their research interests and priorities. **We now have over 475 survey responses** from clinicians who have agreed to be included in a clinician registry, the first step toward development of a practice-based research network (PBRN). Read more about the survey and learn how to participate here.
3. Partnership Snapshot – Dissemination Training Follow-Up Case Study
By Pamela DeCarlo, Dissemination Manager, UCSF Center for AIDS Prevention Studies Technology and Information Exchange (TIE) CORE and Dissemination Trainer

On February 27, 2009, Stuart Lustig, MD, MPH, Assistant Clinical Professor of Psychiatry, attended the CTSI CE Effective Research Dissemination Planning Training to develop a dissemination plan for his study on stress and burnout among immigration judges across the US.

During the breakout group at the training, Lustig’s study was used as an example, and the group helped him fill out the Dissemination Worksheet, a planning tool developed for the training (available soon on the CTSI website). He was interested in the policy implications of his study, which found that immigration judges’ burnout levels were higher than those suffered by emergency room doctors and prison wardens. Through the worksheet and group discussion, he decided that instead of trying to target policy makers such as the Department of Justice and the Federal Court System (which would be difficult) he would work with an advocacy group, the National Association of Immigration Judges, to help disseminate his findings. He also realized it would be helpful to send the results to the judges themselves, since isolation and lack of support were cited as common issues by the judges. After a UCSF Media representative presented at the training, Lustig also planned for a press release when his article came out. After the training, Lustig received ongoing consultation from one of the trainers, Pamela DeCarlo, on editing and dissemination planning.

Results?
- Lustig published two articles: an overview of the research findings and a narrative description.
- He developed a 2-page Executive Summary of the research study that included quotes from the judges. (“This job is supposed to be about doing justice. The conditions under which we work make it more and more challenging to ensure that justice is done.”)
- He worked with Kirsten Michener in the UCSF Public Affairs Office to develop a press release which resulted in coverage from a range of outlets including UCSF and the New York Times.
- He created packets with the two articles, the Executive Summary, the press release and another article about trauma among refugees, and mailed it to all 230 immigration judges in the U.S. Lustig is now receiving feedback from those judges indicating that his study may prompt significant changes in the judges’ working conditions.
4. Workshops, Conferences and Training Opportunities

- **Evidence-Based Cardiovascular Care in Clinical Practice: The PHASE Program**
  Marc Jaffe, MD, Clinical Leader, Kaiser Northern California Cardiovascular Risk Reduction Program, Associate Clinical Professor of Medicine, UCSF
  Friday, July 24, 2009
  12:00 – 1:00 PM
  Primary Care Grand Rounds
  Carr Auditorium
  San Francisco General Hospital
  
  Dr. Jaffe leads the Kaiser Northern California program that identifies and treats people at high risk for heart attack and stroke by supporting healthy lifestyles, appropriate medication use, and risk factor control, leading to a reduced burden of cardiovascular disease.

- **California Diabetes Summit: Partnering to Improve the Public's Health**
  September 2 - 3, 2009
  Radisson Hotel - Sacramento, CA
  500 Leisure Lane
  Sacramento, CA 95815
  
  Hosted by the California Diabetes Program, California Department of Public Health, and University of California San Francisco, this is a unique opportunity to get the state and national perspective regarding the immediate future for diabetes prevention and control.
  
  - Provide your feedback and insight about California's needs and priorities related to diabetes in an environment of shrinking budgets.
  - Expand your network by interacting with other diabetes professionals.

  Wednesday, September 2, 2009, 6 pm - 8 pm - Evening Networking Reception with refreshments, exhibits and raffle prizes
  Thursday, September 3, 2009, 8 am - 5 pm - Summit with plenary speakers, interactive discussions and break-out sessions
  
  Registration is now open:
  [http://www.cce.csus.edu/conferences/cdph/cds08/index.htm](http://www.cce.csus.edu/conferences/cdph/cds08/index.htm)

- **“Will it Work Here? A Decision Maker's Guide to Adopting Innovations”**
  Web Conference on Adoption of Health Service Innovation in the Era of Health Care Reform
Monday, July 27, 2009  
1:00–2:30 PM (EDT)  
Free of charge

This event, led by one of Business Week’s “Leaders of the Year,” Jeneanne Rae, MBA, is hosted by AHRQ’s Health Care Innovations Exchange. This free Web conference will address timely issues including what role innovation adoption may play in America’s health reform and whether or not health information technology is a wise investment. As the focal point for this Web conference, participants will be introduced to Will It Work Here? A Decision Maker’s Guide to Adopting Innovations to help them assess whether an innovation is a good fit or an appropriate stretch for their health care organization. Experts in change management and innovation adoption will apply the tools in the guide to demonstrate effective innovation adoption decision making. An AHRQ Innovations Exchange profile, Remote Visits by Pediatricians for Sick Children at Inner-City and other Child Care Centers/Schools Reduce Absences and Emergency Department Use, will be explored as an adoption case study. The innovation delivers primary care to a priority population, incorporates a health IT component, and has the potential to reduce emergency department visits once fully implemented. Select to register and to learn more about the Web conference.

Open

2009 NIH Summer Institute on Community-Based Participatory Research Targeting the Medically Underserved
August 2-7, 2009
Renaissance Pere Marquette Hotel
New Orleans, Louisiana

The NIH Summer Institute will address essential conceptual, methodological, and practical issues inherent in planning and conducting research on health promotion, disease prevention, and health disparities that is conducted in partnership between communities and researchers and targets medically underserved areas (MUAs) and medically underserved populations (MUPs) as defined by the Department of Health and Human Services (DHHS) Health Resources and Services Administration (HRSA). This research may include intervention research (quasi-experimental research projects that seek to influence preventive behaviors, treatment adherences, complementary behaviors, and related attitudes and beliefs). Natural experiments also may fall under the interventions rubric.

Participation by both Investigators and the Community Partners is encouraged.

Open

The American Public Health Association
137th APHA Annual Meeting & Exposition
The APHA special session, "Community-Based Participatory Research at the National Institutes of Health", will be held on November 11th. In all, over 100 sessions at the conference will report on community-based participatory research, many of them sponsored by the Community-Based Public Health Caucus (CBPHC), the "home" for CBPR within APHA. Learn more about the CBPHC at www.cbphcaucus.org.

Community-Campus Partnerships for Health is co-sponsoring the CBPHC learning institute, Building Bridges from CBPR to Policy, taking place from 1:30-5 pm on Saturday November 7. During the institute, participants who are familiar with and possibly have some experience in CBPR will learn how CBPR partnerships can promote policy change. It’s possible to register just for a learning institute if you can't make the whole conference. To learn more about the institute, visit http://apha.confex.com/apha/137am/webprogram/Session26911.html

5. Funding Announcements
Funding opportunities for T2 and community-engaged research also can be found on the CTSI Virtual Home.

☐ Lizette Peterson Homer Memorial Injury Research Grant
Applications Due: October 1, 2009

The Lizette Peterson Homer Memorial Injury Research Grant focuses on psychosocial research on injuries to children and young adults through accidents, violence, abuse, or suicide. A $5,000 annual award is open to students and faculty to support research related to the prevention of injuries in children. Students and faculty are eligible for this grant.

American Psychological Foundation
750 First Street, NE • Washington, DC • 20002-4242
Phone: 202-336-5843 • Fax: 202-336-581

☐ Pediatric Injury Prevention Student Research Award
Applications Due: October 1, 2009

The Society of Pediatric Psychology, Division 54 and CDC’s National Center for Injury Prevention and Control jointly announce a new Student Research Competition to encourage and reward quality research on issues related to unintentional injury prevention in children and adolescents. An award of $1000
will be made to the winner of the competition, and the individual selected will be named a SPP/CDC Injury Prevention Fellow.

All of the research work must have been completed while the candidate was a student. The student must be the primary (first) author. Studies that are fully student initiated, as well as those that are part of a larger funded project but for which the student assumes primary responsibility from beginning to end, may be submitted for consideration for the competitive award. Only empirical (data-based) studies will be considered.

For more information, contact Tonya Palermo, PhD at palermot@ohsu.edu.

☐ **American Psychological Foundation Cummings PSYCHE Prize**  
Applications Due: December 1, 2009

The American Psychological Foundation (APF) provides financial support for innovative research and programs that enhance the power of psychology to elevate the human condition and advance human potential both now and in generations to come. In 2004, The Nicholas and Dorothy Cummings Foundation established the Prize to recognize a psychologist whose career has expanded the role of the psychologist as a primary care provider working side-by-side with primary care physicians in the setting of organized systems of healthcare delivery. Award amount: $50,000.

For more information about award goals, eligibility criteria and the application process, see: [http://forms.apa.org/apf/grants](http://forms.apa.org/apf/grants).

Self-nominations will be accepted.
American Psychological Foundation  
750 First Street, NE • Washington, DC 20002  
P: (202) 336-5843 • F: (202) 336-5812 • Foundation@apa.org • www.apa.org/apf

☐ **Request for Proposals to Conduct Research in Patient Safety**  
Letters of Intent Due: July 24, 2009  
Full Proposals Due: December 11, 2009

The National Patient Safety Foundation’s (NPSF) Research Grants Program seeks to stimulate new, innovative projects directed toward enhancing patient safety in the United States. The Program’s objective is to promote studies leading to the prevention of human errors, system errors, patient injuries and the consequences of such adverse events in the healthcare setting. A majority of NPSF grants have been awarded to interdisciplinary teams to support research on diverse topics in areas such as medication errors, organizational design, and disclosure or communication issues.
The maximum award amount is $100,000 for the entire term of the project. The maximum indirect cost rate is 15% of total direct costs, excluding equipment, and must be included in the total $100,000 maximum award. Projects may be for up to 2 years in duration.

Email: Research@npsf.org
Phone: (617) 391-9900

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- **American Nephrology Nurses' Association Clinical Practice Grants**
  - Applications Due: October 15, 2009

This grant award provides funds for clinical practice projects that will directly benefit staff, patients, and/or families. Eligible projects include, but are not limited to, Continuous Quality Improvement (CQI) projects designed to improve clinical practice or projects to design, implement, or evaluate staff and/or patient education programs, research utilization, or outcomes evaluation. Three grants of up to $2,500 will be awarded.

For more information, including eligibility criteria, contact Gail Dewald, BS, RN, CNN, Awards, Scholarships, and Grants Chairperson, ANNA National Office • East Holly Avenue Box 56 • Pitman, NJ 08071-0056

- **The ASCO Cancer Foundation Improving Cancer Care Grant**
  - Susan G. Komen for the Cure
  - Letter of Intent Due: September 1, 2009
  - Full Application Due: December 3, 2009
  - Grant Term Begins: July 1, 2010

The ASCO Cancer Foundation® Improving Cancer Care Grant, funded by Susan G. Komen for the Cure®, will provide extramural research funding to address important issues regarding access to healthcare, quality of care, and delivery of care, with general applicability to breast cancer. The goal of this program is to encourage multi-disciplinary research that will have a major impact on cancer care, with general applicability in the breast cancer arena. Susan G. Komen for the Cure and The ASCO Cancer Foundation expect to award up to three research grants, each totaling 1.35 million dollars. Funds will be distributed as $450,000 total costs per year over three years.

The Improving Cancer Care Grants will provide funding for research studies that implement and evaluate new ways to solve major problems in quality of, access to, and delivery of health care. Proposals must be focused on developing solutions to current problems, not just describing disparities in care that currently exist. Research teams that have previously laid the groundwork in
these areas by describing existing problems are particularly encouraged to submit proposals to implement and study potential solutions. Project proposals are not required to focus on breast cancer, but the study findings must have general applicability to breast cancer care.

For areas of interest, eligibility criteria and application information, see: www.ascocancerfoundation.org/ICCG. To apply for ASCO membership, visit: http://www.asco.org/ASCO/Membership. For more information, please contact komenasco@asco.org.

- **Population Research Infrastructure Program – Short-term Support for Rising Programs (R24)**
  National Institutes of Health (NIH)
  National Institute of Child Health and Human Development (NICHD) (http://www.nichd.nih.gov)

  Letter of Intent Receipt Due Date: August 24, 2009
  Application Due Date: September 23, 2009
  Earliest Anticipated Start Date: July 1, 2010
  Expiration Date: September 24, 2009

  The primary purposes of the Program for Population Research Infrastructure are to provide resources to support and advance research that will improve understanding of the antecedents and consequences of population structure and change, facilitate interdisciplinary collaboration among investigators conducting population-related research and in allied fields, and promote innovative approaches to population research questions. See: PAR-07-401.

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- **Behavioral and Social Science Research on Understanding and Reducing Health Disparities (R01)**
  Next Letters of Intent Receipt Date(s): August 20, 2009
  Next Application Submission/Receipt Date(s): September 18, 2009
  Next Earliest Anticipated Start Date(s): July 1, 2010
  Expiration Date: September 19, 2009

  The National Institutes of Health (NIH) issues this Funding Opportunity Announcement (FOA) to solicit research project grant applications (R01) employing behavioral and social science theories, concepts, and methods (1) to improve understanding of the causes of disparities in health and disability among the various populations of the United States and (2) to develop and test more effective interventions for reducing and eventually eliminating health disparities. The goal is to move beyond documenting the existence of health and disability disparities to addressing causes and solutions. See: PAR-07-379.
Comprehensive Alcohol Research Centers (P60)
National Institutes of Health (NIH)
National Institute on Alcohol Abuse and Alcoholism (NIAAA)

Letter of Intent Due Date: November 2, 2009
Application Due Date: December 2, 2009
Expiration Date: December 3, 2009

This FOA uses the NIH Comprehensive Research Center (P60) mechanism to support an integrated, broad-based multidisciplinary, multi-investigator, long-term program of research and research support activities planned around a specific major research theme. In addition, a Comprehensive Alcohol Research Center (P60) is required to develop an effective research translation or information dissemination component to help accelerate the use of research findings for the benefit of public health. Comprehensive Alcohol Research Centers are also expected to function as a regional and National resource in their particular area of expertise; to facilitate research training; to develop research collaborations with outside investigators; and to provide a means to develop new ideas and encourage new investigators via pilot projects. The Alcohol Research Centers program is interrelated with, and complementary to, all other research support mechanisms and scientific activities that comprise NIAAA programs. Center grants help to provide a stable environment for investigators to engage in alcohol research in a coordinated, integrated and synergistic effort.
See: RFA-AA-10-004.

Advanced Centers for Intervention and/or Services Research (ACISR) (P30)
National Institutes of Health (NIH)
National Institute of Mental Health (NIMH)

Letters of Intent Receipt Date: May 21, 2010
Application Receipt Date: June 24, 2010
Earliest Anticipated Start Date: April 2010
Expiration Date: June 25, 2010

This funding opportunity invites applications for grants to support infrastructure to conduct research to evaluate the effects and improve the effectiveness of treatment or preventive interventions and mental health services. Because this grant mechanism can be used to support a variety of research activities, it is incumbent on the applicants to clearly identify, explain, and justify the specific focus of the proposed center (e.g., prevention, treatment, or services). Based on the particular area of research, interest and background of the applicants, overlap among these broad areas of research can occur.

The type of intervention research to be supported under this initiative relates primarily to studying the effectiveness and clinical and/or community
applications of treatment and preventive interventions. In this context, effectiveness research evaluates whether or not interventions that have been previously found to be efficacious in highly selected samples, can have clinically significant beneficial effects in samples and under conditions likely to be representative of usual community practice. Effectiveness research can include also research to optimize existing interventions through individualization of treatments, development and testing of treatment guidelines or algorithms, and other approaches. Thus, the main focus of this funding initiative is research to provide the scientific evidence needed for optimal decision making in the clinics or other community settings. See: [PAR-08-088](#).

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☐ **AHRQ Health Services Research Demonstration and Dissemination Grants (R18)**

Agency for Healthcare Research and Quality (AHRQ)

Next Application Due Date: September 25, 2009  
Expiration Date: January 8, 2012

Finding a way to improve the value of health care is a high priority for policymakers, purchasers, consumers, and providers. Public and private decision makers in the field have been experimenting with ways to accomplish this goal, and AHRQ seeks to both facilitate and quickly learn from this rich body of “natural experiments.” Changes in the organization of health care, payment, insurance and benefits redesign, and healthcare delivery redesigns provide real-world opportunities for rigorous, quicker, practical assessments of such experimentation to determine what works best, when, how, and for whom. Such experimentation provides opportunities to disseminate and diffuse relevant evidence garnered from such assessments in timely and effective ways to other similarly motivated public and private policymakers, health system and community leaders, and managers of healthcare organizations. Finally, efforts by employers, health plans, consumers, providers, community partnerships, and states to design and implement new approaches to improving the value of health care provide real-world “demonstration” sites; funding support can improve the likelihood for sustained success as well as the opportunity to learn quickly from both successes and failures.

AHRQ seeks to provide grants to facilitate and learn from these myriad natural experiments. Application teams should show strong support from (or leadership by) the change sites themselves, to advise, share information and data, partner (financially or in kind) and serve as “change agents” and dissemination outlets or agents for recent, current, and planned value-driven healthcare strategies. One purpose of such studies is to provide appropriately generalizable scientific findings about the consequences of value-driven experimentation for healthcare quality and costs, including how such issues relate to AHRQ’s priority
populations. A second purpose is to encourage experimentation and the spread of promising strategies for reducing waste and improving value. See: PA-09-071.

Researching Implementation and Change while Improving Quality (R18)
Agency for Healthcare Research and Quality (AHRQ)

Next Application Due Date: September 25, 2009
Expiration Date: May 8, 2011

The objective of this FOA is to support the study of implementation of quality improvement strategies focusing on the ways in which both the nature and the contexts of implementation affect the effectiveness of the strategies. Contexts include important organizational features such as, availability of resources; organizational culture; leadership commitment; support provided to quality improvement implementation (staff support, technical support); and other factors that non-causal research has suggested are associated with variations in implementation of QIIs or with quality performance/outcomes. AHRQ is interested in funding studies whose findings will be generalizable to other systems and settings so that successful quality improvement strategies can be replicated or adapted. See: PAR-08-136.

Planning Grants for Translational Research for the Prevention and Control of Diabetes and Obesity (R34) and (R18)
National Institutes of Health (NIH)
National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)
Eunice Kennedy Shriver National Institute of Child Health and Human Development
Office of Behavioral and Social Sciences Research (OBSSR)

Next Application Due Dates: September 25, 2009 (R18); November 2, 2009 (R34)
Expiration Date: March 2, 2012

Several large, controlled clinical trials have established "gold standard" approaches for treating type 1 and type 2 diabetes, and for preventing or delaying type 2 diabetes in individuals at high risk for developing the disorder. Large controlled trials have also consistently demonstrated success in achieving weight loss though lifestyle approaches, although maintenance remains a challenge. Despite these advances, the efficacious interventions from these trials are rarely translated into widespread practice. Research is needed to develop and test innovative adaptations of evidence based approaches to prevent and treat diabetes and obesity that can be disseminated and sustained in clinical health care practice and other settings beyond the research environment. See: PAR-09-177 for R01. See PAR-09-176 for R18.
The Effect of Racial and Ethnic Discrimination/Bias on Health Care Delivery (R01)
National Institutes of Health (NIH)
National Cancer Institute (NCI)
National Heart Lung and Blood Institute (NHLBI)
National Institute on Drug Abuse (NIDA)
National Institute of Mental Health (NIMH)
National Institute of Digestive and Kidney Diseases (NIDDK)
National Institute of Aging (NIA)

Next Application Submission/Receipt Date: October 5, 2009
Expiration Date: May 8, 2011

The purposes of this FOA are to: (1) improve the measurement of racial/ethnic
discrimination in health care delivery systems through improved
instrumentation, data collection, and statistical/analytical techniques; (2)
enhance understanding of the influence of racial/ethnic discrimination in health
care delivery and its association with disparities in disease incidence, treatment,
and outcomes among disadvantaged racial/ethnic minority groups; and (3)
reduce the prevalence of racial/ethnic health disparities through the
development of interventions to reduce the influence of racial/ethnic
discrimination in health care delivery systems in the United States (U.S.).
For the purposes of this FOA, health care delivery is defined as the provision or
receipt of a broad range of health-related services including preventive, primary,
ambulatory and in-patient, emergency, specialty and long-term care. Health care
delivery systems are defined as insurance plans, hospitals, clinics, private
physician offices, or public and community health facilities that provide or
finance health care delivery. See: PA-08-083.

Research on Interventions for Child Abuse and Neglect (R01)
National Institutes of Health (NIH)
Administration for Children and Families (ACF)
Centers for Disease Control and Prevention (CDC)
Substance Abuse and Mental Health Services Administration (SAMHSA)
National Institute of Mental Health (NIMH)
National Institute on Alcohol Abuse and Alcoholism (NIAAA)
National Institute of Child Health and Human Development (NICHD)
National Institute on Drug Abuse (NIDA)
National Institute of Neurological Disorders and Stroke (NINDS)
Office of Behavioral and Social Sciences Research (OBSSR)
Fogarty International Center (FIC)
Children ’s Bureau Office on Child Abuse and Neglect (CB/ACF)
National Center for Injury Prevention and Control (NCIPC/CDC)
Next Application Submission/Receipt Date: October 5, 2009  
Expiration Date: September 8, 2010

This Funding Opportunity Announcement (FOA) solicits research project (R01) grant applications to conduct efficacy or effectiveness trials of child abuse and neglect interventions. This announcement also supports research on understanding effective strategies to prevent child abuse and neglect (CAN), and on the amelioration of the biological and behavioral effects of CAN on its victims. Only projects proposing rigorous scientific research designs will be considered. For purposes of this announcement, an intervention is broadly defined as any action that assists in changing the biological and behavioral negative health effects of child abuse and neglect. Interventions may target individuals or group of individuals (e.g., dyad, family, community, or service systems). See: PA-07-437.

- **Outcomes, Cost-Effectiveness and the Decision Making Process to Use Complementary and Alternative Medicine (R01)**
  - National Institutes of Health (NIH)
  - National Center for Complementary and Alternative Medicine (NCCAM)
  - National Cancer Institute (NCI)
  - Office of Dietary Supplements (ODS)

  Next Application Due Date: May 19, 2010  
  Expiration Date: May 20, 2010

  The National Center for Complementary and Alternative Medicine (NCCAM) and the National Cancer Institute (NCI) invite applications for funding of observational studies evaluating the effectiveness and cost-effectiveness of complementary and alternative medicine (CAM) approaches as used in the community, and studies of the decision processes employed by patients and providers in deciding to use CAM. Such studies will provide health care providers, patients and policy makers with additional information on which to base decisions concerning the incorporation of CAM into an integrated healthcare system. See: PAR-08-045.

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- **Impact of Health Communication Strategies on Dietary Behaviors (R01) and (R21)**
  - National Institutes of Health (NIH)
  - U.S. Food and Drug Administration (FDA)
  - Centers for Disease Control and Prevention (CDC)
  - National Cancer Institute (NCI)
  - National Heart, Lung, and Blood Institute (NHLBI)
  - National Institute of Child Health and Human Development (NICHD)
This funding opportunity announcement (FOA) encourages applications for research projects focused on the development of effective communication strategies related to diet and health. These strategies are warranted in an effort to effectively change dietary behaviors in order to promote a healthier lifestyle. Communication efforts aimed at multiple levels (e.g., at the individual, environment, and policy levels) and across diverse populations are expected for submission. Proposed projects should address issues such as improving understanding of new advances or information in the area of dietary intake and health promotion, integrating this new information with the prevailing evidence on the relationship between dietary intake and health, and increasing people’s ability to positively change dietary behaviors. It should be noted that in addition to consumption of food and non-alcoholic beverages, moderate alcohol consumption is also considered a dietary behavior. Of considerable concern are: consumer confusion due to conflicting results of studies on moderate alcohol consumption and chronic diseases, how one should balance competing risks and choices about including moderate drinking as part of a healthy diet. See: PA-08-239 for R01. See: PA-08-240 For R21.

- **Health Promotion Among Racial and Ethnic Minority Males (R01) and (R21)**
  National Institutes of Health (NIH)
  National Heart, Lung and Blood Institute (NHLBI)
  National Institute of Nursing Research (NIH)
  National Cancer Institute (NCI)
  Office of Behavioral and Social Sciences Research (OBSSR)

  Next Application Due Dates: October 5, 2009 (R01); September 25, 2009 (R21)
  Expiration Date: September 8, 2010

  The focus of this FOA is on health promotion among racial and ethnic minority men. A scientific exploration of these disparities is central to NIH’s commitment to reducing health disparities. Research in this area is essential to addressing Goal 2 outlined in Healthy People 2010: “To eliminate health disparities among segments of the population, including differences that occur by gender, race or
ethnicity, education or income, disability, geographic location or sexual orientation." For R01, see: PA-07-422. For R21, see: PA-07-421.

6. Publications of Interest

- **Researchers and Their Communities: The Challenge of Meaningful Community Engagement**

  In this report, members of the National CTSA Community Engagement (CE) Key Function Committee have synthesized the standards and principles of best practices in community-engaged translational research that were developed during the 2007-08 regional and national workshops and conferences. UCSF’s CE Program Manager, Ellen Goldstein, facilitated the day-long Western Region workshop that included community and academic partners from 8 CTSA.

- **UCSF Center for AIDS Prevention Studies (CAPS) Technology & Information Exchange (TIE) CORE.** [Research Portfolio 2009](#).

  CAPS is a research center funded by the National Institutes of Mental Health. This Portfolio contains descriptions of 67 of the research studies conducted at CAPS. These are studies that are in process or have recently ended and may not yet have scientific results. Therefore, inclusion in this Portfolio does not imply that any intervention or other studies have been proven effective.

  In this Portfolio you will find:
  - Table of contents listing research by population
  - List of researchers and their projects
  - Descriptions of each research project
  - Index of research by keyword

  To contact a researcher listed here or for comments or questions about the Research Portfolio, contact Carolyn Hunt at 415/597-9110 or e-mail CAPS.Web@ucsf.edu.

- **Institute of Medicine.** [Initial National Priorities for Comparative Effectiveness Research.](#)

  The Institute of Medicine has issued a list of 100 initial top priorities for US federal investments in comparative effectiveness research. A number of the priorities concern school-based and community-based interventions and/or would lend themselves well to community-engaged research approaches.

- **National Institute of Mental Health.** [A Participant's Guide to Mental Health Clinical Research.](#)

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This brochure provides answers to common questions about volunteering for mental health clinical research. NIMH is part of the National Institutes of Health (NIH), the primary Federal agency for conducting and supporting medical research. (2008).


Harrison JD, Masya L, Butow P, Solomon M, Young J, Salkeld G, Whelan T. To ascertain the feasibility of implementing three decision support tools (DSTs) for people with rectal cancer within the surgical consultation. Twenty colorectal surgeons participated in a focus group or individual interviews. Colorectal surgeons were also asked to complete a self-administered questionnaire. All surgeons responded encouragingly to the concept of DSTs. However, for every positive statement an accompanying caveat was made and these were either a criticism of each tool or a barrier to their implementation. Surgeons stated DSTs should be used by patients and surgeons together (80%). The majority (70-75%) thought each tool was 'useful' or 'extremely useful'. However, there were strong views that in their current form the DSTs would not feasible to be used within the surgical consultation. Time restraints, personal and clinical characteristics of the patient, the content of each tool, the potential negative impact on the doctor-patient relationship were noted as real barriers to their implementation. CONCLUSION: Surgeons have identified a number of barriers that may limit implementation of DSTs into routine clinical practice. PRACTICE IMPLICATIONS: Feasibility and implementation studies have the potential to provide important information to help guide development, evaluation and implementation of DSTs.

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7. Other Resources and Opportunities

Robert Wood Johnson Foundation Health & Society Scholars Program
Call for Applications
Applications Due: October 2, 2009

The 2009-2010 Call for Applications is now available.
The Robert Wood Johnson Foundation Health & Society Scholars program provides two years of support to postdoctoral scholars at all stages of their careers to build the nation's capacity for research and leadership to address the multiple determinants of population health and contribute to policy change. The program is based on the principle that progress in the field of population health depends upon multidisciplinary collaboration and exchange. Its goal is to improve health by training scholars to investigate the connections among biological, genetic, behavioral, environmental, economic and social determinants
of health; and develop, evaluate and disseminate knowledge and interventions that integrate and act on these determinants to improve health.

The program is intended to produce leaders who will change the questions asked, the methods employed to analyze problems, and the range of solutions to reduce population health disparities and improve the health of all Americans.

**The Society for the Analysis of African American Public Health Issues (SAAPHI)**

**Call for Abstracts**

Abstracts Due: September 1, 2009

In conjunction with the American Public Health Association 137th Annual Meeting, The Society for the Analysis of African American Public Health Issues (SAAPHI) is soliciting abstracts for the 2009 Annual Scientific Symposium on Saturday, November 7, 2009.

While abstracts reflecting new and innovative information in any area of public health disproportionately impacting African Americans will be reviewed, presentations on the following topics are of particular interest:

- Coverage for the Uninsured
- Epidemiology of Racism and Health
- Health Disparities/ Health Inequities
- Social Determinants of Health

In addition, abstracts that reflect integrative approaches to individual and community health promotion using evidence-based research, interventions, intervention guided-research, and health policy advocacy are also encouraged.

All abstracts will be peer-reviewed and ranked for quality, topic applicability, and relation to SAAPHI issues. Students are especially encouraged to submit abstracts pertaining to their academic research. For more information, including eligibility and instructions for submitting abstracts, contact: rebecca_hasson@yahoo.com.

**Hospitals Needed for the 2010 Healthcare Equality Survey Project**

The Healthcare Equality Index (HEI), a joint project of Gay and Lesbian Medical Association (GLMA) and the Human Rights Campaign Foundation's Family Project, identifies best practices and policies with respect to equal treatment of LGBT individuals and families. Now in its fourth year, the HEI project is establishing a nationwide set of standards to reduce discrimination and ensure quality hospital-based health care. [Click here](#) to learn more.

Last year, 166 facilities participated in the HEI survey, up from 88 the previous year. If you work at a hospital in the U.S. and are authorized to participate on a facility's behalf, please [click here](#) to fill out a form indicating your hospital
affiliation and we will send you an invitation to participate in the survey.

Also, if the invitation should be sent to someone else at your facility, you can use the same [online form](http://www.surveymonkey.com/s.aspx?sm=7a_2fTFsEgeej5QzGv1iXuhQ_3d_3d) to provide information about the appropriate contact (such as contacts in your hospital’s human resources, diversity, staffing, marketing, or communications departments) and we will make sure they receive the survey invitation.

To submit information about your hospital, please [click here](http://www.surveymonkey.com/s.aspx?sm=7a_2fTFsEgeej5QzGv1iXuhQ_3d_3d) or go to [http://www.surveymonkey.com/s.aspx?sm=7a_2fTFsEgeej5QzGv1iXuhQ_3d_3d](http://www.surveymonkey.com/s.aspx?sm=7a_2fTFsEgeej5QzGv1iXuhQ_3d_3d).

The HEI 2010 survey will go online on October 1, 2009, and the results will be published in the spring of 2010.

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**CE Services**

The CTSI Community Engagement Program provides core consultation, training and networking services. Our work is closely coordinated with our partner, [Kaiser Permanente of Northern California](http://www.kp.org), and our affiliates, the [University Community Partnership Program](http://www.ucsd.edu/dept/health-sciences/community-partnership-program), [Community Partnership Resource Center](http://www.ucsf.edu/ctsi/community-partnership-resource-center), and UCSF’s [Practice-Based Research Network](http://www.pbrn.ucsf.edu).

- **Consultation**

  We offer [individual](http://www.surveymonkey.com/s.aspx?sm=7a_2fTFsEgeej5QzGv1iXuhQ_3d_3d) and [group consultations](http://www.surveymonkey.com/s.aspx?sm=7a_2fTFsEgeej5QzGv1iXuhQ_3d_3d) by CE faculty and community experts for community-engaged research projects that are looking for input on community research methods, partnership strategies, dissemination, evaluation goals, advisory board development, or any issue that will further a current or prospective translational research project. Our CE Navigators triage each request, decide whether it would best be met in an individual or group consultation format, and make consultation arrangements.

  **Group consultations** take place on the **4th Wednesday morning of every month**. Look for regular announcements about our monthly group consultation meetings. To request a consultation, please complete an [online consultation request form](http://www.surveymonkey.com/s.aspx?sm=7a_2fTFsEgeej5QzGv1iXuhQ_3d_3d). Note: the online request process requires a quick login / account set-up procedure, and then you can fill out your electronic request.

- **Training**

  Our [trainings](http://www.surveymonkey.com/s.aspx?sm=7a_2fTFsEgeej5QzGv1iXuhQ_3d_3d) serve both UCSF and community audiences and focus on community-university collaborative research or developing translational research skills. Over the next several months look for announcements about our trainings!

- **Registry**
The CE Community Clinician Registry Survey has been distributed electronically to members of the Collaborative Research Network, as well as volunteer faculty of the Schools of Medicine, Nursing, Dentistry and Pharmacy. We now have over 475 responses from those cohorts. Community clinicians interested in filling out the survey and becoming part of this network can them complete the survey here or contact Sachini Bandara (Bandaras@fcm.ucsf.edu) or Michael Potter at (PotterM@fcm.ucsf.edu).

- **Linkage**

  If you work at UCSF or in a community clinic, community agency, or other community health effort and are looking for a partner for a UCSF-community research project, contact the Community Engagement Program. Our Navigator will help you to identify a potential partner through our linkage service. To request a linkage, please complete an online consultation request.

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