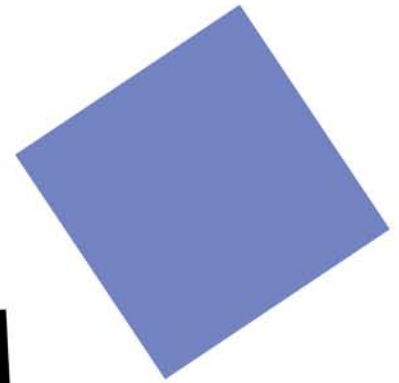
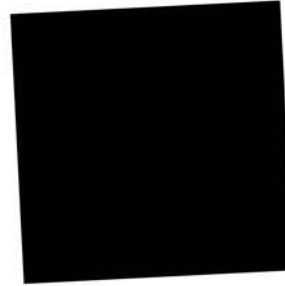


Northwest Health FOUNDATION



7 juillet 1974, 3.30 du matin,
naissance de Stéphanie - Jeanne,
3 kg 350, 54 cm - (7 lbs 3 oz, 62 in)
Accouchement provoqué (partir des
eau) au compte goutte - Oxygène
des 15h ensuite, capot rapide (après
des saur. Contractions très rapides
et fortes - 2 m) - les 17h - Bons ps.
côté -> 21-22 C. si l'ouverture était
16-17. Puis sur place avec veuve
de pouvoir le plus en plus fort. G.
- l'utérine 3h - Quelques sales heures
-> 3h on la sege laissa - comm à
ranger son doigt et à roulever le bord
d'un biquet - l'éjection très rapide
(3-4) Stéphanie n'a pas crié tout
de suite (drogue?) a mis de longs
secondes avant de se dénuder à
l'apex (mère) - Couleur en à très
rouge, plutôt bleue.
Premier S; à l'hôpital bien calme
craint: occasionnellement avant 10h
Nourri au sein 2 S premiers vus
pédagogiques, puis ça a marché.
Après j'ai vu le 30. 11.74.
Et ce qui me concerne, peut de



Improving the Health
of Our Communities Through
Collaborative Research

June 28, 29, and 30, 2004
Portland, Oregon

CONFERENCE PROCEEDINGS

Conference Partners

Northwest Health Foundation

Center on Health Disparities Research
Oregon Health & Science University School of Nursing

African American Health Coalition

Susannah Maria Gurule (SMG) Foundation

Mark O. Hatfield School of Government
Portland State University

Oregon Health & Science University Cancer Institute

Oregon Rural Practice Based Research Network

Center of Excellence in Women's Health
Oregon Health & Science University

Community-Campus Partnerships for Health

Foreword

On behalf of the planning committee, we thank you for joining us at *Improving the Health of Our Communities Through Collaborative Research*. Our goal for this first conference was to bring together research practitioners, community leaders and funders to look critically at the field of community-based collaborative research (CBCR), and to provide a dynamic forum for information sharing, skill building, and networking. Beyond raising awareness about CBCR, the conference also had as a goal to provide an opportunity for diverse participants to form new collaborations.

Improving the Health of Our Communities Through Collaborative Research attracted over 200 participants for a series of lively and informative discussions of one of the key challenges facing communities today: how to effectively translate knowledge into practice. Combining knowledge with action to improve health outcomes and eliminate health disparities is the ultimate goal of this approach to research.

Participants of the conference came away with an appreciation of CBCR theories, principles and methods; an understanding of key steps in the process, and the ability to identify resources available locally and nationally.

Through presentations, small group mentoring sessions and interactive exercises, some participants left the conference with plans for moving forward with community-based collaborative research. One individual indicated that the conference helped him learn that he “needed better skills to **offer to** community partners in these collaborations.” As one of our key speakers Arthur Himmelman has said, we **collaborate** when we demonstrate our willingness to enhance each other’s capacity for mutual benefit by sharing risks, responsibilities, resources and rewards. The real contribution of community-based collaborative research is in the understanding that we are all learners in this process, and that the expertise of all partners should be recognized.

This report and the accompanying DVDs serves as an effort to reach beyond the attendees at the conference to the broader community of individuals and organizations that are engaged in translating research into practice. We appreciate your interest in this important topic, we thank you for your patience in receiving these materials, and we welcome your comments.

Judith L. Woodruff
Director of Strategic Initiatives
Northwest Health Foundation

Contents

6	Agenda
9	Presentation Summaries
39	Planning Committee
43	Speakers
49	Participants

Agenda

Monday, June 28, 2004

8:00 AM-8:45 AM	Registration/Continental Breakfast (Holladay Foyer)			
8:45 AM-10:00 AM	Plenary Session (Broadway/Weidler/Halsey) Creating Partnerships to Improve Health: The Value and Validity of Community Involvement in Research			
10:00 AM-10:30 AM	Break			
10:30 AM-12:30 PM	Show Me the Money, Part 1: Finding Funding for Community-Based Collaborative Research (Ross Island)	Principles of Collaborative Partnerships: Power and Mutuality (Morrison)	Integrating Collaborative Partnerships into the Fabric of Research (Hawthorne)	
12:30 PM-2:00 PM	Potlatch Salmon Luncheon with Panel Presentation (Broadway/Weidler/Halsey) Racial and Ethnic Approaches to Community Collaborative Research: Reducing Health Disparities			
2:00 PM-4:00 PM	Show Me the Money, Part 2: Exceeding Funding Agency Expectations (Ross Island)	Methodological Challenges of Community-Based Research with Marginalized Populations: A Case Example (Morrison)	Developing and Sustaining Collaborative Partnerships for Health: Lessons from the Field (Hawthorne)	
4:00 PM-6:00 PM	Reception/Networking (Broadway/Weidler/Halsey)			

Tuesday, June 29, 2004

8:00 AM-9:00 AM	Roundtable Breakfast/Networking (Broadway/Weidler)			
9:00 AM-10:00 AM	Social Transformation to Address Disparities in Health & Healthcare, Part 1 (Ross Island)	Principles of Collaborative Partnerships: Effective Working Models and Practices, Part 1 (Morrison)	Building Community Consensus and Research Partnerships in Rural Oregon (Hawthorne)	Community-Based Research with Homeless Youth: Issues for IRB Review (Halsey)
10:00 AM-10:15 AM	Break			
10:15 AM-11:45 AM	Social Transformation to Address Disparities in Health & Healthcare, Part 2 (Ross Island)	Principles of Collaborative Partnerships: Effective Working Models and Practices, Part 2 (Morrison)	Insider and Outsider Researcher Roles in Collaborative Community Research (Hawthorne)	Research to Policymakers – Putting Together a Statewide Health Research and Evaluation Collaborative to Encourage Evidence-Based Decision-Making in Oregon (Halsey)
11:45 AM-1:30 PM	Lunch Buffet—A Taste of the Mediterranean			
1:30 PM-2:30 PM	When Two Worlds Collide: The Healthy African American Families/UCLA Community Collaboration, Part 1 (Ross Island)	Preparing for a Career in Community-Based Collaborative Research: Increasing Opportunities for Minority Investigators (Morrison)	Participatory Evaluation in Diverse and Multicultural Settings, Part 1 (Hawthorne)	Collaborative Processes for Finding and Winning Grants (Halsey)
2:30 PM-2:45 PM	Break			
2:45 PM-4:15 PM	When Two Worlds Collide: The Healthy African American Families/UCLA Community Collaboration, Part 2 (Ross Island)	Building Community Partnerships to Create Walkable Neighborhoods for Seniors (Morrison)	Participatory Evaluation in Diverse and Multicultural Settings, Part 2 (Hawthorne)	Where to Begin? Assessing Research Capacity in Canadian Community Based HIV/AIDS Organizations (Halsey)

Agenda

Wednesday, June 30, 2004

8:00 AM-8:30 AM	Roundtable Breakfast/Networking (Holladay Ballroom)			
8:30 AM-10:00 AM	Featured Panel: Reducing Cancer Risk Through Community-Based Research (Holladay Ballroom)			
10:00 AM-10:30 AM	Break			
10:30 AM-12:00 PM	Institutional Review Boards: Nemesis or Help for CBPR? (Broadway)	Independent, Qualitative Evaluation Approach for Assessing and Strengthening the Health of Collaborations (Weidler)	Tri-County Health Needs Assessment of Four Asian Pacific Islander Communities: Methods and Findings (Hawthorne)	Bridging Two Communities: Using Popular Education in African-American and Latino Communities (Halsey)
12:00 PM-1:00 PM	Conference Adjourned —Box Lunch available (Morrison/Ross Island)			

Presentation Summaries

List of Presentation Summaries

- 37 Bridging Two Communities: Using Popular Education in African-American and Latino Communities
- 29 Building Community Partnerships to Create Walkable Neighborhoods for Seniors
- 28 Collaborative Processes for Finding and Winning Grants
- 22 Community-Based Research with Homeless Youth: IRB Issues
- 12 Creating Partnerships to Improve Health: The Value and Validity of Community Involvement in Research
- 19 Developing and Sustaining Collaborative Partnerships for Health: Lessons from the Field
- 35 Independent, Qualitative Evaluation Approach for Assessing and Strengthening the Health of Collaborations
- 23 Insider and Outsider Researcher Roles in Collaborative Community Research
- 33 Institutional Review Boards: Nemesis or Help for CBPR?
- 16 Integrating Collaborative Partnerships into the Fabric of Research
- 18 Methodological Challenges of Community-Based Research with Marginalized Populations: A Case Example
- 21 Oregon Rural Practice-Based Research Network (ORPRN) & Community-Based Participatory Research
- 26 Preparing for a Career in Community-Based Collaborative Research: Increasing Opportunities for Minority Investigators
- 15 Principles of Collaborative Partnerships: Power and Mutuality
- 17 Racial and Ethnic Approaches to Community Collaborative Research: Reducing Health Disparities
- 31 Reducing Cancer Risk Through Community-Based Collaborative Research

List of Presentation Summaries

- 24 Research to Policymakers—Putting Together a Statewide Health Research and Evaluation Collaborative to Encourage Evidence-Based Decision-Making in Oregon
- 13 Show Me the Money, Part 1: Finding Funding for Community-Based Collaborative Research
- 14 Show Me the Money, Part 2: Exceeding Funding Agency Expectations
- 20 Social Transformations to Address Health Disparities, Parts 1 & 2
- 36 Tri-County Health Needs Assessment of Four Asian Pacific Islander Communities: Methods and Findings
- 25 When Two Worlds Collide: The Healthy African American Families—UCLA Community Collaboration
- 30 Where to Begin? Assessing Research Capacity in Community-Based HIV/AIDS Organizations

Creating Partnerships to Improve Health: The Value and Validity of Community Involvement in Research

Kaytura Felix-Aaron, MD

Senior Advisor, *Minority Health*
Agency for Healthcare Research and Quality

Key Points

1. Consider two types of research: that which endeavors to create new knowledge and that which seeks to translate research and knowledge into practice.
2. Community-Based Participatory Research (CBPR) maintains equitable involvement of community members, representatives of community organization, and researchers in all aspects of the research process.
3. Benefits of CBPR include diverse skill, knowledge, and expertise, improved quantity and quality of data, increased dissemination, increased relevance, enhanced trust, accelerated translation into policy and practice and increased likelihood priority issues addressed in context
4. Start exploring CBPR with local community resources, journals that publish CBPR studies, specific funding agencies and organizations and other resources.

Journals

- American Journal Public Health
- Ethnicity and Disease
- Health Education Behavior
- Health Promotion
- Journal of Health Care for Poor & Underserved
- Journal of General Internal Medicine
- Social Science and Medicine

Funding Resources

Federal Agencies

- NEIHS
- NINR
- NHLBI
- Interagency Work Group on CPBR

Foundations

- W.K. Kellogg Foundation
- Annie E. Casey Foundation

Other Resources

- Community Campus Partnerships for Health
- Community Based Public Health Caucus, APHA
- Community Health Scholars Program

Show Me the Money, Part 1: Finding Funding for Community-Based Collaborative Research

Sarena Seifer, MD

Executive Director
Community-Campus Partnerships for Health

Jen Kauper-Brown, MPH

Program Coordinator
Community-Campus Partnerships for Health

Key Points

1. Critical issues to be considered in funding of Community-Based Participatory Research (CBPR) include: limited understanding and acceptance by the academic community and some funding institutions, building and sustaining partnerships is not widely valued or funded, research requires a team with special knowledge, unique values and competencies that need to be cultivated and supported.
2. There are problems with consistent dissemination of CBPR partnerships and there is no formal educational and advocacy activity or any central information clearing house for CBPR.
3. Funding agencies often have difficulty understanding CBPR issues such as timelines for partnerships, finding qualified grant reviewers, categorical grants that limit interdisciplinary collaboration and grant that build infrastructure for universities but not for communities.
4. There are some indications that things are changing: increased emphasis on interdisciplinary research, translational research, consultation with the *end-users* in research development, RFPs for CBPR and the creation of the Federal Interagency Working Group on CBPR.

Federal Interagency Working Group on CBPR Website:

<http://www.niehs.nih.gov/translat/IWG/iwghome.htm>

Community-Campus Partnerships for Health

CCPH is a nonprofit organization that promotes health through partnerships between communities and higher educational institutions. Founded in 1996, we are a growing network of over 1000 communities and campuses. CCPH has members throughout the United States and increasingly the world who are collaborating to promote health through service-learning, community-based research, community service and other partnership strategies. These partnerships are powerful tools for improving health professional education, civic responsibility and the overall health of communities.

CCPH
University of Washington
UW Box 354809
Seattle, WA 98195-4809

Website:
<http://depts.washington.edu/ccph/index.html>

Staying on Top of CBPR Funding Opportunities

- Federal Funding: www.grants.gov
- Private Funding: RFP bulletin www.fdncenter.org
- Become a member of CCPH: Biweekly e-newsletter
- Join the new CBPR listserv co-sponsored by CCPH and Wellesley Central Health Corporation: <https://mailman.u.washington.edu/mailman/listinfo/cbpr>

Show Me the Money, Part 2: Exceeding Funding Agency Expectations

Sarena Seifer, MD

Executive Director
Community-Campus Partnerships for Health

Jen Kauper-Brown, MPH

Program Coordinator
Community-Campus Partnerships for Health

Key Points

1. Speak the language of CBPR: Build on existing community resources, knowledge, skill and attributes, engage community members in actively addressing key concerns, incorporate cultural, social and economic factors that influence health and more.
2. Potential research areas include development and testing of culturally relevant outcome measures, intervention studies designed to reduce risk factors and exposures and evaluation of existing community-partnered interventions for their impact, effectiveness and efficiency.

Strengthen Your Proposals

- Be a grant reviewer: www.grantreview.net
- Have colleagues review draft proposals
- NIH regional workshops
<http://grants.nih.gov/grants/seminars.htm>

Checklist for CBPR Grants

- The proposal is prepared collaboratively by community and academic partners
- Letters document an existing partnership or plans for establishing and sustaining a partnership
- The study team facilitates a collaborative community relationship & sustains equitable involvement throughout study
- There is a plan for sustaining the partnership in the community after completion of the grant
- Key community members are involved in all phases of research
- There is a plan for sustaining the partnership in the community after completion of the grant

Principles of Collaborative Partnerships: Power and Mutuality

Arthur T. Himmelman

Principal
Himmelman Consulting

Key Points

1. Three goals for partnerships: needs/resources assessment, pursue innovation on demonstration that is related to sustainability and advocacy and policy change.
2. Continuum of strategies for working together: networking, coordinating, cooperating and collaborating.
3. Collaboration requires a common vision and purpose, meaningful power-sharing, mutual learning and mutual accountability.
4. Power relations in collaboration are described in two basic forms: *collaborative betterment* and *collaborative empowerment*. In collaborative betterment the community is invited into a process that is designed and controlled by larger institutions. This strategy can bring about change in policy and improvements in services and programs, but rarely produces long-term ownership in communities. Collaborative empowerment begins within the community and is brought to public, private or non-profit institutions. It is more likely to produce the long-term ownership of the coalition's purpose, processes and products in communities and to enhance communities' capacity for self-determination.

Definitions

NETWORKING: exchanging information for mutual benefit.

COORDINATING: exchanging information and altering activities for mutual benefit and to achieve a common purpose.

COOPERATING: exchanging information, altering activities, and sharing resources for mutual benefit and to achieve a common purpose.

COLLABORATING: exchanging information, altering activities, sharing resources, and enhancing the capacity of another for mutual benefit and to achieve a common purpose.

Integrating Collaborative Partnerships into the Fabric of Research

Laurie Powers, Ph.D.

Center on Self-Determination
Oregon Health & Science University

Alison Turner, M.Ed.

Elizabeth Guerrero

Eleanor Gil-Kashiwabara, Psy. D.

Mary Oswald, Ph.D.

Elizabeth McNeff, MPA, HA

Key Points

1. Several projects were presented: National Youth Leadership Network (NYLN), Helping All Latinas Achieve (HALA), Community Partnerships that address violence against people with disabilities and youth minority researcher mentoring.
2. Each of the projects involve studying the experiences of people with disabilities in various challenges of self-determination within community, school and other partnerships.
3. The projects are all seeking solutions to improve the lives of people with disabilities by increasing the individual self-reliance and independence.
4. A common theme in all of the projects is the use of culturally appropriate methods as well as considering the various disabilities.

Racial and Ethnic Approaches to Community Collaborative Research: Reducing Health Disparities

Brian K. Gibbs, Ph.D., MPA, OTR/L

Program to Eliminate Health Disparities
Division of Public Health Practice
Harvard School of Public Health

Corliss A. McKeever, MSW

President and CEO
African American Health Coalition
Co-Director
Center for Health Disparities Research
Oregon Health & Science University

Key Points—Gibbs

1. Harvard School of Public Health looks to find creative solutions for social policy in the process of social transformation. This is a fundamental change in the attitudes, beliefs and behaviors of a society such that the laws, practices, policies and activities reflect a new and different cultural norm. Examples can be seen in the civil rights movement and in the labor union movement.
2. Success in healthcare and public health is dependent upon a multicultural, multi-issue approach, which employs the strategies of successful social transformation models.
3. Outreach to African American communities requires the acknowledgement of roles of race and racism in creating and nurturing partnerships, exchanging information, building infrastructure, replicating successful models, developing new models, evaluating efforts and training on historical and cultural issues.
4. Recommendations:
 - Acknowledge diversity within groups
 - Acknowledge that race is a social construct, not a biological determinant
 - Model race as a contextual variable in multi-level analysis
 - Address the present existence and impacts of racism and examine the role of racism in diminishing the health of entire populations
 - Encourage people from communities of color to

continue education. Do not partner with community outreach workers and convince yourself that you are employing them and feel like that is the best you can do

- Use the research outcomes to mobilize for change
- Alter the power dynamics
- And Listen, Listen, Listen to the Community!

Key Points—McKeever

1. African American Health Coalition (AAHC) programs often do not fit traditional academic definitions, but they work for the community.
2. REACH 2010 (Racial and Ethnic Approaches to Community Health, a CDC Initiative) in Oregon is looking for community-driven, culturally appropriate strategies for health.
3. Examples of programs that are focusing on long-term improvement and ownership: Lookin' Tight, Livin' Right—lay health educators in beauty salons and barber shops, Healthy Options for Living Longer Actively—peer education for high school students, Wellness Within Reach—free physical activity and nutrition classes, and Prevention Within Reach—direct-mail intervention designed to increase the rate at which African Americans access preventive screenings for cardiovascular disease.
4. AAHC considers it essential to seek community-driven solutions and create programs that provide long-term value for members of the community. They report outcomes to the community as well as to the funders.

Methodological Challenges of Community-Based Research with Marginalized Populations: A Case Example

Sherril Gelmon, Ph.D.

Professor of Public Health
Mark O. Hatfield School of Government
Portland State University

Lori Shmulewitz, MPH

Graduate Research Assistant
Portland State University

Eric Einspruch, Ph.D.

Senior Research Associate, RMC Corporation

Ed Muckenthaler

Recovery Transition Advocate
Project Metamorphosis

Key Points

1. *Collaborative* can look like this: People with a vested interest willing to contribute, investigators that respect, value and seek opinions of the community participants, power shared by all and participants gaining an understanding of each other's world view.
2. This workshop presents a case example of Project Metamorphosis. This is a five agency collaboration to integrate alcohol, drug and mental health services into the Homeless Youth Continuum in Portland. Objectives include integrated service delivery, common philosophy and formalized partnerships. Recovery Transition Advocates (RTAs) are the unique component in this project. They serve as peer advocates who provide continuity through street outreach and continual presence at service sites.
3. There are substantial challenges in attempting to learn about the RTAs role and their work. Examples of issues in protecting human subjects: ensure confidentiality of responses, balance seeking personal information for research purposes with protecting privacy, aggregate and blind identity of responses and protect records used in off-site settings.
4. Our strategies: interviews, focus groups and shadowing.

Developing and Sustaining Collaborative Partnerships for Health: Lessons from the Field

Siobhan Maty, Ph.D.

Assistant Professor
School of Community Health
Portland State University

Jennifer Hughes

Neighborhood House, Inc.
Portland, Oregon

Andy Matinog

Key Points

1. This workshop discusses two collaborative projects: one in North Carolina that looked at the influences on the eating and physical activity behaviors of adolescents and their parents and the other in West Multnomah County, Neighborhood House together with the School of Community Health at Portland State University examining several health issues.
2. The partnership between Neighborhood House and the School of Community Health is still young. The participants were engaged in a discussion about planning for sustainability in the early stages of collaboration as experienced from the researcher and from the community perspective.

Steps for Formulating Partnerships

Facilitating Factors, Lessons Learned and Recommendations for the Development and Sustainability of Partnerships

- Include broad base of individuals/organizations and key stakeholders in partnership
- Build upon prior working relationships
- Identify key community members as partners, support
 - Involve a community organizer (brings people together)
 - Involve support staff or team
- Jointly develop operating norms and procedures ('ground rules')
- Use democratic leadership
- Identify common goals and objectives
- Identify roles of each partner based on partner strengths and interests
 - Roles of each partner should be supported by earned trust and respect within community
 - Learn why partners have joined partnership
 - Learn what organizational or individual agendas partners bring with them
- Provide opportunities for meaningful involvement of each partner
- Regularly evaluate progress ('iterative process')
- Develop process to maintain momentum and sustain work over time
- Show appreciation
- Celebrate success

Social Transformations to Address Health Disparities, Parts 1 & 2

Brian K. Gibbs, Ph.D., MPA, OTR/L

Program to Eliminate Health Disparities
Division of Public Health Practice
Harvard School of Public Health

Corliss A. McKeever, MSW

President and CEO
African American Health Coalition
Co-Director
Center for Health Disparities Research
Oregon Health & Science University

Key Points—McKeever

1. The successful approach of the African American Health Coalition (AAHC) has always been to start with the community needs and then to design a model for programs around those needs.
2. Inclusivity is fundamental to successful program designs. It includes community buy-in in order to be mobilized, broad-based community partnerships for capacity building and participation for community health development.
3. Essentials for inclusivity:
 - Community buy-in
 - Networks
 - Team work and trust
 - Establishing and understanding common ground
 - Shared ownership
 - Ongoing evaluation
 - Holistic approaches
 - Culturally appropriate
 - Collaborative partnerships with key stakeholders and community members
4. Community solutions remain in place long after the funding is gone and extend to family members of the participants and their social support systems.

Key Points—Gibbs

1. Community-based participatory research (CBPR) is a collaborative approach to research that equitably involves all partners in the research process and recognizes the unique strengths that each brings.
2. CBPR is not a research *method*, but an approach or orientation. The focus of CBPR is the context, the attitude of the researchers and the power dynamic between the researchers and the community. Currently, there is no clear funding structure that supports the real path to begin and sustain CBPR because it is still too new and the power dynamics are still too skewed.
3. True CBPR requires considerable attention to the role of racism, classism and sexism, which are often marginalized in traditional research.
4. CBPR begins with a research topic of importance to the community with the aim of combining knowledge and action for social change to improve community health and eliminate health disparities. The vision should go beyond the 3 to 5 year period of the grant with a plan for sustainability before submission of the grant.

Oregon Rural Practice-Based Research Network (ORPRN) & Community-Based Participatory Research

Paul McGinnis, MPA

*Director of Field Services
Office of Rural Health
Oregon Health & Science University*

LJ Fagnan, MD

*Director, Oregon Rural Practice-Based
Research Network
Oregon Health & Science University*

Key Points

1. Primary Care Practice-Based Research Networks (PBRNs) are a group of affiliated ambulatory primary care practices that investigate questions related to community practice that link questions from practice to answers for practice. They use the community as a laboratory. They try to balance relevance with rigor and identify research questions from the *middle* out as opposed to a top-down approach.
2. Oregon Rural Practice-Based Research Network (ORPRN) seeks to improve the health of rural Oregon by conducting and promoting research in partnerships with the communities and practitioners they serve. It focuses on community-based methods for the larger community. The network looks to change systems of care.
3. Community health development must involve citizens, focus on local solutions and use local resources.
4. Making something happen is an intersection of data, perceptions of data and perceptions on capacity to solve the problem.

Community-Based Research with Homeless Youth: Institutional Review Board Issues

Ann Shindo, Ph.D., MSW, MPH, MS

State Hepatitis C Coordinator
Oregon Department of Human Services

Key Points

1. Problems in research with youth: youth are under age of adult consent, youth may not know where the adults are, guardians may not know youths' preferences, youth may not understand research or problem.
2. Guidance can be found in: Federal guidelines regarding human subjects, professional societies, case specific guidelines, Oregon law, researcher's skill and the youth themselves.
3. Adolescents' participation in behavioral and health-related research can facilitate programming, policy development, expansion of access to services and advocacy for future funding and resources. Youth and community members can work together to help set the research agenda.
4. Getting real about research with youth: pursue cultural competence in study design, culturally competent language regarding study description and consent, clarity with youth about the study goals, expectations, data handling and confidentiality, clarity with youth regarding reportability and mandatory reporter status and use culturally competent interviewers such as youth themselves.

Insider and Outsider Researcher Roles in Collaborative Community Research

Dena Hassouneh-Phillips, Ph.D., RN, ANP

*Assistant Professor, School of Nursing
Oregon Health & Science University*

Elizabeth McNeff, MPA/HA

*Research Associate,
Center on Self-Determination
Oregon Health & Science University*

Key Points

1. Insiders can bring forward topics of interest to their groups and have tacit understandings of lived experiences, have the ability to communicate and access to information from participants. Insiders also experience conflict between cultural expectations and research protocols and between member obligations and expectations.
2. Outsiders bring forward topics of interest to clinicians and a more distanced view. They may be given more leeway in some instances. Access to participants and information may be different.
3. Case example: abuse of Muslim American women
4. Case example: abuse of women with physical disabilities

Research to Policymakers—Putting Together a Statewide Health Research and Evaluation Collaborative to Encourage Evidence-Based Decision-Making in Oregon

Vickie Gates	<i>Executive Director</i> Oregon Health Care Quality Corporation
Christine Edlund, M.S.	<i>Evaluation Research Director</i> Office for Oregon Health Policy and Research
Judy Zerzan, MD, MPH	<i>Robert Wood Johnson Clinical Scholar</i> University of Washington
Matthew J. Carlson, Ph.D.	<i>Assistant Professor, Department of Sociology</i> Portland State University
Robert A. Lowe, MD, MPH	<i>Direct of the Center for Policy and Research in Emergency Medicine, Assistant Professor</i> Oregon Health & Science University
Bill Wright, Ph.D.	<i>Senior Research Analyst</i> Center for Outcomes Research and Education

Key Points

1. Oregon Health Research and Evaluation Collaborative (OHREC), a unique community/academic/state collaborative, provides the opportunity for the evaluative research to be conducted with local working knowledge of Oregon's health services system independent of the state.
2. OHREC's unique organizational model allows the Office for Oregon Health Policy and Research to serve as a conduit between health services researchers and policy makers in the state of Oregon, reducing information gaps and thereby informing both policy and program decisions. The collaborative provides both policy makers and the public access to clearly presented non-partisan health services research through published research briefs and sponsored public forums where researchers discuss and present their findings.
3. The panel members discuss the advantages and challenges of working collaboratively, presenting research to diverse audiences and ethical considerations of objectivity versus advocacy.

OHREC Website:

<http://egov.oregon.gov/DAS/OHPPR/>

When Two Worlds Collide: The Healthy African American Families—UCLA Community Collaboration

Kavita Patel, MD

Robert Wood Johnson Clinical Scholar
UCLA

Pluscedia Williams

Chairperson, Witness for Wellness Group

Nisaa Madyun, RN

Los Angeles County Department of Mental Health

Key Points

1. Healthy African American Families is a non-profit agency that partners with communities and academic organizations to provide a forum for the community to take an active leadership role and improve its own health.
2. Community-based participatory research experiences are explored through the example of the Witness for Wellness project that seeks to promote wellness in mental health care.
3. Racial issues presented include disparities between ethnicities on each side of the fence, unspoken tensions on both sides and inequity of resources. The presenters offer solutions that encourage ground rules for the meetings, establish equitable relationships at all levels and suggest that participants be honest about their own racism.
4. There were many lessons learned in this complex and challenging project. Problems of power differentials in meetings and personal interactions were addressed with various strategies. They suggest creating a process in which participants can politely object when others are using language that makes them uncomfortable, encouraging community organizations to send back-up representatives to meetings, always noting who is present and encouraging academic teams to formally introduce new members.

Preparing for a Career in Community-Based Collaborative Research: Increasing Opportunities for Minority Investigators

Kaytura Felix-Aaron, MD

Senior Advisor, Minority Health
Agency for Healthcare Research and Quality

Key Points

1. Increasing the participation of underrepresented minority investigators in all fields of health and medical research is an important priority, and a variety of programs encompassing high school through postdoctoral training are becoming more available.
2. Only a few minority investigators become well established in mainstream research, primarily because of an absence of essential components necessary for a competitive scientific career.
3. The workshop explores key components of a successful career in competitive research and examine the role of minority researchers in community-based collaborative research as well as in the traditional research settings.
4. The session discussed how undergraduate and graduate students can use CBCR to develop and enhance their future careers as science researchers, practitioners, educators, administrators and policy leaders.

Participatory Evaluation in Diverse and Multicultural Settings, Part 1 & 2

Ann P. Zukoski, Dr.PH, MPH

Assistant Professor Dept. Of Public Health
Oregon State University

Mia Luluquisen, DrPH, MPH, RN

Evaluation Specialist
Alameda County Public Health Department

Key Points

1. Participatory evaluation is a partnership approach to evaluation in which stakeholders actively engage in developing the evaluation and all phases of its implementation. The approaches can be empowering, educational tools for community partnerships. They can be used to ensure that evaluations address locally relevant questions, contribute to improving program performance and support the development of sustainable partnerships.
2. Challenges include persuading partners to make the necessary intense commitment to the participatory method, finding and allocating the necessary resources, establishing and maintaining conflict resolution processes.
3. The steps to proceeding with participatory evaluation:
 - decide if the approach is appropriate
 - identify who should and wants to be involved
 - collaborate on creating an evaluation plan
 - gather information, analyze it and build consensus on results, collectively
 - Agree on the findings and how they will be used.
4. Tips from experience: ensure the evaluation supports the work of the community, carefully consider group readiness, incorporate approaches that meet multiple language needs, take advantage of various opportunities to use participatory approaches, build participant evaluation skills early in the project and use approaches that appeal to partnership members.

Collaborative Processes for Finding and Winning Grants

Dave Anderson

Resource Development Coordinator
Office of Family Health
Oregon Department of Human Services

Richard L. Harris

Executive Director
Central City Concern

Key Points

1. This workshop presented a description of an example of a collaborative grant writing project, "Ending Chronic Homelessness through Employment and Housing Cooperative Agreements", that included the Housing Authority of Portland and numerous community-based organizations such as Central City Concern, Outside In, Cascadia Behavioral Health Care, Cascade AIDS Project and many others.
2. Timewasters: Gathering, copying and attaching extraneous information that is not (a) required in the RFP/grant maker's instructions, (b) supportive of any major points or conclusions presented, or (c) referred to in the narrative: and not assigning clear responsibilities to members of the grant team, particularly the one who ultimately must decide on proposed budget and staff duties.
3. Common mistakes are explained and solutions are offered.
 - Mistake: Letting funding opportunities set your grant strategy.
 - Solution: Figure out how to meet your need *first*, then find an appropriate funding source.
 - Mistake: Not being realistic in terms of proposed outcomes or proposing outcomes, which are not likely to reach project goals or to solve the identified problem.
 - Solution: Either be an expert on the proposed methodology/ strategy for reaching the goal, or be informed by the expert(s) in order that your proposal is relevant and sufficient to meet an important need with proposed resources.
4. Good ideas for collaborative grants:
 - Originality: Funders look for a relationship between your idea and what's been tried unsuccessfully before.
 - Problem solving: Will it meet the need effectively?
 - Timeliness: Is it relevant? Does it deal with a need that can be readily presented as critical? Will it deal with an issue that has generated public concern or otherwise received media attention in a fresh way?
 - Compelling need: Does the idea deal with a need of significant and/or new urgency?
 - Impact: Do the idea's outcomes have a scope and sustainability beyond a small group of beneficiaries and/or a few years?
 - Replicability: Can the idea serve as a model that can be applied elsewhere?

Building Community Partnerships to Create Walkable Neighborhoods for Seniors

Yvonne Michael, Sc.D.

Assistant Professor

Dept of Public Health and Preventive Medicine
Oregon Health & Science University

Fran Landfair

Elders in Action

Key Points

1. The Senior Walking Environment Assessment Tool (SWEAT) study was a collaborative project involving Oregon Health and Science University (OHSU), Oregon Research Institute (ORI), Portland State University (PSU), and Elders in Action. The overall goal of the research project was to better understand the role of the neighborhood environment in the promotion of healthy aging.
 - Develop an action plan to advocate for and implement identified solutions
 - Improve pedestrian safety
 - Increase walking behavior of older adults
2. Review of the results revealed a number of factors that seniors identified as related to walking: attractiveness, accessible services, walking partners, traffic issues, sidewalks, safety, crosswalks, available public transportation, population/housing density and community connection.
3. Research findings will be used to:
 - Increase public and local decision-maker awareness on the benefits of walking for older adults and better understand the role of the neighborhood environment in the promotion of healthy aging
 - Develop collaboration among the Willamette Pedestrian Coalition, the Portland Pedestrian Advisory Committee, Multnomah Pedestrian and Bicycle Advisory Committee and other citizens, community leaders and local government to:
 - Identify personal and environmental barriers to walking
 - Determine potential policy solutions to reduce barriers to walking
4. Recommendations resulting from the research were disseminated to several Portland City Bureaus including the Office of Neighborhood Involvement, Portland Police, Office of Transportation, Portland Planning and Portland Development Commission.

Where to Begin? Assessing Research Capacity in Community-Based HIV/AIDS Organizations

Francisco Ibanez-Carrasco, Ph.D.

Research Technical Assistant
Provincial Community-Based Research
Capacity-Building Program
British Columbia Persons With AIDS Society

Key Points

1. Research Technical Assistants (RTAs) are funded through Health Canada's RTA program to develop community-based research (CBR) capacity among AIDS service organizations (ASOs), academics and other research partners. RTAs conduct environmental scans to assess CBR experience and skills, interest, research ideas and needs for training and partnerships.
2. Common challenges to organizational infrastructures include an environment of scarcity of financial resources, working in a traditional hierarchy unable to foster unorthodox approaches to science and *research fatigue* amongst community members.
3. Common challenges to communications strategies: research institutions neglect to engage sentinel ASOs in dissemination of research findings, ASOs lack strategy to engage in research phases, reluctance to formalize relationships with researchers and partners.
4. Common challenges to applications of ethics:
 - External to ASOs: funding agents and academic researchers are unprepared and unwilling to recognize the CBR capacity and expertise of community members
 - Internal to ASOs: undermining belief that little research exists in ASOs, beliefs that CBR is unimportant when it confirms what staff members already know, belief that CBR takes too much time and energy away from service provision, reluctance to approach research with the vigor comparable to advocacy and prevention, belief that research is only about full-scale projects.
5. Research capacity comprises involvement, equity in partnerships, relevance for community, real collaboration, vision for research within organizational strategic plan, methodological rigor and popular education.

Reducing Cancer Risk Through Community-Based Collaborative Research

Michelle Berlin, MD, MPH

Director
Center of Excellence in Women's Health
Oregon Health & Science University

William E. Lambert, Ph.D.

Associate Professor, Department of Public
Health and Preventive Medicine
Oregon Health & Science University

Luci Longoria

Specific Populations Program Specialist
Oregon Department of Human Services

Elizabeth Steiner MD

Assistant Professor of Family Medicine
Oregon Health & Science University

Beti Thompson, Ph.D.

Professor, School of Public Health and Com-
munity Medicine, University of Washington
Fred Hutchinson Cancer Research Center

Key Points

1. Michelle Berlin reviewed the 2004 edition of *Making the Grade: A National and State by State Report Card*. This unique multi-year effort provides a detailed assessment of government performance in promoting and advancing women's health, grading each state and the federal government on women's health status and health policy. It grades and ranks each state based on 27 health status indicators, and evaluates 67 health policies that cover a range of women's health issues, including preventive care, reproductive health, access to health insurance and Medicaid, and economic security. The study is an in-depth look at women's health status and policies in each state.
2. William Lambert presented his project concerning the health of Columbia River fish consumed by the Yakama Nation and the other Salmon Treaty tribes. Objectives were to inform and educate the community about health risks related to the contamination of subsistence fish, foster joint problem-solving in the community and in culturally respectful ways, promote behavior change and protective action.
3. Luci Longoria explained the Tobacco Disparities Planning Project, which was conducted through a partnership of the Oregon Tobacco Prevention & Education Program and leaders in tobacco control and public health within Oregon's diverse communities. Through this collaborative process, workgroup members studied existing quantitative and qualitative data, gathered additional qualitative data, prioritized critical issues emerging from the data analysis, and made recommendations about how to address and eliminate tobacco-related health disparities. This presentation described participatory methodologies utilized to gather and examine data, and provided illustrations of findings and examples of program development, expansion, and advocacy based upon the recommendations.

Reducing Cancer Risk Through Community-Based Collaborative Research

continued

Key Points—continued

4. Elizabeth Steiner presented the Development and implementation of curricular innovations in the field of cancer control in primary care. This is a unique opportunity for research on the effect of educational interventions on patient outcomes. Doing this research requires collaboration with community partners in the form of graduate medical education (residency) training programs. These programs vary in specialty taught (e.g. family medicine, obstetrics & gynecology, pediatrics), in location (urban vs. rural), and in setting (university vs. community hospital base). Each program represents an individual community, and implementation of curricula must reflect the individual program's needs and culture. Close collaboration with a key contact within the program optimizes the likelihood of research success.
5. Beti Thompson reported on the community-based participatory research project to reduce pesticide exposure in the lower Yakima Valley in Washington. Participation begins with understanding the community and the potential partners. This presentation reviews the processes involved in identifying community partners to participate in a pesticide protection project. Using qualitative research methods, all constituents in the Valley who might have an interest in the topic were interviewed. Based on the analysis, a community-planning group invited members to form a Community Advisory Board. The experience validated the importance of knowing the community to obtain real partnership.

Institutional Review Boards: Nemesis or Help for CBPR?

Michelle Berlin, MD, MPH
Moderator

Director
Center of Excellence in Women's Health
Oregon Health & Science University

Gary T. Chiodo, DMD, FACD

Director, OHSU Research Integrity Office,
Associate Professor, Department of
Community Dentistry,
Oregon Health & Science University

Nancy Shore, Ph.D.

School of Social Work
University of Washington

Paul Newton, JD

Oregon/Multnomah County Public Health IRB

Key Points—Chiodo

1. Answer the question, 'Is your community collaborator engaged in research?'
 - Institutions whose employees or agents:
 - Intervene with living individuals by performing invasive or noninvasive procedures for research purposes
 - Intervene with living individuals by manipulating the environment for research purposes
 - Interact with living individuals for research purposes
 - Release individually identifiable private information, or permit investigators to obtain individually identifiable private information, without subjects' explicit written permission
 - Obtain, receive, or possess private information that is individually identifiable (either directly or indirectly through coding systems) for research purposes
 - Obtain, receive, or possess private information that is individually identifiable (either directly or indirectly through coding systems) for the purpose of maintaining "statistical centers" for multi-site collaborative research.
 - Maintain "operations centers" or "coordinating centers" for multi-site collaborative research
2. There are different levels of review depending upon the risks, benefits and populations involved: expedited review, exemption and full board.
3. HIPAA allows covered entities to use and disclose protected health information for treatment, payment and operations, not research. Use for research requires subject's authorization.
4. Requirements for ethical research are discussed: social or scientific value, scientific validity, fair subject selection, favorable risk-benefit ratio, independent review, informed consent and respect for subjects. The presenter also outlines various reviewer knowledge requirements.

Institutional Review Boards: Nemesis or Help for CBPR?

Continued

Key Points—Shore

1. This presentation discussed human subjects regulations and the ethical review process comparing perceptions in conventional social science researchers (CSSR) and community-based participatory researchers (CBPR). The CBPR group's responses were less aligned to the regulations in terms of their conceptualizations of research, identification of the core ethical issues and interpretation of the Belmont Principles than the CSSR group.
2. The IRBs often have a lack of understanding of CBPR, which can result in communication barriers and inappropriate feedback.
3. Guidelines for the IRB regarding CBPR:
 - Partnership efforts: allow partnerships to be flexible and concentrate on strengths-based, empowerment orientation.
 - Ethical Considerations: Pursue the ethics of involvement and accountability.
 - Methodology: CBPR typically addresses local concerns with the aim of social change and research methods are often determined through the partnership.
4. The presenter recommends changing the composition of the IRB to include specialist, community representatives and CBPR specialists.

Key Points—Newton

1. IRBs are concerned with an array of potential problems such as unreported problems, protocol violations, complaints and adverse events.
2. Informed consent challenges include complex consent arrangements (as with minors), continuing consent when the protocol changes, changing conditions of the subject population (homeless), illiteracy, populations whose vulnerabilities are only incidental to the study and benefit lure (poverty).
3. Breaches of confidentiality are also of great concern. Legal distinctions of privacy and confidentiality, mail notification, protocol violations that increase risks of breach, access and use of records and mandatory reporting.
4. Continuing reviews are more critical than initial reviews and should occur yearly or more often.

Independent, Qualitative Evaluation Approach for Assessing and Strengthening the Health of Collaborations

John Dougherty, Ph.D.

Program Design and Evaluation Services
Multnomah County Health Department

Key Points

1. Assessing the health of a collaboration from within often leads to biased findings, thus an independent *non-judgmental* qualitative evaluation is a more promising alternative. It is essential to listen to what all partners have to say and mutually identify the partnership evaluation goals.
2. This approach is primarily qualitative using a systematic form of listening. It provides an unobtrusive and confidential venue for partners to express their concerns. The evaluator's role is not to fix the partnership or mediate between members but instead to listen, analyze and reflect the results back to all partners in a neutral way.
3. The presenter draws upon experience applying this method to five specific collaborations. The impacts have been mostly positive with partners valuing the safe opportunity to reflect on the partnership. Following the evaluations the partners felt more control and power and had renewed energy to support the collaboration.
4. The presentation of the results should be done judiciously beginning with the review of the goals of the evaluation and procedures and continue by describing the themes using non-judgmental language. The meeting should take place in an atmosphere of confidentiality. The evaluator may be the facilitator of the meeting that should be limited only to those partners who participated. Facilitate discussion of the themes in a neutral fashion and summarize for the partners. Give them back the issues to address within their partnership.

Tri-County Health Needs Assessment of Four Asian Pacific Islander Communities: Methods and Findings

Jennifer Kue, MA

Health Programs Coordinator
IRCO/Asian Family Center

Key Points

1. The Asian Family Center is a program of Immigrant and Refugee Community Organization (IRCO) that provides culturally specific services and health programs for Asians and Pacific Islanders. The assessment included four communities, the Vietnamese (200) and Lao (100) refugee groups and the immigrant Chinese (200) and Filipino (100) groups in Washington, Clackamas and Multnomah counties.
2. The study examined the health status of these communities and the myth of the *Model Minority*. The partners sought to share the results with the communities to affect systems change. Methods used include focus groups, telephone- and face-to-face-interviews.
3. Results showed that most were insured yet 25% could not access a physician and nearly 50% of Vietnamese have the Oregon Health Plan (Medicaid). Heart disease and diabetes rates are higher than the Oregon levels in Vietnamese, Filipino and Lao groups. Cancer incidence is low due to young sample population. The current smoker rate was lower compared to Oregon average. Most health information was obtained through a medical clinic. The Lao have no language specific newspaper to disseminate information and the Chinese have a high internet usage.
4. This first local study done in partnership with local agencies provides a better understanding of health status and health care access. It reveals a need for outreach and increased preventive screening. Challenges encountered were in recruiting interviewers, building trust and completing telephone interviews. The next steps are to further disseminate the results to the communities, conduct further research on the findings and additional qualitative research, and finally, develop health programs and outreach.

Community Partners

- Yvonne Michael, ScD/PSU, OHSU
- Sandy Johnson, PhD, MBA, MS/Multnomah Co. Health Dept.
- Alan Melnick, MD, MPH/Clackamas Co. Public Health Division
- Laura Grandin, PhD/WASCO Dept. of Health and Human Services
- Duyen Ngo, PhD/DHS
- Christina Gullion, PhD/Kaiser Permanent – CHR
- Portland State University – Survey Research Lab

Approaches to Health Care

Vietnamese

- Concept of preventive care is foreign
- Often lack primary care
- Males often make medical decisions for household members
- Use traditional/alternative medicine before Western

Chinese

- Health is understood as a state of balance between positive (yang) and negative (ying) energy
- Medicinal Practice: Acupuncture, Acupressure, Herbal Remedies

Filipino

- Physicians are highly respected
- Western medicine is used concurrently with traditional, herbal, and religious healing practices
- Expectation that family will care for the sick
- Poor understanding of preventive health – may consider oneself as healthy if there are no symptoms or able to carry out normal life activities.

Lao

- Use of shamans and alternative medicine before Western medicine
- The extended family is valued and in some cases family elders make health decisions
- Mental health issues are considered shameful
- Healing Practices: Cupping, Pinching, Rubbing

Bridging Two Communities: Using Popular Education in African-American and Latino Communities

Noël Wiggins, MSPH

*Manager, Community Capacitation Center,
Multnomah County Health Department*

Linda Hornbuckle

Community Health Worker

Gonzalo Gonzalez, Maria Avila, Alicia Lopez

Community Health Workers, Latino Network

Denise Johnson

*Research Assistant
Poder es Salud/Power for Health Project*

Key Points

1. The goal of the project is to improve the health in Latino and African American communities in Multnomah County by employing Community Health Workers (CHW) who use Popular Education techniques to help community groups identify and solve their own most pressing health issues. *Popular Education* is an approach to teaching and learning that draws out and builds on the wisdom of community members to create a more just and equal society.
2. Poder es Salud/Power for Health will measure change in the level of community social capital using community-based participatory research to assess the effectiveness of the approach.
3. The projects are all seeking solutions to improve the lives of people with disabilities by increasing the individual self-reliance and independence. The knowledge gathered through this research will help other communities as they try to increase the involvement of community members in identifying and solving health problems.
4. During Year I, project partners collaborated to achieve the following goals: Convened the Steering Committee, conducted in-depth interviews with all Steering Committee members completed a comprehensive context evaluation, engaged in a participatory process to define the sub-communities in which the project will work developed and administered a community survey, hired 8 half-time CHWs, 4 in the African

American community and 4 in the Latino community, conducted 80 hours of initial training using Popular Education, for which CHWs received 8 hours of academic credit from Portland Community College and initiated a variety of projects to engage community members and build trust.

Collaboration Partners

- Latino Network
- African American faith communities
- Portland State University (PSU)
- Oregon Health and Science University (OHSU)
- Community Capacitation Center of the Multnomah County Health Department (MCHD)

Characteristics of Popular Education

- The starting point is the concrete experience of the learner
- One goal is the development of critical thinking skills: Everyone teaches; everyone learns
- Involves a high level of participation
- Leads to action for positive change
- Involves a collective effort, focusing on group rather than individual solutions to problems
- Stresses the creation of new knowledge, rather than the passing on of existing knowledge

Planning Committee

Planning Committee

Michelle Berlin, MD, MPH

Director, Center of Excellence in Women's Health
Oregon Health & Science University
Associate Professor, Departments of Obstetrics and
Gynecology, Public Health and Preventive Medicine,
and Medical Informatics & Clinical Epidemiology
3181 SW Sam Jackson Park Road, UHN 50
Portland, OR 97239-3098
Phone: 503-494-4480
Fax: 503-494-3111
berlinm@ohsu.edu

Marie Dahlstrom

Executive Director
Susannah Maria Gurule Foundation
1200 SE Morrison Street
Portland, OR 97214
Phone: 503-233-0721
mdahlstrom@smg-foundation.org

Sherril B. Gelmon, Dr. P.H.

Professor of Public Health
Mark O. Hatfield School of Government
Portland State University
PO Box 751
Portland, OR 97207-0751
Phone: 503-725-3044
gelmons@pdx.edu

Nancy Glass, PhD, MPH, RN

Assistant Professor
School of Nursing
Oregon Health & Science University
3455 SW US Veterans Hospital Road, SN-4S
Portland, OR 97239
Phone: 503-494-6740
Fax: 503-494-4678
glassn@ohsu.edu

Anne King, MBA

Network Manager
Oregon Rural Practice-based Research Network
Oregon Health & Science University
Mail Code: L222
3181 SW Sam Jackson Park Road
Portland, Oregon 97239-3098
Phone: 503-494-1583
Fax: 503-494-1513
kinga@ohsu.edu

Corliss A. Mc Keever, MSW

President and CEO
African American Health Coalition
2800 N. Vancouver Avenue, Suite 100
Portland, OR 97227
Phone: 503-413-1850
Fax: 503-413-1851
corlissm@aahc-portland.org

Sarena Seifer, MD

Executive Director
Community Campus Partnerships for Health
UW Box 354809
Seattle, WA 98195-4809
Phone: 206-616-4305
Fax: 206-685-6747
sarena@u.washington.edu

Dana Selover, MD

Graduate Research Assisant
Mark O. Hatfield School of Government
Portland State University
Phone: 503-358-4329
seloverd@pdx.edu

Roshanthi Weerasinghe, MPH

Outreach Coordinator
Oregon Health & Science University
Cancer Institute
3181 S.W. Sam Jackson Park Road, CR145
Portland, OR 97239-3098
Phone: 503-494-4210
Fax: 503-494-3224
weerasin@ohsu.edu

Judith Woodruff, JD

Director of Strategic Initiatives
Northwest Health Foundation
1500 SW First Avenue, Suite 850
Portland, Oregon 97201
Phone: 503-220-1955
Fax: 503-220-1335
judith@nwhf.org

Speakers

Speakers

Kaytura Felix-Aaron, MD

Senior Advisor, Minority Health
Agency for Healthcare Research and Quality
540 Gaither Road
Rockville, MD 20850
Phone: (301) 427-1395
Fax: (301) 427-1562
Kfaaron@ahrq.gov

Dave Anderson, MA

Resource Development Coordinator/Consultant
Oregon Office of Family Health/Grant Central
10900 SW 76th Place, Unit 41
Tigard, OR 97223
Phone: (503) 670-7808
grantcentral30@msn.com

Maria Avila

Community Health Worker
Latino Network/Poder es Salud/Power for Health
3534 SE Main Street
Portland, OR 97214
Phone: (971) 235-7342
luz270@yahoo.com

Michelle Berlin, MD, MPH

Director, Center of Excellence in Women's Health
Associate Professor, Departments of Obstetrics and
Gynecology, Public Health and Preventive Medicine,
and Medical Informatics & Clinical Epidemiology
Oregon Health & Science University
3181 SW Sam Jackson Park Rd, UHN 50
Portland, OR 97239-3098
Phone: (503) 494-4480
Fax: (503) 494-3111
berlinm@ohsu.edu

Matthew Carlson, Ph.D.

Assistant Professor
Department of Sociology, Portland State University
PO Box 751
Portland, OR 97207
Phone: (503) 725-9554
carlsonm@pdx.edu

Gary T. Chiodo, DMD, FACD

*Director-OHSU Research Integrity Office, Associate
Director-Center for Ethics in Health Care, Professor-
Department of Community Dentistry*
Oregon Health & Science University
611 SW Campus Drive, AD140
Portland, OR 97239
Phone: (503) 494-8837
chiodoga@ohsu.edu

Marie Dahlstrom

Executive Director
Susannah Maria Gurule Foundation
1200 SE Morrison Street
Portland, OR 97214
Phone: (503) 233-0721
mdahlstrom@smg-foundation.org

John A. Dougherty, Ph.D.

Principal Investigator
Multnomah County Health Dept.
426 SW Stark Street, 6th Floor
Portland, OR 97204
Phone: (503) 988-3663 x22290
john.x.dougherty@co.multnomah.or.us

Tina Edlund, MS

Evaluation Research Director
Oregon Health Policy and Research
800 NE Oregon Street, Suite 607
Portland, OR 97232
Phone: (503) 731-3005 X646
tina.edlund@state.or.us

Eric Einspruch, Ph.D.

Senior Research Associate
RMC Corporation
522 SW Fifth Avenue, Suite 1407
Portland, OR 97204
Phone: (503) 223-8248
eric_einspruch@rmccorp.com

LJ Fagnan, MD

Director
Oregon Rural Practice-based Research Network
Oregon Health & Science University
3181 SW Sam Jackson Park Rd.
Portland, Oregon 97239-3098
Phone: (503) 494-0361
Fax: (503) 494-1513
fagnanl@ohsu.edu

Vickie S. Gates

Executive Director
Oregon Health Care Quality Corporation
1200 NW Naito Parkway, Suite 470
Portland, OR 97209
Phone: (503) 546-9734
vickie.gates@q-corp.org

Speakers

Sherril B. Gelmon, Dr. P.H.

Professor of Public Health
Mark O. Hatfield School of Government
Portland State University
PO Box 751
Portland, OR 97207-0751
Phone: (503) 725-3044
gelmons@pdx.edu

Brian K. Gibbs, Ph.D., MPA, OTR/L

Director
Program to Eliminate Health Disparities
Division of Public Health Practice Harvard School of
Public Health
841 Parker Street
Boston, MA 02120
Phone: (617) 495-7777
Fax: (617) 495-8543
bkgibbs@hsph.harvard.edu

Eleanor Gil-Kashiwabara, Psy.D.

Senior Research Associate
Center on Self-Determination
Oregon Health & Science University
3608 SE Powell Boulevard
Portland, OR 97202
Phone: 503-232-9154 ext. 124
gilkashi@ohsu.edu

Nancy Glass, Ph.D., MPH, RN

Assistant Professor, School of Nursing, Co-Director
Center for Health Disparities Research
Oregon Health & Science University
3455 SW US Veterans Hospital Road, SN-4S
Portland, OR 97239
Phone: (503) 494-6740
Fax: (503) 494-4678
glassn@ohsu.edu

Gonzalo Gonzalez

Community Health Worker
Multnomah County Health Dept.
10317 E Burnside
Portland, OR 97216
Phone:(971)-235-7341

Elizabeth Guerrero

Project Assistant
Center on Self-Determination
Oregon Health & Science University
3608 SE Powell Boulevard
Portland, OR 97202
Phone: 503-232-9154 ext. 110
guerrere@ohsu.edu

Eleanor Gil-Kashiwabara, Psy.D.

Senior Research Associate
Center on Self-Determination
Oregon Health & Science University
3608 SE Powell Boulevard
Portland, OR 97202
Phone: (503) 232-9154 ext. 124
Fax: (503) 232-6423

gilkashi@ohsu.edu

Richard Harris, MSW

Executive Director
Central City Concern
232 NW Sixth Avenue
Portland, OR 97209
Phone: (503) 294-1681
Fax: (503) 294-4321
richardh@centralcityconcern.org

Dena Hassouneh-Phillips, Ph.D., RN, ANP

Assistant Professor
School of Nursing
Oregon Health & Science University
3455 SW US Veterans Hospital Road
Portland, OR 97239
Phone: (503) 494-2714
Fax: (503) 494-3878
phillide@ohsu.edu

Arthur Himmelman

Himmelman Consulting
210 Grant Street West, Suite 422
Minneapolis, MN 55403
Phone: (612) 998-5507
ArthurTHimmelman@aol.com

Linda Hornbuckle

Community Health Worker
Multnomah County Health Dept.
10317 E Burnside
Portland, OR 97216
Phone: (503) 988-6250 x25042
young2244@aol.com

Jennifer Hughes

Health Coordinator
Oregon Head Start Pre Kindergarten Program
Neighborhood House, Inc.
3445 SW Moss Street
Portland, OR 97219
Phone: (503) 246-1663
jhughes@nhweb.org

Speakers

Francisco Ibanez-Carrasco, Ph.D.

Research Technical Assistant
British Columbia Persons With AIDS Society
1107 Seymour Street, 2nd Floor
Vancouver, BC V6B 558
Canada
Phone: (604) 893-2281
francisco@bcpwa.org

Denise Johnson

Research Assistant
Poder es Salud/Power for Health Project
506 SW Mill Street, 450 F Urban Center Building
Portland, OR 97207
Phone: (503) 988-6250 x25042
onyxi2646@aol.com

Jen Kauper-Brown, MPH

Program Coordinator
Community Campus Partnerships for Health
UW Box 354809
Seattle, WA 98195-4809
Phone: (206) 543-7954
jenbr@u.washington.edu

Jennifer Kue, MA

Health Programs Coordinator
IRCO/Asian Family Center
4424 NE Glisan Street
Portland, OR 97213
Phone: (503) 235-9396
Fax: (503) 234-0341
jenkue@yahoo.com

William E. Lambert, Ph.D.

Associate Professor, Department of Public Health and Preventive Medicine
School of Medicine
Oregon Health & Science University
3181 SW Sam Jackson Park Road
Portland, OR 97239-3098
Phone: (503) 494-4273
Fax: (503) 494-4278
lambertw@ohsu.edu

Fran Landfair

Elders in Action
Portland, OR

Luci Longoria

Specific Populations Program Specialist, Tobacco Prevention and Education Program
Oregon Department of Human Services
800 NE Oregon Street, Suite 730
Portland, OR 97232
Phone: (503) 731-4273
Fax: (503) 731-4082
luci.longoria@state.or.us

Alicia Lopez

Community Health Worker
Multnomah County Health Dept
3534 SE Main Street
Portland, OR 97214
Phone: (971) 235-7340
loltum74@yahoo.com.mx

Robert A. Lowe, MD, MPH

Director, Center for Policy and Research in Emergency Medicine
Associate Professor
Oregon Health & Science University
Mail Code CR114
3181 SW Sam Jackson Park Road
Portland, Oregon 97239-3098
Phone: (503) 494-7134
lowero@ohsu.edu

Mia Luluquisen, DrPH, MPH, RN

Evaluation Specialist
Community Assessment Planning and Education
Alameda County Public Health Department
1000 Broadway, Suite 500
Oakland, CA 94607
Phone: (510) 267-3224
Fax: (510)-268-7012 Mia.Luluquisen@acgov.org

Nisaa Madyun, RN

Los Angeles County Department of Mental Health
550 South Vermont Avenue
Los Angeles, CA 90020

Andy Matinog

Emergency Food Box Coordinator
Neighborhood House, Inc
3445 SW Moss Street
Portland, OR 97219
Phone: (503) 246-1663
amatinog@nhweb.org

Speakers

Siobhan Maty, Ph.D.

Assistant Professor
School of Community Health
Portland State University
PO Box 751
Portland, OR 97207-0751
Phone: (503) 725-5108
maty@pdx.edu

Paul McGinnis, MPA

Director of Field Services
Office of Rural Health
Oregon Health & Science University
Mail Code: L222
3181 SW Sam Jackson Park Road
Portland, Oregon 97239-3098
Phone: (503) 494-4450
mcginnip@ohsu.edu

Corliss A. Mc Keever, MSW

President and CEO
African American Health Coalition
Co-Director Center for Health Disparities Research
Oregon Health & Science University
2800 N. Vancouver Avenue, Suite 100
Portland, OR 97227
Phone: (503) 413-1850
Fax: (503) 413-1851
corlissm@aahc-portland.org

Elizabeth McNeff, MPA/HA

Research Associate
Center on Self-Determination
Oregon Health & Science University
3608 SE Powell Boulevard
Portland, OR 97202
Phone: (503) 232-9154 ext. 150
Fax: (503) 232 9610
mcneffe@ohsu.edu

Yvonne L. Michael, Sc.D.

Assistant Professor
Department of Public Health and Preventive Medicine
Oregon Health & Science University
3181 SW Sam Jackson Park Rd
CB 669
Portland OR 97239-3098
Phone: (503) 494-9071
Fax: (503) 494-4981
michaely@ohsu.edu

Ed Muckenthaler

Recovery Transition Advocate
Project Metamorphosis
Phone: (503) 535-1181, ext. 101

Mary Oswald, Ph.D.

Senior Research Associate
Center on Self-Determination
Oregon Health & Science University
3608 SE Powell Boulevard
Portland, OR 97202
Phone: (503) 232-9154, ext. 126
Fax: (503) 232 9610
oschwald@ohsu.edu

Kavita Patel, MD

Robert Wood Johnson Clinical Scholar
University of California Los Angeles
911 Broxton Ave., Suite 303
Los Angeles, CA 90024
Phone: (310) 794-2257
Fax: (310) 794-2268
KavitaPatel@mednet.ucla.edu

Laurie Powers, Ph.D.

Associate Professor, Pediatrics, Public Health and Psychiatry
Co-Director, Center on Self-Determination
Oregon Institute on Disability and Development
Oregon Health & Science University
3608 SE Powell Blvd.
Portland, OR 97202
Voice: (503) 232-9154, ext. 104
Fax: (503) 232-6423
powersl@ohsu.edu

Sarena Seifer, MD

Executive Director
Community Campus Partnerships for Health
UW Box 354809
Seattle, WA 98195-4809
Phone: (206) 616-4305
Fax: (206) 685-6747
sarena@u.washington.edu

Ann Shindo, PhD, MSW, MPH, MS

State Hepatitis C Coordinator
Oregon Dept. of Human Services, State of Oregon
800 NE Oregon Street, Suite 772
Portland, OR 97232
Phone: (503) 731-4024
ann.shindo@state.or.us

Speakers

Nancy Shore, Ph.D.

School of Social Work
University of New England
11 Hills Beach Road
Biddeford, Maine 04005
(207) 797-7688
nshore@une.edu

Lori Shmulewitz

Graduate Research Assistant
Portland State University
PO Box 751
Portland, OR 97207-0751
loris@pdx.edu

Elizabeth Steiner, MD

Assistant Professor of Family Medicine
Oregon Health & Science University
3181 SW Sam Jackson Park Road, Mail Code FM
Portland, OR 97239
Phone: (503) 494-6605
steinere@ohsu.edu

Beti Thompson, Ph.D.

*Professor, School of Public Health and Community
Medicine*
University of Washington
Fred Hutchinson Cancer Research Center
1100 Fairview Avenue North, M3-B232
PO Box 19024
Seattle, WA 98109
Phone: (206) 667-4673
Fax: (206) 667-5977
bthompson@fhcrc.org

Alison C. Turner, M.Ed.

Research Associate
Center on Self-Determination
Oregon Institute on Disability and Development
Oregon Health & Science University
3608 SE Powell Boulevard
Portland, OR 97202
Phone: (503) 232-9154 x 113
Fax: (503) 232-6423
turneali@ohsu.edu

Bill J. Wright, Ph.D.

Senior Research Analyst
Center for Outcomes Research and Education
Providence Health System
5211 NE Glisan
Portland, OR 97213
Phone: (503) 215-7184
Bill.Wright@Providence.org

Judy Zerzan, MD, MPH

Robert Wood Johnson Clinical Scholar
University of Washington
1959 NE Pacific St, H220 HSB
Box 357183
Seattle, WA 98195-7183
Phone: (206) 616-8770,
Fax: (206) 685-2473
judyzerzan@yahoo.com

Ann P. Zukoski, DrPH MPH

Assistant Professor
Department of Public Health
Oregon State University
254 Waldo Hall
Corvallis, OR 97331-6406
Phone: (541) 737-3832
Fax: (541) 737-4001
ann.zukoski@oregonstate.edu

Participants

Participants

Becky Adelman

Research Associate
Oregon Health & Science University
707 SW Gaines Road
Portland, OR 97239-2901
Phone: (503) 494-7657
adelmann@ohsu.edu

Marcie Allen

Research Associate
Oregon Health & Science University
3455 SW US Veterans Hospital Road, SN-5S
Portland, OR 97239-2901
Phone: (503) 494-2563
allenma@ohsu.edu

Cheryl Alto, MSRD

Nutrition Consultant
Early Head Start Family Center of Portland
2417 NE Skidmore
Portland, OR 97211-6451
Phone: (503) 287-5140
calto@ehspdx.org

Sherry Archer

Assistant Professor of Nursing
Linfield College
2255 NW Northrup
Portland, OR 97210-2952
Phone: (503) 413-7175
sarcher@linfield.edu

Dora Asana

Program Director
African American Health Coalition
2800 N. Vancouver Avenue, Suite 100
Portland, OR 97227
Phone: (503) 413-1850
Fax: (503) 413-1851

Pam Ballentine

Community Organizer
Multnomah County Health Dept.
10317 East Burnside, 2nd Floor
Portland, OR 97216-2733
Phone: (503) 988-6250 ext.25043

Barbara Ballou

Development Director
211 Info
703 NE 69th Avenue
Portland, OR 97213
Phone: (503) 253-8019
bluegray0555@yahoo.com

Cindy Barnes

Project Manager
School of Dentistry
Oregon Health & Science University
611 SW Campus Drive
Portland, OR 97239
Phone: (503) 418-1410
barnesc@ohsu.edu

Bruce Bayley

Regional Director
Providence Health System
5211 NE Glisan Street, Building C
Portland, OR 97213
Phone: (503) 215-7188
bruce.bayley@providence.org

Bill Beamer

Special Projects Coordinator
African American Health Coalition
2800 N. Vancouver Avenue, Suite 100
Portland, OR 97227
Phone: (503) 413-1850
Fax: (503) 413-1851

Participants

Jill Bennett

Assistant Professor
School of Nursing
Oregon Health & Science University
3455 SW US Veterans Hospital Road, SN-5N
Portland, OR 97239-2901
Phone: (503) 418-3523
bennett@ohsu.edu

Nancy Benton

Ph.D. Student
Oregon Health & Science University
6912 NE 131st Avenue, #34
Vancouver, Washington 98682
Phone: (360) 904-0140
nancybenton@comcast.net

Leslie Bevan

Director
Office of Research Development
School of Nursing
Oregon Health & Science University
3455 SW US Veterans Hospital Road
Portland, OR 97239-2901
Phone: (503) 494-3850
bevanl@ohsu.edu

Linda Boise

Director of Education
Layton Aging & Alzheimer Disease
Oregon Health & Science University
3181 SW Sam Jackson Park Road, CR131
Portland, OR 97239
Phone: (503) 494-6370
boisel@ohsu.edu

Nancy Boros

Board Member
Josiah Hill III, Clinic
2946 NE 13th Avenue
Portland, OR 97211
Phone: (503) 331-0312
nancy.boros@providence.org

Jill Boyer-Quick

Research Associate
Oregon Health & Science University
3181 SW Sam Jackson Park Road
Portland, OR 97239
Phone: (503) 494-0296
boyerqui@ohsu.edu

Elyce Brown

Lead Poison Prevention
Community Energy Project
422 NE Alberta Street
Portland, OR 97211
Phone: (503) 284-2867

Janet Buchanan

Vice President, Mission and Ministry
Mercy Medical Center
2700 Stewart Parkway
Roseburg, OR 97470
Phone: (541) 677-2407
jordanahudson@chiwest.com

David Buckley, MD

Oregon Rural Practice-based Research Network
Oregon Health & Science University
Mail Code: L222
3181 SW Sam Jackson Park Road
Portland, Oregon 97239-3098
Phone: (503) 494-8367
Fax: (503) 494-1513
buckleyd@ohsu.edu

Nels Carlson, VTD

Oregon Health & Science University
3181 SW Sam Jackson Park Road, 0831
Portland, OR 97239
Phone: (503) 494-0210
carlsonn@ohsu.edu

Participants

Nicki Carrilo

MatchMaker Bone Marrow Project Manager
Mavin Foundation
600 First Avenue, Suite 600
Seattle, Washington 98104-2229
Phone: (206) 622-7101
nicki@mavinfoundation.org

Julie Carter, RN, MS, ANP

Parkinson Center of Oregon
Oregon Health & Science University
3181 SW Sam Jackson Park Road, OP32
Portland, OR 97239
Phone: (503) 494-9054
carterju@ohsu.edu

Linda Castillo

Supervisor, Bienestar de la Familia
Multnomah County Mental Health & Addiction Services
Division
421 SW 6th Avenue, Suite 600
Portland, OR 97204
Phone: (503) 988-3999 x28814
linda.castillo@co.multnomah.or.us

Chad Cheriell

Research Associate
Institute on Aging
Portland State University
470 N Urban Center, 506 SW Mill Street
Portland, Oregon 97201
Phone: (503) 725-5237
ccheriell@pdx.edu

James Chesnutt, MD

Department of Family Medicine
Oregon Health & Science University
3181 SW Sam Jackson Park Road
Portland, OR 97239
Phone: (503) 494-1977
chesnutt@ohsu.edu

Denise Chuckovich

Director of Technical Assistance
Oregon Primary Care Association
110 SW Yamhill, Suite 300
Portland, OR 97204
Phone: (503) 228-8852, x24
dchuckovich@orpca.org

Cliff Coleman, MD

Department of Family Medicine
Oregon Health & Science University
3181 SW Sam Jackson Park Road
Portland, OR 97239
colemanc@ohsu.edu

Lois Criss

African American Health Coalition
2800 N. Vancouver Avenue, Suite 100
Portland, OR 97227
Phone: (503) 413-1850
Fax: (503) 413-1851

Jennifer Crowe

MPH Student
University of Washington
Box 357234
Seattle, WA 98195-7234
Phone: (206) 499-6038
jencrowe@u.washington.edu

Laurie Dalton

Executive Director
Folk-Time Inc
4837 NE Couch Street
Portland, OR 97213
Phone: (503) 238-6428
Laurie-dalton@comcast.net

Participants

Blair G. Darney, MPH

School of Nursing

Oregon Health & Science University
3455 SW US Veterans Hospital Road
Portland, OR 97239
Phone: (503) 233-0164
darneyb@ohsu.edu

Keith Dempsey

Program Supervisor

African American Health Coalition
2800 N. Vancouver Avenue, Suite 100
Portland, OR 97227
Phone: (503) 413-1850
Fax: (503) 413-1851

Noelle Dobson

American Heart Association

1200 NW Naito Parkway
Portland, OR 97209-2830
Phone: (503) 595-2566
Noelle.dobson@heart.org

Linda Drach

Project Epidemiologist

Oregon Department of Human Services, Health Services
800 NE Oregon Street, Suite 772
Portland, OR 97232
Phone: (503) 731-4173
linda.drach@state.or.us

Amy Drake, MPH

Portland State University
6615 N Commercial Avenue
Portland, OR 97217
Phone: (503) 961-5102
amydrake2003@yahoo.com

Oliver Droppers

MPH Student

School of Community Health Portland State University
1110 SW Clay Street, Apt. 6
Portland, OR 97201
Phone: (503) 241-6492
basicfour@hotmail.com

Charles Drum, JD, PhD

Director, Principal Investigator

Oregon Office on Disability and Health
P.O. Box 574
Portland, OR 97207
Phone: (503) 494-8047
drumc@ohsu.edu

Tamara Duncan

Program Coordinator

African American Health Coalition
2800 N. Vancouver Avenue, Suite 100
Portland, OR 97227
Phone: (503) 413-1850
Fax: (503) 413-1851

Terry Edvalson

Eastern Oregon Children's Multi-Treatment Center
PO Box 3264, 700 H Avenue
LaGrande, OR 97850
Phone: (541) 962-7023
tedvalson@uwtc.net

Karen Elliot

Ph.D. Student

Oregon State University
Waldo Hall 255
Corvallis, Oregon 97331-6406
Phone: (541) 737-1281
elliokar@onid.orst.edu

Participants

Debi Elliot, PhD

Principal Investigator
Regional Research Institute
Portland State University
PO Box 751
Portland, OR 97207-0751
Phone: (503) 725-5198
elliottd@pdx.edu

Sheri Emery

Collaboration & Contract Specialist
Volunteers of America of Oregon, Inc.
3910 SE Stark Street
Portland, OR 97214
Phone: (503) 235-8655
semery@voaor.org

Molly Emmons

Program Specialist
Office of Family Health
Oregon Department of Human Services
800 NE Oregon Street
Portland, OR 97232
Phone: (503) 731-4313
molly.emmons@state.or.us

Phil Engle

Community Coordinator
Emergency Medicine, CDW-EM
Oregon Health & Science University
3181 SW Sam Jackson Park Road
Portland, OR 97239
Phone: (503) 494-1169

Andrew Epstein

Independent Living Specialist
Independent Living Resources
2410 SE 11th Avenue
Portland, OR 97214
Phone: (503) 232-7411
ilr-epstein@yahoo.com

Collaine Faddis, MPH

Program Manager
African American Health Coalition
2800 N. Vancouver Avenue, Suite 100
Portland, OR 97227
Phone: (503) 413-1850
Fax: (503) 413-1851
collainef@aahc-portland.org

Sally Featherstone

Assistant Administrator
Providence Health System
32500 SW Armitage Ct. 80
Wilsonville, OR 97070
Phone: (503) 215-6133
sally.featherstone@providence.org

Mary Fechner

Director of Faculty Development
University of Oregon
Office of the Vice President for Research
1219 University of Oregon
Eugene, Oregon 97403-1219
Phone: (541) 346-3196
mfechner@uoregon.edu

Nancy Findholt

Assistant Professor
Oregon Health & Science University
School of Nursing-La Grande
One University Boulevard
Badgley Hall 301D
La Grande, OR 97850
Phone: (541) 962-3698
findholt@eou.edu

Deborah Fisher

African Projects Supervisor
Lutheran Community Services NW
605 SE 39th Avenue
Portland, OR 97214
Phone: (503) 231-9553
dfisher@lcsnw.org

Participants

Ashleigh Flynn

Director of Development

Cascadia Behavioral Healthcare Inc.
PO Box 8459
Portland, OR 97207
Phone: (503) 238-0769
ashleighf@cascadiabhc.org

Alison Frye, MPH

Team Lead, Outreach

Cascade Aids Project
620 SW Fifth Avenue, Suite 300
Portland, Oregon 97204
Phone: (503) 223-5907
Fax: (503) 223-7087
afrye@cascadeaids.org

Debra Gadsby

Grant Writer

Hearing & Speech Institute
3434 NW Vaughn Street
Portland, Oregon 97210-2952
Phone: (503) 490-3754
dgadsby@earthlink.net

Hilary Galian

Portland Ninos Program Coordinator

SMG Foundation
1200 SE Morrison
Portland, OR 97214
503-233-0721 X407
hgalian@smg-foundation.org

Dale C. Garrel, MD

218 Horizon Hill Road, PO Box 639
Yachats, Oregon 97498
Phone: (541) 547-3052
dcgarell@aol.com

Marian Gilmore

President

Portland Alumnae Chapter Delta Sigma Theta Sorority,
Inc.
PO Box 4265
Portland, OR 97208
Phone: (360) 256-0699
genitagilmore@aol.com

Mandy Green

Graduate Student

Portland State University
450 F Urban Center Building, 506 SW Mill Street
Portland, OR 97207
Phone: (503) 988-6250 x25042
mandyg@pdx.edu

Karen Gress

Program Coordinator

African American Health Coalition
2800 N. Vancouver Avenue, Suite 100
Portland, OR 97227
Phone: (503) 413-1850
Fax: (503) 413-1851

Sandy Haffey

Commitment Monitoring & Residential Sucs, Supervisor

Multnomah County Mental Health & Addiction Services
Division
421 SW 6th Avenue, Suite 500
Portland, OR 97204
Phone: (503) 988-5464 x26659
sandy.j.haffey@co.multnomah.or.us

Frances Hall

Graduate Research Assistant

Mark O. Hatfield School of Government
Portland State University
PO Box 751
Portland, OR 97207-0751
Phone: (503) 313-0377
fancyhall@yahoo.com

Participants

Nancy Harp

Community Services Manager
Multnomah County Department of County Human
Services
421 SW 6th Avenue, Suite 700
Portland, OR 97204
Phone: (503) 988-3768
nancy.harp@co.multnomah.or.us

Marylin Sue Hartzell

Oregon Health & Science University
15399 SW Burgundy Street
Tigard, OR 97224
Phone: (503) 579-8802
hartzell@ohsu.edu

Josie Henderson

CEO
Telemedicine Research Center
2121 SW Broadway, Suite 130
Portland, OR 97201
Phone: (503) 221-1620
jhenderson@telemed.org

Jessica Henn

African American Health Coalition
2800 N. Vancouver Avenue, Suite 100
Portland, OR 97227
Phone: (503) 413-1850
Fax: (503) 413-1851

Sally Henry

Executive Director
Oregon Pacific AHEC
327 Snell Hall
Corvallis, OR 97321
Phone: (541) 732-8601
sally.henry@oregonstate.edu

Beth Heriza

Health Services Manager
Early Head Start Family Center of Portland
911 N Skidmore Street
Portland, OR 97217
Phone: (503) 236-9389 x23
bheriza@ehspdx.org

Tom Hilton

PROH Director
School of Dentistry
Oregon Health & Science University
611 SW Campus Drive
Portland, OR 97239
Phone: (503) 494-8672
hiltont@ohsu.edu

Kim Hoffman

Project Manager
Access to Healthcare and Welfare Reform
Portland State University
PO Box 751
Portland, OR 97207
Phone: (503) 725-9090
kimh@pdx.edu

Jan Hootman

Multnomah Education Service District
P.O. Box 301039
11611 NE Ainsworth Circle
Portland Oregon 97220
Phone: (503) 257-1737
Fax: (503) 257-1519
jhootman@mesd.k12.or.us

Liz Horn

National Psoriasis Foundation
6600 SW 92nd Ave., Suite 300
Portland, OR 97223-7195
Phone: (503) 244-7404
Fax: (503) 245-0626

Participants

Karen Hubbard, CNM, NP

Assistant Professor

Linfield Good Samaritan School of Nursing

2255 NW Northrup

Portland, Oregon 97210-2952

Phone: (503) 413-8442

khubbar@linfield.edu

Leah Deanne Hudson

Project Coordinator

Oregon State University, Department of Public Health

Corvallis, Oregon 97331-6406

Phone: (541) 737-3837

deanne.hudson@oregonstate.edu

Jennie Hyde, PhD

Executive Director

Mental Health Northwest

PO Box 1845

Vancouver, Washington 98668-9690

Phone: (360) 759-3465

jhyde@mhnw.org

Cathy Jan

Center for Health Disparities Research

Oregon Health & Science University

3455 SW US Veterans Hospital Road, SN-4S

Portland, OR 97239

Phone: (503) 494-6740

Fax: (503) 494-4678

cjan222@yahoo.com

Howard Kauli

Center for Health Disparities Research

Oregon Health & Science University

3455 SW US Veterans Hospital Road, SN-4S

Portland, OR 97239

Phone: (503) 353-9053

Fax: (503) 494-4678

howardk@ohsu.edu

Matt Kelley

President/Founder

Mavin Foundation

600 First Avenue, Suite 600

Seattle, Washington 98104-2229

Phone: (206) 622-7101

matt@mavinfoundation.org

David Killaby

Operations Manager

African American Health Coalition

2800 N. Vancouver Avenue, Suite 100

Portland, OR 97227

Phone: (503) 413-1850

Fax: (503) 413-1851

Laurie King

Organizer

Jobs with Justice

123 NE Third

Portland, OR 97232

Phone: (503) 236-5733

info@jwj.org

Nancy Koroloff

African American Health Coalition

2800 N. Vancouver Avenue, Suite 100

Portland, OR 97227

Phone: (503) 413-1850

Fax: (503) 413-1851

Lisa Krois

Policy Analyst

Oregon Health Policy and Research

800 NE Oregon Street, 607

Portland, OR 97232

Phone: (503) 731-3005 X354

lisa.krois@state.or.us

Participants

Chris Larson

Consultant

Elders in Action
18685 Roundtree Drive
Oregon City, OR 97045
Phone: (503) 655-4080
cdlarson@teleport.com

Frances Lee-Lin, RN, MN, OCN, CNS

Assistant Professor

School of Nursing
Oregon Health & Science University
3455 SW US Veterans Hospital Road
Portland, OR 97239-2941
Phone: (503) 494-3725
Fax: (503) 494-7783
leelinf@ohsu.edu

Iris F. Litt, MD

Director

Robert Wood Johnson Clinical Scholars Program
30 Alta Road
Stanford, CA 94305
Phone: (650) 566-2337
Iris.litt@stanford.edu

Richard Loudd

Coordinator Internal Projects

Center for Health Disparities Research
Oregon Health & Science University
3455 SW US Veterans Hospital Road, SN-45
Portland, OR 97239
Phone: (503) 494-1729
Fax: (503) 494-4678
louddr@ohsu.edu

Kristin Lutz

Post Doctoral Fellow, School of Nursing

Oregon Health & Science University
3455 SW US Veterans Hospital Road
Portland, OR 97239
Phone: (503) 418-3395
lutzk@ohsu.edu

Julie Manning

Vice President

Samaritan Health Services
3600 NW Samaritan Drive
Corvallis, OR 97330
Phone: (541) 768-5172
juliem@samhealth.org

Belinda Marier

Executive Director

Serendipity Center
PO Box 33350
Portland, OR 97292
Phone: (503) 761-7139
belindam@serendipitycenter.org

Michelle McClellan

Program Officer

Northwest Health Foundation
1500 SW First Avenue, Suite 850
Portland, OR 97201-5884
Phone: (503) 220-1955

Marjorie McGee

Coordinator

Center of Excellence in Women's Health
Oregon Health & Science University
3181 SW Sam Jackson Park Road
Portland, OR 97239-3098
Phone: (503) 494-2685
Fax: (503) 494-3111
mcgeem@ohsu.edu

Patricia McNally

Internship Coordinator

Multnomah County Department of County Human
Services
421 SW 6th Avenue, Suite 700
Portland, OR 97204
Phone (503) 988-3691 X26836
patricia.mcnally@co.multnomah.or.us

Participants

LeAnn Mederios, MSW

Program Manager

Oregon Department of Human Services, Health Services
800 NE Oregon Street, Suite 772
Portland, OR 97232
Phone: (503) 872-6714
leann.mederios@state.or.us

Amy Mee-Ran, PhD

Asian Family Center/Willamette Valley Family Center
4424 NE Glisan Street
Portland, Oregon 97213
Phone: (503) 235-3422

Shafia Monroe

CEO

International Center for Traditional Childbearing
PO Box 11923
Portland, OR 97211
Phone: (503) 460-9324
sistahmidwife@msn.com

Jan Morgan

Director of Community Outreach

Northwest Health Foundation
1500 SW First Avenue, Suite 850
Portland, OR 97201-5884
Phone: (503) 220-1955

Elizabeth Morse

Senior Research Assistant

Oregon Health & Science University
Portland VA Medical Center
3710 SW US Veterans Hospital Road, P3MED
Portland, OR 97239
Phone: (503) 220-8262 X57278
morsee@ohsu.edu

Craig Mosbaek

Research Analyst

Oregon Department of Human Services
800 NE Oregon, Suite 730
Portland, OR 97232
Phone: (503) 731-4273
craig.h.mosbaek@state.or.us

Donna Scott Munroe

Consultant

536 SW Cheltenham Street
Portland, OR 97239
Phone: (503) 244-9193
dmunroe@easystreet.com

Lynne Mutrie

Community Traffic Safety Coordinator

ACTS Oregon
405 W Arlington
Gladstone, OR 97027
Phone: (503) 656-7207
lynnem@actsoregon.org

Lillian Nail

Oregon Health & Science University
School of Nursing
3455 SW US Veterans Hospital Road
Portland, OR 97239
Phone: (503) 494-5618
nail@ohsu.edu

Cheryl Neal

President

Multicultural Integrated Kidney Education Program
PO Box 263
North Plains, Oregon 97133-0263
Phone: (503) 629-5848
cheryl@mikeprogram.org

Participants

Ann Newhouse

Oregon Tobacco Education Clearinghouse
Oregon Department of Human Services
800 NE Oregon
Portland, OR 97232

Godwin Nwerem

Supervisor
System of Care for Children & Families
Multnomah County Mental Health & Addiction Services
Division
421 SW 6th Avenue, Suite 600
Portland, OR 97204
Phone: (503)-988-3999 x28008
godwin.o.nwerem@co.multnomah.or.us

Kerth O'Brien, PhD

Associate Professor
Department of Psychology
Portland State University
PO Box 751
Portland, OR 97207-0751
Phone: (503) 725-3973
Brienk@pdx.edu

Herb Ozer

Clinical Serviceline Manager
Providence Health System
5228 NE Hoyt
Portland, OR 97213
Phone: (503) 215-9297
herb.ozer@providence.org

Trina Pacheco

Department of Psychology
Portland State University
PO Box 751
Portland, OR 97207-0751
Phone: (503) 780-1193
trinap@pdx.edu

Mary Paeth

Education Coordinator
Southwest Washington Medical Center
Education Dept, SWMC, PO Box 1600
Vancouver, WA, 98668
Phone: (360) 514-6788
mpaeth@swmedctr.com

Jennifer Pathak

Contract Manager
Oregon Medical Professional Review Organization
2020 SW Fourth Avenue, Suite 520
Portland, OR 97201-3146
Phone: (503) 582-1868
jpathak@ompro.org

Megan Patton

PhD Student
Oregon State University, Department of Public Health
264 Waldo Hall
Corvallis, OR 97331-6406
Phone: (541) 754-9505
pattonme@onid.orst.edu

Teresa Posner

Program Dev. Specialist, Quality Management
Multnomah County Mental Health & Addiction Services
Division
421 SW 6th Avenue, Suite 500
Portland, OR 97204
Phone: (503) 988-5464 x24424
teresa.a.posner@co.multnomah.or.us

Nancy Press, PhD

Oregon Health & Science University
3455 SW US Veterans Hospital Road, SN-5S
Portland, OR 97239
Phone: (503) 494-2535
pressn@ohsu.edu

Participants

Nancy Prouser

Manager, Clinical Breast Training Program
Oregon Health & Science University
Cancer Institute
3181 SW Sam Jackson Park Road, CR145
Portland, OR 97239
Phone: (503) 494-1233
prousern@ohsu.edu

Lou Radja

Health Educator
African American Health Coalition
2800 N. Vancouver Avenue, Suite 100
Portland, OR 97227
Phone: (503) 413-1850
Fax: (503) 413-1851

David Rebanal

Prevention Specialist
Oregon Department of Human Services
800 NE Oregon Street, Suite 730
Portland, OR 97232
Phone: (503) 731-4171
david.rebanal@state.or.us

Steven Riley

Cardiology Fellow
Oregon Health & Science University
125 NW 20th Place, Apt. 401
Portland, OR 97209
Phone: (503) 242-3816
rileys@ohsu.edu

Sheila Rittenberger

Director, Corporate & Foundation Relations
National Psoriasis Foundation
6600 SW 92nd Avenue, Suite 300
Portland, OR 97223
Phone: (503) 546-8365
srittenberg@psoriasis.org

Kamesha Robinson

Program Coordinator
African American Health Coalition
2800 N. Vancouver Avenue, Suite 100
Portland, OR 97227
Phone: (503) 413-1850
Fax: (503) 413-1851

Rae Rosenberg

Program Coordinator
Oregon Health & Science University
Emergency Medicine, CDW-EM
3181 SW Sam Jackson Park Road
Portland, OR 97239
Phone: (503) 494-5353
rosenbergr@ohsu.edu

Susan Rosenkranz

PhD Student
Portland State University
PO Box 751
Portland, OR 97207-0751
Phone: (503) 777-5505
garrettz@yahoo.com

Kathleen Rowlands

MPH Student
Portland State University
624 N Stafford Street
Portland, OR 97217
Phone: (503) 494-3812
rowlandk@ohsu.edu

Laura Saddler

AWARE Coordinator
Oregon Department of Human Services, Health Services
800 NE Oregon Street, Suite 772
Portland, OR 97232
Phone: (503) 731-4024 X257
laura.c.saddler@state.or.us

Participants

Somnath Saha

Oregon Health & Science University
Portland VA Medical Center
3710 SW US Veterans Hospital Road, P3MED
Portland, OR 97239
Phone: (503) 220-8262 X55418
sahas@ohsu.edu

Consuela Saragoza

CHP 3 Director
Multnomah County Health Dept.
1120 SW 5th, 14th Floor
Portland, OR 97204
Phone: (503) 988-3674
consuelo.c.saragoza@co.multnomah.or.us

Betty Schallberger

Supervisor, Medical Records
Multnomah County Mental Health & Addiction Services
Division
421 SW 6th Avenue, Suite 600
Portland, OR 97204
Phone: (503) 988-3999 x24558
betty.l.schallberger@co.multnomah.or.us

Hazel Schider

Program Coordinator
Lutheran Community Services NW
605 SE 39th Avenue
Portland, OR 97214
Phone: (503) 231-7480 x680
hschnider@lcsnw.org

Susan E. Shapiro

Post Doctoral Fellow
School of Nursing
Oregon Health & Science University
3455 SW US Veterans Hospital Road, SON-ORD
Portland, OR 97239-2941
Phone: (503) 418-2080
shapiros@ohsu.edu

Suzanne Sikma

Associate Professor
University of Washington, Bothell
Box 358532
8115 Campus Way NE
Bothell, WA 98011-8246
Phone: (425) 352-5324
ssikma@u.washington.edu

Isabelle Soule, RN, MN

Assistant Professor
School of Nursing
Oregon Health & Science University
3455 SW US Veterans Hospital Road
Portland, OR 97239-2941
Phone: (503) 494-1473
soulei@ohsu.edu

Nancy H. Stevens

Community Health
Kaiser Permanente
500 NE Multnomah Street
Portland, OR 97232
Phone: (503) 813-3828
nancy.h.stevens@kp.org

Patricia Stryker

Development/Public Relations Director
Columbia River Mental Health Service
P.O. Box 1337
Vancouver, WA 98666
Phone: (360) 993-3049
pats@crmhs.org

Sandra Swart

Project Manager
Regional Research Institute
Portland State University
PSU/RRI, PO Box 751
Portland, OR 97207
Phone: (503) 725-5198
sswart@pdx.edu

Participants

Olivia Thomas

Director Program Planning & Grants
Center for Health & Social Inequality Research
Portland State University
PO Box 751
Portland, OR 97207
Phone: (503) 725-9575
thomas@pdx.edu

Tricia Tillman

Health Promotion Manager
Multnomah County Health Department
1120 SW 5th, 14th Floor
Portland, OR 97204
Phone: (503) 988-3674
tricia.e.tillman@co.multnomah.or.us

Cindy Trail

Community Liason
Central District Health Department
707 N. Armstrong Place
Boise, ID 83704
Phone: (208) 327-8550
ctrail@phd4.state.id.us

Marciela Urzua

Prevention Services Program Analyst
Oregon Department of Human Services
500 Summer Street, NE
Salem, OR 97301
Phone: (503) 947-5389
maricela.g.urzua@state.or.us

Jennifer Valentine, MSPH

Executive Director
Cascades East AHEC
2500 NE Neff Road
Bend, OR 97701
Phone: (541) 388-9959
jvalenti@scmc.org

Catherine Van Son, RN, MSN

School of Nursing
Oregon Health & Science University
3455 SW US Veterans Hospital Road
Portland, OR 97239-2941
vansonc@ohsu.edu

Jane Waddell

Portland State University
13379 Thoma Road
Lake Oswego, Oregon 97034-1543
Phone: (503) 675-3833
jtw@paws.com

J. Kimberly Walker

Oregon Institute on Disability & Development
707 SW Gaines Road
Portland, OR 97239-2901
Phone: (503) 494-5584
walkekim@ohsu.edu

Larry Wallace

Clinical Supervisor
Volunteers of America of Oregon, Inc.
3910 SE Stark Street
Portland, OR 97214
Phone: (503) 595-3477 x228
dgour@voaor.org

Sharon Washington-Clark

Program Manager/BCCP
Oregon Department of Human Services, Health Services
800 NE Oregon Street, Suite 730
Portland, OR 97232
Phone: (503) 731-4273

Star Waters

AMA/Poder es Salud/Power for Health Project
2337 N Williams
Portland, OR 97227
Phone: (503) 988-6250 x25042
starwaters@qwest.net

Participants

Marc Weinstein, PhD

Research Associate

Labor Education Research Center

1675 Agate

Eugene, OR 97403

Phone: (541) 346-3063

marcw@lcbmail.uoregon.edu

Bev White

Oregon State University

4254 Ridgeway Drive, SE

Turner, OR 97392

Phone: (503) 743-2871

bwhite@meritel.net

Dana Welty

info@jwipdx.org

Sharon White

shrcouns@aol.com

Felicia Wilhemy, MA

Manager, Outreach and Prevention Education

Cascade Aids Project

620 SW Fifth Avenue, Suite 300

Portland, Oregon 97204

Phone: (503) 223-5907

Fax: (503) 223-7087

fwilhelmy@cascadeaids.org

Nancy Wilton

Chief of Staff

Multnomah County Department of County Human
Services

421 SW 6th Avenue, Suite 700

Portland, OR 97204

Phone: (503) 988-3691 X24776

Mary Winter

Executive Director

Eastern Oregon Children's Multi-Treatment Center

622 Airport Road

Pendleton, OR 97801

Phone: (541) 966-7785

mwinter@eocmtc.org

Thomas J. Wright, PhD

American Research Institute, Inc.

7218 NE Sandy Boulevard, Suite 3

Portland, OR 97213

Phone: (503) 249-3926

aresinst@aol.com

Josie Yemane-Berhane

Community Liason

Silverton Hospital

Phone: (503) 873-1773

jyemane@silvhosp.org

Jamie Zentner, MPH

125 NW 20th Place, Apt. 401

Portland, OR 97209

Phone: (503) 242-3816

jlzentner@yahoo.com

Notes

Notes
