

Issue #45

PBRN Week in Review | June 11, 2010

PBRN Grantees: Please circulate relevant information to your network members. To request additional information or make suggestions for future items, please contact the National Coordinating Center at publichealthpbrn@uams.edu or 501-551-0106. Newsletter archives are available [here](#).

Notable PBRN Activities

◆ **Public Health PBRN Special Webinar on Public Health Workforce Issues.** On Tuesday, June 8, Public Health (PH) PBRNs and partners joined three panelists Carol Gotway Crawford, PhD, Kristine Gebbie, DrPH, RN, and Hugh Tilson, MD, DrPH to discuss public health workforce research giving special attention to the interface with the practice-based research agenda and opportunities for PH PBRNs. Our panelists, who shared their knowledge and perspectives, are three of the leading experts in public health systems research relating to public health workforce.

For related background reading, the [November 2009 Supplement](#) to the *Journal of Public Health Management and Practice* focused on public health workforce research opportunities and included work by all three panelists and researchers from both the Kentucky and Michigan workforce centers of excellence. Our thanks to UK's Center of Excellence Project Manager Susan Webb, Scutch, and Cynthia Lamberth for working closely with us on this important event!

◆ **Introducing NING.** NING is a method for PBRNs to communicate with colleagues within your network as well as those in other networks. Join NING today to participate in weekly discussion forums and get announcements. Become a member of your network and the National Coordinating Center. [Click here to join](#). Kudos to Lisa VanRaemdonck (CO) for developing and managing NING.

◆ **Welcome to Our Three New National Advisory Council Members:** The Coordinating Center is pleased to announce that Dr. Ross C. Brownson, PhD, Dr. Donna J. Petersen, MHS, ScD and Dr. Paul K. Halverson, DrPH, MHSA, FACHE have agreed to join our Public Health PBRN National Advisory Council.

◆ **Dr. Ross C. Brownson, PhD**

Dr. Ross C. Brownson, PhD, is a Professor of Epidemiology at Washington University in St. Louis. He is a leading expert in chronic disease prevention; an expert in the area of applied epidemiology; and regarded as one of the great intellectual, educational, and practice leaders in the field of evidence-based public health. His research has focused on tobacco use prevention, promotion of physical activity, and the evaluation of community-level interventions. Dr. Brownson co-directs the Prevention Research Center,—a major, CDC funded center jointly led by Washington University and Saint Louis University – that develops innovative approaches to chronic disease prevention. Dr. Brownson is a board member of the American College of Epidemiology. He is an associate editor of the Annual Review

of Public Health, and on the editorial board of five other journals. He is the editor or author of the books: Chronic Disease Epidemiology and Control, Applied Epidemiology, Evidence-Based Public Health, and Community-Based Prevention.

◆ **Dr. Donna J. Petersen, MHS, ScD**

Dr. Peterson is Dean of the College of Public Health at the University of South Florida. She earned her doctoral and masters degrees from the Johns Hopkins School of Public Health. She has held positions with the federal government and the state of Maryland and has served on numerous community agency boards and gubernatorial commissions and task forces. Dr. Petersen is a frequent lecturer on topics related to maternal and child health, health care reform, and systems change and leadership, and has provided extensive technical assistance and training to state health departments in the areas of needs assessment, data system development, and public health roles within evolving health care systems. She has devoted particular attention to public health responsibilities in monitoring health status, access, utilization, and quality of health care and in the areas of systems level accountability and the development of population-based indicators. Dr. Petersen is the author of numerous publications, book chapters and a textbook on needs assessment in public health.

◆ **Dr. Paul K. Halverson, DrPH, MHSA, FACHE**

Dr. Halverson is the President of the Association of State and Territorial Health Officials (ASTHO). He also serves as Director of the Arkansas Department of Health and State Health Officer. Dr. Halverson received his doctorate in public health from the University of North Carolina at Chapel Hill and his master's in health services administration from Arizona State University. Prior to his appointment at the Arkansas Department of Health, he served for almost seven years as a member of the senior scientific staff at the Centers for Disease Control and Prevention. At the CDC, Dr. Halverson was appointed to the Silvio Conte Senior Biomedical Research Service and Director of the Division of Public Health Systems Development and Research. Dr. Halverson was appointed by the World Health Organization as the director of its Collaborating Center in Public Health Practice. Prior to the CDC, Dr. Halverson was a member of the faculty at the University of North Carolina School of Public Health.

Activities on the Horizon

◆ **Arkansas Medical, Dental and Pharmaceutical Association Presents its 117th Annual Scientific Session** in Little Rock, Arkansas. Glen Mays will present on Implications of Healthcare Reform in Arkansas.

◆ **Special Topic Network Calls (STiNCs).** The Coordinating Center staff is currently working on getting a monthly STiNC scheduled to start up in July. The topic of choice will be “services data.” This will be the first of recurring monthly calls on this topic in which PBRN networks will talk about what kind of data each have access to and/or can feasibly collect in relation to measuring LHD activities. As discussed in previous monthly conference calls, STiNCs will enhance opportunities for network to network interaction by serving as a means of facilitating cross talk and

collaboration across the networks for those who share a common interest or are pursuing common strategy. These initial STiNCs can be instrumental in PBRN networks establishing similar approaches to data collection which will be beneficial in encouraging participants to write individual state research proposals that meet their own state needs in this area while also being complementary to future PBRN larger studies. Please email us at publichealthpbrn@uams.edu if you are interested in the upcoming STiNC conference calls.

◆ **AcademyHealth: Annual Research Meeting (ARM) June 27-29, 2010 Boston, MA.** We would like to encourage PBRN researchers and collaborators to attend the 2010 AcademyHealth Annual Research meeting and the related Interest Group Meeting on Public Health Systems Research. For 26 years, AcademyHealth's Annual Research Meeting (ARM) has been the premier forum for health services research. The ARM provides an opportunity for public health researchers and practitioners around the world to discuss health policy implications, sharpen research methods, and network with colleagues. The ARM is a great place for public health researchers and practitioners to 1) examine emerging research issues critical to the organization, financing, and management of health services; 2) get updates on the latest research studies and current health policy issues; 3) hear the research funding priorities of foundations and federal agencies; and 4) explore the impact of health services research on improving access and quality of care. Nearly 2000 people are members of the Public Health Systems Research Interest Group of AcademyHealth alone – imagine the networking and learning opportunities!



WOW!!!

This is a **MONUMENTAL** year in that during the 5 day event there will be greater than **20** PHSSR related sessions and presentations. For additional information about the PHSSR and PBRN related presentations refer to the PBRN “2010 AcademyHealth Special Announcement” document emailed from the Coordinating Center on this week. To register or for more information about AcademyHealth click [here](#).

◆ **Why go to AcademyHealth?** The AcademyHealth Annual Research Meeting (ARM) is the leading national Health Services Research meeting and highly relevant to the work of Public Health PBRNs. ARM is a terrific opportunity to become immersed in high quality research. Public Health PBRN members, particularly research partners, should consider attending the meeting and seeking out the presentations of PHSSR colleagues and other researchers whose study designs and methodologies are applicable to our work. Plus, the best destinations are those with familiar hosts, and our Massachusetts PH PBRN colleagues are eager to welcome us! Registration is open until June 22. [Link to AcademyHealth website](#).

◆ **PBRN get together at AcademyHealth:** Are you going to AcademyHealth? We would love to see you there. The Coordinating Center is working with the Massachusetts PBRN to organize a PBRN gathering for our AcademyHealth participants on June 29, so please let us know of your plans to attend. Are you attending the ARM? the PHSR interest group meeting? Send an email to publichealthpbrn@uams.edu and be sure to tell us when you will be there and how we can contact you in Boston.

◆ **Public Health Systems Research Interest Group (PHSR IG)** meets June 29-30 following the ARM. The PHSR IG was formed in 2002 with 40 researchers and today boasts over 1,500 members, a marker of the overall growth and significance of the field. This meeting is an opportunity for researchers, students, public health practitioners, federal agency staff and policy

makers to share their interest in exploring and enhancing the U.S. public health system by formulating, translating and applying the PHSSR evidence base. [Register and/or read more](#) about this RWJF-sponsored interest group meeting.

◆ **AcademyHealth Preconference Methods Seminars:** [Link to more information](#)

◆ Friday June 25, 1:00-7:30 p.m.

- Qualitative Analysis

◆ Saturday, June 26, 10:00 a.m.-5:00 p.m.

- Measurement Techniques and Perspectives on Quality Improvement
- Pragmatic Trials in Comparative Effectiveness Research:
- Propensity Score Analysis

◆ **NACCHO Annual Meeting** in Memphis, Tennessee, July 14-16, 2010. For the first time ever, the NACCHO Annual Meeting will include a full track of sessions on Practice-Based Research in Public Health that runs throughout the meeting. **Lee Thielen (CO PBRN)** and Glen Mays (Coordinating Center) are part of an invited presentation on practice-based research. **Matt Stefanak (Ohio), Julie Myhre (Minnesota), and Jennifer Kertanis (Connecticut)** will present their competitively selected session on the opportunities and challenges associated with conducting research at a local health department. Many other insightful and revealing sessions on the research-practice interface are on the agenda. [Link to conference information.](#)

Related Research and Practice Activities

◆ **NACCHO Workforce Report.** The National Profile of Local Health Departments Study Series: NACCHO has released a special report on the local health department (LHD) workforce. This report uses data from the 2005 and 2008 National Profile of Local Health Department (Profile) studies to provide supplemental information on the LHD workforce not available in the main 2008 Profile report. Topics covered include trends on specific occupations; LHD top executives; staff recruitment and retirement; workforce development; and changes in staff size. This is a great resource for LHD leaders and staff, program evaluators, policy analysts, and public health researchers who want to know more about the public health workforce. [Link to Workforce Report.](#)

◆ **Effective Health Care Program Update:** *CER Methods Symposium Proceedings are Now Available.* The Agency for Healthcare Research and Quality (AHRQ) is pleased to announce that proceeding from the 2009 Symposium on Research Methods for Clinical and Comparative Effectiveness Studies are now available on the Effective Health Care (EHC) Program Web site. In June 2009, the Agency for Healthcare Research and Quality convened an invitational symposium on research methods for clinical and comparative effectiveness studies. The symposium emphasized (a) ways to enhance the inclusion of clinically heterogeneous populations in clinical and comparative effectiveness studies; and (b) methods to implement longitudinal investigations that capture longer term health outcomes, including patient-reported outcomes. Cutting across these themes were four major content areas for which abstracts were solicited from scientists across the United States: (1) study design, (2) data collection, (3) statistics and analytic methods, and (4) policy issues and applications. The published proceedings from the symposium are now available through the EHC Program Web site. These proceedings were also published in a supplement to the

June 2010 issue of the journal *Medical Care*. To review the symposium proceedings, please click [here](#).

NEW LITERATURE

◆ **A Comparative Study of 11 Local Health Department Organizational Networks.** This paper authored by Jacqueline Merrill, reports on a network analysis of 11 Local Health Departments (LHDs). The study explored sources of commonality and variability in a range of LHDs by comparing intraorganizational networks. Researchers used organizational network analysis to document relationships between employees, tasks, knowledge, and resources within LHDs, which may exist regardless of formal administrative structure. The study concluded that shared network patterns across LHDs suggest where common organizational management strategies are feasible. This evidence supports national efforts to promote uniform standards for service delivery to diverse populations. [Click here to read the paper.](#)

◆ **Research Priorities in Public Health Nursing.** This paper examines the 2009 revisions of the ACHNE Research Priorities for public health nursing practices which were built on the versions developed in 2000 and 1992. The research priorities presented in this document are aimed at generating action on the part of public health researchers and practitioners. The Association of Community Health Nursing educators (ACHNE) has endorsed this document and seeks widespread dissemination for improving the health of the public. Funding opportunities relevant to this and related research areas may be increased in the future. [Link to article](#)

NEW RESOURCES

◆ **Community Health Data Initiative.** HHS and the Institute of Medicine have launched a national initiative to help consumers and communities get more value out of the Nation's wealth of health data. Under the initiative, HHS health data will be made freely available so that software developers can create innovative applications and make the data more useful for consumers and communities. With improved data and creative new applications, communities and consumers will initiate effective new efforts in disease prevention, health promotion and measurement of health care quality and performance. To learn more about data resources being provided as part of the Community Health Data Initiative [follow this link](#).

◆ **New BRFSS Data.** CDC has released its 2009 Behavioral Risk Factor Surveillance System (BRFSS) [data, documentation](#) and [Prevalence and Trends](#) tables. With over 400,000 interviews conducted in 2009 in the largest telephone-based surveillance system in the world, the BRFSS collects information on health risk behaviors, clinical preventive health practices, and health care access in all 50 states. Now in its 25th year of producing data, the BRFSS was proposed by and developed through the leadership of Dr. Jim Marks during his tenure at CDC. Dr. Marks is RWJF senior vice president and director of the health group of which the *Public Health Practice-Based Research Networks Program* is a part.

Recent Literature and Exemplary Studies of Interest

◆ **Enhancing Public Health Budgeting.** In a recent issue of the *Journal of Public Health Management and Practice*, Peggy Honoré and colleagues presented a case study of applying a

decision analysis software model to the process of identifying funding priorities for public health services. Borrowing from business and private industry, the results shed light on how decision science models can be applied successfully to public health budgeting and agency financial management processes. [Link to abstract.](#)

◆ **Statistical Network Analysis Modeling.** In the June *American Journal of Public Health* watch for a study by Luke and colleagues with a next-step in social network analysis (SNA). The authors examined patterns of collaboration among five member networks of the National Network Consortium on Tobacco Control in Priority Populations (a network analysis of a network of networks!). In seeking to describe how common the collaborative activities are among national networks that address tobacco-related disparities and to identify organizational and structural predictors of the relationships, the researchers went beyond SNA descriptive techniques and developed statistical modeling to examine collaboration and network structure. To read more about their study design and results, [link to the abstract here.](#)

◆ **WIC Participation and the Health of Newborns.** In a paper published early online in [Health Services Research](#), Foster, Jiang, and Gibson-Davis examined the effect of Supplemental Nutritional Program for Women, Infants, and Children (WIC) on birth outcomes. Using data from the Child Development Supplement of the Panel Study of Income Dynamics (PSID), the authors used propensity score matching to examine whether WIC participation influenced birth outcomes as measured by birth weight, prematurity, maternal report of infant health, small for gestational age and NICU placement. A fixed-effects model also was used to examine these outcomes, controlling for “mother-specific unobservables.” The study concluded that the WIC program has moderate effects on the six measured birth outcomes, but “the findings were sensitive to the estimation method used.” The authors provide an excellent example of the use of propensity score matching and fixed effect methods.

Funding Opportunities and Announcements

◆ We have put together a compiled list of funding opportunities for PBRNs and PBRNs grant awards. Please email us when you receive funding from foundations, corporations or government bodies so that we may keep a current list of PBRNs grant awards. We will track and update networks on grant opportunities that cycle back around annually or quarterly.

◆ **Active Living Research Rapid-Response Call for Proposals Released.** [Active Living Research: Building Evidence to Prevent Childhood Obesity](#)

- ◆ **Deadline:** Letters of intent may be submitted until July 1, 2011.
- ◆ **Active Living Research** is a national program of the Robert Wood Johnson Foundation (RWJF) that supports research to inform policy and environmental strategies for increasing physical activity among children and adolescents, decreasing their sedentary behaviors and preventing obesity. The program places special emphasis on reaching children and youths ages 3 to 18 who are at highest risk for obesity: Black, Latino, American Indian and Asian/Pacific Islander children, as well as children who live in under-resourced and lower-income communities.

◆ **Social Network Analysis and Health (R01).** Social network analysis allows researchers to describe, integrate, and analyze spatial, mathematical, and substantive dimensions of the social structures formed as a result of ties formed between persons, organizations, or other types of nodes. Researchers can represent networks graphically, locate them spatially, and describe and analyze their properties mathematically. These spatial and mathematical relations (i.e., “networks”) can then be related to the content and quality of interpersonal ties, individual or group phenotypes and behaviors, and the well-being and dynamics of groups and communities. SNA can be used to yield more meaningful measures of social integration in studies focusing on individual outcomes and to investigate the social dynamics underlying community function and population health. SNA can be used to study the transmission of viral infections, behaviors, attitudes, information, or the diffusion of medical practices.

- ◆ For information visit: <http://grants.nih.gov/grants/guide/pa-files/PA-10-145.html>

◆ **Community Participation in Research (R01).** Community-partnered approaches to research promise to deepen our scientific base of knowledge in the areas of health promotion, disease prevention, and health disparities. Community-partnered research processes offer the potential to generate better-informed hypotheses, develop more effective interventions, and enhance the translation of the research results into practice. Given this FOAs emphasis, all applications that respond to this announcement must demonstrate clear community partnerships with substantive involvement in their proposed research projects.

- ◆ For information visit: <http://grants.nih.gov/grants/guide/pa-files/PA-08-074.html>

◆ **Dissemination and Implementation Research in Health (R01).** Dissemination and implementation research intends to bridge the gap between public health, clinical research, and everyday practice by building a knowledge base about how health information, interventions, and new clinical practices are transmitted and translated for public health and health care service use in specific settings. Unfortunately, there continues to be great variation in how these terms are used. Dissemination and implementation have both been used to represent the complete process of bringing “evidence” into practice, originally defined as “diffusion.” While using the terms dissemination and implementation to cover such a wide area can be very helpful in facilitating discussion, it does not allow for the division of this very complex diffusion process into smaller, more easily addressed research questions that can develop a robust knowledge base. This funding opportunity is inviting applications that will continue to break down the complexity of bridging research and practice.

- ◆ For information visit: <http://grants.nih.gov/grants/guide/pa-files/PA-10-038.html>

◆ **Behavioral and Social Science Research on Understanding and Reducing Health Disparities (R01).** Advancing knowledge about the potential for reducing health disparities through policy mechanisms requires a broad set of research studies, including both basic and intervention research. Further, interdisciplinary efforts are needed to bridge the many different kinds of economic, social, behavioral, and biological processes involved in translating public policy into public health. Examples include research on:

- ◆ The interacting and cumulative effects on health disparities of policies formulated at a variety of levels – national, state, local, and nongovernmental.
- ◆ Innovative policy approaches to addressing pathways linking social and behavioral factors to health disparities, e.g., policies with the potential to build social capital in communities,

alleviate stressors associated with disadvantage, or address targeted advertising of alcohol and tobacco in disadvantaged populations.

- ◆ The behavioral and social mechanisms and processes linking policy to health disparities, including the role of social, cultural, and economic factors in mediating impacts and producing variations in policy implementation that affect outcomes.
- ◆ Knowledge transfer in the context of policy formation and implementation. Incorporating scientific knowledge with other kinds of information in the community, economic, bureaucratic, and legal processes that leads to the development of policies to affect health disparities?
- ◆ Cost-effectiveness of different policy strategies for addressing health disparities.
- ◆ Development of research designs and methodologies for studying policy effects on health disparities, including experimental, comparative, and other observational methods.

For the application, information and guidelines visit: <http://grants.nih.gov/grants/guide/pa-files/PAR-10-136.html>

Upcoming Key Dates

- June 17:** Round II PBRN Monthly Conference Call | 1:00-2:30 ET
- June 26-30:** AcademyHealth Annual Research Meeting and Public Health Systems Research Interest Group Meeting, Boston, MA. For more information and to register click here.
- July 13-16:** NACCHO Annual Meeting, Memphis, TN. For more information and to register click here.
- July 13:** Round I PBRN Monthly Conference Call | 11:30-12:30 ET
- July 15:** Round II PBRN Monthly Conference Call | 1:00-2:30 ET

Note: The July conference calls overlap with the NACCHO meeting schedule.

- Aug 10:** Round I PBRN Monthly Conference Call | 11:30-12:30 ET
- Aug 18:** Public Health PBRN Quarterly Webinar | 2:00-3:30 ET
(Regularly scheduled date and time remain flexible to accommodate speaker(s).)
- Aug 19:** Round II PBRN Monthly Conference Call | 1:00-2:30 ET

Next Issue: Week of June 18, 2010