

Institute for Health Research and Policy

Annual Report 2005



UIC UNIVERSITY OF ILLINOIS
AT CHICAGO

Institute for Health Research and Policy

A university-wide multidisciplinary institute administered
through the School of Public Health

Institute for Health Research and Policy Leadership

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Professor of Health Policy and
Administration

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Richard B. Warnecke, PhD

Director, Program for Cancer Control
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Professor of Sociology, Epidemiology
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Jack Zwanziger, PhD

Director, Center for Health Services
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Director, Division of Health Policy and
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Professor of Health Policy and
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From the Director

Institute for Health Research and Policy: The Whole is Greater Than the Sum of Its Parts

A national priority in health research and policy is to accelerate the translation of biomedical, clinical, and behavioral research into practice. The ultimate goal is to close the gap between “what we know” and “what we do” to improve health. UIC’s 2010 plan highlights three essential ingredients to achieve this important goal: research that crosses traditional academic boundaries, full engagement with community partners, and the highest quality training of graduate students and new investigators. With our core commitments to fostering the collaboration of researchers across disciplines, mentoring and training of new investigators, addressing disparities in health, and working in partnership with community leaders and residents to promote health in their communities, the Institute for Health Research and Policy (IHRP) serves as a model for facilitating cross-campus collaboration at UIC.

Evident in this annual report, which highlights just some of the work at the institute, is the success of our research in crossing academic boundaries to focus on priority health issues. The institute houses innovative research that bridges basic, clinical and public health sciences, addresses health concerns across the lifespan, and fully engages multiple community partners. Our training grants and research projects provide exceptional opportunities for students and recent graduates to participate in research development, grant preparation, study implementation, presentations at national conferences, and peer-reviewed publications. Working in this environment early in their careers infuses among new health researchers a culture of collaboration and respect for different disciplinary approaches to the same key health issues.

Lastly, one can never underestimate the importance of a rich research infrastructure. Over 200 dedicated professionals work on more than 70 research projects in this institute. As its director and as a researcher, I am acutely aware of the importance of having quality financial, administrative, and information technology systems to prepare successful grant proposals, hire and train outstanding research staff, conduct our science, and bring it to fruition in stronger health policy and practice. The dedicated professionals at IHRP in grants administration, human resources, information technology, communications, and human subjects’ review truly make it easy for great people to do great work.



Susan J. Curry, PhD

Sue Curry

Complex Health Questions Call for Rigorous Methods

Smoking, poor diet and physical inactivity are among the leading causes of premature death and disability in the United States. Understanding these behaviors and developing effective interventions to address them are among the primary goals of the Institute for Health Research and Policy.

“We acknowledge health behaviors are the results of complex biological, psychological, social and environmental factors,” says Robin Mermelstein, professor of psychology and the institute’s deputy director. “To understand and change these behaviors, we need a broad, multidisciplinary perspective.”

Pursuing a multidisciplinary perspective requires rigorous methods, and the Methodology Research Core provides outstanding support for research conducted at the institute. Directed by Michael Berbaum, senior biostatistician, the core includes Richard Campbell, professor of epidemiology, biostatistics and sociology; Young Ku Choi, biostatistician; and Donald Hedeker, professor of epidemiology and biostatistics.

With more than 80 years of cumulative experience, the core offers strengths in both sound methodological expertise and knowledge of the social sciences. Berbaum and Hedeker have doctorates in psychology, Campbell in sociology, and Choi in biostatistics.

Their expertise is available to all investigators affiliated with the institute, and their roles range from advising on research design during proposal development to participating as co-investigators on research projects. The core also hosts workshops on advanced methods.

Here is a sample of some of the methods used in institute projects to understand the complex issues of smoking, health literacy and obesity.

Understanding the Contexts in which Teens Become Smokers

In one of the institute’s largest projects, a team of researchers are tracking more than 1,200 ninth- and 10th-grade students from 16 Chicago area high schools over three years to understand the many dynamics that might influence smoking behaviors.

“Surprisingly little is known about why some teens experiment with smoking and quit, while others experiment and become dependent,” said Mermelstein, who is leading the \$13 million study funded by the National Cancer Institute. She also directs the Center for Health Behavior Research.

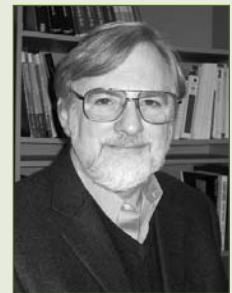
The study’s goals include understanding the pathways that contribute to teen smoking, determining how much time it takes to become dependent and identifying who is most vulnerable, Mermelstein said.

To achieve this, researchers are collecting a large volume of data in a variety of forms. All 1,200 students will complete an extensive battery of paper-and-pencil questionnaires several times during the 33-month follow-up period. In addition, the students’ parents will complete questionnaires at baseline as well. Additional data will be collected from subgroups of this cohort:

- Interviews conducted via personal digital assistants (PDAs) to record teens’ feelings, activities and companions “in the moment” over the course of a week.
- Videotaped observations of teens and their parents discussing family rules, their relationships and the ways they communicate.
- Psychophysiological data of adolescents collected in a controlled laboratory setting to examine reactions to emotionally arousing stimuli.



*Robin J.
Mermelstein, PhD*



*Michael L.
Berbaum, PhD*

“To understand and change health behaviors, we need a broad, multidisciplinary perspective.”

— Robin Mermelstein



Susan J. Curry, PhD



Susan R. Levy, PhD

continued >

Each of these three projects employs methodological staff, and the entire project has a statistics core overseen by Donald Hedeker. That team includes a full-time data manager, a full-time data analyst, and collaborating co-investigators Campbell, Berbaum and Paul Rathouz, a biostatistician at the University of Chicago.

This study's methodological challenges include data management and the integration of disparate kinds of data. For example, will teens' electronic reports of how they feel and respond to smoking in "real time," together with the psychophysiological data on emotional responses to nicotine in the laboratory, provide better insight into the development of dependence than either method alone? What will videotaped observations of parent-adolescent communications indicate regarding teens' ability to successfully negotiate peer pressure to smoke, as captured by the PDA reports?

"Multilevel longitudinal analyses are needed to understand the different patterns or trajectories of behavior over time," said Mermelstein.

Finding the Best Ways to Help Teens Quit Smoking

Susan Curry, the institute's director, is leading a research team to identify best practices in youth smoking cessation programs in a first-of-its-kind national study.

"There is an enormous gap in information about what programs work for youth and young adults, and what programs may actually be harmful," said Curry, who is professor of health policy and administration.

Using a longitudinal associative model, the researchers aim to identify program components, processes, and contextual factors associated with increased recruitment, retention and quit rates. They are examining the communities in which the youth reside; the organizations offering the programs; program components; provider characteristics; and participants' smoking behaviors and plans, program experience, social life and other factors.

In October 2004, the research team began collecting baseline data from 41 programs in 18 states. End-of-program, six-month and 12-month data are also collected.

Before launching this study, the research team profiled a national sample of smoking cessation programs for youth. Using a network sampling technique, they made 10,000 phone calls to identify over 750 programs in a representative sample of 408 U.S. counties. The team then surveyed and characterized nearly 600 of these programs.

The methodological challenge for the project's evaluation phase is identifying best practices without conducting a randomized trial. Under the guidance of co-investigators Michael Berbaum and Richard Campbell, the research team is using sophisticated statistical models to "tease out" these best practices, Curry said.

Intervention to Teach Health Literacy to Adults

Susan R. Levy, professor emeritus of community health sciences and education, is testing the efficacy of an adult literacy curriculum to teach important health concepts and information while furthering reading and comprehension skills.

Levy, who consulted adult education experts and national health experts in the development of this new curriculum and teaching method, seeks to learn whether adults are more motivated to attend class and improve their reading skills if they learn about a

Members of the
Methodology
Research Core
facilitate cross-
center and cross-
project sharing
of innovative
methodological
approaches within
the institute.

topic as practical as health. Standardized test scores and other outcomes, such as gains in health knowledge, beliefs and behaviors will be measured. The research design also allows an evaluation of the two most common teaching approaches to adult literacy, which have not been rigorously studied until now.

“The curriculum teaches very practical skills,” said Levy. “It provides not just opportunities to improve reading comprehension but content helpful to very vulnerable people.”

The randomized, controlled study has presented methodological challenges from the start, said Levy. The research design had to account for seven versions of the 42-hour curriculum. Each version teaches the same health objectives in the same order but is shaped for a different level of literacy for native English speakers or those learning English as a second language.

Data collection also poses problems. The attrition rates in adult education programs are high so, in some classrooms, as many as half the study participants may not take the posttest.

Michael Berbaum, one of Levy’s co-investigators, wrote a computer program that assigns classes to the study group or the control group. He uses advanced statistical tools and tailors analyses to allow correct inferences about program effects despite the missing data.

The project’s first wave of data collection began in January 2004. Ultimately, pretest, posttest and attendance data and classroom observations will be collected from more than 2,000 adults at 42 literacy training sites in Illinois.

Analyzing Large-Scale Data Sets to Learn How Policy Affects Obesity

Some investigators within the institute draw on their own extensive experience in statistical modeling and analysis. For example, the work of Frank Chaloupka, professor of economics and director of the Health Policy Center, is nationally recognized for merging and analyzing large data sets from different sources to develop comprehensive models that reveal the effects of economic policy on health behavior.

Lisa Powell, the center’s assistant director and research associate professor of economics, uses this approach to study obesity.

For example, in a study funded by the U.S. Department of Agriculture, Powell and colleagues, including Chaloupka, are investigating the influence of economic, lifestyle and social factors on obesity. This research combines detailed individual-level national survey data with extensive regional economic and environmental data from the U.S. census, Dun & Bradstreet and the American Chambers of Commerce Research Association (ACCRA).

The researchers are examining the relationships between body mass index and multiple factors, including local prices of food and fast food, the availability of local area food stores, restaurants, supermarkets and physical activity outlets, controlling for a detailed set of individual and household characteristics. They also are examining the relationship between these contextual factors and food consumption and physical activity behaviors.

Such research presents multiple technical challenges. Powell and colleagues manage large volumes of data, perform substantial statistical analyses and resolve design differences among databases. For example, ACCRA data are available by city, but another database may organize its data by zip code, county or some other design.

Because the Methodology Research Core is aware of this work and that of other projects at the institute, members of the core are able to facilitate cross-center and cross-project sharing of innovative methodological approaches. ■



Lisa M. Powell, PhD



Jan Warren-Findlow,
PhD



Shannon Zenk, PhD

Training the Next Generation of Health Researchers

One of Our Research Assistants

Before Jan Warren-Findlow graduated in May 2005 from the doctoral program in community health sciences at the UIC School of Public Health, a full-time university appointment was waiting for her. She said her experience as a research assistant at the institute augmented her graduate studies and helped her secure a position.

“The work experience and mentoring I got at IHRP made me exceptionally prepared for a tenure-track faculty job,” said Warren-Findlow, who is now an assistant professor in the Department of Health Behavior and Administration at the University of North Carolina at Charlotte.

At the institute, Warren-Findlow worked on large grants from the National Institute on Aging, wrote proposals, managed projects, wrote annual progress reports and recruited study participants. She also made 15 scholarly presentations and published three articles before graduating.

The institute employed 77 research assistants during 2004–2005. While most were enrolled in graduate programs in the School of Public Health, more than a third were pursuing advanced degrees in economics, psychology, sociology, nursing and other health sciences.

One of Our Postdoctoral Fellows

When Shannon Zenk was seeking a postdoctoral fellowship a few years ago, she had several criteria in mind. She wanted to focus on health disparities, collaborate across disciplines and improve her methodological skills while conducting community-based participatory research.

Zenk said she found these opportunities at the institute. She began a two-year fellowship in the Cancer Education and Career Development Program in January 2004.

Zenk, who earned her doctorate in health behavior and health education from the University of Michigan, said she has found a range of research activity at the institute that meets her interests.

“I’ve had a lot of flexibility about projects I worked on,” she said.

With Richard Warnecke in the Center for Population Health and Health Disparities, Zenk is studying access to mammography facilities across Chicago. She is working on a Robert Wood Johnson Foundation project with JoEllen Wilbur in the College of Nursing and others that aims to determine how the neighborhood environment influences physical activity among African American women.

Zenk said her experience at the institute also has helped her build her CV. Since beginning at the institute, she has written or contributed as a co-investigator to six grant proposals, two of which were funded in 2005, and published 13 articles.

“The work experience and mentoring I got at IHRP made me exceptionally prepared for a tenure-track faculty job.”

— Jan Warren-Findlow

The institute is home to four training programs funded by the National Institutes of Health. In addition to the cancer-themed program, the Gerontological Public Health Program and the Prevention Research Training Program offer predoctoral and postdoctoral fellowships. In these programs fellows can work with faculty throughout the university.

A New Program for Clinical Researchers

With the 2005 award for a new Clinical Research Training Program, the institute is helping the campus cultivate its clinical research future. The National Institutes of Health is funding the program with \$1.5 million over five years.

Jack Zwanziger, the program director, said this award signifies “recognition on NIH’s part that this university has a serious interest in training clinical researchers.” Zwanziger, professor of health policy and administration, directs the Division of Health Policy and Administration in the School of Public Health and directs the Health Services Research Center at the institute.

In the short term, he said, the program will offer excellent training and help the university grow its clinical research program. In the long run, it will catalyze the development of new clinical research abilities on campus.

“I am really happy about this program,” Zwanziger said, citing the quality and collaborative spirit of the interdisciplinary team of program developers from all six colleges in the health sciences. Because of the program’s interdisciplinary nature, he said, “It’s ideal for the grant to be housed here at the institute.”

The two-year program will train post-doctoral or post-residency fellows and junior faculty to become leaders in clinical research, not only in medicine, but also dentistry, pharmacy, clinical psychology, nursing and other health sciences.

In the first year, fellows in the program will take courses in the fundamentals of biostatistics, epidemiology, study design, bioethics, cost-effectiveness analysis and grant writing. In the second year, they will complete a mentored research project, prepare an article for a scholarly journal and write a grant proposal for a career development grant. The program will lead to a Master of Science in Clinical Research.

Zwanziger said the program will accept two to four fellows for 2006–2008 and up to six in each subsequent year. ■



Jack Zwanziger, PhD

The institute
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Highlights from FY2005

July 2004

- The Illinois Board of Higher Education designates the Health Research and Policy Centers as the Institute for Health Research and Policy (IHRP).
- The National Institute on Drug Abuse renews funding for the IHRP postdoctoral training program in prevention research (\$3.5 million for five years).*

September 2004

- The National Cancer Institute awards \$13 million to Robin Mermelstein and colleagues for their five-year research program, Social-Emotional Contexts of Adolescent Smoking Patterns.*
- The Centers for Disease Control and Prevention renews funding for the Illinois Prevention Research Center at \$4.4 million through September 2009.* Susan J. Curry is the principal investigator.

- Long-term Care in Illinois > Conference is held. Institute-affiliated faculty member Naoko Muramatsu organized the conference, which was co-sponsored by the IHRP and co-hosted by the Institute of Government and Public Affairs and the Health and Medicine Research Group.



- The Centers for Disease Control and Prevention awards Susan Hughes (PI) \$1.3 million over three years to study cost-effective health promotion among older workers.* UIC support staff members will be recruited for the study.

October 2004

- < The institute holds an open house for campus colleagues. University Chancellor Sylvia Manning and 200 UIC faculty and staff attend. Special recognition is given to Brian Flay and Susan Scrimshaw for their role in founding the institute.

- The institute calls for proposals for its first campuswide pilot grant competition.

November 2004

- David Abrams, the newly named director of the NIH Office of Behavioral and Social Sciences Research, discusses "Basic Science, Policy and Population Health: Forging Transdisciplinary Bridges" in the institute's inaugural Distinguished Lecture. >



* One of the four largest awards in FY2005.



December 2004

- < Frank J. Chaloupka, professor of economics and director of the Health Policy Center, gives testimony in the U.S. Department of Justice's corporate fraud RICO case against major U.S. cigarette manufacturers. He continues to consult with the DOJ on the case.
- Psychologist Marian Fitzgibbon and colleagues arrive from Northwestern University to establish the Department of Medicine's Section of Health Promotion Research, affiliated with IHRP as the Health Promotion Research Program.

April 2005

- The institute holds a reception to thank members > of its 158 partnering agencies, community organizations and schools.

May 2005

- The institute convenes the second annual meeting of its external advisory board, which is composed of 12 nationally prominent researchers in health and health policy.



- < Kenneth E. Warner of the University of Michigan delivers the institute's Spring Distinguished Lecture, "The Role of Research in a Politically Charged Environment: The Making of the Framework Convention on Tobacco Control."
- More than 2,000 older adults participate in > the Sixth Annual Senior Health Alliance Promoting Exercise (SHAPE) Walk held at Soldier Field. The Center for Research on Health and Aging leads a consortium of organizations in managing this event each year.



June 2005

- The institute awards its first pilot grants > after considering 15 applications. Two \$50,000 grants are awarded to: Mary Ann Kliethermes, of the UIC Department of Pharmacy Practice, to evaluate the efficacy of medication therapy management services for patients with multiple chronic diseases; and James Herdegen, of the UIC Center for Sleep and Ventilatory Disorders, to investigate the potential interaction between type 2 diabetes and sleep apnea among African Americans and Hispanics, who are at high risk for these disorders.



Partnering with the Community Strengthens Health Research and Interventions

Addressing health challenges across the lifespan requires not only sound science but also an understanding for what works in the real world. More than 150 community partners work with researchers at the Institute for Health Research and Policy. Schools, public health agencies and nonprofit community-based organizations host interventions, provide advice and input on community priorities, and participate in intervention design and research, often as full partners.

Partnering with Schools



*Marian L. Fitzgibbon,
PhD*

Identifying key people in an organization or community who are invested in a study's goals is the first step toward an effective community collaboration. Marian Fitzgibbon said she had to find the “pro-health people” among administrators in the Chicago Public Schools to study an obesity intervention that targets preschoolers. Fitzgibbon, a clinical psychologist and professor of medicine and health policy and administration, directs the Health Promotion Research Program at the institute and the Section of Health Promotion Research in the Department of Medicine.

Funded by the Kraft Foundation, Fitzgibbon's Happy Healthy Kids study evaluates an intervention developed to prevent excessive weight gain in preschoolers through physical activity and healthy eating.

It wasn't too difficult to find a dozen schools interested in working with the project, said Fitzgibbon. Pre-kindergarten programs are required to include nutrition modules. “Our intervention gives them a package of things to do,” she said, adding that it's easier to get involved in curricula at the preschool level, where academic demands are not as strong.

Fitzgibbon's team found challenges in the implementation. “Many teachers aren't fit themselves,” she said. “They have difficulty leading a 20-minute physical activity module on their own.”

The research team therefore developed a CD of songs that guide the class in warm-up, aerobic, stretching and cool-down exercises. The CD is in English, and they are working with local Latino musicians on a Spanish version.

The intervention also features puppets—a friendly carrot-like character, for example—in short scripts about nutrition principles. Fitzgibbon and her team realized that the handmade puppets were too expensive for use in dozens of classrooms, so they found simpler ways to produce them.

“We're learning a lot about the ways to deliver this program that are more appropriate for the real world,” said Fitzgibbon.

Partnering with a Youth Mentoring Organization



David L. DuBois, PhD

Making an intervention practical and realistic is a challenge, said David DuBois, a clinical psychologist and associate professor of community health sciences. In the summer of 2005, DuBois and his research team put the final touches on a structured mentoring curriculum called Girl Power! Funded by the National Institutes of Health, the curriculum features a health-oriented theme and is the result of two years of collaboration with Big Brothers Big Sisters of Metropolitan Chicago.

With feedback from the agency and its mentors, the research team adjusted the intervention repeatedly as they piloted the program with a small number of girls and their mentors. For example, mentors reported being overwhelmed with the amount of health information in the curriculum, so learning objectives were refined and sessions were streamlined. Researchers thought session objectives would be best supported if

agency staff phoned each mentor after a session, but the already busy staff couldn't take on this task. As a compromise, staff members now contact mentors once a month.

"It's the nature of conducting interventions," said DuBois. "It takes a commitment to practical problem-solving to fit the real-world circumstances of community agencies and the competing demands of staff and volunteers."

In the fall of 2005, DuBois and his team began testing the efficacy of the program in a small-scale randomized trial. Two groups of teenaged girls and their mentors were assigned to either the program or standard agency mentoring services. DuBois said he will measure a wide range of health-related outcomes for Girl Power!, but he expects the most immediate benefits will be increased discussions about health issues and longer lasting relationships between the girls and their mentors. He plans to use the results to support further study with a larger cohort and to begin to examine the intervention's appeal to other organizations serving teenagers.

"We want other agencies to say, 'This looks not only worthwhile, but doable,'" he said.

Partnering with the City

Susan Hughes and Thomas Prohaska, co-directors of the Center for Research on Health and Aging and professors of community health sciences, work with organizations serving senior citizens locally and nationally to identify policies and practices that promote physical activity and other healthful behaviors among older adults.

As members of the Centers for Disease Control and Prevention's Healthy Aging Research Network, Hughes and Prohaska work with colleagues at nine universities across the country to identify and advance an agenda for healthy aging.

"We're learning a lot about the ways to deliver this program that are more appropriate for the real world."

— Marian Fitzgibbon

Local partners advise Hughes and Prohaska on this network's research through the Senior Health Alliance Promoting Exercise (SHAPE), which meets monthly. The alliance, which Hughes and Prohaska formed to heighten public awareness of the importance of health promotion for seniors, includes a dozen Cook County nonprofit organizations, public agencies and health care providers.

With SHAPE colleagues, Hughes and Prohaska have surveyed Cook County physical activity programs serving older adults, published several editions of a guide to such programs for seniors, and coordinated annual fitness promotion events, each attended by thousands of older adults.

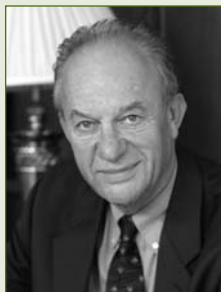
Hughes and Prohaska also collaborate on specific research projects with individual organizations belonging to SHAPE. For example, Hughes is studying adherence to her evidence-based Fit and Strong program among 600 older adults with osteoarthritis. Her key partner in this study is the Chicago Department on Aging, which serves



*Susan L. Hughes,
DSW*



*Thomas R. Prohaska,
PhD*



*Richard B. Warnecke,
PhD*



Marilyn Willis, RN, MS

continued >

400,000 seniors. The department is hosting the program in five of its senior centers.

After completing the eight-week program, half of the study participants join the department's award-winning fitness program. The other half follow a personalized program developed with a fitness instructor. Both groups will be followed for 24 months.

Hughes said both the department and the research benefit. "We enroll people in our study and provide the instructors. There are no operating costs for the host site, and the city gets new participants in its senior centers," she said.

Partnering with Community Health Care Providers and Residents

In the Center for Population Health and Health Disparities, community health care providers, health departments and residents are working alongside UIC researchers to examine the ethnic and racial disparities of breast cancer.

The center involves community groups in monthly investigators' meetings, includes their interests among its aims and provides them with funding. Organizational representatives also participate in annual investigator meetings held among the eight health disparities centers funded by NIH nationwide.

Richard Warnecke, the center's director and professor of sociology, epidemiology and biostatistics, calls this "real community participatory research."

Among the center's partners are the Healthcare Consortium of Illinois, Healthy South Chicago and the Greater Roseland Breast Cancer Task Force. In 2005, these organizations developed a questionnaire with researchers for women with breast cancer and conducted focus groups on Chicago's South Side and Roseland to shape the instrument. They and the center's researchers also are working with the city's health commissioner to increase access to cancer screening and other care.

Another partner, the Illinois State Cancer Registry, is informing women recently diagnosed with breast cancer of the study, which will enroll 1,200 participants. To do this, the registry is implementing a system that will expedite the identification of new cancer cases. The disparities center is funding this new system, which will allow other epidemiologic efforts requiring rapid access to cancer patients.

Warnecke said researchers need their community partners to understand the project thoroughly, not only to ensure that the research methods will work in the community. "When it comes time to disseminating our findings," he said, "they will have been involved in the science, so they will be able to vouch for it to the community."

Regular involvement also allows community partners to begin to address health disparities as the research uncovers their dynamics.

"We're not waiting five years to share our findings," said Marilyn Willis, the associate director for administration and community relations in the Program for Cancer Control and Population Science. The program, jointly affiliated with the UIC Cancer Center and the Institute for Health Research and Policy, houses multiple studies, including the health disparities center.

"From the beginning, we made it clear that we wanted input from all the team members and made a conscious decision to keep everyone abreast of key developments," Willis said.

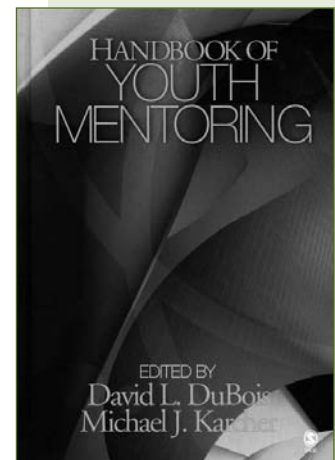
Margaret Davis, executive director of the Healthcare Consortium of Illinois, cited another key to this successful collaboration. "The center helps HCI meet its goals—new skill development and funding for community interventions," she said.

At the heart of this relationship, Davis and Willis agreed, is a "shared commitment to improving the health of underserved populations and building the community's capacity to address these issues." ■

Selected Publications

Institute-affiliated authors published more than 100 scholarly articles in FY2005. Here are a few of them.

- > Atreja A, Bellam N, Levy SR. Strategies to enhance patient adherence: making it simple. *MedGenMed*. 2005;7(1):4. <http://www.medscape.com/viewarticle/498339>
- > Byck GR, Cooksey JA, Russinof H. Safety-net dental clinics: a viable model for dental care. *J Am Dent Assoc*. 2005;136:1013–1021.
- > Curry SJ. Toward a public policy agenda for addressing multiple health risk behaviors in primary care. *Am J Preventive Med*. 2004;27(2 Suppl):106–108.
- > DuBois DL, Silverthorn N. Natural mentoring relationships and adolescent health: evidence from a national study. *Am J Public Health*. 2005;95(3):518–524.
- > Emery S, Wakefield M, Terry-McElrath Y, et al. Televised state-sponsored antitobacco advertising and youth smoking beliefs and behavior in the United States, 1999–2000. *Arch Pediatr Adolesc Med*. 2005;159(7):639–645.
- > Fitzgibbon ML, Stolley MR, Schiffer L, et al. Two-year follow-up results for Hip-Hop to Health Jr. *J Pediatr*. 2005;146:618–625.
- > Flay BR, Biglan A, Boruch RF, et al. Standards of evidence: criteria for efficacy, effectiveness and dissemination. *Prev Sci*. 2005;6(3):151–175.
- > Freeman VL, Meydani M, Hur K, et al. Inverse association between prostatic polyunsaturated fatty acid and risk of locally advanced prostate carcinoma. *Cancer*. 2004;101(12):2744–2754.
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- > Hedeker D. Generalized linear mixed models. In: *Encyclopedia of Statistics in Behavioral Science*, ed. B Everitt and D Howell. New York: John Wiley & Sons, 2005.
- > Hughes SL, Williams B, Molina LC, et al. Characteristics of physical activity programs for older adults: results of a multisite survey. *Gerontologist*. 2005;45(4):667–675.
- > Kelley MA, Baldyga W, Barajas F, et al. Capturing change in a community-university partnership: the ¡Sí Se Puede! project. *Prev Chronic Dis*. 2005;2(2):A22. http://www.cdc.gov/pcd/issues/2005/apr/04_0093.htm
- > Peters K, Henley E. Acting on synergies between clinic and community strategies to improve preventive medicine. *J Fam Pract*. 2004;53(12):970–973.
- > Powell LM, Tauras JA, Ross H. The importance of peer effects, cigarette prices and tobacco control policies for youth smoking behavior. *J Health Econ*. 2005;25:950–968.
- > Ramirez-Valles J, Heckathorn DD, Vázquez R, et al. From networks to populations: the development and application of respondent-driven sampling among IDUs and Latino gay men. *AIDS Behav*. 2005;9(4):387–402.
- > Rauscher GH, Hawley ST, Earp JA. Baseline predictors of initiation vs. maintenance of regular mammography use among rural women. *Prev Med*. 2005;40(6):822–830.



Institute-affiliated researcher David DuBois and his colleague Michael Karcher won the Society for Research on Adolescence's 2006 Social Policy Award for Best Edited Book for *Handbook of Youth Mentoring* (Thousand Oaks, Calif: Sage Publications, 2005). Used with permission.

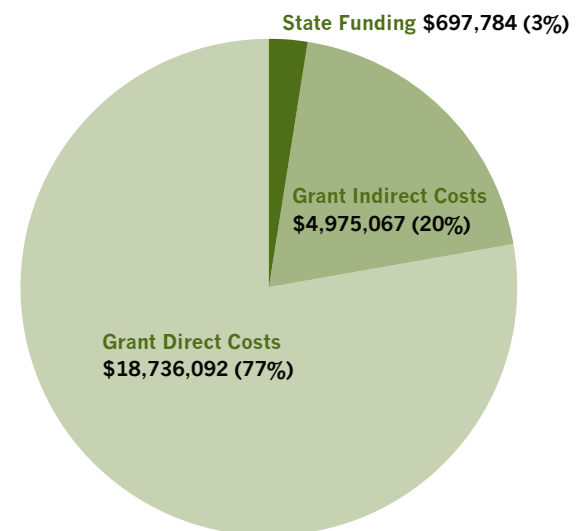
For every dollar of state support received in FY2005, the Institute for Health Research and Policy generated \$34 in research funding.

Financial Profiles

- > For every dollar of state support received in FY2005, the Institute for Health Research and Policy generated \$34 in research funding.
- > With state-line and extramural funding, the institute received \$24,408,943 in FY2005.
- > Governmental, nonprofit and private agencies awarded institute-affiliated projects \$23,711,159 in new and continuous grants in FY2005.
- > The institute has been awarded \$104.6 million in research grants since it was established in 1997.

Overall IHRP Funding, FY2005

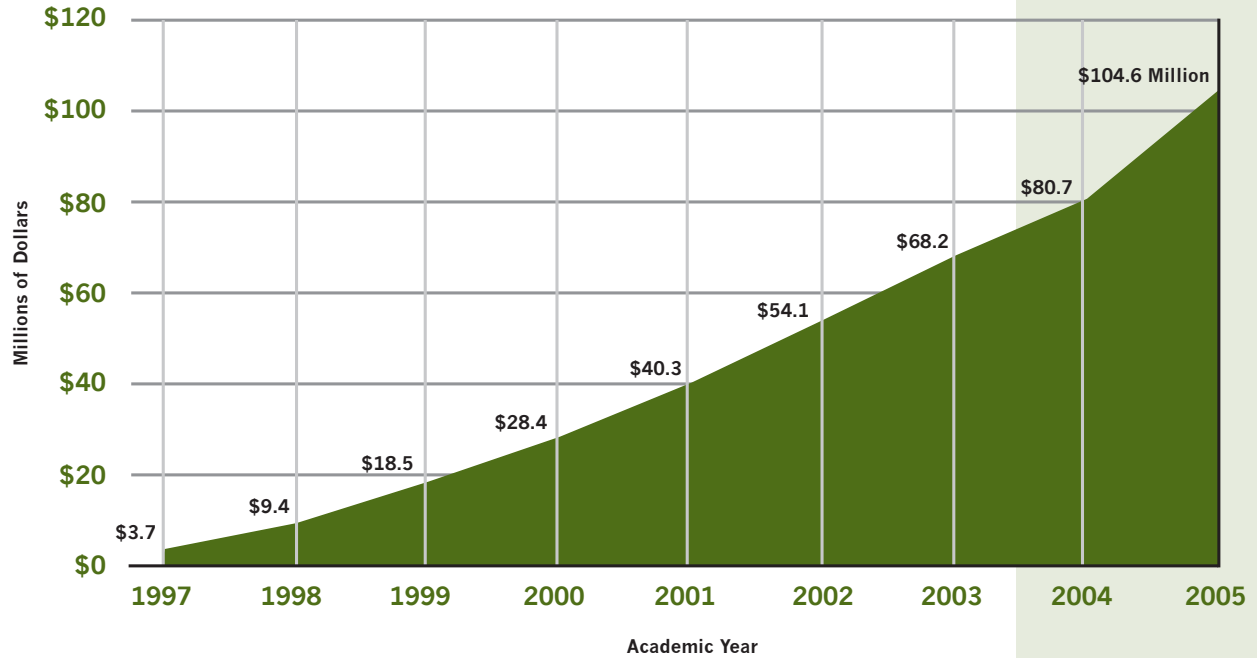
(Total: \$24,408,943)



continued >

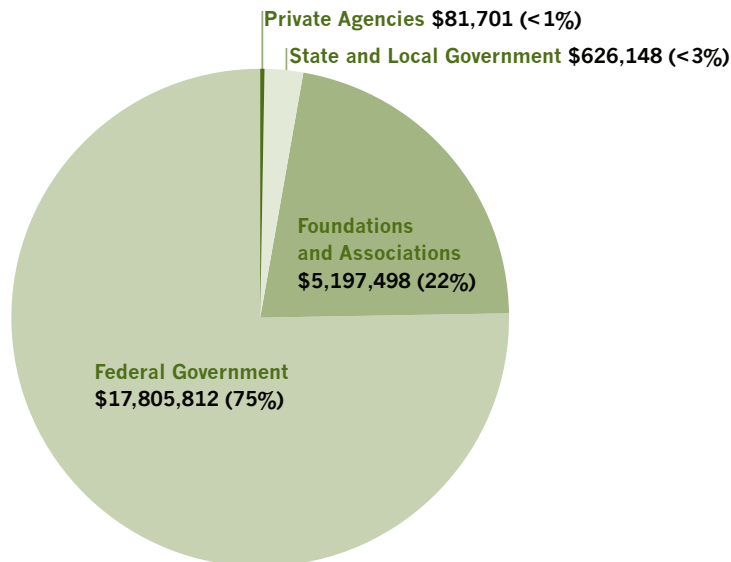
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Cumulative IHRP Research Funding, 1997–2005



IHRP Extramural Research Funding, FY2005

(Total: \$23,711,159)



Snapshot of the Institute for Health Research and Policy, FY2005

Grant Activity

Proposals submitted: 62

Number of these proposals funded to date: 31

Research projects conducted: 72

Total research funding dollars managed: \$23.7 million

Scholarly Activity

Peer-reviewed articles published by IHRP-affiliated researchers: 100+

Conference presentations made by IHRP-affiliated researchers: 82+

Policy consultations provided by IHRP-affiliated researchers: 30+

Community Partnerships

Community organizations, health agencies, advocacy organizations and other groups that partnered with IHRP-affiliated researchers: 158

Chicago area schools where IHRP conducted research: 41

Campus Relationships

UIC schools and colleges whose faculty members conduct research at IHRP: 10

UIC departments whose faculty members conduct research at IHRP: 32

Collaborating faculty: 76

Staffing

Professional staff members: 105

Fellows funded by National Institutes of Health training grants: 14

Graduate research assistants employed on research projects: 77

Undergraduate students employed: 29

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On the cover: More than 2,000 older adults participated in the sixth annual SHAPE Walk at Soldier Field in May 2005. Researchers at the institute led a consortium of organizations in managing this event.