



Outlook

A Quarterly Newsletter of the Society of Behavioral Medicine

"Better Health Through Behavior Change"

President's Message

Judith K. Ockene, Ph.D., M.Ed., SBM President ♦ University of Massachusetts Medical School, Worcester, Massachusetts

Improved Health for All: The Importance of Strategy

I hope the holiday season has been a healthy and fulfilling one for you. You may have used it as a time to reflect on the past year or to look forward and set goals. As experts in behavior change, we all know the importance of a specific plan or strategy for achieving goals. For my last column as president of SBM (difficult as it is to believe) I want to focus on the importance of a strategic plan for achieving our goal in SBM of improving the health and well-being of all. I will present the board's continuing work on SBM's strategic plan and note two new SBM appointments that are key to achieving our strategic goals. I also want to share with you responses to the question I posed in my fall column, "How can we bring about a world in which scientific knowledge and public health principles are translated into evidence-based health care that is available to all people?" I received a variety of thoughtful responses from SBM members (named at the end of this column) that included the importance of shared values and goals, passion, education, health policy development, and advocacy.

The Importance of Being Strategic

Some of us may feel disappointed by the results of this year's presidential election, overwhelmed at times by the awareness of the violence and injustices faced by people everywhere in the world, or concerned with the continued mixing of science and



politics. You may question how there can be health for all when there is not justice or peace for all. Questioning the status quo and an unwillingness to accept it, and a reaffirmation of our values and our goal of improved health for all are important drivers in moving forward on the path we have set for ourselves. To do this we need to be strategic. Our strategy needs to be appropriate to different target populations, including different political groups

which best respond to strategies that are in alignment with their own values and needs. As is true of many organizations, we often do not include an awareness of the political agenda. Yet, the political agenda is a strong environmental determinant of the public health.

The SBM board convened in Boston for its semi-annual meeting on October 22-23, 2004. One day of the meeting was devoted to the board's continuing work on SBM's strategic plan, and included the assistance of two specialists in strategic planning, Steven Echard and Susan Nelson of our management group, Association Headquarters. In my last column, I included the goals of our strategic plan as they were at that time. I am including in this column our refined strategic plan which has more concise mission and vision statements, and more expanded and explicit goals. (Ed Fisher, in his article in this issue of "Outlook," discusses Goal #3.)

The goals are now set and will not change for the next several years, but the steps to achieve them will as we achieve some of our goals and develop new ones. The specific steps to achieve goal #2 in our strategic plan reflect SBM's focus on the importance of integrating evidence, advocacy/public policy, and communication. To have the greatest impact, these efforts need to be integrated. For me this integration is an exciting development in SBM, just as the inclusion of the Evidence Based Behavioral Medicine (EBBM) Committee and the formation of the Health Policy Committee were important aspects of my own agenda as president.

Crucial to achieving the goals laid out in our strategic plan are the EBBM Committee and the Health Policy Committee. Each of these committees has a new chair: Bonnie Spring is chair of the EBBM Committee, and Debra Haire-Joshu is chair of the

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Issue Highlights...

- ♦ **Spotlight on Cancer SIG**
- ♦ **Outlook on Life**
- ♦ **Annual Meeting**
- ♦ **Classifieds**

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Health Policy Committee. Karina Davidson stepped down as chair of the EBBM since she recently took over chairing the creation of the Cochrane Behavioral Medicine Field within the Cochrane Collaboration (see the article discussing this on page 6). Bonnie Spring was the co-chair and a very active member of the EBBM, thus making for a smooth transition. Sue Curry stepped down as chair of our Health Policy Committee because of her many other commitments. She passed along a well-articulated plan to Debra Haire-Joshu. Debra has superb training in health policy and an outstanding

track-record, and has recently worked with Senator Ted Kennedy on childhood obesity legislation. (Please see our Health Policy column by Debra on page 8). Special thanks to Karina and Sue for all the work they did in forming the two committees. Their work reflects the enormous efforts and commitment of our committee and council chairs and elected board members.

Strategic Elements for Translating Science to Improved Health for All

In my last column, I posed a strategy question: How do we translate science into

practice? I received specific answers regarding key ingredients for creating a plan to achieve this goal.

Shared values and goals: One responder offered that if we want to partner and align with different organizations, institutions, and systems, "we need to understand their realities (including their history) and work within their agendas and goals to establish prevention goals that fit their missions (just as we do with patients)."

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SBM Strategic Plan

Mission Statement

The Society of Behavioral Medicine is a multidisciplinary organization of clinicians, educators, and scientists dedicated to promoting the study of the interactions of behavior with biology and the environment, and the application of that knowledge to improve the health and well-being of individuals, families, communities, and populations.

Vision Statement

"Better Health Through Behavior Change"

Strategic Objectives

◆ Goal Statement #1

Enhance the value of SBM as a base for networking, professional growth, and information exchange

- ◆ Sponsor regional educational events designed to serve membership with secondary benefits of generating funds for the capital campaign
- ◆ Maintain special interest groups as an integral part of SBM
- ◆ Increase diversity of topics and presenters at annual meeting
- ◆ Promote and enhance infrastructure to create networking opportunities between

senior and junior members of SBM through focus groups and social events

- ◆ Develop an infrastructure to support membership development

◆ Goal Statement #2

Establish SBM as a visible and influential champion of behavioral medicine

- ◆ Develop promotional materials for distribution to other professionally related organizations
- ◆ Link evidence based behavioral medicine to health policy to information dissemination
 - A. Identify two key areas to which SBM can contribute with evidence based behavioral medicine health policy
 - B. Develop a comprehensive document for each of the key areas
 - C. Publish a special issue of Annals that incorporates evidence with policy and disseminate to:
 - Clinicians
 - Policymakers
 - Patients
 - Insurers
 - Health educators
- ◆ Public Relations (Hold press conferences at the annual meeting)
- ◆ Create a consistent image for SBM through branding
 - A. Develop a new logo
 - B. Develop official colors for SBM

◆ Goal Statement #3

Develop the capacity to secure resources to achieve SBM's goals and mission

- ◆ Continue to market and promote the Advocacy and Membership Campaign Development Fund and build the fund (\$250,000 by December 2006)
- ◆ Expand the Development Committee to identify and secure other sources of funding such as grants and corporate sponsorships for the annual meeting
- ◆ Develop a plan to increase diversity in membership and leadership
- ◆ Conduct an annual new board orientation and leadership training session
- ◆ Utilize Fellows within the society
- ◆ Recognize a net profit of \$40K from the annual meeting
- ◆ Improve the process to engage interested members to join committees and increase participation of members in committees
- ◆ Develop an investment plan
- ◆ Activate the NIH liaison position
- ◆ Identify programs/projects to generate income
- ◆ Allocate resources and develop a funding mechanism for continued development of special interest groups

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This recommendation applies to the need to understand and find ways with which we can align with groups that have different political orientations if we want to work within a political agenda. It goes along with the philosophy articulated by Saul D. Alinsky (1909-1972) in his book "Rules for Radicals: A Pragmatic Primer for Realistic Radicals, (1972, New York, Vintage Books)," - "Work in the system."

Passion and energy: Another responder noted, "It takes passion and sustained energy and focus to do it, whatever it is, because it is often not paid for." Over 150 years ago, Georg Wilhelm Hegel (1770-1831) said, "We may affirm absolutely that nothing great in the world has been accomplished without great passion." The importance of passion and focus has been affirmed by many, including David Bornstein in his book, "How to Change the World: Social Entrepreneurs and the Power of New Ideas (2004, Oxford University

paper is rejected, a patient is not doing well, or a class goes flat and we feel that we're "tilting at windmills." If the passion and focus weakens, we may need to take a break for a while and remind ourselves that what we do as clinicians, educators, researchers, advocates, and leaders makes a difference and is critical to the health of all. When the political winds blow in a direction where health for all is not a vision, then it is even more important to retain our passion and focus on the work we do and to align in some way with groups that can help us achieve our goal. It takes passion to keep on course.

At my own institution, where basic science rules, a colleague recently asked me, "How do you keep your energy and focus to continue to push the elevation of clinical and population health research here?" My answer was, "I know how important it is, and if I let up and don't continue to take steps to improve it, others will likely give

and we are working hard to improve the status of clinical and population health research, develop resources, and change the research culture. We have a long way to go, but things have changed and there is a renewed energy and passion which is palpable. We would, however, never have gotten to where we are without passionate, committed people. You probably have some good personal examples of progress made possible only when individuals like yourself were passionate about making it happen and stayed with it through the many challenges and detours. I have heard many courageous examples from my colleagues. The journeys have been varied and rich with insight. As we make the journey, we may want to remember the words of John W. Gardner (1912 -2002), founder and chair of "Common Cause"- "We are continually faced with a series of great opportunities brilliantly disguised as insoluble problems."

When the political winds blow in a direction where health for all is not a vision, then it is even more important to retain our passion and focus on the work we do

Press, New York, NY)." He describes how passionate people around the world have individually, through great focus and commitment, made significant changes in the public health in their own countries. Mr. Bornstein will deliver a keynote on this topic on Saturday morning at our annual meeting. In SBM, we are passionate about what we do. It is what sustains us when things are not the way we would like them to be - when a grant does not get funded, a

up and it will not get better." He thanked me for helping to pave the way and commented that it gave him more hope to continue in his own efforts. The passionate flag bearer must wave the flag. It also takes aligning not only with partners who can help but also with those who initially may seem like unlikely bedfellows. Developing these relationships takes a lot of work and time. As one colleague told me, "there are no short cuts." It has gotten better at UMass

Education and training, within and beyond our discipline: Several individuals responded to my question of "What does it take...?" by noting the importance of education and training for clinicians and students. The seeking of evidence in our work must be inextricably linked to education and as one respondent noted, "the principles and evidence of what works must be infused into professional education curricula." Another responder noted, "A

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necessary step towards meeting that lofty goal is to be sure that ALL clinicians and scientists have adequate training in social and behavioral sciences." Others noted the need to include in the context of education more training in health services research and quality improvement principles, in development of skills to think critically, and in the use of creativity to think outside the box, and added the hope that "Such creativity may help bypass some of the economic obstacles." One responder provided hope about our political climate, noting that education may affect social and economic philosophies and political agendas and reinforce the idea that "care for all is an ethical responsibility of a just society."

Health policy and advocacy: Several SBM members noted that enabling evidence-based services also takes articulating, advocating, and endorsing specific public policies, in part by mobilizing the scientific community to collaborate and work together. SBM is developing collaborations through the Scientific and Professional Liaison Council and by linking the work of several committees and councils such as

the EBBM Committee, Health Policy Committee, and the Communications Council. Another responder noted, "We need to assemble a wide distribution of health professionals to identify and prioritize cost-efficient interventions that can have the greatest impact on public health." Also important from the policy perspective, is the recommendation that we "need to consider how to make changes in the health care system to allow it to reflect a focus on prevention and chronic disease management."

Each of the considerations noted by SBM members, i.e., shared goals and values, passion, education, health policy development, and advocacy, will be addressed at our annual meeting embracing the theme: Behavioral Medicine and Public Health: Promoting the Health of Individuals, Families, Communities, and Populations. (Please see page 9 about the annual meeting.) It is more important than ever to remind ourselves of the importance of the public health agenda and the mission of "health for all" and the critical partnership required between behavioral medicine and public health.

I am pleased with what we have accomplished this year. I am appreciative that there has been strong support from our board and membership for expanding mentoring and the Mentoring Task Force's expansion into leadership development (See Amy Heard-Davidson's article on page 6). My personal philosophy has always been one of optimism and I am hopeful that we can do much to achieve our goal. I believe SBM is doing the right thing by working to integrate some of the efforts of the EBBM and Health Policy Committees to develop evidence-based health policy. Collaboration with the Communications Council under the leadership of Dawn K. Wilson will help move our health policy agenda forward. SBM has much to be proud of as a vibrant and caring community that makes a difference - a place we can each feel comfortable and welcome. I look forward to seeing you in Boston in April.

Responders: Michael Goldstein, Jessie Gruman, Laura Hayman, Lyle Kantor, Phil Merriam, Tracy Orleans, Sherry Pagato, Lori Pbert, Milagros Rosal, and Jane Zapka.

Spotlight on Special Interest Group (SIG): Cancer SIG

Janine E. Gauthier, Ph.D., Steering Committee ♦ Rush University Medical Center

The inception of the SBM Cancer SIG was spring 2002 in conjunction with the 2002 SBM annual conference. There were approximately 90 attendees representing research, practice, policy, and funding interests. The Cancer SIG's goal is advancement and dissemination of knowledge across the breadth of cancer control, ranging from cancer prevention to end-of-life care. The Cancer SIG's primary aim is to foster high quality collaborative research, enhance the professional development of its members, and work with other professional organizations

involved in cancer prevention and control research. Programming goals for the 2005 conference include: a breakfast working group; collaborative symposia between the Cancer SIG and the Ethnic Minority and Multicultural Health SIG focusing on cancer prevention and intervention research with ethnic minorities; a pre-conference day workshop and roundtables addressing health decision-making across the cancer continuum; an outstanding student abstract award in cancer research to encourage student/trainee investigators; a lunch presentation sponsored by the

American Cancer Society; and a social hour. Additional Cancer SIG activities may be added to the SBM conference agenda as it approaches and we will keep SIG members up-to-date as developments unfold.

The Cancer SIG is committed to fostering cross-disciplinary research to optimize knowledge in cancer prevention and control. SBM members interested in joining this SIG are encouraged to contact Chair Suzanne Miller Ph.D. by e-mail at: Suzanne.Miller@fcc.edu.

Outlook on Life

Guest Respondent: Bernardine M. Pinto, Ph.D.

Editor's Note: This column is a fun way members can learn more about each other. The questions come from a TV show called "Inside the Actor's Studio," where actors are asked a set of questions that

reveal components of their personality and "philosophy on life." Today's guest for this column is Bernardine M. Pinto, Ph.D.; Associate Professor of Research, The Miriam Hospital, Brown University,

Lifespan Academic Medical Center, Centers for Behavioral and Preventive Medicine.

Questions	Answers
What is your favorite word?	Chocolate
What is your least favorite word?	Unscored
What "turns you on" or excites you about the field of Behavioral Medicine?	Collaborating with people from other disciplines
What turns you off/frustrates you about the field of Behavioral Medicine?	Collaborating with people from other disciplines
What sound or noise do you love?	Leaves on a tree rustling in a breeze
What sound or noise do you hate?	Leaky faucet and the sound of a fingernail scratching a blackboard
What was your most unusual job (outside of Behavioral Medicine/academia)?	Receptionist in a dorm
What profession, other than yours, would you like to attempt?	Archaeology
What profession or job would you not like to participate in?	Working in a mortuary
If Heaven exists, what would you like St. Peter to say when you arrive at the Pearly Gates?	Come on in: No security checks and no documents required!



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Formal Exploratory Meeting on the Initiation of a Cochrane Behavioral Medicine Field: August 25, 2004, Mainz, Germany

Karina Davidson, Ph.D. and Kimberlee J. Trudeau, M.A., Evidence-based Behavioral Medicine Committee

Over the last four years, members of the Evidence-based Behavioral Medicine (EBBM) Committee of the Society of Behavioral Medicine (www.sbm.org/ebbm/) have worked together to apply concepts and methods of evidence-based medicine to behavioral medicine interventions (1). Upon reviewing the various systems, this committee proposed that behavioral medicine consider joining the Cochrane Collaboration (www.cochrane.org) with the belief that the efforts within behavioral medicine to develop effective interventions would be well-served by creating a Behavioral Medicine Field within the Cochrane Collaboration (2).

Topic-based Cochrane Fields facilitate the work of the disease-based Collaborative Review Groups within the Cochrane Collaboration through the following activities (3, p. 127-128): identifying relevant trials and making them accessible through a specialized register; ensuring the proper representation of its specialist area of health care in Cochrane Review Groups; acting as a liaison point between the entities within the Cochrane Collaboration and its specialist area of health care; promoting the accessibility of Cochrane reviews in its specialist area of health care; helping to identify funding opportunities for Cochrane Review Groups. Although currently acknowledged as a "Possible Field" by the Cochrane Collaboration, to continue the process of initiating a Cochrane Field, a Formal Exploratory Meeting must be held to assess the level of interest and enthusiasm for the proposed Field.

A number of international scientists as well as some EBBM Committee Members worked together to have this meeting. The meeting took place on August 25, in Mainz, Germany, and was attended by 27

individuals representing seven different countries. During the course of the meeting, participants learned about the Cochrane Systematic Review process, as well as the different entities of the Cochrane Collaboration from various Cochrane representatives (i.e., Claire Allen, Deputy Administrator of The Cochrane Secretariat as well as Consumer Representative of the Cochrane Complementary Medicine Field; Joyce Coutu, Systematic Reviewer of the US Cochrane Center; Heather Maxwell, Coordinator of the Cochrane Peripheral Vascular Diseases Group and a member of the Cochrane Collaboration's Monitoring and Registration Group; and Iris Pasternack, M.D., representative of the Cochrane Occupational Health Field).

Meeting participants decided that it is worthwhile to initiate a Cochrane Behavioral Medicine Field. Subsequently, small groups discussed then presented:

- a.) a list of possible reviewers associated with the Field, and possible contributions to existing or future Collaborative Review Groups;
- b.) the process for generating a list of journals to review for the specialized register;
- c.) potential fiscal resources for developing a Field; and
- d.) methods to identify potential Advisory Group members.

A self-nominated ad hoc group is working together to prepare the registration materials for the Cochrane Behavioral Medicine Field to submit to the Monitoring and Registration Group. If you have any questions or comments about these activities, please contact Karina Davidson at

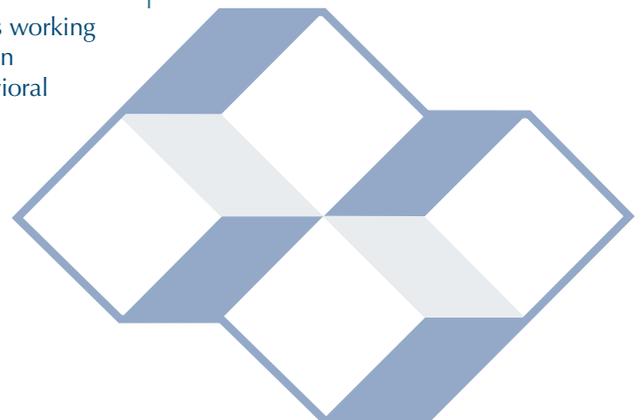
kd2124@columbia.edu or Kimberlee Trudeau at kimberlee.trudeau@mssm.edu.

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Update on the Advocacy and Membership Campaign for the SBM Fund

Ed Fisher, Ph.D. and David Ahern, Ph.D.

To date, over half of the \$100,000 goal has been raised for the SBM Fund. This is great progress; however, members last fall agreed, "the Campaign needs clearer focus and specification."

Responding to this, SBM leaders decided that funds raised through the Campaign will be dedicated to support two key dimensions of the Strategic Plan:

- ◆ Communication among, and development of, members as researchers, teachers, and practitioners of behavioral medicine
- ◆ Promoting the advancement of behavioral research and applications for improving individual and population health by becoming a visible and influential champion of behavioral medicine

Turning these broad objectives into specifics, funds from the Campaign will be used for:

- ◆ Enhancing our advocacy initiative
- ◆ Funding a Student Scholarship program
- ◆ Developing and supporting the activities of members' special interest groups within the society
- ◆ Support for Mentoring

Reflecting these specifics, the Campaign has a new name - Advocacy and Membership Campaign.

The Campaign sponsored a Strategic Initiative Seminar and Reception, October 21, at the Brown Faculty Club in Providence, Rhode Island. This featured Drs. David Abrams and Sue Curry as invited speakers on the topic of "Advocacy and Transdisciplinary Research: The New Strategic Perspective for

Behavioral Medicine." A lively discussion among SBM members followed their presentations in a mini-town hall format.

The Advocacy and Membership Campaign will sponsor similar seminars in other cities, with plans for Miami and St. Louis in early 2005. The purpose of these seminars is to encourage and invigorate member-to-member discussions about SBM and its emerging role in advocacy, and to support the Advocacy and Membership Campaign.

To find out how YOU can organize and host a seminar in your area or support the Campaign in other ways, please contact: David Ahern at dahern@theabacusgroup.com or Ed Fisher at efisher@im.wustl.edu or (314) 286-1901.

Meet the SBM Staff

As SBM's full-service management company, Association Headquarters (AH) provides executive management, meeting planning, public relations, marketing, membership development, and administrative support through a team of talented professionals.

Nicolette Zuecca, the executive director at AH, oversees all SBM operations. Nicolette works closely with the board of directors, officers, and members to ensure systems are aligned to assist in achieving the vision of SBM. Assisting Nicolette with daily operations is Gail Haas, assistant executive director. Mariela Rodriguez, the administrative assistant and membership coordinator, handles general SBM inquiries and daily correspondence with members.

Crystal Jackson, serves as the SBM Meeting Manager. She handles all hotel logistics and hotel contract negotiations, as well as day-to-day aspects and arrangements for the annual meeting. Exhibits Manager, Clare Rife, oversees the development of the exhibitor prospectus

and floor plan, and coordinates the décor of the event. Jodie Bekas, assistant exhibits manager, assists with the coordination of



From Left to Right:

Top Row: Amy Chezem, Eileen Zeiger, Jodie Bekas, Nicolette Zuecca, Maggie Ramirez, Heidi Zengel, Clare Rife • *Bottom Row:* Jamie Dunn, Gail Haas, Mariela Rodriguez, Crystal Jackson

the exhibits and exhibitors. The Communications Department at AH works together to ensure all communications functions are in line and

up-to-date. As Director of Communications, Amy Chezem oversees all communications efforts for SBM, and Communications Coordinator, Jamie Dunn, is responsible for daily communications efforts, including press releases and promotional materials. Heidi Zengel, SBM's assistant editor, coordinates editorial content and classified advertisements for "Outlook," and Web Services Manager, Eileen Zeiger, is responsible for daily updates and maintenance of the SBM Web site.

Accounting Manager, Maggie Ramirez, oversees the financial status of SBM. Maggie deposits all cash receipts, reviews and process invoices, performs general ledger accounting, and prepares monthly financial statements for SBM.

Together, the team at AH uses their expertise and experience to provide SBM with personalized, professional, and progressive service.

Translating Research to Health Policy

Debra Haire-Joshu, Ph.D. ♦ Robert Wood Johnson Health Policy Fellow in Senator Kennedy's Office,
Head of the SBM Health Policy Committee

There is a substantial gap between what we learn through research and its translation to public health through policy development. It is clear that empirical evidence alone does not prompt health policy. Instead, policymaking often seems to be conducted in response to public perceptions of crises and frequently based on variegated information sources. This can result in what appears to be vague outcomes with unintended consequences. It is therefore important that we develop an understanding about how policy is made, and an appreciation for how politics influences the legislative process. This in turn, will inform how to effectively advocate and inform the process.

As a Robert Wood Johnson Health Policy Fellow, I experienced policymaking through my work for Senator Edward Kennedy on the Health Education, Labor, and Pensions (HELP) Committee. This experience taught me that there are distinct ways in which researchers and practitioners can provide accurate, reliable, and timely information to guide and influence the policymaking process. There are at least five key strategies by which this can be accomplished.

First, focus efforts on very specific health priorities and policy goals. This means knowing the issue by ensuring a complete analysis of evidence, possible policy

solutions, expected and possible consequences of those solutions, and recommendations for action.

Second, be committed to advocacy. Advocacy is about building and maintaining relationships with your legislators, and establishing methods for ensuring input into the legislative process. This is accomplished through consistent and ongoing interactions with congressional staff.

Third, seek to learn about politics and process from the legislators. In order to do this effectively, behavioral scientists need to understand that the legislative environment has its own priorities, formal and informal systems, and culture. Assessing and learning about that culture is important to successfully advocating for a specific policy change.

Fourth, communicate research in a way that is relevant to policymakers. The skills that create excellent researchers, including attention to detail and accuracy, can overwhelm policymakers who periodically seek quick and succinct information regarding complicated issues. The science needs to be communicated to policymakers in a way that is concise, accurate, understandable, and relevant. But, you also want the science to "tell a story" that will

make the policymaker care about your issue. This is accomplished not only by presenting compelling evidence, but also by communicating a level of passion for the issue. Combining understandable data with such passion provides policymakers with invaluable and appropriate data for use in communicating with multiple constituencies who have diverse priorities and solutions. This also provides a conduit whereby evidence-based information can directly inform and influence policymaking.

Fifth, a successful result from using strategies 1-4 above, could be defined as having the policymaker become an expert on your issues and viewing them with the same sense of priority and passion. This builds their commitment to your issues and ultimately improves policy decisions.

Finally, we need both individually and collectively, to become policymakers. This means we should assume a role that will inform, defend, define, evaluate, and advocate for evidence based policies that promote the health of our population. We also need to teach others in our respective fields to do the same through active learning and experience. Only then will we ensure that scientific research and science is translated through policy in the most effective manner.

2nd Advanced Training Institute in Health Behavior Theory

Applications due by February 1, 2005

The National Cancer Institute will sponsor an intensive, seven-day workshop for early career investigators June 19-26, 2005, in Madison, Wis. The objectives of the institute are to allow 25 attendees to extend their understanding of the assumptions underlying major types of health behavior theory, to explore how theories are tested and improved, and to examine how to use theories appropriately

in designing interventions. Lead instructors include researchers Neil Weinstein, Rutgers University; Alex Rothman, University of Minnesota; Susan Curry, University of Illinois at Chicago; and Barbara Curbow, Johns Hopkins University.

Applicants from all disciplines are welcome to apply- eight different disciplines were represented at the workshop held in 2004-and interest in cancer is not required. You must have

received a doctoral degree by the beginning of the course and have completed at least one graduate level course in the behavioral sciences and one graduate level course in statistics. Participants must be U.S. citizens. There will be a \$400 registration fee to participate in the institute. Travel, meals, and lodging will be provided. More information, an application, and comments from previous participants will be available at www.scgcorp.com/ati2005.

Spotlight on Education and Training in Behavioral Medicine

Michael A. Friedman, Ph.D. ♦ Rutgers, the State University of New Jersey

The Columbia University Psychiatric Epidemiology Training (PET) Program was established in 1972 to train individuals from different disciplines in psychiatric epidemiology, and is currently directed by Bruce Link. The PET program is one of only a small handful of programs designed to provide research training in the epidemiology of mental disorders. The PET program has traditionally emphasized the role of adversity in the etiology and course

social scientists. Researchers from PET have conducted extensive research in important areas of psychiatry, such as the identification of the etiology of major mental disorders. In addition, extensive research has been conducted on the relation between psychopathology and physical health. Research has included work in the assessment of psychopathology among medical patients, the role of physical illness in the etiology of mental

medical practice settings. Further, work by Alan Brown and colleagues demonstrated that in utero exposure to the 1964 rubella infection was associated with psychosis in adulthood. Similarly, Dr. Ezra Susser continues to develop HIV prevention intervention for individuals with severe mental illness.

Trainees at the PET program are mentored in a range of important areas, including

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of psychiatric disorders. This emphasis drew its impetus from the consistent association between socioeconomic status and mental disorder, from studies of extreme situations, and from the conceptualization of the stress process. This emphasis on adversity was integrated and summarized in a major volume, "Adversity, Stress and Psychopathology," edited by Bruce Dohrenwend (1998), who served as the director of training for several years. The PET program emphasizes the integration of a multi level, life course perspective so as to generate a multilevel conceptualization involving individuals (genetic, neurodevelopmental, exposure to adversity/stress) in context (family, work, neighborhood) through time.

The program has trained 115 researchers, including pre doctoral and post doctoral psychiatrists and

illness, and the prevention of chronic disease among individuals with mental illness. For example, Bob Spitzer and colleagues developed the PRIME MD to screen for psychiatric disorders in general

clinical research with a biological focus, laboratory-based molecular genetic research and biological studies of birth cohorts. Coursework includes epidemiology, clinical psychiatry, statistics, and field placements. These field placements include providing South African mental health care professions with training in HIV prevention, as well as intervention studies of HIV risk behaviors and treatment of people with psychiatric disorders who are homeless.

For more information visit their Web site at <http://cpmcnet.columbia.edu/dept/sph/epi/research/pet.html>.



Welcome to the Annual Meeting



The Society of Behavioral Medicine cordially invites you to attend the 26th Annual Meeting and Scientific Sessions to be held, April 13-16, at the Boston Marriott Copley Place in Boston, MA. This year's theme is, "Behavioral Medicine and Public Health: Promoting the Health of Individuals, Families, Communities, and Populations."

The SBM Annual Meeting and Scientific Sessions will begin on Wednesday, April 13, with eight pre-meeting seminars scheduled from 2:00 PM-5:00 PM (available for a separate fee). Then later in the day, registrants are invited to attend the Meritorious Student Poster Session and visit the exhibits during the Opening Reception in the University Exhibit Hall on Wednesday evening from 7:00 PM - 8:30 PM. The educational program begins at 7:30 AM Thursday, April 14, with breakfast roundtables and continues until 12:30 PM on Saturday, April 16. There will also be eight post-meeting seminars on Saturday, April 16, from 2:00 PM-5:00 PM (available for a separate fee).

The Cancer SIG Pre-Conference Day, will be held on Wednesday, April 13, from 12:30 PM - 6:00 PM, and will feature an introduction by Suzanne W. Miller, Ph.D., followed by a presentation by Michael

Stefanek, Ph.D. titled, "Health Decision-Making Funding Opportunities at NCI." Also included in the pre-conference is a panel on, "Health Decision-Making: From Basic Science to Public Application," concluding with a roundtable discussion chaired by Karen M. Mustian, Ph.D. and Dr. Miller.

Other program highlights will feature stellar presentations by several dynamic keynotes and master speakers

Highlighting the 2005 Annual Meeting is the collaboration between SBM and the Society for Public Health Education (SOPHE). Join colleagues for a kick-off reception on Thursday, April 14, from 6:00 p.m. to 8:30 p.m. in the exhibit hall. The joint day educational program begins on Friday, April 15, 2005. Educational highlights will include various joint paper sessions, symposiums, and two panel sessions, "Community-based Participatory Research in Behavioral Medicine and Public Health Education" and "Translating Research to Policy and Advocacy," in addition to a symposium paneled by Jessie C. Gruman, Ph.D. titled, "Where's the Beef? A Facilitated Discussion with Three Community-based Users of Behavioral Medicine." The Joint Day will conclude with poster session presentations on "Diversity, Environmental Factors, Biological Factors."

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Other program highlights will feature stellar presentations by several dynamic keynotes and master speakers. Some of the topics include:

Fulfilling our Assignment to Improve the Health of All: Good Science Just Isn't Enough

Judith K. Ockene, Ph.D., M.Ed. -
Presidential Address

Science and the Clinic: The Story of the Night Eating Syndrome

Albert Stunkard, M.D. - Distinguished
Scientist/Master Lecture

The Role of Social Entrepreneurs in Health Care Innovation

David Bornstein - Keynote

Experiences from the Guide to Community Preventive Services: Challenges and Opportunities in Evidence-Based Behavioral Medicine

Peter A. Briss, M.D., M.P.H. - Master
Lecture

Recommendations from the U.S. Preventative Services Task Force: A Roadmap for Behavioral Medicine and Public Health

Ned Calonge, M.D., M.P.H. - Master
Lecture

Naming Racism as a Threat to the Health and Well-being of the Nation

Camara Phyllis Jones, M.D., M.P.H., Ph.D.
- Keynote

Families, Health, and Health Behavior: An Analysis of the Evidence

Frances Marcus Lewis, Ph.D. - Master
Lecture

Of Hype and Hope: How Healthy is Medical Journalism? *

Ray Moynihan - Keynote

* *Provisional Title*

A preliminary program outline is printed on page 10 and 11 of this issue of "Outlook," but for a complete listing of seminars, poster sessions, paper presentations, symposiums, and other scheduled events, please visit the SBM Web site at www.sbm.org. Registration will be available online, as well as a link to making your hotel reservations online at the Boston Marriott Copley Place, the official hotel for the 26th Society of Behavioral Medicine Annual Meeting & Scientific Sessions.

Registration fees are the same as 2004's!

SBM Full/Associate Member	\$210**
SBM Student Trainee/Transitional	\$110**
Non-Member	\$400**
Non-Member Student Trainee	\$190**
Non-Member Transitional	\$260**
One-Day Registration	\$200

(*Fee prior to March 14, 2005)

If you prefer to speak with a reservations specialist directly, please call 800-266-9432 to receive the special rate of \$199 single/ \$219 double. Make your reservations soon! The deadline for receiving the special rates online or via direct call to the hotel is **March 21, 2005**. And plan your airline arrangements to Boston early! Call Crystal Travel & Tours, Inc., at 800-327-3780, to inquire about discount flight costs and schedules.

Don't miss out on the educational and networking opportunities available to you at the 26th Society of Behavioral Medicine Annual Meeting & Scientific Sessions!



Preliminary SBM Annual Meeting Program Schedule

Wednesday, April 13

8:00 AM - 5:00 PM	Board of Directors Meeting
12:30 PM - 6:00 PM	Cancer SIG Pre-conference Day "Decision-Making in the Context Translation From Basic Science Through Population Health"
2:00 PM - 5:00 PM	Seminars #1 - #8
6:00 PM - 7:00 PM	New Member Reception
7:00 PM - 8:30 PM	Opening Reception and Exhibits Open Meritorious Student Paper - Poster Session A

Thursday, April 14

7:30 AM - 8:30 AM	Breakfast Roundtables
8:30 AM - 10:00 AM	Poster Session B - Health Systems, Translation, Prevention, Behavioral Medicine in Medical Settings
9:00 AM - 10:30 AM	Symposia #1 - #8
10:30 AM - 11:00 AM	Break
11:00 AM - 12:00 PM	Presidential Address: "Fulfilling our Assignment to Improve the Health of All: Good Science Just Isn't Enough"

12:15 PM - 1:15 PM	Expert Consultations Special Interest Group Meetings
1:30 PM - 3:00 PM	Paper Sessions
1:30 PM - 3:00 PM	Panel Discussion #1 Student Research Panel
1:30 PM - 2:10 PM	Frances Marcus Lewis, Ph.D. - Master Lecture "Families, Health and Health Behavior: An Analysis of the Evidence"
2:15 PM - 3:00 PM	Albert Stunkard, M.D. - Distinguish Scientist/Master Lecture "Science and the Clinic: The Story of the Night Eating Syndrome"
3:00 PM - 3:30 PM	Break
3:30 PM - 5:00 PM	Paper Sessions
5:15 PM - 6:15 PM	Camara Phyllis Jones, M.D., M.P.H., Ph.D. - Keynote "Naming Racism as a Threat to the Health and Well-Being of the Nation"
6:30 PM - 8:00 PM	Poster Session C SBM/SOPHE Joint Reception
8:00 PM - 10:00 PM	NCI Listens Dana Farber Cancer Institute (off-site)

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Friday, April 15 **SBM/SOPHE Joint Day**

7:30 AM - 8:30 AM	Breakfast Roundtables
8:30 AM - 10:00 AM	Poster Session D "Mentoring, Spirituality, Quality of Life, Health Communication, Methods and Measures, Adherence"
8:30 AM - 10:00 AM	Symposia #9 - #16
8:30 AM - 10:00 AM	Cancer Debate
10:00 AM - 10:30 AM	Break
10:30 AM - 12:00 PM	Paper Sessions
10:30 AM - 11:00 AM	Ned Calonge, M.D., M.P.H. - Master Lecture "Recommendations from the U.S. Preventative Services Task Force: A Roadmap for Behavioral Medicine and Public Health"
11:15 AM - 12:00 PM	Peter A. Briss, M.D, M.P.H. - Master Lecture "Experiences from the Guide to Community Preventive Services: Challenges and Opportunities in Evidence-Based Behavioral Medicine"
12:15 PM - 1:15 PM	Expert Consultations Special Interest Group Meetings
1:30 PM - 3:00 PM	Panel Discussion #2 "Community-based Participatory Research in Behavioral Medicine and Public Health Education"
3:00 PM - 3:30 PM	Break

3:30 PM - 5:00 PM	Panel Discussion #3 "Translating Research to Policy and Advocacy"
5:00 PM - 6:30 PM	Paper Sessions
5:15 PM - 6:15 PM	Ray Moynihan - Keynote "Of Hype and Hope: How Healthy is Medical Journalism?" *
6:30 PM - 8:00 PM	Poster Session E "Diversity, Environmental Factors, Biological Factors"
7:30 PM - 10:30 PM	Presidential Reception

* *Provisional Title***Saturday, April 16**

7:30 AM - 8:30 AM	Breakfast Roundtables
8:30 AM - 10:00 AM	Poster Session F "Psychological and Person Factors, Complementary and Alternative Medicine"
8:30 AM - 10:00 AM	Symposia #17 - #24
10:00 AM - 11:00 AM	David Bornstein* - Closing Keynote "The Role of Social Entrepreneurs in Health Care Innovation"
11:00 AM - 12:30 PM	Paper Sessions
12:30 PM - 1:30 PM	SBM Members Forum
2:00 PM - 5:00 PM	Post-Meeting Seminars #9 - #16

* *Author of "How to Change the World: Social Entrepreneurs and the Power of New Ideas"*

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Clinical Psychology Internship

The Air Force supports three revolutionary clinical psychology internships. One of which was awarded the "Outstanding Training Program Award" by AABT in 2002. We are integrating clinical psychology into primary care practice. We have the setting, the faculty and the support to offer superb preparation for a career as a psychologist. To be part of this prestigious program, earn a competitive salary and benefits and have a guaranteed job after the program's completion, call us at 1-800 423-USAF or visit AIRFORCE.COM.

Tobacco Control Scientist Faculty Position, Lombardi Comprehensive Cancer Center

The Cancer Control Program of the Lombardi Comprehensive Cancer Center is seeking a senior researcher at the associate professor level or higher. The individual filling this position will be an experienced tobacco control scientist with interests and expertise in one or more areas of tobacco control (e.g. epidemiology and behavior, prevention and cessation, policy and legislation). Minimum requirements include a doctoral degree in a behavioral or social science discipline with an established track record of attracting extramural funding. The successful candidate will join a highly interdisciplinary department of oncology and a cancer control program with active research in cancer screening, genetic counseling and testing, outcomes, lifespan development/aging, and community outreach. Georgetown University Medical Center is comprised of the Lombardi Comprehensive Cancer Center, School of Medicine, School of Nursing and Health Studies, and a biomedical research enterprise. The medical center is conveniently located in Washington, DC. Salary and recruitment package will be commensurate with qualifications and experience. Interested individuals

should send a statement of interest, CV, and the names of three references to: Tobacco Control Scientist Search Committee, Cancer Control Program, Lombardi Comprehensive Cancer Center, 2233 Wisconsin Avenue, NW, Suite 317, Washington DC 20007-4104. Inquiries may be directed to Kenneth Tercyak, PhD by email at tercyakk@georgetown.edu. For more information, please visit www.lombardi.georgetown.edu. Georgetown University Medical Center is an equal opportunity employer.

Post-Doctoral Fellow

The Prevention Research Center in the Arnold School of Public Health is seeking a post-doctoral fellow who will provide oversight of measurement and data collection related activities for a 5-year school-based trial, evaluating the effects of an innovative intervention on increasing physical activity in adolescents. The start date will occur between January 1, 2005 and May 1, 2005.

The candidate will serve as overall coordinator for the measurement team; coordinate development of the study measurement and data collection manuals; assist with personnel matters; perform specific research activities, including overseeing and monitoring data collection activities, recruitment and retention of adolescent participants, maintain fidelity to study protocols, maintain project database and quality control procedures; and perform administrative work relating to schools.

This position requires an individual with a doctoral degree in exercise science, behavioral sciences, public health, or a related discipline with advanced skills and training in physical activity assessment; with at least 1 year experience in a supervisory position and at least 1 year experience in physical activity assessment. Must have basic knowledge of database

management and statistical skills. This position will offer a one-year appointment with reappointment contingent upon availability of funds and satisfactory job performance. The salary range for this position is \$35,000 to \$45,000 (plus benefits). The starting salary for this position will be commensurate with education and experience.

Submit curricula vitae and the names of at least 3 professional references to: Dawn K. Wilson, PhD, USC Prevention Research Center, 730 Devine Street, Columbia, SC 29208.

The University of South Carolina is an affirmative action / equal opportunity employer.

Research Fellowships In Population-Based Cancer Control And Prevention At The University Of Rochester School Of Medicine:

The NCI-supported Cancer Control Research Training Program of the University of Rochester School of Medicine provides post-doctoral M.D. or Ph.D. researchers with the knowledge and experience to establish careers as outstanding independent investigators in cancer control and prevention research. Features of the two-year program include:

- Courses, seminars, and workshops on cancer control and research methodology in three focus areas: Patient-Oriented Research, Biostatistics and Informatics Research, and Health Outcomes Research.
- Choice of earning a Master of Public Health Degree in Clinical Investigation or a Master of Science Degree in Medical Statistics.
- Exceptionally diverse research opportunities provided by 15 on-site mentors, all with competitively funded cancer control research grants, as well as through a NCI-funded Community Clinical Oncology Program Research Base.

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- Practical experience in protocol design, study procedures, statistical analysis, report writing, and oral presentation.

Eligibility: The program seeks individuals with recent doctorates (Ph.D., Ed.D., DPH, M.D.) in health-related areas as well as more experienced individuals with similar degrees wishing to change their research focus who are highly motivated to develop a successful research career in cancer control. Only U.S. citizens or permanent residents are eligible. Tuition, health insurance, research support, travel allowances and an appointment as a research Assistant Professor in the School of Medicine are provided. Applications from women and minorities are strongly encouraged.

Further Information: Program description and application material can be found at: www.stronghealth.com/cancercontrol or contact Dr. Gary R. Morrow, Program Director, at: gary_morrow@urmc.rochester.edu

Assistant Professor Public Health (Health Promotion and Behavioral Science)

The Division of Health Promotion and Behavioral Science, Graduate School of Public Health, San Diego State University, is seeking an innovative and energetic Assistant Professor for a tenure track position. The successful candidate shall have an earned doctorate in behavioral science or a professional degree (e.g. MD) with additional training in behavioral science. Preference will be afforded to candidates with one or more of the following areas of expertise: policy research, ecological models, health communications, community development, underserved populations, and funding from NIH or equivalent institutions. Candidates must show

evidence of undergraduate or graduate teaching experience, peer reviewed publications, and potential for grant procurement. Teaching experience and a commitment to working in a multicultural environment with students from diverse backgrounds is desirable. Candidates should apply directly by sending a letter of application, curriculum vitae, and the names, addresses, phone/fax numbers, and email of at least three references to Chair, Health Promotion Faculty Search Committee, Graduate School of Public Health, San Diego State University, 5500 Campanile Drive, San Diego, CA 92182-4162. Salary is commensurate with education and experience. Applications received by February 15, 2005 will receive full consideration, and a review of candidates will begin on or shortly after that date. SDSU is a Title IX employer and does not discriminate against individuals on the basis of race, religion, national origin, sexual orientation, gender, marital status, age, disability, or veteran status, including veterans of the Vietnam era. Additional information and a detailed version of this advertisement are available at <http://publichealth.sdsu.edu>.

Behavioral Medicine/Health Psychologist

Dean Medical Center, a 500+ physician medical group is recruiting a full-time clinical psychologist with a specialization in Health Psychology and/or Behavioral Medicine to join a multiple site, 50+ member multidisciplinary psychiatry department. This position will be at our Sun Prairie Clinic, located several miles east of Madison. This will be an exciting opportunity to join an existing in-house multidisciplinary psychiatry team and to have an office based in Internal Medicine to maximize primary care integration initiatives. This effort will be further supported by an opportunity to work closely with an

established Behavioral Health Consultant and to begin on salary with a transition to a productivity model of compensation after the first year. The Sun Prairie Clinic has an active M.D. group who are looking forward to collaboration in areas such as chronic pain, diabetes, headache, hypertension, and smoking cessation. The successful candidate will have documented broad behavioral medicine expertise, including experience with primary care integration and be able to work with child, adolescent, and adult patients. The ideal candidate will also have diverse clinical skills and take a creative flexible approach to expanding our current Behavioral Medicine Service to this site. Responsibilities include: psychodiagnostic evaluation; individual and group treatment modalities; psychological testing; collaboration with the Behavioral Medicine team, program development; staff supervision; consultation to medical staff; and limited call. Applicants must have Ph.D. or PsyD in Clinical Psychology from an APA-accredited doctoral program, an APA-accredited internship, and be eligible for licensure in Wisconsin and for inclusion in the National Register. Preference given to individuals with supervised postdoctoral training in Behavioral Medicine or Health Psychology. Only candidates with solid clinical experience will be considered. Excellent salary and benefits. Flexible start date, July 1 and beyond. Send resume and letter of introduction to: Emily R. Hauck, Ph.D., Dept of Psychiatry, Dean Medical Center, 1313 Fish Hatchery Rd., Madison WI 53715

Behavioral Scientist

PharmSTARS needs a project consultant to develop and validate health attitudinal, behavioral and cognitive assessments that can serve as basis of individualized messaging

interventions for medication compliance, diet/exercise/weight and smoking. Should have experience with factor & item development, factor & component analyses, developing intervention rules, programming & copy. Please provide your CV to Ed@pharmstars.com.

Behavioral Scientist for a Leadership and Research Position

The Center for Tobacco Independence in Portland, Maine, is seeking a behavioral scientist for a leadership and research position. This is an exciting opportunity to provide direction and oversight for a nationally recognized, state-supported tobacco treatment initiative, and conduct research and evaluation on a variety of treatment components. This behavioral specialist ensures that quality, evidence-based services are provided by the Center's statewide treatment and training programs and works to integrate tobacco treatment into care for populations with chronic conditions. He/she works with a growing research program that includes clinical trials, practice intervention and performance profiling, and outcomes analysis of delivering telephonic tobacco counseling and medications. We are seeking a PhD in behavioral or clinical science with interests that span tobacco dependence, quality improvement, and chronic care/behavioral interventions. Experience in tobacco or addiction treatment, and/or health services research are preferred. Greater Portland offers an affordable location with abundant outdoor activities, excellent schools and proximity to Boston. Please contact Dr. Susan Swartz at 207-622-7152 or swarts@mmc.org for more information.

Behavioral Informatics Postdoctoral Research Fellowship
Boston University School Of Medicine
The Medical Information Systems Unit

(MISU) at the Boston University School of Medicine is seeking applications for a two-year post-doctoral fellowship funded by National Library of Medicine beginning in July, 2005. MISU is engaged in the development and evaluation of a wide range of automated behavioral interventions promoting health behavior change and improved patient self-care. The fellowship focuses on training in the discipline of behavioral informatics (the study of the use of computers and other information technologies in behavioral medicine). Fellows will have the opportunity to develop and evaluate technologies that can help patients prevent and manage chronic diseases. During the two-year tenure, fellows are expected to continue their education with educational opportunities in medical informatics, behavioral medicine, public health, or technical curricula offered through Boston University and other Boston-area institutions. Fellows are required to complete one or more independent research projects over the course of two years which involves developing and/or evaluating an informatics/computer-based system. The fellowship requires a PhD or equivalent degree in experimental or clinical psychology, a background in experimental design, a strong interest in and some experience with computer science, and US citizenship or green card. Individuals with an interest in behavioral medicine and health psychology, lifestyle behavior change and persuasion are especially desirable. Medical knowledge is a plus, although not required. Send a statement of interest, a vita and three references to Bickmore@bu.edu.

Assistant or Associate Professor Level Faculty Position

The Stanford Prevention Research Center (SPRC) at Stanford University School of Medicine invites applications for a faculty position at either the

assistant or associate professor level. The SPRC is a highly productive, interdisciplinary research program in disease prevention and health promotion. We are seeking an MD, MD-PhD, or PhD investigator with expertise in exercise science or obesity research and experience in patient- or population-oriented research in humans. This position requires a strong commitment to academic research and to interdisciplinary, collaborative work. This is an interdepartmental search and the successful applicant will be appointed jointly in SPRC and an appropriate department (e.g. medicine, pediatrics, health research and policy). Stanford University is an equal opportunity, affirmative action employer. Contact: Fortmann@Stanford.edu.

Post-doctoral Fellowships in Cancer Communication Research

PENN Annenberg School for Communication seeks 3 post-doctoral fellows for Fall 2005. Fellowship program offers training in communication research and theory relevant to cancer prevention and control.

Fellows can participate in cancer communication research using survey, experimental, and content analytic methods and will receive guidance in preparation of manuscripts and career development grants. For more information visit www.asc.upenn.edu/ceccr or e-mail: mkasimatis@asc.upenn.edu.

Post-doctoral Fellowships in Tobacco Communication Research

PENN Annenberg School for Communication and PENN Tobacco Use Research Center seek a post-doctoral fellow in tobacco communication research for Fall 2005.

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The fellow will be able to participate in research using survey, experimental, and content analytic methods and will receive guidance in the preparation of manuscripts and career development grants.

Possible areas of scholarship include: effects of tobacco and anti-tobacco advertising, and effects of information regarding genetic susceptibility to tobacco use and/or genetic based tailoring of treatment.

For more information visit www.asc.upenn.edu/ceccr or e-mail: mkasimatis@asc.upenn.edu.

Health Psychology Postdoctoral Research Fellowships
University of Pittsburgh and Carnegie Mellon University

Health Psychology Postdoctoral Research Fellowships available at the University of Pittsburgh and Carnegie Mellon University. Training program is a mentor-based model with opportunities for formal didactic work in psychophysiology, statistics, disease pathophysiology, and academic survival skills. Training faculty from the two Universities work collaboratively with fellows and include Andrew Baum, Anthony Caggiula, Margaret Clark, Sheldon Cohen, Robyn Dawes, Bernard Devlin, Baruch Fischhoff, Vicki Helgeson, J. Richard Jennings, Thomas Kamarck, David Kelley, John Levine, Stephen Manuck, Marsha Marcus, Kenneth Perkins, Michael Sayette, Michael Scheier, Richard Schulz, and Kim Sutton-Tyrrell. Faculty interests include stress and coping, social support, adjustment to chronic illness, psychosocial interventions for disease, personality and health, gender and health as applied to health behaviors including smoking and weight regulation, psychoneuroimmunology, infectious diseases, cancers, cardiovascular disease, and general susceptibility to illness. Training lasts 1-

3 years; stipends at current NIH levels of support. Must be a U.S. citizen or have permanent resident status in accordance with NIH regulations for a NRSA fellowship award. Those interested in disease-specific fellowships, apply to Andrew Baum, Behavioral Medicine & Oncology, UPCI, University of Pittsburgh, 405 Iroquois Building, Pittsburgh, PA 15213 for cancer; to Karen Matthews, Department of Psychiatry, University of Pittsburgh, 3811 O'Hara Street, Pittsburgh, PA 15213 for cardiovascular disease and risk factors; or to Sheldon Cohen, Carnegie Mellon University, Department of Psychology, Pittsburgh, PA 15213 for non-disease specific training. Applications should include statement of research interest and proposed goals for the fellowship; curriculum vitae, and 3 letters of recommendation. E-mail questions can be submitted to arnoldla@upmc.edu. EEO/MF

Faculty Search Announcement
Assistant/Associate/Full Professor
Division of Health Behavior and Health Promotion

The Ohio State University School of Public Health is searching for well-qualified candidates for multiple tenure-track faculty positions in health behavior and health promotion. Candidates should demonstrate research experience in prevention of health risk behavior (tobacco, alcohol, physical inactivity, poor nutrition), obesity, or chronic disease; use of community based strategies, health communications, or policy/advocacy approaches to prevention. A focus on health disparities or vulnerable populations is desirable. Candidates must possess the potential for developing independent research funding as well as collaborating with existing research initiatives; and the potential for high-quality teaching and advising of graduate students.

A doctoral degree in public health, social or behavioral science, or a closely related field is required. Rank and salary will be determined by the candidate's credentials. For appointment to a tenured position, applicants must demonstrate evidence of a strong track record of funded research and peer-reviewed publications. The starting date for appointments is open to negotiation. The Ohio State University School of Public Health was formed in 1995 and is fully accredited by the Council on Education for Public Health. The School is an integral part of the country's most comprehensive health sciences center, and is in the process of rapid growth in all its programs. Located in the state capital, a metropolitan area of over 1.5 million, Ohio State offers splendid opportunities for interaction with practitioners and policymakers as well as academic colleagues.

Contact:
 Phyllis L. Pirie, Ph.D.
 Chair, Division of Health Behavior and Health Promotion
 School of Public Health
 The Ohio State University
 Starling-Loving Hall
 320 W. 10th Ave.
 Columbus, Ohio 43210
ppirie@sph.osu.edu

To build a diverse workforce Ohio State encourages applications from individuals with disabilities, minorities, veterans, and women. EEO/AA employer.

Behavioral Science Faculty Positions
 The Department of Pharmacy Practice & Science in the College of Pharmacy at the University of Kentucky invites applications for a tenure track faculty position in the area of behavioral science. The successful candidate will complement a Pharmaceutical/ Health Policy group of eight faculty members

focused on the effectiveness of pharmaceutical products, services and policies. The Department has a unique linkage with a public policy program (Martin School of Public Policy and Administration). Together the group has expertise in political science, economics, health economics, econometrics, decision science, public policy and drug use management. In addition, the College has numerous research and teaching linkages to the College of Medicine's Department of Behavioral Science and the Center for Drug and Alcohol Research. Applicants for this position should have expertise in one or more areas of demography, psychology or sociology, and conduct research on social scientific aspects of transmission, treatment and prevention of disease. Research particularly in the area of medication use, compliance with such or the ability and willingness to obtain medications based on income and government programs is of interest. The successful candidates will be expected to develop an extramurally funded research program and contribute to the training of PhD, masters and professional students. The applicants should have a PhD degree preferably with some postdoctoral training or experience. The level of the appointment will be determined by the qualifications of the individual.

Please send curriculum vitae, a one-page statement of research interests, and the names and addresses of three references to: Don Perrier, Chair, Pharmacy Practice & Science, College of Pharmacy, University of Kentucky, Lexington, KY 40536-0082. Or, send this information by e-mail to dgperr2@email.uky.edu.

An Equal Opportunity University

Faculty Positions in Cancer Control

The Comprehensive Cancer Center of Wake Forest University (CCCWFU) and the Department of Public Health Sciences invite applications for two tenure track faculty positions (rank open) in Cancer Control.

The successful candidate will participate in an active program in cancer control as part of an NCI-funded Comprehensive Cancer Center. The CCCWFU has a large and dynamic group of faculty in numerous departments collaborating in the areas of cancer screening, quality of life, survivorship, tobacco control, environmental exposures to cancer, cancer prevention, genetic epidemiology, and complementary and alternative therapies. The CCCWFU has a Department of Defense funded Behavioral Center of Excellence, serves as a CCOP Research Base, and participates in CALGB trials. The Institution has also recently established the Genomics Center, with a major focus in prostate cancer. The Department of Public Health Sciences has over 45 faculty and 200 staff in three sections: Social Sciences and Health Policy, Epidemiology, and Biostatistics and is ranked second nationally in NIH research funding among medical school departments of public health and preventive medicine. Opportunities for collaboration exist with the Maya Angelou Research Center on Minority Health, the Women's Health Center of Excellence, and the Department of Health and Exercise Science.

The faculty position is offered in the Department of Public Health Sciences, and/or another department, depending upon the applicant's qualifications and interests. Applicants should have a Ph.D. or M.D. with additional training/experience in epidemiology, health services research, clinical trials,

behavioral medicine, or molecular/genetic epidemiology. Experience in collaborative research in a multidisciplinary setting and excellent written and oral communication skills are required. The successful applicant should have a strong publication record. Experience in teaching at the graduate level and a history of extramural funding is highly desirable. Specific area of research is open.

Wake Forest University Health Sciences is located in Winston-Salem, North Carolina, one hour east of the Great Smoky Mountains and four hours west of the Atlantic coast beaches.

Applicants should send a letter, curriculum vitae, names of 3 references, and a summary of research interests to Dr. Nancy Avis, Department of Public Health Sciences, Piedmont Plaza II, Wake Forest University Health Sciences, Winston-Salem, NC 27157. Applications will be accepted until the positions are filled. For more information about the Department of Public Health Sciences, visit: www.phs.wfubmc.edu. Wake Forest University Health Sciences is an equal opportunity/affirmative action employer. Applications from women and minority candidates are strongly encouraged.

Professor and Head Division of Epidemiology and Community Health School of Public Health University of Minnesota

The University of Minnesota invites applications and nominations for a tenured position of Professor and Head of the Division of Epidemiology and Community Health in the School of Public Health. As the largest unit with 40 primary faculty, over 300 graduate

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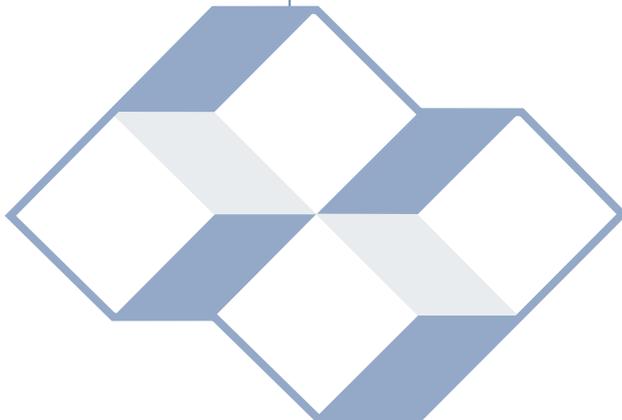
students and more than \$30 million annually in sponsored research grants, the Division plays a major role in the School. The Division also has a distinguished record of research and teaching. Division research is a robust blend of observational and intervention studies aimed at improving the public health and engaging a multidisciplinary integration of epidemiology, biology, and behavioral science. The educational program includes majors in Epidemiology, Community Health Education, Maternal/Child Health, Public Health Nutrition, and Clinical Research. The Division offers programs leading to the MPH, MS, and PhD degrees, and has active postdoctoral training.

Duties include serving as the chief administrator of the Division of Epidemiology and Community Health, participating in School of Public Health governance, and engaging in research and teaching. This position will report to the Dean of the School of Public Health. The successful candidate will have a broad vision of epidemiology and public health, and will value and support the Division's diverse spectrum of research and teaching. Prior experience as Principal Investigator of an NIH R01 is highly desirable.

An earned academic or professional doctorate with research and leadership experience in epidemiology, behavioral science, medicine, public health, preventive medicine or related fields is required. The successful candidate will have administrative experience, a distinguished research and training record, and a commitment to working creatively to develop and implement the activities of the Division and School. Applicants must be eligible to be hired at the rank of full professor. An appointment as Mayo Professor of Public Health may be available to the successful candidate with a truly distinguished record of scholarship, teaching, and service. Salary will be competitive and commensurate with qualifications and background.

The search will remain open until the position is filled. Applications with cover letter and curriculum vitae should be sent to: Ms. Kathy Ramel, Division of Epidemiology & Community Health, School of Public Health, University of Minnesota, 1300 South Second St., Suite 300, Minneapolis, MN 55454-1015.

The University of Minnesota is an equal opportunity educator and employer and specifically invites and encourages applications from women and minorities.

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Outlook Editor

Focus on Leadership, Part 2

Amy Heard-Davison, Ph.D., Mentoring Committee

In our last column, the first of a two-part series on leadership, we explored various definitions of leadership and the qualities that may contribute to effective leadership. But the question remains, how does leadership fit into mentoring, and what is

flexibility, openness to change, integrity, ability to recognize strengths, and enthusiasm/inspiration. This model of “mentor as leader” benefits mentees as well. It provides support from someone who can help them to recognize their own

the society's goals, to influence health care practice and policy through incorporation of behavioral medicine theory and practice, is just one of several mandates that encourage members to serve as leaders in their fields and organizations.

Mentoring programs allow mentors to practice specialized skills that help foster the professional and personal development of their mentees.

its importance to SBM? Often when we talk about the role of leadership in mentoring, we may think of pioneers or minority figures who have achieved a high rank in a particular field and then served as role models or used their status to provide opportunities for others like them. Individuals and groups may turn to such successful role models in medicine, business, politics, and academia for advice or practical support. So does that make these people leaders? Would they have to define themselves as such for it to be so? And then, might all mentors take on the role of leader?

Optimally, when functioning at their best, mentoring programs allow mentors to practice specialized skills that help foster the professional and personal development of their mentees. This task requires

skills and abilities, develop a plan that will utilize them, and learn strategies for enhancing motivation and follow-through.

The importance of leadership may seem obvious—it gets people and organizations to where they want to go. Where would SBM be without the time, energy, and dedication given by leaders in the field? Were they functioning as “transformational leaders” in 1978 when they were able to effectively describe their vision for an interdisciplinary group of professionals dedicated to dissemination of empirically-based treatments in behavioral medicine and then implement it by mobilizing multiple resources to make it happen? But initial vision is never enough for long-term maintenance, and our current leaders continue to expand and advance that vision and breathe new life into it. One of

These two columns have begun to describe what role leadership may play in mentoring, the society, and the field of behavioral medicine. However, they have asked more questions than they have answered. As we explore this new emphasis as a Committee, it is our desire that you will all be a part of this process and will develop, demonstrate, and request both traditional and innovative ways for fostering leadership qualities and skills in individuals and the membership as a whole. Please feel free to discuss the issues of leadership development and mentoring with any of the Committee members at the annual meeting, where we will have programming on the topic of leadership. The Mentoring Committee includes Laura Klein (chair), Amy Heard-Davison, Martita Lopez, Justin Nash, and Judy Ockene.



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