



Outlook

A Quarterly Newsletter of the Society of Behavioral Medicine

"Better Health Through Behavior Change"



President's Message

Laura L. Hayman, PhD, RN, FAAN, SBM President ♦ New York University, New York, NY

I am capturing this opportunity in my last column as President of SBM to share some highlights of this past year and

provide an overview of current and planned initiatives that will continue throughout 2006 and 2007. I am delighted to report that substantial progress has been made toward realizing the goals outlined in our strategic plan. Indeed, SBM is well-positioned as the premier multidisciplinary forum for research on health and behavior, a major venue for professional development and networking, and a visible and influential champion of behavioral medicine. I am exceedingly grateful to our dedicated and talented Board of Directors who have been instrumental in maintaining the excellence of our Society through developmental transitions and in working with me to advance our mission and goals.

The Board of Directors held its annual fall meeting and strategic planning session on October 21 & 22 in Philadelphia. During this meeting, the Board reaffirmed the relevance of the SBM Strategic Plan that was developed during Judy Ockene's tenure as President and published in its entirety in the Winter 2005 issue of *Outlook* (available on our web site). As discussed below, the Board also approved several new goal-related initiatives.

One of SBM's major goals is to enhance the value of the Society as a base for professional growth, networking and information exchange. Our Education, Training and Career Development Council (ETCD), chaired by Justin Nash, has worked tirelessly throughout this past year on numerous activities relevant to this goal. One highlight is the formation of the Leadership Development Sub-committee, chaired by Katharine Stewart, and designed to support the development of leaders within SBM's organizational structure and to support behavioral medicine professionals in leadership roles within their home institutions. A symposium at our Annual Meeting in March will launch this important initiative and feature a variety of perspectives on the multiple leadership opportunities available to our members. (Please see the report by Katherine Stewart in this issue of *Outlook*). The ETCD has also re-energized and expanded activities of the Mentoring Committee.

We are delighted to welcome Shawna Ehlers as the Chair of this Committee. In addition to facilitating new mentor-mentee pairings, the Committee is focusing efforts on a student mentoring program (student mentees/young professional mentors) and website development including resources for mentors. In response to requests from SBMers and in collaboration with our Program Committee, the ETCD has expanded offerings at our Annual meeting including individual and topic-based Expert Consultations. Coordinated by Sonia Suchday, individual sessions will provide opportunities to consult with experts and thought leaders in the science, practice, and policy areas relevant to SBM. Topic-based consultations include "Working with journal editors on the manuscript submission and resubmission process" and "Navigating politics in the professional work environment". Other Annual Meeting events sponsored by ETCD include Grant Writing and Career Development Seminars and a Mentoring Symposium.

Our Membership Council, chaired by Viktor Bovbjerg, is in the process of implementing a strategic plan designed to recruit and retain members at all levels of membership and to identify membership growth opportunities with other organizations. An area of emphasis in the Council's plan and reaffirmed as a major goal for SBM (at our recent fall Board meeting) is to broaden the diversity of the Society's leadership and membership. In this case, diversity refers to a number of dimensions including (but not limited to) discipline, professional background, gender, ethnicity, and stage of career development. Working collaboratively with the Membership Council, President-elect Ed Fisher and I are convening a group of SBM volunteers to assist in identifying individuals from diverse backgrounds for leadership roles within SBM. We welcome your suggestions and participation in this important SBM initiative. Relatedly, our Nominating Committee, chaired by former SBM President Tracy Orleans, encourages participation of all SBMers in the selection of individuals for elected leadership positions within the Society.

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Another major strategic planning goal is to establish SBM as a visible and influential champion of behavioral medicine. Our Publications and Communications Council, chaired by Dawn Wilson, has had a productive year contributing to this goal. With Alan Christensen, Editor of our outstanding, high impact journal, *Annals of Behavioral Medicine*, Dawn and members of this Council are redesigning the SBM web site to enable inclusion of information and links relevant to SBMers such as reports from our Health Policy and Evidence-Based Behavioral Medicine Committees, Special Interest Groups and easy web access to *Annals*. This long term project will result in a new web site image for SBM.

Our two new standing committees, Health Policy, chaired by Debra Haire-Joshu and Evidence-Based Behavioral Medicine (EBBM), chaired by Bonnie Spring, have made concerted collaborative efforts and substantial progress in advancing SBM as a visible and influential champion of behavioral medicine. Debra and her committee are working with our Special Interest Groups in identifying health policy initiatives of relevance to their members, providing guidance and skills in creating health policy briefs. This will be emphasized in programming at our March meeting. In addition, the Health Policy Committee is sponsoring a special workshop, "Congressional Perspectives on Health Policy-The Role of Health Professionals" that is designed to train SBMers in processes of health policy formation including the critical role of science and the resources and tools congressional staffers rely on to bridge science and policy formation. Relatedly, our EBBM committee is sponsoring a symposium, "Evidence-Based Health Policy: Success Stories and Lessons Learned". Consistent with one of their major goals, our EBBM committee is also offering a seminar, "Training in Evidence-Based Clinical Decision-Making" designed for all health disciplines within SBM. (Please see Bonnie Spring's report in this issue of *Outlook* for other highlights from this highly productive committee).

Throughout the past year our Scientific and Professional Liaison Council, chaired by Rick Seidel, has been implementing their part of SBM's strategic plan in developing and fostering interdisciplinary programs and services and linkages with other professional organizations and agencies that share our agenda for health and behavior. To date, liaison relationships have been formalized with the Preventive Cardiovascular Nurses Association (PCNA) and the American Heart Association's Council on Cardiovascular Nursing. Look for program offerings sponsored by these Associations at our Annual meeting in March. We are particularly delighted to have Ron Abeles, Office of Behavioral and Social Sciences Research (OBSSR) as our liaison to the National Institutes of Health (NIH). Ron has kept us informed of important activities and events at OBSSR and NIH and welcomes the behavioral medicine community to the 10th anniversary

celebration of OBSSR set for June 21 -22. (Please see announcement in this issue of *Outlook*).

Central to our viability and visibility as a premier multidisciplinary organization, and a major component of our strategic plan, is developing the capacity to secure resources to achieve our mission and goals. To this end, we are fortunate to have David Ahern and Ed Fisher's leadership in establishing a successful (ongoing) Advocacy and Membership Development Campaign. As recently announced, these funds will support SBM's 2006 Distinguished Student Awards. Our Development Committee, chaired by former SBM President Linda Baumann, is working in concert with our expert staff to cultivate sponsors for our 2006 Annual Meeting and to identify other potential sources of support for SBM. At our fall Board meeting, the formation of a Committee on Grants was approved and charged with developing and submitting proposals for funding of SBM initiatives including our Annual Meeting. Amanda Graham, our 2006 Program Chair, graciously agreed to provide leadership for this important effort.

Additional initiatives approved by the Board at our October meeting are relevant to all goals outlined in SBM's strategic plan and designed to support and advance our mission as a multidisciplinary organization. Specifically, a Fundamental Science Committee (in process of formation) will address the role in the Society and its activities of fundamental research into biobehavioral mechanisms in health and illness and quality of life. Part of the impetus for this new initiative is to re-energize and emphasize the critical contribution of fundamental/basic and biobehavioral science to SBM's mission. A second Committee, the "Wisdom Council", will address the role in the Society of former Presidents and current Fellows. One component of the Council's effort will focus on how to optimize the multidimensional talents and expertise of our former and current leaders within SBM. We are very fortunate to have former SBM President Bob Kaplan as Chair of this Council. Our third new initiative is the Committee on Special Interest Groups (SIGs). Our fourteen SIGs have made numerous contributions essential to the mission and goals of SBM including dynamic state-of-the-art and science programming for our Annual meetings, publications in *Annals of Behavioral Medicine* and *Outlook* and development of web site resources. I am delighted to report that Michael Goldstein has agreed to Chair the Board approved Committee that will examine ways of optimizing our SIGs as an integral part of SBM.

The Board joins me in welcoming your comments on SBM's initiatives in progress, ideas for SBM's future, and in encouraging your active participation in the Society. Plan to attend the annual business meeting in San Francisco as part of our 27th

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Outlook on Life

Editor's note: This column has questions similar to the ones asked by James Lipton on the TV show "Inside the Actor's Studio". I have "adapted" his questions to address issues in our field, and I think these questions are a nice way to "feature" a SBM member in the newsletter.

Featured Guest: Sonia Suchday, Ph.D. - Program Director/ Assistant Professor, Clinical Health Psychology, Albert Einstein College of Medicine/Ferkauf Graduate School of Psychology/ Yeshiva University. Member of SBM's Education and Training Committee for the past for 4 years. SBM member since 1991.

	Questions	Answers
	What is your favorite word?	<i>Passion</i>
	What is your least favorite word?	<i>Impossible</i>
	What "turns you on" or excites you about the field of Behavioral Medicine?	<i>Multidimensionality</i>
	What turns you off /frustrates you about the field of Behavioral Medicine?	<i>Difficulties of navigating multidimensionality</i>
	What sound or noise do you love?	<i>Bells</i>
	What sound or noise do you hate?	<i>Loud metallic noises</i>
	What was your most unusual job (Medicine/academia)?	<i>Selling diamond jewelry</i>
	What profession, other than yours, would you like to attempt?	<i>Politics</i>
	What profession or job would you not like to participate in?	<i>Don't know! I like trying most things!</i>
	If Heaven exists, what would you like St. Peter to say when you arrive at the pearly gates?	<i>Here is your next assignment.</i>

Outlook

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Annual Meeting, a celebration of "Behavioral Medicine Across the Lifespan". With the leadership of Amanda Graham and Paul Estabrooks, our Program Committee has assembled four days of sessions that exemplify the best of behavioral medicine. (Please see Program Highlights in this issue of *Outlook*).

Finally, I take this opportunity to extend *warmest* appreciation to Board members who are concluding their term of service in March: Ken Wallston (Chair, Finance Committee), Michael Goldstein (Secretary-Treasurer), Marc Gellman (Member

Delegate), Viktor Bovbjerg (Chair, Membership Council), Justin Nash (Chair, ETCD) and Judy Ockene (Immediate Past President). Their individual and collective contributions have been *essential* to the vitality of the Society and realization of our goals. A standing ovation to Cheryl Albright for continuing her exceptional service as Editor of *Outlook*!

I wish you and your loved ones a new year of peace, health and personal and professional fulfillment. See you in San Francisco!

Trans-Disciplinary, Trans-Society Evidence-Based Behavioral Medicine

Bonnie Spring

With the American Psychological Association's approval of a policy statement on evidence-based practice (cf., Trudeau & Davidson, this issue), all major health professions now endorse the guiding principle of evidence-based practice. The concept of evidence-based practice emerged in the early 1990's in medicine. The approach became widely accepted as a systematic way to make clinical decisions by utilizing the most valid sources of research evidence, taking into account context and available clinical expertise, and engaging the patient in selecting treatment alternatives. Thus, research, clinical expertise, and patient preferences can be characterized as three legs of a stool melded together by evidence-based clinical decision-making. Movement towards evidence-based practice is expected to improve accountability for health care practice and help stimulate needed development of the research evidence base. Importantly, having a common practice model enables professionals in the social and medical sciences to acquire shared vocabulary and conceptual grounding that facilitate transdisciplinary collaboration.

On the other hand, translation from concepts and operations of evidence-based medicine to evidence-based behavioral medicine is not automatic. There is a need to consider carefully how to define and locate best available evidence. One issue that needs attention is that some literature search strategies that effectively locate best research evidence in MEDLINE work less well when applied to psycINFO. Another is that some research design features that are expected of high quality trials of medical treatments cannot be implemented readily in behavioral treatment trials. One example is blinding. Also, a logistical challenge that now hampers clinical decision-making about behavioral treatments is that there exist many fewer systematic reviews of behavioral than medical interventions.

Recognizing their need to address these shared challenges, the major professional societies concerned with behavioral medicine have joined together in two joint initiatives. The first initiative, a Trans-Societal Task Force on Evidence-Based Practice Policy for Behavioral and Psychological Treatments is chaired by Peter Kaufmann. The Task Force is chartered by the Society of Behavioral Medicine, American Psychological Association Division 38, Academy of Behavioral Medicine Research, American Psychosomatic Society, and Association of Behavioral and Cognitive Therapy. Its purpose is to formulate a policy statement and prepare a white paper on Evidence-Based Practice/Evidence-Based Behavioral Medicine/Evidence-Based Psychosomatic Medicine.

The second initiative establishes the Trans-Society Council on Training for Evidence-Based Behavioral Medicine Practice, chaired by Bonnie Spring. The Trans-Society Council is co-sponsored by the Society of Behavioral Medicine, American Psychological Association Division 38, Academy of Behavioral Medicine Research, and American Psychosomatic Society. Its aims are to: 1) characterize knowledge, skills and competencies in evidence-based behavioral medicine practice; 2) identify where in the didactic curriculum or elsewhere in the training experience the knowledge, skills, and competencies are currently being conveyed; 3) develop and disseminate resources to enhance training in the concepts and methods of evidence-based behavioral medicine practice. The Council is seeking funding to create web-based curricular resources that disseminate knowledge about evidence-based behavioral medicine concepts. A next step will be to study and disseminate knowledge about alternative curricular approaches to training evidence-based clinical decision making.

Anticipating Annals

Editor's note: This is a new column called "Anticipating Annals". It will preview the table of contents for an upcoming issue of SBM's journal: Annals of Behavioral Medicine. We hope members will find it interesting and helpful to get a "preview"

of what will soon be published in Annals. We can thank Alan Christensen, PhD, the Editor of Annals, and his staff for providing this information for Outlook. –Cheryl Albright, PhD, MPH, Editor, Outlook

Annals of Behavioral Medicine

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Don't Forget To Take Advantage of Your Right and Vote!

Vote in February online at www.sbm.org for Candidates for the SBM Board.

Guest Column on Health Policy: Understanding Philip Morris's Pursuit of US Government Regulation of Tobacco

Patricia A. McDaniel and Ruth E. Malone University of California, San Francisco

Since 2000, Philip Morris (PM), the largest multinational tobacco company in the world, has been aggressively pursuing U.S. Food and Drug Administration (FDA) regulation of tobacco products. Using publicly available PM documents, we explored the development of PM's support for FDA regulation, focusing on the 2000-2001 period.

We found that PM's pursuit of government regulation was part of its larger plan to be regarded as a normal, legitimate corporation, thereby ending its isolation and assuring its continued success.¹ This larger plan was named Societal Alignment, or "meeting society's expectations of us as a responsible manufacturer and marketer of all our products, especially those that carry risks".² One aspect of this plan was image improvement. PM's public image throughout the 1990s was quite low, and the company determined from polling data that its support of government regulation of tobacco would improve its standing among the general public.³

PM supported "tough" but "reasonable" regulation, which included 1) preserving the pre-emption clause of the 1965 Federal Cigarette Labeling and Advertising Act (FCLAA) (which has been interpreted by the courts as prohibiting certain types of state tort damage claims against the industry); 2) regulating cigarettes as cigarettes, rather than as medical devices; 3) limiting FDA authority over product labeling (i.e., avoiding warning labels with graphic images); 4) imposing no restrictions on marketing to adults; and 5) encouraging the introduction and marketing of less risky cigarettes.^{4,6} Over time, PM compromised on some of these provisions, but not on the first two.

To achieve its goal, PM employed legislative and public relations strategies. Company lobbyists worked with Democratic and Republican legislators behind the scenes, writing legislation, explaining PM's views, and lobbying on behalf of particular bills. PM also mobilized its field action teams, lobbyists and consultants in all 50 states whose job was to enlist support for a variety of PM causes. In a three-month period, team members met with representatives of over 650 organizations to brief them on PM's position on FDA regulation and ask for an official show of support.^{7,8} Throughout its campaign, PM attempted to claim the "reasonable" middle ground of the debate by portraying opponents of what it regarded as moderate legislation as extremists or obstructionists.^{9,10}

Despite PM's legislative and public relations activities, a bill granting FDA regulatory authority over tobacco products has yet to be approved by legislators. However, in 2004, a bill

supported by both PM and a number of public health groups advanced as far as a House Senate conference committee, and is likely to be reintroduced in the future.

Before supporting "reasonable" FDA regulation of tobacco products, it is important to consider its implications for tobacco control. If FDA regulation enhances PM's image as a reformed company, it may contribute to a belief among consumers that the company's products are being made safer. PM's own market research found that 63% of Americans polled agreed that FDA regulation of cigarettes would lead people to believe that cigarettes can be safe.³

The image enhancement that PM stands to gain from "reasonable" FDA regulation may also provide it with protections from litigation. Ongoing litigation depresses stock prices and presents financial threats to the industry's stability. Enhancing its corporate image by embracing regulation may improve the company's credibility with potential jurors and with legislators.

While strong regulation of tobacco products and promotion remain critical public health goals, previous experiences with tobacco regulation show that caution may be warranted in anticipating the real-world effects of "reasonable" regulation. The Master Settlement Agreement (MSA) between 46 states and the tobacco industry, for example, was viewed as a windfall for public health; in practice, most states have not devoted their MSA funds to tobacco control. Similarly, PM-supported FDA regulation might result primarily in a public relations coup for the largest multinational tobacco company in the world.

Behavioral medicine researchers should be cautious about backing laws or public policies that, at face value, appear to be beneficial (e.g., FDA regulating tobacco), but, in fact, could harbor a significant side effect potentially harmful to public health.

Note: This article was written specifically for Outlook; but, it is based on a study published in *Tobacco Control*, Jun 2005; 14(3):193-200 (<http://tc.bmjournals.com/>).

References

- ¹Parrish S. Steven C. Parrish Sea Island 20010427. Philip Morris. 19 Apr 2001. Bates No 2085077308/7336. <http://legacy.library.ucsf.edu/tid/yrq02c00>.
- ²Philip Morris. Societal alignment. Philip Morris. May 2000. Bates No 2505614860/4879. <http://legacy.library.ucsf.edu/tid/mso25c00>.
- ³Frederick Polls. Nationwide poll on opinions toward FDA regulation. Philip Morris. Mar 2001. Bates No 2085573103/3120. <http://legacy.library.ucsf.edu/tid/ntw21c00>.
- ⁴Scruggs J. Hill visits report. Philip Morris. 25 Apr 2000. Bates No 2074106960/6961. <http://legacy.library.ucsf.edu/tid/sxo45c00>.

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The SBM Leadership Initiative: Developing Leaders for SBM, Academia, and Beyond

Katharine E. Stewart, PhD, MPH Chair, Leadership Development Subcommittee; SBM Education, Training, and Career Development Council; and University of Arkansas for Medical Sciences College of Public Health

As behavioral medicine professionals, we are uniquely positioned to serve as leaders in a range of settings, including academic institutions, research institutes, policy-making organizations, government and health care organizations, and more. We contribute critically-needed interdisciplinary perspectives to health promotion and disease prevention at a time when our country is increasingly aware of the physical, social, and fiscal impact of poor health in populations. As the profession gains visibility through advances in knowledge of the role of behavioral factors in health and illness, we have even more opportunities to be strong advocates for inclusion of behavioral perspectives throughout academia, research, and policy-making. By supporting the development of well-trained leaders from within SBM's Membership, we can ensure that the needs of behavioral medicine professionals are understood and incorporated into the work of those organizations in a meaningful and sustainable way.

The Education, Training, and Career Development (ETCD) Council (Justin Nash, PhD, Chair) proposed the SBM Leadership Initiative to the SBM Board of Directors at the 2005 Annual Meeting to support this vision, and to support the goals and objectives of the SBM Strategic Plan, which specifically emphasizes empowerment and energizing of the Membership, increased advocacy of the critical role for behavioral medicine in health policy, and enhancement of the value of SBM to its Membership as a resource for professional growth. The Leadership Initiative has two objectives: to support the development of leaders within SBM's organizational structure, and to support behavioral medicine professionals in leadership roles within their home institutions or organizations. Included in the Initiative are leadership development activities at subsequent Annual Meetings as well as additional SBM-

sponsored leadership programs for members who are either already serving or wish to serve in leadership roles within their home institution, more broadly in the academic and/or research enterprise, or within the organizational structure of SBM itself.

One of the first activities of the Initiative is a symposium that will take place at the 2006 Annual Meeting. The symposium, which will feature a variety of perspectives on the multiple leadership opportunities available to our Members, will address leadership-related issues for behavioral medicine professionals in all stages of their careers. Presenters include Katharine Stewart, PhD, Sally Shumaker, PhD, Margaret Chesney, PhD, and Judith Ockene, PhD. The symposium will present perspectives on the important role of behavioral medicine professionals in leadership of academic, research, and policy-making enterprises, and will also provide details of the SBM Leadership Initiative. Most importantly, this symposium will include time for Members to contribute their insight about ways the Society can support their professional development, and to provide guidance for setting future priorities for the Leadership Initiative.

Please consider joining us for this symposium, and bring your ideas about how SBM can foster the development of even more strong leaders within the Society and within all the settings in which we serve. The ETCD Council and the Leadership Development Subcommittee welcome all of your suggestions as we continue to set priorities and make plans for the upcoming year. If you would like to email your suggestions, thoughts, or questions about the Leadership Initiative, please contact Katharine Stewart at kestewart@uams.edu. We look forward to seeing you in San Francisco!

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³Berlind M. First conversation with JT. Philip Morris. 7 Jun 2001. Bates No 2085234695. <http://legacy.library.ucsf.edu/tid/bzx12c00>.

⁶Philip Morris. FDA & tobacco: Why Philip Morris USA supports passage of legislation in the 107th congress granting FDA regulatory authority over tobacco products. 4 Jun 2001. Bates No 2080779683/9696. <http://legacy.library.ucsf.edu/tid/jmo20c00>.

⁷Philip Morris. The time is now for federal rules on tobacco. Philip Morris. May 2001. Bates No 2085761541/1544. <http://legacy.library.ucsf.edu/tid/jhk41c00>.

⁸Serrano M. FDA education campaign special report hospitality stakeholders. Philip Morris. 4 Sep 2001. Bates No 2085232573. <http://legacy.library.ucsf.edu/tid/vix12c00>.

⁹Anon. Company interview: Philip Morris management corp. *Wall Street Transcript*, 27 Aug, 2001:109-112.

¹⁰Philip Morris. [What is Philip Morris' current agenda?]. Philip Morris. Jan 2002. Bates No 2085786117/6121. <http://legacy.library.ucsf.edu/tid/gnf20c00>.

Spotlight on Education and Training in Behavioral Medicine

The University of Miami Behavioral Medicine Research Program

The University of Miami Behavioral Medicine Research Program (BMRP), was established in 1979 by Neil Schneiderman, Ph.D. The program is located on two of the University's campuses, one in the city of Miami at the Miller School of Medicine and the other on the Coral Gables campus within the College of Arts & Sciences. There are a wide range of training opportunities offered, including Pre-Doctoral and Post-Doctoral training in Cardiovascular Behavioral Medicine (NHLBI) and Psychoneuroimmunology in HIV/AIDS (NIMH), as well as a Ph.D. in Health Clinical Psychology and Behavioral Medicine. Overall, these programs provide integrated research training in the biological, behavioral, and psychosocial factors involved in understanding the pathogenesis, prevention, and management of major chronic diseases. In addition to Dr. Schneiderman (delivering the keynote address at this year's convention), Marc Gellman (Member of SBM Board of Directors), Frank Penedo (recipient of the Early Investigator Award and current member of the Program Committee), and Michael Antoni (past recipient of the Early Investigator Award) are a few of the key faculty at BMRP. In describing the goals of the program, Marc Gellman, Ph.D., states, "I hope our trainees will come away with an appreciation of the importance of understanding the underlying basic biological mechanisms regulating behavior and the value of interdisciplinary training."

The BMRP has two training programs. Trainees in both of these programs participate in rotations through various core laboratories including biochemical assays, data management and statistical analysis. One research-training program addresses "Behavioral Medicine Training in Cardiovascular Disease", with funding from NHLBI. The purpose of this training program is to provide

systematic predoctoral and postdoctoral research training into the biobehavioral and psychosocial factors involved in the pathogenesis and treatment of cardiovascular diseases, as well as the prevention of such diseases in high risk populations. Research training is also offered for studying the neuronal and hormonal mechanisms that may link biobehavioral variables to cardiovascular pathology. Coursework is available in areas such as cardiovascular physiology, biomedical engineering, epidemiology, and nutrition.

The second training program funded by NIMH is on "Biopsychosocial Research in Immunology and HIV/AIDS." Much of its research and training focuses on the effects of stressors and stress management to successful adjustment to HIV, and how these processes relate to immunological and virologic indicators of disease progression. Didactic training is available in courses such as psychoneuroimmunology, psychophysiology, and psychological assessment and biobehavioral interventions in physical disorders. This program, like

the one funded by NHLBI is open to pre- and post- doctoral trainees.

Finally, the BMRP is affiliated with the University of Miami's APA accredited Health Clinical Psychology program, which is aimed at training psychologists who are both academically and clinically prepared to work as researchers and clinicians in medical or academic settings. Coursework includes a core sequence consists of Psychobiology, Psychopathology, Social Psychology, Advanced Psychological Methods, Advanced Psychological Statistics, and Multiple Regression and Statistics. Further, Health Psychology predoctoral students complete practica in clinical settings located on the Medical School campus and at the Mt. Sinai Medical Center. Students working in these settings have many opportunities for diverse experiences including work with cardiac, hemodialysis, extended care, geriatric, cancer, hypertensive, AIDS, and spinal cord patients.

More information about this program can be found at www.bmrc.miami.edu.



Marc Gellman and Neil Schneiderman accepting the 2005 SBM award for Excellence in Training for the University of Miami's Behavioral Medicine Training Program from Judith Ockene.

Highlight on... 27th SBM Annual Meeting & Scientific Sessions

March 22-25, 2006 | San Francisco, CA

The Society of Behavioral Medicine cordially invites you to attend the 27th Annual Meeting & Scientific Sessions, March 22-25, 2006, at the San Francisco Marriott in San Francisco, California.

The theme for the 27th Annual Meeting & Scientific Sessions of the Society of Behavioral Medicine (SBM) is *Behavioral Medicine Across the Lifespan*. Each of the Annual Meeting program tracks have been designed to encourage presentations that are relevant on a cross-dimensional level within the field of behavioral medicine.

The SBM Annual Meeting represents the largest annual scientific conference (1,200 delegates) devoted exclusively to behavioral medicine. The Annual Meeting offers a multidisciplinary forum for a range of expertise from research in basic and biobehavioral mechanisms to applied cancer screening, health communication and informatics, health promotion, epidemiology, surveillance, health services, cancer survivorship, and diffusion and dissemination.

Learning Objectives

Upon completion of the 27th SBM Annual Meeting, delegates can be expected to:

1. Understand the role of behavioral medicine in today's changing health care environment;
2. Identify recent advances in behavioral interventions for health improvement;
3. Discuss new and cutting-edge research and clinical data on interactions between health and behavior;

4. Examine strategies for the application of evidence-based research in clinical practice and health programs;
5. Evaluate new interdisciplinary approaches to education and training in behavioral medicine;
6. Exchange scientific ideas on a cross-disciplinary level with colleagues.

Annual Meeting Tracks

- Adherence
- Behavioral Medicine in Medical Settings
- Biological Mechanisms in Health and Behavior Change
- Complementary and Alternative Medicine and Spirituality
- Diversity Issues
- Environmental and Contextual Factors in Health and Behavior Change
- Health Communication and Technology
- Lifespan
- Measurement and Methods
- Population Health, Policy, and Advocacy
- Prevention
- Psychological and Person Factors in Health and Behavior Change
- Quality of Life
- Translation of Research to Practice

The following Schedule-At-a-Glance for the 27th Annual Meeting & Scientific Sessions offers a glimpse into the upcoming program. For a complete listing of seminars, poster sessions, paper presentations, symposia, and other scheduled events please visit the SBM Web site, www.sbm.org.

Schedule At-a-Glance

Wednesday, March 22

Pre-Conference Day

12:00 pm – 7:00 pm

Registration

Special Interest Groups

8:30 am – 4:00 pm

Multiple Risk Behavior Change Special Interest Group

Increasing the Impact of Behavioral Medicine on Physical & Mental Health

12:00 pm – 6:00 pm

Cancer Special Interest Group

Health Disparities in Cancer Prevention and Control

2:00 pm – 5:00 pm

Seminars

6:00 pm – 7:00 pm

New Member Reception

7:00 pm – 8:30 pm

Opening Reception

Meritorious Student Poster Session

Exhibits

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Thursday, March 23

7:30 am – 5:00 pm	Registration
7:30 am – 8:30 am	Breakfast Roundtables
8:30 am – 9:00 am	Break
9:00 am – 10:30 am	Symposia
10:30 am – 12:00 pm	Presidential Address and Awards Presentations Behavioral Medicine Across the Life Course <i>Laura L. Hayman, RN PhD, Steinhardt School of Education, New York University</i>
12:00 pm – 1:30 pm	Lunch Break
12:15 pm – 1:15 pm	Expert Consultations Special Interest Group Meetings
1:30 pm – 3:00 pm	Paper Sessions
1:30 pm – 2:10 pm	Distinguished Scientist Master Lecture - Sex, Drugs, and Viral Load: HIV Prevention for People Living with HIV/AIDS <i>Seth Kalichman, PhD, University of Connecticut</i>
2:15 pm – 3:00 pm	Master Lecture - Emerging Technologies & Behavioral Medicine: Opportunities and Challenges Across the Lifespan <i>Tom Eng, VMD, MPH, EvaluMetric</i>
3:30 pm – 5:00 pm	Paper Sessions
5:15 pm – 6:15 pm	Afternoon Keynote Address - Research Focused on Childhood Obesity <i>Leonard H. Epstein, PhD, SUNY Buffalo</i>
6:30 pm – 7:15 pm	SBM Business Meeting
6:30 pm – 8:00 pm	Poster Session Exhibits
7:00 pm – 8:30 pm	Special Interest Groups Reception
8:00 pm – 10:00 pm	NCI Listens

Friday, March 24

7:30 am – 5:00 pm	Registration
7:30 am – 8:30 am	Breakfast Roundtables
8:30 am – 9:00 am	Break
9:00 am – 10:30 am	Symposia
10:30 am – 11:00 am	Break
11:00 am – 12:00 pm	Morning Keynote Address - Biobehavioral Bases of Cardiovascular Disease Risk and Management <i>Neil Schneiderman, PhD, University of Miami</i>
12:00 pm – 1:30 pm	Lunch Break
12:15 pm – 1:15 pm	Expert Consultations Special Interest Group Meetings
1:30 pm – 3:00 pm	Paper Sessions
1:30 pm – 2:10 pm	Master Lecture – Moderators and Mediators: Comparing the Baron & Kenny and MacArthur Approaches <i>Michaela Kiernan, PhD and Helena Kraemer, PhD, Stanford University School of Medicine</i>
2:15 pm – 3:00 pm	Master Lecture - Expertise Relevant to Gene-Environment Interactions <i>Claude Bouchard, PhD, Pennington Biomedical Research Center</i>
3:30 pm – 5:00 pm	Paper Sessions
5:15 pm – 6:15 pm	Afternoon Keynote Address – Tracking Social and Biological Factors <i>Lisa F. Berkman, PhD, Harvard School of Public Health</i>
6:30 pm – 8:00 pm	Poster Session Exhibits
7:30 pm – 10:30 pm	Presidential Reception

Highlight on... 27th SBM Annual Meeting & Scientific Sessions... continued from page 10**Saturday, March 25**

7:30 am – 2:00 pm	Registration
7:30 am – 8:30 am	Breakfast Roundtables
8:30 am – 10:00 am	Poster Session
	Exhibits
10:00 am – 11:30 am	Symposia
11:30 am – 12:30 pm	Closing Keynote Address - Psychosocial Interventions for Cancer Patients Across the Lifespan <i>David Spiegel, MD, Stanford University School of Medicine</i>
12:30 pm – 2:00 pm	Lunch Break
2:00 pm – 5:00 pm	Seminars

Registration Fees

	Early Bird Before Feb. 22	On-site
Members		
Full/Associate	\$250	\$300
Transitional	\$190	\$240
Student/Trainee	\$125	\$175
Non-Members		
Non-Member	\$440	\$500
Non-Member Student/Trainee	\$215	\$255
One-Day Fee		
Members/Non-Members	\$225	

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Hotel Reservations
www.sbm.org

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San Francisco Convention and Visitors Bureau
www.sfvisitor.org

Don't miss out on the opportunity to attend quality educational programming and network with colleagues and peers at the 27th SBM Annual Meeting and Scientific Sessions. We look forward to seeing you in San Francisco!

Important Dates and Deadlines

January 13, 2006
Rapid Communications submission deadline

February 22, 2006
Early bird registration deadline

February 22, 2006
Housing reservations deadline

March 22-25, 2006
27th SBM Annual Meeting & Scientific Sessions

For more information, contact the SBM national office at:

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Update on the Evidence-Based Practice in Psychology (EBPP) Policy of the American Psychological Association (APA)

Kimberlee J. Trudeau & Karina W. Davidson

In August, the Council of Representatives of the American Psychological Association approved the Policy Statement on Evidence-Based Practice in Psychology (EBPP). This statement, the Report of the Presidential Task Force on Evidence-Based Practice, and a list of the members of this Task Force are available on-line at <http://www.apa.org/practice/ebp.html>.

As you may recall, Society of Behavioral Medicine members, among many others, were invited to comment on the original draft of this policy statement last spring. Almost 200 separate comments from individual members and on behalf of societies or organizations were collated and considered by the Presidential Task Force (which included the second author of this article). The policy statement has four sections: Best Research Evidence; Clinical Expertise; Patients' Characteristics, Values, and Context; and Clinical Implications. A brief description of a few of the revisions that may be of most interest to our community, including their final representation in the Policy Statement, follows:

What is Evidence-based Practice in Psychology? The definition the Task Force decided upon is: "To promote effective psychological practice and enhance public health by applying empirically supported principles of psychological assessment, case formulation, therapeutic relationship, and intervention." Notably, this definition does not just focus on interventions as psychological practice: assessment, case formulation, and therapeutic relationship are expected to be evidence-based as well.

What is evidence? The randomized controlled trial is acknowledged as the best method of testing causality: "The validity of

conclusions from research on interventions is based on a general progression from clinical observation through systematic reviews of randomized clinical trials" (p. 1).

What if there is no evidence? The distinction is made between evidence-based and lack of evidence: "It is important not to assume that interventions that have not yet been studied in controlled trials are ineffective" (p. 1). As there is a relative paucity of studies supporting some behavioral medicine interventions, this distinction is very important.

Is clinical expertise considered evidence? Clinical expertise is not represented on the evidence hierarchy; instead, clinical expertise is expected to include a review of the available evidence: "Clinical expertise is used to integrate the best research evidence with clinical data ... in the context of the patient's characteristics and preferences" (p. 2). The patient's characteristics and preferences are explicated further in a separate section by that name that concludes: "A central goal of EBPP is to maximize patient choice among effective alternative interventions" (p. 2). In addition, text in both the policy statement and the report of the Task Force was written to be more inclusive of children, adolescents, and families.

Thanks again to those of you who volunteered feedback on the original draft of this document. We hope you agree that this policy is a valuable mission statement for promoting the use of evidence and an appreciation of clinician expertise in the health care context.

10th Anniversary of the Office of Behavioral and Social Sciences Research, NIH

Celebrating a Decade of Progress and Promise

June 21-22, 2006

Natcher Conference Center

NIH Main Campus, Bethesda, MD

Join us and your colleagues on this special occasion to:

- * Hear about cutting edge research challenges
- * Participate in and help shape the development of OBSSR's strategic priorities for the future

Presenters include:

Dr. Elias Zerhouni, NIH Director

Dr. Raynard Kington, NIH Deputy Director and former OBSSR Director

Dr. Norman Anderson, First OBSSR Director

Dr. David Abrams, Current OBSSR Director

Dr. Eric Kandel, Harvard University, Nobel Laureate

Dr. Daniel Kahneman, Princeton University, Nobel Laureate

Classifieds

Academic Behavioral Psychologist

The Weight Center at UMass Memorial Medical Center, the clinical partner of the University of Massachusetts Medical School, is seeking full or part time behavioral psychologists to work with a multidisciplinary team devoted to behavioral and surgical weight management. The team consists of bariatric surgeons, a bariatrician, an exercise physiologist, nutritionists and psychologists.

Psychologists will conduct initial evaluations and provide ongoing support to patients through individual and/or group interactions. A PhD is preferred, but masters level clinicians will be considered.

UMass Memorial is the largest health care system in central Massachusetts and has excellent proximity to Boston, Cape Cod and other New England favorites. The region continues to experience population growth and UMass Memorial is the major tertiary referral center for the region.

Interested applicants should contact: Mitchell Gitkind, M.D.
Medical Director, Weight Center
55 Lake Avenue North
Worcester, MA 01655
Fax: 508.334.5054
Email: pryork@ummhc.org

University of Illinois College of Medicine at Chicago; Department of Medicine; Section of Health Promotion, Assistant/Associate Professor

The Department of Medicine is seeking an Assistant to Associate Professor (Rank/tenure commensurate with qualifications) with a doctoral degree in health, social or cultural psychology or related field. Candidates should have a strong publication record and have current national level grant funding or high potential for funding. The Section of Health Promotion reflects a diverse, multidisciplinary group of investigators with the mission of fostering adoption of health behaviors in underserved and minority populations.

Research targets all levels of the population from community to clinic-based populations. Topics of current inquiry range broadly from obesity prevention and control, chronic disease self-management, cancer prevention and control. Applicants with a primary research focus in improving the health of underserved and minority populations through behavior change (e.g., diet, physical activity, weight loss, cancer screening, health communication) are encouraged to apply. The section fosters collaborative relationships with clinical researchers (including primary care, epidemiology, public health and health services) and has strong links to outreach partners and community-based organizations. The UIC environment offers a wealth of opportunities and is positioned to respond to federal funding initiatives. Interested candidates should forward a CV, research statement, and relevant publications to:

Marian L. Fitzgibbon, Ph.D. Professor, Department of Medicine and School of Public Health
Associate Director, Midwest Center for Health Services and Policy Research, Jesse Brown VA Medical Center
1747 West. Roosevelt Road (MC 275)
Chicago, IL 60608; Ph: (312) 996-0146 or Fax: (312) 412-8950; Email: mlf@uic.edu
The University of Illinois at Chicago is an Affirmative Action/Equal Opportunity Employer

Postdoctoral Fellowship

A new section of Health Promotion Research in the Department of Medicine at the University of Illinois at Chicago has a unique position for a post doctoral fellow. Potential candidates should have a doctoral degree in psychology, epidemiology, exercise psychology or related discipline. This is a two-year fellowship but there is the potential for it to develop into a faculty position. Candidates with a research interest in health risk reduction intervention research in minorities and underserved populations are encouraged

to apply. We have collaborative relationships with clinical researchers and strong ties with community-based organizations

Postdoctoral fellows will have a primary and secondary mentor. Candidates interested should forward their CV and a research statement to: Marian L. Fitzgibbon, Ph.D. University of Illinois at Chicago, 1747 W. Roosevelt Rd. (MC 275) Chicago, IL 60608. e-mail mlf@uic.edu

University of Mississippi Medical Center: Health Psychology Postdoctoral Fellowship in Primary Care.

The Department of Family Medicine and School of Dentistry at the University of Mississippi Medical Center is accepting applications for a two-year postdoctoral fellowship in health psychology. This program prepares psychologists to work in academic healthcare settings by providing extensive, supervised clinical, teaching, and research experience. Fifty percent time is focused on clinical and teaching activities with 50 percent time devoted to tobacco-related research. Licensure preparation and attainment is supported and expected. Preference will be made for those candidates who are scientist-practitioners with a background in behavior therapies and research interest/experience in addictive behaviors. Salary is \$33,000 with liberal benefits. Appointment date is flexible between July and September, 2006. Send letter of intent, curriculum vitae, representative publications, and three recommendation letters to Patrick O. Smith, Ph.D., Family Medicine, University of Mississippi Medical Center, 2500 North State Street, Jackson, MS 39216 or via email to posmith@familymed.umsmed.edu. If invited for an interview, lodging and meals will be provided. For additional information call (601.984.5425), email, and/or visit our website (<http://familymed.umsmed.edu/>). EEO, M/F/D/V.

continued on next page

3rd Advanced Training Institute on Health Behavior Theory - Applications due by February 3, 2006

The National Cancer Institute and the Office of Behavioral and Social Sciences Research will sponsor an intensive, 7-day workshop for early career investigators June 18-25, 2006 at the Fluno Executive Conference Center in Madison, Wisconsin. The objectives of the institute are to allow 25 attendees to extend their understanding of the assumptions underlying major types of health behavior theories, 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, University of Florida.

Applicants from all disciplines are welcome to apply. Eleven different disciplines were represented at the workshop held in 2005. An interest in cancer-related behaviors is desired, but 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 \$500 meeting cost to participate in the institute. Travel, meals, and lodging will be provided. More information, an application, and comments from previous participants are available at <http://cancercontrol.cancer.gov/workshop/>.

Please forward this message on to anybody you think may be interested in this opportunity.

Andrew Hertel, Institute Coordinator
Department of Psychology
University of Minnesota
Phone: 612-624-0507
Fax: 612-626-2079
Email: hertm0053@umn.edu

Alex Rothman, Associate Professor
Department of Psychology
University of Minnesota
Phone: 612-625-2573
Fax: 612-626-2079
Email: rothm001@umn.edu

Make your plans for San Francisco!

There is so much to see and do in San Francisco. For planning your trip to the SBM Annual Meeting, consider checking out the following websites identified by our SBM Local Arrangements Committee.

General Visitors Information —

San Francisco is 7x7-square miles with about 750,000 residents. The city has excellent walkability and public transportation with the famous cable cars, street cars, BART and MUNI systems, and cabs.

Visitors Bureau: <http://www.sfvisitor.org/>

Official site of the San Francisco Convention and Visitors Bureau.

Guide to San Francisco: <http://www.baycityguide.com/>
Comprehensive guide to sights & attractions, restaurants, shopping, and entertainment.

Bay Area Backroads: www.bayareabackroads.com/
Local show exploring all the best the Bay Area has to offer.

For a few purely San Francisco activities —

- Go behind bars at Alcatraz: <http://www.nps.gov/alcatraz/>
- Wind down Lombard Street, “the Crookedest Street in the World”

- Enjoy the food and sites at the Farmer’s Market on Saturday morning: <http://www.ferrybuildingmarketplace.com/>
- Have clam chowder in a sourdough bread bowl at Fisherman’s Wharf
- Visit a museum: <http://www.thinker.org/> and <http://www.sfmoma.org/>
- See a show: <http://www.sanfrancisco.com/theater/>
- Enjoy San Francisco’s restaurants: <http://www.sanfrancisco.com/dining/>
- Sample Ghiradelli chocolate: <http://www.ghirardellisq.com/>
- Bike the Golden Gate Bridge to Sausalito and Tiburon <http://www.blazingsaddles.com/> (415) 202-8888
- Walk Crissy Field to the Warming Hut and the Golden Gate Bridge: <http://www.bahiker.com/sfhikes/crissy.html>

Whatever you decide to do, enjoy your stay in the city by the bay!

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