



Outlook

A Quarterly Newsletter of the Society of Behavioral Medicine

"Better Health Through Behavior Change"



President's Message

Edwin B. Fisher, PhD, SBM President ♦ University of North Carolina - Chapel Hill

SBM is headed for a wonderful year! Our Annual Meeting was a huge success thanks to the wonderful efforts of

Amanda Graham, this year's Program Chair and, following our recent elections, now a Member Delegate of the Board. The success of the annual meeting also rested on numerous members' efforts in the Program Committee and Local Arrangements, especially Paul Estabrooks, Program Co-Chair and Vanessa Malcarne, Chair of the Program Oversight Committee. Viktor Bovbjerg and the Membership Council did a terrific job this past year in boosting our membership numbers. Our management team at EDI has a firm handle on the administrative affairs of the Society. The Society is poised to move forward in several areas of its strategic plan and is a group of which being part of the leadership is, indeed, a real gift.

Paul Estabrooks will be Program Chair for the 2007 meeting next March 21 - 24 in Washington, D.C. Joining him as Program Co-Chair will be Frank Penedo. Together, Paul and Frank will provide broad leadership, matching the breadth of the Society's interests and the ambitious theme of the meeting, "Science to Impact: The Breadth of Behavioral Medicine."

Laura Hayman deserves a tremendous amount of credit for a superb job as President this past year. She possesses a wonderful talent for encouraging folks to go above and beyond what can be expected of a volunteer and valuing the contributions of all at the table. As a result, SBM has been remarkably productive this year in a number of ways that I will detail in the next paragraphs. Meanwhile, back to Laura, her presidential address was a gem, tying together important epidemiological, clinical, and behavioral data characterizing the continuities in the development of cardiovascular risks among children, youth and young adults. Clearly, the problems begin early and point to important intervention and preventive opportunities. Laura's emphasis on lifespan in her distinguished research brought an important perspective to her address as it also brought a rich theme to the overall meeting. Characteristic of Laura's generosity, she seemed to spend more time in her presidential address touting the contributions of all the other

speakers at the meeting than she did describing her own exciting work. This provided her audience a terrific, integrative overview of the meeting. It was truly a wonderful talk for a community of scholars.

Congratulations to our newly elected officers of the Society. Peter Kaufmann is the new President-Elect. Peter has been a mainstay in the development of behavioral medicine through his strong support of the field and determined encouragement of its growth and role at NHLBI, throughout the federal government and in the broader community. He will provide distinguished and wise leadership to the Society. Susan Czajkowski is our new Secretary-Treasurer. Susan did a spectacular job as Program Chair several years ago and will be especially welcomed back to the Board and the Society's leadership. As mentioned earlier, Amanda Graham has been enormously effective with the Program Committee and will now be welcomed to the Board as a Member Delegate. Among her great contributions to SBM has been the reinvigoration of our grant-writing to increase support for the Annual Meeting. Replacing this effort will be a major challenge for the Board this year.

Special thanks are due to Tracy Orleans, a Past-President, who was generous with her time in chairing the Nominating Committee this past year. The committee, organized an election with extremely high participation, 37% of members voted. Tracy has a separate column in this issue of *Outlook*, telling you more about the elections but we should also thank Jim Prochaska and Shari Waldstein (President-Elect), Maureen Groer and Tom Patterson (Secretary-Treasurer), and Robert Friedman and Felicia Hill-Briggs (Member Delegate) for graciously giving of themselves in standing for election.

Several members of the Board have completed their terms and deserve special credit. As noted above, Viktor Bovbjerg has been careful in leading the Membership Council, enhancing our renewal process and working hard to bring the Special Interest Groups into the forefront of the Society's activities. He will be replaced by Lora Burke who has been a member of the

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Membership Council for several years and will do a wonderful job of continuing where Viktor left off. Speaking of the Special Interest Groups, Michael Goldstein, another Past-President who has been generous with his time, led an *ad hoc* committee on Special Interest Groups this year. The result of this work is that the Special Interest Groups now constitute a Council in SBM, providing their chair, Jennifer Steel a seat on the SBM Board (along with the Council Chairs for Education, Training & Career Development; Membership; Publications & Communications; and Professional & Scientific Liaison). The Special Interest Groups promise to be a tremendous source of energy within SBM, enhancing the sense of collegiality and community that is a long-standing strength of the Society. Facilitating this growth within SBM would have been sufficient contribution to earn Michael deepest thanks from all but, in addition to this he also served as Secretary-Treasurer this past year, collaborating with our clever and thorough Finance Chair, Ken Wallston, in guiding the Society financially.

As I have mentioned several times, the collegiality and sense of community in SBM is of special value to all of us. In addition to the growth of the Special Interest Groups, the activities of the Council on Education, Training & Career Development have enhanced these considerably. Justin Nash deserves great credit for his work in chairing this Council for the past three years. Its activities are broad and it includes several subcommittees, making the task of Chair an especially challenging one. Justin has carried out this task superbly. Stepping into his role will be Sonia Suchday who has been active in the Council for several years as well as in many other areas of the Society's affairs. She will bring great energy to the role. Working with her will be Phil Brantley, long an active member of the Society and experienced in a variety of training areas.

As we look to cultivating our own community, the key role of fundamental science in SBM has emerged as an important priority. A number of researchers in fundamental aspects of our field have contributed suggestions for enhancing their ties to SBM. Frank Penedo's ties to the fundamental research community will be important in his contributions as next year's Program Co-Chair, and Peter Kaufmann and I will be paying particular attention to this concern as the year unfolds.

Over the next few months, you will see our website morphing into a brighter, more useful design, guided by the Publications & Communications Council under the creative leadership of Dawn Wilson-King. Also in the publications and communications area is our *Annals of Behavioral Medicine* that has been growing in stature and number of articles published each year, thanks to its editor Alan Christensen and the Editorial Board's great efforts. The page you are looking at would not exist without the cheerful and persistent efforts of Cheryl Albright to make *Outlook* a great channel for members keeping in touch

with each other and the Society. From website to internationally prestigious journal to a great community newsletter, the publications and communications group serves us all well.

As past president, Judy Ockene did a great job with the Awards Committee this year, a very important area in which we honor each others' contributions both to the field as well as to the Society. Marc Gellman has agreed to take this on and to review the awards nomination and selection processes and identify ways to engage members further in them. Marc is one of the most steadfast members of the Board and SBM leadership. He probably knows more about SBM's history than any other single person, with the possible exception of Ken Wallston. He is also rumored to hold a complete set of minutes of Board meetings and all related miscellanea, including the slip on which Neil Miller ordered a roast beef sandwich for lunch back at the "Yale Conference" that led to the foundation of the Society!

Linda Baumann has grown the activity of the Development Committee to generate important new funds through sponsorships of the annual meeting. In the next months, Linda, David Ahern and I will be working to plan how we can move forward with the Advocacy and Membership Development Campaign in the coming year.

Our member survey several years ago made clear that members want SBM to speak up for the importance of behavior in health and of behavioral medicine in health care and prevention. We have been fortunate to have a Health Policy Committee led by Debra Haire-Joshu. In addition to her distinguished work as a researcher, Debra brings remarkable credentials to the Policy Committee through her experiences having served as a Robert Wood Johnson Foundation Congressional Policy Fellow several years ago, working in the office of Senator Kennedy. Her committee is developing a comprehensive plan for advocacy activities with our Annual Meeting being held in Washington, D.C. next March.

Evidence-Based Behavioral Medicine is another important part of our field. The EBBM Committee has been energetically led by Bonnie Spring over the past several years and has generated an astounding level of activity including important publications articulating this part of our scholarly base. Bonnie has also been energetic in developing linkages to those interested in evidence-based approaches in other related organizations, putting SBM in a leadership role in this area.


At the time I sat down to write this column, I had just received two newsletters from other societies of which I'm a member. Both of their presidents' columns featured evidence-based practice and reflections on critical issues in this area. The

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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: Dawn Wilson-King, PhD - Professor, University of South Carolina/Department of Psychology, Barnwell College and Chair - Publications & Communications Council, Society of Behavioral Medicine

Questions		Answers
	What is your favorite word?	<i>Flexibility</i>
	What is your least favorite word?	<i>No</i>
	What "turns you on" or excites you about the field of Behavioral Medicine?	<i>Collaborating with such great colleagues and students on interdisciplinary work at the community level.</i>
	What turns you off /frustrates you about the field of Behavioral Medicine?	<i>Not much! It is a very exciting time in the field with lots of changes going on...especially with trying to impact the greater society on a broader level through policy issues. I think the obesity epidemic is frustrating at times since promoting long-term weight loss is probably one of the most difficult challenges for our field.</i>
	What sound or noise do you love?	<i>Music....especially piano and string instruments.</i>
	What sound or noise do you hate?	<i>Finger nails on a chalk board.</i>
	What was your most unusual job (outside of Behavioral Medicine/academia)?	<i>I was a private investigator during my undergraduate years and located missing individuals for law firms in San Diego, CA.</i>
	What profession, other than yours, would you like to attempt?	<i>Acting</i>
	What profession or job would you not like to participate in?	<i>Accounting</i>
	If Heaven exists, what would you like St. Peter to say when you arrive at the pearly gates?	<i>Thanks for all my blessings in life and especially for the wonderful people who surround me everyday in my home and work environments!!</i>

Outlook

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exciting development of evidence-based behavioral medicine has forced us to examine with a fresh perspective our views about what evidence is, how we appraise evidence, and how we combine evidence from multiple sources in formulating interventions, prevention programs, or policies. Many of us may not have thought too much about this since courses in graduate school. A number of movements including EBBM but also including, for example, broader ecological perspectives on health and behavior or community based participatory

research, make the issues surrounding what we accept as evidence increasingly interesting, as well as important. In the interest of generating some dialogue on this, please send me your thoughts on what constitutes evidence in our field. I will focus on these in my next column and will look forward to where your comments may lead us. You can send them to edfishersbm@unc.edu. If you want to give me permission to use your name, please make that permission explicit in your email.

Catching up with EBBM

Bonnie Spring and Sarah Altman

The Evidence-Based Behavioral Medicine Committee (EBBM) has been hard at work. Here are some highlights.

- At SBM's Annual Meeting, the EBBM and Policy Committees co-sponsored a symposium on "Evidence-Based Policy: Success Stories and Lessons Learned." Examples of evidence-based policy formation were described for Great Britain's National Institute of Clinical Excellence by Eva Kaltenthaler, the Quebec Ministry of Health and Social Services by Patricia Dobkin, and the Centers for Medicare/Medicaid by Steven Sheingold.
- Also in San Francisco, EBBM and SBM's Education and Training Council co-sponsored a seminar on "Evidence-Based Clinical Decision-Making." Presenters were Rowland Chang, Barbara Walker and Bonnie Spring.
- The Committee's articles about practical clinical trials and researcher and clinician perspectives on EBBM appeared in the January 2006 and October 2005 issues of the *Annals of Behavioral Medicine*.
- An essay entitled, "Unscrambling Alphabet Soup," a glossary of terms used in EBBM was published in the summer and winter newsletters, respectively, of the American Psychological Association Division 38 and the Association for Behavioral and Cognitive Therapy.
- The Committee's article on developing an evidence base in psychology was published as the lead paper in the March 2006 edition of *The Journal of Clinical Psychology*.
- Two articles describing an evidence-based approach to the treatment of individuals seen in clinical practice will soon appear in *The Journal of Clinical Psychology: In Session* and *The Clinical Gerontologist*.
- The EBBM Committee has again been invited to address the World Health Care Congress on Innovation in the Cost-

Appropriateness of Behavioral Health and Wellness in Baltimore, Maryland. The audience for this event is comprised of CEOs and senior executives from all segments of the healthcare industry. In May 2005, Robert Kaplan and Bonnie Spring gave presentations demonstrating the cost-effectiveness of behavioral health treatments. In May 2006, Bonnie Spring and Rodger Kessler will give a presentation on "EBBM and 'Pay for Performance.'"

- In August 2006, EBBM will present an invited symposium to the American Psychological Association in New Orleans. Robert Kaplan, Bonnie Spring, Barbara Walker, David Barlow and Cynthia Belar will discuss "Training in Evidence-Based Behavioral Health Practice."
- Under the heading of comings and goings, there is news to report. Joost Dekker, from Free University VU Medical Center, Amsterdam, joins EBBM as liaison to the International Society of Behavioral Medicine. Joost will chair the Systematic Review Subcommittee. Barbara Walker from Indiana University joins EBBM as Co-Chair of the Training and User-Friendly Subcommittees. New member David Mohr from University of California at San Francisco will chair a new subcommittee to examine choice of an optimal control group. Russ Glasgow will co-chair a new subcommittee on external validity. Karina Davidson and Peter Kaufmann have transitioned off the Committee. New liaison members are Paul Lehrer, UMDNJ — Robert Wood Johnson Medical School, liaison to the Association of Applied Psychophysiology and Biofeedback; Rodger Kessler, Central Vermont Medical Center, liaison to the Interdivisional Healthcare Council of the American Psychological Association, Lora Burke, liaison to the American Heart Association Council on Cardiovascular Nursing, and Robert Golub, liaison to the Society of Medical 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

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Spotlight on Education and Training in Behavioral Medicine

The Centers for Behavioral and Preventive Medicine at Brown University and The Miriam Hospital offers behavioral medicine training at the predoctoral, postdoctoral, and junior faculty levels. The Centers, originally developed by David Abrams, PhD and currently directed by Bess Marcus, PhD, is the focal point for behavioral medicine training that occurs at Brown Medical School.

At the predoctoral level, clinical psychology interns in the highly competitive Brown Clinical Psychology Training Consortium receive training within the Centers and across multiple sites and hospitals. The training is primarily in clinical service settings with 10% time supported and protected for research activities. Research faculty, mostly within the Centers, provide research mentorship. Research training can occur in various areas, including physical activity, weight management, tobacco use, cancer survivorship, HIV/AIDS, CVD, and sleep disorders. Brown clinical faculty members conduct the clinical service training. This occurs in the Miriam Hospital behavioral medicine clinical programs (e.g., weight management, consultation liaison, behavioral cardiology, smoking cessation, pain management, psychosocial oncology), Rhode Island Hospital sleep and anxiety disorders programs, and VA health psychology program. Psychology interns participate in seminars in behavioral and preventive medicine, as well as more broadly in clinical psychology professional issues and ethics.

At the postdoctoral level, the focus is on developing independently funded researchers. The funding for postdoctoral fellows comes primarily from NIH. We have a newly awarded NHLBI T32 in cardiovascular behavioral medicine. We also have funding through F32 grants to individual fellows. Finally, R01 and other grants awarded to research faculty are used to

support postdoctoral fellows. Postdoctoral training uses an apprenticeship model, with fellows being matched with one or two mentors (senior and junior faculty). Fellows develop knowledge and skills by playing active roles on their research mentor projects. They also begin to develop their own programmatic research under the supervision of their mentors. Finally, they participate in formal didactics. The Centers conducts seminars in behavioral and preventive medicine. The Brown Clinical Psychology Training Consortium provides seminar training in research methods, research ethics, and grantwriting. Many fellows are recruited through the predoctoral clinical psychology internship program.

At the early career faculty level, the focus is on helping faculty to solidify their research independence. Many faculty trainees hold assistant professorship (research) positions. The funding of these positions is through various sources, including individual K awards and institutional level training grants. We have just completed a five-year cycle of an NCI funded R25T cancer control training grant that supported up to six trainees at the early career level. We also provide research mentorship to faculty level trainees funded on a K12 BIRCWH training program at Brown in women's health.

Across all of our training programs at Brown, we emphasize the importance of diversity. This began with the development of a diversity committee that has successfully instituted a number of initiatives. For example, the program received funding from the American Psychological Association to develop and offer faculty development workshops in diversity training. In addition, we have special interest groups related to diversity issues. These groups, with participants from predoctoral interns to faculty, gather in informal settings to

discuss interesting diversity related issues (e.g., use of translators in clinical service settings). Finally, we have enjoyed developing a special relationship with the graduate program in clinical psychology at Jackson State University, a predominantly African-American university in Jackson, Mississippi. We work with faculty from Jackson State and provide summer internships to their students. The internships include both mentored research experiences (leading to successfully funded F31 grants), and supervised clinical experiences. Jackson State students have since developed into competitive applicants who have been accepted and enrolled in our predoctoral internship and postdoctoral fellowship training programs.

Justin M. Nash, PhD, Director of Training and Education, Centers for Behavioral and Preventive Medicine, Brown Medical School and The Miriam Hospital, Coro Building, Suite 500, One Hoppin Street, Providence, RI 02903. (Justin_Nash@Brown.edu). Links: www.lifespan.org/BehavMed http://bms.brown.edu/DPHB/pages/training/training_psychology/psychology_home.htm



Nominating Committee: 2006 Innovations and Results

C. Tracy Orleans, PhD

This year, the Nominating Committee worked closely with the Board of Directors and our management group, EDI, to generate and test some innovations in the nomination process and voting procedures. We had two primary goals:

1. to assure that nominees represented a broad cross-section of our membership — reflecting the full continuum of “discovery-development-delivery” behavioral medicine research and practice (e.g., from basic bio-behavioral research to intervention research and practice to healthcare systems change and policy research) and both disciplinary and racial/ethnic diversity.

At the Board’s direction, the Committee departed from the time-honored tradition of alternating each year between psychologist and non-psychologist nominees for the position of President-Elect, and sought instead to nominate candidates who reflected, as a group, a range of interests from basic to applied research and leadership.

Broader inclusiveness was sought for all three open positions. This decision, combined with more active outreach for nominations, resulted in a larger number of nominations than usual and in including three, instead of two, outstanding candidates on the ballot for each position:

President-Elect, Secretary-Treasurer and Member-Delegate.

2. to increase voting participation.

EDI worked with the Nominating Committee and the Board to make it easier to vote — by simplifying the on-line voting procedures and sending periodic reminders, including through SBM’s burgeoning Special Interest Groups. The result was one of the highest voting “turnouts” in recent SBM history.

Election Results

Peter Kaufmann, PhD as President-Elect, Susan Czajkowski, PhD as Secretary Treasurer, Amanda Graham, PhD as Member Delegate!

SBM owes a debt of gratitude to them and to all the candidates who were nominated and agreed to run — for their willingness to commit generously of their time, energy and leadership to advance SBM’s mission and goals — including Jim Prochaska, PhD, Shari Waldstein, PhD, Maureen Groer, PhD, MSN, Tom Patterson, PhD, Rob Friedman, MD, and Felicia Hill-Briggs, PhD. Their commitment to lead and serve is what makes SBM the strong and vibrant society that we are.

As Committee Chair, I’d like to formally thank all the Committee members for their creative and hard work this past year and previous years to continually improve our nominations and voting procedures. Committee members were: Michael G. Goldstein, MD, Rolanda L. Johnson, PhD, RN, Kristin M. Kilbourn, PhD, MPH, Paul J. Mills, PhD, Diane C. Morrison-Beedy, PhD, WHNP, and Sonia Suchday, PhD, MA. And all of us are grateful to the following EDI staff for their critical work “behind-the-scenes”: Tara Withington, Eleanore Kirsch, David Wood, and Stephanie Friedrich.

Finally, I’d like to thank Laura Hayman, PhD, RN, FAAN, and Ed Fisher, PhD, who, as President and President-Elect, challenged and supported the Committee to achieve a new level of inclusiveness in nominations and voting. Both are committed to building on the successes achieved this past year — especially Laura who will chair the Nominating Committee next year! Please let Laura know if you would like to serve on the Committee, laura.hayman@nyu.edu, and start thinking now about who you’d like to nominate next year for the positions of President-Elect and Member Delegate!

C. Tracy Orleans, PhD
Nominating Committee Chair
Distinguished Fellow and Senior Scientist
Robert Wood Johnson Foundation

Please visit the SBM Website at

<http://www.sbm.org/>

for more information about the Society and its activities.

Behavioral Medicine—Do We Need A Scientific Controversy?

Prabhu Ponkshe, MA, LLB; member of the SBM Health Policy Committee and President of Health Matrix, Inc.

By now most of us have read about the South Korean researcher, Dr. Hwang Woo Suk, who retracted two scientific papers after confessing that he had fabricated the evidence on creating human embryonic stem cells from patients. Similarly, the controversy about Vioxx continues both in the courts and in scientific circles, asking how researchers had allegedly omitted the fact that several patients had heart attacks while taking the drug in a trial.

On the heels of those unrelated events came the results of two studies funded through the Women's Health Initiative; one questioning the health benefits of low-fat, low-cholesterol diets, and the other questioning the use of calcium supplements in preventing osteoporosis.

Most of us came to know about these scientific controversies through newspapers and television news stories. The embryonic stem cell story first offered hope as a potential advance in curing serious diseases, but ended up being nothing more than a fraud. The verdict on the Vioxx case will emerge in bits and pieces through both, judicial and scientific review. And it will take several follow-up conferences, papers and scientific reviews to sort out exactly what the diet-health and calcium-osteoporosis studies have told us.

These are not isolated incidents of science having gone wrong and produced "bewildering results." Neither are they a recent phenomenon. But they have put "science" under scrutiny in an age when public opinion gets molded in quick increments by clicks on the web. This has implications for all researchers, especially those in the social and behavioral disciplines.

Should you read further? Before you do, full disclosure is important. I am not a researcher. I am a communications professional helping to link science, policy and health care. This means I spend a significant amount of time talking with researchers, funders, health advocates and the media. So I am often "looking into" the research enterprise from the outside, or I am trying to connect the research enterprise with those elements of society, such as policy makers, the media, advocacy groups and health care professionals, who have a stake in research results.

So what challenges or opportunities does this present to behavioral medicine? First, the challenge. Whether we like it or not, chemistry, physics and biology have had a historical edge over social and behavioral sciences in the public's ability to relate to new findings and insights, and this edge is not just with the lay public. In fact in 1993, the director of the National Institutes of Health, Harold Varmus, reportedly told the *New York Times*, "And while I'm trying to learn more about behavioral science, I must say I don't get tremendous intellectual stimulation from most of the things I read."¹ Varmus later tried to explain his comments, but the bias was still quite apparent.

The point is, events like the retraction of the stem cell research, the Vioxx controversy, or the Women's Health Initiative studies raise questions about the work of specific researchers, but they can also reduce public confidence in the overall scientific process. That loss of confidence in overall science, also has the potential to widen the credibility gap for scientific disciplines that don't have a well-coalesced

constituency of supporters. The extent to which this drop in credibility affects behavioral medicine depends on the integrity of our support base.

The opportunity for behavioral medicine is that, as a discipline, it is not directly related to the current spate of scientific controversies. It is a mere coincidence that these controversies are coming to light when popular modern-day problems, such as obesity, addiction, juvenile problems, are also in the public debate. If we can foster a vigorous scientific debate in solving these modern-day challenges, and put forward evidence-based information that people can incorporate into their daily behavior in a clear and concise way, we will be able to extend the contributions of behavioral medicine beyond the scientific community. If we want to be on that path, one of the critical initial steps would be to give the profession a higher profile before influential decision makers, such as policy makers, corporations and other institutions. We need to be a part of their imagination. We also have to create and maintain "a record of achievements." That will make us tangible and real, which will help to solidify our support base.

And then we should have a legitimate scientific controversy of our own. Now there is a way to get behavioral medicine on the public's agenda!!

¹ Greenberg, DS, *Science, Money, and Politics: Political Triumph and Ethical Erosion*; University of Chicago Press, 2001.

Building Tomorrow's Patient-Reported Outcome Measures: The Inaugural PROMIS Conference

September 11-13, 2006 • Gaithersburg Marriott Washingtonian Center • Gaithersburg, MD, USA

Conference website: <http://meetings.promis.iqsolutions.com>

Co-Chairs: Bryce Reeve, PhD, National Cancer Institute, National Institutes of Health and Kathleen Lohr, PhD, University of North Carolina and RTI International

The NIH Patient-Reported Outcomes Measurement Information System (PROMIS) Network will host an interdisciplinary forum and open Steering Committee meeting for examining conceptual, clinical, and methodological aspects of assessing and using patient-reported outcomes in clinical research and practice.

The 2006 conference will focus on

- Key PROMIS activities, including advances in defining PRO domains, building item banks, and developing computer adaptive testing (CAT) instruments for use in clinical research.
- Methods of patient-reported outcome (PRO) measurement, applications in clinical research and practice, and special issues in assessing physical functioning, pain, fatigue, emotional distress, and social/role participation in adult and pediatric populations.
- PRO measurement systems in development and use around the globe.

Background

PROMIS, a key project of the trans-NIH Roadmap Initiative, is a 5-year effort to improve assessment of self-reported symptoms and other health-related quality of life outcomes across many chronic diseases (e.g., cancer, asthma, arthritis, cardiovascular disease). PROMIS is beginning with core domains of physical functioning, emotional distress, pain, fatigue, social/role participation, and general health perceptions and including both adult and pediatric populations. It is funded through a cooperative agreement between NIH and extramural investigators including six primary research and data collection sites and a statistical coordinating center.

PROMIS is creating a publicly available, adaptable, and sustainable Internet-based system to:

- Administer individually "tailored" questionnaires, using computer adaptive testing (CAT) technology, to assess health-related quality of life,
- Collect and analyze responses, and
- Provide health status reports to users to improve clinical decision-making, facilitate policy-making by health systems and public programs, and enhance research.



Purpose

The scientific and open business meeting will bring together academic researchers, government scientists and officials, clinicians and clinical scientists, industry representatives, and experts in outcomes measurement to discuss the state of the science and the art of measuring PROs through CAT methods. The three-day meeting will feature keynote and plenary presentations from leaders in the field, numerous papers in various concurrent breakout sessions, posters, and ample time for discussion among all participants.

Information about the invitation for submitting poster abstracts can be found at <http://meetings.promis.iqsolutions.com>.

Objectives

- Provide an opportunity for interdisciplinary discussions of major conceptual, methodological, and practical issues in measuring PROs.
- Identify key research questions and priorities that PROMIS investigators need to address to accomplish the program's goals and realize the full potential of these technologies in advancing clinical research and improving health care in this nation and around the world.

For More Information, Contact:

Shani Rolle, MS
National Institute of Arthritis and Musculoskeletal and Skin Diseases
National Institutes of Health
6701 Democracy Boulevard, Suite 800
Bethesda, MD 20892
Phone: (301) 451-7767
Fax: (301) 480-4543
E-mail: rolles@mail.nih.gov
<http://meetings.promis.iqsolutions.com>

27th Annual Meeting & Scientific Sessions Summary

Dear SBMers ~

We are pleased to provide a brief recap of the 27th Annual Meeting & Scientific Sessions, held March 22-25, 2006 in San Francisco, CA. The theme for this year's Annual Meeting was "Behavioral Medicine Across the Lifespan." The meeting drew record attendance totaling 1,312 with a record number of abstract submissions totaling 1,266. As you can imagine, the end result was a dynamic and diverse program that displayed both the depth and breadth of work in the field. Thanks to the efforts of many, the meeting was truly a success!

The lifespan theme was reflected throughout the meeting. In her Presidential Address, Dr. Laura Hayman emphasized the importance of lifespan factors at each level of the ecological model and provided an illuminating description of how cardiovascular risk factors track across time from childhood to adulthood. In his Keynote Address, Dr. Neil Schneiderman addressed cardiovascular disease, focusing on metabolic syndrome as a potent risk factor that has been examined in both animal and human studies across the life course. Additionally, Dr. Leonard Epstein provided a thoughtful and comprehensive review of research from laboratory, field, and clinical studies addressing the relationship between physical activity, energy intake, and obesity in youth. Dr. Lisa Berkman provided a comprehensive review of research examining links between psychosocial factors and disease across the lifespan, highlighting different findings yielded by observational studies and clinical trials. Finally, moderated by Dr. Norman Anderson, a panel of experts on disaster preparedness discussed the impact of natural and man-made disasters on children, adolescents, and adults, as well as the implications for behavioral medicine researchers and practitioners.

Each of this year's Master Lecturers presented to an enthusiastic audience. The 2005 Distinguished Scientist Award Winner, Dr. Seth Kalichman, presented a fascinating address entitled Sex, Drugs and Viral Load: HIV Prevention for People Living with HIV/AIDS. In another Master Lecture, Dr. Tom Eng described the exciting potential of emerging technologies for behavioral health. Drs. Helena Kraemer and Michaela Kiernan co-presented a very informative lecture on a new approach to the examination of mediators and moderators. Dr. Claude Bouchard presented an interesting discussion of the interactions between genes and dietary factors and exercise and finally, Dr. David Spiegel provided the closing Keynote Address on Saturday morning which included a comprehensive review of the evidence regarding the benefits of psychotherapy for cancer patients. All of the lectures were well-attended and audience members got a chance to participate in exceptionally interactive question and answer sessions with the respective lecturer(s).

Also popular were the Expert Consultations which were planned by the Education, Training and Career Development

(ETCD) Council. Several different consultation formats were hosted this year, including roundtable discussions which allowed for up to three attendees with each Expert Consultant; a topic-based Expert Consultation entitled Manuscript Submission and Resubmission: Working with an Editor; and the new "Dinner with an Expert." In all, SBM had over 35 SBM Member Fellows participate as Experts and feedback was great! The sessions were well-attended and each provided meeting attendees with the opportunity to network and meet with Fellows of the Society in a smaller and less-formal setting.

Three Pre-Conference Day activities were held in conjunction with this year's Annual Meeting, each coordinated by a different SBM Special Interest Group (SIG). The first of these activities, coordinated by Dr. Jodi Prochaska, Chair of the Multiple Risk Behavior Change SIG, was titled "Increasing the Impact of Behavioral Medicine on Physical and Mental Health." The activity drew 62 attendees from a broad range of disciplines, professions, and behavioral areas. Key speakers were Drs. James Prochaska, Deborah Toobert, Sharon Hall, and Robert Kaplan. Breakout groups were interactive and served to identify needed research in the area of multiple risk behavior change. Finally, Dr. Sidney Stahl from the National Institute on Aging closed the day-long workshop with discussion on NIA's research priorities in this area.

The Spirituality and Health SIG Pre-Conference Day activity, held off-site at Santa Clara University, was also a big success. The program, coordinated by Drs. Tom Plante and Carl Thoresen, drew a total of 117 attendees. The audience included many SBM Members, and other health care and mental health care professionals from the San Francisco/Bay area, including faculty, staff, and students from Santa Clara University. The presentations were outstanding and relevant to both researchers and clinicians. A new edited book on spirituality and health will be forthcoming, with contributions from many of the activity participants.

Finally, the Cancer SIG held a dynamic Pre-Conference Day activity titled "Health Disparities: Future Directions for Behavioral Medicine." Coordinated and chaired by Drs. Suzanne Miller, Karen Mustian, and Deborah Bowen, the goal of the event was to foster action in future behavioral medicine research in health disparities. With over 100 participants, the event brought together expert speakers, a diversity of backgrounds, and researcher/community partners. The workshop began with a discussion of health disparities funding opportunities at the National Cancer Institute and the American Cancer Society. In addition, it included three panels featuring national experts in health disparities and cancer prevention and control, as well as breakout sessions focusing on "Case

continued on page 11

27th Annual Meeting & Scientific Sessions Summary... continued from page 10

Studies and Community-based Participatory Research.” Participants gained a better understanding of behavioral science approaches to investigating health disparities and learned about new models of health care delivery, including individual and ecological interventions. The Pre-Conference Day activity was generously supported by the Society of Behavioral Medicine, the American Cancer Society, the National Cancer Institute, and the Lance Armstrong Foundation.

Many thanks to this year’s Local Arrangements Committee for helping to ensure that the meeting was not just about excellent science, but also about physical activity and networking. Several local fitness experts led morning tai chi and yoga classes for the early risers and on Saturday morning SBMers participated in a

Fun Run/Walk in nearby San Francisco neighborhoods. This year’s Presidential Reception on Friday night was also great fun! On behalf of everyone at the meeting, many thanks go out to Dr. Jim Sallis and his band, Forgotten Space, who entertained SBMers with an evening full of well-known tunes by the Grateful Dead. Everyone had a blast and got lots of good physical activity on the dancefloor. Thanks again Jim!!

Congratulations again to all of this year’s Meritorious Student and Citation Paper and Poster winners (chosen by the Program Committee). Abstracts of their work were prominently displayed in the main hallways of the Marriott San Francisco. In addition, the Co-Chairs of each Poster Session awarded two ribbons: one for the poster with the best visual presentation and another to the poster with the best scientific presentation. The winners are:

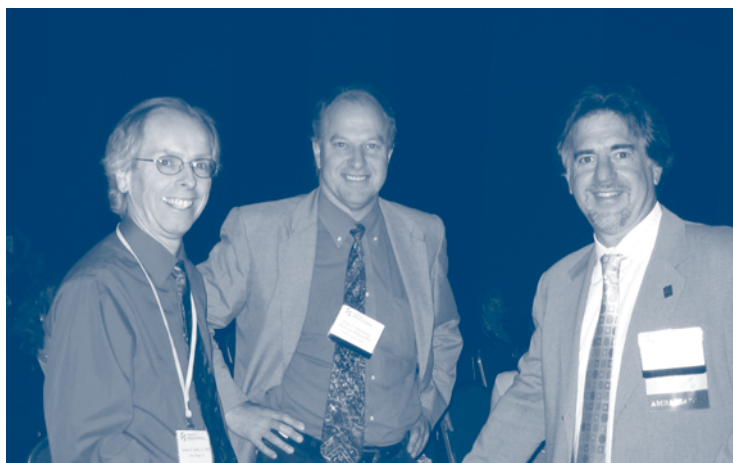
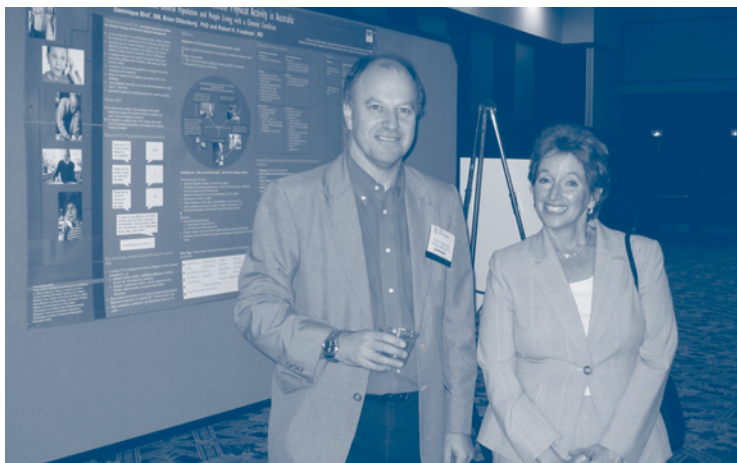
Poster Session	Name	Title	Award
Poster Session B: Adherence; Diversity; Environmental and Contextual Factors in Health and Behavior Change; Health Communication and Technology; Population Health, Policy and Advocacy; Prevention; Translation of Research to Practice	Jennifer L. Best, PhD	Ethnic Identity and Health Values Moderate the Link Between Lifetime History of Racism and the Frequency of Participation in Adaptive Health Behaviors	Best Scientific Presentation
	Lesley D. Lutes, PhD	Treatment of Obesity in Underserved Rural Settings (<i>TOURS</i>): Changes in Nutritional Intake in African American and Caucasian Women	Best Visual Presentation
Poster Session C: Behavioral Medicine in Medical Settings; Biological Mechanisms in Health and Behavior Change; Complementary and Alternative Medicine and Spirituality; Lifespan; Measurement and Methods; Quality of Life	Brent J. Small, PhD	Growth Mixture Modeling of Fatigue Following Completion of Treatment of Breast Cancer	Best Scientific Presentation
	Josée Savard, PhD	Efficacy of Cognitive Therapy for Depression in Women with Metastatic Breast Cancer	Best Visual Presentation
Poster Session D: Psychological and Person Factors in Health and Behavior Change	Katherine Regan Sterba, PhD	Perceptions about Illness as Part of the Self and Psychological Outcomes in Individuals with Type I Diabetes	Best Scientific Presentation
	Jamie Lee Stone, BS	Correlates of Smoking Cessation Self-Efficacy	Best Visual Presentation

We’d like to thank everyone who contributed to the success of the 2006 Annual Meeting, and to encourage all of you to become involved in the Society. We are currently in the process of reviewing feedback from the Annual Meeting online evaluation forms and look forward to implementing as many of your suggestions as possible for next year. The theme of the 2007 Annual Meeting will be “Science to Impact: The Breadth of Behavioral Medicine” and will take place in Washington, DC from March 21-24, 2007. The 2007 Program Chairs will be Dr. Paul Estabrooks (Kaiser Permanente in Denver, CO) and Dr. Frank Penedo (University of Miami). If you have additional feedback or suggestions about this year’s meeting, please send any additional comments to Amanda_Graham@brown.edu or Paul.A.Estabrooks@kp.org.

We look forward to seeing you in Washington, DC next year!

Amanda L. Graham, PhD, 2006 Program Chair and Paul Estabrooks, PhD, 2006 Program Co-Chair

Snapshots from the SBM 27th Annual Meeting





Research!America Award for Jessie Gruman and the Center for Advancement of Health

Jessie Gruman and the Center for Advancement of Health received a prestigious advocacy award from Research!America at their annual awards dinner held on March 21, 2006. Jessie graciously accepted the award on behalf of behavioral and social scientists nationally. Her comments are included below.

On behalf of the board and staff of the Center for the Advancement of Health, I thank Research!America for honoring our commitment to capturing the value of health research.

In recognizing the Center for the Advancement of Health for its advocacy, Research!America acknowledges not only the Center, but also the hard work of thousands of behavioral and social scientists, public health and health services researchers whose focus is not on discovering the etiologies of disease, not on identifying the mechanisms that will lead to their cure, but rather on research that tells us how to make certain that those brilliant discoveries actually achieve their aims – moving from the laboratory to the living room to improve health outcomes.

If you look at our nation's research portfolio, it reflects the belief that scientific knowledge is magically – OK, perhaps aided by the invisible hand of the marketplace – transformed into useful knowledge, drugs, procedures and devices. It is as though somehow the fruits of the laboratory are lobbed directly to our offices and homes, where we will all — immediately — act on the basis of the latest information. Alas, we have plenty of evidence that this is not true.

It is only by applying the methods of science to the behavior of individuals, professionals, organizations and systems that we will avoid the preventable waste and needless suffering that results when we assume that scientific evidence can make its way into medical and public health practice on its own.

Think of the health commissioner in your state responsible for distributing precious Tamiflu and an avian flu vaccine who calls on the evidence about training first line responders and implementing a communications plan to provide information to the public while quelling panic.

Consider the administrator of your health plan as she uses systematic evidence reviews based on hundreds of randomized controlled trials to help determine coverage for new imaging technologies.

Hope that your father's physician makes use of evidence-based guidelines that reflect a combination of clinical trials and clinical observations to shape the care plan for his congestive heart failure.

And remember what it takes to consolidate all of our knowledge of micronutrients to inform the parents all over the country who pack their kids' lunches every school day.

Each of these is an example of how human behavior links basic and clinical research to improved health outcomes.

Research on these topics is undervalued. We need to find a balance between the creation of knowledge and its effective dissemination and use.

We at the Center for the Advancement of Health have been steady and enthusiastic supporters for such research at NIH, CDC and AHRQ. We want to take this opportunity to recognize the work of Research!America as a strong advocate not only for bench and clinical research, but also for public health and health services research.

The Center for the Advancement of Health, Research!America and a handful of other organizations recognize – and ask you to join us in recognizing — that if we are to truly capture the value of our nation's investment in health research we must adopt a systematic, evidence-driven approach to strengthening the critical link between the forces we know affect health and what we do about them in our daily lives.

Save *the* Date!

*SBM 28th Annual Meeting &
Scientific Sessions*

March 21-24, 2007

Marriott Wardman Park ~ Washington, DC

Classifieds

Psychologist

Charleston Area Medical Center located in Charleston, WV has an immediate opening for a doctoral level **Psychologist** in our Cancer Patient Support Program. Degree and Area of Specialization: A doctorate in clinical or counseling psychology with an emphasis in Health Psychology/Behavioral Medicine. **At least one year clinical experience treating psychological issues in a cancer population preferred.**

Principle duties: Doctoral level clinical or counseling psychologist, licensed or license eligible in the state of West Virginia, to join our Cancer Patient Support Program at the Charleston Area Medical Center, a large university affiliated health sciences campus located in the state capital. This position will entail working with an interdisciplinary team, including one psychologist already in the cancer center, providing clinical assessments and interventions to adult cancer patients and their families across the cancer continuum, on an inpatient consult-liaison as well as an outpatient basis. Experience in the assessment and treatment of mood disorders in a medical setting is preferred. Opportunities are available for group, individual and family therapy. This position carries an appointment to the active clinical faculty in the Department of Behavioral Medicine and Psychiatry at the West Virginia University School of Medicine in Charleston, and requires supervision of interns in the department's APA-accredited predoctoral internship in clinical psychology. If interested in this excellent opportunity, apply by visiting our web site at www.camc.org or call Marci Barton, PhD at 304-388-9082 or 1-800-323-5157. EOE

Senior Faculty Position

Health Services Research or Behavioral Sciences

Lombardi Comprehensive Cancer Center

Georgetown University

The Cancer Control Program at Lombardi Comprehensive Cancer Center of Georgetown University is seeking an established researcher at the Associate or Full Professor level. We are particularly interested in candidates with research interests in health services research or behavioral science. The successful candidate will join a highly interdisciplinary Department of Oncology and a Cancer Control Program with active research in cancer outcomes and policy, cancer screening, genetic counseling and testing, lifespan development, cancer and aging, and community outreach. The Cancer Control Program at Lombardi is part of Georgetown University, with collaborators from the Institute for Public Policy, the School of Medicine, the School of Nursing and Health Studies, and the Kennedy School of Ethics. The University is conveniently located in Washington, DC.

This position has a generous salary and recruitment package including the opportunity for additional junior faculty recruits. Minimum requirements include a successful track record of peer reviewed funding and publications. Georgetown University is an equal opportunity employer.

Interested individuals should send a short statement of research interests and CV to: Jeanne Mandelblatt, MD, MPH, Cancer Control Program, Lombardi Comprehensive Cancer Center, 3300 Whitehaven Blvd, NW, Suite 4100, Washington, DC 20007. E-mail: mandelbj@georgetown.edu

Post-Doctoral/Junior Faculty Position Health Services Research

Lombardi Comprehensive Cancer Center

Georgetown University

The Cancer Control Program at Lombardi Comprehensive Cancer Center of Georgetown University is seeking a promising post-doctoral candidate or accomplished junior scientist to join an established cancer health services research program. We are particularly interested in clinician-researchers and candidates with research interests in cancer outcomes, cost-effectiveness modeling, and health policy. The successful candidate will join a highly interdisciplinary Department of Oncology and Cancer Control Program with active research in health services research, including cancer policy modeling, cancer patterns of care, studies of patient preferences and decision making, and behavioral research in cancer screening, genetic testing and counseling, and community health. Lombardi is part of Georgetown University, with collaborators from the Institute for Public Policy, the School of Medicine, and the School of Nursing and Health Studies. The University is conveniently located in Washington, DC.

This is a tenure track position for qualified candidates. Excellent career advancement opportunities. Minimum requirements include an MD or PhD with training in decision sciences, health policy, or a related discipline. Track record of extramural funding a plus. Georgetown University is an equal opportunity employer.

Interested individuals should send a short statement of research interests and CV to: Jeanne Mandelblatt, MD, MPH, Cancer Control Program, Lombardi Comprehensive Cancer Center, 3300 Whitehaven Blvd, NW, Suite 4100,

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Washington DC 20007. E-mail:
mandelbj@georgetown.edu

**The Medical University of South
Carolina, Hollings Cancer Center
Associate Director for Cancer Dispari-
ties**

The Hollings Cancer Center (HCC) at the Medical University of South Carolina (MUSC) invites applications and nominations for the position of HCC Associate Director for Cancer Disparities. This academic appointment will be within an appropriate MUSC department. The successful applicant will develop and lead a program for cancer disparities research, including behavioral and economic research, community-based participatory research and development and dissemination of interventions to reduce disparities. This position will provide leadership and oversight to the HCC Cancer Disparities Advisory Board. This is an exciting opportunity to provide advocacy, leadership, direction and oversight for cancer translational research to reduce cancer disparities in South Carolina.

Interested applicants should send electronically a letter of interest, curriculum vitae and three letters of reference to: Andrew S. Kraft, MD, Director Hollings Cancer Center,

Medical University of South Carolina,
86 Jonathan Lucas St., Rm 712, Charles-
ton, SC 29425, 843-792-3922, Fax 843-
792-3200, email: mundise@musc.edu.

The Medical University of South
Carolina is an equal opportunity
affirmative action employer. Women
and minorities are encouraged to apply.

**The Medical University of South
Carolina, Hollings Cancer Center
Tenure-track Assistant Professor /
Cancer Control Specialist**

The Hollings Cancer Center invites
applications and nominations for a
tenure-track position at the Assistant
Professor level in Cancer Epidemiology.
The individual should have an interest

in tobacco related malignancies
including head and neck and lung
cancer. The appointment will be made
in an appropriate academic department
and the successful applicant will be a
member of the Hollings Cancer Center
Cancer Prevention and Control Re-
search Program. This position is an
exciting opportunity to work with
senior faculty members to develop a
comprehensive program of prevention
and control research in tobacco-related
malignancies. Responsibilities include
initiating and conducting pilot research
studies in cancer epidemiology, behav-
iors, and patterns of care in South
Carolina's multiethnic populations.

Interested applicants should send
electronically a letter of interest,
curriculum vitae and the names of three
references to: Elisa Mundis, Hollings
Cancer Center, Medical University of
South Carolina, 86 Jonathan Lucas St,
Rm 712, Charleston, SC 29425, 843-
792-3922 Fax 843-792-3200, email:
mundise@musc.edu.

The Medical University of South
Carolina is an equal opportunity
affirmative action employer. Women
and minorities are encouraged to apply.

Doctoral level investigator to work 3/4
to full-time for a small, southern
California, for-profit company special-
ized in physical activity and nutrition
interventions and technological tools
for energy balance researchers. Must
have a doctoral level degree related to
behavioral medicine, psychology,
nutritional or exercise sciences. Experi-
ence in behavior change interventions,
very strong writing skills, and project
management experience required, and
grant writing experience preferred.
Primary duties to include oversight of
funded projects and leading new grant
proposal development. SBIR and/or
commercial sector work is a plus. For
additional information, email CV and
inquiries to:
sthompsonsandiego@yahoo.com.

**Post Doctoral Scholar — Department
of Psychology, University of California
Santa Barbara.**

Available May 1, 2006. Funding for two
or more years possible. Responsibilities
are to assist the PI (Dr. Brenda Major) in
conducting research on psychophysi-
ological (cardiovascular, hormonal) and
psychological responses to perceived
discrimination. Successful applicant
will have experience in psychophysiol-
ogy, particularly measurement and
analysis of cardiovascular responses,
experimental design, and strong
statistical and writing skills. PhD in
social and/or health psychology pre-
ferred. Background in intergroup or
interpersonal relations and/or emotion
desirable. The department is especially
interested in candidates who can
contribute to the diversity and excel-
lence of the academic community
through research, teaching and service.
Salary is 40K. Send letter of interest,
vita, publications, and 3 letters of
recommendation to: Dr. Brenda Major,
Department of Psychology, UC Santa
Barbara, Santa Barbara, CA 93106.
Review of applications will continue
until position is filled. The University of
California is an equal opportunity
employer.

Health Psychology (Tenure-Track):

Tenure track position available in the
Department of Medical & Clinical
Psychology at the Uniformed Services
University of the Health Sciences
(USUHS). Seeking an outstanding
researcher and graduate educator to
participate in a dynamic department
offering PhD programs with training
tracks in Medical Psychology Research,
and in Clinical Psychology. Hiring at
Assistant Professor level, but will
consider beginning Associate Professor
applicants. Competitive salary, twelve-
month position, fully budgeted, with an
excellent University research start-up
package. Responsibilities include
pursuing an active and fundable

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research program in any area of health psychology/behavioral medicine, and teaching at the graduate psychology and medical school level. Specialties in psychoneuroimmunology, psychophysiology, and/or quantitative expertise particularly encouraged, but other specialties also considered. Please submit curriculum vitae and names of three references to Ms. Corinne Simmons, Department of Medical and Clinical Psychology at the Uniformed Services University of the Health Sciences, 4301 Jones Bridge Road, Bethesda, MD 20814-4799. USUHS is an Equal Opportunity Employer. Information about the department and School is available on the World Wide Web at <http://www.usuhs.mil/mps>.

The University of Washington Department of Psychiatry and Behavioral Sciences is recruiting a full-time

Psychologist at the rank of Assistant or Associate Professor. The successful applicant will have a strong track record of research as evidenced by peer-reviewed publications and successful receipt of external support for research. The UW is building a culturally diverse faculty and strongly encourages applications from females and minority candidates. It is hoped that the candidate's area of research will both complement and strengthen an existing emphasis in the department which includes behavioral medicine/health psychology and evidence-based psychotherapies for affective disorders, anxiety, and addictions as well as bio-behavioral mediators. The position will involve clinical and teaching responsibilities as well as research. A successful candidate will also have a strong interest in training and enjoy working collaboratively with existing research

groups. Candidates should have a PhD in clinical psychology and be licensed or license-eligible in the State of Washington. University of Washington faculty engage in teaching, research and service. Please send application and CV to Richard Veith, MD, Chair, Department of Psychiatry and Behavioral Sciences, University of Washington, Box 356560, Seattle, WA 98195. The UW is an EOE/AA employer.

One of the top clinical psychology internship programs available. Talk about stimuli.

The United States Air Force supports three revolutionary clinical psychology internships, one of which was awarded the "Outstanding Training Program Award" by AABT in 2002. Consultants have suggested that the Air Force may offer better preparation for psychology careers than more traditional routes into the profession. By taking a revolutionary approach, we are integrating clinical psychology into primary carepractice. 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, to earn a competitive salary and benefits and to have a guaranteed job after the program's completion, please call 1-800-423-USAF or log on to AIRFORCE.COM for more information.

Underrepresented Students, Postdoctorals, & Junior Faculty

Join the research team of leading behavioral and social scientists and jump start your career.

The Office of Behavioral and Social Sciences Research (OBSSR), National Institutes of Health (NIH), wants to help you build a research career in the behavioral and social sciences. We developed an interactive web site to help you find a mentor.

Interested individuals should visit the OBSSR's Training Tomorrow's Scientists web page to learn more about the program. Search for a mentor in your area of interest, and send your electronic application to the researcher with whom you would like to work. Then wait for the researcher to contact you to discuss next steps.

For more details and to participate in the program, visit: <http://mentorminotities.od.nih.gov>

NIH-Funded Researchers Seeking to Serve as Mentors

Offer your expertise and assist the Office of Behavioral and Social Sciences Research (OBSSR), National Institutes of Health (NIH), in building a cadre of underrepresented scientists in the behavioral and social sciences.

Interested individuals should visit the OBSSR's Training Tomorrow's Scientists web page to learn more about the program. Add your name to the database of Principal Investigators (PIs) who are interested in mentoring. Wait to be contacted by underrepresented students, post-docs, or junior faculty who have an interest in your research area. Then simply apply for an administrative supplement to your NIH grant by contacting your program officer.

For more details and to participate in the program, visit: <http://mentorminotities.od.nih.gov>

SBM Award Winners

Distinguished Scientist Award

Laura Hayman (L), SBM President, presents Neil Grunberg (R) with the Distinguished Scientist Award



Early Career Investigator Award

Laura Hayman (L), SBM President, presents Nicole Nollen (R) with the Early Career Investigator Award



Distinguished Clinical Mentor Award

Laura Hayman (L), SBM President, presents Robin Mermelstein (R) with the Distinguished Clinical Mentor Award



Other Award Winners

Please Note: (Not pictured due to technical difficulties or unavailable at Award Ceremony.)

Outstanding Dissertation – Christopher Shields

Distinguished Research Mentor Award – Robert Kaplan

Distinguished Service Awards – Viktor Bovbjerg, Michael Goldstein, Amanda Graham, Sara Knight, Justin Nash, C. Tracy Orleans

Distinguished Student Awards – Julie L. Elam, Michael A. Hoyt, Jason Q. Purnell, Amy B. Wachholtz

Cancer SIG – Catherine Mosher

EMMH Student Award – Jennifer Jones

SBM would like to recognize the following individuals for being elected as Fellows of the Society.

Dana Bovbjerg
Debra Haire-Joshu
Janet Meininger
Brian Oldenburg
James Raczynski

Ronald Brown
Stephen Lepore
Suzanne Miller
Bernardine Pinto
Milagros Rosal

Are you aware that your institution may not currently subscribe to the *Annals of Behavioral Medicine*?

The *Annals of Behavioral Medicine* is devoted to the publication of original empirical articles including reports of randomized controlled trials, observational studies, or other basic and clinical investigations. The journal also features integrative reviews that apply the standards of evidence-based medicine and help bridge the gap between basic science and clinical practice in behavioral medicine.

On the next page, is a list of institutions that currently subscribe to *Annals*. Please look to see if YOUR institution is on this list. If your institution is NOT on this list, or you know they don't subscribe, please, **recommend your library subscribe today** (refer them to the *Annals* website: <https://www.erlbaum.com/shop/tek9.asp?pg=products&specific=0883-6612>). Your library will appreciate having the ultimate resource in behavioral medicine, and your colleagues will enjoy highly relevant and timely articles. **The Society of Behavioral Medicine and its members will also benefit from the additional visibility and circulation of an added institutional subscriber.**

Go to the next page for a list of institutions that have a subscription to *Annals* – if yours is NOT on the list – talk to your library TODAY!

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 Helsinki, University of
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 Illinois, University of - Urbana
 Illinois, University of - Chicago
 Indiana University - Indianapolis
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 Iowa, University of
 Ithaca College
 John E. Fetzer Institute
 Johns Hopkins University
 Kaiser Permanente
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 Massachusetts School of Professional Psychology
 Massachusetts, University of - Dartmouth
 Massachusetts, University of - Worcester
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 North Texas, University of - Denton
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 Nova Southeastern University
 Oregon Research Institute
 Ottawa, University of
 Palmer College of Chiropractic - Florida
 Palmer College of Chiropractic - Iowa
 Pennington Biomedical Research Center
 Pennsylvania State University - University Park
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