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The Institute for Partnerships to Eliminate Health Disparities is pleased to share its accomplishments for 2008 in this 2nd Edition of the IPEHD Compass. We are excited about the many initiatives that have been borne from previous research and program activities and which serve as the basis for continued growth, capacity building, research infrastructure and sustainability. A key objective measure has been to increase the number of minority public health researchers throughout South Carolina to better serve the needs of our citizens both now and in the future.

In line with our mission and strategic plan, we have aggressively sought new ways to broaden our research agenda through partnerships with agencies at every level of government and service to our communities. Our collaborations have spanned the gamut of local, state, federal and private agencies to include the Department of Defense, National Minority AIDS Council, American Public Health Association (APHA); American Cancer Society; Palmetto Health Systems; Greenville Hospital Systems (GHS); S.C. Department of Health and Environmental Control (SCDHEC); S.C. Cancer Alliance (SCCA); the Historically Black Colleges and Universities (HBCUs) in the State of South Carolina; the Faith-Based Community Network as well as the 1890 Land-Grant Network and a host of other community-based organizations.

We have conducted a number of research studies and pilot projects that have yielded significant results and findings that would serve to strengthen health disparities research. Our approach for conducting research has been based on the basic principle of community engagement and community involvement at all levels of the process. The span of our research activity and partnerships reflect this commitment.

Research activity goals have exceeded our expectations from the previous year, with a research activity volume of over $17.2 million, of which approximately seventy-seven percent (77%) of funds generated (or $2.3 million) were research awards while the remaining twenty-three percent (23%) includes program or training awards. We are proud to have exceeded our projected levels of research funding for FY2008.

This past year, staffing levels have remained at the minimum level needed to meet the demand for extramural funding; however, we anticipate staff growth as current initiatives enter new phases. Our plans for sustainability include evaluation of our strategic goals, research progress and alignment with the changing landscape of public health. We will continue to target areas of resource development, increased human and financial resources, and improved infrastructure to better position us to assume the role as a “national model” for addressing health disparities.

Saundra H. Glover, PhD, MBA
Director, Institute for Partnerships to Eliminate Health Disparities
Associate Dean for Health Disparities & Social Justice
University of South Carolina
EXECUTIVE SUMMARY

Introduction

The Institute for Partnerships to Eliminate Health Disparities was established to provide the framework and financial resources to support the Arnold SPH efforts to facilitate the development of minority public health faculty committed to eliminating health disparities and to increase the number of partnerships focused on health disparities.

The primary mission of the Institute for Partnerships to Eliminate Health Disparities is to eliminate health disparities through academic, community and other strategic partnerships in South Carolina and beyond. It was created to allow the University to enhance its public and private partnerships. These partnerships provide the opportunity for the pursuit of interdisciplinary research, education, and training to address health disparities in South Carolina and the southeast region of the United States.

Sponsored Research Activity

FY2007-2008: (ending June 30, 2008)

| Total No. of Proposals Submitted (including Renewals) | 32 |
| Total No. of Proposals Pending | 15 |
| Total No. of Proposals Approved for Funding | 1 |
| Total No. of Funded Proposals | 2 |
| Total Volume of Sponsored Research Activity: | $17.2 Million |

Comparison of Awards by Purpose, 2003 – 2008

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Research</th>
<th>Training/GA</th>
<th>Totals</th>
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<tbody>
<tr>
<td>2003</td>
<td>$424,978.00 (100%)</td>
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<tr>
<td>2004</td>
<td>$628,859.00 (47%)</td>
<td>$704,980.00 (53%)</td>
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<tr>
<td>2005</td>
<td>$674,978.00 (100%)</td>
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<tr>
<td>2006</td>
<td>$624,912.00 (77%)</td>
<td>$810,152.00 (23%)</td>
<td>$3,495,064.00</td>
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Major Funding Sources, Calendar Years 2003-2008

<table>
<thead>
<tr>
<th>Sponsor/Agency</th>
<th>2003</th>
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<th>2006</th>
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<tr>
<td>W.K. Kellogg Foundation</td>
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<td>$674,978.00</td>
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<tr>
<td>University of South Carolina Research Foundation</td>
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<td>$345,100.00</td>
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<td></td>
</tr>
<tr>
<td>Office of Minority Health/HHS</td>
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<td></td>
<td>$166,859.00</td>
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<td></td>
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</tr>
<tr>
<td>Department of Defense/USAMRAA</td>
<td></td>
<td></td>
<td>$505,000.00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>National Center on Minority Health &amp; Health Disparities</td>
<td></td>
<td>$445,934.00</td>
<td></td>
<td>$903,020.00</td>
<td></td>
<td>$1,175,932.00</td>
</tr>
</tbody>
</table>

THREE-YEAR REINVESTMENT PLAN

The below overarching goals serve as the basis of the Institute’s three-year research plan to generate and reinvest resources through its research activities:

Strategic Plan (Goal 1)

- Generate new knowledge regarding health disparities (establish a research team)

Strategic Plan (Goal 4)

- Collaborate with organizations engaged in community-based participatory research activities to eliminate health disparities (develop and implement capacity-building initiatives; conduct technical assistance workshops; conduct needs assessments; and disseminate mini-grants)
- Measure the long-term behavioral and economic impact of public health research

Focus Areas for Research Sustainability

- Increased Infrastructure
- Increased Institutional Promotion / Marketing
- Increased Extramural Funding
- New Community Partnerships / Research Themes
- Increased Resources (Human and Financial)
- Expansion of Office Space / Relocation

OPERATIONAL PLAN / REPORT

Institutional Structure

The Center reports directly to the Office of the Vice President for Research under the Associate Provost and the Office of the President. The IPEHD office currently consists of 8 full-time staff; 1 part-time staff; and 7 graduate/research assistants. In addition, there are 2 program/research coordinators and 4 affiliate faculty.

Reorganization

To facilitate a more efficient workflow and effective management of research and fiscal activities, the Institute recently restructured its staff, to include a full-time Grants Administrator and reassignment of specific operational functions to key administrative staff. Staff job duties have been reviewed to ensure productivity.

Challenges/Opportunities:

- Bridging the research to the community
- Maintaining the trust/partnership relationships with rural and minority communities to increase participation in research studies
- Expand opportunities for increased research participation by HBCU faculty
- Meeting the infrastructure needs of current initiatives while developing the resources to accommodate research studies that enter new phases.

Research administration guidelines and increased demands for transparency and accountability with regards to extramural funding and other sources of research support, in addition to serving the needs of the University’s research community, requires the necessary level of resources (human and financial).

Research Report 08
2007-08
Highlights & Accomplishments

Inaugural James E. Clyburn Health Disparities Lecture Series
Abstract and Poster Session at Inaugural Event Brings Huge Turnout
180 Scientific Posters and more than 80 Published Abstracts
Mark Dignan, PhD, MPH (University of Kentucky) Delivers Keynote Address
for S.C. HIV/STD Conference through the MTA Initiative, an outcome of the
JEC Health Disparities Lecture Series

Moving-to-Action (MTA) Initiatives in HPV/Cervical Cancer
and HIV/AIDS: A Work in Progress
Special Issue to the Journal of the S.C. Medical Association
Serenity Garden Dedication to Victims & Survivors of HIV/AIDS
S.C. Cancer Alliance Cervical Subcommittee Expands Cancer Plan
“Creating a State of Hope”
Carolina Women’s Care Study (CWCS) through the Cancer Research
Center at the University of South Carolina

USC-Clalin Center of Excellence (COE) in Cancer and HIV featured on National Center on Minority Health and Health
Disparities (NCMHD) website
Invited Presentation before the NCMHD National Advisory Board Meeting, National Institutes of Health, Bethesda MD
Research Staff produced Thirty-four (34) publications submitted to over 18 Peer Reviewed Journals

Center of Economic Excellence (CoEE) in Prostate Cancer Research, in partnership with the Medical University of
South Carolina (Dr. Marvella Ford) and South Carolina State University (Dr. Judith Salley)

Each Center of Economic Excellence is awarded from $2 million to $5 million in state funds. The program supports CoEE endowed chairs, world-renowned scientists who lead the Centers of Economic Excellence

Department of Department of Defense contract for Soldier Health Promotion to Examine and Reduce Health Disparities
(SHPERHD), multi-investigative effort in partnership with Ft. Jackson Army Installation, South Carolina
Research Training Workshop with personnel from Ft. Jackson, U.S. Army Center for Health Promotion and Preventive Medicine (USACHPPM), and Department of Defense (DoD)/USAMRMC to expand research initiatives to other military installations (Ft. Sill, Ft. Benning, Fort Leonard Wood)

Participation in National Partnership for Action (NPA) Regional Conversations with Office of Minority Health
Open House for Junior/Senior Faculty in Health Disparities Research / Affiliate Faculty Program Initiative
USC-IPEHD Staff Complete Research Administrators’ Training
A joint initiative of the University of South Carolina and the Institute for Partnerships to Eliminate Health Disparities (IPEHD), the James E. Clyburn Health Disparities Lecture Series brought together researchers, public health professionals, and students in an interactive and open forum to discuss ways to address and eliminate health disparities that continue to plague communities throughout the State of South Carolina and across the Nation.

The inaugural event was held on April 25, 2008 in the Public Health Research Center of the Arnold School of Public Health. The theme of the inaugural lecture was ‘Forging Solutions through Research and Practice.’

Faculty, staff, students, members of the community and many representatives from partner institutions were invited to participate in this open forum. The health lecture series incorporates panel discussions of specific health disparities with open dialogue of strategies and recommendations to eliminate disparate outcomes. It is aimed to serve as a catalyst for increased awareness and community involvement in public health and disparities research and will showcase the academic progress of young and minority researchers in the field of public health.

The two-hour program included remarks from Claflin University President, Dr. Andrew Sorensen, Dr. Harris Pastides, the vice president for research and health sciences, and Dr. Tom Chandler, Interim Dean of the Arnold School of Public Health.

“We live today in the most affluent and technologically advanced Nation in the history of mankind...unfortunately, some things have not changed. Health disparities are more pronounced today in the U.S. than they were in 1949.”

- Dr. Harris Pastides

Miss South Carolina, Crystal Garrett (at right) provided brief remarks on her health platform and advocacy throughout the state and offered a beautiful rendition of the National Anthem. Immediately following the event, a poster and abstract session was held in the PHRC Atrium. The showcase featured ongoing research from many young minority researchers from both USC and Claflin. Partners for the lecture series included the Arnold School of Public Health, the S.C. Area Health Education Consortium, Claflin University, the Commission for Minority Affairs, Minority AIDS Council, Palmetto Health, S.C. Department of Health and Environmental Control Office of Minority Health (OMH) and Victory Tabernacle.

Dr. Saundra Glover, Dr. Andrew Sorensen and Dr. Harris Pastides on April 25, 2008

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INAUGURAL JAMES E. CLYBURN

Health Disparities LECTURE

American to ascend to the third ranking position in the U.S. House of Representatives.

"Today we honor a great American...and continue to build on our collaborative efforts to create solutions for health disparities."  

- Dr. Henry Tisdale

Miss South Carolina, Crystal Garrett (at right) provided brief remarks on her health platform and advocacy throughout the state and offered a beautiful rendition of the National Anthem. Immediately following the event, a poster and abstract session was held in the PHRC Atrium. The showcase featured ongoing research from many young minority researchers from both USC and Claflin. Partners for the lecture series included the Arnold School of Public Health, the S.C. Area Health Education Consortium, Claflin University, the Commission for Minority Affairs, Minority AIDS Council, Palmetto Health, S.C. Department of Health and Environmental Control Office of Minority Health (OMH) and Victory Tabernacle.

Dr. Saundra Glover, Dr. Andrew Sorensen and Dr. Harris Pastides on April 25, 2008

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"In the last two decades, we have made very little progress in addressing health disparities."  

Lovell Jones, PhD

A 2002 recipient of the American Cancer Society’s Humanitarian Award, Jones has published more than 100 scientific articles on various health topics as well as edited "Minorities & Cancer," one of the few comprehensive textbooks on this subject.

Dr. Jones has spearheaded regional hearings on cancer and the poor for the American Cancer Society. He has also served on the Breast Cancer Integration Panel for the Department of Defense.

Lovell Jones, PhD

---

"...the extraordinary prevalence of cancer, heart disease, diabetes and obesity...all of these are linked to negative indices...It became apparent to me that if I were to succeed in my mission to improve the health of my constituents, I would have to tackle the underlying causes."  

Congressman James E. Clyburn

Six years later, he was unanimously elected Chair of the Congressional Black Caucus and to a seat on the coveted Appropriations Committee. In 2002, he was elected in a three-way race to serve as Vice Chair of the House Democratic Caucus and, in January 2006, his peers unanimously elevated him to Chair of the Caucus. In addition to serving as House Majority Whip, Congressman Clyburn serves as leader of the House Democrats’ Faith Working Group. Congressman Clyburn is married to Mrs. Emily E. Clyburn.

Lovell Jones, PhD

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**Soldier Health Promotion: Significant Public Health and Policy Implications**

The USC Institute for Partnerships to Eliminate Health Disparities (IPEHD) has secured a $1 million-dollar contract with the U.S. Army Medical Research and Materiel Command (USAMRMC) through a Department of Defense effort to address disparate health issues at Fort Jackson, the nation’s largest training Army Base in Columbia, SC.

The study, entitled Soldier Health Promotion to Examine and Reduce Health Disparities (SHPERHD), involves a multilevel analysis of military systems in an effort to reduce the attrition rate among military recruits due to obesity/nutrition, musculoskeletal injuries and mental health issues.

Phase I of the project brings together several USC researchers with expertise in nutrition and diet intervention, physical fitness and musculoskeletal injuries, athletic training, and mental health research. Among the primary objectives are to assess the baseline data of military personnel at key stages of military recruitment through basic combat training (BCT) to better understand the transition; (2) understanding of timing & routines (frequency in meals that may impact weight, diet and physical activity patterns; and (3) how basic combat training leadership might impact soldiers becoming more physically active.

Project 2 - Injury Prevention

(3) Dr. Kelly Rediske (in the field) will examine musculoskeletal injuries and the root causes of increased stress fractures.

An approach is a surveillance project to assess what data has been collected, how to access and improve on the data to better document health disparities and develop a meaningful intervention. Utilizing data mechanisms as the Battalion Aid System, Project 2 will assess the baseline data for injury rates and examine the training regimen (load and progression), with the recommendation of Ft. Jackson personnel to focus more on physical readiness questions such as (1) expectations of physical fitness of recruits coming into the military (Army) and (2) expectations during basic combat training (BCT).

SHPERHD Coordination Center

Project Staff

Edith M. Williams, PhD, Co-Principal Investigator
Menia D. Lee, Research Administrator
Gwen Preston, MEd, Assistant Project Manager - Project 1
Crystal N. Piper, PhD, Assistant Project Manager - Project 2
Andrea Williams, MEd, Assistant Project Manager - Project 3
Sidney Bates, Budget Coordinator
Larrell Wilkinson, Doctoral Student, Project Manager - Project 3
Mary Jones, Graduate Research Assistant

Project Co-Investigators & Research Staff

Edward Fongillo, PhD, Co-Investigator
Toni Torres-McGehee, PhD, Co-Investigator
Ruth Saunders, PhD, Co-Investigator
Cheri Shapiro, PhD, Co-Investigator
Christine Blake, PhD, Co-Investigator
Angela Murphy, PhD, Co-Investigator
Martin D. Carmichael, PhD
Thomas P. Dompier, PhD, ATC
Monaal Shroff, Post-Doctoral Fellow
Rhonda Stephens, Grants Coordinator
Trudy Leas, Grants Coordinator
Krista Harmon, Grants Coordinator
Lori Easterwood, Grants Coordinator

Project 3 - Mental Health (Dr. Shawn Youngstedt) will assess a range of mental health issues.

The priorities of this component are to examine (1) the methods for screening recruits for mental health problems (such as PTSD), at point of intake; (2) stigma associated with seeking mental health services; (3) the career path and how soldiers are functioning; (4) what accounts for the small number of mental health referrals; and (5) the impact of sleep deprivation on mental health (a factor that also impacts injury). It will also examine soldier stressors; mental toughness and anxiety.

**Project Descriptions**

**Project 1 - Obesity (Dr. Sonya Jones, Co-Investigator)** will focus specifically on nutrition and diet.

This will be a 3-pronged approach that involves: (1) evaluation of the Physical Training (PT) program; (2) assessment of whether/how obesity de-motivates soldiers; and (3) drill sergeant knowledge of nutrition/obesity issues. The interests will be the “life course perspective” (impact on entry into the military environment) in order to better understand the transition; (2) understanding of timing & routines (frequency in meals that may impact weight, diet and physical activity patterns; and (3) how basic combat training leadership might impact soldiers becoming more physically active.

**Project 2 - Injury Prevention (Dr. Mark Davis)** will examine musculoskeletal injuries and the root causes of increased stress fractures.

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Center of Economic Excellence Research (CoEE)

About the CoEE Program

The S.C. Centers of Economic Excellence Program was established by the South Carolina General Assembly in 2002, funded through South Carolina Education Lottery proceeds. The legislation authorizes the state’s three public research institutions, Medical University of South Carolina, Clemson University and the University of South Carolina, to use state funds to create Centers of Economic Excellence in research areas that will advance South Carolina’s economy.

To receive award funding for a CoEE, the three research universities submit proposals that undergo a three-tier review process. Each proposal is first subjected to a technical review by field experts. After studying the technical review scores, the CoEE Review Board decides which proposals qualify for evaluation by an onsite review panel. This external review panel comprises mainly senior research officials from Association of American University institutions.

How the Program Works

Each Center of Economic Excellence is awarded from $2 million to $5 million in state funds, which must be matched on a dollar-for-dollar basis with non-state funds. The program also supports CoEE endowed chairs, world-renowned scientists who will lead the Centers of Economic Excellence.

Prostate cancer screening and early detection can mean the difference between life and death for African-American men, who are more likely to get prostate cancer and die from it than men of other races, according to the American Cancer Society.

To address this problem, the board that oversees the state’s Centers of Economic Excellence (CoEE) Program has approved $3.6 million in S.C. Education Lottery funds for a new Center of Economic Excellence in Prostate Cancer Disparities Research. The Center is three-way collaboration among the Medical University of South Carolina (MUSC), the University of South Carolina (USC) and South Carolina State University (SCSU).

The Center will be housed on the MUSC campus. Working with Dr. Marvella Ford on the project are co-directors Dr. Saundra H. Glover from USC and Dr. Judith Salley from SCSU.

“A major problem faced by prostate cancer researchers in this state is a lack of inclusion of African-Americans in the studies being conducted. Despite the fact that prostate cancer mortality rates in South Carolina are three times greater for African-Americans than for Caucasians, African-Americans are significantly underrepresented in clinical trials according to the HCC Cancer Registry. With this new Center, we will actively work to close the gap, so that all men in South Carolina are being screened and treated for prostate cancer.”

- Dr. John Raymond, MUSC Provost

“Prostate cancer research is undergoing a period of intense growth, with the aim of reducing mortality due to this disease,” MUSC Provost Dr. John Raymond explains. Renowned scientists will be recruited to fill three CoEE endowed chair positions at the Center.

By investing in talent and technology, the CoEE Program is designed to fuel the state’s knowledge-based economy, resulting in high-paying jobs and an improved standard of living in South Carolina.

MOVING-TO-ACTION Initiative

South Carolina is a state with excess cervical cancer mortality, a disease closely associated with high-risk or cancer-causing types of genital human papillomavirus (HPV) infection. Cervical cancer is a fairly rare but fatal disease.

Recent innovations in HPV/cervical cancer prevention and control, including HPV testing and vaccination, have raised the profile of HPV in cervical cancer prevention and control efforts. The audience has expanded to include pediatrists, parents, policymakers, and many others. As a result, two recent events have occurred in South Carolina.

In March 2009, a faith-based summit was held (“A Call to Action”) to develop community-based and faith-based approaches to addressing cervical cancer led by the State Baptist Young Woman’s Auxiliary of the Woman’s Baptist Education and Missionary Convention of South Carolina. Most recently, stakeholders, including researchers, public health practitioners, clinicians, community and faith-based leaders, survivors, and advocates, from across the state started an effort in June 2008 (“Moving to Action: Addressing Cervical Cancer in South Carolina”) supported by the USC Institute for Partnerships to Eliminate Health Disparities and the USC-Claflin Export Center.

The “Moving to Action” (MTA) Initiative has resulted in the formation of a Cervical Cancer Subcommittee within the South Carolina Cancer Alliance and additional public health and health care provider education objectives.

As part of this effort, a special symposium of the Journal of the South Carolina Medical Association that focuses on cervical cancer prevention and control will be published in October 2009. The issue will feature original, scientific articles, brief reports, and a special section focused on community perspectives and educational resources addressing cervical cancer prevention and control in South Carolina.

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The overall goal of the effort is to develop, implement, and evaluate strategies to address excess cervical cancer mortality from prevention, control, and policy perspectives while continuing to support discovery work in the field of cervical cancer.

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Recent innovations in HPV/cervical cancer prevention and control, including HPV testing and vaccination, have raised the profile of HPV in cervical cancer prevention and control efforts. The audience has expanded to include pediatrists, parents, policymakers, and many others. As a result, two recent events have occurred in South Carolina.

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"I just want to live better than I have been."
Larry Jamison

A 67-year old veteran of the armed forces, Mr. Jamison, a former Air Force communications and logistics specialist, entered the military during the height of civil unrest in the 1960s but fared far better while stationed in England. He spent 10 years in active duty and worked an additional 5 years at the Naval Base, testing PPS chips and other forms of global communications devices, in essence, keys to the blueprint for the Internet as we now know it. Having fulfilled his military obligation, he looked forward to life after the military, which he thought included living comfortably with his family and children. Life, as it turns out, had other plans for this veteran.

His 3-room home has just enough space for one person to live in on a plot of land that is approximately 50’ x 100’ bordered on three sides by a fence and trees. Yet, he manages to smile when he talks of how well his vegetable garden (below photo) is doing this year. He has already seen some promise in his rutabagas, sweet peas and onions. He proudly spoke of his current projects which include replacing a part for the well pump in his yard that he hopes will produce enough adequate running water, building a picnic table under one of the trees in his back yard, and planting “some collards, when the season is right”.

Suffering from diabetes and hypertension, Mr. Jamison is but one of the many Americans who have been “left behind” in poverty and poor health. Although he has experienced racial and social injustice firsthand, his only request is that someone “take care of the rest of the veterans”. He has endured the relentless and seemingly never-ending cycle of poverty, social inequality and chronic diseases, yet somehow he has managed to survive each day.

A Note from the Editor

"The greater the length of time that people live in disadvantaged circumstances, the more likely they are to suffer a range of health problems... “ [World Health Organization, 2003]

With the high prevalence of chronic diseases, poverty and lack of affordable healthcare steadily rising, this could not be more true today. To illuminate the severity of the problems and issues faced by many Americans, in particular minority and underserved populations, we are producing the first of a special series, “The Faces of Health Disparities” to provide them with a voice and conduit for the change they desperately need and deserve.

Photographs, such as the one above and others like it, line the walls of the IPEHD and serve as constant reminders of what we’re fighting for each day. Stories such as those of Mr. Larry Jamison of Orangeburg, SC are but just a glimpse into the eyes of poverty and chronic disease within our communities. They “are” the faces of health disparities.

The Institute for Partnerships to Eliminate Health Disparities is committed to dedicating all of its resources to identifying the root causes of health disparities/in- equalities and serving as a bridge to public policy to eliminate these disparate outcomes. Our current research projects address diseases of high mortality for African Americans (cancer, hypertension, obesity/cardiovascular disease, HIV/AIDS, and prostate cancer.

"The need and demand for clear scientific evidence to inform and support the health policymaking process are greater than ever... the field of social determinants of health is perhaps the most complex and challenging of all. It is concerned with key aspects of people’s living and working circumstances...”

- Agis D. Tsouros, Head of the Centre for Urban Health

We have aligned our research objectives with the four recommended goals of Healthy People 2020 which are: (1) eliminate preventable disease, disability, injury, and premature death; (2) achieve health equity, eliminate health disparities and improve health for all groups; (3) create social and physical environments that promote good health; and promote healthy development and healthy behaviors. We are committed to these aims and believe that through partnerships, resources and public health policy, we can eliminate health disparities...together.

The Soldier Health Promotion to Examine and Reduce Health Disparities (SHPERHD) Project, established by the Institute for Partnerships to Eliminate Health Disparities (IPEHD), is a joint partnership with Fort Jackson Army installation that will examine the root causes for health disparities among military recruits, Veterans (such as Mr. Jamison) and their families.
The result of these efforts focused on needs assessment, health development of a training curriculum through Planning sessions and communication led to the goals.

Richter recognized an opportunity to implement a project that would have national benefit to underserved communities through emergency preparedness and project that would have national benefit to underserved communities through emergency preparedness.

In consultation with the Executive Director of the University of South Carolina-Institute for Partnerships to Eliminate Health Disparities (IPEHD), funded by the W.K. Kellogg Foundation held its Capstone Event in July 2008.

The MATCH Project (Mobilizing Against Threats to Community Health), a collaborative effort of the University of South Carolina-Institute for Partnerships to Eliminate Health Disparities (IPEHD), Michigan State University and the American Public Health Association (APHA), funded by the W.K. Kellogg Foundation held its Capstone Event in July 2008.

Out of the Capstone Event came an overwhelming consensus from the 1890 Land-Grant Network to memorialize the partnership in a Memorandum of Agreement for Sustainability.

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The South Carolina Women’s Care Study: Defining Biomarkers Associated With Human Papillomavirus Persistence in Females Attending the University of South Carolina Women’s Care Clinic

Infection with high-risk human papillomavirus (HPV) can lead to cervical cancer while infection with low-risk HPV can result in genital warts. Although HPV infection is very common, most women clear the infection in a matter of months and only those women that have a persistent high-risk HPV infection are ultimately at risk for malignant disease. The Carolina Women’s Care Study (CWCS), explores the molecular basis for HPV persistence, with a goal to identify and define the determinants (“biomarkers”) for the identification of women at the highest risk for cervical cancer development. Female students attending the Women’s Care Clinic, Thomson Student Health Center, at the University of South Carolina are recruited for the study, which began in November 2004. Types of potential biomarkers being assessed include: immunologic, genetic, lifestyle, and gene expression profiles using microarrays. Every six months for the duration of their college experience, beginning as freshman, CWCS participants complete a questionnaire assessing demographic, sexual history, smoking habits, alcohol usage, physical activity, food frequency, stress, depression, and discrimination. During each visit, exfoliated cervical cells (Paps) are collected for cytology, HPV typing and viral load, and total RNA for gene expression profiling and HPV oncogene (E7) expression. In addition, a cervical mucus sample is collected for the assessment of protein levels of sixteen different cytokines that may be involved in HPV clearance. DNA, isolated from a single blood draw, is used to assess single nucleotide polymorphisms (SNPs) in the promoter region of several cytokine genes (GM-CSF, TNF-alpha, IL-6, and RANTES) that may be associated with the molecular basis for HPV persistence. As of November 14, 2008, 445 participants have been recruited for a total of 1,622 visits. Three or more visits have been completed by 270 participants. The ethnic distribution of the study participants is 70% European American, 23% African American, and 7% Hispanic. Of 20 different low-risk HPVs identified, HPV84 is the most prevalent (28% of all low-risk HPV). Of the 13 high-risk HPV’s found, HPV16 is the most common (35% of all high-risk HPV). We observed a trend for higher rates of high-risk HPV positivity in African American women (28%) versus European American women (23%). Importantly, we found that there was a significant difference (p<0.004) in the levels of an abnormal Pap smear (SIL) between African American women (10%) and European American women (5.9%). Persistent HPV infection, defined as 3 consecutive Pap tests positive for the same HPV type, was detected in 16 participants. HPV16 accounted for 69% of the persistent infections while the remaining 31% is made up of participants with persistent HPV31, 52, 53, 59, and 66 infections. Using a DNA oligonucleotide microarray, containing 1,050 genes of interest, and spotted in the Microarray Core Facility at USC, we have detected a gene expression signature that distinguishes between HPV16 positive and negative, cytologically normal Pap samples. The CWCS is still recruiting participants and as the study matures and additional samples are analyzed we hope to identify biomarkers that can distinguish persistent HPV infections from transient infections.

Acknowledgment: Supported by Grant # 1P20MD001770 from the National Center on Minority Health and Health Disparities (NOMHD), National Institutes of Health. The content is solely that of the authors and does not necessarily reflect those of the NIH.
Leading cause of cancer death among women, the Human Papillomavirus (HPV), is the second most common cause of cancer mortality in women. Worldwide, it is the second most common cause of cancer death among women ages 20 to 39, with 9,710 diagnoses in 2006 resulting in 3,700 deaths. In South Carolina, cervical cancer takes lives at a higher rate than the national average. Worldwide, it is the second most common cause of cancer mortality in women.

Fortunately, most women have immune responses that clear the HPV infection. Only those women who retain the virus are at risk for cancer, which may take many years to develop. The Carolina Women’s Care Study is working to determine why some women are unable to resist the virus. In year four of a five-year grant funded by the National Center on Minority Health and Health Disparities, the study has tracked 450 sexually active women at the University of South Carolina. Study results are completely confidential.

Enrolled in the study as freshmen, participants undergo two Pap smears during each of two visits per year at the Thomson Student Health Center. One test sample is used for diagnostic purposes while the other is used to identify genes that may have changed as a result of HPV infection. A questionnaire that assesses these young women according to diet, stress, sexual history, and alcohol and drug use is also administered. The students are tested by a full-time nurse practitioner who is funded by a five-year EXPORT grant.

Three positive Pap smears in succession mean those women have persistent HPV and therefore are at a higher risk for developing cervical cancer. Health habits and lifestyle choices have been found to influence transmission of the virus and the length of time it remains in the body.

Principal investigators Kim E. Creek, Ph.D., and Luca Persi-Creek, MD, both professors of pathology and microbiology at the University of South Carolina School of Medicine, lead a research team that includes Ph.D. students in the biomedical sciences. Their focus is the basic science related to sample analysis, including identification of HPV types and subtypes. The molecular patterns of genes within the cells in the Pap test samples are examined and analyzed to identify markers that can be used to predict cervical disease progression into cervical cancer.

How You Can Help: Continue Study Funding

Carolina Women’s Care Study researchers are conducting valuable research as part of the University’s Cancer Research Center and Institute for Partnerships to Eliminate Health Disparities. Through collaboration with Claflin University, the study is the first in the state to identify the prevalence of HPV at the University of South Carolina.

The annual cost of continuing the Carolina Women’s Care Study is $180,000. This covers administrative costs, laboratory materials, testing, and stipends for Ph.D. research team members, as well as the salary of a full-time nurse practitioner. Your help is needed to fund Carolina Women’s Care Study professorships and fellowships and to support costs. Naming opportunities are also available.

For information, contact:
Mai Li Muñoz Adams
Director of Development
Cancer Research Center
Office: 803-434-5487
E-mail: munoz.adams@usc.edu
http://carolinawomensstudy.com

“I want to find a better method of directed treatment so only women who cannot get rid of the virus are sent for treatment. This will prevent many women from undergoing a painful procedure that they do not need. I am glad to see that the young women in our study are not only receiving the best possible health care by having their health monitored twice a year; they are learning quite a lot about HPV and how to prevent it. Since they see the nurse practitioner twice a year, they develop a great relationship and become comfortable asking health-related questions.”
Stewart Receives LMSW Certification

“The thrill of finally using this degree in the field of Public health is awesome”. Tiffany T. Stewart, LMSW

During this fiscal year, Ms. Stewart completed her Masters degree in Social Work from the University of South Carolina (USC) and passed her licensure exam to practice Social Work in the State of South Carolina. Stewart, a graduate of the University of South Carolina with a B.A. in Spanish and Masters of Arts in Social Work has endeavored to enhance the lives of individuals of diverse communities through social justice, promoting equality and advocacy of culturally competent programs and education.

Extremely fluent in Spanish, Stewart has extensive experience working with minority populations through various agencies as a human service specialist, peer health educator, interpreter, bilingual volunteer and community advocate. Stewart currently serves as the Senior Community Liaison on the Community Outreach Core where her primary areas of focus are the development and implementation of community programs, resources and community services.

Clinton Joins CPOC

Karen Clinton has worked in the HIV Prevention field for 13 years (9 years as a volunteer) and brings a wealth of information to the Claffin/USC EXPORT Center. She is co-founder of Infinite Care, Inc., a not-for-profit organization to strengthen and support individuals and families by fostering independence and personal responsibility.

The USC-Claffin Center of Excellence in Cancer and HIV Research, a partnership of the University of South Carolina - Institute for Partnerships to Eliminate Health Disparities and Claffin University, is pleased to have Dr. Gloria S. McCutcheon, Professor Emerita (Clemson University) and Dr. Tasha Louis-Nance take the helm of the Community Partnerships Outreach Core (CPOC) as Co-Directors.

In these roles, Drs. McCutcheon and Louis-Nance will oversee the community engagement initiatives of the Core and develop new initiatives to expand the existing work of the Community Advisory Group (CAG) and the newly-formed Human Papillomavirus Task Force (HPAT), led by COE public health student researchers.

COE COMMUNITY OUTREACH CORE JOINT LEADERSHIP

The purpose of the Affiliate Faculty Program (AFP) policy is to further the Institute’s research mission through creation of productive and mutually beneficial relationships with faculty members who currently occupy full-time or part-time positions in another unit within the University and who, by virtue of their research agendas, identify with and are deemed capable of significant contributions to the Institute’s mission. The affiliate’s policy also serves as a vehicle for cooperation between the IPEHD and the departments in which affiliated faculty members have academic appointments.

Purpose of AFP

• Eligibility for seed grant programs, as funds become available
• Facilitation of collaboration between communities and agencies
• Support in preparation of extramural grant applications
• Support in administration of extramural grants and contracts
• Support with preparation of manuscripts for publication
• Participation in support of the Health Disparities Research Network (HDRN)

Benefits to AFP Members

The IPEHD Compass

Research Report 08
Kellogg Program Graduate Appointed to APHA Governing Council

Dr. Crystal Piper, a Columbia native who works for the Institute for Partnerships to Eliminate Health Disparities and the Rural Health Research Center. Additionally she is an adjunct faculty member at Benedict College. Recently, Dr. Piper received a distinct appointment to the American Public Health Association's Governing Council for the Community Health Planning & Policy Development (CHPPD) Section.

Founded in 1969, the CHPPD Section serves a wide array of health professionals in providing a means to share information and debate critical issues related to planning, and to learn how policy is shaped at the local, state and national levels. The section's mission is to encourage planning and policy development to eliminate disparities and promote healthy communities.

Piper is a graduate of the HBCU African American Student and Faculty Development Program (Kellogg Program), one of the first programs developed under the Institute for Partnerships to Eliminate Health Disparities (IPEHD).

Growing up in South Carolina, Piper observed racial disparities first hand. “I often witnessed the continuous struggle of African Americans in the areas of poverty, education, housing, social justice and health care. I made a steadfast commitment to seek a career that would benefit my family and my community. I knew a career in public health would fulfill my quest to helping this country resolve health care issues, improve the quality of care, and make a difference,” says Piper.

Student Development Partnership and Program Expansion

The Institute cannot achieve its mission without dedicated faculty and staff who are committed to community, academic, and other strategic partnerships that facilitate our research, education, training, and other outreach efforts. Staff are engaged in establishing and maintaining partnerships and linkages with key individuals, community organizations, and other colleges and universities that can benefit from partnerships with IPEHD.

Some of these efforts have lead to the development and the execution of Memorandum of Agreements with partner organizations, which enables the Institute and its partners to support each other by sharing staff and other resources. Andrea Williams plays a key role in student development, partnership, and program development. She coordinates and provides leadership needed to develop, expand, deliver, and maintain training and education activities for students and community members involved in our EXPORT Center of Excellence, which has included the Moving to Action Strategic Planning Meeting and the Summer Undergraduate Research Internship Program.

She is currently playing a major coordinating role that will lead to the publication of a special issue of the Journal of the South Carolina Medical Association. The issue will focus on cervical cancer in South Carolina and is scheduled for publication in October 2009.

IPEHD Staff Complete Research Administration Training

The IPEHD Staff Complete Research Administration Training

streamlined sponsored projects system; and to provide faculty and staff access to vital resources and contacts for further assistance.

Comprehensive certificate training program developed to meet the research administration need of USC faculty. Workshops that may be taken as part of the certificate program or as individual workshops. Each workshop is designed around a key area related to Research Administration.

Quarterly breakfasts where participants network with other research administrators to learn from each other, identify goals for their ongoing training and support. The GRANT program are also a forum to discuss current guidelines/changes in research and to keep administrators abreast of these changes and their impact on extramural funding at the local, state and federal level as well as key electronic research administration procedures through Grants.gov.

The Gamecock Research Administrator Network and Training (GRANT) program is a comprehensive training program developed to meet the research administration needs of University of South Carolina faculty and staff.

The goals of the GRANT program are to provide the university’s research community with an improved understanding of regulations, policies, and procedures; provide a fundamentally more unified and
The National Partnership for Action (NPA) to End Health Disparities

The National Partnership for Action is an initiative of the U.S. Department of Health and Human Service, Office of Minority Health in partnership with a broad, diverse array of partners. The NPA is intended to serve as a catalyst for leadership action around five core objectives:

- Increased awareness of health disparities;
- Strengthened leadership at all levels;
- Improved patient-provider communication;
- Improved cultural and linguistic competency;
- Improved coordination and utilization of research and evaluation outcomes.

The NPA will be implemented at the local, state, region and national level. The series of meetings, "conversations" are designed to:

- Identify and acknowledge the social, economic, cultural and behavioral underlying factors and contributors that cause health disparities;
- Examine the intersection of health disparities, health care access, health care programs and services;
- Identify programs that successfully serve the needs of minority populations;
- Critically examine the role of policy, and the intended and unintended consequences on minority populations;
- Determine the best ways to address critical health gaps among populations and specific diseases;
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- Determine the best ways to address critical health gaps among populations and specific diseases.

The National Partnership for Action (NPA) Regional Conversations will culminate in the 2009 Minority Health Summit.

NPA Directors:

- Dr. Saundra H. Glover, Director
  (803) 251-2297
  sglover@mailbox.sc.edu
- Andrea Williams, M.Ed.
  (803) 251-6303
  (803) 251-6327
  Washing9@mailbox.sc.edu
- Gwen Preston, M.Ed.
  (803) 251-6315
  Prestoit@mailbox.sc.edu
- Dr. Edith M. Williams
  (803) 251-2297
  (803) 251-6327
  wlee@mailbox.sc.edu
- Dr. Crystal N. Piper
  (803) 622-9700
  (803) 251-6327
  piper@mailbox.sc.edu
- Sidney E. Bates
  (803) 251-2257
  (803) 251-6327
  sebates@mailbox.sc.edu
- Marian Adams
  (803) 251-6300
  madams@mailbox.sc.edu

Gwen Preston, M.Ed.
(803) 251-6327 Fax
wlee@mailbox.sc.edu

Research (Affiliate) Faculty / Collaborative Partners

- Dr. Jan Probst, Associate Professor
  (803) 251-2257
  (803) 251-6327
  trlouis0@mailbox.sc.edu
- Dr. Gloria S. McCutcheon
  (803) 251-6327
  will425@gwm.sc.edu
- Dr. Tasha R. Louis-Nance
  (803) 251-6300
  (803) 251-6327
  trlouis0@mailbox.sc.edu
- Dr. Gregory A. Hand
  (803) 777-7745
  (803) 777-8422
  grehand@mailbox.sc.edu
- Dr. Sudha Xirasager
  Assistant Professor/Director of Master of Health Administration Professional Program, HSPM
  (803) 777-1836 Fax
  sxirasager@sc.edu
- Dr. Amy Brock-Martin, Research Assistant Professor
  Health Services Policy and Management
  (803) 251-6317
  brocka@mailbox.sc.edu
- Dr. Keith Elder, Assistant Professor
  University of Alabama at Birmingham (UAB)
  Webb 608, 1350 3rd Avenue S.
  Birmingham, AL 35224
  (205) 996-9808
  (205) 934-5980 Fax
  kelder@uab.edu
- Allen University
  Dayna A. Campbell
  Affiliate Faculty
  daynannec@aol.com

Master’s Level Graduate Assistant(s) / Fellows

- Mary Jones
  keva.murphy@anderson.sc.edu
- Adrienne Ransom
  rahnuma.hassan@usc.edu
- Justin Smith
  justin.smith@usc.edu

Doctoral Students/ Graduate Research Assistant(s)

- Larrel Wilkinson
  Minjin Hwang
  Chinele Ogbaunu
- apresenta@mailbox.sc.edu

The IPEHD Compass

Research Report 08
### INSTITUTE National Advisory Board

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<td>Public Health Analyst, Centers for Disease Control and Prevention (CDC)</td>
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<td>Director, National Center for Primary Care, Morehouse School of Medicine</td>
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<td>Associate Executive Director, Public Affairs and Advocacy, American Public Health Association (APHA)</td>
</tr>
<tr>
<td>Dr. Christine Rosheim</td>
<td>Health Education Specialist, Office of Workforce and Career Development, Centers for Disease Control (CDC)</td>
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<td>Dr. Arlene Lester</td>
<td>Regional Minority Health Director, U.S. Department of Health and Human Services</td>
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<td>Research Professor of Public Health Sciences, Morehouse College</td>
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<td>Dr. Yvonne Bronner</td>
<td>Professor and Director MPH/Dr PH Program, Public Health Program, Morgan State University</td>
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<tr>
<td>Dr. Stephen B. Thomas</td>
<td>Director, Center for Minority Health (CMH), University of Pittsburgh</td>
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<tr>
<td>Dr. Patrick Rivers</td>
<td>Program Director, Health Care Management Program, Southern Illinois University at Carbondale (SIUC)</td>
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<td>Dr. Melva Thompson Robinson</td>
<td>Associate Professor / Graduate Coordinator, University of Nevada Las-Vegas</td>
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<td>Dr. Sandra Quinn</td>
<td>Associate Dean for Student Affairs and Education, University of Pittsburgh</td>
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<td>Director, S.C. Public Health Institute, University of South Carolina</td>
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