

# The Culture of Data

# 08



## **The Inclusiveness of Evidence-Based and Best Practices**

Friday, October 17, 2008

8:00 a.m.-4:30 p.m.

Tivoli Center at Auraria,  
University of Colorado Denver  
Denver, Colorado



# Planning Committee

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Linda Stopp, MPA

Elena Terán, MA

Peter Urdiales, BA

## Special thanks for helping make this conference a success

Laurie Konsella

Jodie Albert

Kindle Fahlenkamp-Morell

# Conference Sponsors



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# Agenda

## Conference Objectives

- 1) To identify how the collection and use of health data on minority populations can impact health policy and the delivery of health services.
- 2) To identify how communities that experience health disparities can influence the research process to improve the data collection and dissemination process.
- 3) To develop relationships and partnerships between communities and researchers collecting and analyzing data.

## Conference Agenda

### **7:30-8:30 a.m.**

Exhibitor and Poster Presenter setup – *Mezzanine and Main Hall, Turnhalle*

### **7:30-8:30 a.m.**

Registration and Continental Breakfast – *Turnhalle*

### **8:30-8:40 a.m.**

Presentation of Colors by the US Public Health Service Corps Color Guard – *Turnhalle*

CDR Lee Hanley

CDR Shun-Ping Chau

LCDR Bernadette Gonzalez

LCDR Daniel N. Webster

*Lorenzo Olivas*, MPH, Office of Minority Health, Office of Public Health & Science, DHHS Region VIII

## **8:40-9:00 a.m.**

Welcome

*CAPT Zachary Taylor, MD, MS, Regional Health Administrator, Office of Public Health & Science, DHHS, Region VIII*

## **9:00-10:00 a.m.**

Keynote address: "Evidence-based practices: what does it mean, who defines and who is included"

*ADM Joxel Garcia, MD, MBA, Assistant Secretary for Health, Office of Public Health & Science, DHHS*

## **10:00-10:20 a.m.**

Networking Break (Exhibits, Posters)– *Mezzanine, Turnhalle*

## **10:20-11:20 a.m.**

Plenary: "How we use and communicate scientific evidence in patient care"

*Thomas D. MacKenzie, MD, MSPH, FACP, Denver Health*

## **11:20-12:20 p.m.**

Lunch provided – *Turnhalle Main Floor*

## **12:20-1:30 p.m.**

Breakouts (choose from 5)

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### *Track 1: Community Trust – Building Creating Maintaining*

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#### **It's All in the Translation: Challenges in Adapting Evidence-Based Programs to Culturally Diverse – Room 320A**

This presentation applies theory and evidence from medical anthropology to practical program experience from the field in order to understand the difficulties in translating materials and concepts from the evidence-based Chronic Disease Self-Management Program for a variety of non-English proficient audiences in Colorado.

*Jean Scandlyn, Sharry Erzinger* University of Colorado Denver; *Lynnzy McIntosh*, Consortium for Older Adult Wellness

Moderator: *Elena Terán*, MA

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### *Track 2: Cutting Edge Data Collection*

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#### **Native Self Actualization – Room 320B**

An oral model for worldview assessment is now in a written format for use with indigenous people. The NSA-PA assessment tool helps to establish one of four worldviews (preferences) using 8 domains (spiritual, social, training, family, food, language, attachment to culture and concept of time) that are theoretical constructs of Native Self Actualization Placement Assessment developed by Sidney Stone Brown, PsyD.

*Sidney Brown*, PsyD, Denver Indian Family Resource Center

Moderator: *Peter Urdiales*, BA

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### *Track 3: Questioning Research (finding bias, generalizability, issues with validity...)*

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#### **Denver Health Status Report – Room 320C**

In a soon-to-be-released report produced jointly by Denver Environmental Health (DEH) and Denver Public Health (DPH), evidence-based data are used to identify and address health disparities in Denver. Using a combination of Vital Statistics, Behavioral Risk Factor Surveillance System (BRFSS), Census, and Denver-specific environmental data, a comprehensive view of the health status of Denver County was created related

to Healthy People 2010 objectives and the associated leading health indicators.

*Jeffrey D. Berschling, MPH, Denver Public Health, Michele Shimomura MS, Denver Environmental Health*

Moderator: *Todd Hockenberry, MPH*

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*Track 4: Use of Mandated Evidence-Based, Promising and Best Practice Interventions*

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**HIV Prevention and the DEBIs – Room Turnhalle**

This presentation will provide information on how the community planning process and development of inclusive epidemiology profiles, and CDC-defined evidence-based interventions are used to implement effective HIV prevention programs in Latino communities.

*Maria Chaparro, MPH, US Mexico Border Health Association; T. Scott Pegues, Denver STD/HIV Prevention Training Center*

Moderator: *Charlene Barrientos Ortiz*

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*Track 5*

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**Colorado Household Survey – Room Multicultural Lounge**

The 2008 Colorado Household Survey will be fielded in fall 2008 to 10,000 households across Colorado. The survey represents a new source of data on health insurance coverage, access to health care, utilization of health services, and demographic information. This session will provide an overview of the survey objectives, development and methods, as well as an update on timetable and data availability.

*Jeff R. Bontrager, MSPH, Colorado Health Institute; KaraAnn Donovan, MSPH, Colorado Department of Health Care Policy & Financing*

Moderator: *Marjorie Bezdek, MA, RN*

**1:30-1:45 p.m.**

Break to move to next breakout Session

**1:45-3:00 p.m.**

Breakouts

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*Track 1: Community Trust – Building Creating Maintaining*

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**A Community Model of Prevention – Hepatitis B in the Chinese Community – Room 320A**

This presentation will provide insight into a community and public partnership in addressing hepatitis B in the Chinese community. We will discuss how our inclusive process to engage community leads to improved health outcomes and participation.

*Ivy Hontz, MA, Katie Friesen, MA, Lourdes Yun, MD, MSPH, Asian Pacific Development Center; Mette Riis, RN, MSW, Denver Public Health; Harry Cui, BS, Auraria Health Advocates*

Moderator: *Victoria Baker, MSPH, CNM*

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*Track 2: Cutting Edge Data Collection*

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**Collection SMARTool – Outlining the Enabling and Protective Factors that Empower Minority and Underserved Youth to Delay Sexual Debut and Other High-Risk Behaviors – Room 320B**

This presentation will present the data that relates to poverty prevention through healthy family formation, the reduction on non-marital birth rates and many health and wellness benefits of safe and stable families. We also will discuss the data outlining the essential components and strategies of increasing protective and enabling factors that empower young people to avoid high-risk behaviors.

*Anna Vanderkleed, Joneen Mackenzie, RN, WAIT Training*

Moderator: *Carol Reagan, MS*

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*Track 3: Questioning Research (finding bias, generalizability, issues with validity...)*

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**Prevalence of Severe Psychological Distress and its Association with Behavior Risk Factors, Quality of Life Indicators, and Health Outcomes, Colorado Behavioral Risk Factor Surveillance System, 2007**  
– Room 320C

In 2005, the Center for Mental Health Services (CMHS) and the Centers for Disease Control proposed adding a module to the Behavioral Risk Factor Surveillance System (BRFSS) to estimate the prevalence of serious psychological distress and to assess barriers to accessing mental health services. Through a collaborative effort, the module was implemented in 2007. Using descriptive statistics and multiple regression models, this analysis examines the relationship between the BRFSS mental illness indicators and health indicators such as demographic characteristics, health behaviors, chronic diseases, obesity, and health-related quality of life.

*Kieu Vu*, MSPH, Colorado Department of Public Health and Environment

Moderator: *Analice Hoffenberg*, MD, MSPH

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*Track 4: Use of Mandated Evidence-Based, Promising and Best Practice Interventions*

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**¡Cuidate! [Take Care of Yourself]: Integrating Culture-Based, Evidence-based HIV Prevention Programs in Denver** – Room Turnhalle

This presentation will provide in-depth information on adolescent sexual health research and disparities and discussion on science-based, culture-based effective programs which reduce adolescent sexual risk-taking behaviors among Latino youth.

*Shannon Sainer*, MSW, *Mary Martin*, MSW, Colorado Organization on Adolescent Pregnancy, Parenting, and Prevention; *Charlene Castañada*, Denver Area Youth Services (D.A.Y.S.)

Moderator: *Corrina Lucero*, MPH

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## Track 5

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### **Immunization Reminder Recall for Children on Medicaid in the Denver Metropolitan Area: Process, Challenges, and Suggestions – Room Multicultural Lounge**

This presentation will describe the stages of how an immunization reminder recall intervention study is developing into evidence-based best practices. These stages include: 1) literature review, 2) discussion with Practice Managers of private pediatric practices, 3) development and execution of an immunization reminder recall for Medicaid children in the Denver area, 4) collection, analysis, and reflection of recall process data, 5) discussion of analysis with Practice Managers, 6) parent engagement and feedback to the intervention through a focus group, and 7) development and testing of improved immunization reminder recall strategies.

*Tiffany Noelle Martin Brown, PhD, Colorado Children's Healthcare Access Program/UCD Family Medicine*

Moderator: *Claire Damken Brown, PhD*

### **3:10-4:30 p.m.**

#### **Plenary-Reaction Panel – Turnhalle**

*Lynn Gilbert, PhD, RN, PNP-C, University of Colorado Denver, College of Nursing, Research Perspective*

*Fernando Pineda-Reyes, Crea Results, Community Perspective*

*Robert Winn, MD, University of Colorado Denver, School of Medicine Practice Perspective*

*Cynthia Wang, PsyD, Colorado Psychological Association, Practice and Community Perspective*

Facilitator: *Wendy DuBow, PhD*

### **4:30-4:45 p.m.**

#### **Closing and Adjourn – Turnhalle**

*Mauricio Palacio, MSHEd, Colorado Department of Public Health and Environment*

# Poster Presentations

## **Henry, N.M. “The Kaleidoscope Project: Defining the wellness equation in the African American Community.”**

The Kaleidoscope Project is an emerging organization that has completed the first phase of its tobacco reduction project. It is a community-based organization that has recently launched programming that seeks to impact public health issues innovatively. Programming focuses on tobacco reduction in the general African-American (AA) and in the AA Gay/lesbian/bisexual/transgender (GLBT) communities. The goal of this project is to facilitate AA GLBT tobacco-users to become interested in their own healthcare, thus leading to a reduction in or cessation of the use of tobacco products. The Kaleidoscope Project has successfully applied the premise that we can mobilize communities to focus on personal and public health issues by utilizing their core interest – civic engagement – as the catalyst for change.

## **Speer, N., Montoya, G., Tomasko, J., Shaw, J., McFaul, M. & Mohatt, D. “Expanding knowledge of evidence-based practices for behavioral health.”**

This project was initiated to identify emerging or promising rural/frontier evidence-based practices (EBP) in the areas of behavioral health promotion, prevention, and treatment across the lifespan. Through a contract with SAMHSA, WICHE identified promising practices by first soliciting nominations from the Western states, and then collecting survey data from the nominated programs. The survey data addressed the nature of the program, the target population (i.e., gender, age group, nationality), number of people served each year, degree of rural participation in the program, costs of running the program and associated training, and interest in becoming an EBP. Data were also collected on the type of technical assistance programs needed to move their programs up the evidence-based ladder. The majority of the programs indicated serving a wide range of age groups, both males and females, and multiple ethnicities, with a few programs working primarily with a specialty population. This poster will describe the process for identification of promising rural practices, challenges to implementation, strategies for meeting those challenges, and lessons learned.

## **Lengyel, T.E. & Kirby, R.S. “The Prenatal Health Care Index: A new outcome measure of prenatal health care delivery.”**

Of particular utility in public health and epidemiology are indexes that summarize or capture health services delivery and health outcomes for

targeted populations. We describe the development and application of a prenatal health care index (PHCI) based on the concept of preventable hospitalization, as applied to maternity and neonatal hospitalizations, and explore its utility as a measure of prenatal outcomes for small area analysis. The component diagnoses of the PHCI were selected by a medical panel and subsequently reviewed by two additional medical panels. We generated counts of the occurrence of these listed conditions (by ICD-9 codes) annually by ZIP Code, drawn from the State of Wisconsin hospital discharge database, arriving at a rate of preventable hospitalization of pregnant women and neonates per 1,000 births by ZIP Code. Tabulations and maps for Milwaukee County ZIP Codes displaying values of the index for two five-year periods (1990-94 and 2000-04) are presented, and compared with the Kessner Index, infant mortality, and low birth weight measures. Monitored on an annual basis, the Index can help local public health agencies target high-risk neighborhoods and alert clinicians to patients who may reside in neighborhoods with higher prevalence of adverse outcomes.

**Lengyel, T.E. & Kirby, R.S. "Traversing a broken landscape: Racial disparities in prenatal health care in Wisconsin, 1995 – 2004."**

Recent public health concern with disparities across racial groups calls for sensitive, reliable measures that bring differences into focus and point toward specific responses. The Prenatal Health Care Index (PHCI) was developed to measure the effectiveness of the prenatal health care delivery system. We derive PHCI values from data published by the State of Wisconsin for 1991-95 and 2000-04 to develop rates of preventable hospitalization/1,000 births for pregnant women and neonates for five ethnic/racial groups. Statewide PHCI values show broad progress in prenatal health that is very unevenly distributed across ethnic/racial groups. African-American (AA) women and neonates, who began the decade in very poor condition relative to other groups, experienced a 52.2% ( $p < .0001$ ) overall improvement in prenatal health care outcomes, while Hispanic mothers and neonates improved by 37.5% ( $p < .0001$ ). However, outcomes for Whites and American Indians declined. All groups improved significantly in maternal hospitalizations for diabetes and drug abuse, except American Indians. Our findings suggest that continued targeting of AA women and neonates in addressing preterm birth, extreme immaturity, pyelonephritis, and diabetes will produce the greatest return on investment for clinical and public health interventions.

**Tafoya-Dominguez, B., Wieczorek, J. & Urbina, C. "Reaching underserved populations through produce distribution and health fair events: Results from a successful Metro Denver pilot collaboration."**

Building on successful produce distribution and health fair events in the summer of 2007, a collaboration of Metro Denver Counties formed to expand access to produce and health education among underserved populations during the summer of 2008. Goals of the project included: 1) increased collaboration among Food Bank of the Rockies, local food banks, community organizations, churches, local health agencies, Operation Frontlines, Cooperative Extension, counties and other partners; 2) increased access to produce among underserved Metro Denver populations; and 3) increased knowledge about nutrition, access to local nutrition education and health opportunities among underserved Metro Denver residents. Data collected and evaluated included population demographics; use of food, health care and social service assistance in the past year; marketing of events; participant consumption of produce; participant likelihood of using recipes associated with the produce, participant visits to health fair exhibitors, and overall impressions of the events. Our pilot model and method of evaluation can serve as a model for expanding produce access and health education services in a variety of communities.

**Fisher, T. & Cichocki, A. "Reducing diabetes risks among military and civilians using evidence-based programming in a 12-week group intervention program."**

The Air Force community is not immune to the prevalence of diabetes and obesity. Therefore, an evidence-based intervention for active duty personnel, active duty family members and civilians for weight management/diabetes prevention was implemented in our Health & Wellness Center. The Group Lifestyle Balance Program, a free 12-week program, included behavior modification in the areas of nutrition, physical activity and thought patterns. We had significant weight loss and BMI reduction and addressed cardiovascular risk factors. We had diversity in our population with gender, SES, culture and race revealing that culture and race play a key role with eating as a part of their social culture. We will share how our program has been marketed, conducted and evaluated. We will also share our successes and challenges and some participant success stories.

**Kellaway, J. & Bemowski, H. "From the Ivory Tower to the real world: Assessing racial micro-aggressions in a community mental health setting."**

This poster will describe the efforts of a Medicaid behavioral health organization and three mental health centers to measure racial micro-aggressions (MGs) in a community mental health setting. MGs refer to subtle and commonplace interactions that are prejudicial or discriminatory in nature. We review the step-by-step process used to convert the original questionnaire designed for college-aged individuals into a survey to accommodate individuals who use mental health centers. A total of 214 individuals from three mental health centers completed the questionnaire. The results did support a handful of MGs (e.g., age). The results were then shared with a consumer group for feedback: they expressed more interest in exploring the "culture of mental illness." Strategies that can be used to assess racial MGs in community mental health settings and the limitations of the current study will be presented.

**Montoya, G. "Barriers that prevent undocumented women of Hispanic origin from escaping domestic violence at the U.S.-Mexico border."**

While immigrant women have not been found to experience higher rates of domestic violence compared to other women, they are at higher risk of abuse due to their immigration status. In addition, issues of confidentiality, coupled with fear of deportation and fear of losing the parental rights of any US-born children, make investigation of the violence experienced by undocumented women difficult. In this poster, data from five local non-profit organizations assisting undocumented immigrants with their immigration status in El Paso, Texas, will be reviewed. Summary analysis and statistical techniques were used to analyze the data included in 51 cases of women who filed for residency between 1994 and 2006 through the Violence Against Women's Act.

**Escobar, L., Valverde, P., Raich, P. & Whitely, E. "The recruitment of non-English speaking patients into an intervention program: The Denver PNRP experience."**

The poster will review the challenges faced and the strategies developed to enroll non-English speaking patients into a randomized intervention trial. The poster will show the steps taken in the study to use the interpreter line, in-person interpreters and family members to explain the need for involvement in the patient navigation trial. Lessons learned

will be presented and recommendations for other research programs provided.

**Shimomura, M. & Berschling, J. “Denver Health Status Report 2008.”**

This poster highlights information from the soon-to-be released 2008 Denver Health Status Report. Using strictly evidence-based data, the poster examines the health and health behaviors of Denver county residents. The purpose of the report is to examine the current health of the City and County of Denver using Healthy People 2010’s Leading Health Indicators (LHI). While providing a foundation for evaluating Denver’s overall progress towards selected Healthy People 2010 objectives, the aggregated data and temporal views also provide insight into important race/ethnic, gender, and income health disparities. Prior to the completion of this report, multi-year, aggregated health data have not been readily accessible for the City and County of Denver.

# Speakers

**Jeff Berschling**, MPH, is a Project Manager for Denver Health. He has over fifteen years of experience managing healthcare information and has overseen a wide range of information technology projects in the public health sector. Prior to joining Denver Health, Jeff spent 10 years with the Georgia Division of Public Health as the Information Technology Liaison. In that capacity, he provided strategic direction and oversaw information technology activity for the state. Mr. Berschling is the creator of the State Electronic Notifiable Disease Surveillance System (SENDSS) - a web-based disease management system currently used by the State of Georgia.

**Jeff Bontrager**, MSPH, is a Senior Research Analyst at the Colorado Health Institute (CHI). Jeff's work at CHI has focused on health care coverage, Colorado's uninsured populations and program eligibility modeling. He is a member of CHI's Colorado Household Survey development team and serves as coordinator of the Safety Net Indicators and Monitoring System. A native of Colorado, Jeff earned a master of science in public health degree from the University of Colorado Health Sciences Center in 2004 and a BA in Psychology from Goshen College (Goshen, IN) in 1998.

**Sidney Brown**, PsyD, is a behavioral health program provider developing services for Native American family counseling. She opened the first chemical dependency program for women and children in 1980 and has won a national recognition award for her work. She is a Licensed Professional Counselor with a National Board Certification as a Master Addiction Counselor and returned to school at 55 to complete a second masters and her doctorate in clinical psychology. Sidney is working as a child and family therapist funded by The Colorado Trust Health Disparities grant at the Denver Indian Family Resource Center in a Behavioral Health model for families eligible for the Indian Child Welfare Act protection during reunification and family preservation proceeding. She has been trained by the National Indian Child Trauma Center of the University of Oklahoma and contributed to their adaptations of evidenced-based practices for Parent Child Interaction Therapy and Child Trauma Treatment. Sidney is married, the mother of three adult daughters and four grandchildren. She is Blackfeet from Montana, and husband Mel Paiute of California, is retired and they now reside in Lakewood. Her post doctoral studies are preparing a Native American Evidence-Based Practice.

**Charlene 'Angel' Castaneda**, is a wife and mother of two children. Angel was born and raised in Denver and has lived in the metro area where she continues to work in the community at Denver Area Youth Services as a Certified Addictions Counselor II and prevention specialist. She has been involved in her community since high school and was awarded Mi

Casa Women's Center Community service award in 1988 and Hispanic Educational Institute Dynamic Hispanic Role Model Award in 1990. Angel graduated from Denver West High school with leadership honors. She continues volunteering and is committed to her community to provide awareness and education. Angel is an advocate and a role model. She continues to work on issues that affect our Latino community such as domestic violence, HIV, substance abuse, teen pregnancy, promoting healthy drug-free babies, and strengthening families in the community. Angel believes that the power of education and prevention can make a difference in the lives of Latino youth and families.

**Maria Chaparro**, MPH, is the ENLACES Project Coordinator at the US-Mexico Border Health Association. ENLACES is a CDC project funded to build capacity and strengthen effective and meaningful participation in the HIV Prevention Community Planning process. The ENLACES project has proven effective in increasing the participation and leadership of Latinos in CPGs (community planning groups). Maria has been involved in HIV Prevention Community Planning since its inception in 1993, and served as the Region III Co-chair and State Community Co-Chair for New Mexico from 1993 to 1999. Born and raised in Las Cruces, New Mexico, Maria began her career in AIDS Prevention in 1993 with Families & Youth, Inc. (FYI) as the Hispanic/Latino Outreach Specialist for South Central New Mexico. She specialized in working with communities along the US (New Mexico/West Texas/Chihuahua) – Mexico Border. Through a Hispanic Fellowship offered by the Joseph M. Mailman School of Public Health, Maria earned a Masters in Public Health from Columbia University in New York and received the John and Kathleen Gorman Public Health Humanitarian Award for her AIDS Prevention efforts along the US-Mexico Border. She has been with the USMBHA since January 2001 and is happily married, a new mom to a beautiful baby boy and living in her dream home near La Union, New Mexico.

**Harry Cui**, BS, graduated from the University of Colorado Denver with a bachelor in biology in 2007. Currently, he's attending University of Colorado Health and Sciences as a second-year medical student. He has extensive experience in community health, including being a committee member and event organizer with Auraria Health Advocates, a public health promotion organization on the Auraria campus downtown. Harry has been involved with APDC since early 2008.

**KaraAnn M. Donovan**, MSPH, is the Survey Director for the Colorado Department of Health Care Policy and Financing. Ms. Donovan has over 17 years of research and evaluation experience for the Colorado Department

of Public Health and Environment and the Schizophrenia Research Center in Denver. Her program evaluation focus has been Children with Special Health Care Needs, childhood developmental screening and adolescent health. Her research focus includes: HIV seroconversion, Chlamydia surveillance and electrophysiological deficits in adults with schizophrenia.

In addition to evaluation and research, KaraAnn directed the development of provider standards for “Medical Home,” a health care quality improvement model for the pediatric health care system legislated by Governor Ritter in 2007. KaraAnn earned her master’s of science in public health from the University of Colorado Health Sciences Center and her BA in psychology from the University of North Texas. Currently, KaraAnn is pursuing her PhD in health services research from the University of Colorado Denver.

**Sharry Erzinger** has provided evaluation services to community-based programs for 20 years. She has a longstanding interest in cross-cultural applications to public health interventions. Presently, as faculty of the University of Colorado Denver’s Department of Health and Behavioral Sciences, she divides her time between teaching public health courses and research/evaluation of community-based interventions.

**Katie Friesen**, MA, Program Coordinator of the hepatitis B Equality in Health Initiative, has been with APDC since August 2007. Katie received her MA in international human rights from the University of Denver and comes to the project with an interest in refugee and immigration issues, public health, and family advocacy.

**Joxel Garcia**, MD, MBA, was confirmed by the U.S. Senate on March 14, 2008, to be Assistant Secretary for Health (ASH), U.S. Department of Health and Human Services, and an Admiral in the U.S. Public Health Service Commissioned Corps. As the ASH, Admiral Garcia serves as the Secretary’s primary advisor on matters involving the nation’s public health and science. He also oversees the U.S. Public Health Service and its Commissioned Corps for the Secretary. As Assistant Secretary for Health, Admiral Garcia’s responsibilities include disease prevention, health promotion, public health preparedness, women’s and minority health, the elimination of health disparities, fight against HIV/AIDS, pandemic influenza planning and vaccine preventable disease.

Prior to becoming the ASH, Dr. Garcia served as the Senior Vice President and Senior Medical Advisor for MAXIMUS Federal Services Inc. He oversaw the work of the MAXIMUS Center for Global Health and was the principal architect of the strategic partnership plan for the Western Hemisphere.

Prior to that, Dr. Garcia was Deputy Director of the Pan American Health Organization (PAHO)/Regional Office Western Hemisphere for the World Health Organization. As Deputy Director, Dr. Garcia was responsible for setting the general direction and strategy of the organization alongside the director and for providing leadership and advice on all policy decisions.

Dr. Garcia is a native of Hatillo, Puerto Rico, and a resident of Connecticut. He served as Commissioner of the Connecticut Department of Public Health from 1999-2003

Dr. Garcia is a trained obstetrician and gynecologist. He completed his pre-medical studies at the University of Puerto Rico (UPR), Mayaguez campus. He holds a medical degree from the Ponce School of Medicine in Ponce, Puerto Rico, and master of business administration degree from the University of Hartford.

Dr. Garcia sees his role as Assistant Secretary for Health as an opportunity to enhance the Secretary's efforts to further the mission of HHS and the health of the nation by building, strengthening, and leveraging relationships across the public health community and the US Public Health Service while also improving healthcare for all Americans.

**Lynn Gilbert**, PhD, RN, PNP-C, an Associate Professor at the University of Colorado at Denver College of Nursing, teaches in its nationally ranked pediatric nurse practitioner program and practices and precepts in the college's faculty practice sites. Her research interests include cardiovascular risks in children and lifelong health implications, cross-cultural and international child health. Before coming to the Health Sciences Center in 1994, she worked and taught in Africa, then developed a pediatric primary care component for a community health service for medically indigent families in Colorado. She is active on the steering committee for the National Association of Pediatric Nurse Practitioners child overweight initiative (Healthy Eating and Activity Together) and as a child advocate at the local, state, and international levels.

**Joneen Mackenzie**, RN, graduated from the University of Texas School of Nursing and is a former 1st Lt. In the USAF Nurse Corp. Joneen is the primary author of the national and internationally used WAIT Training Curriculum and is the president/founder of the WAIT Training Organization located in Denver. Joneen is also a popular national speaker and trainer. Joneen currently manages 5 major government grants totaling 10 million dollars from The Administration for Children and Families, HHS, TANF and CDC-DASH. She is a consultant for the Healthy Marriage

and Responsible Fatherhood Projects and positive youth development programs that include abstinence skill building and relationship education. She is on several national boards for organizations that promote adolescent health and wellness. She is married, has 4 grown children and lives in Englewood.

**Thomas D. MacKenzie**, MD, MSPH, FACP, joined the medical staff of Denver Health in 1993. He has been the Director for Internal Medicine at Denver Health since 2004 and the Director of Ambulatory Quality Improvement since 2007. He is also an Associate Professor of Medicine at the University of Colorado Denver School Of Medicine. He received a BA at Colorado College and his MD from Washington University School of Medicine in St. Louis. He did his Internal Medicine residency and chief residency at the University of Colorado. In 1997, he completed a Preventive Medicine residency and earned a MSPH degree at the CU Health Sciences Center. He currently sits on the NIH guideline panel for hypertension (JNC 8) as well as the NIH guideline implementation work group. His research interests include: a) development of patient care registries, b) interactive computer education, c) application of evidence to clinical guidelines, and d) evaluation of various types of risk communication on medical decision making. His research is currently supported by grants from the Agency for Health Care Research and Quality, NIH, and the Colorado Department of Public Health and Environment.

**Mary Martin**, MSW, is the Community Programs Coordinator at COAPPP. She has been working in community organizing for several years and currently works with communities across Colorado to implement HIV and teen pregnancy prevention programs.

**Tiffany Martin Brown**, PhD, earned her doctorate in sociology from the University of California, San Francisco. She also is the Director of Continuous Quality Improvement - Colorado Children's Healthcare Access Program (CCHAP) and is a Senior Instructor at the University of Colorado Denver, Department of Family Medicine.

**Lynnzy McIntosh** works with the Consortium for Older Adult Wellness as the Healthy Aging Service System Manager. COAW is a non-profit organization providing technical assistance, training, and access to evidence-based programs serving seniors throughout Colorado. She has a degree in Industrial Communications with a marketing minor from Metropolitan State College. Lynnzy has worked with senior and care giving issues as the executive director of a small volunteer based non-profit. Her volunteer pursuits include technical support for TeamCaring.org, a web-based

program of the Life Quality Institute, and as a member of the board of directors for the Woodman Respite Care Fund.

**Lorenzo Olivas**, MPH, is the Minority Health Consultant for Region VIII, Office of Minority Health, US Public Health Service, Department of Health & Human Services. As the Minority Health Consultant, Lorenzo is playing an active role in the HHS initiative to eliminate health disparities by working closely with federal, state, and local entities to ensure the needs of disadvantaged groups are addressed.

**R. Mauricio Palacio**, MSHEd, has been the director of the Office of Health Disparities since July 2005 and with the Colorado Department of Public Health and Environment for more than 16 years. He has a master's degree in health education and a bachelor's degree in health care management from Southern Illinois University. His experience in minority health projects, task forces and initiatives throughout his public health career includes work in HIV/STD field investigations, HIV/STD education and training, AIDS-Ryan White Care Act administration and viral hepatitis prevention. Mauricio served as Colorado's hepatitis C coordinator for four years prior to assuming his current position as director of the Office of Health Disparities. His most recent work focuses on eliminating health disparities in Colorado by fostering systems change and capacity building through collaborations with agencies and sectors impacting the determinants of health.

In 2004, Mauricio completed the advanced leadership training from the Regional Institute for Health and Environmental Leadership. He is a founding member of The Academy for Health Equity.

**T. Scott Pegues** is the Training Coordinator for the Denver PTC Behavioral Intervention Training Program. He is responsible for coordinating curriculum and faculty development, the delivery of courses, and staff supervision. He is the key coordinator with external project partners to assure appropriate region-wide coverage of courses, and collaborates in ongoing need assessment activities. He also provides support to the Denver Metro Health STD clinic as an on-call clinician. Scott has a special interest in the social and cultural impact of HIV disease, and its influence on the identities of young men. He is recognized as a leader in the national gay men's health movement, and dedicates himself to the development of a new generation of community leaders. Scott comes to the Denver PTC with over a decade of interdisciplinary experience in community mobilization, strategic planning, adult education, and group facilitation.

**Fernando Pineda-Reyes** has lived in Denver for almost 10 years. Originally from Mexico, Fernando has been working with several non-profit organizations and agencies to facilitate programs on community organizing, asset building and community development to address education, awareness and research of public health issues including environmental justice and health disparities. He currently is working on a program in collaboration with the American Lung Association on second-hand smoke, and smoking cessation from a grant from the Colorado Department of Public Health and Environment and with the Colorado Prevention Center on a Senior Latinos and Diabetes research program with funding from the Colorado Health Foundation. He has participated in federally funded programs such as the Collaborative Problem Solving (CPS) project and Community Action for Renewable Environment (CARE), RWJF and Kellogg Foundation and a HUD research study on Immigrant housing (COMIRB based). He has worked with state agencies and foundation programs, all of which included working directly with the community including but not limited to the monolingual Spanish- and English-speaking community and low-income families and children. He is the CEO of CREA Results. He has a degree in clinical biochemistry and pharmaceutical chemistry. Fernando is the proud father of Gabriela and Sebastian and is married to Tracy. Fernando loves playing soccer and doing things outdoors.

**Mette Riis**, RN, MSW, has worked with Denver Health since 2003 and is the Nursing Program Manager of the Denver Health Immunization and Travel Clinic. She obtained her bachelor's of science in nursing from Loretto Heights College in Denver and her master's of social work at the University of Denver. She has more than 30 years of experience in medical and psychiatric nursing, managed health care, epidemiology, disease surveillance and vaccine preventable disease prevention.

**Shannon Sainer**, MSW, is the Director of Evaluation and Community Programs for the Colorado Organization (COAPPP) and has dedicated her career to adolescent reproductive and sexual health issues. For the last several years, she has been leading projects and assisting local communities in the use of effective, science-based teen pregnancy prevention and HIV/STD programs and evaluation. Prior to that, she was an HIV/AIDS educator in Central America and Colorado.

**Jean N. Scandlyn** is a medical anthropologist who teaches in the Department of Anthropology and the Health and Behavioral Sciences program at the University of Colorado Denver. In addition to research on disadvantaged adolescents and young adults in the U.S. and South America, she

serves as a consultant providing program evaluation to local non-profit agencies. As program director of Culture Link, she directed training programs in cultural awareness and cross-cultural communication under contract to the Department of Social Services in New York.

**Michele Shimomura**, MS, is a GIS developer with the Department of Environmental Health in the City and County of Denver. She has a background in Information Technology and has an interest in the geography of health as it relates to population health and the environment. Michele has a master's degree in Information Systems from Colorado State University and is active in Denver's urban youth community as a coach and mentor for Girls On The Run and Volunteers Outdoor Colorado.

**Zachary Taylor**, MD, MS, is the Regional Health Administrator in Region VIII, Office of Public Health and Science, Department of Health and Human Services. Dr. Taylor is a captain in the United States Public Health Service and during his 22 years of service has served with the Indian Health Service, the Agency for Healthcare Quality and Research, the Agency for Toxic Substances and Disease Registry, and the Centers for Disease Control and Prevention. Dr. Taylor is a graduate of the Medical College of Georgia and received post-graduate training at the University of Kentucky and the University of Maryland. Dr. Taylor is board certified in Preventive Medicine.

**Anna Vanderkleed** graduated with a degree in psychology. She is the principal investigator on the Centers for Disease Control-Division of Adolescent and School Health Cooperative Agreement for HIV / AIDS Risk Avoidance. She has researched and developed a planning tool for local and state education agencies as well as health departments all over the country outlining the data about increasing the enabling and protective factors that empower a student to avoid high risk behaviors. She also is in charge of training and professional development of educators and health professionals as well as youth serving agency personnel for the CDC grant. Anna spends much of her free time mentoring teen girls and serving her community.

**Kieu Vu**, MSPH, has been a statistical analyst at the Colorado Department of Public Health and Environment (CDPHE) since March of 2004. She is currently with the Health Statistics Section as the BRFSS coordinator for Colorado. Previously, she worked as an analyst in the Colorado Central Cancer Registry at CDPHE and as a Professional Research Assistant at the University of Colorado Health Sciences Center (UCHSC) in the Divisions of

General Internal Medicine and Preventive Medicine and Biometrics. Kieu also earned her master's of science in public health from UCHSC.

**Cindy Wang, PsyD**, is a Licensed Clinical Psychologist who has been practicing in the Denver Metro area for over seven years. She earned her doctorate in clinical psychology at the University of Denver. She is the owner and founder of Spark Inspiration through which she provides counseling, training and consulting services. Additionally, Dr. Wang is a clinical faculty member at the University of Colorado Denver in the Counseling Psychology and Counselor Education Program in the School of Education and Human Development. Currently, Dr. Wang serves in the position of president-elect for the Colorado Psychological Association (CPA). She also founded the Society for the Advancement of Multiculturalism and Diversity (SAMd), a division of the CPA.

**Robert Winn, MD**, is Associate Professor at the University of Colorado Denver School of Medicine, where he researches the biomolecular basis of pulmonary cancer. As a specialist in pulmonary and critical care, he practices at the Veteran Affairs Medical Center in Denver, both in ambulatory care and the intensive care unit. As a researcher and a clinician, he both refers to evidence-based practice guidelines and helps develop them. In addition, he has won leadership and teaching awards for his frequent service to increase the diversity and cultural competence of both new physicians and the physician scholars who guide them.

**Lourdes Yunn, MD, MSPH**, has over 10 years experience in research. She worked for many years at the Denver Health Department, conducting research in AIDS and TB. She has contributed to the Asian Pacific Development Center (APDC) for 7 years in many capacities and is currently an advisory board member for the tobacco elimination project, the hepatitis B screening project, and the integrated care clinic project. Dr. Yun has maintained a strong academic interest and is a Senior Clinical Instructor at the University of Colorado Denver, Department of Preventive Medicine and Biometrics.

# **Exhibitors**

**Arthritis Foundation, Rocky Mountain Chapter**

**Center for Research Strategies**

**Colorado Department of Public Health and Environment**

Office of Health Disparities

**Colorado Health Institute**

**Colorado Society of Public Health Educators/COSOPHE**

**The Commissioned Corps of the United States  
Public Health Service**

**Department of Health and Human Services, Region VIII**

Office of Public Health & Science

Office of Minority Health

Office on Women's Health

Office for Civil Rights

**HeartSmartKids, LLC**

**QUERI, Inc**

**The REFT Institute**

**University of Colorado Denver**

College of Nursing

JFK Partners/UCEDD

School of Public Affairs

School of Public Health

**The University of Colorado Program and Center  
on Domestic Violence**





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