**EXCELLENCE IN WOMEN'S HEALTH** 

# Models Mation

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December 2002

# CoEs Offer Right Approach to Women's Health

New Study Reports Patients Receive More Services and Higher Satisfaction

omen served in National Centers of Excellence in Women's Health (CoE) generally receive more clinical preventive services than women served elsewhere, and experience higher levels of satisfaction with the care received, according to a new evaluation survey supported by the U.S. Department of Health and Human Services' (DHHS) Office on Women's Health (OWH). The findings also cited the length of the CoE-patient relationship as an important association with higher quality of care received, and report that the CoE designation helps legitimize and expand the scope of women's health at the CoE institutions.

"These important findings confirm what we have intuitively known for a long time, that creating specialized health centers to serve women helps improve the quality of care and, in this case, allows each CoE to lead the way in developing standards for providing comprehensive health care services for women in the community," says Dr. Wanda K. Jones, Deputy Assistant Secretary for Health (Women's Health).

The results are from a two-year evaluation of the 15 CoEs which were in operation at the time of the study. The evaluation began in FY 2000 and concluded at the end of FY 2002. The Office on Women's Health formed two evaluation working subgroups to conduct a qualitative and a quantitative study to assess whether modern center-based models for women's health care, as exemplified by the CoE program, offer particular advantages over the conventional services available.



The qualitative study was conducted through a series of interviews with 91 individuals at 15 institutions housing CoEs. On average, six interviews were conducted at each of the 15 CoEs. Interviews were conducted with a senior administrator, (e.g., a chancellor, vice-president, or dean), the CoE Center Director, and the directors of the core components of the CoE. The evaluation team explored organizational issues including:

- 1) Whether the core components—research, clinical care, professional education, leadership, and community outreach—developed an interface and coordinated with one another as intended according to the national model.
- 2) The type of impact that the CoE designation had on the recipient institutions.
- 3) The greatest strengths and challenges that the CoEs and their core components embodied.

The quantitative evaluation focused on the clinical care component of the CoE model and sought to:

"The CoE produced a sea change. It's led to radical change in terms of how we do everything having to do with women's health care."
—study respondent

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- 1) Evaluate the CoE program using a common set of indicators of the quality of care previously developed by experts of women's health care issues.
- 2) Provide baseline data for future cross-sectional surveys so that change in the quality of care indicators could be assessed.

Two approaches were used to compare the quality of care in the CoE with care generally available in the community. In the first approach, a patient survey was conducted among a random sample of 3,111 women who used the clinical preventive services at the 15 CoEs. Women 18 years of age and older who had made at least one primary care visit at the CoE within the prior year were eligible for the survey. This sample was compared to benchmarks obtained from a nationally representative sample of 2,000 women from the 1998 Commonwealth Fund Survey of Women's Health (CWF), and a sample of 71,000 women from the 1999 Consumer Assessment of Health Plans Survey (CAHPS). In addition, a local community sample was conducted of 611 women, aged 18 years and older, living in geographic catchment areas of three CoEs. This local community survey was conducted concurrently with the CoE patient survey.

In the second approach, analyses were conducted among women served in the CoEs to assess whether the strength of their primary care relationship with the CoEs was related to receipt of preventive services and satisfaction with care.

Overall, the survey focused on five sections:

- 1) Health care utilization at the CoE and elsewhere
- 2) Receipt of preventive services and counseling
- 3) Satisfaction with health care at the last visit and overall during the past year
- 4) Health status
- 5) Demographics

"Despite all of the focus that we had on women's health, there was a strong focus in everybody's mind on reproductive health. The notion of multidisciplinary care of women that includes internists, surgeons, and all kinds of other people having a focus on women's health was validated."

—study respondent

The evaluation team selected the Commonwealth Fund Survey because it provides a nationally representative sample and a large number of indicators related to women's health care quality. The CAPHS data provided unique comparative information on satisfaction with care.

## **Evaluation Findings**

Qualitative Evaluation

The qualitative assessment indicated that the national designation as a CoE did have a considerable impact on the recipient institutions in widening the scope of women's health. The evaluation found that the CoE model gained credibility as a concept within the recipient institutions and as a way of organizing research, practice, teaching, and leadership development within university-based academic health centers. Consequently, the centers developed a core set of strengths that included developing and reinforcing multidisciplinary practices across and beyond the CoE core components, enhancing collaboration among researchers and practitioners, and leveraging additional resources. The networking across the components was one important influence that the national model had on CoE operations. The evaluation team reports that these accomplishments are significant considering that the CoE program began recently in 1996, and highlights the following specific issues:

- Funding for the centers was modest
- Many of the CoEs' accomplishments rested on the dedication to purpose shared by those involved at all levels
- Support by institutional leaders was an important factor in the degree to which the CoE model was embraced within the institution
- The level of support from those involved within the core components was equally important, and often meant that core directors had to dedicate time and effort beyond the usual practice
- The collaborations that national designation stimulated also can be attributed to the level of effort that those affiliated with the CoEs devoted to their operations

Evaluators report that notwithstanding the considerable accomplishments of the CoEs in the relatively short period since the program began, many challenges remain, and report that concerns about funding were raised universally. The funding structures in most academic health centers dictate that

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the CoEs must compete for funding if they are to remain viable and develop further. Moreover, support from senior leadership at the institutions that house CoEs remains an important ingredient in assuring that the CoE model is sustained. Evidence presented by the study suggests that the benefits of the national designation and model are remarkable, but susceptible to failure if not adequately supported in the future.

Moreover, evaluators say that the focus on such organizational processes is important considering that the CoE model is innovative in most academic health centers, and an appraisal of the experiences of the 15 CoEs may help guide future innovations in women's health.

## Quantitative Evaluation

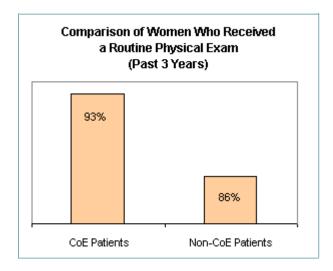
A primary goal of the CoEs, which are located in leading academic institutions throughout the United States and Puerto Rico, is to offer comprehensive primary care services in a women-friendly setting to narrow the gap of the traditional separation of health care services offered to women. The results of the quantitative study report that this type of approach does make a difference.

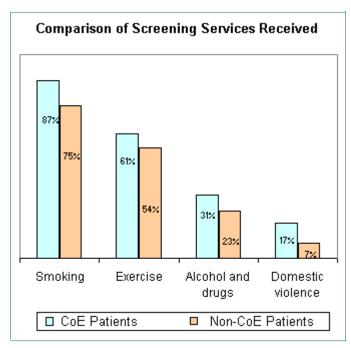
A higher proportion of CoE patients were highly satisfied with their health care in comparison to the CAHPS sample, 81 percent vs. 73 percent. A similar finding was also obtained in the CoE sample of three communities, which showed that 86 percent vs. 79 percent of respondents were highly satisfied with their health care.

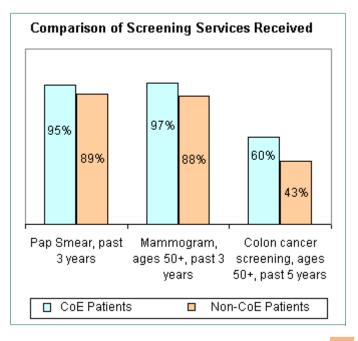
Women who use the CoE as their only regular place of care were significantly more satisfied than women who used CoE services in tandem with another place of care, or who did not have a regular place of care. Length of time that the respondent was a patient of a CoE was associated with odds of having fewer unmet needs, receiving more counseling services, and higher levels of satisfaction. Women in the CoE sample were more likely to report receiving counseling for smoking cessation, exercise, alcohol or drug abuse, domestic violence, and sexually transmitted diseases.

A statistically higher proportion of women in the CoE sample reported receiving *all* of the following screening tests compared to women in the CWF sample:

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## Three CoEs Receive Grant to Foster Careers in Women's Health

n an innovative effort to foster the expansion of women's health research across a variety of disciplines, the National Institutes of Health (NIH) announced it will award approximately \$6 million to 12 institutions nationwide to support the development of new research and the training of junior faculty researchers in women's health. The program, Building Interdisciplinary Research Careers in Women's Health (BIRCWH), which began initially in the fall of 2000, seeks to increase the number of researchers working on women's health issues by pairing junior researchers with senior investigators working in mentored, interdisciplinary scientific settings. The Office of Research on Women's Health (ORWH) at NIH leads the BIRCWH initiative, which is administered by the National Institute of Child Health and Human Development (NICHD).

Three CoEs are among the recipients of this highly competitive grant:

Boston University Magee-Womens Health Corporation Tulane University

Junior faculty members, without prior research grant support, may apply to the grantee institutions to become Interdisciplinary Women's Health Research scholars. Those selected have the opportunity to expand their research skills by being mentored in a research setting for a period of two to five years. The scholars learn not only research techniques, but also the skills to become independent investigators. The mentors at each site are established investigators, who have a commitment to fostering interdisciplinary approaches in women's health research.

## **Evaluation Findings**

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- Routine physical exam
- Pap smear test
- Physical breast exam
- Mammogram, ages 50+
- Cholesterol test
- Colon cancer screening, ages 50+

The differences observed for many of the preventive care screenings and counseling services range from approximately six to 12 percent over the proportions found in the CWF. For some services such as alcohol or drug abuse, domestic violence, and sexually transmitted diseases, the services provided in the CoEs represent more than a 30 percent increase in the proportion observed in the CWF. In comparison with local community controls in the three CoEs, women reported higher satisfaction with all care received and with the comprehensiveness and coordination of care, a key component of the CoE approach.

"This study provides the most systematic evidence available to date, and its promising results suggest that a specific type of women's health center, such as the CoEs, may provide a higher standard of preventive care for adult women," says Dr. Jones.

"In particular, these findings strengthen the case for our continued efforts in developing the best system of care for women in this country. There are many lessons to be learned and we're encouraged to learn that we are on a constructive path."

For more information on the evaluation, go to the CoE Web page, at: <a href="http://www.4woman.gov/coe.index.htm">http://www.4woman.gov/coe.index.htm</a>.

We've expanded our community centers. When you do that and you have a pretty successful model, the community comes back to you and identifies other areas where the community would like to see the same type of services ... I don't really have to advertise much of anything.

We're getting calls all the time."

-study respondent

## New National Community Centers of Excellence in Women's Health Selected

he Department of Health and Human Services' (DHHS) Office on Women's Health (OWH) has selected the third generation of National Community Centers of Excellence in Women's Health (CCOE). Nineteen organizations submitted applications in response to the February 26 Federal Register notice, seven were selected for pre-site visits, and five were selected for funding. The new CCOEs are:

- Morton Plant Mease Health Care in Clearwater, Florida – The purpose of this CCOE program is to serve as a model resource center to integrate and coordinate available community social and health care services to improve women's access to comprehensive care. The CCOE will focus on the needs of underserved women in Pinellas County, Florida, home to an unusually large population of elderly women. This hospital-based CCOE program is located in the Turley Family Health Center, about three miles from the Morton Plant Hospital in Clearwater.
- Christiana Care Health Services in Wilmington, Delaware The purpose of this CCOE program is to coordinate efforts to provide integrated, well-coordinated and culturally competent women's health services to approximately 3,000 high risk, minority, low income, underserved women currently not receiving care in New Castle County Delaware. Christiana Care is one of the nation's largest private health systems and a leading provider of health care services to the people of Delaware and the neighboring areas of Pennsylvania, Maryland, and New Jersey. The CCOE grant will be used to link, coordinate, and strengthen women's health services in New Castle County.
- Jefferson Health System in Birmingham,
  Alabama The purpose of this CCOE program is
  to identify, coordinate, and strengthen communitybased health care services for the under and
  uninsured women of Jefferson County and to
  identify promising strategies for engaging girls and
  women in a system of care that is meaningful and
  relevant to the complexity of their lives. The
  CCOE program will be located at Cooper Green

Hospital, the county's public hospital serving the majority of uninsured and Medicaid adults seeking outpatient and inpatient care. According to the National Women's Law Center, Alabama ranks 49<sup>th</sup> and achieved an overall rating of "unsatisfactory" for most indicators of women's health. This CCOE program will work to improve the health of Alabama's women.

- Griffin Health Services Corporation in Derby, Connecticut The vision of this CCOE program is to pursue excellence in comprehensive women's health services and programming for women in the Lower Naugatuck Valley, while contributing to the state-of-the-art in women's health, regionally and nationally. The project will target women, particularly those that are underserved and will focus on better integration and expansion of women's programming in the Valley. The CCOE program will be located at Griffin Hospital.
- Kokua Kalihi Valley Comprehensive Family Services in Honolulu, Hawaii – The purpose of this CCOE program is to measurably improve the health and well being of the Kalihi Valley's large population of underserved Asian and Pacific Islander women. Kokua Kalihi Valley is the only comprehensive primary health care provider in the area and provides culturally competent services through a staff that is fluent in 17 Asian and Pacific Islander languages and dialects. This Federally Qualified Health Center serves three public housing projects.

The CCOE programs are reaching significant numbers of underserved women, women from underrepresented minority populations, and older women. The OWH plans to fund additional CCOEs with a new solicitation in FY 2003.

To objectively determine the efficacy of the CCOE program, under a contract with OWH, Booz, Allen, and Hamilton developed a methodology for the national evaluation of the program and will conduct the evaluation during the next 18 months. Each CCOE will be evaluated against its stated objectives.

## CoE-Developed DES Health Professional Materials Begin Implementation

ver the last two years, the CoEs have collaboratively developed training and education materials for health professionals as part of the Centers for Disease Control and Prevention's (CDC) DES Update (see Models for the Nation, December 2000 and November 2001). The Update is a congressionally mandated educational effort designed to provide the most recent information about DES-related health risks to health care providers and the public. Diethylstilbesterol (DES) was prescribed to pregnant women from the late 30's to the early 70's for prevention of miscarriages and premature labor, but health risks associated with DES exposure are ongoing. The National Cancer Institute (NCI) continues to follow cohorts of DES sons and daughters and women exposed to DES during pregnancy. In addition, initial studies of DES grandchildren are just beginning to determine if any third generation health effects exist.

The DES Update will be launched by CDC in late 2002. It has been developed in partnership with medical professional organizations and patient advocacy groups.

The CoEs are proud to be a part of the launch. The following contracts were awarded in September 2002 in support of the implementation efforts:

- University of Indiana CoE was awarded \$70,000
  (Rose Fife, M.D., PI) to provide presentations on
  DES to 30 hospital and medical centers in the
  Midwest including locations in Indiana, Kentucky,
  Ohio, Illinois, Michigan, Wisconsin, and Missouri.
  The target audiences are Ob/Gyn physicians,
  family physicians, internists, physician's assistants,
  nurse practitioners, registered nurses, and students
  in these disciplines.
- University of California, Los Angeles CoE was awarded \$12,239 (Janet Pregler, M.D., PI) to present DES Update information at an annual state/regional women's health update course and exhibit targeting physicians, physician's assistants, nurse midwives, and nurse practitioners.

• MCP Hahnemann University CoE was awarded \$98,832 (Ana Nuñez, M.D., PI) to present national and regional implementation activities to medical educators and physicians, nurses, advanced practice nurses and nursing educators, medical students, and to the community at nurse-managed health centers and health fairs. These activities will be held at national and regional meetings and continuing education conferences and online. Self study materials will be required in clinical rotations.

CDC's DES Update will include a special Web site for providers and patients housed at <a href="www.cdc.gov/DES">www.cdc.gov/DES</a>. The site, originally designed and tested by the UCLA CoE will include resources for providers that have also been developed by the CoEs.

To become involved, contact: Dr. Marsha Vanderford (770-488-4552; mev7@cdc.gov) or Dr. Ann Forsythe (770-488-7414; akf9@cdc.gov) at CDC.

## Office on Women's Health Awards Contracts on Adolescent Skill Building

he Office on Women's Health has awarded contracts to the UCLA CoE and Harvard University CoE on adolescent negotiation skill building:

- UCLA will partner with the school district and community to implement the proven curriculum, In Touch with Teens, of the Los Angeles
   Commission Against Assault program. Medical school and MSW students will be trained to implement the program and UCLA plans to reach 300 girls during the year. The end product will be a structure for program implementation, which can be replicated nationwide.
- Harvard will develop a Teen SAFE Initiative for girls 12-16 years old. The program will consist of modules on: Healthy Relationships, Safety on the Internet, and Safety on the Street. Harvard will develop materials for educational sessions and a complementary Web page component for each module.

# CoE/FDA Research Partnership Initiative Expands Focus

he highly successful CoE/FDA Research Partnership Initiative, now in its third year, will be providing timely information for our nation's counter terrorism efforts. Three studies focusing on antibiotic dosing to prevent illness in special populations following a bioterriorist attack were awarded on September 30, 2002 to the CoEs. These include:

- Indiana University School of Medicine, Ciprofloxacin and Doxycycline Disposition in Lactating Women and in the Elderly (Stephen D. Hall, Ph.D., PI, R. Jane Lau, M.D., and Rebecca Craven, R.N.) \$448,455
- University of Washington, Seattle, The Pharmacokinetics of Amoxicillin During Pregnancy and Postpartum (Mary F. Hebert, Pharm.D., PI, and Tom Easterling, M.D.) \$272,097
- University of Wisconsin, Madison, Pharmacokinetics and Pharmacodynamics of Gentamicin, Azithromycin and Ciprofloxacin During Pregnancy (Gloria E. Sarto, M.D., PI, Keith Rodvold, Pharm.D., James Fischer, Pharm.D., Stacie Geller, Ph.D., Helen Kastrissios, Ph.D., and Donna M. Kraus, Pharm.D.) \$832,192. This award is forming a consortium of five CoEs (University of Wisconsin, University of Illinois at Chicago, University of Michigan, Harvard University, and Boston University) to study the doses of gentamicin and azithromycin needed to prevent conditions that may develop after a bioterrorist attack in pregnant and lactating women.

A separate award was made for glucose monitoring. This study will investigate the difference in diabetes control with blood glucose monitoring via fingerstick versus an alternative site. This information may be incorporated into glucose test product labels.

 Boston University Medical Center, Self Monitoring of Blood Glucose with Finger Tip Sampling vs. Alternative Site Sampling: Source of Variability and Effect on Long Term Glycemic Control (Caroline M. Apovian, M.D., PI, Karen Freund, M.D., Elliot Sternthal, M.D., Phillip Knapp, M.D., Michele Leaf, A.N.P., and Liza Hunter, A.N.P.) \$150,000

# CoEs Receive Funding to Establish Specialized Centers of Research

Five CoEs are among the eleven new Specialized Centers of Research (SCOR) on Sex and Gender Factors Affecting Women's Health, which have been established by the National Institutes of Health (NIH) Office of Research on Women's Health (ORWH). Funding for the SCOR program will total approximately \$11 million per year for five years.

"The SCOR initiative marks a great leap forward in the NIH support for multidisciplinary research on women's health," said Dr. Vivian W. Pinn, Director of the ORWH. "The ORWH frequently partners with NIH Institutes and Centers to support women's health research. This, however, is the first time we have had the resources to take the lead in developing and funding a new research initiative relating to women's health."

The multidisciplinary nature of these centers will provide opportunities for innovative approaches to research on the role of sex- and gender-related health effects. The SCOR institutions were selected on the basis of having at least three highly meritorious interdisciplinary research projects that explore an important issue related to sex/gender health differences. Individual projects must be related by a common theme, which encompasses clinical and basic research.

Research priority areas, including mental health, reproductive health, pain disorders, and urinary tract health, will be addressed by grantees of this new ORWH initiative.

The CoEs Selected Are:

University of California, Los Angeles: Sex and gender factors in the pathophysiology of irritable bowel syndrome (IBS) and interstital cystitis (IC), Emeran Mayer, M.D.

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## Forum Announcement

The National Centers of Excellence in Women's Health Second National Forum: Understanding Health Differences and Disparities in Women—Closing the Gap will be held on May 13-14, 2003, at the Premier Sheraton Hotel, Vienna, Virginia. Through plenary sessions, the Forum will showcase the National Centers of Excellence in Women's Health programs, highlight the quantitative and qualitative evaluation outcomes, and present lessons learned since 1996 and the inception of these Centers.

Current information about the Forum is available at <a href="www.4woman.gov/COE/forums.htm">www.4woman.gov/COE/forums.htm</a>. Additional information will be included as it becomes available.

## CoE/CCOE Joint Community Outreach Projects Receive Funding

he OWH has funded seven new joint community outreach projects which will allow the OWH to determine how the efforts of the programs can be combined to maximize resources and ensure an improved system of health services for women. The 2002 projects include:

- Mariposa Community Health Center CCOE; the University of California at Los Angeles CoE; the University of California at San Francisco CoE; and the University of Washington, Seattle CoE are developing educational tools (culturally and linguistically relevant to Hispanic women of Mexican descent) on menopause for Promotora or Lay Health Educator delivery through home visits or to small groups. The information will be targeted to Hispanic women of Mexican descent served by Mariposa (Nogales, Arizona).
- The University of Wisconsin, Madison CoE and Magee-Womens Hospital of UPMC CoE are working to reduce domestic violence against women and girls in their respective catchment areas by promoting healthy adolescent relationships through education, training, and advocacy. The project will target African American teens, ages 13-18.
- The Northeast Missouri Health Council CCOE and the Boston University CoE are developing and evaluating an evidence-based exercise program applicable to low-income women with limited formal exercise opportunities, as part of efforts to

To love what you do and feel that it matters; how could anything be more fun.

—Katherine Graham,
The late publisher of the Washington Post

- reduce cardiovascular risk, and assess whether a program can be developed which is applicable to both urban (Boston catchment area) and rural (Missouri catchment area) women.
- The Women's Health Services CCOE (Santa Fe, New Mexico) and the University of Illinois at Chicago CoE are examining the knowledge, attitudes, and behaviors of providers regarding dietary supplements and/or herbal medicines for menopause. The project is focusing on health care practitioners who care for midlife and older women in the respective catchment areas of the CCOE (Santa Fe, New Mexico) and the CoE (Chicago, Illinois).
- St. Barnabas Hospital and Health Care System CCOE; the Harvard University CoE; the University of Puerto Rico CoE; and the Tulane and Xavier Universities of Louisiana CoE are developing a training curriculum geared towards the training of community women in the area of cardiovascular disease, risk factors, prevention, intervention, and early detection. The developed educational efforts will be targeted to African American and Hispanic women in Bronx, NY; Boston, MA; New Orleans, LA; and Puerto Rico.
- The NorthEast Ohio Neighborhood Health Services CCOE and the University of Michigan CoE are developing a project focusing on violence prevention, assessment, and intervention services for adolescent girls and women. The target population is adolescent girls and women and clinicians and non-clinicians who serve them in the CCOE catchment area (East Cleveland, Ohio).
- The Northeast Vermont Area Health Education Center CCOE; the Indiana University CoE; and MCP Hahnemann University CoE are developing an approach to address domestic violence issues in rural settings. The project targets young girls and women in the CCOE catchment area (Northeast Vermont).



wards, Awards, Awards—the National Centers of Excellence in Women's Health (CoEs) continue to receive recognition for their leadership. A few of the most recent awards and honors the CoEs have earned are listed below.

## **Boston University**

The Boston University CoE received the coveted Center of Excellence status within the Veteran's Administration Health Care System for its affiliation with the Boston Veteran's Administration Health System Women's Health Services Division. This affiliation specifically addresses the healthcare needs of veteran women.

The Women's Health Group, the clinical site of the Boston University CoE, has leveraged funding from the Avon Products Foundation. The funding will provide invaluable support for the Breast Health Center at the Women's Health Group and will increase health services for minority and underserved women.

## MCP Hahnemann University

MCP Hahnemann University CoE has been awarded a three-year contract from the Philadelphia Department of Public Health Tobacco Control Program to offer smoking cessation programs exclusively for women, beginning this fall.

## University of Wisconsin

Dr. Molly Carnes, CoE Center Director, will serve as principal investigator on the National Science Foundation ADVANCE Institutional Transformation Award to the University of Wisconsin. This \$3.75 million five-year grant will enable Dr. Carnes and her team to implement and study initiatives aimed at increasing the participation and advancement of

women in academic science and engineering. The University of Wisconsin CoE was awarded a Women's Health and Aging Clinical Scientist Development Award from the National Institute on Aging. The grant will fund three junior investigators involved in research and advanced research training in the area of women's health as it pertains to older women.

The University of Wisconsin CoE's Media Specialist, Stephen Montagna, received a grant from the Dane County Cultural Affairs Commission to carry out educational outreach on the issue of domestic violence in conjunction with his staging of a play. In addition to workshops with his cast and an audience talk-back facilitated by Domestic Abuse Intervention Services (DAIS), the grant allows for the proceeds from one performance of the play to be donated to DAIS.

## National Women's Health Week 2002

ne of the highlights of the third annual celebration of National Women's Health Week (May 12-18) was held on May 14, 2002, when the DHHS Office on Women's Health (OWH) dedicated a Women's Health Time Capsule and buried it on the grounds of Lawton Chiles International House, known familiarly on campus as

the Stone House. The CoEs were represented at the ceremony by the Center Director from the University of Puerto Rico CoE, Delia Camacho. The capsule, which contains more than 60 items that have had an impact on women's health in the past century, will be unearthed in 2100.



Susan Clark and Delia Camacho at the dedication pedestal following the ceremony.

## Ad Council Selects Three CoEs to Participate in Breastfeeding Awareness Campaign

≺hree CoEs have been selected to participate in a large focus group study for the National Breastfeeding Awareness Campaign: Tulane University, the University of Illinois at Chicago, and the University of California at San Francisco. These three sites were selected by the Advertising Council based on demographics and breastfeeding rates in their states. The study will involve 12 focus groups in each of the three cities, half with African-American participants and half with general market participants in accordance with the ethnic groups in that city. Expectant first time moms, first time moms, expectant grandmothers/great grandmothers, and dads will be studied. Subjects will be asked to participate in a group discussion about messages that will motivate women to breastfeed their babies. This project will be the basis for a national media campaign over the next three vears with the Ad Council to increase breastfeeding rates among first time mothers who would not normally breastfeed their babies. The CoEs will write up the results for publication in a peer-reviewed journal next year. The ad campaign will be launched in late spring and will last through August 2003.

## OWH Partners with Five CoEs to Reach Intergenerational Audiences

he Office on Women's Health is working with five CoEs—UCLA, Indiana University, Tulane and Xavier Universities, University of Washington, and Magee-Womens Hospital of UPMC—to develop materials, events and programs to reach intergenerational audiences on a variety of psycho-social and physical health issues. The activities will take place in community settings and will be implemented by the CoEs and their respective community partners.

## Veteran Administration Women's Health Centers To Be Compared to CoEs

our contracts were recently awarded to conduct a qualitative and quantitative study to compare and contrast the DHHS National Centers of Excellence in Women's Health (CoEs) to the Veteran's Administration Women's Health Centers. Organization, staffing, practice setting, service availability, and sustainability will be compared. Data will be drawn from new and previously collected data from both the CoEs and the Veteran Administration. The investigators include Sarah Scholle, Dr. P.H., Magee-Womens Hospital of UPMC CoE; Margaret Seaver, Ph.D., Boston University CoE; Elizabeth Yano, Ph.D., VA Greater Los Angeles Health Care System., and Carol Weisman, Ph.D., University of Michigan CoE.

## Specialized Centers of Research

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University of California, San Francisco: Mechanisms underlying female urinary incontinence, Jeanette Brown, M.D.

University of Michigan, Ann Arbor: Birth, muscle injury and pelvic floor dysfunction, John DeLancey, M.D.

University of Pittsburgh: Genetic and environmental origins of adverse pregnancy outcomes, Gerald Schatten, Ph.D.

University of Washington: Mechanisms by which drug transporters alter maternal and fetal drug exposure during pregnancy, Jashvant Unadkat, Ph.D.

For more information, visit: <a href="http://www.nih.gov/news/pr/oct2002/">http://www.nih.gov/news/pr/oct2002/</a> SCOR\_Initiative.doc





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http://womenshealth.med.ucla.edu/

#### University of California, San Francisco

2356 Sutter - Box 1694 San Francisco, CA 94143-1694 (415) 353-7481 (415) 353-9580 (fax) http://itsa.ucsf.edu/~ucsfcoe/

#### Harvard Medical School

Division of Women's Health Neville House 75 Francis Street Neville House, Room 116 Boston, MA 02115 (617) 732-5759 (617) 264-6309 (fax) http://www.hmcnet.harvard.edu/coe/

#### University of Illinois at Chicago

820 South Wood Street Chicago, Illinois 60612 (312) 355-0467 (312) 996-4238 (fax) http://www.uic.edu/orgs/womenshealth/

#### Indiana University School of Medicine

Indiana Cancer Pavilion 535 Barnhill Drive, RT-150 Indianapolis, IN 46202 (317) 274-2754 (317) 274-2785 (fax) http://www.iupui.edu/~womenhlt/

#### Magee-Womens Hospital of UPMC

University of Pittsburgh 300 Halket Street Pittsburgh, PA 15213-3180 (412) 641-1141 (412) 641-1133 (fax) http://www.magee.edu/cewh2.htm

## MCP Hahnemann University

Institute for Women's Health
The Gatehouse
MCP Hospital
3300 Henry Avenue
Philadelphia, PA 19129
(215) 842-7041
(215) 843-7946 (fax)
http://www.auhs.edu/institutes/iwh/coe.html

#### University of Michigan Health System

Women's Health Program
1342 Taubman Center
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Ann Arbor, MI 48109-0276
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http://www.med.umich.edu/whrc/
ctr.excel.html

#### University of Puerto Rico

Medical Sciences Campus P.O. Box 365067 San Juan, PR 00936-5067 (787) 758-2525 ext. 1368/1360 (787) 753-0090 (fax) http://www.rcm.upr.edu/2k1whc/

## Tulane and Xavier Universities of Louisiana

Tulane University School of Public Health and Tropical Medicine 1440 Canal Street, Suite 2300 New Orleans, LA 70112 (877) 588-5100 (504) 988-4657 (fax) http://www.tuxcoe.tulane.edu

## University of Washington, Seattle

4245 Roosevelt Way NE Campus Box 354765 Seattle, WA 98105 (206) 598-8991 (206) 598-8957 (fax) http://depts.washington.edu/ ~uw98coe/

#### University of Wisconsin-Madison

Meriter Hospital-Park/6 West 202 South Park Street Madison, WI 53715 (608) 267-5566 (608) 267-5577 (fax) http://www.womenshealth.wisc.edu/

Additional Women's Health Information and Resources: National Women's Health Information Center Office on Women's Health Department of Health and Human Services Washington, D.C. 800-994-WOMAN 888-220-5446 (TDD) http://www.4woman.gov/

CoE Home Page: http://www.4woman.gov/coe

# Office on Women's Health Department of Health and Human Services

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## We'd Like to Hear from You

We welcome your input. If you have suggestions or comments on *Models for the Nation*, please contact Ying Ge at 301-984-7191 or ying.ge@matthewsgroup.com.



