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<td>B1-02</td>
<td>Vaccine and behavioral approaches to U.S. Health disparities: sexually transmitted infections (STI) and addiction</td>
<td>Health disparities exist due to cost, access, and health seeking behavior, and vaccines may level these disparities. Vaccines are the cornerstone of prevention and inexpensive therapeutics for STI, neglected tropical diseases and addiction, which commonly occur and lead to health disparities among women, racial minorities and residents of poor inner cities and rural areas. This panel will address vaccines and their behavioral components to lessen health disparities due to cost and access from a science, policy and practice perspective.</td>
<td>Thomas Kostan MD Professor, Baylor College of Medicine, VA National Substance Use Disorders Quality Enhancement Research Initiative (QUERI)</td>
<td>David Curry, Center for Vaccine Ethics and Policy and LCDR Guillermo Aviles-Mendoza, J.D., LL.M. U.S. Public Health Service, Public Health Advisor, National Vaccine Program Office</td>
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<tr>
<td>B1-03</td>
<td>Research and Community Efforts to Address Inner-City Asthma</td>
<td>Asthma mortality and mortality is high in low income, inner-city populations. The intention of this set of presentations is to describe the magnitude of the problem and present information from epidemiologic and clinical research projects funded by both governmental (CDC, NIH) and non-governmental organizations (March Childhood Asthma Network - MCAN). In addition, a discussion of efforts to address asthma mortality at the community level will also take place.</td>
<td>Akins Togias MD, Section Chief, Asthma and Airway Biology, National Institute of Allergy and Infectious Diseases, NIH</td>
<td>Akins Togias, M.D., NIH</td>
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<tr>
<td>B1-04</td>
<td>New Directions in Addressing Mental Health Disparities in Ethnic Minority Populations</td>
<td>This session will examine basic psychological and neurobiological mechanisms underlying population disparities in mental health through the lens of cultural neuroscience. Challenges and opportunities for cultural neuroscience research to determine sociocultural and biological factors that confer risk for and resilience to mental health disorders across the globe will be discussed.</td>
<td>Margarita Alegria PhD, Department of Psychiatry, Harvard Medical School, Center for Multicultural Mental Health Research, Cambridge Health Alliance</td>
<td>Juliet Bui, MPA, M5W, SAMHSA, and Alan Trachtenberg MD MPH, Indian Health Service</td>
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<tr>
<td>B1-05</td>
<td>Disparities in Kidney Disease and Transplantation</td>
<td>Members of racial and ethnic minority groups wait significantly longer for, and are less likely to receive, a kidney transplant (KT) than Whites (WH). Race and ethnic disparities persist even after controlling for medical factors, but reasons for race disparities are poorly understood. This session will provide various perspectives for addressing the disparity including: 1) impact of diabetes and glycemic control in kidney transplantation, 2) cultural and psychosocial factors and 3) models and successful tailored educational interventions</td>
<td>David Taber, PharmD, Assistant Professor, Medical University of South Carolina The Impact of Diabetes and Glycemic Control on Ethnic Disparities in Kidney Transplantation</td>
<td>Arthur Franke PhD, National Kidney Foundation of Michigan - Senior VP and Chief Science Officer and Kevin McBryde MD, NIDDK</td>
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<td>B1-06</td>
<td>Stress and the Superwoman: An innovative agenda for African American community health disparities research, practice, and policy</td>
<td>Black women experience disparate rates of stress-related morbidity and mortality. However, current research examining these disparities has inadequately included the social and cultural context of Black women’s lives. Culturally-relevant responses to stress are largely overlooked, but are potentially central features of Black women’s stress-related disparities. The Superwoman Schema (SWS) Conceptual Framework posits that sociocultural factors related to racial and gender oppression and cultural expectations to maintain a stalwart exterior during distressing experiences may result in emotional suppression, determinate to achieve goals despite limited resources, and limited prioritization of self-care among Black women. SWS may be key for understanding stress-influenced physiological and behavioral responses that contribute to health disparities. This panel includes researchers and practitioners representing public health, psychology, nursing, family science and women’s studies to engage in an interdisciplinary discussion of Black women’s health disparities. The purpose is to describe the SWS construct; present preliminary findings of empirical relationships between stress, SWS, and health outcomes; and discuss translating these findings into an innovative agenda for future research, effective practice, and culturally-responsive policy.</td>
<td>Angela Black, PhD, University of Illinois at Urbana-Champaign</td>
<td>Cheryl Woods-Giscombe, PhD, RN, University of North Carolina, Chapel Hill</td>
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**Note:** The table contains information on sessions, speakers, and session moderators for a conference. Each session has a specific title and description related to various themes such as health disparities, mental health, and kidney transplantation. The speakers and session moderators are listed alongside the sessions they are associated with.
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<td>B1-07</td>
<td>The State of the Science in Disability Research and Policy</td>
<td>This session will convene experts from the field of disability and rehabilitation research including leaders from policy and advocacy communities to discuss the state of the science. Presentations will address issues of effective health and health care disparities among individuals with disabilities, and how to promote the research agenda.</td>
<td>Nancy Miller, Ph.D., Professor, University of Maryland Baltimore County. Differences by Gender, Disability and Age in the Receipt of Preventive Services</td>
<td>Shelley Reeves, MA, US Department of Education – National Institute on Disability and Rehabilitation Research (NIDRR)</td>
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<tr>
<td>B1-08</td>
<td>Racial and Ethnic Differences and Disparities in Pain: The State of the Science of Inclusion</td>
<td>The increasing prevalence of pain and its poor assessment and treatment as well as differences and disparities in pain care are significant public health problems, especially for racial and ethnic minorities. This session will focus on measurement and research issues in the context of differences and disparities in the pain experience based upon race and ethnicity.</td>
<td>Carmen R. Green, MD Professor of Anesthesiology and Obstetrics and Gynecology (Medical School), and Health Management and Policy (Public Health) at the University of Michigan</td>
<td>Salina Waddy MD, National Institute for Neurological Diseases and Stroke</td>
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<tr>
<td>B1-09</td>
<td>Improving Health of LGBT Population</td>
<td>The LGBT panel discussion will discuss the key priorities and opportunities for scientists, policymakers, practitioners and community advocates to consider in improving health of the LGBT community. In March 31, 2011, the Institute of Medicine published a report entitled “The Health of Lesbian, Gay, Bisexual and Transgender People”. The IOM Report provides the first comprehensive overview of the health of LGBT populations in the United States and scientific research needs. The IOM found that data and research on LGBT populations’ health is quite limited. This panel will discuss the IOM report and the priority areas for research for LGBT health, the accomplishments and goals of the HHS LGBT IEC; the re-issuance of a set of funding opportunity announcements at the National Institutes of Health that focus on addressing the health of lesbian, gay, bisexual, transgender, and intersex (LGBTI) individuals; and the priority areas for improving LGBT health from the community perspective.</td>
<td>Judith B. Bradford, PhD, Director, Center for Population Research in LGBT Health, Co-Chair, The Fenway Institute Feinway Health.</td>
<td>Elizabeth Wehr, J.D., Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD) and Nathan Stinson MD, PhD, Acting Director, Division of Scientific Programs, NIHHD, NIH</td>
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<tr>
<td>B1-10</td>
<td>Promoting Clinical and Community Preventive Services in Socially Disadvantaged Populations</td>
<td>Clinical and community preventive services - such as screenings and early detection tests, immunizations and vaccinations, are important tools that can help lower health risks, prevent the onset or progression of disease and disability, and reduce the costs of treating chronic diseases. Evidence-based guidelines and numerous studies call for is routine clinical and preventive services, yet there are disparities in the receipt of the recommended clinical preventive care for socially disadvantaged populations. This panel will discuss the importance of clinical preventive services, barriers to receiving them, and possible solutions to address the health disparities gap in socially disadvantaged populations.</td>
<td>Glenn Flores, MD, Professor and Director, Division of General Pediatrics, and the Judith and Charles Ginsburg Endowed Chair in Pediatrics, University of Texas Southwestern and Children’s Medical Center Dallas. A Cost-Effective, Community-Based Intervention Successfully Eliminates a Racial/Ethnic Disparity in Children’s Health and Healthcare. David W. Baker, MD, MPH, Chief, Division of Medicine-General Internal Medicine and Geriatrics. Michael A. Gertz Professor of Medicine Feinberg School of Medicine, Northwestern University Strategies to Reduce Disparities In Clinical and Community Preventive Services</td>
<td>Leonard E. Egede MD, MS., Allen H. Johnson Endowed Chair Professor of Medicine, Director, Center for Health Disparities Research, Medical University of South Carolina and Shantia Williams PhD, MPH, APRN Health Services and Resources Administration</td>
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### TRACK TWO - CAPACITY-BUILDING AND INFRASTRUCTURE

#### SESSION 1: MONDAY DECEMBER 17TH, 2012

**SESSION DESCRIPTION**

Assessing the impacts of public health policies on health disparities in the context of tracking progress over time, or discriminating among health protective policy options is an emerging need for several policy-making agencies in the United States. A variety of statistical methods pose great potential for measuring health disparities, including methods for capturing income inequality adapted from the field of economics. However, each method presents a unique set of characteristics, benefits and challenges that may affect their utility and interpretation under different scenarios and applications. The purpose of this session is to share and discuss the range of measurement approaches that are currently under consideration for use in various research and policy making settings.

#### SPEAKERS

- **Makram Talih**, PhD, Centers for Disease Control and Prevention (CDC)
  - National Center for Health Statistics
  - Tracking Health Disparities in Healthy People 2020: Methods and Challenges

- **Yukiko Asada**, PhD (Dalhousie University, Halifax, Nova Scotia, Canada)
  - Summarizing social disparities in health

- **Caitlin Harrissay, RThi**
  - Community health surveillance: Assessing capacity for monitoring chronic disease outcomes in health disparate populations

- **Henry Roman**, Industrial Economics Inc.
  - Applying Inequality Indices to Discriminate among Policy Options: A Case Study

#### ROOM: B2-11

**SESSION TITLE**

Quantitative Methods for Measuring Health Disparities to Track Progress and Discriminate Among Policy Choices.

**SESSION DESCRIPTION**

Members of this panel will present state of the art research on the science of investigating the presence of unconscious race and social class bias among doctors, and its impact on clinical decision making and patient-physician interactions. Two panelists will present conflicting data on this subject, arising from the divergent fields of internal medicine and acute care surgery. This will be followed by a discussion of these findings by panelists representing medical colleges, the field of internal medicine, and the field of surgery. They will deliberate on: how this data should inform training and certification of medical doctors and surgeons, what gaps in the science need to be addressed, and which partnerships need to be formed among researchers, practitioners, and policy-makers, in order to create a more culturally competent and effective workforce.

#### SPEAKERS

- **Lisa Cooper**, MD, Director of the Johns Hopkins Center for Elimination of Cardiovascular Disparities, Johns Hopkins School of Medicine

- **Adi Haider**, MD, Director of the Johns Hopkins Center for Surgery Trials and Outcomes Research

- **Marc Nivel, EdD**, Chief Diversity Officer, American Association of Medical Colleges (AAMC)

- **L D Britt MD**, Immediate Past President of the American College of Surgeons and Chair of Surgery at Eastern Virginia Medical School

- **Clarence Bradstock MD**, Associate Dean, Stanford University and Board Member, American Board of Internal Medicine (ABIM)

#### ROOM: B1-12

**SESSION TITLE**

Unconscious Bias: Does it Really Impact Clinical Care and What We Can Do About It

**SESSION DESCRIPTION**

Discrimination is an important social determinant of racial/ethnic health disparities. Researchers, practitioners, policy makers, and communities must find solutions and advocate for changes that can reduce experiences with discrimination to ultimately eliminate health disparities. This integrated panel presentation aims to highlight new, cutting-edge research findings connecting the experience of discrimination with a range of important health outcomes across the lifespan, and to discuss how this research can inform policy and practice to alleviate discrimination and its contribution to persistent health disparities.

#### SPEAKERS

- **Valerie Enshaw**, PhD, Post-doctoral Fellow, Yale University

- **Lisa Rosenthal**, PhD, Postdoctoral Fellow, Yale University

- **Natalie Stopen, ScD**, Postdoctoral Fellow, Center on the Developing Child, Harvard University

- **David Williams**, PhD, MPH, Harvard School Of Public Health

#### ROOM: B1-13

**SESSION TITLE**

Discrimination and Health Outcomes across the Lifespan: New Research and Policy, Practice, and Community Implications for Reducing Disparities

**SESSION DESCRIPTION**

A number of government agencies including the NIH, VA and AHRQ have been supporting comparative effectiveness research (CER) for many years, but recent legislation has drawn increased attention to national opportunities, challenges, and priorities. The Affordable Care Act created the non-governmental Patient Centered Outcomes Research Institute (PCORI) which has the promise to enhancing national efforts. Steps to implementing and supporting CER to benefit health care reform are varied and, includes developing optimal approaches to investigating priorities, encouraging large-scale pragmatic trials, examining the role of observational research, supporting implementation research, and determining how best to link personalized medicine with CER. This panel will discuss issues around patient-centered outcomes and comparative effectiveness research and describe their potential roles in overcoming healthcare disparities; discuss challenges to translating evidence and effectiveness research into practice in community-based settings; discuss approaches used to enhance effectiveness research including those designed to reduce racial and ethnic disparities in quality and healthcare delivery; and discuss methods used to engage communities, individual patients, clinicians, staff, healthcare administrators, payers, and policy-makers in translational research to reduce population health disparities.

#### SPEAKERS

- **Michael Lauer**, MD, Director, Division of Cardiovascular Sciences, National Heart, Lung, and Blood Institute (NHLBI)

- **David Williams**, PhD, MPH, Florence and Laura Norman Professor of Public Health, Harvard School of Public Health

- **Nakela L. Cook, M.D.,** Dept. of Veterans Affairs

#### ROOM: B1-14

**SESSION TITLE**

Patient-Centered Outcomes and Effectiveness Research in Health Disparities

**SESSION DESCRIPTION**

Discrimination is an important social determinant of racial/ethnic health disparities. Researchers, practitioners, policy makers, and communities must find solutions and advocate for changes that can reduce experiences with discrimination to ultimately eliminate health disparities. This integrated panel presentation aims to highlight new, cutting-edge research findings connecting the experience of discrimination with a range of important health outcomes across the lifespan, and to discuss how this research can inform policy and practice to alleviate discrimination and its contribution to persistent health disparities.

#### SPEAKERS

- **Valerie Enshaw**, PhD, Post-doctoral Fellow, Yale University

- **Lisa Rosenthal**, PhD, Postdoctoral Fellow, Yale University

- **Natalie Stopen, ScD**, Postdoctoral Fellow, Center on the Developing Child, Harvard University

- **David Williams**, PhD, MPH, Harvard School Of Public Health

#### MODERATOR

**SESSION MODERATOR**

- **Adi Haider**, MD, Johns Hopkins Hospital

- **Irinar Dinkiewa-Muln**, MD MPH, NIMHD/NHLB
## TRACK TWO - CAPACITY-BUILDING AND INFRASTRUCTURE

### ROOM: B1-15
**Session Title**: Successes, Challenges and Innovations in Community Engagement and Recruitment

**Session Description**: Success of health disparities research studies and timely transfer of findings into practice requires the active participation of minority and indigenous populations who are most likely to benefit from such research. This panel will discuss lessons learned in community engagement and recruitment strategies.

**Speakers**: Sandra Quinn, PhD, Associate Dean for Public Health Initiatives, University of Maryland; Namratha Kandula MD MPH, Assistant Professor, Northwestern University; Fatimah Jackson, PhD, Professor, University of North Carolina at Chapel Hill; Stephen B. Thomas PhD, University of Maryland

**Moderator**: Philip M. Al flair PhD, Senior Director, Health Equity Research and Policy

### ROOM: B1-16
**Session Title**: Addressing Social Disparities in Population Health

**Session Description**: The health of our communities and societies are important components of our overall health conditions. This panel will discuss some examples of innovations in addressing social disparities and health. Members will highlight priority global health issues, solutions implemented and progress made in addressing the health and related disparities in these various settings.

**Speakers**: Nancy A Perin PhD, Kaiser Permanente; Donaldson Conserve, Penn State University; Kevin Balyi, Fogarty International Center; Silviya Nikolova, University of Texas

**Moderator**: Richard Bezon DiPh, NMHID and Oliver Ou, PhD, US. Public Health Service, Postdoctoral Fellow, NC/NIMH

### TRACK TWO - CAPACITY-BUILDING AND INFRASTRUCTURE

### ROOM: B2-17
**Session Title**: Role of Community Health Workers in Addressing and Eliminating Health Disparities: Research and Policy Issues

**Session Description**: Increasing the diversity of the health workforce is an important strategy to improve healthcare access, costs and quality. This panel presentation will include a roundtable discussion to further elaborate on implementation science issues such as: 1) How researchers can assist in identifying the fit of CHWs for a specified health care delivery problem; 2) What research is needed to identify the best-practices for incorporating CHWs into the health care system; 3) how CHWs coordinate with medical providers in patient care; 4) What critical attributes of CHWs that enable them to maintain their peer status, while still supporting their role within the health care systems; and 5) The benefits and risks of different CHW models integrated in hospitals, subcontracted to CBOs.

**Speakers**: Jose Luchsinger PhD, Associate Professor, Columbia University; Sally Findley, PhD, Professor of Population and Family Health, Columbia University; Patricia Perez, MPH, Manager, Community Health and Evaluation, New York Presbyterian Hospital; Dana Thomson, MSc, Research Associate, Harvard Medical School

**Moderator**: Chazaman Jackson, PhD, Office of Minority Health, HHS and Gloria Ortiz, MS Program Analyst, DARD, National Heart, Lung, and Blood Institute (NHLBI), NIH

**Speakers**: Valibah Shah, PhD, Associate Professor, University of New Mexico Health Sciences Center, Univ of New Mexico

**Session Description**: Identifying Barriers to Health Care to Reduce Health Disparity in Zuni Indians Using Focus Group Conducted by Community Health Workers.
### Building Racial and Ethnic Minority Presence and Perspective in the Academic Medicine Pipeline

**Session Title:** Building Racial and Ethnic Minority Presence and Perspective in the Academic Medicine Pipeline

**Session Description:**
Increasing the diversity of the academic medicine workforce is an important strategy to enhance medical education and address health disparities. However, beyond faculty development, little has been done to develop the academic medicine pipeline. It has been documented that racial and ethnic minority physicians tend to practice in underserved communities, facilitate patient satisfaction, and help create a more robust learning environment. Additionally, a diverse faculty is critical to institutional recruitment, decision-making, policies, practices, curriculum, and fulfillment of Liaison Committee Medical Education Standard 15-19. Yet, only 7.4% of medical school’s faculty is Hispanic or Black, a percentage that has changed little over the past 20 years despite efforts to promote racial and ethnic minority faculty engagement and sustained interest in academia. Furthermore, little effort has been dedicated to promoting upstream interest in academia, specifically among Hispanic and Black medical students. The Building the Next Generation of Academic Physicians (BNGAP) initiative and the National Association of Hispanic Serving Health Professions Schools Inc. (HSHPS) will share their collaborative work in enhancing Hispanic and Black inclusion in the academic medicine pipeline through focused efforts on medical students. With the support of 23 medical schools, BNGAP and HSHPS completed an institutional assessment of medical school practices in promoting racial and ethnic minority student interest in academia and have created a resource guide to facilitate interest and preparedness for an academic medicine career. The co-founders will discuss their efforts in building minority inclusion in the academic medicine pipeline, including a summary of medical school practices targeting medical students and the introduction of a newly created academic medicine career guide. Audience participants will be engaged to assess strategies employed by other health professions (e.g. Nursing, Public Health, Dentistry, etc.) to promoting racial and ethnic minority interest in academia and in conceptualizing new, innovative ways to promote diverse graduate student interest.

**Speakers:**
- John Paul Sanchez MD, MPH, Hispanic Center of Excellence, Albert Einstein College of Medicine
- Brandi Kaye Freeman, MD, Robert Wood Johnson Clinical Scholar, University of Pennsylvania
- Michelle Quintaros, Program Manager, Hispanic-Serving Health Professions Schools, Department of Internal Medicine, Johns Hopkins Bayview Medical Center
- Alvin “Hal” Strenick, MD, Assistant Dean for Community Engagement, Albert Einstein College of Medicine
- Barrieo B. Rumala, PhD, Co-Director for the SPARC Tri-institutional Diversity Initiative, The Rockefeller University, Weill Cornell Medical College and Memorial Sloan Kettering Cancer Center

### Successes, Challenges and Innovations in Community Capacity-Building

**Session Title:** Successes, Challenges and Innovations in Community Capacity-Building

**Session Description:**
This panel will illustrate unique community capacity-building and sustainable economic development initiatives, including public health and education programs with universities; community-based participatory research to rebuild local gardens and food systems in collaboration with faith-based groups, and other successful community initiatives such advocacy coalitions to inform and empower communities.

**Speakers:**
- Sabine O’Hara, PhD, University of the District of Columbia, Building Social And Economic Capacity in Local Communities: The Role of Higher Education
- Kenneth O. Council, DCHA Commissioner-at-Large and President, Fort Dupont-Stoddart Resident Council, Building Social And Economic Capacity in Local Communities: The Role of Higher Education
- Julian C. Wilson, Jr., MA, DC Housing Authority, Resident Services, Building Social And Economic Capacity in Local Communities: The Role of Higher Education
- Michelle Harris, PhD, MPH, Assistant Professor of Nutrition, Brandi Kaye Freeman, MD, Robert Wood Johnson Clinical Scholar, University of Pennsylvania, Faith, Farming, and the Future: a community-based effort to prevent chronic disease in rural Black youth
- Nadine Chan, PhD, MPH, Assistant Chief, Public Health Seattle & King County, Zoning and Public Health on the East End of Bridgeport
- Monica Evans PhD, Office of Global Affairs, Dept. of Health and Human Services, Faith, Farming, and the Future: a community-based effort to prevent chronic disease in rural Black youth
- Stanely Bernard MPH PhD, Zoning and Public Health on the East End of Bridgeport

### Innovative Methodologies and Research Initiatives for Small Populations

**Session Title:** Innovative Methodologies and Research Initiatives for Small Populations

**Session Description:**
As the fastest growing racial and ethnic groups in the U.S., Asian Americans, Native Hawaiians and Pacific Islanders (AAs and NHPIs) are becoming ever more vital to the success and vitality of the nation. And yet, the nation’s health system – just as for many communities of color does not serve these populations well and they particularly feel the pain of this broken system. AAs and NHPIs are disproportionately uninsured, have higher rates of certain preventable diseases and face a number of barriers to good health, including poverty, linguistic and cultural barriers - all contributing to health and health care disparities. While there is no one solution to eliminating health disparities, cross-sectional collaboration involving diverse stakeholder groups, such as community-based organizations (CBOs), foundations, and government leaders is one promising avenue. The panel will feature government leaders, foundation, national advocacy, and CBO representatives and provide a front line view of their efforts in engaging and developing capacity of AA and NHPI communities, how they translated local community needs into data collections and where they fit into national priorities. Panelists will also discuss how they worked to raise the visibility of AA and NHPI health needs through data advocacy at the national level and through mobilization. Lastly, the panel will discuss what more is needed to move forward to eliminate disparities and how these lessons learned can be leveraged in future efforts.

**Speakers:**
- Ernest Moy, MD, MPH, Medical Officer, Agency for Healthcare Research and Quality
- Virginia Cain, PhD, Director of Extramural Research, NCHS, National Center for Health Statistics (NCHS) / CDC
- Nadine Chan, PhD, MPH, Assistant Chief, Public Health Seattle & King County
- Simona Kwon, DrPH, MPH Assistant Professor, NYU School of Medicine, NYU Center for the Study of Asian American Health

**Moderators:**
- Monica Evans PhD, Office of Global Affairs, Dept. of Health and Human Services
- Winston Tseng PhD, Asian & Pacific Islander American Health Forum (APIAHF), and Xinzi Zhang MD PhD, NIH/NCHS
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| B2-21      | Using HHS Data to measure ACA Impacts on Disparities.                          | The Affordable Care Act includes many provisions expand health insurance coverage, access to care, quality of care and prevention that are anticipated to be impactful in the area of disparities reduction. HHS data collections will be critical to track changes in disparities as the various components of the Affordable Care Act are implemented. In order to measure ACA impacts, HHS has made investments in existing and new data collections systems to enhance the ability to measure ACA impacts on disparities. This session will provide an overview of enhancements to HHS Data Collections and baseline data for key data measures impacted by ACA provisions, which will be used to monitor the impact of the ACA on disparities reduction efforts. | Ken Finegold, PhD, Social Science Analyst, Office of The Assistant Secretary for Planning and Evaluation, HHS  
ACA impact on health insurance coverage for racial and ethnic minorities  
Whitney Kirzinger, MPH, Health Statistician, National Center for Health Statistics  
New ACA data collections: tracking progress on disparities reduction as healthcare reform is implemented  
Quyen Ngo-Metzer, MD MPH, Chief, Data Branch, HRSA  
ACA Impacts on Federally Funded Health Centers  
Ed Salsberg, Director, National Center for Health Workforce Analysis, HRSA  
ACA Impacts on the Health Workforce | Susan Queen, Director, Division of Data Policy, ASPE, HHS                      |
| B3-22      | A Public-Private Partnership Working to Address Healthcare Disparities: the NCI Community Cancer Centers Program (NCCCP) | In 2007, NCI launched the NCCCP pilot, a public-private partnership with 16 community hospital cancer centers in 14 states, to explore methods of improving patient access to advanced cancer care in the community. With 40% of its NCI funding directed to reduce healthcare disparities across the cancer care continuum, the NCCCP aims to: 1) Enhance access to cancer care; 2) Improve quality of care; and 3) Increase clinical trials accrual. The integrated panel will discuss the need for and implementation of a systematic and multi-level approach to address healthcare disparities. This multidisciplinary team will speak to the process and outcomes of facilitating the development of programmatic, organizational, and community capacity to effectively integrate a cross-cutting disparities program. This includes having organizations which demonstrate a strong community-oriented mission; commitment by hospital management; engagement of private practice physicians; targeted training of staff; use of standardized data collection and metrics; involvement of strategic partners with aligned goals at the national and local level; support by relevant NCI experts; having disparities research partnerships and sharing best practices across a learning collaborative. This approach was used in a variety of community settings (rural, urban, suburban) targeting different underserved population groups and has demonstrated improvements in care in the respective communities. Lessons learned and tools and resources which supported these efforts will be shared with participants. | Brenda Adjei, EdD, Program Director, Center for Cancer Health Disparities, NCI  
Kathleen Castro, RN, MS, AOCN, Nurse Consultant, Division of Cancer Control and Population Sciences, (DCCP), NCI  
Eileen Dimond, RN MS, Nurse Consultant, Division of Cancer Prevention, NCI DOF  
Deborah Hood MBA, Vice President, National Oncology Service Line, Catholic Health Initiatives | Donna O'Brien, MHA, Special Advisor for Community Healthcare Programs, NCI |
| B3-23      | The National Network to Eliminate Disparities in Behavioral Health             | Behavioral health disparities are complex issues, driven by multiple factors that often go beyond specific health policies or the nature of health services. These problems defy single-agency, single-sector or silo-ed approaches. While national and federal policies are important, the manifestations of behavioral health disparities and the potential for solutions occur at the local level. In 2007, the Substance Abuse and Mental Health Services Administration, with support from the NIH/National Institute for Minority Health and Health Disparities and the Annie E. Casey Foundation, launched the National Network to Eliminate Disparities in Behavioral Health (the NNED). The purpose of the NNED is to bring together community-, ethnic- and faith-based organizations, researchers, and national and local associations to share and promote policies, standards, research and innovative practices that begin to chip away at behavioral health disparities in diverse racial, ethnic, cultural and sexual minority communities. During this integrated panel presentation, NNED partners representing the federal, national, and local perspectives will highlight NNED activities to link policy, research, and practice. Providers will also highlight lessons learned from NNEDLearn, an opportunity for community leaders and providers to engage in a professional development opportunity on implementation of evidence- and practice-based programs. The NNED provided the support and infrastructure for participants to learn the practice, share common implementation challenges, and receive ongoing coaching and supervision. | Michelle Vella, MS, MA, Med, Behavioral Health Specialist, Lehigh Valley Hospital  
Fred Santolaya, MPA, Operations Manager, National Latino Behavioral Health Association  
Mohni Venkatach, MPH, Senior Director, Public Policy, National Council for Community Behavioral Healthcare  
Rosa Gil, DSW, President and CEO, CommunLife Inc  
Mary Cwik, PhD Assistant Scientist, Johns Hopkins University | Rynal Holloway Moore, Substance Abuse and Mental Health Services Administration (SAMHSA) |
| B3-24      | Partnerships for Promoting Childhood Social and Behavioral Health             | This panel will discuss the efforts of the following organizations in the promotion of childhood social and behavioral health: The Alliance for Racial Equity in Child Welfare is a national, decade-long campaign to address racial and ethnic disparities within the U.S. child welfare system. The Annie E. Casey Making Connections Initiative which is long-term, multi-site effort to demonstrate that poor results for children and families in tough neighborhoods can be changed for the better. The National Center for Mental Health Promotion and Youth Violence Prevention provides training and technical assistance to Safe Schools/Healthy Students and Project LAUNCH grantees funded by the U.S. Departments of Education and Justice and Substance Abuse and Mental Health Services Administration (SAMHSA) in the U.S. Department of Health and Human Services. National Center staff work with school districts and communities as they plan, implement, and sustain initiatives that foster resilience, promote mental health, and prevent youth violence and mental and behavioral disorders. | Rochelle Rollins PhD, Administration on Children and Families  
Let's Move Child Care  
Orionde Miller, Senior Associate, Center for the Study on Social Policy (CSSP) – Alliance for Race Equity  
Earnestine Wills, MD MPH, Professor of Pediatrics, Medical College of Wisconsin, Milwaukee, WI  
CHIMC, Sawa Livs-Immunitet  
James Allen PhD, Professor, University of Minnesota  
Ellium Tungiin-Toward Wellness | Valerie Mahlombe, Ph.D., CAS, Acting Chief Pediatric Trauma and Critical Illness Branch, Eunice Kennedy Shriver National Institute of Child Health and Human Development |
### CONCURRENT SESSION B
**MONDAY DECEMBER 17TH, 2012**
**3:15 PM - 4:45 PM**

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<td>B3-25</td>
<td>What works to promote health equity? “The state of knowledge”</td>
<td>Much attention has been paid to definitions, measurement, and social determinants of health inequities in the U.S. and beyond. Far less attention has been paid to the evaluation of interventions that might reduce or eliminate health inequities. The focus of this session is ongoing research on interventions to promote health equity and findings on interventions that work.</td>
<td>Dawn Alley PhD, Policy Advisor, Office of the Surgeon General, HHS National Prevention Strategy</td>
<td>Leandra Liburd PhD, CDC</td>
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<td>LaToria Whitehead, PhD, MPH, Environmental Justice Officer, CDC/ATSDR/NCEH Health in All Policies</td>
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<td>Yen Luong, HHS/ODPHP Healthy People 2020 Intervention Review</td>
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<td>Robert A. Hahn PhD, Senior Scientist, Centers for Disease Control and Prevention (CDC)</td>
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<td>The DHHS Guide to Community Preventive Services reviews on health equity</td>
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<td>B3-26</td>
<td>Implementation of The Surgeon General’s Call to Action to Support Breastfeeding: Key Strategies to Eliminating Disparities</td>
<td>Breastfeeding imparts numerous well-documented health benefits for both infants and their mothers. Mounting research not only acclaims the prevention impacts, positive health outcomes and economic benefits associated with breastfeeding, but also delineates the health risks of not breastfeeding for infants, mothers and society. The health outcomes are so significant that an estimated $13 billion or more in health care costs could be saved in the U.S. if mothers exclusively breastfeed their infants to 6 months as recommended by the American Academy of Pediatrics and major health professional and medical organizations worldwide. Launched in January 2011, The Surgeon General’s Call to Action to Support Breastfeeding outlines achievable action steps and implementation strategies to remove structural barriers faced by mothers who want to breastfeed their babies and names specific strategies that the health care system, communities, employers, researchers and government leaders must address. Panel members in this session will address the implementation and integration of essential components from The Surgeon General’s Call to Action to Support Breastfeeding that are key to eliminating breastfeeding disparities.</td>
<td>Michal Young, M.D, Dept. of Pediatrics and Child Health, Howard University School of Medicine Breastfeeding Challenges in Health Care Systems/Hospitals</td>
<td>Ursuline Singleton, MPH, RD, Public Health Analyst, HHS</td>
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<td>Kimmarie Bugg, MSN, MPH, Director and Founder, Reaching Our Sisters Everywhere (ROSE) Community Collaboratives to increase Breastfeeding Rates</td>
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<td>Ursuline Singleton, MPH, RD, Public Health Analyst, HHS</td>
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<td>Workplace Lactation Support: Challenges and Solutions</td>
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