

Population Health:

A Framework for Understanding and Addressing the Health of Communities

Center for Urban
Population Health

Working together to improve the health of communities

2011 ANNUAL REPORT



Center for Urban Population Health

Working together to improve the health of communities

Mission

Advancing population health research and education to improve the health of urban communities.

Vision

A nationally recognized center that inspires collaborative, innovative, community-relevant urban population health research and education.

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Dear Colleagues and Partners,

In 2001, when the Center for Urban Population Health was created, there was no School of Public Health in Milwaukee and both Wisconsin schools of medicine adhered primarily to a traditional medical model approach in their training and research. What little academically-related public health work that was done was accomplished on an ad hoc basis by the local and state Health Departments. Leaders at UW-Milwaukee, the UW Medical School and Aurora Health Care, recognizing that there were serious population health concerns in Milwaukee, came together to form the Center. Its mission was to be the engine for population health on the social, economic and environmental determinants of health in Wisconsin's urban areas. Since then, the Center's infrastructure has provided expertise in evaluation and design, community outreach, engagement, and information technology. The Center also has a tradition of cross-disciplinary programs and perspectives. Under the Center Scientist program, multidisciplinary faculty and researchers from our partner institutions have access to Center personnel and other resources for completion of a specified project or support of programs of research.

At the core of everything we do and the philosophy that founded the Center is a Population Health framework. This framework provides a research approach to better understand and address health and well being of communities. Population health focuses on identifying the determinants of health, disease, and well being in populations, designing and

“ Population health focuses on identifying the determinants of health, disease, and well being in populations, designing and implementing preventive or treatment interventions and measures their effectiveness against the health outcomes of a community. “ Ron Cisler, Ph.D.

implementing preventive or treatment interventions and measures their effectiveness against the health outcomes of a community.

Over the past decade, our landscape has changed dramatically, but the framework that we work under remains solid and effective. I am pleased to share with you this 2011 annual report, highlighting both samples of the great work happening in partnership with the Center and how we use the population health framework as a guide to improving the health of communities.



A handwritten signature in black ink that reads "Ron A. Cisler".

Ron Cisler, Ph.D.

Director, Center for Urban Population Health

Professor of Health Sciences and Public Health, UW-Milwaukee

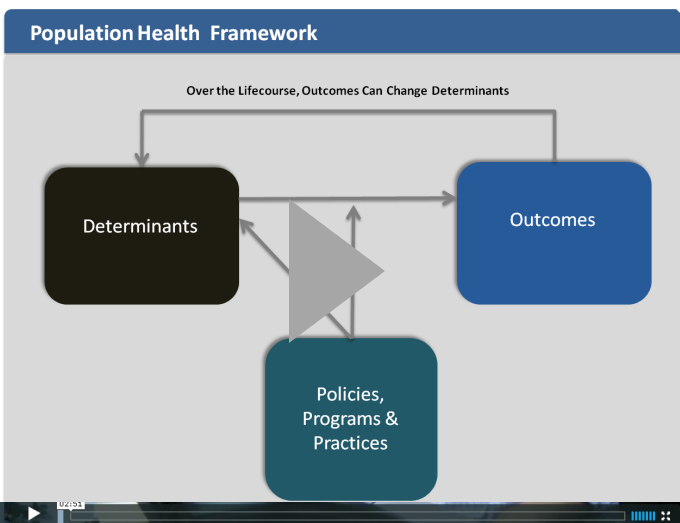
Professor of Population Health Sciences, UW School of Medicine and Public Health, UW-Madison



What is Population Health?

Population health has been described variously as: (1) A conceptual framework for thinking about why some populations are healthier than others, as well as the policy development, research agenda, and resource allocation that flow from it (Young 1998); (2) The health outcomes of a group of individuals, including the distribution of such outcomes within the group (Kindig and Stoddart 2003); and (3) The health of a population as measured by health status indicators and as influenced by social, economic, and physical environments; personal health practices; individual capacity and coping skills; human biology; early childhood development; and health services (Dunn and Hayes 1999).

For the Center for Urban Population Health, the population health perspective provides a research framework to better understand and address the health and well being of communities. ***Population health focuses on identifying the determinants of health, disease, and well being in populations, designing and implementing preventive and treatment interventions that promote the health and well being of populations, and measuring their effectiveness.***



Watch a short video describing population health at

<http://www.facebook.com/cuph.mke/videos>

Why Use this Framework?

The population health framework recognizes the complexity of the issues facing the health of our communities and provides an approach that can assess, address and evaluate. A population health framework is built on the premise that change must not be focused *only* on individuals, or families, or communities, but must involve individuals, families, communities, systems (such as the health, social service, educational or justice systems and sectors such as government and voluntary sectors) and the society as a whole.

This framework, in its grouping of health determinants recognizes the importance of both internal and external risk factors. This is important to both identifying opportunities for intervention and stimulating cross-sector partnerships to address community level issues affecting the health of our community.

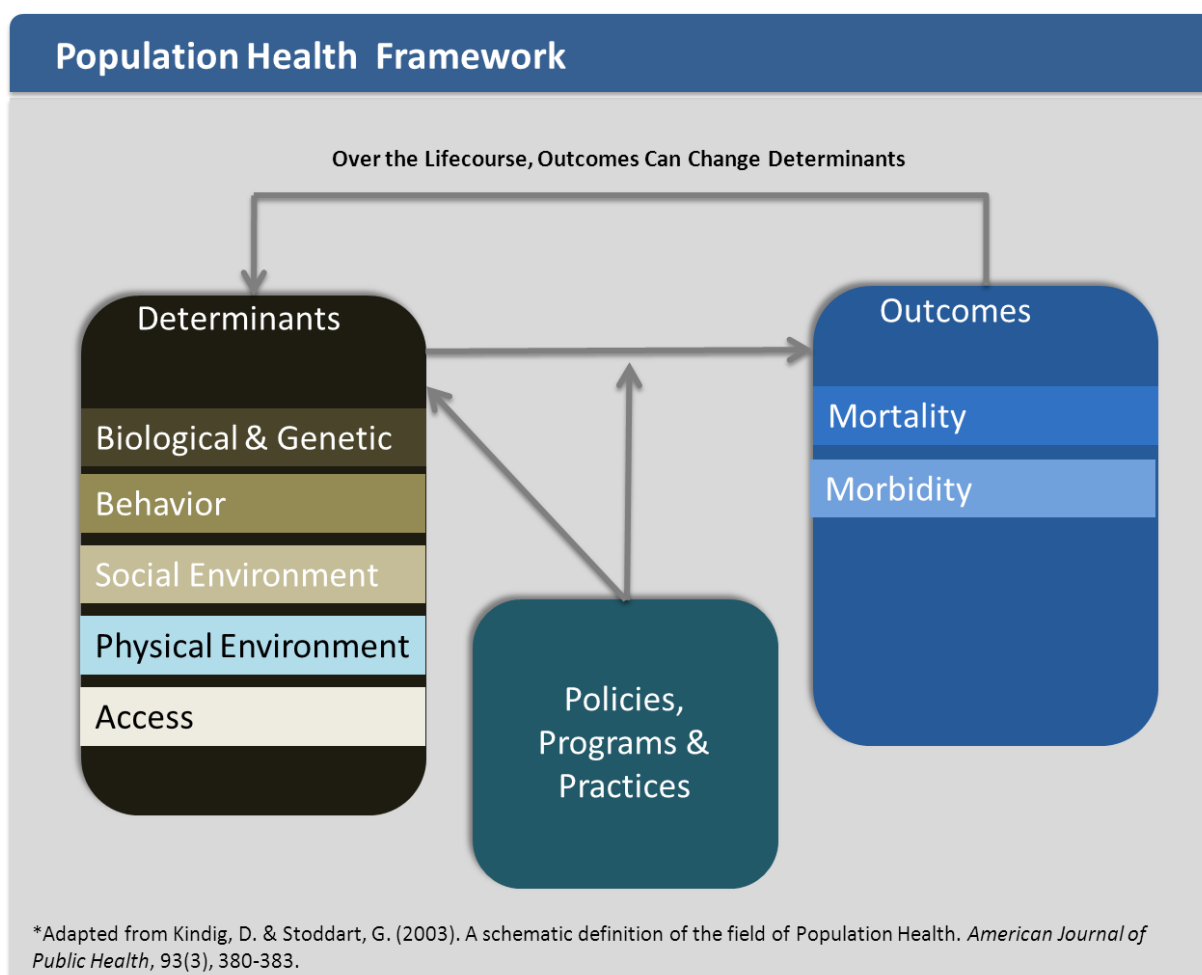
How Do We Use the Framework?

The Center for Urban Population Health realizes this through multidisciplinary, multi-institutional, multi-stakeholder partnerships which use a systematic approach to learn and address population health disparities that fall along the translational continuum from health sciences to community. This includes engaging in the community and including stakeholders from every level in the process.

Guided by current evidence, this approach has the promise of innovation and community impact. Equally important to this approach is the ***knowledge transfer*** that takes place among partners and between stakeholders through our work. The following pages provide examples of projects we have been working on and how they fit within the population health framework.



The Population Health Framework



Determinants have been described by Emeritus Professor, David Kindig of the University of Wisconsin School of Medicine and Public Health as: (1) Any factor, whether event, characteristic, or other definable entity, that brings about change in a health condition or other defined characteristic; and (2) A primary risk factor (causative factor) associated with the level of the health problem, that is the level of determinant influences the level of the health problem. Determinants can be broken down into five main categories (Kindig, 2007).

Biological and Genetic: "A proposed or established causal factor from the genetic composition of individuals or populations that affects health outcomes" (Kindig 2007). Examples of this can include age, race/ethnicity, previous birth outcomes, and nutrition status.

Behavioral: "A proposed or established causal factor based on individual personal choices or lifestyle or habits either spontaneous or in response to incentives" (Kindig 2007). Examples of this can include physical activity, breastfeeding, substance use, and extent of prenatal care.

Social: "A proposed or established causal factor in the social environment that affects health outcomes." (Kindig 2007) Examples of this can include social cohesion, socioeconomic status, residential segregation, racism, education, and family support.

Environmental: "A proposed or established causal factor in the natural and built environment that affects health outcomes" (Kindig 2007). Examples of this can include housing, exposure to toxins, and water quality.

Access: "A proposed or established causal factor in health care that affects health outcomes (e.g. access, quantity, and quality of health care services" (Kindig 2007). Examples of this can include primary care and access to health care services.

Policies: "A guide to action to change what would otherwise occur; a decision about the amounts and allocation of resources. Policy sets priorities, and guides resource allocation" (Kindig 2007).

Outcomes: "All the possible results that may stem from exposure to a causal factor from preventative or therapeutic interventions" (Kindig 2007).

Kindig, D. & Stoddart, G. (2003). A schematic definition of the field of Population Health. *American Journal of Public Health*, 93(3), 380-383.

Kindig, D., (2007) Understanding Population Health Terminology. *Milbank Quarterly*, 85,(1), 139-161.

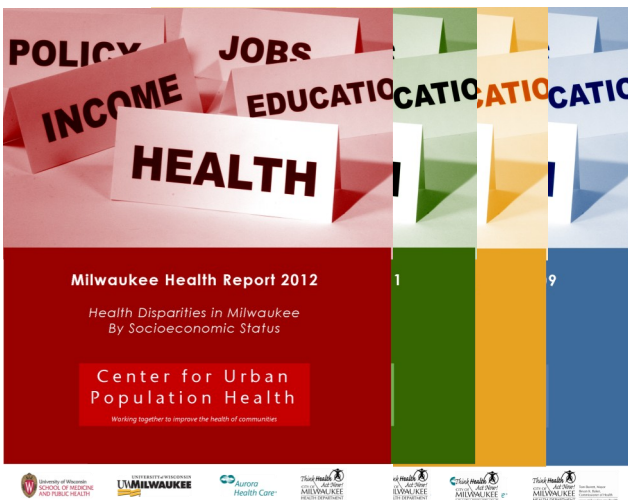


How We Use the Framework

The framework informs much of what we do at the Center. The following are examples of how we have incorporated the population health framework into what we do.

The Milwaukee Health Report

Many researchers have found that there is a relationship between people's socioeconomic status (SES, commonly measured as a combination of income and education) and their health. This has been documented in studies in the United States as well as in countries around the world. The relationship between SES and health has also been found to exist in the city of Milwaukee.



The Center for Urban Population Health and the City of Milwaukee Health Department have prepared the Milwaukee Health Report by analyzing local data in order to update what we already know about the relationship between health and socioeconomic status.

The goal of this report is to provide policy makers and community organizations with meaningful information that can be used in addressing Milwaukee's health issues.

Now in its fourth year, this report continues to summarize the current health of the city, as well as the distribution of key factors that may have implications for future health.

As the largest city in Wisconsin, Milwaukee contains 10.3% of the state's population. In 2008, the *Wisconsin County Health Rankings* compared Milwaukee's health outcomes and health determinants with the rest of the state; the City of Milwaukee ranked worse than all but one county in overall health outcomes, and worse than all but one county in health determinants, or risk factors for future health (Taylor, Athens, Booske, O'Connor, Jones, & Remington, 2008).

The Center gratefully acknowledges the foundational work of the University of Wisconsin Population Health Institute's *Wisconsin County Health Rankings*, which were first published in 2003 and included the City of Milwaukee beginning in 2006. The *Milwaukee Health Report* builds upon that work, specifically using the population health framework by examining the disparities in health outcomes and health determinants between different areas of Milwaukee, as defined by socioeconomic status (SES).

Below are the indicators updated each year in the report.

Determinants

- | | |
|---|---|
| Substance Use <ul style="list-style-type: none">• Cigarette smoking• Smoking during pregnancy• Binge drinking | Family and social support <ul style="list-style-type: none">• Single parent households• Inadequate social support |
| Diet and Exercise <ul style="list-style-type: none">• Physical inactivity• Obesity• Overweight• Inadequate fruit and vegetables consumption | Built Environment <ul style="list-style-type: none">• Radon risk• Housing built before 1940• Lead poisoning• Access to healthy food• Liquor license density |
| High-risk sexual behavior <ul style="list-style-type: none">• Chlamydia rate• HIV infection• Teen birth rate | Access to Care / Quality of care <ul style="list-style-type: none">• Uninsured adults• Did not receive needed health care• No routine checkup• No recent dental visit• No influenza vaccination• No pneumonia vaccination• No biennial mammography• No pap smear• No early prenatal care |
| Safety <ul style="list-style-type: none">• Violent assault• Did not wear seat belt | |
| Income <ul style="list-style-type: none">• Median income | |
| Education <ul style="list-style-type: none">• College degree | |

Outcomes

- | | |
|---|--|
| Mortality <ul style="list-style-type: none">• Premature death• Infant mortality | Morbidity <ul style="list-style-type: none">• Poor or fair health• Poor physical health days• Poor mental health days• Low birth weight• Preterm births |
|---|--|



Watch a short video to learn how our stakeholders use the report:
<http://vimeo.com/channels/cuph/20988118>



Wisconsin Perinatal Data Platform (PeriData.Net)

PeriData.Net®, a comprehensive web-based perinatal database, was created by a partnership among the Wisconsin Association for Perinatal Care (WAPC), the Center for Urban Population Health, and Wisconsin birth hospitals. PeriData.Net® serves as a platform for hospitals' internal administrative reporting and quality management functions and for secure electronic submission of selected fields to vital records and other external data registries. Birth hospitals own their own data in PeriData.Net®.

PeriData.Net® contains antepartum, intrapartum, and postpartum data on over **340,000 births** from **90 hospitals** in Wisconsin. These births account for approximately **90% of hospital births** since 2006. The data cover the spectrum from the many determinants of and including birth outcomes. This platform is heavily used for quality improvement efforts and has great potential for further research.

Salm Ward, T. C., Weiss, M., Steber, D., Conway, A., Marek, A., & Cisler, R. A. (Manuscript under review). PeriData.Net®: Use of a hospital-based perinatal data platform for quality improvement and to impact public health.

PeriData.Net Data Content

- Birth Circumstances
- Mother
- Infant
- Husband
- Father
- Pregnancy History
- Current Pregnancy
- Antepartum Risk Factors/Previous Pregnancies
- Antenatal Risk Factors/Current Pregnancy
- Antenatal Procedures
- Intrapartum Data
- Intrapartum Medications
- Intrapartum Procedures
- Birth Attendant
- Delivery
- Birth Outcome
- Nursery Care
- Maternal Postpartum Complications
- Neonatal Procedures
- Other Postpartum or Neonatal Information
- Abnormal Conditions of the Newborn
- Congenital Anomalies of the Newborn
- Maternal Discharge
- Perinatal Morbidity

CRIHB
Community and Research Information for Healthy Births

Local Data Across the Lifecycle, Affecting Healthy Births

Home | Determinants | Policies, Program & Practices | Outcomes | Definitions | References | Contact

The framework

A population health framework (Kindig & Stoddart, 2003; Kindig, 2007; Kindig, Asada, & Boska, 2008) will be used to better understand the factors – social determinants, interventions, and policies – that impact birth outcomes (see Figure 1). Using such a framework provides an opportunity to (1) verify patterns of health determinants over the life course, (2) explain birth outcomes in the population, (3) develop policies and interventions at individual and social (population) levels, and (4) clarify causal associations between, within, and across the determinants of health that in turn influence birth outcomes such as infant mortality, infant morbidity and quality of life (Blazes, Frank, Di Ruggiero, & Mansel, 2008). Our vision for future work is to engage residents, administrative leaders and

Publication Health Framework

Over the Lifespan, Outcomes Can Change Determinants

Determinant: Biological & Genetic, Behavior, Socio/Economic, Physical/Environmental

Outcomes: Mortality, Morbidity

Policies, Program & Practices

Community and Research Information for Healthy Births (CRIHB.org)

The goal of CRIHB is to create a data infrastructure that links, analyzes, and disseminates Milwaukee community data on factors linked with infant mortality and the associated disparities among racial and ethnic groups within a population health framework. Recent funding from the United Way of Greater Milwaukee for web development will provide broad public access to a data repository containing information on multiple social determinants of birth outcomes.

(Cisler, Frazer, Salm Ward, Schwebke, Bridgewater)

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Health of MILWAUKEE

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Home | About | Access | Behavior | Morbidity | Mortality | Physical Environment | Social Environment | Solutions

About
Posted on July 27th, 2012
Written by dfraser

Welcome

The Center for Urban Population Health is proud to offer this resource for our academic, community and governmental partners.

The Goal. This website supports one of the Center's strategic goals to *promote the interaction among producers and users of research to inform effective programs, policies and interventions.*

The Aim. The **Health of Milwaukee** is a platform to share local health related reports, publications and information in a centralized site that aims to reduce the barriers of use and support knowledge transfer among those who are creating and implementing policies, programs and seeking to improve practices in Milwaukee.

Share. The **Health of Milwaukee** is free and open to the public. The reports, publication and information are not solely Center materials. The content comes from a variety of sources. If you have a report or publication that focuses on the public and population level health of the greater Milwaukee area and would like to share it, feel free to contact us at info@healthofmilwaukee.org.

Sharing Local Data to Promote Local Solutions

Data Links

- American Community Survey
- Aurora Health Care Community Health Surveys
- Behavioral Risk Factor Survey
- Campana
- Evidence for Action: A Report on Violence and Health in Milwaukee Neighborhoods
- Milwaukee Census
- Milwaukee Health Report
- Wisconsin Interactive Statistics on Health

Health of Milwaukee

This new website supports one of the Center's strategic goals to **promote the interaction among producers and users of research to inform effective programs, policies and interventions.**

The **Health of Milwaukee** is a platform to share local health related reports, publications and information in a centralized site that aims to reduce the barriers of use and support knowledge transfer among those who are creating and implementing policies, programs and seeking to improve practices in Milwaukee.

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



The Center also leads and supports research that examines the various determinants of health. Here are two examples of work from the past year that focuses on maternal and child health and the determinants of health for each.

Quality of Life and Risk Factors among Children with Special Health Care Needs

Chronic health problems and disparities in access to care among children with special health care needs (CSHCN) have been widely documented. The federal Maternal and Child Health Bureau (MCHB) defines CSHCN as those who have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that generally required by children. Center authors Chen and Cisler examined the differences in health-related quality of life (HRQOL) between children with and without special health care needs, and identified risk factors associated with HRQOL in CSHCN. Utilizing the National Survey of Children's Health data, they found that HRQOL total scores were lower among CSHCN than children without special health care needs. Having multiple (>2) special health care needs was the strongest predictor of lower HRQOL. **Multiple determinants, younger, lower SES, health access barriers and poor maternal health were all associated with lower health-related quality of life.**

Chen H-Y, Cisler RA. (2011) Assessing health-related quality of life and risk factors among children with special health care needs in the United States. *Children's Health Care* 2011;40(4):311-325



Perceptions of Discrimination in Prenatal Care Experiences Among Low Income African-American Women

Early initiation of prenatal care leads to better birth outcomes. In the City of Milwaukee in 2007, only 74% of African American women initiated prenatal care in the first trimester compared to 85% of White women. (Milwaukee Health Department 2011) While 86% of White women received adequate prenatal care, only 74% of African American women received adequate prenatal care. (MHD 2011) In 2002, the Institute of Medicine (IOM) released a report "Unequal treatment" that noted disparities in the quality of care received by African Americans. The IOM charges that both covert and overt racism play a large role in these disparities. Center and UWM-Zilber School of Public Health faculty and staff partnered with the YWCA of Greater Milwaukee to examine the presence and nature of experiences of racial discrimination during prenatal care from the perspectives of African American women in a low income Milwaukee neighborhoods. The team held 6 focus groups and conducted 2 individual structured interviews. They found that women described perceiving mistreatment based on income level, type of insurance, and race, including a perceived lower quality of care at clinics accepting public insurance. The women's experiences fit closely within a framework of personally-mediated, institutionalized, and internalized racism.

Salm Ward, T. C., Mazul, M., Ngui, E., Bridgewater, F. D., & Harley, A. E. (Manuscript under revision). "You Learn to Go Last": Prenatal care experiences in a sample of low-income African-American women in Milwaukee.

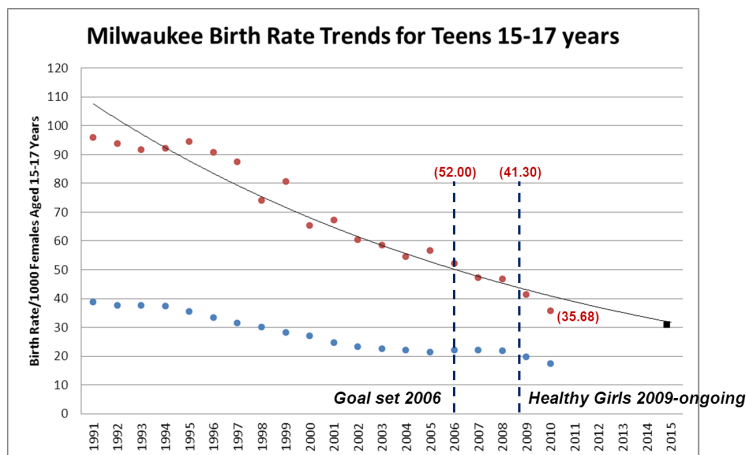
Outcomes

The Center also leads and supports research that examines various health outcomes. Here are two examples of Center work in assessing and measuring health outcomes on a population health level in Milwaukee.

Teen Pregnancy and Birth Rate Trends

Teen and unplanned pregnancy have been areas of interest and focus for the Center for Urban Population Health. Teen pregnancy presents increased risks to both mother and child, including preterm delivery, low birth weight, neonatal mortality, anemia, pregnancy-induced hypertension, and intra-uterine growth retardation. Babies born to teens are at a higher risk for poor academic achievement, behavioral problems later in life, dropping out of school, unemployment, early parenthood, and committing violent offenses. From 2001 through 2005, the city of Milwaukee had nearly 40% of the total births to teens 17 and younger in Wisconsin. The Center has taken this seriously and joined with United Way of Greater Milwaukee and many other stakeholders to better understand and address this population health issue.

A team of researchers from the Center and the epidemiologist from the City of Milwaukee Health Department analyzed city of Milwaukee trend data and calculated an evidence-based projected rate for the city. Based on the projected rate and input from community stakeholders, United Way and the Milwaukee Health Department officially announced a goal of 30 births per



thousand teens aged 15-17 years for 2015, a 46% reduction. With a goal set, the Teen Pregnancy Oversight Committee, United Way and the Milwaukee Health Department were able to appropriately align resources and target evidence-based programming to systematically address the issue and begin to track progress with great success.

Learn more about the [United Way Teen Pregnancy Goal Initiative](#). Also find the article published in the Wisconsin Medical Journal about the process.

Mori, N., Blair, K. A., Salm Ward, T. C., Bergstrom, J., Galvao, L., Cisler, R. A. (2009). Setting a Goal to Reduce Teen Births in Milwaukee by 2015. *Wisconsin Medical Journal*, 108(7), 365-369.

Aberrant Fetal Growth and Early, Late, and Postneonatal Mortality

Aberrant fetal growth encompasses small for gestational age (SGA) or large for gestational age (LGA). SGA is defined as neonatal birthweight below 10% for the gestational age, LGA is weight above 90%. Fetal growth abnormalities are linked with complications. The myriad complications associated with aberrant growth and the conflicting reports on mortality with LGA prompted the Center to inquire if SGA or LGA is associated with early (0-6 days after live birth), late (7-27 days), or postneonatal (28-364 days) mortality. The primary purpose of this population based study was to determine whether SGA or LGA is associated with increased risk of early, late, and postneonatal mortality, and identify other risk factors; the secondary purpose was to determine whether there are temporal changes in the 3 subtypes of infant mortality.

Center researchers used birth certificate data for nonanomalous singletons, delivered from 1996 to 2007, obtained for Milwaukee residents. SGA was a significant risk factor for early and late but not postneonatal mortality. The findings suggest that aberrant growth may influence early, late, and postneonatal mortality differently. When the analysis adjusts for confounding variables, SGA but not LGA is linked with increased mortality.

Chen, H-Y., Chauhan, S. P., Salm Ward, T. C., Mori, N., Gass, E. R., & Cisler, R. A. (2011). Aberrant Fetal Growth and Mortality (Early, Late, and Postneonatal): An Analysis of Milwaukee Births, 1996-2007. *American Journal of Obstetrics and Gynecology*, 204, 261.e1-10. PMID: [21256473](#).

Public Health Impact Initiative (PHII) for Improving Birth Outcomes

In late 2010, a *Public Health Impact Initiative* was created as a collaborative effort between the UW-Milwaukee Zilber School of Public Health, the City of Milwaukee Health Department, and other partners, and funded by the **Centers for Disease Control and Prevention**.

The initiative is composed of multiple components, all of which are focused on improving birth outcomes in Milwaukee.

- **Encouraging Safe Sleeping and Healthy Births**
- **Creating and advancing data Infrastructures to Support Practice and Innovation**
- **Intervening to Enhance Healthy Births**

Lead by investigators Cisler, Gass, and Swain, the PHII was implemented across seven separate projects, with the understanding that in order to have real impact, solutions have to address the various determinants and therefore incorporate a variety of strategies. The following are the seven projects implemented through this initiative:

- Expansion of Milwaukee Health Department “Cribs for Kids” program (Benton)
- Milwaukee Fetal and Infant Mortality Review (FIMR) Maternal Interviews (Michalski, Ngui, Gass)
- Milwaukee-based Social Marketing Campaigns (Strong Baby and Women 2 Women) (Halvorsen)



Photo: L-R Kia Brazil, mother of Strong Baby, Madyson Dixon, featured in the ad, Mayor Tom Barrett, Commissioner Bevan Baker and Center Director, Ron Cisler at the launch of the Strong Baby campaign event. (Photo: Milwaukee Courier / Robert A Bell)

- Community and Research Information for Healthy Births (CRIHB) – A data repository containing information on multiple social determinants of birth outcomes (Cisler)
- Keeping Families Together – supporting incarcerated substance abusing mothers and pregnant women (Rose & LeBel)
- Milwaukee Young Parenthood Study (Florsheim & Johnson)
- Cell Phone Pilot Project to increase mother/parent awareness of risk factors for prematurity (McRoy)

Learn more at: <http://www.uwm.edu/publichealth/research/phii>

PHII - Milwaukee Fetal and Infant Mortality Review Maternal Interview

(Michalski, Cisler, Ngui, Salm Ward)

Under additional funding from the Public Health Impact Initiative, the Fetal Infant Mortality Review’s goal is to learn what can be done to prevent fetal and infant deaths in Milwaukee and make recommendations for improved policy and practice.

The process includes the review of both medical and social circumstances surrounding individual stillbirths and infant deaths. This subproject supports interviews with mothers who have lost an infant to provide a better picture of the context in which the pregnancy and death occurred. The review investigates many health determinants of the mother and outcomes beyond mortality. This year additional questions were added about the social determinants of health (Cisler, Salm Ward). There are currently 11 recommendations formally made through the process that include improvements to policy, practice and programming.

This review process is a national model being implemented by a number of dedicated partners including the: City of Milwaukee Health Department, the State of Wisconsin, Wheaton Franciscan Healthcare, Children’s Community Health Plan, Aurora Health Care, Medical College of Wisconsin, Children’s Health Alliance, Froedtert, Columbia St. Mary’s, Bureau of Milwaukee Child Welfare, Wisconsin Association for Perinatal Care, Milwaukee Fire Department, Milwaukee Health Services and Children’s Hospital of Wisconsin.



Partnerships to Reduce Homicide

The Milwaukee Homicide Review Commission (MHRC) is a multi-level, multi-disciplinary, and multi-agency initiative aimed at reducing the number of homicides in Milwaukee. Using the public health approach, the MHRC has three goals:

- To gain a better understanding of homicide through strategic problem analysis;
- To develop innovative, effective responses; and

- To focus limited enforcement and intervention activities on identifiable risks.

The MHRC facilitates real-time crime data interpretation in order to inform decisions and make policy, practice and systems recommendations. Of the **300 recommendations** that have been formally made by the MHRC, **50% have been accomplished** with many more in progress. There has been a 52% homicide decrease in intervention districts vs. 9.2% in comparison districts. This collaborative has won Best Public



Health Program award by the Wisconsin Partnership Program.

This collaborative has also drawn attention from cities across the country, including Los Angeles, California and Kansas City, Kansas, who have looked to the Commission as a model review process.

Learn more at:
<http://city.milwaukee.gov/hrc>

O'Brien, M., Woods, L., & Cisler, R.A. (2007). The Milwaukee Homicide Review Commission: An Interagency Collaborative Process to Reduce Homicide. *Wisconsin Medical Journal*, 106(7), 385-388.

Milwaukee Health Care Partnership

With funding in part by the Robert Wood Johnson Foundation, the Milwaukee Health Care Partnership works with the Center to assess implementation of a health information technology to facilitate and improve processes that result in improved birth outcomes. The program has adapted an electronic referral/scheduling system for prenatal care for uninsured or Medicaid enrolled.

The program uses MyHealthDIRECT to schedule appointments at Federally Qualified Health Centers (FQHC) for pregnant women who present in local

hospital emergency departments and who report not having a medical home and are uninsured or enrolled in Medicaid without a regular primary care physician.

The Center is providing evaluation consultation and support, including identifying of outcomes and relevant indicators, facilitating data usage agreements between UW-Madison and FQHC's, partners with FQHC's to facilitate data collection, analysis, and preparing project evaluation summary documents.

MILWAUKEE HEALTH CARE PARTNERSHIP

The Milwaukee Health Care Partnership is made up of the 5 Health Systems and the Milwaukee FQHCs. Additional partners to this project include: Milwaukee Health Department, UW-Milwaukee and UW-Madison

(Cisler, Rice, Kessler, Chen, Frazer)

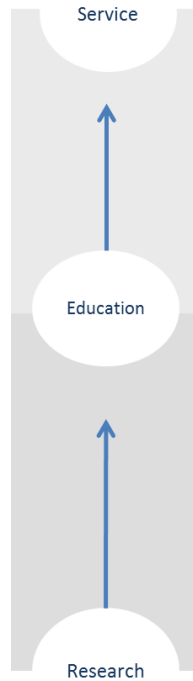


Performance Scorecard

This scorecard provides an overview of key performance indicators of the Center's work in 2011 as it relates to the general areas of research, education and service.

Of particular note this year, the Center has supported **90+** university, health care and community investigators. This year the Center reached an all time high in supporting **115+** research and education projects. Center faculty and staff have also served on **80** community-based committees, coalitions and workgroups, helping to address our community's health disparities and population health concerns.

In 2011, Center faculty and staff contributed to the submission of **42** extramural grants totaling **\$16 million**. To date, **18** grants were awarded with the full award to all partners totaling over **\$4.4 million**.



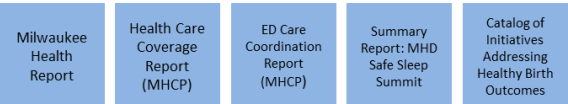
Committee Participation



Review



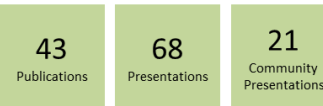
Data Driven Report Products



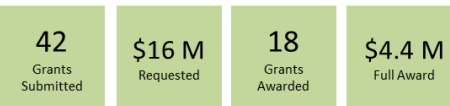
Mentoring



Dissemination



Extramural Support

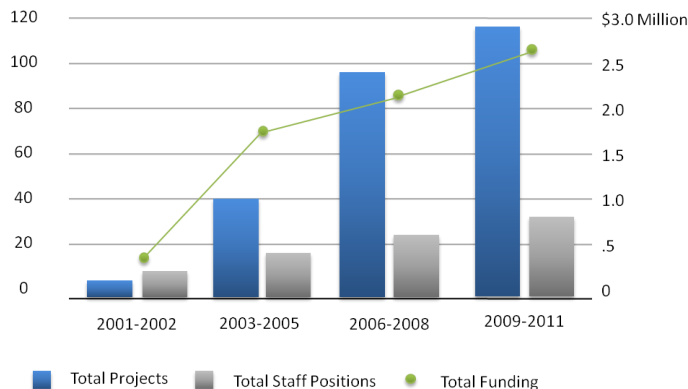


Human Capacity



Growth Indicators

Averages over 2-3 year periods



The Center has experienced a tremendous amount of growth since its inception. This graph demonstrates growth as it relates to total projects, staff positions and funding over 1- and 2-year rolling periods. For example, the Center has experienced core and extramural funding growth from an average of **\$600,000** to its current average of **\$2.7 million**.



Human Capacity

Leadership

Ron A. Cisler, Ph.D.

Director, Center for Urban Population Health; Professor of Health Sciences and Public Health, University of Wisconsin–Milwaukee; Professor of Population Health Sciences, University of Wisconsin School of Medicine and Public Health

Dennis J. Baumgardner, M.D.

Associate Director for Center for Urban Population Health; Director of Campus Research, Aurora UW Medical Group; Professor of Family Medicine, UW School of Medicine and Public Health

Executive Committee

Patricia Arredondo, Ed.D.,

UW–Milwaukee

Luis (Tony) Báez, Ph.D.,

The Council for the Spanish Speaking, Inc.

Bevan Baker, F.A.C.H.E.,

City of Milwaukee Health Department

Dennis Baumgardner, M.D., (ex officio)

Aurora UW Medical Group

Deborah Blanks, C.C.A.P. (Chair),

Social Development Commission

Marc Drezner, M.D.,

UW School of Medicine & Public Health

Chukuka Enwemeka, Ph.D., F.A.C.S.M.

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Patrick Falvey, Ph.D.,

Aurora Health Care

Cindy Haq, M.D.,

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Sally Lundeen, Ph.D., R.N.,

UW–Milwaukee

Patrick Remington, M.D.,

UW School of Medicine & Public Health

Jeffrey Stearns, M.D., (ex officio)

Aurora UW Medical Group

Bruce Van Cleave, M.D.,

Aurora Health Care

2011 Faculty & Staff

Jacqueline Apkarian

Lee Banfi, M.B.A., C.P.A., F.H.F.M.A.

Kiley Bernhard, M.P.H

Karen Blanchard

Farrin Bridgewater, B.A.

Han-Yang Chen, M.S.

Jennifer Evertsen, M.S.

Paul Florsheim, Ph.D.

David Frazer, M.P.H.

Loren W. Galvao, M.D., M.P.H.

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Amy Harley, Ph.D.

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Nicole Robinson, M.P.H., M.S.W.

JoAnne Sabir, M.S.W.

Trina Salm Ward, M.S.W., C.C.R.C.

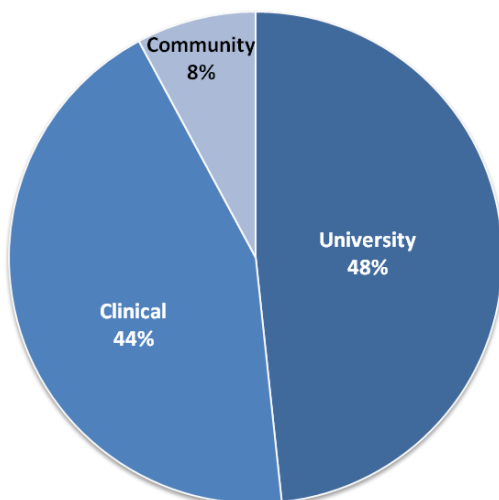
Dale Steber, M.S.

Geoffrey Swain, M.D., M.P.H.

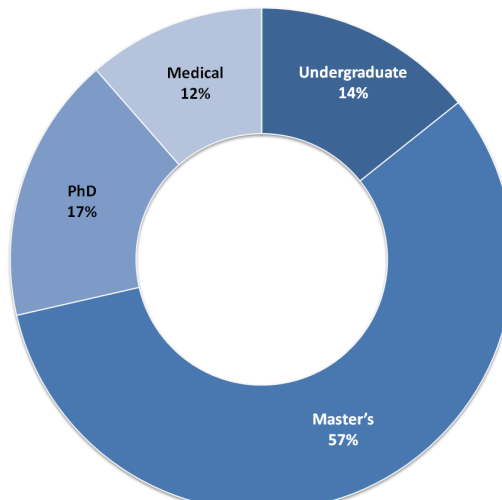
Anne Marie Talsky, B.A.

Simeona Trayanov, M.S.

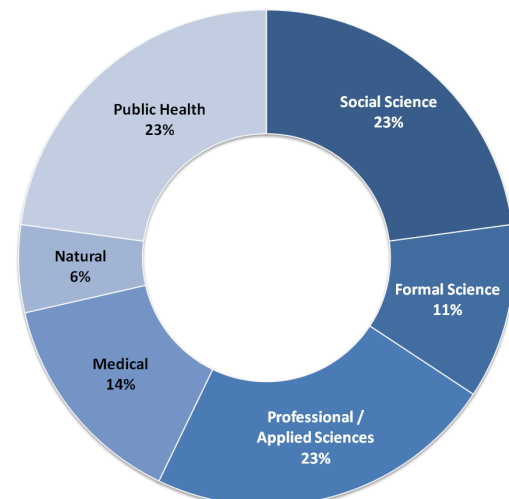
Virginia Zerpa-Uriona, M.P.H.



Investigators



Faculty and Staff Education



Faculty and Staff Disciplines



Center Scientists and Affiliates with Active Projects in 2011

Alex Adams, MD, UW School of Medicine and Public Health	Anthony Caceres, MD, Aurora UW Medical Group	John Frey, MD, UW School of Medicine and Public Health
Betty Amuzu, MD, Aurora UW Medical Group	Ann Conway, RN, MS, MPA, WI Association for Prenatal Care	Eric Gass, PhD, UW-Milwaukee Zilber School of Public Health and the Milwaukee Health Department
Andy Anderson, MD, MBA, Aurora Health Care	Thomas Chua, MD, Aurora Health Care	Luther Gaston, MD, Aurora UW Medical Group
Nicole Agresano, MPH, United Way of Greater Milwaukee	Ron Cisler, PhD, UW-Milwaukee / UW School of Medicine and Public Health	Loren W. Galvao, MD, MPH, UW-Milwaukee College of Nursing
Leah Arndt, PhD, UW-Milwaukee, College of Education	James Cleary, MD, UW School of Medicine and Public Health	Bonnie Halvorsen, MA, UW-Milwaukee
Patricia Arredondo, EdD, UW-Milwaukee Office of Academic Affairs	Ahmed Dalmar, MD, Aurora Health Care	Cindy Haq, MD, UW School of Medicine and Public Health
Sanjay Asthana, MD, UW School of Medicine and Public Health	David Demets, MD, UW School of Medicine and Public Health	Amy Harley, PhD, UW-Milwaukee Zilber School of Public Health
Howard Bailey, MD, UW School of Medicine and Public Health	Marc Drezner, MD, UW School of Medicine and Public Health	Mark Huber, MPH, Aurora Health Care
Karla Bartholomew, PhD, UW-Milwaukee Zilber School of Public Health	Ella Dunbar, MS, Social Development Commission	Paul Hunter, MD, UW School of Medicine and Public Health and the Milwaukee Health Department
Luis "Tony" Baez, PhD, Council for the Spanish Speaking, Inc.	Dorothy Edwards, PhD, UW Madison School of Education	Chun-Yuan Huang, UW-Milwaukee Zilber School of Public Health
Bevan Baker, FACHE, Milwaukee Health Department	Chukuka Enwemeka, PhD, F.A.C.S.M., UW-Milwaukee, College of Health Sciences	Barbara Horner-Ibler MD, Bread of Healing Clinic
Dennis Baumgardner, MD, Aurora UW Medical Group	Corinne Engelman, MSPH, PhD, UW School of Medicine and Public Health	Tom Jackson, MD, UW School of Medicine and Public Health
Jake Bidwell, MD, Aurora UW Medical Group	Patrick Falvey, PhD, Aurora Health Care	Arshad Jahangir, MD, Aurora Health Care
Deborah Blanks, MS, CCAP Social Development Commission	John Fangman, MD, Medical College of Wisconsin	Sheri Johnson, PhD, Medical College of Wisconsin
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Maebe Brown, MS, WISEWOMEN Program	Michael Fiore, MD, UW School of Medicine and Public Health	Ariba Kahn, MD, Aurora UW Medical Group
Rich Brown, MD, UW School of Medicine and Public Health	Paul Florsheim, PhD, UW-Milwaukee Zilber School of Public Health	



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Tina Mason, MD, MPH, Aurora UW Medical Group

James Marx, PhD, Aurora Health Care

Mary Mazul, CNM, UW-Milwaukee, Wheaton Franciscan Services

Susan McRoy, PhD, UW-Milwaukee, Computer Science

Mike Michalkiewicz, PhD, Aurora Health Care

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Paul Peppard, PhD, UW School of Medicine and Public Health

Steven Percy, UW-Milwaukee

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Hong Yu, PhD, UW-Milwaukee College of Health Sciences

J. Zhang, PhD, UW-Milwaukee College of Health Sciences

Tian Zhao, PhD, UW-Milwaukee College of Engineering and Applied Sciences



Select Community Dissemination

- **Bishop, N., Frazer, D., Salm Ward, T.C.** (2011). Unplugged: How SES Factors and Race Influence Birth Outcomes. Video produced and posted at: <http://vimeo.com/26479223>
- **Bishop, N., Frazer, D.** (2011). Integrating Community Engagement with Health Research. Video produced and posted at: <http://vimeo.com/26178034>
- **Center for Urban Population Health.** (2011). Cited in *The Hill*, a political blog, in the article, "Personalizing medicine to combat the cost of health care." By former Representative Nancy Johnson (July 14, 2011). Available at: <http://thehill.com/blogs/congress-blog/healthcare/171459-personalizing-medicine-to-combat-the-cost-of-health-care>
- **Cisler, R. A.** (2011). Quoted in the *Diverse Issues in Higher Education*, "Univ. Of Wisconsin partnering with communities to reduce black infant deaths." By Katti Gray. *Diverse Issues in Higher Education* online at <http://diverseeducation.com/article/16220/> (August 16, 2011).
- **Cisler, R. A.** (2011). Quoted in the *Milwaukee Journal Sentinel* Health & Science Today, "Milwaukee health report shows no gains." By K. Herzog. JS Online at <http://www.jsonline.com/blogs/news/127787983> (August 15, 2011).
- **Evertsen & colleague's** research article, "Increasing Incidence of Pediatric Type 1 Diabetes Mellitus in Southeastern Wisconsin: Relationship with Body Weight at Diagnosis" was recently highlighted in *Milwaukee Magazine's News Buzz* (see: <http://www.milwaukeebuzz.com/?p=474943>). The study was originally published in *PLoS one*.
- **Frazer, D.** (2011). Quoted in the *Milwaukee Journal Sentinel's* article, "Milwaukee Infant Mortality Rate Still High, Despite Years of Effort, Millions Spent." By C. Stephenson & B. Poston (May 7, 2011). Available at: <http://www.jsonline.com/news/milwaukee/121449039.html>
- **Frazer, D., Dunbar, E., Holland, S., Grande, K.** (2011). Integrating Community Voice with Research. Poster profiling the Survey of the Health of Wisconsin's Community Advisory Board, *Social Development Commission Board & Staff Annual Meeting*, Manpower Headquarters, Milwaukee, WI (June 23).
- **Frazer, D.** (2011). How healthy are our neighborhoods? A discussion beyond the Milwaukee Health Report. Interactive presentation at a COA Youth and Family Center, *Community Café* (September 8, 2008).
- **Green-Harris, G.** (2011). Investing in Ourselves as a Community by Becoming Involved in Research. Oral presentation, *Milwaukee Community Engaged Research Network*, Milwaukee, WI (June 2).
- **Herrmann, M. & Lemke, M.** (2011). An Introduction to LGBT Intimate Partner Violence. Presentation, *Wisconsin Coalition for Domestic Violence Staff Training*, Madison, WI (January).
- **Herrmann, M., Lemke, M., Coley, B., Turell, S.** (2011). It's Time: Building an Organized Response to LGBT Intimate Partner Violence. Oral presentation at the *Wisconsin Coalition for Domestic Violence Service Provider Day of Networking* (May)
- **Lemke, M., Harris, T.** (2011). Implementation of the Safe Dates Curriculum: LGBT Student Adaptation. Presented at the *Diverse and Resilient HIV Prevention Institute* (July).
- **Hunter, P.** (2011). Quality Improvement in Public Health: An Introduction to "Plan-Do-Check-Act" Cycles. Presentation to the STD/HIV Program Quality Improvement Team at the City of Milwaukee Health Department. Milwaukee, WI (March).
- **Hunter, P.** (2011). Quality Improvement in Public Health: An Introduction to "Plan-Do-Check-Act" Cycles. Presentation to the Restaurant Inspectors QI Team at the City of Milwaukee Health Department. Milwaukee, WI (September).
- **Hunter, P.** (2011). Trouble Shooting Panel Discussion (moderator), *12th Annual Immunization Symposium*, City of Milwaukee Health Department. 60 minutes of collating questions from 300 nurses and other health professionals from throughout southeastern Wisconsin and presenting them to 5 panelists. Milwaukee, WI (September 22). Link: <http://city.milwaukee.gov/ImmunizationProgram123591.htm>
- **O'Brien, M.** (2011). Milwaukee Homicide Review Commission. Presentation to *Milwaukee Donor's Forum*, Milwaukee, WI (September 22).
- **O'Brien, M.** (2011). Milwaukee Homicide Review Commission. *American Prosecutors Association Meeting*, Chicago, IL (September 28-30).
- **O'Brien, M. & Robinson, N.** (2011). *2010 Homicides and Nonfatal Shootings: Data Report for Milwaukee, WI*. Available at: www.milwaukee.gov/hrc
- **Rice, J. & Kessler, C.** (2011). Milwaukee Health Report and Zilber Neighborhood Data. Oral presentation to Joseph J. Zilber Foundation Operations Committee, Milwaukee, WI (September 14).
- **Robinson, N. & O'Brien, M.** (2011). Milwaukee Homicide Review 1st Quarter Newsletter. Released late June. Available at: www.milwaukee.gov/hrc
- **Robinson, N.** (2011). Nuts and Bolts of Evaluation: Parts I & II. Half-day trainings at the *Non-Profit Center of Milwaukee*, Milwaukee, WI (June 16 & 23).
- **Robinson, N., Hudak, S., Jaeger, C.** (2011). Spatial Analysis of Safe & Sound's Block 168 Watch Clubs. Presentation of findings to *Safe and Sound's Community Partners*, Milwaukee, WI (June).
- **Robinson, N. & O'Brien, M.** (2011). Department of Justice National Homicide Review Training and Technical Assistance Project. Milwaukee, WI (August 16-17).
- **Robinson, N. & O'Brien, M.** (2011). Department of Justice National Homicide Review Training and Technical Assistance Project. Milwaukee, WI (September 20-21).
- **Salm Ward, T. C. & Mazul, M.** (2011). "You Learn to Go Last": Prenatal care experiences in a sample of low-income African-American women in Milwaukee. Invited oral presentation at the *Children's Community Health Plan Lunch and Learn* meeting, Wauwatosa, WI (July 1).
- **Salm Ward, T. C., Mazul, M., & Bridgewater, F. D.** (2011). "You Learn to Go Last": Prenatal care experiences in sample of low-income African-American women in Milwaukee. Oral presentation to leadership at the *YWCA of Greater Milwaukee*, Milwaukee, WI (July 14).
- **Salm Ward, T.C. & Bridgewater, F.** (2011). *Catalog of Initiatives Addressing Disparities in Birth Outcomes in Wisconsin, April 2011*. Center for Urban Population Health, Milwaukee, WI. Available at: <http://www.cuph.org/projects/birth-outcome-disparities-catalog/material/3381/binary/>



Select Academic Dissemination

- **Baumgardner, D. J., Havlena, J., Steber, D., Lemke, M.** (2011). Maximum lifetime blood lead levels and Attention-Deficit/Hyperactivity Disorder diagnosis in children: Eastern Wisconsin, USA (Abstract). *Family Medicine*, 43(Suppl 1):15.
- **Baumgardner, D. J., Paretzky, D. P., Baeseman, Z. J., & Schreiber, A.** (2011). Effects of Season and Weather on Blastomycosis in Dogs: Northern Wisconsin, USA. *Medical Mycology*, 49(1), 49-55. Link: <http://informahealthcare.com/doi/abs/10.3109/13693786.2010.488658>
- **Baumgardner, D. J., Paretzky, D., Baeseman, Z., Schreiber, A.** (2011). Effects of season and weather on blastomycosis in dogs: Northern Wisconsin, USA (Abstract). *Family Medicine*, 43 (Suppl 1):9.
- **Baumgardner, D. J., Temte, J. L., Gutowski, E., Agger, W. A., Bailey, H., Burmester, J. & Banerjee, I.** (2011). The differential diagnosis of pulmonary blastomycosis using case vignettes: A Wisconsin Network for Health Research (WINHR) Study. *Wisconsin Medical Journal*, 110(2):68-73. PMID: [21560560](https://pubmed.ncbi.nlm.nih.gov/21560560/).
- **Begun, A. L., Berger, L. K., Salm Ward, T. C.** (2011). Building a lifecourse context for interpreting alcohol change attempt and formal treatment efforts among individuals with alcohol dependency. *Journal of Social Work Practice in the Addictions*, 11(2):101-123. Link: <http://www.informaworld.com/smpp/content~db=all~content=a938060769>
- **Berger, L., Chen, H-Y., Arria, A., Fendrich, M. & Cisler, R. A.** (2011). Sociodemographic correlates of energy drink consumption with and without alcohol: Results of a community sample. *Addictive Behaviors*, 36, 516-519.
- **Chen, H-Y., Baumgardner, D. J., & Rice, J.** (2011). Health-related Quality of Life Among Adults with Chronic Conditions in the U.S.: Implications for Interventions (Abstract). *Family Medicine*, 43(Suppl 1):12.
- **Chen, H-Y., Baumgardner, D.J., & Rice, J.R.** (2011). Health-related quality of life among adults with multiple chronic conditions in the U.S.: Implications for strategies. *Preventing Chronic Diseases*, 8, 1-9. PMID: [PMC3044020](https://pubmed.ncbi.nlm.nih.gov/215604020/).
- **Chen, H-Y., Baumgardner, D. J., Rice, J. P., Swain, G. R., Galvao, L., & Cisler, R. A.** (2011). *Milwaukee Health Report 2011: Health Disparities in Milwaukee by Socioeconomic Status*. Center for Urban Population Health: Milwaukee, WI. Available at: <http://www.cuph.org/mhr/2011-milwaukee-health-report.pdf>
- **Chen, H-Y., Chauhan, S. P., Ananth, C. V., Vintzileos, A. M., Abuhamad, A. Z.** (2011). Electronic fetal heart rate monitoring and its relationship to neonatal and infant mortality in the United States. *American Journal of Obstetrics and Gynecology*, 204, 491.e1-10 (chosen for "Reports of Major Impact" and "Editor's Choice"). Link: <http://www.ajog.org/article/S0002-9378%2811%2900480-7/abstract>
- **Chen, H-Y., Chauhan, S.P., Ananth, C.V., Vintzileos, A.M., Abuhamad, A.Z.** (2011) Electronic Fetal Heart Rate Monitoring and Infant Mortality: A Population-Based Study in the United States. (Abstract) *Am J Obstet Gynecol*, 204 (Suppl 1):S43-44.
- **Chen, H-Y., Chauhan, S. P., Salm Ward, T. C., Mori, N., Gass, E. R., & Cisler, R. A.** (2011). Aberrant Fetal Growth and Mortality (Early, Late, and Postneonatal): An Analysis of Milwaukee Births, 1996-2007. *American Journal of Obstetrics and Gynecology*, 204, 261.e1-10. PMID: [21256473](https://pubmed.ncbi.nlm.nih.gov/21256473/).
- **Chen H-Y, Cisler RA.**(2011) Assessing health-related quality of life and risk factors among children with special health care needs in the United States. *Children's Health Care* 2011;40 (4):311-325
- **Chen H-Y,** (2011) Vanness DJ, Golestanian E. A Simplified Score for Transfer to a Long-Term Care Hospital among Ventilated Patients. *Am J Crit Care*, 20:e122-e130; doi:10.4037/ajcc2011775.
- **Evertsen, J.M., Bade, E.** (2011). Lifestyles of the poor and underserved: Unhealthy behaviors at Primary Care Clinics in Milwaukee, WI, USA (Abstract). *Family Medicine*, 43(Suppl 1):14.
- **Florsheim, P., McArthur, L., Hudak, C., Heavin, S., Burrow-Sanchez, J.** (2011). The Young Parenthood Program: Preventing intimate partner violence between adolescent mothers and young fathers. *Journal of Couple and Relationship Therapy*, 10(2), 117-134. Link: <http://www.tandfonline.com/doi/abs/10.1080/15332691.2011.562823>
- **Johnson, T.S.** (2011). Healthy birth outcomes. *Journal of Obstetrics, Gynecologic, and Neonatal Nursing*, 40(1), 84-85.
- **Johnson, T.S., Malnory, M.E., Nowak, E.W. & Kelber, S.** (2011). Using Fetal and Infant Mortality Reviews to improve birth outcomes in an urban community. *Journal of Obstetrics, Gynecologic, and Neonatal Nursing*, 40(1), 86-97. PMID: [21121947](https://pubmed.ncbi.nlm.nih.gov/21121947/).
- **Katz, M. L., Ferketich, A. K., Broder-Oldach, B., Harley, A. E., Reiter, P. L., Paskett, E. D., & Bloomfield, C. D.** (epub ahead of print 21 August 2011). Physical activity among Amish and non-Amish adults living in Ohio Appalachia. *Journal of Community Health*.
- **Katz, M. L., Ferketich, A. K., Paskett, E. D., Harley, A. E., Reiter, P. L., Lemeshow, S., Westman, J., A., Clinton, S. K., & Bloomfield, C. D.** (2011). Cancer screening practices among Amish and non-Amish adults living in Ohio Appalachia. *Journal of Rural Health*, 27, 302-309.
- **Lechuga, J., Swain, G. R., Weinhardt, L. S.** (2011). The cross-cultural variation of predictors of HPV vaccination intentions. *Journal of Women's Health*, 20(2):225-230. PMID: [21314448](https://pubmed.ncbi.nlm.nih.gov/21314448/).
- **Lechuga, J., Swain, G. R., Weinhardt, L. S.** (In Press). Perceived need for a parental decision aid for the HPV vaccine: Content and format preferences. *Journal of Health Promotion Practice*. PMID: [21444922](https://pubmed.ncbi.nlm.nih.gov/21444922/).
- **Lechuga, J., Swain, G. R., Weinhardt, L. S.** (2011). The impact of framing on intentions to vaccinate daughters against HPV: A cross-cultural perspective. *Annals of Behavioral Medicine*, 42(2), 221-226.
- **Martinez, F. D., Chinchili, V. M., Morgan, W. J., Boehmer, S. J., Lemanske, R. F., Mauger, D. T., Strunk, R. C., Szefer, S. J., Zeiger, R. S., Bacharier, L. B., Bade, E., Covar, R. A., Friedman, N. J., Guilbert, T. W., Heidarian-Raissy, H., Kelly, H. W., Malka-Rais, J., Mellon, M. H., Sorkness, C. A. & Taussig, L.** (2011). Use of beclomethasone dipropionate as rescue treatment for children with mild persistent asthma (TREXA): A randomized, double-blind, placebo-controlled trial. *Lancet*, 377(9766), 650-657.
- **Ngu, L. & Florsheim, P.** (2011). The development of relational competence among young high-risk fathers across the transition to parenthood. *Family Process*, 50(2):184-202. PMID: [21564060](https://pubmed.ncbi.nlm.nih.gov/21564060/).
- **Palta, M., Chen, H-Y., Kaplan, R. M., Feeny, D., Cherepanov, D., Fryback, D. G.** (2011). Standard error of measurement of five health utility indexes across the range of health for use in estimating reliability and responsiveness. *Medical Decision Making*, 31(2), 260-269.
- **Pizur-Barnekow, K., Rhyner, P. M., Doering, J., & Patrick, T.** (2011). An interdisciplinary approach to health literacy for education, research, and practice in early childhood intervention. *Perspectives on Language Learning and Education*, 18(2), 62-67. Available at: <http://div1perspectives.asha.org/cgi/content/abstract/18/2/62>
- **Smith, T. W., Uchino, B. N., Florsheim, P., Berg, C. A., Butner, J., Hawkins, M., Henry, N. J., Beveridge, R. M., Pearch, G., Hopkins, P. N., Roon, H. C.** (2011). Affiliation and control during marital disagreement, history of divorce, and asymptomatic coronary artery calcification in older couples. *Psychosomatic Medicine*, 73(4):350-357. PMID: [21364198](https://pubmed.ncbi.nlm.nih.gov/21364198/).



PARTNERS

AFRICAN AMERICAN CHAMBER OF COMMERCE CENTER ON AGING COMMUNITY: LEADERSHIP COUNCIL COALITION OF WISCONSIN AGING GROUPS TRIAD GROWING POWER HEALTH CARE TASK FORCE ON PRE- AND INTER-CONCEPTION CARE HEALTHY BIRTH OUTCOMES: ELIMINATING RACIAL AND ETHNIC DISPARITIES STATEWIDE ADVISORY WORKGROUPS HISPANIC YOUTH COLLABORATIVE LGBT YOUTH HEALTH COALITION MILWAUKEE AGING CONSORTIUM MILWAUKEE ALLIANCE FOR SEXUAL HEALTH MILWAUKEE COMMUNITY HEALTH ASSESSMENT MILWAUKEE COUNTY DEPARTMENT ON AGING: WELLNESS COUNCIL MILWAUKEE COUNTY NUTRITION AND PHYSICAL ACTIVITY COALITION MILWAUKEE FATHERHOOD INITIATIVE MILWAUKEE FETAL INFANT MORTALITY REVIEW MILWAUKEE HEALTH CARE PARTNERSHIP INC MILWAUKEE HOMICIDE REVIEW COMMISSION MILWAUKEE LATINO HEALTH COALITION MILWAUKEE REGIONAL CANCER CARE NETWORK MILWAUKEE RIVER BASIN PARTNERSHIP PARTNERSHIP TO ELIMINATE DISPARITIES IN INFANT MORTALITY ACTION LEARNING COLLABORATIVE - FOCUS ON FATHERS/MALES RACINE INFANT MORTALITY HEALTH CENTER SOUTHSIDE ORGANIZING COMMITTEE STATEWIDE ADVISORY COMMITTEE TO IMPROVE HEALTHY BIRTH OUTCOMES TASK FORCE ON FAMILY VIOLENCE TEEN PREGNANCY PREVENTION NETWORK UNITED WAY'S TEEN PREGNANCY OVERSIGHT COMMITTEE URBAN FOOD AND FITNESS STEERING COMMITTEE URBAN FOOD AND FITNESS: RESEARCH AND EVALUATION COMMITTEE WISCONSIN BREAST CANCER COALITION WISCONSIN CANCER COUNCIL WISCONSIN COALITION AGAINST DOMESTIC VIOLENCE WISCONSIN FETAL ALCOHOL SPECTRUM DISORDERS PREVENTION AND INTERVENTION PROJECT ADVISORY COMMITTEE WISCONSIN HEALTH WATCH WISCONSIN NETWORK FOR HEALTH RESEARCH WISCONSIN PUBLIC HEALTH ASSOCIATION WISCONSIN RESEARCH AND EDUCATION NETWORK WORKING COA GOLDN CONSORTIUM ON THE INCLUSION AND CARE OF THE UNDER REPRESENTED IN CLINICAL RESEARCH AIDS RESOURCE CENTER OF WISCONSIN ALL SAINTS HEALTHCARE ST LUKES HEALTH PAVILION ALMA CENTER ALZHEIMER'S ASSOCIATION AMERICAN CANCER SOCIETY - MIDWEST DIVISION AMERICAN GERIATRICS SOCIETY AMERICAN HEART ASSOCIATION AMERY REGIONAL MEDICAL CENTER ARMS AROUND ARMANI NEIGHBORHOOD ASSOCIATION ASHA FAMILY SERVICES ASPIRUS WAUSAU HOSPITAL ASSET BUILDERS OF AMERICA, INC AURORA BAYCARE MEDICAL CENTER AURORA CENTER FOR SENIOR HEALTH AND LONGEVITY AURORA CONSOLIDATED LABORATORIES AURORA FAMILY CARE CLINIC AURORA HEALTH CARE INC AURORA LAKELAND MEDICAL CENTER AURORA MEDICAL CENTER KENOSHA AURORA MEDICAL CENTER MANITOWOC COUNTY AURORA MEDICAL CENTER OSHKOSH AURORA MEDICAL CENTER WASHINGTON COUNTY AURORA MEMORIAL HOSPITAL OF BURLINGTON AURORA MIDWIFERY CLINIC AURORA MILWAUKEE HEART INSTITUTE AURORA SCHOOL BASED NURSES AURORA SHEBOYGAN MEMORIAL MEDICAL CENTER AURORA SINAI MEDICAL CENTER AURORA SINAI SEXUAL ASSAULT TREATMENT CENTER AURORA ST LUKES COMPREHENSIVE CARDIOVASCULAR CARE LLP AURORA ST LUKES EMERGENCY DEPARTMENT AURORA ST LUKES FAMILY PRACTICE CENTER AURORA ST LUKES TRANSPLANT RESEARCH LAB AURORA UW MEDICAL GROUP BALDWIN AREA MEDICAL CENTER BAY AREA MEDICAL CENTER BAYVIEW NEIGHBORHOOD ASSOCIATION BEAVER DAM COMMUNITY HOSPITAL BELLIN MEMORIAL HOSPITAL BELOIT MEMORIAL HOSPITAL BENEDICT CENTER BERLIN MEMORIAL HOSPITAL BLACK HEALTH COALITION BLACK RIVER MEMORIAL BOSQUEL AREA HEALTH CARE BROWN UNIVERSITY BURNETT MEDICAL CENTER CATHOLIC CHARITIES CENTER FOR ADDICTION AND BEHAVIORAL HEALTH RESEARCH CENTER FOR THE STUDY OF DIVERSITY IN HEALTHCARE CENTER FOR TOBACCO RESEARCH AND INTERVENTION CITY OF MILWAUKEE CITY OF MILWAUKEE HEALTH DEPARTMENT CITY OF RACINE HEALTH DEPARTMENT COLUMBIA CENTER LLC COLUMBIA ST. 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