

NIH Biosketch for Community Partner

When a community partner is participating on a research team submitting a grant proposal to the National Institutes of Health (NIH), they may be required to submit a biosketch. NIH recently changed the required format for the biosketch. This is the link to the official template for the new format: http://grants.nih.gov/grants/funding/424/SF424R-R_pilot-biosketchsample_VerC.docx

It may be unclear or uncomfortable for community partners to complete this form since it primarily focuses on academic and research areas. Community partners may be concerned about their answers to sections like “contribution to science” and how they will be evaluated by NIH reviewers.

This document provides a summary of responses to a request for advice made by ARCC to our partners and members of the Community Campus Partnerships for Health Community-Based Participatory Research Listserv (<https://mailman13.u.washington.edu/mailman/listinfo/cbpr>).

Some biosketch examples have been modified to remove identifying information.

Responses and Examples

- Example below from Marjie Mogul is using the new form. The other examples are not using the new form but may be helpful.
- I haven't done a NIH submission with community partners since the change a couple months ago so don't have an example. You might want to talk to a department administrator to see if they have thoughts based on their read of what is being asked for in that section.
- I would argue that community partners could complete that section the way that researchers do but w/o listing publications, but more with an eye toward the practice and policy implications of their work.
- Maybe helpful for the academic partner to list the roles of the stakeholder. Will the stakeholder help frame the research questions? Design the interventions? Contribute insights about how an intervention needs to be tailored to be implemented or disseminated in this context? Then list the stakeholder's experience, training, roles in the GS, roles in the school, etc. does (s)he have any degrees? Is (s)he on a community board or the PTO? Are there ways to demonstrate organizational and writing skills, influence, commitment, etc?
- Most stakeholder's don't have pubs but may have other examples of "written influence" or experience. It's also okay to state - no scientific publications.
- Seems like a great question for the Program Officer of the R03. I wonder if they'd be amenable to the header being slightly modified for a community PI or Co-I so that it read like, “Contribution to Community Health and Wellbeing” or something along those lines. And even if they wouldn't approve a heading change, I wonder if they'd be OK if all of the content were focused on those things vs. scientific accomplishments. In the end, the new biosketch is supposed to be more transparent and helpful for reviewers to quickly and easily see what an investigator contributions are, so this would be in line with that.
- NIH now allows us to list research products other than peer-reviewed pubs as evidence of contributions: “For each of these contributions, reference up to four peer-reviewed publications *or other non-publication research products (can include audio or video*

products; patents; data and research materials; databases; educational aids or curricula; instruments or equipment; models; protocols; and software or netware) that are relevant to the described contribution.” This should help a lot! We were able to list a key research partner’s technical report; database; website; and informational package (all relevant to the proposed study).

- Be clear in the biosketch or elsewhere what each person’s contribution to the project will be, that this is a collaboration in which each partner brings necessary and complementary skills. Good luck ---NIH is very science oriented, and applied and collaborative projects, for example, have more difficulty ---better if the funding is specifically for applied projects.
- I just submitted an application this past October – yes, it was the old format but many of the same issues surfaced. What I had my partners do [all non-academics] was to really work on the personal statement. They typically had little to add under positions/honors. For pubs and research support – they had nothing. We just wrote in ‘none’. At this point, I am awaiting a funding decision – but the summary statement had no negative comments about the community partners – rather, they were very complimentary about the engagement of the community and the central role they played in all aspects of the project. So I would say that as long as the rest is clearly written and they have a well written personal statement, I would not worry too much about the other parts of the bio sketch.
- Karen Calhoun, based at the University of Michigan, would be willing to assist community partners working on the new form. Her email is kdcalhou@med.umich.edu. Her most current biosketch in the old format is included in the attached samples.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2.

Follow this format for each person. **DO NOT EXCEED FOUR PAGES**

NAME Marjorie Mogul	POSITION TITLE Director of Research		
eRA COMMONS USER NAME MOMobile			
<i>EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
The George Washington University	Bachelors	1987	Economics
Pennsylvania State University	Masters	1994	Business
Bryn Mawr College	Ph.D.	2004	Social Work

A. Personal Statement

As a community-based Research Director, I am uniquely qualified to carry out the proposed research. I have a Ph.D. in Social Work, a unique combination of research expertise and applied service. I have worked as an applied researcher in the community for nine years, as the Director of Research at a Community-Based Organization (CBO), the Maternity Care Coalition (MCC). The agency uses a Community Health Worker model to provide services to low-income pregnant and postpartum women and infants. Being based in a CBO grounds me in the community. In my role at MCC, I collaborate with front line staff, clients and community members to develop, test and implement evidence-based research and invite academic partners to support our research mission. I will lead the project within the agency and serve in the role of community-academic translator, educating our staff and engaging them in the project and will work closely with the project investigator team to ensure that all participating MCC staff actively engage in the trial.

I built and lead the Maternal Health and Early Education Research Consortium of Philadelphia, a group of over 60 researchers from all the major academic and medical institutions in Philadelphia established to serve a translational role between the university and the community, and facilitate inter-institutional collaboration. Academic partners are strongly engaged in supporting community-based research collaborations. The Consortium serves as a neutral base from which to balance implementation and dissemination of evidence-based interventions with community needs and serves as a community base to facilitate research on topics of mutual interest and avoid duplication of effort. I am or have been a co-investigator on several Community-Based Participatory Research (CBPR) studies, including an NIMH R21 grant in collaboration with partners at Children's Hospital of Philadelphia, "Facilitating Effective Referrals for Postpartum Depression". I have a pending CBPR application with NICHD on which I am the lead investigator, leading a team of academic partners from: Drexel, Thomas Jefferson and Temple Universities, and the University of Pennsylvania. I was the lead Investigator on a project funded by a regional grant from the Aetna Foundation to implement the Postpartum Weight Management Study.

I serve on several local universities' Community Advisory Boards: the Robert Wood Johnson Clinical Scholars Program housed at the University of Pennsylvania, the Thomas Jefferson University's MPH Advisory Board and Drexel University's Maternal and Child Health Working Group. I supervise Masters theses for MPH and MSW students from all of these institutions.

Publications Related to this Application

Price, S.K., Kready, S.F., Mogul, M., Cohen-Filipic, K. and Davey, T. (2013). Partnership Process Guidelines: Social Work Perspectives on Creating and Sustaining Real-World University-Community Partnerships. Journal of Community Engagement and Scholarship, (6)1, 45-54.

Boyd, R.C., Mogul, M. & O'Hara, M.W. A Pilot Investigation to Enhance Behavioral Health Referral for Perinatal, Low-Income Women With Mood Disorders. Progress in Community Health Partnerships: Research, Education, and Action (in press).

Mogul, M. Producing relevant research: How to engage the community in designing effective public health programs. Virtual poster presented at the AcademyHealth's 7th Annual Conference on the Science of Dissemination and Implementation, Bethesda, Maryland, December 8th-9th.

Mogul, M. How to build a bridge for community-campus engagement: The Maternal and Child Health Research Consortium. Poster presented at the Community-Campus Partnerships for Health 13th International Conference, Chicago, Illinois, May 1st, 2014.

B. Positions and Honors

Employment

2006 to Present	Director of Research, Maternity Care Coalition
2005-2006	Project Manager, Rhors Study, University of Pennsylvania School of Medicine, Department of Obstetrics and Gynecology, Center for Research on Reproduction and Women's Health
2002-2004	Research Analyst, TANF Evaluation Program, West Chester University Graduate School of Social Work
1996-2000	Instructor, Research Design and Data Analysis, Bryn Mawr College Graduate School of Social Work
1997-1998	Research Assistant, University of Pennsylvania Center for Health Services Policy Research
1995-1997	Research Assistant, Bryn Mawr College Graduate School of Social Work
1992-1993	Graduate Assistant, Penn State Great Valley

Professional Societies and Public Advisory Committees

2013	Reviewer for special NIH section: Leadership for a Clinical Research Network on HIV/AIDS & HIV-associated infections in Pediatric & Maternal Populations
2013-present	Member, Thomas Jefferson University Master in Public Health Community Advisory Board
2006-present	Member, Robert Wood Johnson Clinical Scholars program Community Advisory Board
2006-present	Member, Drexel University's Maternal and Child Health Working Group
2008-present	Member, American Public Health Association
2008-2012	Member, Albert Schweitzer Fellowship program Community Advisory Board

C. Contribution to Science

Community-Based Participatory Research My primary contribution to science has been to apply the CBPR principles developed by Barbara Israel from within a community-based setting. I built and lead a community-based Research Consortium established to serve a translational role between the university and the community, and facilitate inter-institutional collaboration among over 60 researchers from all the major

academic and medical institutions in Philadelphia The consortium is a neutral base from which inter-institutional collaborations can grow and serves as a way to test and adapt evidence-based interventions to solve real-world problems in maternal and child health. Many collaborations have evolved from the consortium. I have collaborated on, and led, maternal and child health research studies with academic partners from Drexel, Thomas Jefferson, Rutgers, LaSalle and Temple Universities, the University of Pennsylvania, the Children's Hospital of Philadelphia and Georgetown University.

Community Translator As a community-based academic Researcher, I have developed expertise in translating science into the lay language of the community. I have been successful at implementing randomized trials into a community setting, which is usually problematic given the historic mistrust of the research process by community members. Staff and clients are well educated and informed about the benefits of the process and are enthusiastic about further participation in research.

Tucker Edmonds, B., Mogul, M., and Shea, J.A. (2015). Understanding Low-income African American Women's Expectations, Preferences, and Priorities in Prenatal Care. Family and Community Health (38)2 149-157.

Mogul, M. and Boyd, R.C. (2013). "Measuring Capacity Building to Conduct Perinatal Depression Research Among Low-income Women". The Community Psychologist (46)3, 22-23.

Price, S.K., Kready, S.F., Mogul, M., Cohen-Filipic, K. and Davey, T. (2013). Partnership Process Guidelines: Social Work Perspectives on Creating and Sustaining Real-World University-Community Partnerships. Journal of Community Engagement and Scholarship, (6)1, 45-54.

Wright, C., Bilder, D., DeBlasis, T., Mogul, M., Rubin, D. and Shea, J. (2013). Psychosocial Factors Associated with Gestational Weight Gain in a Low-Income Cohort. Journal of Healthcare for the Poor and Underserved, 332-343.

D. Research Support

Ongoing Research Support

Agency funding through federal grants and private foundations

Completed Research Support

National Institutes of Mental Health

05/04/09 – 03/31/11

Facilitating Effective Referrals for Postpartum Depression, Community Based Participatory Research R21 (Co-PI)

The major goal of this award is to use a community based participatory research approach for examining the current referral activities for women screened with high levels of postpartum depression symptoms and to develop a manualized intervention to help with the referral process.

The University of Pennsylvania

The Pregnancy Weight Management Study 1/1/2013-6/30/2014

The goal of this award is to maintain the implementation of a multi-media weight management intervention for postpartum women in five community sites using a randomized design.

Aetna Foundation

1/1/2012 – 06/30/14

The Pregnancy Weight Management Study

The goal of this award is to implement a multi-media weight management intervention for postpartum women in eight community sites using a Cluster Randomized Crossover design.

Florida State University

9/1/2012-8/31/2014

Evaluating the Short-term Impact of the *Partners for a Healthy Baby* Curriculum

The goal of this award is to evaluate the impact of a home visiting curriculum on short-term maternal and child outcomes for women enrolled in one of two home visiting programs.

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME: Cassandra Harris

eRA COMMONS USER NAME (credential, e.g., agency login):

POSITION TITLE: Project Manager

EDUCATION/TRAINING (*Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.*)

INSTITUTION AND LOCATION	DEGREE (if applicable)	Completion Date MM/YYYY	FIELD OF STUDY
Purdue University, West Lafayette, IN	BA	05/1983	Community Health
Illinois State University, Normal, IL	MS	08/1985	Health Education

A. Personal Statement

For over 26 years, I've been involved in research aimed at reducing the burden of cancer among African Americans. I became involved with the National Black Leadership Initiative on Cancer (NBLIC), a NCI Community Network Project at its inception. When NCI funding ended, I continued to chair and direct the NBLIC Houston Coalition's partnerships in cancer education, lay health worker training and cancer research collaborations. In addition, as the Manager of Health Education at MD Anderson Cancer Center, Department of Health Disparities Research, Center for Community-Engaged Translational Research - Community and Populations Core, I support researchers in their efforts to translate scientific discoveries into long lasting real-world interventions and programs. I have become a trusted resource in the community and believe that my experience and community connections enable me to be a valuable asset to any research project.

B. Positions and Honors**Positions and Employment**

Manager, Health Education - M. D. Anderson Cancer Center	1999-Present
Outreach Coordinator - Cancer Information Service (CIS)	1992-1997
Assistant Health Educator - Howard University Student Health Center	1990-1992
Health Educator - Cook County Department of Public Health	1986-1989
Health Educator - Howard University Cancer Center	1989-1990
Health Educator - Anchor HMO	1985-1986

Honors

Certified Health Education Specialist (CHES) - 1992
Public Affairs Achievement Award - 1996
MD Anderson's Outstanding Employee Award - 2002
MD Anderson's Staff Educator Award - 2005
Masters Certified Health Education Specialist (MCHES) – 2012
Department of Health Disparities Research – Employee Recognition - 2014

Professional & Honorary Organizations

National SOPHE and Texas Society of Public Health Education Member (Past-President)
American Public Health Association Member
African American Health Coalition Member (Past – Vice President)
Houston Health Educator's Network Member
National Black Leadership Initiative on Cancer Member (Chair/President)
Buckner International – (Past Board Member)
Breast Health Collaborative of Texas Member (Immediate Past Chair)

Susan G. Komen Foundation (Education Committee)

C. Contribution to Science

1. I serve on several breast cancer research teams here at MD Anderson and work with breast organizations like Sisters Network, Angels Surviving Cancer, Re-construction of a Survivor, Pink Isn't Always Pretty, Komen Foundation and the Komen Tissue Bank at Indiana University to address and impact breast cancer survivorship issues, through research funding from PCORI, Susan G. Komen and Cancer Prevention Research Institute of Texas.

2. Provided leadership for the Houston Coalition of NBLIC on several Community Network Projects: Down Home Healthy Living, Stay Beautiful Stay Alive, and For Men Only. Lessons learned from these projects contributed to an emerging body of literature identifying the disturbing mortality rates of the cancers which disproportionately affect African Americans compared to those of other racial and ethnic groups and best practices to overcome them. The Houston Coalition has assisted NBLIC with carrying out its mission of education, research, and service by mobilizing cancer survivors, advocates and community leaders to purposefully address cancer disparities and health inequalities in African American communities. NBLIC Houston serves as one of eighteen community partners who currently participate in an NCI-funded R01 research project which tests several approaches to disseminating an intervention to promote colorectal cancer screening among African Americans. The Houston Coalition's contribution has been through assistance with data collection, participant recruitment and facilitator training.

Complete List of Published Work in My Bibliography:

N/A

D. Research Support

On-going Research Support

1R01CA166785-01 (Smith)

05/03/2012-03/31/2017

National Cancer Institute

Efficacy-to-Effectiveness Transition of an Educational Program to Increase Colorectal Cancer Screening

The overall goal of our research is to identify the most efficacious approach to disseminate an evidence-based intervention (EPICS, Educational Program to Increase Colorectal Cancer Screening) for promoting colorectal screening in African Americans and to identify the factors associated with its effectiveness.

Role: Coalition Chair/Director, Group Facilitator

Community Grant

01/01/2013-06/01/2015

Prevent Cancer Foundation

TIPS: Developing Lifestyle Modification Tips for the Down Home Healthy Living The goal is to develop and evaluate the lifestyle tips component of the Down Home Healthy Living Cookbook (DHHL 2.0) using a community-based participatory research approach to promote colorectal cancer risk reduction (i.e., screening, dietary intake and physical activity) among African American women.

Role: Coalition Chair/Director

Completed Research Support

5 U01 CA 86274-04 (Satcher)

04/04/2000-03/31/2005

National Cancer Institute

National Black Leadership Initiative on Cancer II: Special Populations Network

The purpose of this study was is to build robust and sustainable infrastructures within the African American community to promote cancer awareness and conduct cancer control research. Role: Coalition Chair/Director

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Jane Smith		POSITION TITLE Patient Advocate	
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
New Town University, New Town, MA	BSN	06/75	Nursing

NOTE: The Biographical Sketch may not exceed four pages. Follow the formats and instructions below.

Personal Statement

Briefly describe why your experience and qualifications make you particularly well-suited for your role (e.g., PD/PI, mentor, participating faculty) in the project that is the subject of the application. Within this section you may, if you choose, briefly describe factors such as family care responsibilities, illness, disability, and active duty military service that may have affected your scientific advancement or productivity.

I am both a breast cancer survivor and patient at New Town Medical Center and a former nurse at New Town City Hospital (now New Town Medical Center), which puts me in a unique position to provide insight from both perspectives. I had my first breast cancer diagnosis in the 1990's and there were no support groups. I helped to lead a support group to address this need and to improve the experience for other women in my community. I have been rewarded richly through my work with newly diagnosed breast cancer patients, receiving from them far more than I would have expected and they have provided me with enormous support in my current breast cancer recurrence. I am excited to have this opportunity to help mentor and train the next generation of breast cancer researchers.

Positions and Honors**Research Support**

AD-XXXX-XXXX

PI: Jones

10/01/13-09/30/16

PCORI

Eliminating Patient Identified Barriers to Care. To develop a patient navigation program that uses lay health workers to address patients' barriers and to coordinate cancer care services, leading to more timely care. Role: Member, Patient Advisory Board

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Calhoun, Karen	POSITION TITLE Clinical Research Associate (Detroit), University of Michigan Institute for Clinical & Health Research (MICHHR)		
eRA COMMONS USER NAME (credential, e.g., agency login) KDENISE1			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
University of Michigan, Ann Arbor, MI		1974-78	Mechanical Engineering
Wayne State University, Detroit, MI	BA	1986	Interdisciplinary Studies
University of Detroit, Detroit, MI	MA	1992	Interdisciplinary Studies
Wayne State University, Detroit, MI	Certificate	1995	Economic Development
Wayne State University, Detroit, MI	Post Graduate	2000-05	Political Science (Urban Politics); Geography/Urban Planning

A. Personal Statement

Policy and service leadership to improve healthcare access, encourage disease prevention, health promotion and eliminate health disparities locally and nationally. Develop, coordinate and encourage clinical health research efforts utilizing community-based participatory research and implementation/translational science locally and nationally. Encourage research priorities directly reflect community and practitioner needs; build community-academic partnerships and advocate for sustainable research.

Design and manage collaborative intervention models fostering equity in public health and youth, community and economic development. Skilled in fund development, facilitating informed decision making and consensus, deliberative action for community health improvement, and multidisciplinary collaboration and bi-directional partnerships. Design/administer and managed a portfolio of special projects and developmental processes to spearhead new community health initiatives and outline implications of issues, policy and corresponding action.

Career accomplishments include encouraging community and academic partner leadership and community engaged leadership with the Michigan Institute for Clinical & Health Research (MICHHR); board leadership to launch the largest nonprofit literacy provider (ProLiteracy Detroit) in the State of Michigan; start-up coordination of The Kresge Foundation's Detroit Program; staff and board leadership with Starfish Family Services, the largest social service provider for children in Out-Wayne County, Michigan; and as Vice President for Community Health with the Greater Detroit Area Health Council, local project director for the first national Community-Based Participatory Research clinical trials (in nine US cities) funded by the Robert Wood Johnson Foundation.

B. Positions and Employment

- 2014 - Coordinator/Consultant, St. John-Providence Health System, School-Based Health Centers
- 2011 - Clinical Research Associate (CRA), Co-Facilitator (2010-present), Michigan Institute for Clinical & Health Research, University of Michigan Health System & Medical School, Ann Arbor, MI
- 2007 - Senior Consultant (CRA, 2009-11), Senior Health Officer (2010, in-kind as of 2011)
City Connect Detroit, Detroit, MI
- 2003 - 2007 Vice President for Community Health, Greater Detroit Area Health Council, Detroit, MI

- 2001 - 2004 Part-Time Lecturer, Political Science, Wayne County Community College District, Detroit, MI
- 1999 - 2003 Independent Consultant - City Connect Detroit, Greater Detroit Area Health Council, The Kresge Foundation, United Negro College Fund, United Way for Southeast Michigan/W.K. Kellogg Foundation Youth Initiatives Program, City of Detroit, University of Michigan, other
- 1995 - 1999 Program Officer, "Detroit Initiative" Managing Officer, The Kresge Foundation, Troy, MI
- 1993 - 1995 Research Assistant/Project Director, Addiction Research Institute, Department of Community Medicine, School of Medicine, Wayne State University, Detroit, MI
- 1993 - 1987 Detroit Division Manager, Community Planning & Problem Solving; and Program Specialist, The Center for Volunteerism; United Way for Southeast Michigan, Detroit, MI
- 1979 - 1986 Houseparent; and Volunteer Coordinator; Youth Living Centers (now Starfish Family Services), Westland, MI
- 1978 - 1979 Associate Engineer, General Motors Corporation, GM Technical Center, Warren, MI

Other Experience, Professional Memberships and Community Leadership (Select)

- 2013 - Michigan Department of Community Health (MDCH): (1) Biotrusts for Health, Vice Chair and member-at-large; (2) State Innovation Model Advisory Committee, Workforce Workgroup
- 2013 Eunice K. Shriver National Institute of Child Health & Human Development, National Institutes of Health, Special Emphasis Panel Review (PAR-12-102), Conference Series (R13)
- 2012 - Progress in Community Health Partnerships (peer reviewed journal), John Hopkins University, Associate Editor, Editorial Board
- 2012 - 2013 Research Centers in Minority Institutions (RCMI), Translational Research Network (RTRN), Biospecimens Workgroup
- 2012 - Deliberative Engagement of Communities In Decisions about Research Spending (DECIDERS), Steering and Evaluation Committees; Co-Chair, Regional Team Focus Groups; MDCH/DECIDERS: Healthy Michigan Evaluation Committee and AHRQ Steering Committee
- 2012 Indiana University, Clinical Translational Science Initiative, Community Engagement Program, CTSA2 Community Web Portal, Advisory Group
- 2011 - National Institutes of Health, Clinical Translational Science Awards (CTSA), (1) Community Engagement Key Function Committee, (2) Outcomes of Community Engagement Workgroup, (3) Metrics and Measures Subgroup
- 2011 - University of Michigan Institute for Clinical & Health Research: 1) Research Ethics/Integrity and Regulatory Knowledge Support Programs, Advisory Core Group, 2009-2014; 2) Community Engagement Program External Review Co-Chair, 2014; 3) Co-Facilitator, Community Engagement Coordinating Council (CECC), 2010 - present; 4) CECC Pilot Grant Review Committee, Chair, 2011 – 13; 5) CECC Metrics Workgroup, Facilitator, 2013-14; 6) Symposium Planning Committee.

Honors

- 2011 - 2012 Participant (selected), 1st and 2nd National Community Partner Forum on Community-Engaged Health Disparity Research," Community Campus Partnerships for Health and Center for Community Health Education Research and Service
- 2014 Gottlieb Scholarship, Community Campus Partnerships for Health, From Rhetoric to Reality: Achieving Authentic, Equitable, & Transformative Partnerships. April/May 2014, Chicago, Ill.

C. Peer Reviewed Publications

Marriott, Lisa, Nelson, David, Shauntice, Allen, Calhoun, Karen, Eldredge, Christina, Kimminau, Kim, Lucero, Robert, Pineda-Reyes, Fernando, Rumala, Bernice, Varanasi, Arti, Wasser, June, Shannon, Jackilen, (2012). "Using Health Information Technology to Engage Communities in Health, Education and Research." Science Translational Medicine, American Association for the Advancement of Science.

Aguilar-Gaxiola S, Ahmed S, Franco Z, Kissack A, Gabriel D, Hurd T, Ziegahn L, Bates NJ, Calhoun K, Carter-Edwards L, Corbie-Smith G, Eder M, Ferrans C, Hacker K, Rumala BB, Strelnick H, Wallerstein N., (2014).

“Towards a Unified Taxonomy of Health Indicators: Academic Health Centers and Communities Working Together to Improve Population Health.” Academic Medicine, Journal of the Association of American Medical Colleges.

Robert M Anderson, EdD, Karen Calhoun, MA, Celeste B Choate, MLIS, E. Hill De Loney, MA, Adam Paberzs, MPH, Carolyn M Sampsel, PhD, ANP, FAAN, Donald R Vereen, MD, MPH, Marc A Zimmerman, PhD. (2014) “Guidelines for community-based partners for reviewing research grant applications. Lessons learned from the Michigan Institute for Clinical Health and Research Community Engagement Core (CERC).” Clinical and Translational Science. 2014

Grieb, S., Ph.D., Clegg Smith, K., Ph.D., Eder, M., Ph.D., Calhoun, K., MA, Tandon, S.D., Ph.D. “Qualitative Research and Community-based Participatory Research: Considerations for Effective Dissemination in the Peer-reviewed Literature.” Progress in Community Health Partnerships. Accepted 2014.

Solomon, S., Bullock, S., Calhoun, K., Crosby, L., Eakin, B., et al. (2014). “Piloting a nationally disseminated, interactive human subjects protection program for community partners: Unexpected lessons learned from the field.” Clinical and Translational Science.

D. Research Support

Ongoing Research Support (Select)

UL1RR024986 (MICHR) Kaplow, Calhoun (PIs) 2012 - 2016
Integrating Evidence-Based Assessment, Training, and Treatment of Childhood Maladaptive Grief and Traumatic Stress (or Detroit Needs Assessment)
Examine links between race, culture, circumstances surrounding death, and development of maladaptive grief using a new measure, the Multidimensional Grief Reactions Scale (MGRS: Layne, Kaplow, Pynoos, 2011) to better assess/diagnose youth and design patient centered treatment protocols using the Trauma & Grief Component Therapy (Layne, Saltzman, Kaplow, et al., 2001, 2008, 2013). Over 50 behavioral health therapists trained, screened 300 youth using the MGRS, UCLA Post Traumatic Stress Disorder (DSM-V) and Short Mood/Feelings Questionnaire to validate the MGRS and UCLA PTSD (DSM-V version) in all Detroit school-based and school-linked health centers and select nonprofits (including the region’s largest Arab American and American Indian/Alaskan Native providers). Data organized as both a city-wide and organizational needs assessment. Effort sustained through partners intake processes.
Role – Co-Principal Investigator

U79 SM061192 (SAMSHA) Kaplow (PI) 2012 - 2016
UM Trauma & Grief (TAG) Center for Youth: Promoting Community-Wide Best Practices; housed at UM Psychiatry Department and University of Texas Health Science Center (Houston)
Provide evidence-based training, assessment, treatment, community-wide dissemination of trauma-informed, developmentally attuned, and culturally appropriate best practices for traumatized and/or grieving children and families.
Role – Community Liaison, Research Team

Completed Research Support (Select)

UL1RR024986 (MICHR) Anderson (PI) 2012 -
2014 Community Seminars Addressing Health Implications of Obesity, Diabetes and Diabetes Related Depression
Three seminars and interactive discussions held in Detroit (public housing community), Flint and Washtenaw County on Obesity and Type 2 Diabetes, Living Well with Type 2 Diabetes, and Diabetes and Depression, presented by the Michigan Center for Diabetes Translational Research.
Role – Research Team

UL1RR024986 (MICHR) Koschmann, Calhoun (Co-PIs) 2012 - 2013
Dissemination of Evidence-Based Practices in Community Treatment Settings
Increase expertise in Cognitive Behavioral Therapy (CBT) among community-based clinical staff with school-based/school-linked health centers and nonprofits to address pediatric depression/anxiety among student users in Detroit/Wayne County; 3 day training, online free measures portfolio, 4 month bi-weekly conferencing.
Role – Co-Principal Investigator

1-386006309-A1 (Clinical Translational Science Award) Stenick (PI) 2010 - 2014
Ethical Protections in Community Engaged Research
Developed a nationally implementable, locally deliverable human research participants training workshop for community-based researchers, collaborators/staff at 9 National Institutes of Health Clinical Translational Science Awards sites nationally for learning and to support national training requirements; National Institutes of Health supplemental funding. Sustainability planning, manuscript published on lessons learned.
Role – Research Team

Maternal & Child Health Community Training Program Boulton (PI), Calhoun (Co-I) 2010 - 2012
Enhance the quality of practice among frontline community health workers serving vulnerable, MCH populations in the city of Detroit. Recruit/staff community advisory board, convene (5) focus groups (1 in Spanish) for providers and clients, design/administer needs assessment on the quality of practice, facilitate community leadership on content/delivery of (5) workshops and a full day conference supporting needs assessment findings, and disseminate findings; funded by The Kresge Foundation.
Role – Co-Investigator

Michigan BioTrusts for Health, Michigan Department of Community Health (MDCH) 2010
Convene two community forums in Detroit (including a session in Spanish in Detroit's Hispanic/Latino Southwest Detroit community) with nonprofit community partners, UM Life Sciences & Society Program (School of Public Health), Michigan Department of Community Health Biotrusts for Health for community recommendations on researchers' access to bloodspots and approval process to authorize use of bloodspots; funded by NIH American Reinvestment & Recovery Act (ARRA).
Role – Co-Convener (Detroit), Community Partner

Michigan Department of Community Health (2009 Contract)
Detroit School Based Health Collaborative Calhoun, McNall (Co-PIs) 2009 - 2011
Developed/managed integrative behavioral/physical health interventions in Detroit School Based and School Linked Health Clinics to address the mental health needs of urban youth at-risk from social determinants of health impacting their well-being and academic performance; focusing on health knowledge, health behavior and mental health issues.
Role – Convener and Founding Co-Director

Community Conversations on Health Disparities, Michigan Department of Community Health 2009
Convene two community forums (including a session in Spanish in Southwest Detroit) to facilitate recommendations to eliminate health disparities and improve health status among racial and ethnic populations in the city of Detroit; funded by the Michigan Department of Community Health.
Role – Convener (Detroit), Community Partner

Active for Life Project Dowdy (PI) 2003 - 2007
Four year clinical trials and Community-Based Participatory Research (first national CBPR effort) in nine cities to study obesity and sedentary lifestyles among seniors. Coordinated data collection, staff oversight in four community-based settings, facilitator instruction, participant screening and recruitment, liaison for national project coordination. Increased physical activity locally for 900 sedentary seniors in four Detroit neighborhoods through community and faith-based partnerships, established Active Living Every Day model as an empirical behavioral change intervention. Funded by the Robert Wood Johnson Foundation.
Role – Project Director (Detroit)

E. Other Experience and Community Leadership (Select)

School-Based Health Centers: An Expanded Role for Dropout Prevention Program 2013 - 2014
Co-facilitate 4 discussion groups with students at Central Collegiate Academy, a State of Michigan Educational Achievement Authority school. Co-design and implement the sessions, manage facilitator process, data analysis, and dissemination strategies for The Center for School, Health and Education, American Public Health Association.

Role – Independent Consultant

Youth and Community/Economic Development, Community Health (select)

Design/administer special projects and developmental processes to spearhead new community health initiatives. Past clients include the city of Detroit, W.K.Kellogg Foundation (Detroit Kellogg Youth Initiatives Program)/United Way for Southeast Michigan, The Kresge Foundation, United Negro College Fund, Greater Detroit Area Health Council, City Connect Detroit, John S. and James L. Knight Foundation, The Ecology Center, University of Michigan, American Public Health Association, other.

Role – Independent Consultant

2000 - 2014

ProLiteracy Detroit

1989 -

Founding Board and community leadership for largest literacy provider in Michigan, established nonprofit and national affiliate, lifetime advisory member, hands-on leadership and staffing for organization's first ten years.

Role - Past President, Vice President and member, Board of Directors; Board of Advisors (lifetime)

ORGANIZATION NAME: *New Town Medical Center*
 PROJECT NAME: *Connecting Community to Research*
 PROJECT LEAD: *Tom Jones, MD, MPH*

PROFESSIONAL PROFILE/BIOSKETCH

Provide the following information for the project lead and up to five key personnel listed in the application. Add lines as necessary. Limit four pages per person. See the Eugene Washington PCORI Engagement Awards Application Guidelines for additional details.

Name (Last, First): **Henderson, Judith**

Project Role: **FQHC Outreach Coordinator**

POST-SECONDARY EDUCATION/TRAINING/FELLOWSHIPS

INSTITUTION AND LOCATION	DEGREE (if applicable)	DATE COMPLETED	FIELD OF STUDY
Old Town University, MA	BA	05/1995	Education and Human Services
New Town College, MA	MM	12/2009	Masters in Management

PROFESSIONAL STATEMENT (Limit 250 Words)

Briefly describe your experiences or qualifications that are applicable to your role.

I have over ten years of experience facilitating the collaboration between New Town Medical Center and New Town HealthNet (BHN) Federally Qualified Health Centers (FQHC) partners. As Associate Director of NTHN, I act as a community liaison to review community-based participatory research proposals. I also represent NTHN at external meetings and special events, and manage staff to ensure that they understand and support NTHN's mission. Prior to being Associate Director, I was both an Administrative and Office Manager at NTHN, where among other duties I managed recruiters, participated in strategic planning activities, and directed budget operations. Lastly, I am also a community-based liaison/coordinator for the New Town University Clinical Translational Science Institute Community Engagement Core, which is led by Dr. Tom Jones. In this role, I infuse community engagement activities and perspectives throughout all functions of the CTSI and leverage other existing research resources to support the New Town HealthNet community. These experiences have all given me a great deal with expertise with NTHN, which makes me uniquely qualified to serve as the FQHC Coordinator.

EMPLOYMENT HISTORY

INSTITUTION AND LOCATION	TITLE	DATES
New Town Medical Center HealthNet, New Town, MA	Associate Director	10/2011-Present
New Town Medical Center HealthNet, New Town, MA	Administrative Manager	10/2007-10/2011
New Town Medical Center HealthNet, New Town, MA	Office Manager	05/2003-10/2007

ORGANIZATION NAME: *New Town Medical Center*
 PROJECT NAME: *Connecting Community to Research*
 PROJECT LEAD: *Tom Jones, MD, MPH*

HONORS/ AFFILIATIONS (MEMBERSHIP OR LEADERSHIP POSITIONS)

Current leadership roles:

- Facilitator, New Town HealthNet CFO Forum, New Town HealthNet Patient Account Manager’s Forum
- Facilitator, New Town HealthNet Research Subcommittee, Boston HealthNet Human Resources Director’s Committee
- Facilitator, New Town HealthNet CHC Patient Account Directors’ Committee
- Facilitator, New Town HealthNet HR Director’s Committee

Current committee memberships:

- NTU CTSI CE Community Advisory Board, NTU CTSI Coordinators Tracking Forum
- New State League of Community Health Centers CFO Forum
- Health Safety Net Transition Task Force, New State Medicaid Information System
- Group Site Coordinator, Habitat for Humanity

CURRENT/COMPLETED PROJECTS (Limit to Past Three Years)

List projects beginning with those that are most relevant to your application.

INSTITUTION AND LOCATION	RESPONSIBILITIES	DATES
<p>New Town Medical Center New Town HealthNet Research Subcommittee, New Town, MA</p>	<p>Role: Associate Director. Assist researchers with implementation and conduct of research as New Town HealthNet partner; assist committee with development of research and administrative protocol; act as a committee liaison with the New Town University School of Medicine Internal Review Board.</p>	<p>03/2005-Present</p>
<p>New Town University Clinical and Translational Science Institute, New Town, MA NCRR/NIH: UL1RRxxxxx, KL2xxxxx, TL1xxxxx PI: S. Smith</p>	<p>Role: Community-based liaison of Boston HealthNet Research Subcommittee. Aimed to improve public health by providing NTU researchers with tools, training, and resources.</p>	<p>2012-2014</p>

ORGANIZATION NAME: *New Town Medical Center*
 PROJECT NAME: *Connecting Community to Research*
 PROJECT LEAD: *Tom Jones, MD, MPH*

PROFESSIONAL PROFILE/BIOSKETCH

Provide the following information for the project lead and up to five key personnel listed in the application. Add lines as necessary. Limit four pages per person. See the Eugene Washington PCORI Engagement Awards Application Guidelines for additional details.

Name (Last, First): **Smith, Jane** **Project Role:** **Co-Chair, Advisory Group of Community Stakeholders**

POST-SECONDARY EDUCATION/TRAINING/FELLOWSHIPS

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	DATE COMPLETED	FIELD OF STUDY
University of New State	BA	2001	Sociology

PROFESSIONAL STATEMENT (Limit 250 Words)

Briefly describe your experiences or qualifications that are applicable to your role.

I have served as Chairperson of the Partnership in Health and Housing Community Committee (PHHCC) since 2010. PHHCC aims to improve the health and wellness of New Town public housing residents through research and other services. I had extensive experience working with this population prior to holding this position, as I have been engaging with them in the role of community advocate since 1978.

For the past four years, PHHCC has developed health and wellness surveys with the help of New Town University School of Public Health, The New Town Public Health Commission, and the New Town Housing Authority. Under my supervision, these one-on-one surveys are conducted annually with approximately 1,000 public housing residents. Survey results have been instrumental in identifying the health and wellness concerns of this underserved population and in developing the research and programs necessary to address these concerns.

I also co-lead the Community Advisory Board (CAB) of the New Town University Clinical and Translational Science Institute (CTSI)'s Community Engagement Core, which is directed by Dr. Jones. The CAB's mission is to participate in the conceptualization, planning, and implementation of research conducted by the CTSI. To help the CAB achieve this mission, as co-leader I contribute my expertise in community engagement, outreach, and sustainability.

Lastly, I have served as the Partners in Health and Housing-Prevention Research Center's (PHH-PRC) representative on the Centers for Disease Control (CDC) National Community Committee. This position supplemented my previous experience by allowing me to participate in community engagement and research from a national perspective.

EMPLOYMENT HISTORY

INSTITUTION AND LOCATION	TITLE	DATES
New Town University School of Public Health-PRC. New Town, MA	Chairperson	2010-Present
New Town University School of Public Health-PRC. New Town, MA	Program Coordinator	2008-2010
New Town Housing Authority (NTHA), New Town, MA	Resident Health Advocate	2007-2008

ORGANIZATION NAME: *New Town Medical Center*
 PROJECT NAME: *Connecting Community to Research*
 PROJECT LEAD: *Tom Jones, MD, MPH*

HONORS/ AFFILIATIONS (MEMBERSHIP OR LEADERSHIP POSITIONS)

- I have participated in the New Town Housing Authority Resident Empowerment Coalition (2011-present) which is currently developing a handbook “Navigating the New Town Housing Authority.”
- I am currently serving on the New Town Housing Authority’s Monitoring Committee at the request of the Mayor.

SELECTED PEER-REVIEWED PUBLICATIONS (Limit 15 Citations)

1. Jones, TA., Smith, S., **Smith, J**, Smith R. “Connecting New Town’s public health agencies to health centers.” *Progress in community health partnerships: research, education and action* x, no.x (2012): 239-248.

SELECTED NON-PEER REVIEWED PUBLICATIONS (Limit 10 Citations)

This may include op-ed, newsletter, and/or blog or other published works.

1. Brown, D, Jones, T, **Smith, J.**, (in press). What do public housing residents say about their health? *Progress in Community Health Partnerships.*
2. Brown, D, Jones, T, Smith, J., (in press). Recruiting: a model of community consent. *Hastings Center Reports.*
3. **Brown, D, Jones, T, Smith, J., (in press).** Resident Health Advocates Developments, *Family and Community Health.*

SELECTED PRESENTATIONS (Limit to Past Two Years)

- 1.

CURRENT/COMPLETED PROJECTS (Limit to Past Three Years)

List projects beginning with those that are most relevant to your application.

INSTITUTION AND LOCATION	RESPONSIBILITIES	DATES
Centers for Disease Control and Prevention , New Town, MA Partners Prevention Research Center PI: Brown	Role: Chairperson of the Partnership in Health and Housing Community Committee	9/1/2009 – 8/31/2014

ADDITIONAL INFORMATION

Please provide any relevant information not already disclosed.

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Jane Smith		POSITION TITLE Patient Advocate	
EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)			
INSTITUTION AND LOCATION	DEGREE (if applicable)	MM/YY	FIELD OF STUDY
New College, New Town, MA	Associate Degree, Applied Science	06/73	Advertising Art & Design

NOTE: The Biographical Sketch may not exceed four pages. Follow the formats and instructions below.

Personal Statement

Briefly describe why your experience and qualifications make you particularly well-suited for your role (e.g., PD/PI, mentor, participating faculty) in the project that is the subject of the application. Within this section you may, if you choose, briefly describe factors such as family care responsibilities, illness, disability, and active duty military service that may have affected your scientific advancement or productivity.

As a breast cancer survivor and member of the New Town Medical Center Breast Cancer Support Group, my primary priority is to help other patients. Through my experiences as a data coordinator for the Health Baby Healthy Child Program run by the New Town Public Health Commission, a member of the Boston Medical Breast Cancer Support Group, and working with Summer Enrichment Program for families run by the Health Baby Health Child Program I have been able to observe firsthand the impact of health disparities and the value of programming to address these disparities. My experience and priorities will provide a valuable perspective to this training program.

Positions and Honors

Data Coordinator, New Town Public Health Commission, New Town, MA

Research Support

AD-XXXX-XXXX

PI: Jones

10/01/13-09/30/16

PCORI

Eliminating Patient Identified Barriers to Care. To develop a patient navigation program that uses lay health workers to address patients' barriers and to coordinate cancer care services, leading to more timely care. Role: Member, Patient Advisory Board

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Jane Smith, LCSW	POSITION TITLE Clinical Supervisor, Anytown Youth Organization		
eRA COMMONS USER NAME (credential, e.g., agency login)			
<i>EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
Anytown University, Anytown, IL	BA	05/99	Political Science
University of Anytown, College of Social Work	MSW	05/05	Child and Family Welfare

Please refer to the application instructions in order to complete sections A, B, C, and D of the Biographical Sketch.

A. Personal Statement

The goal of the proposed research is to connect community organizations, researchers, and local funders working to prevent violence and reduce health disparities in underserved Anytown neighborhoods. As an activist, direct service provider, and administrator with training and experience in nearly all levels of the systems impacting the lives of Anytown's youth, I have both the practical and theoretical knowledge to be a valuable voice in the Advisory Board. I have extensive experience working within the child welfare and juvenile justice systems, as well as administrative roles in area non-profits which allow me to offer valuable insight into some of the systemic strengths and challenges which may impede putting research into practice. I have extensive training and treatment experience with children, families, and communities struggling with the effects of trauma and violence. I have on-the-ground experience running restorative justice circles, managing crisis, and navigating interpersonal conflict within a framework of nonviolent communication. Culturally, my work has given me valuable experience in managing personal and systemic white privilege within Latino and African-American agencies and populations, and this experience can assist our project by bridging discussions between diverse and passionately invested stakeholders.

Having dedicated my career to clinical work with underserved populations, often within entrenched and closed bureaucratic systems such as DCFS or All American Juvenile Temporary Detention Center (AA-JTDC), I have been unable to publish or take an active role in research. Although accepted to the College of Social Work PhD program, I deferred enrollment in order to continue providing much needed trauma-informed mental health treatment and staff training to youth detained at the AA-JTDC during a time of institutional crisis. However, my interest in evidence-based programs led to my championing and piloting Margaret Keiley's Multiple Family Group Intervention (MFGI) as the first family intervention implemented by the AA-JTDC. While at the AA-JTDC, in addition to my advocacy, mental health, and crisis duties, I created and implemented a therapeutic group model utilizing poetry and poetry performances, and introduced the evidence-supported Girl's Circle model in addition to the MFGI.

As the Clinical Supervisor of Anytown Youth Organization, I recently worked with Youth Outreach Services to apply for a DHS grant which tripled AYO's ability to serve youth as part of the Comprehensive

Community Based Youth Services (CCBYS) model. As part of our mission to serve children before they become engaged in the school-to-prison pipeline or succumb to various stressors that lead to school drop-out, we have partnered with All American University's Adolescent Health Clinic at Anytown High School to place a licensed therapist at the high school to assist them in meeting the increased demand for supportive mental health services in conflict resolution and trauma. The awarding of this grant has meant tremendous growth and a renewed need for AYO to insure that our programs are rooted in research, community needs, and the ethics of non-violence, youth empowerment, and creativity that was the foundation of this agency.

AYO's inclusion on Advisory Board for the Community-Academic Collaboration to Prevent Violence in Anytown will assist us to grow with services that respond to the needs of our community. It will connect the project to Anytown Park's Youth Advisory Council, which has a growing membership of 15 local youth service providers; be a link to our extensive networks of community partnerships and advisory councils; and provide a valuable link to community members, direct service providers, and active, engaged youth. Ultimately, it will also provide for a critically engaged, knowledgeable and compassionate voice of direct service within our discussions of how best to meet the needs of our city's youth.

Keiley, M.K. (2007). Multiple family group intervention for incarcerated adolescents and their families: A pilot project. *Journal of Marital and Family Therapy*, 33, 106-124.

B. Positions and Honors

Positions and Employment

2000	Family Specialist, Home-based Family Preservation Program, Smith Family Services, Anytown, IL
2001-2003	Peace Corps Community Health Educator, Village Goght, Armenia
2003-2004	Intensive Case Manager, Big Town Community Health Center, Anytown, IL
2004-2005	Clinical Training Intern, Smith Center for Child Sexual Abuse Treatment
2005-2007	Clinician, Specialized Foster Care Program, Jewish Children's Bureau, Anytown, IL
2007	Specialized supervision, Intensive treatment of children with problematic sexual behaviors, The Center for Anytown Change, Alltown, IL
2007	HR and Training Coordinator, Children's Home Services, Anytown, IL
2008-2011	Clinical Social Worker, Mental Health, All American Juvenile Temporary Detention Center, Anytown, IL
2011-	Clinical Supervisor, American Youth Organization, Anytown, IL

Other Experience and Professional Memberships

2005-	Licensed Direct Service Child Welfare, State of Illinois
2006-	Member, Social Welfare Activist Alliance
2008-	Licensed Clinical Social Worker, State of Illinois 149.012867
2009-	Artist and member, Project NIA, progressive organization dedicating to providing law-makers with information on non-violent alternatives to juvenile incarceration
2009-	Founder, American Reading series of arts and music festivals providing books to incarcerated youths in All American County
2011-	Ongoing Profession Supervision Group, Live Long, Inc., Anytown, IL

Honors

2005-2007	Fellow, University of Anytown, College of Social Work
2011-2012	Emerging Leader, Minority Nonprofit Leadership Academy, Minority Policy Forum

C. Selected Peer-reviewed Publications.

No publications.

D. Research Support.

No research conducted.

PRINCIPAL INVESTIGATOR (LAST, FIRST, MIDDLE):

PATIENT AND STAKEHOLDER PARTNER PROFILE/BIOSKETCH

Provide the following information for **patient and stakeholder partners** serving as key personnel or other significant contributors.
Do not exceed five pages per person.

NAME (Last, First):

Position Title:

PROFESSIONAL/PERSONAL STATEMENT

Briefly describe why your experience and qualifications make you particularly well suited for your role in the proposed project. Limit is 250 words.

EXPERIENCE, LEADERSHIP, AND ENGAGEMENT

Patient and stakeholder partners are invited to list personal and professional experience relevant to the research topic, including participation with community and volunteer organizations, and membership or leadership in relevant organizations and advisory groups.

ORGANIZATION AND LOCATION	ROLE/RESPONSIBILITIES	DATE

ENGAGEMENT IN RESEARCH

PRINCIPAL INVESTIGATOR (LAST, FIRST, MIDDLE):

Patient and stakeholders are invited to outline past engagement in research, including participation in an advisory capacity, publications authored or co-authored, and presentations made. Briefly indicate the role played by the patient and stakeholder partner.

INSTITUTION/ORGANIZATION/PROJECT AND LOCATION	ROLE/PUBLICATIONS/PRESENTATIONS	DATE

OTHER

Please include any additional relevant information to help us better understand the experience and expertise of patient and stakeholder partners for the project.