



Central Valley Health Policy Institute

Research Write & Publish Electronic Collaboration Club
(RW&P e-Club)

A Faculty Research Development Program

July 13, 2009

Volume 1, Issue 1

RW&P e-Club Newsletter

Special Features in this newsletter:

- New club announcements
- RW&P e-Club Collaboration features.
- The health care reform debate including facts and figures

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The health care reform debate including health insurance facts and figures

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New Club Announcements

We would like to welcome all club members. Thank you for your interest in joining the club.

Over the last two months 15 faculty and staff enrolled in the club. A full listing of all club members is available on Fresno State Blackboard. We are encouraging all club members to visit our electronic forum at <http://blackboard.csufresno.edu/>

Please use this forum to introduce yourself and fill out a needs assessment survey.

Membership enrollment is still open please feel free to invite friends or colleagues to join the club.

Membership is open to any faculty or staff at Fresno State, who are interested in being part of an action oriented learning community and in collaborating on applied

research, grants writing and publishing.

In the Fresno State Blackboard RW&P e-Club you will find many features which will enable you to network with other club members and to have access to supporting resources.

With your help, we will add information to the club as we go. We are inviting all club members to feel co-ownership of the club and help build the environment. *Please read on to see existing features*

RW&P e-Club Collaboration Features

Announcements: In this area you will find club announcements. New announcements will be kept for at least one month.

Contact Us: In this area you will find our contact information.

Club Information: In this area you will find the following folders:

About the Research & Publishing Club: This folder contains information about the establishment of the club, its purpose and a description of the club

activities.

Club Guiding Principles

In this folder will find useful multicultural communication and team building principles

The Knowledge Base: this folder will be added to as we go. We encourage members to contribute materials that they feel would benefit the club. Please email materials to Dr. Ruwe

mruwe@csufresno.edu

Applying for stipend:

Contents of this folder will be added to as we go.

Club Tools: This folder

will contain tools that will help club members to become more effective team builders, writers, and project managers. We are looking for time-management tools, brainstorming tools, conceptual frameworks, team building exercises etc. The simpler the tool the better. Any club member can submit tools along with a brief description of how the tool is used. Please email tools to Dr. Ruwe mruwe@csufresno.edu

RW&P e-Club Collaboration Features (continued)



Links to external resources: In this folder you will find links to major funding organization, links to Fresno State's grant related guidelines, and IRB process, other academic publishing resources, and a link to RW&P e-Club's Google forum etc. You should feel free to suggest additional links that could be added.

Discussion Board: In this area you will find the

following forums:

Introduce yourself: This is the forum where you can introduce yourself to other club members. To start using this forum, click on the title of the forum and then click add a new Thread. Please do this as soon as possible so club members can meet each other.

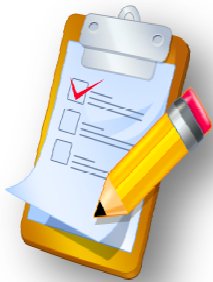
Post a Discussion: This is a forum where you can

post a discussion topic that you would like the club members to explore and discuss.

This month's discussion topic: This is where monthly discussion topics will be posted.

Ask your question here: This is the forum where you will post your question related to any issue relevant to the three e-club's focus area of research, writing and publishing.

"Look for a mentor and be a mentor for someone."



Upcoming Events

Pre-APHA Brownbag Presentations

The Central Valley Health Policy institute (CVHPI) and the Central California Regional Obesity Prevention Program (CCROPP) will be hosting a Pre-APHA brownbag meeting.

This is an annual event.

The date for this year will

be announced.

All faculty and staff whose abstracts have been accepted for presenting at the American Public Health Association meeting are welcome to do a dry run of their presentation and get feedback.

Space is limited. If you are interested in using this forum please contact Dr Ruwe at

mruwe@csufresno.edu

Include the topic of your presentation and the abstract. Please fill out the attached form to register your interest.

For those who will not be presenting we are extending an invitation to participate in the audience. If interested fill out the form and indicate that you will be in the audience.

Inaugural Meeting of the RW&P E-Club

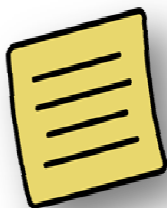
The purpose of this meeting is to create an opportunity for club members to meet and know each other and also to discuss club member needs and activities for the club.

We plan to hold this meeting during the first two weeks in September.

You will be contacted for your suggestion of suitable times and dates.

We are encouraging club members to complete the

needs assessment survey that has been posted in the RW & P e-club in Fresno State Blackboard.



Wanted

Club Positions

We are looking for Volunteers to serve in the following club positions.

Club co-chair (1 position) open to faculty and staff—please send nominations; you can also nominate yourself.

Club Secretary (1 Position) open to faculty and staff—please send nominations; you can also nominate yourself.

Planning team member (4 positions) open to faculty and staff.

The Market Place

Club Assistant Manager (1 position) open to students.

Club assistant resource mobilization manager (1 position) open to students.

Send your nominations using the attached form

Nominations should be sent before the inaugural meeting.

Candidates will be selected at the inaugural meeting through random pick lottery.

For student positions candidates will go through the regular interview process.

Students who get these positions will have access to CVHPI resources and their experience will be structured to enable interested student to use it for class credit.

Please spread the word and let us know if you have students who might be interested in these positions.



Grant Opportunities

Foundations

The Wellness Foundation

Proposal Due: Any time visit their web site for more information:

http://www.tcdf.org/assets/docs/how_to_apply/HowToApply-web.pdf

http://www.tcdf.org/about_us/faq.htm#

American Cancer Society

http://www.cancer.org/docroot/RES/RES_5_1.asp?sitearea=RES

Research Proposals Directed at Poor and Underserved Populations

--Research Scholar Grants C. In Psychosocial and Behavioral Research:

Application deadline: April 1 and October 15. Awards are made for up to five years with a budget of \$400,000 per year (direct costs), plus 20% allowable indirect costs.

--The Role of Healthcare and Insurance in Improving Outcomes in Cancer Prevention, Early Detection, and Treatment

Application deadline: October 15, 2009

Awards are made for up to four years with a budget of \$200,000 per year (direct costs), plus 20% allowable indirect costs.

--Research Scholar Grants A. In Basic, Preclinical and Epidemiology Research

Awards are made for up to four years with a budget of up to \$200,000 (direct costs), plus 20% allowable indirect costs

Robert wood Johnson Foundation

Active Living Research

2009—an RWJF New Connections Call for Proposals

--Investigating Policies and Environments to Support Active Communities. **Proposal Deadline:** July 29, 2009. A total of up to \$336,000 will be awarded for research and publication grants as outlined below:

Research grants-- Four 12- to 18-month awards of up to \$75,000 each. ■■

Publication grants-- Three 12-month awards of up to \$12,000 each.

Health & Society Scholars 2009–2010 Call for Applications

Application Deadline: October 2, 2009

Up to 18 scholars will be selected for two-year appointments beginning in fall 2010. ■■

Scholars will receive an annual stipend of \$89,000 in year one and \$92,000 in year two.

Federal Grants

Visit grants.gov: <http://www.grants.gov/>

Looking for a research Grant?
Visit RW&P e-club's links to external resources



Private and Governmental Grant:

www.proposalcentral.altum.com

For more information on the upcoming grants, visit the RW&P e-club at Fresno state Blackboard under External Resources tab

What's Hot on Capitol Hill?

❖ The Health Care Reform Debate



"Despite the relatively high level of spending, the United States does not appear to achieve substantially better health benchmarks compared to other developed countries"

About 45 million of Americans under the age of 65 are uninsured.
Most people agree that no one should be uninsured but do not agree on how to provide universal coverage or how to finance it.
Another cause for concern is the rising cost of health care.

Who are the Uninsured?

National Estimates

- 45 million or 18% of the population under the age of 65 were, in 2006-2007, uninsured
- Whites are the majority of the uninsured (20.2 m or 45.1%) followed by Hispanics (14.5 m or 32.4%), black (6.9 m or 15.4%) and all other (3.7 m or 7.1%)
- "The large majority of the uninsured (80 percent) are native or naturalized citizens"
- "Over 8 in 10 uninsured people come from working families"
- "The number of uninsured children in 2007 was 8.1 million – or 10.7 percent of all children in the U.S"

California Estimates

- California has a population of 6.5 million or 21% under the age of 65 uninsured
- Hispanics comprise the majority of California's uninsured population (3.9m or 58.9%) followed by Whites (1.6m or 24.1%), Blacks (0.4m or 5.6%) and all others (0.7m or 11.2%)

For more information on national and state estimates, go to Kaiser Family Foundation State Health Facts: <http://www.statehealthfacts.org/> and for Central Valley <http://www.csufresno.edu/ccchhs/institutes>

Central Valley of California Estimates

- The Central Valley has the worst uninsured rate in California – 22% are uninsured.
- 1.7 m, or 50% of the region, has an income 200% under FPL.
- Of uninsured nonelderly (ages 0-64) with annual family incomes of less than 300% FPL, 80.1% are uninsured
- Agriculture based occupations do not provide employer-based coverage--thus puts workers at a risk of being un / underinsured

What Drives Health Insurance Costs?

Top five reasons attributed to increasing health care healthcare spending

Less contested reasons

1. The U.S. population is getting older and there is an increase in preventable chronic diseases – "Almost half of health care spending is used to treat just 5 percent of the population" with chronic medical condition
2. Use of expensive medical technologies
3. Inefficiencies in medical care delivery and financing

Contested or more controversial reasons

4. Government subsidies for health coverage affect cost levels and potentially cost growth
5. Americans pay a lower share of health expenses than they used

Some suggestions of inefficiencies in the health care system

- Despite this relatively high level of spending, the United States does not appear to achieve substantially better health benchmarks compared to other developed countries
- Wide variation in the use and cost of services across providers and in different geographic areas has called into question the value of the care received
- The role of provider payment has also been cited as contributing to increased costs by, for example, encouraging the use of specialists or profitable equipment

- The lack of integrated, efficient systems to electronically store and transmit health data is said to contribute to higher costs and limit the data available to study treatment effectiveness
- Use of brand prescription drugs versus generic drug prescription
- Defensive practices in physicians. Physicians are recommending unnecessary tests than cost the health care system more than \$100 billion per year in order to protect them from being sued. (Kaiser family foundation, 2009)

See also *The CAUSE Approach to Health Care Reform* at: <http://www.cvhpi.org>

Some Evidence of Inequities in the Health Care System

- "About 30 percent of the poor spent more than 10 percent of their income on health in 2004; for the total population with private non-group insurance, the share of the poor spending more than 10 percent of income increased by more than one-third, from 39 percent in 2001 to 53 percent in 2004".
- "Rising health care costs result in families cutting back on care and facing serious financial problems".

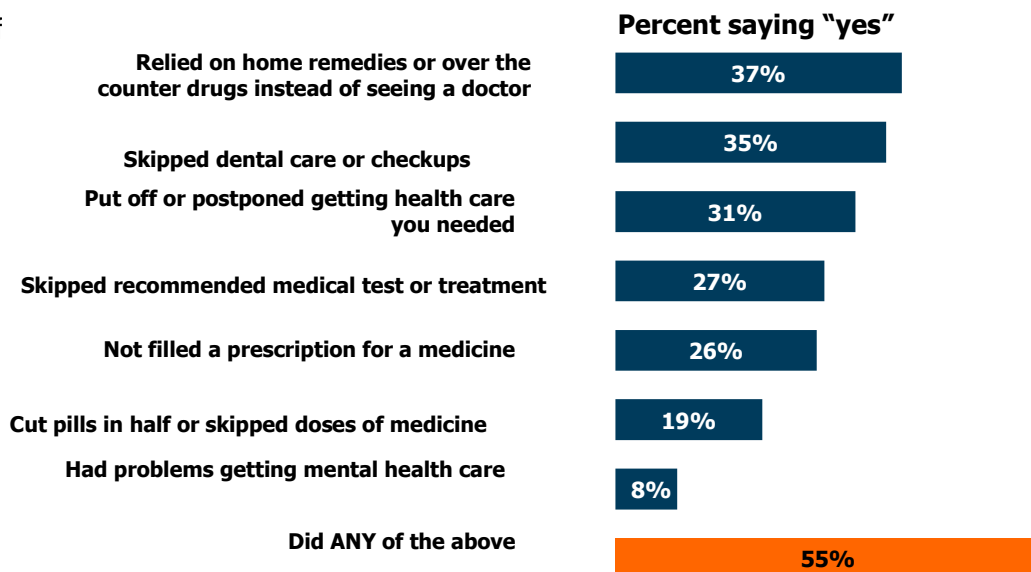
(Kaiser Family Foundation, 2009)

http://www.kff.org/insurance/upload/7670_02.pdf

- The uninsured are less likely to have a usual source of care; often go without screenings and preventive care and delay or forgo needed medical care (Families USA, 2009)
<http://www.familiesusa.org/resource/publications/reports/americans-at-risk.html>

Consequences of Health Care Cost and Family Level

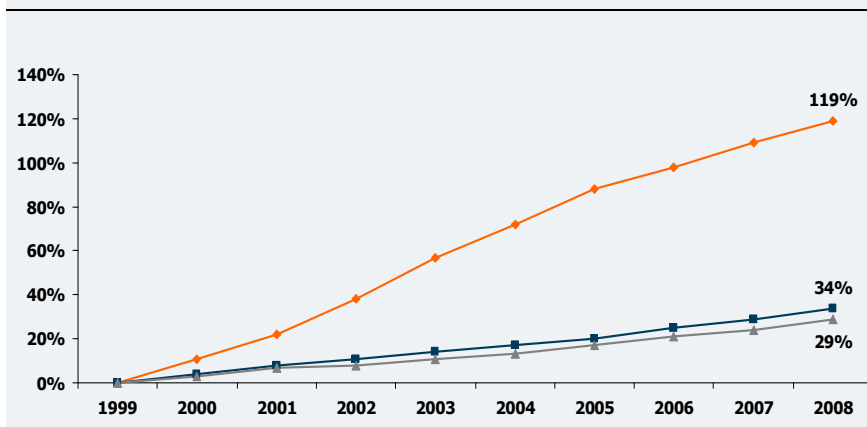
In the past 12 months, have you or another family member living in your household... because of the COST, or not?



Kaiser Family Foundation, 2009

Health Insurance Premium Outpace Inflation And The Growth in Workers' Earnings.

Cumulative Changes in Health Insurance Premiums, Inflation, and Workers' Earnings, 1999-2008



Source: Kaiser Family Foundation, 2009)

Health Care Reform in a Nutshell

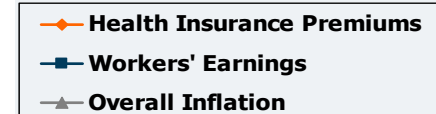
Senate Finance Committee Policy Option

Requires everyone to have health insurance.
A program will be in place so that individuals and small businesses can purchase health coverage.
Subsidies will be available to people between 100-400% of the poverty level.

Senate Help Committee Affordable Health Choices Act

-Insurance for everyone
-Expand the Medicaid to 150% of the poverty level.

Senators Tom Coburn & Richard Burr & Representatives Paul Ryan & Devin Nunes



Patients' Choice Act of 2009 (S. 1099 and H.R. 2520). This program will be run by the state (currently ran by federal).

People will be given a tax credit to buy insurance. It suggests integration of low-income people to private insurance and Medicaid patients that are disabled. (For more information these national health reform options see

http://www.kff.org/healthreform/upload/healthreform_trifull.pdf

See also CVHPI's CAUSE option: CAUSE stands for the five principles defined by the Institute of Medicine as critical to guiding the reform of the health care system: **Continuous** coverage, with no lapses; **Affordable** to individuals, businesses, and government; **Universal** in that everyone has access to a basic level of care; **Sustainable** because everyone contributes, everyone participates, and costs are managed and **Effective** in providing high-quality care to everyone (available <http://www.cvhpi.org/>)

Reflections: What are the Opportunities for Research?

What are the opportunities for collaborative research?

How can we as academicians, researchers or public health practitioners help inform this health care reform?

How can we help ensure a more equitable health care system?

For further discussion please visit the RW&P discussion forum at:

blackboard.csufresno.edu

Upcoming Publications

Healthy people 2010: A 2009 profile of health status in the San Joaquin Valley

- An update by CVHPI that occurs every two years and measures Central Valley progress toward achieving National goals to reduce health disparities. Compares the Valley to State and the Nation.

Cultivating Seeds of Change: Organizing Central California Communities for Action to Prevent Obesity

-- A formative evaluation of planning and early implementation of an environmental and policy approach to obesity in 6 counties located in the Central Valley of California.

- Discusses the conceptual framework that underlies the Central California Regional Obesity Prevention Program (CCROPP) and early findings
--Uses complexity theory to develop the change model and program impact indicators

Access to Oral Health in Central California

- Explores the supply and accessibility of dental care in the 18-county Central California region with the goal of providing an empirical basis for evaluating current dental policies and practices

Oral Health Survey of Federally Qualified Health Centers in the Central Valley

- A report on the access of oral health care for low-income and uninsured populations in the Central Valley.

The CAUSE Approach to Health Care Reform.

CAUSE is a comprehensive approach to health care reform that began as a frank discussion between a doctor and his patient about the problems of the current health care system. Two years later that physician and experts at the Central Valley Health Policy Institute, California State University, Fresno, created a comprehensive approach to health care reform:

For full texts of these reports or publications, visit <http://www.cvhpi.org>

Anyone interested in publicizing their work in the next e-club newsletter Please contact Dr Ruwe at: mruwe@csufresno.edu

About Our Organization

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The Research Write and Publish e-Club was established as a collaborative effort between the Dean of the College of Health and Human Services and Central Valley Health Policy Institute, California State University Fresno. It was established as part of the larger goal of faculty research development. It is envisaged that by focusing on issues related to the health priorities of the Central Valley, club participants will become more familiar with pertinent health issues affecting the

Central Valley and will be engaged in research and action that will help inform policy and also benefit the community.

The Central Valley Health Policy Institute (CVHPI) was first established as an ancillary unit of California State University, Fresno (CSUF) in 2002 and became fully operational in January 2005. The primary geographic focus areas, including Fresno,

Kern, Kings, Madera, Merced, San Joaquin, Stanislaus and Tulare Counties. The CVHPI mission is to facilitate the application of public, private and University resources to reduce health inequities in the region through improvements in health care and public health policies and programs.

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