

UNITING RESOURCES TO ADDRESS HEALTH DISPARITIES

NINR/NCEMNA/NCMHD/NIGMS/UT Austin

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National Institutes of Health (NIH)

Bethesda, Maryland

I. Day I: Opening Remarks

Ms. Kay Johnson Graham, National Institute of Nursing Research

Appreciation was expressed to the cosponsors of the event, which included the National Institute of Nursing Research (NINR); National Coalition of Ethnic Minority Nurse Associations (NCEMNA); National Center for Minority Health and Health Disparities (NCMHD); National Institute of General Medical Sciences (NIGMS) MORE Program; and the University of Texas at Austin School of Nursing Center for Health Promotion and Disease Prevention Research in Underserved Populations.

To set the stage for the conference, Ms. Graham noted that minorities make up 25 percent of the U.S. population and less than 10 percent of the health care professional workforce. In the area of nursing, fewer than 7 percent of nursing degrees were awarded to Hispanics and African Americans in the 1995 and 1996 school years. In addition, even lower proportions of Hispanics, African Americans, and American Indians receive doctoral degrees in nursing. To this end, the purpose of the workshop would be to address the disparities of underrepresented minorities pursuing nursing research as a career and suggest recommendations to increase participation in research and research training efforts, particularly as they relate to eliminating health disparities in racial and ethnic populations.

Ms. Graham described the audience as a group of “elders” similar to a tribal council gathering to share and disseminate ideas in health disparities to seek out unique solutions by working in collaboration with community-based organizations, researchers, and other health experts to design remedies to improve the health of all persons.

II. Welcome

Dr. Patricia Grady, NINR

Dr. Grady noted that the first meeting of this group took place in June 2000. The support and partnership of Dr. John Ruffin, Director of NCMHD, are greatly appreciated. New partners include NIGMS and the University of Texas, Austin School of Nursing which has a core center that focuses on health promotion and disease prevention in underserved populations.

Dr. John Ruffin, NCMHD

The NCMHD recently concluded a series of technical workshops around the country focused on what the NIH is planning to do about health disparities. Dr. Ruffin noted that an NIH strategic plan for health disparities will be forthcoming (<http://healthdisparities.nih.gov>); nursing is uniquely situated to take

advantage of this plan because it is interdisciplinary and concerned about chronic diseases, particularly those that impact the minority community disproportionately. In addition to the upcoming NIH strategic plan to deal with health disparities, an extramural loan repayment program, available for every discipline, provides up to \$35,000 per year.

Health Disparities Centers of Excellence will be established throughout the country. In order to create these Centers, three requests for applications (RFAs) have been released. The P20 mechanism will be used to establish centers at those institutions that are not quite ready to become Centers of Excellence; the P60 mechanism will be used for those institutions that are ready. The NCMHD Web site (<http://ncmhd.nih.gov>) offers more detailed information. Congress has stated that once Centers of Excellence have been established, institutions can use a portion of their allotted money to create an endowment, thereby assisting in establishing the research base.

Dr. Clifton Poodry, Division of Minority Opportunities in Research, NIGMS

Dr. Poodry welcomed participants and expressed his eagerness to hear NCEMNA's needs, visions, problems, and barriers.

Dr. Betty Smith Williams, President, NCEMNA

Dr. Williams added her greetings and noted that the presidents of the NCEMNA organizations were all present at the workshop. She noted that knowledge regarding health care issues needs to be developed to assist minority communities in moving toward a healthier life. She said that participants were here to plan for increased numbers of ethnic minority researchers toward that goal.

III. Overview and Objectives for Workshop

Dr. Alexa Stuijbergen, University of Texas, Austin

Dr. Stuijbergen introduced this segment of the workshop. In June 2000, NINR and the NIH Office of Research on Minority Health (ORMH) sponsored an invitational conference that brought together 27 leaders of minority nursing associations in NCEMNA to discuss key issues for minority nurse investigators, develop recommendations for minority health, and discuss strategies for career development of minority nurse researchers. Participants in the 2000 conference recommended grantsmanship training, research training, increased funding (including startup mechanisms) for minority investigators, mentoring, and increased participation of minority nurse investigators in peer review and subsequent funding decisions as strategies that could enhance the career trajectories of minority nurse investigators.

This workshop is the next step in the collaboration between NINR, NCMHD, and NCEMNA. As part of the workshop, participants will identify specific strategies and plans for moving the partnership forward and utilizing their resources to address health disparities. She noted that there were ambitious goals and objectives for the breakout sessions.

Dr. Williams

Dr. Williams provided an overview of the breakout sessions and noted that each participant brings to this workshop her/his unique ethnic experience, education, research interests, and other experiences. Each

participant was selected by her/his association to participate in this workshop. Four breakout groups would implement the active component of this workshop. The outcomes of the workshop are to be new proposals and draft documents for one or more initiatives utilizing NIH grant mechanisms.

IV. NINR Progress Report on Minority Nurse Development and Research on Addressing Health Disparities

Dr. Grady

Dr. Grady discussed in detail the NINR strategic plan on reducing health disparities. The plan is available on the NINR Web site and this plan includes three areas of focus—research, infrastructure, and outreach.

NINR Strategic Plan Research Goal 1 is to solicit research applications in targeted areas that will address significant questions related to health disparities. In support of this goal, Program Announcements (PAs), RFAs, and Notices have been published on diabetes self-management in minority populations, establishing nursing partnership centers on health disparities (using the P20 mechanism), mentored research scientist development awards for minority investigators, NRSA institutional research training grants (using the T32 mechanism), research supplements for underrepresented minorities, and cosponsorship of a planning grant for clinical research training in minority institutions. More applications are encouraged for each of these initiatives.

NINR Strategic Plan Research Goal 2 is to support the investigator-initiated research proposals that address significant questions related to health disparities and offer the best prospects for new knowledge and better health. In support of this goal, currently funded are studies that include: testing the Mexican American problem-solving program to improve school adjustment, intervention to reduce maternal stress and improve parenting by rural and African American mothers of premature infants, culturally sensitive intervention for AIDS prevention among Pacific Islander youth, diabetes wellness using American Indian talking circles, and randomized clinical trials in nursing homes to reduce caregiver burden. Poor oral health and low birth weight in minority populations are also subjects of specific solicitations.

NINR Strategic Plan Infrastructure Goal 1 is to enhance research infrastructure allowing for an increased emphasis on research relating to health disparities. NINR-NCMHD Partnership Pilots, NINR-funded P20 centers, NINR-funded P30 centers, and NINR-funded T32 institutional training grants are all working toward fulfilling this goal. Goal 2 is to enhance mentorship, training, and research opportunities for minority students and researchers. Toward that end, current activities include a mentored research scientist career development award for minority investigators (an RFA that is released annually), research supplements for underrepresented minorities (a PA), and institutional and individual fellowships (using the mechanisms of F31, F32, F33, and T32).

NINR Strategic Plan Outreach Goal 1 is to maintain involvement with minority nursing organizations by supporting identification and dissemination of minority health priorities and strategies and by helping minority students and researchers advance their scientific careers. Goal 2 is to enhance communication and dissemination activities by tracking or trending publications, media coverage of research results, citations of research results, honors and awards, and translation of research results into policy and practice. Goal 3 is to support training programs and to enhance involvement in other initiatives.

Dr. Grady discussed several upcoming NINR events. In its third year, the Summer Genetics Institute will take place from June 1 to July 26, 2002; the application deadline was March 1 and up to 18 individuals

will be chosen to participate. In its seventh year, the workshop entitled “Research Training: Developing Nurse Scientists” will be held July 16-19, 2002; the application deadline is April 5.

For individuals who seek a fast research track, Dr. Grady explained that several universities have developed specific B.S.N. to Ph.D. programs. NINR revised the NRSA F31 predoctoral program announcement to facilitate support for these fast track students. A higher percentage of ethnic minority nurses are seeking advanced studies, with African Americans at the highest percentage, followed by Latinos. These statistics need to be characterized and shared widely.

Dr. Grady concluded by stating that nurses need to stimulate the translation of research results into policy and practice.

V. NCEMNA Overview and Progress Report

Dr. Antonia Villarruel, Vice President, NCEMNA

Dr. Villarruel commented on the incredible resources represented by this Coalition and within the member associations. The Coalition has developed and evolved to advocate for development of a minority leadership institute. The June 2000 initial meeting of NCEMNA generated several products: a unified agenda for addressing minority disparities (which is available on the NCEMNA Web site), white papers that delineate research agendas for each association, and an exploratory conference for developing institutional partnerships. In addition, NCEMNA has facilitated the identification of 17 nurse investigators who will add broader representation on protocol review panels.

Dr. Mary Lou de Leon Siantz, President, National Association of Hispanic Nurses

Founded in 1975 as a voice for Hispanic nurses, the National Association of Hispanic Nurses (NAHN) represents 40,000 nurses. The objectives of NAHN are to provide a forum for nurses to analyze and evaluate the health care needs of the Hispanic community.

NAHN strives to serve the nursing and health care delivery needs of the Hispanic community and the professional needs of Hispanic nurses. NAHN is designed and committed to working toward improvement of quality of health and nursing care for Hispanic consumers and toward providing equal access to educational, professional, and economic opportunities for Hispanic nurses.

A small cadre of experts is conducting research on Hispanic populations across the United States, including Puerto Rico. Issues for the dramatically growing U.S. Hispanic population center on the estimation of health status. In general and as an aggregate group, Hispanics show a health profile as good as or better than that of white non-Hispanics. However, the data to support this profile are ambiguous and over-generalize the reality; health data need to be disaggregated by Hispanic group. Puerto Ricans in the continental United States have a more jeopardized health status than Mexican Americans, who have a more jeopardized health status than Cuban Americans. Aggregation of health data about Hispanics can lead to incorrect conclusions and health strategies.

Dr. Siantz reiterated that mentorship programs are needed in order to establish a pipeline of minority researchers.

Dr. Kem Louie, President, Asian American Pacific Islander Nurses Association

The Asian American Pacific Islander Nurses Association (AAPINA) is 10 years old and represents more than 23 ethnic subgroups with diverse cultural backgrounds who work with diverse client populations. The members represent states and territories from New York to Guam. AAPINA fosters development and advancement of knowledge in nursing.

Dr. Louie noted the research contributions of some AAPINA members. Four researchers have received R01s; two of those four are participating in this workshop. Nine research studies have focused on health disparity issues among Asian and Pacific Islander populations; five of those nine researchers are participating in this workshop.

Dr. Hilda Richards, President, National Black Nurses Association

The National Black Nurses Association (NBNA) was formed in 1971; Dr. Williams is one of its founders. The NBNA represents 150,000 African American nurses spread across 78 chapters throughout the United States. Three years ago, the NBNA established a research committee that has received money from Wyeth-Ayerst and Eli Lilly to support research on African American women. A refereed journal, which Dr. Richards edited for 14 years, focuses on health disparities of African Americans.

NBNA's yearly conference is research oriented. Highlights from a recent conference include a presentation on the genetic indicators of coronary heart disease, with strategies for reduction of risk for premenopausal African American women.

Dr. Lillian Tom-Orme, President, National Alaska Native American Indian Nurses Association

The National Alaska Native American Indian Nurses Association (NANAINA) represents approximately 15,000 nurses, about 200 of whom are NANAINA members. Many Alaska Native and American Indian nurses are A.D.N. prepared, and one of NANAINA's goals is to encourage more nurses to seek B.S.N. education and beyond. NANAINA strives to serve the professional needs of Alaska Native and American Indian nurses and consumers and is committed to working toward improving the quality of health and nursing care for Alaska Native and American Indian consumers and enhancing equal access to educational, professional, and economic opportunities for Alaska Native and American Indian nurses. NANAINA's Web site is www.nanaina.com.

Strategic planning for NANAINA has been completed and the organization's stated vision is to exemplify excellence in nursing. Two of NANAINA's seven goals are related to health disparities. NANAINA's most recent summit focused on smoking prevention intervention programs; its upcoming summit will continue the dialogue about research and research issues.

NANAINA is working with tribal colleges (2-year community colleges on reservations). With Oregon Health and Science University, NANAINA is exploring the knowledge and skills of American Indian nurses who do genetics counseling. Several publications by NANAINA members will soon appear in *Nursing Outlook*. The organization makes available small merit awards to its membership.

Mr. Pete-Reuben Calixto, President, Philippine Nurses Association of America

The Philippine Nurses Association of America (PNAA) is the only nursing organization composed of 90 percent first-generation U.S. immigrants, imbuing the organization with a rich culture and deeply held values in the core of nursing. The purpose of the PNAA is to uphold the professional image and foster the welfare of Philippine nurses in the United States. Two of PNAA's six objectives are related to research.

The PNAA is divided into 4 regions and maintains 27 chapters; various committees tackle relevant issues, one of which is research. Membership in the PNAA primarily comprises clinical nurses but represents a variety of nursing settings. Activities are delivered through local chapters, allowing members to work closely with their respective communities.

Educational programs relevant to research have been presented at meetings and conferences, including the 1996 national convention, held in Washington, D.C., during which a full day was devoted to research topics.

VI. Uniting Resources To Address Health Disparities—A Framework for Ensuring a Lasting Partnership

Dr. Williams

Dr. Williams stated that NCEMNA and NINR partnership success requires each partner to value others' competence and to give mutual respect as well as close cooperation. She noted that NCEMNA member organizations are at different ages and stages of development but have come together to form a coalition and to value differences. The Coalition seeks to greatly increase the number of minority nurse researchers, increase the knowledge of how to decrease health disparities, and disseminate nursing science findings to inform practice. Key resources of NCEMNA include:

- A constituency of 350,000 ethnic nurses with varied experiences and education,
- Five ethnic nurse associations, with elected leaders (presidents), that are integral to the Coalition effort,
- Network of 150-plus community-based chapters in 30 States,
- Combined 60-plus years of National Conference expertise to plan, manage, implement, and evaluate,
- A volunteer service-focused membership,
- A volunteer group (NCEMNA) partnering with a nonvolunteer group (NINR),
- A national mechanism for communicating with ethnic nurses via newsletters, e-mail, journals, conferences, and chapter meetings and activities,
- Support of elected representatives at the local, State, and Federal levels,
- Linkages with consumer organizations in the respective communities including churches, social organizations, lodges, fraternal orders, and civic groups,
- Nurse members with experiential, theoretical, and practical knowledge of their respective ethnic groups,
- Programs of professional development, mentoring, and support of members, and
- Advocacy programs with political and social organizations for each represented ethnic group.

NCEMNA has access—direct and indirect, formal and informal—to the ethnic groups that are the target of NCEMNA efforts and access to ethnic nurses at all educational levels. The more ethnic nurses develop

their relationship with relevant consumers (community organizations, family members, neighbors, and friends), the more success will accrue in moving ahead with NCEMNA's research agenda.

Dr. Williams stated that NCEMNA represents a significant body of resources but is lacking in financial support for research and further education. She noted that a great deal has been accomplished by the Coalition with basically few funds and pondered what could be accomplished if NCEMNA had additional financial support.

Dr. Grady

Dr. Grady noted that, as a research organization, NINR's mission is the support of nursing research and research training. This conference is an excellent way to work with the Coalition to further efforts related to minority health and health disparities.

The number of minority nurse researchers needs to be increased. In FY2000 and 2001, NIH data for the F, K, P, and R series grants show NINR awards to 2 Native American researchers, 29 Asians, 19 African Americans, 9 Hispanics, and 116 not reporting their ethnic group. The NIH needs assistance in determining why more minority nurse researchers are not being reached. Of a total of 777 nursing research grants, about 70 percent are awarded to Caucasians and the remaining 30 percent are awarded to researchers who are minorities or who do not report their ethnic category.

Regarding review panels, Dr. Grady urged the minority nurse associations to pick their best people to volunteer for proposal reviews. Although it is difficult to anticipate precisely the type of research applications that will need review, study sections that have a handy list that includes nursing expertise will call on that expertise when needed. The recent set of CVs from the coalition have been sent to both NINR and the Center for Scientific Review study sections for consideration as reviewers.

Several ideas for collaboration between NINR and NCEMNA were discussed by Dr. Grady, including developing databases of researchers who are working (or who want to work) with specific populations and advertising available non-NIH grants. The vulnerable points in a nursing career should be recognized and focused on—the transition from predoctoral to postdoctoral studies and from postdoctoral to researcher. Two fundamental questions remain: How can NINR and the Coalition reach the appropriate nurses to encourage their involvement in research and how could mentoring be best established.

VII. NIH Grant Mechanisms

Minority Opportunities in Research Division, Dr. Adolphus Toliver, NIGMS

Dr. Toliver explained that the NIGMS Division of Minority Opportunities in Research (MORE) is composed of three components:

- The Minority Access to Research Careers (MARC) Branch provides institutional research training grants to support honors undergraduates, science curriculum development, conferences, and science enrichment activities as well as individual predoctoral and faculty fellowships.
- The Minority Biomedical Research Support (MBRS) Branch provides grants to minority institutions to support investigator-initiated research and to enhance faculty, student, and institutional development.
- The Special Initiatives component of MORE sponsors programs such as Bridges to the Future to encourage successful transitions by 2-year college students and master's degree students to

bachelor's (Bridges to the Baccalaureate) and Ph.D. (Bridges to the Doctorate) degree programs, respectively. The Institutional Research and Academic Career Development Award merges postdoctoral training at a research-intensive institution with teaching at a minority institution.

MORE Institutional Research and Academic Career Development Awards combine a traditional mentored postdoctoral research experience with an opportunity to develop teaching skills through mentored assignments at a minority institution. This program is expected to facilitate the progress of postdoctoral candidates toward research and teaching careers in academia. Other goals are to provide a resource to motivate the next generation of scientists at minority institutions and to promote linkages between research-intensive institutions and minority institutions that can lead to further collaborations in research and teaching. As with other MORE grant programs, institutions are expected to set specific goals and measurable objectives and to describe plans to evaluate their accomplishments.

MORE Faculty Development Awards provide support for eligible science faculty at institutions with substantial minority enrollments to spend the summer (or one academic term) every year for 2 to 5 years in full-time research in a research-intensive laboratory. The purpose of the award is to enhance the research and research training capabilities of the minority institution by offering faculty who have Ph.D. degrees or the equivalent an opportunity to update or enhance their research skills through high-quality research experiences. The awardee will also have the opportunity to enroll in one course per academic term in fields directly related to the research in order to update his/her theoretical background. Ideally, the experience would lead to long-term collaborations between the awardee and the faculty of the research institution.

Exploratory Mechanisms, Dr. Jean Flagg-Newton, NCMHD

Dr. Flagg-Newton explained that the enabling legislation for the NCMHD contained sparse and relatively nonspecific language regarding program development. Therefore, to develop programs, the NCMHD sponsored a series of workshops across the country and received the recommendations of a variety of communities.

The NCMHD's mission is to lead, coordinate, support, and assess the NIH effort to reduce and ultimately eliminate health disparities. Within the context of its mission, the NCMHD conducts and supports research, promotes research, fosters emerging programs, and reaches out to minority and other health disparity communities to make the community understand that the NCMHD belongs to them and will address issues of importance to them. Community outreach objectives include engaging communities and their community-based organizations and engaging health and social service professionals.

The NCMHD is authorized to develop independent programs. An important mission from Congress is to continue to find research gaps where they exist and to develop programs to address those gaps, to build capacity in minority health research (research investigator pipeline issues, as well as physical plant and laboratory renovation concerns), and to support construction of facilities to carry out research.

Dr. Flagg-Newton briefly discussed the R21 exploratory mechanism, the R24 and R25 mechanisms, SBIR grants, and conference grants. The R25 education mechanism can be used to develop a curriculum, to bring in a number of minority investigators and provide them with information related to the current science, and to respond to needs related to research, measurement, and other issues. For Project EXPORT centers (a Centers of Excellence model), R24s are used for developmental research programs and P20s are used for the exploratory centers for predominantly minority-serving institutions with mixed research portfolios. The P60 mechanism is used to assist larger institutions in engaging in Project EXPORT activities.

Regarding diversity, Dr. Flagg-Newton noted that differences between subgroups of a minority category may not be readily apparent because of aggregated data. Culturally appropriate models, culturally and linguistically appropriate instruments, and culturally specific interventions should all be requirements for clinical research.

Using appropriate research methods means that investigators should consult with ethnic minority populations in the design of studies addressing health issues related to such populations. Descriptive work is needed to generate knowledge on selected minority health topics such as ethnic health status and illness. Some health disparity issues should be dealt with at the community level by establishing a community-based office; the first program announcements for such community-based research will be released in early FY 2003.

Career development of minority nurse investigators should include grantsmanship training, research training, funding, mentoring, and peer review.

VIII. Society for the Advancement of Chicanos and Native Americans in Science

Dr. John Alderete, University of Texas Health Science Center at San Antonio

The mission of the Society for the Advancement of Chicanos and Native Americans in Science (SACNAS) is to encourage Chicano-Latino and Native American students to pursue graduate education and obtain the advanced degrees necessary for research careers and science-teaching professions at all levels. The SACNAS conference philosophy is to provide a unique forum for underrepresented students, postdoctoral scholars, faculty, and other professionals to exchange science-career knowledge and experiences through presentations within an organized annual scientific meeting format.

Dr. Alderete suggested that NCEMNA should continue to remind its constituents about the Coalition's mission. The Intercultural Cancer Council (ICC) can provide a role model for the NCEMNA. The ICC has persuaded Congress to fund three Institute of Medicine studies—environmental justice issues, cancer health disparities, and NIH funding prioritization. The Coalition could have a peer-reviewed journal to support publishable articles from the diverse group members. (SACNAS started as a newsletter and then became a high-quality journal.) He suggested that NCEMNA adopt bylaws that would include term limits, criteria for nominating officers and board members, and criteria for removal of members.

Major SACNAS initiatives include a graduate school application workshop, a biographies project, a summer mathematics institute (between Cornell University and the University of Puerto Rico), and K-12 inquiry-based instruction for teachers that is now modeled by numerous other science societies.

Dr. Alderete commented that perception is reality: If the NCEMNA sees itself as an average coalition, that is how it will be viewed. When awards are given by NCEMNA, criteria must be clear and meaningful and awardees must fulfill those criteria without question. He recommended attendance at the SACNAS conference as well as the biannual ICC conference. The organization's Web site is www.sacnas.org.

IX. Annual Biomedical Research Conference for Minority Students

Ms. Amy Chang, American Society for Microbiology

The American Society for Microbiology (ASM) has about 45,000 members; one of the ASM's strategic goals is to increase women and minority representation in the microbiological sciences at all levels.

Ms. Chang spoke about how the Annual Biomedical Research Conference for Minority Students (ABRCMS) was started, how its conference program was built, and how the program was managed. Sponsored by the NIGMS Division of Minority Opportunities in Research, ABRCMS is managed by the Education Department of the ASM. SACNAS was used as a model for the development of ABRCMS.

The ABRCMS goals are to encourage undergraduate students to pursue advanced training and careers in the biomedical sciences and to provide faculty mentors, advisors, and other program leaders with resources for facilitating student success. The ABRCMS aims and approaches to fulfilling those aims include:

- *Aim:* To share research project data and demonstrate scientific knowledge.
Approach: Offer scientific poster sessions, oral presentation colloquia, and cash awards for best presentations.
- *Aim:* To expose students to high-quality, significant scientific research in the biomedical sciences as well as excellent role models and mentors.
Approach: Offer scientific sessions on biomedical, quantitative, and social and behavioral sciences and special sessions on bioethics.
- *Aim:* To assist students in developing professionally as biomedical scientists, advisers, educators, and leaders.
Approach: Offer workshops on such topics as selecting a mentor and research project, getting into and going to graduate school, succeeding in graduate school, balancing personal and professional lives, and identifying careers.
- *Aim:* To learn about graduate programs and research fellowships in the biomedical sciences.
Approach: Offer an exhibitor's program including graduate school deans, professional organization representatives, foundation leaders, and Federal agency leaders.

An endowment pays for students to attend and present at ABRCMS meetings; a small registration fee is charged to offset catering expenses. Eight ABRCMS conferences attract from 200 to 500 participants. These student-focused meetings are safe, nurturing, and friendly forums at which student-to-student mentoring takes place and all students succeed. Minority student-focused meetings feature role models and mentors who have been funded and now are available to talk about their experiences and careers.

The organization's Web site is www.abrcms.org.

X. Breakout Groups

[At this point, workshop attendees were divided into four working groups, to confer and then report out at the next day's session.]

XI. Day Two: Reports From the Breakout Groups

Introduction

The following handouts were provided to workshop participants:

- A Short Guide to the Preparation of NIH Grant Applications
- Promoting Effective Program Evaluation: Expert Advice: Evaluation Tips and Resources
- Tips for New NIH Grant Applicants
- NBNA Conference Announcement and Call for Abstracts
- *Journal of the NBNA* (from December 2001)
- The Original How to Write a Research Grant Application

Report of Group 1: Mr. Calixto and Dr. Joyce Newman Giger

The subcommittee discussed mechanisms to significantly increase the number of ethnic minority nurse researchers with a sustained research trajectory in focusing on eliminating health disparities.

Specific aims included:

- Design a mentoring initiative for all levels of nurses ranging from the student level to the senior nurse researcher level facilitating partnerships through mechanisms such as conferences and scientific meetings.
- Analyze and evaluate the measures of success generated from the mentoring initiatives.

Report of Group 2: Dr. Villarruel

The subcommittee recommended designing a culturally based minority nurse research mentoring program.

Specific aims included:

- Establish a minority nursing research agenda for eliminating health disparities.
- Increase the number of minority nurse scientists engaged in community-based research.

Report of Group 3: Dr. Siantz

The subcommittee suggested two proposals. The first included designing and assisting to implement standard nursing policy for cultural competence education. The second suggested designing and facilitating a systematic process to link minority researchers with those needing cultural competence expertise in research and health care delivery, while assisting to link the career development of the minority nurse researcher.

Specific aims included:

- Convene a work group of five member associations of NCEMNA to plan a core curriculum in culturally competent research methodology and health care delivery.

- Deliver a conference to educate faculty, clinicians, and researchers about cultural competence in research using the developed curriculum.
- Identify the existing expertise among minority investigators within NCEMNA and develop a database.
- Disseminate a minority nurse database via a Web site and printed materials.
- Initiate a mentoring network for developing minority investigators to produce scholarly outcomes, e.g., publications and grant preparation and submission.

Report of Group 4: Dr. Williams

The subcommittee recommended activities to plan the structure and processes for a grant proposal and submission.

Specific aims included:

- Obtain grant templates.
- Seek funding support for consultants.
- Link existing grant recipients with new proposals and investigators.
- Plan for a conference effort to execute initiatives under mentoring, health disparity research design, and increased participation of minority nurse investigators in research.
- Design advisory panels to continue discourse on scientific content for conference, recruitment/retention, and graduate admission.
- Collect data and information from each member Association that would support the grant and be included in the appendix.

XII. Final Words and Adjournment

Dr. Williams

Dr. Williams stated that the ideas generated at this workshop were sound and well thought out. Three major recommendations that were consistent throughout the workshop discussion were:

- Develop curricula for culturally competent nursing practice.
- Develop strategic conferences to increase numbers of ethnic minority researchers.
- Develop culturally based minority nurse research mentoring/career development programs.

Dr. Williams requested that participants notify her as to the tasks on which they would be willing to work. NCEMNA will study all the plans generated at this workshop and will determine which to pursue. The Coalition is deeply concerned about the need for cultural competency; many researchers in minority communities do not possess cultural competency and would like to be more effective in their research by increasing those skills.

Each workshop participant received a copy of the preliminary plans for each of the four groups.

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