

National Library of Medicine
Environmental Health
Information Outreach Program

Proceedings

January 11, 2006



Picture courtesy NOAA Satellite and Information Service

*Rebuilding the HBCUs in the Gulf
in the Aftermath of Hurricane Katrina*

National Library of Medicine
National Institutes of Health
Department of Health and Human Services

"EQUIPMENT" by Edgar A. Guest was Dr. George Washington Carver's favorite poem; he can be heard reciting it at an audio station at the George Washington Carver Museum. An inspiring video of his life can also be viewed along with a superb collection of artifacts demonstrating his achievements. The Carver Museum and The Oaks, home of Booker T. Washington, comprise a National Historic District on the Tuskegee University campus.

EQUIPMENT

Figure it out for yourself, my lad,
You've all that the greatest of men have had,
Two arms, two hands, two legs, two eyes
And a brain to use if you would be wise.
With this equipment they all began,
So start for the top and say, "I can."

Look them over, the wise and great
They take their food from a common plate,
And similar knives and forks they use,
With similar laces they tie their shoes.
The world considers them brave and smart,
But you've all they had when they made their start.

You can triumph and come to skill,
You can be great if you only will.
You're well equipped for what fight you choose,
You have legs and arms and a brain to use,
And the man who has risen great deeds to do
Began his life with no more than you.

You are the handicap you must face,
You are the one who must choose your place,
You must say where you want to go,
How much you will study the truth to know.
God has equipped you for life, but He
Lets you decide what you want to be.

Courage must come from the soul within,
The man must furnish the will to win.
So figure it out for yourself, my lad.
You were born with all that the great have had,
With your equipment they all began,
Get hold of yourself and say: "I can."

--Edgar A. Guest

THE NATIONAL LIBRARY OF MEDICINE

**ENVIRONMENTAL HEALTH
INFORMATION OUTREACH PROGRAM**

PROCEEDINGS

National Library of Medicine
Bethesda, Maryland
January 11, 2006

Prepared for
Specialized Information Services Division
National Library of Medicine

Prepared by
Medical Education and Outreach Group
Oak Ridge Institute for Science and Education

This document was prepared for the **Specialized Information Services Division, National Library of Medicine, National Institutes of Health** by the Oak Ridge Institute for Science and Education (ORISE) through an interagency agreement with the U.S. Department of Energy (DOE). ORISE is managed by Oak Ridge Associated Universities under DOE contract number DE-AC05-06OR23100.

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TUSKEGEE UNIVERSITY

Established in 1880 and founded in 1881, Tuskegee University celebrates its 125th anniversary in 2006. Founded by Booker T. Washington, the university began in one room on a 100-acre former plantation which Washington had purchased himself. From these humble beginnings, Tuskegee University quickly attained national prominence under Dr. Washington's leadership and has continued to grow as a prestigious institution and gain world-renowned status under the leadership of individuals like George W. Carver and Robert Taylor. The campus covers 5,000 acres with more than 70 buildings, most of which were designed by African American architect R.R. Taylor, the first black M.I.T. graduate—and the bricks were laid and masonry done by the first Tuskegee students. The university currently supports a racially, ethnically, and culturally diverse population of more than 3,000 students.

Tuskegee was the first black college to be designated as a Registered National Historic Landmark on April 2, 1966, and the only black college to be designated a National Historic Site (October 26, 1974), a district administered by the National Park Service of the U.S. Department of the Interior.

Tuskegee also has a number of other special distinctions, including the following:

- **School of Veterinary Medicine.** Tuskegee is the only HBCU in the nation to offer the Doctor of Veterinary Medicine degree. The School of Veterinary Medicine has been in existence for more than 60 years and today graduates nearly 75 percent of black veterinarians in America.
- **Tuskegee University National Center for Bioethics in Research and Health Care** is the nation's first bioethics center devoted to engaging the sciences, humanities, law and religious faiths in the exploration of the core moral issues which underlie research and medical treatment of African Americans and other underserved people.
- **Tuskegee Airmen.** Tuskegee University was awarded the U.S. Army Air Corps contract to help train America's first Black military aviators because it had already invested in the development of an airfield, had a proven civilian pilot training program, and its graduates performed highest on flight aptitude exams. The all-Black squadrons of Tuskegee Airmen were highly decorated World War II combat veterans and forerunners of the modern day Civil Rights Movement. In 1998, Congress authorized \$29 million to develop the Tuskegee Airmen National Historic Site.
- **The General Daniel "Chappie" James Center for Aerospace Science and Health Education** honors America's first black four-star general, who was a Tuskegee University graduate, and houses the nation's only Aerospace Engineering department at an HBCU.
- **The Kellogg Conference Center**, one of only 12 worldwide and the only such center on an HBCU campus, was completed as a renovation and expansion of historic Dorothy Hall in 1994. A full-service hotel, it also serves as a training ground for students in the hospitality curriculum.

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**NATIONAL LIBRARY OF MEDICINE
ENVIRONMENTAL HEALTH INFORMATION OUTREACH PROGRAM MEETING
Tuskegee University
Kellogg Conference Center
Ballroom C
1 Booker T. Washington Blvd.
Tuskegee, Alabama
January 11, 2006
8:15 a.m. – 5:00 p.m.**

AGENDA

- | | |
|-------------------------|---|
| 8:15 a.m. – 8:45 a.m. | Registration and Continental Breakfast |
| 8:45 a.m. – 9:00 a.m. | Opening and Greetings
Henry Lewis, Pharm.D.
Chairman, EnHIOP |
| 9:00 a.m. – 9:30 a.m. | Welcome
William L. Lester, Ph.D.
Provost, Tuskegee University |
| 9:30 a.m. – 9:45 a.m. | Introductions
Henry Lewis, Pharm.D.
Chairman, EnHIOP |
| 9:45 a.m. – 10:00 a.m. | Remarks
Jack Snyder, M.D.
Associate Director, SIS
National Library of Medicine |
| 10:00 a.m. – 10:30 a.m. | Bioethics Discussion
Jack Snyder, M.D. |
| 10:30 a.m. – 10:45 a.m. | BREAK |
| 10:45 a.m. – 11:00 a.m. | Rural Health Outreach: Accessing the NLM's Health Databases.
(Funded by NN/LM Southeastern/Atlantic Region)
Juanita M. Roberts, M.S., Director of Library Services
Tuskegee University |

- 11:00 a.m. – 12:00 p.m. **NLM Small Awards**
Sarah Coulter Danner, Oglala Lakota College (2004 Award)
Leslie Schulz, Univ. of Texas at El Paso (2004 Award)
Doris Withers, Medgar Evers College/CUNY (2005 Award)
- 12:00 p.m. – 1:25 p.m. **Working Lunch**
Institutional Review Boards (IRBs)
Perry Brown, Ph.D.
Florida A&M University Institute of Public Health
- 1:30 p.m. – 3:00 p.m. **Tuskegee University Campus Tour**
- 3:00 p.m. – 4:45 p.m. **HBCU Panel Discussion: The Effects of Hurricane Katrina on
HBCUs in the Gulf Coast**
Xavier University of Louisiana, Southern University, Jackson State
University, and Texas Southern University
- 4:45 p.m. – 5:00 p.m. BREAK
- 5:00 p.m. –6:00 p.m. **George Washington Carver Museum**
Walk-through
- Poem: “Equipment”**
James Webster, Ph.D.
Tuskegee University
- Group Discussion: Planning for next EnHIOP Meeting
Wrap-up**
Henry Lewis, Pharm.D.

Rebuilding the HBCUs in the Gulf in the Aftermath of Hurricane Katrina

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
NATIONAL INSTITUTES OF HEALTH
NATIONAL LIBRARY OF MEDICINE**

**PROCEEDINGS OF THE ENVIRONMENTAL HEALTH
INFORMATION OUTREACH PROGRAM (EnHIOP) MEETING
January 11, 2006**

The Environmental Health Information Outreach Program (EnHIOP) panel convened on January 11, 2006 at 8:45 a.m. in the Kellogg Conference Center at Tuskegee University in Tuskegee, Alabama. The theme of the meeting was *Rebuilding the HBCUs in the Aftermath of Hurricane Katrina*. An additional focus of the meeting was bioethics, which is the branch of ethics that considers the ethical questions raised in biomedical research involving human subjects.

Distinguished presidents, deans, and professors representing 19 of the nation's Historically Black Colleges and Universities (HBCUs), Hispanic-Serving Institutions (HSIs), and Tribal Colleges and Universities attended the meeting to discuss issues and outreach activities in environmental health with staff from the National Library of Medicine's Division of Specialized Information Services and distinguished guest speakers. The member and alternate from Haskell Indian Nations University were both unable to attend. Dr. Ted Bates of Texas Southern University (TSU), one of the original nine representatives to this program, has resigned and Dr. Kimberly Pounds, Coordinator of Outreach Programs in the College of Pharmacy and Health Sciences at TSU has been appointed to be his successor.

ATTENDEES

Members from Participating Institutions:

Dr. Ann Barbre, Xavier University of Louisiana
Dr. PonJola Coney, Meharry Medical College
Dr. Robert Copeland, Howard University
Mrs. Sarah Coulter Danner, Oglala Lakota College
Dr. Constance Hendricks, Hampton University
Dr. Diógenes Herreño-Sáenz, University of Puerto Rico Medical Sciences Campus
Mr. David Hurley, Diné College (Alternate)
Dr. Henry Lewis, Florida A&M University and EnHIOP Chairman
Dr. Joseph McQuirter, Charles R. Drew University of Medicine and Science
Dr. Milton Morris, Benedict College
Dr. Richard Ochillo, Morgan State University
Dr. Kimberly Pounds, Texas Southern University (NEW)
Mr. Perry Riggins, Morehouse School of Medicine
Dr. John Schillinger, California State University Northridge (Alternate)
Dr. Leslie Schulz, University of Texas at El Paso

Dr. Cheryl Taylor, Southern University, Baton Rouge (Alternate)
Dr. Paul Tchounwou, Jackson State University
Dr. James Webster, Tuskegee University
Dr. Doris Withers, Medgar Evers College

Consultants to the EnHIOP:

Mr. John Scott, Center for Public Service Communications
Dr. Melvin Spann, NLM retired (EnHIOP Executive Secretary)

Speakers and Guests:

Mrs. Margaret Alexander, Tuskegee University
Dr. Velam Blackwell, Tuskegee University
Dr. Perry Brown, Florida A&M University
Dr. Tsegaye Habtemariam, Tuskegee University
Dr. William Lester, Tuskegee University
Mrs. Juanita Roberts, Tuskegee University
Mr. T.S. Williams, Tuskegee University

NLM Staff:

Dr. Jack Snyder, Division of Specialized Information Services, NLM
Ms. Marti Szczur, Division of Specialized Information Services, NLM
Ms. Cynthia Gaines, Division of Specialized Information Services, NLM (EnHIOP Project Officer)

NLM/SIS Contractor Employees:

Ms. Diane De Binder, Oak Ridge Institute for Science and Education
Ms. Rose Foster, Oak Ridge Institute for Science and Education (EnHIOP Project Advisor)

I. OPENING, WELCOME, AND INTRODUCTIONS

Dr. Henry Lewis, Pharm.D., Florida A&M University, EnHIOP Chairman, opened the meeting and introduced Dr. William Lester, Provost of Tuskegee University. The President of the University, Dr. Benjamin Payton, was unable to attend.

Dr. Lester welcomed the EnHIOP members, alternates, consultants, and guests to Tuskegee University and the Kellogg Conference Center. He explained that the conference center, which opened in 1994, is an integral part of the university and houses the hospitality management program where students receive training in hotel management and related services. He emphasized that Tuskegee, which celebrates its 125th anniversary this year, is state-related but not state supported; they petition the state for funding each year and hope to receive an increase in funding this year.

Dr. Lester was proud to point out that Tuskegee has a new direction for bioethics. The Tuskegee University National Center for Bioethics in Research and Health Care was established in 1999 as a partial response to President William J. Clinton's apology for the 1932 to 1972 U.S. Public

Health Service Study on Syphilis. The Center is housed in the former John A. Andrew Community Hospital (JAAMH), which was built just prior to WWI to improve medical services to the community. The JAAMH was entirely staffed by African American physicians and nurses and played a vital role in the community until it was closed in the early 1990s. Tuskegee also has a plan to begin a public health program with unique features that would include programs for hospital services, occupational therapy, and clinical sciences.

Tuskegee's programs are solid in engineering, liberal arts, nursing, the agricultural sciences, and veterinary medicine. The student population of approximately 2,850 is 70 percent residential with the remaining 30 percent of students living in approximately a 30-mile radius of the campus. Dr. Lester added that the continual outward growth of nearby Montgomery over the past 10 years has been a key factor in the growth of Tuskegee.

Following the welcome by Dr. Lester, Dr. Lewis asked everyone to introduce themselves.

II. BIOETHICS DISCUSSION

Dr. Jack Snyder, Associate Director, Division of Specialized Information Services, the National Library of Medicine, National Institutes of Health, gave an overview of the 1932 to 1972 U.S. Public Health Service Study on Syphilis, often called the "Tuskegee Experiment." Referring to the book by James Jones titled "Bad Blood," Dr. Snyder cited the deliberate failure to treat syphilis in approximately 400 African American men in Macon County, Alabama, after the implementation in 1929 of a syphilis control program. The plan was to administer twenty intramuscular injections of arsenical preparations. However, due to the onset of the Depression, only eight of those injections were administered to this group. The money ran out and the Public Health Service decided to do a different kind of experiment. Denial of treatment continued even after the initiation of penicillin as a treatment protocol in 1943. There was a perception in the 1940s and 1950s that African Americans had a different course of the disease than other ethnic groups. Penicillin was deliberately withheld from the men in this study group, and their physicians were encouraged to use aspirin as a sham treatment. In addition, many of the participants were not informed that they had syphilis. As late as 1970, the Public Health Service said that penicillin would likely have caused harm and not benefit to the study population.

The ultimate outcome of this tragedy has been a critical focus on bioethics and the instatement of the Tuskegee University National Center for Bioethics in Research and Health Care as an integral part of that focus. Dr. Snyder cited the United Nations Educational, Scientific and Cultural Organization (UNESCO) Division of Ethics of Science and Technology Guide No. 1, Establishing Bioethics Committees, as an excellent resource on this topic. The document describes four different types of bioethics committees: Advisory committees, which are established at the national level; committees implemented within health profession associations; hospital/institution bioethics committees; and institutional review boards.

The definition of a bioethics committee, Dr. Snyder explained, is a group that systematically and continually addresses the ethical dimensions of health sciences, life sciences, and innovative health policies—with the following goals:

- To improve public benefits
- To improve patient-centered health care
- To protect research subjects
- To facilitate the acquisition and use of medical knowledge
- To provide expertise and multiple viewpoints

Dr. Snyder stated that the perspective from the U.N. is that there are three essential questions to be addressed: How should I decide and act, how should we decide and act, and how should a government act. Richard McCormick is quoted throughout the literature, and he suggests that there are a number of conditions that have arisen over the last 20 years that have increased the perceived need for bioethics committees. These are:

- Increasing complexity of medical problems
- Increased range of options available for solving biomedical dilemmas
- Need for institutions to protect their public image
- Increasingly complicated and cross-disciplinary nature of judgments to be made
- Increasing emergence of the concept of patient dignity and autonomy
- Emergence of economic considerations
- Self interest of professionals that increasingly conflicts with interest of health care institutions
- Religious convictions of different groups
- Fewer and fewer one-on-one decisions being made in health care in favor of teams and collective wisdom

The UNESCO document points out some fundamental misunderstandings that exist about these committees. First, there is a perception by physicians and scientists that their activities are increasingly more controlled by non-scientists. Second, there continues to be an attitude of mistrust towards ethics committees, and third, there is the threat of dogmatic choices being made. Dr. Snyder pointed out that ethics committees are not to be seen as a substitute for the legal process.

The activities of bioethics committees include case analyses (real or hypothetical), generation of guidelines and policies, equitable distribution of health care resources, dispute resolution and public forums, and community outreach projects. A major activity is educating the members; since these are ad hoc individuals who rarely get paid to serve, education is a constant necessity.

Dr. Snyder recommended a number of good Internet sites on the subject of bioethics, many of which have “blogs.” A “blog,” short for “weblog,” is a frequently updated online journal or newsletter. His recommendations included the Women’s Bioethics Blog (*An epidemic of bad blood...*), Sufficient Scruples, the Well-timed Period, So What Can I Do, and the Health Care Law Blog. There are also a number of centers for bioethics, including the Hastings Center, which publishes *The Hastings Center Report*, a quarterly journal focusing on issues in health care ethics. And, of course, there is the new Tuskegee University National Center for Bioethics in Research and Health Care.

One of the major dilemmas globally, especially in underdeveloped nations according to the UNESCO document, is that committees are not sufficiently informed. Additionally, situations arise that are unanticipated. To address these issues, it is important to have a process for further educating different kinds of professionals to participate in bioethics teams and to find fast learners who can educate themselves.

In closing, Dr. Snyder asked the EnHIOP members to think about how environmental ethics and health disparities interface with biomedical ethics, what educational needs exist, and how EnHIOP can participate. He emphasized that there is a distinct opportunity for EnHIOP to collaborate with the emerging bioethics center at Tuskegee. For example, EnHIOP members could take advantage of post-doc opportunities to come to the Center.

III. RURAL HEALTH OUTREACH: ACCESSING THE NLM’S HEALTH DATABASES

Mrs. Juanita Roberts, Director of Library Services, Tuskegee University, gave a presentation on the project for which they received a grant from the National Network of Libraries of Medicine, titled *Rural Health Outreach: Accessing the National Library of Medicine’s Health Databases*.

The amount of the Tuskegee grant was \$50,000 for one year (December 1, 2004 – November 30, 2005). The goal of the project was to increase awareness, knowledge base, and utilization levels of the NLM databases among community consumers in Macon County, a rural county with a population of 12,000. Training was first developed and conducted for Tuskegee faculty, students, and staff within the campus libraries, the school of nursing, and the office of continuing education. It was then expanded to include four local churches, the Tuskegee-Macon County Public Library, and the Macon County Parish Nurse Program. Satellite resource centers were set up in the university libraries, the Continuing Education and Extension office, the School of Nursing and Allied Health at Tuskegee, and the four participating churches. Each center was furnished with a computer workstation dedicated to searching the NLM databases; a public library coordinator trains and demonstrates the databases to the general public. Searches are largely focused on PubMed, MedlinePlus, NIHSeniorHealth, Household Products, and Tox Town. Sample scripts were included in the training workbooks for the parish nurses to use in their congregations.

The project was publicized in the local newspaper and through academic libraries. The goal was to reach half of the estimated 1100 churchgoers in the county through the participating churches. Mrs. Roberts estimates that hundreds of Macon County residents have now at least accessed the

Internet as a result of their project. They placed a link to the NLM's home page on the University Libraries home page, and they are encouraging other schools in the county to do the same.

Mrs. Roberts will provide a presentation on this project to the Medical Library Association's national conference scheduled for May 19-24, 2006 in Phoenix, Arizona.

IV. NLM SMALL AWARDS UPDATES

In 2004, awards of \$5,000 each were made to fifteen EnHIOP schools that submitted proposals to NLM to carry out information-related projects. Many of these projects are near completion and presentations on two of the projects were made by Dr. Leslie Schulz, University of Texas-El Paso, El Paso, Texas and Mrs. Sarah Coulter Danner, Oglala Lakota College, Pine Ridge, South Dakota.

In 2005, thirteen awards of \$5,000 each were made. Dr. Doris Withers, Medgar-Evers College/CUNY, gave a summary of her school's 2005 small award project.

University of Texas at El Paso, College of Health Sciences—El Paso, Texas: *Enhancing Campus/Community Access to Health Disparity Information*

Dr. Leslie Schulz, Dean, College of Health Sciences, University of Texas at El Paso (UTEP), gave an overview of their 2004 small award project in which they enhanced campus and community access to health disparity information. The goal of the project was to promote the National Library of Medicine Web sites, the UTEP Library, and the Hispanic Health Disparities Research Center (HHDRC) materials on Hispanic health issues to end users. To accomplish this goal, enhancements were made to the HHDRC Web site and it was publicized as a gateway to the NLM and UTEP resources at information fairs. Materials were posted in lobbies, libraries, board rooms, and hospital staff areas throughout the community. In addition to the link to the National Library of Medicine, there is also a direct link to the MedlinePlus Hispanic American Health page.

Oglala Lakota College, Department of Nursing—Kyle, South Dakota: *Taking Charge—Living Wisely*

Mrs. Sarah Coulter Danner, Chair of the Nursing Department at Oglala Lakota College (OLC), discussed the 2004 small award project at OLC. The goal of the project is to enable the Oglala Lakota people to identify healthy lifestyles and reasons to pursue change in their lifestyles through exercise, a balanced diet, and understanding toxicants, including environmental toxicants. The project will use food models and the "Visible Man" presentation on CD-ROM to illustrate healthy and unhealthy outcomes. The presentation may be used by the Environmental Science Department and the Department of Education as well as the Department of Nursing. The presentation will be communicated to the faculty and the student senate and eventually to the student body and community groups. Nursing students and the Lakota Studies Department will have input in developing the actual format for the models and presentation.

Mrs. Danner first explained that the college is “decentralized” on the reservation, which is the size of Connecticut. Nine college centers are spread out across that area and there is one extension in Rapid City, South Dakota. Their challenge was to find a way to reach the entire reservation. The project involved setting up health fairs at three of the centers, which were also used as a way to recruit nurses for the nursing program.

At the health fairs, faculty and two students dressed in clinical uniforms and acted as diplomats for the nursing program as well as conducted demonstrations searching the NLM databases. A key topic was smoking and smoking during pregnancy—smoking is a major health issue on the reservation. They purchased a “smoking head” that shows the amount of tar that accumulates over different amounts of time in persons of different ages. Diabetes screening was provided and information on diabetes was accessed on PubMed. People were encouraged to use the computers to search the NLM databases while they were waiting. Other activities included blood pressure checks and letting people wear a “fat vest” to experience what it feels like to carry different amounts of extra weight. This year, the health fairs will be expanded to the elderly and high schools, as well as the remaining centers on the reservation. An additional element on dental decay in young children and water testing will be added. Mrs. Danner also mentioned that the Oglala Lakota people experience the highest rate of diabetes, juvenile rheumatoid arthritis, and SIDS in the country. The NLM databases provide a way for them to learn more about these diseases and disorders and to better cope with them.

Medgar Evers College/CUNY—Brooklyn, New York:

Using National Library of Medicine Online Resources to Promote Knowledge of Human Genomics and Related Minority Health Issues

Dr. Doris Withers, Vice President for Assessment, Planning and Accountability and Professor of Biology and Education at Medgar Evers College (MEC)/CUNY, presented highlights of the MEC 2005 small award project. The primary goal of this project is to develop a computer-enhanced educational module that will address one relevant health issue involving genomics and the environment and use NLM's online resources. The module will also support the MEC Genome Education and Outreach Program (MECGenEOP), a new initiative in the School of Science, Health and Technology with similar goals and create opportunities for cross-discipline activities. Dr. Withers spent the Fall 2005 semester at Howard University's National Human Genome Center as a part of the project.

The target audience for the project consists of science and non-science majors at MEC; MEC faculty in biology, environmental science, nursing, and social work; Provident Clinical Society (the Brooklyn chapter of the National Medical Association); and residents of Brooklyn. Progress to date includes the selection of asthma as the focus health issue because it has a large environmental as well as a genetic component. The computer-enhanced educational module is in the early stages of design and includes learning activities as well as links to NLM. Other activities being considered include the development of a Web page and a training CD. In addition, Dr. Withers will be doing a presentation on NLM for the Provident Clinical Society in Spring 2006.

V. INSTITUTIONAL REVIEW BOARDS

Dr. Perry Brown, Professor of Epidemiology and Chair of the Institutional Review Board (IRB) at Florida A&M University (FAMU) Institute of Public Health, gave a presentation on institutional review boards titled *Human Subjects Protection: Building Systems to Help Avoid the Next Research Disaster*. The IRB, he explained, is the group or committee at an institution that has the responsibility to review research projects that involve human subjects. Dr. Brown stressed the importance of researchers serving on an IRB so that they can realize the importance of protecting those who participate in generating new scientific knowledge.

Dr. Brown described the “systems” of human subject protection as consisting of processes (research approval and oversight), organizations (the IRBs that carry out the processes), and philosophies (perspectives on the role of the IRB in human research participant protection) designed to protect those who participate in research studies. These systems have been modified over the past 2300 years, he said, beginning with Hippocrates’ statement “Do no harm.” Following the Nuremberg trials, where medical experimentation abuses of World War II Nazi doctors came to public attention, the need for guidelines was recognized and led to the creation of the Nuremberg Code in 1945. These guidelines continued to be revised and extended, and in 1974 institutional review boards were established at institutions receiving federal funding for research. The 1972 public disclosure of the 30-year government supported Tuskegee Syphilis Study was instrumental in leading to federal regulations on the protection of human subjects. The 1979 Belmont Report summarized the basic ethical principles identified by the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, established in 1974. Today, the Office for Human Research Protections (OHRP) supports, strengthens, and provides leadership to the nation’s system for protecting volunteers in research that is conducted or supported by the U.S. Department of Health and Human Services.

Traditionally, the role of the IRB is to be paternalistic toward the participants to ensure they are adequately protected from any errors. When a breakdown in the process occurs, it can lead to undesirable outcomes or “research disasters,” which may include inappropriate review and oversight, improper consenting, inadequate plans, or conflicts of interest. The harm that may come to a research participant as a consequence can be physical, psychological/emotional, and/or socio/legal. Even the most subtle outcomes are still harmful. In order to avoid research disasters, what is needed is continuing enhancement of our systems and modification of our philosophies.

Dr. Brown described the basic tenets of bioethics as:

- Autonomy – Each person has the right to act as an independent agent, free from coercion and armed with facts.
- Beneficence – The moral obligation to act for the benefit of others.
- Nonmaleficence – The obligation not to inflict harm on others.
- Justice – Fair, equitable, and appropriate treatment for all persons.

IRB review is now mandated for all federal research involving human subjects per 45CFR46, and is also required for universities, hospitals, and community-based organizations. These

regulations extend to unfunded research by faculty and students. States also have required review by statute. Vulnerable populations, such as the elderly, the terminally ill, incarcerated populations, children, and populations living in contaminated environments, present special needs. Although their participation is not prohibited by ethical codes, there must be a satisfactory rationale for including them.

Key issues for biobehavioral research are privacy, confidentiality, and unintended consequences. Information must be requested carefully. Since it is necessary to report illegal behaviors, information must be obtained without getting unintended information. Continuing research monitoring and swift corrective action, including in-service and education, by the IRB can guard against unintended consequences. Punitive measures should be used as a last resort.

Elements of consent include providing background information to the subject, explaining why they are being asked to participate, and describing what will be done, how it will be done, and by whom it will be done. Participants also need to know the length of the study, what risks are involved as well as what the benefits are, how their identity will be protected, that they may withdraw at any time—and they need to receive answers to any questions they might have.

Dr. Brown stressed the importance of adding requisite expertise to your institution's IRB. For example, at Florida A&M University, every major college in the institution is represented on the IRB. Continuing development, including training and workshops, is also critical since no system is perfect, and what may have been acceptable yesterday may not be acceptable today.

Following the presentation, several questions were raised. In response to a question regarding surveys of students conducted by Offices of Institutional Research on campuses, Dr. Brown responded that there is only one category for exemption—research that is educationally based and involves evaluation of the educational programming process. Anything other than that should go to the IRB. At FAMU, anyone submitting a research proposal must complete an online IRB training module before they begin their research project, and they must attach their certificate of completion to the research project submission.

A member commented that the prevailing mistrust among minorities of not only the government, but also the health establishment and the research establishment regarding clinical trials needs to be overcome. It would help to publicize the names of minority institutions with clinical studies in order to increase minority confidence in the process.

When asked about the issue of community consent, Dr. Perry said this has been left to the researcher to document the level of community buy-in in the research proposal. It may be that community consent should be formalized in addition to individual consent. One member brought up that a governing board can serve for community consent.

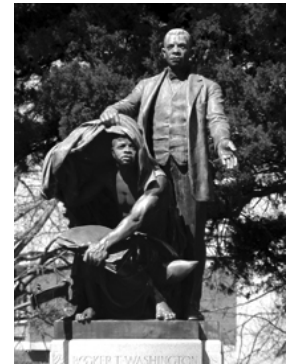
VI. TUSKEGEE UNIVERSITY CAMPUS TOUR

In the early afternoon, Dr. James Webster led a riding tour of the Tuskegee University campus and the historical landmarks on and around the campus, and included a visit to Moton Field (the home of the Tuskegee Airmen). Following is a brief summary of the tour.

Tuskegee University Campus

The highlight of the drive through campus was the Booker T. Washington Monument, “Lifting the Veil,” which stands at the center of the campus. Dedicated in 1922, the inscription at the monument’s base reads:

HE LIFTED THE VEIL OF IGNORANCE
FROM HIS PEOPLE AND POINTED
THE WAY TO PROGRESS THROUGH
EDUCATION AND INDUSTRY.



Dr. Webster also pointed out the different buildings on campus and discussed the architecture. Most of the buildings were designed by African American architect R.R. Taylor, the first black M.I.T. graduate—and the bricks were laid by the first Tuskegee students.

Grey Columns

A former plantation home, Grey Columns has served as the home of the President of Tuskegee University for many years. It is a two-story Greek Revival home built in approximately 1857 and has been described as the finest mansion in the area. The owners at the time gave the old brick molds used to build Grey Columns to the school so the students could construct their own classrooms and administrative buildings.

Downtown Tuskegee

Many antebellum homes, once occupied by planters, and small museums, businesses, and a confederate soldier monument grace the town of Tuskegee.

Moton Field – Home of the Tuskegee Airmen

The legacy of the Tuskegee Airmen is a vital one, not only for Tuskegee University but also for Macon County, Alabama. These more than 1,000 talented young pilots, trained at Tuskegee University between 1940 and 1946, were America’s first black aviators: the 332nd Fighter Group. Tuskegee University was awarded the U.S. Army Air Corps military training contract because it had already invested in the development of an airfield (Moton Airfield), had a proven civilian pilot training program, and its graduates performed highest on flight aptitude exams. Four squadrons made up the 332nd Fighter Group whose success was unmatched by any other fighter group—not a single bomber was lost to enemy fire in more than 200 combat missions. The group received the Presidential Unit Citation for its longest bomber escort mission to Berlin, Germany

on March 24, 1945, when it destroyed three German ME-262 Jet fighters and damaged five additional jet fighters without losing any of its bombers or any of its own fighter aircraft to enemy fighters. In 1948, President Harry Truman enacted Executive Order No. 9981 directing equality of treatment and opportunity in all of the United States Armed Forces, which in time led to the end of racial segregation in the U.S. military forces. In 1998, the U.S. Congress authorized \$29 million to develop the Tuskegee Airmen National Historic Site; however, only \$3.6 million has been appropriated for the site's implementation to date.

Health and Wellness Center of Tuskegee

After the closure of the John A. Andrew and Macon County Hospitals in the early 1990's, the need for a new medical care facility was critical. Infant mortality was high, emergency services were scarce, and even basic medical care was difficult to find. The Health and Wellness Center of Tuskegee, a privately-owned medical clinic, opened in 1996 to alleviate these inadequacies and serves four counties: Bullock, Elmore, Lee, and Macon.

George Washington Carver Museum

The George Washington Carver Museum was established in 1938 by the Trustees of Tuskegee Institute who wanted to honor Carver and his many contributions to the school, the surrounding community, and the nation. The museum is located in a building that originally served as a laundry and in which Carver's temporary lab was set up. It now houses all of his collections. Carver's good friend, Henry Ford, came to dedicate the museum and honor his friend in 1941. In 1947, four years after Carver's death, a fire tragically damaged both the museum and the collection—most of Carver's artwork was destroyed—but the museum reopened in an enlarged building in 1950. Following the 1974 legislation that established the Tuskegee Institute National Historic Site, the building was restored and the exhibits reorganized under the administration of the National Park Service.

VII. HBCU PANEL DISCUSSION: THE EFFECTS OF HURRICANE KATRINA ON HBCUs IN THE GULF COAST

Dr. Lewis introduced the panel discussion, which consisted of representatives from four Gulf State institutions: Southern University, Xavier University of Louisiana, Jackson State University, and Texas Southern University. Each panelist spoke of the impact of the hurricane on their respective institutions as well as on their own personal lives.

Southern University

Dr. Cheryl Taylor's presentation, titled *Navigating a Hurricane of Health Disparities*, focused on Southern University's "REACH 2010" project and how the work was impacted by Hurricane Katrina. Racial and Ethnic Approaches to Community Health (REACH) 2010 is a CDC initiative that supports community coalitions in designing, implementing, and evaluating community-driven strategies to eliminate health disparities. Southern University School of Nursing in Baton

Rouge, with a coalition of other partners, coordinated the only REACH 2010 project in Louisiana. The focus of the project was reducing cardiovascular risk factors in African American women through 40 churches across 10 denominations in New Orleans communities—a total of approximately 50,000 people. As a model for the program they used the acronym SERVICES: Support, Expertise, Respect, Vitality, Implementation, Credibility, Empowerment, and Sustainability.

Dr. Taylor stressed that the health disparities were there before the hurricane, but in the aftermath of Katrina they discovered how greatly environmental system failures exacerbate health disparities—every issue becomes far more complex. For example, the women who were serving as leaders in the REACH 2010 project are now dispersed all over the country as a result of Katrina, and the coalition’s activities took a dramatic turn in the aftermath of the hurricane.

During the first 30 days after Katrina, they sought information about the experiences people were having as evacuees. Dr. Taylor described the thirty most frequently stated problems, organized under six categories. All experiences listed are evidence-based.

1. Collapse of Information and Mass Communication Systems

The greatest problem in this category was misinformation, which leads to misunderstanding. In addition, evacuees were uncertain of their final destination due to disorganized evacuation procedures; those who left went where they were directed to go and often at gunpoint with no choice about where they were going. This had a tremendous impact on their mental health as well as their physical health.

2. Infrastructure Collapse

A major issue in this category was the lack of or slow help for evacuees in rural areas because more attention was placed on urban areas. Another issue was the Red Cross’s redefinition of a “family” as those residing at a single address, disregarding the sometimes very different cultural makeups that exist in African American families such as two or three families living together. As a result, whoever got to the Red Cross first and got their name and address listed in the database received a check—those who came later and who were living at the same address were turned away, being told they had already received a check. In addition, black professionals who volunteered their professional services were relegated to menial jobs. An example of this was a clinical psychologist and professor from Southern University whose offer to assist was met with extreme rudeness and prejudice and, as a result, she folded clothes for 6 hours in a shelter swollen with people who desperately needed her professional services.

3. No electricity or access to basic services

Electrical services were out and in some areas are still unavailable. In addition, there was a total lack of comprehensive mental health services and a lack of continuity of medical/dental care. Many disabled people who were unable to evacuate died.

4. Self-efficiency and personal skills

Adjusting to a new place and technology are difficult under the best of circumstances, but in the aftermath of the storm, it was especially difficult. Some people received money but did not know how to manage it or budget it. There was personal inertia and a misperception of what was really needed. The focus of the REACH 2010 Coalition activities shifted dramatically from a focus on risk factors for heart disease to basic survival.

5. Sociopathic environment

The looting that was shown on television was only a small part of the looting that occurred. There was also corporate looting—when a corporation takes advantage of the situation—and that continues, price-gouging from hotels and retail stores, and petty theft of personal belongings because all classes were mixed up together. There was also criminalization of people because they were evacuees, and children from New Orleans were ridiculed in other schools.

6. Grief, anguish and withdrawal

Individuals experienced uncertainty and ambivalence and, again, much of that continues. People are asked now if they are going to rebuild and return home, but it is too soon to make those kinds of major decisions. Everyone is still overwhelmed. Acute stress disorder occurs during a three-month period after a disaster. Post-traumatic stress disorder goes into two or three years. Also, the city's infrastructure is not built up enough. People do not want to leave their homes, but they have to deal with reality—and they still need support.

There was a profound sense of loss and homelessness. New Orleans residents have a reputation for being movers and shakers in their communities. They spend hours strategizing on the phone, face-to-face, late at night, early in the morning—helping people get from point A to point B. As a result of this disaster, they have now been dispersed, and they are having a hard enough time just trying to connect with each other.

Southern University School of Nursing and the REACH 2010 Coalition have been providing after-the-storm services to a FEMA village of about 2,000 residents located on a dust bowl in Baker, Louisiana. Residents who have asthma cannot survive there without medical care, so the nursing school and coalition have stepped up to provide primary care services for them to ensure that people would receive quality health care services from qualified health professionals. Services are comprehensive, ranging from mental health to maternal/child health to chronic health. The nursing school has a mobile health unit (The Jag Mobile) that they drive out to the village three days per week; they coordinate with other services to cover the other days. The elderly are experiencing many problems, including heart attack and stroke as a result of the storm. They provide them with resources and help them with their medications. Another focus is the children.

Another real problem, Dr. Taylor said, is that many people are profiting from the Katrina disaster. For example, rent for apartments in New Orleans has increased from \$500/month to

\$2,500/month. Grantseekers see a research opportunity to collect data on black people all in one place. Class action suit lawyers involved in suits regarding the levies are making lots of money while the individuals are receiving very little. Everyone profits from the storm except the victims.

Dr. Taylor expressed her deep gratitude to all of those who stepped up to the plate as first responders and contributed to alleviating the suffering in any way. Dr. Taylor herself experienced the loss of her home and her car, and her father lost his home. She specifically mentioned the Native Americans who opened their Coushatta casino to offer humane, compassionate, loving, caring treatment and allowed people to sleep in their hotels with no deadline for leaving. The libraries in Baton Rouge, and those in New Orleans that were able to remain open, assisted people in using the Internet to fill out FEMA applications, to find their families, and even to use online maps to find their homes—and then assisting people when they collapsed or had a panic attack as a result of what they saw. Southern University and A&M College School of Nursing was also a first responder—the Mobile Health Unit they had been operating for eight years gave them that opportunity.

Xavier University of Louisiana

Dr. Ann Barbre described her experience, and that of others, as an evacuee and the devastation of New Orleans that the hurricane left behind. Having been born and raised in New Orleans she has an intimate knowledge of the city, and what is left bears no resemblance to her memory of many parts of it. The neighborhoods she lived in are simply gone—there are no grocery stores, no churches, no restaurants, and no public libraries. Her home sustained devastating flood damage and her father's home is gone. Life as she knew it ended on August 29, 2005.

It was not until late Friday night that she and her husband heard any news of the hurricane coming to New Orleans. Before then it was the Florida coast that was being threatened. Even after the announcement that Katrina was headed their way, it did not make a huge impact because hurricanes are always “coming” to New Orleans, but historically they never seem to get there—this is the attitude of most of the populace. Although the evacuation process out of New Orleans has received much criticism in the news, Dr. Barbre stressed that in reality it went very well: 80 percent of the city was adequately evacuated. New Orleans learned its lessons from previous evacuations that had not gone well; they instituted a contraflow lane reversal and it worked.

There were, however, many difficulties for evacuees. She and her husband were able to fly to Las Vegas—it was the only destination for which they could get tickets, so that was where they went. Others less fortunate were forced to go wherever they were told to go. Several hundred students from Xavier were trapped in their dorms by the floodwaters in the heat and the humidity with no air conditioning, no electricity, no functioning bathrooms, and no potable water. Fortunately, gas power remained and the nuns on campus prepared meals for the students while staff members transported the food by boat from the convent to the dormitories. Xavier was unable to evacuate those students until the floodwaters receded. Senator Cleo Fields provided buses; the students were taken to I-10 where they waited for 24 hours to get out on these buses.

Xavier University, as well as Dillard University and Southern University of New Orleans were of course completely shut down by Katrina. Many schools were gracious in taking students as well as faculty, including Grambling State, Texas Southern, Jackson State, and even as far as Hampton in Virginia. Students were allowed to enroll and take classes, and as a result many of Xavier's students were able to complete the semester. Those who were unable to get to another school are behind a full semester. However, the university is taking steps to correct this. One blessing was that Xavier's 4th year pharmacy students were able to be placed in rotation sites throughout the semester due to the efforts of Xavier's Professional Experience coordinator, Dr. Rondall Allen, with assistance from the American Association of Colleges of Pharmacy and the American Council for Pharmaceutical Education; as a result, those students will be able to graduate on time. The College of Pharmacy will have the only commencement activity taking place in May.

Recovery will be long and slow. Xavier's classes begin on January 17 on campus, although the schedule looks like a marathon. The plan is to complete two full semesters by August, take one week off, and begin the regular fall semester so that by that time as many students as possible will be where they would have been had the hurricane not hit. Enrollment of more than 75 percent university-wide is expected, which is excellent. Both Xavier and Dillard were given the opportunity to use facilities at Loyola University and Tulane University. Xavier students will also be able to take classes via the Internet at Xavier, Loyola, or Tulane paying Xavier tuition.

Unfortunately, many faculty were released due to the closure of the university—36 percent according to the president's office. Staff was also released (59 percent), but many of them will be rehired at the start of the semester in January.

Recovery efforts at Dillard University will take much longer. The Dillard campus backs onto the London Avenue canal, which also burst, and their facilities were devastated. However, they began classes on January 9 in rooms divided by partitions at the New Orleans Riverside Hotel, where students are also living.

Southern University of New Orleans is not able to open at this time, so their students have been absorbed into classes at Southern University in Baton Rouge. They plan to reopen in the fall of 2006.

In closing, Dr. Barbre stressed that the nightmare is not over and will not be over for a long time. Over 75 percent of the city looks like it has been bombed—there is much that remains to be done.

Jackson State University

Dr. Paul B. Tchounwou addressed the EnHIOP regarding the impact of Katrina on Jackson State University (JSU). He stated that Jackson State was not directly affected by the hurricane as it is located 150 miles inland from the gulf. However, four major Mississippi cities were destroyed: Waveland, Gulfport, Biloxi, and Ocean Springs. Critical facilities located in these coastal areas that have been used by the university in its education and research endeavors were either destroyed or greatly impacted, including the University of Southern Mississippi Gulfport

Research Laboratory (GCRL) in Ocean Springs and the National Oceanic and Atmospheric Administration (NOAA)/National Estuarine Research Reserve (NERR) in Moss Point. Dr. Tchounwou has an ongoing research project funded by NOAA that involves the latter; the project is to study the impact of natural and anthropogenic factors on coastal ecosystems, especially at the Grand Bay NERR and the Mississippi Sound. The research activities of this project were severely impacted due to the loss of the research boat, and the destruction of the laboratory research facilities at the Grand Bay NERR and GCRL.

Hurricane Katrina also affected the Second International Symposium on *Recent Advances in Environmental Health Research* that was organized by JSU from September 19-21, 2005 in Jackson. A last minute arrangement had to be made to move the conference from the Marriott hotel to the Regency hotel, due to the fact that FEMA had occupied all the meeting spaces at the Marriott. Hence, symposium attendees had to be shuttled from the Marriott to the Regency every day. Also, due to the displacement of his research collaborators at Tulane University Health Sciences Center, it was not possible for Dr. Tchounwou to develop and submit a collaborative proposal in response to the new ARCH RFA from the NIH-National Institute of Environmental Health Sciences.

Under the leadership of the top administration, JSU assisted many students and faculty members from Katrina-devastated areas, by creating a Katrina-Relief Fund, and by revising the entire academic schedule to ensure that all displaced students were helped. JSU took about 150 students, most of whom were from Xavier University, Dillard University, and Southern University in New Orleans, LA. In Dr. Tchounwou's department (Department of Biology) alone, there were six students from the New Orleans' area, and two faculty members from Xavier University.

Texas Southern University

Dr. Kimberly Pounds spoke about her personal experiences and Texas Southern University's role in the aftermath of Hurricane Katrina. She was very thankful that she and her husband were able to house 25 of their family members, most of whom were living in the hardest-hit areas of New Orleans. Texas Southern took in about 700 New Orleans students into programs across the campus. The College of Pharmacy and Health Sciences referred Xavier University's advance experiential director to potential rotation sites for their displaced students. In addition they have hired faculty members from Xavier, Dillard, and Southern. All students received a tuition deferment.

VIII. CONCLUDING ACTIVITIES AND WRAP-UP

Concluding activities took place in the George Washington Carver Museum, a short walk from the Kellogg Conference Center. The group discussion on planning for the next meeting was postponed to the end of the day and was very brief due to the time taken for the panel discussion. The presentation about the museum that was scheduled did not take place as the National Park Service representative was unavailable at the last minute. However, the attendees were able to walk through the museum, which houses Dr. Carver's original laboratory, his extensive

collection of native plants, minerals, needlework, paintings, drawings, personal belongings, and the array of products he developed.

After everyone finished looking through the museum, Dr. Lewis brought everyone back together, recapped the day's events, and facilitated scheduling of the next meeting, which was tentatively set for Friday, June 23 at the NLM in Bethesda, Maryland. Before dismissing, Dr. Webster read Dr. Carver's favorite poem entitled "Equipment" by Edgar Guest, which can be found on the inside front cover of this document.

The meeting adjourned at 6:00 p.m.

APPENDIX A

ENVIRONMENTAL HEALTH INFORMATION OUTREACH PROGRAM

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2005 EnHIOP PROJECTS

Benedict College, Environmental Health Science Program—Columbia, South Carolina:
Continuing to Facilitate the Use of the NLM's Web-based Databases Through Efforts of Benedict College

This project is a followup to Benedict's 2004 project. The goals are to: 1) Increase the on-campus awareness of environmental health information and other information available within NLM's databases; 2) Increase the on-campus utilization of NLM databases; and 3) Provide NLM-based information outreach to communities currently being assisted by the Benedict College Environmental Health Science Program. Objectives are to continue the on-campus survey of junior and senior students at Benedict College to further ascertain their knowledge and use of NLM databases and inform students about the benefits and services that are available within the NLM databases. Three strategies will be used to increase usage: 1) Provide monthly highlighting of an NLM database; 2) Encourage database use within student academic organizations through use-competition; and 3) provide annual re-surveys to determine use after exposure to the databases. Information brochures about NLM databases will also be provided to at least 50 percent of the local community, a followup survey will be conducted, and NLM database research information will be provided to concerned citizens within the community relating to any identified types of cancer.

California State University-Northridge, Dept. of Environmental and Occupational Health—Northridge, California: *Presentation of NLM Databases Across Curriculum at a University*

The goal of this project is to raise awareness of NLM Environmental Health databases among CSUN faculty and students across all disciplines. Objectives are to: 1) Develop sample one-hour lesson plans for specific courses that demonstrate how the NLM Environmental Health databases can be used by faculty and students; and 2) Develop a means of distributing these instructional materials. The concept of incorporating a lecture discussing how to use NLM resources and services with an applied approach will be publicized throughout the university. Interested faculty who agree to incorporate some form of the training in their coursework will be awarded a stipend of \$250. This will provide incentive to the faculty in their participation. Funding will also be used to support printing, inks, small equipment purchases, or other incidental expenses that will support the project.

Charles R. Drew University of Medicine and Science, Dept. of Oral and Maxillofacial Surgery—Los Angeles, California: *Environmental and Toxicological Information Outreach*

The goals of this project are to: 1) Increase awareness of NLM online resources related to the use of toxicological, environmental, occupational, and hazardous materials/waste at Charles R. Drew University of Medicine and Science (CRDUMS); 2) Provide instruction in the use of the Web-

APPENDIX C
2005 EnHIOP Projects

based resources; and 3) Enhance the use and distribution of health-related information to the Drew University faculty, staff, and students. Training will be conducted for approximately 100-200 faculty, students, and staff of Drew University and its affiliated training sites. The focus of the training will be how to retrieve scientific literature in the fields of medicine, nursing, dentistry, and healthcare systems; information from TOXNET on toxicological profiles on hazardous chemicals that cause health and environmental effects; Haz-Map information about the possible effects of exposure to chemicals and biological agents; and information from Tox Town on common toxic substances encountered in everyday life.

Diné College, Division of Math Science and Technology—Shiprock, New Mexico: *Health Survey of Navajo People in the Aneth Region of Utah*

The goals of the project are to support a research study comparing the current self-reporting of health symptoms to a previous study conducted in 1998 to determine if self-reported health symptoms change in relationship with distance from oil and gas production facilities. Activities will include development of education and outreach on the dangers of oil/gas exposure, ways to decrease risks and promote community empowerment and input for a remedial program. Survey participants will also be asked about their ideas on ways to decrease risks and what topics need more research. The project objectives are to: 1) Survey community members to determine self-reported health effects; 2) Evaluate the data with respect to location from emission sources and air-shed plum migration; 3) Train students in the use of geospatial analysis; 4) Communicate the results of the assessment to community members and the tribal leadership; and 5) Use the results to prioritize resources and develop programs to address the health needs of impacted communities; and 6) Collect air data on CO, VOCs, H₂S and SO₂. This is the second year of this study. Changes needed to be made to the survey form due to issues with the Navajo language and in particular the dialect of Navajo spoken in the Aneth area and survey techniques have been modified to be more cost effective.

Florida A&M University, College of Pharmacy—Tallahassee, Florida: *Using NLM Online Resources to Develop a Model Health Literacy Program for Minority and Disadvantaged Communities*

The goal of this project is to develop a model community-based health literacy improvement program to enhance health literacy in underserved populations, incorporating the online resources of the National Library of Medicine. This is a three-phase project; each phase will take approximately 12 months to complete. Phase one includes designing the health literacy workshop, developing formal agreements with four targeted training sites in Tallahassee, purchasing and placing one computer at each site, and conducting training sessions on utilization. In phase two, approval by the University's Institutional Review Board will be secured and patients/patrons will be randomly selected and followed relative to their utilization of the resources provided to them. Phase three will consist of analysis of the findings from phase two. A portion of the funding will be used for supplies to support the project.

APPENDIX C
2005 EnHIOP Projects

Jackson State University—Jackson, Mississippi: *Enhancing Environmental Health and Biomedical Sciences Research and Education at Jackson State University*

The goal of this project is to enhance environmental health and biomedical sciences research and education at Jackson State University (JSU) by organizing and implementing workshops to increase awareness and accessibility and to train participants on the use of the National Library of Medicine's online environmental health and medical resources. The focus of the training will be on MEDLINE/PubMed, MedlinePlus, TOXNET, Haz-Map, and Tox Town. The target audience will include 30 JSU faculty members in biomedical sciences and environmental health research, 40 graduate students, and 50 undergraduate students. A total of four workshops will be conducted.

Medgar Evers College, CUNY—Brooklyn, New York: *Using NLM Online Resources to Promote Knowledge of Human Genomics and Related Minority Health Issues: An Education and Outreach Program for Students, Faculty, and Community*

The goal of this project is to develop and design the framework and content for a computer-enhanced educational module that addresses genomics and one genomics-related health issue in the African American community, incorporating the online resources of the National Library of Medicine. Possible NLM resources to be incorporated include MedlinePlus, Genetics Home Reference, and GENE-TOX. The module will be implemented initially through a workshop for MEC students majoring in biology, environmental science, and nursing, and one of two target community groups: 1) African American doctors in Brooklyn who belong to the Provident Clinical Society of NMA, or 2) Residents of the Brooklyn community. This project will seed the development of the "Medgar Evers College Genomics Education and Outreach Program, to educate and disseminate information about human genomics and the issues that affect and are relevant to the African American community.

Meharry Medical College—Nashville, Tennessee: *Approach for Building New Community-based Library Partnerships with Local Community Churches*

The goal of this project is to encourage and support the diffusion of principles of access to health information technology by increasing awareness in one faith-based organization in Nashville/Davidson County. The project will document a conceptual model for implementation and effectiveness of approaches that involves a collaboration of public libraries and faith-based organizations in the diffusion of health information technology. The project plans to increase the awareness of 75 members of the Claiborne Street Missionary Baptist Church around access to health information technology by providing 10 sessions on use of a computer for accessing health information. This is a continuation of the 2004 EnHIOP project. This year, an additional computer will be purchased to respond to the increased interest and usage of the computer purchased last year.

APPENDIX C
2005 EnHIOP Projects

Morgan State University, Department of Biology—Baltimore, Maryland: *The Use of Laptop Computers to Enhance the Learning of Five Selected Junior and/or Seniors Who Have Expressed the Desire to Proceed to Professional Doctoral Degrees*

The goal of the project is to improve the competitiveness of five undergraduate students to get accepted into graduate and professional schools after matriculating from Morgan State University. Funding will be used to purchase four laptop computers; the fifth computer will be provided by the Principal Investigator. Students will be randomly selected from those students with a GPA greater than 3.50 on a 4.00 scale. Objectives of the project are to: 1) Explore how the availability of laptop computers can positively impact upon the selected students; 2) Strengthen the links between brilliant undergraduate students and selected disciplines in which they can continue their studies on a graduate level; and 3) Assist students in improving their research capabilities in the areas of data accumulation/compilation and presentations.

Oglala Lakota College, Department of Nursing—Kyle, South Dakota: *Taking Charge—Living Wisely, Phase II*

The goal of the project is to enable the Oglala Lakota people to identify healthy life styles and reasons to pursue the change in lifestyles through exercise, balance diet, and understanding toxicants and environmental toxicants. An addition to the project this year is to look at the demographics of dental caries in children under the age of five through: 1) Using posters and small group discussions to educate parents and children about oral hygiene and the effects of sugar on teeth; and 2) Testing the water in various districts to detect fluoride levels and environmental toxicants.

Southern University A&M College, School of Nursing, Office of Research—Baton Rouge, Louisiana: *REACH for a Breath of Fresh Air Indoors and Outdoors with African American Families (INDOORS) and First Responders (OUTDOORS)*

The overall goal of this project is to address the issue of low environmental health literacy among African Americans in Baton Rouge, Louisiana by increasing awareness of and access to NLM environmental health information technology resources in the targeted population. Objectives are to: 1) Training 30-50 African Americans to use NLM online resources and recommendations to decrease their exposure to indoor environmental health hazards; 2) Increase access to and use of NLM's Tox Town and WISER resources by African American librarians and patrons using Internet access on public library computers; 3) Introduce emergency nurses, security personnel, and first responders to NLM's WISER software; and 4) Develop and disseminate 1,000 asthma care fact sheets to women and children to promote their applied use of environmental health protection strategies.

APPENDIX C
2005 EnHIOP Projects

University of Puerto Rico, Department of Pharmacology and Toxicology, School of Medicine—San Juan, Puerto Rico: *UPR-Medical Sciences Campus: Outreach Project in Environmental Health Information*

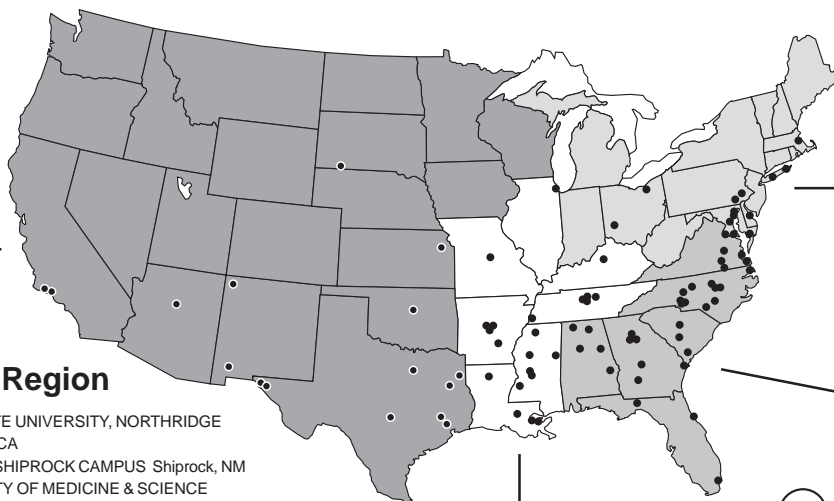
The goal of the project is to help to reduce environmental health disparities through information access to groups and communities in Puerto Rico. Project objectives are to: 1) Develop and schedule a set of training activities directed to middle and high school teachers and students to equip them to serve as liaisons to provide information and orientation about HIV and STDs to other teens and young adults at risk to acquire HIV or STDs; 2) Train UPR biology and pre-medical students in the effective use of NLM resources; 3) Train groups of women to access, retrieve, and understand access women's health information available on the Internet; and 4) Train a group of first year UPR Pharmacy School graduate students in the effective use of NLM resources. The training sessions will be conducted at the Community Technology Centers (CTC) of ASPIRA, Inc. of Puerto Rico (a nonprofit organization devoted to the educational and leadership development of Puerto Rican youth), the UPR Natural Sciences Library Computer Center in Rio Piedras, and the Computer Center of the UPR Medical Sciences Campus.

Xavier University of Louisiana, College of Pharmacy—New Orleans, Louisiana: *Teaching Elderly Adults to Use the Internet to Access Health Care Information*

The purpose of this project is to teach a targeted group of African American senior citizens to use the Internet to access health care information through NLM Internet resources. The target audience is a senior center in a predominantly African American neighborhood near the University with a high rate of impoverished households and where almost half of the households have grandparents as the caregivers of minor children. Funding will be used to place a computer, printer, and supplies at the senior center to facilitate access to NLM resources, including MedlinePlus®, NIHSeniorHealth, and ClinicalTrials.gov. Training will be provided by a clinical pharmacist. Seniors will be encouraged to print copies of the information for subsequent review and reference, and to encourage other seniors at the center to participate. A total of six training sessions are initially planned, to be provided to groups of five seniors over a one-week period per month. As a part of student training, fourth-year pharmacy students will participate in assessing the effectiveness of the intervention strategies to enhance knowledge and foster appropriate health behaviors.

HBCUs, HSIs, and Tribal Colleges Environmental Information Outreach

Participating Colleges and Universities



Western Region

CALIFORNIA STATE UNIVERSITY, NORTHRIE
Northridge, CA
DINÉ COLLEGE, SHIPROCK CAMPUS Shiprock, NM
DREW UNIVERSITY OF MEDICINE & SCIENCE
Los Angeles, CA
HASKELL INDIAN NATIONS UNIVERSITY Lawrence, KS
HUSTON-TILLOTSON COLLEGE Austin, TX
JARVIS CHRISTIAN COLLEGE Hawkins, TX
LANGSTON UNIVERSITY Langston, OK
NEW MEXICO STATE UNIVERSITY Las Cruces, NM
NORTHERN ARIZONA UNIVERSITY Flagstaff, AZ
OGLALA LAKOTA COLLEGE Pine Ridge, SD
PAUL QUINN COLLEGE Dallas, TX
PRAIRIE VIEW A&M UNIVERSITY Prairie View, TX
TEXAS SOUTHERN UNIVERSITY Houston, TX
TEXAS WOMAN'S COLLEGE Denton, TX
UNIVERSITY OF TEXAS AT EL PASO El Paso, TX
WILEY COLLEGE Marshall, TX

Lower Mississippi Delta Region

ALCORN STATE UNIVERSITY Lorman, MS
ARKANSAS BAPTIST COLLEGE Little Rock, AR
BLUEFIELD STATE COLLEGE Bluefield, WV
CHICAGO STATE UNIVERSITY Chicago, IL
DILLARD UNIVERSITY New Orleans, LA
FISK UNIVERSITY Nashville, TN
GRAMBLING STATE UNIVERSITY Grambling, LA
JACKSON STATE UNIVERSITY Jackson, MS
KENTUCKY STATE UNIVERSITY Frankfort, KY
LANE COLLEGE Jackson, TN
LEMOYNE-OWEN COLLEGE Memphis, TN
LINCOLN UNIVERSITY Jefferson City, MO
MARY HOLMES COLLEGE West Point, MS
MEHARRY MEDICAL COLLEGE Nashville, TN
MISSISSIPPI VALLEY STATE UNIVERSITY Itta Bena, MS
PHILANDER SMITH COLLEGE Little Rock, AR
RUST COLLEGE Holly Springs, MS

SHORTER COLLEGE North Little Rock, AR
SOUTHERN UNIVERSITY SYSTEM Baton Rouge, LA
TENNESSEE STATE UNIVERSITY Nashville, TN
TOUGALOO COLLEGE Tougaloo, MS
UNIVERSITY OF ARKANSAS AT PINE BLUFF Pine Bluff, AR
XAVIER UNIVERSITY New Orleans, LA

Caribbean Region

CATHOLIC UNIVERSITY OF PUERTO RICO Ponce, PR
INTER-AMERICAN UNIVERSITY OF PUERTO RICO San Juan, PR
PONCE SCHOOL OF MEDICINE Ponce, PR
UNIVERSIDAD DEL TURABO SUAGM Gurabo, PR
UNIVERSITY OF PUERTO RICO MEDICAL SCHOOL San Juan, PR
UNIVERSITY OF THE SACRED HEART San Juan, PR
UNIVERSITY OF THE VIRGIN ISLANDS St. Thomas, VI

Northeastern Region

BOWIE STATE UNIVERSITY Bowie, MD
COPPIN STATE COLLEGE Baltimore, MD
CENTRAL STATE UNIVERSITY Wilberforce, OH
CHEYNEY UNIVERSITY Cheyney, PA
DELAWARE STATE UNIVERSITY Dover, DE
HOWARD UNIVERSITY Washington, DC
LINCOLN UNIVERSITY Lincoln University, PA
MEDGAR EVERS COLLEGE-CUNY Brooklyn, NY
MORGAN STATE UNIVERSITY Baltimore, MD
NOTRE DAME COLLEGE Cleveland, OH
ROXBURY COMMUNITY COLLEGE Roxbury, MA
UNIVERSITY OF MARYLAND, EASTERN SHORE
Princess Anne, MD
UNIVERSITY OF THE DISTRICT OF COLUMBIA
Washington, DC

Southeastern Region

ALABAMA A&M UNIVERSITY Normal, AL
ALBANY STATE COLLEGE Albany, GA
ALLEN UNIVERSITY Columbia, SC
BARBER-SCOTIA COLLEGE Concord, NC
BENEDICT COLLEGE Columbia, SC
BENNETT COLLEGE Greensboro, NC
BETHUNE-COOKMAN COLLEGE Daytona Beach, FL
CLAFLIN UNIVERSITY Orangeburg, SC
CLARK ATLANTA UNIVERSITY Atlanta, GA
ELIZABETH CITY STATE UNIVERSITY Elizabeth City, NC
FLORIDA A&M UNIVERSITY Tallahassee, FL
FLORIDA MEMORIAL COLLEGE Miami, FL
FORT VALLEY STATE COLLEGE Fort Valley, GA
GADSDEN STATE COMMUNITY COLLEGE Gadsden, AL
HAMPTON UNIVERSITY Hampton, VA
INTERDENOMINATIONAL THEOLOGICAL CENTER
Atlanta, GA
JOHNSON C. SMITH UNIVERSITY Charlotte, NC
LAWSON STATE COMMUNITY COLLEGE Birmingham, AL
LIVINGSTONE COLLEGE Salisbury, NC
MILES COLLEGE Birmingham, AL
MOREHOUSE SCHOOL OF MEDICINE Atlanta, GA
MORRIS BROWN COLLEGE Atlanta, GA
NORFOLK STATE UNIVERSITY Norfolk, VA
NORTH CAROLINA A&T STATE UNIVERSITY Greensboro, NC
NORTH CAROLINA CENTRAL UNIVERSITY Durham, NC
OAKWOOD COLLEGE Huntsville, AL
PAINE COLLEGE Augusta, GA
PEMBROKE STATE UNIVERSITY Pembroke, NC
SAINT AUGUSTINE'S COLLEGE Raleigh, NC
SAINT PAUL'S COLLEGE Lawrenceville, VA
SAVANNAH STATE COLLEGE Savannah, GA
SHAW UNIVERSITY Raleigh, NC
SOUTH CAROLINA STATE UNIVERSITY Orangeburg, SC
SPELMAN COLLEGE Atlanta, GA
TALLADEGA COLLEGE Talladega, AL
TUSKEGEE UNIVERSITY Tuskegee, AL
VIRGINIA STATE UNIVERSITY Petersburg, VA
VIRGINIA UNION UNIVERSITY Richmond, VA
WINSTON-SALEM STATE UNIVERSITY Winston-Salem, NC

TRAINING • FREE INTERNET ACCESS • USER SUPPORT

As part of its outreach efforts, the Specialized Information Services Division of the National Library of Medicine (NLM), in partnership with the Oak Ridge Institute for Science and Education (ORISE), developed and designed a training program to strengthen the capacity of Historically Black Colleges and Universities (HBCUs), Hispanic-serving institutions, and tribal colleges and universities to train medical and other health professionals in the use of toxicological, environmental, occupational, and hazardous waste information resources developed at NLM. This training also benefits the economically disadvantaged and underserved communities surrounding these institutions.

Health professionals at colleges and universities throughout the country are taught how to navigate the Internet maze to find quality critical health information quickly. Many of those trained have facilitated similar training at their respective schools for students, faculty/staff, community leaders, and other health professionals. Participants are trained to access and utilize the NLM's Toxicology and Environmental Health Information Program (TEHIP) databases on the Internet to address problems and concerns about the impact of environmental hazards. Training includes accessing these databases through the TOXNET Web Interface (<http://toxnet.nlm.nih.gov>) and searching other relevant Internet resources.

For additional information about this outreach program, contact one of the individuals listed below:

NATIONAL LIBRARY OF MEDICINE/ NATIONAL INSTITUTES OF HEALTH

Gale Dutcher
(301) 496-5082

OAK RIDGE ASSOCIATED UNIVERSITIES/ OAK RIDGE INSTITUTE FOR SCIENCE AND EDUCATION

Rose Foster
(865) 576-9342