VISION

The Center for Healthy Families and Cultural Diversity (CHFCD) is dedicated to leadership, advocacy, and excellence in promoting culturally-responsive quality health care for diverse populations. The Center exists to advance and implement ongoing efforts to foster justice and equity in health care (see Attachments A and B).

MISSION

In partnership with federal, state, and local organizations, our aim is to facilitate the provision of high quality, culturally-responsive health care through: (1) education and training; (2) curricular innovations for health care professionals; (3) technical assistance and consultation; (4) research/evaluation that examines access, utilization, effectiveness, and outcomes of culturally and linguistically competent health services delivery; and (5) dissemination of diversity information.

PERSONNEL

Core Faculty and Staff
Robert C. Like, MD, MS, Director
Jo Ann Kairys, MPH, Executive Director
Christine K. Stroebel, MPH, Program Development Analyst/Health Educator
Cynthia Duncan-Robinson, Secretary

Participating Department Faculty:
Rhina Acevedo, MD; Joyce Afran, MD; Benjamin F. Crabtree, PhD; Barbara DiCicco-Bloom, RN, PhD; Mark C. Fulcomer, PhD; Jan E. Gottlieb, MPH; Patrice B. Gregory, PhD, MPH; David F. Howarth, MD, MPH; Fred Kobylarz, MD, MPH; Paula A. Krauser, MD, MA; Steven J. Levin, MD; Jeffrey Levine, MD, MPH; Karen Wei-Ru Lin, MD, MS; Denise V. Rodgers, MD; Lynn Schwenzer, MHSA; Marian R. Stuart, PhD; and Alfred F. Tallia, MD, MPH.

Postdoctoral Fellows:
Nezar Al Falluji, MD, Maisha Amen, RN, PhD, Katherine Chung, MD, Viktor Dombrovskiy, MD, PhD; Ambarina Faiz, MD, MPH; Julia P. Grimes, DO; Darios Getahun, MD, MPH; Myra Shoub-Nelson, PhD; Anna Petrova, MD, PhD, MPH; John Scott, MD, PhD; Ava Stanley, MD
OVERVIEW

The Department of Family Medicine's Center for Healthy Families and Cultural Diversity (CHFCD) completed its fourth full academic year, meeting all of its 2001-2002 goals. Major accomplishments and activities during the past year included the following:

- continued progress toward achieving CHFCD business plan goals and objectives;
- received major grant funding from the Aetna 2001 Quality Care Research Fund for the project, “Assessing the Impact of Cultural Competency Training Using Participatory Quality Improvement Methods”;
- provided technical assistance/consultation to federal and state governmental agencies, academic medical centers, hospitals, ambulatory care facilities, managed care organizations, professional organizations, and the private sector;
- collaborated with other departments and programs within UMDNJ and RWJMS as well as other academic medical centers, professional organizations, and community/advocacy groups in developing cultural competency curricula and other diversity-related educational materials;
- gave invited lectures, workshops, and seminars about culturally and linguistically competent care to a wide variety of health care professionals and organizations;
- continued integration of cultural diversity education content into the Department of Family Medicine's predoctoral, residency, and fellowship training programs;
- collaborated with Department of Family Medicine's Research Division in developing research opportunities integrating participatory quality improvement (PQI) and cultural competence into practice-based primary care research relating to the elimination of health disparities;
- continued to serve as the administrative home for the HRSA-funded NRSA Primary Care/Health Services Research Postdoctoral Fellowship Program, and completed work on the AHRQ-funded “Applied Primary Care/Health Services Research” curriculum [http://www2.umdnj.edu/fmedweb/chfcd/nrsaprfp/nrsa_pages_index.htm](http://www2.umdnj.edu/fmedweb/chfcd/nrsaprfp/nrsa_pages_index.htm);
- updated and enhanced the CHFCD website, and continued to expand the library of cultural competency, multicultural, and patient- and family-centered care print and audiovisual resource materials;
- continued participating in USAID-funded health care partnership program and other international technical assistance efforts providing skills training, service delivery, and advocacy; and
- continued dissemination of information to and networking with international, national, state, and local organizations interested in the delivery of culturally and linguistically appropriate services.
Cultural diversity training was integrated into a wide variety of educational venues and course offerings for medical students, other health professions students, family practice residents, and postdoctoral research fellows.

**Pre-Doctoral Program Activities**

**Introduction to the Patient Course – First Year Medical Students**
One of the course’s small group sessions focused on cultural diversity. The goals of the session were to: increase student’s understanding of the impact of culture on health, illness, and the doctor-patient relationship; to increase awareness of the cultural diversity in one’s own community; and to explore the effect of one’s own cultural backgrounds and belief systems on how one might practice as a physician. In preparation for the session, students completed a “Family Health Beliefs Survey” on themselves and on a patient. Differences and similarities about health beliefs and practices among different cultural and ethnic groups were discussed. The Course Co-Directors are Family Medicine Predoctoral Director Dr. Joyce Afran and Dr. Peter Aupperle from the Department of Psychiatry.

**Community Oriented Primary Care (COPC) Summer Assistantship Program – Second Year Medical Students and Interdisciplinary Students**
The eight-week Assistantship Program was implemented for the fifth consecutive year in collaboration with the New Jersey Primary Care Association and the UMDNJ-School of Health Related Professions Physician Assistant Program. The program provided second year medical students (MD and DO) and physician assistant, social work and psychology students with an experiential field opportunity to learn more about COPC. A total of 20 students were selected to participate. Students addressed unmet health care needs in culturally diverse communities, through community projects. Examples of projects included: “Culturally Appropriate Tuberculosis Patient Education Materials”; “Eating Well with Diabetes: Southeast Asian Style”; and “STD Education for Migrant Farm Workers.” The didactic program included both workshops and field trips. Workshops addressed racial and ethnic disparities in health, immigrant health issues, rural health issues, breast cancer outreach to African American Women, and a new literature component which included readings from Ann Fadiman’s “The Spirit Catches You and You Fall Down.” Field trips included a visit to migrant farm camp where medical students conducted blood pressure screenings and a tour of a *botanica* and *bodega*. Program co-directors were Jan Gottlieb, MPH, from RWJMS, Claire O’Connell, MPH, PA-C, from the UMDNJ-SHRP Physician Assistant Program and Linda Whitfield-Spinner, LCSW, from the New Jersey Primary Care Association. Department faculty who provided presentations for the training included Jeffrey Brenner, John Clabby, Michelle McQueeny, Robert Like, Jamie Reedy, and Christine Stroebel.
The Bilingual Interview Workshop - Family Medicine Clerkship – Third Year Medical Students

The workshop was conducted for each rotating block of third year medical students by Jan Gottlieb, Dr. Rhina Acevedo, and for the first time this past year with Amparo Alvarez (a professional interpreter who directs the New Brunswick Community Interpreter Project). The goal of the 2-hour experiential workshop is to enhance skills in working with interpreters and non-English speaking patients. The workshop includes discussion of videotaped vignettes depicting effective and ineffective doctor/patient/interpreter interactions followed by a small group activity in which participants take turns interviewing a bilingual volunteer playing the role of a patient via a volunteer bilingual interpreter. Participants practice making a diagnosis and developing a treatment plan using the ETHNIC model, a framework for obtaining culturally relevant information efficiently and negotiating an acceptable intervention with the patient. Participants also learn how to access and employ the Language Line Services – an over-the-phone interpreter service. The workshop has been rated highly, with participants viewing it as both practical and fun.

Service-Learning/Community-Oriented Primary Care Component – Third Year Clerkship

This past year the predoctoral program added a new community-service-learning/community oriented primary care component to the family medicine clerkship through a grant obtained by Dr. Joyce Afran. Through this component each student worked with a community agency, approximately ½ day per week during their eight-week clerkship, providing service to an “underserved” population. Through partnerships with over 15 community organizations, students provided a variety of valuable services including presenting health workshops in schools, juvenile detention centers, a county correctional facility, and a shelter for victims of domestic violence, and providing screenings and health counseling at a soup kitchen and on mobile health vans, to name a few. Students also participated in didactic workshops on community-oriented primary care by faculty members Jan Gottlieb, Dr. Steven Levin and Dr. Denise Rodgers, and developed COPC interventions for their clinical practices. Evaluations indicated that the pilot-year was quite successful. This component was directed by Jan Gottlieb.

Supplemental Clinical Activities – Third Year Clerkship Students

As part of the third year clerkship, students participated in a series of supplemental clinical activities. These one-day visits provided each third year student with the opportunity to work with family physicians providing services to developmentally disabled patients in a clinic supported by the Association for Retarded Citizens, at a women’s health center in an underserved area, and with family physicians practicing acupuncture and utilizing herbal medicine.

Alternative and Complementary Medicine Elective

The goal of this elective for second year medical students and physician assistant students is to increase exposure to and understanding of a variety of complementary medicine practices and systems. This was achieved through both lunchtime and evening sessions attended by over 40 students. The elective was co-directed by Drs. Joyce Afran and Paula Krauser and presented by practitioners of complementary medicine including many of our Department’s faculty listed in parentheses. Sessions included Principles and Practices of Complementary Medicine (Paula Krauser), Chiropractic Medicine; Introduction to Homeopathy, Visualization and Guided Imagery (Marian Stuart), Acupuncture (Karen Wei-Ru Lin), Herbal remedies (Krauser), Introduction to Ayurveda, Spirituality in Medicine and Legal issues.
Residency Program Activities

Cross Cultural Community Medicine Rotation
All second year residents participated in a cross-cultural community medicine rotation at St. John’s Health Center. The goal of the rotation is to encourage residents to practice in medically underserved urban areas by offering a rewarding learning experience that enhances their skills in providing culturally sensitive, community-oriented primary care to a diverse and indigent population.

Residents learned about different multicultural populations and became familiar with managing clinical issues prevalent in the community (e.g. lead poisoning, immunizations, TB exposure, HIV, substance use, health problems exacerbated by poverty and homelessness). They participated in community-based health care activities including seeing patients at a child health conference, pap/mammogram screening, and volunteering at a local soup kitchen. Community site visits included the Middlesex County Board of Social Services, a homeless shelter, a botanica and bodega, and accompanying St. John’s prenatal and immunization outreach workers on home visits. In addition, residents conducted community presentations at the Ozanam Men’s Homeless Shelter and the New Brunswick Counseling Center- a drug treatment agency. Presentation topics included: personal hygiene, STDs, nutrition, and tai chi. Residents also participated in community-based activities such as school physicals, health fairs, pap/mammogram screenings and community presentations, as part of their longitudinal community medicine experience. The month-long rotation is coordinated by Dr. Steven Levin and Jan Gottlieb.

Other Residency Educational Experiences
Issues relating to the care of diverse populations, cultural diversity, and health disparities were also integrated into other residency educational venues including grand rounds, hospital morning report, attending rounds, precepting, biopsychosocial lecture series, geriatrics seminars, chronic disabilities conferences, and Balint group.

Fellowship Program Activities

NRSA Postdoctoral Research Fellowship
The NRSA Primary Care/Health Services Research Postdoctoral Fellowship Program continued to train primary care researchers with the knowledge, skills, and attitudes needed to study from a services and policy perspective, the major clinical and public health problems affecting individuals, communities, and diverse populations. This two-year postdoctoral fellowship program combines research in a multidisciplinary setting with an option of earning a MPH degree. The program was initially funded by HRSA and AHCPR from 1993-1998, and received full renewal of funding through HRSA for a second five-year cycle from 1998-2003. The program is administered by the RWJMS Department of Family Medicine, and is offered collaboratively by the medical school’s primary care departments (Family Medicine, General Internal Medicine, Pediatrics, and Obstetrics, Gynecology and Reproductive Sciences), and the UMDNJ School of Public Health.

Robert C. Like, MD, MS, is Director and Barbara DiCicco-Bloom, RN, PhD, is Associate
Director of the NRSA Fellowship. Additional participating faculty included researchers from the RWJMS Departments of Family Medicine, Internal Medicine, Obstetrics, Gynecology and Reproductive Sciences, Pediatrics, and the UMDNJ-School of Public Health, and other interested programs both within and outside of UMDNJ. The Fellowship’s Executive Committee includes representation from each of the RWJMS primary care disciplines and the UMDNJ-School of Public Health. Faculty members serving on the Fellowship Executive Committee include: Robert C. Like, MD, MS, Barbara DiCicco-Bloom, RN, PhD, Jeffrey Carson, MD, Judith Neubauer, PhD, George G. Rhoads, MD, MPH, John Smulian, MD, MPH, and Deborah M. Spitalnik, PhD.

A total of 11 fellows participated in the NRSA Fellowship program during the 2001-2002 academic year. Nine fellows had MD or DO degrees in fields including Family Medicine, Internal Medicine, and Pediatrics; and 2 had PhD degrees in Communication and Nursing. Of the fellows with MD degrees, 3 entered the Fellowship with both MD and PhD degrees, and three earned their MPH degrees prior to June 30, 2002. Five fellows successfully completed the Fellowship program during this academic year.

The Fellowship Research Forum is a required weekly meeting for fellows and consists of a seminar series, skills workshops, and research rounds (see Appendix A). Invited faculty experts presented seminars on specific content areas and methodologies, and fellows gave periodic updates about their research projects and experiences. Funding from the AHRQ Health Services Research Training Innovation Incentive Award, “Expanding Research Partnerships in Primary Care,” helped support the development of an “Applied Primary Care/Health Services Research Curriculum” for the NRSA fellows that has been posted on the fellowship website:

(http://www2.umdnj.edu/fmedweb/chfcd/nrsaprfp/nrsa_pages_index.htm)

During the 2001-2002 academic year, the Research Forum presented programs including: 1) a four-part series on Introduction to Internet Resources in Primary/Care Health Services Research; 2) a three-part series of Grantsmanship; and 3) special seminars/workshops on multicultural, multi-national perspectives on health, practice-based research, maternal and child health, and writing skills. Guest speakers included faculty from the Transcultural Nursing Institute at Kean University, Case Western University at Cleveland, Ohio, Center for Research Strategies at Denver, Colorado, and University of Texas Health Science Center at San Antonio, Texas.

Fellows have carried out studies of subjects including: practice-based primary care research; prevention; cross-cultural and minority health; racial and ethnic health disparities; maternal and child health; women’s health; cardiovascular disease, asthma, diabetes, and other chronic illnesses; health communication; addictions; and community health.

Additional information about the Primary Care/Health Service Research Postdoctoral Fellowship Program can be found in the NRSA Fellowship Program 2001-2002 Annual Report.

Continuing Education Activities (see under DISSEMINATION ACTIVITIES)

TECHNICAL ASSISTANCE/CONSULTANCY ACTIVITIES (selected)
**International**

Jo Ann Kairys, MPH, traveled to Moscow, Russia, on December 3-5, 2001, to present a draft of “Clinical Practice Guidelines (CPGs) – An Action Manual for Family Physicians” to the American International Health Alliance’s (AIHA) Steering Committee on CPGs, and to Ministers of Health from the Russian Federation. Ms. Kairys prepared the document for the United States Agency for International Development (AID) and AIHA. It will be disseminated to primary care clinicians throughout AIHA’s primary care partnership/CPG collaboratives in Russia and Eurasia.

Christine Stroebel, MPH traveled to Kiev, in the Ukraine, on April 1-2, 2002, to facilitate physicians and other health professionals from the West Newly Independent States (West NIS) in forming collaboratives across several countries. Presenters from the Institute for Healthcare Improvement and Oregon University of Health Sciences spoke as well. The focus was to establish collaboratives and agree on indicators across several countries related to hypertension, diabetes, and asthma. The sponsoring organization was the AIHA in Washington, DC, whose mission is to establish health partnerships between US medical institutions and countries from the former Soviet Union.

**National**

Robert C. Like, MD, MS, Jo Ann Kairys, MPH, and Christine K. Stroebel, MPH are technical assistance consultants with a group of cultural competence experts on the HRSA Bureau of Primary Health Care/Institute for Healthcare Improvement (IHI) project, Health Status and Performance Improvement Collaborative, "Developing Cultural Competence in the Clinical Care Model."

Robert C. Like, MD, MS served as a member of the National Project Advisory Committee and Consensus-Building Group for the DHHS Office of Minority Health-funded American Institutes for Research project to develop “Cultural Competency Curriculum Modules (CCCMs) for Family Physicians.”

Robert C. Like, MD, MS served as a member of the Expert Panel for the California Endowment’s Project on “Cultural Competence Education for Healthcare Professionals.”

Robert C., Like, MD, MS served as a member of the Project Expert Panel (PEP), DHHS Office of Minority Health-funded, “CLAS in Local Health Departments Study.”

Robert C. Like, MD, MS participated in a teleconference for the Georgetown University National Center for Cultural Competence's, "Cultural Competence Health Practitioner Assessment Instrument."

Robert C. Like, MD, MS, and Christine K. Stroebel, MPH served as consultants to the American Academy of Family Physicians/Bureau of Primary Health Care educational video/CD-ROM project, "Quality Care for Diverse Populations."
Robert C. Like, MD, MS served as a member of the STFM Group on Minority and Multicultural Health.

Robert C. Like, MD, MS served as a member of the Advisory Committee for the National Center for Cultural Competence in Primary Health Care, Georgetown University Child Developmental Center.

Fred A. Kobylarz, MD, MPH served as a member of the American Geriatric Society's Ethnogeriatric Committee.


**Regional/State**

Robert C. Like, MD, MS served as a member of the Steering Committee, Northeast Consortium On Cross-Cultural Medical Education and Practice.

Robert C. Like, MD, MS served as a member of the New Jersey Department of Human Services, Division of Medical Assistance and Health Services, Task Force on Cultural and Linguistic Competency.

Robert C. Like, MD, MS served as a member of the Cultural Competency Task Force, Medical Society of New Jersey.

Robert C. Like, MD, MS served as an Advisory Committee Member for the New Jersey Mental Health Institute's project entitled, "Changing Minds, Advancing Mental Health for Hispanics."

Robert C. Like, MD, MS served as a consultant to The Bildner Family Foundation-funded New Jersey Campus Diversity Initiative grant entitled, “Developing Cultural Competency Standards at the University of Medicine and Dentistry of New Jersey,” (PIs: Catherine M. Bolder, MS and Laura Nelson, EdD).

Robert C. Like, MD, MS served as a consultant to the UMDNJ School of Osteopathic Medicine/Department of Family Medicine’s Predoctoral and Faculty Development grants relating to interdisciplinary cultural competency training.

Robert C. Like, MD, MS, Denise V. Rodgers, MD, and Patrice B. Gregory, PhD, MPH continued to serve as members of the Steering Committee for the new UMDNJ Center on the Elimination of Health Disparities.

**Local**

Jo Ann Kairys, MPH, and Christine K. Stroebel, MPH managed the implementation of a summer research project involving integration and application of the multimethod practice assessment (MAP) and the Participatory Quality Improvement (PQI) model at the UMDNJ/RWJMS Family
Medicine Center at Monument Square and the Ferren Mall Family Practice Center. The goal is to develop and test the effectiveness of this innovative methodology for improving primary care practice in preparation for a large randomized control trial. Lisa Maxwell, a 4th year UMDNJ/RWJMS medical student, worked closely on the projects with Jo Ann, Chris, and a team of DFM investigators.

Fred A. Kobylarz, MD, MPH initiated the formation of the RWJMS/Department of Family Medicine's "Ethnogeriatrics Working Group" that includes interdisciplinary health care professionals along with research team members.

Jan Gottlieb, MPH served on a review committee chaired by Dr. Denise Rodgers to determine which proposals developed by students in the Environmental and Community Medicine course would be funded as community-based projects.

**ADMINISTRATIVE AND COMMUNITY SERVICE (selected)**

Department Faculty and Fellows were involved in a wide variety of community service activities in New Jersey relating to multicultural and minority health care. These included: the New Jersey Department of Human Services’ Task Force on Cultural and Linguistic Competency (Division of Medical Assistance and Health Services) and Multicultural Services Advisory Committee (Division of Mental Health Services); Advisory Board, Mainstreaming Medical Care for Community Residents Project, Association for Retarded Citizens (ARC) of New Jersey; the Dean's Committee on Community Service and Community Health Activities Group of Robert Wood Johnson Medical School; and the Board of Directors of the Jewish Renaissance Foundation.

**SUPPORT**

Partial support for CHFCD activities has come from the following funding sources:

**Federal Grants**

Health Resources and Services Administration; Institutional National Research Service Award, 2 T32 PE10011 and 3 T32 PE1011-06S1; "Primary Care Consortium Research Training Program" (PIs: Mary B. Breckenridge, PhD and Robert C. Like, MD, MS); July 1, 1998 – June 30, 2003; overall ($1,740,907 direct), FUNDED.

Department of Health and Human Services, Catalog of Federal Domestic Assistance No. 93.984; "Establishment Grant" (PI: David E. Swee, MD); September 1, 1999 - August 31, 2002; overall ($367,464 direct), FUNDED.

National Institutes of Health, Geriatric Academic Career Award; Grant No. K01 HP 0003-01 (PI: Fred A. Kobylarz, MD, MPH); September 20, 1999 - September 29, 2004; overall ($50,000 each year), FUNDED.

**Other Grants/Contracts**

Aetna 2002 Quality Care Research Fund, "Assessing the Impact of Cultural Competency Training Using Participatory Quality Improvement Methods," (PI: Robert C. Like, MD, MS);
January 2002-December 2003 ($359,891), FUNDED.


The Robert Wood Johnson Foundation, Third Annual UMDNJ/RWJMS Conference on Culturally Competent Care, "Improving the Health of Our Emerging Majority Populations: A Personal and Collective Responsibility (PI: Robert C. Like, MD, MS)" June 1, 2001 - August 31, 2001; ($49,974), FUNDED.

HRSA Bureau of Primary Health Care/Institute for Healthcare Improvement subcontract, Health Status and Performance Improvement Collaborative, “Cultural Competence in the Clinical Care Model,” (PI: Robert C. Like, MD, MS), April 2001 – March 2002 ($50,000), May 2002-April 2003 ($60,000).

HRSA, Predoctoral and Faculty Development Grants to the UMDNJ-School of Osteopathic Medicine/Department of Family Medicine (Consultant: Robert C. Like, MD, MS), 2000-2003.

Campus-Community Partnerships for Health, Fellowship to develop Toolkit for Integrating Service Learning to Teach about Community-Oriented Primary Care (COPC) and Cultural Competence in Medical Education– A Department of Family Medicine’s Experiences, Predoctoral through Residency Education (PI: Jan Gottlieb, MPH), May 2002-April 2003 ($5,000).

Additional Technical Assistance/Consultation
Aetna
American Academy of Family Physicians
American Institutes for Research
California Endowment
Georgetown University National Center for Cultural Competence
Hyphen Health
Institute for Healthcare Improvement
National Hispanic Medical Association
New Jersey Department of Human Services
Pfizer, Inc
UMDNJ-School of Osteopathic Medicine

DISSEMINATION ACTIVITIES (selected)

Department/Center faculty, fellows, and staff were actively involved in presenting on a wide variety of diversity-related issues. The following are selected national, regional, state, and local presentations, and publications disseminated during the past year:

National
2001 National Board of Medical Examiners/United States Medical Licensing Examination, Step Committee Retreat, presentation entitled, "Culturally Competent Clinical Care" (co-presenters: RC Like, AF Tallia), Farmington, PA (July 30, 2001)

American Academy of Family Physicians, Scientific Assembly 2001, Doctor’s Lounge – Seminars in Family Medicine, presentation entitled, “Quality Care in Diverse Populations” (co-presenters: JE Southpaul, RC Like), Atlanta, GA (October 4, 2001)

American Academy of Family Physicians, Scientific Assembly 2001, Practice Enhancement and Management Courses, presentation entitled, “Quality Care for Diverse Populations” (co-presenters: JE Southpaul, RC Like), Atlanta, GA (October 5, 2001)


Institute for Healthcare Improvement, Health Disparities Collaborative, Midwest Cluster Diabetes Mellitus 3/Cardiovascular Disease Learning Session 3, Dr. Robert Like gave an invited plenary presentation entitled, "Culturally Competent Clinical Guidelines for Cardiovascular Disease and Diabetes Management," Chicago, IL (January 26, 2002)

National Hispanic Medical Association Workshop on Developing Hispanic-Focused Cultural Competence Curriculum in Medical Education, Dr. Robert Like gave an invited presentation entitled “Core Medical Education Curriculum Guidelines on Cultural Competence,” Washington, DC (April 6, 2002)

Indiana University School of Medicine Conference – Cultural Competence for Physicians: Improving Patient Care, Dr. Robert Like gave an invited keynote presentation entitled, “Eliminating Health Disparities: Present and Future Strategies,” Indianapolis, IN (April 12, 2002)

Indiana University School of Medicine Conference -- Cultural Competence for Physicians: Improving Patient Care, Dr. Robert Like gave an invited workshop presentation entitled, “Using the Participatory Quality Improvement (PQI) Model to Improve the Health of Diverse Populations," Indianapolis, IN (April 12, 2002)


Society of Teachers of Family Medicine, 35th Annual Spring Conference, peer-reviewed seminar presentation entitled, “Health Disparities 101: A Family Medicine Primer: (co-presenters: K. Chung, RC Like), San Francisco, CA (April 27, 2002)

Institute for Healthcare Improvement, Health Disparities Congress, Dr. Robert Like gave an invited keynote presentation entitled, "Culturally Competent Health Care," St. Louis, MO (May 3, 2002)
University Hospitals of Cleveland Family Medicine Residency Program's Twenty-Fifth Silver Anniversary Celebration, Dr. Robert Like gave an invited presentation entitled, “Cultural Diversity in Family Medicine,” Case Western Reserve University, Cleveland, OH (June 29, 2002)

**Regional/State/Local**

UMDNJ-Robert Wood Johnson Medical School, Biomedical Careers Program, Dr. Robert Like gave a lecture presentation entitled, "Culturally Competent Clinical Care," Piscataway, NJ (July 11, 2001)


National Conference for Community and Justice, New Jersey Region, Second Annual Diversity Issues in Higher Education conference, Dr. Robert Like was a panel member and co-presented on the subject of "Human Relations Skills in the Workplace," Rutgers University, Piscataway, NJ (November 2, 2001)

Kennedy Health Systems, Ethics Rounds, Dr. Robert Like gave an invited presentation entitled, "Culturally Competent Health Care," Stratford NJ (December 7, 2001)

Newark Beth Israel Medical Center, Quarterly General Medical Staff Meeting, Dr. Robert Like gave an invited presentation entitled, "Culturally Diversity," Short Hills, NJ (January 16, 2002)

Institute for Healthcare Improvement, Health Disparities Collaborative, Northeast Cluster Diabetes Mellitus 3/Cardiovascular Teleconference, Dr. Robert Like gave an invited presentation entitled, "Culturally Competent Clinical Guidelines for Cardiovascular Disease and Diabetes Management" (January 22, 2002)


The Bloustein School of Planning and Public Health, Dr. Barbara DiCicco-Bloom gave an invited lecture presentation entitled, “Gendered and Racialized Experiences of Women from Kerala, India: Implications for Families,” (March 14, 2002)

Nursing 5401 Advanced Practice Role Theory Seminar, UMDNJ School of Nursing, Dr. Barbara DiCicco-Bloom gave an invited lecture presentation entitled, “Advance Practice for Nurse Practitioners: Culturally Competent Care As It Relates to the Nurse Practitioner/Patient
Encounter,” (March 26, 2002)


Robert Wood Johnson University Hospital, Diversity Day Program, Dr. Robert Like gave an invited presentation entitled, “Culturally Competent Health Care," New Brunswick, NJ (June 7, 2002)


UMDNJ-Robert Wood Johnson Medical School, Department of Family Medicine Community Oriented Primary Care Summer Course, Dr. Robert Like gave a presentation entitled, "Racial and Ethnic Health Disparities and Culturally Competent Care," Piscataway, NJ (June 10, 2002)

Pfizer and Aetna jointly sponsored, "Cross-Cultural Connection: Breaking Barriers and Building Bridges™ Symposium, Dr. Robert Like gave two presentations entitled “Case Studies" and "Culturally and Linguistically Competent Health Care," New York City, NY (June 14, 2002)

Mount Sinai School of Medicine and the Northeast Consortium on Cross Cultural Medical Education and Medical Practice, Dean's Diversity Forum, Dr. Robert Like participated in a panel discussion on the subject of "Why Cultural Competency Training is Important for Medical Education and Training," New York City, NY (June 17, 2002)

PUBLICATIONS/SUBMISSIONS (selected)


Kairys JA, Orzano, JA, Gregory P, Stroebel C, DiCicco-Bloom B, Roemheld-Hamm B,


Like RC: Invited book review of Roxie Black’s and Shirley Well’s *Cultural Competency for Health Care Professionals*, *New Jersey Medicine* (accepted for publication).


**Citations in Magazines/Newspaper Articles**

Attachment A

CENTER FOR HEALTHY FAMILIES & CULTURAL DIVERSITY

VISION
The Center for Healthy Families & Cultural Diversity (CHFCD) is dedicated to leadership, advocacy, and excellence in promoting culturally-responsive, quality health care for diverse populations. The Center exists to advance and implement ongoing efforts to foster justice and equity in health care.

MISSION
In partnership with federal, state, and local organizations, our aim is to facilitate the provision of high quality, culturally-responsive health care through:

(1) education and training; (2) curricular innovations for health care professionals; (3) technical assistance and consultation; (4) research/evaluation that examines access, utilization, effectiveness, and outcomes of culturally and linguistically competent health services delivery; and (5) dissemination of diversity information.

VALUES
We support patient-oriented, family-centered, community-based health care.

We strive to continually improve health care service delivery and inform public policy by recognizing the assets and strengths of diverse populations, and understanding how to meet their needs and wants.

We encourage ideas, continual learning, education, and training that transform patient/provider encounters and organizational systems, and lead to the provision of culturally and linguistically responsive health care.

We endeavor to foster and conduct research and evaluation that results in positive change in the health status of underserved populations.

We value relationships and partnerships that are collaborative and mutually supportive.

We encourage innovation and creativity in the generation of sharing of ideas that are meaningful and relevant.

We believe that empathy, compassion, humility, authenticity, respect, and integrity are fundamental values that guide the Center’s work.

We will act with courage and conviction in living our mission by being honest with each other and ourselves.

Center for Healthy Families & Cultural Diversity
Department of Family Medicine
University of Medicine and Dentistry – Robert Wood Johnson Medical School
The Center for Healthy Families and Cultural Diversity (CHFCD) was established in the 1997-98 academic year, and is dedicated to leadership, advocacy, and excellence in promoting culturally-responsive, quality health care for diverse populations. It has evolved from a program focused primarily on multicultural education and training for health professionals, to an expanded and growing resource for technical assistance, consultation, and research/evaluation services. The CHFCD recognizes that persisting racial and ethnic health disparities are a major clinical, public health, and societal problem. Its approach to developing cultural and linguistic competency involves a systems perspective, a focus on quality improvement, community involvement, and collaboration with key stakeholders and constituency groups. The CHFCD exists to foster justice and equity in health care.

CHFCD faculty and staff have provided multicultural education and training to health care professionals, administrators, research fellows, residents, medical and public health students, and community members through workshops, seminars, short courses, and conferences. Technical assistance and consultation has also been provided to academic medical centers, managed care organizations, hospitals, ambulatory care facilities, federal, state, and local governments, health insurers, and community organizations regionally, nationally, and internationally. Topic areas have included: participatory quality improvement, culturally and linguistically competent health care; organizational cultural competence; and cross-cultural clinical preventive services.

CHFCD faculty and postdoctoral fellows have carried out primary care/health services research relating to racial/ethnic health disparities and multicultural/minority health issues. They have collaborated with faculty in the Department of Family Medicine’s Research Division, other RWJMS and UMDNJ Departments, and other interested organizations external to the University.

The CHFCD has co-sponsored annually three successful UMDNJ/RWJMS Conferences on Culturally Competent Care that have attracted national audiences. Information has also been disseminated through publications, websites, videos, and CD-ROMs, and more than 100 presentations have been given on the subject of culturally and linguistically appropriate services delivery.

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