WHAT HAPPENED IN THE 2016 ELECTION by Patrick Murray

Editor’s Note: In summer 2016, long before the presidential election date, Prof. Gordon Schochet, Chair of the RFA Program Committee, invited former student, Patrick Murray, head of the Monmouth University Poll to speak on the topic: “What happened in the 2016 Election”

On Dec 9th Mr. Murray addressed a still shell-shocked RFA audience, emphasizing that none of the polls predicted a Trump victory, and that pollsters need to reconsider their methods and roles. Mr. Murray prepared the following article for the newsletter. The article is supplemented by some Q and A as well as some selected remarks extracted from the tape recording of the presentation. (continued on page 2)
Like any epidemiologic study we should be concerned with sensitivity, specificity and predictive value, as well as generalizability. If polling were a new diagnostic test, it might be discarded after the 2016 results. Mr. Murray addresses these issues, albeit with a different terminology—Michael Gochfeld

What Happened in the Election of 2016 by Patrick Murray
Director: Monmouth University Poll
RFA Speaker Dec. 9, 2016
No one who is being honest with you will say they saw the outcome of the presidential race coming, including those within both the Trump and Clinton campaigns. Polling models during the primary seemed to work fairly well, especially ours at Monmouth. We didn’t see any evidence of a secret Trump vote then and little in our general election sampling suggested that there would be a groundswell then.

It’s important to keep in mind that the difference of a few thousand votes in just a handful of counties would have changed the outcome. If that were the case, we might be shaking this off as a correctable polling miss. However, I think we have to accept that we had a bigger miss. Not because the methodology was wrong, but because we did not acknowledge the methodological limitations and this contributed to an inaccurate narrative about the state of the race.

To be clear, the national polling was fairly on the money. The national average showed Clinton winning the popular vote by 4 points and she won it by 2. This is pretty much in line with the historical accuracy of presidential election polling. The bigger problem was the state polling which suggested that Trump had no reasonable path to victory. For example, not a single poll during the entire campaign ever showed him with a lead in the state of Wisconsin.

Urban versus Rural Discrepancy
When we examined our own polling at Monmouth, we found a skew that only occurred in non-metro areas. For example, our Pennsylvania poll showed Clinton winning with a 23 point lead in the eastern section of that state (which accounted for about 40% of the electorate), which she won by 22 points. In the greater Pittsburgh area – accounting for about one-fifth of the statewide electorate – we had Trump up by 11, and he won that region by 10. However, in the one-third of the electorate living in a region that basically runs from the center to the northwest – we had Trump up by 13 when his actual margin was 26 points.

This is coal country and the industrial heartland, where a lot of historically Democratic blue-collar voters live. An area where Obama did relatively well. Why did we miss Trump’s performance here in our polling? It appears that these voters were so fed up with the system that they didn’t
even want to talk about it. They kept their own counsel and voted for change represented by Trump rather than for Trump the candidate. They felt that no one in the establishment was listening to them – including government and the media, including pollsters – and that may be one of the reason why they didn’t pick up the phone to talk to us. Further research since the election suggests that many of them would not even discuss their vote with family members because they didn’t want to have to explain themselves – the ultimate secret Trump voter.

This discrepancy in where the polling miss happened helps explain why the national polls were right – as indeed were most polls in more metropolitan states with a lot of diversity – while those in the Midwest and other more rural populations underestimated Trump’s performance there.

As to the substantive reasons behind this, we should have seen it coming. Monmouth did a poll shortly after the 2012 election when we asked which groups had been benefiting from Obama’s policies. Wall Street, health insurers, and the wealthy came out on top. The poor were considered a mixed bag of good and bad. But at the bottom was the middle class – and when we broke out those results by race, a majority of white Americans said that the middle class had seen absolutely no help whatsoever from Obama’s policies.

Obama’s big policies – the financial bailout, the stimulus, and the affordable care act – were all seen as being put in place for someone else’s benefit. Obama did a poor job of selling his agenda to the middle class and Clinton did nothing to indicate that she would be any different. So part of Trump’s appeal was not any specific policy he proposed, but just the promise that he would shake up business as usual in DC---i.e. “drain the swamp”. Thus although certain of Trump voters wanted to distance themselves from Trump’s more controversial proposals and behavior, they simply kept quiet. Moreover, with Washington being seen as completely dysfunctional, it made it harder to sell these voters on the argument that Trump lacked the qualifications or temperament to run it.

**Methodological Issues**

As to the methodological reasons for the polling miss, I am not sure there is much we can do to improve polling per se. I think the problem was that we oversold its accuracy. It is a serious matter that response rates have been dropping, although the Pew Center research has indicated that in the past this has not had an impact on the accuracy of our estimates – what percentage of the public agree or disagree with a policy position for instance. But this year (2016) seemed to be different. Even with the use of 1) cell phones, 2) samples drawn from registered voter lists, 3) random dialing of computer-generated phone numbers, as well as 4) new online methodologies – polling gave the wrong impression about who would win the Electoral College.

However, this may not be a failure of polling just an exposure of its limitations [sic]. In addition to the sampling skew, we had a unique situation where about 1-in-4 voters had an unfavorable opinion of both major candidates. We had never seen anything like that before in modern presidential races. As such, it made their vote choice intentions less stable.

Still, we treated polling as if it were a tool that measures the predicted future behavior of an unknown sub-population (likely voters) with laser beam accuracy. When in fact there is known error involved. In most applications of opinion polling – as opposed to survey research for projecting health incidence, say – this error is of little consequence. If 65% of the public agree with a policy there really is no difference in our interpretation of public support if the true number is 63% or 68% instead. However, when predicting close elections a 2 to 4
point error margin can be the whole ball game.

This means we pollsters have to rethink how we approach elections – particularly close elections. We need to do a better job of tempering the media’s insatiable need to paint everything as a horse race – particularly one where we can predict the outcome with an unreasonable level of precision.

ADDITIONAL QUOTES FROM THE RECORDING

Mr. Murray engaged the audience by speaking away from the podium microphone. The recording however, caught a few important lines to supplement his article above.

“Trump’s pollsters say they saw it coming, but they didn’t. They were also surprised.” They ran a few models which suggested that everything had to go right. “If all the dominos fell in our direction, Trump might win.”

“In the end it all came down to four counties: One in Michigan and three in Florida.”

“Trump never led in one public or private national poll, EVER.”

“We had a decline in response rate that has been getting worse over the years. We are now down to single digit response rate in some polls.”

“We also realized that people were lying to us about who they were going to vote for. There was differential or biased non-response. Trump supporters were more likely to refuse to respond, but if they did respond they were enthusiastic. Our polling was pretty much right-on with regard to Trump support in the primaries.”

“For the general election, our responses underestimated the number of traditional Democrats who voted for Trump as well as the number of committed Trump voters.”

“Voter turnout is higher in the presidential election, but is still less than 50%, Getting out the vote was key. The Republican National Committee invested heavily in this.”

“Pew foundation reports that presidential polls are typically within a couple of points of each other and the errors are random.”

“But in 2016 several significant national polls were off not just in the U.S. Consider the unpredicted 1 percentage point “losses” in the Brexit referendum in the UK, and, the rejection of the peace deal with FARC rebels in Colombia. In each of these cases what we found is that the elections reflect a “simmering mood of discontent” in whether the government is responsive to them.”

A Middle Class Lament:

“Health insurance provided subsidized coverage for the uninsured ‘not for making it more affordable for me’. ‘When will you do something for me?’”

With regard to Donald Trump’s campaign that “anybody can do this job.” Over the last decades there has been a concerted effort by the Republican leadership in Congress to downgrade the respect for the presidency. The Republicans let the Birther issue fester, because encouraging people to believe that a black, foreign born Muslim can be president, undermined the legitimacy of the presidency itself. If anyone can be president, then Trump can be president. The Republicans let it fester, because it helped them in the short term. Trump kept this up almost to the very end.” That’s why the “wrong temperament” argument fell on deaf ears.

“You can’t win me over with arguments about impulse control, maturity, judgement, character and temperament, because being president doesn’t require any of these things any longer.”
"The Republicans made the decision to band together to prevent President Obama from accomplishing anything. This was obvious from day one. On the other hand the Democrats have always provided support for Republican presidents recognizing that the elected president is THE PRESIDENT not THEIR president.

“If you go back to 1980, you see a different culture, with Democrats in Congress, led by Tip O’Neill, cooperating with the Republican president Reagan.”

“Polls showed that Democrats did have respect for their party leaders in Congress while Republicans showed a low level of respect. “We don’t like our Republican leadership, they are out for themselves”. This allowed a Donald Trump to come along and capture the Republican primary”

“Eliott County KY had voted democrat for 134 years but went for Trump this year.”

“Alice County in Iowa Obama won by 21 points and Trump won it by 20 points this year.”

“This is where the polls missed. People who knew they were going to vote for Donald Trump weren’t going to tell anybody that. They weren’t going to talk to pollsters and they didn’t even talk to their family members. “

“Understand that in polling we take a sample of people and then try to predict their future behavior, Not what they are going to do that day because they are not voting that day. We have to think about whether to use polls for that purpose. We were doing national polls every 5-6 weeks.”

“This game that Trump was playing for winning was not based on policy. It was based on brand, on personality. All these factors influenced voting and not voting. Fatefully Democrats leave it to the candidate to get out the vote, but the Republicans Committee gets out the vote. So there were robot phone banks to make sure that strong supporters voted. In the end that made the difference.”

QUESTIONS AND ANSWERS

Question: Is there any way to find out if the people who didn’t talk to YOU, whether they also didn’t vote?

Answer: We can find out whether the ones we talked to actually voted.

Question: What effect did the Comey bombshell have?

Answer: The poll was sensitive enough to detect that the Comey release “moved the needle 1-2 percentage points in Florida, Pennsylvania and Michigan. The apology came too late.

Question: Numerous post-election-loss conversations have raised the question of whether the consistent polls showing Clinton ahead, coupled with final week pundit with red and blue maps, showing that Trump had “no path to victory” gave Hillary hating-Democrats license to lodge protest votes or no votes at all, while stimulating Republican get-out-the vote efforts. Is this true, and should polling be banned for some finite period before the election?

Answer: There is certainly a good argument to be made that “horse race” polls contribute very little of value to understanding an electorate just days before they will actually cast their votes. A number of European countries have blackout periods of a few days or a week or two. However, those countries don’t have the First Amendment, so any such discussion about doing that in the U.S. is purely academic. Our corporate news industry will always demand this information.

Question: You mention a distinction between a health-survey and a political-
Answer: We are still working on the answer to that question. The impact is determined by what level of precision is necessary. In most general public opinion applications, results with a wide margin of error, including the incalculable nonrandom error, is acceptable as long as the range of error doesn’t change the narrative (whether the public on one side of the issue or divided on it). I’d be concerned about epidemiological studies used to project incidence levels, on the other hand. Even though they use larger samples and have better response rates, I’d worry that there is a non-response bias that could throw off the results, even with a 70% response rate. The public has become so polarized politically that the non-response issues we found in political polls may now be affecting all types of survey research.

Question: What will the Monmouth poll be looking for after Trump’s first hundred days?

Answer: We are just trying to keep up with the rollercoaster like everyone else. The bottom line question for me is not whether people approve or disapprove of his job performance or favor or oppose specific policy proposals. What we learned in 2016 is that the real metric that matters is simply whether people feel they have the opportunity to get ahead or whether the government is ignoring their concerns entirely.

EDITORIAL POSTSCRIPT
Towards the end of the 2015-2016 presidential campaign Hillary Clinton seemed like a deer-caught-in-headlights, unable to orient or comprehend why her margin was narrow and her unpopularity high. She never came to grips with her unpopularity. She never said, “Hold your nose and vote for me”.

Hillary missed the boat with her “deplorable” statement. According to poll results, the true deplorables were not the Trump supporters, but the Democrats who didn’t vote at all or cast a protest vote.

WHY LOCKER ROOM TALK DIDN’T DISUADE THE MAJORITY OF WHITE WOMEN
NY Times reported 53% of White women voted for Donald Trump. Publicity surrounding Trump’s’ “locker room talk” may have angered elderly white males, who were outraged that their wives and daughters might hear such words (they voted for Trump anyway). After all, there was an unspoken rule that such language was forbidden in mixed company. However, as the recent CNN “History of Comedy” illustrates with cuts to enthusiastic gender-mixed audiences, by the 70’s many woman found “dirty” comedy at least amusing and laughed as hard as the male attendees.

AGE AND HOT BUTTON ISSUES---WHY TEMPERAMENT AND FINGER-ON-THE-BUTTON DIDN’T MATTER
‘Finger on the button’ doesn’t mean much to people who grew up after 1989, i.e. ‘millennials’ (age 18-35 as of 2016). If you were born before 1981, then you would have been at least middle-school age in 1989 at the end of the Cold War. If you were born after 1981 (i.e. a “millennial”) the Cold War and the Doomsday Clock, and even the evils of the Communist Menace, and certainly not “duck-and-cover” aren’t part of your experience. Thus millennials (31% of voting-age Americans) have no frame of reference for ‘finger-on-the-button’. “What button?” they may ask. See the following graph from the Pew Research Center (May 16, 2016). “
Number of Millennials eligible to vote now roughly equal to Boomers

 Eligible voters by generation, 1996-2016

Glossary
Silent and Greatest generations (ages 71 and older)
Baby Boomers (ages 52-70)
Generation X (ages 36-51)
Millennials (adults ages 18-35 in 2016)
Generation Z or Centennials

THE CLUB: Fine Dining at Rutgers for a Reasonable Price
By Paul Manowitz

The Club Room is a restaurant open to Rutgers faculty and staff that features an elegant buffet lunch, table cloth dining, and an open and attractive ambiance. The spacious dining hall, located on the second floor of the Livingston Dining Commons, has a high ceiling and massive wall to floor windows. The tables are widely spread apart that allow for quiet conversations.

A typical buffet meal includes soup, a variety of salads, three entrees, vegetables, and assorted cakes and dessert pastries. Upon entrance, diners are greeted by uniformed waiters and waitresses who bring cold or hot beverages as requested to the table. The menu varies daily and is posted by 10 am on the web for the day. To view the daily menu, go to http://food.rutgers.edu/Livingston-dining-options. Select “Faculty and Staff” followed by “menu.”

The Club Room is open Tuesday – Friday, 11:30 am – 1:30 pm. The Club room is open during the fall and spring semester and closed on university holidays and during the summer months. Extensive renovations are planned for this summer. The Club Room houses approximately 120 seats. The cost of a meal is $11 that may be paid either by cash or credit card. To make a reservation for parties of eight or more, please call Ms. Maren Bencivenga,
events coordinator, at (848) 445-7228 or email the request to livclub@dining.rutgers.edu.

Parking for the Club Room may be found at parking lot 101 on Avenue E of the Livingston Campus. If this lot is filled, additional parking may be found at nearby parking lot 105 or 112. The Livingston Dining Commons that houses the Club Room is located near Livingston Student Center and the Kilmer Area Library (James Dickson Carr Library). For location of parking lots, see http://rumaps.rutgers.edu/location/livingston-campus.

---

**ANNUAL RWJMS SCHOLARSHIP GALA**

The 7th Annual Scholarship Gala at Robert Wood Johnson Medical School took place on April 8, and raised $195,000 for student scholarships. Alumni, faculty, staff, students, and members of the medical school community celebrated the achievements of three outstanding honorees while raising vital funds for students. The gala recognized the following honorees:

- Michael A. Gallo, PhD, DABT, emeritus professor of Environmental and Occupational Medicine, received the Honorary Alumni Award;
- Norma B. Saks, EdD, associate professor of Psychiatry, assistant dean for educational programs and director, Cognitive Skills Program, received the Meritorious Service Award;
- Jeffrey R. Petrella, MD '87, professor of radiology, Duke University School of Medicine, received the Distinguished Alumni Award.


Left to Right: Drs. Petrella, Saks, Gallo, Dean Gabriel
MICHAEL A. GALLO, PhD  Honorary Alumni Award.

Professor Arnold Rabson, Director of the RWJMS Child Health Institute, provided the introduction and conferred the award:

“It is a real pleasure this evening to present the 2017 Honorary Alumni Award to Dr. Michael Gallo. There is a school of thought that says that history is a series of stories, not just a chronological sequence of events. If we look at the stories that form the history of Robert Wood Johnson Medical School, the stories that have been the basis of its great success, Mike Gallo has had a hand in almost all of those stories. I like to say that if something good is happening at Robert Wood Johnson Medical School, Mike Gallo’s fingerprints are on it somewhere.

“In that regard, Michael over the time that he has been here was crucially involved in the origins, genesis expansion growth and success of the Environmental and Occupational Health Sciences Institute and led for years the NIEHS Center at EOHSI also contributed to the development of the Department of Environmental and Community Medicine, which in turn was a key component in the genesis of our current School of Public Health.

“Many of you may not know the critical role that Mike Gallo played in the origin of the Cancer Institute of New Jersey. Mike was the first Director, the Interim Director who wrote the key planning grant from NCI that launched the whole endeavor and started putting people together, and he recruited Bill Hait. So the Cancer Institute of New Jersey is another tremendous accomplishment that Mike has brought to our school. Mike was Associate Dean for Research, and then when the position was created, he became Senior Associate Dean for Research for a number of years in the 90’s and in those positions, Mike was responsible for the first medical school meetings about the

...
NORMA SAKS, PHD,  Meritorious Service Award

Professor Carol Terregino, Senior Associate Dean for Education Provided the Introduction and conferred the award.

"Good Evening—Dean Gabriel, Chancellor Strom, Gala Honorees and guests:

"It is an incredible honor for me to introduce to you this year's Meritorious Service Award Honoree. Dr. Saks has inspired me and played a pivotal role in my career—without you Norma, I would not be the one standing here, honoring you.

"Dr. Norma Susswein Saks, professor of psychiatry, assistant dean for educational programs and director of the Cognitive Skills program is joined here this evening by her sons Mark and Brad, and her daughters-in-law Emily and Kate. Mark and Emily are both alumni of Robert Wood Johnson Medical School. I can't tell you how much your mom has meant to me personally and to all her students and to medical education in the US. In the past the term "medical student," equated with someone incredibly bright and intellectually talented would not be juxtaposed with the term Academic Support.

"What Norma Saks has done through her development of a comprehensive academic support program is to help the medical education community acknowledge that efficient and effective lifelong learning skills must be taught, that academic support is a major component of student wellness, and that self-reflection, recognition of areas for self-improvement and willingness to reach out for help are key components to succeeding in medical school, as a physician and in life.

"Dr. Saks received her undergraduate degree from Skidmore College in Saratoga Springs, New York, a master's of education from Boston University, and an educational specialist degree and a doctorate of education from Rutgers University. Medical Education is actually a second career for Dr. Saks—she began in K-12 special education—we are so glad you switched to med ed!

"She has made several hundred presentations at medical education meetings and residency programs, and is the author of numerous articles, and a book, How to Excel in Medical School, co-authored with her son, Mark. She has been a strong proponent for educational scholarship as a basis for promotion and tenure. She has served nationally on the Steering Committee of the Association of American Medical Colleges Group on Educational Affairs, as the northeast chair of that group, and on the Board of Directors of the International Association of Medical Science Educators.

"Her very unique Distinction in Medical Education program for medical students is a first of its kind in the nation highlighting the important "specialty" of medical education in the world of academic medicine. Her drive to serve our students is manifest in an academic support program with three doctorally trained educational psychologists. Her excellence was recently recognized when she was invited to speak before all US medical school deans on academic support. Norma, you are just amazing and I know Richard would be very proud of you.

"This year's 2017 Meritorious Service Award goes to Norma Susswein Saks."
JEFFREY PETRELLA MD. Class of 1987. Distinguished Alumni Award

Professor Judith Amorosa, Department of Radiology provided the introduction and conferred the award.
The following is the text of the Biosketch

Jeffrey Petrella, MD'87, is a professor of radiology and director of the Alzheimer Imaging Research Laboratory in the Department of Radiology at Duke University Medical Center. Dr. Petrella completed his undergraduate training at Georgetown University before attending medical school at Robert Wood Johnson Medical School. Strongly influenced by his physics background and the mentorship by Bruce Fisher, MD, clinical professor of medicine, and Judith Amorosa, MD, clinical professor of radiology, he decided to pursue a career in diagnostic radiology. Following an internship and residency at St. Vincent’s Hospital and Medical Center of New York,

Dr. Petrella completed a two-year fellowship in neuroradiology at the University of Pennsylvania, followed by three years as a senior staff fellow in the Imaging Sciences Training Program at the National Institutes of Health (NIH). It was while he was at the NIH that he became interested in functional MRI as a technique to study how the brain changes with aging and as a tool to help make surgery safer for patients with brain tumors.

Since joining the faculty at Duke in 1997, Dr. Petrella has co-authored more than 150 peer-reviewed texts in medical literature and received more than $2 million in grant funding as a principle investigator. He was lead author of the first study to examine the effectiveness of functional MRI to identify critical brain regions in brain tumor patients prior to surgery and assess its effect on neurosurgeons’ decisions. Dr. Petrella’s studies evaluating and comparing multiple biomarkers in Alzheimer’s disease and at-risk subjects have aided understanding of the structural and functional underpinnings of cognitive impairment in early Alzheimer’s disease.

Dr. Petrella has helped train more than 200 radiology residents and 100 fellows in the practice of neuroradiology. His leadership positions at Duke include clinical director of the Center for Advanced Magnetic Resonance Development, senior fellow in the Center for the Study of Aging and Human Development, and director of the Alzheimer’s Disease Imaging Research Laboratory. He serves as grant reviewer for the National Institutes on Aging and reviews for a wide variety of journals. Dr. Petrella served for six years on the executive committee of the American Society of Functional Neuroradiology. He currently co-chairs the fMRI biomarker committee of the Radiology Society of North America’s Quantitative Imaging Biomarker Alliance.

A resident of Chapel Hill, North Carolina, Dr. Petrella and his wife Kristin, a classical pianist and yoga instructor, and have two daughters, Eva (13) and Lia (8), both of whom were adopted from China. In his spare time, Dr. Petrella enjoys traveling, practicing yoga with his wife, helping his daughters with math and playing jazz piano with friends.

IN MEMORIAM Richard A. Harvey (1936-2017)
Extracted from Star-Ledger Obituary.

Richard A. Harvey award-winning biochemist, author, lecturer and UMDNJ/Rutgers Medical School professor died April 14, 2017, in Louisville, Ky. Dr. Harvey earned both a B.S. and a Ph.D. from the University of Utah. He did a post-doc at Institut de Biologie Physio-chimique, Paris, France, 1964-1966. He subsequently joined the Department of Biochemistry at Rutgers
Medical School, taught the inaugural class of the new medical school, and remained as professor of biochemistry for 33 years before retiring as Professor Emeritus. He was also a frequent guest lecturer at St. George's University Medical School, Grenada and Ross University, Dominica. To honor Richard's long teaching career, the Medical School established an endowed Excellence in Teaching Award in recognition of his interactive teaching style. Richard authored numerous research papers and was awarded five patents. He was awarded the Walter D. Bonner Award for Outstanding Senior Chemist of the Year and the American Institute of Chemists Award as well as many other awards. However, Harvey is most widely recognized as author, illustrator and editor of the critically acclaimed series, *Lippincott's Illustrated Reviews*, initiated in 1986 in collaboration with RWJMS Professor Pamela “Pam” Champe (1945-2008). The series eventually encompassed eight volumes: biochemistry, pharmacology, microbiology, physiology, immunology, neuroscience, cell and molecular biology and integrated systems.

In 2008, Richard was awarded a Certificate of Achievement by his publisher, Lippincott William & Wilkins for selling more than one million books. Richard retired from publishing in 2014. Richard married Jillene Chadwick of Salt Lake City in 1958. After a divorce, Richard subsequently married nutritionist and fitness expert, Marilyn Schorin, then a faculty member in Community Medicine at Rutgers Medical School. They traveled extensively and shared a passion for theatre.

**NOTE:** Dr. Harvey contributed a “News from Afar” personal update in the February 2014 RFA Newsletter.

**REMEMBER:** You don’t have to actually be FAR AWAY to contribute a note to “News from Afar” Send to: gochfeld@ehoi.rutgers.edu
The annual dues period now corresponds to the calendar year. Dues are due now for calendar year 2017.

Also, if you like to support medical students to have an opportunity to participate in the Global Health Program, consider donating to the RFA Global Health Fellowship Fund. Please send your check to Paul Lehrer. Both contributions are tax deductible as charitable contributions. Thank you.

**RWJMS Retired Faculty Association 2017 (January 1, 2017 – December 31, 2017) Dues**

**Benefits of RFA Membership:**

- Defining, advocating for and publicizing the benefits of retired faculty at RWJMS,
- Fostering ongoing engagement and participation of retired faculty in RWJMS activities,
- Promoting continuing interaction among retirees,
- Providing information and options for faculty considering retirement, and
- Interacting with other academic retired faculty associations (e.g., The AAUP Emeriti Assembly of Rutgers University, The Rutgers Retired Faculty and Staff Association).

Please cut along the dotted line below and return that portion with your payment.

Please Print:

Name: _______________________________________________________________
Address: _______________________________________________________________
_______________________________________________________________
Phone:  _______________________________________________________________
E-mail address: _______________________________________________________________

Please enclose a check for a donation to the Global Health Program and/or for dues ($15) made payable to the “RWJMS Retired Faculty Association,” and mail the check to Paul Lehrer, PhD, at the address shown below.

Global Health Program (indicate dollar amount) ____________________
RWJMS RFA Dues ($15) ____________________
Total Amount ____________________

Paul Lehrer, PhD
Department of Psychiatry
Rutgers Robert Wood Johnson Medical School
671 Hoes Lane West
Piscataway, NJ 08854

Please include any personal information that you wish to share with others. Thank you.