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ATR Leadership Collaboration

The ATRN Leadership includes staff from each of the ATRN institutions: Marshall University, Ohio University, The Ohio State University, University of Cincinnati, University of Kentucky and West Virginia University. This team is working together to help increase the awareness and participation for research in the Appalachian area of Ohio, Kentucky and West Virginia. One of the goals is to work together for consistency

and to build valuable resources to expand and support research to the rural populations of Ohio, Kentucky and West Virginia. Opening the doors to more research projects within the Appalachian region will help with the pronounced health disparities that are above the national averages.

“By building bridges between the researchers and research institutions within the central region of Appalachia,” says ATRN Co-Director, Lauren Smith, “Our efforts are strengthened and sustainable.”

Community Partner’s VOICE: New Boston High School

Nestled in the foothills of Southern Ohio, near the Ohio River, New Boston High School is a very active community member and one of our newest community partners with ATRN. As a new member, they hit the ground running! When the call went out for teachers to participate in a focus group, they were the first to respond. The COPE Program (Creating Opportunities for Personal Empowerment), created by Dr. Melnyk, invited several teachers to review and participate in a focus group. The teachers were asked to review the program and give feedback using their work experience with

high school students. The COPE Program will be rolled out to high schools in southern Ohio for the Fall of 2013.

In April, New Boston Junior/Senior High School hosted a Health/Career Fair and gave ATRN another opportunity to spread the word about research. Building partnerships with area schools helps to increase the awareness of and expand research. ATRN welcomes Principal Melinda Burnside and New Boston High School as a valued community partner.

Request for collaboration through the [Community Engagement Program](#) may be made through the [CoRR System](#).





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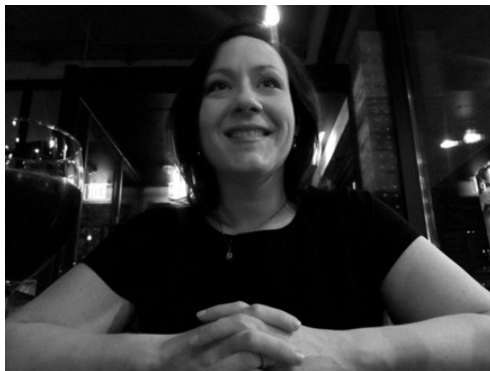
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mHealth:

Successful completion will contribute a missing fundamental element to our ability to provide rural healthcare.

West Virginia University Research Spotlight: mHealth: An Emerging Field



Dr. Jennifer Mallow, School of Nursing,
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The focus of Dr. Mallow's research is the care of uninsured individuals with Chronic Illness. As a clinician, Dr. Mallow has provided care, promoted health and managed disease for uninsured individuals since 2002. As a leader at her clinical practice site, she instituted Diabetes Group Medical Visits for uninsured individuals. Through this work, she has successfully lead interdisciplinary teams to achieve successful and measurable outcomes. As a postdoctoral investigator, Dr. Mallow has received the West Virginia Clinical and Translational Science Institute Scholar award. She has recently completed a research project that identified barriers to attendance at health care visits of poor uninsured individuals at a Free Clinic through Electronic Medical Record mining. Her current project centers on developing a healthcare delivery model that includes mHealth technologies in order to improve rural health disparities and access to affordable health care.

Mobile health (mHealth) is an emerging field that has been defined as "medical and public health practice supported by mobile devices, such as mobile phones, patient monitoring devices, personal digital assistants, and other wireless devices" (World Health Organi-

zation, 2011). Used as an integrated tool, mHealth may improve the ability of healthcare providers in rural areas to provide care, improve access to care for underserved populations, and improve biophysical outcomes of care for persons with Chronic Illnesses in underserved populations.

Interventions using mHealth have been found to improve outcomes, be cost effective, and culturally relevant. Although individual interventions to impact outcomes using technology have been validated, no approach to date has used an integrated system of mHealth tools to deliver healthcare at a distance within existing rural health clinics. The *rationale* for this project is that successful completion will contribute a missing, fundamental element to our ability to provide rural healthcare, without which the potential of reversing the growing number of people in poor health with chronic illnesses in rural settings in the U.S. will remain limited.

Dr. Mallow is creating a platform that will allow patients to access the mobile healthcare clinic, providers to access patients and patient records across geographical distances, a secure web service that provides secure communication between mobile devices and a record database, and the integration of that record database into the existing Electronic Medical Record (EMR). Once this development is complete we will have the electronic infrastructure necessary for mobile healthcare delivery in order to implement and evaluate this novel and much-needed approach.

Dr. Mallow will evaluate the feasibility and acceptability of mHealth care delivery in an underserved population measuring chronic illness specific biophysical outcomes of care and patient centered outcomes such as patient-provider communication, adherence to treatment, and self-management ability.



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Marshall University Research Spotlight: Help Your Pregnant Patient Stop Smoking

Lynne Goebel, MD, FACP, Professor of Medicine, Marshall University

Lynne Goebel, MD, FACP, is a Professor of Medicine at the Joan C. Edwards, School of Medicine at Marshall University, whose schedule stays busy with many activities and passions. She is an Associate Professor of Internal Medicine, a staff member at Cabell Huntington Hospital, professional speaker, published author, trainer and Principal Investigator. She has given numerous presentations and lectures to health care professionals on smoking cessation over the past several years.



One of Dr. Goebel's current programs focuses on helping pregnant patients stop smoking. This is a course designed to help those who are interested in improving their skills for counseling pregnant women. The objective of the program is to provide the counselor with guidelines to counsel patients who are ready to quit smoking. Even those patients who are not ready to quit smoking have counseling guidelines. Some of the roadblocks such as stress and weight gain, are also addressed. Also included are techniques for motivational interviewing, risks of smoking and counseling the pregnant patient about using pharmacotherapy to aid in smoking cessation.

“Women are more likely to quit smoking during pregnancy than at any other time in their lives.”

We wish Dr. Goebel continued success and thank her for her important contributions to Appalachian health.

Do you have information for future newsletters or are you interested in becoming a *community partner*? Email us at

Beverly.stringer@osumc.edu.



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University of Cincinnati Research Spotlight: Neurological Effects of Metal Exposure Study (CARES)

Join the ATRN Researcher Directory!

The ATRN Researcher Directory links researchers, students, and community partners interested in health-related research in Appalachia. To join the directory, complete our questionnaire at

<http://go.osu.edu/ATRNRResearcherDirectory>

Directory member information will be available on the OSU CCTS website.

When researchers, students, or community partners request assistance or collaboration, ATRN staff will contact you. Please note that your personal information will not be displayed and will not be released until you provide permission to do so.

We hope this initiative will be beneficial to all involved!



Dr. Erin Haynes, Assistant Professor/Director of Clinical & Translational Research, University of Cincinnati

The University of Cincinnati has partnered with Marietta College, Kent State East Liverpool Campus, and members of the Marietta, Cambridge, and East Liverpool communities to study the effect neurological effects of metal exposure, particularly manganese, on children. The Communities Actively Researching Exposure Study (CARES) is funded by the National Institute of Environmental Health Sciences.

The study involves several fun activities that test children's ability to learn and coordinate movements. Children also provide samples of blood, hair, toenails and naturally shed deciduous teeth for metal analysis. Participating children are 7, 8 or 9 years old. In Marietta and Cambridge, over 400 children have participated and the study is just beginning in East Liverpool.

The study was initiated in response to community concern about manganese exposure and EPA air monitoring indicating that the communities had high levels of manganese in their air. To learn more about the research study, you can contact the principal investigator, Dr. Erin Haynes at 513-558-5427 or visit the study's website at www.eh.uc.edu/cares.

This study was initiated in response to community concern about manganese in their air.

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Each
research
volunteer
is a HERO.

The Ohio State University Research Spotlight: Spread The Word—ResearchMatch.org

Why Is Research and ResearchMatch Needed?

Research is the way we discover knowledge that can have a positive impact on the health of society. If you have ever taken a medication, used a medical device, or had a health care procedure, each of those became available to you because of research study volunteers. Research study participants make it possible to discover the best and most advanced health care options. Each research volunteer is a **HERO**.

Most research studies need a certain number of people to participate in order to find the right answer. Without study participants there are no new discoveries, no new medical devices, and no new treatments. Some studies may end too early if there are too few volunteers to join. Even though there are many people who want to join research studies *once they understand the importance of participating*, it is sometimes difficult for those people to know how to find studies that are the right match for them or members of their family. For that reason, the National Institutes of Health (NIH) funded the creation of [ResearchMatch.org](http://www.researchmatch.org).

What Is ResearchMatch and Is It for Me?

[ResearchMatch.org](http://www.researchmatch.org) is a national online registry of volunteers of all ages willing to learn more about and possibly participate in studies. It is a secure, convenient tool that con-

nects volunteers with researchers who are seeking volunteers. Signing up is free and anyone can join. The process takes about 5 minutes.

Many studies are looking for healthy people, while some are looking for people with specific health conditions. ResearchMatch can help 'match' you with any type of research study, ranging from surveys to clinical trials. ResearchMatch always gives *you* the choice to decide what studies may interest you. Studies vary widely in the time commitment they may ask of participants. Some may ask for a single visit, several visits over months or years, and some need only a volunteer's input in an on-line survey.

What Should I Do Next?

A research opportunity is out there for **everyone**. Consider joining and help us spread the word to your friends and family. Log on to www.researchmatch.org

If you are looking for other ways to connect with research, you may also check out studies that are seeking volunteers at OSU by visiting [StudySearch](http://studysearch.osumc.edu) at <http://studysearch.osumc.edu> or you may call the **HERO** line at The Ohio State University at 614-293-**HERO** (614-293-4376)



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University of Kentucky Research Spotlight: Addressing Diet and Physical Activity in Kentucky Appalachia



Nancy E. Schoenberg,
PhD, University of KY

Appalachian communities are disproportionately affected by the leading causes of morbidity and mortality. Specifically, cancer and diabetes mortality rates are 17% and 33% above national rates. The Appalachian region also has the nation's highest cardiovascular death rates with 328.9 to 405.9 deaths per 100,000 population. A leading risk factor implicated in all of these health disparities is problematic energy balance; BRFSS data indicate that only 22% of Appalachian Kentuckians receive the RDI for fruit and vegetable intake, between 62-76% are overweight or obese, and between 45-62% report sedentary lives. Nationally, Kentucky ranks third in not meeting fruit and vegetable intake, #3 in overweight, #9 in obesity, and #3 for sedentary behavior. Of particular concern, the obesity rate has doubled since 1990 and Kentucky youth rank #1 in overweight and significantly lower than their national counterparts in fruit/vegetable intake and physical activity.

Despite the pervasiveness of these risk factors and disease burdens, Appalachian culture contains many characteristics and structures that offer locally based solutions, including strong intergenerational ties, faith-based activism, and healthy traditional activities. Drawing on epidemiologic evidence and many years of community-based participatory research projects, in 2008, with a grant from the National Institute on Diabetes and Digestive and Kidney Disease entitled, "An Intergenerational CBPR Intervention to Reduce Appalachian Health Disparities" (R01 DK081324) a team of community-based researchers and local community experts began to work on a project to address the high rates of obesity, overweight, and associated disease in Kentucky Appalachia. During these five years, we have implemented an intergenerational, culturally appropriate CBPR energy balance intervention with a long term goal of preventing and reducing cancer, CVD,

and diabetes morbidity and mortality by increasing fruit and vegetable intake, lowering BMI, and increasing physical activity.

Working in partnership with 40 faith-based institutions in Appalachian Kentucky, our team, headed by Nancy Schoenberg and Katie Dollarhide, has been engaging in three phases: Phase I (Developmental phase) used ethnographic methods (socioecological inventories, key informant interviews, participant observation) to assess the barriers to and facilitators of healthy diet, weight, and physical activity; developed culturally appropriate instruments; and modified existing interventions (We Can! And Media Smart Youth) to be responsive to local culture. During Phase II, we administered the group randomized, staggered CBPR intervention based using these two NIH-sponsored energy balance programs. Our intervention involves 1200 Kentucky Appalachian residents. These programs involve 6 weeks of highly engaging and interactive energy balance activities and interventions that focus on portion size, nutritional education, cooking advice, sources of healthy food, etc. The workshops are led by local, lay health advisors and are targeted to three age groups; children, adolescents, and adults. We have attempted to recruit families into the intervention, as dietary habits are formed and sustained in the household. We also infuse the intervention workshops with culturally appropriate activities, like square dance, community gardening, storytelling, and cooking classes), tailored lay health adviser visits, and motivational interviewing. We are currently undertaking qualitative and quantitative evaluation of the project.

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Ohio University Research Spotlight: The Test of an intervention to Increase HIV Testing in Rural Appalachia.



Dr. Tania Basta, along with her sons.

T

ania B. Basta, Ph.D., MPH, CHES is an Associate Professor of Community

Health in College of Health Sciences and Professions at Ohio University and the Associate Director of the Appalachian Rural Health Institute (ARHI). She is currently an HIV Prevention Research Ethics Training Institute Fellow with the Center for Research Ethics Education at Fordham University in New York and was recently funded to complete a study titled *The Test of an Intervention to Increase HIV Testing in Rural Appalachia*.

The study aims to enhance the consent processes among rural economically disadvantaged individuals in mental or substance abuse treatment services to increase the likelihood they will consent to participate in an HIV testing study. During Phase One, the

study tests two brief educational interventions designed to increase knowledge about HIV and HIV testing. During Phase Two, the participants who completed Phase One are invited to participate in an HIV testing study, in which they are given the option of getting a free HIV test; either using the newly marketed Oraquick self-test HIV kit or via a referral to standard of care testing (Planned Parenthood).

Data collection for this study is currently underway and we look forward to sharing the results of this project with the ATRN community! Dr. Basta is interested in rural community-based HIV prevention research and would welcome collaboration with researchers at other ATRN institutions.

Contact Tania at (740) 593-4681 or basta@ohio.edu

We wish Dr. Basta continued success and thank her for her important contributions to Appalachian health.

Dr. Basta is interested in rural community-based HIV prevention research and would welcome collaboration with researchers at other ATRN institutions.

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