



Community-University Partnerships: Translating Evidence into Action

A National Symposium Jointly Sponsored by
Community-Campus Partnerships for Health and
HUD's Office of University Partnerships

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Community-Campus Partnerships for Health (CCPH)

CCPH is a non-profit organization based at the Center for the Health Professions at the University of California-San Francisco and at the University of Washington. Founded in 1996, our mission is: To foster partnerships between communities and educational institutions that build on each other's strengths and develop their roles as change agents for improving health professions education, civic responsibility, and the overall health of communities. We are a growing network of over 1000 communities and campuses throughout the United States and increasingly the world who are collaborating to promote health through service-learning, community-based research, coalitions and other partnership strategies. These partnerships are powerful tools for improving health professional education, civic responsibility and the overall health of communities. For more information, please visit www.ccph.info.

U.S. Department of Housing and Urban Development's Office of University Partnerships (OUP)

Recognizing the crucial role that America's institutions of higher education can play in rebuilding communities large and small, HUD established the Office of University Partnerships (OUP) in 1994 to encourage and expand the efforts of institutions of higher education that are striving to make a difference in their communities through funding opportunities. Whether the institution has a venerable history of reaching out to lower income neighborhoods or is just beginning to explore the potential of such partnerships, OUP can help increase the scope, effectiveness, and sustainability of its community-building efforts. For more information, please visit www.oup.org.

The opinions expressed by the panelists in this report are their own and not necessarily opinions held by Community-Campus Partnerships for Health or the Office of University Partnerships.

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OVERVIEW

By Sarena D. Seifer, CCPH and Armand W. Carriere, OUP

Community-university partnerships are gaining momentum across the country as a powerful force for revitalizing communities, fostering civic engagement and strengthening the core missions of higher education. The landscape of community-university partnerships includes service-learning, community-based participatory research and partnerships focused on solving a particular problem or achieving a particular goal (i.e., neighborhood economic development, workforce development), among other approaches. The evidence base about these partnerships, factors contributing to their success and failure, and their impact on participating students, communities and campuses is growing, as demonstrated by the increasing number of multi-site evaluation studies, peer-reviewed empirical journal articles, and meta-analyses in the past five years alone. A major challenge for our field is to derive principles and best practices from across this evidence base, to facilitate the ability of emerging and existing partnerships to translate these into practice and policy, and to identify unanswered questions for future study and policy development. A related challenge is to strengthen the research and evaluation components of community-university partnerships for the purposes of continuous quality improvement, knowledge advancement and new partnership development.

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Community-Campus Partnerships for Health (CCPH) and the U.S. Department of Housing and Urban Development's Office of University Partnerships (OUP) jointly planned and sponsored the symposium, "Community-University Partnerships: Translating Evidence into Action" in part to address these challenges. Timed to coincide with the annual grantee meeting of OUP's Community Outreach Partnership Centers and with CCPH's annual conference, the symposium was an unprecedented opportunity for advancing community-campus partnerships that truly span the campus and contribute to public problem-solving and healthier communities.

The goals of the symposium were to:

- Disseminate the findings of national multi-site evaluations of community-university and other community-institutional partnerships;
- Explore multiple sets of evidence-based principles and best practices for community-university partnerships;
- Facilitate the ability of community-university partnerships to translate these principles and best practices into actions at the local level;
- Develop an agenda for future research and policy development on community-university partnerships;
- Strengthen the roles of both universities and communities in the research and evaluation components of community-university partnerships; and
- Foster a multi-disciplinary, university-wide approach to community partnerships that includes undergraduate, graduate and professional programs.

INTRODUCTION



Joint Symposium panelists

Community-campus partnerships, are by necessity, very influenced and shaped by local history, contexts, cultures, opportunities, issues, challenges, and personalities. At the same time, logic tells us that we need to learn from each other. And that the achievement of maximum impact, of campuses and communities working together, requires us to try and learn from each other about conceptions of effective strategies and good practices.

These proceedings highlight four particular perspectives, or elements, of partnership work:

- *Community perspective on partnerships* — **Ella Greene-Moton**, National Community Committee of the CDC's Prevention Research Centers
- *Service-learning perspective on partnerships* — **Timothy K. Stanton**, Public Service Medical Scholars (PriSMS), Stanford University School of Medicine
- *Evaluation perspective on partnerships* — **Sherril Gelmon**, Portland State University
- *Community-based participation research perspective on partnerships* — **Lawrence W. Green**, Office of Science and Extramural Research and Public Health Practice Program Office, at the Centers for Disease Control and Prevention (CDC)
- *Recommendations* — **Barbara Holland**, National Service-Learning Clearinghouse

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It will feature both organizational perspectives, but also strategic perspectives such as service-learning and community-based research, that are common elements in how partnerships are conducted.

The goal of these proceedings is to share information so that we don't all begin from scratch, and make perhaps the same mistakes. We're all going to collectively accelerate our work, even though we have very important individualized contexts.

Community Perspective on Partnerships

Panelist: Ella Greene-Moton, National Community Committee of the CDC's Prevention Research Centers

As the Co-chair of the National Community Committee of the CDC's Prevention Research Centers, I represent a group of communities that are connected with 28 prevention resource centers located all over the country. As a group we are trying to understand how communities and PRCs can better do their work by connecting with one another.

We started in Michigan over 13 years ago, during the community-based public health initiative that was funded by the Kellogg Foundation. The initiative inspired a person from the community who had connections to the Health Department to go out into the community, find the appropriate people, and bring them to the table to work on this community-based public health initiative.

She brought several people connected with various community-based organizations to participate in our initiative. Included in this group were representatives from the University of Michigan, Flint, and the University of Michigan, Ann Arbor. This created a very unique partnership—not only did we have a community and a campus, but we also had a practice.

We faced several typical challenges including:

- Lack of structure
- Competing agendas
- Dynamic nature

Lack of Structure

We had no rules, and therefore made them up as we went along. Many stuck with us, and some were recorded and became our standard operating procedures. Formalized rules and standard practices provide a consistent methodology of how we approach issues and a structure within which we can work.

Competing Agendas

Each person brought with him or her opinions on what should be done. Interestingly, we realized that when the University came they spoke with one voice. The Health Department came to the table with one voice. The community-based organizations found ourselves at a disadvantage because we came to the table with seven different voices. To address this issue, we created CBOP (Community-Based Organization Partners) a sub-group of the partnership that met before meetings to discuss the topics at hand. In these meetings, issues that might arise during our partnership meetings were discussed and resolved in advance, allowing us to present a more united front in the meetings with the rest of the partnership. We found that discussing and agreeing upon a specific course in advance of the partnership meetings has made us a more valuable and respected participant in the partnership.

Dynamic Nature

The partnership is always evolving. It is important that there is an ongoing dialogue that allows partners to steer the partnership as it changes. We faced some serious issues in determining how to

lead our partnership because it forced us to confront uncomfortable issues like the possible lack of trust some members might face within the community, and the distasteful fact that we simply had to raise money. These were not pleasant issues to discuss but we had to have several discussions on the topic before we could all agree on a course of action. In our particular case, when money came up, we were often tempted to partner with others to build our coffers. It's tempting to say we need to partner with somebody so let's just do it. "We have to bills to pay. Let's be real." That's not always the best way to do it, but if that's the situation that you're in right now, then you need to say, okay, this is where I am now. But is this something I want to do forever? Is this the way I want to partner? Is this the way I want to get to know the community? Maybe not. So you try to find alternatives that fit within your means. You get out into the community and you get to know them and you do what you can with what you have. We find ourselves revisiting touchy topics and often engage in dialogue that tests the way the wind is blowing within our group and determines whether the consensus has evolved. That's not unusual. As a relationship-oriented partnership, we frequently find ourselves engaging in ongoing discussions about familiar topics—even those of us who have been involved for a number of years find it helpful to remain involved and take a step back every once in awhile to gain a better understanding of the implications of our actions.

Service-Learning Perspective on Partnerships

Panelist: Timothy K. Stanton, Public Service Medical Scholars (PriSMS), Stanford University School of Medicine

Service-learning is the joining of community service, community action, or even community-based research, with structured learning for students. Many programs are modeled after Case Western cognitive scientist David Kolb's "experiential learning cycle": concrete experience leads to reflective observation, which leads to abstract conceptualization, which leads to active experimentation.

The Concrete Experience

What will students do in communities? The when, where, why, and what, of their engagement, needs to be determined, and should be determined, both by the academic and community partners together.

The Reflective Observation Process

How will we enable students to consider their experience? How can they benefit academically, and more generally, how can they gain the knowledge and skills they need to ensure that the experience they're engaged in is productive for all those engaged in the partnership?

Abstract Conceptualization

The abstract conceptualization stage of service-learning must be designed proactively and carefully. How are the students' opinions about their experience connected to what is known about the issues in which they are engaged? How can that conceptualizing help them not only generate what we call academic knowledge, but more importantly, perhaps, generate knowledge that helps them perform more effectively in the community?

Active Experimentation

What structures and processes must we devise to make sure that the learning students get out of these experiences is actively and effectively brought to bear on the work they are doing in the community thereby transforming the experience, which will then yield new, and hopefully deeper learning?

For service-learning to express partnership principles, all partners in the enterprise need to be engaged in all aspects of program design. For example, the community ought to be invited by the academic partner to participate in each of these four processes, not just those that take place off-campus. For us in the academy, to simply critique what we see in the community within the four walls of our classrooms, without the community voice in the room, is to miss the point. If the ultimate goal of this enterprise is to do well in the community, then we need to hear from the community partners about how to do that. Similarly, the community partner must be deeply involved in determining what we, the academics and the students, do in communities. In my case, as an instructor of service-learning courses, I want to be at the table when the community partner decides what my students will do. This is necessary, so I can help ensure that students' community work is both productive and ripe with learning.

What's also compelling to me about the partnership concept is that it enables us to think about service-learning not just as discrete courses, and programs engaged in communities, but hopefully as important ongoing elements of long-term relationships between institutions and community organizations on behalf of community development. This partnership concept enables us to think about linking courses, so that students can work together on major projects and get support from more than one course for doing so. It enables us to design community interventions that last beyond semesters, even several years, regardless of whether students come and go. When we have clear community development goals that service-learning can contribute to, then we offer the community partners important, self-interest related reasons to engage with us in advancing our students' education.

Let me use my personal concrete experience to illustrate the perils and the benefits of service-learning as community partnership. A few years ago, my public policy class at Stanford was focusing on how local communities address public decision-making. I partnered with the economic development director of a nearby city and decided to have the class address issues related to a commercial development that was failing economically. There was great tension around this issue, between residents in the area, the merchants, the commercial property owners, and the city officials involved.

Contested solutions ranged from letting the market take its course, to complete redevelopment. We decided to break the students into the four contesting groups engaged in this issue, and we asked them to research two things. First, what was their constituent group's understanding of the problem at hand? And second, what was their understanding of the three other groups' understanding of the problem?

We were, in effect, engaged in the beginning of a dispute mediation process. Hoping that by researching and displaying these understandings, we could help the groups involved get to know and trust each other a little more, and thereby come together around some consensus as to what to do. The outcome for this course was that the students would engage in this research, and then have a public presentation of their findings, to which all the parties would be invited. For the students, I hoped they would learn something about the complexity of public decision-making. I organized my syllabus, so that we would be reading and discussing issues in class related to their work while they were out doing the community research.

By the fifth week, feedback from the students and community partners indicated our planned community meeting was likely to be much more contentious than expected. Rather than building trust to enable consensus, it was building tensions and was likely to increase conflict and rigidity on all sides.

Panicked, we decided to spend the rest of the quarter focused on this meeting. I had to throw out my syllabus. Most of our class meetings for the next three or four weeks were focused on how we could salvage some ability, at least, to do no harm in the community. I found a professional community dispute resolution specialist and brought him into the classroom. He trained us, focusing on how to run such a meeting.

Fortunately, our considerable efforts to confront the crisis were not in vain. The meeting was a huge success. We had a diverse mix of about 100 people in attendance—from residents to commercial property owners and merchants to city officials—and each had their own take on the issue. The students made their presentations, representing the various viewpoints and facilitated small group sessions that allowed competing sides to confront one another, with the hopes of building some understanding. Many of the attendees that day considered the meeting to be the turning point that put the city on track for finding a solution.

The economic development director was thrilled with the outcome, but I had mixed feelings. As an academic, I was concerned about what the students took away. Obviously, we didn't do what we were supposed to do in the syllabus. I was pleased, however, to find that when the class met to debrief the event, the students talked with such depth and sophistication about how communities work. It was clear, that they learned everything that I had hoped they would learn, but what is significant is that *I* didn't teach them. The experience taught them, the community taught them.

Perhaps what we should take away from that experience is this: the best learning comes from the best service. The best service often means moving aside and letting the community and the experience take control, with the instructor's task being to tease out what can be learned. The service truly becomes the learning, and—in this case at least—the community partner felt well served.

Evaluation Perspective on Partnerships

Panelist: Sherril Gelmon, Portland State University

How do we know that our partnership makes a difference? What kind of difference does it make? To whom? At what cost, and at what benefit?

If tasked with putting together a partnership, all of you could figure out who the partners should be, you could figure out what the program should be, you could even come up with standard procedures and operational guidelines. All that knowledge and skill is at your fingertips. My fear is that, if you were asked to design an evaluation that would be the element of knowledge and skill that you would have the most trouble with because you have the least experience with it.

Evaluation still is an afterthought. We're worried about the program, we're worried about the service, we're worried about the partnership but we aren't worried about providing evidence that what we do is working. And while people are becoming interested in evaluation and funders are starting to ask for it, evaluation is still perceived as inaccessible and nobody wants to pay for it, and people are reluctant to build it into their programs.

It's not easy. I'm the evaluator on a project in Portland that brings together a group of about ten organizations to provide alcohol, drug, and mental health services to homeless youth. A year and a half into the project we still don't have any numbers of how many youth are coming through the consortium, because we've been spending the past year and a half just building the consortium. Figuring out how to talk to each other. Figuring out what that continuum of service is. We haven't even been able to think about having evidence yet. Still, the boards of the participating agencies are saying, okay, it's a year and a half into it. Where are the results? What's the outcome? What's the impact?

So, what do we need?

At the micro-level of each individual partnership, we need to commit time in our partnerships to talking not only about what we're going to accomplish and what we're doing, but also assessing how we've done. What worked? What didn't? What will we do differently next time, and what will we keep?

We need then, from those individual partnerships, to build macro-knowledge, across communities, across national organizations, and across higher education so that we start to build a bigger body of knowledge with which we can understand evaluation.

Our programs, and our partnerships, should be designed with evaluation in mind. It might be qualitative and it might be quantitative but it also must be practical, pragmatic, and immediately usable, to improve our daily work.

Just as program development, program planning, and program budgeting are skills that all of us need to have if we're going to be working in community-based activities, so too is evaluation. We must share information and turn to experts for advice so that we can learn the core methods and learn to recognize the potential pitfalls so that we can create our own styles and build our own expertise.

Community-Based Participatory Research Perspective on Partnerships

Panelist: Lawrence W. Green, Office of Science and Extramural Research and Public Health Practice Program Office, at the Centers for Disease Control and Prevention (CDC)

Participatory research may be one of the answers, if not the best answer, to the problem that we have faced for some time now: we have invested for decades in research that has accumulated, yet we see a growing gap between what we know—the accumulated evidence of efficacy for different types of interventions—and their application in communities.

The two main arguments for participatory research are that, first, participatory research will improve the *relevance* of research and second that participatory research will improve the *quality* of the research.

The first argument goes something like this: If you think of research as a pipeline, in which evidence from previous research is taken and put to work in specific settings, to test its effectiveness, then you would ask — why aren't the people who will be asked to apply the results more engaged upstream in that pipeline? — at the beginning of the research, rather than simply asked at the end, to figure out how to put it to work in practice.

The second argument is that it will improve or enrich the quality of the research. This is slightly different than the argument of improving the relevance of the research. Improving the quality of the research means that by engaging the community or representatives of the community where the research would be applied, we will understand better what needs to go into the interventions, or the studies, of the problems in those communities. This argument is sometimes a harder sell with researchers because they are very methodologically oriented, with quantitative methodologies, and they have a hard time understanding that their research could be improved upon by anybody other than their peers or their mentors—the people whom they consider “experts.”

Four Paradoxes

There are at least four paradoxes that confront us in this enterprise.

Participatory Research Need Not Be *Just* Community-Based

One is that participatory research is not—or need not be—just community-based, in the sense of grassroots, geographically based, neighborhood based, or participatory in those senses. It can be a three way partnership or it may be a two way partnership between universities and organizations, who are a proxy for their communities.

This has been misunderstood by some of the ideologues who have pushed participatory research from the standpoint that, if you don't have grassroots participation it's probably not worthy of being called participatory, or at least community-based participatory research. In these discussions, we must be able to encompass research that is directed to practitioners, and policy-makers, and engages them in the process, precisely because we need those practitioners and policy-makers to use the results in the end, so that we can argue for more of that kind of research.

Involvement Need Not Be Equal

Some proponents of community-based participatory research espouse that the academic and community partners must be involved as equals, or equally involved, at every stage of the research, or it isn't worthy of the name participatory research. This is an extension of the notion that if a little participation is good, then a lot of participation is necessarily better. The problem with this tendency is that it can conspire against getting the job done. The ideal squeezes out the good. The reality is that many community partners, practitioners, policy-makers, or grassroots community lay participants, neither have the time, nor, perhaps more to the point, are they being paid for the time that they would spend engaged in a lot of the technical, labor-intensive data collection and analysis stages of research.

At CDC, we have stated in our grant application guidelines that the community participants needs to be involved particularly in the first stage, and must participate in naming the problem and setting the research question in place. We also want them there when the analysis is being reviewed and interpreted, as we discuss the implications for application.

External Support

The third is the external support paradox. There is an inherent contradiction in controlling or even trying to guide participatory research from a federal government, or any other centralized position. We've got to figure out how to work through that in our funding mechanisms and technical support.

External Versus Internal Validity

Finally, there is the external versus internal validity problem. What distinguishes research from evaluation is that research is supposed to be highly generalizable. It's supposed to be generating new knowledge that is generalizable. The paradox here is that participatory research has its greatest value in making the research more specific or contextually sensitive, more culturally sensitive, more sensitive to the traditions and ways of doing things, and the circumstances in the local situation. Those are its real, tremendous values. But if we demand that it be highly generalizable at the same time, in order to be worthy of being called research, then all of that contextual sensitivity may have less to say about other situations, than studies that are more contrived.

Recommendations

Panelist: Barbara Holland, National Service-Learning Clearinghouse

As we continue to engage in open dialogue about partnerships between communities and campuses, it's important to remember the following:

AT THE TABLE

Respect your peers

With respect to community and campus constituencies, that we have professionals on both sides. We have professionals all around the table. Some may be formally trained, and have degrees, advanced degrees and so forth. Others are informally trained. But we're all professionals and peers in this process and it's important that we respect what each partner can bring to the table.

It's not about seeking agreement

It's not about seeking agreement and consistency on everything. Sometimes partners will say provocative things that push buttons, but that's good because we learn from that. We learn different perspectives, and from that we learn where we must continue to reflect and explore. Are there important distinctions, are there patterns that we need to look for that we have not yet discovered?

Remember the common themes

There are certainly important local contexts for all our partnerships that make one different from another. But there are also very important things that we have in common, that need to be addressed in every partnership. The common theme I heard today, that came up over and over, is the importance of exploring, as partners: What are our separate and collective goals? Who else, not currently at the table, cares about our work? Even if they're not at the table, and not needed at the table, who else needs to know and care about our work, and how do we make our work more visible?

How do we resolve conflicts in partnerships, handle transitions, personalities, and ensure that we're giving voice to all at the table? The need for the ground rules of contact and communication, the importance of ensuring inclusion and respect. Openly dealing with issues of power, race, and stereotyping, and history, in relationships. And the central role of students and youth in general in our partnerships.

Nurture the partnership

Provide roles that allow each partner to do his or her best work. Recognize contributions. Establish an environment that makes partners want to continue their involvement.

STRUCTURING THE PARTNERSHIP

Student involvement is a powerful uniting force

Is the involvement of students in campus-company partnerships *nice* or is it *essential*? Increasingly, it's the focus on student learning, on students' academic issues and student

learning about community that is the unifying ground. We all care about those young people and what they're learning from their experience. It's part of what gives us common ground to continue the conversation about doing the hard work of partnerships. It's certainly also about other benefits to the institution and to the community.

Focus on “promising processes”

Just as we discuss “best practices” we must focus on “promising processes.” So much of the work we're talking about in partnership building is around the process: the process of relationship building, how we deliberate, how we bring various voice to the table, how voices that are traditionally not heard or spoken are present, and listened to, and acted on. We need to better understand, define and disseminate information on these processes.

Aim beyond policy relevance — aim for policy impact

It's not enough that our work be policy-relevant, we really need to mobilize for policy impact. It's not enough to make the recommendations, or show that the work that we do has policy implications. We must mobilize constituencies for change. We need to be more strategic and effective in mobilizing ourselves for change, in policy areas that range from federal, state, local, and institutional.

Share your experience

Perhaps the most important thing to remember may be that from time to time in this hard and labor-intensive and time-intensive work of partnerships, we need, as we did today together, lift our head up from the daily, intense, local work, and remember to share our experiences with our colleagues so that we can learn from one another. Nobody should have to reinvent the wheel—or even worse, the flat tire! In doing so we should utilize available resources. Often, the messages that don't get out in those kinds of publications, are really the down and dirty how-to's. What works? What doesn't work? How were challenges overcome? We can do much more with regional meetings, websites, information sharing and listservs.

SUSTAINING THE PARTNERSHIP

Look to other resources

We need to look at ways to support these programs beyond funding. All of us need to work together to look at ways of supporting our programs through other kinds of funding, but also other forms of support.

Avoid thinking in project terms

When we think of these partnerships, we think of them in project terms. We need to expand that and think of these partnerships beyond the specific grant and see them as longer more organic endeavors.

Commit to continuous assessment

Continuous assessment extends beyond assessing the results and must include assessing the partnership itself. Assessment and evaluation put everyone on equal footing. It's very

powerful to building trust, promoting communication, and sustaining the relationship. Somebody recommended this test of commitment and sustainability: Look internally, and really ask yourself in a given partnership, whether that partnership makes sense if there aren't any dollars. If the grant were to disappear, if there was no prospect of funding, would those folks be at the table? Would the partnership be operating, would it move forward? Is there philosophical agreement around the work involved?

BIOSKETCHES

Sherril Gelmon is Professor of Public Health in the Mark O. Hatfield School of Government Portland State University. Her primary teaching responsibilities are in the Masters of Public Health and Masters of Public Administration programs; she is also a member of the faculty of the Public Administration and Policy doctoral program. She teaches courses in health administration theory, continual improvement, health policy, program evaluation, organizational behavior, values and ethics, and health systems. She served as Coordinator of the statewide Oregon Masters of Public Health program from 1998 to the end of 2000, and played a key role in the preparation for accreditation of the OMPH by the Council on Education for Public Health. During 2001, Sherril was on sabbatical, and spent a portion of the year in South Africa, working with a Ford Foundation funded project entitled “Community – Higher Education – Service Partnerships”, a national collaborative of eight South African universities developing partnerships for service-learning and community development. She is serving as a consultant to the project, assisting in the design of a national research program to complement the individual university initiatives, advising on the program monitoring and evaluation strategy, and consulting on curriculum development. Sherril has been appointed as an “Engaged Scholar” with national Campus Compact, working on developing assessment methodologies with national disciplinary associations initiating major efforts in service learning and civic engagement. She is a member of the Campus Compact National Advisory Board; a member of the Campus Compact – American Association for Higher Education Service Learning Consulting Corps; and a member of the National Review Board for the Scholarship of Engagement. Since 1992, Sherril has participated in the professional education initiatives of the Institute for Healthcare Improvement, and is a member of the Coordinating Committee of the IHI’s Interdisciplinary Professional Education Collaborative. She is serving as an Examiner for the Malcolm Baldrige National Quality Award for the third year. Her early professional career included health care planning and evaluation consulting with Woods Gordon Management Consultants (the Canadian affiliate of Ernst and Young), and positions as a staff physiotherapist in Canada. Sherril is an alumna of the Pew Health Policy Fellows Program, and received her doctorate in health policy from the School of Public Health at the University of Michigan. She received her masters degrees in health administration from the University of Toronto, and she holds undergraduate degrees in physiotherapy from the Universities of Toronto and Saskatchewan. She is a Fellow of the American College of Healthcare Executives.

Lawrence W. Green is Director of the Office of Extramural Prevention Research and Associate Director for Prevention Research and Academic Partnerships. He formerly served as Acting Director of CDC’s Office on Smoking and Health and Director of the WHO Collaborating Center on Tobacco and Health. After eight years as Director of the Institute of Health Promotion Research and Professor and Head of the Division of Preventive Medicine and Health Promotion, Department of Health Care and Epidemiology, at the University of British Columbia, he joined CDC as Distinguished Fellow/Visiting Scientist in August 1999. Larry served as the first Director of the U.S. Office of Health Information, Health Promotion and Physical Fitness and Sports Medicine in the Office of the Assistant Secretary for Health, U.S. Department of Health and Human Services; and as Vice President of the Kaiser Family Foundation, and before that in state and local health departments, and in Bangladesh. He has been on the public health faculties at Berkeley, Johns Hopkins, Harvard, and Texas, and as a Visiting Professor at the University of Maastricht in the Netherlands.

Larry is a past President and Distinguished Fellow of the Society for Public Health Education and recipient of the American Public Health Association's Distinguished Career Award and Award of Excellence. He currently serves on the Editorial Boards of 13 journals in public health, and has published over 300 articles and several books, one now in its 8th edition and another in its 3rd edition.

Ella Greene-Moton has an extensive background in community organizing and advocacy that spans over the past thirty-five years in the Flint area. She is currently the Program Coordinator / Community Liaison for The Flint Odyssey House, Inc. Health Awareness Center (FOHIHAC). Her commitment to the empowerment of community residents reaches across local, state, national, and international levels. Her experience includes: Past Chair of the McCree North Advisory Board; member of The Broome Team Collaborative, a CBO, university, and health department partnership established to implement and sustain Community Based Public Health activities; Vice-Chair of the Community Based Organization Partners (CBOP); member of the Community Based Public Health Committee; Past Vice-Chair of the Programs and services Committee of the PRIDE (Programs to Reduce Infant Deaths Effectively) Coalition; Board of Directors Vice- President of the Community Health Outreach Workers (CHOW), a state wide coalition with a focus on HIV/AIDS; member of the HIV/AIDS Regional Community Planning Group; Coordinator of the FOHIHAC HIV/AIDS Counseling and Testing Site; Coordinator of the in-house student intern placement from the University of Michigan Flint and Ann Arbor; member of the Michigan Prevention Research Center (PRC); National PRC Community Advisory Board Representative; Co-Chair of the National PRC Community Committee; member of the National PRC Steering Committee; member of the National Chronic Disease and Prevention Research Conference Planning Committee; member of the National PRC Program Committee; member of the Michigan Public Health Training Center (MPHTC) Curriculum Committee; and member of the MPHTC Steering Committee. Ella has decided to return to school to complete her formal education that she might better utilize the wealth of experience and training she has already acquired.

Barbara Holland is the Director of the National Service-Learning Clearinghouse, a project funded by the Learn and Serve America program of the Corporation for National and Community Service. She joined the Clearinghouse in April 2002 after two terms as the visiting director of the Office of University Partnerships at the Department of Housing and Urban Development in Washington, D.C. She also serves as a senior scholar for Indiana University-Purdue University Indianapolis in their Center for Service and Learning, as executive editor of Metropolitan Universities journal, and as Adjunct Professor at the University of Western Sydney. Previously, she held senior administrative positions at Portland State University and Northern Kentucky University. Her publications and presentations reflect her expertise in service-learning research, assessment, community-partnership building, and institutional change. She holds a bachelors and a masters degree in journalism from the University of Missouri-Columbia and a doctorate in higher education policy from the University of Maryland at College Park.

Tim Stanton serves as director of the Public Service Medical Scholars program (PriSMS) and lecturer in Health Research Policy in the School of Medicine at Stanford University. As lecturer, Tim instructs graduate and undergraduate service-learning courses that focus on public decision-making in local communities and the process and practice of community service. From 1985 to 1999 Tim served as associate director and director of Stanford's Haas Center for Public Service. The Haas Center involves more than 2,500 students annually in a wide variety of public and community service activities and organizes faculty, students, and community-based professionals to develop curriculum that combines community service-based learning with academic study. From 1977 to 1985 Tim directed and taught courses within the Human Ecology Field Study Program at Cornell University. Prior to entering higher education he founded and directed a community-based service-learning program for high school and college students in Marin County, California. Tim is past-president of the National Society for Experiential Education (NSEE). He consults extensively in service-learning program development and assessment for organizations such as the National Commission on Resources for Youth, The U.S. Department of Education, NSEE, and Campus Compact. Tim's research interests focus on student and faculty development related to service-learning. He authored a survey research report, "Integrating Public Service With Academic Study: The Faculty Role," for Campus Compact. His summary of a two-year study of twelve faculty members' experience with service-learning pedagogy appeared in *The Michigan Journal for Community Service*. With Dwight Giles and Nadine Cruz he researched and authored *Service-Learning: A Movement's Pioneers Reflect on its Origins, Practice, and Future* (Jossey-Bass Publishers, 1999). Stanton holds a Ph.D. in human and organizational systems from The Fielding Institute.