

# UNIVERSITY OF FLORIDA BOARD OF TRUSTEES COMMITTEE ON EDUCATIONAL POLICY AND STRATEGIC INTIATIVES EXECUTIVE SUMMARY December 1, 2016

The Committee will consider and be asked to act on the following Action Items:

- ➤ EP1 Tenure Upon Hire On the Provost's recommendation, the Committee is asked to approve for recommendation to the Board of Trustees on the Consent Agenda, the granting of tenure commencing with the appointment of the listed newly appointed faculty members, who have been recommended to the Provost by their Chairs and Deans for tenure upon hire.
- ➤ EP2 Degree Program Changes The Committee is asked to approve the Degree Program Changes for the pre-pharmacy curriculum of the Doctor of Pharmacy degree (CIP Code 51.2001), the modifications to the common prerequisites for the Bachelor of Science in Construction Management (CIP Code 15.1001) and the modification of common prerequisites for the Bachelor of Arts in Digital Arts and Sciences (CIP Code 50.0102).
- ➤ EP3 Honorary Degree The Committee is asked to approve the Honorary Degree for Chita Rivera, a Tony award-winning American actress, dancer and singer, who is best known for her roles in musical theatre from the 1950s to the present and is also the first Latino American to receive a Kennedy Center Honors award.

The Committee will address the following Discussion/Informational Items:

- Admissions Policies Discussion, by Joseph Glover, Provost, and Zina Evans, Vice President for Enrollment Management
- Admissions Update, by Zina Evans, Vice President for Enrollment Management
- Faculty Update, by Nicole Stedman, Chair, Faculty Senate
- Student Body President Update, by Susan Webster, President, Student Body
- HireUFGators, by David Parrott, Vice President for Student Affairs
- Centers/Institutes, by Joseph Glover, Provost
- Department Changes, by Joseph Glover, Provost
- College Name Change, by Joseph Glover, Provost

Note that Provost Glover will address a newly developed Metrics Dashboard requested by the Committee to track progress against UF's Metrics That Matter and Performance Funding Metrics at the Strategic Discussion hour on Friday, December 2<sup>nd</sup>.



## The Foundation for The Gator Nation

## UNIVERSITY OF FLORIDA BOARD OF TRUSTEES COMMITTEE ON EDUCATIONAL POLICY AND STRATEGIC INITIATIVES COMMITTEE AGENDA

December 1, 2016 ~3:45 p.m. EST

## President's Room 215B, Emerson Alumni Hall University of Florida, Gainesville, FL

### **Committee Members:**

Jason J. Rosenberg (Chair), David L. Brandon, James W. Heavener, Mori Hosseini, Leonard H. Johnson, Rahul Patel, Marsha D. Powers, Steven M. Scott, Nicole LP Stedman, Robert G. Stern, David M. Thomas, Susan D.C. Webster, Anita G. Zucker

1.0	Verification of Quorum Jamie Lewis Keith, VP/General Counsel/University Secretary		
2.0	Call to	Order and WelcomeJason J. Rosenberg, Chair	
3.0		and Approval of MinutesJason J. Rosenberg, Chair hber 1, 2016	
4.0	Public (	CommentJason J. Rosenberg, Chair	
5.0	EP1. EP2.	ItemsJason J. Rosenberg, Chair <u>Tenure Upon Hire</u> <u>Degree Program Changes</u> <u>Honorary Degree</u>	
6.0	<ul><li>6.1</li><li>6.2</li><li>6.3</li></ul>	ion/Informational Items	
	6.6	<u>HireUFGators</u> David Parrott, Vice President for Student Affairs Centers/Institutes Joseph Glover, Provost 6.6.1 <u>Center Name Change: Center for Women's Studies and Gender Research to Center for Gender, Sexualities and Women's Studies Research</u>	

		6.6.2	Center Name Change: Center for Digital Health and Wellness (CDHW) to
			Center for Behavioral Economic Health Research (CBEHR)
		6.6.3	New Center: (CSQUID) Center for Statistics and Quantitative Infectious
			<u>Diseases</u>
		6.6.4	New Center: SHARC Center for Translational HIV Research
		6.6.5	New Institute: University of Florida Engineering Leadership Institute
		6.6.6	New Center: Center for Biomedical Sciences Research and Training
			(CBMSRT)
		6.6.7	New Center: Center for Hydro-Generated Urbanism
	6.7	Depart	ment Changes Joseph Glover, Provost
		6.7.1	<u>Division of Urology to become the Department of</u>
			<u>Urology in the College of Medicine-Jacksonville</u>
	6.8	_	Name Change Joseph Glover, Provost
		6.8.1	"Warrington College of Business Administration" to change the college
			name to the "Warrington College of Business"
7.0	New B	usiness	Jason J. Rosenberg, Chair
8.0	Adjour	n	Jason J. Rosenberg, Chair

Note: Provost Glover will address a Metrics Dashboard requested by the Committee to measure progress against Metrics that Matter and Performance Funding Metrics at the Strategic Discussion hour on Friday, December 2<sup>nd</sup>.



## UNIVERSITY OF FLORIDA BOARD OF TRUSTEES COMMITTEE ON EDUCATIONAL POLICY AND STRATEGIC INITIATIVES COMMITTEE MINUTES

September 1, 2016

Emerson Alumni Hall, University of Florida, Gainesville, FL

Time Convened: 10:20 a.m. EDT Time Adjourned: 10:40 a.m. EDT

### 1.0 Verification of Quorum

Jamie Lewis Keith, Vice President, General Counsel and University Secretary, confirmed a quorum with all members present.

### Members present were:

Jason J. Rosenberg, Chair, David L. Brandon, James W. Heavener, Mori Hosseini, Leonard H. Johnson, Rahul Patel, Marsha D. Powers, Steven M. Scott, Nicole LP Stedman, Robert G. Stern, David M. Thomas, Susan D.C. Webster, Anita G. Zucker

#### Others present were:

W. Kent Fuchs, President; Winfred Phillips, Executive Chief of Staff; Joseph Glover, Provost and Senior Vice President for Academic Affairs; Charles Lane, Senior Vice President and Chief Operating Officer; David Guzick, Senior Vice President for Health Affairs and President of UF Health; Jamie Lewis Keith, Vice President, General Counsel and University Secretary; other members of the President's Cabinet; Melissa Orth, Senior Director, Government Relations and Assistant University Secretary; Brigit Dermott, Executive Assistant; Sandy Mitchell, Senior Administrative Assistant; and other members of the University community and members of the media.

## 2.0 Call to Order and Welcome

Committee Chair, Jason J. Rosenberg called the meeting to order at 10:20 a.m. EDT and welcomed all Trustees and everyone in attendance at the meeting.

## 3.0 Review and Approval of Minutes

Committee Chair Rosenberg asked for a motion to approve the minutes of the June 6, 2016; June 9, 2016; and August 30, 2016 committee meetings, which was made by Trustee Brandon and Seconded by Trustee Thomas. The Committee Chair asked for further discussion, after

which he asked for all in favor of the motion and any opposed and the motion was approved unanimously.

#### 4.0 Public Comment

There were no requests for public comment.

Committee Chair Rosenberg turned the Committee's attention to the following Action Items:

#### 5.0 Action Items

## **EP1.** Tenure Upon Hire

Before addressing the Tenure Upon Hire cases, President W. Kent Fuchs responded to a request made at the June 9, 2016 Committee meeting that he review the appropriateness of the Tenure and Promotion policies and procedures of the University and report back to the Committee on his findings. President Fuchs reported that he has experience at three other institutions in the tenure process, has reviewed the key processes and evaluation standards at the University of Florida, and is very satisfied. He noted that UF is unusual in that it also has a post-tenure review process, so that there is ongoing accountability beyond the tenure decision. Every seven years, tenured faculty members are reviewed to ensure that they continue to meet the standards for excellence in teaching and scholarship. President Fuchs noted that he has delegated tenure review and recommendations to the Board to the Provost, in his role as Chief Academic Officer. Trustee Steven Scott noted that Stanford and Duke Universities have two tenure tracks—one for teaching and one for research—and asked if this is something that UF might explore in the future. The members of the Committee thanked the President for the report.

Provost Glover then addressed the five Tenure Upon Hire cases before the Board that the President and Provost recommend to the Committee and the Board for action. He noted that the cases were presented and discussed on the pre-meeting conference call on Tuesday, August 30. They are: Kyle A. Riding, Alina Zare, Bryony C. Bonning, Tanya L. Saunders, and Amy J., Hoffman.

Committee Chair Rosenberg asked for a motion to approve Action Item EP1 for recommendation to the Board for its approval on the Consent Agenda, which was made by Trustee Johnson and Seconded by Trustee Zucker. The Committee Chair asked for further discussion and, hearing none, asked for all in favor of the motion and any opposed and the motion was approved unanimously.

## EP2. University Press of Florida Annual Report 2015-2016

Provost Glover noted that as an Academic Infrastructure Support Organization (AISO) the University Press of Florida must file an annual report with the Chancellor of the Board of Governors that is approved by the Board of Trustees prior to October 31<sup>st</sup> each year. Provost Glover reported that the Press had a very successful year, publishing 211 books and has extended operations into a new area—journal publication. The Press has also modernized its infrastructure, an effort which was aided by a one-time appropriation from the University. Trustee Marsha Powers raised a question regarding the budgeted \$26,000 deficit in FY2017. Provost Glover replied that it reflects an abundance of caution in the budgeting process due to

the unpredictability of book sales, but is not expected to happen; the budget is in effect a level budget. Provost Glover also noted that the Press has launched an imprint, the University of Florida Press, which publishes books and journals under the UF brand, consistent with the practice of premier institutions.

Committee Chair Rosenberg asked for a motion to approve Action Item EP2 for recommendation to the Board for its approval on the Consent Agenda, which was made by Trustee Brandon and Seconded by Trustee Powers. The Committee Chair asked for further discussion and, hearing none, asked for all in favor of the motion and any opposed and the motion was approved unanimously.

## EP3. Performance Funding—Choice Metric #10

Committee Chair Rosenberg asked Provost Glover to address EP3 Performance Funding—Choice Metric #10. Provost Glover noted that at the June 2016 meeting the Board discussed the reasons why UF lost some points in performance funding scoring of its UF Board chosen metric—total research expenditures--even though UF is by far the most accomplished state university in this area. While still among the top three universities and still the recipient of the most total dollars, this caused UF's performance funding rank to be lower than fairly reflects its stature, and caused UF to lose several hundreds of thousands of dollars of performance funding. The Board recognized the unfairness of this result and asked the President and Provost to propose a solution.

Provost Glover explained that the BOG evaluates state universities for performance funding based on 10 metrics, 8 of which are applied to all universities, 1 of which is chosen by the BOG (in the case of UF, faculty awards), and 1 of which—the 10<sup>th</sup> metric—is proposed by the university's Board. The UF Board-chosen metric of total research expenditures is an important metric for the advancement of UF as a premier national public research university, and UF intends to continue to strive to advance against this metric and to track progress. However, the BOG's most recent scoring of UF against AAU peer institutions (in a regime that provides 100 possible points, rather than the prior 50 points), makes this a stretch goal for UF. Meanwhile, other universities' chosen metrics are ones that they know can be easily met.

To remedy the inequity, the University recommended to the Board that it consider proposing to the Board of Governors for approval at its September meeting, that the 10<sup>th</sup> metric for UF be "licenses and options completed with companies commercializing researchers' discoveries." If UF remains in the top 10 for this metric as determined by the Association of University Technology Managers (AUTM), UF should receive a "10" score. If UF were in the top 11-20, UF should receive a "9" score. Provost Glover noted that, while maintaining leadership in this area requires focus and is not easy, UF has consistently been a top performer nationally in this area and most recently (in 2013-14) was ranked 7<sup>th</sup> in the nation.

Provost Glover also noted that while UF would no longer be scored for performance funding under the total research expenditures metric, UF would also propose to report to the BOG and to track progress against this metric as an 11<sup>th</sup> metric that is a recognized stretch goal and important to UF's advancement.

Vice Chair Mori Hosseini noted that it is important to have a comparable standard to other SUS institutions for fairness in funding. He commended UF for keeping research expenditures as an 11<sup>th</sup> metric. President Fuchs noted that the licenses and options metric is one that is hard to achieve and one in which it is important for UF to maintain its leadership position.

It was agreed that the University will develop a format to update the Board regularly on UF's progress under the performance funding and other metrics.

Committee Chair Rosenberg asked for a motion to approve Action Item EP3 for recommendation to the Board for its approval on the Consent Agenda, which was made by Trustee Hosseini and Seconded by Trustee Zucker. The Committee Chair asked for further discussion and, hearing none, asked for all in favor of the motion and any opposed and the motion was approved unanimously.

## EP4. Textbook Compliance Adoption Report

Committee Chair Rosenberg asked Provost Glover to address EP4--the Textbook Adoption Compliance Report.

Provost Glover noted that under a new statutory provision enacted last legislative session (Section 1004.085, Florida Statutes), the Board of Trustees is required to the report to the Board of Governors by September 30 of each year on the University's compliance with policies regarding textbook adoption. He noted that the report prepared for the Board's adoption addresses:

- a) The selection process for general education courses with a wide cost variance and high enrollment courses. It was noted that UF had only one course with a high variance, that is, a variance of \$100 and at least 20%.
- b) Specific initiatives of the institution designed to reduce the costs of textbooks and instructional materials. The report noted that in fall 2016, the University is piloting an ereader program in combination with e-text materials in multiple sections of the IUF 1000 calculus course. In addition, in spring 2016, the University will pilot Ximera in MAC 2311. Ximera is open access instructional materials focused on calculus providing homework and quizzes. This will be available to students at no cost and will replace the current system of WebAssign, which costs \$70 for each student; at present about 2,000 students take calculus each year. If successful, Ximera will replace WebAssign across MAC 2311, MAC 2312, and MAC 2313.
- c) Policies implemented regarding the posting of textbook and instructional materials for at least 95% of all courses and course sections 45 days before the first day of class. UF achieved the goal in 95.3% of course sections (9,817 of 10,302 sections total) and achieved the posting deadline in 92.2% of courses (4,303 of 4,665 total courses) in the fall semester of 2016.

d) The number of courses and course sections that were not able to meet the posting deadline for the previous academic year. Out of 10,302 total sections, 485 sections or 4.7% did not meet the posting deadline and out of 4,665 total courses, 362 courses or 7.8% did not meet the posting deadline.

Committee Chair Rosenberg noted the importance of this issue for students and asked Trustee Webster to comment on the student perspective. Trustee Webster noted that Student Government encourages students to take advantage of the 7% discount available through the UF Bookstore app. Trustee Thomas noted that the Board needs to clarify with the Board of Governors its expectations and accountability related to the statute. Provost Glover noted that upon approval and adoption of the report by the Committee and Board, the report will be submitted to the Board of Governors. The statute was adopted with implementation requirements soon after, and the Board of Governors has been developing guidance while universities are implementing.

Committee Chair Rosenberg asked for a motion to approve Action Item EP4 which was made by Trustee Thomas and Seconded by Trustee Scott for recommendation to the Board for its approval on the Consent Agenda. The Committee Chair asked for further discussion and, hearing none, asked for all in favor of the motion and any opposed and the motion was approved unanimously.

### EP5. University of Florida Regulations Amendment

Committee Chair Rosenberg asked General Counsel Jamie Lewis Keith to address the proposed regulations change. Ms. Keith noted that the only regulations change concerns the adoption of a new regulation that confirms and codifies the University's intended use of the St. Augustine historic properties for education, research and historic preservation—and, activities that raise revenue for support of the University's education, research and historic preservation missions. The public is welcome to visit the historic properties for their educational value and to traverse from one street to the next in the historic district, but they are not open public forums. She noted that this regulation is not a change for UF, but merely confirms the purpose and manner of operations since the University took over operations of these historic properties to advance their preservation and educational value.

Committee Chair Rosenberg asked for a motion to approve Action Item EP5 for recommendation to the Board for its approval on the Consent Agenda, which was made by Trustee Stern and Seconded by Trustee Zucker. The Committee Chair asked for further discussion and, hearing none, asked for all in favor of the motion and any opposed and the motion was approved unanimously.

#### 6.0 Adjourn

After asking for any further discussion and hearing none, Committee Chair Rosenberg asked for a motion to adjourn, which was made by Trustee Stern and a second which was made by Trustee Johnson. With no further discussion desired, the motion was passed unanimously and the University of Florida Committee on Educational Policy and Strategic Initiatives meeting was adjourned at 10:40 a.m. EDT.

## Dr. Daniel P. Ferris – College of Engineering Professor, Department of Biomedical Engineering

Dr. Daniel Ferris earned his B.S. in Mathematics Education from University of Central Florida in 1992, his M.S in Exercise Physiology from the University of Miami in 1994, and a Ph.D. in Human Biodynamics from the University of California Berkeley in 1998. His prior institution is University of Michigan. He is an internationally recognized expert in the area of neural control of human locomotion. Dr. Ferris' laboratory was the first in the world to demonstrate high-density electroencephalography and independent component analysis can provide functional imaging of brain activity during human locomotion. He has published 70 peer-reviewed journal articles and 10 conference papers. He has given 16 invited international presentations and 62 national professional meeting presentations. Dr. Ferris has cultivated an international reputation as a leader in the field of neuromechanics and rehabilitation robotics.

## Dr. Gavin J.P. Naylor – Florida Museum of Natural History Curator, Department of Natural History, Director, Florida Program for Shark Research

Dr. Gavin Naylor earned his B.S. in Zoology from Durham University, England in 1983 and a Ph.D. in Zoology from University of Maryland in 1989. His prior institution is the College of Charleston and Medical University of South Carolina. Dr. Naylor started a research program website called Sharksrays.org, which provides the most up to date Phylogenetic information on these animals together with morphological data from CT scans and new biogeographic and locality records. He has published more than 60 papers on topics ranging from the comparative morphology of shark teeth (research on dental patterning in fossil) to new species descriptions (Rhinobatos whitei), to many whole mitogenomes for the Blacknose Shark. He has heavily impacted the field of molecular evolution and molecular systematics. His taxonomic emphasis has focused on sharks, rays and elasmobranchs generally. His integrative perspective extends to functional anatomy, developmental biology, protein structure and genomics.

## Dr. Lawrence M. Page – Florida Museum of Natural History Curator of Fishes, Department of Natural History

Dr. Lawrence Page received his B.S. in Biology from Illinois State University in 1966, a M.S. in Zoology from the University of Illinois in 1968 and a Ph.D. in Zoology from the University of Illinois in 1972. His prior institution is the University of Illinois. He

is a recognized leader in the field of biodiversity science and bioinformatics. He is a world authority on freshwater fishes and has been the Project Director of the *iDigBio* initiative for the past six years. This project was funded by the National Science Foundation at \$12.5 million for five years and was just renewed for an additional five years for \$15.5 million. He wrote both grant proposals. He has over 179 refereed publications, many in top journals in his field, along with several books.

## Dr. Michael E. Harris – College Liberal Arts and Sciences Professor, Department of Chemistry

Dr. Michael Harris earned his B.S. in Chemistry in 1986 at Florida State University and his Ph.D. in Biochemistry in 1992 from the University of Alabama at Birmingham, followed by a post-doctoral fellowship at Indiana University from 1992 to 1996. His prior institution is Case Western Reserve University School of Medicine. He is highly regarded in the RNA biochemistry community. He also has amassed an impressive number of publications and research grant awards, including several National Institutes Health RO1s AND R21s as well as National Science Foundation grants to support his research efforts. He served as a panel member on several NIH study sections and as a reviewer on a number of NSF panels. He is also highly regarded in the RNA biochemistry community. In more recent research investigations his focus has been on chemotherapeutic targets – areas that are highly aligned with the chemical biology of cancer.

## Dr. Libin Rong – College Liberal Arts and Sciences Associate Professor, Department of Mathematics

Dr. Libin Rong received his B.S. in Mathematics from Fudan University in Shanghai China in 2000, M.S. in Applied Mathematics from Fudan University in Shanghai China in 2003, and Ph.D. in Applied Mathematics from Purdue University in 2007. He had a Post-Doctoral Research Associate appointment in Theoretical Biology and Physics from 2007 through 2009. His prior institution is Oakland University. Dr. Rong's research is currently supported by a National Science Foundation Career Award for 2014-2019. Dr. Rong has more than 40 peer-reviewed publications with more than 2000 citations. His research articles have appeared in a wide variety of top scientific journals. He has given more than 70 talks at conferences, colloquia, and seminars. He has also supervised two Ph.D. graduates at Oakland University and has served on the Ph.D. committees of seven other students outside of Mathematics.

## Dr. Sherrilene Classen – College of Public Health and Health Professions Professor and Chair, Department of Occupational Therapy

Dr. Sherrilene Classen received a Post-Doctoral Fellowship from the University of Florida in 2004, a Master of Public Health with a concentration in Epidemiology from the University of Florida in 2004, a Ph.D. in Occupational Therapy from Nova Southeastern University in 2002, a Diploma in Business Management from the Damlin School of Business Management in 1992, a Bachelor's degree in Occupational Therapy from the University of the Orange Free State in 1984 and an Exercise Teachers Diploma from the Exercise Teachers Association in 1990. Her prior institution is University of Western Ontario. Dr. Classen has been the author or co-author of 100 peer reviewed original articles. She was inducted into the American Occupational Therapy Foundation's Academy of Research in 2012, the highest scholarly honor that the Foundation bestows on scholars. She has also earned the Isabel Briggs Meyer Memorial Research Award as well as The Distinguished Service Award from The Association for Driver Rehabilitation Specialists. In 2015 she was inducted as a Founding Member of the American Occupational Therapy Foundation's Leaders and Legacies Society by the American Occupational Therapy Foundation. She has supervised and mentored many graduate students including doctoral candidates and Postdoctoral Fellows, and masters' students in both public health and occupational therapy.

## Dr. Jinying Zhao - College of Public Health and Health Professions/College of Medicine

## **Professor, Department of Epidemiology**

Dr. Jinying Zhao received her M.D. degree from Zhengzhou University School of Medicine, Zhengzhou, China in 1989, a M.S. in Pathology from Zhengzhou University School of Medicine in 1992, a Ph.D. in Molecular Genetics from Chinese Academy of Medical Sciences, Beijing, China in 1999, and Ph.D. in Statistical Genetics & Gentic Epidemiology from University of Texas Health Science Center at Houston in 2005. Her prior institution is Tulane University. While Dr. Zhao was at Emory University 2006 she won the highly competitive American Heart Association's Elizabeth Barrett-Conner Research Award for Young Investigators. Dr. Zhao is also an expert in analyzing genetic interactions (gene x gene and gene x environment interactions), genetic pathways or networks. Dr. Zhao has submitted over 16 grant applications and secured millions of dollars for researching funding.

She has also been published extensively in her field. She has authored and coauthored over 70 publications.



# UNIVERSITY OF FLORIDA BOARD OF TRUSTEES COMMITTEE ON EDUCATIONAL POLICY AND STRATEGIC INITIATIVES COMMITTEE ACTION ITEM EP2 December 1, 2016

**SUBJECT:** Degree Program Changes

#### **BACKGROUND INFORMATION**

The College of Pharmacy is requesting to decrease the number of required credits by 13 in the pre-professional curriculum for the Doctor of Pharmacy degree (CIP Code 51.2001) from 76-79 credits to 63-66 credits. This reduction in credit hours will allow the pre-pharmacy curriculum to be similar to that of peer institutions, which should allow the UF program to attract more applicants. This reduction in credit hours was approved by the Curriculum Committee and then by the Faculty Senate at their September 22, 2016 meeting.

The Rinker School of Construction Management within the College of Design, Construction and Planning is requesting to modify the common prerequisites for the Bachelor of Science in Construction Management (CIP Code 15.1001). The modification was approved by the Curriculum Committee and then by the Faculty Senate at their September 22, 2016 meeting.

The UF Digital Worlds Institute within the College of the Arts is requesting to modify the common prerequisites for the Bachelor of Arts in Digital Arts and Sciences (CIP Code 50.0102). The existing curriculum is being deleted and is replaced by a new, updated curriculum that incorporates basic math and art practice skills needed for the major and ties current and historical perspectives in history of art. This modification was approved by the Curriculum Committee and then by the Faculty Senate at their October 20, 2016 meeting.

### PROPOSED COMMITTEE ACTION

The Committee on Educational Policy and Strategic Initiatives is asked to approve the Degree Program Changes for the pre-pharmacy curriculum of the Doctor of Pharmacy degree (CIP Code 51.2001), the modifications to the common prerequisites for the Bachelor of Science in Construction Management (CIP Code 15.1001) and the modification of common prerequisites for the Bachelor of Arts in Digital Arts and Sciences (CIP Code 50.0102) for recommendation to

the Board of Trustees for approval on the Consent Agenda, as provided in this Action Item and the materials in the Appendix.

## **ADDITIONAL COMMITTEE CONSIDERATIONS**

Board of Governors approval is required.				
Supporting Documentation Included:	See Appendix.			
Submitted by: Joseph Glover, Provost	t and Senior Vice President for Academic Affairs			
Approved by the University of Florida	Board of Trustees, December 2, 2016			
James W. Heavener, Chair	W. Kent Fuchs, President and Corporate Secretary			



# UNIVERSITY OF FLORIDA BOARD OF TRUSTEES COMMITTEE ON EDUCATIONAL POLICY AND STRATEGIC INITIATIVES COMMITTEE ACTION ITEM EP3 December 1, 2016

**SUBJECT:** Honorary Degree

## **BACKGROUND INFORMATION**

The Honorary Degrees, Distinguished Alumnus Awards and Memorials Committee recommends honorary degrees to the Faculty Senate.

One honorary degree is proposed for Chita Rivera, an American actress, dancer, and singer best known for her roles in musical theatre from the 1950s to present. She is the winner of two Tony Awards as Best Leading Actress in a Musical and received eight more nominations. She was the first Latino American to receive a Kennedy Center Honors award and has received UF's School of Theatre and Dance and its Musical Theatre Program the Linda Wilson Lifetime Achievement Award of Excellence. The honorary degree for Chita Rivera was approved by the Faculty Senate on November 17, 2016 and then by the President on November 28, 2016.

## PROPOSED COMMITTEE ACTION

The Committee on Educational Policy and Strategic Initiatives is asked to approve the Honorary Degree for Chita Rivera for recommendation to the Board of Trustees for its approval on the Consent Agenda.

## SIGNIFICANT POLICY ISSUES FOR COMMITTEE TO CONSIDER

Board of Governors approval is not required.

Supporting Documentation Included: See appendix.

Submitted by: Joseph Glover, Provost and Senior Vice President for Academic Affairs

Approved by the University of Florida Board of Trustees, December 2, 2016.				
James W. Heavener, Chair	W. Kent Fuchs, President and Corporate Secretary			

## **HONORARY DEGREE**

## **CANDIDATE:**

## Chita Rivera

## NOMINATED BY:

Jerry Dickey, Director School of Theatre and Dance College of the Arts University of Florida

## LETTERS OF SUPPORT PROVIDED BY:

Jerry Dickey, Director School of Theatre and Dance College of the Arts University of Florida

David Young, PhD School of Theatre and Dance College of the Arts University of Florida

Charlotte St. Martin, President The Broadway League New York, New York

Stephen Bayless, Executive Director Florida Theatre Conference Pinellas Park, FL

> Lucinda Lavelli, Dean College of the Arts University of Florida



## Call for Nominations

		itor's Name: Jerry Dickey, Director
	Departn	ment: School of Theatre and Dance
		P.O. Box 115900, 214 McGuire Pavilion
		352-273-0501 Fax 352-392-5114
	Email: 1	dickey@arts.ufl edu
	Signatui	re of Nominator: Jerry Dickey
71		The Development of Manager and Manager will consider
		on Honorary Degrees, Distinguished Alumnus Awards and Memorials will consider
mina	mons at i	ts next meeting in March. This form and a complete nomination package should be mailed
the c	committee	e in care of Donna Stricker, President's Office, PO Box 113150 by MARCH 1.
1.		Information:
		ee's Name: Chita Rivera
		on: c/o Merle Frimark Associates
	Busines	s: Address: ATTN Mede Frimark, Mede Frimark Associates, 1133 Brondway # 1027 New York, NY 10010-7986
		Address:
		Home Business 212-819-1133 Fax.
		merle@merlefnmarkpr.com
	1	Distinguished Achievement  Distinguished Service  Honorary Degree: (please check one)  Doctor of Arts Doctor of Commerce Doctor of Pedagogy Doctor of Divinity Doctor of Education Doctor of Fine Arts Doctor of Humane Letters Doctor of Laws Doctor of Technology Doctor of Letters
<ol> <li>3.</li> <li>4.</li> </ol>	Vita or	Please write a brief description of this individual's intellectual and professional achievements and attributes and attach it to this form.  Resume  Please attaché the nominee's vitae, resume or a biographical description.  rting letters or materials  Supporting letters or other materials that will help the committee understand the significance of this nominee's work, his/her contributions, and his/her impact on others can also be attached.



## College of the Arts School of Theatre and Dance

PO Box 115900 Gainesville, FL 32611-5800 352-273-0500 352-392-5114 Fax

February 23, 2016

Rick Yost, Chair Honorary Degrees Committee Office of the President Campus

Dear Professor Yost and Members of the Selection Committee:

It is with great honor that I submit for your consideration a nomination of Chita Rivera for an Honorary Doctorate in Fine Arts. As one of our nation's luminaries in the field of the performing arts, Ms. Rivera is most deserving of our university's highest honor.

Ms. Rivera appeared in her first Broadway musical in 1952 at the age of 17. Within five years, she received universal critical acclaim for her performance as Anita in the now-classic American musical, West Side Story. Since that time, Ms. Rivera has starred in a startling number of Broadway musical and dramatic successes, including: Bye Bye Birdie; Sweet Charity: Born Yesterday; Tennessee Williams' The Rose Tattoo; Bob Fosse's Chicago: Nine; and The Visit, to name but a few.

During the golden age of television variety programs. Rivera was a guest on virtually every popular show, including those hosted by Maurice Chevalier, Judy Garland, Dinah Shore, Gary Moore, Ed Sullivan and Carol Burnett. More recent television appearances include *Will & Grace*. *Pippin* (Showtime), *Kennedy Center Tonight*, *Chita Plus Three* (HBO), and *Live from Wolftrap*.

Such performances have earned her two Tony Awards (and eight other Tony nominations); the John Willis Award for Lifetime Achievement; two Drama Desk Awards (and three other nominations); an Outer Critics Circle Award; and the Drama League's Distinguished Performance Award for *The Visit*. Ms. Rivera was a recipient of the (Fred) Astaire Award for Lifetime Achievement and was the first Hispanic woman ever recognized with the prestigious Kennedy Center Honor in Washington, D.C. She has also received Lifetime Achievement Awards from the National Museum of Dance, the League of Professional Theatre Women, and New York Music Theatre Festival. In 2009, she received the Presidential Medal of Freedom by President Barack Obama.

Ms. Rivera is also noted for her service accomplishments. She has worked with the New York State Health Department and other organizations for AIDS prevention. And she has served as a spokesperson for UNICEF.

In 2004, Ms. Rivera received the Linda Wilson Lifetime Achievement Award for Excellence in Theatre, which was established by the University of Florida School of Theatre and Dance to honor preeminent theatre artists. While on campus to receive this award, Ms. Rivera offered a master class for our students and attended a student performance. She has subsequently been featured in a documentary film produced by two faculty members in the School of Theatre and Dance, Professors Tony Mata and Ralf Remshardt. The film, *Theatre of Rice and Beans*, offers a retrospective of under-documented Latino Theatre in the United States. Ms. Rivera has expressed a willingness to be recognized with an honorary doctorate from our university, should the selection committee approve of the nomination.

The packet of materials accompanying this nomination letter include a narrative biography of Ms. Rivera, chronological listings of her work in the performing arts and awards and honors received, as well as three letters of support. I trust the committee will not hesitate to contact me if additional information is desired.

Thank you in advance for your consideration.

Sincerely,

Jerry Dickey

**Director and Professor** 

Jerry Dickey



College of the Arts
School of Theatre and Dance

P.O. Box 115900 Gainesville, FL 32611-5800 352-273-0500 352-392-5114 Fax

February 17, 2016

University of Florida Committee on Honorary Degrees President's Office P.O. Box 113150 Gainesville, FL 32611-3150

I am pleased to write this letter in support of Chita Rivera receiving an honorary doctorate from the University of Florida. Ms. Rivera made her Broadway debut in *West Side Story*, choreographed by the world-famous Jerome Robbins. She has been an international star on the Broadway and London stage for over 50 years.

Additionally, Ms. Rivera has been a role model for all women in theatre. She has been a spokesperson for UNICEF; in 2009, she received the Presidential Medal of Freedom from President Barack Obama. In 2002, she received the coveted Kennedy Center Medal of Honor in Washington, D.C., the first – and, to date, only – Hispanic person ever to receive this award.

In 2004, Ms. Rivera received the Linda Wilson Lifetime Achievement Award for Excellence in Theatre here in Florida, which was established by the University of Florida School of Theatre and Dance to honor preeminent theatre artists. After receiving this award, Ms. Rivera taught master classes for our students and attended several student performances. She maintains an ongoing professional relationship with our Musical Theatre faculty and students.

I can think of no single theatre personality whose contributions have made such a major impact both in our university and in the industry. Our university's criteria for an honorary degree states that it is given in recognition of eminent achievement in scholarship and creative activity. I am sure that you are aware of Ms. Rivera's accomplishments and awards, which include two Tony Awards (and eight Tony Award nominations), two Drama Desk Awards and an Outer Critics Circle Award for Distinguished Performance.

On Friday, November 6, 2015, *Great Performances* aired nationally on PBS their special *Chita Rivera: A Lot of Livin' to Do*, a retrospective of her extraordinary life and career.

All of the above make her an outstanding candidate for this award.

Sincerely yours,

David Young, Ph.DV

Professor Emeritus, University of Florida School of Theatre and Dance Formerly Producing Director, Kennedy Center/American College Theatre Festival



729 SEVENTH AVENUE T 212-764 1122 5TH FLOOR

F 212-944-2136 NEW YORK, NY 10019 BROADWAYLEAGUE COM

January 13, 2016

CHARLOTTE ST. MARTIN PRESIDENT

BOARD OF GOVERNORS ROBERT E. WANKEL CHAIRMAN LAUREN REID VICE CHAIR OF THE ROAD DAVID RICHARDS SECRETARY/TREASURER NICK SCANDALIOS IMMEDIATE PAST CHAIRMAN

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COUNSEL JEFFREY A HORWITZ ESO BERNARD M. PLUM, ESQ.

ALLAN WILLIAMS BETH WILLIAMS

Jerry Dickey, Director University of Florida College of the Arts School of Theatre and Dance P.O. Box 115900 Gainesville, FL 32611-5800

Dear Mr. Dickey,

It is with great pleasure that we are presenting this letter to support Chita Rivera's sustained achievements and suitability for recognition with an honorary degree. Ms. Rivera is not only an award-winning talented Best Actress in a Musical, she's an artist with a lifetime of achievements both on stage and off.

The sensationally talented performer Chita Rivera has graced the stages of Broadway over the last seven decades - from Guys and Dolls in the early 1950's to her Tony Award-nominated magnificent performance in last season's stunning production of The Visit. She created several iconic roles in the musical theatre one of America's greatest home-grown art forms - including "Anita" in West Side Story (1957) and "Rose" in Bye Bye Birdie (1960).

She has starred or performed in 18 Broadway shows, 5 special Broadway events and most recently represented the theatre when recognized with a prestigious Kennedy Center Honor, She's received 2 Tony Awards (Kiss of the Spider Woman; The Rink) and is one of only two performers to have been nominated for 10 Tony Awards.

An honorary doctorate degree from The School of Theatre and Dance at the University of Florida for this legendary performer would be an appropriate honor for Chita Rivera's lifetime in the theatre spent entertaining audiences and delighting generations of fans.

Sincerely,

Charlotte St. Martin The Broadway League



## Florida Theatre Conference

February 12, 2016

It is my great pleasure to write this letter of support for the nomination of Ms. Chita Rivera for an honorary doctorate degree from the University of Florida. Ms. Rivera is truly a luminary of the Broadway stage and movie screen, her career beginning at the age of seventeen with a role in the 1952 touring production of Call Me Madam and continuing for decades to the present. Her colleagues have acknowledged her artistic genius on the Broadway stage with 2 Tony Awards and an additional 8 Tony Award nominations. Nationally recognized in 2009, she received the Presidential Medal of Freedom from President Barack Obama. She has been recognized with the prestigious Kennedy Center Honor and the Astaire Award for Lifetime Achievement. In 2015 Ms. Rivera was awarded The John Willis Award for Lifetime Achievement in the Theatre by Theatre World.

Ms. Rivera is one of very few artists who have made such an impact on the Arts in the United States as an Actor, Singer, and Dancer on the stage, screen and TV. It is my understanding that in 2004, she received the Linda Wilson Lifetime Achievement Award for Excellence in Theatre, which was established by the University of Florida School of Theatre and Dance to honor preeminent theatre artists where Ms. Rivera has had an ongoing relationship with their musical theatre faculty.

The confirming of an honorary doctorate degree from the University of Florida would not only honor Ms. Rivera but would also recognize The University of Florida as an institution dedicated to the Performing Arts in the United States

Stephen Bayless

Florida Theatre Conference

Stephen D. Baylin

**Executive Director** 

Office phone: 727-544-8915 Cell phone: 727-560-8879

PHONE

WEB



College of the Arts
Office of the Dean

PO Box 115800

Gainesville, FL 32611

Telephone: (352) 392-0207 Fax: (352) 392-3802 www.arts.ufl.edu

October 13, 2016

To whom it may concern:

I have the distinct pleasure of supporting the nomination of Chita Rivera for an honorary doctorate from the University of Florida. Her career and recognitions are consistent with the best of the Gator Nation values and are described in some detail in other supporting material.

A quick review of her biographical information notes Chita Rivera was born January 23, 1933. Her career as an American actress, dancer, and singer best known for her roles in musical theatre has spanned decades beginning in 1950 and continuing to the present. She has won two Tony Awards as Best Leading Actress in a Musical and received eight more nominations. Her most recent nomination was in 2015 for Best Performance by a Leading Actress in a Musical for her Broadway performance in *The Visitor*. She holds the current record for the most individual Tony Award nominations which she shares with Julie Harris.

She has received many awards and she is the first Hispanic woman and the first Latino American to receive a Kennedy Center Honors award (December 2002). She was awarded the Presidential Medal of Freedom in 2009. On November 6, 2015, Great Performances aired nationally on PBS their special "Chita Rivera: A Lot of Livin' To Do," a retrospective on her extraordinary life and career.

The superior accomplishments of her career instigated the University of Florida's School of Theatre and Dance and its Musical Theatre Program to honor her with the Linda Wilson Lifetime Achievement Award for Excellence. She conducted a master class for our students and attended a student performance. UF has maintained a connection with Ms. Rivera through the years and featured her in a documentary film produced by two UF faculty recording the origins of Latino Theatre in the United States entitled "Theatre of Rice and Beans."

Without a doubt Ms. Rivera is a distinguished American artist recognized with its highest awards for her talent consistently expressed across over a half a century on Broadway, in theatre, film and television. My support for the nomination of this artist is boundless.

Sincerely,

Lucinda Lavelli,

Quint Sardi

Dean

## CHITA RIVERA

An accomplished and versatile actress/singer/dancer, Chita Rivera has won two Tony Awards as Best Leading Actress in a Musical and received eight additional Tony nominations for an exceptional 10 Tony nominations. On Friday, November 6, 2015, Great Performances aired their special *Chita Rivera: A Lot of Livin' To Do,* a retrospective of her extraordinary life and career nationally on PBS. She recently starred in the Broadway production of *The Visit,* the final John Kander/Fred Ebb/Terrence McNally musical directed by John Doyle and choreographed by Graciela Daniele (2015) following the acclaimed production at the Williamstown Theatre Festival in the summer of 2014. Chita was awarded The Presidential Medal of Freedom by President Barack Obama on August 12, 2009. She received the coveted Kennedy Center Honor in Washington, DC in December, 2002, and is the first Hispanic woman ever chosen to receive this award. In May, 2013, she was appointed to a special Kennedy Center Honors Advisory Committee.

In 2009, Chita released her first solo studio CD entitled AND NOW I SWING (Yellow Sound label), which pays homage to her stage legacy while also displaying her passion for jazz. From classic theater songs to jazz standards, all tracks featured on this album have received new arrangements recorded by New York's finest musicians, reimagining some of Chita's favorite tunes.

Chita originated her starring role in *The Visit* when it premiered at the Goodman Theatre in Chicago (2001), and again at the Signature Theatre in Arlington, VA (2008). Her more recent stage appearances include starring roles in the Broadway revivals of *The Mystery of Edwin Drood* and *Nine* with Antonio Banderas; the Broadway and touring productions of *The Dancer's Life*, a dazzling new musical celebrating her spectacular career, written by Terrence McNally and directed by Graciela Daniele; *The House of Bernarda Alba* at the Mark Taper Forum in Los Angeles; *Venecia*, a new Argentinean play directed by Arthur Laurents at the George Street Playhouse; Reno Sweeney in *Anything Goes* at Paper Mill Playhouse. She also starred in the London, Las Vegas and Toronto productions of *Chicago-The Musical*.

For her starring role in *Kiss of the Spider Woman* on Broadway, Chita received the 1993 Tony Award as Best Leading Actress in a Musical, as well as the Drama Desk Award for Outstanding Achievement as an Actress in a Musical, the Outer Critics Circle Award as Outstanding Actress in a Musical, the Drama League Award for Distinguished Achievement in Musical Theatre and The Astaire Award honoring outstanding achievement in Broadway Dance. Chita first played the role of the Spider Woman in the Toronto production of the show in 1992, receiving unanimous acclaim. She then repeated her triumph in the fall of 1992 in the London production of *Spider Woman*, which won The Evening Standard Award as Best Musical of the Year. This was followed by the Broadway and touring productions.

Chita's performing aspirations began with ballet training at the age of 11 in her native Washington, DC. Five years later, Chita moved to New York, where she auditioned for legendary choreographer George Balanchine. Balanchine of course recognized Chita's talent and gave her a scholarship to the School of American Ballet, where she began taking classes at the same time as the dancers Edward Villella, Melissa Hayden, Allegra Kent and Maria Tallchief.

As an aspiring 17 year-old ballerina, Chita decided to accompany a friend to an audition for the chorus of *Call Me Madam*. Although she had no serious intention of pursuing a part in the show, Chita was cast as a principal dancer, and choreographed by Jerome Robbins. The ballet world's loss was Broadway's gain — a future legend's theater career was born.

After completing a cross-country tour of Call Me Madam, Chita returned to New York to replace Onna White as a principal dancer in Guys and Dolls. Following Guys and Dolls, Chita joined the cast of the original Broadway company of Can-Can, in which her future co-star, Gwen Verdon, first achieved stardom.

Chita then went Off-Broadway to prove that she could do more than dance, doing so to great acclaim with her amazing performance in Ben Bagley's Shoestring Revue, in which she did the very first Marilyn Monroe impersonation. Her co-stars in *The Shoestring Revue* included Beatrice Arthur and Arte Johnson.

Chita then returned to Broadway as a featured performer in Seventh Heaven, choreographed by Peter Gennaro; and Mr. Wonderful, starring Sammy Davis, Jr.

But it was not until September 26, 1957 that Chita made the transition from accomplished Broadway performer to a toast of the town Broadway star with her electric performance as Anita in the Broadway premiere of *West Side Story*. Chita then took some time off for the birth of her daughter, Lisa. Chita had met and married Lisa's father, dancer Tony Mordente, during the run of *West Side Story*.

Chita then went on to star in the London production of *West Side Story*, which had been postponed until Chita was ready to perform after Lisa's birth. Chita's New York success was repeated in London, and she stayed with the show there for a year. She then returned to Broadway to star as Rosie with Dick Van Dyke in the new musical, *Bye Bye Birdie*, in which she led the show-stopping number "Shriner's Ballet." Her rousing performance earned a Tony nomination as Best Actress. Chita then reprised her role in the London production of *Bye Bye Birdie* at Her Majesty's Theatre, where she first achieved London stardom in *West Side Story*.

Back in the US, her triumphant performance as Jenny in the national tour of *The Threepenny Opera*, was soon followed by the title role in the national tour of Bob Fosse's *Sweet Charity*. Chita was also cast in the film version of *Sweet Charity*, in which she played Nicky opposite Shirley MacLaine. During the filming of

Sweet Charity, Chita fell in love with Los Angeles and decided to make it her home for the next seven years.

But touring theatre successes often took her from home. She played Billie Dawn in *Born Yesterday* and Serafina in *The Rose Tattoo*; she toured opposite John Raitt in *Zorba*; and she extended her range in such productions as *Kiss Me Kate*, opposite Hal Linden, Jacques *Brel....*, and Oliver Hailey's *Father's Day*. All of these productions and other projects had kept Chita away from Broadway for eight years, far too long according to her friends and colleagues Fred Ebb, John Kander, and Bob Fosse. So they lured Chita back to New York to star as Velma Kelly, opposite Gwen Verdon, in their new musical, *Chicago*.

But as soon as she arrived in New York, Chita discovered that *Chicago*'s rehearsals had been postponed because director/choreographer Fosse was ill. It was then that Fred Ebb, who had written a highly-successful nightclub act for Chita in the 60's, went to work on another for her until Fosse recovered. She opened to rave reviews and capacity crowds.

Chicago opened to glorious reviews and Chita and Gwen Verdon were the toast of Broadway (1975). Both received Tony nominations as Best Actress. During the run of Chicago, Chita co-starred with Liza Minnelli for the first time, when Ms. Minnelli subbed for five weeks for an ailing Gwen Verdon.

Chita's fourth and fifth Tony nominations as Best Actress came in the early 80s with her performances opposite Donald O'Connor in *Bring Back Birdie* and then as the Evil Queen in *Merlin*, opposite Doug Henning. But it was not until 1984, when she re-united with Liza Minnelli in John Kander and Fred Ebb's new musical, *The Rink*, that Chita finally won her Tony as Best Actress, along with the Drama Desk Award. Chita returned to Broadway again shortly after *The Rink* in *Jerry's Girls*, co-starring with Leslie Uggams and Dorothy Loudon. In 1988, Chita toured the country (and Japan) in *Can-Can*, co-starring the Radio City Musical Hall Rockettes. In 2003 she received her sixth Tony nomination for *Nine*.

Chita's critically-acclaimed concert dates continued to play to ovations from packed houses around the world in such cities as New York, London, Monte Carlo, Los Angeles, Tokyo, Toronto, Amsterdam, San Francisco, Cannes, Chicago and San Juan among many others.

Chita has been seen regularly on television, beginning with early appearances on every major show emanating from New York including Dinah Shore, Garry Moore, Judy Garland, Carol Burnett and Ed Sullivan. Other television credits include Will & Grace, Pippin (Showtime), Kennedy Center Tonight, Broadway Plays Washington, her own Chita Plus Three (HBO), The New Dick Van Dyke Show and Live From Wolftrap. Chita is also particularly proud of her participation in the National Theater of the Deaf's presentation of The Road to Cordoba.

Chita, who now lives in Rockland County, New York, names her daughter, singer/dancer/choreographer, Lisa Mordente, as her most treasured production.

## Merle Frimark Associates

International Marketing • Public Relations • Artist Representation 212-819-1133 office

merle@merlefrimarkpr.com

@PRMerleF @Chita\_Rivera

080115

## Chita Rivera Chronology

2015

```
Stage
1952
      Call Me Madam (national tour)
1953
       Guys and Dolls (Broadway/national tour)
1954 Can-Can (Broadway)
1955
      Shoestring Revue (dancing chorus)
1955
      Seventh Heaven (Broadway)
1956
       Mr. Wonderful (Broadway)
1957
      West Side Story (Broadway)
1958
      West Side Story (London)
1960
       Bye Bye Birdie (Broadway)
1961
      Bye Bye Birdie (London)
1963
      Prisoner of Zenda (Los Angeles)
1964
      Bajour (Broadway)
1966
      Flower Drum Song (summer stock)
1966
      Threepenny Opera (summer stock/national tour)
1967
      Sweet Charity (national tour)
1969
      Zorba the Greek (national tour)
1969
      1491 (Los Angeles)
1970
      Kiss Me Kate (national tour)
      Jacques Brel is Alive and Well and Living in Paris (national tour)
1970
1970
       Born Yesterday (Philadelphia )
1971
      The Rose Tatoo (national tour)
1975 Chicago (Broadway, national tour)
1981
       Bring Back Birdie (Broadway)
1983
       Merlin (Broadway)
1984
      The Rink (Broadway)
1985
      Chicago (Atlantic City)
1985
      Jerry's Girls (Broadway)
1988
      Can-Can (US national tour/Japan)
      Kiss of the Spider Woman (Toronto, London, Broadway, national tour)
1992
1997
       Chita & All That Jazz (national tour)
1999
       Chicago-The Musical (London, Las Vegas)
2000
       Anything Goes (New Jersey)
2001
       Casper-The Musical (Pittsburgh, Dallas, Kansas City, Atlanta)
2001
       Venecia (New Jersey)
2001
       The Visit (Goodman Theatre, Chicago)
       The House of Bernarda Alba (Los Angeles)
2002
2003
       Nine (Broadway revival)
2005
      Chita Rivera: The Dancer's Life (Broadway)
2006
      Chita Rivera: The Dancer's Life (tour)
2008
      The Visit (Signature Theatre, Arlington, VA)
2009
      Chita Rivera: My Broadway (Concert Tour)
2012
      The Mystery of Edwin Drood (Broadway revival)
2014
      The Visit (Williamstown Theatre Festival summer 2014)
```

The Visit (Broadway, Lyceum Theatre)

## Page 2 Chita/Chronology

1973-74 The New Dick Van Dyke Show

#### Film

1969 Sweet Charity

2002 Chicago

## **Television**

	THE THE DICK TON DYNC CHOW
1977	Chita Plus Three (HBO)
1983	Pippin (Showtime)
1983	Broadway Plays Washington! Kennedy Center Tonight
1983	The Road to Cordoba-National Theatre of the Deaf
1988	Mayflower Madam

2005 Will & Grace

2015 Chita Rivera: A Lot Of Livin' To Do - PBS Great Performances special

#### **Concerts Worldwide**

CHITA: A LEGENDARY CELEBRATION – Concert Tour (ongoing)

#### CHITA RIVERA - MY BROADWAY - Concert Tour

Amsterdam, Cannes, Glasgow, London, Manchester, Monte Carlo, New York, Nice, Rio, Rotterdam, Tokyo, Toronto; Anaheim, Atlanta, Atlantic City, Austin, Baltimore, Boston, Buffalo, Charleston, Chicago, Cleveland, Columbus, Dayton, Detroit, El Paso, Fort Worth, Hartford, Houston, Kansas City, Las Vegas, Los Angeles, Miami, Minneapolis, New Orleans, Oklahoma City, Orange County, Philadelphia, Pittsburgh, Portland, Reno, Richmond, San Francisco, San Juan, Seattle, St Louis, Tampa, Washington DC, West Palm Beach

#### Recordings

"Chita" with Alyn Ainsworth and His Orchestra (1958) Mr. Wonderful (original Broadway cast) West Side Story (original Broadway cast)

Bye Bye Birdie (original Broadway and London cast)

Bajour (original Broadway cast) Chicago (original Broadway cast)

The Rink (original Broadway cast)

Kiss of the Spider Woman (original Broadway cast)

Nine (New Broadway cast recording)

2007 - Legends of Broadway

2009 - Chita Rivera: AND NOW I SWING (Yellow Sound label)

2012 - The Mystery Of Edwin Drood (Broadway revival)

2013 - Chital (1962); And Now I Sing! (1963) - re-release

2015 - THE VISIT (original Broadway cast)

## **CHITA RIVERA**

## **AWARDS / HONORS / NOMINATIONS**

2015 Songbook Hall of Fame Honoree (Indianapolis/Michael Feinstein)

2015 Lifetime Achievement Award -National Museum of Dance, Saratoga Springs, NY

2015 Latina Legend Award – 100 Hispanic Women, 9/17/15

2015 Drama League Distinguished Performance Award

2015 – Theater World - John Willis Award for Lifetime Achievement in the Theater:
Chita Rivera. "The Visit"

2013 - 66<sup>th</sup> John H. Finley Award, presented in recognition of exemplary dedicated service to the City of New York, while enhancing the quality of life of its people.

2013 Legacy Award, Dancers Over 40

2013 Dizzy Feet Foundation Inspiration Award.

Special Advisory Committee Kennedy Center Honors 2013

2013 Elliot Norton Lifetime Achievement Award

2013 Jerome Robbins Award

2012 BroadwayWorld.com Awards - Best Actress in a Touring Production - Musical or Play Chita Rivera - MY BROADWAY - Shubert Theatre.

New York City Mayor's Spotlight Award September 9, 2012

Lifetime Achievement Award 2010 from The League of Professional Theatre Women

Lifetime Achievement Award 2010 from New York Music Theatre Festival.

Presidential Medal of Freedom, presented by President Obama August 12, 2009 at The White House

Julie Harris Lifetime Achievement Award, 2009

The 2009 Faces of Inspiration Award from the Robert Bolden School/P.S. 345 In Brooklyn, New York

Helen Hayes Award, Outstanding Lead Actress, Resident Musical- *The Visit*-April, 2009

2009 MAC Awards nominee

Honorary Doctor of Fine Arts Degree from Niagara University, Buffalo New York "for her long and outstanding contribution to the American musical theatre."

-May, 2007

32/222

## Tony Award nomination Best Actress in a Musical - Chita Rivera: The Dancer's Life - 2006

2006 "Outstanding Mother" Award – sponsored by The National Mother's Day Committee and Ladies Home Journal

San Diego Critics' Circle "Craig Noel" Award for Lead Performance in a Musical (female) – Chita Rivera: The Dancer's Life, Old Globe Theatre -San Diego, 2006

Mayor's Award for Arts & Culture - New York, 2005

Dance Magazine Award -- 2004

Tony Award Nomination, Best Featured Actress in a Musical – NINE – 2003

Drama Desk Award Nomination, Outstanding Featured Actress in a Musical – NINE – 2003

Outer Critics' Circle Award Nomination, Outstanding Actress in a Musical – NINE—2003

TDF/Astaire Lifetime Achievement Award – NINE – 2003

The Women's Project & Productions Exceptional Achievement Award — 2003

Kennedy Center Honor – 2002 – Washington, DC

Sarah Siddons Society Award – THE VISIT – 2002 – Chicago

Ellis Island Medal of Honor - 2000

GEMS Woman of the Year Award - 1999 - Miami

Helen Hayes Award - 1999

Honored by the School of American Ballet (Alumni) - 1995

Mother Hale Award for Caring - 1995

Astaire Award for Achievement in Dance – 1994 — New York

National Hispanic Academy of Media Arts & Sciences (HAMAS) - 1994 "Entertainer of the Year" Award

Honored by The Mayor's Office for Latino Affairs – 1994 – New York

Tony Award, Best Actress in a Musical - KISS OF THE SPIDER WOMAN - 1993

Drama Desk Award. Best Actress in a Musical - SPIDER WOMAN - 1993

Outer Critics Circle Award, Best Actress in a Musical - SPIDER WOMAN - 1993

Drama League Award - SPIDER WOMAN - 1993

Tony Award, Best Actress in a Musical - THE RINK - 1984

Drama Desk Award, Best Actress in a Musical - THE RINK - 1984

## Additional activities: (Past and Present)

Recorded Public Service spots for the New York State Health Department for AIDS prevention.

Honorary Board Member, Julia de Burgos Latino Cultural Center

Active with all AIDS related organizations and benefits

Participated in the Salute to the 500th Anniversary of the Discovery of Puerto Rico with Mayor Dinkins and Governor Rossello of Puerto Rico

Spokeswoman for UNICEF



## 2016 Fall Total Enrollment After Drop/Add (As of 5:00 pm August 26, 2016)

## **Total Students by Gender**

	Students	% Gender
Gender Not Reported	20	0.0%
Men	24,767	45.5%
Women	29,662	54.5%

## **Total Students by Classification**

	Students	% Classification
Undergraduate	37,718	69.3%
Graduate	12,525	23.0%
Professional	4,206	7.7%

## **Total Students by Ethnicity**

	Students	% Ethnicity
American Indian/AL Native	149	0.3%
Asian	3,953	7.3%
Black/African-American	3,192	5.9%
Hispanic/Latino	9,453	17.4%
Native HA/Pacific Islander	240	0.4%
Non-Resident Alien	5,226	9.6%
Race/Ethnicity Unknown	1,695	3.1%
Two or More Races	1,361	2.5%
White	29,180	53.6%

## **Total Students by Residency**

	Students	% Residency
Florida Resident	42,636	78.3%
Non-Florida Resident	11,813	21.7%

## **Total Students by College**

	Students	%College
Agricultural and Life Sciences	5,531	10.2%
Business Administration	6,816	12.5%
Concurrent Degree Program	47	0.1%
Dentistry	431	0.8%
Design, Construction and Planning	1,449	2.7%
Division of Correspondence Study	99	0.2%
Education	1,431	2.6%
Engineering	9,983	18.3%
Health and Human Performance	2,311	4.2%
High School (Dual Enrolled)	209	0.4%
Interdisciplinary Studies	108	0.2%
Journalism and Communications	2,747	5.0%
Levin College of Law	1,072	2.0%
Liberal Arts and Sciences	13,327	24.5%
Medicine	965	1.8%
Nursing	1,074	2.0%
Pharmacy	883	1.6%
Pharmacy Doctor	1,399	2.6%
Physician Assistant Program	120	0.2%
Public Health & Health Professions	2,272	4.2%
The Arts	1,403	2.6%
Veterinary Medicine	772	1.4%

## **Total Students by Age**

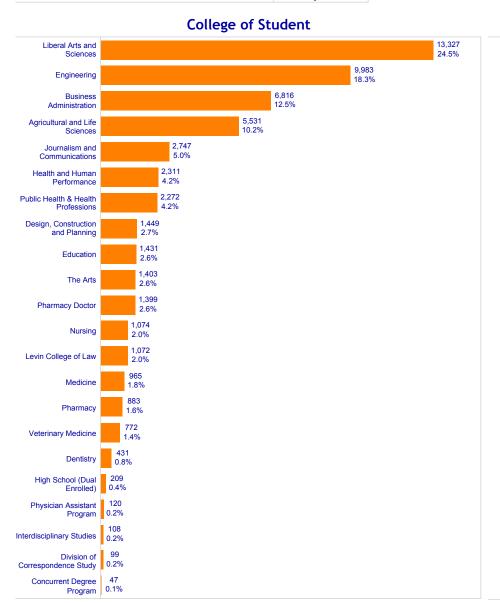
	Students	% Age Range
16 years and under	40	0.1%
17 - 21 years old	26,652	48.9%
22 - 24 years old	13,021	23.9%
25 - 28 years old	6,852	12.6%
29 - 34 years old	4,113	7.6%
35 - 44 years old	2,448	4.5%
45 - 54 years old	974	1.8%
55 - 64 years old	297	0.5%
65 - 74 years old	45	0.1%
75 years and older	7	0.0%
Under 18	240	0.004%

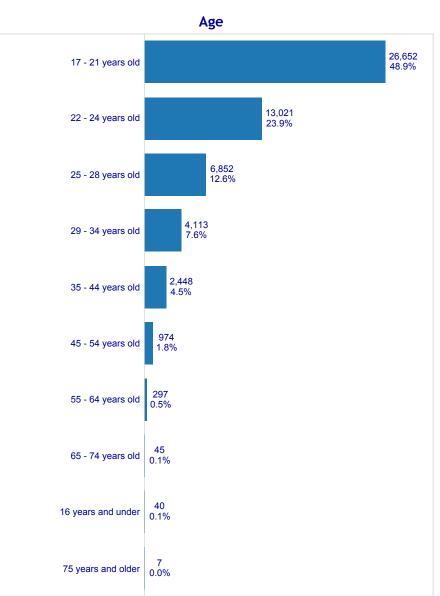


## 2016 Fall Total Enrollment After Drop/Add (As of 5:00 pm August 26, 2016)

**Total Number of Students** 

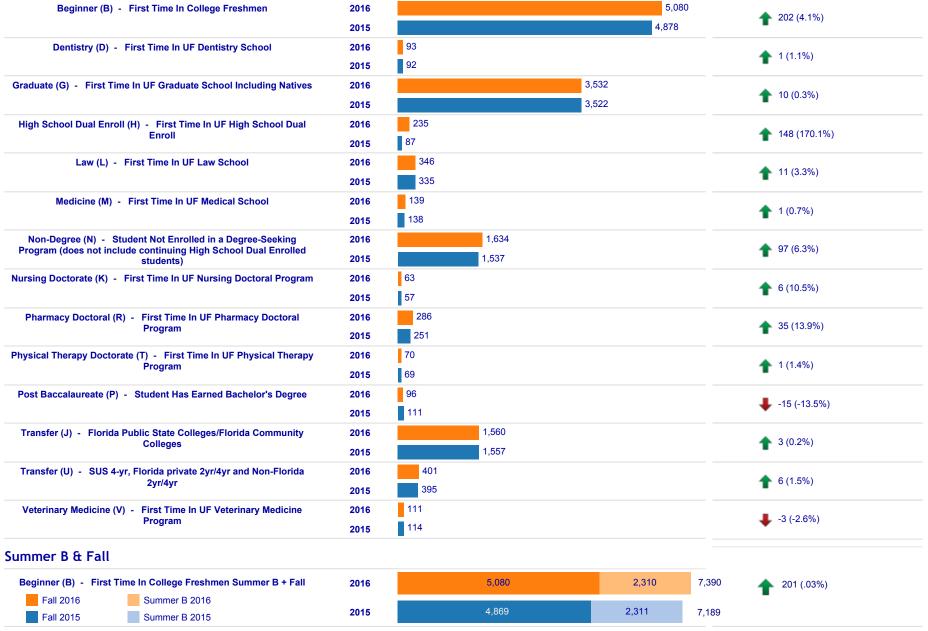
54,449







# 2016 Fall Total Enrollment by New Student Status After Drop/Add (As of 5:00 pm August 26, 2016) vs. 2015 Fall Total Enrollment by New Student Status After Drop/Add (As of 5:00 pm August 28, 2015)





# 2016 Fall UF Online Enrollment After Drop/Add (As of 5:00 pm August 26, 2016)

<b>Total</b>	N	lumba	or of	Ctuc	lonte
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2,245

90

1,444

320

156

37

14.3%

6.9%

1.6%

0.1%

UF Online Students by Gender			UF Online Students by College		
	Students	% Gender		Students	% College
Gender Not Reported	1	0.0%	Agricultural and Life Sciences	139	6.2%
Men	946	42.1%	Business Administration	734	32.7%
			Design, Construction and Planning	21	0.9%
Women	1,298	57.8%	Health and Human Performance	279	12.4%
HE Online Students by Ethnicity			Journalism and Communications	220	9.8%
UF Online Students by Ethnicity			Liberal Arts and Sciences	797	35.5%
	Students	% Ethnicity	Nursing	50	2.2%
American Indian/AL Native	21	0.9%	The Arts	5	0.2%
Asian	86	3.8%	UF Online Students by Age		
Black/African-American	142	6.3%		Students	% Age Range
Hispanic/Latino	392	17.5%	17 - 21 years old	746	33.2%
	•	0.40/	22 - 24 years old	306	13.6%
Native HA/Pacific Islander	9	0.4%	25 - 28 years old	319	14.2%
Non-Resident Alien	15	0.7%	29 - 34 years old	359	16.0%

35 - 44 years old

45 - 54 years old

55 - 64 years old

65 - 74 years old

# **UF Online Students by Level**

Race/Ethnicity Unknown

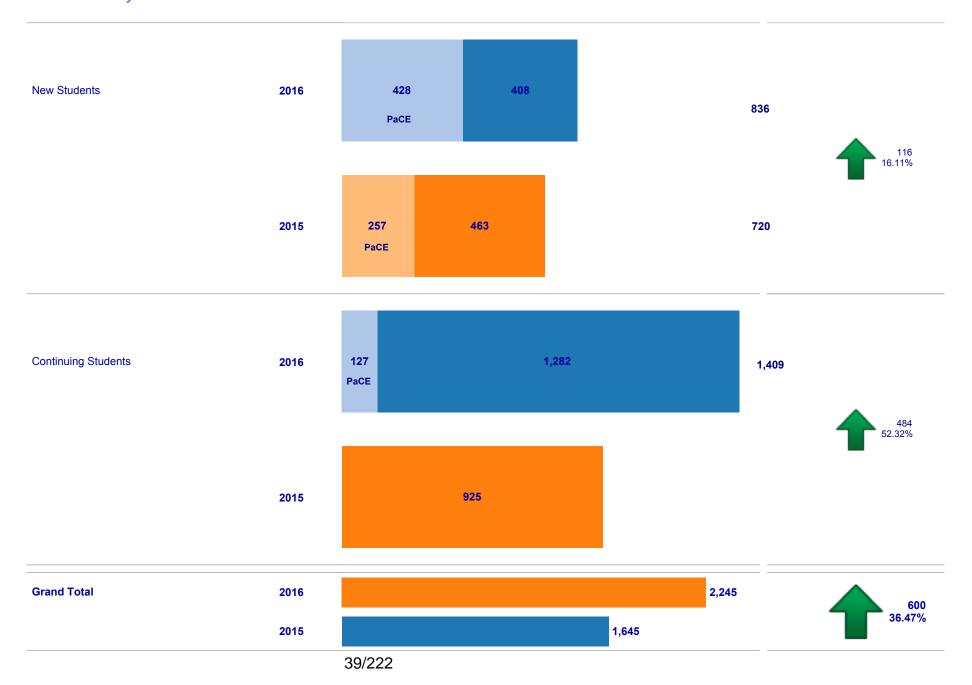
Two or More Races

White

		Lower Level	Upper Level	Post Baccalaureate	Grand Total
New Students	Agricultural and Life Sciences	61	10		71
	Business Administration	135	87		222
	Design, Construction and Planning	18			18
	Health and Human Performance	36	47	1	84
	Journalism and Communications	109	26		135
	Liberal Arts and Sciences	153	134	15	302
	The Arts	4			4
Continuing	Agricultural and Life Sciences	35	33		68
Students	Business Administration	46	466		512
	Design, Construction and Planning	3			3
	Health and Human Performance	31	161	3	195
	Journalism and Communications	23	61	1	85
	Liberal Arts and Sciences	85	368	42	495
	Nursing		34	16	50
	The Arts	1			1
Grand Total		740	1,427	78	2,245

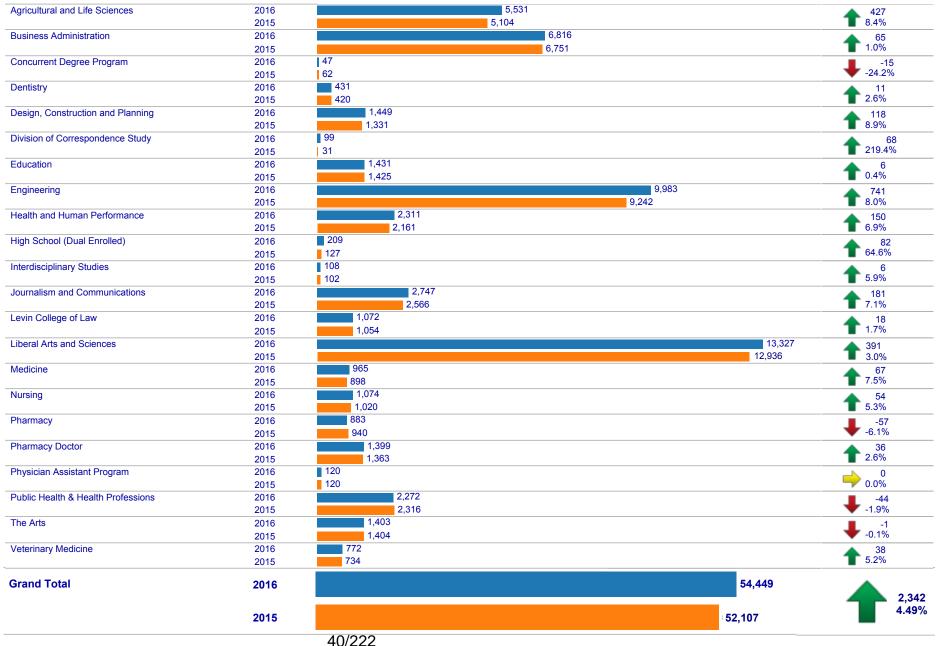
64.3%

# 2016 Fall UF Online Enrollment by College After Drop/Add (As of 5:00 pm August 26, 2016) vs. 2015 Fall UF Online Enrollment by College After Drop/Add (As of 5:00 pm August 28, 2015)



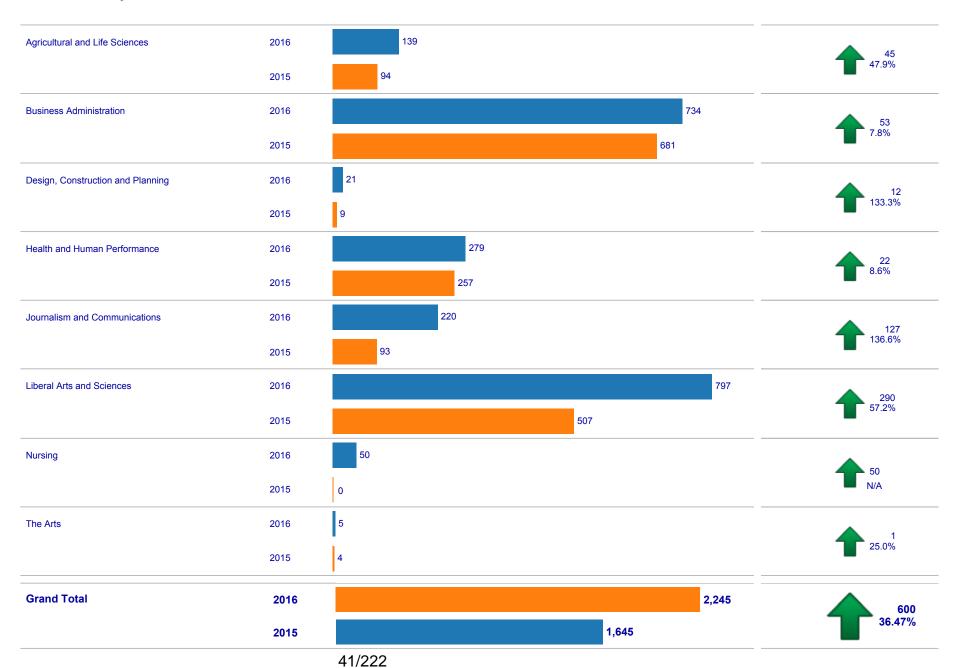


# 2016 Fall Total Enrollment by College After Drop/Add (As of 5:00 pm August 26, 2016) vs. 2015 Fall Total Enrollment by College After Drop/Add (As of 5:00 pm August 28, 2015)



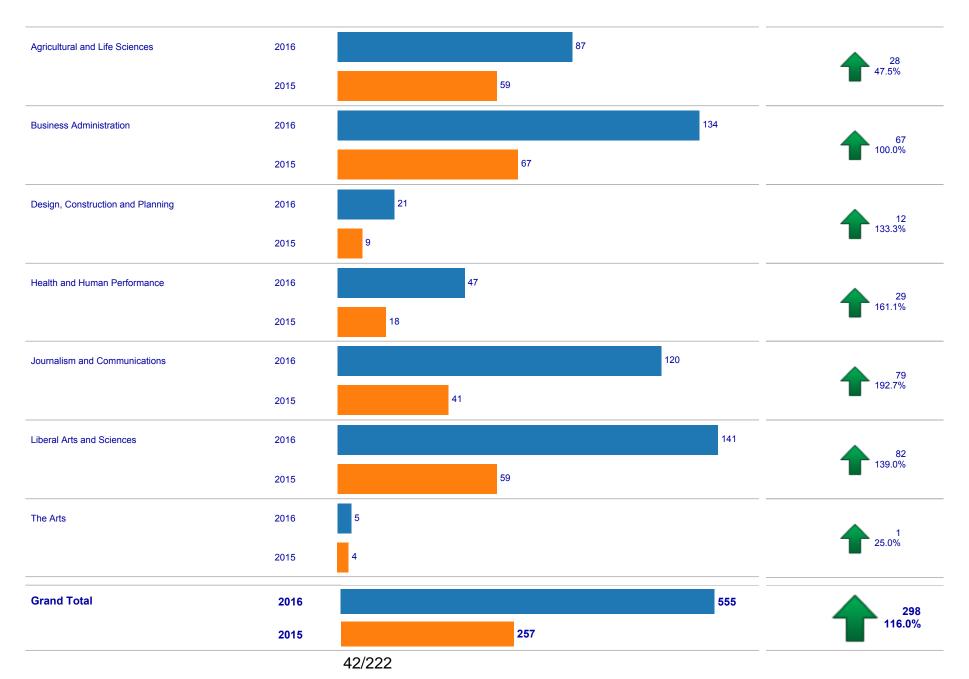


# 2016 Fall UF Online Enrollment by College After Drop/Add (As of 5:00 pm August 26, 2016) vs. 2015 Fall UF Online Enrollment by College After Drop/Add (As of 5:00 pm August 28, 2015)





# 2016 Fall PaCE Enrollment by College After Drop/Add (As of 5:00 pm August 26, 2016) vs. 2015 Fall PaCE Enrollment by College After Drop/Add (As of 5:00 pm August 28, 2015)



# Request to Change the Name of a Center/Institute

Over the life of a Center or Institute the need or interest in changing the name may occur. To request such a name change, complete the information below and forward to the Provost's Office, PO Box 113175. The name change is contingent upon approval from the Provost.

Center/Institute Original Name: Center for Women's Studies and Gender Research

Proposed New Center/Institute Name: Center for Gender, Sexualities, and Women's Studies Research

# Brief Explanation for the Name Change:

This name change adds "sexualities" to the Center's name. This change makes explicit the fact that research and curriculum on sexualities studies (a.k.a. lesbian, gay, bisexual, transgender studies) has been a longstanding and central part of the mission of the Center, since its inception. For example, multiple core faculty members' research programs focus on sexualities studies and the Center houses the academic major track and minor in sexualities studies at UF. This change also aligns our Center with similar top programs nationally and will help us attract more top faculty and undergraduate and graduate students interested in sexualities studies to UF. Moreover, the change positions us well to take advantage of federal funding opportunities in the area of sexualities studies and appeal to donor interest in this area.

6. ml	07/01/2016		13/	chln 3/10/2	വര
Director	Date	Of	ean	Date	
Vice President (as appropriate)	76/16 Date				
Provost Approved	0	Disapproved	Date		
For Provost's Office Use Only					
Copy to requesting Center: (date	e)	_			
Copy to Institutional Research:	(date)				



## Office of the Provost and Senior Vice President

235 Tigert Hall PO Box 113175 Gainesville, FL 32611-3175 352-392-2404 Tel 352-392-8735 Fax

August 10, 2016

#### **MEMORANDUM:**

TO: Jason Jones, Assistant Vice Chancellor, Institutional Research

SUS Department of Academic and Student Affairs

FROM: Joseph Glover, Provost and Senior Vice President for Academic Affairs

Subject: Name Change for Center for Digital Health and Wellness (CDHW)

Enclosed please find the approved request to change the name of the "Center for Digital Health and Wellness (CDHW)" to the "Center for Behavioral Economic Health Research (SBEHR)." The new name will promote research and applications aimed at understanding human behavior change, focusing on unhealthy behaviors involved in prevalent disorders such as addiction, diabetes, HIV/AIDS, and obesity.

Please let me know if additional information is needed to reflect the name change on the list of Centers and Institutes. Thank you.

JG/rjh Attachment

cc: Jalie Tucker, Director, Center for Digital Health and Wellness
Michael B. Reid, Dean, College of Health and Human Performance
Marie Zeglen, Assistant Provost and Director, Institutional Planning & Research

# Request to Change the Name of a Center/Institute

Over the life of a Center or Institute the need or interest in changing the name may occur. To request such a name change, complete the information below and forward to the Provost's Office, PO Box 113175. The name change is contingent upon approval from the Provost.

Center/Institute Original Name: Center for Digital Health and Wellness (CDHW)

Proposed New Center/Institute Name Center for Behavioral Economic Health Research (CBEHR):

Brief Explanation for the Name Change: Attached as page 2.

Director		22-16	James Car	ua Date	, 7/26/2016
Vice President (as appropriate) Provest  Approved	Date	☐ Disapproved	7/29/14 Date		
For Provost's Office Use Only					004
Copy to requesting Center: (date) _					
Copy to Institutional Research: (dat	e)				

# Brief Explanation for the Name Change:

The Center for Digital Health and Wellness (CDHW) was established in 2010 by Jay Bernhardt, Ph.D., then Professor and Chair of the Department of Health Education and Behavior, College of Health and Human Performance (HEB/HHP). Its mission was to improve health and wellbeing through digital health research, training, practice, and partnerships. Before this mission was well developed, Dr. Bernhardt resigned his UF position, and a search for a new Director did not yield a candidate with a national reputation in digital health needed to pursue his vision for the CDHW. It has become clear that a limited focus on digital health applications is insufficient to sustain a University-wide Center and that its purpose requires revision. During the interim. expertise and research activity of HEB and other UF faculty have shifted rapidly in a related but distinct scientific direction that would be better served by a renamed and expanded Center for Behavioral Economic Health Research (CBEHR). Although digital health will remain a key methodological tool, the CBEHR mission will be expanded in line with the NIH roadmap for the Science of Behavior Change (SOBC) envisioned in 2009 and now a Common Fund initiative (https://commonfund.nih.gov/behaviorchange/index). The CBEHR will promote research and applications aimed at understanding human behavior change, focusing on unhealthy behaviors involved in prevalent disorders such as addiction, diabetes, HIV/AIDS, and obesity. Consistent with much modern SOBC research, the CBEHR will be guided by the unifying trans-discipline of behavioral economics (BE), which is robust in health-relevant disciplines (e.g., economics, psychology, public health) and offers powerful concepts and methods for investigating motivation for change, environmental conditions affecting change, and innovative interventions for promoting change. Since 2014, HEB/HHP has been a leader in hiring faculty with BE expertise and funded research programs on substance abuse and HIV/AIDS, starting with Professor, HEB Chair, and Center Director Dr. Jalie Tucker. Additional faculty hires in related content areas are planned (e.g., obesity, physical inactivity), and HEB is vigorously connecting with other UF investigators and community groups with similar interests. CBEHR provides distinctive theoretical perspectives and research foci not available elsewhere on campus while sharing complementary interests with other UF centers (e.g., Center for Alcohol Research and Education, Multidisciplinary Academic-Community Obesity Disparities Research, Southern HIV/AIDS and Alcohol Research Consortium). Renaming the Center and expanding its mission as proposed will provide these diverse stakeholders an intellectual home and opportunities for collaborations and synergies to promote the science of human behavior change and use this knowledge to develop accessible, economical, and evidence-based behavioral interventions.

## Form 1

# Format and Guidelines for Institutes/Centers

# **CSQUID** (Center for Statistics and Quantitative Infectious Diseases

July 1, 2016

The submission and signing of a proposal to initiate a State of Florida institute/center or the establishment of a University institute/center constitutes a commitment by the university(ies) to ensure that the institute/center's activities support the stated mission(s) and goals of the institution(s).

University of Florida	10/20/16
University Submitting Proposal	President Date
UF Center	De 10-12-16
Type of Institute/Center	Senior vice President Date
	JA 9.20-14
Proposed Implementation Date	Vice President for Research Date
	m/soun 122/16
26	ML Good WD 8/24/16
Associated Discipline (2-digit CIP)	Dean of School or College Date
Low M. Longe , 2 . 8/16/16	Thichael Wolfee 10/31/16
Proposed Institute/Center Date Director (if known)	Vice President for Finance, Date Administration, and Planning (as appropriate)
	Other President(s)/ Date

#### Mission:

# Institute/Center Data

	D	irectory Informatio	ll
I/C Name:	Center fo	r Statistics & Quantita	tive Infections Diseases
I/C Code:		I IIIIIversiiv:	ersity of I/C Type:
I/C Director:		Ira M. Longini Jr.	Discipline(s) (2-Digit CIPs):
	University of Florida P O Box 100009 Gainesville, Florida		
I/C Telephone:	352-273-6711	I/C E-Mail Address:	ilongini@ufl.edu
I/C SUNCOM:		I/C Web Site Address:	http://csquid.org
I/C FAX:	352-294-1930	Affiliated Universities:	University of Washington; Fred Hutchinson Concer Research Cente

# Mission and Areas of Focus

# Mission Statement: (No more than 120 words)

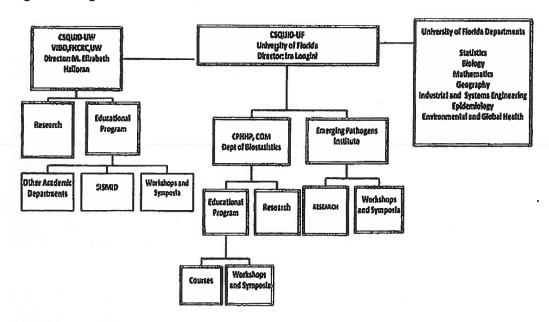
The mission of the Center for Statistics and Quantitative Infectious Diseases, University of Florida, (CSQUID-UF) is to analyze and control infectious disease transmission. Our goal is to establish a vibrant Center for statistical and mathematical analysis of infectious disease transmission and control, with a focus on vaccines. The CSQUID will be based at the Colleges of Public Health and Health Professions and Medicine, and the Emerging Pathogens Institute, University of Florida and the Vaccine and Infectious Disease Division, Fred Hutchinson Cancer Research Center in Seattle. The research will involve statistical and mathematical models for infectious disease transmission, pathogenesis, evolution, immunology, and interventions in communities. The CSQUID will work on influenza, dengue, Zika, Ebola, cholera, typhoid, malaria, and many other infectious disease threats. The Center will also deal with the analysis and control of public health infectious disease threats in the State of Florida, the US, and internationally.

**Key Terms:** 

## **Administrative Structure:**

The CSQUID will have a federated structure both at the UF and Fred Hutchinson Cancer Research Center (FHCRC) and the University of Washington (UW) in Seattle. It will be under the directorship of Dr. Longini (CSQUID-UF) and Dr. Halloran (CSQUID\_UW) (see organizational chart in Figure 1).

Figure 1: Organization chart for CSQUID



Vaccine and Infectious Disease Division (VIDD)
Fred Hutchinson Concer Research Center (FHCRC)
University of Washington (UW)
Summer Institute Statistics and Modeling of Infectious Diseases (SISMID)
College of Public Health and Health Professions (CPHHP)
College of Medicine (COM)
Center for Statistics and Quantitative Infectious Diseases (CSQUID)

As shown in Figure 1, the Center will be located in both Gainesville and Seattle. Dr. Longini will direct the UF component of the Center and Dr. Halloran the component in Seattle. The Seattle Center all contains the Center for Inference and Dynamics for Infectious Diseases (CIDID). Part of the structure of the Center will be integrated into the EPI, and the CPHHP and COM.

#### Mission and Goals:

#### Mission:

The mission of the CSQUID is to analyze and control infectious disease transmission on a local and global scale. The focus of our research is on the prevention and intervention in infectious disease of global health importance, as well as emerging infectious diseases.

# The goals for the research are:

- To use multidisciplinary approaches to develop, validate, and implement mathematical and statistical models for the transmission and within host dynamics of naturally occurring infectious diseases and new emerging infectious disease threats, and to use the epidemic mathematical and statistical models to evaluate the effectiveness of interventions, particularly vaccination.
- > To integrate methods of computational biology, such as viral phylodynamics and other genomic approaches, to understand the dynamics, transmission and evolution of pathogens, to understand the results of interventions, and to better plan future interventions.
- > To establish an active seminar series, Visitors Program, symposia, and workshops.
- > To generate financial support for research and training in quantilative methods for infectious diseases.

# The goals of the education, training and mentoring of CSQUID-UF and -UW are:

- > To hold an annual Summer Institute in Statistics and Modeling of Infectious Diseases at the University of Washington
- To develop new graduate and undergraduate curriculum and integrate existing curriculum at the University of Florida in modeling infectious diseases and statistical methods for analyzing infectious disease data.
- > To recruit and to nurture junior faculty, including future leaders

## The goals of the service of CSQUID-UF are:

- To build an active interaction with public health professionals and decision-makers and apply the research to solving important public health problems
- To use the quantitative methods to aid in important policy-decisions and allocation of resources.
- Support the analysis and control of infectious disease threats in the State of Forida, the US and Internationally.

# Space:

Space in Dauer Hall, eleven offices, has been allocated to Dr. Ira Longini for CSQUID-UF. Thus, the Center will be in the heart of the UF campus. This space is under the jurisdiction of the College of PHHP. The central location is ideal for bringing together people from both the main and health sciences parts of the campus. In addition, CSQUID-UF will have five offices and cubicles for postdoc, Ph.D. students and staff in the bioinformatics wing of the Emerging Pathogens Institute. Finally, the CSQUID-UF will have one office in the new Clinical and Translational Research Building in the Department of Biostatistics space.

# **Funding:**

The activities of the Center will be largely funded from the grants and contracts of the participating faculty. The Center will receive a 7.5% portion of the indirect costs from these grants and contracts. This 7.5% can be further split with the EPI in the case of substantial participation of EPI investigators. The exact percentage of the split will be decided on a case by case basis. The indirect costs assigned to CSQUID-UF will be used exclusively to support UF faculty, staff and students associated with the UF branch of CSQUID-UF (see Appendix I).

The EPI is providing the following funding commitments to CSQUID-UF member faculty to aid in its establishment, and expects to invest over \$1.1 million after three years.

EPI Commitments to CSQUID	 earch Start- Package	Ar	nnual Salary Support	Notes
Ira Longini	\$ 100,000	\$	65,098	10% of salary plus admin. supplement
Juliet Pulliam	60,000		109,648	Fully support salary for up to two years
Yang Yang	60,000			
Eban Kenah	60,000			
Song Liang	40,000		106,260	75% of salary for three years
Burt Singer			13,583	55% of salary
Program Assistant - Newsome			69,400	Fully support for one year.
High Performance Computing				
Center	100,000			
	\$ 420,000	\$	363,988	

The center will request some administrative funding from the relevant VP.

# **Proposed Activities:**

# Research components

The Center will bring together theoreticians and empirical scientists to conduct innovative methodologic and applied research related to scientific and public health aspects of infectious diseases, from proteins to populations. The research areas will include infectious diseases in human, animal, and plant populations. The research will focus on prevention, intervention, public health preparedness, and disease ecology in infectious diseases of global health importance, as well as emerging infectious diseases. The CSQUID will integrate three main quantitative components; 1) novel methods for evaluating field interventions against infectious diseases to understand population- as well as individual-level effects; 2) mathematical and computer simulation models of interventions; 3) computational biology and bioinformatic approaches for discovery-based research, such as the design of better vaccines and other prevention or treatment options. These three areas overlap both scientifically and with respect to the quantitative methods. Much research related to these areas is already being actively Pursued at the University of Florida. We provide an overview of the general areas and give examples of some the research being conducted.

I. Statistical and Epidemiologic Methods

This broad area of research is to better understand the natural history and transmission and to plan and to evaluate interventions for infectious diseases at the population level. This includes infectious diseases in human populations, animal populations, plant populations, the infectious agents, and relevant vector populations. The research includes novel methods for evaluating both the protective effects of vaccines and other interventions, as well as the indirect, total and overall effects in populations. This work also includes methods for evaluating correlates of protection, and analysis of genetic and molecular epidemiologic data from field studies to analyze transmission and selective pressure.

II. Mathematical Modeling

The research in mathematical modeling includes, among other things, dynamic evaluation of intervention strategies, stochastic and deterministic simulation models, network theory of contact structure, within host dynamics, and geographic spread of infectious agents. One area of the mathematical modeling would be development of modeling projections as key components to strengthen grant and contract proposals for intervention research. CSQUID will also promote development of mathematical and statistical methods for studying diseases in aquatic animals.

III. Computational Biology, Genomics

Research is becoming increasingly discovery rather than hypothesis driven. This area includes design and analysis of experiments for understanding the immune response, immune memory and pathogenesis with the goal of designing better vaccines, as well as within host dynamics of infections. New methods such as gene expression array data, flow cytometry, proteomics, and genomics are being used to study these mechanisms, producing new forms of data that require novel quantitative methods for their analysis. These forms of data are not only part of basic research but are increasingly included in field studies, so that methods to analyze such data in population-based studies are also required.

In addition, we plan to establish methods for the integration of agent phylodynamics with infectious transmission analysis.

Education, training, and mentoring

Graduate and undergraduate students from many different degree programs can participate in the research and training of the Center. The main aspects of the education and training plan are (1) Summer Institute in Statistics and Modeling in Infectious Diseases; (2) Development of new graduate curriculum, (3) Development of undergraduate programs (4) Pre- and postdoctoral training positions.

# Summer Institute in Statistics and Modeling in Infectious Diseases (SISMID)

The Summer Institute is entering its 8th year of operation, http://www.biostat.washington.edu/suminst/sismid. This institute fulfills both the important function of educating the next generation of researchers and outreach to public health professionals and decision-makers, since people from around the world and from varied backgrounds can come to participate in the institute. It serves as a catalyst for further research activities and collaborations in the future. It solidifies the national and international reputation of the Center. We consider it one of our most important long-term projects.

# Pre- and postdoctoral training

Most of the Affiliated Faculty has pre- and/or postdoctoral trainees in their research programs. The Center will promote and coordinate further funding opportunities for trainees.

# Workshops:

CSQUID-UF will seek funding for workshops and partner with others to develop workshops and symposia. For example the Center help put on a recent workshop on "Survival Analysis and Phylogenetics in Infectious Disease Epidemiology," attended by 40 researchers from the US, Europe and the UF. Further information on meeting and workshops can be found at the joint Center website <a href="http://www.cidid.org/">http://www.cidid.org/</a>

# Seminar and Joint Meetings:

CSQUID-UF organizes and runs a monthly series of teleconferences and seminars jointly with CSQUID-UW and other groups on important infectious disease topics and planning sessions during infectious disease national and international emergencies. A list of recent activities is given below:

Date	Speaker	Subject
Tuesday 10/6/15	Ira Longini & Natalie Dean	Ebola vaccine trial interim analysis
Tuesday 10/27/15	Tom Hladish	Dengue modeling
Tuesday 11/10/15	Ya Meng	Dengue vaccine efficacy
Tuesday 11/24/15	Samson Ghebremariam	Modeling Framework and Analysis of Dengue Cohort Data in Nicaragua
Tuesday 12/8/15	Burton Singer	Malaria co-infection - analytical opportunities
Tuesday 1/12/16	Xueying Tang	Spatio-temporal modeling for transmission of multiple pathogens applied to hand, foot, and mouth disease in China

Tuesday 1/26/16	Eben Kenah	Algorithms linking phylogenetic and transmission trees
Tuesday 2/16/16	Ira Longini & Diana Rojas	Zika
Tuesday 3/15/16	Diana Rojas & Natalie Dean	Zika pregnancy cohort study design
Tuesday 3/29/16	Greg Glass	A Couple of Infectious Disease Problems
Tuesday 4/12/16	Derek Cummings	Reconstructing chains of transmission of influenza in schools using proximity detecting motes, interview and deep sequencing data
Tuesday 5/10/16	Natalie Dean	Journal Club - Microcephaly retrospective analyses
Tuesday 6/7/16	Jon Sugimoto	Journal Club - Reconstructing transmission trees for communicable diseases using densely sampled genetic data
Tuesday 6/28/16	Yang Yang	Journal Club - Power law models for infectious disease spread
Tuesday 7/19/16	Song Llang	Journal Club - Causal inference methods to study nonrandomized interventions
Tuesday 8/9/16	Laura Matrajt	Journal Club - Countering Zika in Latin America

# Service components:

**Future Directions and Sustainability:** 

The Center will actively seek funding for research and training related to its mission and for infrastructure support. It will serve as a focal point to draw together interdisciplinary groups to apply for funding from federal, state or other sources. A goal of the Center is to enhance endowment to the University for Center-related activities.

# Synergy between the two centers:

The federated structure of the CSQUID-UF and CSQUID-UW will allow for a much stronger research and educational program than would exist if the centers were separate. Although both centers bring nearly the full complement of capacity to carry out the mission, separately, the UF provides a very strong overall research and educational capacity, while the Hutch/UW provides exceptional strength in immunology and vaccinology. In addition, the Summer Institute in Statistics and Modeling of Infectious Diseases is at the UW. The UF includes the Emerging Pathogens Institute which has ample capacity to carry out infectious disease studies, both in field and the laboratory.

# Appendix I

# **UF CSQUID members**

# **Faculty**

Ira Longini, Professor: Department of Biostatistics

Yang Yang, Associate Professor: Department of Biostatistics

Eben Kenah, Assistant Professor: Department of Biostatistics

Song Liang, Associate Professor: Department of Environmental and Global Health

Nikolay Bliznyuk, Assistant Professor: Department of Statistics

M. Elizabeth Halloran, Courtesy Professor: Department of Biostatistics

Burton Singer, Adjunct Professor: Emerging Pathogens Institute

Thomas Haldish, Assistant Research Scientist: Department of Biology

Derek Cummings, Professor, Department of Biology

# **Postdoctoral Fellows**

Natalie Dean: Department of Biostatistics

**Tim Tsang: Department of Biostatistics** 

# Ph. D. Students

Diana Rojas: Department of Epidemiology

Yushuf Sharker, Department of Epidemiology

Hasibul Hasan, Department of Biostatistics

Yanan Huo, Department of Biostatistics

Form 3

I/C Code:		I/C Name:	Center for St	tatistics & Qua	ntitative Infecti	ous Diseases	
Prepared By:	Angela Newsome- Res Admin II	Date:	10/11/2016	Telephone:	352-29	4-1937	
Estimated Expenditures for the Institute/Center		FISCAL	YEAR:	Tuni se	2017		
		Budgeta	ry Unit:*		3601		
		SUS Appropriated Funds	Contracts and Grants	Fees for Services	Private & Other (Specify)	Total	
Salaries & Benefits	Faculty, TEAMS, & USPS		240,026			240,026	
Other	Housestaff						
Personal	Graduate Assistants		60,417			60,417	
Services	Other						
Expenses			40,000			40,000	
Opera	ting Capital Outlay		7				
To	tal Expenditures		340,433			340,433	
Pos	itions and Rate	SUS Appropriated Funds	Contracts and Grants	Fees for Services	Private & Other (Specify)	Total	
	aculty Positions FE in Personyears)		1.50			1.50	
	S and USPS Positions FE in Personyears)		0.10	2		0.10	
	Total Positions TE in Personyears)		1.60			1.60	
	nm of Salary Rates nese <u>Faculty</u> Positions		150,141			150,14	
	Salary Rates for These IS and USPS Positions		48,213			48,21	
	of Salary Rates for EAMS, and USPS Positions		198,354			198,35	

<sup>\*</sup> Budgetary Unit: Specify E&G, IFAS, or UF-HSC

# Projected Space Requirements (in square feet)

Projected Space Required by Source	Office	Laboratory	Conference Rooms	Other
From Existing Inventory	3500 square Ft	NA	552	
Rented	NA	NA	NA	NA
New Construction	NA			

Indirect Cost Return for Proposed Center

The indirect cost return for a center in a college is subtracted from that received by the college. This is because all indirect costs are now returned to the colleges, minus costs of running central programs. This form is to establish what percentage (7.5% maximum), if any, the proposed center or institute will receive in indirect cost return.

# INDIRECT COST ASSIGNMENT

moren

Date: August 16, 2016					
Institute or Center Name: C	Center for Statistic	cal and Q	Quantitative Infection	ıs Disea	ses
College: College of Public	Health and Health	h Profess	sions and College of	Medicii	ne
Indirect Cost Return:	YES NO	<u>X</u> %I	Return (max 7.5%)_	7.5	_%
Dean's Agreement: (Use separate form for each co	ollege)				

Dean's signature- College of Public Health and Health Professions

EDC/cl

Form In Indirect Cost Return for Proposed Center

For UF Internal Use Only

The indirect cost return for a center in a college is subtracted from that received by the college. This is because all indirect costs are now returned to the colleges, minus costs of running central programs. This form is to establish what percentage (7.5% maximum), if any, the proposed center or institute will receive in indirect cost return.

# INDIRECT COST ASSIGNMENT

Date: August 16, 2016

Institute or Center Name: Center for Statistical and Quantitative Infectious Diseases

College: College of Public Health and Health Professions and College of Medicine

Indirect Cost Return:

YES X % Return (max 7.5%) 7.5 % NO\_\_\_\_\_

Dean's Agreement:

(Use separate form for each college)

EDC/cl

# Format and Guidelines for Institutes/Centers

Cover Sheet for a State of Florida or University Institute/Center Proposal

# (SHARC Center for Translational HIV Research)

# (January 2017)

The submission and signing of proposal to initiate the establishment of a University institute/center constitutes a commitment by the University to ensure that the institute/center's activities support the stated mission and goals of the institution.

University of Florida	1 /2-26-16
University Submitting Proposal	President (Dr. W. Kent Fuchs) Date
	Provost and Sentor Vice President, Academic Affairs (Joseph Glover, PhD)  Date
University Institute/Center	Sellent while
Typa of Institute/Center	Senior VP, Health Affairs & President, UF Health (David S. Guzick, MD, PhD) Date
January 2017	10/18/14
Proposed Implementation Date	Vice President for Research Date (David P. Norton, PhD)
51	nuroun 10/4/16
Associated Discipline (2-digit CIP)	Dean, College of Public Health and Health Professions (Michael G. Perri, PhD, ABPP) Date
Rede	ML Good ws ro/6/16  Dean, College of Medicine Date
Proposed Institute/Center Date Director (Robert Cook, MD, MPH)	Dean, College of Medicine Date (Michael L. Good, MD)
	Wice President and CFO Date (Michael V. McKee)

# For UF Internal Use Only

The indirect cost return for a center in a college is subtracted from that received by the college. This is because all indirect costs are now returned to the colleges, minus costs of running central programs. This form is to establish what percentage (7.5% maximum), if any, the proposed center or institute will receive in indirect cost return.

# INDIRECT COST ASSIGNMENT

Date: September 28, 2016

Institute or Center Name: Southern HIV/AIDS Research Center (SHARC)

College: College of Public Health and Health Professions

College of Medicine

Indirect Cost Return: YES \_X \_\_ Return max 7.5%

Dean agreement:

Michael G. Perri, PhD, ABPP

Dean, College of Public Health and Health

Professions

Michael L. Good, MD Dean, College of Medicine

EDC/cl

# Form 2

# Institute/Center Data

	I	Directory Information	1	
I/C Name:		SHARC (Southern HIV/AID	S Research Cer	nter)
I/C Code:		University: Universi	ty of Florida	I/C Type:
I/C Director:	Ro	obert L Cook, MD, MPH		Discipline(s) (2-Digit CIPs):
I/C Address:	2004 Mowry Road. UF, or PO Box 100231 Gainesville, FL. 32610	CTRB 4232		
I/C Telephone:	352-273-5869	I/C E-Mail Address:		cookri@ufl.edu
VIC CUDICONS		I/C Web Site Address:	100000	
I/C SUNCOM:		De Web Bite Address.	<u> </u>	.sharc-research.org

# Mission and Areas of Focus

Mission
Statement:
(No more than 120 infection in the state of Florida. To accomplish this mission, the SHARC Center will foster translational, interdisciplinary research by providing research infrastructure, training, and service.

HIV, AIDS, research, alcohol, mental health, substance use, polysubstance

Key Terms:

# Form 3

I/C Code: Prepared By:  Estimated		I/C Name:	Southern	HIV/AIDS Re	HIV/AIDS Research Center (SHARC)		
		Date:	6/11/2016	Telephone:	352-2	73-5869	
		FISCAL	YEAR:		2015-2016		
		Budgetary Unit:*		UF-HSC			
Expenditures for the Institute/Center		SUS Appropriated Funds	Contracts and Grants	Fees for Services	Other (*)	Total	
Salaries & Benefits	Faculty, TEAMS, & USPS		79,473		116,551	196,024	
Other	Housestaff	1					
Personal	Graduate Assistants						
Services	Other		27,527		22,000	49,527	
E	expenses		100,000		18,000	36,000	
Operating	g Capital Outlay						
Total	Expenditures		207,000		156,551	363,551	

Positions and Rate	SUS Appropriated Funds	Contracts and Grants	Fees for Services	Private & Other (Specify)	Total
Faculty Positions (FTE in Personyears)		0.25		0.00	0.25
TEAMS and USPS Positions (FTE in Personyears)		0.36		1.64	2.00
Total Positions (FTE in Personyears)		0.61		1.64	2.25
Sum of Salary Rates for These <u>Faculty</u> Positions		53,022		0	53,022
Sum of Salary Rates for These TEAMS and USPS Positions		26,451		116,551	143,002
Sum of Salary Rates for Faculty, TEAMS, and USPS Positions		79,473		116,551	196,024

\*Budgetary Unit: Specify E&G, IFAS, or UF-HSC \*Other; Start-up, Dept. IDC Return



Proposal to create the SHARC Center for Translational HIV Research at the University of Florida.

Robert L. Cook, MD, MPH
Professor of Epidemiology and Medicine
University of Florida, Gainesville

June 30, 2016

Introduction. We propose to create the SHARC Center for Translational HIV Research at the University of Florida. The SHARC Center will formalize an ongoing research and training environment that brings together faculty and students from multiple colleges, enhances collaborations with other universities and public health agencies, and works towards a common mission. The SHARC Center will build upon existing research and educational programs initiated with \$5 million in funding support (2009-2014) from the National Institute of Alcohol Abuse and Alcoholism (NIAAA) to create the Southern HIV Alcohol Research Consortium (SHARC). SHARC is one of five NIH-supported HIV/alcohol research consortia that also include Brown University, Yale, Johns Hopkins, and Boston University. A non-competitive renewal requesting \$7.8 million for 2016-2021 is currently under review at NIH and this funding will provide core support for faculty and staff working on SHARC.

SHARC Center designation at the University of Florida will provide additional structure and resources that will provide enhanced visibility for our multidisciplinary research and training programs, and demonstrate our diversity in background and discipline. The Center will show case our high-quality research, enhance faculty recognition, support growth in research and scholarship, increase interactions with community members, and provide opportunities to collaborate with the entrepreneurial community. SHARC is already providing resources to researchers and trainees, and we have ongoing collaborative relationships with other departments, Centers, and Institutes at the University of Florida. Our current center request builds upon a unique opportunity, due to our expected 5-year NIH funding renewal, our demonstrated growth in research and mentoring activity, and our existing collaborative network that bridges academia, public health, and the community.

# A. Mission and Goals

The mission of the SHARC is to improve health outcomes and reduce HIV transmission among the diverse range of populations affected by alcohol and drug abuse, mental health, and HIV infection. Our focus is on persons living in the State of Florida, which has the highest rate of new infections in the U.S., and a very broad population diversity. To accomplish this mission, the SHARC Center will foster translational, interdisciplinary research by providing research infrastructure, training, and service.

#### Research Goals:

- 1. Conduct outstanding research, as evidenced by obtaining peer-reviewed grant funding, publishing work in high-impact journals, and positive feedback from a range of stakeholders including affected populations.
- 2. Translate research findings into clinical and public health practice, as evidenced by integration of effective interventions into routine public health and clinical settings.
- 3. Increase research partnerships across disciplines, and across academia, public health, and industry.

# Teaching goals:

I. Increase research knowledge, skills, experience, and opportunities for a range of trainees, including undergraduate, professional, graduate, and post-graduate.

- 2. Increase the diversity of the future research and public health workforce, as evidenced by diversity training grants, and diversity among SHARC Center staff and SHARC Center trainees.
- 3. Obtain national recognition for training expertise related to the SHARC mission, as evidenced by obtaining a T-32 or similar training grant.

#### Service Goals:

- 1. Provide research and/or educational support for community agencies and non-profit organizations on activity related to the SHARC mission.
- 2. Provide relevant information, skills, and opportunities for research participation to populations affected by substance use and HIV in Florida.

# **B.** Proposed Activities

#### **B.1. Research Activities**

- 1. Provide access to research participants. SHARC will maintain a registry of persons with HIV from across Florida, including those who are participating in one of our NIAAA-funded research projects. The cohort and registry includes participants from multiple settings across Alachua County (UF-Shands, Malcolm Randall VA, Alachua County Health Department) as well as persons from Hillsborough, Orange, Columbia, Seminole, Sumter, Broward and Dade counties. We have already enrolled 687 persons in the registry and the cohort is expected to grow to nearly 1500 persons by 2017. Several graduate students and NIH-supported researchers are already using the registry for their own research. The cohort registry provides contact information for persons who may be eligible for future HIV-related studies, and is thus a resource for all interested in HIV health outcomes.
- 2. Provide access to research data. The SHARC Center will maintain a HIV Database Repository that includes several databases relevant to HIV in Florida, together with policies and procedures to request access to data. Our databases currently include our own research studies (e.g. Florida Cohort) and statewide HIV surveillance data. As of February 2016, we have 25 approved concepts and 8 PhD students, 3 MS students, and one MD student at the University of Florida are currently using SHARC-managed data to support their dissertation, thesis, or summer research projects. These students come from the Colleges of Journalism and Communication, Medicine, and Public Health and Health Professions.

Specifically in terms of accessing research data, the SHARC Center provides:

- Policies and procedures to access data and ensure security of data
- Concept approval and tracking system
- Data sharing agreements
- Descriptions of available research data on our public web site
- Cross-institution collaborations
- Support to obtain de-identified datasets
- 3. Provide data analytic support for new grant proposals, scientific papers and presentations. This includes assistance with merging of databases, data analyses, assistance with online survey development, and secure transfer of data across multiple institutions.
- 4. Provide regulatory support related to the multiple IRBs involved in our clinical research studies. (In Gainesville alone, our Florida Cohort requires IRB approval at the University of Florida, The Florida Department of Health, and the Malcolm Randall VA). This requires expertise related to the specific research content area, time, and a personal touch.

5. Provide fiscal and administrative support related to research activity. Track payments and budgets across multiple settings, including different institutions, laboratories, repository, consultants, research pharmacy, and county health departments. Also, coordinate research meetings of investigators across multiple locations and institutions.

# B.2. Teaching/training activities

- 1. Engage trainees in interactive discussions with investigators, industry, public health, and community members about our research.
- Hold a <u>SHARC Center research seminar</u> every two weeks during the fall and spring of each year. These are
  attended by a range of students across these same disciplines, and provide exposure to persons from a diverse set
  of backgrounds (see Appendix A for list of recent SHARC seminar speakers and topics). The seminars allow for at
  least 20 minutes of discussion.
- Oversee a formal SHARC Center Training and Development Program, which outlines specific objectives for training and development for undergraduate students, graduate and professional students, research staff, and interns from a range of backgrounds. Our development program includes specific tasks to accomplish, including attendance at seminars, participation in multidisciplinary working groups, formal presentations, and writing of research papers and grants. Over the past two years, SHARC has supported a range of students and interns (see Appendix B). Weekly data team meetings are open to all trainees to discuss things such as measurements, dealing with missing data analytic approaches, and interpreting data output.
- Hold an annual SHARC conference. The SHARC has now held three annual conferences (see Appendix C, D, E).
  The conferences have received support from the UF Office of Research, the FIU Office of Research, and an R13
  grant from NIAAA (Cook PI). Approximately 100 students, faculty and community members participated in the
  most recent conference in Miami, Fl. The conference alternates between Miami and Gainesville.
- Apply for a T-32 training program grant. In September 2016, SHARC faculty will submit a T32 grant application
  to support both pre-doctoral and post-doctoral trainees to conduct research related to the SHARC mission.

#### B.3. Service Activities

- Develop and maintain relationships with a broad range of community-based organizations. For example, SHARCaffiliated faculty are on the Board of the Area 3/13 Ryan White Planning Council, members of the Florida
  Consortium for HIV/AIDS Research, and advisors on a local HIV/STD prevention program for teens in Alachua
  County High Schools.
- Communicate relevant information to other researchers, trainces, or the affected community. We provide regular
  updates on current information using social media including Twitter, Facebook, and our website (www.sharcresearch.org). Our SHARC interns help us to ensure that our promotional documents and information are culturally
  appropriate and diverse.
- Participate in community-based events and programs. SHARC faculty and staff have presented information
  related to alcohol and HIV at events for at-risk populations in Gainesville, including teens and sexual minority
  populations, and we have helped non-profit organizations to successfully obtain research funds.

# C. Reporting Structure

- C.1. SHARC Center Organizational Chart. The attached Organizational Chart outlines the overall structure of SHARC, its reporting authority, and advisory committees (see Appendix F, G).
- C.2. <u>Director</u>. Robert Cook, M.D., M.P.H., Professor of Epidemiology, is proposed as the initial Director of the SHARC Center. Dr. Cook is currently the Director of the NIAAA-supported SHARC consortium; he is the PI of the

NIAAA-funded U01 and U24 grants that provide overall support, and he communicates regularly with NIH and a national network of collaborators. He is a tenured professor and has successfully mentored UF students and junior faculty to obtain their own research grants. Dr. Cook will oversee the major Center activities and facilitate interaction and communication among faculty, staff, students and community members. He will manage an efficient organizational structure, and work to identify funds to sustain and expand upon the Center's activities. Dr. Cook will oversee three staff: a Research Coordinator (Jennifer Steshyn, MABMH, CCRP), a Statistical Coordinator (Zhi Zhou, DDS, MPH), and an Administrative Coordinator (Michele Rollen-Hanson, BS). Dr. Nicole Whitehead will assume the role of Associate Director for Research for SHARC. She will assist Dr. Cook with several SHARC research programs and services, including our concept review system related to requests to use SHARC data or resources. In the event that Dr. Cook is not able to continue as Director, a new director will be chosen by the SHARC Executive Committee (described below).

- C.3. Reporting authority. For SHARC Center matters, Dr. Cook will report to Michael Perri, Ph.D., Dean of the College of Public Health and Health Professions. As SHARC is based in the Department of Epidemiology, some SHARC administrative and budget support will be provided by the Department and the College. SHARC will also report to other campus groups or organizations that provide funding support for SHARC.
- C.4. Center Membership. SHARC Center membership will be awarded annually to:
  - Trainees who committed to participate in the Development Program
  - Research staff working towards the SHARC mission
  - Faculty who receive funding from SHARC-related grants, mentor students in our Development Program, work in related research areas, and/or contribute IDC to the Center.

A list of 62 persons, representing 15 departments and 7 colleges and institutes at UF, and who currently meet these membership criteria is included in Appendix H.

Most SHARC Center activities will be available to everyone, regardless of membership status. For example, anyone may choose to be part of our regular email list-serve, to attend our scheduled seminars and meetings, or to follow us on social media. However, some SHARC Center resources (e.g. travel support, research support, training support, and special events with visitors) will only be available to Center Members. Center members will be listed on the SHARC website.

# D. Advisory Committees

D.1. SHARC Center Executive Committee. SHARC currently has an Executive Committee consisting of several investigators involved in our work with NIAAA. This Executive Committee meets by teleconference every 1-2 months to discuss our ongoing collaborations with other national consortia, requests for seed funding, planning an annual meeting, and strategies for future funding. Dr. Nicole Whitehead was added to the committee in 2016.

SHARC Center Executive Committ	ee Members
Robert Cook, MD, MPH (Chair)	Professor of Epidemiology, UF
Babette Brumback, PhD	Professor of Biostatistics, UF
Ronald Cohen, PhD	Professor of Aging, UF
Nicole Whitehead, PhD	Assistant Professor of Clinical and Health Psychology, UF
Jessy Devieux, PhD	Associate Professor of Health Behavior, FIU
Chris Kahler, PhD	Professor & Chair of Behavioral and Social Sciences, Brown

D.2. SHARC Scientific Advisory Committee. The SHARC currently has an External Advisory Committee to provide advice and input on the overall activities of the SHARC. The committee will help SHARC with strategic planning related to funding and impact. This committee meets once a year in person at the SHARC annual conference, and provided ad-hoc feedback as needed.

SHARC Center Scientific Adv	risory Committee Members
Maureen Goodenow, PhD	Professor of Pathology, Immunology and Laboratory Medicine, UF
Sara Jo Nixon, PhD	Professor of Psychiatry and Director, Center for Addiction Research and Education, University of Florida
Charurut Somboonwit, MD	Director, HIV Clinic - Hillsborough County Health Department (Tampa), Associate Professor, University of South Florida, Tampa.
Adam Gordon, MD, MPH	Professor of Medicine and Clinical and Translational Research, University of Pittsburgh
Peter Monti, PhD (Chair)	Director, Brown University Alcohol Research Center on HIV.
Spencer Lieb, MPH	HIV/AIDS Research Coordinator, The AIDS Institute/Florida Consortium for HIV/AIDS Research

**D.3.** SHARC Center Community Advisory Board. The SHARC Center Community Advisory Board has been informally meeting each year at our annual SHARC Conference and will be formally created in Summer 2016. The CAM will meet locally at least once a year to provide input into research needs from the community, help to identify persons who are difficult to reach, and review questionnaires, promotional materials, etc.

SHARC Center Community Adv	risory Board (proposed)
Gay Kohler-Sides, MPH	Alachua County Health Department HIV AIDS Coordinator
Sabrenah Phillips	HIV Care Coordinator, Meridian HealthCare
Marvene Edwards	Peer Navigator, ACHD
Natalie Kelso, MSW, PhD[c]	SHARC Student Member(s)
Bobby Davis, MPH	Former head HIV Program, ACHD
Karen Klubertanz, RN	HIV/AIDS Program Director, WellFlorida Council

# E. Plans to apply for external funding

SHARC will have initial funding support of up to \$7.5 million that is anticipated with our U24 and U01 renewals scheduled to begin in September 2016. We are also submitting several other grants. For example, in May 2016, researchers collaborating with SHARC are submitting an R01, R21, and K01 to NIH. We are expecting to see a series of RFAs from NIAAA released later in 2016 that will seek additional, cross-consortia collaborative projects related to alcohol and HIV and that involve at least 2 of the 5 national consortia. Since SHARC was created in 2012, we have had an excellent track record of grant applications submitted and received (see Appendix I). In 2014-2015, SHARC affiliated faculty submitted five R01, two R21, one K23, three F31 awards, and one NIH diversity supplement. A list of grants planned for submission in 2016-2017 is included in Appendix I.

## F. Relationship of center's activities with other UF departments and/or centers

The SHARC Center has affiliations with several other UF departments, Centers, and Institutes.

Cognitive Aging and Memory Clinical Translational Research Program (CAM-CTRP) based in the Institute of Aging and supported by the McKnight Brain Institute. Dr. Ronald Cohen, Professor of Neurology, Psychiatry, and Aging, is Director of the CAM-CTRP and is actively involved in SHARC. Dr. Cohen is the dual PI of the SHARC renewal U01 grant (2016-2021), which will have a strong emphasis on neuroscience. He is also PI of a recently funded P-50 grant (2016-2021) that is using SHARC resources and personnel to help identify participants for that clinical research project. Dr. Cohen serves as a member of the SHARC Executive Committee and mentors junior faculty (Adam Woods, PhD, Eric Porges, PhD) and several PhD students (epidemiology, clinical and health psychology) who are engaged with SHARC.

<u>UF Clinical and Translational Science Institute</u>. We are using RedCap software to obtain and manage research data, and over the next year plan to use the CTSI infrastructure for recruitment, data collection, and biorepository. We are collaborating with the OneFlorida team to ensure our work aligns and compliments that cohort, and the PCOR-net data

systems. Dr. David Nelson, CTSI director, is a co-investigator on our upcoming U24 renewal grant and is helping us to expand our HIV work to include HCV (a topic of very high priority for NIH right now).

<u>UF Cancer Center</u>. Several types of cancer are much more common in persons with HIV compared to those without HIV (e.g. cervical, anal, lymphoma, and lung cancer), and cancer prevention is a high priority for SHARC. Dr. Cook is an active member of the UF Cancer Center Population Health working group, and SHARC is planning to link HIV surveillance data with Florida Cancer Registry data over the next 2 years. Co-infections (HPV and HCV) are associated with cancer.

<u>HealthStreet</u>. HealthStreet is a local resource, supported by CTSI and the Department of Epidemiology, that helps to connect community members with research projects. HealthStreet is helping to recruit persons into our ongoing HIV cohort in Gainesville, and we plan to work with HealthStreet to recruit participants in Jacksonville in the near future.

Emerging Pathogens Institute. Dr. Cook is an affiliate faculty member for the E.P.I., and he is collaborating with E.P.I. investigators on an R21 project seeking to examine the role of miRNA on HIV health outcomes. Importantly, E.P.I. is providing needed research space for several SHARC research team members (currently we have four desks). SHARC is also helping E.P.I. by providing IRB assistance until they hire a new research coordinator.

STEM translational communication research (TCR) program. The mission of the STEM translational communication research (TCR) program is to improve human health and well-being by making scientific research more accessible, understandable, and actionable. SHARC is helping to obtain data for a PhD student in Journalism and Communications, and has obtained CTSI "credits" towards assistance with our promotional documents from Dr. Janice Kruger.

<u>UF Media Effects and Technology Lab</u>. Currently in the development stage, the College of Journalism's New and Immersive Technology Lab will conduct experimental research on the psychological effects of media content, form, and technology. The lab is being established by Pre-eminence scholar Dr. Sriram "Sri" Kalyanaraman, who has been involved in several SHARC working groups and also offers potential for industry partnerships.

<u>UF Departments</u>. SHARC faculty and trainees currently represent the following departments: Epidemiology and Biostatistics (PHHP and COM), Clinical and Health Psychology, Public Health, Health Services Research Management and Policy (PHHP), Medicine (Divisions of General Internal Medicine, Infectious Diseases, and Gastroenterology), Health Outcomes and Policy, Pathology, Immunology, and Laboratory Medicine (COM), Family, Community, and Health System Science (CON), Pharmaceutical Outcomes and Policy (College of Pharmacy), Health Education and Behavior (HHP), and the College of Journalism and Communications.

We also have ongoing collaborations with several resources outside of the University of Florida - these include:

- The University of Miami AIDS Institute
- Malcolm Randall VA Healthcare system (recruitment site, Gainesville).
- Florida Department of Health (Tallahassee)
- Behavioral Science Research Institute (Miami)
- Broward Regional Planning Council (Ft. Lauderdale)
- Florida Department of Health counties: Alachua, Columbia, Hillsborough, Orange, Seminole, Sumter
- Florida International University, University of South Florida, Florida State University
- HIV Immunology Lab, Nova Southeastern University (Miami)
- The AIDS Institute (Florida-based nonprofit organization)
- Ryan White Area 3/13 Planning Council

# G. Frequently Asked Questions

- G.1. What are the advantages of the center over current structure (what unmet needs will be satisfied by having the center?) Although in many ways, SHARC has been operating similar to a Center for the past 2 years, achieving "center" status will enhance our reputation statewide and nationally, and ensure a long-term commitment to our mission. The Center status will also allow us to obtain additional funding support from indirect cost returns and from external donors. Currently, the funding support for the center comes primarily from a single NIH institute, NIAAA, however we would like to expand our mission to broader areas of substance abuse and mental health in the context of HIV infections. Center status will enhance our opportunities for additional funding sources (including, perhaps, the State of Florida). The University of Florida currently does not have any Center with a focus on persons with HIV infection, and we will offer to assist any researchers interested in HIV/AIDS research at the University.
- G.2. What is the value of the Center to the University and to the reporting unit? The Center will enhance the overall reputation of the University of Florida as a leader in collaborations across multiple institutions and public health organizations. We are part of a national network of consortia (CHAART) that includes Brown, Yale, Johns Hopkins, and Boston University; and a statewide network that includes the Florida Department of Health and several universities including FSU, UM, FIU, and USF. The center will help to support additional research funding (via access to participants and data), and to help support training (including plans to submit a formal T32 training program grant and by providing resources such as conference travel support or mini-grants to support dissertation research). The center already has connections across multiple other centers and institutes at UF, and thus will fit in well with the current structure.
- G.3. Describe, where possible, the synergistic and collaborative efforts existing amongst the members of the proposed center. Synergism and collaboration are a key strength of the SHARC Center. Already, we have faculty mentors and trainees from multiple departments and colleges across UF (see Section F above). Our SHARC seminar series has brought in faculty and researchers from several outside organizations, including the CDC, University of Pittsburgh, Georgetown University, New York University, UCSF, and the NIH Office of M-Health. In spring 2016, SHARC hosted faculty from Johns Hopkins and the University of North Carolina. These seminars were publicized across UF, and the speakers are available to meet with faculty and students involved with SHARC.

## H. Deliverables

Each year, the Center will prepare an Annual Report that outlines:

- Presentations at national and international meetings.
- Scientific publications
- · Grants submitted and received
- · Number and Diversity of SHARC Center membership
- · Community Service Activities
- List of awards provided by SHARC Center (travel, seed funding, etc.)
- Report from Scientific Advisory Board

#### I. Resources Needed

I.1. Space. The SHARC currently has space in the CTRB building, 4<sup>th</sup> floor, Department of Epidemiology (see Appendix J). This includes 3 individual offices for the Director (Cook), Research Coordinators, and Administrative Coordinator. We also have 4 carrels within the Department of Epidemiology Space for the Statistical Coordinator, 2 NIH funded PhD students, and several part-time research assistants. Additional space to support SHARC center activities is located in the Emerging Pathogens Building (one closed office, 3 carrels, and several filing cabinets for document storage). Should the SHARC maintain its success, a more dedicated space, including a larger office space for the Director (to facilitate group meetings with SHARC faculty, staff, and students) would be ideal. We will also benefit from access to video-conferencing facilities within the CTRB enhance our collaborations with groups outside of Gainesville.

- 1.2. Funding Support Requested. Upon initiation of Center Status, SHARC will be supported primarily from direct NIH grant funding for faculty and center personnel. Should we receive a 5-year renewal as expected, we have obtained pledges totaling \$30,000 per year for 5 years from the UF Office of Research, College of Medicine, College of Public Health and Health Professions, and the UF Health Sciences Center (see letters in Appendix K). The Dean of PHHP has also agreed to allow the college proportion of IDC to be allocated to the SHARC Center. SHARC has also received support from nonprofit organizations (The AIDS Institute) and the University of Miami over the past few years, and we will continue to seek a range of funding support including private donations and support from the Florida State Legislature. Additional funding to support SHARC administration also comes from other research grants.
- I.3. <u>Budget Justification</u>. A five-year budget plan (09/01/16-08/31/21) is present with this application (see Appendix L).

# PERSONNEL

Robert Cook, MD, MPH. Director. Professor of Epidemiology and Medicine. Dr. Cook will continue to serve as the overall director of the Southern HIV and Alcohol Research Consortium (SHARC). As Consortium Director, Dr. Cook will chair the SHARC executive committee and will oversee an Administrative Coordinator, a Data Manager, and a Research coordinator. Dr. Cook will report regularly to Dr. Michael Perri and to UF's Office of Institutional Planning and Research department. He will meet regularly with the core staff. Dr. Cook is overseeing the Florida Cohort and research registry, which will provide research data and infrastructure from multiple public health settings across Florida, and he will oversee staff involved with recruitment and retention and data management. He will also meet face-to-face on an ongoing basis with public health agencies and staff across Florida to help maintain this initiative. Dr. Cook will also lead efforts to generate a new, multidisciplinary traing program to be funded by a T32. Dr. Cook's initial support for SHARC director (20% effort) will come from the NIAAA U01 and U24 grants.

# Nicole Whitehead, PhD. Assistant Director for Research (10% effort each year).

Dr. Whitehead will participate as a member of the SHARC executive committee and will attend at least one national meeting of the NIH-supported alcohol-HIV consortia each year. She will oversee requests to use SHARC data and she will attend our regular data meetings and seminar series. Dr. Whitehead is also working to expand SHARC into several additional settings across Florida in collaboration with the AIDS Education and Training Center. For the next 5 years, her salary support will be supported by a K23 grant from NIDA, as this leadership role is part of her training and professional development plan for the K23.

# RESEARCH STAFF

Zhi Zhou, M.P.H., Statistical Coordinator and Data Manager (50% effort for 5 years). Ms. Zhou has an MPH in Biostatistics at the University of Florida, and she previously completed medical and dental training in China. She has served as the SHARC data manager for over a year and has contributed to numerous publications and presentations. Ms. Zhou manages SHARC data for our ongoing clinical trial, our Florida Cohort study, and HIV surveillance data. She receives additional training regarding data merging and data security. She will help to manage requests to share our data (create datasets), assist with analysis of data for our trainees, and lead a weekly data team meeting. The data manager will participate and help prepare for consortia communication activities, including local staff meetings, executive committee meetings, IRB updates, and Data Safety and Monitoring Reports.

Jennifer Steshyn, MABMH, CCRP. Research Project Coordinator II. (50% effort for 5 years)

Ms. Steshyn has a Master's degree in Bioethics and Medical Humanities and joined the SHARC team in July 2015. As research coordinator, Ms. Steshyn has several responsibilities including regulatory issues related to the research, including IRB reports, clinicaltrials.gov, and other NIH reports. Additional responsibilities include training of new staff/team members, management of team member compliance, and tracking of research collaborations and concepts. Ms. Steshyn will also help to oversee several of our trainees, and she will oversee administrative aspects of the SHARC training and development program (which will become part of our T32 training program). Ms. Steshyn is also critical to our ability to facilitate contact of persons with HIV who have enrolled in our participant registry to participate in other research studies. She will also monitor clinical research activities at recruitment sites to assure adherence to protocol and good clinical practice.

Michele Rollen-Hanson, BS. Administrative Coordinator. (100% effort for 5 years)

Ms. Rollen-Hanson essentially runs the SHARC center on a day-to-day basis. Provides administrative support for researchers, staff and students involved with SHARC. She coordinates regular meeting activities by teleconference and travel. She coordinates the annual SHARC Conference and meeting of the scientific advisory board, tracks and manages SHARC-related documents, and manages paperwork related to center finances. She will also oversee an additional part-time staff person who helps to manage SHARC related activities. She maintains our website that includes up-to-date information about our work, and assists with grant preparation for a range of projects. SHARC often hires part-time (OPS) students and research staff both in Gainesville and outside of Gainesville, and Ms. Rollen-Hanson monitors their time allocations.

Consultants and speakers: \$3,000 per year has been allotted for SHARC to support consultants and provide speaker honorariums related to our SHARC seminar series, our External Advisory Board, and our Community Advisory Board. Some of these costs will be offset by sharing 2-3 speakers per year with the Department of Epidemiology.

Marketing and advertising: \$5,000 has been allotted to market the SHARC brand within the State of Florida. The market audience includes researchers, students and participants. Included in these funds would be the cost of maintaining and updating our websites, graphic designer and advertising in publications and other marketing materials such as flyers, brochures, etc.

Travel support. SHARC will support travel for students or affiliated faculty who work on SHARC projects to attend a national meeting to present their work. Travel support per student will generally not exceed \$500 per student per trip. SHARC will also reimburse travel for research assistants who drive within Florida to attend one of the participating research sites to help with recruitment. SHARC will also bring in speakers for the SHARC Research Team meeting to encourage collaboration with other experts in the field.

# OTHER EXPENSES:

**Publication and Presentations**: SHARC Center funds can be used to help cover costs for publications and/or presentations, including poster printing, publication costs for instant access publishing (currently approximately \$1,800 for an article in an instant-access journal).

Annual Research Meeting: SHARC has an annual research meeting bringing together HIV researchers from across the state and the country to discuss current research. The meeting is currently set to alternate between Gainesville and one other site in Florida every other year. \$10,000 will help cover the cost of event space, travel for guest speakers and food for the event (although the total cost to host a full meeting are greater than this).

Computers: \$2,000 has been allotted for computers for key staff and research assistants

Competitive seed money and research support: \$5,000 will be given annually to pilot projects using SHARC data and biorepositories. These projects are reviewed by the SHARC Executive Committee.

Expansion our SHARC work to Jacksonville or other settings. We are committed to expand our work to include UF collaborators in Jacksonville, and some of the money allocated to SHARC has requested us to enhance these collaborations. Funding can be used to enhance recruitment of persons into our Florida Cohort and/or our Participant Registry.

# J. Financial plan

SHARC faculty and research staff will be funded primarily through a combination of NIH grants [U24AA022002 (Cook), U01AA020797 (Cook/Cohen), P50 grant (Cohen), K23 (Whitehead)], each of which is funded (or will soon be funded) from 2016-2021. We also have \$30,000 per year for 5 years in pledged support from the UF Office of Research, College of Medicine, College of Public Health and Health Professions, and UF Health Sciences Center. We anticipate at least \$7,500 annually in IDC returns to the SHARC center, and that this amount will increase by at least \$2,500 per year over the next 5 years as we write and receive additional grants. Additional revenue will be sought

from multiple sources, including other internal UF funding opportunities, private donations, and fee-for-service work (e.g. data management). Given our emphasis on statewide health outcomes, and our collaborations across multiple institutions, we will also work with UF to seek long-term funding support from the Florida State Legislature.

# Projected Space Requirements (in square feet)

Projected Space Required by Source	Office	Laboratory	Conference Rooms	Other
From Existing Inventory	468	357	237	0
Rented	0	0	0	0
New Construction	0	0	0	0



# Center Proposal - Appendix

- A. SHARC Seminars
- **B. SHARC Supported Students**
- C. 2014 SHARC Conference Program
- D. 2015 SHARC Conference Program
- E. 2016 SHARC Conference Program
- F. SHARC UF Center Reporting Org Chart
- G. SHARC Center Structure Org Chart
- H. SHARC UF Affiliated Faculty, Staff, Students
- I. Grants Submitted
- J. Space
- K. Funding Support Commitment Letters
- L. Budget



Center Proposal - Appendix

A. SHARC Seminars

Date	Topic/Guest	Location
Jan. 21	Dr. Robert Cook Project updates	2161 N. CTRB
21	Project appares	N. CIND
Feb. 4	Dr. Jennifer W. Janelle	2161 N. CTRB
	Topic: Clinical Care Considerations for those with HIV infection	
Feb.	Ms. Marvene Edwards,	*3162 CTRB
18	Peer Navigator, Fl. Dept. of Health, Alachua County	
	Ms. Gay Koehler-Sides, MPH, CPH	
	HIV/AIDS Program Coordinator, Fl. Dept. of Health, Alachua County	
March	Dr. Catherine Price	2161 N. CTRB
3	Topic: Subcortical Disorders (neuroimaging aspects we see with HIV) and risk for	
	cognitive decline after elective surgery	
March	Ms. Nancy Schaefer	2161 N. CTRB
17	HIV Library grant at UF library	-
March	Betsy McCaul, PhD, Professor, Johns Hopkins Univ. School of Medicine	2161 N. CTRB
31	Geetanjali Chander, MD, MPH, Director, General Internal Medicine Fellowship	
	Program and Associate Professor of Medicine	
April	Ms. Shantrel Canidate	2161 N. CTRB
14	Topic: Qualitative WHAT-IF? Study	
April	Dr. Brian Pence, UNC-Chapel Hill	2161 N. CTRB
28	Outcomes of integrating depression treatment into HIV care in the southeastern United States	

Date	Topic	Location
Jan. 8	Updates from Dr. Cook (What-if, Fl. Cohort, MMP, SHARC Conference)	UF, 2161 N. CTRB
Jan. 22	Dr. Nicole E. Whitehead Older Adults and HIV	UF, 3161 CTRB
(Jan. 28- 29)	2015 SHARC Conference Wednesday, January 28, 8am-5pm Thursday, January 29, 8am-12pm	HILTON Hotel, Gainesville, Fl.
Feb. 5	Dr. Wendy Nilsen (NIH)  Mobile applications	UF, 3161 CTRB
March 12	Dr. Julie Williams, Dr. Ashok Dinasarapu, and Xinrui Zhang  Goodenow Immunology Lab – presenting data from HIV and substance use studies	ТВА
April <del>2</del> 3rd(Friday)	Tiffany D. Pineda, Education Coordinator, Institutional Review Boards, UF  Jane Ritho, SHARC intern	UF, 2161 N. CTRB
April 17 (Friday)	Chelsea Loy, MPH intern  Experience at John Hopkins internship  Dr. Cook Updates (What-If, Fl. Cohort, MMP)	UF, 2161 N. CTRB

Date	Topic/Guest	Location
Sept. 3	SHARC Updates – Dr. Cook and team	UF, 3161/3162 CTRB
Sept. 17	SHARC Updates – Dr. Cook	UF 2161 N, CTRB
Oct. 1	Dr. Chris McCarty	UF, 2161 N. CTRB
Oct. 15	SHARC Updates – Dr. Cook	UF, 3161/3162 CTRB
Oct. 29	Dr. William Parker Hinson	UF, 3161/3162 CTRB
Nov. 12	Dr. Mildred Maldonado-Molina	UF, 2161 N. CTRB
Nov. 26	NO MEETING due to Thanksgiving Holiday	N/A
Dec. 10	Sally Bethart, MSN, ARNP Transgender Health	UF, 2161 N. CTRB
Dec. 24	NO MEETING due to Christmas Holiday	N/A

Date	Topic	Location
Jan. 9	SHARC Conference Details, Fl. Cohort update, Dr. Robert Cook	2161 N. CTRB 1:30pm
Jan. 23	Final Details for SHARC Conference (January 29-30), Dr. Robert Cook  Neurocog Group will join (Time may extend)	2161 N. CTRB 1:30pm
Feb. 6	Internal meeting agenda: Mission statement and poster handouts	2161 N. CTRB 1:30pm
Feb. 20	Dr. Xinguang (Jim) Chen, Professor, Dept. of Epidemiology Introduction Updates on grants	2161 N. CTRB 1:30pm
March 19 (WEDS)	Special Session on Wednesday at 11:00am (CTRB Room 2161 S)  Guest: Dr. Donna Hubbard McCree Associate Director for Health Equity, Division of HIV/AIDS Prevention, National Center for HIV, Viral Hepatitis, STD and TB Prevention, Centers for Disease Control and Prevention in Atlanta, GA.  Guest: Dr. Charurut Somboonwit, SHARC Scientific Advisory Brd Member Associate Professor of Medicine, Division of Infectious Disease & International Medicine, USF, Director of Communicable Diseases, Hillsborough County Health Department	2161 South CTRE
April 3	Out of town Special Guest: Dr. Kevin Kraemer  "Impact of Substance Use Disorders on Quality of HIV Care"  Professor of Medicine and Clinical & Translational Science Director, RAND-University of Pittsburgh Scholars Program Director, General Internal Medicine Fellowship Program Center for Research on Health Care, University of Pittsburgh School of Medicine	
April 17	Out of Town Guest Speaker: Dr. R. Scott Braithwaite "A Computer Simulation to Reduce HIV Infections in New York City" Chief, Division of Comparative Effectiveness and Decision Sciences, Department of Population Health, New York University School of Medicine	2161 N. CTRB 1:30pm
May 1	Guest Speaker: Ms. Teresa Mercado-White*  Area 3/13 Minority AIDS Program Coord.  Division of Epidemiology & Communicable Diseases, FL DOH	2161 N. CTRB 1:30pm

May 29	Guest Speaker: Dr. Mark Hart*, Department of Behavioral Science and	2161 N. CTRB
	Community Health, University of Florida	4.20
	Social Media applications	1:30pm
June 12	SHARC updates, Dr. Robert Cook	2161 N. CTRB
		1:30pm
June 26	Dr. David Nelson, Director CTSI	2161 N. CTRB
		1:30pm
July 10	Darryl C. Pastor, MPH, HealthStreet Project Manager	2161 N. CTRB
	HealthStreet is a community-based effort that works every day to reduce disparities in healthcare and research by linking the medically underserved to medical and social services and opportunities to participate in research.	1:30pm
July 24	Project updates: Fl. Cohort and MMP	2161 N. CTRB
		1:30pm
Sept. 4	Dr. Shankar Das	3162 CTRB#
	Fogarty Fellow	1:30pm
Sept. 18	Cesar Escobar-Viera	2161 N. CTRB
	Topic: Mobile applications for Public Health	1:30pm
Oct. 16	Marco Salemi, Ph.D.	2161 N. CTRB
	Associate Professor, Dept. of Pathology, Immunology and Laboratory Medicine	1:30pm
Oct. 30	FI. Cohort Survey follow-up (measures)	#HPNP room G-
		111
Dec. 11	*Linda Cottler, Ph.D., MPH	2161 N. CTRB
	Dean's Professor and Founding Chair, Assoc. Dean for Research and Planning for PHHP	1:30pm

<sup>\*</sup>Will be videotaped for the online MPH course.

#Room Change

# SHARC Research Team Meetings 2013

Date	Agenda	Location	
April 11	April 11 Guest Speaker: Dr. Mark Wallet, University of Florida  Research with macrophages		
	Research with macrophages	9:00am	
April 25	Guest Speaker: Dr. Julie Williams, University of Florida	Room 3105 HPNP	
	"Substance Use in HIV Positive Adolescents"	9:00am	
May 24	Guest Speaker: Dr. Michael Plankey, Georgetown University	Room 3105 HPNP	
		9:00am	
June 18	Guest Speaker: Dr. Peter Monti, Brown University	2161 CTRB	
		3:30pm	
September 5	ptember General Overview of SHARC related grants, introduction of Fl. Cohort Pilot Study		
September	Guest Speaker, Dr. Stephanie Staras, University of Florida	2161 N. CTRB	
19	"Developing an Intervention to reduce risky sexual partner selection among African American adolescent girls."	1:30pm	
October 3	Review of Florida Cohort Survey, Phase I	2161 S. CTRB	
	(This meeting will be in 2161 SOUTH [not North])		
October	Guest Speaker: Dr. Nicole E. Whitehead, University of Florida	2161 N. CTRB	
17	"An Examination of Social Support Among Older HIV+ African Americans"	1:30pm	
October	Review of Domains and measures for Florida Cohort Survey, Phase I	2161 N. CTRB	
31		1:30pm	
November	Review plans for SHARC conference	2161 N. CTRB	
14	Discussion of MMP Data	1:30pm	
December	SHARC Conference details (poster creation)	2161 N. CTRB	
12	Update on Florida Cohort - Phase1	1:30pm	



Center Proposal - Appendix

**B. SHARC Supported Students** 

First	Last	Degree	Satus as of Spring 2016	Department
1 Samantha	Abbott		Undergrad	Public Health
2 Michelle	Agudo		MS Student	
3 Sofia	Appelberg		Master's	Immunology
4 Vaughn	Bryant	Sc.M.	PhD[c]	CHP
5 Larry E.	Burrell II		PhD[c]	CHP
6 Emeka	Chukwuemeka	MPH	PhD[c]	Epidemiology
7 Calvin	Cortes	MPH	Graduated MPH 2015	Public Health
8 John	Delano	MPH	Graduated MPH 2015	Public Health
9 Eugene M.	Dunne	MA	PhD[c]	CHP
10 Cesar G.	Escobar-Viera	MD, MPH, PHD	Graduated PHD 2015	HSRMP
11 Matthew	Guzy		Bachelor's student	Fine Arts
12 Emily	Harry		Masters student	Public Health
13 Mark	Hart	Ed.D.	Graduated Ed.D 2014	Education
14 Shanjun	Helian		Masters student	Biostatistics
15 Andre	Hook		Master's	Nursing
16 Xingdi	Hu	PHD	Graduated PHD 2015	Epidemiology
17 Jing	Jin		Masters student	Public Health
18 Mustapha	Kamara	MBBS	Masters student	Epidemiology
19 Natalie	Kelso	MSW	PhD[c]	Epidemiology
20 Arielle	Konen		Combined BHS/MPH	Public Health
21 Ralph B.	Lamonge		BS Student	Health Science
22 Stephanie	Lee	PhD	PhD[c]	Public Health
23 Chelsea	Loy	MPH	Graduated MPH 2015	Public Health
24 Zach	Mannes	B.S.	MPH student	CHP
25 Von Zimmerman	Matt		BS Student	Public Health
26 Jon	Mills	MBA	PhD[c]	HSRMP
7 Jordan	Neil ·		PhD[c]	Journalism & Communications
8 Brittany	Palmer		MPH student	Public Health
9 Hannah	Petta-Gay		PhD[c]	
10 Joseph	Sacht		Bachelor's student	Health Science
1 Jordan	See	BS	Medical Doctor student	Medicine
2 Canidate	Shantrel	MPH	PhD[c]	BSCH
3 Danielle	Sharp		Master's student	Epidemiology
4 Leandra	Stubbs	MS	MS student	Medicine/Health Outcomes and Policy
5 Eduardo	Subero	MPH	Graduated MPH 2015	Public Health
6 Akemi	Wijayabahu		Masters student	Epidemiology
7 Ty	Wizzard		Graduated BS 2015	Microbiology and Cell Science
8 Maryann	Zacharius		Undergraduate	Biology
9 Shuo	Zhang			Biostatistics
0 Xinrui	Zhang			Biostatistics
1 Shuo	Zhang			Biostatistics
2 Wenru	Zhou	MS	Graduated Masters 2015	Biostatistics
3 Alexander	Zirulnik	MPH	Graduated MPH 2015	Public Health
				A ALSO 7 (ALSO



# Center Proposal - Appendix

C. 2014 SHARC Conference Program

Join us in Gainesville, Fl. for the next SHARC Conference, January 2015.

Share comments or a photo of conference events: #sharc2014









Twitter:

@SHARCTWEETS

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Southern HIV & Alcohol Research

Consortium—SHARC

Website:

www.sharc-research.org









NIAAA NATIONAL INSTITUTE ON ALCOHOLISM

2014 SHARC Research Conference

www.sharc-research.org

87/222

# **Southern HIV & Alcohol Research Consortium**

January 29-30, 2014





**Executive Leadership Committee in 2012** 

Robert Cook, M.D. M.P.H., María José Míguez, M.D., Ph.D., Kendall Bryant Ph.D., Babette Brumback, Ph.D., Seema Desai, Ph.D.



SHARC Director
Robert L. Cook, M.D., M.P.H.
Professor
Departments of Epidemiology and Medicine
College of Public Health and Health Professions

2014 SHARC Research Conference

### ACKNOWLEDGMENTS:

# We would like to express our gratitude to the following people for their help and support in organizing this conference:

# Florida International University

Valeria Espina, B.Acc.

Mercedes Rodríguez, M.A.

Alan Verdecia

# University of Florida

Lorna Chorba, C.C.N.A.

Chelsea Loy, B.S.

Jon Mills, M.B.A.

Michele Rollen-Hanson, B.S.

Eduardo Subero

Allison Trainor, M.P.H.

Tyrone E. Wizzard

SHARC would also like to give a special thank you to the FIU Division of Research and Dr. Andres Gil, Vice President for Research, for helping to facilitate this conference.

### **CURRENT PROJECTS SUPPORTED BY SHARC:**

What If? A randomized clinical trial of naltrexone in women with HIV and heavy alcohol consumption (NIAAA U01AA020797, clinical trial als.gov NCT01625091). This clinical trial, led by Dr. Robert Cook at the University of Florida, will enroll 240 women with HIV infection who exceed recommended drinking levels (>7 drinks per week). Women are randomized to take naltrexone (50mg) or placebo every day for 4 months. Outcomes, assessed at 2-months, 4-months, and 7-months, include alcohol consumption, HIV medication adherence, HIV disease control and progression, and risky sexual behavior. Enrollment began in December, 2012, and is currently taking place in Miami, Florida.

Immune dys-regulation in HIV-infected women with heavy alcohol consumption. (NIAAA U01AA020800). This study, led by Dr. Seema Desai at Rush University (Chicago), will study the long-term effects of heavy alcohol consumption within participants in the ongoing Women's Interagency HIV Study (WIHS) Cohort. The retrospective study includes data and stored repository samples from 200 women, collected over a 10-year period. The study seeks to determine whether heavy alcohol consumption in HIV-infected women is associated with alterations in immunological parameters and whether increases in microbial translocation in HIV infected women who engage in heavy alcohol consumption is associated with exacerbation in levels of immune activation, inflammation and immune senescence. In addition, samples from clinical trial participants in the What if? study will be evaluated to determine whether a medication (naltrexone) that decreases alcohol consumption will correct alcohol related immune dys-functionality.

Platelets mediating alcohol and HIV damage (R01 AA018095) is an existing cohort study that has recruited over 400 persons with HIV who consume alcohol in the Miami, Florida area. This NIAAA-funded study, led by Dr. Maria Jose Miguez at Florida International University, seeks to investigate platelets and platelet associated factors (i.e. serotonin, PAF, BDNF) action on both immune and cognitive dysfunction in HIV infected persons who abuse alcohol.

# **SHARC Mission**

The mission of the SHARC is to improve health outcomes and reduce HIV transmission among the diverse range of populations affected by alcohol and HIV infection in the Southeastern United States with a focus on the state of Florida.

SHARC will focus on the impact of alcohol and aging on inflammatory processes and clinical outcomes in people living with HIV infection. Our research goals are to identify methods to improve health outcomes, demonstrate the effectiveness of these interventions, and translate these intervention options into clinical practice. We also seek to support the next generation of scientists working to address the intersection of alcohol and HIV.

SHARC is part of a network of Consortiums for HIV/AIDS and Alcohol Research Translation (CHAART), supported by the National Institutes on Alcohol Abuse and Alcoholism (NIAAA).

SESSION TIME ROOM

Dr. Andres Gil

Dr. María José Míguez 8:30am MARC Pavilion

Dr. Robert L. Cook

Welcome & Introductions

Guest Speaker: 9:00am MARC Pavilion

Strategies for Preventing High Risk Behaviors Informed by Etiology: A Lifespan Ontogenetic Framework

**Guest Speaker:** 

Dr. Maureen M. Goodenow 9:30am MARC Pavilion

Substance Use and HIV: A Systems Biology Approach

BREAK 10:00am

Guest Speaker: 10:15am MARC Pavilion
Dr. Luis Espinoza

Alcohol and the Spread of HIV Infection

Guest Speaker: Dr. Adam Gordon 10:45am MARC Pavilion

Alcohol and Substance Use Among Homeless- Are Primary-Care Medical Homes the Answer?

Guest Speaker: Dr. Russell Tracy 11:15am MARC Pavilion

Inflammation in HIV Infection and Implications of Alcohol Use

Adjourn 12:00pm

# ABSTRACTS—ROTATION #2—1:45PM-2:15PM

Authors: Clery Quiros, M.P.H., María José Míguez-Burbano, M.D., Ph.D., Mayra Vargas, M.D.

Submitting Author: Clery Quiros, M.P.H.

Title: WHAT-IF Project Coordinator

Affiliation: Florida International University

**Poster:** A High Burden of Hypertension in an Urban Cohort of People Living with HIV in South Florida and its Association with Hazardous

Alcohol Use

Authors: Anshul Saxena, M.P.H., Muni Rubens MBBS, MPH, Stephanie Gaston, BA, Michele Jean-Gilles, Ph.D., Rhonda Rosenberg, Ph.D., Jessy G. Dévieux, Ph.D.

Submitting Author: Anshul Saxena, M.P.H.

Title: Graduate Research Assistant

Affiliation: Florida International University

Poster: CBSM Intervention Decreases Alcohol Use and Emotional Dis-

tress Among HIV Positive Men and Women in Haiti

Authors: Adriana Yndart, María José Míguez-Burbano, M.D., Ph.D.,

Madhavan P. Nair, Ph.D.

Submitting Author: Adriana Yndart

Title: Senior Laboratory Manager

Affiliation: Florida International University

Poster: Platelets Contribute to BBB Disruption Induced by HIV

and/or Alcohol

End of Rotation #2

2014 SHARC Research Conference

Wednesday, January 29

MARC Pavilion, FIU Campus 11200 SW 8th St.

SESSION	TIME	ROOM
Poster Discussions	1:00pm	MARC Pavilion
Rotation 1: 1:00 - 1:30pm Rotation 2: 1:30 - 2:00pm		
Speaker: Dr. Kendall Bryant	2:15pm	MARC Pavilion
Overview of CHAART Initiative		
Speaker: Dr. Robert Cook	2:30pm	MARC Pavilion
Overview of SHARC		
Speakers: Dr. Robert Cook		
Dr. María José Míguez Dr. Seema Desai	3:15pm	MARC Pavilion
SHARC Research Project Updates		
Speakers: Dr. Babette Brumback		
Dr. Mark Hart Ms. Allison Trainor	4:00pm	MARC Pavilion
Data Center Overview, Social Media Administrative Overview	Overview	
Speaker: Dr. Robert Cook	4:30pm	MARC Pavilion
Summary - Discussion		
Adjourn	4:45pm	

SESSION	TIME	ROOM
Welcome Day 2	8:30am	Sofitel Ballroom
Continental Breakfast & Mentoring		
Scientific Advisory Board Meeting	9:00am	Room 2 -Boardroon
Review of SHARC Activities		
Working Groups (other attendees)	9:00am	Sofitel break-out rooms
<ol> <li>Health Services Research: Dr. Jef</li> <li>Social Support: Dr. Nicole Whitel</li> <li>Immunology: Dr. Seema Desai; R</li> </ol>	nead; Room	1 - Ballroom
Working Groups (all attendees)	10:15am	Sofitel break-out rooms
<ol> <li>Neurocognition: Dr. Ronald Coh</li> <li>Statistics: Dr. Babette Brumback</li> <li>Epidemiology &amp; Community Eng</li> </ol>	; Room 2 -	Boardroom
Discussion of Work Group Results and Final Comments	11:15am	Sofitel Ballroom
Each group leader will present tang groups.	gible take-aw	vay from working
Adjourn	11:45am	Sofitel Ballroom
Closed Discussion	12:00pm	Sofitel Ballroom
Scientific Advisory Board & Executi	ve Committe	e

ABSTRACTS, ROTATION #2: 1:30PM- 2:00PM

Authors: Diana LaForest, M.S., María José Míguez, M.D., Ph.D.

Submitting Author: Diana LaForest, M.S.

Title: WHAT-IF Research Assistant

Affiliation: Florida International University

Poster: Mood Disorders and BDNF Relationship with Alcohol Drinking

Trajectories Among PLWH Receiving Care

Authors: Jon Mills, M.B.A., Jeff Harman, Ph.D., Cesar Escobar, M.P.H.,

M.D.

Submitting Author: Jon Mills, M.B.A.

Title: Doctoral Candidate

Affiliation: University of Florida

Poster: Relationship Between Predisposing and Enable

Characteristics to Unmet Mental Health, Alcohol or Substance Abuse

Treatment Needs

Authors: Chukwuemeka Okafor, M.P.H., Robert L. Cook, M.P.H., M.D.,

Chelsea Loy, B.S., Ronald Cohen, Ph.D.

Submitting Author: Chukwuemeka Okafor, M.P.H.

Title: Doctoral Candidate

Affiliation: University of Florida

Poster: The Effect of BMI on the Risk of Cognitive Impairment in Per-

sons Living with HIV (PLWH)

### ABSTRACTS, ROTATION #2: 1:30PM-2:00PM

Authors: Vaughn E. Bryant, Sc.M., Nicole E. Whitehead, Ph.D., Lauren

E. Hearn, B.S., Larry E. Burrell, M.S., Ronald A. Cohen, Ph.D.

Submitting Author: Vaughn E. Bryant, Sc.M.

Title: Doctoral Candidate

Affiliation: University of Florida

Poster: Predictors of Apathy and Depression in HIV Infected Individu-

als

Authors: Mark W. Hart, Ed.D.

Submitting Author: Mark W. Hart, Ed.D.

Title: Research Assistant Scientist and Instructional Designer

Affiliation: University of Florida

Poster: SHARC Online Presence and Analytics

Authors: Andre Hook, Christa Cook, Ph.D., M.S.N., R.N., Robert Cook,

M.D., M.P.H.

Submitting Author: Andre Hook

Title: Bachelors of Nursing Student

Affiliation: University of Florida

Poster: Identifying Barriers to Mental Health Care Among People

with HIV in a Developing Cohort

2014 SHARC Research Conference

#### SHARC EXECUTIVE LEADERSHIP COMMITTEE



Kendall Bryant, Ph.D., M.A.
Director, Alcohol and HIV/AIDS Research NIAAA Coordinator HIV/AIDS, NIH
Scientific Collaborator CHAART
Consortiums



Babette Brumback, Ph.D.
Professor & Program Director
Department of Biostatistics
College of Public Health and Health
Professions, College of Medicine
University of Florida



Seema Desai, Ph.D.
Assistant Professor
Department of Immunology/Microbiology
& Medicine
RUSH University Medical Center



María José Míguez, M.D., Ph.D.
Professor, School of Integrated Sciences &
Humanity
Director, Health Behavior and Policy
Initiative
Florida International University

### SHARC SCIENTIFIC ADVISORY BOARD



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Director, Florida Center for AIDS Research
College of Medicine
University of Florida



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Associate Professor of Medicine and
Advisory Dean
University of Pittsburgh School of
Medicine
VA Pittsburgh Healthcare System



Spencer Lieb, M.P.H. HIV/AIDS Research Coordinator Florida Department of Health

2014 SHARC Research Conference

# ABSTRACTS, ROTATION #2: 1:30PM-2:00PM

Authors: Sofia Appelberg, M.S., Julie C. Williams, Ph.D., Bruce A. Goldberger, Ph.D., Thomas W. Klein, Ph.D., John W. Sleasman, M.D.,

Maureen M. Goodenow, Ph.D.

Submitting Author: Sofia Appelberg, M.S.

Title: Doctoral Candidate

Affiliation: University of Florida

Poster: Differential Effects of THC on Monocyte and Macrophage In-

flammatory Responses

Authors: Jennifer Attonito, Ph.D., Jessy G. Dévieux, Ph.D., Brenda D. G. Lerner, Psy.D., R.N., Michelle M. Hospital, Ph.D., L.M.H.C., Rhonda Rosenberg, Ph.D.

Submitting Author: Jennifer Attonito, Ph.D.

Title: Research Consultant

Affiliation: Florida International University

Poster: Exploring Factors Associated with Neurocognitive Impairment

Among People Living with HIV/AIDS

Authors: Jennifer Attonito, Ph.D., Jessy G. Dévieux, Ph.D.; Brenda D.

G. Lerner, Psy.D., R.N.; LMHC; Rhonda Rosenberg, Ph.D.

Submitting Author: Jennifer Attonito, Ph.D.

Title: Research Consultant

Affiliation: Florida International University

**Poster:** Effectiveness of an Evidence-Based Intervention in Improving Treatment Adherence, Service Utilization and Viral Load Among HIV-

Seropositive Adult Alcohol Users

# ABSTRACTS, ROTATION #1: 1:00PM-1:30PM

Authors: Julie Williams, Ph.D., Sofia Appelberg, M.S., Yun Mei, M.S., Bruce Goldberger, Ph.D., Thomas W. Klein, Ph.D., John Sleasman, M.D., Maureen Goodenow, Ph.D.

Submitting Author: Julie Williams, Ph.D.

Title: Post Doctorate Associate

Affiliation: University of Florida

Poster: HIV-1 Infection is Reduced in Human Macrophages Differenti-

ated in the Presence of THC

Authors: Sharon Nichols, Ph.D., Amanda Lowe, M.S., Xinrui Zhang, M.S., Patricia Garvie, Ph.D., Sarah Thronton, Bruce Goldberger, Ph.D., Wei Hou, Ph.D., Maureen Goodenow, Ph.D., John Sleasman, M.D.

Submitting Author: Xinrui Zhang, M.S.

Title: Doctoral Candidate

Affiliation: University of Florida

Poster: Concordance Between Self-Reported Substance Use and Tox-

icology Among HIV-Infected and Uninfected at Risk Youth

End of Rotation #1

### SHARC SCIENTIFIC ADVISORY BOARD



Peter Monti, Ph.D.

Donald G. Millar Distinguished Professor of Alcohol and Addiction Studies

Director, Center for Alcohol and Addition Studies

Brown University



Charurut Somboonwit, Ph.D.
Associate Professor of Medicine
Division of Infectious Disease & International
Medicine
University of South Florida
Director of Communicable Diseases
Hillsborough County Health Department



Ralph Tarter, Ph.D.
Professor
Pharmaceutical Sciences
School of Pharmacy
University of Pittsburgh
Director, Center for Education and Drug
Abuse Research (CEDAR)

# **Guest Speakers**



Ralph Tarter, Ph.D., M.P.A.
Professor, Pharmaceutical Sciences
School of Pharmacy
University of Pittsburgh
Director, Center for Education and Drug
Abuse Research (CEDAR)



Maureen M. Goodenow, Ph.D. Professor, College of Medicine University of Florida Stephany W. Holloway University Endowed Chair for AIDS Research Director, Florida Center for AIDS Research



Luis Espinoza, M.D. Associate Professor of Clinical Medicine University of Miami Health System

2014 SHARC Research Conference

ABSTRACTS, ROTATION #1: 1:00PM-1:30PM

Authors: Lindsay Peters, Christa Cook, Ph.D., M.S.N., R.N.

Submitting Author: Lindsay Peters

Title: Bachelors of Nursing Student

Affiliation: University of Florida

Poster: Aging, HIV, and Depression in Florida HIV-Infected Persons

Authors: Gabriella Tantalean, M.S., Mayra Vargas, M.D., María José

Miguez, M.D., Ph.D.

Submitting Author: Gabriella Tantalean, M.S.

Title: Research Nurse

Affiliation: Florida International University

Poster: Platelet Poor Plasma BDNF and Serotonin Levels Among HIV

Infected Individuals Living with or without Thrombocytopenia

Authors: Mayra Vargas, M.D., Robert L. Cook, M.D., M.P.H., María

José Míguez, M.D., Ph.D.

Submitting Author: Mayra Vargas, M.D.

Title: Researcher

Affiliation: University of Florida

Poster: Alcohol, Brain Derived Neurotrophic Factor and Obesity

Among People Living with HIV

# ABSTRACTS, ROTATION #1: 1:00PM-1:30PM

Authors: Lauren E. Hearn, B.S., Paris B. Wheeler, Nicole E. Whitehead, Ph.D., Larry E. Burrell II, M.S., Vaughn E. Bryant, Sc.M.

Submitting Author: Lauren E. Hearn, B.S.

Title: Graduate Student

Affiliation: University of Florida

Poster: Predictors of Heavy Drinking Among HIV+ African American

Adults Age 50 and Older: A Discriminant Function Analysis

Authors: Xingdi Hu, M.S., Robert L. Cook, M.D., M.P.H., Christa Cook,

Ph.D., M.S.N., R.N., Jeffrey Harman, Ph.D.

Submitting Author: Xingdi Hu, M.S.

Title: Doctoral Candidate

Affiliation: University of Florida

Poster: Drinking Patterns and Health Care Utilization Among Persons

Living with HIV

Authors: Natalie E. Kelso, M.S.W., Tyrone E. Wizzard, Robert L. Cook,

M.D., M.P.H., Ronald Cohen, Ph.D.,

Submitting Author: Natalie E. Kelso, M.S.W.

Title: Doctoral Candidate

Affiliation: University of Florida

Poster: Risk Factors of Alcohol Consumption and Depression of

Cardiovascular Disease Among HIV-Infected Persons

2014 SHARC Research Conference

#### **GUEST SPEAKERS**

# **Guest Speakers**



Russell Tracy, Ph.D.
Professor of Pathology and
Biochemistry
College of Medicine
University of Vermont



Adam Gordon, M.D., M.P.H.
Associate Professor of Medicine
and Advisory Dean
University of Pittsburgh School of
Medicine
VA Pittsburgh Healthcare System

ABSTRACTS, ROTATION #1: 1:00PM- 1:30PM

Authors: Samantha Abbott, Allison Trainor, M.P.H., Robert L. Cook,

M.D., M.P.H., Sharon Abramowitz, Ph.D.,

Submitting Author: Samantha Abbott

Title: Bachelors Student

Affiliation: University of Florida

Poster: Youth Perception: Correlation of Sexual Risk Behaviors and

Alcohol or Marijuana

Authors: Adriana Yndart B.S., Gloria Figueroa, Madhavan P. Nair, Ph.D.

Submitting Author: Marisela Agudelo, Ph.D.

Title: Assistant Professor

Affiliation: Florida International University

Poster: Alcohol and the Synthetic Cannabinoid, JWH-015, Affect Den-

dritic Cell Function in the Context of HIV

Authors: Jennifer Attonito, Ph.D.; Jessy G. Dévieux, Ph.D.; Brenda D. G. Lerner, Psy.D., R.N.; Michelle M. Hospital, Ph.D., LMHC; Rhonda Rosenberg, Ph.D.

Submitting Author: Jennifer Attonito, Ph.D.

Title: Research Consultant

Affiliation: Florida International University

Poster: Testing a Mediated Biopsychosocial Model to Predict Viral

Load Among People Living With HIV

2014 SHARC Research Conference

ABSTRACTS, ROTATION #1: 1:00PM-1:30PM

Authors: Marianna K. Baum, Ph.D., Sherman K., M.D., Martinez SS., M.S., Li Yinghui, M.S., Stewart T., M.S., Greer P., M.D., Murillo J. M.D.,

Campa A.

Submitting Author: Marianna K. Baum, Ph.D.

Title: Professor, Dietetics & Nutrition

Affiliation: Florida International University

Poster: Excessive Alcohol is Associated with Lactic Acidosis and Elevated Homocysteine in the Miami Adult Studies in HIV (MASH) Cohort

Authors: Diego Bueno, M.S., Luis Espinoza, M.D., María José Míguez, M.D., Ph.D.

Submitting Author: Diego Bueno, M.S.

Title: WHAT-IF Research Assistant

Affiliation: Florida International University

Poster: Thrombocytopenia and Liquor Use are Associated with Non-

invasive Markers of Liver Fibrosis in People Living with HIV

Authors: Christa Cook, Ph.D., M.S.N., R.N., Robert L. Cook, M.D., M.P.H.

Submitting Author: Christa Cook, Ph.D., M.S.N., R.N.

Title: Assistant Professor

Affiliation: University of Florida

Poster: Substance Abuse and Engagement in HIV Care: A Qualitative

Perspective

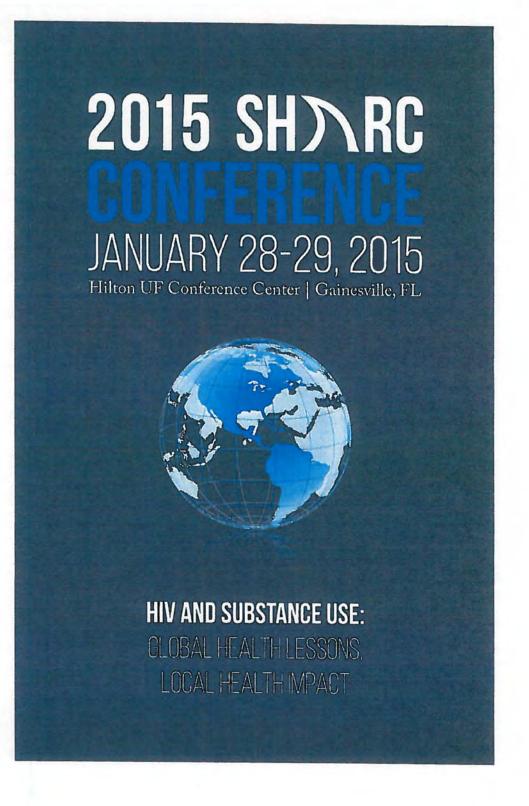


# Center Proposal - Appendix

D. 2015 SHARC Conference Program

# SHARC SOUTHERN HIV & ALCOHOL RESEARCH CONSORTIUM

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# Join us in Miami Fl. for the next SHARC Conference, January 2016.

Share comments or a photo of conference events: #sharc2015









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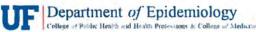












# **SHARC Conference Planning Committee**

Dr. Kendall Bryant, NIH, NIAAA

Dr. Maria Jose Miguez, Florida International University

Dr. Seema Desai, RUSH University

Dr. Maureen Goodenow, University of Florida

Dr. Jeffrey Harman, University of Florida

Dr. Mark Hart, University of Florida

Dr. Cesar Escobar, University of Florida

Ms. Alie Trainor, University of Florida

Ms. Michele Rollen-Hanson, University of Florida

Mr. John Delano, University of Florida

Dr. Nicole Whitehead, University of Florida

Ms. Natalie Kelso, University of Florida

Dr. Babette Brumback, University of Florida

Ms. Samantha Abbott, University of Florida

Special Thank You to:

Matt Guzy, Graphic Designer, University of Florida

We would like to express our gratitude to the following organizations for their help and support in organizing this conference:













# **SHARC Mission**

The mission of the Southern HIV and Alcohol Research Consortium (SHARC) is to improve health outcomes and reduce HIV transmission among the diverse range of populations affected by alcohol and HIV infection in the Southeastern United States.

Within this mission, SHARC is focusing on persons living in Florida, a state with high HIV incidence, substantial population diversity, and a high number of older persons living with HIV. To fulfill this mission, SHARC will foster translational, interdisciplinary research by providing research infrastructure, training and mentoring.

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# Daily Schedule

Dally Stille	duic	
7:30am	Registration and set-up posters	Hilton Lobby
8:00am	Welcome and SHARC Overview Dr. Robert L. Cook, SHARC Director. Dr. Michael Perri, Dean, College of Public Health and Health Professions. Dr. Maria Jose Miuez, Florida Interna- tional University. Dr. Kendall Bryant, NIH/NIAAA	Century A
9:00am	Jessy G. Dévieux, Ph.D., Florida International University, What We Have Learned from Intervening with Alcohol Abusing ART patients in Haiti: Implications for Florida and Future Directions	Century A
9:45am	Coffee Break	Lobby
10:00am	Judith Hahn, Ph.D., University of California, San Francisco, Unhealthy Alcohol Use Declines and then Rebounds Among Persons Starting Antiretro- viral Therapy in Uganda	Century A
10:45am	Coffee Break	Lobby
11:00am	Poster Session	Lobby
12:00pm	Lunch	Albert's Café
1:30pm	*Neurocognition Working Group Dr. Ronald Cohen	Century B
	Aging and Outcomes Working Group Dr. Seema Desai	Century C
	Co-Morbid Infections Working Group  Dr. Robert Cook	Dogwood
	Community Working Group Dr. Christa Cook	Live Oak
2:30pm	Coffee Break	Lobby
2:40pm	*Community Panel	Century A
4:00pm	*Intervention Challenge	Century A
7:00pm	Dinner & Awards	3215 Hull Rd.
	Florida Museum of Natural History	UF Cultural Plaza

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Poster Session: During this time, poster presenters will stand by their posters and discuss the findings. Posters will be judged by a panel of judges.

Working groups: All conference participants are encouraged to participate in one of the four working groups, regardless of their own expertise in the topic. Working group leaders have identified goals for each group, and this information and additional working group sign-up opportunities will be available at the conference.

Community Panel: Representatives from 5 different communitybased organizations will each discuss three cases related to persons with HIV and substance use problems. Challenges and success stories will be described, and the audience is encouraged to participate in the discussions. Panelists include:

Kim Nosek, MPH, CPPSIII, Sion Hill Treatment Facility, West Care Michele Rosiere, Broward Regional Health Planning Council Natasha Markman, MS, Broward Regional Health Planning Council Sebrenah Phillips, BS, CPP CBHT, Meridian Behavioral Healthcare, Inc. Sanford Zelnick, D.O., M.S., Sumter County Department of Health Christina Collis, Peer Navigator, Florida Department of Health in Alachua County

Intervention Challenge: What are the best intervention options to improve outcomes in persons with HIV and alcohol problems? Six challenge panelists will each present a 3-minute overview of a different intervention option. Then, after a period of audience discussion, conference participants will use live text-messaging to vote for the intervention they think has the best chance of working now, the intervention that is most promising for the future, and the one they think would be most acceptable to the affected communities.

Working group summary: The full conference will assemble together. A member of each working group will give a brief summary of the activities of their working group, so that the audience can know what took place in the other groups.

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2015 SHARC Research Conference

Hilton UF Conference Center, Thursday, January 29 1714 SW 34th St. Daily Schedule 8:00am Coffee with mentors Century A & Breakout Rooms Jamie Morano Ph.D. Century A University of South Florida Innovative International Research for HIV and Hepatitis C: A U.S. and China Perspective Coffee Break Lobby David Nelson, M.D. Century A University of Florida HCV-TARGET: building an international registry for patients with hepatitis C \*Health Services and Research Working Group Century B Dr. Jeffrey Harman Century C Mental Health & Substance Abuse Co-Morbidities Dr. Nicole Whitehead Immunology Live Oak Dr. Maria Jose Miguez Dogwood Statistics Dr. Babette Brumback \*Summary of Working Groups Century A Conference Adjourn

12:00pm Closed Discussion Albert's Café Scientific Advisory Board and Executive Leadership (Lobby Floor) Committee only

1:30pm Closed Meeting Live Oak Scientific Advisory Board Only

3:30pm Adjourn

5

9:00am

9:45am

9:55am

10:40am

11:40am

\*Page 48 for description

#### **EXECUTIVE LEADERSHIP COMMITTEE**



Robert L. Cook, M.D., M.P.H.

SHARC Director
Professor
Departments of Epidemiology and Medicine
College of Public Health and Health Professions
University of Florida



Babette Brumback, Ph.D.

Professor & Program Director
Department of Biostatistics
College of Public Health and Health
Professions, College of Medicine
University of Florida



Kendall Bryant, Ph.D., M.A.

Director, Alcohol and HIV/AIDS Research NIAAA Coordinator HIV/AIDS, NIH Scientific Collaborator CHAART Consortiums factors. Bonferroni correction adjusted for multiple comparisons.

Results: 57% and 56% YLWH tested positive for marijuana and tobacco respectively, while 77% reported alcohol use. Among 128 YLWH, 111 (86.7%) were on ART and 81 (63%) presented with NCI, only one showing declines in daily functioning. Single substance use did not associate with NCI. However, a higher proportion of YLWH that use alcohol and marijuana demonstrated NCI compared to those that use alcohol alone (p=0.0394). Marijuana and tobacco use combination is significantly associated with NCI (p=0.0340). Odds ratios of marijuana (OR=3.072, 95% CI: 1.252-7.541) and tobacco use (OR=0.410, 95% CI: 0.165-1.018) indicate opposite effects on NCI. In YLWH with detectable virus, MMP levels were reduced in tobacco users (p=0.0013), after adjustment for ART, while in YLWH with undetectable virus, CRP levels were reduced in users of alcohol, tobacco and marijuana. (p=0.0099).

Conclusions: Results suggest substance use contributes to risk for neurocognitive impairment in YLWH but may decrease HIV associated inflammation. Education of YLWH about the potential harmful effects of substance use on neurocognitive function is warranted.

### **ABSTRACT**

# Substance use effects on Neurocognitive and Immune function among HIV-infected youth

Xinrui Zhang, MS
PhD Candidate, Department of Biostatistics
College of Public Health and Health Professions, University of Florida

Sharon L. Nichols, PhD, School of Medicine, University of California San Diego

Kai-fen Chang, MS, College of Medicine, University of Florida Manju Kaiki, MPH, College of Medicine, University of Florida John W. Sleasman, MD, Duke School of Medicine, Duke University Yueh-Yun Chi, PhD, College of Public Health and Health Professions, University of Florida

Maureen M. Goodenow, PhD, College of Medicine, University of Florida

**Objective:** To examine the substance use effects on neurocognitive function and immune activation in youth living with HIV (YLWH).

**Background:** Substance use is a potential risk factor for neurocognitive impairment (NCI) and altered immune activation. More than 50% of YLWH and uninfected youth report using marijuana, tobacco and alcohol. The relationship of substance use to NCI and inflammatory markers in YLWH remains unclear.

Methods: 128 young adults age 18 – 24 years (85% male, 67% African-American) with behaviorally acquired HIV-1 infection were enrolled in a longitudinal study; data presented are from end of study. ELISA-based toxicology assays were used to detect marijuana and tobacco products in plasma. Alcohol use was measured by Alcohol, Smoking, and Substance Involvement Screening Test (ASSIST). Global neurocognitive scores were classified as NCI or not using standardized tests and report of daily functioning according to established Frascati criteria (including asymptomatic or symptomatic impairment). Chi-square and Fisher's exact tests compared substance use between subjects with and without NCI. Logistic regression was used to examine substance use effects on NCI. Mixed effect model with ART as fixed effect was conducted to measure substance use effects on 23 plasma soluble

2014 SHARC Research Conference

### **EXECUTIVE LEADERSHIP COMMITTEE**



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University of Florida



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Associate Professor of Medicine
Advisory Dean
University of Pittsburgh School of Medicine
VA Pittsburgh Healthcare System



Spencer Lieb, M.P.H.

HIV/AIDS Research Coordinator
The AIDS Institute/Florida Consortium
for HIV/AIDS Research

Results: THC treatment of PBMCs at the time of infection failed to suppress HIV-1 replication. In contrast, THC treatment of PBMC during IL-2 and PHA stimulation suppressed HIV-1 levels on day 7 by 30% to 95% among 8 donors with no effect on cell division, HIV-1 receptor/coreceptor expression, frequency of stimulated T cell subsets, or expression of viral restriction factors. In PBMCs, THC enhanced supernatant IFNy (Th1), with limited modulation of IL-4 (Th2) or IL-10 (T reg) production during IL-2 and PHA stimulation. Exposure of enriched CD4<sup>+</sup> T cells alone to THC during IL-2 and PHA stimulation reduced IFNy.

Conclusions: THC mediated alterations in IFNy expression suggest modulation of Th1 phenotype. THC imparts cell specific effects and may modulate a broader molecular hub, resulting in further immune cell dysfunction. Results underscore the importance of consideration of the full cellular milieu as opposed to individual cell types. Effects of THC in vitro are cell and treatment specific therefore studies of marijuana users with HIV-1 infection are critical to understanding the complexities of chronic virus infection, inflammation, and substance use.

Relevance: Individuals who use marijuana are also likely to consume alcohol. Thus, the effects of marijuana on HIV-1 infection *in vitro* are relevant to individuals living with HIV-1 who also use marijuana and alcohol.

# **ABSTRACT**

# $\Delta^9$ -Tetrahydrocannabinol (THC) Suppresses HIV-1 infection of T cells

Julie C. Williams, PhD
Post Doctoral Fellow, Department of Pathology, Immunology, and
Laboratory Medicine
College of Medicine, University of Florida

Sofia Appelberg, MS, College of Medicine, University of Florida Bruce A. Goldberger, PhD, F-ABFT, College of Medicine, University of Florida

Thomas W. Klein, PhD, Morsani College of Medicine, University of South Florida

John W. Sleasman, MD, Duke School of Medicine, Duke University Maureen M. Goodenow, PhD, College of Medicine, University of Florida

Objective: To examine the effects of THC on HIV-1 infection of T cells.

Background: Effects by  $\Delta^9$ -tetrahydrocanbinol (THC), a psychoactive and immunomodulatory component of marijuana, on HIV-1 infection in humans are poorly understood. Ex vivo, THC treatment during monocyte differentiation alters resultant macrophage phenotype and reduces HIV-1 receptor expression rendering cells less susceptible to infection. T cell immune functions are modulated by THC as CD4<sup>+</sup> T cells, primary cellular targets for HIV-1, express cannabinoid receptors CB<sub>1</sub> or CB<sub>2</sub>. Studies address the hypothesis that THC modulates HIV-1 infection of T cells directly or through an alternate bystander cell such as the monocyte.

Methods: Peripheral Blood Mononuclear Cells (PBMCs) were stimulated with IL-2 and PHA +/- 30  $\mu$ M THC or ethanol vehicle for 4 days followed by exposure to HIV-1<sub>AD</sub>. Supernatants were evaluated for HIV-1 (p24), or cytokines (IL-4, IL-10, and IFNy) production by ELISA. Distribution of cell populations and HIV-1 receptors were examined by flow cytometry. Expression of selected viral restriction factors was quantified by real-time PCR. Enrichment of CD4+ T cells was performed by magnetic depletion.

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Jessy Dévieux, Ph.D.

University, Miami, Florida

Research Associate Professor of Public Health Co-Director of FIU AIDS Prevention Program (APP), Florida International

Talk Title: What We Have Learned from Intervening with Alcohol Abusing ART patients in Haiti: Implications for Florida and Future Directions



Judith Hahn, PhD, MA

Associate Professor, School of Medicine University of California, San Francisco

Talk Title: Unhealthy Alcohol Use Declines and then Rebounds Among Persons Starting Antiretroviral Therapy in Uganda unmet need categories will be combined and dichotomized into two categories: 1) self-report of at least one unmet need and 2) no report an unmet need. To determine which predictors are significantly correlated with the report of at least one unmet need, logistic regression will be utilized. SAS 9.4 will be used for all statistical analyses.

Results: Based on preliminary analyses, 53% (n=426) of all participants reported at least one unmet service need. Within this subgroup, African American participants were significantly more likely than White participants to identify an unmet need (61% and 35%, respectively). Lastly, of all participants who reported non-injection drug use in the past in the past 12 months, 16% (n=134) reported at least one unmet need.

Conclusions: Based on preliminary results, majority of the participants in the study report at least one unmet service need with a high incidence occurring among African Americans and drug users. Findings from this study have major implications for the way in which we address barriers to supportive services among HIV-positive individuals in Florida's marginalized communities.

Relevance: This study addresses the impact of socio-demographic and behavioral characteristics of HIV-positive individuals in the state of Florida on receipt of health service needs. The findings from this study can inform and improve access to supportive services as needed by HIV-positive individuals in the state of Florida.

# Risk Factors Associated with Unmet Service Needs Among HIV-Positive Individuals in the Florida Medical Monitoring Project

Leandra Stubbs, BS MS Candidate College of Medicine, University of Florida

Mildred M. Maldonado-Molina, PhD, College of Medicine, University of Florida

Nicole E. Whitehead, PhD, College of Public Health and Health Professions, University of Florida

Robert L. Cook, MD, MPH, College of Public Health and Health Professions, University of Florida

Jeff Harman, PhD, College of Public Health and Health Professions, University of Florida

Christa L. Cook, PhD, MSN, College of Nursing, University of Florida

**Objective:** To determine the association between socio-demographic and behavioral characteristics of MMP participants in the state of Florida and their report of at least one unmet service need in the past 12 months.

Background: Many HIV-positive individuals face challenges with cooccurring substance use and inadequate access to support services. Prior studies have demonstrated that HIV-positive individuals who have unmet service needs, whether HIV-related or ancillary, are more prone to non-adherence to antiretroviral therapy medication and poor health outcomes. Certain individual characteristics, such as homosexuality, chronic alcohol use, and lack of health insurance, have demonstrated significant correlation with the report of at least one unmet need in the past year.

Methods: This study is a secondary data analysis of the combined 2009 and 2010 CDC Medical Monitoring Project (MMP) data for the state of Florida. The sample of HIV-positive individuals (n=803) consented to a 45-minute interview that covered risky behaviors, socio-demographic background, medical history and utilization of healthcare services. All

#### **GUEST SPEAKERS, JANUARY 29**



Jamie P. Morano, MD, MPH

Assistant Professor, Division of Infectious Disease and International Medicine at Morsani College of Medicine, University of South Florida, Tampa, Florida

Talk Title: Innovative International Research for HIV and Hepatitis C: A U.S. and China Perspective



David R. Nelson, M.D.

Director, UF Clinical and Translational Science Institute Assistant Vice-President for Research University of Florida, Gainesville, Florida.

Talk Title: HCV-TARGET: Building an international registry for patients with Hepatitis C.

#### CURRENT PROJECTS SUPPORTED BY SHARC:



Florida Cohort to Monitor and Improve Health Outcomes (Supported by SHARC, NIAAA U24 AA022002).

This longitudinal cohort study, led by Dr. Robert Cook, at the University of Florida, will enroll up to 1,500 participants with HIV infection and an additional 200 without HIV across the state of Florida. Study sites include several county health departments (Alachua, Columbia, Hillsborough, Orange and Sumter), community agencies (HealthStreet), the Malcolm Randall VA Hospital Clinics and the UF Health infectious disease

clinics. The Florida Cohort will study how individual, clinic and community level factors influence accessability and use of healthcare as well as HIV clinical outcomes, such as CD4 count and viral load. Additionally, the cohort plans to explore whether substance use, such as drugs and alcohol and mental health conditions influence HIV clinical outcomes and linkage to care.

Medical Monitoring Project (MMP). Through a partnership with the Florida Department of Health, the Southern HIV & Alcohol Research Consortium (SHARC) has developed a protocol that allows investigators to work with the Medical Monitoring Project (MMP) data. This project is led by Christa Cook, PhD, MSN. The purpose of this research is to complete a secondary analysis of existing surveillance data collected through the Centers for Disease Control (CDC) and the Florida Department of Health (FLDOH).

Immune dys-regulation in HIV-infected women with heavy alcohol consumption. (NIAAA U01AA020800). This study, led by Seema Desai, Ph.D., at Rush University (Chicago), will study the long-term effects of heavy alcohol consumption within participants in the ongoing Women's Interagency HIV Study (WIHS) Cohort. The retrospective study includes data and stored repository samples from 200 women, collected at 3 time points over a 10-year period. The study seeks to determine:

1) whether heavy alcohol consumption in HIV-infected women is associated with alterations in immunological parameters that are associated with poor clinical prognosis; and 2) whether increases in microbial 2015 SHARC Research Conference

The null hypothesis of homogenous effects by race/ethnicity and age was rejected (p<0.0001). Significant reductions were observed among non-Hispanic blacks: gonorrhea rates decreased 25.6% (95% CI = -30.0, -21.0) and chlamydia rates decreased 14.7% (-20.9, -8.0). Among non-Hispanics, point estimates suggest decreases were highest among 25-29 year olds.

Conclusions: Increased alcohol taxes reduce sexually transmitted infections, especially among sub-populations with high disease burdens, such as non-Hispanic blacks.

# Alcohol Tax Increases Reduce STIs Differentially Across Subpopulations

Stephanie Staras, PhD, MSPH Assistant Professor, Health Outcomes and Policy College of Medicine, University of Florida

Melvin D Livingston, PhD, College of Medicine, University of Florida Alana M Christou, MPH, College of Medicine, University of Florida David H Jernigan, PhD., Bloomberg School of Public Health, John Hopkins University

Alexander C Wagenaar, PhD., College of Medicine, University of Florida

Objective: To examine the effects of an excise alcohol tax increase on sexually transmitted infections.

**Background:** Alcohol taxes reduce population-level alcohol consumption. Alcohol use is a well established risk factor for STI acquisition. It is unclear whether these reductions in consumption relate to reduced alcohol consumption prior to sex, therefore, reducing STIs.

Methods: We used an interrupted time series design to examine the effect of a 2009 alcohol tax increase in Illinois on new cases of two common sexually transmitted infections (chlamydia and gonorrhea) reported to the U.S. National Notifiable Disease Surveillance System from January 2003 through December 2011 (n=108 repeated monthly observations). We estimated effects of the tax increase on infection rates in the general population and within specific race/ethnicity and age subgroups using mixed models accounting for temporal trends and median income.

Results: Following the Illinois alcohol tax increase, state-wide rates of gonorrhea decreased 21% (95% Confidence Interval (CI) = -25.7, -16.7) and chlamydia decreased 11% (95% CI = -17.8, -4.4), resulting in an estimated 3,506 fewer gonorrhea infections and 5,844 fewer chlamydia infections annually.

translocation in HIV infected women who engage in heavy alcohol consumption is associated with exacerbation in levels of immune activation, inflammation and immune senescence compared to HIV uninfected women who consume similar levels of alcohol. In addition, samples from clinical trial participants in the What if? study will be evaluated to determine whether a medication (naltrexone) that decreases alcohol consumption will correct alcohol related immune dys-functionality. Thus, the research is directly translational due to the identification of novel, human immune markers associated with aging and immune senescence, and by determining whether intervention can improve these immunological markers and correlate with improved functioning. Platelets mediating alcohol and HIV damage (R01 AA018095) is an existing cohort study that has recruited over 400 persons with HIV who consume alcohol in the Miami, Florida area. This NIAAA-funded study, led by Maria Jose Miguez, M.D., at Florida International University, seeks to investigate platelets and platelet associated factors (i.e. serotonin, PAF, BDNF) action on both immune and cognitive dysfunction in HIV infected persons who abuse alcohol.

WHAT-IF? A randomized clinical trial of naltrexone in women with HIV and heavy alcohol consumption. The Pharmacotherapy for hazardous drinking in HIV-infected women: a randomized trial, led by Robert Cook, M.D., M.P.H., will enroll 240 women with HIV infection who exceed recommended drinking levels (>7 drinks per week). Nicknamed WHAT-IF? for the question, "Will having alcohol treatment improve functioning?", the study will determine whether a specific drug, naltrexone, will help reduce drinking levels in HIV-infected women, thus improving their HIV-related outcomes such as adherence to medication, CD4 count and viral load. Women are randomized to take naltrexone (50mg) or placebo every day for 4 months. Outcomes, assessed at 2-months, 4-months, and 7-months, include alcohol consumption, HIV medication adherence, HIV disease control and progression, and risky sexual behavior. Enrollment began in December, 2012, and is currently taking place in Miami, Florida.

# The Effect of Current Alcohol Consumption on Cognitive Impairment Varies as a Function of HIV Status and Age

Vaughn E. Bryant, ScM
PhD Candidate, Department of Clinical and Health Psychology
College of Public Health and Health Professions, University of Florida

Eric C. Porges, PhD, College of Medicine, University of Florida
Adam J. Woods, PhD, College of Medicine, University of Florida
Robert L. Cook, MD, MPH, College of Public Health and Health Professions & College of Medicine, University of Florida
Christopher W. Kahler, PhD, School of Public Health, Brown University
Peter M. Monti, PhD, School of Public Health, Brown University
Ronald A. Cohen, PhD, College of Medicine, University of Florida

**Objective:** To examine the effects of heavy alcohol consumption as a function of HIV status and age.

Background: HIV-associated brain dysfunction continues to occur despite the effectiveness of combined antiretroviral therapies (cART) on mortality, morbidity, and other health outcomes. One of the most commonly abused substances by people living with HIV (PLWH) is alcohol. There is now increasing concern that heavy alcohol use and associated hepatic and gastrointestinal abnormalities may exacerbate the effects of HIV on the brain and cognition. Past studies examining the effects of alcohol consumption in the context of HIV have yielded mixed results. We hypothesized that heavy alcohol consumption would be associated with significant cognitive impairments in PLWH and that the adverse effects of alcohol would be greater among older participants.

Methods: The sample consisted of 93 PLWH (HIV+) and 60 HIVseronegative (HIV-) individuals recruited from The Miriam Hospital Immunology Center and Brown Center for Aids Research (CFAR). Differences in neurocognitive performance as a function of HIV and alcohol grouping, and also age were examined using analysis of variance (ANOVA) procedures based on general linear modeling. Fewer normal weight (BMI 18.5-24.9) and overweight (BMI 25-29.9) women reported pain in the past week compared to obese (BMI >30) women (38.5%, 38.5%, and 54.6% respectively; p=0.21). Overall, 70.6% of women reported using alcohol for pain relief, while the percentage for pain medications was only 58.8%. Among women with pain, 50% reported "very good" or "complete" pain relief from pain medication compared with 47% who reported very good or complete relief from using alcohol (p=1).

Conclusions: Pain was common in this sample of female hazardous drinkers living with HIV. Pain was most prevalent in obese women. Many women reported drinking alcohol to treat pain, indicating addiction challenges that extend beyond chronic pain. Interventions to reduce alcohol consumption may need to consider how chronic pain may be influencing the use of alcohol in this population.

# The Weight of Pain and Alcohol Consumption Among Women Living with HIV

Bridgett Rahim-Williams, MA, MPH, PhD

Senior Research Fellow, NIH National Institute on Minority Health & Health Disparities, Bethesda, MD

Research Assistant Professor, Department of Behavioral Science and Community Health

College of Public Health and Health Professions, University of Florida

Xingdi Hu, MS, College of Public Health and Health Professions, University of Florida

María José Miguez, MD, PHD, School of Integrated Sciences and Humanity, Florida International University

Robert L. Cook, MD, MPH, College of Public Health and Health Professions & Callege of Medicine, University of Florida

Objective: The aim of this research was to describe the relationship between alcohol use and pain among women living with HIV, and to identify the plausible effect of body mass index (BMI) in pain.

Background: Managing on-going and under-treated chronic pain is a challenge for individuals living with HIV, and a major public health problem. Pain remains under-diagnosed and under-treated, and could be affected by overall body mass index.

Methods: As of October 2014, 110 Women were recruited to the "What If" clinical trial assessing pharmacotherapy to reduce hazardous drinking among women living with HIV. Pain was measured at enrollment using the Brief Pain Inventory, which used a 1-10 scale to measure pain at its worse and best, among women who reported their use of medication and alcohol to treat pain. We performed bivariate analysis to assess the association of BMI levels with pain measures.

Results: Overall, 46.4% (n=51) of 110 women reported pain other than minor headaches, sprains and toothaches in the last week.

Results: The effects of current heavy alcohol consumption were found to vary as a function of HIV status and also age (F(1, 150) = 4.49, p = .03). Among PLWH, current heavy alcohol consumption had a detrimental effect on overall cognitive performance  $(F_{(1,91)} = 4.12, p = .02)$ and also on the cognitive domain of learning efficiency ( $F_{(1,91)} = 4.57$ , p = .04). However, among PLWH, there was no age x ETOH interaction for any of the cognitive domains. In contrast, among the HIVseronegative participants, a significant age x ETOH interaction was found for overall cognitive performance ( $F_{(1,91)} = 5.02$ , p = .028) and learning efficiency  $(F_{(1,91)} = 5.02, p = .028)$ .

Conclusions: As people age they become increasingly susceptible to various risk factors that can adversely affect cognition. Accordingly, age-associated effects of alcohol use suggest premature cognitive aging. People who consumed moderate quantities of alcohol did not show any of the adverse cognitive effects observed in heavy drinkers, suggesting that alcohol-associated cognitive impairments occur primarily among people who consume over the NIAAA threshold for "atrisk" drinking. Alcohol reduction interventions should target current drinking levels in this population.

# Disclosure of Same-Sex Sexual Attraction: Associations with STIs and Risky Sexual Behavior

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HIV acquisition is associated with pre-sex substance use, circumcision status, and acquisition of non-HIV sexually transmitted infections (STIs). Among men who have sex with men (MSM), the largest new HIV incidence group, those who do not disclose their sexual orientation may be more likely to use substances in association with sex and may be at increased risk for STI acquisition. Little is known about how disclosure of same sex sexual attraction relates to STIs while controlling for other known covariates.

This is a secondary data analysis of CDC Medical Monitoring Project (MMP) data, which obtained survey data from 305 HIV+ MSM in Florida in 2009-2010. Disclosure was measured via responses to questions asking, "Have you told [person or group] that you were attracted to men?" STI diagnosis was measured via response to questions about STD diagnosis in the past 12 months. Participants also indicated whether or not they had used alcohol or drugs prior to sex in the previous 12 months.

From a total of 305 MSM (83.6% homosexual; 16.4% bisexual; mean age 45.7 years; 22.7% Black); 77% had disclosed their same-sex sexual attraction. Men who had disclosed their same-sex attraction reported a lower prevalence of any STI (10.2% vs. 25.7%, p = .001). Men who had disclosed also reported a lower prevalence of pre-sex alcohol use

Results: Prevalence of any CAM use was 53% (n=426), among those who indicated using any CAM, 56% used only one CAM type, whereas 44% reported using a combination of two or more CAM types. The three most commonly used CAM type includes: vitamins/herbs (n=305), marijuana (n=125) and Spiritual healing (n=36). Male gender, older age, recent CD4 count ≥ 201 cells/mm³ and longer duration of HIV emerged as significant independent predictors of any CAM use. There was no significant association between CAM use and hazardous alcohol consumption or use of any illicit drugs. In multivariable analysis, any CAM use was associated with a CD4 count ≥ 201 [Adjusted Odds ratio (aOR): 1.89, 95% CI: 1.12 − 3.17]. However, there was no significant relationship between any CAM use and detectable HIV RNA level (aOR=0.79, 95% CI: 0.49-1.2).

Conclusions: In this sample of PLWHA, prevalence of CAM use was relatively high and appears to be associated with improved CD4 count.

The Relationship Between Complementary and Alternative Medicine (CAM) Use and Immunologic Parameters Among Persons Living With HIV/AIDS (PLWHA) in Florida

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Objective: Describe the prevalence and determinants of various types of CAM in PLWHA. Determine the relationship between CAM use and immunologic parameters in PLWHA

Background: An increasing number of PLWHA report using CAM therapies to cope with HIV-related symptoms as well as side effects of antiretroviral therapy (ART). Understanding the determinants of CAM use is important as it has been hypothesized to interfere with adherence and/or efficacy of ART. Further, the impact of CAM use on markers of HIV disease progression has not been thoroughly determined.

Methods: Data from the Florida Medical Monitoring Project 2009/2010 (n=803; mean age: 45yrs; 65% Male; 31% white, 50% black, 16% Hispanic) was used. Primary outcomes of interest include: recent CD4 count (≤200 vs. ≥201 cells/mm3) and detectable HIV RNA level (Yes vs. No). The primary predictor, CAM use was categorized as any CAM use (Yes vs. No). Bivariate and multivariable analysis was conducted to determine predictors of CAM use and relationship of CAM use with recent CD4 count and detectable HIV RNA while adjusting for influential covariates.

(28.1% vs. 45.7 %, p = .006), but disclosure was not significantly related to pre-sex use of illicit injection or non-injection drugs. In multivariable analyses that adjusted for age, education, circumcision status, and use of alcohol or non-injection drugs prior to sex, men who did not disclose were approximately three times as likely to report being diagnosed with an STI as compared to men who did disclose (adjusted Odds Ratio = 3.18, 95% CI 1.48 - 6.85, p = .003)

These findings suggest that MSM who do not disclose their same-sex sexual attractions are at an increased risk of acquiring STIs. Considering the known associations between STI acquisition and HIV transmission, we contended that these findings have considerable implications for health in this population.

# A Systematic Review of Naltrexone for Women with Alcohol Use Disorders

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**Objective:** To conduct a systematic review of clinical trials assessing the impact of Naltrexone on drinking outcomes in women.

Background: Up to 20% of U.S. women consume alcohol at hazardous levels each year; however, women with HIV infection face additional individual and public health consequences. Interventions, such as the prescription medication Naltrexone, have reported efficacy in reducing drinking in non-HIV populations; however, some studies suggest gender differences in response to Naltrexone's effectiveness.

Methods: Using several databases, 2,631 clinical trials were screened and nine studies, including data from six RCTs, met inclusion criteria. Primary drinking outcomes among the studies included: percent days abstinent, percent drinking days, percent heavy drinking day, and time to first heavy drinking day. Three independent raters using the Downs and Black scale individually evaluated data from the nine articles. Variations in ratings were discussed among the reviewers until consensus was achieved. To complete the systematic review, data was extracted for evaluation including study design, study characteristics of participants, drinking outcomes, and study quality.

(n=193) had only depression and 5% (n=42) had only alcoholism. Prevalence of a dual diagnosis was 5% (n=41). Approximately 7% (n=53) reported having any HIV-related hospitalization. After adjustment depression alone was associated with nearly 3 times the odds (OR 2.75; CI: 1.35, 5.61) of having any HIV-related hospitalization (P-value<0.01). Alcoholism (OR 2.20; CI: 0.49, 9.88; P-value=.29) alone or a dual diagnosis (OR 1.42; CI: 0.25, 8.01; P-value=0.69) was associated with higher odds of having any HIV-related hospitalization however the results were not statistically significant.

Conclusions: Our study revealed single diagnosis prevalence rates consistent with previous research however a small proportion of this sample has a dual diagnosis. Our findings indicate depression increases the odds of having any HIV-related hospitalization. Lack of statistical significance for alcoholism or a dual diagnosis could be an artifact of insufficient power. Future studies should assess these measures using larger samples. More research is also needed to evaluate different treatments for these conditions and whether or not the approaches reduce the frequency of HIV-related hospitalizations among PLWHA.

Relevance: This study examines the dual impact of depression and alcoholism among PLWHA. Providing an additional understanding of the impact of these illnesses in PLWHA is consistent with the mission of SHARC, which seeks to improve outcomes and quality of life for this population.

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# Depression, Alcoholism and HIV: Prevalence and Impact on HIV-Related Hospitalizations

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Objective: To assess the prevalence of depression and alcoholism among people living with HIV/AIDS (PLWHA) and to examine the impact on HIV-related hospitalizations.

Background: Prevalence of depression and alcoholism are high among PLWHA. Both conditions are associated with poor health outcomes and higher use of acute care. The prevalence of concurrent diagnosis and the impact of these conditions on HIV-related hospitalizations have yet to be established. Understanding these relationships will highlight the importance for early diagnosis and treatment in order to improve quality of care.

Methods: Data include a weighted probability sample of HIV-infected adults from the 2009-2010 Florida Medical Monitoring Project (n=749). Independent variables were a lifetime history of depression, alcoholism or both obtained from medical record abstractions. Those without either diagnosis were used as a reference group. Outcomes were prevalence of these diagnoses and their association with a self-report of any HIV-related hospitalizations in the past year. Covariates included demographic, socio-economic and clinical variables. Logistic regression was used to calculate the odds (OR) of having any HIV-related hospitalization.

Results: In the sample, 36% (n=276) had depression or alcoholism, 25%

Results: Seven double blind, a single blind, and one factorial design RCT were eligible for review. Study sample size ranged from 100 to 1,383 participants and women accounted for 41% of the total sample across the nine studies. In regards to primary drinking outcomes, three RCTs showed that participants receiving Naltrexone had an increase in percent days abstinent compared with placebo, two studies revealed Naltrexone significantly decreased percent drinking days, two studies showed women reported more heavy drinking days compared with men, and two studies showed groups receiving Naltrexone had, a lower risk of heavy drinking compared with placebo. Only one study found no significant difference between Naltrexone and placebo in time to first heavy drinking day.

Conclusions: Although, study outcomes are diverse, the evidence identified in this systematic review supports the efficacy of Naltrexone in women. Completion of a meta-analysis will provide more information regarding the overall efficacy of naltrexone in women. Furthermore, improvements in research design from the evaluated trials are needed to assess the efficacy of naltrexone to reduce risky drinking in minority women who have other chronic disease comorbidities.

Relevance: Women with HIV who consume alcohol at hazardous levels are at an increased risk for negative health outcomes. The goal of the systematic review was to assess the effectiveness of Naltrexone for women with Alcohol Use Disorders (AUDs). It is hoped that the results of this review would provide direction in the field of alcohol and HIV research, in particularly understanding how behavioral and pharmacological interventions could be used to reduce drinking in women who are not seeking to quit.

2015 SHARC Research Conference

# Recreational Substance Use Modulates Anti-Viral Response through Cell Surface Receptors in Youth Living With HIV-1 and Antiretroviral Therapy

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Objective: The objective was to develop peripheral blood bioprofiles associated with recreational use of alcohol, marijuana and/or tobacco in HIV-1 infected youth undergoing antiretroviral therapy (ART).

Background: Marijuana is a widely used recreational drug that exerts specific actions on the immune system through psychoactive component, delta-9-tetrahydrocannabinol, while significant alterations in the immune/inflammatory status are associated with alcohol or tobacco use by healthy or HIV-1 infected adults. The effects of combined substance use on immune activation in HIV<sup>+</sup> youth on ART are unknown.

Methods: Microarray studies were conducted using total RNA extracted from peripheral blood mononuclear cells from 51 healthy and 94 HIV-1 infected youth [median age: 23 years] who also completed Alcohol, Smoking and Substance involvement screening test (ASSIST). Subjects were balanced for gender [75% male] and ethnicity [64% African American]. All HIV-1 infected individuals were on ART and 72 had undetectable viral loads (VL) ≤50. In summary, gene expression data across arrays (145 arrays, over 20,000 genes per array) were normalized. The normalized data were used for unbiased grouping of sam-

HIV+, self-identified as Black/African American, and were age 50 or older. Correlational analyses were run to determine bivariate relations between items on the "Loneliness Scale" and consumption of alcohol in the past 6 months. Separate OLS regressions were used to examine the association in men and women while controlling for marital status and having children.

Results: Greater alcohol use was predicted by an item of the Loneliness Scale (r=.237 p<.05.) This measure, "I feel starved for company," was a significant predictor of alcohol consumption in women, even after controlling for marriage and children ( $\beta$ =.413, p<.01). A gender effect was shown as males did not show significance with this predictor and alcohol consumption ( $\beta$ =-.064, p<.724).

Conclusions: We conclude that women within this population may be using alcohol as a coping mechanism for their loneliness because they are not receiving the necessary support. Our findings were robust even after controlling for marital status and having children suggesting that these women may need alternative forms of socialization. Further research is needed to investigate gender comparisons within this population to develop interventions that can help minimize alcohol abuse.

# Alcohol Use as a Coping Mechanism for Loneliness in Minority HIV+ Adults 50 and Older

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Objective: This study examines the association between alcohol and loneliness and tests to determine if this relation is moderated by gender in people living with HIV (PLWH) 50 and older who identify as Black.

Background: Past literature has shown that negative symptoms of loneliness include, "self-treatment" of loneliness through substance use and abuse, which can create a temporary relief for HIV+ individuals. Loneliness can also lead to negative self-image and ultimately other risk behaviors. Though previous literature has examined loneliness as an important construct in HIV+ individuals, there has been minimal research on HIV+ individuals aged 50 and older. Additionally, there has been a sparse amount of literature looking at gender differences within this population, and how genders cope with their loneliness.

Methods: Study participants include 97 HIV positive men and women recruited through the University of Florida Center for HIV/AIDS Research, Education and Service (UF CARES) in Jacksonville, Florida between October 2013 and January 2014. This study was approved by the institutional review board of the University of Florida. Participants were

ples, and differential expression analysis. Differential expression analysis between HIV-1/ART (no-substance or substance) and a healthy (no-substance) group was made using Significance Analysis of Microarrays method with FDR ≤ 0.05. Significance of the differentially-expressed genes was assessed using Venn diagrams and pathway analysis.

Results: Genes unaltered by VL and substance use in HIV-1/ART individuals were enriched for anti-viral response. These genes characterized HIV<sup>†</sup> individuals on ART from healthy individuals. Genes altered by substance use were distinguishable among substance use groups, but failed to separate substance use from no substance use. Substance use effect was revealed by pathway analysis. For example in ART treated individuals [VL≤50], up-regulation of anti-viral response genes such as IFNy, STAT1, OSA1 and PML, was observed regardless of substance use. Substance use modulated the up-regulated anti-viral response through down-regulation of IFNy-receptor which is necessary for an effective anti-viral response.

Conclusions: Recreational substance use effects on HIV-1/ART individuals were revealed through pathway analysis using gene expression data. Effect of ART is robust and visible at the gene level while substance use effect can only be captured at pathway level.

Relevance: The abstract is relevant to the Southern HIV and Alcohol Research Consortium (SHARC, 2015) conference, because this work is focused on the effects of recreational substances such as alcohol, marijuana and tobacco in youth living with HIV-1 infection on antiretroviral therapy [ART]. The study findings show that the substance use effect is captured at pathway level while HIV/ART effect is more robust and can be captured at gene level using whole blood gene expression data.

# Misuse of Prescription Drugs Associated with Binge Drinking, Poor Medication Adherence, and Mental Health Diagnoses Among Those Living with HIV

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Objective: The purpose of the present study is to evaluate correlates of prescription drug misuse (PDM) among persons living with HIV/AIDS in the Medical Monitoring Project. Specifically, it is hypothesized that participants who report PDM will be more likely to report heavy alcohol consumption, depression, and recent non-adherence to HIV medication. This study may add to the literature calling for better management of pain among HIV positive persons and further research on prescription drug misuse.

Background: Nonmedical use of prescription drugs continues to rise in the United States, with increasing rates of morbidity and mortality. Among individuals living with HIV, abuse of prescription pain medication has been associated with poor antiretroviral medication adherence. Research has also found that persons living with HIV who misuse prescription medication are more likely to report alcohol problems and mental health disorders.

Methods: The present study utilized data from the 2009 and 2010 Medical Monitoring Project conducted by the Florida Department of Health and the Center for Disease Control and Prevention. Participants include 804 persons living with HIV in the state of Florida. Regarding PDM, participants were asked whether they abused prescription pain-killers or downers in the past year. Chi square analyses were conducted to compare differences between those who reported PDM and those who denied use in the past year. Groups were compared on re-

correlation were (-0.083) 95% CI = -0.208, 0.200. Further multivariate analysis will be completed.

Conclusions: Participants who lived alone scored higher on the UCLA Loneliness Scale, however the relationship was not statistically significant, supporting our previously expected outcome. Age did not have a significant effect on loneliness. There was no significant correlation between loneliness and hazardous drinking. This is contrary to prior expectations that participants who have increased loneliness have an increase in hazardous drinking.

Relevance: This research relates directly to the field of HIV and alcohol research and the impact alcohol and psychological outcomes have on individual behaviors within the HIV positive population which can effect public health.

# Loneliness and Drinking in an HIV Positive Population

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Objective: HIV positive individuals who experience an increase in loneliness will have an increase in hazardous drinking behaviors.

Background: Loneliness is an outcome which is common in the HIV positive community due to the stigma associated with HIV which leads to social isolation. The outcome of loneliness has a significant impact on the mental health of the HIV positive individual but also an impact on the community and societal levels as well. Research has found that HIV positive individuals who experience significant loneliness will sometimes engage in more high-risk sexual behaviors. Alcohol use also has adverse consequences in the HIV population. It may interfere with antiretroviral medication adherence as well as increase the likelihood of engaging in risky sexual behaviors.

Methods: 100 patients from an HIV treatment clinic in Jacksonville, Florida were recruited. A consent form was read to the prospective participant by a study staff member in a private room within the UF CARES clinic. The AUDIT scale and UCLA Loneliness scale was administered.

Results: A total population of 100 was recruited (67% female; 83% African American 15% White). Mean age of the sample was 45.2 years. 63% were single and 31% were living alone. 69% were living with spouse, partner, children, friends or other family members. A score of 8 or higher on the AUDIT is a risk for hazardous drinking behaviors. Mean AUDIT score was 2.8 (SD: 4.47), only 9 participants scored higher than the cut off value of 8. Mean UCLA score was 45.86 (SD: 4.01). Spearman's correlations revealed no significant relationship between age and UCLA scale (0.175) 95% CI = -0.13, 0.385; or living alone and UCLA scale (0.03)95% CI = -0.202, 0.208. AUDIT and UCLA scales

cent binge drinking (four or more drinks per occasion for females and five or more for males), recent medication non-adherence (missing a dose within the past 4 weeks), and mental health diagnoses (physician reported depression, anxiety, bipolar, or psychosis).

**Results:** Overall, the prevalence of self-reported PDM was low (n=37, 4.6%). Nonetheless, PDM was associated with negative health outcomes. Those who reported PDM were significantly more likely than nonusers to report recent binge drinking (27.0% vs. 14.1%),  $X^2 = 4.71$ , p = .030. PDM was also associated with a significantly greater likelihood of skipping HIV medications in the past month (32.4% vs. 18.9%),  $X^2 = 4.09$ , p = .043. Finally, those who reported PDM were more likely to have a mental health diagnosis (58.3% vs. 35.7%), though this relationship was non-significant,  $X^2 = 3.31$ , p = .069.

Conclusions: The present study supports previous literature suggesting that PDM is associated with mental health problems and other risk behaviors, including binge drinking and non-adherence to HIV medication. Limitations include low rate of PDM, which may be attributed to under-reporting, and use of cross-sectional analyses.

# The Concept of Self-identity and Using Avatars to Access HIV Information

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**Objective:** To assess self-identification among patients and public health workers using avatars to obtain HIV/AIDS information.

Background: While several research projects examining the association of self-identity and avatars have been conducted, associated with popular video games, there has been a void related to medical application. Examining this connection between our own self-identify and avatars we choose to receive information is important as the use of avatars is increasing, is cost-effective, is a way to create interactive content easy to update, and also allows patients to feel more comfortable asking stigma-laden questions not directly to another person (Gordon et al, 2009). Based on an adaptation of a project created by the New York State Department of Health, "The Most Common 100 Questions and Answers about HIV/AIDS", the University of Florida's Rural South Public Health Training Center developed avatar-based public health trainings for patients and public health workers.

Methods: Voki.com was used to create a total of eight avatars based on ethnic and gender differences and the research team created a website that offers medical-based answers, through videos of avatars, pertaining to common HIV/AIDS questions from patients. Upon accessing the website, the patient, or public health worker, has the option to choose their own avatar and complete a basic demographic survey. The research team will then compare the chosen avatar to the demographic characteristics reported by the participant.

past-year emergency visits.

Results: Mean number of metabolic risk factors was 1.8±1.3; 25.5% had metabolic syndrome. Hypertension (38.7%), obesity (50%), hypertriglyceridemia (26.4%), low HDL (36.5%), and high glucose (19.8%) were common. Mean number of drinks/week was 18.0±10.2. Prevalence of beer, wine, liquor, and no preferences was 46.2%, 3.8%, 32.1%, and 17.9%, respectively. Due to low wine preference and presence of antioxidant properties, beer and wine preferences were analyzed together. Number of drinks/week was not significantly related to metabolic risk (Coefficient (C) 0.001; Confidence Interval (CI) -0.00, 0.002). No preference was associated with higher metabolic risk (C 0.44; CI 0.48, 0.89; p=0.02), compared to beer/wine preference. Liquor preference was not significantly different than beer/wine preference on metabolic risk (C 0.07; CI -.30, .44).

Conclusion: Alcohol type consumed appears to be related to metabolic risk in women with HIV infection. Beverage type should be considered when assessing impact of alcohol on clinical outcomes.

Relevance: The current analysis assesses the impact of alcohol consumption level and beverage type on metabolic health among women living with HIV who drink alcohol. Heavy alcohol consumption is prevalent in this population, but there is very little research assessing the impact of alcohol among this subgroup of persons living with HIV.

# The Influence of Alcohol Consumption on Metabolic Risk Among Women with HIV-infection Who Drink

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**Objective:** To assess the impact of alcohol consumption and beverage type on number of metabolic risk factors among women living with HIV who drink.

**Background:** Research indicates high prevalence of metabolic risk factors among persons living with HIV (PLWH). Varying levels of alcohol use and beverage type are suggested as predictors for CVD among the general population. These factors have not been examined as predictors of metabolic risk among PLWH.

Methods: Baseline data from 106 women with HIV-infection, enrolled in a randomized clinical trial to reduce hazardous drinking, was analyzed. The primary outcome was number of metabolic risk factors: hypertension (use of blood pressure lowering medication), obesity (BMI >29.9; central obesity proxy), triglycerides ≥150 mmHg, HDL cholesterol <50 mg/dL, and fasting glucose ≥100 mg/dL or non-fasting ≥140 mg/dL. The predictors of interest were number of drinks/week and beverage type consumed (beer, wine, liquor, or no preference), using Alcohol Timeline Followback. Alcohol preference accounted for ≥75% of the standard alcohol units consumed. No preference was assumed if no type was ≥75%. Bivariate analyses were conducted, assessing confounding effects of demographic and HIV-related factors. A multivariate Poisson regression model was conducted. The final analysis controlled for age, Hepatitis C infection, exercise, poverty, and number of

Results: This website, loaded with 800 videos, has only been operational since November 1<sup>st</sup> of this year; however, it was launched with a marketing campaign directly sent to over 10,000 public health workers. The site has been accessed over 300 times, and initially the two largest variances from self-identity reporting have shown more requests for the Caucasian-female avatar, as well as for more overall selections of males over females.

**Conclusions:** Allowing this site to collect data through January will allow for a more robust sample size, however, initial data suggests more requests for male avatars than female avatars, as well as an overall lean towards the selection of Caucasian avatars.

# Recent Trends in Youth Substance Use in Florida: 2004 – 2013

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Objective: To investigate the trends of drug and alcohol use among Florida middle and high school students from 2004 to 2013, and whether the trends appeared to vary by age, gender, race or geography.

Background: Adolescent substance abuse is a major public health problem in the United States, and monitoring the trends in youth substance use is very important for allocating resources, planning intervention programs and evaluating the outcomes. This study summarized the trends of youth substance use in Florida based on the annual Florida Youth Substance Abuse Survey (FYSAS).

**Methods:** The FYSAS is based on the *Communities That Care Youth Survey.* About 12,000 or 80,000 students participated in odd or even numbered year. We obtained data on the prevalence of binge drinking, tobacco, and marijuana or hashish use according to age, gender, race, and geographic use over time and then combined the data on graphs to demonstrate trends.

Results: The percentage of binge drinking in past 30 days declined sharply from 8.5% to 4.2% for middle school students and from 22% to 13.6% for high school students from 2004 to 2013. The percentage of tobacco use declined from 6.9% to 2.5% among middle school students and from 15% to 7.6% among high school students. Similar trends were observed in males and females, but the White/Non-Hispanic group declined faster than other race groups. During the same time period, stable and/or slight increasing trends were observed in the percentage of marijuana or hashish use with no gender differences, whereas the rate

in African-American youth increased faster than other race groups. Additionally, no difference was observed between rural and urban areas for any of the substance use trends.

Conclusions: The increasing trend of marijuana or hashish use among Florida adolescents coincides with the changing positive public view towards marijuana use. Public health workers and providers should be well aware of and be prepared for this rising trend. Despite the decline in the prevalence of alcohol use and tobacco use, the usage of both substances remains prevalent, warranting ongoing prevention and education efforts.

Relevance: This study is about the trends of youth substance use in Florida, which is in accord with the theme of the conference.

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# Center Proposal - Appendix

E. 2016 SHARC Conference Program

# SHARC SOUTHERN HIV & ALCOHOL RESEARCH CONSORTIUM

www.sharc-research.org

# SHARC May 18th, 2016 MARC Pavilion | Florida International University Miami, FL

# SHARC Conference Planning Committee

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Dr. Mark Hart, University of Florida
Ms. Emily Harry, University of Florida
Ms. Arielle Konen, University of Florida
Ms. Brittany Palmer, University of Florida
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Special Thank You to: Matt Guzy, Graphic Designer, University of Florida

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Consortium for HIV/AIDS and Alcohol Research Translation (CHAART)
supported by the
National Institutes on Alcohol Abuse and Alcoholism (NIAAA).

The mission of the Southern HIV and Alcohol Research Consortium (SHARC) is to improve health outcomes and reduce HIV transmission among the diverse range of populations affected by alcohol and HIV infection in the Southeastern United States.

Within this mission, SHARC is focusing on persons living in Florida, a state with high HIV incidence, substantial population diversity, and a high number of older persons living with HIV. To fulfill this mission, SHARC will foster translational, interdisciplinary research by providing research infrastructure, training and mentoring.

# Schedule

3:00 p.m. Closed Discussion

Scientific Advisory Board and Executive Leadership Committee only Mayfair Hotel and Spa, Conference room

6:30 p.m. SHARC Dinner

Jaguar Ceviche Spoon Bar

# Schedule

8:00 a.m.	Working Groups	MARC
	• 1: Translational Science	Pavilion

- 2: Neurocognitive
- 3: Interventions
- 4: Community Engagement

\*see pages 14-15

9:00 a.m.	Poster Session	MARC
	*see pages 24-45	Lobby

10:00 a.m. Welcome MARC

Andres Gil, Ph.D.
 Florida International University
 \*see page 7

Robert L. Cook, M.D., M.P.H.
 Director of SHARC, University of Florida

10:30 a.m. Speaker MARC Pavilion

Peter Monti, Ph.D.
 Brown University
 \*see page 16

11:00 a.m. Community Panel MARC
\*see pages 17-22 Pavilion

11:55 a.m. Final Comments MARC

• Robert L. Cook, M.D., M.P.H. Pavilion

12:00 p.m. Conference adjourns

# **NOTES**





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2016 SHARC Research Conference

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2016 SHARC Research Conference

# WELCOME BY:

Andres Gil, M.S.W., Ph.D.

# Vice President for Sponsored Research and Professor Florida International University

Dr. Andres Gil is Vice President for Research and Economic Development and Dean of the University Graduate School. He also serves as President of the FIU Research Foundation and is a Professor in the Robert Stempel College of Public Health and Social Work. Dr. Gil's research focuses on the etiology, epidemiology, and treatment of adolescent substance abuse and mental health. He has authored numerous articles that examine the role of culture, race, and ethnicity in adolescent substance use and mental health. His research has been published in the American Journal of Public Health, Archives of General Psychiatry, Epidemiology, Addiction, and American Journal of Epidemiology, among others.

Dr. Gil has conducted longitudinal numerous epidemiological studies in California and Florida, as well as clinical trials testing interventions to reduce substance abuse among adolescents. His research has been funded by several NIH Institutes and various Foundations. He also has served on numerous review and advisory panels for the National Institute of Mental Health, the National Institute on Drug Abuse, the National Institute on Alcohol Abuse and Alcoholism, and the California Tobacco Related Disease Program.

#### **CURRENT PROJECTS SUPPORTED BY SHARC:**



Florida Cohort to Monitor and Improve Health Outcomes (Supported by SHARC, NIAAA U24 AA022002).

This longitudinal cohort study; led by Dr. Robert Cook, will enroll up to 1,500 participants with HIV infection and an additional 200 without HIV across the state of Florida. Study sites include several county health departments (Alachua, Columbia, Hillsborough, Orange and Sumter), community agencies (HealthStreet), the Malcolm Randall VA Hospital Clinics and the UF Health infectious disease clinics.

The Florida Cohort will study how individual, clinic and community level factors influence accessibility and use of healthcare as well as HIV clinical outcomes, such as CD4 count and viral load. Additionally, the cohort plans to explore whether substance use, such as drugs and alcohol and mental health conditions influence HIV clinical outcomes and linkage to care.

Medical Monitoring Project (MMP). Through a partnership with the Florida Department of Health, the Southern HIV & Alcohol Research Consortium (SHARC) has developed a protocol that allows investigators to work with the Medical Monitoring Project (MMP) data. This project is led by Dr. Christa Cook. The purpose of this research is to complete a secondary analysis of existing surveillance data collected through the Centers for Disease Control (CDC) and the Florida Department of Health (FLDOH).

ARCH II: Alcohol Research on HIV. This study will continue the work conducted in the ARCH I study at Brown University, which involves the investigation of ethanol (ETOH) consumption on Human Immunodeficiency Virus (HIV)-associated brain dysfunction, incorporating state-of-the-art brain imaging methods along with clinical and laboratory methods to assess the interactive effects of ETOH consumption on HIV-associated brain dysfunction.

measure executive function and memory.

**Results:** The sample was 65% male (mean age 45.1 SD=7.1) 34% female (mean age 45.3, SD=65.9), 76% African American, 16% Hispanic, and 8% Caucasian. *TPH2* rs4570625 showed a significant association with impaired executive function (odds ratio = 2.5, 95% CI, 1.1-4.9; p = .02). The risk increased in African American males (odds ratio = 4.8, 95% CI, 1.5-14.8; p = .005). *GALM* rs6741892 was associated with impaired memory (odds ratio = 1.9, 95% CI, 1.2 - 3.1; p = .006) and again the risk increased in African American males (odds ratio = 2.4, 95% CI, 1.2-4.9; p = .02). No significant association was found with polymorphism SLC6A4 5-HTTLPR.

Conclusions: These preliminary findings suggest that single nucleotide polymorphism in the *TPH2* and *GALM* genes increase the risk for neurocognitive deficits in memory and executive function. However, a more robust sample size is needed to confirm the results and determine the associations with race.

**Relevance:** TPH2 rs4570625 and GALM rs6741892 polymorphisms in the serotonin system may influence cognitive control in HIV-infected alcohol abusers.

Serotonin-related gene polymorphisms and asymptomatic neurocognitive impairment in HIV-infected alcohol abusers

Main author: Karina Villalba, M.P.H., Ph.D., Florida International University

Rhonda Rosenberg, Ph.D., Florida International University Jessy Dévieux, Ph.D., Florida International University

**Objective:** To determine whether genetic risk for neurocognitive impairment is associated with single-nucleotide polymorphisms, *SLC6A4* 5-HTTLPR, *TPH2* rs4570625 and *GALM* rs6741892 in HIV-infected adults.

Background: HIV-infected individuals continue to experience neurocognitive deterioration despite virologically successful treatments. While the cause remains unclear, evidence suggests that HIV-associated neurocognitive disorders (HAND) may be associated with neurobehavioral dysfunction. Genetic variants have been explored to identify risk markers to determine neuropathogenesis of neurocognitive deterioration. Memory deficits and executive dysfunction are highly prevalent among HIV-infected adults. These conditions can affect their quality of life and HIV risk-taking behaviors. Single nucleotide polymorphisms in the SLC6A4, TPH2 and GALM genes affect the activity of serotonin and may increase the risk of HAND.

Methods: This cross-sectional study used baseline data collected as part of an adapted risk reduction intervention, the Holistic Health Recovery Program (HHRP-A), for HIV-infected alcohol abusers. Participants were randomly assigned to the HHRP-A or a Health Promotion Comparison (HPC) condition. Recruitment was from community-based organizations in Miami-Dade providing outpatient treatment services for alcohol and mental health problems to HIV-positive men and women. A total of 267 biologically unrelated individuals were genotyped for polymorphisms SLC6A4 5-HTTLPR, TPH2 rs4570625 and GALM rs6741892. To assess neurocognitive functions, the Short Category and the Auditory Verbal Learning tests were used to

Platelets mediating alcohol and HIV damage (R01 AA018095) is an existing cohort study that has recruited over 400 persons with HIV who consume alcohol in the Miami, Florida area. This NIAAA-funded study; led by Dr. Maria Jose Miguez at Florida International University, seeks to investigate platelets and platelet-associated factors (i.e. serotonin, PAF, BDNF) action on both immune and cognitive dysfunction in HIV infected persons who abuse alcohol.

WHAT-IF? A randomized clinical trial of naltrexone in women with HIV and heavy alcohol consumption. (NIAAA U01 AA020797) The pharmacotherapy for hazardous drinking in HIV-infected women: a randomized trial; led by Dr. Robert Cook, will enroll 240 women with HIV infection who exceed recommended drinking levels (>7 drinks per week). The study is nicknamed WHAT-IF? for the question, "Will having alcohol treatment improve functioning?" The study will determine whether naltrexone will help reduce drinking levels in HIV-infected women, thus improving their HIV-related outcomes such as adherence to medication, CD4 count and viral load. Women are randomized to take naltrexone (50mg) or placebo every day for 4 months. Outcomes are assessed at 2-months, 4-months, and 7-months and they include alcohol consumption, HIV medication adherence, HIV disease control, HIV progression, and risky sexual behavior. Enrollment began in December 2012 and is currently taking place in Miami.

#### **EXECUTIVE LEADERSHIP COMMITTEE**



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SHARC Director

Professor

Departments of Epidemiology and Medicine

College of Public Health and Health Professions

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AOR 0.37; CI: 0.19,0.72), and education level (>High school: AOR 1.80; CI: 1.07-3.05) were significantly associated with having interest in a cell phone app to manage alcohol behavior.

Conclusions: Heavy drinkers with HIV demonstrated less mobile technology use than non-heavy drinkers but were fairly interested in a cell phone app to manage alcohol use.

**Relevance:** This research is essential in order to identify the most appropriate avenues for technology-based health interventions for persons living with HIV who have heavy drinking patterns.

# Mobile technology use among persons living with HIV who consume alcohol

Main author: Joyce Danielle Sharpe, B.S., M.P.H., University of Florida

Robert L. Cook, M.D., M.P.H., University of Florida

**Objective:** (1) To investigate mobile technology use among persons living with HIV (PLWH) by drinking status. (2) To compare interest in a hypothetical cell phone application (app) to manage alcohol behavior.

Background: Alcohol consumption is prevalent among PLWH and is associated with poor health outcomes. With widespread use of mobile technology in the United States, studies have found that PLWH have positive perceptions regarding using technology to help manage their HIV care and health outcomes. The current status of PLWH's mobile technology use and interest in potential technologies is not known.

Methods: In 2014-2016, 494 PLWH recruited into the Florida Cohort completed a cross-sectional questionnaire examining demographics, substance use, mobile technology use, and other health behaviors. We compared socio-demographic characteristics and mobile technology use based on status of alcohol consumption (heavy drinker or non-heavy drinker), which was self-reported using the AUDIT-C test. Heavy drinking is defined as consuming >7 drinks per week for women and >14 drinks per week for men. Multivariable logistic regression identified socio-demographic factors significantly associated with interest in a cell phone app to manage alcohol use.

Results: Nearly 10% (n=45) of the sample self-reported as heavy drinkers (average age 47 years; 56% African American; 60% male; 44% had less than a high school education; 27% homeless in the past 12 months). 30% of heavy drinkers owned a smartphone compared to 51% of non-heavy drinkers. 42% of heavy drinkers had at least one cell phone app, whereas 67% of non-heavy drinkers had at least one cell phone app. Approximately half (51%) of heavy drinkers were interested in a cell phone app to manage their alcohol use in comparison to 30% of non-heavy drinkers. Regression analysis indicated that gender (Female: AOR 0.52; CI: 0.33,0.81), drinking status (Non-heavy drinker:

#### **EXECUTIVE LEADERSHIP COMMITTEE**



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Brown University School of Public Health

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The AIDS Institute/Florida Consortium
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Peter Monti, Ph.D.

Donald G. Millar Distinguished Professor of
Alcohol and Addiction Studies
Director, Center for Alcohol & Addiction Studies
Brown University

modeling with latent variables.

Results: Participation in the intervention predicted more condom self-efficacy and greater intentions to use condoms. In addition, intervention participants reported fewer heavy drinking days compared to those who were in the control group. Unprotected sexual behavior was highly associated with heavy alcohol use (p≤.001).

Conclusions: The intervention had a direct effect on heavy alcohol use and there was a significant association between alcohol use and unprotected sex. These findings suggest the importance of reducing alcohol consumption in controlling HIV transmission rates, and the value of advancing behavioral HIV prevention.

Relevance: This abstract reports on a study directly related to SHARC's mission to improve health outcomes among populations affected by HIV/alcohol. We present significant outcomes on risk reduction and demonstrate the relationship between alcohol and risky behaviors, providing evidence that a behavioral intervention may be an effective approach to reducing HIV transmission risk in HIV+ alcohol users.

Impact of HHRP adapted to HIV+ alcohol users on selfefficacy, unprotected sex and alcohol use

Main author: Rhonda Rosenberg, Ph.D., Florida International University

Karina Villalba, Ph.D., Louisiana State University Michele Jean-Gilles, Ph.D., Florida International University Anshul Saxena, M.P.H., Florida International University Jessy Dévieux, Ph.D., Florida International University

**Objective:** To assess the evidence-based Holistic Health Recovery Program (HHRP) adapted to alcohol-using HIV-positive individuals in a controlled trial that examined impact on sexual risk behaviors, condom assertiveness, and heavy drinking in a high-risk sample in Miami.

Background: A disproportionate number of HIV-infected persons engage in heavy alcohol use, with heavy usage two to four times more prevalent compared to the general population. Among those living with HIV, heavy alcohol use may weaken the immune system and attenuate HIV viral suppression. Behaviorally, heavy alcohol use leads to poorer decision-making and higher engagement in transmission risk behaviors. There is a critical need for interventions that address the high rates of alcohol use among HIV-infected alcohol abusers. This study developed and tested an alcohol-targeted adaptation of HHRP, which was originally designed for HIV+ injection drug users and was among the few evidence-based interventions to have demonstrated efficacy in HIV+ substance abusers.

Methods: A two-arm randomized controlled design was utilized with a Health Promotion Comparison (HPC) condition. While the original HHRP had 12 weekly group sessions, our adaptation (HHRP-A) included eight, two-hour sessions, delivered twice a week, for four weeks, combining risk reduction, relapse prevention and building positive support, adherence to antiretroviral treatment, coping with stigma, stress and grief, and cognitive remediation strategies. Assessments were conducted pre-intervention and 3- 6-, and 12-months post-intervention with 267 HIV-infected individuals who had a history of alcohol abuse or dependence. The analysis used structural equation

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# 1. Translational Science Working Group



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# 2. Neurocognitive Working Group



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F(1, 68) = 4.266, p = .043, and trait anger,  $R^2 = .108$ , F(1, 68) = 8.081, p = .006, were positively associated with maximum quantity of alcohol consumption in the 50-59 year-old group. In the 60+ cohort, perceived social support was negatively associated with maximum quantity of alcohol consumption,  $R^2 = .347$ , F(1, 17) = 8.519, p = .010. Received social support was negatively associated with illicit drug use in the 60+ cohort, AOR=.947, 95% CI: .898-.998, p = .041.

Conclusions: Findings suggest differences in determinants of substance use among age groups within older people living with HIV. Social support was shown to be a potential protective factor against substance use in the 60 year-old cohort, while affect was not a determinant of substance misuse in this group as they may not perceive substance use to be an effective mood alternant as a result of previous ineffective attempts dealing with affective distress through the use of substances. Understanding further differences between groups may provide useful information for planning interventions to improve quality of life for older people living with HIV.

Relevance: As HIV+ adults age they report lower psychosocial functioning and physical health. However, to date HIV+ older adults have been classified as 50 and older. Within this specific sample of HIV+ older adults, affective states such as loneliness, trait anger, state anger, and depression were associated with alcohol consumption in HIV+ 50 year-olds. In the 60+ group, perceived social support was negatively associated with decreases in alcohol consumption, while received social support was negatively associated with illicit drug use. This paper provides evidence that psychosocial factors influencing substance use may vary by age cohorts of HIV+ older adults.

Contextualizing psychosocial functioning by age cohorts among HIV+ African American older adults 50+

Main author: Zachary Mannes, M.S., University of Florida

Larry E. Burrell II, M.S., University of Florida Lauren E. Hearn, M.S., University of Florida Nicole E. Whitehead, Ph.D., University of Florida

**Objective:** The present study aimed to examine associations between affective states, social support, and substance use among distinct age cohorts within African American HIV+ older adults.

Background: HIV+ older adults report lower ratings of psychosocial functioning and physical health compared to younger people living with HIV (PLWH). Though HIV+ older adults are classified as 50 and older, previous literature has documented that quality of life decreases with age in this population. There may be meaningful differences between PLWH in their 50's as compared to those in their 60's such that alcohol consumption is more prevalent in 50 year-old PLWH while social support serves as a protective factor against alcohol misuse in HIV+ 60 year-olds. Mental health problems such as substance misuse can have a negative influence on adherence to treatment an overall quality of life. To date, studies have examined the relationship between psychosocial functioning and substance use in a monolithic HIV older adult population. To this point, little work has been done to understand the determinants of substance use in distinct age cohorts within HIV+ older adults.

Methods: A secondary data analysis was conducted from a cross sectional study that included 96 HIV+ Black older adults recruited in Jacksonville, Florida. Participants completed an interviewer-administered assessment examining mental and behavioral health. Age-stratified hierarchical regression and binary logistic regression analyses assessed the relationship between psychosocial factors and substance use in a 50-59 year-old group, and a 60+ group.

Results: After controlling for covariates, loneliness,  $R^2 = .060$ ,

# 3. Interventions Working Group



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# 4. Community Engagement Working Group



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Gladys Ibañez, Ph.D.
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#### **GUEST SPEAKER**



# Peter Monti, Ph.D.

Donald G. Millar Distinguished Professor of Alcohol and Addiction Studies Director, Center for Alcohol & Addiction Studies Brown University

# Topic: Brief Interventions in the Emergency Department for Alcohol and HIV/Sexual Behavior

Dr. Peter Monti is the Donald G. Millar Distinguished
Professor of Alcohol and Addiction Studies and Director of the
Center for Alcohol and Addiction Studies at Brown University. He
also holds a senior career research and mentorship award from
NIH. A recognized leader in understanding the bio-behavioral
mechanisms that underlie addictive behavior as well as its
prevention and treatment, Dr. Monti has published approximately
300 papers, mongraphs, and chapters. These are primarily
focused in the areas of assessment, mechanisms, early
intervention, and treatment. During his career he has lectured
both nationally and internationally. He is in the process of revising
two of his earlier books: Treating Alcohol Dependence: A Coping
Skills Training Guide and Adolescents, Alcohol and Substance
Abuse: Reaching Teens Through Brief Interventions.

associated with high school or greater education (b=-2.60, SD=0.68, p<0.001) and CD4 count > 200 cells/mm³ (b=-1.79, SD=0.50, p<0.001) in WIHS only, viral load suppression (b=-0.90, SD=0.24, p<0.001) in MACS only, and ART adherence >95% (WIHS b=-0.93, SD=0.35, p<0.01; MACS b=-1.81, SD=0.58, p<0.01) in both cohorts. In MACS, a history of depressive symptoms (b=-0.14, SD=0.06, p<0.05) was associated overall decreased depressive symptoms over time. In MACS and WIHS, a history of depressive symptoms (WIHS b=0.37, SD=0.15, p<0.01; MACS b=0.09, SD=0.05, p<0.05) and illicit drug use (WIHS b=0.58, SD=0.31, p<0.05; MACS b=0.16, SD= 0.05, p<0.001) were associated with within-person rate of increased depressive symptoms overtime.

Conclusions: Clinicians should consider screening patients for current depressive symptoms if patients report a history of depressive symptoms, alcohol use, or illicit substance use. Access to mental health services may be warranted to ensure optimal ART adherence, viral load suppression, and increased CD4 count.

Relevance: Depressive symptoms and alcohol use have been intrinsically related in the general population. The current research provides evidence that alcohol use is associated with long term depressive symptoms among persons living with HIV.

# Predictors of changes in depressive symptoms among Persons Living with HIV

Main author: Natalie E. Kelso, M.S.W., Ph.D.[c], University of Florida

Chukwemeka Okafor, M.P.H., Ph.D[.c], University of Florida Robert L. Cook, M.D., M.P.H., University of Florida Alison Abraham, Ph.D., John's Hopkins Robert Bolen, M.D., Los Angeles LGBT Center Michael Plankey, Ph.D., Georgetown University

**Objective:** To assess the baseline predictors of baseline depressive symptoms and multi-level change (between-person and within-person) in symptoms over time, among persons living with HIV (PLWH).

Background: Depression is the most common psychological illness among PLWH. It is not clear how depressive symptoms change overtime, and what predictors are associated with overall and individual-level changes in symptoms. Using the Bio-Psycho-Social model, we hypothesized that several socio-demographic, clinical, and HIV-related variables would be associated with baseline depressive symptoms and changes in symptoms overtime.

Methods: The Multicenter AIDS Cohort Study (MACS) and Women's Interagency HIV Study (WIHS) cohorts were utilized to assess changes in depressive symptoms across 10-years. The Centers for Epidemiology Depression Scale was use to assess depressive symptoms. Linear mixed models were used to assess Level 1 (within-individual) and Level 2 (between-individual) predictors of change in depressive symptoms, by cohort. All analyses controlled for wave of enrollment, percent missing, and censorship due to death.

Results: Number of drinks per week (WIHS b=0.12, SD=0.04, p<0.01; MACS b=0.03, SD=0.01, p<0.05), illicit drug use (WIHS b=3.67, SD=1.01, p<0.001; MACS b=1.84, SD=0.37, p<0.001) and receipt of mental health services (WIHS b=3.33, SD=0.39, p<0.001; MACS b=2.60, SD=0.39, p<0.001) were associated with increased depressive symptoms at baseline in MACS and WIHS. Lower baseline depressive symptoms were

#### COMMUNITY PANEL: MODERATOR



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Christa Cook, Ph.D., MSN, RN, APHN-BC
Assistant Professor
College of Nursing
University of Florida

Moderator: Community Panel

Two specific areas have been at the center of Dr. Christa Cook's work as a public health nurse scientist, improving transitions between health providers and delivering quality client-centered care. Dr. Cook has focused her work on HIV transitions; specifically, linking people with HIV into care. Dr. Cook's next steps are to examine the role of substance abuse in transitions in HIV care. Dr. Cook's methodological expertise is in qualitative methods and she currently teaches the Foundations of Qualitative Research course in the Ph.D. program. Dr. Cook represents the College of Nursing in the University of Florida Faculty Senate. She also serves as Chair of the Research Committee in the Public Health Nursing Section of the American Public Health Association. To promote qualitative research methods at the University of Florida, she co-coordinates the Qualitative Research Colloquium. It is held every other week throughout the school year to review qualitative research anywhere in the research process, from conceptualization to dissemination.

#### **COMMUNITY PANEL**



Gay Koehler-Sides, M.P.H., C.P.H. Florida Department of Health in Alachua County Gainesville, Fl.

Ms. Koehler-Sides is the Area 3/13 HIV/AIDS Program Coordinator at the Florida Department of Health in Alachua County. Ms. Koehler-Sides earned a BS in Health Education from the University of Florida and a Masters of Public Health from the University of South Florida. She has worked in public health in North Central Florida for over 25 years. In her current position, Ms. Koehler-Sides manages the HIV and STD program for 15 surrounding counties. She oversees counseling and testing, outreach, disease intervention, Ryan White case management, contract management and peer navigation, among other programs. Ms. Koehler-Sides is also actively involved with the Oral Health Coalition of Alachua and the Alachua County Community Health Improvement Plan.

**Conclusions:** The popular apps assessed have overall moderate quality. On comparing the top ten apps to the bottom ten, all domains of app quality ratings of the top ten apps showed higher mean scores than the bottom ten apps. For both groups, engagement is the lowest rated, and functionality is among the higher scores. The aesthetic was the highest in the top ten apps, but was the 2<sup>nd</sup> highest score in the bottom ten apps.

Public Health and/or Health Professions Relevance: Scientifically evaluated apps may be offered as an additional treatment form for alcohol consumption reduction. To date, there are no publications offering evaluated and expert recommended apps for alcohol consumption reduction.

# Check that! An evaluation of alcohol related apps to reduce alcohol consumption

Main author: Mustapha Kamara, MB Ch.B., University of Florida

Mark Hart, Ed.D., University of Florida Robert L. Cook, M.D., M.P.H., University of Florida Stephanie Lee, B.S., University of Florida Samantha Abbott, University of Florida Natalie Kelso, M.S.W., University of Florida

Background: There are thousands of Alcohol apps that are focused on tracking alcohol intake, and helping to reduce and even stop the use of alcohol. Despite a growing number of reviews in this area, popular alcohol apps have not been comprehensively analyzed in terms of features related to engagement, functionality, aesthetics, information quality, and content.

Methods: The databases containing information about the first 100 alcohol apps on iTunes were downloaded in 2015. Database filters were applied to select the most popular apps available in the iTunes store. Two researchers screened the descriptions selecting only alcohol management apps. App quality were independently assessed using the Mobile App Rating Scale (MARS) by two groups. The MARS scores from each group were averaged for each app. Finally, two experts analyzed and rated each app for content validity.

Results: Of the 84 apps assessed on 5-point MARS scales, apps were of average quality (M =2.56, SD =0.75); "functionality" (M =3.9, SD =0.62) was the highest, "Aesthetics" (M=3.12, SD=0.72) was intermediate. For the top 10 Apps, engagement (M=3.77, SD=0.55) was the lowest, and "functionality" (M=4.32, SD=0.36) was almost as high as the aesthetic score (M=4.33, SD=0.24). For the bottom 10 Apps, engagement (M=1.83, SD=0.32) was also the lowest, "functionality" (M=2.94, SD=0.40) was the highest, and aesthetics (M=2.21, SD=0.36) fell in-between. The quality score of the top 10 Apps (M=4.14, SD=0.14) was two units above that of the bottom ten Apps (M=2.33, SD=0.22).

#### COMMUNITY PANEL



Vanessa Mills, L.P.N., B.S.N., M.P.H. Empower "U," Inc., A Community Health Center Miami, Fl.

Ms. Mills is the co-founder and Chief Executive Officer of Empower U, Inc., Miami-Dade County's newest federally qualified health center. Ms. Mills is a graduate of Barry University's School of Nursing and Florida International University's School of Public Health, with a concentration in the area of health education and promotion. Ms. Mills was inducted into the Sigma Theta Tau International Honor Society of Nursing. Ms. Mills was the 2015 United Way recipient of the prestigious Monsignor Award and is a Florida International University Torch Award Recipient. Ms. Mills has appeared in numerous national publications such as A & U and Walgreens "The Graying of HIV". In 2015 the Black AIDS Institute awarded Ms. Mills a Lifetime Achievement award as a hero in the Struggle for her work in HIV/AIDS locally and at the national level.

#### **COMMUNITY PANEL**

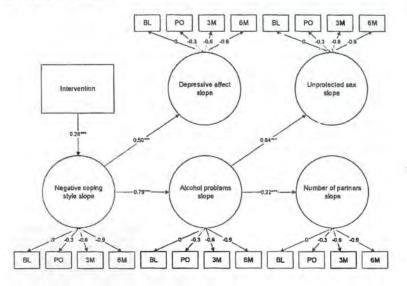


William (Chris) Haubenestel Florida Department of Health in Orange County Orlando, Fl.

Mr. Chris Haubenestel has worked in research and clinical trials for two years. He started as an intern working closely with the Clinical Research Coordinator in Florida Department of Health in Orange County. He received training on IRB processes and administration of research documentation. He assisted with the development of several Standard Operating Procedures (SOP) for the research and clinical trials operation. As research coordinator, he works mainly with behavioral research. This work includes recruitment, assisting in the informed consent process, keeping up with regulatory files, and outreach. He has been a part of SHARC for one year as the Florida Cohort Orange County Site Coordinator.

coping style declining slope (decreasing over time). The declining alcohol problems slope predicted a decline in unprotected sex and fewer partners. Both the intervention and negative coping style slope indirectly predicted less unprotected sex and fewer sex partners over time (p < .05, p < .01 respectively) mediated through declining alcohol problems.

Conclusions: These findings demonstrate the effectiveness of a cognitive-behavioral intervention in reducing negative coping, which in turn reduced depressive symptoms and problems with alcohol over time. In turn, fewer problems with alcohol predicted fewer sexual partners and less unprotected sex, thus indicating less transmission risk behaviors. The findings of this study highlight the role that efficacious psychological interventions can play in reducing HIV risk in vulnerable populations. Many factors related to psychological health influence engagement in risky behaviors and increase the vulnerability of persons with HIV.



**Brief Summary:** A cognitive-behavioral intervention was found to be effective in decreasing transmission risk behavior among HIV+ alcohol users in Haiti. Such scalable interventions addressing mental health and psychosocial factors are critical to decreasing alcohol problems and other factors driving the HIV epidemic.

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Impact of a cognitive behavioral intervention on changes over time in depression, alcohol problems, and sexual risk behaviors among HIV-positive Haitians

Main author: Michele Jean-Gilles, Ph.D., Florida International University

Rhonda Rosenberg, Ph.D., Florida International University Anshul Saxena, M.P.H., Ph.D.[c] Florida International University Judith Stein, Ph.D., University of California at Los Angeles Jessy G. Dévieux, Ph.D., Florida International University

**Objective:** This study tested the effectiveness of a cognitive-behavioral intervention for reducing transmission risk behaviors among HIV+ alcohol users in Haiti.

Background: Within the Caribbean, Haiti has the highest number of adults living with HIV. Systemic institutional factors, coupled with sociocultural and behavioral sexual norms require interventions that address the psychosocial factors associated with risky behaviors.

Methods: A cognitive-behavioral intervention designed to reduce sexual transmission risk behaviors was implemented among a sample of 145 HIV-positive Haitians; 126 controls were on a waiting-list for the CB intervention (total N = 271). Data were collected at baseline, post-intervention, and 3- and 6-month follow-up. A latent growth curve analysis was used to assess whether the rate of change from baseline in negative behaviors was associated with intervention status. The hypothesis was that reductions in negative coping styles (e.g., giving up, avoidance), alcohol problems, and depression, would have an impact on reduced number of sex partners and unprotected sex acts.

**Results:** Participation in the intervention predicted less negative coping over time than reported by the control group. Further, participation in the CB intervention had a significant indirect effect on less depressive affect and fewer alcohol problems (p < .01) than the control group. These effects were mediated through the negative

#### COMMUNITY PANEL



Lisa Agate, M.P.H.
Broward Regional Health Planning
Council, Inc.
Hollywood, Fl.

Ms. Lisa Agate is the program manager at Broward Regional Health Planning Council. She is the manager of the Centralized Intake Eligibility Determination (CIED). She also manages the Health Insurance Continuation Program (HICP) for Ryan White Part A. The CIED serves 7000 clients each year. Broward County has 2.8 million residents. The CIED serves as the centralized entry point for clients entering care and treatment for Ryan White Part A services. Her diverse team provides education and services on HIV, AIDS, and Hepatitis in Broward county. She has published in several journals for her work in HIV and diverse populations.

#### COMMUNITY PANEL



Brad Gammell
The Poverello Center
Ft. Lauderdale, Fl.

Mr. Gammell has worked in HIV services for more than 30 years. He has been with The Poverello Center since 1999 as the Program/ Quality Manager. He is chair of the Broward/Fort Lauderdale HIV Health Services Planning Council. He is a member of the Broward County HIV Prevention Planning Council. He is a member of the Transgender Medical Symposium Committee and the Food is Medicine Coalition and Food is Medicine Broward. He participates in ongoing training with the United States Conference on AIDS, the National Quality Center, and the National Symposium for Advocacy Capacity Building Project. Mr. Gammell has worked since 1987 for the NAMES Project Foundation, AIDS Memorial Quilt. In 2005, he acted as the Chapter Program Coordinator in Atlanta, GA. Mr. Gammell was recognized at the national, state and the local levels for his work in HIV/AIDS. Most recently by the Broward County Board of Commissioners.

reported no medication effect. To address barriers and facilitators in reducing drinking that may exist in real world settings, the women identified feelings of embarrassment, lack of access to transportation, or being in denial as potential barriers. On the contrary, the women described having social support, willingness to change, and proven efficacy of treatment as facilitators to help reduce their drinking.

Conclusions: Results indicated that a reduction in drinking for women participating in the clinical trial may have been influenced by factors other than the study medication. Developing interventions that combine medication to reduce drinking with attention to social support and changing attitudes about drinking may yield more successful outcomes than medication alone.

Relevance: This abstract fits perfectly with the field of HIV and alcohol research. While hazardous drinking is very common among men, HIV-positive women who consume alcohol at hazardous levels face additional health consequences. While providing treatment to HIV-positive women in hopes of reducing their drinking has never been studied, many studies have shown that treatment such as Naltrexone may be effective in reducing hazardous drinking. While majority of the studies have seen success of using pharmacotherapy in men, studies seeking to assess its efficacy in women with HIV is needed.

A qualitative assessment of HIV-positive women's experiences in a randomized clinical trial to reduce drinking

Main author: Shantrel Canidate, M.P.H, Ph.D.[c], University of Florida

Christa L. Cook, Ph.D., M.S.N., R.N., APHN-BC, University of Florida Robert L. Cook, M.D., M.P.H., University of Florida

**Objective:** The purpose of this study was to qualitatively describe participant's experiences in a randomized controlled clinical trial of naltrexone vs. placebo to reduce drinking.

Background: Up to 20% of U.S. women consume alcohol at hazardous levels each year; however, women with HIV face additional individual and public health consequences. Interventions such as the prescription medication naltrexone have been effective in reducing drinking in non-HIV populations.

Methods: Using a qualitative approach, we interviewed 20 HIVpositive women after their final follow- up appointment. We sought
to explore their experiences associated with drinking and attitudes
and perceptions of participating in the clinical trial, and barriers or
facilitators associated with alcohol treatment outside of the
research setting. Throughout this study, participants and research
staff remained blinded to receipt of naltrexone or placebo. Data
were analyzed using methods consistent with content analysis.

Results: We identified three central themes in the analysis: changes in alcohol consumption level, effects of study medication, and Individual issues surrounding adhering to treatment. Most women reported a reduction in the amount of alcohol they consumed prior to enrollment. The women reported that the research study staff was influential in their ability to reduce or quit drinking. Next, the women described positive and negative effects of the study medication even though they were not aware if they were in the intervention or control arm. Some women reported that the medication helped to reduce or stop their drinking while others

## Cognitive impairment on risk behaviors among HIV+ adults over and under 50 who use alcohol

Main author: Jennifer Attonito, Ph.D., Florida Atlantic University

Anshul Saxena, M.P.H., Florida International University Karina Villalba, Ph.D., Louisiana State University Rhonda Rosenberg, Ph.D., Florida International University Michele Jean Gilles, Ph.D., Florida International University Jessy Dévieux, Ph.D., Florida International University

**Objective:** To understand the impacts of alcohol abuse and HIV on cognitive functioning of adults and identify which cognitive assessments might best predict impairment for this population.

Background: HIV-associated neurocognitive disorders (HAND) is a serious problem among persons living with HIV (PLWH) and affects episodic memory, information processing speed, attention, and psychomotor speed. HAND also affects treatment adherence, engagement in care, condom use, HIV/STD knowledge, and sex risk behaviors and is exacerbated by drug and alcohol abuse and mental illness.

Methods: Assessments were conducted as part of a group intervention to reduce risk among HIV-positive adults (N=271) with a history of alcohol abuse. Measures included: Color Trails Test 2, Short Category Test, Auditory Verbal Learning Test, sex trading behaviors, STD/HIV knowledge, condom use skills, number of unprotected sex episodes, total drinking and drug use. Linear regression assessed associations between NC instruments and risk/protective behaviors, controlling for age and degree of alcohol abuse (via AUDIT).

Results: The mean age of participants was 44.6 years old, 63% were male, 75% were Black, and 8.1% were employed. Average years living with HIV was 12.5. Seventy percent scored high on impairment, ≥1 SD below normative means on ≥2 NC measures.

Working memory became non-significant, while controlling for covariates. Though, when dichotomized into high vs. low WM, examination using ANCOVA revealed a significant main effect of WM on LSFG volume [F(6,50) = 5.6, p = .022, partial  $\eta^2$  = .101,  $r^2$  = .756]. The interaction between never having a history of AUD versus ever having a history of an AUD by high vs. low working memory function, significantly predicted LSFG volume [F(6,50) = 4.907, partial  $\eta^2$  = .089, p = .031].

Conclusions: LSFG volume was a significant predictor of working memory function. The results of the interaction suggest that never having a history of an AUD, along with high working memory function was related to significantly larger LSFG volume relative to having a history of AUD and any level of working memory function. Individuals with impaired working memory should be targeted for risk reduction interventions.

## Frontal neural correlates of working memory decline in hazardous drinkers living with HIV

Main author: Vaughn Bryant, Sc.M., University of Florida

Adam J. Woods, Ph.D., University of Florida
Eric W. Porges, Ph.D., University of Florida
Robert L. Cook, M.D., M.P.H., University of Florida
Christopher W. Kahler, Ph.D., Brown University
Andrew O'Shea, M.Sc., University of Florida
Peter Monti, Ph.D., Brown University
Karen Tashima, M.D., Brown University
Ronald A. Cohen, Ph.D., University of Florida

Objective: To examine volumetric differences among four specific brain regions in each hemisphere, specifically: 1) Which frontal gray matter region(s) were associated with working memory and 2) Among significant region(s) whether working memory remained a significant predictor of frontal structure(s), when controlling for covariates 3) whether hazardous drinking interacts with working memory as a predictor of frontal structure(s).

Background: The basic role of working memory (WM) has been defined as a form of memory that supports the temporary storage, maintenance, and manipulations of internal representations. WM abilities may be critical measures of frontal brain function, which are critically affected by drinking behavior in this population.

Methods: The sample included 66 people living with HIV from the Providence, RI area. Gray matter volume data was extracted from 3T high-resolution structural MRIs and analyzed using FreeSurfer standard regions of interest. Working memory was measured by the Letter Number Sequencing task. Alcohol Use Disorder (AUD) classification was determined using the AUDIT. Analyses were conducted using Multiple Linear Regression and Analysis of Covariance.

Results: Among the frontal regions examined, the left superior frontal gyrus (LSFG) was the only region that significantly predicted working memory function [Beta = .204, B = .190, SE = .091, p = .039,  $r^2$  = .191].

Split by high/low impairment, high impairment performed significantly worse on STD/HIV knowledge and condom skills. When split by age (<50 years old and 50+), older were more likely to display poorer condom skills and poorer HIV/STD knowledge than younger participants and were significantly more likely to be deemed impaired. The Color Trails Test 2 was the only measure that consistently predicted STD/HIV knowledge, sex trading behavior and having ever had any STDs.

Conclusions: While NC impairment may not necessarily be reversed, certain cognitive remediation strategies, as well as avoidance of illicit drugs and alcohol, have been shown to help prevent onset or advancement of age-related cognitive decline. Antiretroviral treatments have markedly decreased HIV-associated dementia. These results highlight the importance of assessing cognitive skills early, utilizing appropriate tools like CTT 2. Risk reduction strategies may be tailored based upon type and degree of impairment.

## Linkage to Care and HIV positive individuals with a correctional facility: The Florida Cohort Study

Main author: Vanessa Ayala, BA, Florida Atlantic University

Gladys E. Ibanez, Ph.D., Florida International University Robert L. Cook, M.D., M.P.H., University of Florida Christa Cook, Ph.D., M.S.N., R.N., APHN-BC, University of Florida Jordan See, University of Florida Jaime Morano, M.D., M.P.H., University of Florida Zhi Zhou, M.P.H., University of Florida

**Objective:** To describe the characteristics and linkages to care for HIV positive individuals with incarceration history and who were diagnosed in correctional facilities.

Background: One out of 7 persons living with HIV/AIDS in the U.S. will go through the correctional system. The current HIV prevalence rate in correctional facilities is 4 times higher than in the U.S. population. The correctional system provides much needed healthcare services including HIV testing and linkage to care in the community upon release. It is unclear whether testing positive in a correctional versus a non-correctional settings leads to better linkages to care. Therefore, the proposed study will examine linkage to care for those diagnosed in a correctional settings compared to those diagnosed elsewhere.

Methods: The study utilizes data from The Florida Cohort Study, from which 651 participants with HIV have been enrolled across the state of Florida. Descriptive statistics (frequencies) and cross tabulations were conducted.

Results: Of the 651 participants currently enrolled, 69% (n=436) reported being incarcerated at least once. Those who reported being incarcerated versus never incarcerated were more likely to be non-Hispanic Black (68.6% vs 46.7%; p < .0001); more likely to have less than a high school education (37.4% vs 20.8%; p < .0001); more likely to be unable to work or disabled (53.5%, vs 39.85% p < .0001); more likely to live further than 1 hour away from their HIV care provider (19.1% vs 11.5% p < .0033); and are more likely to have an

HIV case manager (86.3% vs 75.7%, p=.0016).

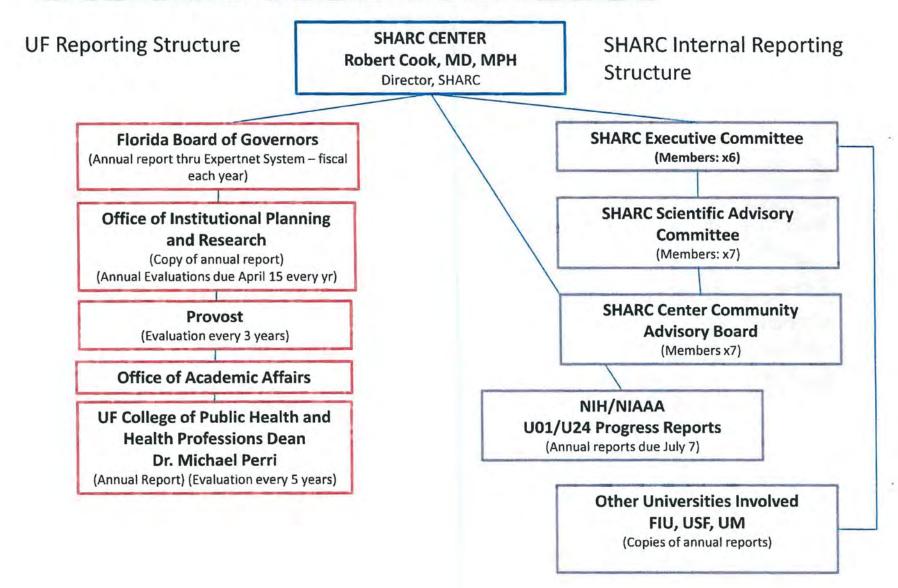
Conclusions: Although those who have been incarcerated are more likely to have a case manager, those diagnosed in a correctional facility took longer from testing to treatment. A better understanding of the treatment continuum among those persons diagnosed with HIV in correctional settings is needed.

Relevance: Because so many HIV positive individuals go through the correctional system in any given year, the correctional system is an ideal setting for the HIV interventions as well as health disparities research. Interventions promoting linkage to care will lead to better disease control.



# Center Proposal - Appendix F. SHARC UF Center Reporting Org Chart

# Organizational Chart SHARC (CENTER) Reporting Structure

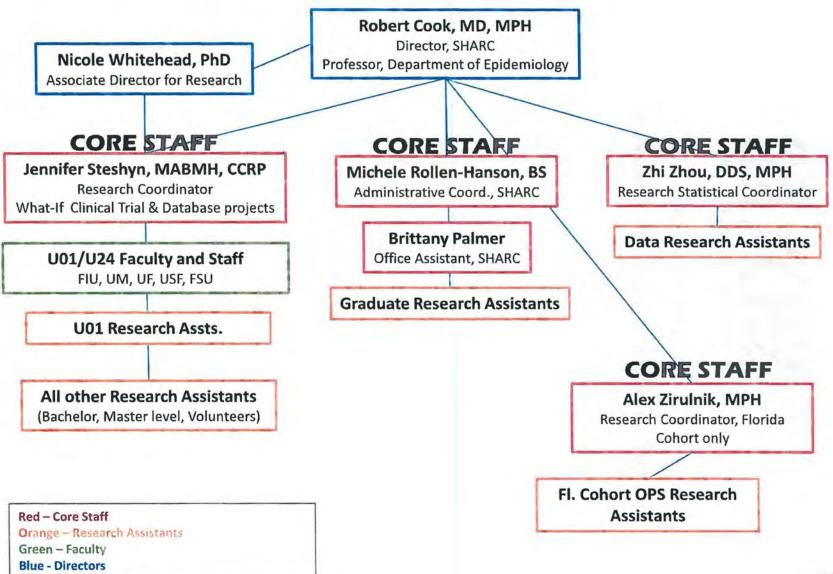




# Center Proposal - Appendix

G. SHARC Center Structure Org Chart

# **Organizational Chart SHARC STAFF and STUDENTS**





# Center Proposal - Appendix H. SHARC UF Affiliated Faculty, Staff, Students

Faculty			
1 Charisse V.	Ahmed	Peer Educator	Pediatrics, Immunology and Infectious Disease
2 Anastasia	Albanese-O'Neill	PhD, ARNP, CDE	College of Nursing
3 Lisa	Anthony	PhD	Computer & Info Science & Engineering
4 Babette	Brumback	PhD	Biostatistics - PHHP
5 Xinguang (Jim)	Chen	MD, PHD	Epidemiology - PHHP
6 Jeewon	Cheong		Health Education and Behavior
7 Ronald	Cohen	MD	Institute of Aging - Medicine
8 Robert	Cook	MD, MPH	Epidemiology - PHHP
9 Christa	Cook	PhD, MSN, RN, APHN-BC	Nursing
10 Linda	Cottler	PhD, MPH	Epidemiology - PHHP
11 Chris	Delcher	PhD	Health Outcomes & Policy - Medicine
12 Ashok	Dinasarapu	PhD	Pathology, Immunology, & Lab med Medicine
13 Mareen	Goodenow	PhD	Pathology, Immunology, & Lab med Medicine
14 Mark	Hart	PhD	Behavioral Science and Community Health - PHHP
15 Sumi	Helal	PhD	Computer & Info Science & Engineering
16 Jennifer	Janelle	MD	College of Medicine
17 Sriram	Kalyanaraman	PhD	Dept. of journalism
18 Janice	Krieger	PhD	Department of Advertising - Journalism
19 Chen	Liu	PhD	Pathology, Immunology, & Lab med Medicine
20 Robert	Lucerno	PhD	College of Nursing
21 Mildred	Maldonado-Molina	PhD	Health Outcomes & Policy - Medicine
22 Carla	Mavian	PhD	Dept. of Pathology
23 Haesuk	Park	PhD	Pharmaceutical outcomes and Policy
24 Eric	Porges	PhD	Institute of Aging - Medicine
25 Peihua	Qiu	PhD	Dept. of Biostatistics
26 Parisa	Rashida	PhD	Dept. of Biomedical Engineering
27 Marko	Suvajdzic		Digital Worlds Institute
28 Jalie A.	Tucker	PhD, MPH	Chair - Health Education & Behavior
29 Gary	Wang	MD	Colleg of Medicine
30 Nicole	Whitehead	PhD	Clinical and Health Psychology - PHHP
31 Adam	Woods	PhD	Institute of Aging - Medicine
32 Li	Yin	MD, PhD	Pathology, Immunology, & Lab med Medicine
Staff			
33 Jenna	Hansen	RN	Epidemiology - PHHP
34 Ezekial	Ojewale	MPH	Epidemiology - PHHP
35 Michele	Rollen-Hanson	BS	Epidemiology - PHHP
36 Jennifer	Steshyn	MABMH, CCRP	Epidemiology - PHHP
37 Zhi	Zhou	MPH, DMD	Epidemiology - PHHP
Students			
38 Samantha (Sam)	Abbott	BS Student	РННР
39 Vaughn	Bryant	PhD student	Clinical & Health Psychology - PHHP
40 Larry	Burrell, II	PhD student	PHHP
41 Shantrel	Canidate	MPH	PHHP
42 Dan	Chen	student	PHHP
43 Eugene	Dunne	PhD Student	PHHP
43 Lugene	Dunie	The student	73101

76 Chukwuemeka

77 Danielle

79 Alexander

78 Wenru

Okafor

Sharpe

Zirulnik

Zhou

44 Elizabeth	Fehlberg		Nursing
45 Shanjun	Helian	Biostats student	РННР
46 Andre	Hook	Masters student	Nursing
47 Mustapha	Kamara	Masters student	Epidemiology - PHHP
48 Natalie K.	Chichetto	PhD Student	Epidemiology - PHHP
49 Arielle	Konen	Undergrad student/MPH	РННР
50 Ralph	Lamonge	Undergrad student	РННР
51 Stephanie	Lee	PhD student	РННР
52 Zachary	Mannes	PhD student	PHHP
53 Raed	Narvel	student	
54 Jordan	Neil	Grad student	College of Journalism
55 Brittany	Hodik	student	
56 Sinyeung	Park	student	HSRMP - PHHP
57 Joseph	Sacht	BS Student	
58 Leandra	Stubbs	student	
59 Fangyu	Su	student	
60 Matthew	Von Zimmerman	MPH student	Epidemiology - PHHP
61 Mengxiong	Wang	MPH student	Epidemiology - PHHP
62 Alexandra	Wang	student	
63 Akemi	Wijayabahu	student	Epidemiology - PHHP
64 Maryann	Zacharias	BS Student	Biology
65 Xingrui N	Zhang	student	
66 Shuo	Zhang	Biostats student	
SHARC Alumni	- Graduated or Moved	on	
67 Emily	Harry	BS	РННР
68 Wajiha	Akhtar	PhD Student	Epidemiology - PHHP
69 Calvin	Cortes	MPH	Epidemiology - PHHP
70 Marya	Denmark	Data analyst	Epidemiology - PHHP
71 Ashley	Donnelly	BS	MPH program - PHHP
72 Cesar	Escobar-Viera	PhD Student	HSRMP - PHHP
73 Matt	Guzy	<b>Graphic Design Student</b>	Graphic Design, College of Fine Arts
74 Petta-Gay G.	Hannah	PhD candidate	Liberal Arts and Sciences
75 Jon C.	Mills	PhD Student	HSRMP - PHHP

PhD Student

student

МРН, СРН

MPH

Epidemiology - PHHP

MS in Epidemiology

Epidemiology - PHHP Epidemiology - PHHP



Center Proposal - Appendix

I. Grants Submitted

	SHAR	C-related Training g	grants submitted by Center Memb	ers, 2014-2015		
Grant, Agency	PI, Department	SHARC Mentors	Торіс	Date Submitted	Status	Amount
F31	C. Okafor, Epidemiology	R. Cook, X. Chen, R. Cohen, M. Goodenow	Impact of Long-term Marijuana Use on the Neurocognitive Functioning of Individuals Living with HIV/AIDs	2014-2016	Funded	\$113,784
F31 NIAAA	V. Bryant, Clinical Health Psychology	R. Cohen, N. Whitehead, A. Woods	Working Memory: A critical factor underlying alcohol reduction intervention response	2014-2016	Funded	\$113,784
F31 NIAAA	N. Kelso, Epidemiology	R. Cook, Chen, Whitehead	Alcohol consumption Patterns on Cardiovascular Health in Persons Living with HIV	2015-2017	Funded	\$113,097
NIH Diversity Supplement	S. Canidate, PhD Public Health	R. Cook, C. Cook.	Qualitative study of the U01 clinical trial	2014	Funded	\$107,461
R36 AHRQ Dissertation grant	J. Mills, Health Services Research	R. Cook, J. Harman	Comparative Effectiveness of Single-Action vs Multi-Action Antidepressants	2015	Not funded	\$40,000
CTSI K Scholar	N. Whitehead, Clinical Health Psychology	R. Cook	Substance use Intervention for Older Underserved HIV+ Adults in the Primary Care Setting	2014	Funded	\$233,750
K99/R00, NIDA	Porges, Aging	R. Cook	HIV, Alcohol and the brain	2015	Not funded	\$
CTSI TRACTS Award	C. Cook, College of Nursing	L. Cottler, CTSI	Substance use and linkage to care	2014	Awarded	s
UF Office of Research	Cook, Epidemiology	N/A	SHARC Conference, Gainesville, FL. 2015	2014-2015	Funded	\$3,000
R13 NIH NIAAA	Cook, Epidemiology	N/A	SHARC Conference Grant, Gainesville, FL 2015	2014-2015	Funded	\$10,000
K23 NIDA	N. Whitehead	R. Cook, L. Cottler, X. Chen	Mentored Patient Oriented Research Career Development Award	2015	Score 19, awaiting council	\$

SHARC-related Research grants submitted by Center Members, 2014-2015								
Type, agency	PI, department	SHARC collaborators	Topic	Year/s	Result	Amount		
R01	J. Chen, Epidemiology	R. Cook	New method to obtain reliable data for survey research by reducing social desirability bias	2016-20	Under review	\$1,500,000		
221	M. Prosperi,	manni fran 1	Effects of Alcohol Abuse on Plasma and		Pending IRG	\$277 D27		

N/L	Epidemiology	M. Salemi,	Adults on Effect ART	\$ 2010-2017	Review	3311,744
R21 NIDA	M. Prosperi, Epidemiology	R. Cook	The FIDES: Florida-Italy Drug use and abuse Entourage Study group	2015-16	Not funded	\$377,922
R13 NIAAA	R. Cook	N/A	SHARC Conference grant	2014-15	Funded	\$10,000
R01, NIAID	C. McCarty, Anthropology	R. Cook, C. Cook	A network approach to early detection of HIV outbreaks using a state STD surveillance database	2014-19	Not funded. (Resubmit Jan. 2016)	
P50 NIAAA	R. Cohen, Aging	R. Cook, A. Woods		2015-20	Funded	
R25 NIAAA	T. Barnett Epidemiology	R. Cook, C. Cook, M. Hart	Alcohol training center: an inter- professional approach	2015-20	Funded	
R01 NIH	L. Cottler	R. Cook	Reducing Heavy Drinking and Prescription Drug Misuse Among Older Women	2015-2020	Not Funded	\$322,777
R01 NIA	R Cohen, Aging	R. Cook	HIV and the Aging Brain	2014-19	Not funded	
R01 NIDA	R. Cook, Epidemiology	B. Brumback	Health effects of marijuana use in persons living with HIV/AIDS	2016-2021	Under review	\$3,599,405
P01, NIH 2P01AA019072- 06	P. Monti Brown University	R. Cook	Alcohol and HIV: Biobehavioral Interactions and Interventions	2015-2020	Funded	\$163,577
UM-Miami, state subcontract	M, Stevenson, CFAR, UM	R. Cook	Promote and coordinate high-impact HIV/AIDS Research in South FL	2015-2016	Funded	\$24,923
The AIDS Institute	R. Cook, Epidemiology	C. Escobar	Health Manager usage and acceptability by a cohort of HIV clinic patients, FL	2015	Funded	\$12,000

			SHARC-related Training gran	nts planned for sub	mission 2016		
Grant	PI, Department	Mentor/s	Topic	Expected submission	Date Submitted	Amount Requested	Dates
K23	C. Cook, Nursing	L. Cottler	Enhancing HIV Linkage to Care	May-16		ТВА	
Т32	R. Cook, Epidemiology	тва	SHARC Training Grant	7-Sep-16			2017-2022

SHARC-related Research grants planned for submission 2016								
Grant	PI, Department	SHARC (UF) Collaborators	Topic	Expected submission	Date Submitted	Amount Requested	Dates	
UO1 NIAAA	R. Cook, Epidemiology	B. Brumback, R. Cohen, E. Porges, A. Woods, V.	Effects of experimentally-induced reductions in alcohol consumption on brain cognitive, and clinical outcomes and motivation for changing drinking in older persons with HIV infection	Jan-16	submitted Jan. 15, 2016	\$3,599,405	07/01/2016-06/30/2021	
UZ4 NIAAA	Cook, Epidemiology	SHARC Administrative grant	SHARC Admin Core	Jaπ-16	submitted Jan. 15, 2016	\$ 2,123,791.00	07/01/2016-06/30/2021	
U24 NIAAA	C. Kahler, Brown Univ.	B. Brumback, R. Cook	Behavioral Science and Biostatistics Resource Core for Alcohol-HIV Research	Jan-16	submitted Jan. 15, 2016	\$3,758,165.42	07/01/16-06/30/2021	
<b>CDC</b>	G. Wang, Medicine	R. Cook	Early HIV Treatment to Optimize Patient Health and HIV Prevention	2016-2020	Submitted 02- 19-16	\$ 4,697,123.00	09/30/2016-09/29/2020	
RO1 NIDA	R. Cook, Epidemiology	ТВА	Health effects of marijuana use in persons living with HIV/AIDS	May-16		\$ 250,000.00	09/2016-08/2021	
R21 NIH	Salemi/ Prosperi	R. Cook	micro RNA expression and HIV	16-May	Submitted May 2016	\$ 150,000.00	12/1/16-11/30/16	
K01	Yan Wang	R. Cook	Social captial and HIV in China	Mar-16				
RO1 NIH	Prosperi	R. Cook	A social and phylogenetic network approach to 'precision' modeling of HIV prevention, with integration into surveillance systems	May-16	Submitted May 2016	\$284,752,00	12/1/16-11/30/2021	



Center Proposal - Appendix

J. Space

Space APPENDIX J

Existing Space for SHARC Cook, Robert	Director	CTRB 4232
Jennifer Steshyn	Research Coordinator	CTRB 4247
Michele Rollen-Hanson	Administrative Coordinator	CTRB 4233
Zhi Zhou	Statistical Coordinator	CTRB carrel
Natalie Kelso	F-31 Funded PhD student	CTRB carrel
Emeka Okafor	F-31 Funded PhD student	CTRB carrel
Part-time staff/ Shantrel Canidate	Persons funded from NIH grants/ NIH diversity scholar	CTRB carrel
Alex Zirulnik	Florida Cohort Coordinator	EPI office xxx
Ezekiel Ojewale	Research assistant	EPI carrel
Cesar Escobar	Research assistant	EPI carrel
Recruitment staff		EPI carrel
Intern 1		CTRB common room
Intern 2		CTRB common room
Part-time staff		CTRB common room



# Center Proposal - Appendix

K. Funding Support Commitment Letters



Dean, College of Medicine Folke H. Peterson/Dean's Distinguished Professor

PO Box 100215 Gainesville, FL 32610 352-273-7500 Phone 352-273-8309 Fax

January 11, 2016

Robert L. Cook, MD, MPH Professor Department of Epidemiology PO Box 100231

Dear Dr. Cook:

It is with great pleasure that I provide you with this letter of strong College support for your efforts to renew your NIH-funded U24 grant entitled, "Southern HIV Alcohol Research Consortium (SHARC): Administrative and Research Support Core". SHARC not only is engaged in specific research projects, but has emerged as a hub of research activity supporting research and training and collaboration across Florida. The SHARC at University of Florida is one of five national HIV-alcohol consortia supported by NIAAA.

The outcomes of your research will emphasize critical aspects of the epidemic in Florida, which has the highest rate of new HIV infections in the United States. Given the aging population in Florida, HIV viral suppression, brain functioning associated with aging, and HIV comorbidities including liver disease, will be a primary research focus. You have assembled an outstanding interdisciplinary team with expertise spanning General Internal Medicine, Epidemiology, Infectious Disease, Gastroenterology and Clinical & Health Psychology.

As Dean of the College of Medicine, I can ensure the necessary infrastructure and resources to enable completion of your proposed studies. In addition, should this grant be renewed, the College of Medicine's Dean's Office will provide matching funds of \$5,000 per year for the grant period. It is understood that the UF Office of Research, UF Health Sciences Center and the UF College of Public Health & Health Professions will also provide funds to support this U24 grant.

We wish you success with your application.

Sincerely,

cc:

Michael L. Good, MD Dean, College of Medicine

Linda B. Cottler, PhD, MPH

Alicia Brennan

The Foundation for The Gator Nation

An Equal Opportunity Institution

Stephen P. Sugrue, PhD

Senior Associate Dean for Research Affairs



Office of the Vice President for Research

223 Grinter Hall PO Box 115500 Gainesville, FL 32611-5500 352-392-1582 Fax 352-392-9605

January 12, 2016

Robert L. Cook, MD, MPH Professor Department of Epidemiology PO Box 100231

Dear Bob,

It is with great pleasure that the University of Florida supports your efforts to renew your NIH-funded U24 grant entitled, "Southern HIV Alcohol Research Consortium (SHARC): Administrative and Research Support Core". SHARC has emerged as a hub of research activity supporting research and training and collaboration across Florida. The SHARC at University of Florida is one of five national HIV-alcohol consortia supported by NIAAA.

The outcomes of your research will emphasize critical aspects of the epidemic in Florida, which has the highest rate of new HIV infections in the United States. Given the aging population in Florida, HIV viral suppression, brain functioning associated with aging, and HIV comorbidities including liver disease, will be a primary research focus. The faculty contributing to the SHARC effort includes members of multiple colleges ranging from Journalism to Medicine, from diverse disciplines such as communications to Immunology.

We look forward to SHARC's establishment as a center at UF, and to other collaborative and training grants that you plan to pursue. As you know, the Office of Research has already been supporting SHARC by providing resources for your 2015 conference in Gainesville. In addition, should this grant be funded, the Office of Research will provide \$15,000 per year for 5 years. Along with investments from the Colleges of Medicine, Public Health and Health Professions, and the office of the Vice President for Health Affairs (totaling another \$15,000 per year), these funds are to be utilized to support pilot studies, travel for students, publications and presentations, and the extension of your research activities into the Jacksonville campus of UF Health.

We wish you success with your application.

Sincerely,

Dr. David P. Norton Vice President for Research



1515 SW Archer Road, Suite 23C1 Gainesville, FL 32608 P.O. Box 100014 Gainesville, FL 32610-0014 Phone: 352.733.1800 Fax: 352.733.1807

UFHealth.org

December 23, 2015

Robert Cook, MD
Department of Epidemiology
University of Florida Health Science Center
Gainesville, FL 32610

RE: Southern HIV and Alcohol Research Consortium (SHARC)

Dear Bob.

I am pleased to provide you with this enthusiastic letter of support for the renewal of the SHARC Program. Your program provides a focus for HIV-related research here at the University of Florida, as AIDS remains an important health burden for our State and region. Your consortium of academic institutions brings access to an array of Scholars and populations in the HIV field.

The University of Florida Health Science Center, with its six Colleges and nine Institutes brings considerable resources that can be accessed by your consortium. You have already secured collaborations from our Clinical and Translational Science Institute and our PCOR-Net/One Florida Data Trust. My office is pleased to offer you \$5,000/year for the years funded by the SHARC grant for general use by your program. We would be especially interested that these funds be used to initiate/support programs in Jacksonville, where the College of Medicine has a campus.

My office is also excited about supporting your future development of training programs funded by NIH Training Grants (T32). We have a wide variety of resources for organizing and funding training grants in our T32 Grant Writer's Toolkit, including consultation in Educational Design and Evaluation, Mentor Development Programs, follow-up of recent graduates, etc. We would be pleased to make these resources available to training programs such as proposed by SHARC.

Best regards,

Thomas A. Pearson, MD, MPH, PhD

Executive Vice President for Research and Education

Professor of Epidemiology and Medicine

UF Health

Patient Care . Research . Education



College of Public Health and Health Professions Office of the Dean 1225 Center Drive PO Box 100185 Gainesville, FL 32610-0185 352-273-6214 http://phhp.ufl.edu

January 13, 2016

Robert L. Cook, MD, MPH Professor Department of Epidemiology

Dear Dr. Cook:

We are happy to provide you with this letter of strong College support for your efforts to renew your NIH-funded U24 grant entitled, "Southern HIV Alcohol Research Consortium (SHARC): Administrative and Research Support Core." The SHARC at the University of Florida is one of five national HIV-alcohol consortia supported by NIAAA and is engaged in specific research projects, being a hub of research activity for research, training and collaboration across Florida. The outcomes of your research are emphasizing critical aspects of the HIV epidemic in Florida, which has the highest rate of new HIV infections in the United States. Given the aging population in Florida, you are emphasizing HIV viral suppression, brain functioning associated with aging, and HIV comorbidities including liver disease as primary focus areas of your research. You have assembled an outstanding interdisciplinary team with expertise spanning general internal medicine, epidemiology, infectious disease, gastroenterology and clinical and health psychology.

As Dean of the College of Public Health and Health Professions, and Associate Dean for Research and Chair of the Department of Epidemiology, we will ensure the necessary infrastructure and resources to enable completion of your proposed studies. In addition, should this grant be renewed, the College of Public Health and Health Professions' Dean's Office will join the College of Medicine, and provide matching funds of \$5,000 per year for the grant period. It is understood that the UF Office of Research will also provide funds to support this U24 grant. We wish you success with your application.

Sincerely,

Michael S. Perri Michael G. Perri, PhD

Dean

College of Public Health and Health Professions

Linda B. Cottler, PhD, MPH Associate Dean for Research

Chair, Department of Epidemiology

cc: Steve Sugrue



# Center Proposal - Appendix

L. Budget

UF INTERNAL BUDGET

TOTAL BUDGET for CENTER (Expenses)

Expe	nses
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PERSONNEL	Year 1 (2515-2016)	Year 2 (2016-2017)	Year 3 (2017-2019)	Year 4 (2018-2013)	Year 5 (2015-2020)	
Nems	150,000 10% 15,000 4,170 19,170 55,900 100% 55,000 17,490 72,460 53,500 100% 53,500 17,013 70,513 53,000 100% 33,000 1,287 34,23	58 950 100% 59,850 18,015 74,665 55,105 100% 55,105 17,523 72,623 33,990 100% 33,990 1,326 35,316 15,450 100% 15,450 147 15,927	Base Salary Frings Total 20,758 15% 20,564 5,748 20,758 15% 20,564 5,748 20,513 10%,132 10%,13	Base Salary Fringe Total Salary Fringe Total 200,870 15% 31,461 5-000 38,950 163.839 10% 163.839 10% 163.839 10% 163.839 10% 163.839 10% 163.83 10% 50,461 142.31 77,922 36,080 10% 36,080	9, Total 216,000 10% 32,025 6,874 38,000 10% 32,025 6,874 38,000 10% 32,025 6,874 38,000 100 100 100 6,8,000 10,800 10,805 81,500 60,214 100% 60,214 100% 60,374 10,146 35,000 10,240 10,146 35,000 10,000 10,000 10,146 35,000 10,000 10,000 10,146 35,000 10,000 10,000 10,146 35,000 10	AB Years 141,620 89,201 307,272 285,000 143,444 63,757 963,537
Center External Advisory Board Speaker Honorscrip	1,000 2,000 Consultant Total 3,400	2,000	1,000 2,000 3,900	1,000 2,000 1,000	1,000 2,000 3,000	4,000 8,000 12,000
TUITION Tried Student Tusion (24 cred4 hry 4 \$471 pr hr) 5% e-scaleison in all years	Tuition Total			1	54	4
MATERIAL AND SUPPLIES Material/Adverture	5.00	5.000	9,000	5,000	5,000	20,000
	Meterials and Supplies Total 6,00	9,000	8,900	3,000	5,660	29,000
TRAVEL Fravel for Cerior Speakers Travel visibus Florida	5 500 2 200 Travel Total 7,00	2,000	5,000 2,000 7,000	2,000	2 000	20,000 10,000 50,000
OTHER EXPENSES  Abbestions  Ornoval Research Mening  Omnyelors for key saall  Omnyeline weze copiny and research support	4,000 10,000 2,000 5,000 5,000 Other Expenses Total 21,00	10 900 2 900 5 900	4,000 10,000 2,000 5,000 21,160	16 000 2,000 5,000	10,000 2,000 5,000	20,000 40,000 8,000 20,000 88,000
URCONTRACTS (C. s. sharped on find Jobs of EACH automosis: escription	Subcontracts Total		3	3		-
	TOTAL DIRECT COSTS 281,58 DIRECT COST BASE 281,58 TOTAL MORECT COSTS 50%	TOTAL WORSECT COSTS 288.917	DIRECT COST BASE 250 600 TOTAL INDIRECT COSTS	TOTAL DIFECT COSTS 304,325 DIRECT COST BASE 304,325 TOTAL INDRECT COSTS	TOTAL DRECT COSTS 212,364	1,493,660 1,463,660 1,463,660
IMCOME	Year 1 (2016-2017)	Year 2 (2017-2018)	Year 3 (2018-3018)	Year 4 (2019-2020)	Year 5 (2025-9012)	
<u>Grants</u> <u>IDC Return</u> U <u>PC Statl-up Support</u> Department of Epidemiology Support	5 235,00 8 7,50 8 30,00	s 10,00	\$ 235,000 \$ 12,50 \$ 30,000	\$ 15,000	B 17,500	1,175,000 62,500
Other support (e.g. contracted work)	s 10,00	3 16 00	s 20 000	1 25.0%	\$ 10 DOO	100 000
PROFIT GARRY-OVER		3 84	1 104		\$ 680	2.70
		5 64	\$ 03	2 5 20	\$ 580	4 635

## Form 1

## University of Florida Engineering Leadership Institute

## **Proposed Implementation November 2016**

The submission and signing of a proposal to initiate a State of Florida institute/center or the establishment of a University institute/center constitutes a commitment by the university(ies) to ensure that the institute/center's activities support the stated mission(s) and goals of the institution(s).

University of Florida	Dr. Kent Fuchs	10/3,/16
University Submitting Proposal	President	Date
	Dr. Joseph Glover	Date 10/23/16
University of Florida		
Type of Institute/Center	Senior Vice President	Date
November 2016	Dr. David Norton	<u> </u>
Proposed Implementation Date	Vice President for Research	Date
	Dr. Cammy Abernathy	RI 10/13/10
Associated Discipline (2-digit CIP)	Dean of School or Collage	Date
LTG (ret) Franklin Hagenbeck	Thicked V. Nople	10/31/14
Proposed Institute/Center Date Director (if known)	Vice President and Chief Financial Officer (as appropriate)	Date

## Form 2

## Institute/Center Data

Directory Information							
I/C Name:	Uni	University of Florida Engineering Leadership Institute					
I/C Code:		University: Univ	ersity of Florida	I/C Type: University			
I/C Director:	LTG (r	et.) Franklin Hagenbeck		Discipline(s) (2-Digit CIPs):			
I/C Address:	311 Weil Hall, PO Box 116 Gainesville, FL 32611-655						
I/C Telephone:	352-392-7047	I/C E-Mail Addres	s: <u>flhage</u>	enbeck@eng.ufl.edu			
I/C SUNCOM:		I/C Web Site Addre	ss: <u>www</u> .e	ng.ufl.edu/leadership			
I/C FAX:	352-392-9673	Affiliated Universiti	es: Un	iversity of Florida			
Mission Statement: (No more than 120 words)	of Engineering Powering the character-focused, and creat roles in society. The Engine at the national forefront of the	e New Engineer initiative leaders that bring crering Leadership Institute ransforming the way the burce of education and top meet the College's go	re is to focus on creatitical, value-added peter will support the Uttengineers impact straining in engineerinals of achieving except	erspectives to all engineering iniversity of Florida in being ociety through their g leadership, the Engineering ellence through			
Key Terms:	engineering	leadership		engineers			
Rey Terms:	creative	principled	cl	naracter-focused			

Form 3

I/C Code:		I/C Name:	: University of Florida Engineering Leadership Institute			ship Institute
Prepared By:	Franklin Hagenbeck	Date:	10/13/2016	Telephone:	352-39	2-7047
Estimated Expenditures for the Institute/Center		FISCAL YEAR: Budgetary Unit:*		<b>2016/2017</b> E&G		
		SUS Appropriated Funds	Contracts and Grants	Fees for Services	Private (Developm ent)	Total
Salaries & Benefits	Faculty, TEAMS, & USPS	126,900			28,445	155,345
Other	Housestaff	75,320				75,320
Personal	Graduate Assistants					
Services	Other**				59,180	59,180
Expenses					30,000	30,000
Operating Capital Outlay						
Total Expenditures		202,220		M. di	117,625	319,845

Positions and Rate	SUS Appropriated Funds	Contracts and Grants	Fees for Services	Private & Other (Specify)	Total
Faculty Positions (FTE in Personyears)	1.00				1.00
TEAMS and USPS Positions (FTE in Personyears)				0.50	0.50
Total Positions (FTE in Personyears)	1.00			0.50	1.50
Sum of Salary Rates for These <u>Faculty</u> Positions	126,900				126,900
Sum of Salary Rates for These <u>TEAMS and USPS</u> Positions				28,445	28,445
Sum of Salary Rates for Faculty, TEAMS, and USPS Positions	126,900			28,445	155,345

<sup>\*</sup> Budgetary Unit: Specify E&G, IFAS, or UF-HSC

<sup>\*\*</sup> Primarily Adjunct Instructors with industry experience recruited by ELI to deliver leadership curriculum

# UNIVERSITY OF FLORIDA INSTITUTE PROPOSAL UF Engineering Leadership Institute

A. **Mission Statement and Goals:** The mission of the center should be defined and the goals for research, teaching and public service explained. All three elements are not required for a center to be established but should be identified when they are anticipated to be part of the mission.

## Mission Statement:

The Mission of the UF Engineering Leadership Institute in support of the Herbert Wertheim College of Engineering *Powering the New Engineer* initiative is to focus on creating principle-based, character-focused, and creative leaders that bring critical, value-added perspectives to all engineering roles in society. The Engineering Leadership Institute will support the University of Florida in being at the national forefront of transforming the way that engineers impact society through their leadership. As the central source of education and training in engineering leadership, the Engineering Leadership Institute will help meet the College's goals of achieving excellence through interdisciplinary research, education and fostering a culture of leadership throughout the faculty, students and staff.

## Goals:

As outlined in the Engineering Leadership Institute (ELI or the Institute) Mission Statement, the Institute is focused on supporting the Herbert Wertheim College of Engineering (HWCOE) and UF strategic plans through support of the institutions' research, education and outreach functions.

The ELI, in collaboration with the UF Engineering Innovation Institute (EII) is building programs that specifically focus on the following goals for each element:

- Research: Society as a whole as well as academia's primary research funding sources (private and public) are looking to leading academic institutions to provide greater focus on the impacts of the institutions' fundamental research endeavors. UF was granted over \$724M in research awards last year, with almost \$80M of that granted to faculty in the HWCOE. The College's primary federal funding sources (e.g. NSF, DoD, NASA, DoE) are focusing more and more on the application of research outcomes and translation / commercialization of those outcomes to benefit society as a whole. In concert with EII, ELI will assist in developing programs that will support faculty in responding to myriad research funding opportunities, especially those with significant engineering leadership or industry collaboration elements (e.g. NSF Engineering Research Center program; NIST National Network for Manufacturing Innovation).
  - o Goal: Support faculty to successfully win federal funding awards with strong elements of engineering or scientific leadership such as effective teamwork, communications, ethics, professional practice and project management. The Institute will track and report metrics with regard to support of faculty research proposals and funding.

- Goal: Provide support to faculty through connections to engineering industry leaders and practitioners that can support their research programs.
   The Institute will track and report metrics with regard to connections made to industry practitioners and leaders to benefit HWCOE faculty and students.
- Teaching: Traditional engineering educational models have been built on providing technical depth to students in a single discipline of study, with little exposure to other disciplines or skills that are critical for engineers to succeed as leaders in today's fast changing world. The academic educational model relying solely on delivery of technical depth in a field of study means that graduates enter a marketplace unprepared to work in interdisciplinary teams that are solving engineering problems involving myriad technical and non-technical challenges. The HWCOE is strategically building inter-disciplinary research and education programs that benefit faculty and students across the College and UF campus. The HWCOE is strategically focused on systematically preparing The New Engineer, who is a leader, ethical and principled, creative, grounded in a humancentered approach, focused on innovation and discovery, interdisciplinary, dynamic, a contributor to the economy and a contributor to the global community. ELI supports that strategic direction through educational programs that provide undergraduate, graduate and working professional students with curricular and experiential offerings to gain and exercise engineering leadership skills that serve them during their time at UF and wherever they go post-graduation.
  - O Goal: Build programs to understand the engineering student leadership skills gaps between our stakeholder (e.g. industry, startups and small companies, academia) needs and HWCOE programs. The Institute will track and report metrics with regard to activities to identify engineering leadership related skills gaps between industry and HWCOE programs.
  - o Goal: Build and deliver nationally leading curricular and experiential offerings in engineering leadership to prepare *The New Engineer* for positions in the industry, academia, non-profit, and government sectors. The Institute will track and report metrics with regard to curriculum and experiential education activities and offerings compared to national standards of excellence.
- Outreach / Public Service: The State of Florida and the nation are placing a greater focus on leading academic institutions such as UF in terms of potential economic impact that the university can produce. UF is the land-grant and flagship university in Florida and has a responsibility to proactively serve the citizens and industry of Florida. Traditional means of meeting this mission have included producing graduates well prepared to contribute to the state's industrial sectors, as well as producing a pipeline of technology for the state's entrepreneurs and companies to commercialize and convert to high-value products and services. ELI, working with EII, will support these efforts through programs focused on private sector collaboration and economic impact.
  - o Goal: Increase the quality and quantity of engineering graduates who

assume leadership roles in diverse career paths including the private sector spanning high tech industries, the public/government sector, non-governmental organizations (NGOs) and the academic sector. The Institute will work with UF entities such as the UF Alumni Association to track and report metrics with regard to student graduates taking leadership positions.

B. **Proposed Activities:** Describe the activities that are planned for the center (e.g., collaborative research on the topic of (X); the intent to generate interdisciplinary resources, to design courses, to develop an interdisciplinary graduate program, attract postdoctoral fellows, create a lecture series; to establish a core service facility, provide greater focus and depth to a research area, etc.). Explain the plans to apply for external funding and identify the relationship of the center's activities with those of departments and/or other centers. Describe the advantages of the center over current structure (what unmet needs will be satisfied by having the center?) and the value of the center to the University and to the reporting unit.

HWCOE leadership has designed the ELI programs and activities to directly support the ELI Mission and Goals outlined above – focusing specifically on impacting engineering student and faculty leaders and producing real and sustained economic impact for the State of Florida and the nation. In the initial design of the Institute program offerings, HWCOE leadership took a Gap Analysis approach to understand:

- 1. The unmet needs of myriad stakeholders including the private sector, public sector (state and nation), and academia in terms of skills in engineering graduates;
- 2. The desired outcomes (Students, Faculty, Economic Impact) from ELI programs to meet those unmet needs, and;
- 3. The gaps in current HWCOE leadership-related programs to produce those desired outcomes.

## This Gap Analysis included:

- 1. Reviewing published research, surveys, and reports regarding unmet needs in the common skill set of engineering graduates,
- 2. Interviewing leadership of nationally recognized programs in Engineering Leadership with regard to critical skill sets on which they focused and best practices in program development, and;
- 3. Interviewing industrial leaders with R&D, Product Line, HR and Leadership Development experience with regards to their perception of skill gaps.

Through these findings, the HWCOE leadership was able to outline a spectrum of programs and activities to help fill those gaps (Table 1). Many of these programs and activities have been initiated and they will continue to evolve over time to meet stakeholder needs. Implementation of the programs and activities are coordinated with the EII as well as within other groups of the HWCOE.

Table 1-Summary of Key ELI Programs and Activities

ELI Programs/Activities	Main Cons	B/T-i A
(no priority order)	Main Gaps Addressed	Main Areas of
Engineering leadership	Lack of leadership-related	Collaboration
curriculum for	background, skills and	Departments within HWCOE; Engineering
undergraduate / graduate	experiences within	Innovation Institute;
students and working	engineering context	Institute for Excellence in
professionals (basic and	chighteering context	Engineering Education;
advanced courses)		Advisory Boards
Certificate of Engineering	Development of	Institute for Excellence in
Leadership for both	engineering graduate	Engineering Education;
undergraduate and graduate	leaders within the	Dean's Office
students	HWCOE	Beam's Office
Establishment of	Development of	Dean's Office; Office of
scholarship programs for	engineering graduate	Development and Alumni
engineering leadership	leaders within the	Affairs
r - G	HWCOE	
Establishment of	Promotion of engineering	Departments within
Engineering Student	leadership curriculum and	HWCOE; Key engineering
Leadership Advisory Board	training programs;	student leadership groups
	Development of	T & S S S S
	engineering graduate	
-	leaders within the	
	HWCOE	
Establishment of Advisory	Development of	Dean's Office; Office of
Board for ELI	engineering leadership-	Development and Alumni
	based curriculum;	Affairs
	Strategic Program	
	Direction; Industry needs	
	assessment	
Establishment of Leader-in-	Development of	Dean's Office; Office of
Residence program	engineering graduate	Development and Alumni
	leaders within the	Affairs; Engineering
	HWCOE; Leadership	Innovation Institute
	training and mentoring;	
C- f1: 1 0:1	Experiential education	
Co-founding member of the	Development of national	Other COMPLETE
COMPLETE - Community	engineering leadership-	members; Engineering
of Practice for Leadership	based curriculum and	Innovation Institute;
Education for the 21 <sup>st</sup>	assessment models;	Dean's Office
Century Engineer, an	Development of	
association of universities	engineering graduate	
with topengineering	leaders within the	
leadership-based programs	HWCOE	
and initiatives		

Freshman engineering leadership initiatives	Promotion of engineering leadership curriculum and training programs; Development of engineering graduate leaders within the HWCOE	HWCOE undergraduate student advising group; Engineering Innovation Institute
Establishment of leadership symposia	Development of engineering graduate leaders within the HWCOE; Leadership training and mentoring	Dean's Office; Office of Development and Alumni Affairs; Engineering Innovation Institute

In order to make these programs successful in the near term and ultimately sustainable, ELI Leadership have developed budget models that provide for increasing support in the first 5-8 years from HWCOE development prospects who see the impact of the ELI programs. Some of these have already come to pass including donor support through the Wertheim Transformation doubling the number of students receiving training in Engineering Leadership and Innovation. Additionally, HWCOE, EII, and ELI leadership are in active discussion to name various other ELI programs.

ELI serves as a nexus of engineering leadership education and training, that supports various other research and economic development programs within the HWCOE and UF. This engineering leadership resource is unique and does not duplicate any other such program within HWCOE nor UF. The program is designed to be technology-discipline agnostic and is annually enrolling almost 1,500 undergraduate and graduate students ranging from on-campus students to working professionals taking their degrees through distance education. These students come from all engineering disciplines and backgrounds, providing service to all departments in the HWCOE.

C. **Reporting Structure:** The proposal for a new center or institute must include a reporting structure and describe the logic of that structure at UF. In particular, the proposal should outline to whom and through whom the center or institute reports. The proposal should demonstrate appropriate levels of commitment and interest from relevant departments, colleges, or other stakeholders.

ELI supports the overall strategic direction of the HWCOE as described above and the resultant appropriate reporting structure is at the college level. ELI supports all of the departments within the HWCOE, including the Department of Agricultural and Biological Engineering which is joint with the Institute for Food and Agricultural Science, and extension of its collaborative programs may serve faculty and students in other colleges and academic units of UF (e.g. Innovation Academy students; NSF Engineering Research Center proposal in Autonomic Neural Engineering with the College of Medicine). As such, ELI is most appropriately placed outside of any single department in HWCOE and resides under the Dean's Office.

The Director of ELI reports directly to the Dean of the Herbert Wertheim College of Engineering. Additionally, the ELI Director (or designee) meets regularly with HWCOE Department Chairs to discuss opportunities and challenges. The Department Chairs are regularly briefed on the activities of ELI and are supportive of the program as evidenced by their departments' continued promotion of the Institute's curricular offerings to their students. Additionally, HWCOE faculty regularly engage with ELI staff for engineering leadership-related instruction.

The HWCOE Dean is providing annual support of the ELI as outlined below.

D. Administrative Structure: The position of the center/institute within the University / college / department must be explained with the lines of accountability and responsibility clearly indicated. Each center should design its own administrative structure in consultation with the relevant department chair(s) and dean. However, it is expected that each center/institute will have at a minimum, a director and an advisory committee. The director must provide leadership and guidance for the direction of the research and facilitate interaction among faculty, staff and students. He/she should seek effective means of communication and collaboration, create an efficient organizational structure, and work to identify funds to sustain and expand upon the center's activities. The director is expected to be the primary contact between the center and the reporting authority. The functions of the advisory committee will vary according to the mission of the center/institute, needs of the director and the requirements of the unit to which the center reports.

As described above, the ELI Director has direct line reporting responsibilities to the Dean of the HWCOE. The primary duties of the ELI Director include:

- Create, design, and implement the programs, curricula, and experiences that will achieve the HWCOE vision of a generation of engineers who choose to lead:
- Lead a cross-college effort to create a sound and enduring financial future and build opportunities for leadership education to undergraduate and graduate students, staff, and faculty of the College of Engineering;
- Lead a cross-college effort to create a sound and sustainable financial future for growth and development of the ELI;
- Collaborate with the Director of the EII and Institute for Excellence in Engineering Education to expand the HWCOE education and innovation-focused programs;
- Develop curricular and experiential programs focused on nurturing student leaders, producing students versed in leadership who aspire to change the world and are differentiated from graduates of peer institutions by their skills surrounding their technical background;
- Develop a culture of leadership within HWCOE faculty, students and staff.

HWCOE provides financial support for the positions of ELI Director, Assistant Director, Administrative Assistant and adjunct instructors as well as office space and overhead support (e.g. Development, IT, HR, C&G). The Assistant Director, Administrative Assistant and adjunct instructors all report to the ELI Director.

ELI has engaged an external Advisory Board comprised of highly successful leaders

several of whom are HWCOE alumni. HWCOE and ELI leadership meets with the Advisory Board typically semi-annually or more often as needed to formally present the HWCOE and ELI advances against strategic and operational plans and obtain feedback. The current Advisory Board members to the ELI include:

- Mr. Marty Abbott, Partner AKF Partners (inventor, entrepreneur, technologist, and Gator Engineer)
- Dr. Norman Augustine, retired (former Under and Acting Secretary of the Army, former CEO of Lockheed-Martin, and former Princeton faculty)
- Senator Bob Graham, retired (former 2-term Governor of Florida and Senator; Chairman of the UF Graham Center for Public Service
- Ms. Linda Parker Hudson, CEO, The Cardea Group (former President of BAE Systems' Land and Armament Group and Gator Engineer)
- Dr. Thomas Hunter, retired (former President and Laboratories Director Sandia National Laboratories, and Gator Engineer)
- Mr. Michael Lewis, Senior VP of Progress Energy Florida (Gator Engineer)
- Mr. Bill Troner, Managing Partner, Andre-Troner LC (Gator Engineer & Lawyer)

The ELI curricular offerings are all submitted to and approved through the HWCOE and UF standard review and approval processes / curriculum committees.

E. **Space and Facilities:** The proposal should describe the adequacy of the space and facilities for the center or institute and address needs for additional space required to achieve the goals of the center or institute.

The HWCOE Dean provides office space (~500 sq. ft.) to meet ELI near term needs in the HWCOE. As ELI doesn't directly engage in research activities, but rather works with faculty across UF, ELI does not need dedicated research/lab space. All curricular offerings of ELI are scheduled and offered in instructional facilities across the UF campus per UF standard classroom scheduling and content delivery protocols.

F. **Budget Plan**. For all centers and institutes, the proposal should indicate the source of funds utilized – whether from the state budget, grants and contracts, and/or fees. The proposal should indicate whether the funding is currently in place or if new funding is needed. If new funding is needed, the source of the new funding must be identified. For all centers and institutes, the proposal should indicate whether the center wishes to receive indirect cost return. The proposal must provide adequate justification for indirect cost return.

No new funds are being requested as a part of this proposal. ELI is being supported by the HWCOE Dean through a combination of existing HWCOE E&G and Foundation funds. Meeting the ELI Mission and Goals outlined above is a long-term process and ELI will be a core program of HWCOE going forward. To provide long-term sustainability, HWCOE leadership is working with the College's development officers to introduce the Institute to potential donors who may support ELI as a whole or through individual programs.

No indirect costs are being requested to be returned to ELI.

# Projected Space Requirements (in square feet)

Projected Space Required by Source	Office	Laboratory	Conference Rooms	Other
From Existing Inventory	500			
Rented				
New Construction	8			

Indirect Cost Return for Proposed Center

The indirect cost return for a center in a college is subtracted from that received by the college. This is because all indirect costs are now returned to the colleges, minus costs of running central programs. This form is to establish what percentage (7.5% maximum), if any, the proposed center or institute will receive in indirect cost return.

# INDIRECT COST ASSIGNMENT

Date: 10/13/2016			
Institute or Center Name: UF Engine	ering Leade	rship Institute	
College: College of Engineering			
Indirect Cost Return:	YES NOX_	_% Return (max 7.5%)	<u>%</u>

Dean's Agreement:

(Use separate form for each college)

Dean's signature

EDC/cl

# Format and Guidelines for Institutes/Centers

# Center for Biomedical Sciences Research and Training (CBMSRT)

(January 1, 2017)

The submission and signing of a proposal to initiate a State of Florida institute/center or the establishment of a University institute/center constitutes a commitment by the university(ies) to ensure that the institute/center's activities support the stated mission(s) and goals of the institution(s).

University of Florida	which	11/2/16
University Submitting Proposal	W. Kent Fuchs, Ph.D.	Date
• • •	President	
	De 2 Dor	11/9/16
	oseph Glover, Ph.D	Date
	Provost	
University Center	Selle	$\frac{\frac{10}{25}}{\frac{1}{100}}$ Date
Type of Institute/Center	David Guzick, M.D., P	h.D Date
	Senior-Vice President	;
		111
<u>January 1, 2017</u>		10/31/16
Proposed Implementation Date	David Norton, Ph.D.	Date
	Vice President for Res	earch
26	ML Frod w	0/25/16
Associated Discipline (2-digit CIP)	Michael Good, M.D.	Date
	Dean of School or Coll	ege
I for Jon 10/2 th	N/A	
Thomas Rowe*, Ph.D. Date	Vice President and Chi	
Proposed Institute/Center	Financial Officer	(as appropriate)
Director (if known)		
*Ex officio - COM Associate Dean for	Tara	
Graduate Education	N/A	Acres
	Other President(s)/	Date
	Administrator(s)	(as appropriate)

#### Form la

For UF Internal Use Only

Indirect Cost Return for Proposed Center

The indirect cost return for a center in a college is subtracted from that received by the college. This is because all indirect costs are now returned to the colleges, minus costs of running central programs. This form is to establish what percentage (7.5% maximum), if any, the proposed center or institute will receive in indirect cost return.

#### INDIRECT COST ASSIGNMENT

Date: 10 - 26 - 16

Institute or Center Name: Center for Biomedical Sciences Research and Training (CBMSRT)

College: Medicine

Indirect Cost Return:

YES\_X\_% Return (max 7.5%)\_7,5\_\_% NO\_\_\_\_\_

Dean's Agreement:

(Use separate form for each college)

EDC/cl

#### Form 2

## Institute/Center Data

# **Directory Information** I/C Name: Center for Biomedical Sciences Research and Training (CBMSRT) I/C Code: University: University of Florida C I/C Type: Discipline(s) I/C Director: Thomas Rowe, Ph.D. 26 (2-Digit CIPs): Center for Biomedical Sciences Research and Training (CBMSRT) I/C Address: College of Medicine, University of Florida PO Box 100229, Gainesville, FL 32610-0229 I/C E-Mail Address: I/C Telephone: 352-273-8600 tomrowe@ufl.edu I/C SUNCOM: I/C Web Site Address: I/C FAX: **Affiliated Universities:** Mission and Areas of Focus Mission To support, enhance, and develop research and training related activities of the Graduate Program in Statement: (No more than 120 Biomedical Sciences (GPBMS) faculty and students. words) Biomedical Research Graduate Research **Graduate Training Key Terms:**

# Form 3

I/C Code:		I/C Name:	Center for Bi	omedical Scie	nces Research a	nd Trainii	
Prepared By:	Henry V. Baker, Ph.D.	Date:	Oct. 18, 2016	Telephone:	352-273	8-8111	
Fe	stimated	FISCAL YEAR: 2018					
Expenditures for the Institute/Center		Budgeta	ry Unit:*		UF-HSC		
		SUS Appropriated Funds	Contracts and Grants	Fees for Services	Private & Other (Specify)	Total	
Salaries & Benefits	Faculty, TEAMS, & USPS						
Other	Housestaff					•	
Personal	Graduate Assistants						
Services	Other				20,000*		
E	xpenses				100000*	· · · · ·	
Operating	g Capital Outlay						
Total 1	Expenditures				120,000		
Positio	ns and Rate	SUS Appropriated Funds	Contracts and Grants	Fees for Services	Private & Other (Specify)	Total	
	ty Positions n Personyears)						
TEAMS an	d USPS Positions  Personyears)						
Tota	l Positions n Personyears)						
	f Salary Rates Faculty Positions					-	
	ry Rates for These ad USPS Positions						
	Salary Rates for S, and USPS Positions						

<sup>\*</sup> From Residual Funds in PS project number 00047341

# Center for Biomedical Sciences Research and Training (CBMSRT)

#### Mission

Mission to support, enhance, and develop research and training related activities of the Graduate Program in Biomedical Sciences (GPBMS) faculty and students. In recognition of the research nature of the Ph.D. degree, CBMSRT funds may be used to support research and training activities in the following ways:

- Research internships for advanced undergraduates considering a career in science funds will be utilized to provide research internships in the laboratories of GPBMS faculty members.
- 2) Quick Start Research Internships summer research opportunity fund for incoming first year GPBMS graduate students stipend support will be provided for incoming first-year graduate students who wish to initiate research studies with GPBMS faculty in the summer immediately preceding their official matriculation into the GPBMS.
- Research Externships Travel funds to allow graduate students to visit laboratories at other institutions to learn new protocols and approaches to be applied to their dissertation research.
- 4) Disseminate research findings at national and international meetings funds may be used to send students to national and international meetings to present their research findings and to learn about cutting edge research results prior to publication.
- 5) Student sponsored research symposia and seminar series funds may be utilized to bring leading biomedical researchers to campus to discuss their latest discoveries and to interact with GPBMS graduate students and faculty.
- 6) Programmatic research retreats funds may be utilized to sponsor programmatic retreats for the GPBMS concentrations.

#### **Purpose**

The purpose of the center for biomedical sciences research and training (CBMSRT) is to support and enhance the graduate program in biomedical science and enrich the research and training opportunities of our students and faculty.

Research internships for advanced undergraduates considering a career in science – funds will be utilized to provide research internships in the laboratories of CBMSRT faculty members.

The center will work to identify highly talented undergraduates both at the University of Florida and other institutions who may be interested in careers in the biomedical sciences and offer those individuals an opportunity to conduct research alongside graduate students and CBMSRT faculty members. Students will participate in a 10 week summer program where they conduct research and attend scientific and career opportunity seminars.

Early exposure to bench research serves several important purposes. First it will allow students to experience the research environment and allows them to determine if a career in research might be

right for them, secondly it allows students to see first-hand the breath of biomedical research occurring in the laboratories of the graduate faculty. Participating faculty sponsors will be encouraged to identify students with the highest aptitudes for research and the CBMSRT and the graduate program in biomedical sciences will work together to inform students about opportunities available to them as graduate students in the graduate program in biomedical sciences at the University of Florida.

The CBMSRT will work to establish relationships with faculty members at other universities and colleges within Florida to identify students at their institutions who might benefit from participation in the summer research program. Efforts will be made to reach out to historically black colleges and other schools without large research portfolios. In so doing promising students will have an opportunity to conduct research before applying to graduate school.

Quick Start Research Internships - summer research opportunity fund for incoming first year Graduate Program in Biomedical Sciences (GPBMS) graduate students.

Stipend support will be provided for incoming first-year graduate students who wish to initiate research studies with CBMSRT faculty in the summer immediately preceding their official matriculation into the GPBMS. This program will allow students to "unofficially" start their graduate research training in the summer before they officially matriculate into graduate school. It is anticipated that this program will be particularly beneficial to students who had limited exposure to research while an undergraduate.

Research Externships - Travel funds to allow graduate students to visit laboratories at other institutions to learn new protocols and approaches to be applied to their dissertation research and in some cases to be exposed to the corporate research environment.

CBMSRT members will be eligible to nominate their students for research externships. Selected students will receive travel funds to allow them to visit laboratories at other institutions for the purposes of learning new skills and approaches that may be applied to their dissertation research. In some cases funds may be provided to students considering nontraditional careers to facilitate externships with corporate partners.

Graduate Student Travel Funds - Disseminate research findings at national and international meetings.

CBMSRT members will be eligible to nominate their students for funds to send their students to national and international meetings to present their dissertation research findings and to learn about cutting edge research results prior to publication. Attendance and presentation at national and international meetings provides a number of benefits to students. They gain valuable public speaking experience communicating their research results to other investigators, they learn of the latest unpublished results from others, and they develop their personal network.

Student sponsored research symposia, and seminar series.

CBMSRT funds will be used to support an annual student sponsored research symposia. Graduate students in the GPBMS will select the research symposia theme, identify, and invite speakers for a one day symposia. The symposia will be open to all.

CBMSRT funds will also be used to support a monthly seminar series where GPBMS students invite leading biomedical researchers to campus to discuss their latest discoveries and to interact with graduate students. Graduate students will serve as the primary host of the invited speaker.

#### **GPBMS** programmatic research retreats.

Funds will be available, dependent on faculty participation, to GPMBS concentrations for the purposes of holding annual programmatic retreats where students and faculty can come together and exchange ideas and results.

#### Membership

CBMSRT membership is open to all members of the GPBMS graduate faculty who designate a portion of their center indirect cost returns (2% or greater) to the CBMSRT.

#### Governance

The Associate Dean for Graduate Education shall direct the CBMSRT and chair the Executive Committee of the CBMSRT. The CBMSRT will be composed of the Associate Dean for Graduate Education (Chair), the Senior Associate Dean for Research Affairs (ex officio), two basic science chairs (appointed by the dean), two concentration directors or graduate coordinators (appointed by the dean), and one CBMSRT member without administrative title (the inaugural member will be appointed by the dean and then subsequent occupants will be elected by the CBMSRT membership).

#### **Staffing**

The office of Graduate Education in the Dean's office of the College of Medicine will provide clerical assistance as required to support the CBMSRT.

#### Revenue

The CBMSRT is intended replace the now defunct college of medicine education center (COMEC) which when it was in existence received approximately \$120,000 to \$140,000 per year from investigators who designated COMEC in support of the interdisciplinary (IDP) graduate program in biomedical sciences. The CBMSRT will primarily be funded by center members designating a portion of the center indirect costs returns to the CBMSRT. However, it is anticipate that the CBMSRT may partner with other units to sponsor programs of mutual interests such as summer research opportunities for undergraduates interested in careers in the biomedical sciences.

# Projected Space Requirements (in square feet)

Projected Space Required by Source	Office	Laboratory	Conference Rooms	Other
From Existing Inventory	400			
Rented			5	
<b>New Construction</b>				

# Format and Guidelines for Institutes/Centers

# (Center for Hydro-generated Urbanism)

(November 1, 2016)

The submission and signing of a proposal to initiate a State of Florida institute/center or the establishment of a University institute/center constitutes a commitment by the university(ies) to ensure that the institute/center's activities support the stated mission(s) and goals of the institution(s).

University of Florida	I.M.	11-21-16
University Submitting Proposal	President	Date
	Provost	//////////////////////////////////////
Center		
Type of Institute/Center	Senior Vice President	Date
<b>January 1, 2017</b>		11/10/10
Proposed Implementation Date	Vice President for Research	Date
15	3mm8	11/10/16
Associated Discipline (2-digit CIP)	Dean of School or College	Date
Nancy M. Clark		
Nor. 2, 2014		
Proposed Institute/Center Date	Vice President and Chief	Date
Director (if known)	Financial Officer	
Maortia Kolkal Teos	(as appropriate)	
MARTHA KOHEN, PROF		
Harthe Colen 11-2-16		
Proposed Institute/Center Date	Other President(s)/	Date
Co-Director (if known)	Administrator(s) (as	appropriate)

#### Form la

Indirect Cost Return for Proposed Center

The indirect cost return for a center in a college is subtracted from that received by the college. This is because all indirect costs are now returned to the colleges, minus costs of running central programs. This form is to establish what percentage (7.5% maximum), if any, the proposed center or institute will receive in indirect cost return.

# INDIRECT COST ASSIGNMENT

Date: August 29, 2016

Institute or Center Name: Center for Hydro-generated Urbanism

College: DCP / School of Architecture

Indirect Cost Return:

YES\_\_\_9.5\_% Return (max 7.5%) 7'5 % NO\_\_\_\_\_

Dean's Agreement:

(Use separate form for each college)

Dean's signature

EDC/cl

#### Form 2

# Institute/Center Data

Directory Information							
I/C Name: Center for Hydro-generated Urbanism							
I/C Code:	University: University of Florida I/C Type:						
I/C Director:	Nancy	Clark and Martha Kohen	Discipline(s) 15 (2-Digit CIPs):				
I/C Address: 1480 Inner Road POB 115702 Room 231c Gainesville Florida 32611							
I/C Address:	1480 Inner Road POB 115	702 Room 231c Gainesville Flo	rida 32611				
I/C Address:  I/C Telephone:	352-294-1457	I/C E-Mail Address:	rida 32611  mrkramer@ufl.edu				
JO Madress.							

# Mission and Areas of Focus

Mission Statement: words)

The Center proposes new paradigms for the evolution of water-based settlements. From retrofitting the metropolis to envisioning future development on the water, we advocate a reconsideration of fluvial and coastal urbanism and a recalibration of our settlement patterns in the context of climate variability; sea level rise and flooding; water, waste, and energy management; global economic shifts; post-industrial legacies; environmental migration and population growth within a rapidly urbanizing (No more than 120 world. The Center develops interdisciplinary research and proposes collaborative programs, symposia, and academic courses bringing global involvement in prospective studies on adaptation, environmental justice, and asset preservation of water borne cities around the world. The Center cooperates with academic institutions, governmental agencies, and local stakeholders at national and international levels.

Sea Level Rise, Urbanism, Adaptation, Water and Energy Management, **Key Terms:** 

# Form 3

I/C Code:	de:		Center for Hydro-generated Urbanism		
Prepared By:	Mary Kramer	Date:	8/30/2016 <b>Telephone:</b> 352-294-145		

E	stimated	FISCAL	YEAR:		2016-2017	
		Budgetary Unit:*		1502-E&G		
	Expenditures for the Institute/Center		Contracts and Grants	Fees for Services	Private & Other (Specify)	Total
Salaries & Benefits	Faculty, TEAMS, & USPS					0
Other	Housestaff					0
Personal	Graduate Assistants		6,851			6,851
Services	Faculty Travel		5,000			5,000
E	Expenses					0
Operating	Operating Capital Outlay					0
Total	Expenditures		11,851			11,851

Positions and Rate	SUS Appropriated Funds	Contracts and Grants	Fees for Services	Private & Other (Specify)	Total
Faculty Positions (FTE in Personyears)		0.00			0
TEAMS and USPS Positions (FTE in Personyears)		0.10			0.10
Total Positions (FTE in Personyears)		0.10			0.10
Sum of Salary Rates for These <u>Faculty</u> Positions					0
Sum of Salary Rates for These <u>TEAMS and USPS</u> Positions		1,000			1,000
Sum of Salary Rates for Faculty, TEAMS, and USPS Positions		1,000			1,000

<sup>\*</sup> Budgetary Unit: Specify E&G, IFAS, or UF-HSC

# Projected Space Requirements (in square feet)

Projected Space Required by Source	Office	Laboratory	Conference Rooms	Other
From Existing Inventory	408 sft			
Rented				× ×
New Construction				

# Proposal for Establishment of Centers and Institutes

# **CENTER FOR HYDRO-GENERATED URBANISM**

Type 2 Center (University of Florida Center)

This proposal is to request authorization to form the Center for Hydro-generated Urbanism. The formation of this Type 2 Interdisciplinary Center will not require additional personnel or call for the establishment of new courses or otherwise cause significant change in the operation of the University, the College of DCP, or the School of Architecture.

#### C. Mission Statement and Goals:

The Center for Hydro-generated Urbanism (the Center) proposes new paradigms for the evolution of water-based settlements. From retrofitting the metropolis to envisioning future development on the water, we advocate a reconsideration of fluvial and coastal urbanism and a recalibration of our settlement patterns in the context of climate variability; sea level rise and flooding; water, waste, mobility, and energy management; global economic shifts; post-industrial legacies; urban retreat, environmental migration and population growth within a urbanizing world. We envision the task as urgent for we perceive a gap between scientific disciplinary knowledge of established levels of risk and the generation of alternative interdisciplinary locally-based visions for public consideration and implementation.

The Center will develop interdisciplinary research and proposes collaborative programs, symposia, and academic courses bringing global involvement in prospective studies on adaptation, environmental justice, and asset preservation of water borne cities around the world.

The Center will build upon ongoing Consortium for Hydro-generated Urbanism (CHU) collaborations with academic institutions, governmental agencies, and local stakeholders around the world including the Americas, Africa, Europe, and Asia. The Center will draw together UF faculty and affiliated scholars worldwide with a strong common interest in this area of research. Existing programs in several units will be enhanced and strengthened by the formation of the Center and will promote joint proposals among its members for funding from outside agencies. Leading members for the Center are already currently engaged in substantial scholarly research and creative work including high impact publications, global exhibitions of project based research, organized conferences, seminars, and workshops internationally such as in Brazil, South Africa, and Italy as well as in the US (New York City and Miami). Leading members for the proposed Center are also already actively seeking external funding from the NSF and other such agencies in support of the Center. (See Appendix A: Recent Activities of Founding Members for the Proposed Center for Hydro-generated Urbanism)

The Center's mission and goals are closely tied to UF's strategic plan especially in the following areas:

- UF Goal 1: An exceptional academic environment
  - The Center will increase UF's globalization to enhance our effectiveness as world citizens and will fostering a community of students and faculty who have diverse experiences and backgrounds.
- UF Goal 2: An outstanding and accessible education
  - The Center will facilitate high quality student-faculty interactions in mentored research.
- UF Goal 3: Faculty preeminence
  - The Center will directly contribute to preeminence through increased high-impact scholarly publications and creative works as well as growing the professional and public visibility of UF around the world
- UF Goal 4: Growing research and scholarship through grants that enhances fundamental knowledge and improves the lives of the world's citizens

The Center will attract exceptional graduate and doctoral scholars who will contribute to influential research and scholarship and the Center will stimulate both extramural and intramural funding that enhances basic and translational research

UF Goal 5: Strengthened public engagement of UF programs with local, national, international communities

The Center will significantly increase engagement and outreach of UF programs leading to positive
impacts <u>particularly</u> in the areas of the economy, the environment and community and will improve
communication leading to public awareness of the value of UF programs and their impact on
society.

# D. Proposed Activities

The Center will continue the activities developed by the Consortium for Hydro-generated Urbanism since its inception in 2012 to propel the activities to a more integrated interdisciplinary and international realm. The Center will conduct interdisciplinary collaborative research on urban adaptation and development in the context of coastal and fluvial settlements.

Over the next several decades, the surge in urbanization will continue and much of it will occur along our worlds' coasts, rivers and deltas. The Center will focus its research on urban integrated design of hydro-generated environments and the importance of applying design thinking to the most pressing social and environmental problems associated with an increasingly dense world facing climate variability, sea level rise and flooding risks in a moment when the issue is understood as crucial across the planet. Our own state of Florida stands at risk of losing trillions of dollars of existing development. However, this extraordinary circumstance that the world finds itself confronting opens up new opportunities for reinventing our economic and development paradigms. The Center will fulfill this critical research focus by bringing together synergistic and collaborative efforts by members of the center with broad knowledge and expertise in this area of research.

The intent of the Center is to provide leadership in urban adaptation and water-based settlement integrative projects. We will generate interdisciplinary resources through association with other units on campus as well as regional, national and international institutions and develop and apply research through new undergraduate and graduate courses in the context of existing curriculum. The visibility and importance of the Center's scholarship and creative work will attract national and international graduate and doctoral students as well as preeminent scholars and faculty. We will enhance existing UF programs through high impact publications and notable lectures. We will continue the process of applying to relevant grant agencies and developing our existing associations with institutions such as UNESCO, La Sapienza University Rome, Grupo Metropole Fluvial Universidad de São Paulo, Brazil – FAU-USP, the Van Alen Institute New York City, and Wuhan University School of Urban Design Wuhan China to strengthen our funding prospects, strengthen UF's public engagement with communities worldwide, and increase UF's globalization all of which will lead to positive impacts especially in the areas of the economy, the environment and community.

# E. Reporting Structure

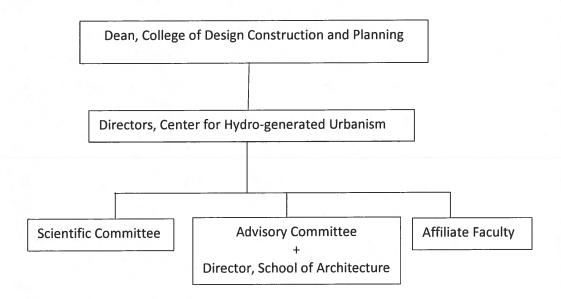
The Directors of the Center for Hydro-generated Urbanism will report directly to the Dean of the College of Design Construction and Planning (DCP). The Directors will prepare an annual budget to be approved by the Dean. The Director of the School of Architecture will advise the Directors of the Center on a bi-monthly basis as well as in his/her capacity as a member of the Advisory Committee (see F. below). Commitment and interest in the Center has been demonstrated by letters of support from both the Director of the School of Architecture and the Dean of DCP. (see Appendix B: Letters of Support)

#### F. Administrative Structure

The Center for Hydro-generated Urbanism will be administered by two Directors with input from an Advisory Committee and Center activities will be informed by a Scientific Committee. Policy decisions on the operation of the Center will be implemented by the Directors based on recommendations of the Advisory Committee. The Advisory Committee will convene semi-annually and will be kept informed on questions and decisions in the operation of the Center throughout the year. The Directors will prepare a budget for expenditures of funds allocated to the Center to be reviewed and approved by the Dean (DCP). The activities of the Center such as symposia, conferences, workshops, academic courses, grant applications and publications will be organized with input from the Scientific Committee and the participation of Affiliate Members to include faculty, students and organizations.

For a list of Scientific Committee Members and Faculty Affiliates, see Appendix C. For a list of Academic Partners and Affiliate Organizations, See Appendix D.

An organizational chart showing the administrative structure is included below.



# **Advisory Committee Members 2017-18**

#### Jason Alread

Director and Professor, School of Architecture University of Florida, Gainesville USA Expertise: Administration

#### Lucio Barbera

UNESCO Chairholder, Sustainable Urban Quality and Urban Culture, Notably in Africa President of the Scientific Society Ludovico Quaroni Founder and Chair Professor, Department or Urban Architecture Landscape and Interior Design La Sapienza University, Rome Italy Expertise: Urban Design, Cultural Policy, Archeology and Architecture

### Ana de Brea

Professor, College of Architecture and Planning

Ball State University, Indiana USA Expertise: Latin America; Architecture

#### Alexandre Delijaicov

Professional Architect, City Hall Sao Paulo

Coordinator, Grupo Metropole Fluvial

Professor, FAU-USP Faculty of Architecture and Urbanism

University of Sao Paulo, Brazil

Expertise: Urban Design and Infrastructure

### Alyson Flournoy

Professor, Alumni Research Scholar, Levin College of Law

University of Florida, Gainesville USA

Expertise: Design of legislation to protect natural resources; Environmental ethics

# Zhengxu Zhou

Associate Dean, School of Architecture

Tsinghua University, China

Expertise: City Planning, Village in South China, Climate Variability

#### Jesse Keenan

Lecturer, Department of Architecture

Harvard University Boston USA

Expertise: Real estate development, design-development management and technology, climate adaptation science

#### Zhong-Ren Peng

Professor, Department of Urban and Regional Planning

University of Florida, Gainesville USA

Expertise: Transportation Planning, Transport Economics, Analytical Modeling Scenarios Climate Change

#### Thomas Ruppert,

Coastal Planning Specialist, Florida Sea Grant

Miami Florida USA

Expertise: Beach and Coastal Policy; Hazard mitigation, post-disaster recovery planning, environmental

protection

#### Li Xiaofeng

Editor in Chief, New Architecture Magazine

Chair, School of Architecture and Urban Planning

Huazhong University of Science and Technology, Wuhan China

## G. Space and Facilities

Current space allocated to the Directors of the Center for Hydro-generated Urbanism is adequate for Center operation requirements. No additional space will be required. See "Projected Space Requirements" for additional information

# H. Budget

See "Staffing and Budget Info Form 3" for Budget Proposal.

# Proposal for Establishment of Centers and Institutes

# **CENTER FOR HYDRO-GENERATED URBANISM**

## Appendix A:

Recent Activities of Leading Members for the Proposed Center for Hydro-generated Urbanism (selected)

# Scholarship and Creative Works: Workshops, Conferences, Symposia, Exhibitions

# iNTA International Network for Tropical Architecture 2017 Conference

"Tropical Storm as a Setting for Design Construction and Planning"
November 17-19<sup>th</sup> 2017
Gainesville Florida
CHU Conference Co-Organizers

### UF Law School Sea Level Rise Scenario Analysis Workshop

Florida Sea Grant Sponsored Project January 20-21, 2017 CHU Participants: Profs. Nancy Clark and Martha Kohen

# Congress XXXIV Environmental Day: Strategies of Adaptation to Climate Change

Accademia dei Lincei Rome November 2016 Exhibition featuring project based research conducted by CHU

## **UNESCO Conference and Workshop Rome 2016**

"Coastal and Internal Settlements Adaptation to Climate Change" October 14th, 2016
La Sapienza University, Facolta di Architecttura, Piazza Borghese CHU Conference Co-Organizer

#### **UNESCO World Field Laboratory 2016**

"Sea Level Rise and the Future of Coastal Urban Settlements: Evolving concepts in Urban and Cultural Adaptation to Changing Environments"

Fabruary 28th Moreh 12 (New York, Micmi, Coinceptille)

February 28th – March 12 (New York, Miami, Gainesville)

Program Host CHU in partnership with the UNESCO Chair in Urban Quality and Culture, notably in Africa

#### Florida 3.0 Reinventing Our Future

Exhibition and Symposia (Works by CHU members) Miami Center for Architecture and Design October 20-November 20, 2015 Curated by Nancy Clark

#### Vicenza 3.0: Refocusing the Rivers

Traveling Exhibition
Palazzo Cordellina and Vicenza Institute of Architecture (M. Kohen)
November –January 2015
Curated by Martha Kohen

#### Miami Futures Salon

Round Table Seminar

Miami Dade County Commissioners, Stephen P. Clark Government Center

Moderator: Daniella Levine Cave, Commissioner District 8 Miami

June 24th, 2015

**CHU Presentations:** 

"Consortium for Hydro-Generated Urbanism"; M. Kohen

"Miami: Resiliency | Infrastructure"; N. Clark

### The Hydro-generated Metropolis: New Projects on Urban Waterways

UIA 2014 Durban XXV World Congress Architecture OtherWhere: Resilience, Ecology, Values; August 3-7, 2014; International Convention Center Durban South Africa;

M. Kohen and N. Clark, Curators; Exhibition Included current research on Urban Waterways in Florida, Mexico, Slovenia, and Brazil (Nancy Clark, Lee Su Huang, Martha Kohen, and Albertus Wang)

# **UIA 2014 Durban South Africa World Congress**

Congress Programme Partner International Conference Union Internationale des Architectes Symposium: "Fluvial Urbanism: A Tale of Three Cities: São Paulo, Mexico City and Nantes" Chair, Nancy Clark
Session Moderators, Nancy Clark and Martha Kohen
August 4-5, 2014

#### Florida - São Paulo Dialogues Academic Workshop 2014

Professor Martha Kohen and Associate Professor Nancy Clark Professor Alexandre Delijaicov and Professor Milton Braga June 3rd-5th 2014 São Paulo, Brazil

#### The Florida-São Paulo Dialogues Project: Water and the Future City

Exhibition included current research on Urban Waterways in Florida and Brazil (CHU members) Curated by Nancy Clark and Martha Kohen June 2014

Faculdade de Arquitetura e Urbanismo da Universidade de São Paulo FAUUSP São Paulo Brazil

#### Proposal for Dechannelizing the Tijuana River, Tijuana Mexico: Arquine Umbral de las Americas

Art Center of Tijuana, Mexico Exhibition of urban design proposals for Tijuana River Canal (N. Clark) May-June 2014 Curated by Nancy Clark

## Recent and Upcoming CHU Publications

Proceedings, <u>Coastal and Internal Settlements: Adaptation to Climate Change</u>, International Conference, Rome Italy October 2016.

New Architecture Magazine (NA) Special Issue ""Between City and Water: Architecture Landscape and Infrastructure" New Architecture Magazine (Huazhong University of Science and Technology: Wuhan, Hubei province, China)
Guest Editors, N. Clark and M. Kohen
Under contract; Forthcoming Spring 2017

UNESCO Chair Publication Series #4 LADC L'architettura delle Citta: Sea Level Rise and the Future of our Coastal Settlements: Evolving Concepts in Urban and Cultural Adaptation to Changing Environments. (The Journal of the Scientific Society Ludovico Quaroni; Roma)
Under contract; Forthcoming December 2016

UNESCO Chair Publication Series #3 LADC L'architettura delle Citta: <u>Urban Waterways: Evolving Paradigms for Hydro-Based Urbanisms</u> (The Journal of the Scientific Society Ludovico Quaroni, Roma, 2016)

N. Clark Editor

Articles by M. Kohen and N. Clark

"Reconsidering the Tijuana River Canal: Three Scenarios for Action" in LADC L'architettura delle Citta: The Journal of the Scientific Society Ludovico Quaroni, n. 3-4/2014 *The City in the Evolutionary Age*, pgs. 187-198 (ISSN 2281-8731), N. Clark

"The Future of the Hydrogenerated Metropolis: New Project for At-Risk Cities on the Water"; Coastal Cities and their Sustainable Future (WIT Press: Southampton UK, 2015), pg. 37-47. (ISSN: 978-1-84564-910-4, Digital ISSN: 978-1-84564-911-1), N. Clark

#### Recent Academic Courses

# **Archi-Genesis of Amphibious Typologies**

ARC 6911 Forthcoming Spring 2017 Professor Martha Kohen

#### **Extreme Coastal Adaptation Studio**

ARC 4323 (forthcoming Spring 2017)

#### Sustainable Urbanism

ARC 6911 Fall 2016, Fall 2014, Fall 2012 Professor Martha Kohen

#### Florida Atlas

ARC 6399 Advanced Topics in Urban Design /ARC 4930 Independent Study Spring Semester 2016
Profs. Nancy Clark and Martha Kohen

#### Florida Atlas

ARC 6399 Advanced Topics in Urban Design /ARC 4930 Independent Study Spring Semester 2015
Associate Professor Nancy Clark

## Miami: Resiliency through Anthropocene Infrastructure

ARC 6355 Advanced Studio 2 Spring 2015

University of Florida Graduate School of Architecture

Associate Professor Nancy Clark in collaboration with Kai-Uwe Bergmann, AIA Partner BIG-Bjarke Ingels Group, UF Global Lab + Ivan Smith Distinguished Visiting Professor

### Barrier Islands: Morphology and Prospective

The Longboat Key Graduate Research 2 studio January - April 2015/SOA/UF

Professor Martha Kohen with the collaboration of Associate Professor Martin Gold and DCP Interdisciplinary team

# Coastal Settlement Typologies for Florida, Towards constructing an Atlas of coastal settlements

Professor Martha Kohen/ Graduate student Xuancheng Zhu/ February 2015

# "Thresholds Borders and Bridges: Proposal for Dechannelizing the Tijuana River, Tijuana Mexico"

Advanced Graduate Design 2 Studio Spring 2014

Associate Professor Nancy Clark

"River Acupuncture: rethinking the Bacchiglione River Vicenza"

Advanced Graduate Design 3 Studio Fall 2013

Professor Martha Kohen

# "From Hydro-generated Urban Environments to Hydro Retrofitting the Metropolis"

Advanced Graduate Design 2 Studio Spring 2013

Profs. Nancy Clark and Martha Kohen

Visiting Studio Critics: Profs. Milton Braga and Alexandre Delijaicov

# "City and Port: New Water Projects for the City of Koper, Slovenia"

Advanced Graduate Design 3 Studio Fall 2013

Professor Martha Kohen

## St. Augustine: An Aquatic Perspective Studio 2010

Undergraduate Design 8 Studio Spring 2010

Professor Martha Kohen

#### Pending Grants

"Enhancing Resiliency of Vulnerable Mobile Home Communities along the Gulf Coast"

Gulf Research Program Research-Practice Grants: 2017 Topic: Enhancing coastal Community Resilience and Well-being in the Gulf of Mexico Region

# National Academies of Sciences | Engineering | Medicine

PI: Zhong-Ren Peng, Professor Urban and Regional Planning

Co-PI's: Martha Kohen and Nancy Clark

\$ 1.5 Million (Pending)

#### National Science Foundation (Grant #16-1) 2017

"Adaptive Structural and Architectural Systems for Mitigating Risks due to Flooding and Sea Level Rise"

PI: Nawari Nawari

Co-PI: Martha Kohen

\$ 300,000 (Pending)

# Proposal for Establishment of Centers and Institutes

# CENTER FOR HYDRO-GENERATED URBANISM

Appendix B: Letters of Support



#### College of Design, Construction and Planning Office of the Dean

331 Architecture Building PO Box 115701 Gainesville, FL 32611-5701 352-392-4836 352-392-7266 Fax

September 21, 2016

Joseph Glover, Provost & Sr. Vice President University of Florida 235 Tigert Hall PO box 113175 Gainesville, FL 32611-3175

Re: Letter of Support for the Center for Hydro-Generated Urbanism

Dear Provost Glover:

Please consider this my letter of support for the establishment of the Research Center for Hydro-Generated Urbanism. Professors Martha Kohen and Nancy Clark have led work in this field of research for many years. They have undertaken an impressive record of activities with partners both at UF and around the world and are extremely dedicated to this research area.

The Center seeks to develop interdisciplinary research and collaborative programs, bringing global involvement in prospective studies on adaptation and asset preservation of water borne cities around the world. Sea-level rise impacts are a critical concern for Florida and all coastal areas globally. The Center is ideally aligned with the College's strategic goal of engaging the public to solve global problems of the built environment. It can further this mission while substantially contributing to the overall UF pre-eminence goals, and establishing a flow of funded research.

The School of Architecture wants to provide leadership for the development of water-based settlements, and the critical concerns of sea-level rise impacts. This opportunity will put UF in a strong leadership position in addressing this major concern. It is my belief that the creation of this Center will greatly benefits DCP and UF as a whole.

Please let me know if you have any questions, concerns, or would like additional information.

Sincerely,

Chimay J. Anumba FREng, PhD, DSc, Dr.h.c.,

Dean and Professor

College of Design, Construction and Planning



# **College of Design, Construction and Planning** School of Architecture

231 Architecture Building PO Box 115702 Gainesville, FL 32611-5702 352-392-0205 352-392-4606 Fax

August 4, 2016

Dean Chimay Anumba University of Florida College of Design Construction and Planning 331 Architecture Building Gainesville, FL 32611

Re: Support Letter for the Center for Hydro-Generated Urbanism

#### Dean Anumba:

I'm pleased to advocate for and support the establishment of the Research Center for Hydro-Generated Urbanism. Professors Martha Kohen and Nancy Clark have been working in this area of research since 2012 and have compiled an impressive record of activities with a consortium of partners both at UF and from around the world. The Center would be an evolution of this substantial groundwork and allow for greater contributions for the College, along with establishing lines of funded research. Martha and Nancy are dedicated to providing leadership for this initiative and it has a clear benefit for DCP and the University. This will place UF at the head of a critical concern for Florida and all coastal areas globally. Professors Kohen and Clark have broad experience assembling interdisciplinary teams to address these issues and have engaged venues of both professional and community outreach.

The School of Architecture is committed to a strategic goal of engaging the public to solve real-world problems of the built environment. We have been pursuing the establishment of research groups to catalyze scholarship across the faculty and with interdisciplinary partners. This Center is ideally aligned to further this mission and can substantially contribute to the overall UF pre-eminence goals. The School wants to provide leadership and vision for the unique development of water-based settlements, and given the critical concerns of sea-level rise impacts I feel this is something of particular value to support.

Please let me know if you have any questions or would like additional information.

Best Regards,

Jason Alread, AIA, LEED AP Director & Professor

School of Architecture

# Proposal for Establishment of Centers and Institutes

# **CENTER FOR HYDRO-GENERATED URBANISM**

# Appendix C: Scientific Committee and Affiliate Faculty Members

#### Abhinav Alakshendra

Assistant Professor, Department of Urban and Regional Planning Director of International Design and Planning University of Florida Gainesville USA

Expertise: Development Economics, Housing Policy, Urban and Regional Economics

#### Silvia Aloisio

Assistant Professor, Faculty of Architecture La Sapienza University, Rome Italy Expertise: Interdisciplinary Water-Based Urbanism

#### Thomas Ankerson,

Director and Professor, Florida Conservation Clinic Center for Governmental Responsibility
Environmental and Land Use Law Program, Levin College of Law
University of Florida, Gainesville USA
Expertise: Domestic, international and comparative environmental law with an emphasis on Florida, Latin America and the Caribbean

### Vandana Baweja

Assistant Professor, School of Architecture University of Florida, Gainesville USA Expertise: Historian of post-war mid-twentieth century architecture and climate

#### Milton Braga.

Director and Curator, Urbem: Institute of Urbanism and Studies for the Metropolis Professor FAU-USP Faculty of Architecture and Urbanism University of Sao Paulo, Brazil Expertise: Re-urbanization of Vulnerable Urban Areas

# Carolyn Cox

Coordinator, Florida Climate Institute
Professor, Institute of Food and Agriculture (IFAS)
University of Florida, Gainesville USA
Expertise: Coordination and Outreach

#### Michael Cohen

Professor, Milano School of International Affairs, Management and Urban Policy The New School, New York USA Expertise: Urban Studies Economics and Policy, International Development

## Anna Irene Del Monaco

Secretary General UNESCO Chair Sustainable Urban Quality and Urban Culture, Notably in Africa Aspen Fellow

Professor, Faculty of Architecture La Sapienza University, Rome Italy

Expertise: Archeology and Architecture, Evolution of the City, Urban Regeneration

#### Andrea Dutton

Assistant Professor, Department of Geological Sciences

University of Florida Gainesville USA

Expertise: Paleoclimate and Paleoceanography; Sea level reconstruction over glacial-interglacial timescales

#### Nabil Elhadi

Professor, Department of Architectural Engineering

Cairo University, Egypt

Expertise: The Arab City-History and Developments

#### Yashaen Luckan

Department of Architecture

**Durban University of Technology South Africa** 

President, South African Council for the Architecture Profession (SACAP)

Expertise: Architectural Practice and Education

#### Nishant Manapure

Head, Institute for Water Sensitive Urban Design

Professor and Dean, Faculty of Architecture

University of Manipal, India

Expertise: Water Sensitive Urban Design

#### Felipe Mesa

Founder, Plan B Arquitectos

Professor, Universidad Pontificia Boliviana

Medellin, Colombia

Expertise: Architecture, Indigenous Cultures and Economic-Social Ecologies

#### Nawari Nawari

Associate Professor, School of Architecture

University of Florida, Gainesville USA

Expertise: Environmental and Structural Engineering

#### Jayantha Obeysekera

Chief Modeler South Florida Water Management District

West Palm Beach, USA

Expertise: Engineering, Water Management Policy and Implementation

## Antonino Saggio

Chair, Architecture and Information Technology

Coordinator of Ph.D Program and Professor, Faculty of Architecture

La Sapienza University, Rome Italy

Expertise: Urbanism, Architecture and Ecological Infrastructure

# Proposal for Establishment of Centers and Institutes

# **CENTER FOR HYDRO-GENERATED URBANISM**

# Appendix D: Academic Partners and Affiliate Organizations

## **Academic Partners**

Ball State University Muncie, Indiana

Cairo University Cairo, Egypt

CityLab Orlando University of Florida Orlando Florida

Durban University of Technology Durban, South Africa

Huazhong University of Science and Technology Wuhan, China

La Sapienza University Rome, Italy

Manipal Institute of Technology Manipal, India

Tsinghua University Beijing, China

UNAM Universidad Nacional Autónoma de Mexico Mexico City Mexico

University of Sao Paulo FAU-USP Sao Paulo, Brazil

University of Westminster Westminster, England

# **Affiliate Organizations**

Catalyst Miami Miami, Florida http://catalystmiami.org/

**CLEO Institute** 

Miami Florida

http://www.cleoinstitute.org/

Grupo Metropole Fluvial

University of Sao Paulo FAU-USP, Sao Paulo Brazil

http://www.metropolefluvial.fau.usp.br/

Latitudes Network

University of Westminister, England

http://www.latitudesnetwork.com/

UNESCO Chair in Sustainable Urban Quality and Culture, Notably in Africa

La Sapienza Rome Italy

Urbem: Institute of Urbanism and Studies for the Metropolis

Sao Paulo Brazil

http://www.urbem.org.br/

Van Alen Institute

New York New York

https://www.vanalen.org/



Office of the Provost and Senior Vice President

235 Tigert Hall PO Box 113175 Gainesville, FL 32611-3175 352-392-2404 Tel 352-392-8735 Fax

April 26, 2016

# **MEMORANDUM**

FROM:

Joseph Glover

Provost and Senior Vice President for Academic Affairs

**SUBJECT:** 

Request to Transition the Division of Urology-Jacksonville to a Department

within the UF College of Medicine-Jacksonville

I have reviewed the proposal and request to transition the UFCOM-J Department of Surgery's Division of Urology as an independent department of the UFCOM-J. I am fully supportive of the Division of Urology becoming an independent Department of Urology in the UFCOM-J.

Thank you.

JG/rjh



### Office of the Vice President for Health Affairs Dean, College of Medicine - Jacksonville

UF Health Science Center 653-1 West 8th Street Jacksonville, FL 32209 904-244-3131 904-244-3130 fax

April 26, 2016

Dr. Joseph Glover Office of the Provost and Academic Affairs Provost and Senior Vice President for Academic Affairs 235 Tigert Hall Box 113175 Gainesville, FL, 32611-3175

Dear Dr. Glover:

The University of Florida College of Medicine – Jacksonville (UFCOM-J) Executive Committee unanimously approved on February 24, 2016, the proposal to transition the UFCOM-J Department of Surgery's Division of Urology to an independent department of the UFCOM-J. The University's Senior Vice President for Health Affairs; Dean of the College of Medicine; the Chair of the Department of Surgery – Jacksonville; the department of Surgery faculty; and the UFCOM-J Faculty Council are supportive of transitioning the urology division into the Department of Urology at the UFCOM-J.

This reorganization would not impact the College of Medicine in Gainesville since Gainesville and Jacksonville operate independently of each other. As you are probably aware, in June 2007 the decision was made to move away from the model of common clinical departments spanning the two campuses (Gainesville and Jacksonville) to the current model of distinct departments with chairs reporting to their respective campus Dean. Furthermore, The College of Medicine in Gainesville separated Urology as an individual Department (formerly a Division in the Department of Surgery) in 2006.

The Urology Division, currently housed within the Department of Surgery, dates back to the early 1960's when its first resident graduated from the program. Urology faculty members perform the entire spectrum of traditional and contemporary urologic surgery. The clinical offerings of the Division of Urology are comprehensive and represent the entire spectrum of urology. These services include a comprehensive neurologic bladder injury, trauma and reconstruction practice, including advanced male and female robotic reconstruction; a urological oncology practice, which incorporates a multidisciplinary approach and includes advanced robotic interventions; a practice dedicated to the management of urological calculus disease, incorporating both medical and surgical management of simple and complex urinary stone disease; and a practice devoted to the burgeoning field of men's health, offering expertise in andrology, infertility, erectile dysfunction, and benign prostatic diseases. The Division educates 8 PGY-1 General surgical residents for 8 months of the academic year, 2 URO-3 residents from the Mayo Clinic for 4 months of the academic year, a minimally invasive laparoscopy surgical fellow for 1 month of the academic year, as well as welcomes interested medical students whenever requested. We are currently in discussions with the Mayo Clinic regarding the expansion of urology resident rotations.

The Foundation for The Gator Nation

The following key points support the transition to an independent department of the COM-J:

- In 1991 the American Urological Association made recommendations to academic institutions that, "all staff in medical schools and hospitals be members of independent departments and not divisions of surgery." This position was reaffirmed in 2015.
- The Department of Urology intends to begin Fellowships outside of the ACGME system. This would result in a broadening of the educational and health delivery missions of the University of Florida, enhance the care of a complex urologic reconstructive and oncology surgical population, while remaining cost neutral to UF GME, as these positions would be funded by the Department of Urology.
- Departmental status will facilitate future innovations which may improve the financial bottom line of the Urology Division without, impact from the other current divisions within the Department of Surgery.
- Departmental status will increase the ability to effectively implement specific educational plans, thereby attracting better scientists and faculty members in the future.
- Departmental status will allow more equitable involvement in some of the financial decisions (such as incentive plans) and the ability to communicate on an equal basis with chairs from other departments who may have overlapping or conflicting areas of interest.
- Departmental status will allow for more administrative autonomy within the medical center.
- Departmental status will allow for development of endowed chair positions in the future with a large financial impact on the institution.
- The Division of Urology plays a major role in the success of the UFPTI, providing urological
  care for its international and national clientele. Departmental status will allow the Division of
  Urology to maximally support the UFPTI by allowing expansion of capital and personnel
  resources independent of Department of Surgery budgetary approval.

I would be pleased if the proposal to transition the Urology Division to a department within the UFCOM-J could be placed as an agenda item on the next Faculty Senate meeting. If you have any questions, please do not hesitate to contact Dr. George R. Wilson (Senior Associate Dean for Clinical Affairs) or Dr. Guy Benrubi (Senior Associate Dean for Faculty Affairs) at 904 244-3131. Sincerely,

Daniel R. Wilson, M.D., Ph.D.

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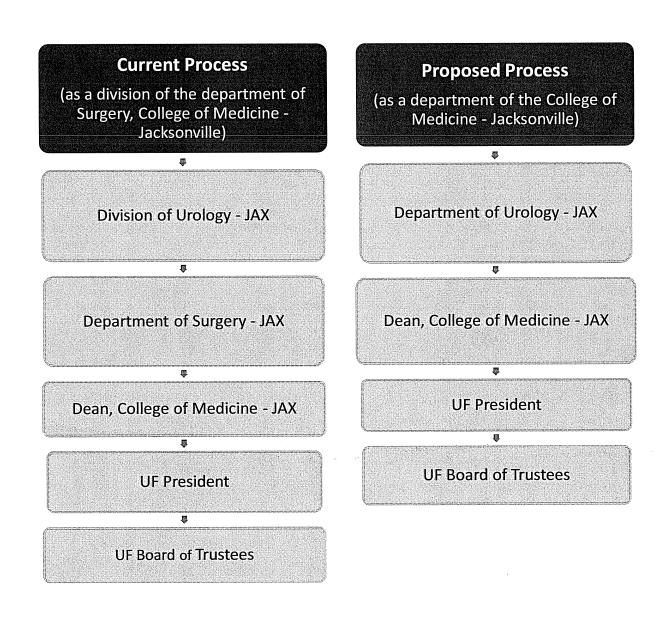
Dean, College of Medicine - Jacksonville

Attachment: Proposed Tenure and Promotion Process

cc: David S. Guzick, M.D., Ph.D., Senior Vice President for Health Affairs Michael L. Good, M.D., Dean of the College of Medicine Paul W. Davenport, Ph.D., Faculty Senate Chair College of Medicine UCC Representatives

College of Medicine – Jacksonville representatives, Faculty Senate

# PROPOSED TENURE AND PROMOTION PROCESS



#### ADDITIONAL INFORMATON PROVIDED TO THE PROVOST'S OFFICE

1. A description of the proposed change, the rationale for the change, any budgetary implications, and its possible impacts on faculty and students.

Financial implications of proposed change: The proposed change of the Division of Urology to the Department of Urology would primarily occur in hierarchical reporting. The proposed new "Department" of Urology's Chairman would report directly to the Dean of the College of Medicine, Jacksonville. If approved the Department would initiate a search for a Chairman. Employment of a Chair of Urology would include a new financial stipend commensurate with mean market value. The proposed Department of Urology would not add a faculty FTE for this position. There is an anticipated loss of a 1.0 FTE in the current Division of Urology. This vacant FTE position will be utilized for the newly created Chair position should this proposal be approved. There is an additional administrative 1.0 FTE for management of the Department practice. The additional cost of the Administrator salary as well as the Chair stipend would be continue to be covered by budgetary clinical revenue earned by the proposed Department of Urology. The estimated dollar impact of the change is \$150,000-200,000. No academic, state, or other outside funding source would be required or impacted by the additional financial burden of this proposal.

Impact on Faculty: Current faculty of the Department of Surgery or Division of Urology would not be significantly impacted by this proposal if approved. Tenure and Promotion (T&P) advancement would continue to follow the University's T&P process and the College of Medicine T&P guidelines. The operational process exercised in regard to consideration of individual candidate Faculty is outlined in the "Tenure and Promotion," paragraph below.

Tenure and Promotion: Faculty assigned to the division of Urology are on the multi-mission clinical (non-tenure) track. When a department has fewer than two eligible senior faculty to vote on the candidate, the Dean of the College of Medicine – Jacksonville (COM-J) initiates a review process by conducting a secret ballot exclusively of eligible members of the COM-J faculty (separated by surgical OR medical departments) to serve as the unit (department substitute) who are at or above the nominated rank, in lieu of the secret ballot of the department faculty.

Impact on Residents and Students: General Surgery residents and medical students (from UF or other institutions) would continue to rotate on the proposed Department of Urology service as they do currently with the Division of Urology. The hierarchical change of reporting will not reduce or impede Urology Faculty from supporting, "the education and inspiration of the next generation of leaders in health care, biomedical sciences, health services research, and academic medicine to seek, provide and sustain unparalleled achievements in service, teaching, and research." Urology faculty recognize the second bullet of the mission statement of the College of Medicine and will continue to support it as a Division or Department.

Rational for change: The Dean of the College of Medicine, Jacksonville believes there are multiple potential benefits to executing the proposed change. A Department of Urology would be more able to recruit key faculty and expand its program as a stand-alone department that is more self-determined. Programmatic growth not only increases revenue for the College, but more importantly, expands the reputation, prestige, and Urologic expertise offered in Jacksonville. In a cover letter sent to the Associate Provost for Undergraduate Affairs the Dean pointed out the below bulleted points:

- In 1991 the American Urological Association made recommendations to academic institutions that, "all staff in medical schools and hospitals be members of independent departments and not divisions of surgery." This position was reaffirmed in 2015.
- The Department of Urology intends to begin Fellowships outside of the ACGME system. This
  would result in a broadening of the educational and health delivery missions of the University
  of Florida, enhance the care of a complex urologic reconstructive and oncology surgical
  population, while remaining cost neutral to UF GME, as these positions would be funded by
  the Department of Urology.
- Departmental status will facilitate faculty recruitment and future innovations which may improve the financial bottom line of the Urology Division without, impact from the other current divisions within the Department of Surgery.
- Departmental status will increase the ability to effectively implement specific educational plans, thereby attracting more accomplished scientists and faculty members.
- Departmental status will allow more equitable involvement in some of the financial decisions (such as incentive plans) and the ability to communicate on an equal basis with chairs from other departments who may have overlapping or conflicting areas of interest.
- Departmental status will allow for more administrative autonomy within the medical center.
   Cooperative efforts with the medical center are often the basis upon which capital is raised for program expansion. Only an autonomous Department can effectively work with the CEO and COO of the medical center to achieve such goals.
- Departmental status will allow for development of endowed chair positions in the future with a large financial impact on the institution.
- The Division of Urology plays a major role in the success of the UFPTI (University of Florida Proton Institute), providing urological care for its international and national clientele.
   Departmental status will allow the Division of Urology to maximally support the UFPTI by allowing expansion of capital and personnel resources independent of Department of Surgery budgetary approval.

While these points may be laudatory in nature, we should look for actual evidence that departmental conversion can produce results. In 2006 the Department of Urology was created at the University Of Florida College Of Medicine, Gainesville. Prior to this time Urology was a Division of the Department of Surgery. The "Division of Urology" prior to 2006 at Gainesville had 4 fulltime faculty. Since transitioning to a Department in 2006 and recruitment of key people the Department has expanded to 11 full time faculty, 1 post-doctoral PhD, 6 adjunct faculty, and 3 Fellows of which 2 are PhD's.

In 2013-2014 the Urology Program at UF was ranked #18 in the nation. This was the highest ranking for any medicine department at the University of Florida.

- 2. A tally of the vote of faculty in the department of Surgery to establish a Department of Urology within the UF COM-J.
  - Yes 20
  - No 3

- 3. A description of the input received from appropriate Academic Unit faculty governing bodies (i.e., a college faculty council, departmental committee, or external advisory board);
  - The establishment of a Department of Urology was discussed with the UF COM-J Faculty Council; and approved unanimously by the UF COM-J Executive Committee.
- 4. A statement of support from the appropriate Dean or Director, Vice President, and Provost.
  - Letter from the Dean dated February 25, 2016



Warrington College of Business Administration **Heavener School of Business** Fisher School of Accounting Hough Graduate School of Business

100 Bryan Hall PO Box 117150 Gainesville, FL 32611-7150 352-392-2397 352-392-2086 Fax warrington.ufl.edu

April 27, 2016

# Memorandum

To:

Joe Glover

From: John Kraft

Re:

Warrington College of Business Administration name change

The faculty of the Warrington College of Business Administration voted unanimously to remove Administration from the College name. The rationale for this change is attached. Going forward the name of the college will be Warrington College of Business.

APPROVED!

Glover, Provost



Warrington College of Business Administration
Hough Graduate School of Business

105 Hough Hall PO Box 117150 Gainesville, FL 32611-1750 352-392-8436 352-392-2581 Fax warrington.ufl.edu

Dr. Angel Kwolek-Folland Associate Provost for Academic and Faculty Affairs

# College Name Modification Proposal - Removal of "Administration"

Proposed Change: Warrington College of Business

#### Rationale:

During a competitive analysis conducted by 160 over 90 in 2015, we noticed that many of our business peers are only using one word in referencing themselves - either business or management colleges (i.e. Kenan-Flagler, Kelly, Foster, Haas). College faculty, staff and Dean's Advisory board provided valuable input to the process. Additionally, when referring to our college verbally, we found that it is most commonly referred to as the UF College of Business. As we strategically position our communications to place more equity in the name Warrington, simplifying the identifier will make, both verbal and written uses, more consistent.

The College has an expanded academic program catalog which includes much more than our original MBA program. Hough Graduate School of Business alone offers six (6) specialized master's programs, Master of Business Administration (MBA) programs have eight (8) cohort options, five (5) Doctor of Philosophy (Ph.D.) programs, one (1) Doctoral program, and one (1) post-doctoral program. Our true identity is much more than Master of Business Administration or the perception "administration" conveys of simply meaning "management". Removing administration will help us better reflect the true nature of our innovative academic programs, international initiatives, entrepreneurial focus, three (3) Schools, and eleven (11) research centers.

This simple change will convey a more forward thinking message. The impact of the name change on faculty and students will be association with a brand that identifies the true nature of what the Warrington College is all about.

#### **Budgetary Implications:**

Cost of implementing this change is minimal. As new communication materials are produced, we will incorporate the new name change. We will not spend money on replacing existing communications until it is necessary to reorder materials. Faculty, staff, and students will be encouraged to use existing materials until time of reordering is necessary.

Tally of the faculty vote at April 27, 2016 faculty meeting: For – 14; Against – 0; Abstain – 0.

S. Selcuk Erenguc

Senior Associate Dean & Director of Hough Graduate School of Business

The Foundation for The Gator Nation