



The Physician Advocacy Merit Award

Institute on Medicine as a Profession at Columbia University

Application Guidelines

The IMAP Physician Advocacy Merit Award gives national recognition to up to three physicians for their commitments and accomplishments in the advocacy arena. The award includes a \$10,000 gift to support their ongoing efforts in promoting and realizing the principles of civic engagement.

Background

To fulfill the principles of medical professionalism requires going beyond the traditional scope of practice and exclusive focus on the care of individual patients. As vital as the precepts of altruism, competence, and self-regulation are to physicians, so is the need for them to confront and help overcome the social, economic, and political barriers that undermine health and well-being. Physicians engaged in this task typically face scarce resources, indifferent colleagues, and limited available time. Nevertheless, they often overcome these obstacles and promote social justice for vulnerable populations and communities. The aim of this Merit Award is to recognize and support their efforts, and to encourage others to follow in the footsteps.

Application Process

Physicians practicing in the U.S. who are currently engaged in advocacy efforts on behalf of their patients and their communities are eligible for the award. Applications may come from the physicians themselves or they may be nominated by others. Physicians in a residency or fellowship program and medical students are not eligible. We especially encourage candidates who are at an early or mid-point in their careers. Please see the profiles of past Merit Award winners for information on the types of physicians we support.

1. Personal Statement

Candidates are required to submit a personal statement not to exceed 1,000 words. It should address:

- (1) how the candidate became involved in advocacy;
- (2) the candidate's specific advocacy efforts (targets, goals, and forms of the advocacy);
- (3) the candidate's future plans and potential in the field of advocacy.

2. Letters of Support

Applicants should submit two letters of support – one from a person and one from an organization – that address the nature of the applicant's advocacy efforts and their impact on system change and the lives of those affected.

3. Documentation of Advocacy Efforts

This may be in the form of press clippings, legislative testimony, drafted/passed legislation, or testimonials from key decision-makers/policy-makers who can speak directly to advocacy successes. Please submit no more than three pieces of documentation.

4. Completion of Advocacy Profile Worksheet

Please complete the attached worksheet that details your advocacy efforts to date (see end of document).

Timeframe

The deadline for receipt of completed application packets is Monday, August 16, 2010. Candidates will be notified on Wednesday, September 15, 2010 and presented with the award at the annual Institute on Medicine as a Profession national advocacy meeting on November 18th and 19th, 2010.

Submission Instructions

Completed applications must be sent by FedEx or UPS to the following address:

Phoebe Johnson-Black
Physician Advocacy Merit Award
Institute on Medicine as a Profession
630 West 168th Street, P&S Box 11
New York, NY 10032
(212) 305-4184

Email Phoebe Johnson-Black with any questions at pj2225@columbia.edu or visit www.imapny.org/advocacy.

IMAP Mission Statement



The Institute on Medicine as a Profession (IMAP) aims to set forth a vision for professionalism in the 21st century and to promote that vision through research and policy initiatives. The Institute seeks to shape a world inside and outside of medicine that is responsive to the ideals of professionalism. IMAP conducts research on the past, present, and futures roles of professionalism in guiding individual behavior and collective action so that professionalism will be relevant to physicians, leaders of medical organizations, policy analysts, public officials, and consumers. www.imapny.org

Candidate Worksheet

Please check appropriate box(es) for each category:

Advocacy Focus:

- Health access
- Health rights
- Professional autonomy
- Health disparities
- Medical education/training
- Health workforce
- Professional standards
- Other: _____

Advocacy Target:

- Professional colleagues
- Health system (local/regional/national)
- Legislation
- Patients
- General public

Advocacy is conducted on behalf of:

- Patient/population group: _____
- Community group: _____
- Professional organization: _____
- Other: _____

Career Stage:

- Early (within 5 years of completing residency/fellowship)
- Mid (6-20 years post residency/fellowship)
- Senior (>20 years post residency/fellowship)

2009 Merit Award Winners

1) Michael Fiore MD, MPH, MBA

After graduating from Bowdoin College, Dr. Fiore completed medical school at Northwestern University and his internal medicine training at Boston City Hospital. Dr. Fiore received additional training as an Epidemic Intelligence Service (EIS) Officer for the United States Centers for Disease Control before coming to the University of Wisconsin-Madison, where he is currently a professor of medicine. He also founded and has served as Director of the University of Wisconsin Center for Tobacco Research and Intervention since its establishment, is a clinically active general internist, treating patients for tobacco dependence, a nationally recognized expert on tobacco, and an author of numerous articles, chapters, and books on cigarette smoking.

Fiore served as chair of the panel that produced the United States Public Health Service (PHS) Clinical Practice Guideline: Treating Tobacco Use and Dependence, in 2000 which provides a gold standard for healthcare providers. That PHS Guideline was updated and published in 2008 with the simultaneous endorsement of 58 leading medical and public health organizations. He also chaired the U.S. Department of Health and Human Services Subcommittee on Tobacco Cessation of the Interagency Committee on Smoking and Health that produced a comprehensive plan for promoting tobacco cessation in the United States. In July 2003, he received an Innovators in Combating Substance Abuse Award from the Robert Wood Johnson Foundation. In 2005, Dr. Fiore was asked by the United States Justice Department as part of their landmark lawsuit against the tobacco industry to craft a \$130 billion, 25-year plan to assist 33 million smokers to quit.

2) Benjamin Hoffman, MD

Dr. Benjamin Hoffman is a semi-native of New Mexico. After studying anthropology at the University of California Berkeley, he obtained his MD from Harvard Medical School. He completed residency in pediatrics at the Children's Hospital in Seattle, WA, and spent an additional year as chief resident there. He then returned to the New Mexico to work with the Indian Health Service on the Navajo Reservation and spent four years there before joining the faculty at the University of New Mexico. He is an associate professor of pediatrics, director of the pediatric residency program, and assistant dean of graduate medical education.

Ben has been very involved in child passenger safety in New Mexico at both the community and the legislative levels. He is a NHTSA certified CPS technician instructor, and serves as vice-chair for Safer New Mexico Now, and on the executive committee for the American Academy of Pediatrics Section on Violence, Injury and Poison Prevention. Ben also serves on the AAP's Committee on Native American Child Health. In 2001, he developed a longitudinal curriculum in community health and advocacy for pediatric residents at the University of New Mexico to insure that the next generation of pediatricians have the knowledge and skills to identify needs and assets of their communities, and are equipped to collaborate effectively to effect change. The PARC (Pediatric Advocacy, Rural and Community) program has become a centerpiece of the training program at UNM and has yielded multiple innovative and effective resident projects that have impacted communities from New Mexico to Africa.

2008 Merit Award Winners

1) Neil Calman MD

Dr. Neil Calman has been practicing family medicine in the Bronx and Manhattan for the past 30 years. He began his work as a physician advocate in medical school by reporting unethical and dangerous experiments performed on African-American women. When his complaints were ignored, he involved the press; the experiments were stopped, and he was asked to serve on the newly created human experimentation committee. Calman is also the president and co-founder of the Institute for Family Health. Under his leadership, the organization delivered more than 200,000 primary care, mental health and dental visits to more than 70,000 individuals in 2007. He also directed the formation of Bronx Health REACH in 1999, a coalition of 40 organizations dedicated to eliminating the impact of racial disparities on health outcome. Dr. Calman was recently appointed to a two-year term on the United States Health Information Technology Policy Committee.

2) Lisa Chamberlain MD, MPH

Dr. Lisa Chamberlain, an Assistant Professor of Pediatrics at Lucile Packard Children's Hospital at Stanford, exemplifies the power of physician advocacy to improve children's health. As a California-based pediatrician, she has increased children's access to treatment for asthma and created community-based school programs to encourage children to choose behaviors which reduce their risk of obesity. In response to a potential veto of the 2007 Congressional bill that reauthorized and expanded the State Children's Health Insurance Act (SCHIP), Dr. Chamberlain, who is based in San Francisco, staged protests as part of a "Stand Up for Children" movement. The movement spread across the nation, with 41 residency programs in 22 states holding public rallies and legislative phone-a-thons. These efforts helped bring about the passage of the SCHIP Extension Act of 2007, improving health care access for millions of children.

3) Yvette Roubideaux MD, MPH

Dr. Roubideaux is currently the Director of the Indian Health Service (IHS). Before directing IHS, she worked with them as a Medical Officer and Clinical Director on the San Carlos Indian Reservation and in the Gila River Indian Community, and was also an Assistant Professor at The University of Arizona College of Medicine. Her work included teaching and research on Indian health issues, with a focus on diabetes in American Indians/Alaska Natives and Indian health policy. She was also the Co-Director of the Coordinating Center for the Special Diabetes Program for Indians Competitive Demonstration Projects, in which 66 sites are implementing diabetes prevention and cardiovascular disease prevention activities in American Indian and Alaska Native communities.

Dr. Roubideaux served as Chair of the National Diabetes Education Program American Indian Subcommittee (1998-2005), and was formerly the Chair of the American Diabetes Association Awakening the Spirit Team. She was President of the Association of American Indian Physicians (1999-2000) and was appointed to the Department of Health and Human Services Advisory Committee on Minority Health in 2000. She is co-editor of the American Public Health Association book entitled "Promises to Keep: Public Health Policy for American Indians and Alaska Natives in the 21st Century."

