

HRSA/MCHB 2007 FEDERAL/STATE PARTNERSHIP MEETING

Building Blocks for Promising Practice Models

October 14 - 17, 2007

Awards

PETER C. VAN DYCK: Good afternoon. It's really a pleasure for me to stand before you. This is always a great time for me. It's really fun for me to be able to award from the bureau, some special people who contributed so greatly to the bureau's activities, to MCH in the country, and to mothers and kids. I wish we could recognize everybody with an award. Everybody certainly deserves an award. But there are some who stand out each year. And the awards committee has done a wonderful job in soliciting for awards, and then reviewing the awards and making recommendations to me. And to begin, I'd like to recognize the co-chair of the awards committee from the bureau, Cory Palmer and Pam Eason and Julianne DeStefano. You want to stand, please? And from Missouri, Melinda Sanders as well. Melinda and her staff. Okay.

Awards are solicited several months ago and nominations come into the bureau and the awards committee makes recommendations to me. I'm the final arbiter. And there are several awards that we give. One of the directors' award, as you heard me say yesterday, presented to an individual or group of individuals for noteworthy contributions made with the health of infants, mothers, children, adolescents, and children with special healthcare needs in the nation, and again,

awards or nominations rather are accepted from anyone in or out of MCH program sphere.

And then a second category of award of the Vince L. Hutchins Partnership Awards, and this award is presented to an outstanding individual that exemplified skills and partnership and collaboration in MCH programs. And again, nominations for this award can be made from anybody in the nation either in or outside of the MCH program sphere. And clearly, nominations that reflect significant positive effect on the bureau's programs, or on the bureau itself for that matter, have an advantage. Today, I'm going to begin with the Director's Award and end with the Vince Hutchins Awards.

At the beginning of the 21st century, there were large gaps in our knowledge of both the national and state levels about the prevalence of many child health conditions and the healthcare experiences of their families. The bureau began to address this situation with alternating surveys every two years, beginning in 2001 with the first National Survey of Children with Special Healthcare Needs, followed by the first National Survey of Children's Health in 2003, and then repeating that pattern in the surveys for 2005 and 2007, which has just been finished.

The National Surveys of Children with Special Healthcare Needs with a sample of about 40,000 children examined issues related to such topics as health and

functional status, care coordination, family-centered care in medical homes, adequacy of health insurance coverage, and impact on the family.

The National Surveys of Children's Health with a sample over 100,000 children focused on topics such as health and functional status, access to and utilization of care, presence of a medical home, age specific models for early childhood, middle childhood and adolescence, diet and nutrition, family functioning and neighborhood characteristics, guided by a national expert panel, composed of subject matter experts in child health, survey methodologists, Federal and state Title V, program directors and individuals representing other Federal partner agencies. Both surveys were designed to provide baseline estimates for Federal as well as state performance measures, Healthy People 2010 National Prevention objectives and state level data for program planning and evaluation.

In the future, these surveys will serve as a means for gauging changes in the health needs of children and our capacity to meet their needs. They are the largest and only surveys of their kind documenting the needs of children and their families.

Three people in the bureau carried the major responsibilities in sharing that these surveys reflected sound program principles and kept the effort moving and on time. And those folks are Dr. David Heppel, Dr. Bonnie Strickland and Dr. Michael Cogan.

Dr. Heppel is the director of the Division of Child, Adolescent and Family Health. To meet the diverse health needs of families, David encourages collaboration among public health departments, private healthcare providers and buyers of healthcare to produce efficient community-based systems of healthcare. For several years, he's worked for the National Conference of State Legislators, the National Governors Association, and other national professional and philanthropic organizations to encourage Federal, state and local collaborations.

David has been concerned about the health and well being of this nation's children throughout his entire career. As liaison for Indian Affairs of the National Institute of Mental Health, he was responsible for increasing access to human services for severely impaired American children and Alaskan native children and youth. And as director of the Indian Children's Program in the Indian Health Service, David was again in charge of a program need developed mentally disabled children.

He received his medical degree from the University of Rochester, completed his pediatric internship and net residency at the University of Arizona, and completed the Developmental Pediatrics Developmental Disabilities Fellowship at the Kennedy Krieger Center in Baltimore.

Bonnie Strickland, and I've had to cross out acting director here of the Division of Services for Children with Special Healthcare Needs. Bonnie, where are you? So I--well, there are you are. As of Sunday, she has offered and accepted the newly appointed director of the bureau. New kid on the block.

The division provides national leadership for programs serving all children, youth and adults with special healthcare needs and facilitates the development of comprehensive community-based systems of services. And you know the mantra. All of you know this, and I don't need to say it. Within this framework the program also administers a national system of programs designed to improve genetic services including sickle cell disease and hemophilia, the National Traumatic Brain Injury Program or TBI, early hearing detection and intervention, and access to care for children and youth with epilepsy.

Bonnie is the author of numerous publications and presentations related to special needs children, and serves on numerous inter-agency committees, including the AAP committee on children with disabilities and the National Initiative on Child Health Quality or NICHQ advisory board.

Bonnie has been a key leader over the past decade in establishing a National Children's Special Healthcare Needs Agenda, you've heard that discussed in several presentations, developing key systems indicators to define that agenda and implement the measurement strategy to monitor their progress.

And Dr. Michael Kogan, who's currently the director of the Office of Data and Program Management for the Maternal and Child Health Bureau. In this position, he is responsible for directing activities of the office with an emphasis on MCH research, building the data capacity of Federal state and local areas in MCH and building the Maternal and Child Health Epidemiology capacity in the United States. Prior to coming to the bureau, he worked as a senior epidemiologist at the National Center for Health Statistics at CDC. He serves on the editorial boards of the Maternal and Child Health Journal and the American Journal of Public Health. He served as a special editor for pediatrics as well as the Maternal and Child Health Journal. He's also held adjunct academic appointments at the University of Alabama at Birmingham as well as Harvard University. He's published articles on numerous topics on pediatric and pre-natal epidemiology, including the content of pre-natal care, over-the-counter use of medications among children, the effect of periods without health insurance on continuity of care for young children, racial and ethnic disparities and birth outcomes, the effect of changing obstetric practices on birth outcomes, and, I should say, on and on. A very prolific and successful author.

Michael received the 2003 National MCH Epidemiology Award for advancing knowledge. He received his doctorate in epidemiology from Yale University. Please join me in welcoming and awarding the Director's Award to these three very worthy people. Would you three come up here?

Director's Award presented to Bonnie Strickland in recognition of contributions made to the health of infants, mother and children--let me read that again. Health of--there's a lot commas here. And it's hard to see through the glass. In recognition of contributions made to the health of infants, mothers, children, adolescents and children with special healthcare needs. I shouldn't have to read that, should I? Duh. 2007.

David Heppel, in recognition of contributions made to the health of infants, mothers, children and children with special healthcare needs in the nation for 2007.

And for Michael Kogan, in recognition of contributions made to the health of infants, mothers, children, adolescents and children with special healthcare needs.

Dr. Jeffrey Lobas has been a professor at the University of Iowa since 1997. In addition, he's been the director of the Child Health Specialty Clinics, the Title V Program for children with special health care needs in the state of Iowa. Jeff serves as the medical director for the Iowa Department of Public Health, Division of Health, Promotion and Chronic Disease Prevention, and he's the principal investigator for Iowa's Medical Home Project. He's the interim director of the Division of General Pediatrics and Adolescent Medicine at the University of Iowa.

He graduated from medical school and completed his residency in pediatrics and internal medicine at the Medical College of Ohio and his fellowship in pediatric critical care and pediatric pulmonology at the University of Wisconsin. He served as president of the Association of Maternal and Child Health Programs, as you all know, from 2000 and 2007--2005 to 2007 and is now serving as the immediate past president.

While he was at AMCHP, he helped lead the organization in developing and implementing a new strategic plan during a very tumultuous time, period of time, he held the organization together and led the efforts, which found the new CEO, Michael Frazer, who is here. Michael, we'll hear from you tomorrow. He helped develop new partnerships and nurtured old partnerships, particularly with the bureau, with the Academy of Pediatrics, CityMatCH, CDC, ASTO and ATMatCH. He led new efforts at bringing SAMHSA and Title V together, which you heard about this morning, a very laudable effort. He led the restructuring of AMCHP with new committees and a new approach to policy, and he developed new directions and advocacy at the national and state level.

He's a member of the Board of Trustees of the Iowa Chapter of the American Academy of Pediatrics. He serves on many national state university committees, working to improve the health of children with special health care needs and their family. Sadly to say, but I think with mixed feelings, we know that Dr. Lobas, Jeff will become the chief medical officer for Banner Children's Hospital in Mesa,

Arizona in December of this year. We're sorry to lose you, Jeff, from our community, but hope you keep in touch. Please join me in welcoming and awarding Jeff Lobas.

JEFFREY G. LOBAS: Peter just asked if I wanted to say a couple of words, and, of course, I do. Well, here's my list. And I do this--

PETER C. VAN DYCK: (Inaudible).

JEFFREY G. LOBAS: Yeah. Maybe you better--and I do this partly because this is a bitter sweet occasion for me because I am moving on to something different and going to be part of a new community, and I hope to stay part of this community. So, I--first of all, I want to say thank you and farewell. And I apologize ahead of time if I get a little emotional here, so. And I have been honored to be part of this community for the last 10 years. And it's very humbling to be up here with this award on the podium with Peter, and all of you and, I mean, of what we all have gone together over the last 10 years. I jokingly, this morning, put the pyramid sign up, but that has really been instilled in my very being and I hope to carry that with me to Arizona. So, thank you for that. In reflection in things, I want to say thank you specifically to all of you at MCHB and my fellow state directors and colleagues in AMCHP and in the AAP. I want to thank the AMCHP staff, and this is where they'll pull me off. So--and I want to thank my friends on the AMCHP board. And Mike, we haven't known each other

that long, but I loved working with you and I look forward to that. I am going to stay through my term as past president, so I'll be here coming to some meetings for the next year and a half. I want to thank Peter and Bonnie and David and Merle and Ann for all your support, Family Voices. I want to thank Cassie. She's been supportive of me since I began that first day in Kansas City, and especially Phyllis and Sally and Bill Hollingshead and others on the board. And I especially want to thank Leanne for being my friend, and Ashley, and Jane for being my friend in Iowa. And as you know--and I'll end on this, you know, I use my kids as my reflection and my symbol of what we do. And we had a reception for me last week in Iowa. And as I reflected, what I realized, I recall this one time and as many of you know, my area of clinical expertise is in critical care. And I-- when I used to attend in the ICU a lot, I would always remember as I left the parking garage to go into the hospital, something would change in me and I realized I'm going to take care of my kids. And I just--that has always carried me through in my job as a specialties director, has been these are my kids. And I want to thank you for all the work you do, and I hope you all realize what great work you all do. And these are your children, and these are your mothers, your sisters, your families, and you do great work, and I thank you for all of that. I will be creating new systems of care in Arizona, and I'm going to strive. I told Bonnie this morning, I'm going to really strive to stay connected and see, can this private sector, coming from that end, really work with the public sector. So, I do have 10 years of gratitude, and I thank you for all I get (inaudible).

PETER C. VAN DYCK: Stefani Olsen has been the project director for SAIC, which is a computer consultant firm for the Maternal and Child Health Bureau, and the development and continued maintenance of its two programs and the performance measures information systems, the Title V Information System, or TVIS and the Discretionary Grant Information System, or DGIS. She's provided exceptional service to the Maternal and Child Health Bureau and her stewardship of these two systems. She's led the way in modernizing the TVIS and helping create more useful web reports, as well as leading the development of the Discretionary Grant System. For those of you who use the TVIS information online regularly to search performance data, read about better practices, do research, you feel the impact of her contributions to the field.

Stefani joined the MCH field to support these systems in January of 2002. She's lead the team in updating TVIS from its legacy technology to the robust system that it is now with her standards for information technology. She oversaw this modernization as the TVIS data entry system went from a standalone desktop application to the web-based application system currently used today by all of you in this room, basically. As a collaborator in partnership, and partner with the bureau and its state colleagues using the system, she's always had an open mind and keen ear for listening to suggestions and recommendations on ways to improve TVIS. And believe me she's heard a lot of ideas and suggestions.

During her tenure as project manager, she managed a lot of changes in the system that made them more powerful and better tool for MCH. For example, she oversaw the development of collecting the state narrative as part of the TVIS database resulting in online web reports that allow the state's block grant narratives to be searched, a powerful tool for us in the field. She oversaw system changes that helped both the states and the bureau who manage the block grant. She managed the development of the automated status checker and its data alerts that help guide states to completing their work. She also managed the development of the automated compliance checklist that maps the requirements of the Title V legislation to parts of the application to help project officers track compliance in this--to the statute. And she championed the development of the use of charts and maps to illustrate performance-measured data in action, and one of her pet projects was ensuring that the Title V State Snapshots was developed as an online report so that state TVIS and discretionary data can be accessed easily and in the same place. In addition to this technical leadership, Stefani also served MCH as a reviewer in both the Title V Block Grant and NSSDI applications. I'm sure something had improved her ability to respond to our request. Anyone who has met her cannot help but remember her. With a bright voice and a bright smile, she participates in meetings and discussions with energy and insight. She recognizes when an idea is good and can forecast when an idea is not so good. But she treats those recommendations--with those recommending either with dignity and consideration. A great talent, I might add.

SAIC, sadly, has tapped Stefani to lead the Software Development Team at MCHB sister bureau, the HIV/AIDS Bureau, so we'll be losing her in MCH and the Title V, and DGI System will be losing her. Her dedication, energy and service to the MCH are on record and she'll be greatly missed. I would like to recommend her dedication and value--recognize her dedication and value to the bureau with this Director's Award. Stefani.

STEFANI A. OLSEN: Thank you, Peter. Thank you so much. Thank you.

PETER C. VAN DYCK: The Director's Award presented to Stefani A. Olsen in recognition of contributions made to the health of infants, mothers, children, adolescence and children with special health care needs. Stefani.

STEFANI A. OLSEN: I really just can't pass up the opportunity to say thank you to Peter, Cassie and the rest of the bureau staff for the absolute honor and opportunity to work with them over the past several years.

When I joined SAIC, again, actually, it was the second time I worked for SAIC. I came back to SAIC in 2002. I knew that there would be technical challenges ahead in my work for the bureau, but what I did not know was how much I would learn and be inspired by the wonderful staff of MCHB in the years to come as well as all of their partners at the state level and the program staff that I've gotten the chance to meet.

As an IT contractor, your focus is on building systems and making them work. And this is challenging and exciting when you get to work with new technologies and talented staff as I do. But it doesn't necessarily hold the promise of inspiring you or giving you a sense of being part of a larger, positive mission in society. And working with MCHB, our team has had the rare opportunity as IT contractors to really feel part of your mission and to protect and address the health concerns of the Maternal and Child Health population. And to know that the systems that we're building everyday go into serving you and helping fulfill that mission and that has been an incredible honor for all of us.

It's really the incredible vision and spirit of service that the bureau staff have that make sure this mission has been at the forefront of everything the IT contractor at SAIC Team does in support of the systems.

And I'd like to just say a couple of things that have, me in personal awe and I think I can speak for our whole team, that Dr. van Dyck's commitment to collecting and using program data and analyzing it to help inform program decisions and continually improving the quality and relevance of that data have been unique and truly outstanding and just something that we very much admire when we get to watch it at work, and that has been an incredible honor to watch. And I believe that it's visionary and something that's very unique.

Also, another fabulous aspect of working with the bureau over the past several years has been that spirit of partnership and collaboration that everyone seems to recognize has become so much a hallmark of all of the work. And as a contractor, we have also gotten to participate in that, and the systems we've built have benefited from that strong sense of collaboration. And I believe that spirit is largely, thanks to the commitment and tone set by Cassie Lauver of the Division of State and Community Health. And she truly sees the work that we do as a part of strengthening that collaboration with the states and helping the states in their mission, and to be able to work in such a collaborative and collegial environment has been also a true honor.

Although I am moving on to another project, I'm not going far and I will continue to watch with pride as the Maternal and Child Health Bureau moves forward. And I have to say, I know I leave you in very good hands. Chris Dykton will be taking over management of the project. And as you know--some of you might know Chris work for Georgetown before coming to SAIC. And Georgetown was not going to be staying on the contract and Jeff Koshel who was the project officer at that time. And I--we're having some conversations about who would be good people to bring on from the Georgetown team, and he was saying Chris is very valuable. And at that time, the Washington Football Team was having a very bad season and they were trying to recruit some coaching help to improve their record. And they were recruiting a guy name Steve Spurier. And I'm not really a big sports fan so I don't know much about him, but he was supposed to be this

wunderkind who was going to come and revolutionize and help the team with the season. And Jeff was trying to make an analogy and he said, “Chris Dykton is to your project as Steve Spurrier is to the Redskins.” Well, I know how the seasons for the Redskins went after that. And I can only say Steve Spurrier were one quarter as good.

As you know, Chris has done a much better job. And I know that he will just continue to make sure with his knowledge of public health, and he really does put maternal and child health concerns first as something he shares your passion about. And I know that he will continue to make sure that all of the systems we develop for you are not just IT, but actually imbue your mission and keep your mission first and foremost in their minds. It’s also been an incredible honor to work with the rest of the MCHB staff, Carol, Marybeth, Jeff, Jaime Resnick who’s helping lead us in the development of TGIS. So, I want to say thank you for these years and you’re fabulous people. It’s been a true honor to work with you.

PETER C. VAN DYCK: I have the pleasure of presenting another Director’s Award to Nora Wells, sometimes known as Eleanora and at other times known as by her closest colleagues as the gut deity—a gut data lady.

Nora has a long history of leadership and advocacy on behalf of children and youth with special healthcare needs and their families and both the health and education of (inaudible).

In the early '70s, Nora probably did not consider herself a leader, but that's what she became as she first advocated on behalf of her son, Daniel, born with cerebral palsy but not diagnosed until Nora noticed the lack of hand coordination and tone. When he was finally diagnosed, she was told to take him home and wait for a few years until something could be done. Well, even then, Nora did not take kindly to anything resembling a no. She sought out with few services there were until she got him into a preschool program at Tufts. In 1974, she became the first president of parents and friends of handicapped children, a consumer group for parents and children with cerebral palsy to provide support and disseminate information.

Evidently, their experiences and those of other families prodded Nora to tackle another level of advocacy in 1977 when she became a founding member of the Parent-Professional Communication Group, which promoted clear communication and partnerships between families and professionals particularly those in hospitals. This led to having families involved in the redesign of children's hospital in Boston, to make recommendations for families to be with their children, and also to providing the family perspectives on caring for their children and the roles they wanted to play in the Boston land program. Nora then became one of the founding parents of Family Voices, a grassroots organization advocating on behalf of children and youth with special healthcare needs. And that grew from families sitting around the table to a national network of state and

regional coordinators with now over 14,000 members in the National Center for Family and Professional Partnerships.

In 1997, she served as the co-director and co-principal investigator for the Family Partners Project where she developed, wrote and managed the joint project between Family Voices in Brandeis University to conduct the national family survey in 20 states. This helped the nation to better understand the barriers parents faced. And to understand that, yes, families can participate in research.

Currently, as director of the National Center for Family and Professional Partnerships, Nora works with the entire network and helps the family run family-to-family health information centers, the new grants from the bureau, collect and analyze data about who they help, the issues they face, and the impact to family-to-family on the families and providers they serve. Known sometimes as the gut data lady, that's harder to say than it reads. I've got to be careful on that one.

Nora is full of questions and curiosity. A natural researcher and a lover of data, she promotes and helps train family-to-family center staff on the Family Voices solution's database, and serves as the director of the Data Resource Center Project Child and Adolescent Health measurement initiative Family Voices. She's helped organizing direct family input into the design, development and implementation of Camie's interactive website, that website that allows you to participate easily in these national surveys, providing public access to data from

the surveys including both surveys we've just talked about earlier.

Those of us who know her feel that it is her drive and nature to question why when any barriers arise, and then to do something about it. In the process, she's been an incredible liaison between families and professionals, agencies and the bureau.

Nora is what we call a leader across the lifespan, who helps families, children, youth and now, adults with her diligence to equality or commitment to quality and her honesty. Nora, please come up and accept the Director's Award.

Presented to Nora G. Wells, in recognition of contributions made to the health of infants, mothers, children, adolescents and children with special healthcare needs.

NORA G. WELLS: Thank you. Oh, gosh, it's so hard to sit and not say a few things. First of all, Peter, it's so fantastic to have a family up here on the stage. And to think about all the things that the bureau has done to promote the partnership with the people that we serve. So, every one of us in this audience believes in the importance of improving systems, and we all serve people. And in that service to people, we need to be thinking about the ways those people themselves can be part of the process. And the bureau has taken the leadership to do this from many years ago. And Peter, and Bonnie, and Diana, and Linda on

the Children with Special Healthcare Needs side, and David, and Cassie, and the many project officers on the other side of Maternal and Child Health, have all believed that it's really important that everybody has the right and the obligation to speak up about what they see as important in the system.

So, my kids called me, the only person who has a birthday that says March 4th, my birthday is March 4th, and they consider it a command, March 4th. I couldn't stand here without saying that you have right in front of you, and at this table right here, some incredible family leaders from around the country. We have the Dinean Feist from North Dakota. We have Ruth Walden here from New York. We have Rodney Farley here from Arkansas. We have Malorie Seer, a brand new youth leader from Maine. We have Betsy Anderson from Boston. I believe I saw Judy Walker from Arizona here, I don't know whether she's here. But these are all family leaders who, along with the many opportunities I've had, have done incredible things with the bureau and are presently doing incredible things with the bureau to promote the idea that everybody has a voice, and all those voices need to be heard.

So, I know as you march forth from this meeting, I'm sure you came away as I did with many exciting ideas. I think the meeting was an amazing conglomeration of things from every angle. And so, we all have wonderful things to go home with. Congratulations to all of you and march forth.

PETER C. VAN DYCK: In honor and memory of Dr. Hutchins, in 2002, the bureau chose to establish two new awards that exemplify and celebrate two of Vince's many distinguished qualities. As most of you remember and perhaps the new folks in the room don't, Vince was the director of the Maternal and Child Health Bureau from 1977 to 1992, and passed away on January 15th, 2001. And in honor of Vince's outstanding partnership and collaborative skills, the Dr. Vince L. Hutchins Partnership Award is given to an outstanding MCH individual that exemplifies exemplary skills and partnership and collaboration. It may be presented annually by the bureau, and I say may, it's not always, in the MCH Partnership Meeting or the New Leader Meeting. The recipient receives an individual award and is also recognized on a plaque which is displayed in the bureau offices. Former Vince L. Hutchins awardees from 19—or from 2002 included Catherine Hess, Polly Arango, Paul Newacheck, Garland Land, and last year, Deborah Klein Walker.

The second award related to Vince's name in his honor of Vince's wonderful mentorship skills, his kindness and devotion to students. And this is a joint venture between the Maternal and Child Health Bureau and the American Association of Schools of Public Health, and the selection of an outstanding student in public health to service the Vince L. Hutchins MCH fellow. A recent public health graduate will be selected for the fellowship every one to two years at the bureau. And the fellow will receive an individual award noting the

fellowship and will also be recognized on the perpetual plaque on display in the MCH offices.

This year's fellow award awardee is Amanda J. Cash. Amanda received her Doctor of Public Health degree this year from the University of Oklahoma Health Sciences Center in Oklahoma City. Her areas of study included health policy, epidemiology and bio-statistics. While at the University of Oklahoma she pursued research in Childhood Obesity Prevention, and Children with Health--Special Healthcare Needs. She designed, implemented and evaluated a randomized school-based intervention to encourage prevention of childhood overweight and healthy eating habits. She's also a fellow of the bureau's Leadership Education in Neurodevelopmental Disabilities or LEND Program.

During her tenure as a LEND fellow, she worked on interdisciplinary projects with the Oklahoma Genetics Advisory Council in the Oklahoma Family Network to improve access to services for families with children with special needs. She was awarded the Outstanding Student Award upon graduation this spring, and she was also given the Outstanding Student Leadership Award for the College of Public Health in 2006. She held numerous leadership positions as a student, including chair of the campus-wide Interdisciplinary Learning Committee and president of the College of Public Health Student Association. She's also a member of the Oklahoma Turning Point Community Partnership, a national initiative of the W.K. Kellogg and Robert Wood Johnson Foundations to

transform and strengthen public health infrastructures. Founded on the idea that the diverse groups working together can better identify and influence the determinants of health. And in addition to those things, she did her studies.

I am really honored to have Dr. Amanda Cash with the bureau for this next year, and would love to award her this year's Vince L. Hutchins Fellowship Award. The Dr. Vince L. Hutchins' Maternal and Child Health fellow, Amanda J. Cash, awarded by the Maternal and Child Health Bureau and the American Association of Schools of Public Health.

AMANDA J. CASH: I just want to say thank you to the bureau, Dr. van Dyck, and ASPH. And I'm really excited to start on my new work at the bureau. So, thanks.

PETER C. VAN DYCK: It's wonderful to have such talented new blood coming to the MCH field. And now, for the Dr. Vince L. Hutchins Partnership Award, in honor and in memory of Dr. Greg Alexander, who was one of the world's great scholars and teachers, a father of two beautiful daughters, Kerry and Morgan, and a devoted husband to Donna J. Peterson.

Greg was born in Washington D.C., and although his family, his father's military assignments took him to various places such as Grote in Connecticut, San Juan, Puerto Rico and Denver, Colorado, his family settled in his mother's home of Charleston, South Carolina. He graduated from Charleston Preparatory School

and enrolled at the College of Charleston at the age of 16. He studied English and Ancient History specializing in Egypt, Rome and Greece. He was particularly interested in mythology and its relationship to the development of religions, an avocation he pursued throughout his life.

He became an air pollution inspector with the Charleston County Department of Health, and as part of the environmental health team, he spent a lot of time on the sea islands of South Carolina working on water systems, sewage disposal, vector-borne diseases, dog bites, bad infestations, school cafeteria and restaurant inspections. There are a lot of ways to begin an MCH career.

What he observed here did shape his entire career. Children are the most vulnerable to failures of those in public health systems and the least able to afford early threats to their healthy growth and development. Armed with these insights and a new found passion for public health, he enrolled in the first master of public health class at the University of South Carolina in Columbia. He double majored in health administration and biostatistics, and was hired upon graduation to serve as an evaluator in the South Carolina Department of Health and Environmental Control. His first assignment, the state's Maternal and Child Health Program. His tremendous interest in children's health coupled with a strong organizational data management and analysis skills, and interest in systems, made this an ideal opportunity for him to explore a new-found area, research.

He moved to the division of preventive medicine at the University of South Carolina, and began what would be a long and fruitful career, posing questions, seeking the data with which to answer them, collecting colleagues, creating and disseminating new knowledge. In these early years, he worked on a wide range of topics. Adolescent pregnancies, suicide, homicide, occupational health, and the application of new computer graphic methods to the visual examination of bivariate relationships.

By the time he applied to the doctoral program in the Department of Maternal and Child Health at Johns Hopkins, he had already published a number of articles and peer review journals including a commentary in the New England Journal of Medicine, and delivered multiple presentations at scientific meetings. He announced this dissertation topic during his interview, and he planned, and as planned completed the study: Effects of Prenatal Care Utilization Between and Within Racial Subgroups on Measures of Infant Maturity at Delivery and Neonatal Mortality, and earned his Doctor of Science degree in two short years, two short years.

Greg had found his calling. Found his home in Maternal and Child Health. For him, it was the culmination of everything he'd experienced to that point, and the perfect amalgamation of his wide ranging skills, his diverse experiences, and his passions. Over the next 20 years, he would employ all of these in the pursuit of

knowledge and the development and nurturing of new professionals in the cultivation of networks of colleagues around the world sharing in these tasks and in the ongoing continuing professional development of those who work in maternal and child health programs across the country.

He was a true leader, recognized for his work not only with awards and accolades, but by the students and colleagues he tended to, encouraged and supported throughout their own careers. He had a remarkable gift for teaching, was extremely generous in sharing his knowledge and his love with others. He acquired early on a style that typically only comes to us late in our careers. He was rarely alone in his office, would give his undivided attention to whomever was in there, be it a student, staff member, or a colleague. He saw nearly every moment as a teaching moment as those of us who knew Greg know so well, and for him, those were also learning moments. It was in this camaraderie, in the sharing of data and ideas, in the discussion and debate that the best ideas emerged.

He was prolific. The numbers speak for themselves: 170 publications, 10 commentaries, 25 book chapters, 26 technical reports, 273 presentations, 20 continuing education sessions, even four published recipes. He reviewed manuscripts for 27 different scientific journals and was on the editorial boards of four journals. He developed and taught 16 different courses at four universities. He advised 46 masters students, six post-doctoral fellows, and served the

honorary chair of doctoral committees for 15 students. For nearly 15 years, he directed the National Maternal and Child Health Leadership Skills Training Institute, touching many of you in this room and providing critical leadership skills development to hundreds of folks like you, directors and staff of MCH programs.

He was a consultant to local state federal and international organizations and conducted research in several different countries. He was a visiting professor at the University of Hawaii, the University of Hawaii at Manoa for 17 years and was also a part of a collaborative effort in the Caribbean involving researchers from six countries. He liked to joke but he specialized in isolated and island communities, really just as an excuse to get out of Baltimore and Minneapolis in the wintertime.

His love of maternal and child health also fueled some of his special projects, such as the following: compiling a history of MCH, and most recently, developing a Web-based timeline of this history, consulting with the Association of Maternal and Child Health Programs, AMCHP, and the Centers for Disease Control to develop a tool kit for state MCH programs to better enable them to assess and understand trends in infant mortality and pregnancy outcome; leading workshops for different states and regions of the country on such critical issues as the MCH needs assessment program planning, evaluation, systems development and leadership, working with national and local chapters in the March of Dimes on pre-term prevention programs; co-editing the Maternal and Child Health Journal,

truly a labor of love serving for over a decade on the committee that placed MCH student interns from around the country in state local health departments; leading Delta Omega, the national public health honorary society to a new level of service; chairing or serving on countless committees, task forces, conference planning committees and award selection teams.

Greg was a man who could truly say his work was his hobby, his vocation his avocation. We are truly grateful for the lasting legacy he left all of us in maternal and child health. Accepting the award for Greg today in his honor and memory is his wife, Donna Peterson. The Vince L. Hutchins Partnership Award presented for Outstanding Partnership and Collaboration in Maternal and Child Health to Greg Alexander, 2007.

DONNA PETERSON: It's an obelisk which you see in Egypt. When Greg and I were graduate students in Maternal and Child Health, we found ourselves in the hallways of the Parkland Building. If you've ever been in there, it's a daunting maze of endless hallways and because it's curved, there is no end so you really think you've--that's the end of your life. And we were looking for something. I don't remember what, some report or something. And we--in this maze, we found ourselves in Vince Hutchins' office and he was in there. And being scared graduate students, you don't go into the director of the Maternal and Child Health Bureau, so--but he jumped up and he waved us in, and who were we, what were we doing, and we told him. And he spent much of his afternoon chatting with us

and going through his book cases and showing us things we're looking for. Just delightful. As the years went by, you always knew if you found Vince, you found a warm smile and a welcome and a how are you and he really cared about what you were doing and what you were up to. He came to Birmingham as part of a site visit team shortly before he passed away and we were really grateful for that opportunity. We went out to dinner and chatted and just such a wonderful man and I'm really lucky that we got to know him as we did. I think it is people like Vince and like Peter and like Greg that keep this field alive and keep the passion. It's great when the hometown recognizes you and you are our hometown. I thank you so much. He would be so humbled. Thank you.

PETER VAN DYCK: This concludes our award ceremony, our awards luncheon. As always, we appreciate all that all of you do. You are all truly champions in Maternal and Child Health. Thank you all. Have a good afternoon at your next session.