



University of Colorado

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# Latino Research and Policy Center

## 2011-2015 Activities Report



Colorado School of Public Health

UNIVERSITY OF COLORADO | COLORADO STATE UNIVERSITY | UNIVERSITY OF NORTHERN COLORADO

# Latino Research and Policy Center

## MISSION AND VISION

The Latino Research and Policy Center (LRPC) was founded on July 1, 1997, and is currently housed in the Colorado School of Public Health (CSPH) at the University of Colorado Denver (CU-Denver), Downtown Campus. The LRPC's *mission* is to increase collaborative partnerships with community-based organizations, academic institutions, and state/city elected officials to work toward eliminating the health and education disparities affecting Latino communities in Colorado and the nation. The LRPC's *vision* is to become a nationally-renowned higher education, research, data, and policy expert on health and education disparities affecting Latino communities.

## CENTER PRIORITIES

The LRPC was established to research Latino issues in health, education, and immigration. Since the center's affiliation with the CSPH, the research priorities primarily focus on health and education disparities. More specifically, the LRPC works to address Latino health and well-being in the context of the many areas that affect and are affected by health. These areas include education, economics, policy, legislation, environment, and lifestyle. Because of the shortage of Latino health care providers available to serve Latino communities, the LRPC is committed to improving the pipeline of Latino students to health care professions.

## RESEARCH APPROACH

Through the Social Action Research Model, research at the LRPC seeks to have a positive and socially-active effect on partnering communities, rather than being purely academic. The LRPC adheres to community-based participatory research (CBPR) principles to partner with community-based organizations on the research projects it undertakes. The center's research methods strengths are in mixed-methods, combining quantitative and qualitative approaches, and in formative and intervention implementation and evaluation methods.

## POLICY ADVOCACY

The LRPC conducts social-action oriented research to affect policy in health care, education, and legislative environments on issues consistent with the center's mission. While avoiding lobbying, the LRPC disseminates findings to engage and inform stakeholders who affect health and education policies that impact Latinos in the United States. The LRPC produces policy-oriented strategic dissemination materials and recommendations for state, city, and federal policy makers as well as for national rights and justice organizations. The center also supports informational and educational activities, geared towards a range of audiences, on health and educational policies that affect Latino communities.

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## **Preface**

In 2011, Evelinn A. Borrayo, PhD, was appointed as the Executive Director of the LRPC by the University of Colorado Denver's Provost and continues on an interim basis. This report provides a description of the Center's administrative structure, community partnerships, service and research activities, mentoring, and budget expenditures from 2011 to 2015.

## **Administrative Structure**

### **Executive Director**

The Executive Director is appointed by the Dean of the Colorado School of Public Health and is responsible for directing the center's overall operations, overseeing the budget, implementing strategic plans, fostering research and community partnerships, leading research and policy activities, and supervising the center's staff. One of the main responsibilities of the Executive Director is the development and submission of research proposals and pursuit of other funding opportunities. The Executive Director Dr. Evelinn A. Borrayo (2011-Present) also holds a secondary appointment at the rank of Professor in the Department of Community and Behavioral Health at the Colorado School of Public Health.

### **Center Manager**

The Center Manager is responsible for the day-to-day operations, fiscal management, overall grant administration, and hiring and supervision of the center's staff and students. The Center Manager's efforts include coordinating with other staff the fiscal, operational and logistical activities of the LRPC and the development and submission of funding pursuits. Ms. Suzell Klein, MA, is currently the LRPC's Center Manager (2010-Present).

### **Research Collaborations Coordinator**

The Research Collaborations Coordinator is responsible for fostering the LRPC's research collaborations within and outside of CU-Denver. In this position, the coordinator assists in the development of strategies to expand externally-funded, collaborative research projects of the LRPC. This position oversees the center's efforts to build teams for collaborative research efforts and identifies funding opportunities to support LRPC research initiatives. Ms. Alice Bradley, MA, serves as the Research Collaborations Coordinator (2008-Present).

### **Community Projects Coordinator**

The Community Projects Coordinator is responsible for initiating and maintaining the center's collaborations with community based organizations serving Latino communities. This position assists with sustaining community involvement in LRPC research activities; oversees the development and implementation of community-based research projects and educational activities; and updates community partners of LRPC activities and resources. Ms. Elisa Morales, MSW, is the Community Projects Coordinator (2007-Present).

## Partners and Collaborators

### CREA Results

CREA Results is a grassroots community organization founded and lead by Community Health Workers (Promotores de Salud) in Colorado. CREA Results' mission is to increase awareness and education on community health issues that affect the Latino community. This mission is achieved by mobilizing and integrating the assets of the Latino community through a unique community-based outreach model led by its' Promotores de Salud. The LRPC has collaborated with CREA Results (2012) in the development and implementation of a "Boot Camp Translation" project to educate Latinos about Cardiovascular Disease/Hypertension that affect them (see collaboration below under Service Activities #4, Hypertension Workgroup). <http://creareresults.org/wordpress1/>

### Denver Health and Hospital Authority

Denver Health and Hospital Authority (DHHA) is the "safety-net" hospital that provides medical care to all residents in the City and County of Denver. As an integrated health care system it provides preventative, primary, and acute care services to 32 designated medically underserved neighborhoods in Denver. DHHA serves a medically disadvantaged population with a high percentage of ethnic minority (75%) and underserved patients (50% are uninsured). Denver Health serves 43% of Denver Latinos. The LRPC has collaborated with DHHA in the submission of 6 research proposals (A5, A6, A9, C1, C2, and D1 under Submission of Grant Proposals below) to address cancer-related health inequities among Latino patients served by DHHA. <http://www.denverhealth.org/>

### Florence Crittenton Services of Colorado

Florence Crittenton Services of Colorado (FCSC) is a nonprofit that educates, prepares and empowers teen moms to be productive members of their community. Using a comprehensive and evidenced-based approach, the agency offers a spectrum of wraparound services for the entire teen family, including academics, career guidance and parenting training for pregnant and parenting teen mothers at the Florence Crittenton High School. The LRPC is collaborating with FCSC in an LRPC led project, funded by the FORD Foundation (2013-2015), to investigate and further disseminate information about Latina teen mothers' access and use of reproductive health care services (A3 under Submission of Grant Proposals below). [www.flocritco.org](http://www.flocritco.org)

### Hispanic Access Foundation

Hispanic Access Foundation (HAF) is a 501(c)(3) non-profit organization based in Washington DC that works to promote responsible citizenship, educational attainment, and active engagement in improving the health, environment, and financial well-being of Hispanic families. HAF designs and implements data-driven initiatives, combining new and traditional forms of media with grassroots outreach. The LRPC and HAF have collaborated in one service project (no. 1 under Service Activities) and the submission of 6 proposals (A1, A2, A4, A6, A7, and B1 under Submission of Grant Proposals below) to develop and test prevention interventions to reduce cervical cancer disparities among Latinas residing in Colorado, Washington, Florida, and DC. <http://hispanicaccess.org/>

### **National Latina Institute for Reproductive Health (NLIRH)**

NLIRH is the only national reproductive justice organization dedicated to the reproductive health, dignity, and justice for 26 million Latinas, their families, and their communities. NLIRH was founded in 1994 and it has grown to meet the needs of an increasingly diverse and powerful Latina population. NLIRH uses policy change, culture shift, relationship building, and leadership development to advance a reproductive justice agenda. The LRPC is collaborating with the NLIRH in an LRPC led project, funded by the FORD Foundation (2013-2015), to educate the public and local and state policy officials about Colorado Latina teen mothers' access and use of reproductive health care services (see A3 under Submission of Grant Proposals below). <http://latinainstitute.org/en>

### **National Hispanic Voter Educational Foundation (NHVEF)**

The NHVEF is a Denver-based organization that has a national scope. The mission of NHVEF is to encourage, inform and enable Hispanic individuals on a nonpartisan basis, living in the United States, to understand and appreciate the importance of voting and to exercise this privilege consistently during local and national elections. The LRPC and the NHVEF collaborated (2014) in the development a voter survey to assess voting attitudes and information needs of Latino voters residing in Colorado. The NHVEF administered the survey to over 2000 households and is now working with the LRPC to incorporate the data findings into its upcoming practices and funding proposal development strategies. <http://www.nationalhispanicvoter.org/>

### **Salud Family Health Centers**

SALUD provides health care that is designed to reduce health disparities delivered to all community members, without regard to age, sex or disease process. SALUD operates nine Colorado community health clinics and a mobile unit. SALUD offers services on a sliding fee scale based on clients' ability to pay. Its priority clientele are community members who are low-income, medically underserved, and migrant and seasonal farmworkers. Approximately 65% of SALUD's clients are Latinos and 60% have no insurance or are underinsured. The LRPC has collaborated with SALUD in the submission of 4 research proposals (see A2, A4, A7, and A8 under Submission of Grant Proposals below) to develop and test prevention interventions to reduce cervical cancer disparities among Latinas. <http://www.saludclinic.org/>

### **YTH - Youth + Tech + Health**

YTH is a non-profit organization that partners with other entities that seek to promote new ways to advance youth and young adults' health through technology. YTH works under the premise that young people deserve honest information, their voice to be heard, and to live healthy lives without shame or fear. YTH is committed to pursuing emerging, startling, as well as simple technologies to reach young people. The LRPC is collaborating with YTH in an LRPC led project, funded by the FORD Foundation (2013-2015), to disseminate findings about Colorado Latina teen mothers' access and use of reproductive health care services (see A3 under Submission of Grant Proposals below). Dissemination activities include innovative, web-based technologies to effectively reach youth across the United States. <http://yth.org/>

## Service Projects and Activities

### 1. Breast and Colorectal Cancer Behavior Change Study

The Hispanic Access Foundation (HAF) contracted with the LRPC (2012) to conduct the Breast and Colorectal Cancer Behavior Change Study to evaluate the result of the “Juntos Podemos Contra el Cancer” (JPCEC) Project. The JPCEC educational activities were designed to increase awareness of breast and colorectal cancers prevention among Spanish-speaking Latinos in two communities, one urban (Denver, CO) and one rural (Yakima, WA). Once the JPCEC activities finalized, the LRPC evaluated the effects of their educational intervention using a cross-sectional study design. There were over 1,300 Spanish-speaking participants interviewed via phone who received the intervention in Yakima, WA or in Denver, CO. The LRPC led the data collection, analyses, and interpretation of results. The LRPC’s deliverable to HAF was a report of the findings and recommendations. To view the highlights of the study findings please visit: <http://hispanicaccess.org/our-projects/health>

### 2. Social Media – Website, Twitter and Facebook

In efforts to better serve our community and academic partners, the center’s website has undergone a transformation making it more user friendly to our partners, collaborators, faculty and students. The website is updated regularly and we continue to build it by adding features of interest to our constituents (i.e. updates on the center, Affordable Health Care Act, funding opportunities). Through the website we are able to foster collaborations by sharing information from which our community and academic partners can benefit. The website has also served as a medium for potential collaborators to contact the center (i.e. Hispanic Access Foundation). We regularly receive requests and inquiries from the university and Colorado community and we assist them by providing information or directing them to the most appropriate source. Related to social media, the LRPC created a Twitter and Facebook account in 2013, which serve as outlets to pass on and receive information of importance to those interested in the local and national Latino community.

Website - [www.ucdenver.edu/LRPC](http://www.ucdenver.edu/LRPC)

Twitter - @LRPCDenverCO

### 3. Faculty Engagement Data Bank

As a result of receiving numerous requests over the years from CU-Denver’s faculty and students, as well as community-based organizations, we created a data bank with contact information about Latino faculty at CU-Denver, along with information about their research interest and projects with the Latino community. The information on the data bank is routinely updated via a survey that is emailed on a yearly basis to CU-Denver Faculty at the Downtown Campus and at the Anschutz Medical Campus. To access the “Faculty Engagement” data bank (click [HERE](#)) or copy and paste this link to your browser:

<http://www.ucdenver.edu/academics/colleges/PublicHealth/research/centers/lrpc/Faculty%20Engagement/Pages/default.aspx>



#### 4. “Working Together to Improve Education, Health, and Justice for Colorado Latinos,” 2011 Summit.

On September 29<sup>th</sup>-30<sup>th</sup>, 2011, the LRPC hosted a Summit to bring together community, academic, legislative, and economic partners interested in improving the education, health, and social justice opportunities for Colorado Latinos. The goal was to engage participants in developing community-based participatory research and policy initiatives to improve such opportunities. There were 85 attendees from higher education institutions, including faculty, students, staff and leadership; community and organizational representatives, including local health departments, clinics, hospitals, advocacy groups and service organizations; state and local legislators and representatives; and funding agencies.

#### Speakers and Topics:



**Joseph A. Garcia, 48<sup>th</sup> Lieutenant Governor of Colorado**

**Lieutenant Governor Joe Garcia**, Topic: Education and Public Service

**Regional Director Marguerite Salazar**, U.S. Department of Health and Human Services – Region VIII. Topic: “Patient Protection and Affordable Care Act”.

**Dr. Jerry Wartgow**, Chancellor of the University of Colorado Denver and Anschutz Medical Campuses. Summit opening speaker: Introduction of day’s events and agenda.

**Mr. Fernando Pineda-Reyes**, CEO and founder of CREA Results. Topic: “What is Research? What’s In It for the Latinos”?



**Dr. Marty Otañez**, Assistant Professor in the Anthropology Department at CU-Denver. Topic: “How can shedding the light on current and proposed policy and legislation benefit the Colorado Latino community”? Digital Storytelling: An example of innovative collaborative research and policy work in action.

**Dr. Paula Espinoza**, Assistant Professor of Ethnic Studies in the College of Liberal Arts and Sciences at CU-Denver. Topic: Community-Based Participatory Research as the Primary Research Approach used by the LRPC.

**Dr. Jack Westfall**, Associate Professor and Associate Dean, Co-Director, CCTSI Community Engagement and Research, Director Scientific Staff, CU-Denver. Topic: Tying together the day’s events and workshops, launching into action for next steps.

### Summit Workgroups:

Summit participants were encouraged to join a working group at the 2011 Summit. Each Workgroup engaged participants in a facilitated discussion to develop community-based participatory research and policy initiatives to improve education, health, and social justice opportunities for Colorado Latinos. These Workgroups met a couple of times after the Summit in order to sustain their discussion and/or develop the collaborative initiatives. Below is a detailed description of three of the Summit Workgroups.

#### Education Workgroup

The Education Workgroup came together at the Summit to discuss existing programs and efforts to increase diversity at CU-Denver and ways to support high school Latino students’ recruitment and retention to college. The *LRPC’s Research Collaborations Coordinator* based the discussion on key articles on Latino college student recruitment, retention and success. Members from the Education Workgroup held four meetings after the Summit to continue to discuss related topics of interest. During these meetings, members shared ideas and methods on how to improve or support existent initiatives to recruit and retain Latino students at various levels of education success, from preschool to college and beyond.

#### Healthy Spaces Workgroup

The Healthy Spaces Workgroup met at the Summit to discuss participants’ interest in conducting healthy living projects to benefit Latinos and their communities in Colorado. The *LRPC’s Community Projects Coordinator* led this group during the Summit and coordinated additional meetings. The Healthy Spaces Workgroup focused their efforts on north Aurora, Colorado. This location was chosen because it is highly populated by Latinos with many assets, yet few resources available to the community. The community meetings were held with key stakeholders from the area (i.e. Colorado Access, Aurora Parks and Recreation, Center for Public Health Practice) to discuss potential projects. Organizations in north Aurora expressed readiness which led the group to apply for a funding opportunity released by the Colorado Health Foundation. Although the grant was not funded, the LRPC was instrumental in beginning the conversation with organizations in the area about building and sustaining healthy spaces for Latinos in north Aurora, Colorado.

## Hypertension Workgroup

The Hypertension Workgroup gathered to discuss the high incidence of cardiovascular diseases (CVD), particularly hypertension (HTN), among Latinos and ways to intervene to prevent CVD/HTN in this population. From their discussion at the Summit, members of the Hypertension Workgroup agreed to organize and develop a project to improve cardiovascular health among Colorado Latinos. The Hypertension Workgroup partnered formally with the Colorado Clinical and Translational Sciences Institute (CCTSI) Community Engagement Core to implement a Boot Camp Translation intervention program:

**Boot Camp Translation Program:** Following Community-Based Participatory Research (CBPR) principles, the LRPC led efforts to create a partnership between our academic and community partners for the development and implementation of the Boot Camp Translation program. The goals for the academic-community partnership were: 1) to translate evidence-based health-related recommendations into language and concepts relevant to Latinos; and 2) to increase the uptake and implementation of evidence-based educational interventions to improve CVD/HTN among Latinos living in northwest Denver. The LRPC's *Center Manager* led the Boot Camp Translation group until the LRPC hired a facilitator (Lucia Madera, MD), with CCTSI support (\$32,108) for this program.

Dr. Madera coordinated the development and dissemination of the Boot Camp Translation program. Our LRPC partner, *CREA Results* recruited 12 Boot Camp Translation participants from the Latino community in northwest Denver. The participants met during a one-day retreat, followed by two half-day sessions and six focused telephone conversations, to define the topics for educational messages and illustrative graphics. As a result, CVD/HTN educational materials were developed in a manner that was relevant and appropriate to the Latino community in northwest Denver. A second Boot Camp group (Spanish only) was formed in conjunction with CREA to translate and adapt the CVD/HTN education materials. The materials were disseminated throughout northwest Denver community venues (e.g., grocery stores, churches) highly attended by Latinos. The LRPC conducted conference presentations to disseminate the CBPR process followed by our academic-community partnership to create culturally-relevant CVD/HTN educational materials for Latinos.

## 5. "Latino Health Disparities and the Affordable Care Act," 2013 Conference.

On October 18<sup>th</sup>, 2013, the LRPC hosted a one-day conference that focused on Latino health disparities and the Affordable Care Act (ACA). Featured presentations included the most recent statistics on Latino health disparities in Colorado. An expert panel discussed the Impact of the ACA on public health efforts to address Latino health disparities, which was followed with a presentation on the Colorado insurance sign-up website, "Connect for Health Colorado." The LRPC reported on its current research on Latino health disparities. There were 204 attendees from higher education institutions, including faculty, students, staff and leadership; community and organizational representatives, including local health departments, clinics, hospitals, advocacy groups and service organizations; state and local legislators and representatives; and funding agencies.

## Speakers and Topics:



<http://www.ucdenver.edu/academics/colleges/PublicHealth/research/centers/lrpc/Plans/Pages/LRPC-2013-Conference.aspx> **Dr. Alyson Shupe and Mr. Mauricio Palacio** of the Colorado Department of Public Health and Environment. Topic: Statistical presentation on Latino Health Disparities. **Dr. Tim Byers**, Director of the Center for Public Health Practice at the CSPH, was the moderator and Outstanding Mentorship recipient.

**Ms. Maite Arce**, Founder and CEO of the Hispanic Access Foundation, moderated the panel on: The Impact of the ACA on Public Health Efforts to Address Latino Health Disparities.

**Dr. Steve DelCastillo**, President of the Multicultural Leadership Center, LLC. Topic: How does and will the Affordable Care Act impact Colorado Latinos?

**Senator Dr. Irene Aguilar**, Colorado Senate. Topic: Where does the ACA fall short of meeting the current health care needs and addressing Latino health disparities in Colorado? What policy or programmatic shifts need to happen to make a real difference?

**Dr. David Goff**, Dean of the Colorado School of Public Health, CU-Denver. Topic: What elements of the ACA have the potential to cause a shift or change in the focus of public health and education efforts? In what ways will public health and education efforts need to adapt, change, and grow to respond to changes brought about by the ACA?

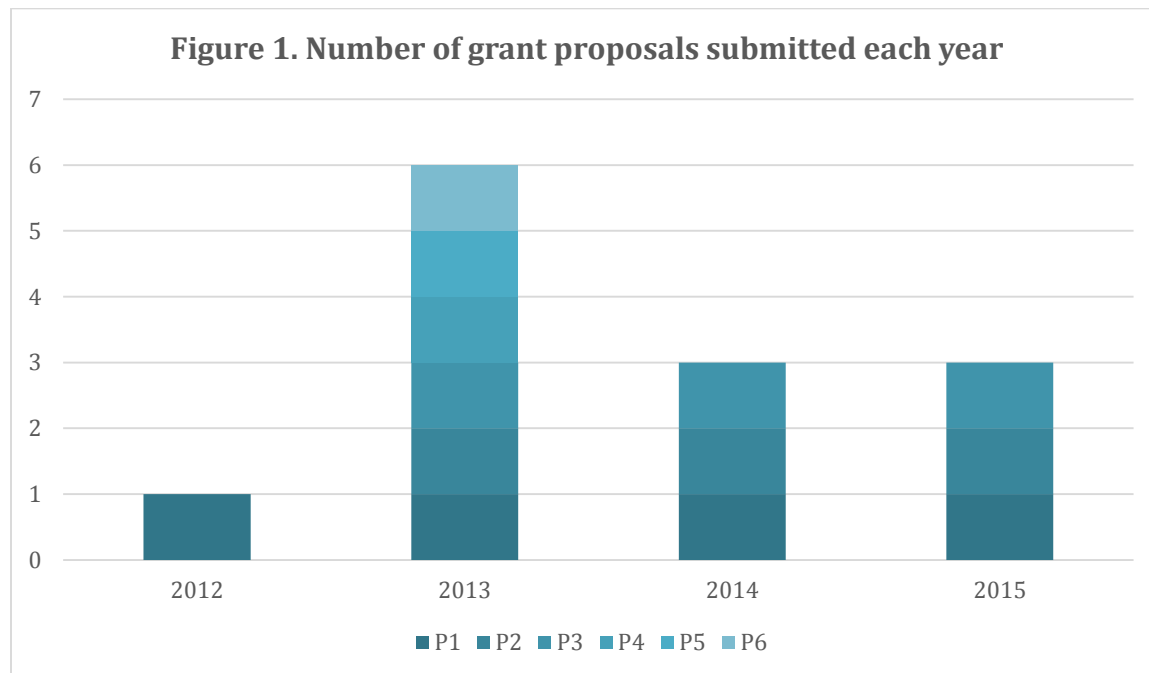
**Dr. Paula Espinoza**, Assistant Professor of Ethnic Studies at CU-Denver. Topic: Can we anticipate and “get ahead of this shift” to maximize our efforts to address Latino health disparities in Colorado? What does the ACA mean in relation to how we plan and practice public health to reduce Latino health disparities?

**Ms. Brenda LaCombe**, Eligibility and Enrollment Manager, Connect for Health Colorado.

**Ms. Jennifer Nguyen and Ms. Gloria Manuel**. LRPC Student Presentation: Human Papillomavirus in the Latino Community.

### Submission of Grant Proposals

The LRPC has led a collaborative response to funding opportunities, submitting a total of 12 proposals. Nine proposals were first-time submissions and three were resubmissions. According to Center’s priorities, proposals have been submitted under four priority areas: (A) improving Latinas’ health disparities; (B) preventing chronic diseases among Latinos; (C) improving the pipeline of Latino students to the health professions; and (D) improving mental health disparities among Latinos. Of those submitted, one proposal has been funded for \$500,000 (2013-2015; Ford Foundation) and another for \$749,826 (2015-2018; Colorado Department of Public Health & Environment, CDPHE), both under Priority A. One proposal is under review for \$404,782 (Susan G. Komen Foundation) that falls under Priority C. Another proposal is currently in preparation for approximately \$900,000 (Patient-Center Outcomes Research Institute, PCORI), that falls under Priority D. Figure 1 shows thirteen proposals (including one in preparation) submitted from 2012 to 2015.



*Note:* The years represent the fiscal year (e.g., 2012=07/01/2011-06/30/2012); P=Proposal.

## (A) Improving Latinas' Health Disparities

### **A1. HPV Vaccine Disparities among Hispanic and non-Hispanic White Adolescent Females**

Submitted: 3/28/2012.

Agency: Centers for Disease Control and Prevention (CDC)

[CDC RFA-IP-12-004](#)

Collaborating

Organizations: [Hispanic Access Foundation \(HAF\)](#)

**PI: Borrayo, Evelinn**

Co-I: Arce, Maite;

Valverde, Patricia.

Budget: \$300,000

**Score: 24 (Outstanding)**

Award: Not Funded

**Description:** This study proposed to gather in-depth information from mothers and immunization providers and make recommendations for the creation of community-based strategies to more effectively address the factors contributing to the racial/ethnic disparities in HPV vaccination initiation and completion. The proposal had two goals: 1) to investigate reasons Hispanic mothers lag behind initiating and completing the HPV vaccine series for their daughters compared to non-Hispanic white mothers; and 2) to make recommendations on community strategies to reduce disparities in HPV vaccination rates. Mothers of females 11-18 years of age would be interviewed through focus groups to assess the factors that impeded or facilitated their daughters' HPV vaccine series initiation and completion. Immunization providers were also to be interviewed. The role of our HAF collaborators was to conduct the focus groups and provider interviews in four communities with which they have partnerships in *Denver, Colorado; Homestead, Florida; Houston, Texas; and Yakima, Washington.*

### **A2. Latina Mother and Daughter Access to Local Services to Improve HPV Vaccinations**

Submitted: 09/12/2012.

Agency: Health Resources and Services Administration Funding

[HRSA-13-139](#)

Collaborating

Organizations: [Hispanic Access Foundation](#); [Salud Family Health Centers](#)

**PI: Borrayo, Evelinn**

Co-I: Dempsey, Amanda;

Arce, Maite; Diaz-Perez,

Maria de Jesus.

Budget: \$899,790

Score: Not

Recommended for Approval

**Description:** This study proposed to develop, implement, evaluate, and disseminate a *community-based intervention* to increase HPV vaccine access, initiation, and completion among Latinas adolescents age 11-18 years in four Colorado communities (two rural and two urban) where SALUD provides medical services to underserved Latinas. In the four Colorado communities, vaccination initiation and completion rates are lower than national rates of 43.7% initiation and 11.3% completion for Latinas. Spanish-speaking Latina mothers of females 11-18 were the primary targets of the intervention. This research proposal had four goals: (1) to assess the needs and perspectives of Spanish-speaking Latina mothers regarding access to HPV vaccine services for their daughters; (2) to assess each community's readiness to implement a multilevel *community-based intervention* to improve access and the HPV vaccine completion for the target population; (3) to evaluate the feasibility and acceptability as well as the facilitator and barriers to the implementation of the community-based intervention; and (4) to disseminate the intervention to communities, legislators, health care practitioners, and scientists.



**A3. Sexuality, Health and Rights among Youth in the United States: Transforming Public Policy and Public Understanding through Social Science Research**

Submitted: 12/03/2012.

Agency: [Ford Foundation](#)

Collaborating

Organizations: [YTH, Inc.](#),

[Florence Crittenton](#)

[Services of Colorado;](#)

[National Latina Institute for Reproductive Health.](#)

**PI: Borrayo, Evelinn.**

Co-I: Bull, Sheana;

Otañez, Marty.

Budget: \$500,000

**Award: \$500,000**

(02/01/13-01/31/15)

**Description:** The goal of the project is to stimulate youth development and implement an innovative use of technology called digital storytelling to promote positive sexual and reproductive health (SRH) outcomes for Latina teens in Colorado. Collaborators used digital storytelling and social media among young Latinos to achieve the following objectives: (1) to identify motivations for contraceptive use or planning pregnancy and parenting as well as social and structural barriers to accessing comprehensive SRH services among Latina non-pregnant, pregnant and parenting teens; (2) to facilitate dialogue among policy makers to promote appropriate response to barriers in SRH; and (3) to mentor and increase capacity of students from secondary through graduate school to (a) develop skills in communication and advocacy, and (b) to articulate and draw attention to the linkage between social and structural factors and SRH outcomes.

Qualitative data on digital stories and quantitative data through surveys was gathered. The data is being analyzed and prepared for publication to inform the literature and influence policy decisions to reduce stigma and improve access to health care and education for Latina youth.

**A4. Multilevel Intervention to Reduce Cervical Cancer Disparities among Latinas**

(1<sup>st</sup> Submission)

Submitted: 10/15/2012.

Agency: [American Cancer Society \(ACS\) Research](#)

[Scholar Grants](#)

Collaborating

Organizations: [Hispanic](#)

[Access Foundation;](#) [Salud](#)

[Family Health Centers](#)

**PI: Borrayo, Evelinn**

Co-I: Dempsey, Amanda;

Arce, Maite; Diaz-Perez,

Maria de Jesus.

Budget: \$959,827

Score: Fair (2.5-3.0)

Award: Not Funded

**Description:** The objective of the study was to create an intervention that targets factors that contribute to low-income Spanish-speaking Latina non-adherence to the recommended guidelines for HPV vaccinations. Because underserved Latinas face complex barriers at multiple levels (e.g., individual, community, organization) to access preventive health care services, the intervention was multi-level and community-based. In addition, it combined evidence-based methods to improve access and adherence to HPV vaccine series among Latinas aged 19 to 26 years. First, we proposed to interview 30 Latinas and 20 of their health care providers. Second, we proposed to use the data obtained to develop an intervention and to evaluate its feasibility and acceptability. Third, we proposed to evaluate the intervention's effectiveness at increasing adherence to the 3-shot HPV vaccine series by comparing participants assigned to the intervention (n=200) versus those in the control group, "usual care" (n=200). We proposed to disseminate study findings to communities, health clinics, and legislators to affect barriers at the individual, community, and organizational levels.

**A5. HPV Vaccination and Early Detection Screening to Reduce Cervical Cancer Disparities among Latinas**

Submitted: 12/17/2012  
Agency: [Patient-Centered Outcomes Research Institute \(PCORI\)](#) in response to Health Disparities Funding Priority Announcement. Collaborating Organizations: [Denver Health and Hospital Authority \(DHHA\)](#).  
**PI: Borrayo, Evelinn**  
Co-I: Dempsey, Amanda; Zung Vu Tran; Anderson, Katherine; Loomis, Lucy; Uris, Patricia;  
Budget: \$1,645,857  
Award: Not funded

**Description:** The purpose of the project was to assess if an intervention that targets social determinants of health was the best approach to improve access and adherence to the HPV vaccine and/or cervical cancer screening procedures for medically disadvantaged Latinas. Using a repeated-measures design (three-group, randomized controlled trial), the intervention (n=150 participants) was to be compared to two prevailing approaches, an *education intervention* (n=150 participants) and a *provider intervention* (n=150 participants) which constitutes “usual care” at DHHA. The first objective was to understand: the patient-level, provider-level, and system level factors that contribute to adherence with HPV vaccine and cervical cancer screening guidelines from the perspective of Latina patients (n=80 participants) and of their health care providers (n=20 participants). The second objective was to understand how to best target these factors through a multilevel intervention to improve adherence to current guidelines. The third objective was to understand how the multilevel intervention compared to other forms of interventions improves patient-centered outcomes that assist Latina patients to make health care decisions that lead to improve adherence in HPV vaccination and HPV and Pap testing recommended guidelines.

**A6. Understanding and Reducing Cervical Cancer among Underserved Latinas**

Submitted: 05/13/2013  
Funding Agency: [Health and Human Services, HHS \(R01\) PAR 10-136](#)  
Collaborating Organizations: [Hispanic Access Foundation](#); [Denver Health and Housing Authority](#)  
**PI: Borrayo, Evelinn**  
Co-I: Dempsey, Amanda; Zung Vu Tran; Anderson, Katherine; Loomis, Lucy; Uris, Patricia; Krull, Mona  
Budget: \$3,352,116.00  
Award: Not funded

**Description:** The main focus of this proposal was to develop and evaluate an evidence-based multilevel intervention to improve adherence to HPV vaccine and to cervical cancer screenings among Latinas 19 to 65 years. To achieve this objective, the project’s goals were to understand: (a) the patient-level, provider-level, and system-level factors that contribute to adherence with HPV vaccine and cervical cancer screenings from the perspective of Latinas and of their health care providers; (b) how to best target these factors through a multilevel intervention to improve adherence to current guidelines; and (c) how does a multilevel intervention compared to a “patient-education” intervention or to “usual care” affect behavioral outcomes (e.g., knowledge, self-efficacy, decisional satisfaction) and adherence with preventive measures (i.e., HPV vaccines, HPV and Pap testing). Using a repeated-measures design (three-group, randomized controlled trial), we would compare Latinas in the *multilevel intervention* (400 participants) to Latinas in the other two groups (400 participants per arm).



**A7. Resubmission #1:  
Multilevel Intervention  
to Reduce Cervical  
Cancer Disparities  
among Latinas**

Submitted: 10/15/2013

Agency: [American Cancer Society \(ACS\) Research Scholar Grants](#)

Collaborating

Organizations: [Hispanic Access Foundation](#); [Salud Family Health Centers](#)

**PI: Borrayo, Evelinn**

Co-I: Dempsey, Amanda;  
Juarez-Colunga, Elizabeth  
Arce, Maite; Diaz-Perez,  
Maria de Jesus.

Budget: \$780,352

Score: Good (2.00-2.5)

Award: Not Funded

**Description:** We proposed to develop, implement, evaluate, and disseminate a multilevel community-based intervention that combined evidence-based methods to improve access and adherence to the HPV vaccine among low-income Spanish-speaking Latinas aged 19 to 26 years. We planned to interview Latinas (n=30) and their health care providers (n=20) to assess the *patient-level, provider-level, and system level* factors that contribute to Latinas' non-adherence. We would use the information obtained to develop and implement an innovative, *multilevel intervention* that combines Latinas' culture, beliefs, literacy, and numeracy skills with evidence-based methods in order to improve their access and adherence to the HPV vaccine series per recommended guidelines. Finally, using a repeated-measures design (three-group, randomized controlled trial) we would assess the intervention's effectiveness by comparing participants assigned to the *multilevel intervention* group (n=300) versus participants in the "patient-education" group (n=300) and the "usual care" control group (n=300).

**A8. Resubmission #2:  
Multilevel Intervention  
to Reduce Cervical  
Cancer Disparities  
among Latinas**

Submitted: 04/01/2014

Agency: [American Cancer Society \(ACS\) Research Scholar Grants](#)

Collaborating

Organizations: [Salud Family Health Centers](#)

**PI: Borrayo, Evelinn**

Co-I: Dempsey, Amanda;  
Zung Vu, Tran; Diaz-  
Perez, Maria de Jesus;  
Nease, Donald; Pace,  
Wilson.

Budget: \$729,736

Score: Excellent (1.5-2.0)

Award: Not Funded

**Description:** We proposed to develop, implement, and evaluate, a multilevel community-based intervention that combined evidence-based methods to improve access and adherence to the HPV vaccine among low-income Spanish-speaking Latinas aged 19 to 26 years. We planned to interview Latinas (n=30) and their health care providers (n=20) to assess the *patient-level, provider-level, and system level* factors that contribute to non-adherence. We would use the information obtained to develop and implement an innovative, *multilevel intervention* that combines Latinas' culture, beliefs, literacy, and numeracy skills with evidence-based methods in order to improve their access and adherence to the HPV vaccine series per recommended guidelines. Using a repeated-measures design (three-group, randomized controlled trial) we would assess the intervention's effectiveness by comparing participants assigned to the *multilevel intervention* group (n=300) versus participants in the "patient-education" group (n=300) and the "usual care" control group (n=300). Based on reviewers' feedback, for the second resubmission we no longer proposed to conduct educational workshops and thus, we did not partner with Hispanic Access Foundation.

**A9. Multilevel Intervention to Reduce Cervical Cancer Disparities among Young Latinas**

Submitted: 10/01/2014

Agency: [Colorado Department of Public Health and Environment, Amendment 35 Grants, Health Disparities RFA](#)

Collaborating

Organizations: [Denver Health and Hospital Authority \(DHHA\)](#); [Colorado State University](#)

**PI: Borrayo, Evelinn**

Co-I: Dempsey, Amanda; Bull, Sheana; Uris, Patricia; Krull, Mona

Budget: \$749,826

**Award: \$249,971**(Year 1 07/01/15-06/30/16).

**Description:** The multilevel intervention that we proposed to implement at DHHA will target the patient-level, provider-level, and system-level barriers to improve medically underserved Latinas' access and adherence to the 3-dose HPV vaccine series and ultimately reduce the cervical cancer incidence and mortality disparities that so severely affect this population of women in Colorado. We will use evidence-based strategies and practices to address *patient, provider, and system level* factors to address disparities in cervical cancer experienced by low-income Latinas. To accomplish this goal, our collaborative project will target and reduce risk factors (e.g., HPV infection) for cervical cancer among underserved DHHA young Latina patients (19-26 years old). The LRPC will provide leadership to the project and will oversee the development of the *multilevel intervention*, including the development of patient education materials (e.g., small media), patient outreach (e.g., text messages), provider assessment and feedback, and patient navigation training and their implementation in the project. These strategies will be linguistically, culturally, and literacy targeted. We will evaluate the interventions' feasibility and fidelity at the end of the project, in collaboration with the CDPHE.

**(B) Preventing Chronic Diseases among Latinos**

**B1. Prevention and Control of Chronic Diseases Affecting Spanish-Speaking Latinos**

Submitted: 8/11/2012

Funding Agency: [NIMHD \(RFA-MD-12-006\)](#)

Collaborating

Organizations: [Hispanic Access Foundation](#)

**PI: Borrayo, Evelinn**

Co-I: Byers, Tim; Arce, Maite.

Budget: \$1,033,164

Score: Excellent (38)

Award: Not funded

**Description:** The purpose of this project was to prevent and control heart disease, cancer, diabetes, and obesity as the main causes of death and disability by implementing multi-level intervention to promote healthy lifestyle behaviors among Spanish-speaking Latinos in two U.S. cities: Denver, Colorado, and Yakima, Washington. Using a community-based participatory research (CBPR) approach, the Latino Research and Policy Center and the Hispanic Access Foundation would partner with health promoters and faith-based organizations to identify the healthy lifestyle behaviors to target and then would jointly plan, implement, and evaluate the intervention. Based on community member preferences the intervention would likely target one or more of four health priorities: increase physical activity, improve nutrition, reduce tobacco use, or improve chronic disease management. The final goal was to operationalize and evaluate the CBPR procedures and process followed throughout the research project.

## (C) Improving the Pipeline of Latino Students to the Health Professions

### **C1. AYUDA: A Training Program to Improve Breast Cancer Outcomes among Latinas**

Submitted: 12/05/2013

Agency: [Susan G Komen Graduate Training in Disparities Research Grant SKG-RFA](#)

Collaborating

Organizations: [Denver Health and Hospital Authority \(DHHA\)](#)

**PI: Borrayo, Evelinn**

Co-I: Byers, Tim;

Okuyama-Sasaki, Sonia.

Budget: \$405,000

Award: Not funded.

**Description:** The primary objective of the program was to train 3 graduate students (Master's or Doctoral level) to provide them with the knowledge, research, and clinical skills needed to become scientist-practitioners who can translate research findings into interventions that address breast cancer (BC) disparities among Latinas. Students would learn to address disparities across the continuum of BC care to improve prevention, control, and treatment outcomes through (a) receiving interdisciplinary course work, (b) engaging in clinical or field experiences, and (c) conducting translational research. We would recruit a diversity of applicants across the health professions (e.g., psychology, medicine, public health). The long-term goal was to produce a cadre of health professionals who would have the analytic, research, scientific, and clinical skills critical to effectively address the BC outcome disparities among underserved Latinas. AYUDA is a word in Spanish that means "help" and it would have been used as an acronym for program recognition.

### **C1. AYUDA: A Training Program to Improve Breast Cancer Outcomes among Latinas (under review)**

Submitted: 11/20/2014

Agency: [Susan G Komen Graduate Training in Disparities Research Grant SKG-RFA](#)

Collaborating

Organizations: [Denver Health and Hospital Authority \(DHHA\)](#)  
[Colorado State University](#)

**PI: Borrayo, Evelinn**

Co-I: Byers, Tim;

Espinoza, Paula;

Okuyama-Sasaki, Sonia.

Budget: \$403,938

Award: Pending.

**Description:** The primary objective of the program is to train 3+ graduate students (Master's and doctoral level) pursuing degrees in Psychology and Public Health to provide them with the knowledge and skills needed to become scientist-practitioners ready to address breast cancer (BC) disparities among Latinas. Students would be trained to address disparities across the continuum of BC care to improve prevention, control, and treatment outcomes through (a) receiving interdisciplinary course work, (b) engaging in clinical or field experiences, and (c) conducting translational research. The recruitment will be open to all graduate students in Psychology and Public Health interested in conducting research to address BC disparities among Latinas. The long-term objective is to produce a cadre of health professionals with the analytic, research, scientific, and clinical skills that are critical to effectively address the BC outcome disparities among underserved Latinas. AYUDA is a word in Spanish that means "help" and it will be used for program recognition. This training grant is a collaboration between Colorado State University and the Colorado School of Public Health.

## (D) Improving Mental Health Disparities among Latinos

### **D1. A Behavioral Intervention to Reduce Disparities in Mental Health Services among Underserved Patients with Lung and Head-and-Neck Cancers**

To be submitted:  
05/05/15

Agency: [Patient-Centered Outcomes Research Institute \(PCORI\) Addressing Disparities - Spring 2015 Cycle](#)

Collaborating

Organizations: [Denver Health and Hospital Authority \(DHHA\)](#)

**PI: Borrayo, Evelinn**

Co-I: Kilbourn, Kristin;  
Okuyama-Sasaki, Sonia;  
Waxmonsky, Jeanette;  
Raben, David; Swaney,  
Robert; Bedrick, Ed.

Budget: \$900,000

Proposal: In Preparation

**Description:** The long term objective of this project is to improve psychological and behavioral patient-centered outcomes (e.g., distress, quality of life, substance abuse) that are of importance to underserved patients with LC and HNC and to their caregivers. We gathered pilot data to create two types of behavioral interventions that address such outcomes, a *psycho-education intervention* and a *patient navigation intervention*. The study's primary aim is to assess the clinical effectiveness of these interventions compared to *usual care* in reducing disparities in receipt of treatment for psychological distress experienced by these patients. The study will use a randomized controlled trial design to compare (1) a *psycho-education intervention* and (2) a *patient navigation intervention* to (3) *usual medical care*. The study's population will consist of underserved patients with LC and HN cancer receiving treatment at the Denver Health and Medical Authority (DHHA) hospital who are over 21 years of age, who at the time of recruitment are in treatment and entering treatment. DHHA's searchable electronic health record system will be used to extract a sample of about 200 participants (anticipating a 25% attrition rate) who will be randomized to one of 3-arms. We have convened a Patient and Caregiver Committee consisting of 6 members (3 current DHHA patients and 3 caregivers) to ensure that the project is focused on outcomes of interest to them.

## **Mentoring Activities**

In alignment with the university's academic mission, the LRPC engages in mentoring activities that benefit students and junior investigators from CU-Denver and the Latino community in Colorado. The goal is to support the development of professionals who are mentored in the center's services, research and policy advocacy activities to eliminate the health and education disparities affecting Latinos in Colorado and the nation.

The level of mentoring varies depending on the purpose of mentoring and the students' and junior investigators' interests, skills, and level of training. The LRPC's mentoring activities for undergraduate students tends to be specific to certain goals (e.g., research experience). The LRPC's mentoring activities for graduate students and junior investigators is more developmental and structured, providing opportunities aligned with their research skills, interest, and experience. The LRPC has mentored and supported 2 junior investigators, 7 graduate students, and 4 undergraduate students.

## Junior Investigators

**Lucia Madera, MD.** Dr. Madera was funded (\$32,108) through the CCTSI to coordinate the Boot Camp Translation project (2012) under the Hypertension Workgroup initiative. Dr. Madera was applying for a medical residency with focus on medically underserved communities, similar to the northwest Denver Latino community reached by the project.

**Marty Otañez, PhD.** Assistant Professor in the Anthropology Department at CU-Denver. Dr. Otañez was funded (\$6,373) through LRPC funds during the 2012-2013 academic year to prepare and submit a research proposal to the Colorado Trust and the Colorado Health Foundation (not funded). Due to his expertise in Digital Storytelling, Dr. Otañez was a co-investigator in the LRPC's project funded by the Ford Foundation (2013-2015).

## Graduate Students

**Ms. Paige Backlund Jarquín, MPH,** was an in-kind graduate research assistant to the Boot Camp Translation project (2012) under the LRPC's Hypertension Workgroup initiative. She was a doctoral student affiliated with CCTSI who was interested in gaining experience conducting Community Based Participatory Research (CBPR) in the Latino community.

**Ms. Marisol Chavez,** is obtaining a Masters of Public Health at the CSPH. Ms. Chavez received a mentored scholarship (\$7,410) to participate in the project 'Social Media for Sexual and Reproductive Rights, Access, and Justice' (2012-2014). She was mentored in research related to digital storytelling and survey methodology with a community sample of adolescents (N=200). She assisted with the collection and analysis of the survey data.

**Ms. Kate Coleman-Minahan,** is a doctoral student in the Department of Health and Behavioral Sciences at CU-Denver. Ms. Coleman-Minahan received a mentored scholarship (\$12,000) to participate in the project 'Social Media for Sexual and Reproductive Rights, Access, and Justice' (2012-2014). She assisted in submitting the COMIRB application and research protocol for the project's survey. She was mentored in research related to digital storytelling and survey methodology with a community sample of adolescents (N=200). She developed a sampling and recruitment plan, helped collect and analyze the survey data.

**Ms. Itzel-Marine Gourmelon,** is a Master's student in the Department of Anthropology at CU-Denver. She received a mentored scholarship (\$3,842) to participate in the project 'Social Media for Sexual and Reproductive Rights, Access, and Justice' (2012-2014). She was mentored in the production and analysis of digital stories' data. She also helped to write a brief methodological report for professional presentations and community meetings.

**Mr. Taylor Larsen,** received his MA in Economics in 2014 from CU-Denver. Mr. Larsen was the LRPC graduate student research assistant in 2011. He participated in manuscript and grant development and submissions. He developed a database for LRPC partners and developed the center's website. In addition, he assisted in the planning of the LRPC's 2011 Summit and in LRPC presentations at community outreach events such as health fairs.



**Ms. Jennifer Nguyen**, is a graduate student in the Clinical Health Psychology doctoral program at CU-Denver. Ms. Nguyen is the LRPC's current graduate research assistant (2012-Present). Since her research interests are on health disparities in the Latino community, she has been involved in the LRPC's grant submissions, coordination of events, and social media projects.

**Ms. Tattiana Romo**, is a graduate student in the Clinical Health Psychology doctoral program at CU-Denver. She received a mentored scholarship (\$7,040) to participate in the project 'Social Media for Sexual and Reproductive Rights, Access, and Justice' (2012-2014). Ms. Romo was mentored in research related to digital storytelling and survey methodology with a community sample of adolescents (N=200). She assisted with the collection and analysis of the survey data. She will use data from the survey for her dissertation project.

### Undergraduate Students

**Mr. Rafael Arvizu Derr** received his Bachelor's degree in Political Science in 2011 from CU-Denver. He was an LRPC's undergraduate student research assistant (2010-2011). Mr. Arvizu Derr covered a variety of responsibilities including clerical tasks and assisting with aspects of manuscript development and submissions as well as grant submissions. In addition, this undergraduate position assists with bi-annual conferences hosted by the LRPC and other community outreach events such as presentations at health fairs.

**Ms. Gloria Manuel** was hired in her freshman year (2010), as an LRPC undergraduate assistant and continued in that position until she graduated with a Bachelor's degree in Criminal Justice in 2014. She covered a variety of responsibilities including clerical tasks and assisting with aspects of manuscript development and submissions as well as grant submissions. In addition, she assisted with bi-annual conferences hosted by the LRPC and other community outreach events such as presentations at health fairs.

**Ms. Marlene Marquez** was hired as an undergraduate research assistant (2012) to assist with data collection for the Juntos Podemos Contra el Cancer project. At the conclusion of that project, Ms. Marquez continued with the LRPC as an undergraduate student research Assistant. She shared responsibilities with Ms. Gloria Manuel as described above. Ms. Marquez graduated in 2013 with a Bachelor's degree in Psychology.

**Mr. William Mundo**, is currently a senior majoring in Public Health at CU-Denver. He joined the LRPC after transferring from Colorado Mountain College (2013). In a collaborative endeavor with the EOP office, Mr. Mundo worked as a volunteer undergraduate research assistant to Dr. Otañez in the Project 'Social Media for Sexual and Reproductive Rights, Access, and Justice.' He learned to conduct digital storytelling research. He assisted with tasks such as pre-planning, creating storyboards and video editing and shared his digital storytelling skills in his work-study position with the EOP.

## Budget Activities

The LRPC's operating budget in 2010-2011 (FY11) was funded and managed by the Provost's office (overseen by Dr. Zen Camacho, CU-Denver's Vice Provost and Associate Vice-Chancellor for Diversity and Inclusion). During that fiscal year, the operating budget was \$100,000. Upon Dr. Evelinn A. Borrayo's appointment as Executive Director in late 2011, the center's operating budget was increased to \$150,000 for the 2011-2012 fiscal year and beyond. In addition, Dr. Borrayo received start-up funds for two years (\$100,000 for FY13 and \$100,000 for FY14) to offset a projected budget deficit for those years.

Table 1 is a display of the LRPC's operating budget and expenses (it excludes grants and contracts) for the 2011 to 2015 fiscal years. As seen for three of the fiscal years (FY12, FY13, and FY14), most of the LRPC's budget expenses constituted salaries and benefits (95%, 97%, and 95% respectively) for center staff and students. The Executive Director position is compensated with a stipend of \$25,000 a year and the three staff members (i.e., Center Manager, Research Collaborations Coordinator, Community Projects Coordinator) are hired at 50% time (.5 FTE). The remainder of the staff's salaries are covered by their percent effort in grants and contracts (e.g., FORD grant, MARC grant, HAF contract). Undergraduate students are paid hourly with LRPC funds exclusively or matched with work study funds. Graduate students are paid by stipend, based on their academic program's rate, or through center's grants and contracts. Junior faculty are either paid through LRPC funds (e.g., Dr. Marty Otañez) or through grants (e.g., Dr. Lucia Madera).

**In 2011-2012 (FY12)**, work for the LRPC by the Executive Director, staff, and students focused on organizing and meeting with participants from the 2011 Summit's Workgroups and on conducting the Breast and Colorectal Cancer Behavior Change Study. They also worked on writing and submitting a grant proposal (A1) with HAF to the CDC on 03/28/12.

**In 2012-2013 (FY13)**, the Executive Director, staff, and students worked primarily in the writing and submission of six research grant proposals in collaboration with community partners to: the NIMHD (B1) on 08/11/12; HRSA (A2) on 09/12/11; Ford Foundation (A3) on 12/03/12; ACS (A4) on 10/15/12; PCORI on 12/17/12; and HHS (A6) on 05/13/13. Due to considerable amount of effort towards these grant submissions, the LRPC staff were compensated for 70% effort (.7 FTE) instead of their regular 50% effort (.5 FTE) that year.

**In 2013-2014 (FY14)**, the Executive Director, staff, and students worked on writing and submitting three research grant proposals in collaboration with community partners to: the ACS (A7, first resubmission) on 10/15/13 and on 04/01/14 (A8, second resubmission); and to the Susan G. Komen Foundation (C1) on 12/05/13. Their efforts were also spent planning, organizing, and scheduling speakers and sessions for the 2013 LRPC conference.

**In 2014-2015 (FY15)**, the Executive Director, staff, and students worked on writing and submitting two research grant proposals in collaboration with community partners to the CDPHE (A9) on 10/01/14 and to the Susan G. Komen Foundation (C2) on 11/20/14. After meeting with a patient and caregiver stakeholder committee for six months, they are currently preparing a grant to be submitted to PCORI (D1) on 05/05/15. This fiscal year, they also will be working on the 2015 LRPC conference scheduled for October 2015.



**Table 1. LRPC's Operating Budget and Expenses for Each Fiscal Year**

Budget Category	2011 <sup>1</sup>	2012	2013	2014	2015
<b>A. Salaries</b>					
<b>Staff</b>					
Director Evelinn Borrayo (stipend)	.00	16,666.72	25,000.08	25,000.08	8,500.00
Interim Director Christine Johnson	1,250.00				
Acting Director Paula Espinoza	.00	4,439.83			
Manager Suzell Klein (.5 FTE)	32,315.93	48,542.42	52,757.10	47,992.68	34,007.75
Coordinator Alice Bradley (.5 FTE)	16,792.97	30,675.00	43,260.00	32,759.09	32,813.52
Coordinator Elisa Morales (.5 FTE)	9,312.64	40,116.95	27,624.64	23,734.08	14,260.19
Fiscal Manager Mark Montoya	1,250.00				
Faculty stipend Marty Otanez					6,373.00
<b>Students</b>					
<b>Undergraduate</b>					
Rafael Arvizu Derr	1,320.00	7,704.00			
Gloria Manuel	2,003.50	2,645.90	3,941.00	4,925.00	
Marlene Marquez	.00	680.40	8,002.90		
Incorrect posting		437.50	<437.50>		
<b>Graduate</b>					
Jennifer Nguyen	.00	8,152.17	16,666.67	20,000.04	10,833.38
Taylor Larsen	2,070.00	3,041.25			
<b>Salary TOTAL</b>	<b>66,315.04</b>	<b>162,664.64</b>	<b>\$177,252.39</b>	<b>\$154,410.97</b>	<b>\$106,787.84</b>
<b>B. Benefits</b>					
<b>Staff and Students</b>	15,458.73	35,095.82	42,148.09	38,867.27	34,823.53
<b>Benefits TOTAL</b>	<b>15,458.73</b>	<b>\$35,095.82</b>	<b>\$42,148.09</b>	<b>38,867.27</b>	<b>34,823.53</b>
<b>C. Operating Expenses</b>					
Travel	266.57	312.69	.00	.00	.00
IT Services	157.79	690.00	920.00	800.00	250.00
Office Supplies	813.07	1,202.75	453.01	834.33	532.12
Official Functions		209.27	175.95	4,885.64	242.26
Other Operating Expenses	4,059.13	7,975.81	4,453.69	3,731.17	11,475.29
<b>Operating Expenses TOTAL</b>	<b>5,296.56</b>	<b>\$10,390.52</b>	<b>6,002.65</b>	<b>10,251.14</b>	<b>12,499.67</b>
<b>D. Total Spent (all speedtypes)</b>	<b>87,070.33</b>	<b>\$208,150.98</b>	<b>\$225,403.13</b>	<b>\$203,529.38</b>	<b>\$151,111.04</b>
Revenue from previous FY		12,929.67	<45,221.31>	<20,624.44>	25,846.18
<b>E. Base Budget</b>	<b>100,000.00</b>	<b>150,000.00</b>	<b>150,000.00</b>	<b>150,000.00</b>	<b>150,000.00</b>
<b>F. Start-up FY 13 and FY 14</b>			<b>100,000.00</b>	<b>100,000.00</b>	
<b>G. Carry Over</b>	<b>12,929.67</b>	<b>&lt;45,221.31&gt;</b>	<b>&lt;20,624.44&gt;</b>	<b>25,846.18</b>	<b>\$21,735.14</b>

**Note:** The years represent the fiscal year (e.g., 2012=07/01/2011-06/30/2012); <sup>1</sup> Budget expenses displayed for 2011 were amounts incurred before Dr. Evelinn A. Borrayo was appointed in November 01, 2011; While the LRPC maintains a balanced budget, projections indicate a budget deficit by the end of the current fiscal year (FY15).