Foundation for NIH Marks 10th Year

This year, the Foundation for the National Institutes of Health marks its first decade as a nonprofit corporation called into existence by Congress to support NIH's mission. With NIH goals as its reference points, the foundation fosters public-private partnerships that serve both sides of the hyphen: NIH, whose funds are appropriated by Congress, identifies where progress could be made with additional funding and FNIH brokers relationships with companies, academia and other philanthropies whose own interests match NIH needs.

"That's where creativity comes into play," says Amy McGuire, executive director of FNIH since 2001. "We think of novel ways to involve public-private partnerships and we avoid a formulaic approach to configuring them."

FNIH currently manages 50 partnerships and is always searching for more. It has raised some $350 million to date and on Oct. 5 announced a major new project—the Biomarker Consortium—that will involve NIH, FDA and PhRMA (see box on p. 7).

It wasn't always such a major player, though; only 5 years ago, it took in about $12 million per year. Then in 2003, the Bill & Melinda Gates Foundation announced a $200 million grant to FNIH—almost six times more than FNIH's next-largest gift and the biggest grant announced by a private foundation that year. Nowadays, McGuire

Chicken or Egg? Forum on Retention Issues Circles Back to Recruitment

By Rich McManus

The major lesson from the recent forum on the retention of Latinos/Hispanics at NIH—held as part of Hispanic Heritage Month—is that workplace happiness and productivity often depend on the same two factors, regardless of race, color or national origin: a great boss and a willingness to heave negativity aside in the quest for a satisfying job.

Not everyone has those circumstances, unfortunately.

Time and again, the four panelists in Lipsett Amphitheater emphasized the same traditional values. Get out and network. Find folks

Catalyst for Change: Mohamad Halawi

By Rebecca Kolberg

As a child growing up in southern Lebanon during the civil war and the Israeli invasion of the 1980s, Mohamad Halawi recalls huddling in an underground bunker with dust pouring down as bombs exploded overhead. It was a terrifying ordeal that Halawi hoped his little brother would never experience. Sadly, history repeated itself this summer, serving to reinforce Halawi's conviction that non-violent strategies offer the only road to true freedom and lasting peace in the Middle East.

A moving story, but what does it have to do with science? Everything, if you ask Halawi.

Not only is he the winner of an international essay contest on the struggle for civil rights in the Middle East, the 23-year-old is an aspiring physician-scientist who believes that science—and scientists—can be a catalyst for change around the world.

Halawi came to the United States alone at the age of 17 with stars in his eyes and $1,000 in his pocket, eager to explore myriad educational
**Pulmonary Hypertension Meeting, Dec. 7-8**

The Evolution of Pulmonary Hypertension: Emerging Diseases and Novel Therapeutics meeting will be held Dec. 7-8 in Natcher conference center. It will bring together leading thinkers in the field to review current understanding of the pathobiology, pathogenesis and therapy of pulmonary hypertension. The meeting is sponsored by NHLBI, Office of Rare Diseases, Office of the Director and the critical care medicine department, Clinical Center. For more information visit www.nih.gov/nihrecord.

**Use or Lose Reminder**

Don’t forget to officially schedule your “use or lose” annual leave no later than Saturday, Nov. 25. Questions about “use or lose” leave should be directed to your administrative officer.

**Experts To Discuss Eye Diseases and New Therapies**

The National Eye Institute and the Food and Drug Administration will hold a symposium titled “Ophthalmic Clinical Trial Design and Endpoints,” on Nov. 28-29 in Washington, D.C. The purpose is to review challenges to the development of therapies for age-related macular degeneration (AMD) and diabetic retinopathy and to discuss if there are ways to expedite the process for bringing new treatments to people with these diseases.

“The goal of this symposium is to bring together experts in AMD and diabetic retinopathy to discuss the current procedural guidelines for clinical trials and address how these might best be updated to expedite the development and approval of therapies for these diseases,” said Dr. Karl Csaky, senior investigator in NEI’s Laboratory on Retinal Disease and Therapeutics and co-chair of the symposium. “This is important because more than 4 million people in the United States have diabetic retinopathy and an estimated 30 million people over the age of 60 will be affected by AMD by the year 2010,” he noted. “It is crucial that we shorten the time it takes to get effective therapies to people who need them.”

For more information and to register go to www.arvo.org/endpoints.

**Merit Awards Ceremony Set, Nov. 6**

The OD Merit Awards Ceremony will be held on Monday, Nov. 6 at 1:30 p.m. in Natcher Auditorium, Bldg. 45.

**Eye Disease Epidemiology Symposium Planned**

The fourth U.S. Symposium on Ocular Epidemiology, funded by the National Eye Institute and organized by Johns Hopkins University, will be held Jan. 29-31, 2007, in Sarasota, Fla. This will be the first time in 16 years that epidemiologists, biostatisticians, clinicians and other vision scientists will have a national forum for discussing the advances that have occurred in ocular epidemiology since the last symposium in 1991.

The symposium will offer participants the opportunity to review progress in eye disease epidemiology and explore possibilities for collaboration. Sessions will be held on these subjects: vision impairment, age-related cataract, genetic epidemiology of complex diseases, glaucoma, refractive errors, ocular diseases and conditions of infants and children, diabetic retinopathy and age-related macular degeneration. Three panel discussions will address “Genetic Epidemiology of Complex Disease,” “Population-Based Studies: Where Do We Go from Here?” and “Ocular Epidemiology: What Next?”

The keynote speaker will be Dr. Harvey Fineberg, president, Institute of Medicine, National Academy of Sciences. He will speak on the importance of epidemiology in making policy decisions.

For more information and to register visit http://webhost5.nts.jhu.edu/episymp.

**Women’s Baseball Team Needs Players**

The Lasers is a women’s baseball team consisting primarily of NIH’ers that plays in the Eastern Women’s Baseball Conference, a recreational league in the D.C. and Baltimore area. The team plays one game per weekend, most non-holiday weekends, from May through about mid-October. The team, beginning its third year, is recruiting new players for the 2007 season. Players are typically 18-52 years old, with a range of previous softball and/or youth baseball experience. The Lasers have informal outdoor practices on weekends in the fall and at indoor batting cages in the winter, in Rockville. If you are interested in playing, contact Susan McCarthy at mcarths@mail.nih.gov.
Stark To Give Dyer Lecture

Dr. George R. Stark will present the R.E. Dyer lecture on Wednesday, Nov. 8 at 3 p.m. in Masur Auditorium, Bldg. 10. His talk, “New Aspects of NFkB and STAT Activation and Function in Cancer and Inflammation,” will explore several topics related to the action of human proteins like NFkB and STAT, which bind to DNA and control gene expression in our cells. Stark will focus on how the expression and activation of these proteins is linked to immunity and cancer.

A native of New York City, he was awarded a Ph.D. in chemistry from Columbia University in 1959. After a postdoctoral fellowship with Drs. William Stein and Stanford Moore at the Rockefeller University, he joined the department of biochemistry at Stanford University in 1963, becoming professor in 1971. In 1983, he moved to the Imperial Cancer Research Fund in London as associate director of research. In July 1992, he became chair of the Lerner Research Institute of the Cleveland Clinic Foundation, a position he held until August 2002. He is currently distinguished scientist of the Cleveland Clinic Foundation, with a laboratory in the department of molecular genetics, and a professor of genetics at Case Western Reserve University.

Stark has contributed to several different areas of science. Early work on enzyme mechanisms and protein chemistry led to the development of the Northern and Western blot techniques for analyzing specific RNAs and proteins. His laboratory has also studied gene amplification in mammalian cells, leading to an appreciation of the mechanisms that generate amplified structures as well as the regulatory processes that prevent amplification from occurring in normal cells. A major project of his laboratory was to apply systematic genetic analysis to interferon-dependent signaling pathways. This led to the discovery of the family of JAK-STAT signaling pathways. A similar genetic approach is now being used to analyze signaling pathways that activate NFkB.

Stark was elected to the National Academy of Sciences in 1986, to fellowship of the Royal Society in 1990 and to the Institute of Medicine in 2002. He has also received the Sober, Milstein and Coley Awards.

The Dyer lecture honors former NIH director Dr. Rolla E. Dyer and is presented annually by a scientist who has made outstanding contributions to the field of medicine. For more information or to request reasonable accommodation, contact Gloria Hairston at (301) 496-0472.

NCI’s Niederhuber Formally Sworn In

Dr. John Niederhuber publicly took the oath of office as the 13th director of the National Cancer Institute on Oct. 18 in a ceremony officiated by Secretary Mike Leavitt of the Department of Health and Human Services.

Attended by more than 300 friends and colleagues, the event also featured tributes by NIH director Dr. Elias Zerhouni and Nobel laureate Dr. Phillip Sharp, Institute professor at the Center for Cancer Research and department of biology at the Massachusetts Institute of Technology.

In his acceptance speech, Niederhuber expressed his thanks to President Bush and Leavitt for the honor of serving as NCI director. “I am profoundly humbled by your confidence in me and by the fact that you are willing to entrust me with the leadership and the distinguished history of this proud institution,” he said.

“Appointing the director of the National Cancer Institute is a significant event for all of us,” Zerhouni told the assembled guests. Niederhuber, he said, “brings to NCI an ideal set of skills and experiences.”

Since June, Niederhuber had been NCI’s acting director. He previously served as chief operating officer and deputy director for translational and clinical sciences, positions he assumed in September 2005.

Niederhuber has longstanding ties to NCI and NIH. Across an academic career as a surgeon, professor, researcher, department chair, senior associate dean and cancer center director, he has also been the chair of the National Cancer Advisory Board, an external NCI adviser and grant reviewer and a laboratory investigator supported by NCI and NIH.

In addition to his management of NCI, Niederhuber remains involved in research, heading a laboratory on campus. The Laboratory of Tumor and Stem Cell Biology, part of NCI’s Center for Cancer Research, is studying tissue stem cells as the cell-of-origin for cancer. The lab is also studying the complex relationship between tumor cells and their microenvironment.

Niederhuber also holds a clinical appointment on the Clinical Center medical staff.
like yourself, with similar interests. Don’t take slammed doors personally, just keep hunting. Find a good mentor. Don’t settle for unsuitable positions.

There is no doubt that Hispanics are underrepresented in the federal workforce, particularly its upper reaches. Hispanics make up 13.5 percent of the civilian labor force, noted Dr. Ray Mejia, a 40-year NIH veteran and a mathematician in NHLBI’s Laboratory of Cardiac Energetics. But only about 7.4 percent of the federal workforce is Hispanic. Hispanics make up around 3.6 percent of the NIH workforce, or about 619 people.

In the period 2003-2006, around 4.6 percent of the people NIH hired were Hispanic, he continued. Some 528 Hispanics joined NIH in those 4 years, while another 485 separated from service.

“The net gain has been about 11 people,” Mejia figured. “In recent years, the net gain for Hispanics has been running less than a tenth of a percent of the workforce. The numbers have barely crept up over my 40 years here.”

In NIH’s intramural program, reported Dr. Arlyn Garcia-Perez, assistant director of the Office of Intramural Research, Hispanic representation among tenure-track investigators is higher (5.4 percent) than it is among the overall NIH workforce (3.6 percent) However, still only 2.6 percent of tenured investigators are Hispanic. Speaking from the audience to the panel, she reported that there are some 3,800 postdoctoral fellows at NIH (67 percent of whom are foreign nationals), but only 30 tenure-track positions open annually. “The odds are quite against being hired, no matter what the background,” she noted.

Two members of the panel overcame the odds to find satisfying work at NIH. Jorge Zapata, a program analyst in the Office of Logistics and Acquisition Operations, came to campus in 1996 as a temp. “I was stuck in a dead-end job for a few years, but I was always aware of the vast opportunities here,” he said. “Then I found out about the MI [Management Intern] Program, and that opened countless doors for me. People need to search for opportunities—they are definitely out there,” he insisted. “You have to do the research that needs to be done. It’s not easy. I had to fight for it. But I didn’t let slammed doors keep me from moving forward.”

Dr. Teresa Estrada, a program analyst in NCI’s Office of Workforce Development, came to NIH in 1999 as a contractor, but had trained at NICHD as a predoc before that. She reentered the workforce as a temporary part-time worker but had the good fortune to work for a boss who became her mentor, and whose position she eventually took. “It’s critical to have mentors available,” she said. “Everyone, regardless of where you come from, needs a mentor.”

Estrada says NIH needs to tout its mentoring and training opportunities more loudly, including the MI program. “It’s also helpful for people to know that they can telework, or work part-time, or work flexible hours [she currently job shares, but calls that option underutilized and underrecognized].”

“The loan repayment program at NIH was crucial to me,” added Zapata. “College graduates have a lot of debt, and the [LRP] can be a good recruitment tool.”
Mejia, a numerical analyst at NHLBI, said he found out about NIH from a friend, and emphasized the need to remain socially engaged once employed. “You have to be able to connect with colleagues, and you have to be proactive.”

Offering an interesting overview of the federal workforce as a whole was Dr. John Crum of the U.S. Merit Systems Protection Board, who reported that retention is not a problem overall for Uncle Sam. “If we keep you for 3-5 years,” he said, “we keep you forever.”

Relying solely on statistics for full-time permanent employees, he said the federal workforce experiences only a 2 percent voluntary loss rate annually, which is also true for NIH. He added that the average federal job opening draws 30-50 applicants.

“People want answers to two questions: Is the pay okay? And are there opportunities for advancement? If the answer is yes within 3-5 years, the average worker will stay forever unless driven out by poor management,” he said.

Crum said NIH is a tad below the average federal employer within those first few years, but quickly normalizes. “Your resources should go toward recruitment,” he advised. “That’s the realm where most gains are likely to be made.”

He cited a survey showing that pay and chances to move up motivate all workers, but that “chances for promotion are more important to Hispanics than to other groups. Also, [an employer’s] reputation is more important to Hispanics than to other groups. If you can engage [Hispanics] emotionally, you will be more successful.”

“Sometimes it seems like there’s a shield around NIH that prevents the outside world from knowing about the benefits here,” said panel moderator Dr. Marta Leon-Monzon, a health science administrator in the Office of AIDS Research and 28-year NIH veteran who has twice been president of the Hispanic Employees Organization. “We are the world’s best research institution and that should be enough to recruit people. I think we’re not using all the potential we have for recruiting Hispanics—that’s my view.”

During the question period, OIR’s Garcia-Perez reported that NIH is in the midst of studying the underrepresentation of women at the top of the workforce, too. She said that while the percentage of tenure-track investigators who are female is now 28 percent and rising, the total of tenured women at NIH remains stubbornly around 20 percent.

“There is a glass ceiling that you can document over the past 15-20 years,” she noted, “and it is very real. It’s not confined just to NIH; it involves other societal issues.” She further elaborated on the Hispanic demographics: Of 260 tenure-track scientists, only 14 are Hispanic; and of 933 tenured scientists at NIH, only 24 are Hispanic.

NIH’s observance of Hispanic Heritage Month also included a presentation on “Judging Performance: The Hispanic Perspective,” on Oct. 12, followed by a poster session showcasing the work of NIH Hispanic scientists and a sampling of ethnic foods.
anticipates $70 million to $100 million in program revenues yearly and is collaborating with virtually all of NIH’s 27 institutes and centers on projects large and small.

“Since Amy took the leadership role at the foundation, I’ve seen the transformation. It now plays an important role in contributing to NIH’s mission to advance people’s health—here and around the world,” said NIH director Dr. Elias Zerhouni. “The foundation helps bring government and the private sector together toward a common goal.”

FNIH projects typically fall into one of three categories: research initiatives; fellowships and clinical training; and capital expenditures. By far the largest research initiative up to now is the Gates-funded Grand Challenges in Global Health (a smaller Gates gift will support an as-yet-unannounced study), which solicited goals from the world’s top scientists and has required that the foundation hire its own scientific staff to manage a portfolio of 20 grants. Another research project, GAIN (Genetic Association Information Network), unites NHGRI and several companies in an effort to unravel the genetic component of common diseases.

“Working with the Foundation for NIH has been an empowering experience,” said NHGRI director Dr. Francis Collins. “In particular, the recent initiation of the Genetic Association Information Network would simply not have been possible without them. This project brings together NIH and the private sector (Pfizer, Affymetrix and Abbott) to catalyze the discovery of genetic variants that contribute to common disease and to make this data immediately available to all qualified investigators. The dedication and creativity shown by Amy McGuire, David Wholley and many other FNIH staff in addressing the many complex details of this unprecedented effort have been truly impressive.”

The longest-lived beneficiary of FNIH is the Clinical Research Training Program, cosponsored since 1998 by Pfizer Inc., which has gone from training 9 fellows in 1997 to 30 fellows a year today. Some 160 physician-scientists have participated in the program, conducted by mentors in the Clinical Center.

The largest capital project so far is the Edmond J. Safra Family Lodge and surrounding Claudio and Evelyne Cohen Garden, which opened last year. So far, the lodge has hosted 20,855 family members and caregivers of adult patients. They come from all over the world.

Managing and operating this burgeoning enterprise is a staff of 34 employees, 30 of whom work directly for FNIH (there are also 3 contractors and one NIH detailee) and 10 of whom were hired just this past summer, mainly to

**Top Ten Contributors to FNIH**

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<thead>
<tr>
<th>Name of Donor</th>
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<tr>
<td>Bill &amp; Melinda Gates Foundation</td>
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<td>Pfizer</td>
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<tr>
<td>Merck</td>
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<td>GlaxoSmithKline</td>
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<td>The Avon Foundation</td>
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<td>Novartis</td>
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<td>Mrs. Lily Safra and The Edmond J. Safra Philanthropic Foundation</td>
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<td>Bristol-Myers Squibb</td>
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<td>Eli Lilly &amp; Company</td>
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*Contributions and grants from the Bill & Melinda Gates Foundation accounted for about 61 percent of FNIH’s revenue in 2005.*
work on several new research initiatives. FNIH now occupies space in two NIH facilities—the Natcher Bldg. and Bldg. 60 (the Cloister), which houses its executive offices. FNIH is guided by a board of directors chaired by Dr. Charles Sanders, former chairman and CEO of Glaxo Inc. Previously he was general director of Massachusetts General Hospital and professor of medicine at Harvard Medical School. Apart from almost constant interaction, FNIH formally huddles twice a year with NIH leadership to discuss programs and priorities.

“The goals surface essentially from the NIH side,” said Charles Pucie, a former NCI public affairs staffer who is now communications director at FNIH. “We look to NIH’s priorities for scientific direction,” adds McGuire. “We are facilitators—private partners bring a lot to the table. We’re in a unique position to leverage the funding and expertise of partners and stakeholders.”

Both sides look for instances of scientific opportunity that would lag if not for private funding. Sometimes the money comes from industry, as in the Imaging Database Resources Initiative, a 2-year, $1.2 million demonstration project involving 8 of the biggest names in imaging hardware and augmenting NCI’s $7 million Lung Imaging Database Consortium. IDRI’s goal is to improve clinical management of lung cancer.

Other times another philanthropy is involved, as in the Grand Challenges, or the National Library of Medicine and Robert Wood Johnson Foundation Partnership, which is training the next generation of experts in public health informatics (think SWAT-team epidemiologists who can track and perhaps help ameliorate an outbreak of bird flu) at four universities.

The foundation facilitates partnerships of all sizes and configurations. Some are large-scale programs such as the Alzheimer’s Disease Neuroimaging Initiative, which involves NIA in conjunction with other federal agencies and private companies and organizations in a $60 million initiative to test whether serial magnetic resonance imaging, positron emission tomography, other biological markers, as well as clinical and neuropsychological assessment can be combined to measure the progression of mild cognitive impairment and early Alzheimer’s disease. There are myriad smaller efforts as well, some memorializing esteemed NIH scientists (the John LaMontagne Memorial Fund and the Norman P. Salzman Memorial Fund, for example). McGuire emphasizes that all gifts are needed and welcome, no matter the size, including CFC donations.

For all of its newfound heft, however, FNIH plans no formal program in honor of its 10th anniversary. “We are happy to help NIH mark its milestones, such as the 50th Anniversary of Brain Research or the The Helix and the Genome: 50 Years from Model to Medicine, but we will mark our 10th year by recognizing our partners and donors in a low-key way,” McGuire said.

Nonetheless, McGuire emphasizes that the efforts of a distinguished board of directors led by its hard-working chairman and a dedicated, talented staff, have been essential ingredients in the success of the foundation. “We could not achieve these results without the commitment of such exceptional people,” she added.

As FNIH begins its second decade, McGuire says, “We’ve built a structure that can support added staff for each new initiative. We have a scientific staff as well as grants management and project management staff that work directly with NIH staff and leadership. We hope to be part of many more groundbreaking partnerships that maximize each contributor’s impact and achieve each partner’s goals.”

**Biomarkers Consortium Launched, Oct. 5**

FNIH, NIH, FDA and the Pharmaceutical Research and Manufacturers of America on Oct. 5 announced the launch of a public-private biomedical research partnership—the Biomarkers Consortium—to search for and validate new biological markers (biomarkers) to accelerate the delivery of successful new technologies, medicines and therapies for prevention, early detection, diagnosis and treatment of disease.

“Rapid realization of the aims of the Biomarkers Consortium is beyond the capacity of any single sector of our nation’s health enterprise, much less the single-institution, or single-investigator, science research approach,” said Dr. Charles Sanders, chairman of the FNIH board and of the consortium’s executive committee. “This initiative is large-scale and complex. It requires the expertise of all stakeholders—government, industry, patient groups, academia and other private groups.”

Biomarkers are molecular, biological or physical characteristics that indicate a specific underlying physiologic state. Biomarker research already has identified indicators that have been helpful in prevention and treatment of disease. For example, blood pressure and cholesterol biomarkers have enabled diagnostics and therapies that have contributed to a 50 percent decrease in cardiovascular mortality in the U.S. over the last 30 years.

The consortium’s initial investigations will target lung cancer and lymphoma, with depression and diabetes as future projects. Three NIH institute directors sit on the consortium’s executive committee: NCI’s Dr. John Niederhuber, NIDCR’s Dr. Lawrence Tabak and NIMH’s Dr. Thomas Insel.

To date, $1.2 million has been committed by the consortium’s funding members, which include: the Alzheimer’s Association; AstraZeneca; the Biotechnology Industry Organization; Bristol-Myers Squibb; Glaxo-SmithKline; the Leukemia & Lymphoma Society; Johnson & Johnson; Eli Lilly & Co.; Pfizer Inc.; the Pharmaceutical Research and Manufacturers of America; and F. Hoffmann-La Roche.
and research opportunities not available in Lebanon. "In America, you have freedom, equality and justice. You don't have to watch everything you say. This removes the chains and unleashes the talent within you," said Halawi, who had gained a reputation in his homeland as an outspoken advocate for peace, women's rights, students' rights and other civil liberties issues.

He found the intellectual freedom he longed for at the University of Houston, but also discovered that in order to make ends meet he had to work two full-time jobs and sometimes sleep in his car or the library. His talent and determination eventually paid off in the form of prestigious scholarships and summer internships, two of which involved oncogene discovery research at the Dana-Farber Cancer Institute at Harvard Medical School.

In 2005, after earning his bachelor's degree in biochemical and biophysical sciences, Halawi came to NIH for a 1-year post-baccalaureate research fellowship in the lab of Dr. Francis Collins, director of the National Human Genome Research Institute. Building upon his dual interests in cancer and genomics, Halawi worked on a project aimed at better understanding how a gene called Multiple Endocrine Neoplasia Type 1, or MEN1, acts as a tumor suppressor and how its expression is regulated in different types of tissues.

True to form, Halawi also pressed forward in his quest to improve civil rights in the Middle East, submitting an entry in the Hands Across the Mideast Support Alliance's 2006 "Dream Deferred" essay contest. The competition, named after Langston Hughes' poem, "What Happens to a Dream Deferred?," asked young Americans and Middle Easterners to address civil rights repression in the Middle East. Selected from more than 2,500 entries from 20 different countries, Halawi's essay, "Freedom in the Middle East: A Strategic and Moral U.S. Imperative," won the first-place $2,000 prize in the American division.

"The people of the Middle East are not condemned by destiny to live in fear and oppression. Freedom is not part of a 'Western conspiracy' or a 'foreign imposition.' Freedom is at the essence of our existence. It is what inspires the genius inherent in each of us," Halawi writes. "Today, let us help reformers in the Middle East be heard. Let us send a powerful message to millions of the repressed in the region: this is the age of liberty, and we will never fail you." To read the full text of the essay, go to http://www.hamsaweb.org/halawi.html.

Unfortunately, Halawi had little time to savor the joy of his winning essay or look forward to his first year in medical school at Duke University School of Medicine. Just 2 weeks after he left NHGRI this summer for his new home in North Carolina, the Israeli-Hezbollah conflict erupted. Once again, bombs were raining down upon his hometown of Tyre, Lebanon, placing his father, mother, 21-year-old sister and 4-year-old brother in peril.

"It broke my heart to see the country where I grew up, the town where I grew up torn apart again. It was the toughest time of my life. I couldn’t rest until I could get my family out of there," Halawi said. "I grew up in bunkers, I saw atrocities...I wanted things to change so
my brother would not have to live through the same torment.”

To make sure his brother and the rest of his family remained safe, Halawi brought them to the U.S. to live with him. So now, on top of all the academic challenges facing any first-year medical student, he is helping his family adjust to life in a new country.

“Mohamad is an inspiration to us all,” said NHGRI director Collins. “Not only does he possess the intellect and drive needed to become an outstanding physician-scientist, he is willing to give of himself to help make our world a place in which all people can live in peace and freedom. We in the biomedical research community can learn much from his example.”

Despite the recent destruction in his homeland and its impact on his family, Halawi remains firmly committed to the views expressed in his essay. “This has made me even more motivated to seek non-violent change. We need to outgrow the cycle of hatred or we will be fighting forever,” he said. “Before they act, people need to think about their kids and grandkids. We don’t want coming generations to grow up in war. For the sake of the future, we need to embrace non-violence.”

And that’s where science and scientists come in. Halawi is convinced that by enhancing opportunities for scientific education and research, both individual researchers and research institutions can play a key role in effecting peaceful change in the Middle East and other developing areas. “If we help bring the tools of scientific thought to these countries, we give people hope that they are something and that they can become something—that they should not waste their potential on violence,” said Halawi, noting that his childhood interest in science was instrumental in his decision to pursue non-violent means of ending repression in Lebanon.

“Science is all about being curious, about discovery, about getting to the roots of a problem in order to solve it. And it’s not just of benefit for scientists. If young people are encouraged to develop these problem-solving skills, they will then have the ability to identify ways of responding to conflict other than just picking up a gun.”

NIMH Series Examines Innovative Thinking

There are seven lectures remaining in the NIMH Director’s Innovation Speaker Series. All lectures are in conference rooms C and D, Neuroscience Center, 6001 Executive Blvd., at 3 p.m. In the talks, scientists will describe how they crossed traditional boundaries to successfully develop ideas. The speakers have worked in academia, industry and global health policy. The audience is encouraged to join discussions.

Nov. 28—Dr. Karl Deisseroth is launching an effort to map key neural-circuit dynamics on a millisecond scale, using his NIH Director’s Pioneer Award. The Stanford University faculty member hopes to contribute to new conceptualizations of neurological and psychiatric disorders and circuit-modulation interventions for treatment of disease.

Dec. 11—Dr. Martin E.P. Seligman is widely known for his groundbreaking early work on the “learned helplessness” model of depression. He is considered a major contributor to contemporary models of cognitive psychotherapies and is the Fox leadership professor of psychology, University of Pennsylvania and past president of the American Psychological Association.

Jan. 22, 2007—Dr. Sonja K. Schoenwald leads a successful effort to transport an evidence-based treatment—multisystem therapy for high-risk youth—into wider use through innovative partnerships with local and state stakeholders. She is a professor, Family Services Research Center, department of psychiatry and behavioral sciences at the Medical University of South Carolina.

Feb. 21—Dr. Freeman A. Hrabowski III, president of the University of Maryland, Baltimore County, was described by the New York Times as “rocking the house when it comes to the increasingly critical mission of turning American college students into scientists.” A leader in math and science education, he is a champion of minority participation and achievement in science and math.

Mar. 13—Dr. Geoffrey Duyk is partner and managing director of Texas Pacific Group Ventures. He is interested in the discovery and development of small-molecule therapeutics. A former Howard Hughes Medical Institute investigator, he has served on many NIH panels and oversight committees on the planning and execution of the Human Genome Project.

Apr. 18—Dr. Miguel Nicolelis conducts studies of brain-machine interfaces with implications for refining movement of artificial limbs and is an expert in new electrophysiological techniques that record simultaneous activity of neurons in behaving animals. He is at Duke University Medical Center.

May 21—Dr. Michelle McMurry views the interface of biomedical research funding policies and health inequities from a global vantage point. A molecular immunologist and biochemist, she is now director of the Health, Biomedical Science and Society Initiative at the Aspen Institute and adjunct professor of health policy at George Washington University.

For information, call Dr. David Armstrong at (301) 443-3534.
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SPSS: ANOVA
Introduction to Rosetta on the Biowulf Cluster
Writing MIPAV Plugins
Remedy Queries and Reporting Using Access and Excel
Mapping to the Talairach Coordinate System Using MIPAV
GeneSpring GX for Gene Expression

NIH Observes Native American Heritage Month, Nov. 16

The 6th annual NIH American Indian and Alaska Native Heritage Month Observance will feature Donna House (Diné), a botanist/ethnobotanist and artist. The event will be held on Thursday, Nov. 16 from 11:30 a.m. to 12:30 p.m. in the Natcher Center, balcony B. A reception with cultural food samples will follow in the atrium.

House will speak on the relationship between the landscape and natural elements of the National Museum of the American Indian building that opened fall 2004 and the relationship and knowledge of native people and plants.

House designed the grounds of the National Museum of the American Indian and was on the planning committee for the museum for several years. She has also worked for the Nature Conservancy, where she surveyed federally listed endangered plant species on native lands and developed a program to protect and conserve the biological diversity of indigenous lands within their cultural context.

The observance is sponsored by the Office of Equal Opportunity and Diversity Management and the NIH American Indian/Alaska Native Employee Council.

Sign language interpreters will be provided. Individuals with disabilities who need reasonable accommodation to participate in these events should contact Carlton Coleman, (301) 496-2906, the Federal Relay Service 1-800-877-8339 or TTY (301) 451-2290.

Jaffe Wins CC Teaching Award

NCI’s Dr. Elaine Jaffe (c) receives the 2006 Distinguished Clinical Teacher Award at a recent NIH Clinical Center Grand Rounds and is congratulated by CC director Dr. John Gallin and NIAID fellow Dr. NaYoung Kim. NIH clinical fellows present the DCTA to senior clinicians, staff clinicians or tenure-track clinical investigators in recognition of their mentoring, teaching and contributions to clinical research. As the 2006 winner, Jaffe will deliver the 4th annual John Laws Decker Memorial Lecture at Clinical Center Grand Rounds on June 20, 2007.
Leapman Named NIBIB Scientific Director

The National Institute of Biomedical Imaging and Bioengineering has appointed Dr. Richard Leapman as scientific director of its Intramural Research Program. He will be responsible for planning, evaluating and directing all aspects of NIBIB's intramural research.

Prior to his appointment at NIBIB, Leapman was acting director of the Division of Bioengineering and Physical Science in the Office of Research Services at NIH. He also served as chief of the Supramolecular Structure and Function Resource. He received his Ph.D. in physics from the University of Cambridge, England.

Leapman’s research interests are in the development and application of quantitative electron microscopy and the application of novel nanoscale imaging methods to solve problems in structural and cellular biology. He has been particularly active in developing the techniques of electron energy loss spectroscopy and combining it with x-ray spectroscopy and scanning transmission electron microscopy to provide an unprecedented high spatial resolution for nanoanalysis of biological structures. He has devised new methods for quantifying both elemental and chemical information obtained from inelastic electron scattering, a research area in which he has more than 100 peer-reviewed publications.

Leapman is the recipient of numerous awards including the Burton Medal from the Microscopy Society of America, the Samuel Wesley Stratton Award from the National Institute of Standards and Technology, and two NIH Director’s Awards. He is currently serving as editor of the Journal of Microscopy.

Study Needs Male Teens

Parents! Your healthy male children, ages 14-17, who are right-handed and native English speakers are needed for a study that determines whether specific brain areas are related to aggressive behavior. Your child will be asked to play video games in addition to watching video clips that show aggressive behavior or to imagine aggressive scenes. The study will include MRI testing and completing questionnaires. Youth with neurological disease, psychiatric disorder or implanted metal in their bodies do not qualify. Compensation is provided for time and inconvenience. For more information call 1-800-411-1222 (TTY 1-866-411-1010).

Autism Studies Recruit

NIMH is conducting treatment and natural history studies for children with autism spectrum disorder and other developmental delays. Typically developing children are also being enrolled in the natural history study and will receive compensation. Call (301) 435-7962 (TTY 1-866-411-1010) or email nimh-asd@mail.nih.gov.

Follicular Lymphoma Vaccine Study

Your own body may be your best defense. Patients who have not had chemotherapy are asked to call for a lymphoma vaccine study. Call 1-866-444-2214 (TTY 1-866-411-1010).

Men with Osteoarthritis Sought

A study of osteoarthritis is recruiting men ages 30-65. They can take part in NIH study 04-AT-0239 evaluating hormones in men with osteoarthritis pain. Compensation is provided. Call 1-866-444-2214 (TTY 1-866-411-1010).

Mood/Anxiety Disorder Studies Seek Healthy Volunteers

Doctors at NIMH are seeking healthy volunteers to participate in studies on mood and anxiety disorders. Participation may include a physical exam, lab work, brain imaging, medication and/or psychological interviews. The studies are conducted at the Clinical Center. You may be eligible if you are between ages 18-65, medically healthy, free of current or past history of psychiatric illness, free of a history of head trauma with loss of consciousness and not currently taking any medication. Compensation is provided. Call 1-866-627-6464 (TTY 1-866-411-1010).

Are You a Woman Who Has Been Depressed?

NIMH is looking for female volunteers to participate in a study that examines the role of hormones in depression. Participants should have experienced depression in the past but not be currently depressed, be between ages 18-45, be medically healthy and not be taking any medications, including birth control pills. Study includes thorough evaluations and compensation. For more information call Linda Simpson-St. Clair, (301) 496-9576 (TTY 1-866-411-1010).
**CFC Event Seeks Best IC Director from 'Charity Stripe'**

**PHOTOS: ERNIE BRANSON**

**Above:**
NIH director Dr. Elias Zerhouni (c) referees the Oct. 12 Combined Federal Campaign basketball free-throw contest featuring directors of the institutes and centers. The contest, held in front of Bldg. 1, was proposed by NIDCR director Dr. Lawrence Tabak to raise awareness of this year’s CFC. Coincidentally, Tabak won, hitting the most free throws in 30 seconds.

**Center, top:**
Ball in hand, CIT Deputy Director Al Whitley focuses on the hoop as other IC entrants (from l) NIDDK acting director Dr. Griffin Rodgers, NIA deputy director Dr. Judith Salerno, Charles Sabatos, chief of NINR’s Office of Science Policy and Public Liaison, and NHLBI deputy director Dr. Susan Shurin look on. R&W President Randy Schools (r) also helped officiate the contest.

**Center, bottom:**
Competitors include (from l) NIAMS director Dr. Steve Katz, CSR deputy director Dr. Cheryl Kitt, CC director Dr. John Gallin, NIMH director Dr. Thomas Insel, NIGMS director Dr. Jeremy Berg and Salerno.

**Below, l:**
NIAID director Dr. Anthony Fauci is the picture of concentration as he prepares to shoot.

**Below, r:**
Eventual victor Tabak (l) high-fives well-wishers that include Zerhouni. The prize was a laptop computer Tabak will present to a deserving CFC keyworker or contributor.

**Rockledge CFC ‘Alley-Oop’ Set, Nov. 8**
Come out and cheer for your institute/center representative in a CFC basketball free-throw competition on Wednesday, Nov. 8 at the upper level of the 6701 Rockledge parking lot. The “Alley-Oop” runs from 11 a.m. to 1 p.m. and includes the free-throw contest, music from the Walter Johnson High School Jazz Combo and $4 lunches available from restaurants such as Ledo’s Pizza, the Bean Bag and Hard Times Café. Also on hand will be representatives from some of the CFC charities that will benefit from your contributions. So come out for some good food, good fun and an exciting free-throw contest and support the CFC!