CALL FOR PRESENTATIONS

National Rural Health Association
11th Annual Rural Minority and Multicultural Health Conference
"State of the States' Rural Racial and Ethnic Health Disparities: Yesterday, Today and Tomorrow"

May 18, 2005
Sheraton New Orleans Hotel
New Orleans, Louisiana

Submission Deadline: September 13, 2004

The National Rural Health Association (NRHA) invites individuals with an interest in rural minority and multicultural health to submit concurrent session ideas for presentation during its 11th Annual Rural Minority and Multicultural Health Conference to be held May 18, 2005, in New Orleans, Louisiana. This process is to broaden the opportunity for NRHA members and others to present relevant and timely information at the 11th Annual Rural Minority and Multicultural Health Conference on innovative rural health care programs, service delivery models, policy issues, educational programs, clinical concerns, leadership development and skills training as they relate to rural racial and ethnic health disparities. These sessions may be didactic, hands-on interactive workshops, panel presentations, roundtable discussions, or poster sessions.

Conference Goals: The conference will provide a forum where diverse racial, ethnic and underserved populations can come together to examine issues of common need; to develop and share strategies, models and tools for providing solutions within their respective communities; and to form alliances across and within all rural populations.

Conference Objectives: Conference participants will learn innovative strategies at the state and community levels; gain knowledge in mobilizing communities for action; discuss behavioral factors that impact rural racial and ethnic populations; gain knowledge in improving health care for rural racial and ethnic minorities; and have opportunities for networking and learning from others.

Session length: Sessions are 60 minutes in length and no more than three presenters will be allowed per session. 15 minutes will be allowed for questions and answers.

Poster session length: Poster sessions are 60 minutes in length. If you are not selected for a concurrent session presentation, you will have the option of presenting at the poster session.

For consideration: Submit a short session description, course outline, and three learning objectives.

Response: Submissions must be postmarked no later than September 13, 2004. You will be notified of acceptance or rejection by September 30, 2004.

If accepted: Presenters must register for the meeting and pay the appropriate registration fee. In addition, no honoraria or travel expense reimbursement will be provided for any presenter submitting through the "Call for Presentations." Presenters may not use any conference presentation to market products or services; display table space is available for that purpose.

The NRHA reserves the right to combine sessions, to make decisions with respect to presenters, and to edit your description for promotional purposes.

Audio Visual: The standard audiovisual equipment provided by the NRHA includes overhead projectors and screens, LCD projectors and screens, flip chart and markers, and podium microphones. Computers needed for PowerPoint presentation, TV/VCRs, phone lines/internet connections, or other A/V equipment will not be provided. If needed, it will be the responsibility of the presenters to make arrangements and provide payment for such equipment.

Submitting an idea for a concurrent session that is accepted for presentation represents a commitment to develop and deliver an educational session that is informative, relevant, and useful. NRHA will assist and support you with suggestions, resources, and equipment to ensure a quality session.

Forms may be downloaded from the NRHA Web site at www.NRHArural.org under the conferences and events tab.

2005 NRHA 11th Annual Rural Minority and Multicultural Health Conference Presentation Submission Form

| Please print or type: | | | | |
|--|---|--|--|--|
| Primary Contact Name | | Degree(s) | | |
| Title | Organization | | | |
| Address | | | | |
| City | State | Zip | | |
| Telephone Fa | ax E-m | ail | | |
| Session Title: | | | | |
| Session Topics: (Check the topic that app | ply to your abstract.) Potential topi | cs may be, but not limited to: | | |
| ☐ State level cuts ☐ State policy-making—what needs to be done ☐ Best practices/successful models ☐ Mental health ☐ Emerging populations | State of the economy Community level planning Pipeline initiatives Programs and centers of rural studies | □ Foundation strategies □ Medicare Part D □ Access Issues □ Public health planning □ Other | | |
| Session Format: please check first and se | | rmat | | |
| Session Information: Learning Objectives (please list three). U | pon completing this session, partici | | | |
| 1) | | | | |
| | | | | |
| 2) | | | | |
| 2) ———————————————————————————————————— | | | | |
| | | | | |
| | | | | |

| Session Description: Session descriptions must be clearly legible, 150 words or less, one page (8.5 x 1 inch margins all around and using 12 point font. Session submissions not meeting these requirements ered. The NRHA reserves the right to edit session descriptions for size and clarity. You may attach a submit electonically to rmckenzie@NRHArural.org Session Presenters: List suggested presenters – limit your list to three people to allow adequate time answer segment. If your session is combined with another, your allowed number of presenters will b responsibility to contact your speakers to confirm their interest and initial availability. The NRHA wi mation letters if your session is accepted for presentation. Presenter 1 Name Degree(s) Title Organization Address City State Zip Brief description of presenter's expertise, experience and relevance to the session topic. Presenter 2 Name Degree(s) Title Organization Address City State Zip Brief description of presenter's expertise, experience and relevance to the session topic. | | | | 3) |
|---|------------------------------|----------------------------|--|---|
| nch margins all around and using 12 point font. Session submissions not meeting these requirements ared. The NRHA reserves the right to edit session descriptions for size and clarity. You may attach a submit electonically to rmckenzie@NRHArural.org Session Presenters: List suggested presenters – limit your list to three people to allow adequate time answer segment. If your session is combined with another, your allowed number of presenters will be responsibility to contact your speakers to confirm their interest and initial availability. The NRHA with mation letters if your session is accepted for presentation. Presenter 1 Name Degree(s) Title Organization Address City State Zip Phone Fax E-mail Degree(s) Title Organization Address State Zip Presenter 2 Name Degree(s) Title Organization Address State Zip Presenter 2 Name Degree(s) Title Organization Address City State Zip Phone Fax E-mail | | | | |
| Address City Presenter 2 Name Degree(s) Fax E-mail Presenter 2 Name Degree(s) Title Degree(s) Title Circle description of presenter's expertise, experience and relevance to the session topic. | nents may not be consid- | ot meeting these requireme | 2 point font. Session submissions no co edit session descriptions for size a | nch margins all around and using red. The NRHA reserves the ri |
| Name Degree(s) Title | ill be one to two. It is you | l number of presenters wil | ombined with another, your alloweders to confirm their interest and initia | nnswer segment. If your sessior responsibility to contact your sp |
| Organization | | Title | Doorgoo(s) | |
| Address | | | | |
| City State Zip Phone Fax E-mail Brief description of presenter's expertise, experience and relevance to the session topic. Presenter 2 Name Degree(s) Title Organization Address City State Zip Phone Fax E-mail | | | | |
| Phone Fax E-mail Brief description of presenter's expertise, experience and relevance to the session topic. Presenter 2 Name Degree(s) Title Organization Address State Zip Phone Fax E-mail | | | | |
| Brief description of presenter's expertise, experience and relevance to the session topic. Presenter 2 Name Degree(s) Title Organization Address State Zip Phone Fax E-mail | | _ | | |
| Presenter 2 Name Degree(s) Title Organization Address City State Zip Phone Fax E-mail | | E-mail | Fax | Phone |
| Name Degree(s) Title Organization Address | | | | |
| Name | | | | |
| Organization Address | | Title | Degree(s) | |
| Address State Zip Phone Fax E-mail | | | G | |
| Phone E-mail | | | | |
| | | Zip | State | City |
| Brief description of presenter's expertise, experience and relevance to the session topic. | | E-mail | Fax | Phone |
| | | e session topic. | rtise, experience and relevance to the | Brief description of presenter's e |
| | | 7 | , [| |
| | | | | |
| | | | | |
| | | | | |

| Presenter 3 Name | Degree(s) | Title | |
|--|---------------------------------|---------------|--|
| Organization | | | |
| Address | | | |
| City | State | Zip | |
| Phone | Fax | E-mail | |
| Brief description of presenter's expertise, ex | perience and relevance to the s | ession topic. | |
| | | | |
| | | | |
| | | | |
| | | | |
| Session Moderator: (lead speaker or other | | | |
| Name | Degree(s) | Title | |
| Organization | | | |
| Address | | | |
| City | State | Zip | |
| Phone | Fax | E-mail | |
| | | | |
| | | | |

Return Completed Form to:
Rosemary McKenzie
Minority Health Liaison and Program Services Manager
National Rural Health Association
One West Armour Blvd., Suite 203
Kansas City, MO 64111
Phone: (816) 756-3140

Fax: (816) 756-3144

Electronic submissions will be accepted, but must be in WORD format. On subject line of email, please write "11th Annual Rural Minority & Multicultural Conference." Submit to rmckenzie@NRHArural.org.

SUBMISSIONS DEADLINE: SEPTEMBER 13, 2004