



A New Free Training Opportunity from Health DATA

Datos y Democracia Introducción a Datos de Salud Capacitación de Capacitadores

This is an opportunity to **LEARN & TEACH** others in Spanish how to obtain and use health data to benefit YOUR organization and build healthy communities!

- Learn how to access, evaluate, and use health data
- Learn how to teach others how to access, evaluate, and use health data
- Receive a stipend and a certificate of completion from the UCLA Center for Health Policy Research

This 3-day course is currently being offered in the Inland Empire Region:

Training Dates Thursday Sept. 10th (8-2:30), Friday Sept. 11th (8-2:30) and
& Times: Thursday Sept. 17th (8-1:30)
Location: First 5 San Bernardino
Address: 330 North D. St. 5th Floor San Bernardino, CA 92415

**Representatives of community-based organizations
serving underserved populations
in the Inland Empire are invited to apply.**

****Application deadline has been extended to Friday, September 4 at 5PM****

You must apply to participate. Submit early. Seating is limited.

Datos y Democracia is made possible through a grant from
The California Wellness Foundation (<http://www.tcdf.org>).
For more information visit our webpage at
<http://www.healthpolicy.ucla.edu/HealthDATA/index.html>
or contact us at hdp@ucla.edu or 866-252-3383.

Datos y Democracia Capacitar a los Capacitadores course is offered in the Inland Empire in partnership with First 5 San Bernardino

Purpose

The purpose of the Datos y Democracia “*Introduccion a Datos de Salud*” Capacitar a los Capacitadores is a three day course to develop the skills of community-based experts to increase the ability of communities to obtain, evaluate, and apply data to local public health planning and advocacy.

Course requirements

Participants of the Datos y Democracia *Capacitar a los Capacitadores* will be required to:

- Speak Spanish
- Submit a Memorandum of Understanding (MOU) affirming your commitment to complete course requirements listed below. The MOU must be signed by you and your supervisor and submitted Day 1 of the Course on September 10 2009.
- Attend the entire three (3) day training course and complete all assignments.
- Complete the *workshop plan* by the third day of the course.
- Conduct at least one (1) community training (in Spanish) in your community within six weeks of completing the training course in Spanish.
- Attend one (1) regional convening to participate in additional skill building clinics and share experiences conducting workshops. This will take place 6 weeks after the 3rd day of training.

Participant benefits

Participants of the Capacitar a los Capacitadores course will receive:

- Expert training on how to obtain, evaluate, and use health data to build healthy communities through policy and advocacy.
- Course binder containing copies of the *Introduccion a Datos de Salud* curriculum and *Trainer’s Guide and Toolkit*, training materials.
- CD ROM containing electronic files of the curriculum, training materials, worksheets, and workshop slides.
- On-call technical assistance from Health DATA staff.
- Curriculum workbooks, certificates of completion for (10) community workshop participants, sign-in sheets, and evaluation forms for your community workshop.
- \$125 stipend to support your workshop.
- A Trainer Certificate of Completion upon completing all course requirements.

Eligibility criteria

Executive directors, program managers and coordinators, advocates, grant managers, community organizers, and community volunteer leaders are encouraged to apply. Eligibility criteria include:

- Applicant must be a staff or volunteer representative of a community-based non-profit organization serving low-income, immigrant, homeless, and/or underserved racial/ethnic minorities such as African American, American Indian, Asian, Pacific Islander, and Latino populations. Priority will be given to applicants serving populations in the Inland Empire County.
- **Applicant must commit in advance to completing all course requirements.**
- ***Space is assigned on a first come, first serve basis to applicants who meet the above criteria.*** Up to 2 individuals per organization will be accommodated.

How to Apply

Apply online at http://www.surveymonkey.com/s.aspx?sm=79zx6VQp6mPODOBQcliKDA_3d_3d or complete the attached application form and fax to Health DATA at 310-794-2686, attention Marcela Martinez. Applicants will receive a course registration confirmation via e-mail that includes the MOU to be signed by applicant and supervisor. If you do not have e-mail please let us know on your application. MOU must be submitted prior to start of course. **Courses fill up fast. Apply early!**

Datos y Democracia Capacitar a los capacitadores Course Application

****Application deadline has been extended to Friday, September 4 at 5PM****

http://www.surveymonkey.com/s.aspx?sm=79zx6VQp6mPODOBQcliKDA_3d_3d

TO APPLY BY FAX: Complete this 2-page application form and fax it to 310-794-2686, attn: Marcela Martinez.

All applicants will receive course registration confirmation via email with MOU to be signed and submitted on Day 1 of the Course on September 10th, so please provide current email address. If you do not have an e-mail address please let us know on your application.

Your name: _____

Title/Role: _____

Organization: _____

Address: _____

City: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Do you have any specific meeting needs? (i.e. wheelchair accessibility, large print materials, **DIETARY RESTRICTIONS**, etc.) _____

Before completing this application, please complete the following checklist to be sure you understand the Capacitar a los Capacitadores course requirements:

- I can attend all 3 days of the Inland Empire course: Thursday, Sept. 10th, Friday, Sept. 11th, and Thursday, Sept. 17th.
- I will plan and conduct a workshop based on what I will learn for staff, partners, or volunteers in my organization or community within 6 weeks following day 3 of the course.

I plan to train the following community members: _____

- My supervisor will support my participation in the 3-day course, planning and conducting my community workshop, and my attending the Regional Convening. My supervisor's name and contact information is:

Name: _____ Title: _____

Email: _____ Phone: _____

- If notified I have been accepted into the course, I will complete and submit the MOU prior to September 10th, the first day of training.
- After acceptance into the course, if I cannot meet all course requirements, I will notify Health DATA immediately.

Please tell us about yourself and your organization. This information will help us to identify and meet your training needs. Your answers to these questions are NOT used to determine course eligibility.

1. What area(s) of the Inland Empire does your organization serve? (Please list all cities)

2. How would you describe your organization? (Please check all that apply)

- 501(c)3 status non-profit
- Community-based or grassroots
- Private or incorporated
- Academic institution
- Municipal/County dept of health or other public office
- State dept of health or other public office
- Hospital, clinic, or other service provider
- Other: _____

3. What is the focus of your organization? (Please check all that apply)

- Advocacy/Public policy
- Care/Service delivery
- Consulting
- Health outreach/Promotion/Education
- Program planning/Implementation
- Research/Evaluation
- Volunteer
- Other: _____

4. How would you describe yourself? I speak...

- English
- Spanish
- English and Spanish
- Other: _____

5. What target populations are served by your organization or program? (Please check all that apply)

- Spanish monolingual
- Bilingual Spanish and English
- Other Language(s)
- Low-income
- Immigrant
- Homeless
- African American
- American Indian
- Asian-Pacific Islander
- Latino
- Non-Latino White
- Other community: _____

6. What is the size of your organization, including full- and part-time staff? (Please check one)

- 1-5 staff
- 6-10 staff
- 11-20 staff
- More than 20 staff

7. What is your organization's annual budget? (Please check one)
- Less than \$100,000 per year
 - \$100,000 to \$250,000 per year
 - \$250,000 to \$500,000 per year
 - \$500,000 to \$1,000,000 per year
 - More than \$1,000,000 per year
8. Do you have experience with training groups of people (e.g., conducting a workshop)? (Please check one)
- I have trained groups many times
 - I have trained groups a few times
 - I do not have experience with training groups
9. Do you have experience with **obtaining** health-related or other types of data? (Please check one)
- A lot of experience
 - Some experience
 - Little or no experience
10. Do you have experience with **evaluating** health-related or other types of data? (Please check one)
- A lot of experience
 - Some experience
 - Little or no experience
11. Do you have experience **using** health-related or other types of data for policy advocacy? (Please check one)
- A lot of experience
 - Some experience
 - Little or no experience
12. Do you have experience conducting training on how to use health data?
- I have previously conducted a training on how to use health data
 - I have contact with others in my organization who have conducted a training on how to use health data
 - I have little or no experience with or contact with those conducting training on how to use health data
13. How did you become aware of this training course?
- Coworker
 - Coalition Group
 - E-mail
 - Funding Agency
 - Health Data Website
 - Other: _____

Thanks for your application! Participants accepted into *the course will receive their registration confirmation via e-mail*. For more information contact Health DATA at hdp@ucla.edu. Or visit us online at <http://www.healthpolicy.ucla.edu/healthdata/index.html>