

Johnson Controls Dc 9100 8054

A new release in the Quality Chasm Series, Priority Areas for National Action recommends a set of 20 priority areas that the U.S. Department of Health and Human Services and other groups in the public and private sectors should focus on to improve the quality of health care delivered to all Americans. The priority areas selected represent the entire spectrum of health care from preventive care to end of life care. They also touch on all age groups, health care settings and health care providers. Collective action in these areas could help transform the entire health care system. In addition, the report identifies criteria and delineates a process that DHHS may adopt to determine future priority areas.

Advances in chemistry, biology and genomics coupled with laboratory automation and computational technologies have led to the rapid emergence of the multidisciplinary field of chemical genomics. This edited text, with contributions from experts in the field, discusses the new techniques and applications that help further the study of chemical genomics. The beginning chapters provide an overview of the basic principles of chemical biology and chemical genomics. This is followed by a technical section that describes the sources of small-molecule chemicals; the basics of high-throughput screening technologies; and various bioassays for biochemical-, cellular- and organism-based screens. The final chapters connect the chemical genomics field with personalized medicine and the druggable genome for future discovery of new therapeutics. This book will be valuable to researchers, professionals and graduate students in many fields, including biology, biomedicine and chemistry.

A guide to the techniques and analysis of clinical data. Each of the seventeen sections begins with a drawing and biographical sketch of a seminal contributor to the discipline. After an introduction and historical survey of clinical methods, the next fifteen sections are organized by body system. Each contains clinical data items from the history, physical examination, and laboratory investigations that are generally included in a comprehensive patient evaluation.

Annotation copyrighted by Book News, Inc., Portland, OR

In a sense, all mineralogy is environmental mineralogy. However, the term environmental has come to be employed (particularly in combination with terms such as science, issue or problem) to refer to those systems at or near the surface of the Earth where the geosphere comes into contact with the hydrosphere, atmosphere and biosphere. This is, of course, the environment upon which the human race depends for survival and, hence, is now sometimes referred to as the critical zone. Those systems containing minerals that constitute the most important or key environments are considered here: soils, modern sediments, atmospheric aerosols, and the interior or exterior parts of certain micro- and macro-organisms. Particularly important are the roles that minerals play in processes that act over time to control or influence the environment at various scales of observation. Both pure systems and those contaminated as a result of human activity are considered. The objectives for this volume are to help to define the subject of environmental mineralogy, and to provide an initial source of information both for mineralogists and other scientists who wish to understand or work in this field. It was hoped that it might also provide a text for use by those teaching courses in the subject at advanced undergraduate or graduate student level.

A respected resource for decades, the Guide for the Care and Use of Laboratory Animals has been updated by a committee of experts, taking into consideration input from the scientific and laboratory animal communities and the public at large. The Guide incorporates new scientific information on common laboratory animals, including aquatic species, and includes extensive references. It is organized around major components of animal use: Key concepts of animal care and use. The Guide sets the framework for the humane care and use of laboratory animals. Animal care and use program. The Guide discusses the concept of a broad Program of Animal Care and Use, including roles and responsibilities of the Institutional Official, Attending Veterinarian and the Institutional Animal Care and Use Committee. Animal environment, husbandry, and management. A chapter on this topic is now divided into sections on terrestrial and aquatic animals and provides recommendations for housing and environment, husbandry, behavioral and population management, and more. Veterinary care. The Guide discusses veterinary care and the responsibilities of the Attending Veterinarian. It includes recommendations on animal procurement and transportation, preventive medicine (including animal biosecurity), and clinical care and management. The Guide addresses distress and pain recognition and relief, and issues surrounding euthanasia. Physical plant. The Guide identifies design issues, providing construction guidelines for functional areas; considerations such as drainage, vibration and noise control, and environmental monitoring; and specialized facilities for animal housing and research needs. The Guide for the Care and Use of Laboratory Animals provides a framework for the judgments required in the management of animal facilities. This updated and expanded resource of proven value will be important to scientists and researchers, veterinarians, animal care personnel, facilities managers, institutional administrators, policy makers involved in research issues, and animal welfare advocates.

Pathogens transmitted among humans, animals, or plants by insects and arthropod vectors have been responsible for significant morbidity and mortality throughout recorded history. Such vector-borne diseases " including malaria, dengue, yellow fever, and plague " together accounted for more human disease and death in the 17th through early 20th centuries than all other causes combined. Over the past three decades, previously controlled vector-borne diseases have resurged or reemerged in new geographic locations, and several newly identified pathogens and vectors have triggered disease outbreaks in plants and animals, including humans. Domestic and international capabilities to detect, identify, and effectively respond to vector-borne diseases are limited. Few vaccines have been developed against vector-borne pathogens. At the same time, drug resistance has developed in vector-borne pathogens while their vectors are increasingly resistant to insecticide controls. Furthermore, the ranks of scientists trained to conduct research in key fields including medical entomology, vector ecology, and tropical medicine have dwindled, threatening prospects for addressing vector-borne diseases now and in the future. In June 2007, as these circumstances became alarmingly apparent, the

Forum on Microbial Threats hosted a workshop to explore the dynamic relationships among host, pathogen(s), vector(s), and ecosystems that characterize vector-borne diseases. Revisiting this topic in September 2014, the Forum organized a workshop to examine trends and patterns in the incidence and prevalence of vector-borne diseases in an increasingly interconnected and ecologically disturbed world, as well as recent developments to meet these dynamic threats.

Participants examined the emergence and global movement of vector-borne diseases, research priorities for understanding their biology and ecology, and global preparedness for and progress toward their prevention, control, and mitigation. This report summarizes the presentations and discussions from the workshop.

A Shared Destiny is the fourth in a series of six reports on the problems of uninsurance in the United States. This report examines how the quality, quantity, and scope of community health services can be adversely affected by having a large or growing uninsured population. It explores the overlapping financial and organizational basis of health services delivery to uninsured and insured populations, the effects of community uninsurance on access to health care locally, and the potential spillover effects on a community's economy and the health of its citizens. The committee believes it is both mistaken and dangerous to assume that the persistence of a sizable uninsured population in the United States harms only those who are uninsured.

On October 17, 2014, spurred by incidents at U.S. government laboratories that raised serious biosafety concerns, the United States government launched a one-year deliberative process to address the continuing controversy surrounding so-called "gain-of-function" (GOF) research on respiratory pathogens with pandemic potential. The gain of function controversy began in late 2011 with the question of whether to publish the results of two experiments involving H5N1 avian influenza and continued to focus on certain research with highly pathogenic avian influenza over the next three years. The heart of the U.S. process is an evaluation of the potential risks and benefits of certain types of GOF experiments with influenza, SARS, and MERS viruses that would inform the development and adoption of a new U.S. Government policy governing the funding and conduct of GOF research. Potential Risks and Benefits of Gain-of-Function Research is the summary of a two-day public symposia on GOF research. Convened in December 2014 by the Institute of Medicine and the National Research Council, the main focus of this event was to discuss principles important for, and key considerations in, the design of risk and benefit assessments of GOF research. Participants examined the underlying scientific and technical questions that are the source of current discussion and debate over GOF research involving pathogens with pandemic potential. This report is a record of the presentations and discussion of the meeting.

When policy makers and researchers consider potential solutions to the crisis of uninsurance in the United States, the question of whether health insurance matters to health is often an issue. This question is far more than an academic concern. It is crucial that U.S. health care policy be informed with current and valid evidence on the consequences of uninsurance for health care and health outcomes, especially for the 45.7 million individuals without health insurance. From 2001 to 2004, the Institute of Medicine (IOM) issued six reports, which concluded that being uninsured was hazardous to people's health and recommended that the nation move quickly to implement a strategy to achieve health insurance coverage for all. The goal of this book is to inform the health reform policy debate--in 2009--with an up-to-date assessment of the research evidence. This report addresses three key questions: What are the dynamics driving downward trends in health insurance coverage? Is being uninsured harmful to the health of children and adults? Are insured people affected by high rates of uninsurance in their communities?

The companion volume to the Smithsonian's National Museum of African American History and Culture exhibit, opening in September 2021 With a Foreword by Pulitzer Prize-winning author and historian Eric Foner and a preface by veteran museum director and historian Spencer Crew An incisive and illuminating analysis of the enduring legacy of the post-Civil War period known as Reconstruction—a comprehensive story of Black Americans' struggle for human rights and dignity and the failure of the nation to fulfill its promises of freedom, citizenship, and justice. In the aftermath of the Civil War, millions of free and newly freed African Americans were determined to define themselves as equal citizens in a country without slavery—to own land, build secure families, and educate themselves and their children. Seeking to secure safety and justice, they successfully campaigned for civil and political rights, including the right to vote. Across an expanding America, Black politicians were elected to all levels of government, from city halls to state capitals to Washington, DC. But those gains were short-lived. By the mid-1870s, the federal government stopped enforcing civil rights laws, allowing white supremacists to use suppression and violence to regain power in the Southern states. Black men, women, and children suffered racial terror, segregation, and discrimination that confined them to second-class citizenship, a system known as Jim Crow that endured for decades. More than a century has passed since the revolutionary political, social, and economic movement known as Reconstruction, yet its profound consequences reverberate in our lives today. Make Good the Promises explores five distinct yet intertwined legacies of Reconstruction—Liberation, Violence, Repair, Place, and Belief—to reveal their lasting impact on modern society. It is the story of Frederick Douglass, Frances Ellen Watkins Harper, Hiram Revels, Ida B. Wells, and scores of other Black men and women who reshaped a nation—and of the persistence of white supremacy and the perpetuation of the injustices of slavery continued by other means and codified in state and federal laws. With contributions by leading scholars, and illustrated with 80 images from the exhibition, Make Good the Promises shows how Black Lives Matter, #SayHerName, antiracism, and other current movements for repair find inspiration from the lessons of Reconstruction. It touches on questions critical then and now: What is the meaning of freedom and equality? What does it mean to be an American? Powerful and eye-opening, it is a reminder that history is far from past; it lives within each of us and shapes our world and who we are.

The April 2021 edition of the Fiscal Monitor focuses on tailoring fiscal responses to the COVID-19 pandemic and adopting policies to reduce inequality and gaps

By all indicators, the reproductive health of Americans has been deteriorating since 1980. Our nation is troubled by rates

of teen pregnancies and newborn deaths that are worse than almost all others in the Western world. *Science and Babies* is a straightforward presentation of the major reproductive issues we face that suggests answers for the public. The book discusses how the clash of opinions on sex and family planning prevents us from making a national commitment to reproductive health; why people in the United States have fewer contraceptive choices than those in many other countries; what we need to do to improve social and medical services for teens and people living in poverty; how couples should "shop" for a fertility service and make consumer-wise decisions; and what we can expect in the future--featuring interesting accounts of potential scientific advances.

In the nineteenth century some scientists argued that women should not be educated because thinking would use energy needed by the uterus for reproduction. The proof? Educated women had a lower birth rate. Today's researchers can only shake their heads at such reasoning. Yet professional journals and the popular press are increasingly criticizing medical research for ignoring women's health issues. *Women and Health Research* examines the facts behind the public's perceptions about women participating as subjects in medical research. With the goal of increasing researchers' awareness of this important topic, the book explores issues related to maintaining justice (in its ethical sense) in clinical studies. Leading experts present general principles for the ethical conduct of research on women--principles that are especially important in the light of recent changes in federal policy on the inclusion of women in clinical research. *Women and Health Research* documents the historical shift from a paternalistic approach by researchers toward women and a disproportionate reliance on certain groups for research to one that emphasizes proper access for women as subjects in clinical studies in order to ensure that women receive the benefits of research. The book addresses present-day challenges to equity in four areas: **Scientific**--Do practical aspects of scientific research work at cross-purposes to gender equity? Focusing on drug trials, the authors identify rationales for excluding people from research based on demographics. **Social and Ethical**--The authors offer compelling discussions on subjectivity in science, the evidence for male bias, and issues related to race and ethnicity, as well as the recruitment, retention, and protection of research participants. **Legal**--*Women and Health Research* reviews federal research policies that affect the inclusion of women and evaluates the basis for researchers' fears about liability, citing court cases. **Risk**--The authors focus on risks to reproduction and offspring in clinical drug trials, exploring how risks can be identified for study participants, who should make the assessment of risk and benefit for participation in a clinical study, and how legal implications could be addressed. This landmark study will be of immediate use to the research community, policymakers, women's health advocates, attorneys, and individuals.

The past 25 years have seen a major paradigm shift in the field of violence prevention, from the assumption that violence is inevitable to the recognition that violence is preventable. Part of this shift has occurred in thinking about why violence occurs, and where intervention points might lie. In exploring the occurrence of violence, researchers have recognized the tendency for violent acts to cluster, to spread from place to place, and to mutate from one type to another. Furthermore, violent acts are often preceded or followed by other violent acts. In the field of public health, such a process has also been seen in the infectious disease model, in which an agent or vector initiates a specific biological pathway leading to symptoms of disease and infectivity. The agent transmits from individual to individual, and levels of the disease in the population above the baseline constitute an epidemic. Although violence does not have a readily observable biological agent as an initiator, it can follow similar epidemiological pathways. On April 30-May 1, 2012, the Institute of Medicine (IOM) Forum on Global Violence Prevention convened a workshop to explore the contagious nature of violence. Part of the Forum's mandate is to engage in multisectoral, multidirectional dialogue that explores crosscutting, evidence-based approaches to violence prevention, and the Forum has convened four workshops to this point exploring various elements of violence prevention. The workshops are designed to examine such approaches from multiple perspectives and at multiple levels of society. In particular, the workshop on the contagion of violence focused on exploring the epidemiology of the contagion, describing possible processes and mechanisms by which violence is transmitted, examining how contextual factors mitigate or exacerbate the issue. *Contagion of Violence: Workshop Summary* covers the major topics that arose during the 2-day workshop. It is organized by important elements of the infectious disease model so as to present the contagion of violence in a larger context and in a more compelling and comprehensive way.

Extensive reading improves fluency and there is a real need in the ELT classroom for contemporary graded material that will stimulate students. Our *Hidden Figures* reader is based on the 2016 nonfiction book written by Margot Lee Shetterly called *Hidden Figures: The American Dream and the Untold Story of the Black Women Who Helped Win the Space Race*. It is 50 years since man first walked on the moon, and this untold story of the women behind it makes for an appealing reader for older teenagers.

Health and Behavior reviews our improved understanding of the complex interplay among biological, psychological, and social influences and explores findings suggested by recent research--including interventions at multiple levels that we can employ to improve human health. The book covers three main areas: What do biological, behavioral, and social sciences contribute to our understanding of health--including cardiovascular, immune system and brain functioning, behaviors that influence health, the role of social networks and socioeconomic status, and more. What can we learn from applied research on interventions to improve the health of individuals, families, communities, organizations, and larger populations? How can we expeditiously translate research findings into application?

THE TIMES '100 BEST SUMMER READS' NEW YORK TIMES TOP 10 BESTSELLER LONGLISTED FOR THE WOMEN'S PRIZE 2020 'Sublime' Candice Carty-Williams 'An epic in miniature' Tayari Jones 'A banger' Ta-Nehisi Coates 'Generous and big-hearted' Brit Bennett 'A true spell of a book' Ocean Vuong 'A proclamation' R.O. Kwon 'A little masterpiece' Paula Hawkins 'I adored this book' Elizabeth MacNeal 'Pure poetry' Observer 'A sharply focused gem' Sunday Times 'Will remind you why you love reading' Stylist 'Haunting' Guardian 'A wonderful, tragic, inspiring story'

Metro 'Prose that sings off the page... Gorgeous' Mail on Sunday 'A nuanced portrait of shifting family relationships' Financial Times 'As seductive as a Prince bop' O, The Oprah Magazine 'Razor-sharp' Vanity Fair 'Dazzling... With urgent, vital insights into questions of class, gender, race, history, queerness and sex' New York Times An unexpected teenage pregnancy brings together two families from different social classes, and exposes the private hopes, disappointments and longings that can bind or divide us. From the New York Times-bestselling and National Book Award-winning author of *Another Brooklyn* and *Brown Girl Dreaming*. Brooklyn, 2001. It is the evening of sixteen-year-old Melody's coming of age ceremony in her grandparents' brownstone. Watched lovingly by her relatives and friends, making her entrance to the music of Prince, she wears a special custom-made dress - the very same dress that was sewn for a different wearer, Melody's mother, for a celebration that ultimately never took place. Unfurling the history of Melody's family - from the 1921 Tulsa race massacre to post 9/11 New York - *Red at the Bone* explores sexual desire, identity, class, and the life-altering facts of parenthood, as it looks at the ways in which young people must so often make fateful decisions about their lives before they have even begun to figure out who they are and what they want to be. *** ONE OF THE BOOKS OF THE YEAR FOR: New York Times; Washington Post; Time; USA Today; O, The Oprah Magazine; Elle; Good Housekeeping; Esquire; NPR; New York Public Library; Library Journal; Kirkus; BookRiot; She Reads; The Undeclared ***

Stewart A. Baker, a former Homeland Security official, examines the technologies we love—jet travel, computer networks, and biotech—and finds that they are likely to empower new forms of terrorism unless we change our current course a few degrees and overcome resistance to change from business, foreign governments, and privacy advocates. He draws on his Homeland Security experience to show how that was done in the case of jet travel and border security but concludes that heading off disasters in computer networks and biotech will require a hardheaded recognition that privacy must sometimes yield to security, especially as technology changes the risks to both.

A futuristic action-adventure novel, has been an underground bestseller for more than four decades. It chronicles a future America wracked by government oppression, revolutionary violence, and guerrilla war.

“A fascinating portrait of Clarence Darrow as we’ve never seen him before” from the author of the bestselling book and hit HBO series *Boardwalk Empire* (Terence Winter, creator & executive producer, *Boardwalk Empire*). Clarence Darrow is the most celebrated criminal trial lawyer in American history. In the Spring of 1911, organized labor implored Darrow to represent the McNamara brothers, two union iron workers charged with the murder of twenty employees arising out of the bombing of the Los Angeles Times building. Darrow and his wife Ruby’s trip west quickly became a fight for survival. After Darrow negotiated a plea bargain for the McNamaras with the help of the brilliant journalist Lincoln Steffens, Darrow was indicted for attempted bribery of a juror. But for the representation of a charismatic, flamboyant, and troubled genius, California criminal attorney Earl Rogers, Darrow’s career might have ended that year in Los Angeles. The two trials were front-page national news in their day, and then lost to history. Nelson Johnson has brought this two-year episode to life with a cast of memorable characters based upon his study of the 8,500-plus page trial transcript plus many published and unpublished sources (including Ruby’s letters to Darrow’s biographer Irving Stone). *Darrow’s Nightmare* is a true story unlike any other—a historical courtroom thriller brought to life.

Cancer ranks second only to heart disease as a leading cause of death in the United States, making it a tremendous burden in years of life lost, patient suffering, and economic costs. *Fulfilling the Potential for Cancer Prevention and Early Detection* reviews the proof that we can dramatically reduce cancer rates. The National Cancer Policy Board, part of the Institute of Medicine, outlines a national strategy to realize the promise of cancer prevention and early detection, including specific and wide-ranging recommendations. Offering a wealth of information and directly addressing major controversies, the book includes:

- A detailed look at how significantly cancer could be reduced through lifestyle changes, evaluating approaches used to alter eating, smoking, and exercise habits.
- An analysis of the intuitive notion that screening for cancer leads to improved health outcomes, including a discussion of screening methods, potential risks, and current recommendations.
- An examination of cancer prevention and control opportunities in primary health care delivery settings, including a review of interventions aimed at improving provider performance.
- Reviews of professional education and training programs, research trends and opportunities, and federal programs that support cancer prevention and early detection.

This in-depth volume will be of interest to policy analysts, cancer and public health specialists, health care administrators and providers, researchers, insurers, medical journalists, and patient advocates. This book provides an evaluation of measures to reduce exposure to highly toxic and carcinogenic contaminants in staple diets in Africa as well as parts of Asia and Latin America. Many of the poorest people in these regions are exposed to the pervasive natural toxins, aflatoxins and fumonisins, on a daily basis by eating their staple diet of groundnuts, maize, and other cereals. Exposure to mycotoxins at these high levels substantially increases mortality and morbidity. Aflatoxins are a cause of human liver cancer, and fatalities from acute aflatoxin poisoning outbreaks occur in Africa and Asia. The International Agency for Research on Cancer convened a Working Group of world-leading experts to review the health effects of aflatoxins and fumonisins and to evaluate intervention measures. The panel concluded that these mycotoxins not only are a cause of acute poisoning and cancer but also are a likely contributor to the high levels of stunting in children in affected populations. The Working Group also identified effective measures to reduce exposure in developing countries. The panel evaluated 15 interventions, considering the strength of the evidence as well as its completeness and its transferability at an individual, community, or national level. Four of the interventions were judged to be ready for implementation: improvement of dietary diversity; crop sorting; post-harvest measures, including improved storage; and, in Latin America for maize, optimized nixtamalization. These recommendations would be relevant for investment of public, nongovernmental organization, and private funds at the scale of the subsistence farmer, the smallholder, and through to a more advanced value chain.

Richard Stonley has all but vanished from history, but to his contemporaries he would have been an enviable figure. A clerk of the Exchequer for more than four decades under Mary Tudor and Elizabeth I, he rose from obscure origins to a life of opulence; his job, a secure bureaucratic post with a guaranteed income, was the kind of which many men dreamed. Vast sums of money passed through his hands, some of which he used to engage in moneylending and land speculation. He also bought books, lots of them, amassing one of the largest libraries in early modern London. In 1597, all of this was brought to a halt when Stonley, aged around seventy-seven, was incarcerated in the Fleet Prison, convicted of embezzling the spectacular sum of £13,000 from the Exchequer. His property was sold off, and an inventory was made of his house on Aldersgate Street. This provides our most detailed guide to his lost library. By chance, we also have three handwritten volumes of accounts, in which he earlier itemized his spending on food, clothing, travel, and books. It is here that we learn that on June 12, 1593, he bought "the Venus & Adhony per Shaksper"—the earliest known record of a purchase of Shakespeare's first publication. In *Shakespeare's First Reader*, Jason Scott-Warren sets Stonley's journals and inventories of goods alongside a wealth of archival evidence to put his life and library back together again. He shows how Stonley's books were integral to the material worlds he inhabited and the social networks he formed with communities of merchants, printers, recusants, and spies. Through a combination of book history and biography, *Shakespeare's First Reader* provides a compelling "bio-bibliography"—the story of how one early modern gentleman lived in and through his library.

NOIR is a two-part White Paper, written by David L. Charney, M.D., a psychiatrist who had the unique experience of interviewing former FBI counterintelligence officer Robert Hanssen in jail, weekly, for approximately two hours per visit, for a year. Dr. Charney did the same with two other incarcerated insider spies: Earl Pitts (former FBI Special Agent revealed as a KGB spy), and Brian Regan (former Air Force/NRO). Dr. Charney's interest was to better understand the minds of spies for the sake of strengthening our national security. Over the eighteen years of his work with these cases, Dr. Charney developed a greater understanding of insider spy psychology and formulated new approaches and fresh proposals for better managing the problem of insider spies. Dr. Charney's first paper, "True Psychology of the Insider Spy," Part One of his two-part White Paper on insider spies, was published in late 2010 in the AFIO *Intelligencer*. This paper can be viewed on the NCIX (National Counterintelligence Executive) website. Most Insider Threat management initiatives have been technology driven. While clever and useful up to a point, they are subject to the Law of Diminishing Returns and can backfire by creating a negative, distrustful workplace atmosphere. A well-motivated insider can defeat nearly any technology-based system. They will always find a way. By contrast, Dr. Charney's NOIR proposals center on the minds of potential or current insider threats: their psychologies and their inner worlds. The battle must be won there. NOIR focuses on "classic" state-sponsored espionage. However, many of its points are applicable for dealing with Snowden-type threats. NOIR for USA is a 501(c)3 entity to educate the US Intelligence Community, other government components, including the Congress, the courts, responsible journalists, and the general public, about the NOIR concepts and proposals. Dr. Charney and his colleagues at NOIR for USA would appreciate any comments, criticisms, or additional thoughts you may have about NOIR concepts and proposals: Contact@NOIR4USA.org

In the United States, some populations suffer from far greater disparities in health than others. Those disparities are caused not only by fundamental differences in health status across segments of the population, but also because of inequities in factors that impact health status, so-called determinants of health. Only part of an individual's health status depends on his or her behavior and choice; community-wide problems like poverty, unemployment, poor education, inadequate housing, poor public transportation, interpersonal violence, and decaying neighborhoods also contribute to health inequities, as well as the historic and ongoing interplay of structures, policies, and norms that shape lives. When these factors are not optimal in a community, it does not mean they are intractable: such inequities can be mitigated by social policies that can shape health in powerful ways. *Communities in Action: Pathways to Health Equity* seeks to delineate the causes of and the solutions to health inequities in the United States. This report focuses on what communities can do to promote health equity, what actions are needed by the many and varied stakeholders that are part of communities or support them, as well as the root causes and structural barriers that need to be overcome.

The papers published in this volume are based on an IMF seminar held in 2000 that covered a broad range of topics on monetary and financial law, such as the liberalization of capital movements, data dissemination, responsibilities of central banks, and the IMF's goals in financial surveillance and architecture. Participants addressed recent issues in the financial sector, including those related to payment systems and supervision of financial institutions. Updates dealt with Internet banking, bank secrecy, and currency arrangements-including dollarization. Participants discussed the recent activities of the other international financial institutions, which included the European Central Bank and the International Finance Corporation. Prevention of financial crises was also discussed, with reference to the distinct roles of the IMF and the private sector.

Pharmaceutical companies, academic researchers, and government agencies such as the Food and Drug Administration and the National Institutes of Health all possess large quantities of clinical research data. If these data were shared more widely within and across sectors, the resulting research advances derived from data pooling and analysis could improve public health, enhance patient safety, and spur drug development. Data sharing can also increase public trust in clinical trials and conclusions derived from them by lending transparency to the clinical research process. Much of this information, however, is never shared. Retention of clinical research data by investigators and within organizations may represent lost opportunities in biomedical research. Despite the potential benefits that could be accrued from pooling and analysis of shared data, barriers to data sharing faced by researchers in industry include concerns about data mining, erroneous secondary analyses of data, and unwarranted litigation, as well as a desire to protect confidential commercial information. Academic partners face significant cultural barriers to sharing data and participating in longer term collaborative efforts that stem from a desire to protect intellectual autonomy and a career advancement system built on priority of publication and citation requirements. Some barriers, like the need to protect patient privacy, present challenges for both sectors. Looking ahead, there are also a number of technical challenges to be faced in analyzing potentially large and heterogeneous datasets. This public workshop focused on strategies to facilitate sharing of clinical research data in order to advance scientific knowledge and public health. While the workshop focused on sharing of data from preplanned interventional studies of human subjects, models and projects involving sharing of other clinical data types were considered to the extent that they provided lessons learned and best practices. The workshop objectives were to examine the benefits of sharing of clinical research data from all sectors and among these sectors, including, for example: benefits to the research and development enterprise and benefits to the analysis of safety and efficacy. *Sharing Clinical Research Data: Workshop Summary* identifies barriers and challenges to sharing clinical

research data, explores strategies to address these barriers and challenges, including identifying priority actions and "low-hanging fruit" opportunities, and discusses strategies for using these potentially large datasets to facilitate scientific and public health advances.

[Copyright: 20e013c96bb9feac91094cfed83d66ff](#)