The Center for Urban Responses to Environmental Stressors Announces 2019 Request for Pilot Project Proposals

What is CURES?

The Center for Urban Responses to Environmental Stressors (CURES) is a National Institute of Environmental Health Sciences (NIEHS)-funded P30 Core Center whose mission is to provide leadership and programs that, in collaboration with the community and environmental policy makers, identify, evaluate, and mitigate environmental health concerns. CURES is an active partner in the collective goal of creating a healthier Detroit.

CURES is focused on understanding how chemical and non-chemical stressors in the urban environment affect the health and well-being of Detroiter, especially vulnerable populations. Detroit is encumbered with an overabundance of industrial and post-industrial environmental toxicants, socioeconomic strains, physical and emotional stressors, and housing decay. Identifying hazards and enhancing our understanding of how they impact our health is key to devising effective prevention and remediation efforts. CURES is strategically designed to facilitate translational transdisciplinary team research focused on: (1) exposure to chemical and non-chemical stressors that are prevalent in the urban industrialized environment, (2) the experiences of people who are particularly vulnerable to adverse effects of such exposures (e.g., children, older adults, ethnic and racial minorities, immigrants and refugees), and (3) linking such environmental exposures to public health in our Detroit community.

The overall goals of CURES are to (1) develop and strengthen partnerships between CURES and the Detroit community; (2) in collaboration with our partners, identify key environmental threats to Detroit’s vulnerable populations; (3) conduct highly integrated mechanistic, epidemiological, and community-engaged research addressing the impact of urban environmental exposures on health; (4) build CURES’ capacity to accomplish these goals by providing facility cores that are optimized to meet the needs of investigators and “seed funds” for pilot projects to explore the feasibility of new areas of study; and (5) enhance the impact of CURES on the field of environmental health science by mentoring new and mid-career investigators, supporting their professional goals, and preparing them for leadership in environmental health research.

What is the purpose of this RFA?

The primary goal of the CURES Pilot Project Program is to develop research capacity and expertise to address research priorities that are informed by our Community Advisory Board (CAB) and that generate results that lead to substantial extramural funding, particularly from NIEHS.

This RFA seeks applications for research projects focused on understanding or mitigating the deleterious effects of environmental stressors on human health. Based on input from the CAB, applications for pilot projects are especially encouraged in the following areas: (1) air pollution, (2) water quality, and (3) the combined effects of chemical and non-chemical stressors on health.
Time Line

<table>
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<tr>
<th>Date</th>
<th>Event</th>
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<tbody>
<tr>
<td>May 8-10, 2019</td>
<td>Informational Meetings: Potential applicants are invited to attend one of these meetings to learn more about the CURES Pilot Project Program. Wednesday, May 8, 10:00 – 11:00 AM: WSU School of Medicine, Mazurek Educational Commons, 320 E. Canfield, Room 241. Thursday, May 9, 1:00 – 2:00 PM: WSU Office of the Vice President for Research, 5057 Woodward Avenue, 6th floor, Conference Room A. Friday, May 10, 12:00 – 1:00 PM: Integrative Biosciences Center (IBio), 6135 Woodward Avenue, Seminar Room 1D. Parking will be available in the IBio visitor's lot, off Burroughs.</td>
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<tr>
<td>June 5, 2019</td>
<td>Letters of intent (LOI) due by midnight</td>
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<td>~June 25, 2019</td>
<td>Notification of successful LOIs and invitation to submit proposal</td>
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<tr>
<td>August 7, 2019</td>
<td>Full applications due by midnight</td>
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<tr>
<td>~September 4, 2019</td>
<td>Announcement of awards; funding will begin as soon as possible afterward</td>
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Submission of Information

Submit Letters of Intent (LOI) in a single PDF as an e-mail attachment to:

Christina Cowen, MA, LLPC
Administrative Assistant
Office of the Vice President for Research
Division of Research
Institute of Environmental Health Sciences (IEHS)
Center for Urban Response to Environmental Stressors (CURES)
Phone: (313) 577-6590
mzchris@wayne.edu

Questions

If you have questions about CURES and this RFA, please contact:

Dr. Thomas A. Kocarek
Leader, CURES Pilot Project Program
Phone (313) 577-6580
t.kocarek@wayne.edu

or

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Director, CURES
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What is the theme of this RFA?

This RFA invites applications for research projects focused on understanding or mitigating the adverse effects of environmental stressors on human health. Based on input from the CURES Community Advisory Board, this RFA particularly encourages applications for pilot projects that address: (1) air pollution, (2) water quality, and (3) the combined effects of chemical and non-chemical stressors on health.

❖ **Air pollution and health:** Detroits are exposed frequently to unhealthy levels of air pollution, more so in particular neighborhoods. Citizens are justly concerned about the cumulative long-term adverse impacts of both indoor and outdoor air pollution on health, including asthma, cancer, and poor child development. Toxicants of concern include volatile organic compounds and air-borne particulates that can include toxic metals. Some high-risk neighborhoods of interest include Southwest Detroit and downriver communities.

❖ **Water quality and health:** The Flint water crisis demonstrated dramatically how a shock to an aging urban water system can lead to a public health disaster. Detroits are rightly concerned about toxic chemicals in their water (e.g., lead and other toxic metals, per- and polyfluoroalkyl substances [PFAS], disinfectant by-products, discharges from hazardous waste sites and processing facilities) and how these toxicants may be affecting health.

❖ **Combined effects of chemical and non-chemical stressors on health:** People are exposed to complex combinations of chemical pollutants as well as a host of non-chemical stressors associated with the “built environment” (e.g., factors compromising mobility, access to public transportation, recreational opportunities, housing quality, school safety), economic and social environment (e.g., low socioeconomic status, interpersonal relationships, violence), and food availability (e.g., access to safe, nutritious food). Projects that consider combinations of stressors are encouraged (e.g., how does healthy food access impact outcomes in lead-impacted children?).

➢ While this RFA encourages applications in the above areas, acceptable projects are not limited to those topics. Applicants must provide a compelling justification for the selected topic, both in terms of the importance of the environmental health problem to Detroit and the likelihood that the project will have a major impact in addressing the problem. Projects aligned with the NIEHS strategic plan ([https://www.niehs.nih.gov/about/strategicplan/index.cfm](https://www.niehs.nih.gov/about/strategicplan/index.cfm)) or for which there is a relevant NIEHS Grant Opportunity ([https://www.niehs.nih.gov/funding/grants/announcements/index.cfm](https://www.niehs.nih.gov/funding/grants/announcements/index.cfm)) are welcome. For example, the impact of environmental exposures during life windows of heightened susceptibility on disease development later in life is a priority area at NIEHS.

➢ Proposed studies must be research projects with high potential to yield peer-reviewed publications in high-impact journals and high likelihood of being developed into larger, longer-term projects supported by extramural funding, preferably from NIEHS. An absolute expectation is that pilot project recipients will publish their findings (citing CURES in the publications) and submit research grant applications for extramural funding (preferably NIEHS) based on their projects.

➢ CURES is committed to performing research relevant to the community. While this RFA welcomes all types of research activity (e.g., mechanistic, population-based, clinical health studies), proposals that include partnerships with community members are always encouraged. Also, environmental health disparities and environmental justice are themes of importance to the CURES mission of community engagement, and proposals that address these themes are always encouraged.

➢ Projects that utilize geographic information systems (GIS) approaches to study potential linkages between environmental exposures and adverse health effects are encouraged, as are projects that investigate remediation or intervention strategies (e.g., green infrastructure, policy change) to address environmental problems facing the community.

➢ Projects that involve interdisciplinary collaborations and team science are always encouraged.
A list of previously funded CURES pilot projects can be found at the following link: http://cures.wayne.edu/research/pilot-projects.php

What are the terms of this RFA?

1. **Number of awards**: CURES plans to fund up to 5 pilot projects.

2. **Funding time and amount**: Each pilot project will be funded for ~1.6 years at up to $65,000 in direct costs. No funds will be allocated for administrative and facility costs (indirect costs). Successful applicants will receive up to $30,000 as soon as they have completed all pre-award requirements (described below), expected to occur in September 2019. **This first installment must be expended by March 31, 2020.** On approximately April 1, 2020, upon demonstration of satisfactory progress, the projects will receive the remainder of the award. **Awarded funds must be expended by March 31, 2021. There is no possibility for no-cost extension or “carry-over.”** Contingent on availability of funds, it is envisioned that pilot project recipients may have an opportunity to apply to CURES for additional funds (estimated up to $25,000) to continue projects to complete work considered to be essential for preparing a successful NIEHS grant application. Awarding of any additional funds will be strictly contingent on availability, tangible progress on the pilot project, as demonstrated by publication of pilot project findings and/or submission of a research grant application(s) to an extramural funding agency (preferably NIEHS).

3. **Eligibility**: Eligible applicants include all current CURES members as well as non-CURES members at Wayne State University and Henry Ford Health System who declare their willingness to join CURES and abide by its policies. Each pilot project must have a PI with faculty or other appointment that would enable him/her to submit an extramural research grant application as a PI. Additional participants (e.g., MPIs [multiple principal investigators], co-investigators, collaborators, consultants) who will strengthen the project are encouraged. A community member may serve as an MPI (together with another investigator who meets the above-described criteria for PI), co-investigator, or collaborator on a project. **A list of current CURES members can be found on the CURES website:** http://cures.wayne.edu.

A table of the CURES Community Advisory Board (CAB) members with brief descriptions of their organizations is provided at the end of this RFA. This is followed by a table summarizing environmental health concerns that were expressed by CAB members in recent surveys. Researchers who would be interested in developing an application in partnership or collaboration with any of these community organizations are encouraged to contact CURES Community Engagement Program Manager Carrie Leach (Phone: 313-664-2612; E-mail: carrieleach@wayne.edu) or CURES Community Engagement Coordinator Brian Smith (Phone: 313-577-5045; E-mail: brian.smith9@wayne.edu).

4. **Requirements:**

1) The proposed research project **must be responsive to this RFA.** It must be a research project that addresses an environmental health problem of concern to the community.

2) The proposed pilot research project **must be of outstanding merit.** There must be high likelihoods that: a) the proposed research project will have a substantial impact in addressing the problem and b) the pilot award will lead to extramural funding (preferably NIEHS).

3) While not required, another characteristic of a responsive application will be inclusion of a “new investigator” (as defined by NIH). This will facilitate the career development mission of CURES. An NIH-defined “new investigator” is a researcher who has not yet been PI on a substantial NIH independent research award, such as an R01 grant. **We anticipate that at least two of the pilot projects to be funded will have a new investigator as PI or MPI.** Highest consideration for these awards will be given to “early stage investigators,” that is, new
investigators who completed their terminal research degree or medical residency – whichever date is later – within the past 10 years.

4) Also, although not required, another very highly desirable characteristic of an application will be the planned use of one or both CURES facility cores: (1) the Integrative Health Sciences Facility Core and (2) the Exposure Signatures Facility Core. These two facility cores are described in detail later in this RFA. The Exposure Signatures Facility Core has some funds available to facilitate access to its services. Applicants contemplating using the facility cores should contact the core leaders early in the process of developing a project.

**What may funds be used for?**

Funds **may** be used as follows:

1. To purchase supplies and reagents. Computers costing less than $5,000 and software fees are allowed.
2. For technical support salaries
3. For incentives for community partners and community research participants

Funds **may not** be used as follows:

1. For salary support of faculty
2. To purchase equipment
3. For travel, except local travel (e.g., mileage for staff collecting data, environmental samples)

**How do I apply?**

**FIRST STEP:** Submit a letter of Intent (LOI) that is no more than 3 pages in length. Do **not** provide a cover letter, either as a separate file or as the first page of the LOI file.

- Page 1 should:
  - State the project’s title.
  - List the PI (or MPIs) and other participants (i.e., co-investigators, collaborators, community partners), their affiliations, roles on the project, and whether they are new or early stage investigators.
  - Provide a paragraph that briefly introduces the proposed project and clearly explains why it is responsive to the RFA, significant, innovative, and likely to have a substantial impact on the field and/or community.
  - State the project’s hypotheses, specific aims, and approaches to be used.
  - Page 1 will be used to identify reviewers for those projects that are selected for submission of full applications.

- Pages 2 and 3 should be used to provide:
  - Additional information about the project that the applicant would like to present; e.g., additional background information, preliminary data, experimental detail.
  - Additional information about participants that the applicant would like to include; e.g., special qualifications. If the project will involve a partnership with a community member or group, the specific role(s) of the community partner(s) should be clearly described.
  - A timeline for the proposed project that includes any need to obtain regulatory approvals (e.g., animal and/or human subjects) as well as the estimated time to perform the study. This will facilitate assessment of the feasibility of performing the study within the ~1.6-year timeframe.
  - An estimate of the total budget and expected use of the funds.
Potential applicants are required to consult with leaders of the Integrative Health Sciences Facility Core and Community Engagement Core to discuss the proposed research team, research design, and community partnership opportunities. This can be achieved by email or in person at the applicant’s discretion. Contact information is provided later in this document.

Potential applicants who plan to use the Exposures Signature Facility Core (ESFC) are required to consult with the leaders of this Core. A project that requires the use of core services provided by the ESFC should use the ESFC for those services unless a strong justification can be provided for using an alternative source outside of CURES. All potential applicants are encouraged to discuss their projects with the ESFC leaders to explore how a proposed project might benefit from those resources, even if potential use of ESFC is not obvious.

LOIs will be reviewed by a committee selected from the CURES program leadership and Community Advisory Board (CAB). The CAB members will be asked specifically to provide their assessment of how well the project addresses an environmental health problem of concern to the community. No LOI that fails to receive this endorsement from a CAB member will be selected for submission of a full application.

In the case of overlapping interests among proposals, CURES may suggest collaboration.

SECOND STEP: Invited investigators submit a full application. Details for preparing full applications will be provided to successful applicants when they are notified of their selection. The format will essentially be that of an NIH R03 application with some additional requirements. Briefly:

a) Cover Page
b) Abstract and Personnel
c) Research Sites
d) Biographical Sketches of key personnel
e) Other Support for PI (or MPIs)
f) Available Resources
g) Budget and Justification
h) Specific Aims (1 page)
i) Research Strategy (6 pages)
   a. Significance
   b. Innovation
   c. Approach (Preliminary Data should be incorporated into this section)
j) References Cited
k) Human, Vertebrate Animal, and Hazardous Materials Assurances of Compliance - Investigators using animals, human subjects, or biohazardous materials in their research must obtain protocol approval from the Institutional Review Board (IRB), Institutional Animal Care and Use Committee (IACUC), and/or Institutional Biosafety Committee (IBC) as applicable, before funds can be spent on activities that require such approval.
l) Plans for submission of research grant applications to external funding agencies, especially NIEHS
   • Applicants are advised to check the Funding Opportunity Announcements (FOAs) on the NIEHS website (www.niehs.nih.gov/funding/grants/announcements/index.cfm) for information about research areas currently being emphasized by NIEHS. Applications that are related to current FOAs may be rated as stronger.
m) Letters of Commitment from all PIs and co-investigators (and any additional community partners who have roles other than MPI or co-investigator).
n) Signatures from the departmental chairs/directors of the PI’s academic units. If you are the departmental chair, your Dean or Vice President should sign.
Pre-award responsibilities. Successful applicants will be required to attend a pre-award meeting with the Pilot Project Program Leader and the OVPR Manager, Research Support, at which awardees will be advised about account establishment and monitoring, the need to expend awarded funds within the specified time periods, and the requirement to acknowledge support received from CURES in any publications or presentations generated under the pilot project award. Necessary IRB, IACUC, and/or IBC approvals must be obtained as soon as practical. It is recommended highly that applications for regulatory approvals be submitted right after the pilot project application is made.

Award-time responsibilities

❖ PIs must cite the CURES Center Grant (P30 ES020957) on all publications that result from the pilot project award.
❖ PIs agree to meet periodically with CURES program leaders to provide updates on their projects, as requested.
❖ PIs agree that they and their project team members will complete periodic surveys from the Integrative Health Sciences Facility Core that are designed to measure several dimensions of the team’s attributes and processes in order to assess effective functioning and identify potential obstacles to success.
❖ PIs must provide written updates on their research progress for annual progress reports and meetings with CURES Advisory Boards.
❖ PIs must present their research findings at one of the CURES Center-wide research meetings.
❖ Pilot project recipients will also be required to present their results at a CURES Community Engagement Core-sponsored event – either a Community Advisory Board meeting or an Environmental Health Forum.

Post-award responsibilities. Upon completion of a project, PIs will be required to submit a report that contains the following information:

❖ A list of any publications (i.e., research articles, review articles, abstracts; submitted, in press, or published) or patents that resulted entirely or in part from the pilot project award.
❖ A list of any grant applications submitted (funded, pending, or non-funded) that resulted from the pilot project award in which the applicant was listed either as PI (or MPI), co-investigator, or other key personnel.
❖ A description of collaborations that developed as a result of the pilot project award.
❖ Because of CURES’ need to track success of the Pilot Project Program as determined by conversion of pilot projects into extramurally funded projects, recipients will be contacted for updated information about publications and grant applications for several years beyond completion of their award.

Pilot project recipients will be expected to submit applications for extramural funding to continue their projects as soon as practical.

Please adhere to the following formatting requirements when preparing LOIs:

• Font: Use an Arial, Helvetica, Palatino Linotype, or Georgia typeface, a black font color, and a font size of 11 points or larger. (A Symbol font may be used to insert Greek letters or special characters; the font size requirement still applies.)
• Type density, including characters and spaces, must be no more than 15 characters per inch. Type may be no more than six lines per inch.
• Use standard paper size (8 ½” x 11).
• Use at least one-half inch margins (top, bottom, left, and right) for all pages.
CURES Facility Cores and Community Engagement Core

1. Integrative Health Sciences Facility Core (IHSFC)
http://cures.wayne.edu/ihsfc.php

Recommended Contact:
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CURES Integrative Health Sciences Research Assistant
Integrative Biosciences Center
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Malcolm Cutchin, PhD
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Samiran Ghosh, PhD
Associate Professor, Family Medicine and Public Health Sciences and Center for Molecular Medicine and Genetics
IBio Building, 6135 Woodward Avenue
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The purpose of the IHSFC is to facilitate the design, development and ethical achievement and dissemination of the translational research goals of the CURES program. The IHSFC aims to support the multidisciplinary collaborative research interest groups in their pursuit of understanding the complex role of chemical and non-chemical stressors as modifiers of human health in the urban environment. The IHSFC accomplishes this objective through 4 integrated core services:

1. Methodological Design and Biostatistics – Consultation support for environmental health science investigations focused, but not limited to, human subjects, human samples, human populations, and general study design and data analysis plans. Advice on design and analyses is best sought early in developing a project. This is done via four mechanisms: a) Statistical consultation on pilot grant applications to and funded by CURES, b) Experimental design consultation on pilot grant applications to and funded by CURES, including but not limited to issues pertaining to IRB, IACUC, biohazards, and translational GLP, c) Biostatistics methods development in research pertaining to environmental health, and d) Biostatistical education for CURES members and for the university at large. The IHSFC collaborates with the CURES Career Development and Pilot Project Programs to facilitate research progress (from pilot projects to K awards and R21 applications, and to covert R03 and R21 awards to R/U/P01 applications).

2. Health Models Development – Integrating exposure assessment with human health impact. Helping research teams to select the appropriate models to capture windows of heightened susceptibility to environmental contaminant exposure, the health impact of chronic low-level
exposure to toxicants, exposure to complex mixtures of toxicants. (e.g., animal models, stem cell models, primary animal or human cell culture models, access to specialized tissue banks such as the Michigan Neonatal Biobank).

3. *Ethics and Research Integrity in Environmental Health Science* – The protection and ethical treatment of patient subjects and samples is of paramount importance. These concerns expand and are integrated into our experimental design to acknowledge and address the appropriateness of certain levels of analysis that might have immediate or future implications for the safety and rights of an individual. The requirement for discussion of the propriety of proposed clinical translation studies serves not only to ensure the integrity of CURES’ research endeavors but is an opportunity for career development of CURES program researchers. This topic will also cover emerging research ethics concerns with the expansion of “big data,” EMR, human biospecimens, stem cell models, and geospatial analysis in environmental health research.

4. *Team Science Consultation* – Improving team development, integration, and implementation. Work with teams to identify the right players for their science. Help teams find ways to cohere and realize addressable issues before they become problems; and find ways to maximize collaboration and transdisciplinary insights. Suggest team processes to avoid pitfalls and deal with difficulties, such as conflict or leadership challenges. Primary goals are to enhance team effectiveness through evaluation and consultation, which may also include training or coaching.

5. *Bridging the Communication Gap* – Integrating the Effectiveness of Research and Community Partnerships. Work closely with the Community Engagement Core to identify community partners for appropriate CURES research teams. Cross-train CURES researchers and community members to communicate topic-relevant data, research goals, and likely achievements in a responsible manner. Enhance and initiate national and global initiatives to educate and advance research consistent with the mission of the NIEHS.

2. **Exposure Signatures Facility Core (ESFC)**

http://cures.wayne.edu/esfc.php

**Leaders:**

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“**Exposure Signatures**” include direct measurement of toxicants as well as the quantifiable responses of a biological system to an environmental stressor. The ESFC partners with established Core Facilities to provide essential analytical services for Center Investigators. These partners are: (1) the Applied Genomics Technology Center, (2) The Proteomics Core, (3) The Lumigen Instrument Center, (4) The Microscopy, Imaging & Cytometry Resources (*MICR*) Flow Cytometry Lab, (5)
Cytokine Analysis, and (6) The Michigan State University Molecular Metabolism and Disease Mass Spectrometry Core (MMDMSC). Support is available to develop novel analytical procedures and to utilize Core Services by Center investigators.

1. **Genomic Services** – A full range of genome, transcriptome and epigenome analysis services are available to CURES Investigators through the Applied Genomics Technology Center at WSU. 10X Genomics and Fluidigm instruments for single cell RNA sequencing (scRNA-seq) and single-cell Assay for Transposase Accessible Chromatin with high-throughput sequencing (scATAC-seq) have been purchased and are being used for CURES projects. The purchases were in response to a CURES facility core usage survey that polled Center members’ current and anticipated research needs. The instruments take exposure science technology to the single cell level. They use alternatives to traditional flow cytometry, utilizing microfluidics to separate single cells from test specimens in order to prepare libraries for RNA-seq or other types of genomic analyses. For example, using either System, mixed populations of neurons and astrocytes can be analyzed at the single cell level with high resolution. This enables the detection of dramatic variations in gene expression that occur because of toxicant exposure. In 2019, we purchased and installed a NovaSeq6000 DNA sequencing instrument that can sequence over 5 trillion bases (~10 human genomes at 100X coverage) per run. The purchase state-of-the-art instrument, which is needed based on anticipated demands for human genome sequencing and single-cell sequencing, makes the Genomic Core capabilities one of best in the country.

2. **Proteomics including Protein Adducts** – Proteomic analyses are available through the Proteomics Core at WSU. A full range of mass spectrometry-based standard proteomic services are supported. In addition, the ESFC uses advanced proteomics technologies to identify and quantify protein adducts that occur as a consequence of environmental toxicant exposure. CURES researchers have detected adducts on serum albumin and hemoglobin; the two most abundant proteins in blood that act as buffers for reactive chemical intermediates. Analysis of adducts on albumin and hemoglobin can provide information on environmental exposures occurring as long as 60 to 90 days prior to sample collection.

3. **Metals, Trace Element and Small Molecule Analysis** – The ESFC partners with the WSU Lumigen Instrument Center for elemental and small molecule analysis. New instrumentation includes state-of-the-art GC-MS/MS and LC-MS/MS systems for small molecule analysis that were added in 2016. The new system is being used to develop analytical methods for phenolic chemicals such as bisphenol A, octyl- and nonylphenols that are widespread environmental toxicants. These analytical platforms are being used by CURES members to develop reproducible analytical methods for environmental exposure analysis. Volatile organic chemicals (VOCs) can also be analyzed and are among a wide range of environmental small molecules, including solvents, fuel components and chemical intermediates of interest to Center investigators. Dr. Westrick of the ESFC was recently awarded an Erb Foundation grant to design and evaluate a real-time VOC source-water early-warning system for drinking water treatment plants.

4. **Immunophenotyping Services and Instrumentation** – Technologies and services available to CURES investigators through partnership with the MICR Core include imaging cytometry (Amnis ImageStreamX Mark II), analytical flow cytometry (BD LSRII SORP, BD FACSCanto II), and cell sorting (Sony SY3200, two Sony SH800s). The newest technology that was added in 2016 is an imaging flow system that provides subcellular localization of fluorescently tagged cellular components using a flow cytometry system.

5. **Cytokine Analysis** – The complex interactions of toxicants and other stressors have become an important consideration in our studies. CURES’ research capacity for radio-immuno assays, plate-conjugated, enzyme-linked immunosorbent assays (ELISA), and a bead-based ELISA
platform from Perkin Elmer called AlphaLISA has been expanded. AlphaLISA provides sensitivity that is less than radio-immuno assays but greater than ELISA. Analytes will be added to the set of validated assays as CURES investigators identify key mediators of stress or potential exposure signatures among the signaling molecules.

6. **Untargeted Lipidomic Analysis** – The Molecular Metabolism and Disease Mass Spectrometry Core at Michigan State University (MMDMSC) led by Dr. Todd Lydic has been recruited by the CURES ESFC to provide lipidomic analysis. CURES investigators now have access to untargeted shotgun MS/MS approaches to quantify several hundred to a few thousand lipids as potential novel exposure signatures. This is an extremely innovative and powerful approach to exposome analysis that will be increasingly important as environmental health research incorporates nonchemical stressors into models of toxicity and health effects of chemical exposures. Also, by utilizing Orbitrap MS systems and MSn capability in the same analytical run for in-depth structural elucidation, the ESFC can significantly reduce the required sample size and analytical time for deep lipidomic profiling. The use of high-resolution/accurate-mass MS for lipid and metabolite feature detection enables virtually endless mining of acquired MS datasets by accurate mass-based searches of multiple databases as new compounds of interest are identified.

### 3. Community Engagement Core (COEC)

http://cures.wayne.edu/community-engagement.php

**Recommended Contacts:**

Carrie Leach  
CURES Community Engagement Program Manager  
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**Leaders:**

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### CURES Community Advisory Board (CAB) Members and Their Organizations

<table>
<thead>
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<th>Organization and CAB Member</th>
<th>Description</th>
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| **American Indian Health & Family Services**  
Ashley Tuomi, DHSc; Executive Director | AIHFS is a nonprofit health center serving the Native American community of Southeastern Michigan. Their mission is to empower and enhance the physical, spiritual, emotional, and mental wellbeing of American Indian families and other underserved populations in Southeastern Michigan through culturally grounded health and family services. |
| **Asthma & Allergy Foundation of America, MI Chapter**  
Kathleen Slonager, RN, AE-C, CCH; Executive Director | The AAFA is a nonprofit and the leading patient organization for people with asthma and allergies. The Michigan Chapter serves all Michigan residents of all ages affected by asthma and allergies. They provide resources for healthcare professionals, caregivers and childcare providers, and communities to make them better for those with allergies and asthma. |
| **City of Detroit Office of Sustainability**  
Whitney Smith, Project Manager | The Office of Sustainability's mission is to create healthy, green, vibrant, accessible neighborhoods where all Detroiters can contribute and benefit through (1) collaboration between City departments and agencies; (2) engagement and partnership among the City, citizens, and relevant organizations; (3) and process and policy improvement. |
| **CLEARCorps/Detroit**  
Mary Sue Schottenfels, Executive Director  
Chris Ross, Manager of Communications and Program Development | CLEARCorps/Detroit works to prevent lead poisoning and create healthy homes for children and families through programs, education and outreach, and policy work. Their four main programs are centered around asthma triggers, lead hazards in homes, outdated refrigerator replacement, and furnace tuning/repair/replacement. |
| **Detroit Food Policy Council**  
Winona Bynum, RDN, PMP; Executive Director | The DFPC is an education, advocacy and policy organization led by Detroiters committed to creating a sustainable, local food system that promotes food security, food justice and food sovereignty in the city of Detroit. |
| **Detroit Health Department**  
Joneigh S. Khaldun, MD, MPH, FACEP; Executive Director and Health Officer  
Alex Hill, MA; Food Access and Chronic Disease Prevention Manager | The Detroit Health Department’s mission is to improve the health and quality of life of Detroiters through innovative public health policy, programs and partnerships. They provide a variety of programs and services, to include WIC, immunizations, food safety and restaurant inspection, public health initiatives, and Detroit Animal Care and Control. |
| **Detroiters Working for Environmental Justice**  
Guy Williams, President and CEO; CAB Co-Chair | DWEJ is a nonprofit organization whose mission is to create clean, healthy and thriving communities in Michigan by tackling environmental problems close to home. Their programs are centered around policy, education and workforce development. |
| **Ecology Center**  
Melissa Cooper Sargent: Green Living Resource Director; CAB Co-Chair  
Rebecca Meuninck, Deputy Director | The Ecology Center was organized to develop innovative solutions for healthy people and a healthy planet. They educate consumers and families, push corporations to use clean energy make safe products and provide healthy food, and work with policymakers to establish laws that protect communities and the environment. |
| **Great Lakes Environmental Law Center** | The Great Lakes Environmental Law Center is a Detroit-based nonprofit that offers community education, policy support, and various legal services to address environmental, resource, and energy issues affecting communities in and around Detroit, all over Michigan, and throughout the Great Lakes region. |
| Nicholas Leonard, JD; Staff Attorney |

| **Green Door Initiative** | GDI works to ensure that every person is environmental literate, and capable of practicing and promoting sustainability as a lifestyle. Their programs include workforce development, environmental education and awareness, and land use development. |
| Donele Wilkins, President and CEO |

| **Henry Ford Health System** | HFHS is a network of hospitals, medical centers and one of the nation’s largest group practices. The Henry Ford Medical Group includes 1200+ physicians practicing in 40+ specialties. |
| Kimberlydawn Wisdom, MD, MS; Senior Vice President of Community Health Equity, Chief Wellness Officer |

| **Matrix Human Services** | Matrix advocates for and serves the most vulnerable in the metropolitan Detroit community and empowers individuals and families to enhance the quality of their lives and achieve self-sufficiency. Their larger programs include their network of head start facilities and comprehensive community center on the east side of Detroit. |
| Salina Ali, Quality Associate |

| **Michigan Environmental Council** | The MI Environmental Council is a coalition of more than 70 organizations created to lead Michigan’s environmental movement in achieving positive change through the political process. MEC combines deep environmental policy expertise with close connections to key state and federal decision makers. They promote public policies to ensure Michigan families will enjoy clear waters, clean beaches, beautiful landscapes and healthy communities for years to come. |
| Tina Reynolds, JD; Health Policy Director Sandra Turner-Handy, Community Outreach Director |

| **Neighborhood Service Organization** | Neighborhood Service Organization delivers holistic care and wrap around/safety net services to address social determinants impacting health, education, and economic stability. NSO’s empowering programs and services provide assistance for: older adults with mental illness; children, youth, and adults with developmental disabilities; year-round youth workforce development for youth; homeless recovery services; housing development; community outreach for psychiatric emergencies; call hotline for emergency shelter and housing resources in Detroit; and volunteer opportunities for individuals, groups, and organizations. |
| Shawndia North, Director, Training and Compliance |

| **Office of State Senator Stephanie Chang** | Stephanie Chang (D) serves Michigan Senate District 1, representing parts of Detroit, Ecorse, Gibraltar, Grosse Ile Township, River Rouge, Riverview, Trenton, Woodhaven, Wyandotte, and Brownstown Township. |
| Janlynn Miller, Director of Constituent Relations |

| **Office of US Senator Debbie Stabenow** | Debbie Stabenow (D) is US Senator representing the State of Michigan. |
| Terry Campbell |

| **Physicians for Social Responsibility, WSU Chapter** | PSR has been working for 50+ years to create a healthy, just and peaceful world for present and future generations. They advocate on issues and addressing dangers that threaten communities. The campus chapter is comprised of current WSU MD students. |
| Blake Sanford Alexandra Lemieux |
| **Samaritas** | Samaritas is a social ministry of the Evangelical Lutheran Church in America and has more than 70 programs in 40 cities in the Lower Peninsula. Their larger programs are centered towards children and families, seniors, the disabled, and refugees. |
| Lena Wilson, VP Child and Family Services | |
| **Southwest Detroit Environmental Vision** | SDEV is a nonprofit organization dedicated to improving the environment and strengthening the economy of Southwest Detroit. They work with residents, community organizations, government agencies, schools, businesses and industry to combat environmental issues, including indoor/outdoor air quality, blight, illegal dumping, and incompatible land use. |
| Maggie Striz Calnin, Program Manager, Air Quality Specialist | |
| **The Greening of Detroit** | The Greening of Detroit’s focus is to enhance the quality of life for Detroiter by repurposing the land to create beautiful and productive green spaces. They involve Detroiter in the process through community engagement, education and jobs. |
| Lionel Bradford, President | |
| **Urban Development Corporation** | UDC’s mission is to improve the quality of life and bring about positive lifestyle changing experiences of low to moderate income families who live in urban communities. UDC develops activities and program which promote safe, free, healthy, clean, beautiful and enjoyable environments. Programming includes home rehabilitation, neighborhood cleanups and small business promotion. They work particularly in Detroit’s District 3. |
| Vanessa Peake, CEO | |
| Julius DeBardeleben | |
| **Village of Oakman Manor** | The Village of Oakman Manor is a senior living community in north-central Detroit. They are a part of the Presbyterian Villages of Michigan network. |
| Deborah Beard, Administrator | |
| Dell Stubblefield, Resident | |
| **Wayne Children’s Healthcare Access Program** | WCHAP is a nonprofit organization that works with physicians, Medicaid Health Plans, parents and other community agencies committed to improving the healthcare outcome of Wayne County and Detroit’s children. They provide health education to families, help doctors improve the quality of their care, and act as a voice for issues affecting children’s health. |
| Teresa Holtrop | |
| Lyn Jones, Resident of Detroit and Registered Health Information Technician | |
**Community Advisory Board Environmental Health Concerns**

Some environmental health concerns that have been expressed by some our Community Advisory Board members are provided below. Researchers who would be interested in developing an application addressing any of these concerns in coordination with a Community Advisory Board member are encouraged to contact CURES Community Engagement Program Manager Carrie Leach (Phone: 313-664-2612; E-mail: carrieleach@wayne.edu) or CURES COEC Coordinator Brian Smith (Phone: 313-577-5045; E-mail: brian.smith9@wayne.edu).

<table>
<thead>
<tr>
<th>Community Organization and Contact</th>
<th>Environmental Health Concerns</th>
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<tbody>
<tr>
<td>Michigan Environmental Council</td>
<td>• Lead's impact on older adults</td>
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<tr>
<td>Tina Reynolds</td>
<td>• Drinking water. Is our water safe? What are we exposed to in our drinking water including by-products of disinfectants and what are the risks? Do filters help or do they expose us to increased chance of bacteria?</td>
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<td></td>
<td>• Rental Housing and its impact on health</td>
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<td>• Lead in water risk as compared to paint/soil exposure</td>
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<td></td>
<td>• Safe school siting and impact on health and learning outcomes</td>
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<td>• PFAs testing and risks</td>
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<td></td>
<td>• Impacts of lead exposure early in life to adult health later on</td>
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<td>• Should we leave lead pies in place if not leeching?</td>
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<td>• How to evaluate environmental justice and cumulative impacts in environmental permitting – e.g., how could DEQ have added in other area emission sources when OK'ing steel plant's permit to increase emissions instead of approval in isolation?</td>
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<td>• Does healthy food access improve outcomes in lead impacted kids? By what mechanism?</td>
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<td>Wayne Children’s Healthcare</td>
<td>• The biggest concern that we come across amongst the families referred to us at WCHAP is poor housing, which in turn cause lead poisoning, asthma (via mold, roaches, dust), emotional distress secondary to rats and mice, and obesity secondary to unsafe neighborhoods.</td>
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<td>Access Program</td>
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<tr>
<td>Teresa Holtrop</td>
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<tr>
<td>Lionel Bradford</td>
<td>• My biggest area or concern is climate change. Because of a legacy of past industrial uses, current pollution releases and lead contamination, water, air, and soil qualities in Detroit are poor. Climate change models suggest the problems will likely grow. I would love to see more research around native tree species and other green infrastructure that are most resilient to climate change.</td>
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<tr>
<td>The Greening of Detroit</td>
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<tr>
<td>City of Detroit Health Department</td>
<td>• Healthy food access</td>
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<tr>
<td>Kim Rustem</td>
<td>• Food policy challenges/opportunities; nutrition</td>
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<td></td>
<td>• Asthma</td>
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<td>• SOx/NOx/PM emissions</td>
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<td>• Lead and water</td>
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<td>• Mobility (walkability, bikeability, reliable public transportation)</td>
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<td>• Green workforce development</td>
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<td>• Environmental stressors and violence prevention/mental health</td>
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<td>• Improving recreational opportunities to improve chronic disease</td>
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<tr>
<td>Southwest Detroit</td>
<td>• Air quality/cumulative impacts in Southwest Detroit</td>
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<tr>
<td>Environmental Vision</td>
<td>• Environmental justice</td>
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<tr>
<td>Kathy Stott</td>
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<tr>
<td>Southwest Detroit</td>
<td>• How can we best, quickly get physicians and other health care professionals to share the latest research on environmental stressors to public health with patients/include same in patient treatment plans? Should be visiting them like pharma reps do?</td>
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<td>Environmental Vision</td>
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<td>Maggie Striz Calnin</td>
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<tr>
<td>Village of Oakman Manor</td>
<td>• Environmental influence on violence</td>
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<tr>
<td>Name</td>
<td>Topics</td>
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<td>-------------------------------------------</td>
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<tr>
<td>Deborah Beard</td>
<td>Neighborhood and built environment, Social and community context; economic stability</td>
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<tr>
<td>Asthma &amp; Allergy Foundation of America, Michigan Chapter Kathleen Slonager</td>
<td>Pervasive feeling of helplessness among people who live in areas where the environment is toxic and causing or exacerbating chronic diseases like asthma, Lack of attention to health first when policy is drafted and passed, How our government sets regulations and how well they are enforced</td>
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<tr>
<td>CLEARCorps Detroit Mary Sue Schottenfels</td>
<td>Lead poisoning prevention and asthma mitigation. Both of these areas have devastating impact on the health and well-being of Detroit and Detroit-area children.</td>
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<tr>
<td>CLEAR Corps Detroit Chris Ross</td>
<td>Lead poisoning, Indoor/outdoor asthma triggers, Environmentally sustainable building codes</td>
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<tr>
<td>Matrix Human Services Salina Ali</td>
<td>Asthma – biggest growing issue among our Early and Head Start children; old/young people, long-term effects, Lead effects on old/young people, long-term effects, Recreation – lack of green space for children to exercise and play in city areas</td>
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<tr>
<td>Physicians for Social Responsibility Blake Sanford</td>
<td>Cumulative, long-term impacts of air pollution on health</td>
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<tr>
<td>Green Door Initiative Donele Wilkins</td>
<td>Citizen Science – building community capacity, Documenting variety of environmental exposure points that are connected to community health outcomes in Detroit</td>
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<tr>
<td>Ecology Center Melissa Cooper Sargent</td>
<td>Measuring air quality and pollutants in area around the incinerator, Health effects of the incinerator, Environmental contamination in water due to US Ecology [hazardous waste processing facility], Soil remediation for kitchen/vegetable gardens, Air pollution in Southwest Detroit and downriver</td>
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<tr>
<td>Ecology Center Rebecca Meuninck</td>
<td>Rising rates of elevated blood lead levels in various zip codes in Detroit/Wayne County. Research needed on what is contributing: Demolition? Further deterioration of housing stock? and/or what is the impact of additional testing.</td>
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<tr>
<td>City of Detroit Office of Sustainability Whitney Smith</td>
<td>I would like someone to undertake a feasibility study of shutting down the incinerator. What is the waste diversion stream; what are the financial costs; what are the alternative power sources when waste to energy ends; what are the policy wins that need to set the stage? I would also like to see a study/project about weatherization/home “greening” and the impacts on health.</td>
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