

**ANTI CANCER COUNCIL OF VICTORIA**  
1 Rathdowne Street, Carlton South, 3053  
Victoria Australia

**Facsimile Transfer Information**

**To:** Fax No.: **0011 1 213 206 3566**

**Date:** 8 January 1990

**Addressee:** Ellen Gritz PhD  
Director, Division of Cancer Control  
Johnson Comprehensive Cancer Centre  
700 Glendon Avenue, Suite 711  
Los Angeles CA 90024-3511 USA

No. of pages: 1

**From:** Fax No. 03-663 7809

**Originator:** Dr. Nigel Gray

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Dear Ellen,

I'm very sorry this fax is late. Your letter of 10 December got lost in my mail over Christmas and I have only today come across it.

I am very regretful that I could not send you a contribution for your book of memories in time.

As you may know Joe Cullen and I had a very special relationship which developed from our mutual and serious interests in the international problems of tobacco control. We worked together on a number of projects. In particular, he devoted considerable attention to an Advisory Committee to which we both served for the World Health Organization.

The fact that one of his manoeuvres included the promotion of the idea that I might finish up working for WHO has the classical and special Joe characteristic of organising the system in a way he thought might make it work. This particular project did not actually bear fruit but typifies the way in which I saw him organise.

He also had a deep interest in Australia and our own charitable organisation and visited us several times to help critique our programs. His loss is a great deprivation.

Best wishes.

Yours sincerely,



Nigel Gray  
Director



JONSSON COMPREHENSIVE CANCER CENTER  
 DIVISION OF CANCER CONTROL  
 1100 GLENDON AVE., SUITE 711  
 LOS ANGELES, CALIFORNIA 90024-3511

10 December 1990

(213) 825-3181 (213) 825-2945

Dear Colleagues:

The Division of Cancer Control, Jonsson Comprehensive Cancer Center would welcome your attendance at a Memorial Service for Joseph W. Cullen, Ph.D., the first Deputy Director of the Cancer Center as well as the first Director of our Division. The Memorial will be held in the UCLA Faculty Center, California Room, on Wednesday, 9 January 1991 from 3:00 to 4:30 in the afternoon.

As part of a fitting tribute to Joe, the Division, with the help of others very close to Joe, will be compiling a Book of Memories. We hope to include contributions from individuals who knew Joe both in this country and abroad. Every memory has a special meaning and quality. I would appreciate your sending any anecdotal memories you may have or any thoughts you wish to express in general. I hope to receive your tribute by 28 December 1990, so the Book of Memories can be assembled in time for the Service. Please address or FAX to me as shown below:

Ellen R. Gritz, Ph.D.  
 Director, Division of Cancer Control  
 Jonsson Comprehensive Cancer Center  
 1100 Glendon Ave., Suite 711  
 Los Angeles, CA 90024-3511  
 Phone: (213) 825-3181 FAX: (213) 206-3566

Please let us know if you will be able to join us as we honor a humanitarian, colleague and friend who contributed so much during his lifetime to cancer prevention and control on the national and international as well as the local levels.

Very sincerely,

*Ellen R. Gritz*

Ellen R. Gritz, Ph.D.  
 Director  
 Division of Cancer Control

*Richard J. Steckel*

Richard J. Steckel, M.D.  
 Director  
 Jonsson Comprehensive Cancer Center

# Anti-Cancer Council of Victoria



18 January 1990

49-1702

Dr J.W. Cullen  
Director  
AMC Cancer Research Center  
1600 Pierce Street  
Denver Colorado 80214  
USA

Dear Joe,

It was greatly enjoyable to spend an evening with you in Washington although I'm a little concerned about the size of the bill you stuck with.

That Robert Mondavi Chardonnay Reserve was one of the finest libations to tickle my taste buds for sometime.

It was also nice to find out that your drive to create a decent centre for prevention is obviously going to be successful.

We'll obviously get the chance to get together again in the foreseeable future as our common interests won't allow us to stay apart.

Love to Kay and lots of best wishes.

Cheers -

Nigel Gray

# Director Joseph Cullen

12/15

2 JAN 1991

Wendy Day

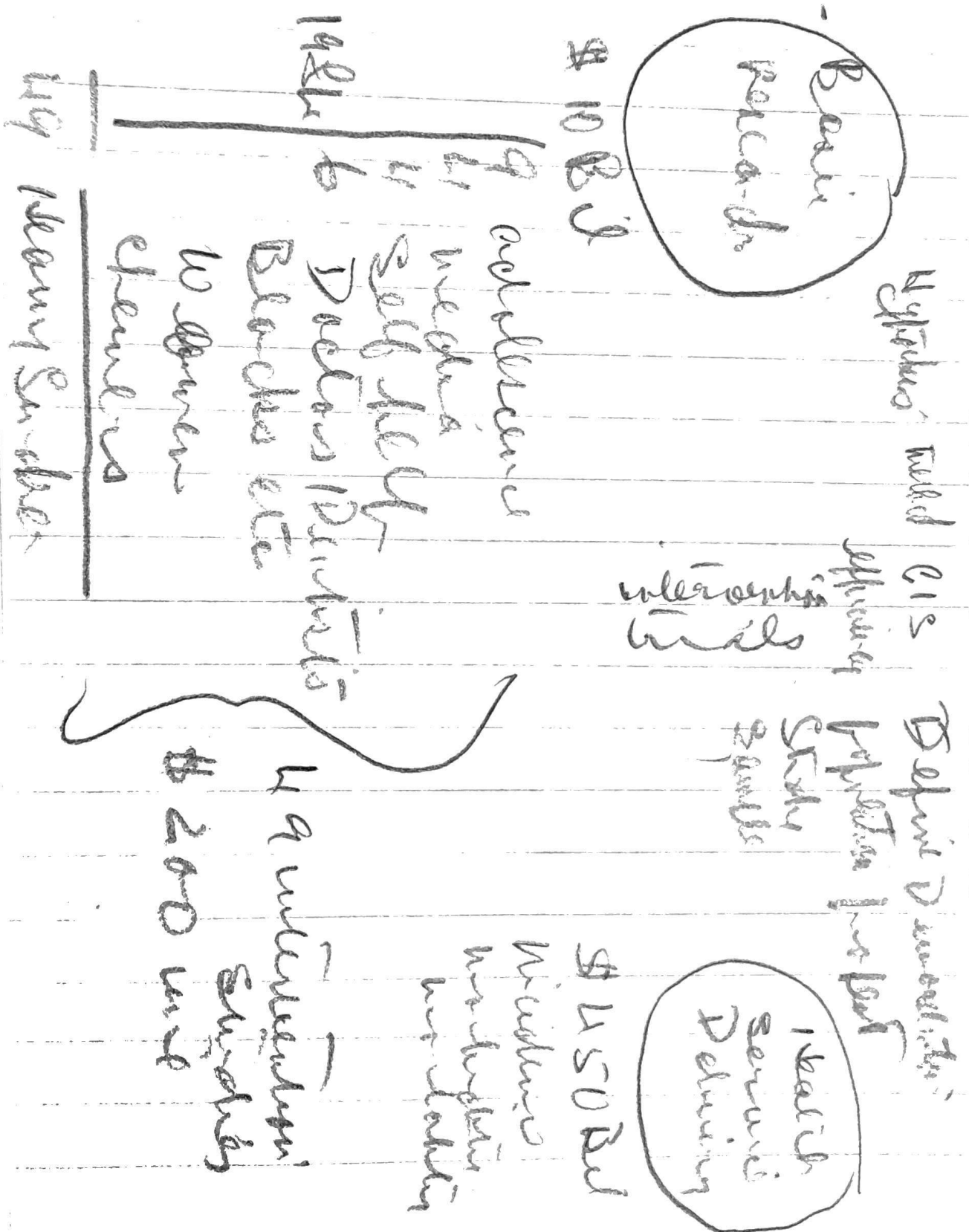
Sad news indeed.

Cheers. Happy Holidays,

Allen Emerson

1982 - TE -> NY  
 Fill with the entire correspondence

What do we know  
 What should we do  
 Mandated Cancer Control



# Heavy Smokers.

11 community (500 people) studies  
of the 49 studies all the best  
into will form the guts  
of ASSIST which is  
is based on coalitions  
which must include NEI  
& NCI & church, schools  
professionals business etc

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Henry Swoboda

CONORT

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cross sectional evaluation

Wynder

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## trial

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Peer group pressure.  
Identify heroes in  
NS who can be identified  
with - what brands,  
images, people.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

National Institutes of Health  
National Cancer Institute  
Bethesda, Maryland 20892

July 14, 1989

21 AUG 1989

Dr. Nigel Gray  
Director  
Anti-Cancer Council of Victoria  
Keogh House  
1 Rathdowne Street  
Carlton South  
Melbourne 3053, Victoria  
AUSTRALIA

*Keep in for Cullen file*

Dear Dr. Gray:

The package containing the National Institutes of Health's nomination of Dr. Joseph Cullen for the 1989 Alton Ochsner Award Relating Smoking and Health, along with a number of seconding letters from such distinguished person's as yourself, was truly impressive. We have been informed that Dr. Cullen was not selected as this year's recipient; however, I still want to thank you for taking time from your busy schedule to help us in our endeavor to gain this recognition for his outstanding accomplishments in building the National Cancer Institute's Smoking, Tobacco, and Cancer Program.

I have shared your letter with Dr. Cullen, and he too appreciates very much your kindness and feels very honored to have had your support.

Sincerely,

Peter Greenwald, M.D.  
Director  
Division of Cancer Prevention  
and Control

cc:  
Dr. Cullen

Enclosure



The Alton Ochsner Award  
Relating Smoking and Health

907-0075

SELECTION COMMITTEE

Francois M. Abboud, M.D.  
Professor of Medicine and Physiology  
Head, Department of Internal Medicine  
Director, Cardiovascular Center  
University of Iowa

David A. Hamburg, M.D.  
President, Carnegie Corporation  
of New York  
New York, New York

Claude Lenfant, M.D.  
Director, National Heart, Lung,  
and Blood Institute  
Bethesda, Maryland

George H. Porter, III, M.D.,  
President, Alton Ochsner  
Medical Foundation

David C. Sabiston, Jr., M.D.  
James B. Duke Professor of Surgery  
and Chairman of the Department  
Duke University Medical Center

H. Alfred Tyroler, M.D.  
Department of Epidemiology  
University of North Carolina  
School of Public Health  
Chapel Hill, North Carolina

Rosalyn S. Yalow, Ph.D.  
Nobel Laureate  
Senior Medical Investigator  
Veterans Administration

*Ex Officio:*

Edward D. Frohlich, M.D.  
Alton Ochsner Distinguished  
Scientist  
Vice President for Academic Affairs  
Alton Ochsner Medical Foundation

July 3, 1989

James B. Wyngaarden, M.D.  
Samuel Broder, M.D.  
Peter Greenwald, M.D.  
National Institutes of Health  
Bethesda, Maryland 20892

43210-1228

Dear Doctor Broder:

We are pleased to inform you that Frank E. Speizer, M.D. was selected to receive the 1989 Alton Ochsner Award Relating Smoking and Health. Dr. Speizer is Professor of Medicine, Harvard Medical School, and Professor of Environmental Sciences, Harvard School of Public Health. He is receiving the Award for his clinical, physiological, biochemical and epidemiological work demonstrating that cigarette smoking and other toxic inhalents are major causes of chronic lung disease.

Your nominee, Doctor Joseph W. Cullen, was not selected this year. However, we shall be pleased to receive an updated proposal next year, and will then consider your nominee's candidacy again.

We sincerely believe that you join with us in congratulating Doctor Speizer, and we look forward to an updating of your well-considered nomination next year.

Sincerely,

Edward D. Frohlich, M.D.



August 16, 1989

Dr. Nigel Gray  
Director  
Australian Cancer Society  
Anti-Cancer Council of Victoria  
Keogh House,  
1 Rathdowne Street  
Carlton South, Australia 3053

30 AUG 1989

Dear Nigel:

I did receive your recent letter of 28 July 1989. However, let me give you a better address (below) which should hasten any communication.

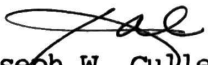
I am still settling in; but I am very pleased with what has happened so far and the prospects for the future.

I am delighted that you and Ann do not consider Denver and the Rocky Mountains a thing of the past. Indeed, please let Kay and me know whenever you intend to come this way again. It is our turn to host you. I only hope I can do it in the same style and grace that you treated us in Melbourne.

Presently I have nothing scheduled related to activities of mutual interest to us both until the Perth meeting in February; and I am looking forward to that meeting very much. In fact, I need to start thinking about how to control tobacco in the world - a topic to which you gallantly assigned me and I immodestly and ambitiously accepted.

Looking forward to seeing you again.

Sincerely,

  
Joseph W. Cullen, Ph.D.  
Director



JWC:cd

My new address is:      AMC Cancer Research Center  
   1600 Pierce Street  
   Denver, Colorado 80214

1600 Pierce Street  
Denver, Colorado 80214  
303 233-6501



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

National Institutes of Health  
National Cancer Institute  
Bethesda, Maryland 20892

February 1, 1989

Dear Colleague:

The National Cancer Institute (NCI) and the American Cancer Society (ACS) are pleased to announce ASSIST -- the American Stop Smoking Intervention Study. This joint project is intended to reduce both the number of deaths and the death rates from those cancers associated with tobacco use, particularly cigarette smoking. ASSIST will be the largest research demonstration project ever undertaken to control smoking and tobacco use.

According to the most recent estimates of the American Cancer Society, approximately 150,000 of our citizens will die this year from cancer because of cigarette smoking. This total represents nearly a third of all cancer deaths that occur annually in the United States. Clearly we need to reduce this disease burden to the fullest extent possible.

Enclosed are copies of the embargoed press release and the concept review statement that summarize this exciting new effort. We are providing you with these materials in advance so that you and your staff will be fully informed of the nature and intent of ASSIST prior to public release. In anticipation that you may receive inquiries about ASSIST resulting from the joint NCI/ACS press release, it is our hope that this pre-release information will enable you to answer questions that may arise.

We anticipate that you are interested in ASSIST. We will continue to provide you with information about the project as it becomes available.

Sincerely yours,

A handwritten signature in cursive script, appearing to read "Joe Cullen".

Joseph W. Cullen, Ph.D.

Deputy Director

Division of Cancer Prevention  
and Control

Enclosures

**DRAFT**

ADVANCE NEWS STATEMENT--NOT FOR RELEASE  
EMBARGO RELEASE DATE: FEBRUARY 22, 1989

Frank Mahaney  
National Cancer Institute  
(301) 496-6641

Joann Schellenbach  
American Cancer Society  
(212) 382-2169

**American Stop-Smoking Intervention Study (ASSIST)**

The National Cancer Institute (NCI) and the American Cancer Society joined forces recently to mount the world's largest demonstration project for tobacco control and health promotion ever conducted.

ASSIST - the American Stop-Smoking Intervention Study - is designed to reach over one-fifth of the U.S. population and at least 15 million smokers through 20 community-based tobacco control coalitions in large metropolitan areas or throughout entire states.

ASSIST will consist of two phases. In phase one, starting in 1991 and continuing up to 2 years, participating coalitions will develop detailed plans to mobilize community tobacco control resources. In phase two, beginning in 1993, coalitions will implement their plans. The 5-year implementation will conclude in 1998.

NCI is planning to spend \$116.45 million over 7-8 years for the project, including evaluation at the end. About \$5-6 million is required for phase one and \$20 million annually for each year of implementation. NCI funding for ASSIST will be awarded as competitive contracts to health departments, which will be responsible for administering these monies for the coalitions.

(more)

The American Cancer Society will support the project with several million dollars in program funds, large quantities of educational materials, and the efforts of thousands of volunteers. The Society has a strong national tobacco control program and an active network of local volunteers at 57 chartered divisions and more than 3,200 local units.

Key to ASSIST is that most of the funds will support actual demonstration activities at the local level. In addition, because local organizations will form the coalitions, the project's structure will remain in place to carry on tobacco control programs after government funding ends.

Organizations involved in the ASSIST coalitions will include voluntary health organizations, medical and professional groups, hospitals, businesses, churches and synagogues, schools, and other civic and health-related organizations.

ASSIST activities will include training health professionals in smoking cessation counseling skills, sponsoring special stop-smoking programs for worksites and other community locations, implementing smoking prevention curricula in schools, and expanding media coverage of the smoking issue. The project will place special emphasis on efforts directed to minorities, women, heavy smokers, low-income smokers, and youth.

To evaluate the project, NCI will conduct periodic national surveys. Data from the geographic regions covered by ASSIST will be compared with results from the rest of the country.

ASSIST is the latest initiative in a series of efforts by NCI and the American Cancer Society to reduce the prevalence of cigarette smoking and tobacco use by both adults and youth by the turn of the century.

In cooperation with the American Heart Association and the American Lung Association, the American Cancer Society is supporting the "Tobacco-Free Young America by the Year 2000" project. This top-priority initiative involves public information, professional education, and public policy activities at the national, state, and local levels.

The Society also has recently begun a community expansion program with a focus on disadvantaged populations including blacks, Hispanics, American Indians, and the elderly.

Since 1984, NCI has supported more than 60 tobacco control intervention studies affecting more than 10 million people in 25 states and Canada. Approaches found successful from these 60 studies will be applied even more broadly in ASSIST. All studies, including the recent Community Intervention Trial (COMMIT) for smoking cessation, will be completed by 1993 when ASSIST implementation begins.

NCI will issue a request for ASSIST proposals in early 1990. A series of conferences will be conducted in 1989 to provide detailed information about the project to health departments and cooperating organizations that may be interested in submitting coalition proposals.

1. **TITLE:** American Stop Smoking Intervention Study (ASSIST)
2. **BRIEF TITLE:** ASSIST
3. **GOALS AND MAJOR OBJECTIVE:**

To accelerate the reduction in tobacco use by applying proved tobacco control interventions and other tobacco control measures through regional tobacco control coalitions.

4. **BACKGROUND AND JUSTIFICATION:**

#### I. NCI Year 2000 Goal

The NCI has set a goal of reducing cancer mortality rates 50 percent by the end of the century. To accomplish this end will require substantial reductions in tobacco use rates, particularly cigarette smoking. Unless these reductions occur in the next decade, the lung cancer death rate in the U.S. will continue its historical rise.

#### II. Smoking Prevalence and Behavior

Cigarette smoking has been declining in the U.S. since release of the first Surgeon General's Report in 1964. At that time 42 percent of adults were regular cigarette smokers (53 percent of men and 34 percent of women). In 1987 smoking prevalence had declined to 32 and 28 percent respectively. However, the number of cigarette smokers, including both teens and adults, has actually increased slightly over this period of time. Nationally, there are now approximately 54 million regular cigarette smokers or one million more smokers than existed 10 years ago. While this increase is due to an increase in the total population, it still indicates a growing problem and augurs against any complacency.

Further, teenage smoking prevalence has not declined appreciably since 1981. Recent data indicate that the proportion of adolescents (ages 12 through 17) who smoke, has increased from 12.1 percent in 1979 to 15.6 percent in 1985. An estimated 5 million teens were regular cigarette smokers in 1985, and the teenage smoking problem may again be increasing. There is convincing evidence that smoking quit rates among adults has slowed. There is now a more hard-core, addicted smoking population; and there are now more heavy smokers (i.e., those who smoke 25 or more

cigarettes/day) in absolute numbers as well as a percentage of all smokers than ever before.

### Special Populations

Black Americans have the highest overall rates of cancer of any U.S. population. Of particular concern is the excess incidence and mortality from lung cancer in black men. Black men are 50 percent more likely than white men to develop lung cancer; and they experience a 45 percent excess lung cancer death rate. Black males not only are more likely to smoke but are more likely to use cigarettes with a higher tar and nicotine content.

### Smokeless Tobacco Use

While the percent of cigarette smokers has declined over the last two decades in the U.S., the use of smokeless tobacco products (primarily moist snuff) has increased, particularly among adolescent males and young men. It is estimated that smokeless tobacco was used by at least 12 million people in the U.S. in 1985 and that half of these were regular users. Among teenage males 16 to 19 years of age, snuff use increased 10-fold in the 15 year period, 1970 to 1985. A similar pattern is true for the use of chewing tobacco. Young adults 20 to 29 years of age are also observed to have a higher smokeless tobacco use rates. It is estimated that well over a million additional smokeless tobacco users exist today compared to just a decade earlier and a significant proportion of these new users are under the age of 30.

### III. STCP Intervention Trials

In 1982 the National Cancer Institute (NCI) launched an aggressive intervention research effort, the Smoking, Tobacco, and Cancer Program (STCP) through the Division of Cancer Prevention and Control (DCPC). Today the STCP supports 60 intervention trials in North America. These trials are testing the efficacy of specific intervention channels such as schools, health care providers, the mass media and self-help stratagems; specific populations targeted are youth, women, ethnic minorities, heavy smokers, and smokeless tobacco users.

The STCP research program has been emphasizing Phase III and IV cancer control intervention research. These phases of research were recommended by over 300 public health and tobacco control experts who met between 1982-1984 to determine what further steps needed to be taken and to develop a national research strategy to reduce cancer mortality caused by tobacco use, particularly by cigarette smoking.

More than half of these trials will be completed by 1990, with the remaining ending by 1992. In several of the trial clusters (viz., health care providers, mass media, schools and self-help) enough data are presently available to allow consensus on whether and how to proceed to Phase V demonstrations using the results of the completed studies.

In April of 1987, over 250 STCP investigators and public health experts gathered at NIH for a consensus on STCP's next steps. It was recommended that a demonstration project be undertaken to reach a large target population. It was the group's opinion that many of the STCP strategies being tested were proved to be effective and were now ready to be implemented in Phase V Cancer Control Research.

#### IV. Planning Meetings for Phase V Demonstration Project

STCP investigators and a number of additional consultants have provided NCI with guidance on the nature of the approach necessary to impact large enough populations across the U.S. to have the necessary impact to achieve the tobacco control objectives in the Year 2000 plan. The recommendation of the expert consultants was to establish community based tobacco control coalitions in states or in large metropolitan areas (population of 2 million or more) and to support enough of these to impact 50,000,000 Americans.

The coalition model is valuable in that it will enable the demonstration project to: deliver interventions to the community that have been tested as effective in reducing tobacco use; involve multiple organizations and institutions capable of addressing tobacco control in a coordinated fashion; encourage smoke-free environments; and effect public policies regarding tobacco use. Furthermore, it is anticipated that by carrying out this effort through channels that are indigenous to our society, coalition members will develop a natural sense of ownership of the project which will strengthen and maintain their efforts.

In order to more clearly delineate the approach to be taken in such an ambitious effort, a series of planning meeting was held.

The first of these meeting (October 1987) involved representatives from major voluntary health agencies, community health agencies/institutions and individuals who had directed or managed local health initiatives. These experts agreed with the coalition model approach and that (1) local ownership is important to the projects' success, (2) a single agency should function as fiscal agent, (3) the

fiscal agent should be a neutral, noncompeting agency within the community, (4) operational flexibility be assured to allow for differences across and between various geographic sites and (5) a full time staff be established to serve the coalition and its various community boards.

Participants stressed that local ownership was best accomplished through a requirement of matching funds or in-kind support. This requirement would allow local agencies and community organizations to invest in the project and establish partnerships with other community groups. Such a requirement also allows local coalition components to undertake activities beyond those funded by the NCI. State or local health departments were identified as the agency most appropriate as the fiscal agent.

A second planning workshop was convened in December, 1987 for state and local health agency officials, representatives from the national office of the American Cancer Society, other federal officials who have worked closely with state and local health agencies, and representatives of national health consortia. The participants recommended that NCI conduct workshops for local agencies as part of the planning process and that training provisions be made available throughout the life of the project.

In these first planning meetings STCP staff was advised that local business, industry and labor leaders could significantly enhance the ability of coalitions to carry out effective programs. Such leaders serve on local boards for various community projects and can contribute substantially to the objectives of such a program. A third planning meeting, therefore, was convened in April, 1988 to determine how business and industry could contribute to tobacco control coalitions and what inducements could be used to encourage their participation. At this meeting representatives from the U.S. Chamber of Commerce, the Washington Business Group on Health, and local health coalitions involving business and unions attended. The participants offered suggestions on how local business and industry leaders could be encouraged to participate in tobacco control coalitions and what classes of business and industry were most suited for inclusion.

## V. NCI/ACS Cooperative Role

At the very onset of concept development for the demonstration project, the NCI and the ACS discussed their respective roles in a project of this magnitude. STCP program staff view the ACS as an integral partner in the success of the project due to their extensive involvement in smoking programs nationally and their strong network of

local volunteers who could mobilize local communities in tobacco control. It was understood that ACS would receive no Federal funds in keeping with established ACS policy. However, during the planning stages of the project, the ACS would take primary responsibility to educate, motivate and support its Divisions/Units in their work with health departments on this project.

## 5. PROJECT DESCRIPTION

ASSIST will support large scale demonstrations in states and large metropolitan areas. Community based coalitions composed of institutions and organizations capable of coordinating and delivering effective tobacco control interventions within a geographic area will be developed and/or strengthened.

ASSIST will be implemented in two phases. Phase I will involve organizing coalitions and developing detailed action plans to mobilize relevant and appropriate community resources in accordance with contract specifications. These plans will be implemented in Phase II in order to achieve a significant reduction in smoking and tobacco use prevalence in the geographic regions selected.

### Phase I Planning (18-24 months)

Organizations included in coalitions will vary from site to site, but will include a broad range of organizations and community groups capable of working together to coordinate the area's tobacco control resources and to implement the intervention strategies. Members of the coalitions will represent community institutions and organizations with the capacity to reach the general public as well as specific target groups that have been defined as appropriate for special intervention focus.

The American Cancer Society (ACS) and State (Local) Health Departments will be required leaders for the coalitions. The ACS, because of its historical commitment to tobacco control and its strong local presence, will be an effective partner in activating and maintaining a high level of community involvement. The Health Departments, because of their disease control focus and existing public health structure, will be the recipient of project funds and will act as fiscal agent for the demonstration.

Planning and community organization during Phase I will produce a detailed action plan for comprehensive community tobacco control. Action plans will specify how the coalition member organizations will deliver the interventions required by the project protocol. Plans will

be based upon a detailed demographic and epidemiologic analysis of the target populations, public health resources, and available dissemination channels.

### Phase II-Implementation (5 years)

Upon NCI Project Officer and staff approval of the action plan developed during Phase I, Phase II of the demonstration will continue for a period of 5 years. The demonstration will consist of carrying out the detailed action plan developed during the planning process. Throughout Phase II STCP staff will provide technical assistance and monitoring to ensure adherence to intervention protocols.

Activities will include the training of health care professionals to deliver cessation counselling; the provision of targeted cessation interventions in worksites and other locations; the implementation of tobacco use prevention curricula in schools; and the activation of print and electronic media to cover the smoking issue. Minorities, women, heavy smokers, low-income smokers, and youth will be targeted in this effort.

As a means of keeping demonstration sites informed of progress and programs across sites, the STCP will convene the investigators and coalition leaders periodically to encourage a full exchange of information among and between the various demonstration sites. These meetings will also serve to surface problems and identify solutions.

### Evaluation

ASSIST demonstration sites will be evaluated using the Current Population Survey (CPS) conducted by the Bureau of the Census through a Interagency Agreement. Baseline and follow-up surveys of smoking and tobacco use prevalence will be measured in each geographic area funded, independent of the initiative. Approximately \$3 million will be required to fund a baseline survey, a mid-project survey, and one post implementation survey.

As a supplement to the above evaluations, the project will draw upon a number of existing prevalence and process monitoring resources such as the NHIS survey, the CDC Behavioral Risk Factor Survey, and State-specific cigarette consumption data published by the IRS. These data are available at no cost to the project.

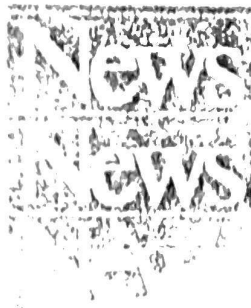
Fiscal Resource Requirements

It is proposed that approximately \$5-6 million will be required to support Phase I planning. These funds would be used for overall planning, including the establishment, organization, and coordination of local coalitions and development of detailed action plans for Phase II implementation. Phase II will involve approximately 20 geographic sites and will require an estimated \$20 million annually.

ASSIST will require a data and coordination center contract costing an estimated \$700,000 initially, increasing to \$1.1 million annually. The center will be used for tasks related to overall project management and administration, coordination, training, resource development, and data analysis. The contract will have the capacity to conduct small scale evaluations of specific project initiatives at the local level.

6. CONTINUATION OR RENEWAL: This is a new project.
7. MECHANISM: Contract
8. REVIEW GROUP: Ad Hoc Review Group
9. ANTICIPATED NUMBER OF AWARDS: Up to 20 awards
10. APPROXIMATE ANNUAL BUDGET (Total Costs):

FY 1991	\$ 2.95	million
FY 1992	\$ 5.45	"
FY 1993	\$20.85	"
FY 1994	\$20.90	"
FY 1995	\$22.20	"
FY 1996	\$21.20	"
FY 1997	\$21.20	"
FY 1998	\$ 1.70	"
11. DURATION OF PROJECT: 8 Years
12. BRANCH & PROJECT OFFICER: Office of the Director, DCPC;  
Donald R. Shopland



## Huge Tobacco Control Project Begun By NCI, ACS

The National Cancer Institute and the American Cancer Society joined forces recently to mount the world's largest demonstration project for tobacco control and health promotion ever conducted.

ASSIST—the American Stop-Smoking Intervention Study—is designed to reach over one-fifth of the U.S. population and at least 15 million smokers through 20 community-based tobacco control coalitions in large metropolitan areas or throughout entire states.

“We have volunteer-based help organizations and other agencies like state health departments working together,” said Harmon J. Eyre, M.D., immediate past president of the ACS. “Together they can accomplish a great deal more (for the ASSIST program) than either one alone.”

ASSIST will consist of two phases. In phase 1, starting in 1991 and continuing up to 2 years, participating coalitions will develop detailed plans to mobilize community tobacco control resources.

In phase 2, beginning in 1993, coalitions will implement their plans. The 5-year implementation will conclude in 1998.

### Funding

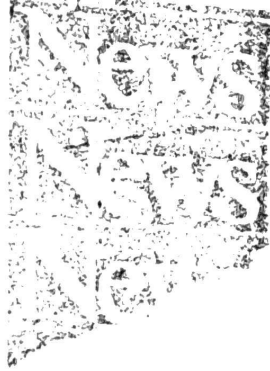
The NCI is planning to spend \$116.45 million over 7–8 years for the project, including evaluation at the end. About \$5–6 million are required for phase I and \$20 million annually for each year of implementation. NCI funding for ASSIST will be awarded as competitive contracts to health departments, which will be responsible for administering these monies for the coalitions.

“ACS will support the project with several million dollars in program funds, large quantities of educational materials, and the efforts of thousands of volunteers,” said Eyre. The ACS has a strong national tobacco control program and an active network of local volunteers at 58 chartered divisions and more than 3,200 local units.

“Key to the ASSIST program is that most of the money will go into the actual demonstration at the local level,” said Donald R. Shopland, director of



Dr. Harmon J. Eyre



the ASSIST program at NCI. "In addition, because we're using local organizations to form coalitions, the structure will still be in place to carry on the programs after government funding runs out."

## Ideal Marriage

"The ASSIST program will work," said Eyre, "because it uses research findings of NCI-supported programs in smoking control delivered to the community through state agencies and health organizations. It's an ideal marriage between federal research programs and community organizations."

Organizations involved in the ASSIST coalitions can include voluntary health programs, medical and professional groups, hospitals, businesses, churches and synagogues, schools, and other civic and health-related organizations.

ASSIST activities will include training health professionals in cessation counseling skills, sponsoring special stop-smoking programs for work sites and other community locations, implementing smoking prevention curricula in schools, and expanding media coverage of the smoking issue. The project will place special emphasis on efforts directed to minorities, women, heavy smokers, low-income smokers, and youth.

## Evaluation

To evaluate the project, the NCI will conduct periodic national surveys. Data from the geographic regions covered by ASSIST will be compared with results from the rest of the country.

ASSIST is the latest initiative in a series of efforts by the NCI and ACS to reduce the prevalence of cigarette

smoking and tobacco use by both adults and youth by the turn of the century.

In cooperation with the American Heart Association and the American Lung Association, the ACS is supporting the "Tobacco-Free Young America by the Year 2000" project. This top-priority initiative involves public information, professional education, and public policy activities at the national, state, and local levels.

The ACS also has recently begun a community expansion program with a focus on disadvantaged populations including blacks, Hispanics, American Indians, and the elderly.

## Firm Foundation

Since 1984, the NCI has supported more than 60 tobacco control intervention studies affecting more than 10 million people in 25 states and Canada. Approaches found successful from these 60 studies will be applied even more broadly in ASSIST. All studies, including the recent Community Intervention Trial (COMMIT) for smoking cessation, will be completed by 1993 when ASSIST implementation begins (see *Journal of the National Cancer Institute News* 80: 717-719, 1988).

"Results from individual trials like COMMIT provide us with a firm foundation," said Shopland. "We now have a unified research base to draw upon for the ASSIST program."

The NCI will issue a request for ASSIST proposals in early 1990. A series of conferences will be conducted in spring 1989 to provide detailed information about the project to health departments and cooperating organizations that may be interested in submitting coalition proposals.

— By Jeffrey McKenna  
and Elena Carbone

## Anti-Cancer Council of Victoria

40-645



April 14 1988

### Personal

Dr J. W. Cullen, Ph.D  
Deputy Director  
Division of Cancer Prevention and Control  
National Cancer Institute  
Bethesda, Maryland 20892  
U S A

*Dear Joe,*

Thanks very much for your note of March 28. I greatly appreciated the materials, which will be the basis of quite a few discussions in-house over the next month or two.

I have done some homework about costs and would like to offer the simplest reimbursement package possible. My suggestion would be that we cover the costs of a business class return airfare from Washington to Melbourne and a similar airfare from Los Angeles to Melbourne. In addition, we can offer an amount for incidental expenses of \$U.S.2000.

It is probably simpler for us to give you a single cheque in US dollars for the total amount. Since prices for airfares bought in Australia differ quite a lot from those purchased in the US, it would be helpful if you could give me a dollar figure to add to the reimbursement.

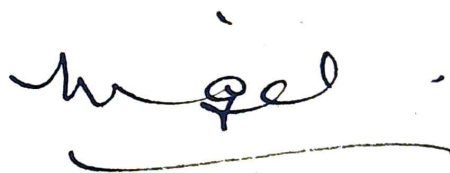
I would be very pleased if you could stay with Ann and I during your time in Melbourne. We have a comfortable separate guestroom and bathroom.

Given that you expressed an interest in seeing the Barrier Reef you may well wish to book an airfare which includes the city of Cairns in your itinerary on the way back. I know Qantas flies through Cairns to the USA. This cost could be included in your basic airfare.

I imagine you would like to make your own travel arrangements. However, I have costed a package deal for a week on Hamilton Island for two ex Cairns and the amount involved (this week) is \$Aust 1003 per person for a 1-bedroom apartment (or \$863 per person for a grass hut, garden setting, verandah, with all facilities). In US. dollars this is around \$740/\$640 respectively. This includes return airfares from Cairns but no meals.

Since this is an entirely private letter, what I would like to achieve is that you and your wife (or child) could fly in comfort, have a week in Melbourne and a week on the Barrier Reef, and not be out of pocket. I have warned everybody away from your itinerary in order to allow you to do virtually all your work in Melbourne and then have a break before returning home. This even includes being tough with Mike Daube who would desperately like to have you travel to Perth - I think he'll come to Melbourne to hear you!

cheers

A handwritten signature in cursive script that reads "Nigel". The signature is written in black ink and is positioned above a horizontal line.

Nigel Gray  
Director

P.S. It may be convenient for you to telephone in response. 8.00 p.m. in Washington is 10 a.m. here

DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

March 17, 1988

National Institutes of Health  
National Cancer Institute  
Bethesda, Maryland 20892

Dr. Nigel Gray  
Director  
Anti-Cancer Council of Victoria  
Keogh House  
1 Rathdowne Street  
Carlton South, Australia 3053

28 MAR 1988

Dear Nigel:

I certainly enjoyed seeing you in Geneva earlier this month and meeting your lovely wife. Working with you is truly an honor. You have contributed substantially to the field of preventive medicine and within that domain you have been an exceptional pioneer and continuing force in tobacco control in the world. We owe you much for that.

Again I appreciate the kind invitation to visit Australia later this year. David Hill has written to me specifying that the symposium will take place in Melbourne on November 30-December 2. That is quite acceptable.


In keeping with your suggestions I will plan to arrive in Melbourne on Sunday, November 27 in order to allow ample time to adapt my biological clock. How much time I remain in Australia after December 2 will depend on the generosity of your reimbursement. Since my daughter becomes the second "child" in college starting in September of 1988, I had not planned on any expensive vacations this year. If you would inform me what my total reimbursement will be, I will be better able to plan my itinerary.

I promised to send you materials on our physician-delivered smoking control trials. Under separate cover you will receive these and several other documents which may interest you. In addition to the book entitled, "Essential Elements of an HMO-Guided Smoking Cessation Program" (this relates to physicians in general and not just to those in HMO's-Health Maintenance Organizations), we are now preparing a training guide to go with it. We are also redesigning the book so as to give it a more professional and marketable appearance.

Page 2 - Dr. Nigel Gray

I hope you find this information helpful. Let me know if I can help you in any other way.

Sincerely,

  
Joseph W. Cullen, Ph.D.  
Deputy Director  
Division of Cancer Prevention  
and Control



MEMORANDUM

TO: ... Nigel Gray  
 FROM: ... David Hill  
 DATE: ... 31-3-88  
 SUBJECT: ... Dr J. Cullen's travel costs.

Washington - Melb - Washington A \$ 5588 -6500  
 Los Angeles - Melb - Los Angeles A \$ 4870  
 Qantas - including Cairns A \$ 5759 } .5760  
 12260

If they book to come into or leave from Cairns the extra fare would be small but would have to be quoted by airline at time booking made. Qantas would need to be involved as it seems to be the only airline flying Cairns - Melbourne.

off B.C. fares 2000

Qantas

12260  
 2000  
 14260

HAMILTON ISLAND  
 Arrived - Cairns to H.I.S. return + accomm. (no meals) \$60 -

Flight from  
London Heathrow  
to 17. Canberra would cost  
88 £ - 15

QANTAS  
QUOTES  
B/c class Ma LA - melb incl  
Cairns \$US 4246

not need to do this and of good price  
(Auss 5759\*)  
the exchange  
pens too  
low to me  
8/bc around  
\$5400  
WASHINGTON - ADD  
\$A 800.

Nigel Gray

Postage Paid  
Melbourne  
Victoria  
Australia 3000

1 Rathdowne Street, Carlton South, Australia 3053.







DEPARTMENT OF  
HEALTH & HUMAN SERVICES  
PUBLIC HEALTH SERVICE  
NATIONAL INSTITUTES OF HEALTH  
BLDG. \_\_\_\_\_ ROOM \_\_\_\_\_  
BETHESDA, MARYLAND 20892

OFFICIAL BUSINESS  
Penalty for Private Use, \$300

Dr. Nigel Grey  
Director  
Anti-Cancer Council of Victoria  
Keogh House  
1 Rathdowne Street  
Carlton South  
Melbourne 3053, Victoria  
AUSTRALIA

DEPARTMENT OF  
HEALTH & HUMAN SERVICES

Public Health Service  
National Institutes of Health

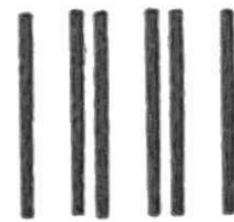
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HHS 396

Dr. Peter Greenwald  
Director  
Division of Cancer Prevention and Control  
National Cancer Institute  
9000 Rockville Pike  
31/10A52  
Bethesda, MD. 20892-3100



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

January 30, 1989

National Institutes of Health  
National Cancer Institute  
Bethesda, Maryland 20892

Dr. Nigel Gray  
Director  
Anti-Cancer Council of Victoria  
Keogh House  
1 Rathdowne Street  
Carlton South  
Melbourne 3053, Victoria  
AUSTRALIA

Dear Dr. Gray:

In recognition of the accomplishments of Dr. Joseph W. Cullen in building the National Cancer Institute's Smoking, Tobacco, and Cancer Program, the National Institutes of Health plans to nominate Dr. Cullen for the **Alton Oshner Award Relating Smoking and Health**. A draft copy of the letter of nomination and his curriculum vitae are enclosed. The nominating letter must be supported by at least two letters of support from outside the candidate's institution.

Because of your first hand knowledge of Dr. Cullen's ambitious and effective program and his commitment to changing public attitudes and behavior toward the use of tobacco products, I would very much appreciate a seconding letter from you to be included with this nomination. If you are willing to do this, please send a seconding letter to me by February 22. It should be addressed to me. Please add "Building 31, Room 10A52" to the address as shown on the stationery.

Your assistance in providing a seconding letter will be greatly appreciated.

Sincerely,

Peter Greenwald, M.D.  
Director  
Division of Cancer Prevention  
and Control

Enclosures

D R A F T

Edward D. Frohlich, M.D.  
Vice President for Academic Affairs  
Alton Ochsner Medical Foundation  
1516 Jefferson Highway  
New Orleans, Louisiana 70121

Dear Dr. Frohlich:

I am pleased to submit the name of Dr. Joseph W. Cullen, Deputy Director of the Division of Cancer Prevention and Control (DCPC) and Coordinator of the National Cancer Institute's (NCI) Smoking, Tobacco, and Cancer Program (STCP), to be considered for the **Alton Ochsner Award Relating Smoking and Health**. Dr. Cullen's efforts to reduce smoking-related cancer mortality are among the best ever developed.

In addition to the commitment and progress of the scientific community to develop and treat cancer effectively, in several areas prevention still provides the best hope. With the knowledge that a large proportion of cancers are caused or associated with lifestyle and environmental factors, particularly smoking/the use of tobacco, the NCI has initiated a campaign to cut the cancer death rate in half by the end of this century. The STCP developed under Dr. Cullen's leadership is in the vanguard of those forces contributing to the continuing reduction in smoking prevalence in this nation.

Dr. Cullen's work in this arena has already been recognized by several institutions. In 1981, the American Cancer Society presented him with the Order of the Golden Sword "in recognition of significant assistance in the fight to conquer cancer." In 1985 he was appointed by the Secretary of Health and Human Services to the Senior Executive Service of the United States. The National Institutes of Health (NIH) presented him with the Special Achievement Award in 1983, and in 1987 with the NIH Award of Merit "in recognition of his dynamic leadership in the development of effective research and health promotion programs to reduce tobacco related cancer deaths." Also, in 1987 the Surgeon General (SG) bestowed upon him the SG's Medallion, the highest award granted by the SG. This medal was given due to Dr. Cullen's "outstanding contributions to the knowledge of the health hazard of smokeless tobacco as Chairman of the Surgeon General's Advisory Committee on the Health Consequences of Smokeless Tobacco Use." In 1988, he was featured on the cover of Cancer Research "for the multiple strategies developed under his leadership to reduce the use of tobacco" and was honored by Florida State University as one of its three Outstanding Graduates.

One of the priority programs that the NCI is addressing in its Year 2000 goals is to reduce smoking prevalence in the Nation to 15 percent or less. Accordingly, the NCI supports the largest smoking

intervention research program in the world. The STCP, developed under Dr. Cullen's leadership, encompasses 60 prevention and cessation trials in over 200 communities in 30 states. These trials involve over ten million people.

- A nationwide smoking intervention network has been formed.
- Cancer Information Service officers have been trained to provide helpful smoking cessation information.
- A physician training manual describing smoking cessation programs for physicians was completed and is now being distributed to physicians nationwide.
- Essential elements of a Health Maintenance Organization-guided smoking cessation program were developed.
- Essential elements of a school-based smoking prevention program for a school prevention curriculum resource handbook is being finalized and will be distributed to school leaders nationwide.
- A women's network was formed to share knowledge and experience enabling women and women's organizations to combat smoking problems. A monograph entitled, "Not Far Enough: Women Vs. Smoking," was published codifying this effort. This effort continues to be active through the women's network that was formed.

Recently, Dr. Cullen spearheaded the development of a new concept that has now been approved by the DCPC's Board of Scientific Counselors to launch the largest demonstration program in the history of the Public Health Service. The objective of this major demonstration project, the American Stop Smoking Intervention Study (ASSIST/2000), will be to accelerate the reduction of tobacco use by applying proven interventions and control measures through regional tobacco control coalitions. This study, which will involve more than 50 million Americans, will be carried out in collaboration with the American Cancer Society and public health agencies nationally.

As more American institutions and foreign governments recognize the compelling evidence that a substantial portion of cancer mortality is preventable, many of them consult DCPC's program objectives and strategies. Dr. Cullen speaks and writes widely to promote cancer prevention. He is a frequent consultant at the national and international level. During this past year alone, he served on a number of committees and made numerous presentations regarding the health hazards of smoking, including:

- Being Dr. C. Everett Koop's emissary in Japan and Geneva at two World Health Organization (WHO) advisory group meetings on world actions to curb tobacco use;

- Representing Deputy Assistant Secretary for Health, Dr. Michael McGinnis at major meeting on tobacco and health in Shanghai, PRC;
- As a member of the WHO Expert Advisory Panel on Smoking and Health;
- As a member of the Technical Study Group for Cigarette Safety Act (PL 98-587);
- As NCI's representative for the Public Health Service Steering Committee on Year 2000 Health Objectives;
- As a member of the Surgeon General's Interagency Committee on Smoking and Health (PL 98-474);
- As NCI's representative for smoking-related activities on NCI-bilateral agreements with Korea, China, France, Israel, and the USSR; and as NCI's liaison with foreign delegations to Japan, China, Korea, the USSR, Canada, Australia, France, and Germany;
- Publishing eight scientific papers and giving nine speeches at major national/international meetings.

We expect Dr. Cullen's work to have a significant effect on helping the NCI to achieve its year 2000 goals. Indeed, we believe his work has already contributed to a continuous reduction in tobacco use in the U.S. and falling rates of lung cancer incidence in white males.

I urge the awards committee to honor Dr. Cullen with this important award for these accomplishments and for his continuous, creative leadership in preventive medicine.

Sincerely yours,

CURRICULUM VITAE

Name: JOSEPH W. CULLEN, PH.D.

Position: Deputy Director  
Division of Cancer Prevention and Control  
National Cancer Institute  
National Institutes of Health  
Building 31, Room 10A49  
Bethesda, Maryland 20892-3100  
(301) 496-9569

Birthplace/Date: Boston, Massachusetts - November 28, 1936

Education: A.B. 1961 Boston College: Liberal Arts  
A.M. 1965 Boston College: Experimental/Clinical Psychology  
Ph.D. 1968 Florida State University: Physiological Psychology

Experience:

July 1982 - Deputy Director, Division of Cancer Prevention and Control  
National Cancer Institute  
Coordinator for the National Cancer Institute's Smoking,  
Tobacco, and Cancer Program

1976 - 1982 Deputy Director, UCLA Jonsson Comprehensive Cancer Center  
Director, Division of Cancer Control

1976 - Adjunct Professor, Department of Psychiatry and Biobehavioral  
Sciences, Neuropsychiatric Institute, UCLA School of Medicine  
Adjunct Professor, Division of Behavioral Sciences and Health  
Education, UCLA School of Public Health

1975 - 1976 Program Director for Behavioral Programs, Division of Cancer  
Control and Rehabilitation, National Cancer Institute

1974 Head of Review Activities/Treatment and Rehabilitation  
Cancer Control Program/Office of the Director  
National Cancer Institute

1973 Grants Associate, Office of the Director, Division of Research  
Grants, National Institutes of Health

1968 - 1972 Chief, Behavioral Nutrition Laboratory (1971-72)  
Research Associate (1968-71)  
Pavlovian Research Laboratory  
Veteran's Administration Hospital, Perry Point, Maryland

Honors and Awards:

Percy T. Magan Memorial Lectureship, School of Medicine,  
Loma Linda University 1989

Outstanding Graduate Award, Florida State University (FSU) 1988

Surgeon General's Medallion 1987

NIH Merit Award 1987

Surgeon General's Certificate of Appreciation 1986

Appointed by Secretary Margaret Heckler to Senior Executive  
Service of the United States 1985

Special Achievement Award, DHHS, PHS, NIH 1983

Honors and Awards (continued):

American Cancer Society Order of the Golden Sword	1981
American Men of Science	1970 - present
Public Health Service Predoctoral Research Fellow	1967 - 1968
University Fellow, (FSU)	1966 - 1967
University Teaching Fellow, FSU	1965 - 1966
National Science Foundation Summer Research Fellow	1965
Graduate from Boston College with Special Honors	1961
Massachusetts Board of Education Scholar	1960 - 1961
Quimet Scholar	1955 - 1956

Journal Participation:

Journal of the National Cancer Institute (Associate Editor)	1982 - 1987
Psychosocial Oncology (Board of Editors)	1982 - present
Preventive Medicine (Consulting Editor)	1984 - present
Journal of Behavioral Medicine (Board of Editors)	1978 - present

Associations/Committees/Societies:

Program Chairman, American Society of Preventive Oncology	1988
PHS Steering Committee for Year 2000 Health Objectives	1986 - present
Chairman, Surgeon General's Advisory Committee on the Health Consequences of Using Smokeless Tobacco	1985 - 1986
Member, Congressionally established Technical Study Group for the Cigarette Safety Act	1985 - 1987
Member, DHHS Interagency Committee on Smoking and Health	1985 - present
World Health Organization Expert Advisory Panel on Smoking and Health	1983 - present
Vice Chairman, ACS Conference on Methodology in Behavioral and Psychosocial Cancer Research	1983
ACS National Coordinating Committee on Tobacco-Related Research	1983 - present
Chairman, Western States Conference on Cancer Rehabilitation San Francisco	March 1982
Director's Committee, Division of Cancer Prevention and Control, NCI	1982 - present
Chairman, Cancer Control Committee, Association of American Cancer Institutes	1981 - 1982
Board of Directors, American Society for Preventive Oncology	1981 - 1985
Co-Chairman, Council for Health Promotion Sciences American Society of Preventive Oncology	1981 - 1985
Vice Chairman, ACS/National Conference on Psychosocial, Social & Behavioral Medicine Aspects of Cancer, Minneapolis	July 1981
Chairman, ACS Conference on Health Risks and Cancer, Los Angeles Convention Center	February 1981
Chairman, Curriculum Committee for NCI Preventive Medicine Contract, UCLA School of Medicine	1980 - 1982
Chairman, Subcommittee on Cancer Control, California Comprehensive Cancer Center Coordinating Council	1980 - 1982

Associations/Committees/Societies (continued):

Chairman, Lung Cancer Prevention Workshops for Los Angeles Basin	1980 - 1981
Chairman, Advisory Committee for the Palliative Treatment Program, V.A. Wadsworth Medical Center	1979 - 1981
Chairman, Subcommittee for Evaluation, Association of American Cancer Institutes	1979 - 1980
Chairman, ACS Nutrition and Cancer Conference, Los Angeles Convention Center	October 1979
Executive Committee, Board of Directors, Community Cancer Control, Los Angeles	1977 - 1982
Executive Policy Committee, UCLA Jonsson Comprehensive Cancer Center	1976 - 1982
American Public Health Association	1976 - present
Vice Chairman, ACS/California Division Task Force on Psychosocial Aspects of Cancer	1976 - 1982
Chairman, Cancer Control and the Behavioral Sciences Conference, San Antonio, Texas	January 1975
Chairman, International Pavlovian Society Meeting (Oslo, Norway)	October 1972

Previous Research Support in Cancer Prevention and Control:

Principal Investigator - Comprehensive Cancer Center Communications Network,  
USPHS N01-CN-85397, 5-26-78 to 12-21-81 (\$510,944).

Principal Investigator - Subcontract with USC Comprehensive Cancer Center  
Contract with NCI for Cancer Information Service, USPHS 1-1-82 to  
11-15-84 (\$588,537).

Principal Investigator - Macomber-Murphy Cancer Prevention Center, UCLA,  
American Cancer Society/California Division, D-108, 2-15-78 to 2-14-81  
(\$183,595).

Principal Investigator - UCLA Cancer Control Developmental Outreach Grant,  
USPHS 5-R18 CA-23974-03, 12-1-80 to 11-30-83 (\$1,634,901).

Principal Investigator - Know Your Body; Elbridge Stuart Foundation,  
10-1-80 to 1-1-82 (\$184,726).

Co-Principal Investigator - Smoking Research and Prevention Program,  
American Cancer Society/National, SIG-4, 1-1-81 to 12-31-82 (\$55,822).

Principal Investigator - E.J. GRASSMANN TRUST - Gift - 12/1/79 - 6/82. (\$10,000).

Co-Principal Investigator - Dental Compliance of Irradiated Cancer Patients,  
USPHS, 1 R01 CA31167-01, 3/1/81 to 6/30/82 (\$331,998).

Books:

Cohen, J., Cullen, J.W., Martin, L.R. (Eds.): Psychosocial Aspects of Cancer. New York, Raven Press, 1982.

Jarvik, M., Cullen, J.W., Gritz, E., Vogt, T., West, L.J. (Eds.): Research on Smoking Behavior. NIDA Research Monograph No. 17, 1977.

Cullen, J.W., Fox, B.H., Isom, R.N. (Eds.): Cancer: The Behavioral Dimensions. New York, Raven Press, 1976.

Cullen, J.W. (Ed.): Legacies in the Study of Behavior: The Wisdom and Experience of Many. Springfield, C.C. Thomas, 1974.

Chapters/Monographs/Journal Articles:

1. Pare, W.P. and Cullen, J.W.: Emotional behavior and adrenal function in the rat. Psychol. Rep. 16: 283-286, 1965.
2. Grimsley, D.L. and Cullen, J.W.: Preoperative experience and postoperative fluid preference in adrenalectomized rats. Psychon. Sci. 12: 119-120, 1968.
3. Cullen, J.W. and Scarborough, B.B.: Effect of preoperative sugar preference on bar pressing for salt by the adrenalectomized rat. J. Comp. Physiol. Psychol. 67: 415-520, 1969.
4. Cullen, J.W.: Modification of salt-seeking behavior in the adrenalectomized rat via gamma-ray irradiation. J. Comp. Physiol. Psychol. 68: 524-529, 1969.
5. Cullen, J.W., Scarborough, B.B., and Stager, G.: Calcium saccharin acceptability: Effects of concentration order and adaptation on consumption. Physiology and Behavior 5: 621-624, 1970.
6. Cullen, J.W.: Modification of NaCl appetite in the adrenalectomized rat consequent to extensive LiCl poisoning. J. Comp. Physiol. Psychol. 72: 79-84, 1970.
7. Cullen, J.W.: Effect of a polydipsia for saccharin-glucose on NaCl appetite in the adrenalectomized rat. J. Comp. Physiol. Psychol. 72: 62-78, 1970.
8. Cullen, J.W. and Scarborough, D.E.: Behavioral and hormonal prophylaxis in the adrenalectomized gerbil (Meriones unguiculatus). Hormones & Behavior 1: 203-210, 1970.
9. Pare, W.P. and Cullen, J.W.: Adrenal influence on the aversive threshold and CER acquisition. Hormones & Behavior 2: 139-147, 1971.

Chapters/Monographs/Journal Articles (continued):

10. Cullen, J.W.: Homeostatis-anhomeostasis: Goliath & David. Conditional Reflex 6: 78-90, 1971.
11. Cullen, J.W., Pars, W.P., and Mooney, A.L.: Adrenal weight to body weight ratios in the mongolian gerbil (Meriones unguiculatus). Growth 35: 169-176, 1971.
12. Reus, J.F. and Cullen, J.W.: 20 channel drinkometer. Perceptual & Motor Skills 34: 316-318, 1972.
13. Cullen, J.W. and Scarborough, D.E.: Potassium chloride preference in normal, sodium and sodium-potassium deficient rats. Conditional Reflex 7: 151-163, 1972.
14. Cullen, J.W.: Sodium intake in the Mongolian gerbil (Meriones unguiculatus) consequent to subcutaneous formalin injections. Psychonomic Sci. 26: 279-282, 1972.
15. Cullen, J.W. and Harriman, A.E.: Selection of NaCl solutions by sodium-deprived Mongolian gerbils in Richter-type drinking tubes. J. Psychol. 83: 315-321, 1973.
16. Lynch, J.J., Fertiziger, A.P., Teitelbaum, H.A., Cullen, J.W. and Gantt, W.H.: Pavlovian conditioning of drug reactions: Some implications for problems of drug addiction. Conditional Reflex 8: 211-223, 1973.
17. Cullen, J.W. and Scarborough, D.E.: The effect of insulin-induced hypoglycemia on NaCl hunger in the adrenalectomized rat. Conditional Reflex 8: 80-87, 1973.
18. Cullen, J.W., Croes, R.A., Gillis, R.D.: Alcohol selection by rats after experience with a sapid alcohol-sucrose solution. Quarterly Journal of Studies on Alcohol 34: 769-773, 1973.
19. Cullen, J.W.: Book Review: The time concertina: Meditations of a humanist. By Ernst Gellhorn. Pavlovian Journal of Biological Science 9: 182-184, 1974.
20. Cullen, J.W.: Introduction to forum: Behavioral sciences and their role in preventive medicine. Preventive Medicine 5: 89-91, 1976.
21. Cullen, J.W., Fox, G.H. (Eds.): Forum: Behavioral sciences and their role in preventive medicine. Preventive Medicine 5: 92-198, 1976.
22. Cullen, J.W.: Forward. In Buemer, J., Curtis, T., Firtell, D. (Eds.): Maxillofacial Rehabilitation: Prosthodontic and Surgical Considerations. St. Louis, C.V. Mosby, 1979.
23. Miller, L.A., Davis, R.M., Beumer, J., Cullen, J.W.: Physical rehabilitation. In Haskell, C.M. (Ed.): Cancer Treatment: A Multi Disciplinary Approach. Philadelphia, W.B. Saunders Company, 1980.

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24. Rainey, L. and Cullen, J.W.: Coping with cancer: A positive perspective. In Ahmed, P. (Ed.): Coping with Cancer. New York, Elsevier - North Holland Co. 1981.
25. Cullen, J.W.: Research issues in the psychosocial and behavioral aspects in cancer. In Human Values and Cancer. New York, American Cancer Society, 1981.
26. Cullen, J.W.: Cancer prevention activities in cancer centers. In Mettlin, C., and Murphy, G. (Eds.): Progress in Cancer Control. New York, Alan R. Liss, Inc., 1981.
27. Cullen, J.W., Wheeler, R.C., Brown, M.P., Gritz, E.R. and Flushman, H.O.: Preventing lung cancer in the Los Angeles basin. Los Angeles, Macomber-Murphy Cancer Prevention Center, UCLA, 1981.
28. Cullen, J.W.: Behavioral, psychologic and social influences on risk factors, prevention, and early detection. Cancer 50: 1946-1953, 1982.
29. Cullen, J.W. and D'Onofrio, C.N.: Behavioral, psychologic and social influences on risk factors, prevention and early detection: Workshop report. Cancer 50: 1954-1961, 1982.
30. Kosecoff, J., Fink, A., Cullen, J.W., Arnold, M., Greenwald, P., Kean, T., and Swanson, M.: Guidelines for evaluating cancer control programs. Preventive Medicine 11: 187-198, 1982.
31. Cullen, J.W.: The role of social and behavioral science in cancer prevention. In Cohen, J., Cullen, J.W., and Martin, L.R. (Eds.): Psychosocial Aspects of Cancer. New York, Raven Press, 1982.
32. Cullen, J.W.: Cancer rehabilitation in the 1980's. In Cancer Rehabilitation. Palo Alto, Bull Publishing Co., 1982.
33. Sorrentino, S., Goodchild, E., Mahony, A., Marcus, A., and Cullen, J.W.: Resource information network for cancer (RINC). In Mettlin, C., and Murphy, G., (Eds.): Progress in Cancer Control: Issues in Cancer Screening and Communications. New York, Alan R. Liss, Inc., 1982.
34. Wheeler, R.C., Marcus, A.C., Cullen, J.W. and Konugres, E.: Baseline chronic disease risk factors in a racially heterogeneous elementary school population: the "Know Your Body" Program, Los Angeles. Preventive Medicine. 12: 569-587, 1983.
35. Cullen, J.W., and Gritz, E.R.: Behavior modification for cancer prevention. In Newell, G.R. (Ed.): Cancer Prevention in Clinical Medicine. New York, Raven Press, 209-229, 1983.

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36. Cullen, J.W.: Psychosocial support: a contextual view for the 80's. In Engstrom, P.F., Anderson, P.N., Mortenson, L.E. (Eds.): Advances in Cancer Control Research and Development. New York, Alan R. Liss, Inc., 365-373, 1983.
37. Cullen, J.W.: Cancer Prevention and the Smoking, Tobacco, and Cancer Program of the National Cancer Institute. In Mizell, M., Correa, P. (Eds.): Lung Cancer: Causes and Prevention. Florida, Verlag Chemie International, Inc., 297-311, 1984.
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39. Cullen, J.W.: Health is key concern. Business and Society Review 49: 8-9, 1984.
40. Cullen, J.W.: Lifestyle and Cancer Prevention. Proceedings of the Fourth National Conference on Human Values and Cancer. New York, American Cancer Society, 27-31, 1984.
41. Cullen, J.W.: The organization of community disease prevention services: Approaches to preventing lung cancer in Los Angeles Basin. Cancer Detection and Prevention 7: 225-235, 1984.
42. Greenwald, P., Cullen, J.W.: The scientific approach to cancer control. Ca-A Cancer Journal for Clinicians 34: 328-332, 1984.
43. Cullen, J.W.: Die gesundheitlichen Folgen des Rauchens: Eine Zusammenfassung. In Brengelmann, J.C. (Ed.): Grundlagen und Praxis der Raucherentwöhnung. Gerhard Rottger Verlag München, 5-14, 1984.
44. Cullen, J.W.: Rauchen und Krebs: Die Zusammenhänge. In Brengelmann, J.C. (Ed.): Grundlagen und Praxis der Raucherentwöhnung. Gerhard Rottger Verlag München, 15-46, 1984.
45. Cullen, J.W.: Möglichkeiten der ärztlichen Intervention in der Raucherentwöhnung. In Brengelmann, J.C. (Ed.): Grundlagen und Praxis der Raucherentwöhnung. Gerhard Rottger Verlag München, 177-204, 1984.
46. Greenwald, P., Cullen, J.W.: The new emphasis in cancer control. Journal of the National Cancer Institute, 74: 543-551, 1985.
47. Davis, R.M., Cullen, J.W., Miller, L.S., and Titus, M.: Physical rehabilitation. In Haskell, C.M. (Ed.): Cancer Treatment. Philadelphia, W.B. Saunders Co., 940-945, 1985.
48. Glynn, T.J. and Cullen, J.W.: Smoking and Women's Health. In Merritt, D.H. and Kirschstein, R.L. (Eds.): Women's Health Report of the Public Health Service Task Force on Women's Health Issues, 2: II-86 - II-91, 1985.

Chapters/Monographs/Journal Articles (continued):

49. Cullen, J.W. and Iverson, D. (Eds.), Forum: health promotion sciences in the prevention of chronic disease. Preventive Medicine, 15: 439-560, 1986.
50. Cullen, J.W.: A Rationale for Health Promotion in Cancer Control. Preventive Medicine, 15: 442-450, 1986.
51. Cullen, J.W., Greenwald, P.: Prevention of Cancer. In Edelstein, B., Michelson, L. (Eds.): Handbook of Prevention. New York, Plenum Publishing Co., 307-341, 1986.
52. Cullen, J.W.: Design of Cancer Prevention Studies. Cancer Detection and Prevention, 9: 125-138, 1986.
53. Cullen, J.W., McKenna, J.W., and Massey, M.M.: International Control of Smoking and the U.S. Experience. Chest, 89: 206-218, (Supplement) 1986.
54. Cullen, J.W.: Tobacco Use Prevention and Control. Israel Journal of Medical Sciences, 22: 283-300, March-April 1986.
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56. Marcus, A.C., Wheeler, R.C., Cullen, J.W., Crane, L.: Quasi experimental evaluation of the Los Angeles "Know Your Body" program: Knowledge, beliefs, and self-reported behaviors. Preventive Medicine, 16: 803-825, 1987.
57. Mattson, M.E., Pollack, E.S., and Cullen, J.W.: What Are the Odds that Smoking will Kill You? American Journal of Public Health, 77: 425-431, 1987.
58. Greenwald, P.G., Cullen, J.W., and McKenna, J.W.: Cancer Prevention and Control: From Research Through Applications. Journal of the National Cancer Institute, 79: 389-400, 1987.
59. Cullen, J.W.: Smoking Cessation--The Physician's Role: Four Easy Things You Can Do, Primary Care and Cancer, 7/6, 43-47, 1987.
60. Cullen, J.W.: Lawsuits and Statutes to Control Smoking Gain Momentum. Primary Care and Cancer, 7/7, 28-30, 1987.
61. Cullen, J.W.: The National Cancer Institute's Smoking, Tobacco, and Cancer Program. International Cancer News, UICC, October 1987; No. 8:15-16.
62. Cullen, J.W.: National Cancer Institute's Smoking, Tobacco, and Cancer Program. In Aoki, M., Hisamichi, S., Tominaga, S. (Eds): Smoking and Health, Amsterdam, Excerpta Medica, 155-164, 1987.

Chapters/Monographs/Journal Articles (continued):

63. Cullen, J.W.: Status of Behavioral Research in Cancer Prevention. In Holland, J.C., Massie, M.J., and Lesko, L.M. (Eds): Current Concepts in Psycho-Oncology and Aids, New York, Memorial Sloan Kettering, 117-127, 1987.
64. Cullen, J.W., Seites, N.S., and Massey, M.M.: Lifestyle and Cancer Prevention. In Silberfarb, P.M. (Ed.): Psychiatric Aspects of Neoplastic Diseases: Cancer Care Issues for the Psychiatrist. Psychiatric Medicine, 5(4), 361-373, 1987.
65. Cullen, J.W.: Shouldn't Your Office Be a "Smoking Cessation Clinic," Primary Care and Cancer, 8(9), 18-21, 1988.
66. Cullen, J.W.: The National Cancer Institute's Intervention Trials, Cancer, 62(8), 1851-1864, (Supplement) 1988.
67. Greenwald, P., and Cullen, J.W.: The Scientific Basic for Cancer Prevention. Cancer Bulletin, 40(6), 330-333, 1988.
68. Mattson, M., Byar, D., Cullen, J.W., et al: Passive Smoking on Commercial Airline Flights, JAMA, 216(6), 867-872, 1989.
69. Cullen, J.W.: The Impact on Prophylactic Measures on the Control of Lung Cancer in the U.S.A. In Hansen, H.H. (Ed.): Lung Cancer IV, 1989, in press.
70. Cullen, J.W.: Tobacco Use and Cancer Prevention. In DeVita, V.T., Hellman, S., and Rosenberg, S.A. (Eds.): Principles and Practice of Oncology, 1989, in press.
71. Richardson, J.L. and Cullen, J.W.: Compliance Issues in the Management of Patients with Head and Neck Cancer. In Kagan, A.R. and Miles, J. (Eds.): Head and Neck Oncology: Clinical Management, 1989, in press.
72. Cullen, J.W.: Strategies to Stop Smoking. In DeVita, V.T., Hellman, S., and Rosenberg, S.A. (Eds.): Prevention, 1989, in press.
73. Glynn, T., Manley, M., Cullen, J.W.: How Best Can Physicians Have An Impact? Seminars in Oncology, 1989, in press.
74. Shopland, D., Cullen, J.W., Pechacek, T.: Toward a Smoke-Free Society. Seminars in Oncology, 1989, in press.
75. Greenwald, P., Weed, D., Cullen, J.W. (Eds.): Seminars in Oncology, 1989, in press.
76. Cullen, J.W.: The National Cancer Institute's Phases in Cancer Control: Intervention Research. UICC - IARC Monographs on the Evaluation of Primary Prevention Programs, 1989, in press.

Chapters/Monographs/Journal Articles (continued):

77. Glynn, T.J., Cullen, J.W.: Health Promotion Through Smoking Prevention and Cessation - The Need for A Selective Research Agenda, Health Education Research, 1989, in press.
78. Greenwald, P., Cullen, J.W., Kelloff, G., Pierson, H.F.: Chemoprevention of Lung Cancer: Problems and Progress, Chest, (Supplement), 1989, in press.
79. Cullen, J.W.: The National Cancer Institute's Smoking, Tobacco and Cancer Program, Chest (Supplement), 1989, in press.

Selected Lectures Since 1980:

- Keynote Speaker - Annual Meeting of the Cancer Consortium of Ohio "Cancer Prevention: The Realities and the Possibilities" Ohio State University Comprehensive Cancer Center, 1980.
- Keynote Speaker - Health Services Research Seminar (California) "Psychosocial Aspects of Cancer," Department of Psychology and division of Health Services, UCLA, 1980.
- Guest Speaker - USC Pharmaceutical Sciences Seminar (California) "Cancer Prevention," 1981.
- Guest Speaker - Association of American Cancer Institutes (North Carolina) "Cancer Control: Directions and Opportunities for the Future," Duke University, NC, 1981.
- Featured Speaker - ACS/National Conference on the Psychological, Social and Behavioral Medicine Aspects of Cancer: Research and Professional Education Needs and Directions for the 1980's "Behavioral, Psychologic and Social Influences on Risk Factors, Prevention and Early Detection," Minneapolis, MN, 1981.
- Featured Speaker - "Role of the Community Hospital in Cancer Control," Good Samaritan Hospital, Los Angeles, CA, 1981.
- Featured Speaker - University of Rochester Cancer Center Psychobiology Seminar Series, (NY), "Cancer Prevention: Risk Factors," 1981
- Featured Speaker - National Cancer Advisory Board, "Cancer Control in Cancer Centers," NIH, Bethesda, MD, 1981.
- Featured Speaker - Cancer Prevention Seminar Series, "Psychosocial Aspects of Cancer Prevention," UCLA School of Medicine, Los Angeles, CA, 1981.

Selected Lectures (continued):

- Featured Speaker - Behavioral Medicine Faculty Research Seminar, "Cancer Risk Factors: Modification Begins in Early Life," UCLA Department of Psychiatry and Bio-behavioral Sciences, CA, 1982.
- Guest Speaker - Eighth National Meeting of the Association of Community Cancer Centers, "Psychosocial Support: A Contextual View for the 80's," Washington, D.C., 1982.
- Featured Speaker - Western States Conference on Cancer Rehabilitation, "Cancer Rehabilitation in the 1980's," San Francisco, CA, 1982.
- Featured Speaker - Biology of Cancer Seminar, "Cancer Prevention and Control," UCLA Department of Biology, CA, 1982.
- Keynote Speaker - Annual Board Meeting of the Sidney Farber Cancer Institute Cancer Control Program, "Future Directions in Cancer Control." Boston, MA, 1982.
- Featured Speaker - Biology of Cancer Seminar, "Cancer Prevention," UCSD Department of Biology, San Diego, CA, 1982.
- Featured Speaker - Interdepartmental Seminar Series, "Cancer Prevention," Florida State University, Tallahassee, FL, 1983.
- Featured Speaker - "Strategies for Prevention of Cancer," Virginia Polytechnic Institute, Blacksburg, VA, 1983.
- Featured Speaker - "Smoking and Cancer," Dusseldorf, West Germany, 1983.
- Featured Speaker - "Physicians as Intervenors in Smoking Cessation," Dusseldorf, West Germany, 1983.
- Keynote Speaker - Cancer Control Consortium of Ohio, "Smoking and Cancer--The NCI Perspective," Columbus, OH, 1983.
- Keynote Speaker - Interdepartmental Seminar Series, "Cancer Prevention," Marburg University, Marburg, West Germany, 1983.
- Keynote Speaker - "Cancer Prevention and the Year 2000," Los Alamos National Laboratory, Los Alamos, New Mexico, 1984.
- Keynote Speaker - At Human Issues and Cancer: Prevention and Management Meeting, "Psychosocial Research in Cancer Care," American Cancer Society and Arizona State University School of Social Work; Scottsdale, AZ, 1984.
- Featured Speaker - "Lifestyles and Management of Chronic Disease," Good Samaritan Medical Center, Phoenix, AZ, 1984.

Selected Lectures (continued);

- Guest Speaker** - American College of Preventive Medicine, "Risk Reduction and Smoking," Atlanta, GA, 1984.
- Featured Speaker** - ACS/Cancer Prevention and Early Detection Meeting, "Tobacco and Cancer," Orlando, FL, 1984.
- Featured Speaker** - International Society of Preventive Oncology, "Design of Cancer Prevention Studies," Vienna, 1984.
- Featured Speaker** - Johns Hopkins Epidemiology Summer Program, "Cancer Control: Its History and Future," Baltimore, MD, 1985.
- Featured Speaker** - "The National Cancer Program National Goals for Cancer Prevention and Control," National Medical Conference, Las Vegas, NV, 1985.
- Keynote Speaker** - The 4th World Conference on Lung Cancer of the International Association for the Study of Lung Cancer, "Smoking Control," Toronto, Canada, 1985.
- Keynote Speaker** - The 15th Annual Meeting of the European Association for Behavior Therapy, "Modification of Major Health Risks," Munich, West Germany, 1985.
- Featured Speaker** - Third United States/Israel Binational Symposium on Health Technology Assessment, "Tobacco Use Prevention and Control," Jerusalem, 1985.
- Featured Speaker** - Black Caucus Health Brain Trust-Congress of the U.S., "Cancer Prevention and Control," Washington, D.C., 1985.
- Guest Speaker** - National Research Council, Commission on Life Sciences, "Smoking and Cancer," Washington, D.C., 1985.
- Featured Speaker** - Science Counselors' Day at NIH, John E. Fogarty International Center for Advances Study in the Health Sciences, NIH. "Cancer Prevention," Bethesda, MD, 1985.
- Featured Speaker** - WHO, "Cost Effectiveness in Cancer Control: The American Experience," Geneva, Switzerland, 1985.
- Keynote Speaker** - American Society of Preventive Oncology, "Role of Behavioral Research and Modification in the Future of Cancer Control." Bethesda, MD, 1986.
- Featured Speaker** - Association of State and Territorial Dental Directors, "Methods and Findings of the Surgeon General's Advisory Committee on the Health Consequences of Using Smokeless Tobacco," Williamsburg, VA, 1986.

Selected Lectures (continued):

- Keynote Speaker - "National Cancer Institute's Anti-Smoking Program," Aultman Hospital, Canton, OH, 1986.
- Featured Speaker - "Smoking and Cancer," Maudsley Hospital, London, England, 1986.
- Featured Speaker - Golden State Medical Association "The Status of Cancer in Blacks," Reno, NV, 1986.
- Featured Speaker - "The Role of the NCI in Health Promotion--Health Education Policy Issues," George Mason University, Fairfax, VA, 1986.
- Featured Speaker - First National Conference on Chronic Disease Prevention and Control: Identifying Effective Strategies for Health Agencies "Cancer Control: Goals and Objectives of the Year 2000," Centers for Disease Control, Atlanta, GA, 1986.
- Featured Speaker - Joint Committee on Science and Technology of the California State Senate and Assembly, "Testimony on Current Breakthroughs in Cancer Research," USC Campus, Los Angeles, CA, 1986.
- Featured Speaker - Korea-NCI Joint Symposium in Seoul, "Cancer Prevention and Control Program in the U.S.A.," Seoul, Korea, 1986.
- Guest Speaker - International Union Against Cancer, "Evaluation of Primary Prevention Programs," Geneva, Switzerland, 1987.
- Featured Speaker - Smoking Cessation Symposium, "Smoking Cessation-The Physician's Role," Annual meeting of the American College of Physicians, New Orleans, LA, 1987.
- Featured Speaker - "Cancer Control Program at the NCI," Mayo Clinic, Rochester, MN, 1987.
- Featured Speaker - "NCI's Intervention Trials to Prevent Cancer," University of Rochester Medical Center, Rochester, NY, 1987.
- Featured Speaker - "The Health Effects of Smokeless Tobacco Use," World Health Organization, Geneva, Switzerland, 1987.
- Featured Speaker - "Intervention Trials in Cancer Prevention," ACS Second National Conference on Cancer Prevention and Detection, Seattle, WA, 1987.
- Featured Speaker - "Status of Behavioral Research in Cancer Prevention," Memorial Sloan Kettering Cancer Center, NY, 1987.
- Keynote Speaker - "Cancer Prevention," National Institutes of Health Centennial Open House, Bethesda, MD, 1987.

Selected Lectures (continued):

- Featured Speaker - "National Cancer Institute's Cancer Prevention and Control Activities," Indian Health Service Hospital in Anchorage, Alaska, 1987.
- Keynote Speaker - "National Cancer Institute's Smoking, Tobacco, and Cancer Program," 6th World Conference on Smoking and Health, Tokyo, Japan, 1987.
- Keynote Speaker - "National Cancer Institute's Smoking, Tobacco, and Cancer Program for the Year 2000," Shanghai Symposium on Smoking and Health, Shanghai, People's Republic of China, 1987.
- Keynote Speaker - "Cancer Control and the Year 2000," National Health and Education Institute of China, Beijing, People's Republic of China, 1987.
- Featured Speaker - "The NCI's Smoking, Tobacco and Cancer Program," Southwest Oncology Group, New Orleans, LA, 1988.
- Guest Speaker - "Training Primary Care Physicians in Behavioral Medicine," Society of Behavioral Medicine, Boston, MA, 1988.
- Guest Speaker - "Tobacco Control in State Health Departments," Association of State and Territorial Dental Directors/Association of State and Territorial Health Officers, Indianapolis, IN, 1988.
- Keynote Speaker - "National Cancer Institute - Re Year 2000," H. Lee Moffitt Cancer Center and Research Institute, Orlando, FL, 1988.
- Featured Speaker - "Chemoprevention of Lung Cancer: Problems and Progress," Fifth World Conference on Lung Cancer, Interlaken, Switzerland, 1988.
- Featured Speaker - "The National Cancer Institute's Smoking, Tobacco and Cancer Program," Fifth World Conference on Lung Cancer, Interlaken, Switzerland, 1988.
- Keynote Speaker - "Who is Responsible for Health Promotion," Association for Behavioral Sciences and Medical Education, Andover, MA, 1988.
- Featured Speaker - "Phases in Cancer Control: Intervention Research," UICC Epidemiologic and Prevention Programme: Project on the Evaluation of Primary Prevention Programmes, Reykjavik, Iceland, 1988.
- Keynote Speaker - "The Place of Behavioral Research in a Cancer Control Program," National Symposium on Behavioral Research in Cancer, Victoria, Australia, 1988.

Selected Lectures (continued):

Featured Speaker - "The NCI's Approach in Creating a Smoke Free Society," Fifth International Symposium on Cancer Research and AIDS, Venice, Italy, 1989.