

Cancer Information Service

a program of the National Cancer Institute



Community Networks To Reduce Cancer Health Disparities

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Community Networks Program

- **Purpose:** To reduce cancer health disparities by conducting community-based participatory education, training, and research among racial/ethnic minorities and underserved populations

Goal

- Significantly improve access to and utilization of beneficial cancer interventions in communities with cancer health disparities, thereby reducing these disparities

History

- 1989-National Black Leadership Initiative
- 1992-Hispanic Leadership and the Appalachian Leadership Initiatives
- 1999-Special Populations Networks (SPN) for Cancer Awareness, Research, and Training

History (con't)

- 2005 - Center To Reduce Cancer Health Disparities (CRCHD) plans to reorient the focus of the Request for Applications (RFA) from special population awareness research to reducing cancer health disparities among racial/ethnic minority and underserved populations.

Implementation Plan

- The Community Network Program (CNP) will be implemented in three phases:
 - Phase I: Capacity Building
 - Phase II: Research and Training Programs
 - Phase III: Credibility and Sustainability of the CNP

Phase I

- The goal of Phase I is to develop and increase capacity-building to support community-based participatory education, research, and training to reduce cancer health disparities.

Phase I Objectives

- Within the first year, develop a core organizational infrastructure
- Create partnerships with community organizations
 - Primary Prevention Programs
 - Secondary Prevention Programs
 - Cancer Treatment Facilities
 - Research Institutions
 - National Cancer Prevention and Control Organizations
 - Other Government Agencies

Phase I Objectives (Con't)

- Form at least four collaborations with other NCI programs
 - A collaboration with the Cancer Information Service Partnership Program is mandatory.
- Increase utilization of beneficial interventions to reduce cancer health disparities. Perform community-based participatory activities
 - Primary cancer prevention, such as smoking cessation programs
 - Recruitment to clinical trials
 - Education of the community
 - Direct efforts at reaching the hard-to-reach groups

Phase I Objectives (Con't)

- Leverage CNP activities by obtaining non-CRCHD funding for community-based participatory activities
- Important to creating sustainable activities

Integration with Other NCI Programs on Disparities

■ NCI Program Collaborations

- CIS Partnership Program
- NCI Cancer Centers
 - Minority Institution/Cancer Center Partnerships (MI/CCP)
- CCR intramural clinical trials
- DCCPS Centers for Population Health and Health Disparities and other DCCPS cancer disparities programs

Integration with Other NCI Programs on Disparities

■ NCI Program Collaborations

- DCEG epidemiology studies
- DCP prevention, screening/early detection clinical trials
- DCTD treatment clinical trials
- Other NCI/NIH programs with similar goals/objectives

Phase II

- Goal is to develop community-based participatory research and training programs
- Objectives:
 - Community-based participatory research that spans the full spectrum of research
 - Pilot research projects
 - Train researchers
 - Particularly researchers from racial/ethnic minority and underserved populations
 - Cancer prevention and control

Phase III

- Goal is to establish credibility and sustainability of CNP activities that reduce cancer health disparities
- Objectives:
 - Reduce cancer health disparities at the community level
 - Increases in participation in primary and secondary prevention will be evaluated in the short term
 - Decreases in cancer health disparities at the community level will be assessed
 - Obtain funding for research proposals
 - Provide evidence-based information to decision and policy makers at the local, state, and Federal levels

CNP Organization and Staffing

- Principal Investigator (PI)
- Project Manager
- Two to three appropriate employees
- Should also consider:
 - Research Coordinator
 - Policy Analyst
 - Program Evaluator
 - Clinical Coordinator

CNP Organization and Related Activities

- Develop and maintain a CNP Project Steering Committee as advisor
- Establish a Community Advisory Group to serve as the voice of the community and to help disseminate information to the community
- Develop a collaborative relationship with the CIS and seek technical assistance from CIS in developing local cancer prevention and control messages

Annual Cancer Health Disparities Summit

- Annual meeting of all CNP awardees, their staffs, and key persons from their community partnerships
- PI Meetings with CRCHD Director at least annually

Dissemination of Community Networks Research Findings

- Publication in peer-reviewed journals
- Inclusion of findings in Cancer Control PLANET
- Creation of resource implementation kits
- Development of collaborations among CNP grantees

Mechanism of Support

- This RFA uses the NIH Cooperative Agreement (U01) award mechanism
- The PI retains the primary responsibility for planning, directing, and executing the proposed project

Funds Available – Original RFA

- NCI intended to commit approximately \$19 million in FY2005 to fund 18 to 22 grants in response to this RFA
- Up to \$1.75 million per year for a large-scale program
- Up to \$1 million per year for a regional program
- Up to \$0.5 million per year for a local program

Actual Community Networks Program Funding

- \$19M 1st Year – \$100M for 5 years
- 25 Total Cooperative Agreements
 - 6 National (~\$1.1+M/yr)
 - 8 Multi-state or statewide (~\$800K/yr)
 - 11 Local (~\$500K/yr)

Community Networks Program

- Distribution by racial/ethnic and underserved group:
 - 8 African-American
 - 4 Hispanic
 - 4 American Indian and Alaska Native
 - 3 Pacific Islander
 - 2 Asian
 - 4 Poverty

Evaluation Plan for Phase I and II

- CRCHD awarded a contract to conduct a feasibility study for evaluating the CNP
- Approach for Phase I and Phase II evaluation plans developed

Evaluation Questions

- To what extent are the three goals being met?
- Does the CNP impact disparities in breast, cervical, prostate, and colorectal cancers?
- Is each CNP able to improve access to primary and secondary prevention services?

Evaluation Questions

- What are the characteristics of the programs that effectively impact individual, community, and/or policy changes?
- What level of capacity is required at the community level to effectively address education, research, and training needs related to impacting cancer disparities?

Framework for Program Evaluation

- Adapted from CDC's "Framework for Program Evaluation in Public Health"
(MMWR, 9/17/99)
 - Engage stakeholders
 - Describe the program
 - Focus the evaluation plan
 - Gather credible evidence/support
 - Justify conclusions/recommendations
 - Ensure use and share lessons learned