



CPCRN
Cancer Prevention and
Control Research Network



OREGON
Prevention Research Center

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OHSU CPCRNC Overarching Goals

- ❖ Enhance the capacity of rural, American Indian/ Alaska Native (AI/AN) and other underserved Oregon communities to:
 - implement evidence-based, scientifically rigorous interventions for improving diet and physical activity.
 - Expand community-academic initiatives to support engagement and participate in community-based research.
- ❖ Improve institutional capacity to conduct community-based cancer-focused research across Oregon's communities.
- ❖ Leverage the commitment of OHSU and the OHSU KCI to improve community-centered, informed research.
- ❖ Enable cancer prevention, early detection, and health and wellness promotion among cancer survivors in communities that may be both culturally and geographically difficult to reach.

OHSU CPCR N Accomplishments; Yr03

HPV Vaccination Community-Clinical Linkage Project:

- ❖ Identified 1 AI/AN and 1 rural high HPV vaccine uptake community and 1 AI/AN and 1 rural low HPV vaccine uptake community.
- ❖ Conducted key stakeholder interviews (n=6) in the 4 identified communities to determine community-clinical linkages re: HPV vaccination.
- ❖ Unfortunately, only 1 rural CCL dyad included in analyses.

OHSU CPCRNC Accomplishments; Yr03

CDC Colorectal Cancer Screening – Microsimulation Workgroup:

- ❖ Completed data abstraction from Oregon All Payers All Claims Database to allow UNC to run modified microsimulation models.
- ❖ Interim findings disseminated locally and nationally.
- ❖ Qualitative findings (key informant interviews) from CCO/clinic partners used to inform intervention selection for modeling → CPCRNC FQHC WG to inform future interventions.
- ❖ 1st manuscript in press + CRC EBI Implementation grants submitted (NCI, PCORI, etc.)

OHSU CPCRNC Accomplishments; Yr03

Implementing Evidence into Action Workgroup:

- ❖ Bi-annually (ongoing) conducted 7-module EBI training with CPP grantees and community partners using a combination of in-person and webinar (developed by UNC) modalities.
 - REACH: Offered x 4 in 7 rural locations to date
 - IMPACT: Total audience numbers = 127
- ❖ Initiating Train-the-Trainer approach to increase reach starting July 2017.
- ❖ Site lead for R21 DIRH proposal expanding on WG efforts.

OHSU CPCRNC Accomplishments; Yr03

Extension of Implementing Evidence into Action Workgroup efforts:

Community Partnership Program collaboration:

- ❖ Created special call for proposals implementing EBIs specific to obesity prevention:
 - Healthy Corner Stores
 - Community Physical Activity
- ❖ CPP funded 4 organizations at Tier 3; \$50,000/ each
- ❖ Provided:
 - 7-module training
 - targeted technical assistance based on UNC's model and new content from Oregon CPCRNC team

Center-specific Strengths

- ❖ Tribal and Rural Advisory Board
- ❖ Collaboration with Knight Cancer Institute's Community Partnership Program
 - DATA: CPP Grantees/ CPCRNC Trainings
 - Ability to create additional RFAs to address CPCRNC specific objectives
- ❖ Lead on R21 to DIRH
- ❖ Investigator expertise in community-based physical activity and nutrition interventions, implementation science, rural participatory research

Tribal and Rural Advisory Board

- ❖ Member representation: 2 rural PH Depts., an FQHC, a diversity coalition, an Oregon tribe, OR/WA/ID/AK tribes
 - Monthly mtgs + 1 annual in-person mtg
- ❖ 6 members/regions received a \$5,000 mini-grant to support HPV Vaccination efforts
- ❖ Tobacco cessation is top of board members' health priority lists
- ❖ **Stated willingness by members to:
 - Assess national projects for implementation in rural regions
 - Participate as implementation test sites (depending on capacity & resources)



Knight Community Partnership Program

Support

Oregon communities in understanding and addressing their most pressing cancer-related needs.

Enhance

Collaboration between Oregon communities and OHSU to address cancer in Oregon.

Foster

Skills and abilities of communities to enhance long-term sustainability.

Tiers Model

Tier 1: Early
Stage

Tier 2:
Developmental

Tier 3:
Program
Advancement

Congratulations!

182 intent to apply forms

- Cycle 1: 54
- Cycle 2: 34
- Cycle 3: 50
- Cycle 4: 44

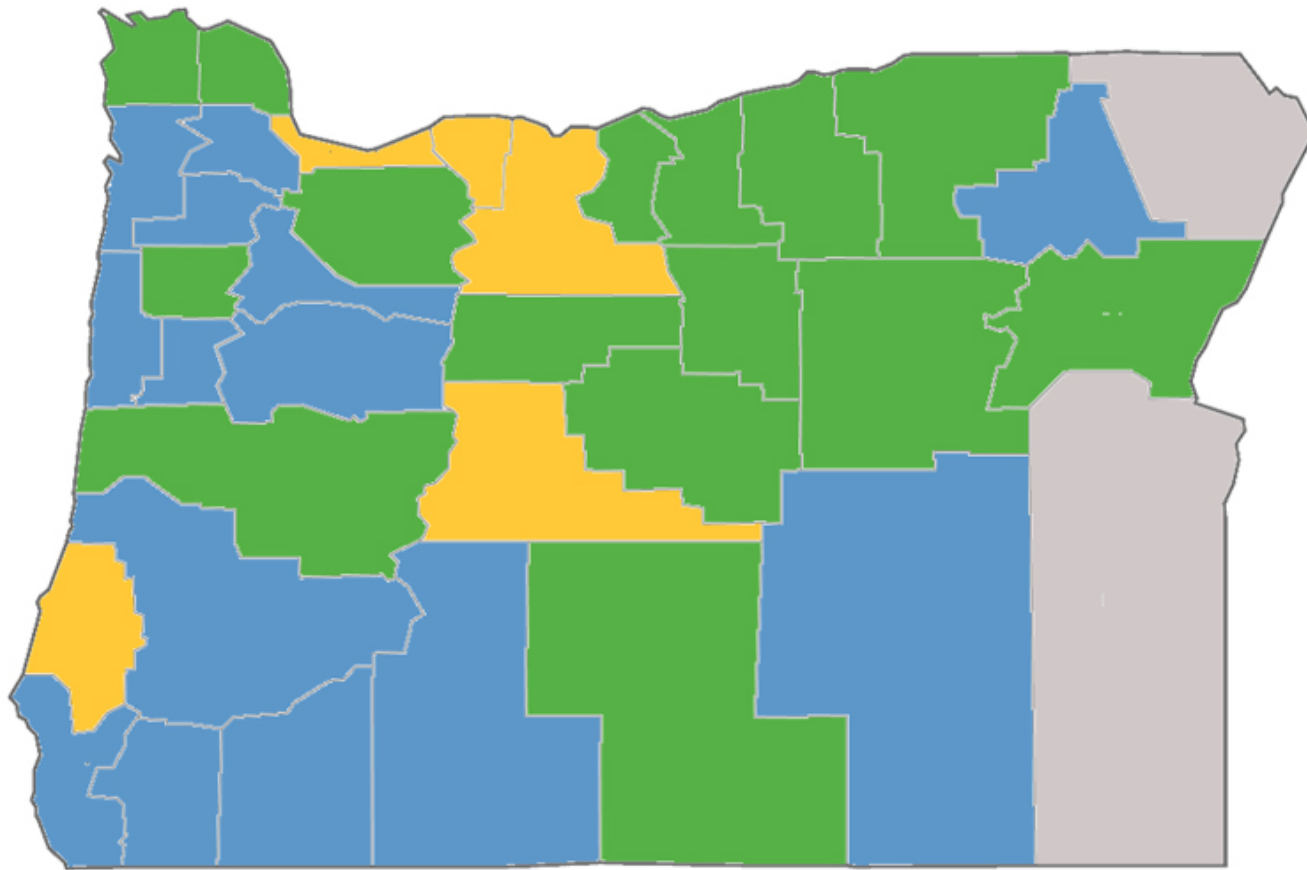
133 proposals submitted

- Cycle 1: 44
- Cycle 2: 21
- Cycle 3: 34
- Cycle 4: 34

65 funded projects!

- Cycle 1: 17
- Cycle 2: 13
- Cycle 3: 13 (including 4 Special Call)
- Cycle 4: 10
- Cycle 5: 12

Potential Impact in Oregon

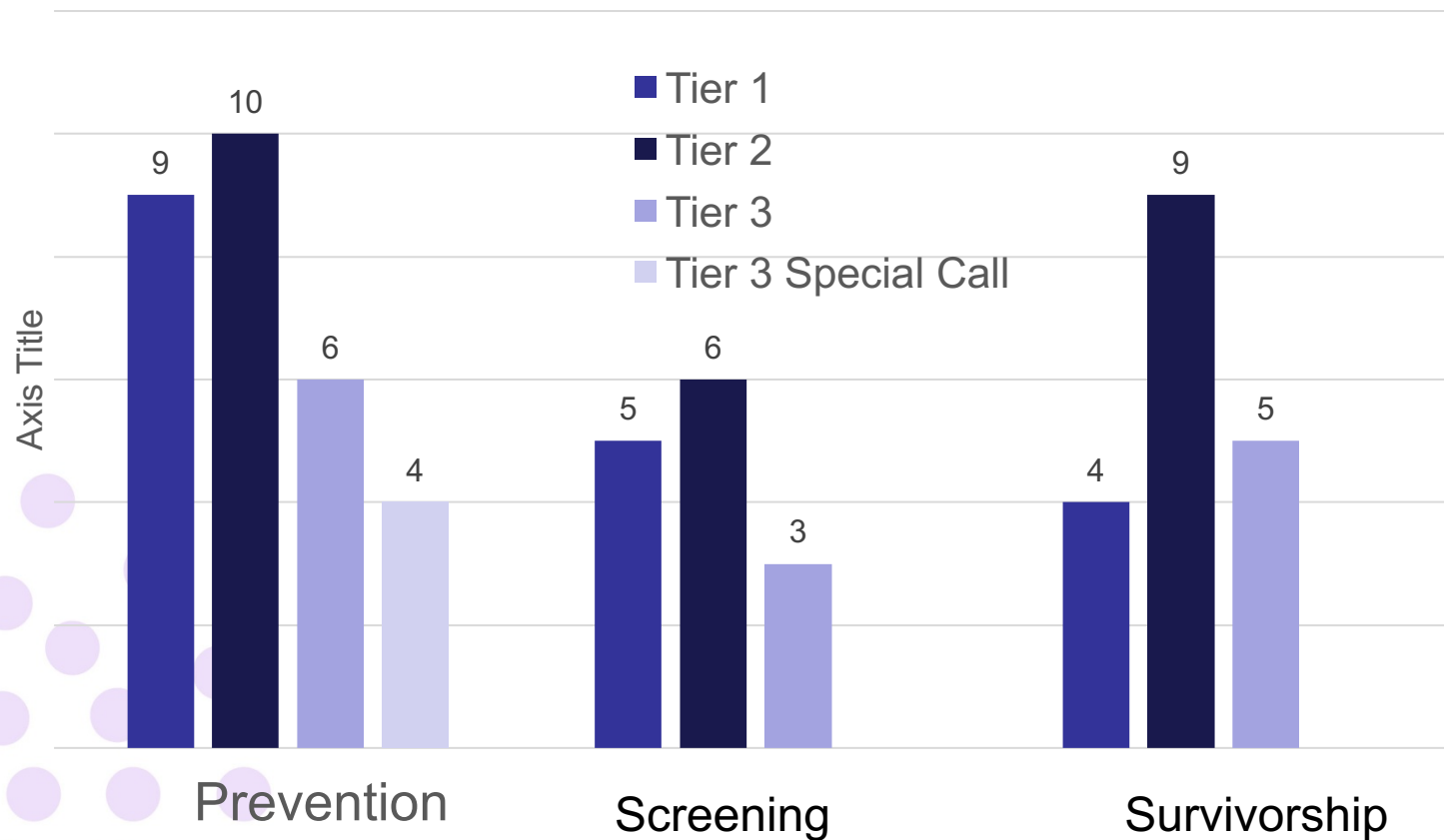


● 1 to 2 funded projects

● 3 to 5 funded projects

● 6 or more funded projects

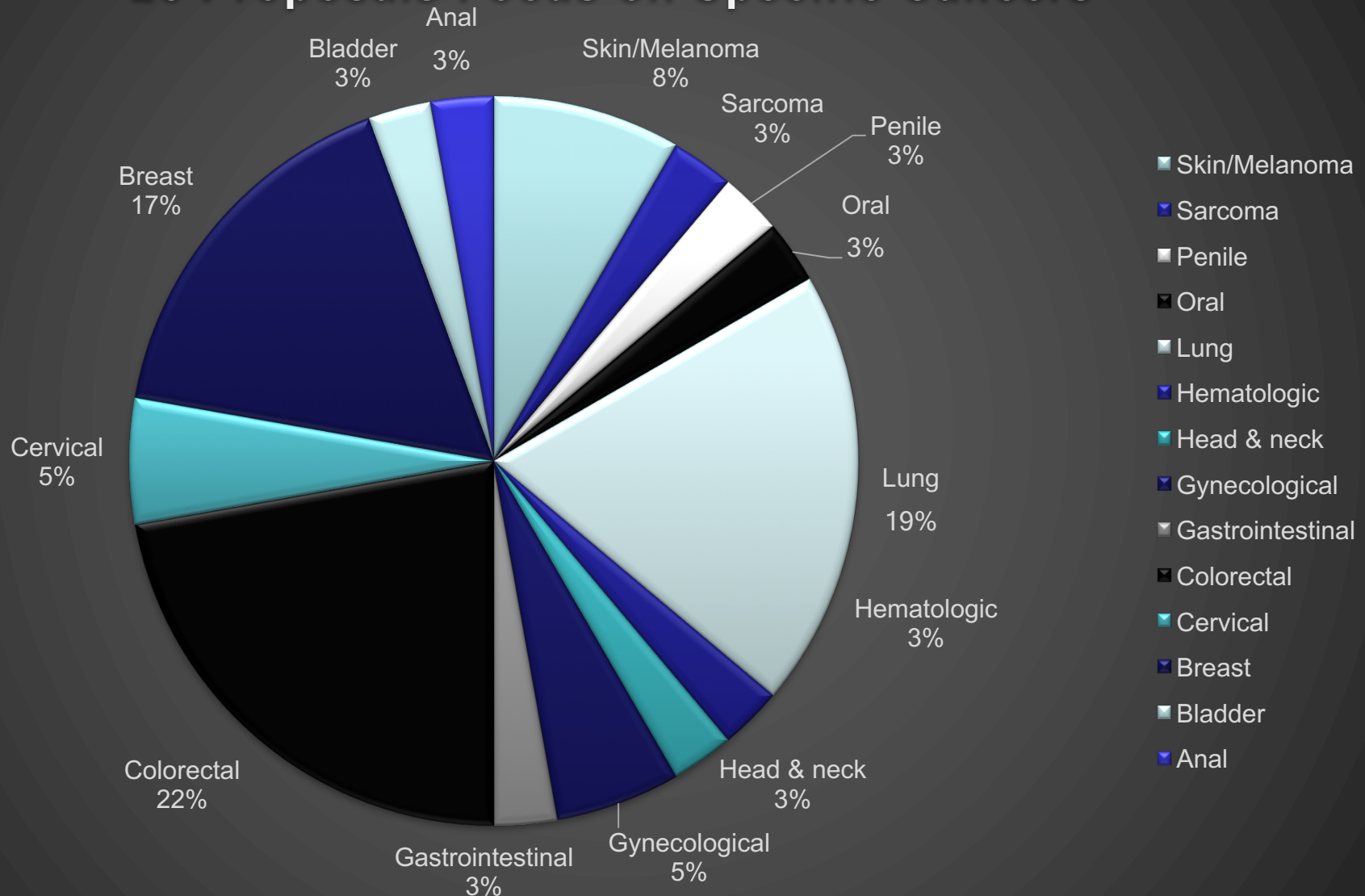
Funded Projects by Cancer Continuum



*Some projects focus on more than one area of the continuum

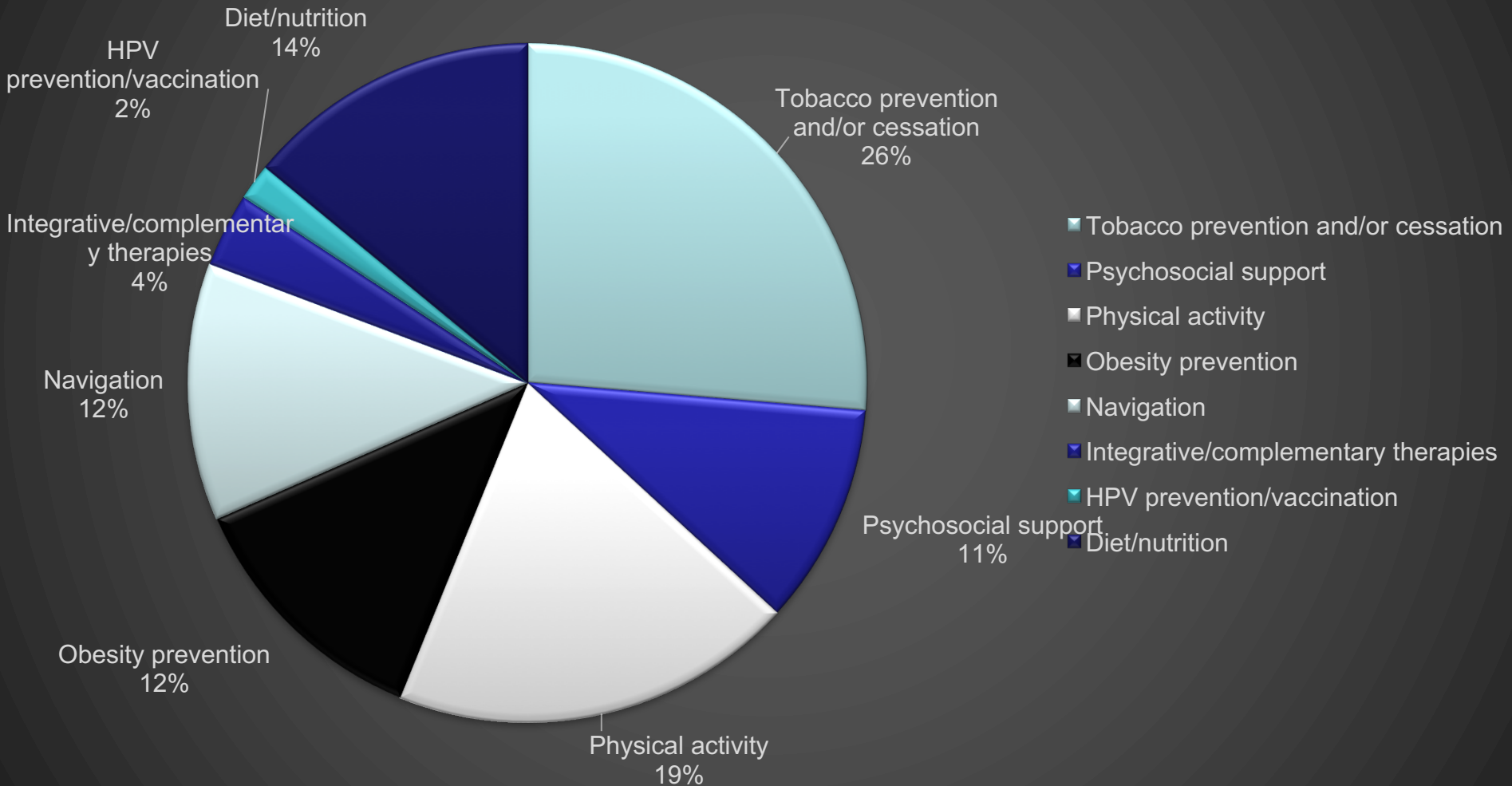
Funded Projects by Cancer Type

25 Proposals Focus on Specific Cancers



Cancer-Related Topics

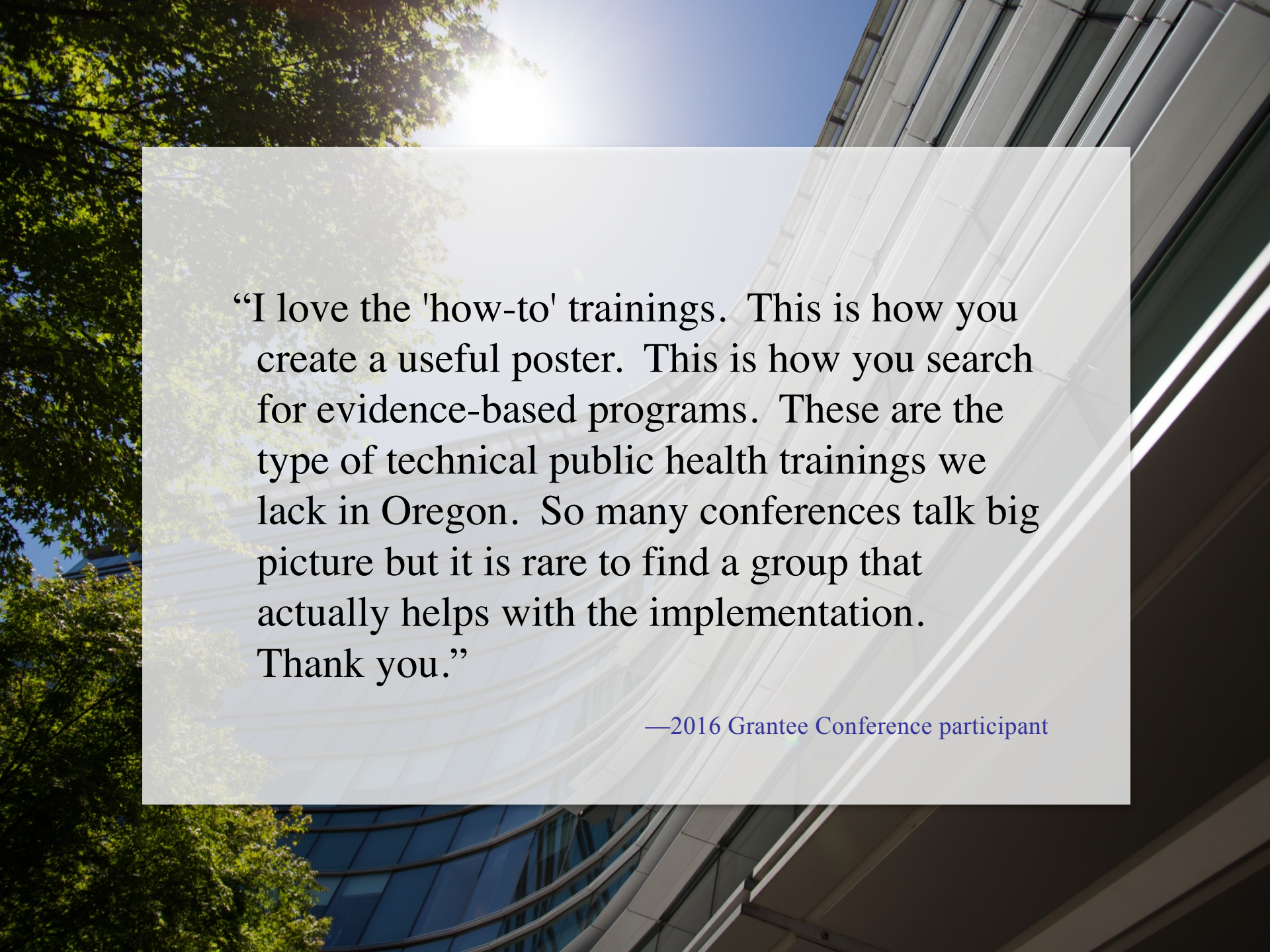
36 proposals Focus on at least one other topic





Program Impact to Date

- 8,111 participants reached
-
- Established 114 partnerships
-
- Each org listed an average of 5.2 partners, and 37% of those are “new” partnerships.
- 71% of completed projects reported having at least one “in-kind” contributing partner.



“I love the 'how-to' trainings. This is how you create a useful poster. This is how you search for evidence-based programs. These are the type of technical public health trainings we lack in Oregon. So many conferences talk big picture but it is rare to find a group that actually helps with the implementation. Thank you.”

—2016 Grantee Conference participant

Oregon's Core Project for Years 04-05

Oregon-wide implementation of community physical activity EBI:

- ❖ In partnership with Knight CPP
- ❖ Collaboration with special call grantee in The Dalles, OR (“Step it up, Dalles”)
- ❖ Targeted to underserved communities
- ❖ Program and research opportunities:
 - Impact of single EBI across state
 - Determinants of implementation success

Oregon's Investigator Team Expertise

- ❖ **Kerri Winters-Stone, PhD:** Co-lead Knight Cancer Prevention and Control
 - ❖ Exercise Physiologist with focus on use of prescriptive exercise programming to prevent and manage chronic disease (cancer, osteoporosis, frailty).
 - ❖ Exercise as a strategy to improve and extend the lives of cancer survivors.
 - ❖ Characterizing toxicities associated with cancer treatment that can potentially be remediated with exercise
 - ❖ Use of body worn sensors to characterize mobility (NCI SBIR)
 - ❖ 9 externally funded exercise RCTs (2 R01s, 2 R21s, P30 project, Komen, Livestrong and ACS funding)
 - ❖ Database of ~1000 cancer survivors participating in clinical trials with common measures
 - ❖ Symptoms
 - ❖ QOL
 - ❖ Physical fitness and physical functioning (objective & patient-report)
 - ❖ Body composition (bone, fat, lean mass, sarcopenic obesity) by DXA

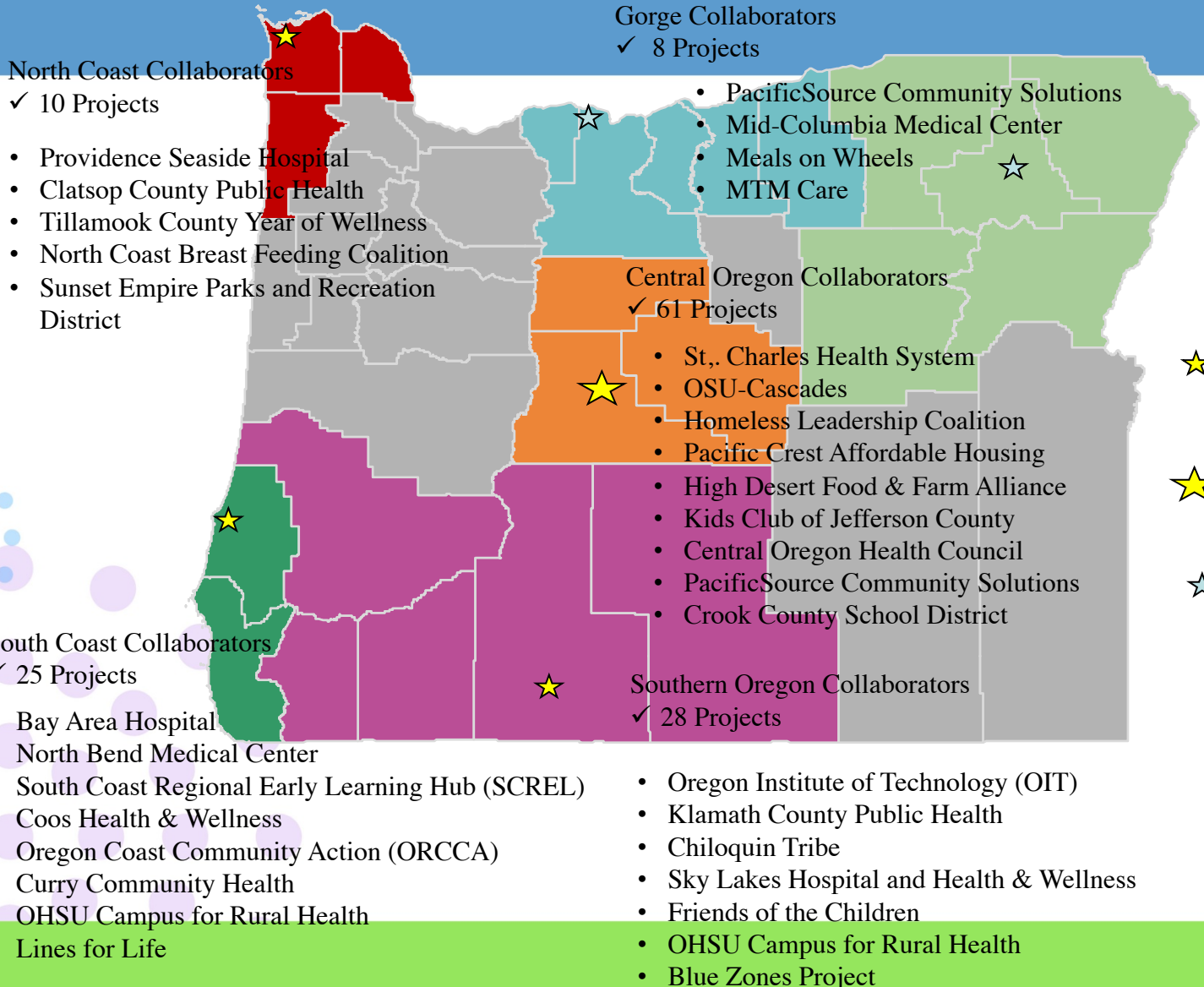
Oregon's Investigator Team Expertise

❖ Cynthia Perry, PhD, RN

- ❖ Expert in utilizing Community-Based Participatory Research (CBPR) methods for physical activity dissemination and implementation
 - ❖ Additional interest in nutrition/obesity prevention
- ❖ Aiming to eliminate health disparities by promoting physical activity across the lifespan in underserved and disenfranchised populations.
- ❖ Funding
 - ❖ R03 CA197657 NCI (Perry) 7/2015-6/2017. *Fuerte y Sanas Adaptation of an Exercise and Nutrition Program for Rural Latinas*
 - ❖ Internal Innovations Grant, (Perry) 2/2016-2/2017. *Preliminary work for Implementation of an Exercise Program for Breast Cancer Survivors into the Clinical Setting*
 - ❖ 1R01HS023940-01, AHRQ (Cohen) 4/2016- 4/2019. *Evaluating System Change to Advance Learning and Take Evidence to Scale (ESCALATES)*

Oregon's Investigator Team Expertise

- ❖ **Jackilen Shannon, PhD:**
- ❖ Nutritional Epidemiologist has created substantial momentum in leading a grassroots effort to embed research within the fabric of Oregon, by building strong academic-community partnerships and rigorous evaluation methodology.
 - ❖ Director Knight Community Engaged Research Program
 - ❖ Lead, OCTRI Community and Collaboration Core
 - ❖ Director, OHSU Integrated Program in Community Research



- ★ Regional Community Research Coalitions with Research Liaison
- ★ Community Research Hub & Regional Community Research Coalition
- ☆ Developing Regional Community Research Coalition

Oregon's Investigator Team Expertise

❖ **Melinda Davis, PhD:**

- ❖ Director, Community Engagement, Oregon Rural Practice Research Network.
- ❖ K-award mentee focused on rural health disparities in colorectal cancer. Methods expertise in practice facilitation, stakeholder engagement, implementation science. Dr. Davis received the 2016 Emerging Leader Award from the Oregon Public Health Association.

❖ **Paige Farris, MSW :**

- ❖ Program Director.
- ❖ Leads Tribal and Rural Advisory Board
- ❖ Developed Community Human Subjects Protection Program
- ❖ Directs Clinical trials .

