

Community Outreach and Engagement Fred Hutch/University of Washington/ Seattle Children's Cancer Consortium

Catchment Area

The Fred Hutch/University of Washington/Seattle Children's Cancer Consortium (the Consortium), a collaboration of the Fred Hutchinson Cancer Research Center, UW, Seattle Children's (SC), and Seattle Cancer Care Alliance (SCCA), encompasses partners who work together to address the full spectrum of cancer research in the Consortium's catchment area and reduce the burden of cancer in the populations we serve.

The Consortium's catchment area includes 13 Washington (WA) counties lying to the west of the Cascade Mountains that divide the state. The catchment area includes 5.03 million individuals of whom 32.3 percent identify as belonging to underrepresented racial/ethnic groups as follows: Asian (10.6 percent), Latino (9.8 percent), Black (4.7 percent), American Indian/Alaskan Native (AI/AN) (1.1 percent), Native Hawaiian and other Pacific Islander (NHOPI) (0.8 percent), and other or multiple races (4.7 percent).

Of patients cared for by the Consortium, 83 percent come from the catchment area. The catchment area is identical to the region served by the Cancer Surveillance System at Fred Hutch, which monitors cancer incidence and mortality as part of NCI's Surveillance, Epidemiology, and End Results (SEER) Registry.



Community Engagement Focus

The community engagement focus addressed by this supplement, *"Integrating Basic Science and Community-Engaged Research Teams: Lost in Translation No More,"* is the integration of Community Outreach and Engagement (COE) with the Cancer Basic Biology Program (CBBP), one of our Consortium Research Programs.

At a Glance

The overall goal of this project is to increase the Consortium's transdisciplinary capacity for community-engaged research via bidirectional linkages to ensure that cancer issues of importance in our catchment area, including among the underrepresented, are identified and addressed by the Consortium. Our specific focus is on basic and translational bench science, which is typically at the furthest reach from clinical or public health populations. Without involvement by community stakeholders and community-engaged researchers at the early translational phase, cancer inequities will persist for underrepresented populations because their unique needs and interests are not taken into consideration.

Collaborators

The stakeholders involved in this project include our Office of COE faculty and staff, community partners who are involved in our Community Action Coalition, CBBP leadership, and basic science and translational Consortium researchers.

The Approach

For this project, the Consortium’s Office of COE and CBBP pursued a capacity-building project plan, including:

1. A **Transdisciplinary Consult Service** to match basic science researchers with clinical and/or population sciences researchers and/or community stakeholders to provide them with project-specific input in order to promote transdisciplinary community engagement in research.

This has been incorporated into the Recruitment & Retention Resource (RRR) and is now part of the Office of COE. In order to request a consultation, investigators fill out an intake form with preliminary information about their needs, and RRR staff follow up to set up an initial discussion. Office of COE faculty and staff have presented to various research groups across the Consortium about the RRR so that research teams are aware this resource now exists.

2. A **Transdisciplinary Research Retreat** with basic, clinical, and population sciences researchers and Community Action Coalition members to catalyze ideas for early translational, transdisciplinary pilot projects.

This half-day research retreat was held on December 8, 2020, via Zoom, with a total of 39 attendees. The agenda featured a transdisciplinary researcher as the keynote speaker and four presentations from Consortium basic scientists. Each presentation was followed by a facilitated discussion and brainstorm to discuss potential pilot projects. The Consortium Translational Pilot Grants Program (see #3 below) and the RRR (see #1 above) were also highlighted and discussed as resources.

3. A **Consortium Translational Pilot Grants Program** that requires transdisciplinary, early translational phase projects relevant to the catchment area with a basic scientist and a community stakeholder.

The Request For Applications for this pilot grants program was released in mid-November 2020 prior to the Transdisciplinary Research Retreat. Applications were due in January 2021, and projects were funded to start as early as February 1, 2021. Three projects were funded; details appear in the table below.

Principal Investigator	Project Title	Population Focus
Neelendu Dey, MD (Fred Hutch, Clinical Research Division)	<i>Advancing equity in colorectal cancer screening through microbiome profiling</i>	Black/African American, Asian American/Pacific Islander
David Hockenbery, MD (Fred Hutch, Human Biology Division)	<i>Links between dysbiotic gut microbiomes and obesity-associated colorectal carcinomas</i>	Suburban and rural-dwelling
Manoj Menon, MD (Fred Hutch, Vaccine & Infectious Disease Division)	<i>Pilot Study of an Early Genomic Profiling Program in Patients with Newly Diagnosed Advanced Stage Non-Small Cell Lung Cancer</i>	Vulnerable residents of King County, WA (non-English speaking poor, the uninsured, and the underinsured)

4. **Transdisciplinary Symposium and Report to the Community** to present on pilot program grantees' progress and best practices for establishing transdisciplinary teams. As of December 2021, grantees have recently completed Institutional Review Board reviews and are beginning project implementation. The symposium will be implemented in 2022 after grantees have completed implementation.

Implementation Guidance

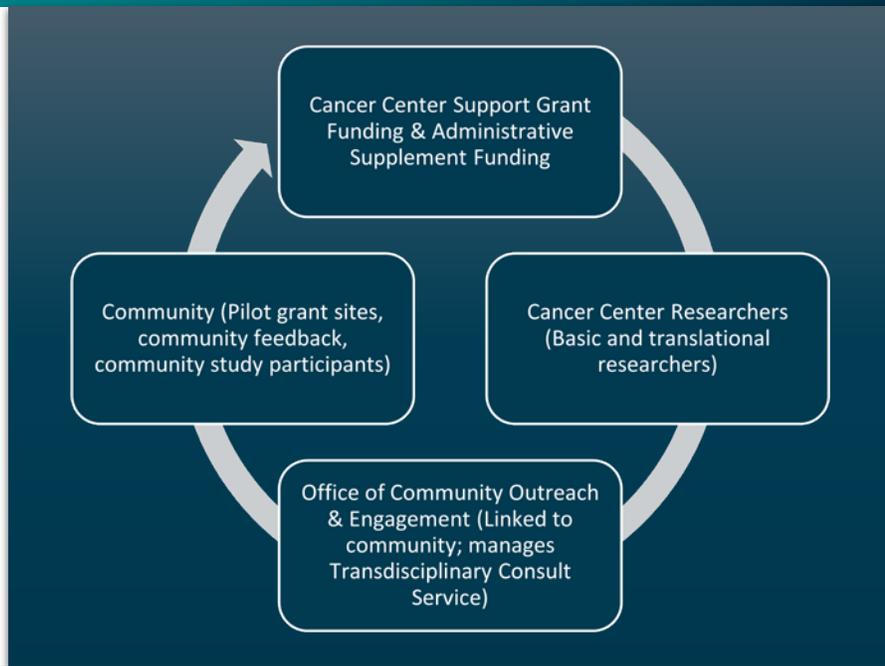
Implementation Tip #1

It is challenging for basic and translational researchers to conceive projects that will engage community members. Most researchers studying specific cancers that disproportionately affect catchment area populations are scientifically sophisticated, though lack the context for their research in light of community needs. Therefore, program leaders need to make direct, one-on-one contact with program members whose research appears translatable to underserved populations, and foster productive early connections with community partners. Inviting potential partners to discuss ideas at the Transdisciplinary Research Retreat was helpful in educating the investigators and increasing enthusiasm.

Pilot funding was key to moving the projects to a phase where specific aims and approaches were formulated. Frequent personal contact and follow-up are critical for other centers hoping to foster community-based and focused science to address cancer inequities.

Implementation Tip #2

Longstanding, pervasive structural inequities present a barrier to any new intervention or therapy, and may counterintuitively create or worsen health disparities. Equity in research is everyone's responsibility; thus, it is best to design research studies with equity in mind from the start and not as an afterthought. This may be a shift in practice at many centers, as it requires trust, open dialogue, frequent communication, patience, and a commitment to learning. ***Centers looking to improve community-engaged research need better visibility and dedicated time and resources as part of the Cancer Center Support Grant infrastructure in order to sustain interest and foster new collaborative discussion and efforts.***



Find Out More

The Office of Community Outreach and Engagement's (OCOE) vision is to promote health equity by generating and facilitating cancer research that addresses and reduces cancer health disparities in the catchment area through authentic engagement, a community-engaged/community-based participatory research approach, and education driven by community need: <https://www.fredhutch.org/healthdisparities>.

This project was funded through an administrative supplement from the National Cancer Institute to the Fred Hutchinson Cancer Research Center (3P30CA046934-32S5).

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Community outreach and engagement (COE) activities across the translational research continuum

National Cancer Institute (NCI)-designated cancer centers' COE efforts should span all cancer center programs, including basic, clinical, translational, and population research. In FY20, NCI issued a call for Cancer Center Administrative Supplements to support COE activities that focus on either basic science or the translation of evidence-based interventions into community practice. The long-term goal of the supplement initiative is to build capacity for cancer centers' COE programs to adapt and implement evidence-based programs and successfully collaborate with cancer center investigators across research programs and in partnership with community members. To learn more, visit us at <https://cancercontrol.cancer.gov/research-emphasis/coe>