

Community Outreach and Engagement Robert H. Lurie Comprehensive Cancer Center of Northwestern University

Catchment Area

The Robert H. Lurie Comprehensive Cancer Center (LCC) of Northwestern Medicine (NM) and Northwestern University (NU) is located in downtown Chicago and serves a greater catchment area (LCC-CA) of northeastern Illinois. The LCC-CA, known as “Metropolitan Chicago,” is made up of nine individual counties: Cook, DuPage, Grundy, Kane, Kankakee, Kendall, Lake, McHenry, and Will. Exceedingly dense, these nine counties account for more than two-thirds of Illinois’ 12.7 million total state residents.



Lurie Cancer Center Catchment Area (LCC-CA)

Community Engagement Focus

Building upon LCC’s long-standing commitment to community, this project aimed to fill and jumpstart an identified gap in LCC outreach and engagement efforts between LCC basic and translational science teams with the LCC-CA. With the potential to create more direct,

bidirectional avenues of connection between research and community, this project strove to improve LCC’s basic and translational science programs through science that is better informed and grounded in the cancer center’s catchment area and its diverse underserved populations that bear the brunt of cancer disparities.

At a Glance

This project established and piloted a nine-member community scientist program made up of six community stakeholders from the LCC-CA and three LCC basic and translational scientists. Over the program’s duration, community stakeholders working as community scientists met with LCC basic and translational science teams to discuss research from a community perspective in virtual, small-group meetings facilitated by program staff.

The six community scientists involved in the program represent a number of diverse community organizations and institutions in the LCC-CA, and brought significant community, external scientific, and educational perspectives to program meetings. The three participating LCC basic and translational scientists conduct research on lung, prostate, and breast cancer—the three cancers most deeply impacting the LCC-CA.

Collaborators

With support from the LCC Office of Equity and Minority Health (OEMH) and the Center for Health Equity Transformation (CHET), the community scientist program was made possible through the willingness and participation of six LCC community stakeholders and three LCC basic and translational scientists. LCC community stakeholders involved in the program as community

scientists are listed as follows: Candace Henley, founder and CEO of the Blue Hat Foundation; Joanne Glenn, RN, MBA, founder and president of Women on Top of Their Game Foundation; José E. López, executive director of the Puerto Rican Cultural Center; Rosemarie Rogers, patient advocate and 25-year breast cancer survivor; Carmen Velásquez, founder of Alivio Medical Center; and Jorge Girotti, PhD, MHA, assistant professor of Medical Education, University of Illinois College of Medicine.

LCC basic and translational scientists involved in the community scientist program are listed as follows: Yanis Bumber, MD, PhD, Cancer Epigenetics & Nuclear Dynamics (Lung); Qi Cao, PhD, Cancer Epigenetics & Nuclear Dynamics (Prostate); and Deyu Fang, PhD, Tumor Environment and Metastasis (Breast).

Community Scientist Cohort



C. Henley J. Girotti R. Rogers C. Velásquez J. López J. Glenn

Program Team



M. Simon A. Murphy T. Manning

LCC Science Teams



Q. Cao D. Fang Y. Bumber

The Approach

By facilitating opportunities for bidirectional connection between community stakeholders as community scientists and LCC basic and translational scientists, the LCC community scientist program aimed to (1) establish operating norms of how community can truly bridge with basic and translational scientists and vice versa, (2) contribute to the community appropriateness and scientific rigor of LCC research toward benefiting minority communities across the LCC-CA that bear the brunt of cancer disparities, and (3) build effective dissemination strategies that are more responsive to, and mindful of, the LCC-CA and cancer disparities.

At the program's start, an informational kick-off meeting featuring all program participants was held. This meeting served the dual function of allowing program participants the opportunity to familiarize themselves with each other, as well as with the community scientist program model (adapted from the established, evidence-based University of Florida Clinical and Translational Science Institute Citizen Scientist Program). Community scientists were also paired into three teams of two at this meeting.

In the subsequent six months, community scientist pairs rotated through meeting with each of the three participating LCC basic and translational scientists in two-month blocks. During each two-month block, community scientist pairs met virtually with their LCC counterparts twice in small-group meetings facilitated by program staff. In these small-group meetings, participants worked collaboratively to co-create infographics regarding the LCC basic and translational scientists' research that would be suitable for dissemination among the LCC-CA.

Amid the infographic co-creation process, LCC basic and translational scientists further received valuable insight from community scientists particularly regarding (1) the accessibility of the language with which they explain their work and (2) the applicability and significance of their research to the communities in the LCC-CA that community scientists themselves directly serve.

At the end of each two-month block, community scientist pairs rotated to work with the next participating LCC basic and translational scientists. Infographics produced in prior blocks were critiqued and refined, and further served as catalysts for discussion in new rotations. By the program's conclusion, each community scientist pair had worked with each LCC basic and translational science team.

Implementation Guidance

Implementation Tip

In establishing a community scientist program, trust must be cultivated meaningfully and intentionally at all stages of the implementation process.

Utilizing program staff who hold established relationships with both community stakeholders and researchers as mutually trusted facilitators represents one key strategy to promote trust among program participants. Further usage of small-sized meeting groups and adequate allowance of time for longitudinal interaction between community stakeholders and scientists promoted trust, understanding, and open exchange among program participants.

Sustainability Plans

Moving forward, the LCC community scientist program will seek additional funding for sustainment of the community scientist cohort. Additional LCC basic and translational science teams will also be integrated into future programming.

From small-group meeting dialogue, program participants identified a need for an accessible, centralized platform to organize and disseminate the infographics created and resources discussed throughout the community scientist program; a web-based platform through which both community members and scientists will be able to access relevant information regarding cancer and cancer research is currently in early stages of development. The website, which will look to promote both in-reach to LCC scientists and outreach to community members of the LCC-CA, represents one effort to continue and expand community outreach and engagement at LCC.

There is a language of the science, and then there is a language of the people. And I don't think they are necessarily exclusive.

—Community scientist in conversation during a program small-group meeting



Street-level view of the Robert H. Lurie Comprehensive Cancer Center (LCC) of Northwestern University campus, located in Chicago, Illinois

Find Out More

The Robert H. Lurie Comprehensive Cancer Center of Northwestern University aims to impact health and well-being in the communities of Metropolitan Chicago through advocacy, education, outreach, and engagement. To find out more, please visit:

<https://www.cancer.northwestern.edu/about/about-lurie/community-engagement.html>

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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>