

Program for the Elimination of Cancer Disparities (PECaD)

Siteman Cancer Center's Community Outreach and Engagement
Report to the Stakeholders July 2019 - December 2020



Published November 2021

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On the cover: PECaD leaders, staff, and community partners at the Screen Sweep event on October 17, 2020.

About the Program for the Elimination of Cancer Disparities (PECaD)

Overview

Siteman Cancer Center's Program for the Elimination of Cancer Disparities (PECaD) fulfills NCI's Community Outreach and Engagement requirements for NCI-designated cancer centers.

Our mission is to assure that all cancer patients and communities benefit from the clinical and scientific advances at Siteman to reduce the cancer burden and related disparities, while engaging communities to promote health equity across Siteman's catchment and beyond.

The main priority areas are:

- To accelerate outreach, education, and access to clinical resources in Siteman's catchment
- To evaluate the cancer burden and related disparities in Siteman's catchment population
- To support catchment-focused research and promote diverse participation in clinical trials
- To evaluate community engagement and progress toward achieving goals

PECaD seeks to promote equity across all populations. Cancer burden and related disparities are monitored and addressed specifically within populations receiving fewer access and resources, specifically those related to race and ethnicity (minority), geography (rural), and access to services (populations in medically underserved areas - MUAs), as well as the interaction between those disparities.

Moving into our 17th year, PECaD recognizes and celebrates our past accomplishments, acknowledges we still have more work to do, and looks forward to the future and our continued outreach and impact on reducing cancer burden in our community. We are excited to share many of this year's accomplishments, including expanded virtual outreach, new partnerships in the faith-based community and outreach with the LGBTQ+ community, and our first healthcare provider education event.

Funding

PECaD has been funded by the National Cancer Institute at the National Institutes of Health (U54 CA153460) and the National Cancer Institute at the National Institutes of Health (P30 CA091842-14S1). Funds are also received through The Foundation for Barnes-Jewish Hospital, Washington University School of Medicine, and the Siteman Cancer Center. PECaD also receives additional funding from philanthropic organizations for specific programs and projects, such as STLMGAC, the Kaufman Foundation, and the Huber Foundation.

BY THE NUMBERS 2019-2020

34 

SCIENTIFIC
PAPERS
PUBLISHED

PECAD
**FACEBOOK
GROUP**
AND
EMAIL LISTS
GREW BY
252
PEOPLE

OVER 30
PRESENTATIONS
given by
**FACULTY
and STAFF**



FIND US ON
Facebook!

1,340 **COMMUNITY
MEMBERS**

Attended OUTREACH EVENTS in 2019

27 GRADUATES
OF THE FIRST COHORT OF THE
REACH
TRAINING PROGRAM



PECAD EXHIBITED
at
34 COMMUNITY
EVENTS



6 VIRTUAL EVENTS

427
COMMUNITY
MEMBERS
ATTENDED

232
SCREENED
AT

11
PROSTATE
CANCER EVENTS



 **SITEMAN
CANCER CENTER**

 Washington
University in St. Louis
SCHOOL OF MEDICINE

 **BJC HealthCare**

Who We Are

PECaD Leadership Team

Bettina Drake, PhD, MPH - Professor of Surgery, Associate Director of Community Outreach and Engagement (COE)
Graham Colditz, MD, DrPH - Niess-Gain Professor of Surgery
Kia Davis, ScD, MPH - Assistant Professor of Surgery. Focus: social determinates of health and organizational and policy change, DEAC, BCaP, PRAB, CRFT
Lannis Hall, MD, MPH - Director of Radiation Oncology. Focus: clinical trials monitoring, Prostate Cancer Coalition, Breast Cancer Community Partnership
Aimee James, PhD, MPH - Professor of Surgery. Focus: sociocultural and psychological factors affecting colorectal cancer screening, Colon Cancer Community Partnership
Vetta Sanders-Thompson, PhD - E. Desmond Lee Professor of Racial and Ethnic Diversity and Associate Dean for Equity, Diversity, and Inclusion, Brown School. Focus: Co-Director of the Institute for Public Health, Center for Community Health Partnerships and Research; Healthcare disparities, HPV workgroup, CRFT, BCaP
Jean Wang, MD, PhD - Professor of Medicine and Professor of Surgery. Focus: Missouri Colorectal Roundtable leader

PECaD Staff

Amy Ayala, MPH - St. Louis Regional Breast Health Navigator Workgroup co-facilitator
Sarah Chavez, PhD - Senior Scientist
Sarah Humble, MS - Data Manager
Krystal Johnson, MSW - BCaP and St. Louis Regional Breast Health Navigator Workgroup co-facilitator, breast cancer outreach in North County, and community outreach and education
Nora Leahy, MPH, CHES - LGBTQIA+ and rural outreach, COVID Community Impact Project, rural supplement, and CME project coordination
Kelly Oman, PhD - Media and Marketing
Jennifer Tappenden, RHIA - Data Manager
Marilyn Wilson, MSW - PECaD Program Supervisor
Keisha Windham, DPA - Prostate cancer (PSA) screening and outreach, PCCP coordinator, community outreach and education

Acknowledgments

We wish to acknowledge and thank the members of our Disparities Elimination Advisory Committee (DEAC), cancer site-specific community partnerships, and many community organizations for their dedication and collaboration to eliminate cancer disparities in our region.

Community Advisory Board and Partnership Groups

Disparities Elimination Advisory Committee (DEAC)

DEAC Membership (July 2019-December 2020)

Academic and Community Co-Chairs

Graham Colditz, MD, DrPH	Neiss-Gain Professor of Surgery, Washington University School of Medicine; Former Director, PECaD
Maranda Witherspoon Richardson, MPPA	Owner, MWR Consulting

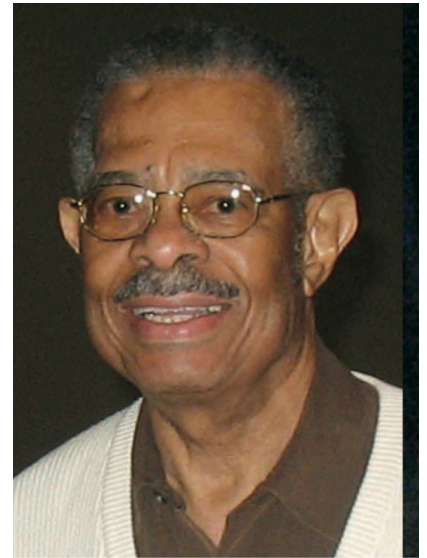
Community Members

Denise Hooks-Anderson, MD	Assistant Professor, Saint Louis University School of Medicine; Department of Family and Community Medicine
Galen Gritts, BS	American Indian & Community Volunteer, Lutheran Indian Ministries
Sherrill Jackson, RN, CPNP, MSA	President, The Breakfast Club, Inc. & Breast Cancer Survivor
Saundi Kloeckener	American Indian & Community Volunteer; Retired School Teacher of Rockwood School District
Rev. Edmund E. Lowe, Sr.	Diversity and Inclusion Manager, Alzheimer's Association, Greater Missouri Chapter
Donald Suggs, DDS	Publisher & Owner, St. Louis American Newspaper
Sherry Taluc	American Indian & Breast Cancer Survivor; Community Volunteer
Kellie Thompson, MSW	Director, Kathryn M. Buder Center for American Indian Studies
Sal Valadez	Diversity, Outreach & Marketing Representative, MKLDC Diversity Initiative, LiUNA

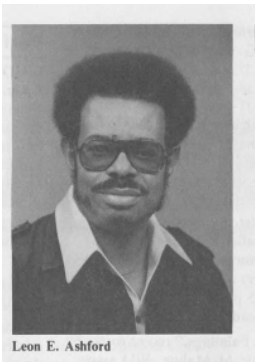
In Memory of Dr. Leon Ashford

PECaD would like to remember and celebrate the life of Leon E. Ashford, PhD, a prostate cancer survivor and longtime member of the Disparities Elimination Advisory Committee, the Prostate Cancer Community Partnership, and the Prostate Cancer Coalition, who passed away in March 2020 at the age of 90. Dr. Ashford was a fierce champion of prostate cancer education, screening, and research throughout the St. Louis region and beyond.

Dr. Ashford became an advocate for prostate cancer screening after a screening test during an annual checkup led to a diagnosis of prostate cancer in 1996. Speaking to St. Louis Public Radio in 2015, Ashford said, "Based on the pathology report, I don't think I would have survived. Persons should be aware that if you're in a high-risk group, and if it's been detected in your family... you certainly should be tested early." He credited the success of his treatment with the fact that his urologist caught the cancer early.



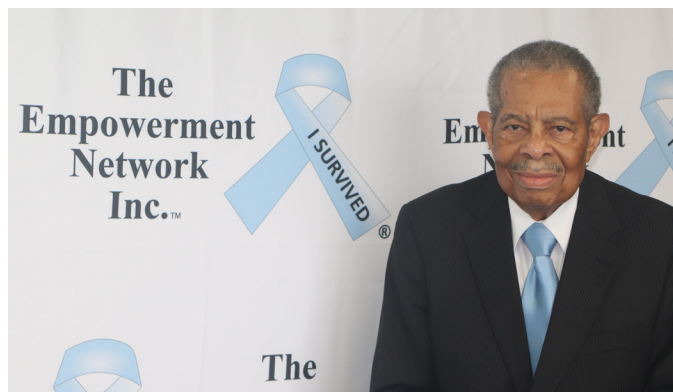
He joined PECaD at its inception in 2003 and remained active in education and screening advocacy for the next 17 years. Prior to that, he had volunteered with the American Cancer Society on prostate cancer advocacy. When the Empowerment Network was founded in 2008, Dr. Ashford assisted with training members of the Speakers' Bureau and developing visual aids for prostate cancer education.



Ashford earned his PhD in counselling psychology from Washington University in St. Louis in 1980 before being appointed director of the university's Student Educational Service. He retired in 1995 after 39 years with the university, during which time he played many roles, from academic advisor to member of the Pre-Medical Advisory Committee. Prior to his doctoral work, he earned his MA in guidance and counseling in 1970 from the University of Missouri in St. Louis and a BA with a major in biology from Lincoln University in Jefferson City, MO, in 1953. In his student services role, he worked closely with low income and first generation college students to enhance their

chance of academic success by helping them navigate obstacles and make use of services and resources at the university.

In addition to his work on prostate screening advocacy, Dr. Ashford served on the St. Louis Mental Health Board of Trustees, helped high school youths better themselves through Omega Psi Phi's Operation Manhood program, and chaired the community and civic affairs committee of the Omega fraternity, among many other service roles.



Cancer Community Partnership Updates

PECaD's site-specific cancer community partnerships foster ongoing dialogue with community stakeholders, including individuals and community organizations in the region. Each partnership works to refine program strategies that are designed to reduce and ultimately eliminate cancer disparities. The partnerships create an avenue through which community cancer needs and priorities can be reflected in the implementation of PECaD activities. The membership of each partnership consists of cancer survivors and advocates, representatives from community healthcare organizations and community-based organizations, community members passionate about cancer, and academic faculty members and staff. Partnerships meet regularly to review progress and refine goals and projects as needed.

PECaD has three site-specific community partnerships: breast cancer, colorectal cancer, and prostate cancer. Each group has actively participated in notable activities the past year that advance PECaD's mission.

Breast Cancer Community Partnership

Co-Leads: Donna Jeffe and Deb Custer

Originally launched in 2005, the Breast Cancer Community Partnership (BCaP)'s main goal has been to work towards eliminating breast cancer in the St. Louis region through multiple strategies, including community outreach and education, research, and training initiatives to address disparities in breast cancer prevention and survivorship. Under the guidance of co-chair and long-time PECaD supporter Debra Custer, BSHS, and co-chair Donna Jeffe, PhD, professor of medicine at Washington University School of Medicine, PECaD faculty and staff have successfully revitalized BCaP after its relaunch in November 2016. BCaP members continue to meet every month through zoom during the pandemic.

BCaP has grown this past year with new community partners attending its monthly meetings. New members include:

- Angela Knight, MSN Senior Manager, Patient Support Services & Breast Program, Siteman Cancer Center
- Helen Blair, Breast Navigator for Christian Hospital and Northwest Healthcare
- Dr. Tamara D. Otey, PhD, RN, Assistant Professor Goldfarb School of Nursing Barnes Jewish College
- Sarah Gaston, Patient Navigator, Gateway to Hope
- Kym Radford, Outreach Coordinator, Center for Community Health Partnership and Research

Several BCaP member organizations, including The Breakfast Club, Pink Ribbon Girls, Gateway to Hope, The Pink Angels Foundation, Valeda's Hope, and Komen Missouri, along with Washington University faculty (Drs. Vetta Thompson, Christine Ekenga, and Donna Jeffe) submitted a collaborative grant application last year in response to the American Cancer Society and Pfizer Global Medical Grants "Integrated Approach to Breast Health Equity Competitive Grant Program" request for proposals.

In this proposal, we sought to address significant disparities in breast cancer mortality between Black/African American and white women. Even without funding through this grant, BCaP and Siteman Cancer Center were able to address several of the objectives proposed in our application, and BCaP members have continued our collaborative, community-engaged efforts to reduce breast cancer health disparities in the St. Louis metropolitan area, and especially in North St. Louis County, where we continue to observe persistent health disparities.

Colorectal Cancer Community Partnership



Lead: Aimee James

The Colorectal Cancer Community Partnership (CCCP) has continued to meet quarterly and aims to provide cancer education and promote screening to underserved community members across St. Louis and our surrounding regions.

Our walk-through inflatable colon, which educates people about polyps and colon cancer, was featured at six outreach events across the metropolitan region and Illinois before the COVID-19 pandemic put a halt to in-person events. In September 2019, the partnership took part in the W. Jane Gee Colon Cancer Fundraiser, benefitting the Colorectal Cancer Alliance and St. Louis Food Outreach. In February 2020, the CCCP also held an “8 Ways to Prevent Colon Cancer” event at the Maryland Heights Community Center for Oasis, a non-profit educational organization focused on lifelong learning.




Above: The inflatable colon on display at a health fair at the Hussman Corporation in March 2020.



Role of Government and Insurance in Paying for Cancer Coverage

Timothy D. McBride, PhD
*Bernard Becker Professor, Brown School
Co-Director, Center for Health Economics and Policy, Institute for Public Health
Washington University in St. Louis*


To continue providing educational outreach during the pandemic, the CCCP developed a virtual educational series. The first event, “Colorectal Cancer Screening Options during COVID-19” with Paul Wise, MD, sought to address concerns about low screening rates due to the pandemic by describing the safety protocols in place in hospitals and clinics. Timothy McBride, PhD, presented the second event, “Understanding Medicare and Medicaid Coverage for Cancer Care” ahead of the Missouri Medicaid expansion vote in August. We look forward to offering these events quarterly.








CONNECTING LIFE AND SCIENCE

Colorectal Cancer Screening Options During COVID-19

Paul E. Wise, MD
*Professor of Surgery
Program Director, General Surgery Residency
Director, Inherited Colorectal Cancer and Polyposis Registry*





www.siteman.wustl.edu 800-620-3605

Left top: Dr. Timothy McBride presents as part of our virtual educational speaker series.

Left bottom: Dr. Paul Wise presents on colorectal cancer screening options during the COVID-19 pandemic.

Prostate Cancer Community Partnership

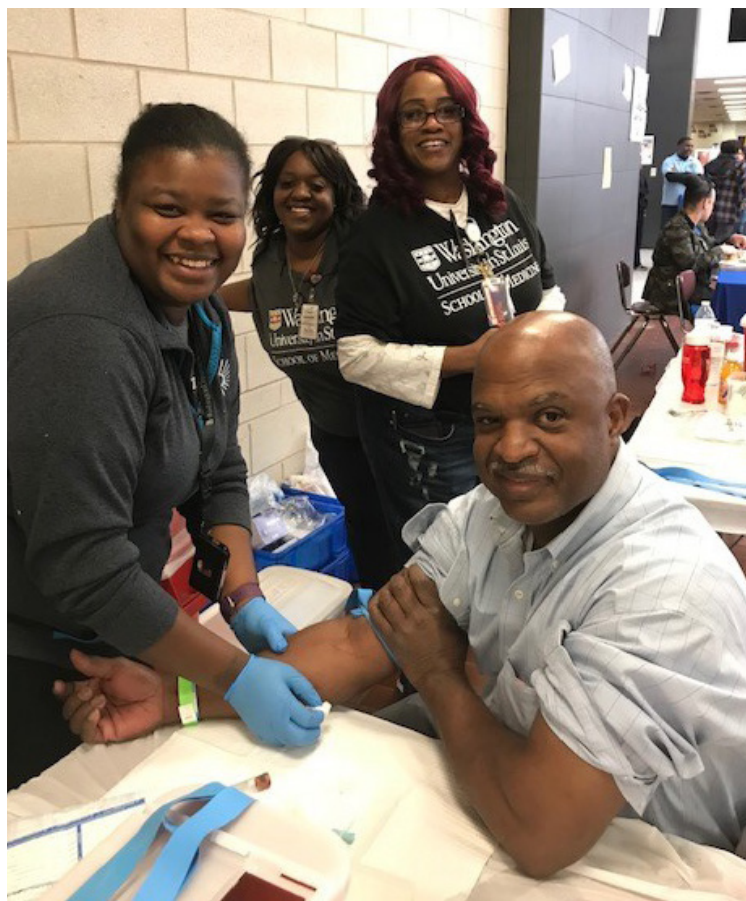
Co-leads: Bettina Drake and Dewey Helms

In the past year, the Prostate Cancer Community Partnership (PCCP) welcomed two new members to the partnership. Nhail Tutlam, PhD, serves as the St. Louis County Department of Health's Chronic Disease Epidemiology Manager. Dr. Tutlam is also an adjunct professor at the Brown School at Washington University in St. Louis and teaches a chronic disease prevention course at Lindenwood University.

The partnership also welcomed Lennie Harrison III. Mr. Harrison is a State Farm Insurance Agent and has been a prominent member of the 100 Black Men of Metropolitan St. Louis. Under his leadership, Mr. Harrison developed a "Barbershop tour," where he and several nurses visited barbershops in underserved areas to provide blood pressure and other wellness screenings.

The PCCP's partner organization, The Empowerment Network (TEN), participated in ZERO—The End of Prostate Cancer's virtual walk. St. Louis, the Twin Cities, Omaha and Chicago were the major Midwestern cities that participated in the virtual platform. Over 100 participants registered for the event. The walk featured a thirty-minute presentation from medical professionals and survivors. Mervin Shahid, Sr., TEN's founder and board president, served on the panel to address prostate cancer disparities, specifically among African American men. The Empowerment Network managed to raise over \$1,400 in its efforts to support further treatment for prostate cancer.

The PCCP also provided free prostate-specific antigen (PSA) testing on Saturday, September 12th, 2020, at St. Alphonsus Liguori "Rock" church in St. Louis. The screening was a collaboration with Siteman Cancer Center and the St. Louis Urban League. Community members were able to receive free mammograms in addition to blood pressure and glucose checks. The PCCP screened 16 men during this event.



Dr. Arnold Bullock participating in PSA screening event

The Prostate Cancer Coalition, a group of providers led by Lannis Hall, MD, MPH and Arnold Bullock, MD, has worked to implement a Health Maintenance Alert in EPIC to promote guideline-appropriate prostate cancer screening.

Breast Navigator Workgroup

Lead: Heidi Miller

This year, 2020, marked the tenth anniversary of the St. Louis Regional Breast Navigator Workgroup. This dedicated group of advocates continued to meet virtually through the pandemic, working together to navigate patients through breast cancer screening and management despite increased fear and decreased resources.

The St. Louis Regional Breast Navigator Workgroup was established in 2010 based on a recommendation from the St. Louis Integrated Health Network (IHN) Breast Cancer Referral Initiative and the PECaD Breast Cancer Community Partnership. The workgroup's main goals are to improve communication among regional navigators and to develop more efficient and effective processes for breast cancer screening, referral, diagnosis, treatment, and survivorship. PECaD supports and underwrites the activities of the workgroup, including administrative and logistical support, securing facilitator time, and fostering progress on discussion topics for the purpose of aiding the group's advancement.

Membership of the St. Louis Regional Breast Navigator Workgroup includes front-line navigator representation from breast health centers, community health centers, other nonprofit primary-care providers, cancer-related nonprofit organizations, the St. Louis Integrated Health Network, the Show Me Healthy Women Program (the Breast and Cervical Cancer Early Detection Program for Missouri), patient-advocacy organizations, and the St. Louis City and County Health Departments. Over the years, navigators have traveled from a 150-mile radius to attend the meetings, both from Missouri and Illinois.

The breast navigator workgroup continues to meet regularly with high attendance to address important issues and discuss potential solutions. The agendas and featured topics are selected and prioritized by the navigators themselves.

Within the changing healthcare landscape, the navigators continue to work together to advocate for optimal breast health care for their patients. This workgroup helps participants strategize how to navigate patients through multiple contexts, including the pandemic, prohibitively high-deductible health plans, the lack of insurance while awaiting Medicaid expansion in Missouri, and other multifaceted challenges as they arise.

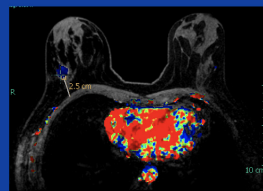
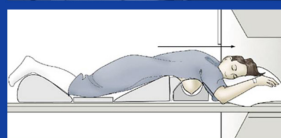
Moving Towards Tailored Breast Cancer Screening - and Breast Imaging in Time of COVID-19

Debbie Lee Bennett, M.D.

April 23, 2020

St. Louis Regional Breast Health Navigator Workgroup

Breast MRI



Breast Navigator Workgroup: Featured Topics

October 2020	Impacts of Racism on our Patients' Healthcare
July 2020	Community Health Workers: Financial Resources for Patients
April 2020	Breast Radiology: Moving Towards Tailored Breast Cancer Screening
October 2019	What Matters Most Study: Helping Women Decide Best Surgical Option
July 2019	Update on Cancer Screening Recommendations
April 2019	Understanding Breast Cancer Prevention
January 2019	Sexual Health for Women with Breast Cancer

Community Outreach Initiatives

Signature Events

Breaking Barriers Provider Education Event

On Friday, February 28th, PECaD hosted “Breaking Barriers: Reducing Disparities, Increasing Access,” an education event for doctors, nurses, and other care providers focused on reducing breast cancer disparities. The event emphasized the role providers can play in reducing breast cancer disparities in the St. Louis region. Participants provided an overview of the barriers to breast cancer screening and healthcare many in our region face, introduced resources available to providers and patients, discussed how providers can advocate for their patients and enable their patients to advocate for themselves, and more.

Fox 2 anchor Derrion Henderson was the event MC, with entertainment from violinist Andrea Bell Darris. Bettina Drake, PhD, MPH, associate director of community outreach and engagement for Siteman Cancer Center, kicked off the event with an overview of the data on disparities in the St. Louis region. Next, Molly Guthrie, director of Public Policy and Advocacy at Susan G. Komen, gave the keynote address on how policy affects disparities and the advocacy work that Komen is doing. Our panel discussion was moderated by Vetta Sanders Thompson, PhD, the E. Desmond Lee Professor of Racial and Ethnic Diversity in the Brown School at WashU. On the panel was Suzanne Fontaine, Executive Director, Susan G. Komen Missouri; Graham Colditz, MD, DrPH, Niess-Gain Professor of Surgery and Division Chief, Public Health Sciences, WashU School of Medicine; Katherine Glover-Collins, MD, PhD, Assistant Professor of Surgery at WUSM; Sherrill Jackson, president of The Breakfast Club, Inc.; Heather Burns, LMSW, Patient Navigator and Outreach Coordinator at Gateway to Hope; and Paula Fox, Show Me Healthy Women, MO Department of Health and Senior Services. They spoke about health policy and advocacy, community outreach, communication with patients in the clinic, community support, and other local resources and services. They also took questions from the audience.



This event was co-hosted by Siteman Cancer Center’s Program for the Elimination of Cancer Disparities, the Breakfast Club, Inc.; the Hatz4Hearts Foundation, and the Pink Angels Foundation.

Top: Panelists discuss breast cancer disparities and resources in the St. Louis north county area.

Middle: Fox 2 news anchor Derrion Henderson as MC.

Left: Volunteers offered educational resources.

Smart Health

We continued our popular Smart Health Events in 2019 with Smart Health East St. Louis on August 24, 2019. We held this event for the first time at the City Hall of East St. Louis, and opened the event with remarks from the mayor of East St. Louis and a performance by The Witness Project on breast cancer awareness. Presentations during the event covered prostate health, clinical trials, colon health, breast health, HPV screening, and cancer prevention. We also had a panel discussion comprising cancer survivors, care givers, and doctors who shared their personal stories and took questions from participants. The event ended with a lively Zumba exercise demonstration.

Smart Health was created to provide our community partners with deeper learning opportunities pertaining to cancer prevention and research, to use as a platform to report back on research results, and to educate individuals and families about research and its relevance. These events are designed to deliver intensive small group health education with the goal of increasing screening rates.

During the event, participants also had an opportunity to browse our research poster gallery which displays research findings on specific cancer sites.



Clockwise from top left: Volunteers hand out educational material; an attendee browses PECaD research posters; Jason Lee, MD, PhD, presents on breast health; Raymond Marbury shares his experience as a prostate cancer survivor; East St. Louis mayor Robert Easton III opens the event with a welcome; The Witness Project perform to raise awareness of breast cancer.

Ferguson-Florissant Health and Safety Fair

On October 26, 2019, we held our first Health and Safety Fair at the STEAM Academy at McCluer South-Berkeley High School in Ferguson, MO. In partnership with the Ferguson-Florissant School District, this family-friendly event brought together over 35 vendors to inform and educate community members on community resources for nutrition, safety, health insurance, health screenings, vision and dental services, employment, family support, financial literacy and more.



Above: Photos of community organizations taking part in the Ferguson-Florissant Health and Safety Fair.

Below: Dr. Lannis Hall speaks at the Clergy Roundtable Breakfast.

Clergy Roundtable Breakfast

On November 4, 2019, PECaD hosted the Clergy Roundtable pastoral breakfast at Greater Grace Church. Seventy-six individuals attended the event, which included 45 pastors from the Greater St. Louis area. Attendees received information on cancer screenings, detection/prevention educational materials, and information on cancer advocacy groups. The goal was to establish a partnership with the participating ministers and provide screening at their community health events. The event participants enjoyed networking and learning about the different types of resources for cancer prevention and education.



Outreach Partnerships

Siteman Mammography Van Collaboration

In 2019 we began working with the Siteman Mammography Van at screening sites to provide breast cancer education to women. Through this partnership, PECaD staff are able to reach women who have not scheduled a mammogram to answer their questions, help dispel any concern they have around cancer screening, and assist them with getting a mammogram with the van, if they meet the qualifications.



PECaD staff use our 8 Ways brochures to educate people on cancer screening and prevention, and help connect people with screening and care resources in the St. Louis area. For those in need of further connections to resources, PECaD staff are able to connect them with healthcare navigators who can help.

We have put our Mammography Van educational outreach into practice at multiple locations in North and South City and North County, with plans for expansion into other areas where breast cancer rates are above average. We work with the mammography van coordinators to identify the locations most in need of educational outreach to break down barriers to screening.

St. Louis County Library Partnership

PECaD began partnering with the St. Louis County Library in November 2019 to offer educational materials at branch locations in north county. As part of this partnership, we distributed all versions of our 8 Ways brochures at the Bridgeton Trails, Rock Road, Lewis and Clark, and Jamestown Bluffs library locations. In 2022, we will begin offering events as part of their online educational series.

Clean Sweep and Screen Sweep

On Saturday, September 12, 2020, PECaD partnered with the Siteman Mammography Van and BJC at the Urban League's Clean Sweep event at St. Alphonsus Liguori "Rock" Church on Grand Boulevard. PECaD offered free prostate-specific antigen (PSA) screenings to men ages 40 and older. The Urban League community van offered free blood pressure, glucose, and cholesterol screenings. The Siteman mammography van screened 16 women at the event. PECaD screened 16 men for prostate cancer.

The collaborative effort continued on Saturday, October 17, 2020, at the Urban League's Screen Sweep event. The event was held at the League's Victor Roberts Building on North Kingshighway. Fourteen women received free mammograms from the Siteman van. PECaD screened a total of 11 men at the event.

Right: PECaD outreach team members providing PSA screenings at the Screen Sweep event.

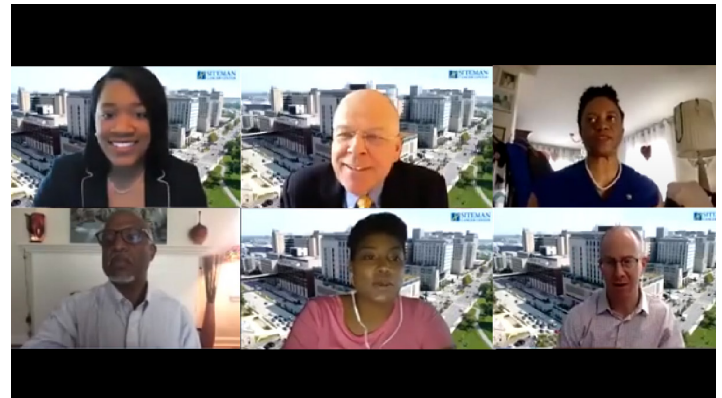


Response to COVID

Virtual Town Hall Events

On Thursday, May 14th, PECaD held our first Virtual Town Hall to address COVID-19 and Cancer Disparities. The event was a great success, with over 100 people in attendance and many important questions asked and answered, like: “What impact will the pandemic have on cancer care?” “What cancer-related services are currently being offered?”

“What services have been put on hold?” and “How might COVID-19 be affecting our mental health?”



Panelists for this event included Dr. Arnold Bullock, WUSM professor of urology; PECaD program director Dr. Graham Colditz, Chief of the the Division of Public Health Sciences and Neiss-Gain Professor of Surgery, WUSM; Dr. Ryan Fields, Chief of Surgical Oncology, WUSM; Angela Fleming Brown, CEO of the St. Louis Regional Health Commission and PrepareSTL; and Dr. Gladys Smith, clinical psychologist.

Based on the success of this event, we held two more popular virtual town halls in 2020: “COVID-19 and Cancer Disparities in Latino, Hispanic, and Immigrant Communities” was held on July 15, and “Can We Talk: Colorectal Screening and Care” was held on behalf of the CCCP on November 12th.

Recordings of these events live on the new PECaD YouTube page, for anyone who was unable to attend live. At the time of publication, these events had been viewed 237 times.

Virtual Events with Siteman Survivorship Program

PECaD took part in two events in 2020 with the Siteman Survivorship Program. On October 5 - 9, we participated in the Siteman Wellness Fair, a virtual event with videos of information and resources available for survivors to view on demand. PECaD provided information about our program and the range of outreach and education we provide.

The second event was “Health and Hope for the Holidays,” on December 3rd. This virtual panel discussion covered survivorship health and wellness topics like healthy eating and stress-management, with a guided meditation.

QR Code Flyers

To facilitate the distribution of our educational materials while following COVID-safe guidelines, we produced “no-touch” flyers and posters that featured our 8 Ways to Prevent Cancer, with a QR code that community members can scan with their smartphones to access our full brochures. The posters have been displayed at community events and our flyers are available on the mammography van and wherever in-person outreach is permitted. All of these materials also feature a URL for the 8 Ways, for those with no smart phone.

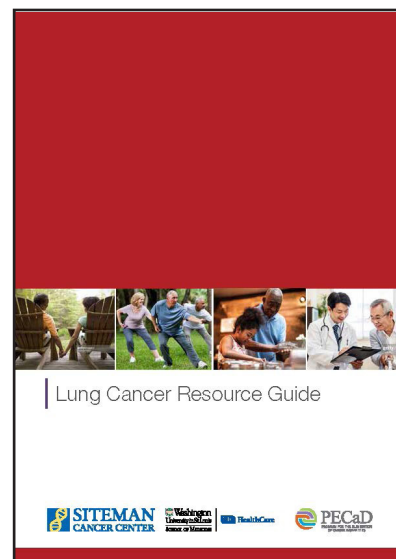


Newly Developed Materials

Metastatic Lung Cancer Resource Guide

This year we began work on a new resource guide for Metastatic Lung Cancer. Like our other resource guides, this new guide will compile resources in the St. Louis region and nationally available for lung cancer screening, care, support, and survivorship. The Metastatic Lung Cancer resource guide is funded by Lilly Oncology.

We have also updated our Breast, Prostate, and Colon resource guides. This update includes an expanded resource list and new design with larger print.



LGBTQ+ 8 Ways and Outreach

The PECaD outreach team had planned to attend the St. Louis PrideFest 2020 to support the LGBTQ community and share our new LGBTQ+ 8 Ways to Better Health brochure. Sadly, the in-person portion of this event was cancelled due to the COVID-19 pandemic. Instead, we took part in the Pride Care-A-Van, a 150-vehicle car parade that made its way through numerous St. Louis neighborhoods on June 28, 2020. We weren't able to share our new brochure during the event, but have plans to extend our outreach in the LGBTQ community in the next year.



Top: Our new Lung Cancer Resource Guide

Middle left: New LGBTQ+ 8 Ways to Better Health brochure

Middle Right: Outreach staff decorated their vehicle to participate in the Pride Care-A-Van car parade.

Facing Page:

Top: Panelists discuss the potential impact of COVID-19 on cancer disparities in the region at our first Virtual Town Hall event

Bottom: Our 8 Ways to Stay Healthy and Prevent Cancer redesigned into a touchless QR Code poster.

Online Outreach

PECaD Newsletter

As part of our efforts to increase our virtual engagement with the community in response to the COVID-19 pandemic, PECaD shifted its newsletter distribution from quarterly to monthly. This enabled us to get the word out on our many online events more quickly, and helped us continue our mission to disseminate important education on how to stay healthy. With the more frequent newsletter schedule came a new design and focused efforts to increase the email list. Over the course of the year, that email list grew to 467 people.



A community newsletter from the
Program for the Elimination of Cancer Disparities of the Alvin J.
Siteman Cancer Center at Barnes-Jewish Hospital and Washington
University School of Medicine.

Breaking Barriers: Inaugural Physician Education Event Was a Success

On Friday, February 28th, PECaD hosted "Breaking Barriers: Reducing Disparities, Increasing Access," an education event for doctors, nurses, and other care providers focused on reducing breast cancer disparities. The event emphasized the role providers can play in reducing breast cancer disparities in the St. Louis region. Participants provided an overview of the barriers to breast

PECaD on Facebook

We also focused on growing our Facebook community as part of our online engagement efforts. Over the course of the year, our Facebook following grew to 149 people. In addition to posting about our outreach events and materials, this year we featured some of our community partners in videos that described the work they do and the resources they had to offer during the COVID-19 pandemic. We featured videos from Food Outreach and the Cancer Support Community of Greater St. Louis.

YouTube

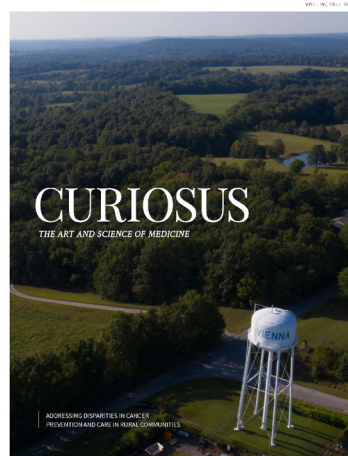
To compile and share recordings of our online events, this year we started a PECaD YouTube channel. While all of our events have a strong audience turnout, on the YouTube page these events can usually garner double or triple the viewership. This helps us to reach people whose schedules don't allow them to attend the live events or who don't hear about the events in time.

Rural Outreach

In 2019 we focused a lot of outreach effort on the rural areas of our catchment. In addition to our For Your Health articles (see pg. 20) and the REACH program (see pg. 25), we began adapting the 8 Ways for a rural audience. This included creating posters of the 8 ways for display in clinics and creating a version of the 8 Ways brochure with tips tailored for life in a rural setting. The 8 Ways brochure also includes a list of local resources.

Our research and outreach was also featured in the cover article of *Curiosus*, a magazine published by Barnes Jewish Hospital with a circulation of 170,000 people.

Right: An article on our cancer prevention outreach in rural Missouri and Illinois in *Curiosus* magazine.



Mass Media Outreach

Newspaper Outreach and Education Ad Campaign

PECaD continues to place cancer prevention education messaging in local newspapers. Throughout the past year, we continued our four separate campaigns featuring PECaD members (both academic faculty and community members) who share their stories with cancer and modifiable ways to reduce cancer risk. These relatable and personal stories tie back to the evidence-based 8ight Ways to Stay Healthy and Prevent Cancer prevention strategies. PECaD placed these messages from August 2017 to December 2020 in the St. Louis American, the East St. Louis Monitor, the Independent News, and (from August 2017 to January 2020) the Belleville News Democrat. Each newspaper targets a unique audience within the St. Louis region.

Topics in our cancer prevention campaign include healthy eating tips, cancer screening reminders, physical activity importance, preventing sexually transmitted infections, smoking cessation, maintaining a healthy

weight, collaboration with researchers, and colon cancer screening awareness and recommendations. These cancer prevention messages are featured in both print and online newspaper editions.

Our ad campaign gained some new faces this year, with a new ad featuring our community partner Sal Valadez and his wife Rebecca, a lung cancer survivor. While Rebecca was undergoing treatment for her cancer, she and Sal learned about the importance of connecting with their community and seeking out the support of others. Their advertisement advocates for improved community support for people going through a health crisis and encourages others to explore ways to connect with their communities.

CONNECTING FOR A HEALTHIER COMMUNITY.

When **Rebecca Valadez** was diagnosed with lung cancer in 2009, she and her husband, Sal, struggled to find the support services that would help them deal with the emotional difficulty of a cancer diagnosis and treatment. The community they lived in at that time had few support groups, and although family and friends were there, the road was difficult.

Today, Rebecca is cancer-free, and the couple advocates for improved community support for people going through health crises of their own. As a Mexican American immigrant, Sal knows that immigrant communities can especially lack such resources—he works to bring awareness to existing resources for health education and care, and campaigns for new resources to improve the health of all communities.

You can improve your health and the health of your community through meaningful connection with those around you. Rebecca and Sal encourage you to explore ways to connect with your community.

For more research-proven ways to lower your cancer risk, visit 8ways.wustl.edu
Materiales educativos disponibles en Español

Rebecca and Sal
Community Health Advocates





Above: The newest addition to our newspaper ad campaign featuring Rebecca and Sal Valadez.



Local Values

PrepareSTL mailers

For the past two years, we have circulated 8 Ways to Stay Healthy fliers through Local Values, a direct mail campaign. With Local Values, we are able to target zip codes with high cancer rates and reach people more directly. This year, in response to COVID-19, we partnered with PrepareSTL to distribute messaging focused on how to help stop the spread of the virus.

For Your Health

This year we continued our popular *For Your Health* column with 12 new articles. In March 2020, we shifted the content focus of these articles to the COVID-19 pandemic. With topics like “Watch your well-being during coronavirus distancing,” “Continuing to stay socially connected while physically distanced,” and “Making our way through this coronavirus marathon,” we aimed to help people adjust and maintain their healthy habits for the new and shifting circumstances. We also put focus on cancer prevention by reminding people to keep up with their routine screenings.

We developed the *For Your Health* columns to reach largely rural populations in Missouri and Illinois with evidence-based, useful and engaging health messages. The column is directly distributed each month at no cost to news outlets throughout Missouri and Illinois. While we developed these articles to target rural areas in our catchment, they have been picked up by outlets in St. Louis city and

states such as Texas, Georgia, Washington, North Carolina, Minnesota, and many more—with organic secondary distribution through related media organizations, the column appeared in a total of 22 states nationally, from east to west coasts.

In Good Taste

In 2019 we began our 4th year partnering with the St. Louis Post-Dispatch to offer our nutritional expertise in a popular monthly column called *In Good Taste*. These articles are printed and posted online by the Post-Dispatch and Feast Magazine. Feast, a free monthly publication offered on newsstands around the region, has a readership of 262,000, and the Post-Dispatch has a readership of 399,000.

Each month we feature a different type of food. Our nutritional experts discuss the healthy qualities of those foods and our in-house dietician provides a healthy and low-cost recipe. In 2019-2020, *In Good Taste* covered peppers, chicken, pears, lentils, rutabaga, berries, dates, fish, avocado, peas, cruciferous vegetables, and bananas.





DEGLET NOOR

It'd be fair for these sleek, amber-colored fruits to develop a superiority complex: The deglet noor has been called "finger of light" and "queen of all dates." If you buy a date at the store that has been pitted or dried, there's a good chance it's a deglet noor. Although these honey-hued fruits are sweet, their flavor is nuttier and more delicate than other varieties.



MEDJOOL

Medjool dates distinguish themselves from many other dates thanks to their large size, chewy texture and, most importantly, their caramel flavor. Although they are undeniably sweet, they can also be quite healthy: Medjools are low in fat and excellent sources of potassium, magnesium and copper. They are high in carbs, but that's not necessarily a bad thing. Athletes look to medjools for a post-workout energy boost.

How dates perk up winter days

SPONSORED CONTENT BY KATHERINE LEWIS

Across the Atlantic in the United Kingdom, medjool dates stuffed with marzipan are a traditional holiday snack. But dates here in the U.S. aren't as commonly tied to a specific season, so any time is a good one to get to know these sweet, tropical stone fruits.

"Date flesh is a high source of energy, low in fat and protein but rich in sugars — mainly fructose and glucose — hence, they should be eaten in moderation," says Dr. Adetunji Toriola, a Washington University associate professor of surgery at Siteman Cancer Center. "Date seeds contain higher dietary fiber and polyphenols compared to the date flesh. Polyphenols are antioxidants that protect the body from inflammation and could reduce the risk of chronic diseases. Dates also contain moderate amounts of vitamins and minerals."

Although dates are famously high in fiber, which can help you feel fuller for longer, they are also relatively high in calories and sugar for their small size. "That means you could be eating more calories than you realize when snacking on

dates, so eat them as part of a healthy, balanced diet," Dr. Toriola says. He points out that medjool dates are among the most popular varieties, but a single one contains around 66 calories, so they should be enjoyed mindfully.

Dates can go a long way to infusing recipes with an unexpected sweetness, a quality that's particularly appreciated in midwinter and the heavy, savory meals that often come with cold days and long nights. Try using dates in a relish to complement pork tenderloin or as part of a lamb tagine. Raw dates are even sweet enough to replace sugar in some recipes. Dates work well as binders to hold bars and cookies together, and they bring caramel notes to desserts, quick breads and dressings alike.



Dr. Adetunji Toriola

Washington University associate professor of surgery at Siteman Cancer Center
PHOTO PROVIDED BY SITEMAN CANCER CENTER



SAYER

If there's a date whose name is indicative of how central they are to everyday life in the Middle East, it's this one. "Sayer" is derived from "sayir," an Arabic word meaning "common," and these fruits are indeed everywhere: eaten as snacks, given as treats and used for cooking in sweet and savory meals. They are syrupy and filled with antioxidants.



THOORY

Generally speaking, there are three main kinds of dates: soft, like medjool; semi-dry, like deglet noor; and dry, like thoory dates, which are firm and taste a bit like peanuts. Sometimes called "bread dates," thoory dates are commonly used for baking because they aren't as sticky as other kinds, making them easier to chop. They're also great for on-the-go snacking.



ZAHIDI

This golden, mid-size date is a crowd-pleaser. It's medium dry, medium sweet and its plentiful fruit is crunchy with a hint of apricot. Some dates are so sweet that they need to be stuffed with a piquant blue cheese to balance the flavor. Not so with zahidi dates, which can be eaten right out of the hand.

in good taste

PRESENTED BY SITEMAN CANCER CENTER

Surprise Bars

YIELDS | 12 BARS

1 cup dates, pitted

1/4 cup water

1/4 cup milk, 2% (almond, coconut or soy milk may also be used)

1/2 cup peanut butter

2 cups oats

1/3 cup ground flaxseeds

1/3 cup chocolate chips

1/3 cup unsweetened cocoa powder

1/4 cup dried unsweetened coconut

1/4 cup sunflower seeds

1/4 cup chopped pecans

1/4 cup slivered almonds



PHOTO PROVIDED BY SITEMAN CANCER CENTER

[preparation] Place dates and water in a microwave safe bowl. Microwave mixture for 1 minute, then mash with a fork. Microwave again and mash until a paste forms. Combine date paste with milk and nut butter. Combine the remaining ingredients. Add wet ingredients to dry ingredients. Grease an 8 x11 inch pan, then press date mixture into the pan until evenly spread. Cut into 12 bars. When refrigerated, they will last up to 1 week. These bars are surprisingly delicious and totally customizable! Try out different nuts, nut butters or dried fruit.

NUTRITION INFORMATION: 286 CALORIES, 14G FAT, 70MG SODIUM, 34G CARBOHYDRATE, 7G FIBER, 10G PROTEIN

Know Your Risk. Change Your Future.



Our *In Good Taste* column features information on the healthy qualities of a different type of food every month, with a low-cost healthy recipe.

Cancer Burden Data

Catchment Data

Siteman's service area, also known as the catchment, spans 82 counties across Missouri and Illinois. The counties exhibit significantly different levels of health coverage and overall cancer burden.

The population of the catchment is extremely diverse: minority populations in the catchment make up 20.5% of the total population. Among the total catchment population, 13.7% are African American, 2% are Asian, and 4.8% self-identified as other minorities. 2.7% of the catchment population identifies as Hispanic/Latino. In addition, 29% of the catchment population lives in a medically underserved area (MUA). A MUA is defined as a geographic location which has insufficient health resources (manpower and/or facilities) to meet the medical needs of the resident population. Rural status is defined using census-designated, ZIP code-level rural-urban commuting area (RUCA) codes, which are used to assess patient-level data due to significant geographic variation in rural status for many counties in the catchment. RUCA codes account for the presence of a single population center in a county otherwise designated as rural by ZIP code and census tract-level population density. A rural area is defined as having a code ≥ 7.1 . Fifteen percent of the SCC catchment population lives in a rural area.

SITEMAN CANCER CENTER

Defining the Catchment Population

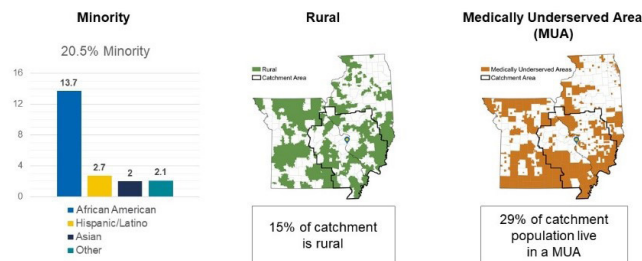
Catchment Demographics



- Race/Ethnicity → 20.5% MINORITY
- Education → 39.5% HS DIPLOMA OR BELOW
- Age → 51% BELOW AGE 40
33.1% AGE 40-64
16% AGE 65 OR OVER
- Nativity → 3.6% IMMIGRANT
- Disability → 14.3% DISABLED
- Poverty → 27.6% BELOW 200% OF FEDERAL POVERTY LINE

SITEMAN CANCER CENTER

Defining the Catchment Population



Source: Annual Estimates of the Resident Population: April 1, 2010 to July 1, 2018
U. S. Census Bureau, Population Division (Released December 2018)

Community Snapshots

As part of ongoing efforts within our Practice Surveillance Unit, we are creating Community Snapshots and a data dashboard to disseminate local data on social determinants of health and cancer care to our clinic and community partners [https://implementationscience.wustl.edu/home/innovation-incubator/community-snapshots/]. These tools were developed to address a need for local data to inform grants, advocacy, and community- and clinic-driven implementation efforts expressed by our partners.

These snapshots will be one-page reports, similar to NCI's HINTS briefs. The first few briefs will detail social determinants of health domains that disproportionately affect the communities in our region. Each brief will include: a description of the problem and how it's related to cancer; data for our region, which will include text and visual representations through maps and/or

Transportation's Impact on Health and Cancer Care



COMMUNITY SNAPSHOT

Transportation influences people's daily lives, their health and the health of their community. Investments in transportation infrastructure such as sidewalks, bike lanes, trails, and public transit can help people stay healthy by:

- Providing a place to be physically active
- Decreasing air pollution
- Helping prevent traffic accidents and injuries

However, transportation barriers can make it difficult for some to access health care services, including cancer care.

Transportation barriers can lead to missed or delayed appointments, overall poorer health and widened health disparities. Insufficient access to transportation often occurs with other social determinants of health like lower income, reduced mobility, being a person of color, less social support, being un- or underinsured, and living in rural or medically underserved areas.

QUICK FACTS

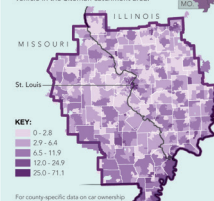
5.8 million people in the U.S. (1.8%) delayed medical care in 2017 because they did not have transportation, according to Walle (2020).

1.6 million rural households do not own cars, and public transportation is only available in 60% of rural counties. Cancer patients living in these counties face significant barriers to treatment, according to the U.S. Department of Agriculture.

75% of patients deal with a lack of transportation as a major barrier to receiving screening for breast, cervical and colorectal cancer, according to patient care navigators.

DATA FOR OUR REGION

Car ownership
Percentage of households with no vehicle in the Siteman catchment area:



For county-specific data on car ownership, see <https://data.siteman.org/cancer-data>

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graphs; a plain-language description of why it matters for implementation; and a personal story or real-world experience (requested from community partners). We will also include local resources that could address the problem and contact information. We will get input on the briefs from community partners before dissemination. The data briefs will be disseminated before Think Tanks so we can solicit community feedback.

The first brief is focused on transportation as a social determinant of health, an issue of significant interest to our community partners. In subsequent grant years, we will distribute 1-2 data briefs per year. After transportation, the next brief will focus on economic disparities (including medical debt).

Catchment Survey

In response to the COVID-19 pandemic, we conducted a survey of 764 people from the Siteman Cancer Center catchment area between June and July of 2020. Participants lived throughout 70 counties, representing 85% of our 82 county catchment. The average age of a participant was 46 and 67% of respondents were female. 58% were White and 31% were Black or African American. 16% were uninsured. 55% of eligible participants planned on receiving a mammogram in 2020, 40% planned on receiving a Pap test, 14% planned on receiving a colonoscopy, and 23% were planning on receiving a PSA test. At the time of the survey, 44% had used a tobacco product in the past 30 days. Data collection is ongoing for a second wave to assess differences in cancer screening behaviors later on in the pandemic.

Research Program Reports

Research Program reports are provided to SCC researchers twice per year to guide future research relevant to our population, identify needs in our catchment, and monitor changes in diversity in accrual. These reports include general information regarding site-specific incidence and mortality. We also provide talking points and language describing cancer burden and disparities based on race, ethnicity, sex, and geography, including patients living in rural and/or medically underserved areas. Goals for clinical trial recruitment are based on the most recent five-year rolling average of the Siteman Cancer Center Tumor Registry data. Data are presented for the most recent five-year period, allowing for a historical perspective of clinical trial recruiting and goals. This data may be reported for the entire program, or data can be presented for specific trials as requested.

How to Request Data

If you are interested in cancer burden or risk factor data for our catchment in addition to the reports we have available, contact us. We can provide you with additional data or facilitate connections to the appropriate cores within our institution. Data requests can be submitted through the following survey: <https://is.gd/COEDataRequests>. Examples of datasets available include population-level data such as incidence, late-stage incidence, mortality, select cancer screenings, and cancer risk factors, as well as demographics and socio-economic factors relevant to the 82 county catchment. We can also provide Tumor Registry data for Siteman patients, including disease incidence, mortality, and geography. For more information or to discuss your specific data request, feel free to contact Sarah Chavez (sarahv@wustl.edu).

Support for Community-Based and Health Disparities Research

Missouri Cancer Consortium



Siteman Cancer Center is the convening organization for the Missouri Cancer Consortium, with COE faculty and staff serving on multiple committees and in various leadership positions. Sarah Chavez, PhD, is the chair-elect of MCC, and serves as a co-leader of the Breast and Cervical Cancer Action Team through the Department of Health and Senior Services. Through the HPV work

group, she recently lead efforts to develop website updates to the DHSS Comprehensive Cancer website to include educational materials and patient resources for HPV, cervical cancer, and head and neck cancer. These resources align the DHSS website with goals set out in the current Missouri Cancer Action Plan, and will also serve to inform ongoing efforts to update the goals for the plan. Through our involvement with the DHSS Breast and Cervical Cancer Action Team and the MCC Breast Cancer workgroup, SCC has partnered with other organizations around the state to enact a program called "Mammograms Across Missouri," whose mission is to bring cancer screening resources into counties with the highest breast cancer mortality. These resources include patient education, navigation, and mobile mammography events. We hope to partner with our Colorectal Cancer Roundtable, led by Jean Wang, MD, PhD, to also add FIT testing to these mobile screening efforts in the future. Through her work with the CRC Roundtable, Dr. Wang has implemented screening outreach and education in multiple rural and medically underserved areas.



Community Research Fellows Training program (CRFT)

This 15-week program, based on a Master of Public Health curriculum, provides community members interested in reducing health and cancer disparities with education and hands-on experience to take back to their own communities. Ideally, the CRFT alumni are then able to address health disparities within their own neighborhoods to also work towards PECaD's goal of eliminating health disparities in our region.

The CRFT program began in 2012 and has now trained five cohorts with over 150 total graduates. Previous alumni have engaged in community projects and received grant funding to explore ways to improve the health of their community members. The sixth CRFT cohort, previously scheduled for summer 2020, unfortunately had to be postponed due to the COVID-19 pandemic. Before postponement, the program had over 25 applicants. These applicants had the opportunity to participate in summer 2021 with a slightly shortened course (12 sessions) that mostly took place over Zoom from May 6th through August 12th, 2021. For more information on the CRFT program, please email crft@wustl.edu.



The fifth CRFT cohort at their certificate ceremony in 2019.

CRFT Alumni Updates

- This year, the Patient Research Advisory Board (PRAB) moved to virtual meetings. They continue their work on the ReCAST project with the St. Louis County and City departments of health, and most recently are helping with the Community Voices Project on COVID-19 impacts in the St. Louis region.
- A group of two CRFT 2019 alumni are working with the CRFT team & other collaborators on a CRFT pilot funded project to examine the impact of the opioids epidemic on the immigrant and ethnic communities in the City of St Louis and St Louis County. Data collection for this project began in January 2021.

- Several alumni are now working towards degrees in public health & related fields (ranging from bachelors to doctoral degrees).
- Another alum is working with WEDO in North County (MFFH-funded health improvement project). The project was recently expanded in April 2020.
- A CRFT 2019 alum was recently chosen by researchers to be on the community advisory board for Precision Medicine at the WashU School of Medicine.
- A CRFT 2012 alum received several grants for their non-profit organization, working with a faculty here at WashU, to continue work on the impact of culture and art in maintaining wellbeing in older adults.

Rural Education for Advancing Community Health (REACH)

Rural Education for Advancing Community Health (REACH) was a two-part community-based public health training series that took place in July of 2019. Based on the CRFT program, it was adapted using feedback from key community stakeholders to fit the needs of rural Southern Illinois. Though still focusing on enhancing the public health and research skills of participants, our community partners suggested that a more practical, interactive, and skills-based training would be of most value to the region. We had 28 total participants from counties throughout southern and central IL and the STL region. To meet our partners where they are, we held this training at a local high school in Vienna, IL.



Topics covered in the training program included evidence-based public health and program planning, rural health disparities and health equity, applied epidemiology and community assessment, community based health and prevention, the value of research and data in public health, and more. Session speakers were Washington University faculty and public health experts from the Southern Illinois region. WUSM presenters included Bettina Drake, Vetta Thompson, Nicole Ackermann, Erika Waters, Graham Colditz, and Marquita Lewis-Thames.

The goal of REACH was to build capacity in the region by training community partners (medical and non-medical) to engage in research to address cancer and other health disparities. Results from baseline and final assessments indicated a significant increase in confidence and skills surrounding the development of evidence-based practices, applicability of research and data to the communities they serve, and ability to assess and understand public health data and research with mean score increases of 1.3, 1.0, and 1.8, respectively. Feedback from program evaluations indicated the program had value to the region and was relevant to participants' work and practice.

After REACH was finished, we put out a call for proposals to participants and we are now working with a REACH participant on a pilot project that focuses on educating providers on evidence-based interventions for recommending colorectal cancer screening to patients (for more information, see page 28). Other participants are now well-positioned to contribute to building rural cancer control research capacity throughout southern Illinois through newly gained public health and research literacy skills and knowledge.



REACH participants take part in a team-building exercise.

PECaD Seminar Series Collaborations

Epidemiology and Clinical Outcome Research Seminar Series

For the past seven years, we have hosted our popular Epidemiology and Clinical Outcomes Research Seminar Series, which brings researchers from around the world to St. Louis to talk about the latest in public health, epidemiology, and disparities research. Below is a list of presentations given by 2019-20 speakers:

September 19, 2019: Yousuf Zahar, MD, MHS, Associate Professor of Medicine and Public Policy, Duke Cancer Institute, presented "Intervening on the Financial Toxicity of Cancer Care."

October 17, 2019: Christine Lee, PharmD, PhD, Lead for Strategic Research Engagement, Office of Minority Health and Health Equity, U.S. Food and Drug Administration, presented "Overview of the U.S. Food and Drug Administration's Office of Minority Health and Health Equity."

November 21, 2019: John D. Carpten, PhD, Professor of Translational Genomic and Urology, Co-Director of USC Institute for Translational Genomics, Director of USC Molecular Genomics Core, University of Southern California, presented "The Impact of Population and Tumor Heterogeneity in Cancer Genome Science."


December 19, 2019: Lisa Fitzpatrick, MD, MPH, Chief Executive Officer and Founder of Promoting Practical Health, Inc., presented "Community Insights about the Cancer Continuum: Challenges and Opportunities."

January 16, 2020: Lorna Haughton McNeil, PhD, MPH, Cullen Trust Health Care Chair in Health Disparities Research, Associate Director of Cancer Health Disparities and Community Outreach, Department of Health Disparities Research, Division of Cancer Prevention and Population Sciences, University of Texas M. D. Anderson Cancer Center, presented "Community-Engaged Research with Faith-Based Communities: How to Create Long-Standing Partnerships."

February 20, 2020: Elena Martinez, PhD, Sam M. Walton Endowed Chair for Cancer Research, Professor, Department of Family Medicine and Public Health, Associate Director, Population Sciences, Disparities and Community Engagement, UC San Diego Moores Cancer Center, presented "Gastric Cancer Burden in the United States."

March 19, 2020: Jianrong Wu, PhD, Professor, Biostatistics and Bioinformatics Shared Resource Facilities, Markey Cancer Center, University of Kentucky, presented "Cancer Immunotherapy Trial Design with Delayed Treatment Effect and Long-Term Survivors."

April 16, 2020: Karen Weihs, MD, Professor with tenure, University of Arizona College of Medicine, Distinguished Fellow, American Psychiatric Association, Medical Director, Integrated Psychosocial Care programs in Oncology, Nephrology & Pulmonary Hypertension, presented "Prevention of Depression after Breast Cancer: Intervention Development Using the NIH Stage Model."



**Epidemiology and Clinical Outcomes
Research Seminar Series**
Hosted by the Division of Public Health Sciences,
Department of Surgery

Yousuf Zafar, MD, MHS, FASCO
*Associate Professor of Medicine, Public Policy, and Population Science,
Director of Healthcare Innovation
Duke Cancer Institute*

**"Intervening on the Financial
Toxicity of Cancer Care"**

**Thursday, September 19, 2019
Noon—1:00 pm
Doll & Hill Room
Taylor Avenue Building**


Cancer treatment has become more expensive over the past decade, sometimes costing tens of thousands of dollars a month. In many cases, a growing portion of these costs are being shifted to patients, resulting in treatment-related financial distress. Due to insurmountable bills, patients experience worse quality of life, adherence, and outcomes. What can we do to reduce the financial toxicity of cancer care? The solution involves policy-, provider-, and patient-level interventions.

Please feel free to bring your lunch to this brown bag presentation.

Co-sponsored by the Institute for Public Health, the Department of Obstetrics and Gynecology, the Department of Medicine, and the Department of Anesthesiology

For more information:
Danielle Schulte, 314-717-1018
Danielle@wustl.edu

www.publichealthsciences.wustl.edu



Taylor Avenue Building
600 S. Taylor Avenue
Second Floor 2131
Doll & Hill Teaching Room

FLTC
Start Jax
Taylor Ave
*TAB

Collaboration with the Prevention and Control Research Program Seminars

The Prevention & Control program holds regular seminars for faculty and staff enrichment. Recent partnerships with them have included:

October 23, 2019: Rebekka Lee, ScD, Harvard T.H. Chan School of Public Health presented “Using Implementation Science to Accelerate Community-Based Prevention and Promote Health Equity.”

March 5, 2020: Jesse Nodora, DrPH, Moores UC San Diego Cancer Center presented “Blending Three Key Elements for a Successful COE Component.”

CONNECTING LIFE AND SCIENCE

Prevention and Control Research Seminar

“Using Implementation Science to Accelerate Community-based Prevention and Promote Health Equity”



Wednesday, October 23, 2019
12:00 – 1:00pm
Taylor Avenue Building
2nd floor, Room 2131
Lunch provided

Rebekka Lee, ScD
Research Scientist
Harvard T.H. Chan School of Public Health

Co-sponsored by Siteman Cancer Center and the Institute for Public Health



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www.siteman.wustl.edu 800-600-3606

Cancer Disparities and Community-Based Research Highlights



WU-ISC3

The Washington University Implementation Science Center for Cancer Control (led by Drs. Graham Colditz and Ross Brownson) was funded in 2019 by the National Cancer Institute with a mission to diminish the disparities in cancer outcomes in Missouri and Illinois through research that expedites proven interventions into real-world practice. Its vision is to commit the center's expertise in the fight against the inequitable outcomes in our region. In collaboration with PECaD, the Innovation Incubator (led by Drs. Aimee James and Bettina Drake), a core component of the center, facilitates ongoing research by engaging with community partners and stakeholders to assess and prioritize the community's cancer disparities needs. Drs. Jean Hunleth and Aimee James co-lead the Membership Unit of the Incubator, which has helped to drive engagement of community members. The Practice Surveillance Unit (led by Drs. Bettina Drake and Kia Davis) provides access to community-focused data resources to assist in program planning and research priorities.

See descriptions of our Community Snapshots and Data Dashboard on page 22.

COVID-19 and Cancer

The Siteman Cancer Center Catchment Survey for 2020 was conducted in a collaborative effort with a consortium of 15 NCI-designated cancer center Community Outreach and Engagement programs. The survey examines the social and structural determinants across multiple levels of influence including individual, interpersonal/family, organizational, neighborhood, and societal. This proposal will use of a population-based survey design assesses the rapidly evolving context of COVID-19. In addition, we conducted qualitative interviews for an organizational assessment for 5 healthcare systems across the catchment. This survey was conducted by the PECaD data workgroup members and led by Drs. Bettina Drake and Kia Davis. (For more information on results of this survey, see page 23).



REACH and CRC Provider Education

Rural Education for Advancing Community Health (REACH) is a public health training program adapted from the Community Research Fellows Training (CRFT) program in St. Louis for rural communities in southern Illinois (for more information, see page 25). Leveraging the capacity built from REACH, the project team offered funding to REACH participants to develop a pilot project to address regional cancer disparities. This resulted in a partnership with staff from the American Cancer Society (ACS) of southern and central Illinois to develop a

colorectal cancer (CRC) screening education session for medical providers at a large regional hospital and clinic system. The objectives of the pilot project were to improve rates of CRC screening through increased provider confidence in recommending all available CRC screening options, increase intent to recommend all appropriate CRC screening options to patients, and increase awareness of and intent to use evidence-based CRC screening practices. Despite significant delays and staffing changes due to the COVID-19 pandemic, the team implemented the CRC education sessions in eight different primary care clinics throughout southern and central Illinois in March 2021. Pre- and post-test surveys were administered to evaluate changes in attitudes, skills and knowledge of evidence-based CRC screening practices.

This project was led by Dr. Bettina Drake and former post-doctoral fellow Dr. Marquita Lewis-Thames.

Cost Talk: Discussing care costs during shared decision-making about slow-growing prostate cancer

Financial toxicity (the burden associated with care costs) is a common result of cancer treatment, affecting approximately half of all cancer survivors. It is associated with reduced quality of life and poor clinical outcomes, including lower adherence to treatment, higher rates of mood disorders, and increased mortality. Primary Investigator Mary C. Politi, PhD, is leading Cost Talk, a study to evaluate an intervention to improve cost discussions between urologic surgeons and patients when deciding how to manage slow-growing prostate cancer. The intervention involves the use of an Option Grid conversation-based decision aid that contains information about care choices, including their relative costs. Urologic surgeons first received brief training in shared decision-making, financial resources for patients, and best practices in discussing options and care costs. They have been using the decision aid with patients who are deciding on management for slow-growing prostate cancer. The research team is tracking the impact this intervention has on patients' decisions and the adaptations suggested by the clinical team to improve the likelihood that the intervention can be sustained after the study ends. This study is funded by the Robert Wood Johnson Foundation, supplemented by Rapid Add-On funding from the Washington University Institute for Public Health's Center for Dissemination and Implementation. A stakeholder advisory group comprised of patients, clinicians, and prostate cancer advocates helped inform the study design, outcomes, and procedures. Members of this advisory group include PECaD community partners Dewey Helms and Robin Wright-Jones, COE associate director Bettina Drake, and the Prostate Cancer Community Partnership.

PCORI Grant Research Engagement Survey Tool (REST)

This study is developing a way to measure the level of partner involvement in a research study. No standard method exists to find out how involved a partner has been in a study from the partner's perspective. Having a consistent way to assess how involved community members are in a research project may help improve the process and the impact of stakeholder-engaged research. In this study, the research team, led by Dr. Vetta Sanders Thompson and Dr. Melody Goodman at NYU, created the Research Engagement Survey Tool (REST), a survey that researchers can use to assess how much community members are involved in research. The survey was developed using the Delphi method, with input from the Disparities Elimination Advisory Committee, PECaD's advisory board. It places the level of partner involvement in one of five categories, from least to most involved: (1) outreach and education, (2) consultation, (3) cooperation, (4) collaboration, or (5) partnership. The team is creating a long version of the survey, and a shorter version for times when using the long version is not possible.

This completed tool is now validated and available for use. You can find both the short and long versions of the survey here:

<https://radx-up.org/audience/academic/research-engagement-survey-tool-rest/>

Human Tumor Atlas Network

The Human Tumor Atlas Network (HTAN) is an NCI-funded Cancer Moonshot initiative whose goal is to construct atlases of the dynamic cellular, morphological, and molecular features of human cancers as they evolve from precancerous lesions to advanced disease. (<https://humantumoratlas.org>)

The WUSM HTAN team is currently establishing a list of clinical data elements to include as part of the data collection when tumors are collected for inclusion in the study. PECaD worked with members of the HTAN Characterization Unit to identify data points such as socioeconomic status, food insecurity, household income, and other metrics that can be collected and tracked. This data will allow us to better understand how social determinants of health may impact tumor biology and, ultimately, this research could help us design better strategies to improve therapeutic options. By connecting biology, patient outcomes, and socioeconomic factors, we can better understand whether social determinants of health may affect the types of mutations or the clinical progression of the tumor.

Clinical Studies Outreach - Promoting Diversity in Clinical Trials

COE monitors accrual of underserved populations into SCC clinical trials through our Clinical Studies Outreach workgroup (CSO). CSO is led by Dr. Lannis Hall (co-leader of CPDM) and other members of the COE leadership team make up the workgroup (Drs. Drake, Colditz, and Toriola).



CLINICAL TRIALS NATIONAL LEADERS IN CANCER

Siteman Cancer Center patients have access to more than 500 clinical trials designed to assess the effectiveness of innovative cancer treatments. By participating in a clinical trial, patients can gain early access to investigational treatments that are not widely available.

What is a clinical trial?
Clinical trials are research studies that try to answer a specific question. Some clinical trials assess the safety and effectiveness of new screening tools or treatments. Other clinical trials evaluate if the new treatment is more effective than the existing treatment for the disease.

Why should you participate in a clinical trial?
All advances in cancer care have occurred because people are willing to take part in clinical trials. Clinical trials have benefits and risks.

Some of the benefits include:

- You may receive a treatment that is not widely available. The treatment may be safer and work better than the current treatment recommendation.
- You will have an enhanced care team specifically monitoring your care and well-being.
- You will help others by advancing cancer research.

Some of the risks include:


- The new treatment may not work for you, even if others benefit.
- The new treatment may have an unknown side effect which might be worse than the standard treatment.
- Most trials are randomized. Most trials compare a new treatment with a current standard treatment. You may be placed in a study group that receives the new treatment or the standard treatment.



Why are clinical trials important?
If you have received a vaccine, antibiotic or medicine for a common disease, like high blood pressure or diabetes, you have benefited from clinical trials. Thousands of women, men and children of many ethnic and racial groups participate in clinical trials each year to reveal the best way to prevent, screen, diagnose and treat diseases. Diverse participation is necessary to ensure that everyone benefits.

Logos: SITEMAN CANCER CENTER, Washington University Physicians, UIC HealthCare

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CLINICAL TRIALS NATIONAL LEADERS IN CANCER

The Importance of Diversity in Clinical Trials:
Today's Studies are Tomorrow's Cure

If you have received a vaccine, antibiotic or medicine for a common disease, like high blood pressure or diabetes, you have benefited from clinical trials. Thousands of women, men and children of many ethnic and racial groups participate in clinical trials each year to reveal the best way to prevent, screen, diagnose and treat diseases. Participation from different ethnic and racial groups is necessary to ensure that everyone benefits.

What is a clinical trial?
Clinical trials are research studies that try to answer a specific question. Some clinical trials assess the safety and effectiveness of new screening tools or treatments. Other clinical studies are evaluating if the new treatment is more effective than the current standard treatment for the disease.


Why should you participate?
All advances in cancer care have occurred because people are willing to take part in clinical trials. Clinical trials have benefits and risks.

Some of the benefits include:

- You may receive a treatment that is not widely available. The treatment may be safer and work better than the current standard treatment.
- You will have an enhanced care team specifically monitoring your care and well-being.
- You will help others by advancing cancer research.

Some of the risks include:

- The new treatment may not work for you, even if others benefit.
- The new treatment may have an unknown side effect which might be worse than the standard treatment.
- Most trials are randomized. Most trials compare a new treatment with a current standard treatment. You may be placed in a study group that receives the new treatment or the standard treatment.



Why is diversity important?
In the past, clinical trials mostly included white men, despite the fact that women and other ethnic and racial groups suffered from the same illnesses. In 1993, federal legislation was passed requiring that women and people from different ethnic and racial groups participate in research studies. This was to ensure that treatment results from clinical trials would be safe and effective for all people.

Logos: SITEMAN CANCER CENTER, Washington University Physicians, UIC HealthCare, PECaD

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Clinical Trials Brochures

This year, we developed a clinical trials brochure (above and left) tailored to the SCC patient population that is shared with new patients via mail and in doctors' waiting rooms and offices. Patients are directed to a short SCC-produced video that explains the importance of diversity in clinical trials with a few dramatizations of the consent and participation process at SCC to increase familiarity. The brochure and video are included in COE's outreach resources shared by both COE outreach staff and community partners.

2019 and 2020 Clinical Trials Numbers

Each study's minority, rural, and MUA accrual targets are based on five-year rolling averages of site-specific incidence rates at the SCC, stratified by race, disease stage, and gender. Catchment population-level incidence rates are used for prevention and screening studies. Accrual targets are confirmed for each study when approval is obtained from SCC's Protocol Review and Monitoring Committee (PRMC) and are posted on the SCC website to facilitate study procedures and recruitment planning.

COE's CSO team conducts quarterly reviews of studies that have accrued at least 20% of their total study sample. Potential outcomes are: approved (meets or exceeds study minority accrual target); needs improvement (within 10 percentage points below the study minority accrual target); or action required (greater than 10 percentage points below the study minority accrual target). PIs and coordinators of studies in the 'needs improvement' or 'action required' categories receive a letter outlining current and target minority accrual metrics, and resources available at SCC to assist in study recruitment. PIs of studies in the 'action required' category receive individual consultation with the CSO team to improve minority accrual.

COE also presents a "Minority Accrual Report" quarterly to SCC Senior Leadership and the SCC Clinical Research Committee, which includes analyses of clinical studies accrual among minority and rural patients by disease site and research program. These reviews facilitate discussion of systems-level changes that can be implemented to improve diversity in clinical trials, such as improved patient transportation assistance, implementation of new clinical trials, or expansion of current trials.

The CSO team is continuously working with the COE Internal Advisory Board and Community Advisory Board to evaluate and implement systems- and community-level strategies to improve diversity in all clinical trials. CSO and COE provide resources to patients, investigators, recruiters, and communities throughout the catchment to increase trust, knowledge, and awareness while eliminating barriers to participation. Strategies and resources provided by the CSO team have successfully promoted diversity in clinical trial accrual. SCC minority interventional accruals exceed the minority accrual target for the catchment, and in spite of the impact of COVID, minority participation in treatment trials increased from 11.9% in 2019 to 14.1% in 2020.



Scenes from our video promoting clinical trial participation.

Publications and Presentations

Publications

- Beck, A. M., Eyler, A. A., Aaron Hipp, J., King, A. C., Tabak, R. G., Yan, Y., . . . Brownson, R. C. (2019). A multilevel approach for promoting physical activity in rural communities: A cluster randomized controlled trial. *BMC Public Health*, 19(1) doi:10.1186/s12889-019-6443-8
- Bess, K. D., Frerichs, L., Young, T., Corbie-Smith, G., Dave, G., Davis, K., . . . Cene, C. W. (2019). Adaptation of an evidence-based cardiovascular health intervention for rural African Americans in the southeast. *Progress in Community Health Partnerships: Research, Education, and Action*, 13(4), 385-396. doi:10.1353/cpr.2019.0060
- Chang, S. -, Wang, M., Liu, X., Alhamad, T., Lentine, K. L., Schnitzler, M. A., . . . Chapman, W. C. (2019). Racial/Ethnic disparities in access and outcomes of simultaneous liver-kidney transplant among liver transplant candidates with renal dysfunction in the United States. *Transplantation*, 103(8), 1663-1674. doi:10.1097/TP.0000000000002574
- Dania, V., Liu, Y., Ademuyiwa, F., Weber, J. D., & Colditz, G. A. (2019). Associations of race and ethnicity with risk of developing invasive breast cancer after lobular carcinoma in situ. *Breast Cancer Research*, 21(1) doi:10.1186/s13058-019-1219-8
- Ellis, K. R., Young, T. L., Carthron, D., Simms, M., McFarlin, S., Davis, K. L., . . . Cené, C. (2019). Perceptions of rural African American adults about the role of family in understanding and addressing risk factors for cardiovascular disease. *American Journal of Health Promotion*, 33(5), 708-717. doi:10.1177/0890117118799574
- Ellis KR, Black KZ, Baker S, Cothorn C, Davis K, Doost K, Goestch C, Griesemer I, Guerrab F, Lightfoot AF, Padilla N, Samuel CA, Schaal JC, Yongue C, Eng E. (2020). Racial Differences in the Influence of Health Care System Factors on Informal Support for Cancer Care among Black and White Breast and Lung Cancer Survivors. *Fam Community Health*. 2020 Jul/Sep; 43(3): 200-212. doi: 10.1097/FCH.0000000000000264.
- Griffin NE, Buchanan TR, Smith SH, Leon AA, Meyer MF, Liu J, Tabak RG, Fuh KC, Thaker PH, Powell MA, Mutch DG, Mas-sad LS, Colditz GA, Hagemann AR. Low rates of cascade genetic testing among families with hereditary gynecologic cancer: An opportunity to improve cancer prevention. *Gynecol Oncol*. 2020 Jan;156(1):140-146. doi: 10.1016/j.ygyno.2019.11.005. Epub 2019 Nov 25.
- Han, Y., Moore, J. X., Langston, M., Fuzzell, L., Khan, S., Lewis, M. W., . . . Liu, Y. (2019). Do breast quadrants explain racial disparities in breast cancer outcomes? *Cancer Causes and Control*, 30(11), 1171-1182. doi:10.1007/s10552-019-01222-x
- Hoover, D. S., Pappadis, M. R., Houston, A. J., Krishnan, S., Weller, S. C., Giordano, S. H., . . . Volk, R. J. (2019). Preferences for communicating about breast cancer screening among Racially/Ethnically diverse older women. *Health Communication*, 34(7), 702-706. doi:10.1080/10410236.2018.1431026
- Hong, S. J., Drake, B., Goodman, M., & Kaphingst, K. A. (2019). Race, trust in doctors, privacy concerns, and consent preferences for biobanks. *Health Communication*, doi:10.1080/10410236.2019.1623644
- Hong, S. J., Drake, B., Goodman, M., & Kaphingst, K. A. (2020). Relationships of health information orientation and cancer history on preferences for consent and control over biospecimens in a biobank: A race-stratified analysis. *Journal of Genetic Counseling*, doi:10.1002/jgc4.1217
- Houston, A. J., Kamath, G. R., Bevers, T. B., Cantor, S. B., Dixon, N., Hite, A., . . . Volk, R. J. (2020). Does animation improve comprehension of risk information in patients with low health literacy? A randomized trial. *Medical Decision Making*, 40(1), 17-28. doi:10.1177/0272989X19890296

- Lewis-Thames, M. W., Carnahan, L. R., James, A. S., Watson, K. S., & Molina, Y. (2020). Understanding posttreatment patient-provider communication and follow-up care among self-identified rural cancer survivors in Illinois. *Journal of Rural Health*, doi:10.1111/jrh.12414
- Linnenbringer, E., Geronimus, A. T., Davis, K. L., Bound, J., Ellis, L., & Gomez, S. L. (2020). Associations between breast cancer subtype and neighborhood socioeconomic and racial composition among black and white women. *Breast Cancer Research and Treatment*, doi:10.1007/s10549-020-05545-1
- Liu, P. -, Wu, K., Ng, K., Zauber, A. G., Nguyen, L. H., Song, M., . . . Cao, Y. (2019). Association of obesity with risk of early-onset colorectal cancer among women. *JAMA Oncology*, 5(1), 37-44. doi:10.1001/jamaoncol.2018.4280
- Loomans-Kropp, H. A., Pinsky, P., Cao, Y., Chan, A. T., & Umar, A. (2019). Association of aspirin use with mortality risk among older adult participants in the prostate, lung, colorectal, and ovarian cancer screening trial. *JAMA Network Open*, 2(12), e1916729. doi:10.1001/jamanetworkopen.2019.16729
- Mulcahy, E. R., Buchheit, C., Max, E., Hawley, S. R., & James, A. S. (2019). Collaborative health education for Somali Bantu refugee women in Kansas City. *BMC Research Notes*. 12 (1). doi:10.1186/s13104-019-4649-6
- Okan, Y., Janssen, E., Galesic, M., & Waters, E. A. (2019). Using the short graph literacy scale to predict precursors of health behavior change. *Medical Decision Making*, 39(3), 183-195. doi:10.1177/0272989X19829728
- Pabayo, R., Ehntholt, A., Davis, K., Liu, S. Y., Muennig, P., & Cook, D. M. (2019). Structural racism and odds for infant mortality among infants born in the United States 2010. *Journal of Racial and Ethnic Health Disparities*, 6(6), 1095-1106. doi:10.1007/s40615-019-00612-w
- Park JJ, Sommers BD, Humble S, Epstein AM, Colditz GA, Koh HK. Medicaid And Private Insurance Coverage For Low-Income Asian Americans, Native Hawaiians, And Pacific Islanders, 2010-16. *Health Aff (Millwood)*. 2019 Nov;38(11):1911-1917. doi: 10.1377/hlthaff.2019.00316
- Pathak, S., George, N., Monti, D., Robinson, K., & Politi, M. C. (2019). Evaluating adaptation of a cancer clinical trial decision aid for rural cancer patients: A mixed-methods approach. *Journal of Cancer Education*, 34(4), 803-809. doi:10.1007/s13187-018-1377-x
- Politi MC, Grant RL, George NP, Barker AR, James AS, Kuroki LM, McBride TD, Liu J, Goodwin CM. Improving Cancer Patients' Insurance Choices (I Can PIC): A Randomized Trial of a Personalized Health Insurance Decision Aid. *Oncologist*. Feb 2020. doi:10.1634/theoncologist.2019-0703
- Politi, M. C., Yen, R. W., Elwyn, G., Kurien, N., Czerwinski, S. G., Schubbe, D., . . . Durand, M. -. (2020). Encounter decision aids can prompt breast cancer surgery cost discussions: Analysis of recorded consultations. *Medical Decision Making*, 40(1), 62-71. doi:10.1177/0272989X19893308
- Pollack, L.M., Ekwueme D. U., Hung, M.C., Miller, J.W., Chang, S. H. (2020). Estimating the impact of increasing cervical cancer screening in the National Breast and Cervical Cancer Early Detection Program among low-income women in the USA. *Cancer Causes and Control*. 2020 May 20. doi: 10.1007/s10552-020-01314-z.
- Pollack, L. M., Olsen, M. A., Gehlert, S. J., Chang, S. -, & Lowder, J. L. (2019). Racial/Ethnic Disparities/Differences in hysterectomy route in women likely eligible for minimally invasive surgery. *Journal of Minimally Invasive Gynecology*, doi:10.1016/j.jmig.2019.09.003
- Ramsey AT, Baker TB, Pham G, Stoneking F, Smock N, Colditz GA, James AS, Liu J, Bierut L, Chen L-S. (2020). Low Burden Strategies Are Needed to Reduce Smoking in Rural Healthcare Settings: A Lesson from Cancer Clinics. *International Journal of Environmental Research and Public Health*. March 2020; 17 (5): 1728. doi:10.3390/ijerph17051728

- Roberts, M. C., Krakow, M., Wheldon, C. W., & Silver, M. I. (2019). Differences in family health history knowledge among bisexual and lesbian women. *LGBT Health*, 6(3), 134-137. doi:10.1089/lgbt.2018.0217
- Salazar AS, Sekhon S, Rohatgi KW, Nuako A, Liu J, Harriss C, Brennan E, LaBeau D, Abdalla I, Schulze C, Muenks J, Overlot D, Higgins JA, Jones LS, Swick C, Goings S, Badiu J, Walker J, Colditz GA, James AS. A stepped-wedge randomized trial protocol of a community intervention for increasing lung screening through engaging primary care providers (I-STEP). *Contemporary Clinical Trials*. 2020; 91:105991. doi:10.1016/j.cct.2020.105991
- Sarma, E. A., Silver, M. I., Kobrin, S. C., Marcus, P. M., & Ferrer, R. A. (2019). Cancer screening: Health impact, prevalence, correlates, and interventions. *Psychology and Health*, 34(9), 1036-1072. doi:10.1080/08870446.2019.1584673
- Sekhon S, Massad L, Hageman A, Dick R, Leon A, Zamorano A, Thaker P, McCourt C, Mutch D, Powell M, Kuroki L. Patients with endometrial cancer continue to lack understanding of their risks for cancer. Accepted to *Gynecologic Oncology Reports*.
- Silver, M. I., & Kobrin, S. (2020). Exacerbating disparities?: Cervical cancer screening and HPV vaccination. *Preventive Medicine*, 130 doi:10.1016/j.ypmed.2019.105902
- Silver, M. I., Klein, W., Samimi, G., Minasian, L., Loud, J., & Roberts, M. C. (2019). Concordance with BRCA1/2 testing guidelines among women in the health of women (HOW) study[®]. *Breast Cancer Research and Treatment*, 173(3), 719-726. doi:10.1007/s10549-018-5035-0
- Toriola, A. T., Luo, S., Thomas, T. S., Drake, B. F., Chang, S. -, Sanfilippo, K. M., & Carson, K. R. (2020). Metformin use and pancreatic cancer survival among non-Hispanic white and African American U.S. veterans with diabetes mellitus. *Cancer Epidemiology Biomarkers and Prevention*, 29, 169-175. doi:10.1158/1055-9965.EPI-19-0781
- Yaghjian L, Colditz G, Rosner B, Rich S, Egan K, Tamimi RM. Adolescent caffeine consumption and mammographic breast density in premenopausal women. *Eur J Nutr*. 2020 Jun;59(4):1633-1639. doi: 10.1007/s00394-019-02018-0. Epub 2019 May 31. PMID: 31152213; PMCID: PMC6885099.

Presentations

- Cao Y. "Cancer increases in younger populations - Where are they coming from?" American Association for Cancer Research, San Diego, 2020
- Colditz GA. "Personalized Prevention and Intervention of Breast Cancer in Black Women" Washington University in St. Louis Centene Breast Cancer Program Presentation. September 20, 2019; St. Louis, MO.
- Colditz GA. "Future Directions for Cancer Prevention and Control." Barnes Jewish Hospital/Barnes Jewish CC-Wide Workshop on Smoking Cessation. November 7, 2019. St. Louis, MO.
- Colditz GA. "Establishing a Life Course Approach to Cancer Prevention and Care." The National Academies of Sciences Engineering Medicine. November 12, 2019; Washington, DC.
- Colditz GA. "Reducing Cancer Disparities among Rural and Medically Underserved Populations; Experience from Southern Illinois and Southeast Missouri." American Society of Preventative Oncology. March 23, 2020; Virtual.



Dr. Vetta Sanders Thompson (above) and Dr. Lannis Hall (facing page) present at the East St. Louis Smart Health event.



Colditz GA. "Harnessing Evidence to Prevent Breast Cancer Now." Simmons Comprehensive Cancer Center UT Southwestern/Distinguished Lecture Series. June 5, 2020; Virtual.

Colditz GA. "Breast Cancer Prevention: The Priority Is Now." WUSTL Virtual Predoctoral Summer Seminar Series. June 12, 2020.

Colditz GA. "Translating Science to Practice Improving Health Equity and Population Health: The Potential of Implementation Science." American Association for Cancer Research Virtual Annual Meeting. June 22, 2020.

Drake BF, Leahy N. "Building Rural Cancer Control Research Capacity in Southern Illinois." NCI conference. 2019.

Drake BF. "Community-Based Prostate Cancer Education and Screening." International Cancer Education Conference. September 19, 2019; Salt Lake City, Utah.

James AS. "8 Ways to Reduce Your Cancer Risk." Missouri Botanical Gardens Wellness Program: Virtual Educational Presentations – Lunch and Learn Cancer Prevention. May 20, 2020; Virtual.

James AS. "Covid and Cancer" panel. Pedal the Cause Webinar. April 14, 2020; Virtual.

James AS. "Emerging from Covid." Pedal the Cause Webinar. May 12, 2020; Virtual.

James AS. "Engaging Rural Populations in Cancer Education and Outreach." International Cancer Education Conference. September 19, 2019; Salt Lake City, Utah.

Linnenbringer E. "Associations among state-level racial inequality, individual-level unfair treatment, and incident breast cancer in a risk-enriched cohort." 12th AACR Conference on The Science of Cancer Health Disparities in Racial/Ethnic Minorities and the Medically Underserved. September 23, 2019; San Francisco, CA.

Linnenbringer E. "How Do Genetic Ancestry and Socially-defined Race Contribute to the Distribution of Triple Negative Breast Cancer across Populations?" Siteman Cancer Center Breast Cancer Research Program Discussion Series. February 2020; Virtual.

Linnenbringer E. "Gene Expression Profile Testing: Utilization, Impact, and Equity among Women with Early-Stage Breast Cancer." Breast Cancer Community Partnership presentation. April 2020; Virtual

Liu Y. "Racial Disparities in the Risk of Aggressive Breast Cancer after Premalignant Breast Lesions." Siteman Cancer Center Breast Cancer Research Program Forum Presentation. 2019; St. Louis, MO.

Liu, Y. "Is There a Racial Disparity in Triple-Negative Breast Cancer Outcomes? What Are the Potential Contributors?" Siteman Cancer Center Breast Cancer Research Program Discussion Series. February 2020; Virtual.

McBride T. "Understanding Medicare and Medicaid Coverage for Cancer Care." Colorectal Cancer Community Partnership Educational Speaker Series. August 3, 2020; Virtual.

Politi MC. "Health Literacy and Communication Strategies in Oncology: Building Patients' Financial Literacy." National Cancer Policy Forum of the National Academies of Sciences, Engineering, and Medicine. July 15-16, 2019; Washington, DC.

Politi MC. "Shared Decision Making in Melanoma: Navigating Difficult Conversations." Young Women in Melanoma Meeting, AIM at Melanoma Foundation. August 3, 2019; Leesburg, VA.

Politi MC. "Cost Talk: Helping Patients Discuss Cancer Care Costs with Clinicians during Shared Decision Making." The Dartmouth Institute for Health Policy and Clinical Practice.

Politi MC. "Engaging Patients in Healthcare Choices: An Overview of Patient Decision Aids." Association of Community Cancer Centers (ACCC) Webinar Series: Approaches to Shared Decision Making for the Oncology Team. August 5, 2020; Virtual.

Thompson VL. "Education to Support Community Based Participatory Cancer Research." International Cancer Education Conference. September 19, 2019; Salt Lake City, Utah.

Toriola AT. "Diabetes, Pancreatic Cancer in African Americans." Coleman-Wright CME Church. 2019; St. Louis, MO.

Toriola AT. "Metformin Use and Pancreatic Cancer Survival: Are There Racial Differences?" 12th AACR Conference on The Science of Cancer Health Disparities in Racial/Ethnic Minorities and the Medically Underserved. September 23, 2019; San Francisco, CA.

Wilson M. "Community Outreach and Education Strategies: The Effectiveness of Hosting a Smart Health Community Education Day." International Cancer Education Conference. September 19, 2019; Salt Lake City, Utah.

Wise P. "Colorectal Cancer Screening Options During COVID-19." Colorectal Cancer Community Partnership Educational Speaker Series. June 22, 2020; Virtual.



Dr. Jean Wang presents at the East St. Louis Smart Health event.

PECaD Community Partners

100 Black Men of Metropolitan St. Louis
Affinia Healthcare Health Centers
American Cancer Society
Betty Jean Kerr Peoples Health Centers
Cancer Support Community
CareSTL Health
Christian Hospital
City of Florissant, MO
Community Women Against Hardship
Danny Bell Cancer Center
East St. Louis Monitor Newspaper
East Side Health District
Family Care Health Centers
Father & Families Support Center
Ferguson-Florissant School District
Gateway to Hope
Hazelwood School District
Institute for Family Medicine
Kathryn M. Buder Center for American Indian Studies
Lane Tabernacle CME Church
Missouri Foundation for Health
Mound City Medical Forum
National Cancer Institute (NCI), Cancer Info. Service
Native Women's Care Circle
Pink Ribbon Girls
Southern Illinois Health Care Foundation
St. Louis Cancer & Breast Institute
St. Louis City Health Department
St. Louis City Public Libraries
St. Louis County Department of Health
Susana Wesley Family Learning Center, Inc.
The Breakfast Club, Inc.
The Empowerment Network
The St. Louis American Foundation
The St. Louis American Newspaper
The St. Louis Integrated Health Network
The St. Louis Mens' Group Against Cancer
The St. Louis Regional Health Commission
The Urban League
Tobacco Free Missouri
Valeda's Hope

"We are committed to ensuring equal access to screening and treatment services as well as delivering interventions to promote healthy lifestyles for all community members across our region. This is accomplished by working hand-in-hand with community partners, clinicians, scientists to reduce the impact of cancer, particularly among those who experience the highest burden of the disease. We are forever grateful to our community partners and cancer survivors whose time and commitment continue to inspire and direct research activities and clinical services."

- Bettina Drake, PhD
Associate Director of
Community
Outreach and
Engagement,
Director of PECaD



Program for the Elimination of Cancer Disparities (PECaD)

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