Retreat Agenda

9:30-10:00  Breakfast and Opening Remarks
            Dr. Graham Colditz & Dr. Laurent Brard

10:00-10:30 Overview of rural cancer disparities in downstate IL
            Dr. Dave Steward

10:30-10:45 Health Literacy in Kidney Cancer and Smoking
            Dr. Erin Linnenbringer

11:00-11:15 Racial/ethnic disparities in 2nd breast lesions after DCIS
            Dr. Graham Colditz and Kevin Garza

11:15-12:00 Networking
            All attendees

12:00-1:00  Lunch
            All attendees

1:00-1:30  Faith community nurses to improve colorectal cancer screening
            Whitney Zahnd

1:30-2:00  Evolving disparities in oral cavity and oropharyngeal cancers
            Dr. Wiley Jenkins

2:00-2:30  Wrap-up
            Dr. Graham Colditz and Dr. Aimee James
Improving Cancer Control in Rural Communities

I am delighted to start this discussion on R2R!

Last week I was invited to participate in NCI’s Cancer Currents blog to discuss some of the issues faced by rural communities and how NCI is approaching this important problem. You may know that researchers from several NCI-Designated Cancer Centers and NCI Community Oncology Research Program (NCORP) sites that serve rural parts of the United States recently met with NCI leaders to discuss the disparities in cancer outcomes in many rural areas of the country. The meeting was part of NCI’s efforts to prioritize its research activities to improve cancer control in rural areas.

How does living in a rural area affect issues like cancer prevention, treatment, and survivorship care?

It’s clear that there is a lot of geographic variation in cancer risk factors, incidence, and mortality. People who live in rural areas often face significant health care access challenges, including fewer physicians, long distances to facilities, and limited transportation options. In some rural areas, we also see high rates of tobacco use, poverty, poor health literacy, and drug and alcohol abuse.

All of these challenges can contribute to higher incidence of certain cancers in rural areas, and worse outcomes.

For example, in the Appalachian region of Ohio—where access to primary care, let alone oncology care, is limited, and you have high rates of poverty and obesity, among other problems—the incidence rates of colorectal, lung, and cervical cancers are substantially higher than they are in wealthier and more populated areas of the state. Similar types of geographic disparities are commonly seen in states like Utah, Montana, and Kansas.

So it’s clear that where a person lives has an important influence on their health through a variety of mechanisms.
Improving Cancer Control in Rural Communities: An Interview with Dr. Robert Croyle

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May 18, 2016 by NCI Staff

Researchers from several NCI-Designated Cancer Centers and NCI Community Oncology Research Program (NCORP) sites that serve rural parts of the United States recently met with NCI leaders to discuss the disparities in cancer outcomes in many rural areas of the country. The meeting was part of NCI’s efforts to prioritize its research activities to improve cancer control in rural areas.

In this interview, Robert Croyle, Ph.D., director of NCI’s Division of Cancer Control and Population Sciences, discusses some of the issues faced by rural communities and how NCI is approaching this important problem.

How does living in a rural area affect issues like cancer prevention, treatment, and survivorship care?
What is the Rural Cancer Disparities Partnership?

An NIH grant that supports the establishment of a partnership between the Simmons Cancer Institute of SIUSM and the Siteman Cancer Center of WUSTL.

This was funded through the NCI Feasibility Studies to Build Collaborative Partnerships in Cancer Research (P20) Program, designed to promote and build collaborative research, training, career development, and education efforts between the Institutions and Cancer Centers with NCI designation or with highly integrated cancer research programs.
The P20 initiative is part of the NCI Partnerships to Advance Cancer Health Equity (PACHE) Program
What is distance?
What does rural mean for health?
The partnership **GOALS** are to:

- Plan, prioritize, and implement a collaborative partnership in cancer-related and cancer-disparities research, and researcher training, education, and career development that is relevant to the population of Downstate Illinois.

- By doing so, the Partnership will contribute to **reducing** and eventually **eliminating** these rural cancer disparities.
Rural Cancer Disparities Partnership Aims

The partnership **AIMS** are to:

- **Promote** new and highly integrated research collaborations between SCI-SIUSM and SCC-WUSTL that specifically address cancers that disproportionately affect rural populations in Downstate Illinois.

- **Establish** an integrated training and career development program to foster the scientific and career development of SIUSM investigators while enhancing SCC investigators’ rural cancer disparities awareness, research, and reach.
Rural Cancer Disparities Partnership Aims

The partnership **AIMS** are to:

- **Create** a research environment that:
  - *Enriches* research-related learning and training opportunities at SIUSM
  - *Promotes* mentorship, collaboration and interaction among clinical, population health, and basic science faculty and trainees at SIUSM and SCC
  - *Supports* investigators at both institutions to conduct collaborative cancer pilot projects which will result in preliminary data that will lead to competitively funded NIH/NCI grant applications.
Components of the P20 Grant

Pilot Research Projects
Training, Education and Career Development Program
Administrative Core
Collaborative Cancer Disparities Research Program (CCDRP)

This program supports pilot research projects that
✓ represent collaborations between investigators from SIUSM and WUSTL
✓ specifically address cancer disparities relevant to Central and Southern Illinois

Our goal

*to support pilot research projects representing new collaborations between investigators from both institutions (WUSTL and SIUSM).*

Our aims

▪ solicit pilot proposals to advance research collaboration
▪ build capacity and support researchers at SIUSM
▪ encourage more WUSTL investigators to move toward rural cancer disparity research
2016 CCDRP Pilot Selections

Results of the 2016 CCDRP...
- 5 pilot proposals received
- 10 faculty/physicians at SIUSM and WUSTL reviewed applications
- P20 Internal Advisory Committee made final funding decisions
- 2 pilots were selected for funding

Congratulations to the following funded investigators!

<table>
<thead>
<tr>
<th>Pilot Title</th>
<th>WUSTL PI</th>
<th>SIU PI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supporting Decisions About Cancer Clinical Trials in Rural Cancer Centers</td>
<td>Mary Politi</td>
<td>Swati Pathak</td>
</tr>
<tr>
<td>Assessing Head and Neck Cancer Awareness as a Function of Rural Residence</td>
<td>Lauren Arnold</td>
<td>Arun Sharma</td>
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</table>
Rural Cancer Disparities Training Program

**Access to educational offerings** of WUSTL and SIU School of Medicine

- **Seminar Series**
  - Brings leaders in the field to WUSTL campus throughout the year to offer talks on a variety of relevant topics
  - Epidemiology and Clinical Outcomes Research Seminars
  - Dissemination and Implementation Speaker Series

- **Journal Club**
  - Division of Public Health Sciences Journal Club at WUSTL
  - Population Health Science Journal Club at SIU
  - Brings post-doctoral researchers, residents and fellows together to critically analyze recent literature in the field

- **Interdisciplinary Population Health Science Research Group at SIU**
Clinical Outcomes Research Training for Residents and Clinical Doctorates

SIU residents and junior faculty have two program options:
- Take individual courses
- Work towards a MPHS degree
  - Full-time for 10 months
  - Part-time for 2-3 years

The MPHS program is designed to integrate easily into clinical schedules or dedicated research time.
- All MPHS courses during the day
- Courses offered from late August to early May (with one July course option)