

PROGRAM FOR THE ELIMINATION OF CANCER DISPARITIES (PECAD)

Annual Report to Stakeholders 2015-2016

Progression for Tomorrow: 11 years of Community Outreach and
Prevention Education

Published August 2016



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ABOUT THE PROGRAM FOR THE ELIMINATION OF CANCER DISPARITIES (PECaD)

Annual Report to Stakeholders

The purpose of this annual report is to provide our stakeholders with a summary of the progress made toward the elimination of cancer disparities in our region and our communities. This report provides updates for ongoing work within PECaD from July 2015 to June 2016.

Who We Are

The mission of the Siteman Cancer Center's [Program for the Elimination of Cancer Disparities](#) (PECaD) is to create a national model for eliminating local and regional disparities in cancer education, prevention, and treatment. Working through a community advisory committee and cancer site-specific community partnerships, PECaD develops outreach and education, quality improvement and research, and training strategies that foster healthy communities and environments less burdened by cancer disparities.

Program Director



Graham A. Colditz, MD, DrPH

Niess-Gain Professor, Chief, Division of Public Health Sciences, Department of Surgery, Washington University School of Medicine; Associate Director of Prevention and Control, Siteman Cancer Center; and Deputy Director, Institute for Public Health at Washington University in St. Louis

PECaD Staff

Saffiyah Poole, MPH – *Program Coordinator*

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Katy Henke, MA – *Media and Marketing Administrator*

Jennifer Tappenden, RHIA – *Data Manager*

Acknowledgements

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

Funding

PECaD is 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 Supplemental Grant (3 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.

OVERVIEW

The Program for the Elimination of Cancer Disparities (PECaD) of the Siteman Cancer Center at Barnes-Jewish Hospital and Washington University School of Medicine was established in 2003 with institutional funds to address the excess cancer burden within the region and the state, particularly for minority and medically-underserved populations. We work with community partners to develop outreach and education, quality improvement and research, and training strategies that will foster healthy communities and environments less burdened by cancer.

Through two years of planning and the 11 ensuing years, PECaD's efforts have focused on expanding outreach to new communities and partners while enhancing current partnerships to better serve our community, which includes the Metro East area of Illinois. Along the way we've consistently progressed and evolved while staying true to our mission and vision, to educate and engage our community on the importance of cancer prevention.

Through PECaD's involvement with the diverse population in the St. Louis area, faculty and staff have had extensive community involvement in helping create cancer risk awareness and provide education in minority populations. These lessons have provided faculty with opportunities to be involved with numerous multi-institutional grants to increase minority recruitment into clinical trials. Emphasizing minority recruitment provides continued knowledge for researchers and clinicians alike to help reduce cancer burden both biologically and psychologically.

On the evening of September 15, 2015, we celebrated the accomplishments of PECaD, honoring those who have worked diligently to reduce cancer disparities, and provide our community members and partners an opportunity to reflect on the range of activities that PECaD has initiated to reach out to the community. With this great energy behind us, we entered the 2015-2016 PECaD year.

From the PECaD Co-Chairs:

"PECaD's commitment to reducing disparities in cancer education, prevention and treatment over the past ten years has helped to create informed and healthy communities. When the community understands their health and the importance of healthy living, it creates a model for healthy behavior."

Maranda Witherspoon, MPPA
Community Co-Chair

"PECaD has grown tremendously. The increasing depth and breadth of faculty and community engagement continues to expand into studies across the cancer center, including the new collaborative projects in pancreatic cancer. With continued funding and reach, PECaD will work to improve outcomes for our underserved populations."

Graham Colditz, MD, DrPH
Academic Co-Chair

LEADERSHIP UPDATES

Overview

Our community advisory committee, the [Disparities Elimination Advisory Committee](#) (DEAC), serves as our executive body. The DEAC is chaired jointly by an academic representative and a community representative. Our leadership structure also includes our Internal Scientific Leadership Team, which has community representation as well. The Leadership Team works to [translate and mold recommendations and insights from our DEAC into programmatic approaches](#) for our research, community outreach and training programs. Both the DEAC and the Internal Scientific Leadership Team work closely with community partners and our cancer community partnerships to shape our cancer site-specific programmatic strategies.

Updates

PECaD welcomed our [new public health research coordinator, Matthew Frank](#), in summer 2016. Matthew graduated with his Master of Public Health (MPH) and Master of Social Work degrees from Washington University in St. Louis. We are very excited to have Matthew working with PECaD. We are also very excited to welcome [Omobolanie Adeniran and Donnatesa Dean](#), who are both [second year MPH students](#) at Washington University in St. Louis George Warren Brown School of Social Work. PECaD also welcomed [four Washington University in St. Louis School of Medicine second year medical students](#), Anna Arnaud, Caroline Min, Kevin Garza, and Robert Gallo. These medical students are spending their summer assisting PECaD with community outreach and engagement, and various research projects.



*The James Lab, including PECaD members
(left to right, top row): Caroline Min, Saffiyah Poole,
Meera Muthukrishnan, Donnatesa Dean
(left to right, bottom): Matthew Frank,
Dr. Aimee James, Natasen McCray, Anna Arnaud,
Dr. Karyn Stewart, & Robert Gallo*

Current DEAC Membership

Academic and Community Co-Chairs

Graham Colditz, MD, DrPH	Program Director, PECaD
Maranda Witherspoon, MPPA	Program Officer, Missouri Foundation for Health

Community Members (Voting)

Leon Ashford, PhD	<i>Community Advocate & Prostate Cancer Survivor; Retired Professor</i>
Denise Hooks-Anderson, MD	<i>Assistant Professor, Saint Louis University School of Medicine; Department of Family and Community Medicine</i>
Mikki (Mary) Brewster, MSW	<i>Community Advocate & Breast Cancer Survivor; Retiree of St. Louis Public School District</i>
Pamela Jackson, RN, BSN, MA	<i>Community Volunteer & Advocate</i>
Sherrill Jackson, RN, CPNP, MSA	<i>President, The Breakfast Club</i>
Veronica Richardson, RN, MSN, MBA	<i>Vice President of Quality Improvement, Affinia Healthcare (formally Grace Hill Neighborhood Health Centers)</i>
Donald Suggs, DDS	<i>Founder & Owner, St. Louis American Newspaper</i>
Galen Gritts	<i>Community Ambassador, Kathryn M. Buder Center for American Indian Studies at Washington University; Community Volunteer</i>
Rev. Donna Smith-Pupillo, RN	<i>Executive Director, Deaconess Faith Community Nurse Ministries</i>

Academic/Institutional Members (Voting)

Sarah Gehlert, PhD, MSW, MA	<i>E. Desmond Lee Professor of Racial and Ethnic Diversity, Washington University George Warren Brown School of Social Work</i>
Melody Goodman, PhD	<i>Assistant Professor, Division of Public Health Sciences, Department of Surgery, Washington University School of Medicine</i>
Lannis Hall, MD, MPH	<i>Director of Radiation Oncology, Siteman Cancer Center at Barnes-Jewish St. Peters Hospital; Assistant Professor, Washington University School of Medicine</i>
Aimee James, PhD, MPH	<i>Associate Professor, Division of Public Health Sciences, Department of Surgery, Washington University School of Medicine</i>
Vetta Sanders Thompson, PhD	<i>Professor, Washington University George Warren Brown School of Social Work</i>
Molly Tovar, EdD	<i>Director, Kathryn M. Buder Center for American Indian Studies, Brown School of Social Work, Washington University</i>

COMMUNITY PARTNERSHIP UPDATES

Overview

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 health care organizations, representatives of community-based organizations, community members passionate about cancer, and academic faculty members and staff. Partnership members meet regularly to review progress and refine goals and projects as needed.

We have three site-specific community partnerships — [breast cancer, colorectal cancer and prostate cancer](#). Each group has actively participated in notable activities that have advanced PECaD's mission.



Breast Cancer Community Partnership

Over the past years the Breast Cancer Community Partnership (BCaP) has made great strides to [address breast cancer disparities within the community through providing support, community-based programming, research, advocacy and an increased access to breast cancer resources](#). This year has been a time to reflect and re-assess the direction in which BCaP should move forward to expand reach and impact within the region.

Currently, PECaD is working on re-invigorating this partnership. PECaD will be convening a BCaP planning committee to help organize 1 to 2 strategic planning workshops for BCaP. [These workshops will take place between late September and early November of 2016](#). They will focus on the future directions for BCaP, and setting goals and priorities for the upcoming year. We anticipate the next official BCaP meeting to be in January 2017!

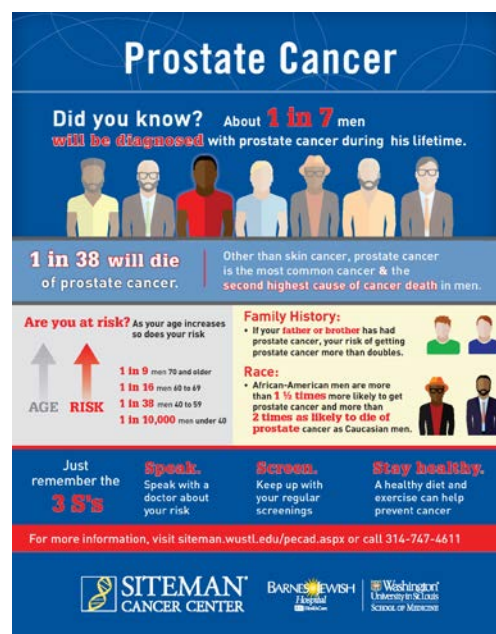
As part of BCaP activities, The **Community Partnership Center**, originally funded by Susan G. Komen for the Cure, moved to the Better Family Life building in North St. Louis when it re-opened in early summer of 2016. It resumed its series of events for survivors who live in the Wells, Goodfellow, and Kingsway neighborhoods with a brunch held on July 7, 2016. Sixty survivors are on the mailing list. More information on The Community Partnership Center is outlined on page 33.

We are also planning to **develop a breast cancer resource guide that will be accessible to survivors and those going through treatment**. The resource guide will include information about screening opportunities, treatment and support services, such as transportation and medication assistance.

Prostate Cancer Community Partnership

In the past year, the Prostate Cancer Community Partnership (PCCP) has continued their efforts of providing education and screening to underserved communities around the greater metropolitan area. The PCCP partnered with 100 Black Men on September 12, 2015 for the annual Prostate Cancer walk, providing screening for 51 men and education for all attendees. In February of 2016, PCCP member and cancer survivor, Dewey Helms, along with Dr. Arnold Bullock, participated in a speaking event about cancer at the St. Louis City Library Schlafly Branch. The PCCP continues working closely with The Empowerment Network (TEN) to provide outreach and education. One partnership event was at Mt. Bethel Missionary Baptist in May 2016, and the PCCP along with TEN was able to provide screening and education at the 8th Annual Community Health and Resource fair. During May, the Community Partnership was invited to participant in the Smart Health Cancer Prevention Community Education Day and provided screening and education for this event.

During the past year, the PCCP with help from BJC Creative Services, **developed a prostate cancer informational poster**. This poster has been well received at events and requested by various organizations. The PCCP **is also in the process of developing a Prostate Cancer Resource Guide**. This guide will be similar to the Colon Cancer Guide, and will contain information about prostate cancer. The guide will include resources for screening and treatment, transportation, nutritional, and other forms of support and



assistance. Once this guide is completed it will be distributed to our community partnerships and local health centers.

Another exciting addition to the prostate cancer movement is our **new Siteman Cancer Center Prostate Cancer Navigator, Tate Wood**. Ms. Wood will be helping out with patients needing assistance after screening events. She is also providing assistance with our continuing efforts in the community with the Prostate Cancer Coalition. **The Coalition is currently providing education on “Smart Screening” to physicians during grand rounds and is working towards speaking events in the community.** Resources about the Prostate Cancer Coalition and “Smart Screening” are now available at, <http://prostatecancercoalitionstl.org/site/>.

Colorectal Cancer Community Partnership

The Colorectal Cancer Community Partnership (CCCP) has continued its outreach efforts this year by participating in health fairs, planning and implementing community education events, and distributing the PECaD colon cancer resource guide for the St. Louis Metro and Metro East community.

The CCCP also continues to do **outreach in the Latino community**. Building on last year’s successful attendance at events reaching the Hispanic communities in St. Louis, CCCP members collaborated with the PECaD Outreach team to **translate our most commonly requested brochures into Spanish**. We expanded our outreach by **translating brochures into Bosnian as well**. This extensive process of translation, stakeholder review and feedback, and back translation to check accuracy wrapped up in spring 2016. We are in the process finalizing these brochures for distribution in summer 2016.

Look for our new 8ight Ways Brochures

Spanish: General, Breast, Colon, Survivors

Bosnian: General, Breast, Colon, Survivors

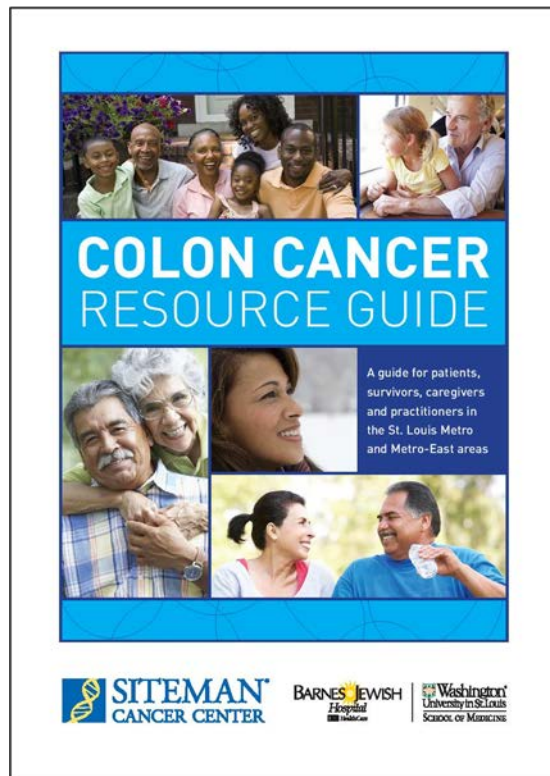
Updated in English to reflect new screening guidelines: Breast



The colon cancer video developed by CCCP faculty Drs. Jean Wang and Evelyn Marquez-Mello, featuring several CCCP members, **received a first place award in a national competition on colorectal cancer screening** sponsored by the American College of Gastroenterology. The award was presented in October 2015 at the annual national meeting!

CCCP members collaborated with the PCCP members to expand the successful “Smart Health- Knowledge is Power” event from colon focuses to an event including colon, prostate, and breast cancers. The event also featured a panel of cancer survivors and caregivers. As in previous years, we held the event in St. Louis City and in the Metro East. Planning is underway for our 2017 events. See the Outreach with Community Partners Updates section (page 19) for more details

The **Colon Cancer Resource Guide** was completed last year with the help of BJC Creative Services. Due to overwhelming demand, we reprinted the guide and have continued distributing it at our outreach events.



Left: The cover of CCCP’s Colon Cancer Resource Guide

OUTREACH AND EDUCATION UPDATES

The key goals of PECaD's Community Outreach and Education Program are to:

- Engage in and extend effective outreach efforts that promote cancer prevention messages in the community
- Identify medically underserved parts of the community and related barriers to quality cancer care
- Enhance community health and access to quality cancer care and health information

Media Outreach Updates

Newspaper Outreach and Education Campaign

Our longstanding tradition of placing cancer prevention education messaging in The St. Louis American newspaper continued in 2015-2016. The latest 10-month

campaign featured people involved with PECaD (academic faculty and community members) sharing stories of their work or experience with cancer. These relatable and personal stories tied back to the 8ight Ways to Stay Healthy and Prevent Cancer prevention strategies.

During the 2015 campaign, each message ran once per month, once in the general news section and once in the Health Matters section. An advertorial column in Health Matters provided additional space to tell the person's story, shared more about PECaD, and provide cancer prevention resources and information. **The St. Louis American reaches 245,000 readers per week, with 70% of those being African American.** This education and outreach effort reaches a broad range in PECaD's target audience.

In fall 2015, **PECaD worked with our Metro East Community Cancer Partnership to expand our**

Quit Smoking. Prevent Cancer.

Hardy, a cancer prevention advocate in a local health department and Program for the Elimination of Cancer Disparities (PECaD) member, insists that individuals quit smoking and drinking alcohol. This combination can lead to oral cancer. Smoking has been linked to at least 15 cancers, increasing the risk of heart disease, stroke, and lowering a person's quality of life. If you haven't quit smoking already, now may be the time to try again.

For research-proven ways to lower your cancer risk, visit www.8ways.wustl.edu

The Program for the Elimination of Cancer Disparities (PECaD) encourages everyone to live a smoke free life. If you currently smoke, talk with your doctor about what resources are available to help quit smoking. Visit smokefree.gov or call 1-800-QUIT-NOW to access smoking cessation resources in your area.

SITEMAN CANCER CENTER | **BARNES** JEWISH Hospital | **Washington** University in St. Louis School of Medicine

outreach in Illinois by placing educational messages in *The Belleville News Democrat* and the *East St. Louis Monitor*. Both newspapers serve residents in the Metro East area. These two newspapers reach three counties in Illinois and have an online presence in addition to a print newspaper. PECaD ran **two segments per month in the East St. Louis Monitor and two per month in The Belleville News Democrat, reaching over 43,000 people per print copy and over 187,500 online views per week.**

Beginning in February 2016, PECaD updated the newspaper campaign with **new faces of our PECaD community members**. The new faces featured both St. Louis and Metro East PECaD residents who are passionate about their health and the health of their friends and family. In total, **six new educational messages were created** highlighting the importance of smoking cessation, screening tests, sexual transmitted diseases health, collaboration with researchers, healthy diet, and a healthy weight. Each person was able to narrate why health was important to them.

These new educational messages were displayed in the St. Louis American, The Belleville News Democrat, the East St. Louis Monitor, and Old North Community News. **In total, 14 different cancer prevention messages were created and disseminated across the St. Louis Metro region.**

Examples of New Messages from our Newspaper Outreach Campaign

**Increase your knowledge.
Lower your cancer risk.**



Tori Fenno, a public health educator and Program for the Elimination of Cancer Disparities (PECaD) member, teaches adults and adolescents the importance of safe sex practices and Sexual Transmitted Disease (STD) prevention. Tori recognizes that talking about STD prevention can be uncomfortable, but is necessary to make sure people are informed about their risk of infection and cancer. She stresses the importance of being prepared and using protection to prevent STDs with her students, community members and friends.

For research-proven ways to lower your cancer risk, visit
www.8ways.wustl.edu

The **Program for the Elimination of Cancer Disparities (PECaD)** suggests talking with your partner and doctor about ways to prevent STDs. For more information about STDs and prevention tips, visit cdc.gov/std/pr

More collaboration. Less Cancer.



Aimee James, PhD, MPH, cancer prevention researcher and Program for the Elimination of Cancer Disparities (PECaD) leader, works with community organizations and members to develop outreach and education strategies to encourage healthy communities. Dr. James is able to do this by community collaboration. **Henrietta and Bianca**, mother and daughter as well as PECaD members, help connect, educate, and promote health education and prevention messages to the community alongside Dr. James.

Their help allows PECaD to continue the goal of eliminating cancer disparities and improving health for the community.

For research-proven ways to lower your cancer risk, visit
www.8ways.wustl.edu

The **Program for the Elimination of Cancer Disparities (PECaD)** works to engage local communities and collaborate with community partners to foster healthy communities and environments that reduce cancer disparities. PECaD interacts with communities through a broad range of activities and seeks to engage with communities in a way that is collaborative, culturally

Take Control. Reduce Your Cancer Risk.

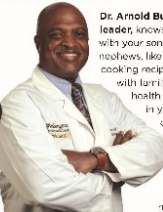
Quit Smoking. Prevent Cancer.



Hardy, an oral cancer advocate in a local health department, and Program for the Elimination of Cancer Disparities (PECaD) member, insists that individuals quit smoking and drinking alcohol. This is a volatile mix which can lead to oral cancer. We know it's hard to quit smoking and unfortunately this addiction is a tough one to break. However, the health benefits are significant for those who do not smoke, or who have quit. Smoking has been linked to at least 15 cancers, increasing the risk of heart disease, stroke, and lowering a person's quality of life. If you haven't quit smoking already, now may be the time to try again.

PECaD encourages everyone to live a smoke free life. If you currently smoke, talk with your doctor about what resources are available to help quit smoking. Visit smokefree.gov or call 1-800-QUIT-NOW to access smoking cessation resources in your area.

More Discussion. Less Cancer.



Dr. Arnold Bullock, physician and PECaD leader, knows there are a lot of things to share with your sons and daughters, nieces and nephews, like family traditions and family cooking recipes. Another good topic to talk with family members about is your family health history. Knowing that cancer runs in your family offers a great opportunity to discuss prevention strategies with your physician and family members.

Dr. Bullock frequently leads discussions in the community about cancer prevention tips to help lower cancer rates, especially in high risk populations. He takes an active role in educating men about their risk of prostate cancer and the benefits of screenings. Dr. Bullock has been instrumental in building a team of community partners to educate and conduct prostate cancer screenings in the African-American community in St. Louis.

In addition to screening tests, there are some lifestyle changes you can make now to reduce your cancer risk. A healthy lifestyle remains important for people of all ages, especially those with a family history of cancer. While you cannot change your genes, shifting to healthier behaviors, such as cutting smoking and keeping weight in check, can improve your overall health and lower the risk of cancer. Most of those lifestyle improvements will also lower your risk of a cardiovascular event, like a heart attack or stroke, the number one cause of death in America. **Dr. Bullock and PECaD encourage you to not only talk about screening with your doctor, but also with other family members.** That's one family tradition that's worth starting – it can save a life.

For research-proven ways to lower your cancer risk, visit
www.8ways.wustl.edu





Metro Transportation Outreach and Education Campaign

PECaD began placing education messages on both the metro link and metro bus interior cars as well as on the exterior of metro buses. With nearly **1 million riders per week, the metro campaign is very successful at reaching our target audience.**

Overall, 10 St. Louis region buses contained PECaD prevention messages on their exterior and 50 interior messages were placed inside the metro link as well as 50 within the metro buses. The metro buses and link prevention messages were displayed in both Missouri and Illinois. The campaign features healthy eating, smoking cessation, and sexual transmitted disease prevention as part of the 8 Ways to Prevent Cancer and Stay Healthy campaign. PECaD featured our new community residents from both St. Louis and the Metro East to stay consistent and increase recognition across media platforms as part of this campaign. Examples from the exterior of metro link trains can be seen below. The campaign began in February 2016 and will run through November 2016.



**Increase Your Knowledge.
Lower Your Cancer Risk.**

TORI
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**Quit Smoking.
Prevent Cancer.**

HARDY
Cancer Prevention
Advocate

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University in St. Louis
SCHOOL OF MEDICINE

Outdoor Billboard Outreach and Education Campaign

This high-impact campaign was continued in fall 2015, adding new zip codes in East St. Louis, IL. The sixteen billboards – 11x30 feet each – went up in early August 2015 at major intersections or prime visibility spots in **North St. Louis City, North County Louis, and East St. Louis, IL**. There were three different billboard designs, each using a person from our newspaper campaign to create continuity and increase the likelihood of recognition across platforms. This platform gives us the benefit of targeting cancer prevention messages in zip codes with historically high rates of cancer disparities, and the ten-week run time provides the added benefit of message repetition. **The billboards had an estimated 10,295,380 impressions.** Below are some examples of the billboards.



Stay Connected! Read the PECaD Newsletter



Through our quarterly newsletter, *STL Connection*, we continue to provide program information and updates with the nearly 400 community and academic partners who share our commitment to ending health disparities. Our newsletter is distributed via email four times per year. *STL Connection* was distributed in September and November 2015 as well as January, April and July 2016. Our next upcoming issue will be in October 2016.

If you would like to add someone to our newsletter distribution list, email pecad@wudosis.wustl.edu.

Outreach with Community Partners Updates

PECaD in the Community: *NEW* Events and Outreach

PECaD has remained committed to our programs purpose in our efforts to provide outreach and engagement within the communities that we serve. This year, **PECaD participated in 22 community outreach events**. This is 8 more events than we did last year! Our expanded outreach efforts are expected to increase year-after-year, consistently striving to include several new events that we've never attended in previous years. **Spreading our cancer prevention and health disparity messages even farther is the main objective.**

Community Education Days in both Missouri and Illinois

As part of PECaD's community outreach, this year two Smart Health Community Education Days were held in St. Louis City and East St. Louis, IL. Event promotion was printed in three newspapers: The St. Louis American, the East St. Louis Monitor, and the Belleville News Democrat. Online promotion with these community newspapers were also part of the marketing initiative to increase attendance. PECaD sent out multiple invitations to our newsletter distribution list. Social media was also utilized in inviting prospective attendees.



Free Community Health Education Day

SMART HEALTH 2016
A Cancer Prevention Community Education Day

Saturday, May 28
10a.m.—2p.m.

Location: William L. Clay Sr. Early Childhood Development/Parenting Education Center
3026 Laclede Ave., St. Louis, MO 63103
(on the campus of Harris-Stowe State University)

RAFFLE PRIZES FOR ATTENDEES
Meet The Expert Lunch with Local Physicians
Lunch and Return Metro Pass Provided

LEARN ABOUT

- 8 Ways to Prevent Cancer
- Breast, Colon & Prostate Cancer
- Exercise & Nutrition
- Cancer Survivorship

Limited Space Available
Reserve Your Seat Today:
314-747-4611
or pecad@wudosis.wustl.edu

Interested in hosting a booth? Contact us today for information!

SITEMAN CANCER CENTER **BARNESJEWISH** **Washington University in St. Louis**



Free Community Health Education Day

SMART HEALTH 2016
A Cancer Prevention Community Education Day

Saturday, June 4
10a.m. - 2p.m.

Location: East St. Louis Community College Center
601 James R. Thompson Blvd., East St. Louis, IL

RAFFLE PRIZES FOR ATTENDEES
Meet The Expert Lunch with Local Physicians
Lunch and Return Metro Pass Provided

LEARN ABOUT

- 8 Ways to Prevent Cancer
- Breast, Colon & Prostate Cancer
- Exercise & Nutrition
- Cancer Survivorship

Limited Space Available
Reserve Your Seat Today:
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or pecad@wudosis.wustl.edu

SITEMAN CANCER CENTER **BARNESJEWISH** **Washington University in St. Louis** **East St. Louis Community College**

Smart Health Community Education Days Photos



Left: Dr. Arnold Bullock discusses prostate cancer with Smart Health Day participants



Left: Dr. Heidi Miller leads a group of women in her session about breast cancer risk and prevention



Left: Dr. Jean Wang gives an overview of the colon and how colon cancer forms in addition to prevention and screening information during her Smart Health Day session

Smart Health 2016 Attendee Evaluation Report

PECaD organized and hosted two Smart Health Community Education Day events in 2016. The first was held Saturday, May 28, at Harris Stowe-State University near downtown St. Louis. The second was held the following Saturday, June 4, at the East St. Louis Community College in the Metro East region. This was the first year where topics covered not only colon cancer, but prostate and breast cancer as well. **The goals of these events are to inform and educate the community at large about cancer topics, and provide community members opportunities to access community resources and connect with local experts and individuals who have been impacted by cancer in various ways.**

Methods

Attendees were given an evaluation form upon signing into the event, and they were encouraged to complete an event evaluation form throughout the day. The evaluation form asked questions about the individual sessions attended and the Smart Health event as a whole. Participants were also asked to provide basic demographic questions (e.g., age, sex, education). As an incentive to complete the evaluation, attendees received a PECaD water tumbler upon returning the evaluation survey. The information collected from these evaluations have been compiled and are presented below. They will serve, in part, as the basis for helping the PECaD team improve future community events, specifically Smart Health events.

Attendee Demographics

A total of 29 (58%) event attendees completed the evaluation form. These respondents were generally **middle to older age community members from the St. Louis and Metro East areas**. The mean age of participants was 55 years at the St. Louis event and 64 years at the Metro East event, respectively. **The majority (89.7%) of community members who attended either session were women, almost half (48%) were African American, and 21.7% were Hispanic or Latino**. Over 60% of respondents completed at least some college, with 30.8% of them earning a bachelor's degree or higher.

Table 1. Demographic Characteristics of 2016 Smart Health evaluation respondents

Characteristic	% (n)
Evaluation respondents	58 (29)
Mean age (<i>SD</i>)	58.6 yrs (16.4)
Sex	
Female	89.7 (26)
Race	
African American	79.2 (19)
White	20.8 (5)
American Indian/Alaskan Native	4.2 (1)
Ethnicity	
Hispanic or Latino	21.7 (5)
Education	

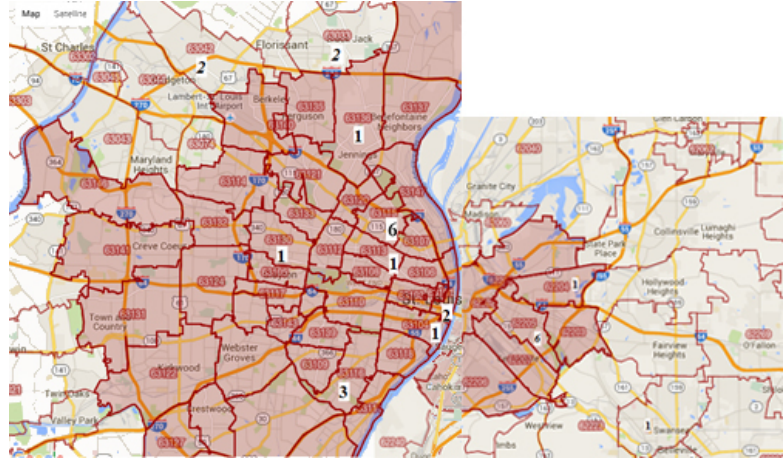
Some high school	(0)	
High School or GED	19.2 (5)	
Some college	30.8 (8)	
Bachelor's degree or higher	30.8 (8)	
Health Insurance status		
Uninsured	3.8 (1)	
Employer sponsored	42.3 (11)	
ACA Marketplace Plan	3.8 (1)	
Medicaid	15.4 (4)	
Medicare	30.8 (8)	
Military	(0)	
Other	23.1 (6)	
Primary Care Doctor?		
Yes	86.2 (25)	
Regularly Visit Doctor		
Yearly	65.4 (17)	
Every other year	3.8 (1)	
Occasionally	26.9 (7)	
When I'm sick	(0)	
Never	(0)	
Ever Diagnosed with Cancer		
Yes		18.5
	(5)	

Nearly all (96.2%) of the respondents had health insurance, though the types were largely split between employer based and public insurance. Additionally, 86.2% had a primary care doctor; 65.4% of whom received regular health services at least yearly. Almost one-fifth (18.5%) of respondents reported ever being previously diagnosed with cancer (1 cervical, 1 prostate, 2 breast and 1 with multiple cancer types).

Zip codes

Figure 1. Number of Participants by Zip Code

62204	1
62205	6
62220	1
62222	1
62226	2
63033	2
63042	2
63102	2
63104	1
63113	1
63115	5
63116	4
63130	1
63136	1



How did you hear about the session?

The majority of respondents who answered this question indicated that they learned of the event from one of the local newspapers (St. Louis American or the East St. Louis Monitor). Additionally, others reported that they heard about the event from the public library, community partner agencies, or through their family members.

Number of Sessions Attended

Ten sessions were held during each Smart Health event. The events opened up with a panel discussion with community members who are cancer patients, survivors, or caregivers who shared their experiences on how cancer has impacted their lives. Breakout sessions were led by medical and research experts and key cancer advocacy representatives from community agencies. **Sessions covered a multitude of topics including prostate, colon, breast and cervical cancer, general cancer prevention, key components of research, patient advocacy and navigation, as well as nutrition and fitness.**

Table 3. Breakout Session Topics covered at 2016 Smart Health Events

<i>8 ways to Prevent Prostate Cancer</i>	<i>8 ways to Prevent Cancer</i>
<i>You've Been Diagnosed with Breast Cancer, Now What?</i>	<i>Protecting Yourself from Sexually Transmitted Diseases & Cervical Cancer</i>
<i>Colon Health: Learn about your Colon & Colon Cancer</i>	<i>Understanding Research</i>
<i>Your Health Matters</i>	<i>Patient Navigation and Its History</i>
<i>Healthy Eating & Nutrition*</i>	<i>Frugal Fitness: Exercise on a Dime</i>

* Session topic only offered at Metro East Smart Health Event

Participants on average attended 3 and 4 sessions at the St. Louis City and Metro East events, respectively. The panel discussion, held at the beginning of each event, was one of the most heavily attended sessions, followed by frugal fitness, colon cancer, and 8 ways to prevent cancer.

Table 4. Attendee Suggestions for future Smart Health events

Hold it in a neighborhood (i.e., community center, church, soccer field, etc. where you'd have a large capture audience) or partner with a community action agency that draws 300+ people at events like community action agency of St. Louis County)

Maybe more sessions if the same

Longer time

Temperature in rooms (regulate)

Very good event, but only a few people attend. It is necessary to may [do] more [advertisement] about it

I would recommend an email

Have a community bus to pick people up

Offer same number of sessions and repeat them during event

Have speaker speak up. Voice too low

Nothing, it was helpful exactly how it was; no changes; (n=4)

Great event (n= 3)

Discussion

The two 2016 Smart Health events marked growth in partnerships and an expansion of cancer topics. Results from the Smart Health event evaluation indicate that community members desire to be informed of cancer disparities and appreciate the forum of community health events. Overall, respondents enjoyed the event and gave high ratings to speakers in the various sessions. They also felt the session information was useful and could be shared with others.

PECaD Begins Work with the American Indian Population

The Kathryn M. Buder Center for American Indian Studies teamed up with PECaD to address cancer disparities in the American Indian and Alaska Native (AI/AN) population. In the St. Louis region, there are roughly 11,968 American Indians and 181 Alaska Natives, but no resources specifically serving AI/AN women. Among these women, breast cancer is the second leading cause of death. The Buder Center is working with Siteman Cancer Center and PECaD to provide AI/AN women access to mammography and increase awareness of cancer prevention strategies.

The Buder Center has established relationships with community members who will be critical to the evaluation and implementation of cancer prevention strategies in the AI/AN populations. Members of the workgroup are creating culturally appropriate educational material to increase education and help train volunteers for a future statewide event in addition to meetings with AI/AN community members.

Additionally, community members have been asked to participate in pre-and post-assessment surveys for researchers to better understand how to improve health literacy in the AI/AN populations.

The work currently being done should provide additional information about AI/AN health knowledge, ways and prevention strategies to implement to reduce cancer burdens in the specific populations, as well as build relationships between health resources and community members. Access to healthcare is also an invaluable part of this project. A long term goal of the project is to establish yearly events that do provide breast cancer screenings and follow up healthcare to AI/AN women.

PECaD also plans to feature AI/AN women in our outreach education and prevention campaign with culturally appropriate messaging beginning in winter 2017.



Above: American Indian women at the 2016 Washington University Pow Wow in April. Each woman wrote why screenings were important to her.

The St. Louis Regional Breast Navigator Workgroup

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. Navigators travel from a 150-mile radius to attend the meetings, from Missouri and Illinois.

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

During further implementation of the Affordable Care Act, the navigators have continued to work together to advocate for breast health care for their patients. This workgroup is supporting participants in figuring out how to navigate patients in multiple contexts, including prohibitively high-deductible health plans, the lack of Medicaid expansion by the 2016 Missouri Legislature, and new challenges as they arise.

Breast Navigator Workgroup: Featured Topics	
October 2016	Cultural Competency Training
July 2016	Reconstructive Breast Surgery
April 2016	Building Resiliency within Ourselves and our Patients
January 2016	St. Louis Breast Cancer Disparities
October 2015	Breast Screening: When to Stop?
July 2015	Breast Pain
April 2015	Breast Health Concerns for Young Women
January 2015	Safety Network Resources for Primary and Specialty Care
October 2014	Breast Density Legislation: Missouri Senate Bill No 639
July 2014	Affordable Care Act: Updates and Navigating the System
April 2014	Breast Cancer Genetic Risk
January 2014	Breast Cancer Prevention
October 2013	Breast Imaging Update: Tomosynthesis
July+April 2013	Motivational Interviewing for Navigators
January 2013	Support Groups for Breast Cancer
October 2012	Overcoming Fear as a Barrier to Breast Care
July 2012	Caring for International Patients
April+January 2012	Primary Care for Breast Care Patients
October 2011	Patient Navigation: Skills, History, Data
July 2011	Breast Cancer Risk Assessment Tools
April 2011	Mobile Mammography
January 2011	Compassion Fatigue: Care for the Caregiver/Navigator
October 2010	Nonprofit Resources: Komen
July 2010	Tracking Breast Cancer Screening Referrals
April 2010	Current Breast Cancer Referral Processes

The St. Louis Regional Breast Navigator Workgroup, PECaD, the Breast Health Center, and the Division of Public Health Sciences, Department of Surgery, were working together with organizations in the Bootheel region as direct response to requests to establish a workgroup in that area. **As a result of this team effort, a regional breast navigator workgroup has been established in the Bootheel.**

PECaD's role was to advise and support, providing an explanation of patient navigation, an overview of how the St. Louis Regional Breast Navigator Workgroup began and currently operates in St. Louis, and to assist as the Bootheel determined which local partners needed to be at the table. Over the last year, PECaD and the St. Louis Regional Breast Navigator Workgroup worked in the Bootheel to coordinate navigation efforts

across organizations in an effort to better serve members of that community. **These coordinated efforts assisted in reducing barriers for community members to receive the care they needed.** Ownership of the Bootheel meeting has been handed over to their local navigators and community, but PECAD remains a resource that is available to the group when needed.

QUALITY IMPROVEMENT & RESEARCH UPDATES

Overview

The current research projects within PECaD continue to make progress. These projects, their accomplishments, and next steps are summarized on the following pages. PECaD also has two new spin-off grants:

James, A. Supplemental funding awarded under PECaD parent grant to expand the network of partners in the Colorectal Cancer Partnership, conduct priority-setting exercises with partners, develop a resource guide on colorectal cancer, and conduct colorectal cancer outreach activities, tying the Supplement activities to the Full Research Project. \$65,000 total. 9/1/2014 to 8/31/2015.

Colditz, G.A. Building on previous PECaD knowledge, a new grant and relationship with Southern Illinois University School of Medicine (SIUSOM) has been established to address cancer disparities in rural communities. These rural communities have higher poverty rates and are medically underserved with disparately high cancer burden. Collaboration with SIUSOM fosters multi-institutional and transdisciplinary research to address cancer disparities specific to rural communities with the end goal of reducing cancer burden. \$1,300,000 total. 9/8/2015 – 8/31/2018.

Completed Project Updates

A Systems-Level Intervention to Increase Colorectal Cancer Screening in Community Health Centers



Principal Investigator: Aimee James, PhD, MPH

Funding: National Cancer Institute at the National Institutes of Health (U54 CA153460-7717 and U54 CA153460-05)

Timeline: 2010 to present

This project works with safety-net health centers in St. Louis City and St. Louis County in Missouri, in East St. Louis/St. Clair County in Illinois, and in the Bootheel region of Missouri. This is a randomized control trial testing the effectiveness of community health center-selected, systems-level, evidence-based interventions for increasing rates of colorectal cancer screening.

ACCOMPLISHMENTS	NEXT STEPS
✓ Eleven health centers recruited for randomization ✓ Organizational assessments and interviews completed ✓ Highly-tailored intervention implementation menus offered to each health center ✓ Colon cancer screening interventions implemented at all intervention health centers ✓ Exit surveys with the health centers have been started to assess implementation and perceptions of the intervention and the study ✓ Completed participant recruitment and follow up at first eleven health centers ✓ Recruited two new health centers from Kansas City, MO ✓ Oral presentation at AACR Science of Cancer Disparities Meeting ✓ NEW! Baseline paper under review at a peer-reviewed journal ✓ NEW! Started patient recruitment and intervention implementation at new health centers in Kansas City, MO to test dissemination of the intervention	□ Analyze data to determine program effects. □ Continue to share findings with partners, local stakeholders, and national science community. □ Continue study of intervention dissemination

Using Photovoice to Engage Community Members About Colorectal Cancer Screening



Principal Investigator: Aimee James, PhD, MPH

Funding: National Cancer Institute at the National Institutes of Health
(R21 CA147794)

Timeline: 2011 to 2014

This project used a participant-driven approach in which community members are provided with cameras to capture images relevant to colorectal cancer screening. The community-selected images and narratives gathered from this study can be built upon for future community-based studies and outreach to promote cancer screening and eliminate colorectal cancer disparities. Supplemental funds received in spring 2016 will be used to further research cost-related non-adherence from the National Institutes of Health (R01MD010445-01).

ACCOMPLISHMENTS	NEXT STEPS
✓ Full Photovoice process completed by three groups of people ✓ Reception and showcase of Photovoice images open to the public; attended by 50 people ✓ Images and messages integrated into PECaD outreach activities ✓ NEW! Paper published in Qualitative Health Research	□ Continue to identify local sites for displaying posters □ Continue to disseminate findings from the research study □ Educate other researchers about Photovoice methodology □ NEW! New funds received to research cost-related non-adherence

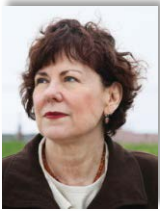


I've had so many false alarms, I'm starting to get screening burn-out. There was the negative cervical biopsy nine years ago, the negative breast biopsy four years ago, the suspicious mole that turned out to be benign... It's hard to keep going through those emotions, over and over again. I'm tired of it.

So there was a part of me that didn't want to start getting colonoscopies, just didn't want to open that mysterious bag and see where I was going. But I did it anyway, which is what you do when you're a responsible grown-up and all that, right?

Left: A participant's Photovoice poster depicting screening burn-out

Community-Based Participatory Approach to Improving Breast Cancer Services for Women Living in St. Louis



Principal Investigators: Sarah Gehlert, PhD (pictured) and Graham Colditz, MD, DrPH

Funding: Susan G. Komen For The Cure®: Vulnerable Community Grant

Timeline: 2011 to 2014

Using a variety of information sources, this project aimed to understand disruptions in the course of breast cancer treatment as a possible explanation for excessive breast cancer mortality in North St. Louis. In collaboration with four local community partners (Betty Jean Kerr People's Health Centers; Committed Caring Faith Communities; Christian Hospital; and Women's Wellness Program of the Saint Louis Effort for AIDS), this project sought to enhance community trust by creating an established presence in the community. A number of publications and presentations have come from the work and others are in process.

Doctoral trainee Lailea Noel, an ACS Predoctoral Fellow, completed her dissertation on data from the project and has accepted a position at New York University working in breast cancer disparities. She begins in September 2016. Dr. Faustine Williams, a PECaD postdoctoral fellow completed research with the project and has accepted a faculty position at Eastern Tennessee University.

ACCOMPLISHMENTS	NEXT STEPS
✓ Established a breast cancer survivor support group with monthly brunch meetings ✓ Funding from SCC/Sista Strut to create informational lymphedema DVD for women on Medicaid used in Breast Clinic (in partnership with the Lymphedema Management Program at the Washington University School of Medicine) and make available colorful African head wraps for women undergoing chemotherapy ✓ Global Health fellowship placement for Washington University undergraduate student	□ Continue presentations on health topics in schools, churches, and community-based organizations □ Collaborate with the City of St. Louis Department of Health on programs and interventions based on findings which allows expansion of breast cancer support groups to work on positive messages and outreach □ Collaborate with stakeholders to support breast cancer navigation services

Gina Phillips and subsequent senior honors thesis ✓ Breast cancer treatment delay disparities project using Group Model Building with City of St. Louis Department of Health (Hovmand, Williams, & Gehlert) ✓ NEW! “Breast reconstruction after mastectomy at a comprehensive cancer center” (Connors, Goodman, Myckatyn, Margenthaler, Gehlert) published in SpringerPlus July 2016 ✓ NEW! Moved from Community Partnership Center to space at Better Family Life supported by the George Warren Brown School ✓ NEW! Applied for funding to expand upon the work that was done through the prior program to include community health workers.	
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Community Research Fellows Training (CRFT) Program



Principal Investigator: Melody S. Goodman, PhD

Funding: National Cancer Institute at the National Institutes of Health (U54 CA153460 and U54 CA153460-03S2) and Siteman Cancer Center

Timeline: 2012 to 2015

The project promotes the role of underserved populations in the research enterprise by increasing the capacity for community-based participatory research (CBPR) between researchers, community-based organizations, and community health workers in the St. Louis area. This unique training program aims to enhance community knowledge and understanding of the research process so that community members can participate in research projects as equal partners to address disparities.

ACCOMPLISHMENTS	NEXT STEPS
✓ Certificate ceremony and reception honoring 45 fellows that completed the training (Cohort I) on August 8, 2013 ✓ Community Advisory Board that meets quarterly and includes five Cohort I fellows and one Cohort II fellow ✓ Certificate ceremony honoring the 38 fellows that completed Cohort II training was held on August 21, 2014 ✓ Provided technical assistance for the development of a Patient Research Advisory Board consisting of CRFT alumni who serve in an advisory role to academic researchers on issues of community engagement and ethical considerations of research from a community perspective ✓ NEW! A certificate ceremony honoring the 19 Cohort III fellows was held on August 20, 2015	□ Release findings from <i>New Face of Homelessness</i> CRFT CBPR pilot project on the health needs of homeless women ages 45-64 □ Program expansion: • NEW! The CRFT program has been implemented in Mississippi with three cohorts completing the program

- ✓ **NEW!** Over 100 community fellows have completed the CRFT training in 3 years



Above: Cohort III community research fellows, Drs. Tim Eberlein, Graham Colditz, and Melody Goodman, at the August 2015 ceremony

Preferred Consent Models for Secondary Uses of Biospecimens Among Diverse Women



Principal Investigator: Bettina F. Drake, PhD, MPH (pictured) and Kim Kaphingst, ScD

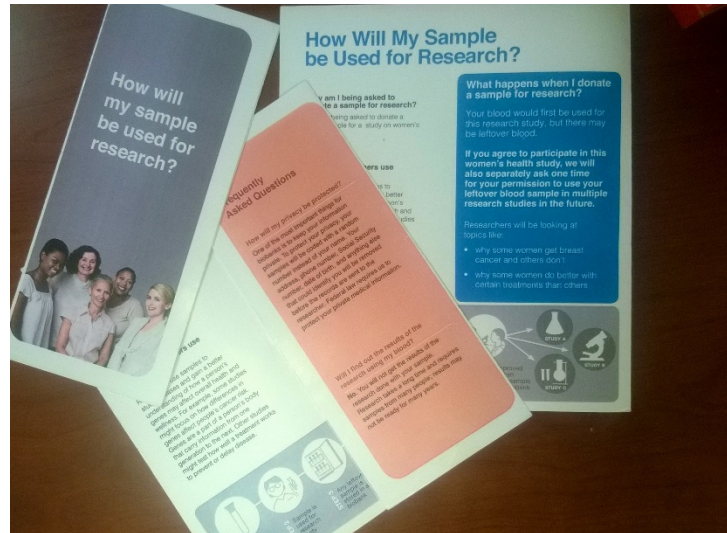
Funding: National Cancer Institute at the National Institutes of Health (U54 CA153460-03S1)

Timeline: 2012 to 2015

This project investigated preferences for models of informed consent for secondary research uses of biospecimens among a racially and socioeconomically diverse sample of women. A supplemental project builds upon PECaD resources and existing collaborations with community organizations. A partnership with Siteman Cancer Center and The Breakfast Club, Inc. has been created to recruit women who have used breast health services in the past.

ACCOMPLISHMENTS	NEXT STEPS
✓ Created three plain language materials to supplement informed consent process ✓ Presented data about designing plain language consent materials at a local educational fair ✓ 359 participants have completed the randomized aim; accrual goal has been reached ✓ Final data collection has been completed ✓ Shared research findings with both community and organizational stakeholders ✓ NEW! Article in-press about women's preferences for models of consent ✓ NEW! Presented research findings at local and national conferences	□ Preparing research findings for publication

- ✓ **NEW!** 3 additional publications on this work and more in progress



Above: Plain language brochures describing a model of informed consent

Evaluating the Impact of PECaD



Principal Investigator: Cassandra Arroyo-Johnson, PhD

Funding: National Cancer Institute at the National Institutes of Health (U54 CA153460 and U54 CA153460-03S2)

Timeline: 2014 to present

The purpose of this pilot project is to work with the PECaD Evaluation Team to develop an evaluation plan that fits within the PECaD framework. The goal is to (1) provide a detailed evaluation of PECaD's program, project, outreach, and training activities that are required by the funding agency; and (2) Estimate CBPR impact on improving health in the region.

ACCOMPLISHMENTS	NEXT STEPS
✓ Manuscript published in <i>Progress in Community Health Partnerships</i> comparing CBPR Surveys from PECaD and the Minnesota CNP ✓ 2013 PECaD CBPR Survey results presented to DEAC ✓ Manuscript in progress on PECaD CBPR effectiveness and Mistrust of Medical Researchers ✓ 2015 PECaD CBPR Survey developed ✓ NEW! 2015 PECaD CBPR Survey distributed to all PECaD members ✓ NEW! Manuscript (Goodman – 1st author) in press with <i>Journal of Community Psychology</i> on a development of the Community Engagement Scores scale	□ Increase recruitment efforts for 2015 PECaD CBPR Survey to improve participation rate of PECaD members □ Validation of Community Engagement Scores scale □ Evaluate partnership progression since PECaD 1 (in progress) □ Compare results of 2015 survey with 2011 and 2013 surveys □ Estimate CBPR impact on PECaD outcomes.

TRAINING PROGRAM UPDATES - Post Docs

PECaD's Transdisciplinary, Community-Based Participatory Research Training Program is designed to produce accomplished researchers capable of using the tools of community-based, clinical and basic research to establish independent research programs in the service of underserved patients and communities. Led by Drs. Sarah Gehlert and Aimee James, trainees engage in meaningful professional development activities, including a Transdisciplinary Journal Club, Works in Progress, and a monthly career development seminar.

The PECaD postdoctoral training program has over a dozen trainees (including both postdocs from our formal training program and other young researchers who have participated in PECaD projects).

Last summer we received a grant from the National Cancer Institute to support Postdoctoral Training in Cancer Prevention and Control (T32 CA190194; PI: Graham Colditz, MD, DrPH; Training Director: Aimee James, PhD, MPH)

NEW! Jean Hunleth, PhD, MPH, a former post-doctoral student, is now a Research Scientist in the Division of Public Health Sciences at Washington University School of Medicine. Dr. Hunleth is a co-investigator on several PECaD and disparities related grants. She will also be releasing her first book in 2017.

NEW! Faustine Williams, PhD, MPH, accepted a tenure track Assistant Professor position at East Tennessee State University, College of Public Health. With Dr. Gehlert as her mentor, Dr. Williams led a pilot study using group model building to understand the factors that are contributing to breast cancer treatment delays. Although this work was initially designed as a research project to understand disparities, the participants saw this as an intervention and have shared their experiences with group model building classes.

PUBLICATIONS AND PRESENTATIONS

Papers

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Goodman, M. S., Thompson, V., Johnson C., Gennarelli, R., Drake, B., Witherspoon, M., Bajwa, P., & Bowen, D. Evaluating Community Engagement in Research: Quantitative Measure Development. *Journal of Community Psychology* (in press).

Academic Presentations

Connors, S.K. Health in St. Louis: You Place in the Solution. Keynote Speaker, Institute for Science & Mathematics Academy Science Expo, Harris-Stowe State University. July 28 2016. St. Louis, MO

Connors S.K., Goodman M.S., Myckatyn T., Margenthaler J., Gehlert S. Disparities in Breast Reconstruction at a NCI-Designated Cancer Center. Health Disparities, Education, Awareness, Research, and Training (HDEART) Consortium 14th Annual Disparities in Health in America: Working Toward Social Justice Summer Workshop. University of Houston-Downtown. Jun 20 2016. Houston, TX.

Connors, S.K. Transdisciplinary Training to Reduce Health Disparities. Public Health Talks, Trident University International. May 19 2016. Cypress, CA.

Gehlert S., "Improving Cancer Control in Rural Communities." Research to Reality, National Cancer Institute. 2016.

Gehlert S. "The effect of Social Influences on African-American Breast Cancer Patients." NCI Cancer Prevention Fellowship Program's Cancer Prevention and Control Colloqui Series. May 2016. Rockville, MD.

Gehlert S. "Dissecting Breast Cancer Causation." California Breast Cancer Research Program. Mar 2016. San Francisco, CA.

Gehlert S. "Effect of Social Influences on African-American Breast Cancer Patients". Breast Cancer Disparities Course, Department of Medicine, University of Chicago. Mar 2016. Chicago, IL.

Gehlert S. "Precision Behavioral Medicine in Cancer: Personalization Across the Cancer Care Continuum." Society of Behavioral Medicine: 37th Annual Meeting. Mar 2016. Washington DC.

Gehlert S. Debate on the Potential of the Precision Medicine Initiative to Reduce the Nation's Health Disparities: A "Grey Skies" Perspective." Invited debate speaker, TREC Annual Scientific Meeting. National Institutes of Health. April, 2016. Washington D.C.

Gehlert S. "Social Influences on Breast Cancer." Keynote speaker, Quick Start Program, California Breast Cancer Research Program. April, 2016. San Francisco, CA.

Gehlert S. "Liberty and Justice for All? Precision Medicine Initiatives Impact and Health Disparities." Academy of Science, An Evening with the Experts: DNA, Personalized Medicine, and You! Aug 2015. St. Louis, MO.

Gehlert S. "Forum of Precision Medicine: Unique Opportunities and Challenges for Cancer Disparities Research." AACR Conference: Science of Cancer Health Disparities in Racial/Ethnic Minorities. Nov 2015. Atlanta, GA.

Goodman M.S. "Quantitative Measurement & Implications of Race-Based Health Disparities." invited oral presentation. American College of Epidemiology Minority Affairs Committee Workshop. Atlanta, GA. Sep 2015.

Goodman M.S., Sanders V.T., Drake B., Witherspoon M., Arroyo-Johnson C. "Quantitative evaluation of the quantity of community engagement in research." Roundtable presentation at the 143rd American Public Health Association Annual Meeting. Chicago, IL. Nov 2015.

Goodman M.S., Funchess T., Javois B.J., Green C., Sanders V.T. "Community capacity building for community based participatory research through training: Implementation and evaluation of the community research fellows training program" Roundtable presentation at the 143rd American Public Health Association Annual Meeting. Chicago, IL. Nov 2015.

James A.S., Hunleth J., Smith S., Gilbert K., Bowen D. "Costs and Consequences: Trying to balance affordability and adherence" Presentation at the Society of Behavioral Medicine conference. Washington DC. March 2016.

Kaphingst K., Ivanovich J., Lyons S., Biesecker B., Dressler L., Dresser R., Seo J., Goodman M.S. "What genome sequencing results do young breast cancer patients want returned and when?" Poster presentation at the 143rd American Public Health Association Annual Meeting. Chicago, IL. Nov 2015.

Marquez-Mello, James A.S., Colditz G., Amara, Wang J. "Video-Based Intervention to Improve Colorectal Cancer Screening in Underserved Populations" Presentation at the Digestive Disease Week (American Gastroenterological Association). San Diego, CA. May 2016.

Mathur K., Muthukrishnan M., Yan Y., Colditz G., James A.S. "Insurance instability and colorectal cancer screening utilization" Poster presentation at the AACR Science of Cancer Disparities Annual Meeting, Atlanta, GA. Nov 2015.

Muthukrishnan M., Yan Y., Wang J., Colditz G.A., James A.S. "Systems-level intervention to increase CRC screening in community health centers" Presentation at the AACR Science of Cancer Disparities Annual Meeting. Atlanta, GA. Nov 2015.

Perkins H., Lyons S., Brown K., Gehlert S., Wolf L., DuBois J., Goodman M.S., Drake B., Kaphingst K. "Effect of health literacy on intentions to donate to a biobank among diverse women" Poster presentation at the 143rd American Public Health Association Annual Meeting. Chicago, IL. Nov 2015.

Walker V., Green C., Powell G., Funchess T., Goodman M.S. "Capacity building through partnerships with academic institutes, health organizations, and the state health department" Roundtable presentation at the 143rd American Public Health Association Annual Meeting. Chicago, IL. Nov 2015.

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