

Community Engagement and Health Equity (CEHE)

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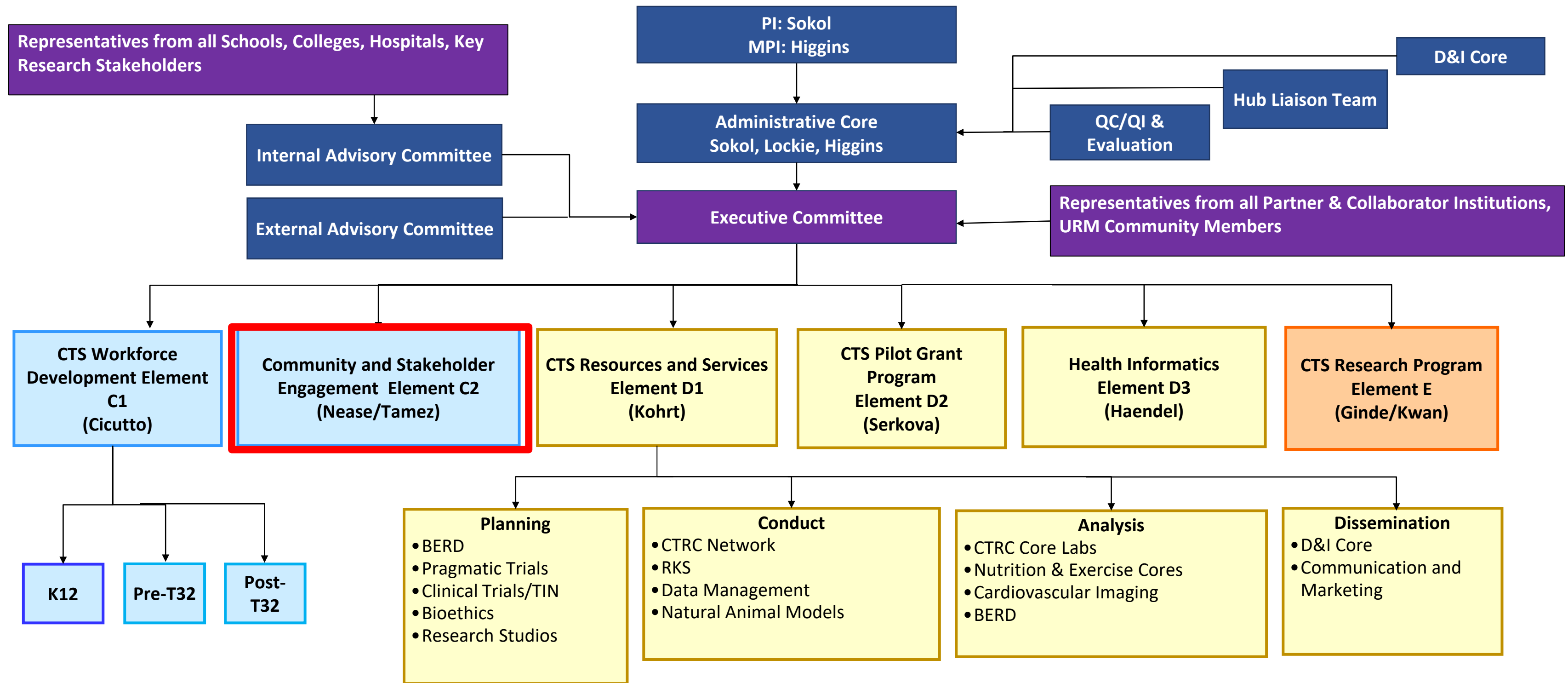


Colorado Clinical and Translational
Sciences Institute (CCTSI)

UNIVERSITY OF COLORADO DENVER | ANSCHUTZ MEDICAL CAMPUS



Integration Across CCTSI



Leadership Team & Diversity

Key Personnel:

- Don Nease, MD – Director
- Montelle M. Taméz – Deputy Director
- Kaylee Rivera-Gordon, MPH – Program Manager
- Mary Fisher, MPH – Project Manager
- Jennifer Greig – Administrative Coordinator
- 9 Community Research Liaisons
- 14 Elected PACT Members
- Pati Valverde, PhD – CIT Academic Director



Don Nease, MD



Montelle Tamez



Kaylee Rivera-Gordon, MPH



Mary Fisher, MPH

**Community Engagement and Health Equity
(including PACT and CRLs)**

45% Female

65% MD, PhD or Masters Degree

61% URM Community Representatives

**Representation across DFM, COSPH,
ACCORDS, Bioethics, Denver Health, CSU,
CU Boulder, CU Denver**



Leadership Team & Diversity - Governance

The Partnership of Academicians and Communities for Translation (PACT):

A partnership of researchers and community members working together to support and facilitate community-based participatory research (CBPR), build trust and connections between researchers and communities, and encourage institutional changes that allow all communities to benefit from health research.

The PACT Includes 23 Voting Members:

- 7 Elected Community Members
- 7 Elected Academic Members
- 9 Community Research Liaisons



CTS Roadblocks Addressed

The current CTSA NOFO calls on the CEHE Core to address roadblocks to translating discovery into practice in communities that suffer health inequities through the following:

- Collaboration and engagement with stakeholders in all aspects of CTS research.
- Acceleration of CTS research to address the significant burden of conditions that disproportionately affect rural, minority, and other underserved populations.
- Application of a health equity framework to CTS.
- Participation of underserved populations and research participants as full collaborators early and often throughout the process.



Strategic Goals

Strategic Goal	Expected Outcomes
<p>Goal 1. Develop the capacity of investigators and research staff to equitably engage diverse communities and stakeholders in clinical and translational research.</p>	<ul style="list-style-type: none"> • Annual training for all <i>research coordinators and staff</i> in Diversity, Equity and Inclusion and Community Engagement • Increased participation in CIT from 8-10 per cohort to 15 per cohort • Adapted CIT for COSPH and Latino Certificate
<p>Goal 2. Develop the capacity of communities and stakeholders to equitably engage with investigators and staff in clinical and translational research.</p>	<ul style="list-style-type: none"> • Research Readiness for CBOs curriculum • Research Readiness for Individuals curriculum • Expanded use of Community Clinical Trials Advisory Board
<p>Goal 3. Establish, build and maintain trust with communities and stakeholders through return of results, and interpretation and dissemination of results in partnership with communities and stakeholders.</p>	<ul style="list-style-type: none"> • Research results are interpreted and disseminated in partnership with community
<p>Goal 4. Continuously evaluate and improve our capacity development activity on campus and in communities by measuring and monitoring our impacts on equitable engagement and involvement with diverse communities and stakeholders in clinical and translational research.</p>	<ul style="list-style-type: none"> • Metrics showing the extent to which investigators’ participation in CEHE programs and services improve representation of disproportionately impacted racial, ethnic and rural populations in their Clinical Trials and research projects. • Qualitative data that tells the story behind the numbers



Health Equity Goals

The CEHE program will advance health equity through translational science by:

- Ensuring that our institutional systems, structures, policies and practices are guided by values rooted in health equity.
- Investing in capacity within our campus and community stakeholders.
- Ensuring that clinical and translational science is conducted in partnership with diverse populations.
- Building and expanding on the foundation of innovative approaches that we have developed over the past 14 years.



Health Equity Goals

PACT Statement on Health Equity:

Health is a fundamental human right. Health equity requires removing obstacles so that every person has the opportunity to attain their full potential for health and well-being. The Partnership of Academicians and Communities for Translation (PACT) is working towards health equity by partnering with community to design, implement, and fund research, education, training and programs that support health for all people, in particular efforts focused on improving health outcomes experienced by people who are marginalized, disadvantaged, or underserved.



Health Equity Goals

Specifically, PACT is committed to:

- Research that equitably benefits communities.
- Mutual learning between community and researchers.
- Supporting a research infrastructure that fosters equitable, long term community engagement.
- Community based decision making.
- The ethical and responsible collection, interpretation, storage, management, and sharing of data.
- Serving as thought partners and consultants for organizations that are exploring their own commitment to community engaged research and health equity.
- We will continue to evaluate internal processes to sustain efforts and ensure our actions equitably benefit community



Year 1 Progress & Impact

Community Engagement – we will continue to support our CRLs and elected PACT members and provide technical assistance, training and consultation support to investigators.

- CRL payments and scopes of work have been restructured to be more equitable.
- CRLs all have a vote on the PACT Council. PACT rules of operation revised to reflect a more participatory, equitable approach.
- CEHE annual report under development.

Community Engagement Forum designed to engage researchers and community members in discussions about Community Based Participatory Research in action.

- To date, we have **hosted 18 forums with 1054 attendees.**

Colorado Immersion Training in Community Engagement (CIT). The CIT offers researchers and students experiential learning opportunities related to Community-based Participatory Research (CBPR).

- To date, **more than 149 researchers** have participated in CIT.
- Manuscript submitted summarizing the work and outcomes to date
- 19 applicants for **this year's cohort** (increased from last year)



Year 1 Progress & Impact

Research Readiness training program to equip Community Based Organizations with the knowledge and tools to design their own organizational strategies and policies related to research and to effectively and equitably partner with researchers in all phases of the research process.

- **Individual training elements already piloted via CO-CEAL (facilitator training, CITI training, data collection training, CBPR training, etc.)**
- **We are piloting with Village Exchange Center starting in March, 2024.**



Year 1 Progress & Impact

CEHE Pilot Grant Program

- **Current cycle submissions: 13 PD, 9 JP (increased over prior two years)**
- Over CCTSI's history, the CEHE Core has received **410 pilot grant applications** (185 partnership development, 225 joint pilot projects).
- Of the 410 pilot applications received in Cycles 1-15, **a total of 139 CE pilot grants were funded (34%)** = 77 partnership development, 62 joint pilot project grants.
- The total amount awarded to CCTSI Community Engagement Pilot Grants over 15 cycles = **\$2,496,915** (\$815,124 awarded to partnership development, \$1,681,791 awarded to joint pilot projects).



Year 1 Progress & Impact – CO-CEAL

- **CO-CEAL – NIH funded Community Engagement Alliance against Health Disparities**
- **Boot Camp/Community Translations** – accelerated a 6-month process to 8 weeks, to accommodate for rapidly getting information out to communities
- **Community Connectors** – created a new role: community member who is contracted to assist with Community Translations, community surveys, and field team management
- **Community Data Collectors** – recruited and trained 30 community data collectors who administered nearly 3000 surveys over three waves of data collection across Colorado
- CO-CEAL has engaged more than 100 individual community members as full partners in the implementation of the project aims.
- **Community Capacity Building** – provided CITI training, data collection training, facilitation training, BCT training, and an annual conference for CO-CEAL community partners
- Established **Community Clinical Trials Advisory Board**
- Next 4-year CO-CEAL cycle for \$5.6M starting April 1, 2024



Year 1 Progress - iHeard



Pilot Companion to CO-CEAL

- Identify health misinformation that is new or spreading in Latino/a/x communities
- Share it with local leaders and the public in near real-time
- Create and distribute responses to community partners

Three Components:

- Community surveillance system
- Public-facing misinformation dashboard
- Rapid response counter-messaging

Local Surveillance

- Weekly surveys
- Panel of 200 community members in three regions (Denver Metro, San Luis Valley, Pueblo)

Trusted Local Messengers

- Amplify counter-messages in a proactive, coordinated way
- 20 messengers recruited from across regions and sectors
- Distribute centrally developed information assets weekly



Year 2 Plans

- Continue to operate all existing CEHE core programs: CRLs, PACT, CIT, Community Consults, Pilot Grants, etc.
- Continue strategic planning process with the PACT, working within our definition of Health Equity and our grant objectives to develop strategic milestones and benchmarks for the next 6 years.
- Develop and provide training for research coordinators and staff in Community Engagement.
- New CIT Director leading effort to create a CIT certificate program.
- Expand the reach of the Community Clinical Trials Advisory Board beyond COVID-19 related trials.
- Continue to refine and disseminate Research Readiness.
- Refine, evaluate and expand Community Connector model in future CO-CEAL efforts
- Continue community-engaged research programs through CO-CEAL and iHeard.



Year 2 Plans

Metrics of Success – 2 stages

- During **grant years 1-3** a focus on implementation of programs described in Strategic Goals 1 and 2 with continuous formative evaluation of the implementation.
- During **grant years 4-7** we will shift our focus from implementation to Strategic Goals 3 and 4 with a focus on continuing to develop relationships with our partner communities and stakeholders while continuously monitoring and improving our processes and outcomes.
- Assess whether participants in clinical trials whose investigators and staff have participated in our trainings are more likely to match the demographics of Colorado or exceed representation of disproportionately impacted racial, ethnic and rural populations when trials address conditions where significant health disparities exist.



National Representation and D&I

National CTSA Consortium Involvement

Don Nease:

- Virginia Commonwealth University CTI's EAC
- Collaboration & Engagement SIG
- PACER SIG

Montelle Tamez

- Collaboration & Engagement SIG
- JEDI SIG
- DEIA CTSA Enterprise Committee

Ongoing partnerships with:

- CEAL
- Univ. of New Mexico – AHRQ

EvidenceNOW & PRIMENet Collaborative

- Oregon Health Sciences Univ. – AHRQ MetaLARC Collaborative
- Univ. of Wisconsin – AHRQ MetaLARC Collaborative
- UCSF –AHRQ PRIMENet Collaborative
- Duke – AHRQ MetaLARC Collaborative
- Univ. of Iowa – AHRQ MetaLARC Collaborative
- Univ. of Kansas – NCATS U01



National Representation and D&I

Our primary method of community information dissemination is our CEHE website and CRL Newsletter along with our trusted community partners. Additionally, we presented on our work at several conferences and meetings and published manuscripts.

Conference Presentations

- American Public Health Association
- Association of Clinical and Translational Sciences (ACTS)
- CEAL Annual Meeting
- CASCHEW

Websites:

- <https://cctsi.cuanschutz.edu/community>
- <https://cctsi.cuanschutz.edu/community/co-ceal>
- <https://cctsi.cuanschutz.edu/community/iheard>
- <https://co.iheard.org>



National Representation and D&I

Publications

- Sarah E. Brewer, Mary Fisher, Linda Zittleman, Meredith K. Warman, Meredith Fort, Emma Gilchrist, Jameel Mallory, Rebecca Mullen, Jose Barron, Amanda Skendadore, Farduus Y. Ahmed, Crystal LoudHawk-Hedgepeth, Montelle Tamez, Bethany M. Kwan, and Donald E. Nease, 2024: [Rapid Community Translation in the Colorado CEAL \(CO-CEAL\) Program: Transcreating Messaging to Promote COVID-19 Vaccination.](https://doi.org/10.2105/AJPH.2023.307456) American Journal of Public Health **114**, S50_S54, <https://doi.org/10.2105/AJPH.2023.307456>).
- Rivera Gordon K, Taméz M, Fisher, M, and Nease D. Community Engagement, One Mile High: Developing a pipeline for training in community-based participatory research for investigators in Colorado. Poster presented at the Association for Clinical and Translational Science conference, Washington DC, April 2023.
- Taméz M, Sweitzer E, Gordon K, Fisher, M, Nease DE. Colorado Immersion Training: Ten years of lessons learned and accomplishments. Poster presented at the Association for Clinical and Translational Science conference, Washington DC, April 2023.
- Rivera Gordon K, Taméz M, Fisher, M, and Nease DE. Community Engagement Forum: Sharing best practices in community-engaged research. Poster presented at the Association for Clinical and Translational Science conference, Washington DC, April 2023.
- Amanda Skenadore, MPH, Meredith Fort, PhD, MPH and Crystal LoudHawk-Hedgepeth, MSCS, MEd. 5004.0 - A community-focused COVID-19 vaccine health promotion campaign: Lessons from the community translation experience with the Denver urban American Indian/Alaska Native (AIANs) COVID-19 workgroup from 2021-2023. Oral presentation at the American Public Health Association Annual Meeting, Atlanta, GA, November, 2023.



National Representation and D&I

Additional Dissemination Activities

- Two additional manuscripts are under development with community partners as lead authors
- Presenting CO-CEAL work at 2024 *Culture of Data Conference*
- CCTAB developing and disseminating clinical trials educational materials for community members



Response to EAC Critiques

- 1. The CCTSI can increase its funding and support of Colorado's PBRNs to ensure their continued success and hold the PBRNs accountable by creating metrics to demonstrate how the PBRNS are extending the translational research footprint of the CCTSI:*

With my being asked to resign as SNOCAP Director, CCTSI's ties to our PBRNs are tenuous. Mary Fisher, CEHE Program, retains 20% FTE with SNOCAP as Assoc. Director.

- 2. The CCTSI can create metrics to show the association of the "reach" of translational research supported by the CCTSI with the community engagement efforts, with specific attention to the reach and impact of translational science for diverse and underrepresented people and communities:*

Over the past year we've enhanced our partnerships with campus entities (ODEICE, Office of Clinical Research, COMIRB etc.) which will enhance our ability to develop these. This is complex work, but is in progress.



Questions for EAC

1. CO-CEAL has allowed our team to extend beyond supporting CE & CBPR to actually doing the work in the field. However, this has been a stretch on our capacities. What suggestions do you have for how we can back fill resources to minimize that strain?
2. There is increasing broad campus interest in and support for Community Engagement and Health Equity work. Here there are also challenges to our capacity. Consult requests have increased 3-4 fold just in the first quarter of the year, for example. What suggestions to you have for managing this?

