

**THE NYC CPCRN**  
*NYU Grossman School of Medicine*  
&  
*CUNY Graduate School of Public Health and Health Policy*



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# NYC CPCRN Goals

- Reduce **cancer disparities** in New York City low-income minority and immigrant populations
- Improve **mental health** well-being among cancer patients and survivors through prevention, early detection, and facilitated linkages

Reduce Infection-Related  
Cancer Disparities

Cervical  
Liver  
Stomach  
Head and  
Neck

**CPCRN**



Cancer Prevention and Control Research Network

# NYC CPCRN Center Strengths

CDC-funded Prevention  
Research Center – a public-  
private partnership between  
NYU and CUNY

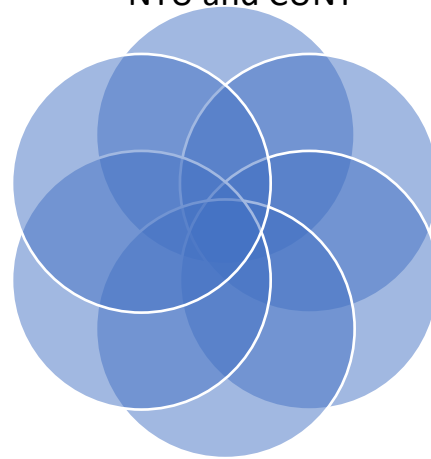
NIH-funded Research Center  
of Excellence focused on  
Asian American health with  
cancer research track record

NCI-designated  
Comprehensive Cancer Center

Strong community  
facing relationships

Focus on disparities and  
reducing inequities

Expertise on Community Based  
Participatory Research, Systems  
Science, Implementation &  
Dissemination Research



# Research Focus & Methodological Expertise

Collaborating Center Member	Topic Area of Research Focus	Key Methodological Expertise
<b>Chau Trinh-Shevrin, DrPH</b>	Cancer, Cardiovascular Disease/Diabetes, Mental Health, Aging Health	Multilevel Strategies to Advance Health Equity, Community Engagement
<b>Terry Huang, PhD</b>	Chronic Disease Prevention, Obesity Research	Integration of Systems Science and Chronic Disease Prevention, Transdisciplinary Science, Design Thinking
<b>Simona Kwon, DrPH</b>	Cancer, Aging and Alzheimer's Disease and related Dementias	Community Engagement, Cultural Adaptations, and Research Translation, Implementation Science
<b>Nadia Islam, PhD</b>	Cardiovascular Disease/Diabetes	Community-Clinical Linkages and Community Health Worker Approaches, Implementation Science
<b>Vicky Ngo, PhD</b>	Mental Health, Depression, Gender-based violence; Sexual and Gender Minority Populations	Quality Improvement, Integration of Evidence-Based Mental Health Services, Implementation Science/Strategies, Task-Shifting
<b>Lorna Thorpe, PhD</b>	Cardiovascular Disease/Diabetes/Cancer, Diet, Nutrition, and Physical Activity	Applied Research and Evaluation Methods, Epidemiology, Surveillance

# NYC CPCRN Network: Potential Populations and Partners

## South Asian

Bangladeshi American  
Community Development and  
Youth Services

Community primary care  
providers

Community pharmacies

Council of Peoples Organization

FBOs (Mosques)

NY Immigrant Coalition

## Caribbean

Arthur Ashe Institute for Urban  
Health

Caribbean Women's Health  
Association

## Arab American

Arab American Association of NY

Arab American Family Support  
Center

FBOs (Mosques)

NY Immigrant Coalition

## African American

Arthur Ashe Institute for Urban  
Health

Caribbean Women's Health  
Association

CAMBA

Red Hook Initiative

FBOs (Churches)

## Latinx

Latino Commission on AIDS

Mixteca Organization

NY Immigration Coalition

## Chinese

Brooklyn Chinese-American  
Association

Chinese-American Planning  
Council

## Korean

Korean Community Services

# Internal Coordination with Ongoing Initiatives: *Stamp Out Cancer Brooklyn (SOCB) Components*



**Community-engaged and Multi-stakeholder Approach**



**Prevention of Cancer Risk Factors & Early Cancer Detection**



**Advance Whole-person Approach across the Cancer Continuum**



**Population-based Cancer Research Program for Precision Medicine and Cancer Surveillance**

**CPCRN**



Cancer Prevention and Control Research Network

# NYC CPCR N Core Research Projects

## Implementation Research Evaluation (Years 1-2)

- Evaluate implementation factors that influence reach, uptake, and adoption of EHR and/or culturally-tailored evidence-based strategies for the prevention of infection-related cancers among Asian Americans seen in federally qualified health centers and public hospital settings

## Mental Health Formative Research Study (Years 2-4)

- Guide development and rapid prototyping of a mental health preventive intervention to be integrated in primary and oncology care settings to reduce anxiety, depression and suicide risk among Asian Americans post-cancer diagnosis, from care to survivorship

# Implementation Research Evaluation

## Projects by Challenge, Setting, Population Focus, Evidence-based Intervention, and Implementation Strategy

Project Name	Stomach Cancer Prevention in Chinese Americans	HPV Vaccination	Cervical Cancer Screening among Muslim Women	Navigation to Improve Hepatitis B Treatment Adherence
<b>Challenge</b>	Low screening and treatment rates among Asian Americans	Low HPV vaccination rates among Chinese Americans	Low cervical cancer screening rates in Muslim women	High HBV rates and liver cancer disparities in East Asians
<b>Setting</b>	5 FHC and H+H safety net systems	Family Health Center school-based clinics	Community-based sites	Community-based sites
<b>Population</b>	Chinese American confirmed with H. pylori diagnosis	Chinese adolescents ages 11-14; high risk young adult populations	South Asian populations	Chinese and Korean Americans positive for HBV
<b>EBI</b>	H. pylori testing and adherence to treatment	HPV vaccination; 2 or 3 dose series	Pap smear test	HBV treatment
<b>Implementation Strategy</b>	EHR clinical decision support plus CHW-led culturally-linguistically adapted patient education to facilitate H. pylori testing and treatment adherence.	EHR support	Community navigation with linkages to health providers, academic detailers, audit and feedback	Community navigation with linkages to health providers



## Analysis will be guided by RE-AIM and CFIR Evaluation Frameworks

**REACH:** What % of the target population came into contact with the program? Were participants representative of the target population?

**EFFECTIVENESS:** Did the program achieve key targeted outcomes? Did it produce any unintended consequences?

**ADOPTION:** Did the organization use the program?

**IMPLEMENTATION:** (CFIR constructs to systematically guide identifying barriers/facilitators to implementation): How closely did staff follow the program (consistency of delivery)? How well did the staff adhere to intervention fidelity? Was the program delivered as intended? Was the program consistent and aligned with clinic sites' missions?

<b>CFIR</b>	<b>Intervention Characteristics:</b> core functions of EBIs & implementation strategies
	<b>Characteristics of Individuals:</b> attitudes toward EBIs & implementation strategies
	<b>Inner Setting:</b> barriers and facilitators within the specific setting
	<b>Outer Setting:</b> community dynamics, institutional & governmental priorities

**MAINTENANCE:** Is the organization willing to sustain the program? Is the program able to become part of routine practice?

# Mental Health Prevention Intervention

## *Formative Research*

Builds on **Collaborative Care Model**, an evidence-based mental health screening in clinical settings

**Conceptual Framework** integrates:

- Community-based participatory research
- Consolidated Framework for Implementation Research
- RE-AIM
- Cultural Adaptation
- Systems Science
- Design Thinking

CHW, HIT and EHR- Based  
Cancer Prevention and Control  
Efforts for Mental Health  
Screening and Referral



Cancer Patient Experience  
Mapping

<https://blog.cancerview.ca/wp-content/uploads/2014/10/First-Nations-patient-journey-ENv3.pdf>

# Next Steps in Year 1

## Step 1:

- Conduct implementation research evaluation
- Conduct mental health literature review with CUNY and NYU project team
- Develop mental health qualitative study design



## Step 2:

- Conduct translation and dissemination activities focused on evidence-based cancer prevention and control guidelines
- Support technical assistance workshops and seminars



## Step 3:

- Leverage and build on EHR-based cancer surveillance and registry research
- Facilitate rapid cycle testing and quality improvement initiatives to advance cancer screening and treatment



## Step 4:

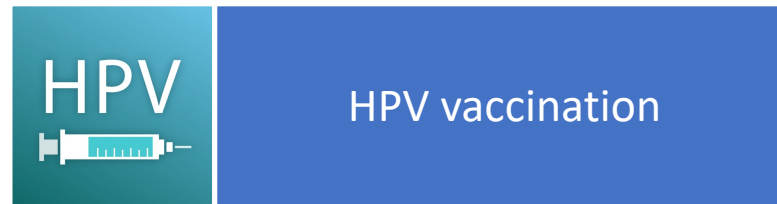
- Coordinate efforts with Stamp Out Cancer Brooklyn and Cancer Center to expand research development and infrastructure for CPRN



## Step 5:

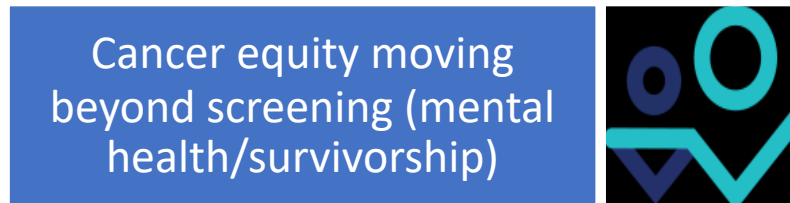
- Participate in CDC and CPRN Network and Steering Committee
- Participate in NYC wide coalitions and networks
- Coordinate translation and dissemination activities

# Potential Opportunities for Collaboration or Workgroups



HPV  
HPV vaccination

A graphic for HPV vaccination featuring a teal-to-blue gradient background. On the left, the letters "HPV" are in white, with a white syringe icon below them. To the right, the text "HPV vaccination" is written in white on a solid blue background.



Cancer equity moving beyond screening (mental health/survivorship)

A graphic for cancer equity featuring a blue background. On the left, the text "Cancer equity moving beyond screening (mental health/survivorship)" is written in white. On the right, there is a stylized icon of two people in teal and blue.



Leveraging EHRs/CHWs

A graphic for leveraging EHRs/CHWs featuring a blue background. On the left, there is an illustration of many colorful hands (red, orange, yellow, green, blue) raised. On the right, the text "Leveraging EHRs/CHWs" is written in white.

Thank You!

