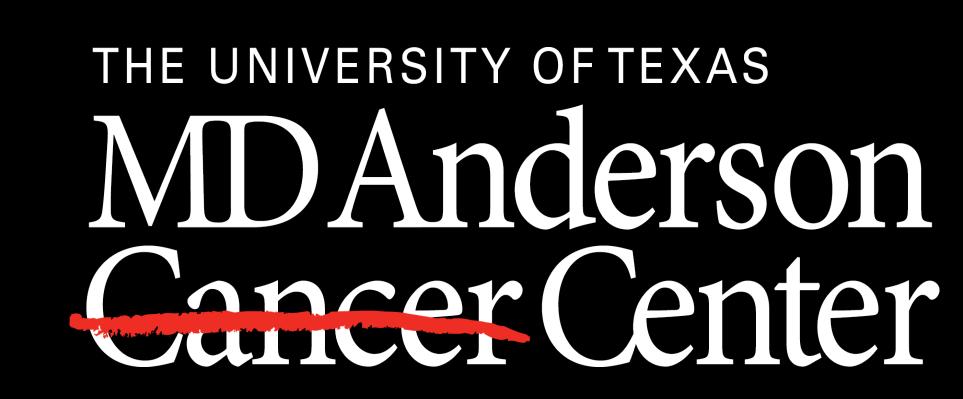


The Center for Community-Engaged Translational Research (CCETR) – Connecting Cancer Researchers with the Community



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The Issue

Fostering collaborative research development and implementation between academic researchers and underserved communities, in particular minority populations, is challenging, yet critical for effective research translation. Traditionally, research in community settings is often conceptualized and implemented without input from community stakeholders; often resulting in interventions/programs that are incompatible with contextual norms, have poor adherence, and little potential for sustainability. This limits the potential for research translation from university-based to "real-world" settings. There is a strong need for improved collaboration between academic investigators and community stakeholders.



Community-Academic partnership for research development and implementation has several benefits:

- Addition of unique perspectives Community stakeholders offer distinct perspectives that often lead to the development of research questions that reflect health issues of real concern to the community, producing research that is more relevant and translatable
- Enhanced feasibility of the research project Contextual information contributed by community stakeholders allows researchers to tailor implementation strategies, thus increasing external validity of evidence-based practices
- Trust in the research process among vulnerable populations Allowing community stakeholders a voice in the research process helps decrease marginalization of communities that have historically received little benefit from research participation



The Center for Community Engaged Translational Research (CCETR)

- CCETR was created in 2010 with institutional resources
- Mission: Bring communities and researchers together to create long-term solutions to prevent cancer and improve health
- Goals:
- Facilitate research development and implementation between MD Anderson investigators and diverse communities
- Establish and maintain equitable research partnerships
- Increase the capacity of investigators to recruit and retain diverse patients to clinical studies

Services offered

Identification of community partners

Facilitate research collaboration agreements with community partners

Facilitate and lead community/patient advisory boards

Develop clinical trial recruitment plans for minorities and women

Provide technical assistance for project implementation and dissemination

CCETR Structure

Community & Populations Core

(Community outreach, Advisory board management, minority and women recruitment)

Administrative Core
(Grant & protocol
submissions, grants
management)

(Develop & support CE investigator initiated applications; grant writing support; share CE funding opportunities)

Research Core

CCETR Impact

Year	# submissions supported	Submission total	
2011	11	\$25,194,453	
2012	27	\$45,944,005	
2013	25	\$75,656,607	
2014	31	\$83,820,474	
2015	25	\$67,056.931	

Exemplar Projects

Grant Mechanism	Academic Partner	Community Partner	CCETR Role
Academic-Community Partnership (NIH R13)	MDA - Health Disp Res;Baylor	Faith-based organizations, CBOs (e.g., Parks & Rec), Community clinics	<u>Pre-award</u> : grant writing support; partner identification; administrative <u>Post award</u> : Advisory Board development; community engagement; Strategic planning
Community Networks Program (NIH U54)	MDA – Behav Science; UTSPH	Hispanic CBOs; Community stakeholders	Post award: Program planning; community engagement; administrative
Patient Centered Outcome Research Institute (PCORI) (3 grants)	MDA – Clinical Can Prev, Health Serv Res; Baylor	African American CBOs; Faith-based organizations; Community stakeholders; Breast cancer advocacy organizations	Pre-award: Partner identification; grant writing support Post award: Advisory Board management; community engagement
Cancer Prevention Research Institute of Texas (CPRIT)	MDA – Health Disp Res	State Quitline; FQHCs, Public health system	Pre award: Partner identification; community engagement; administrative Post award: Clinic-based protocol development and implementation; clinic training administrative