



# **NYU Perlmutter Cancer Center** ***Stamp Out Cancer Brooklyn:*** ***Community Health Worker Program***

**1/31/2022**

# Agenda

1. Creating Our CHW Program
2. Activities
3. Successes and challenges
4. What's Next: How will we educate other CHWs on our model?
5. Discussion

# Creating Our CHW Program

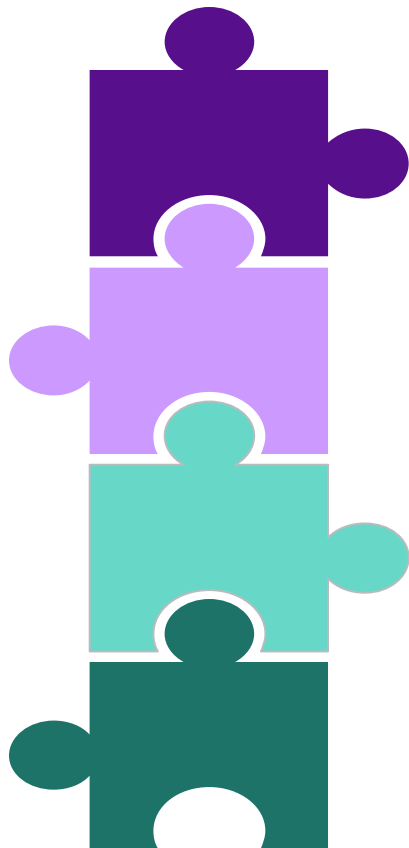
## ***Measuring our Collective Impact: Focus on Brooklyn***

**Stamp Out Cancer Brooklyn (SOCB)** is a multi-pronged, community-engaged initiative of the PCC Community Outreach and Engagement (COE) Core that aims to reduce the overall burden of cancer and alleviate cancer-related disparities in Brooklyn.

To do this, SOCB engages local communities to disseminate innovative, evidence-based solutions that span cancer prevention, early detection, care, and survivorship.



# Areas of Focus:



## 1. Cross-Cutting Prevention Priorities:

- Tobacco cessation
- Obesity prevention and management
- Improve mental well-being
- Vaccines and Prevention of Infection Related Cancers:
  - ❖ HPV, HBV, *H. pylori*

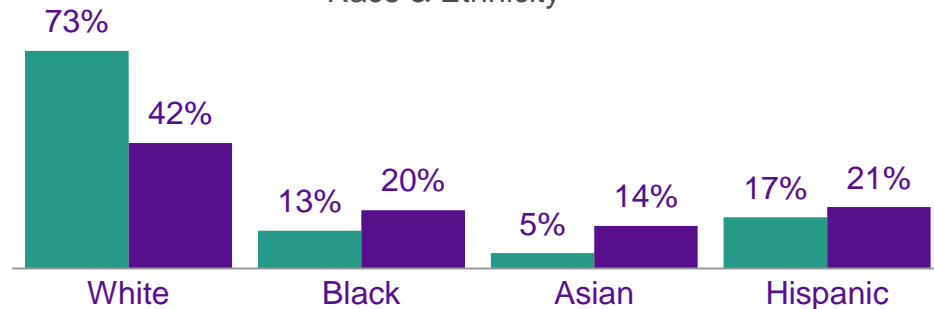
## 2. Improve Cancer Control and Survivorship:

- Early cancer screening and navigation:
  - ❖ Breast, Prostate, Lung, Colorectal, Cervical
- Improve timeliness and quality of cancer care
- Improve cancer treatment outcomes
- Improve survivorship outcomes

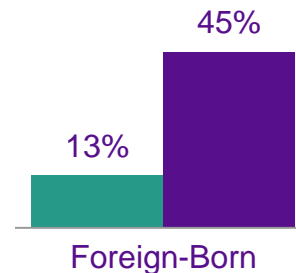
# Catchment Area: Demographics

## Majority Minority

Race & Ethnicity



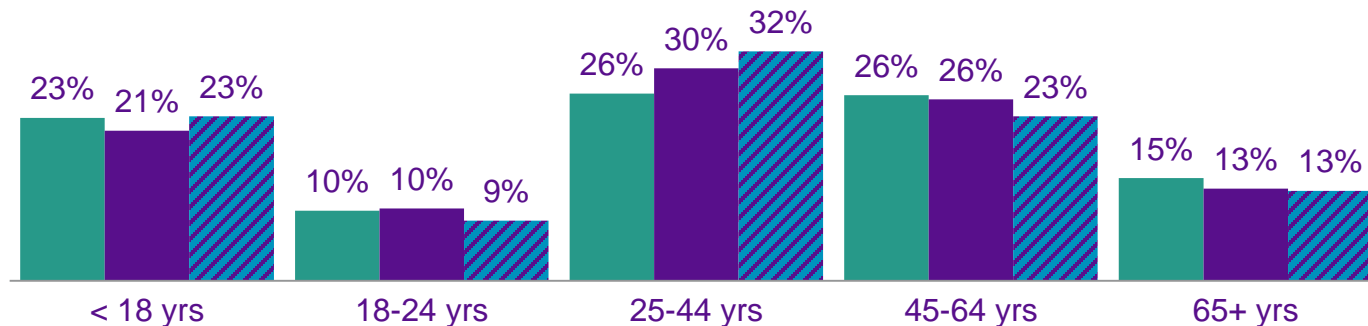
## High Percentage Foreign-Born



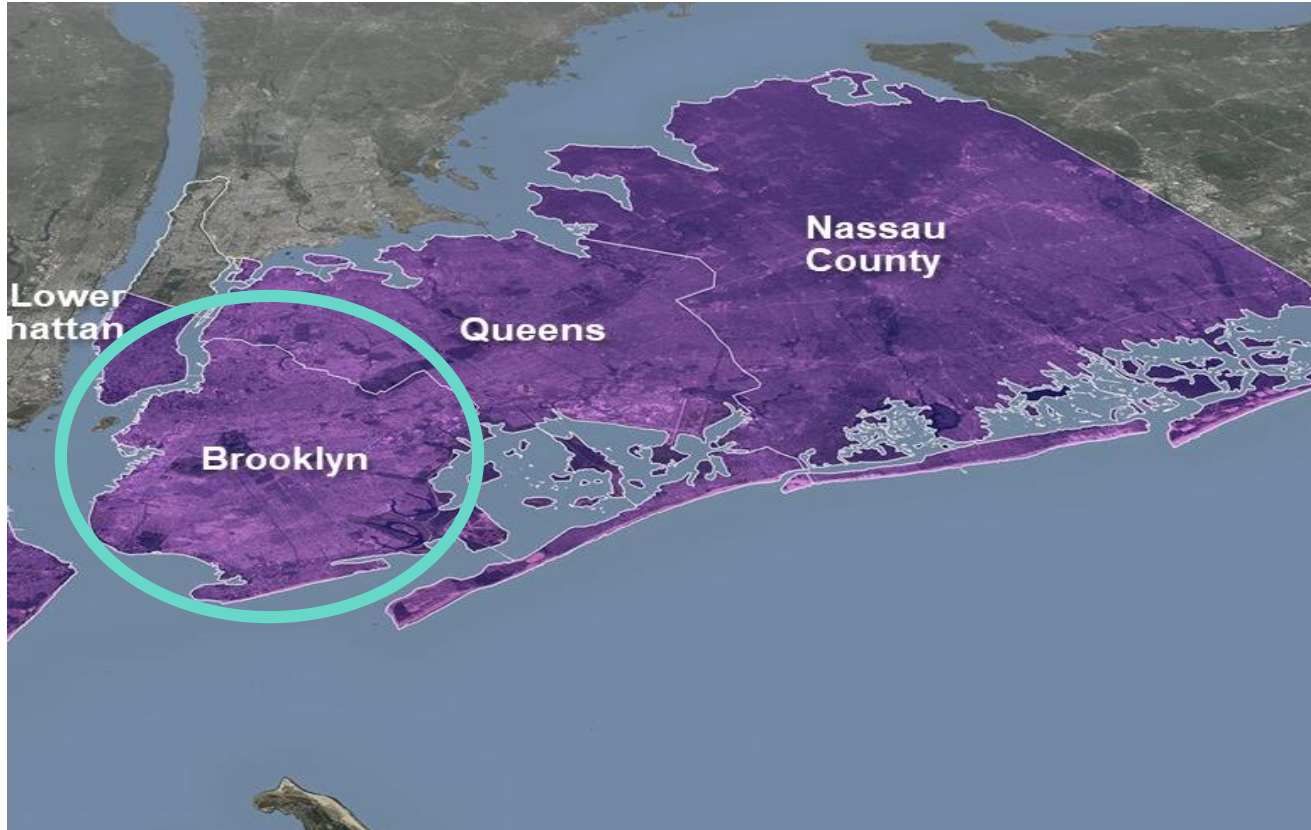
- US overall (n=318,857,056)
- PCC Catchment Area (n=7,177,990)
- ▨ Brooklyn (n=2,629,150)

## Younger than U.S.

Age



## PCC Catchment Area: Brooklyn, Queens... Expanding to Long Island



# Why Brooklyn?

- NYC's **most populous borough** (~2.6 million) and home to the largest number of PCC patients
- Residents speak >200 **different languages**
- ~40% **foreign-born**
- 2 out of 3 residents are **45 years or younger**
- Disproportionately high cancer burden and unique disparities
- Microcosm of the larger PCC catchment area and future United States
- Opportunity to bend the cancer disparity curve





# Brooklyn Community Action Network of SOCB



“Stamp Out Cancer Brooklyn (SOCB) offers an opportunity to build trust with the community and leadership buy-in for essential cancer wraparound services like financial counseling/navigation to connect uninsured people to high-quality care with cultural competency free from shame.”

Dr. Marilyn Fraser, CEO of Arthur Ashe Institute for Urban Health,  
SOCB Kick-Off Retreat, 2/27/2020

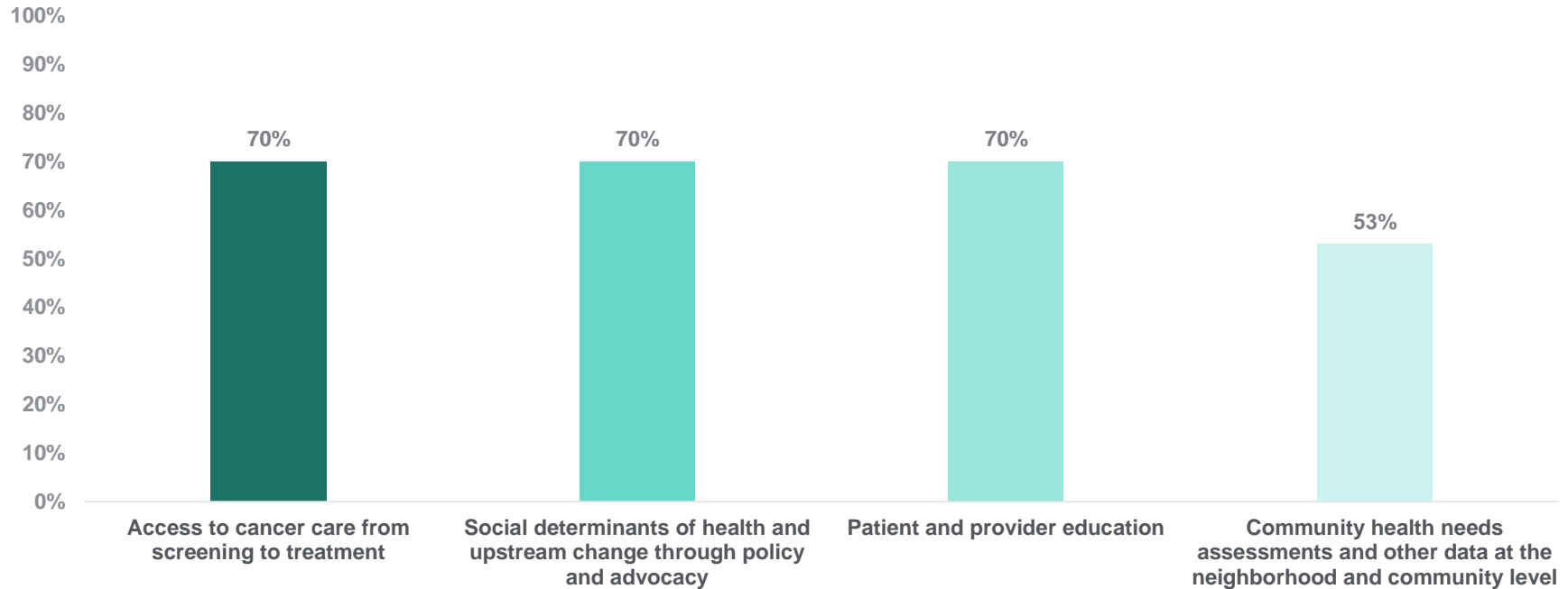


# February 2020: SOCB Kick-Off Retreat



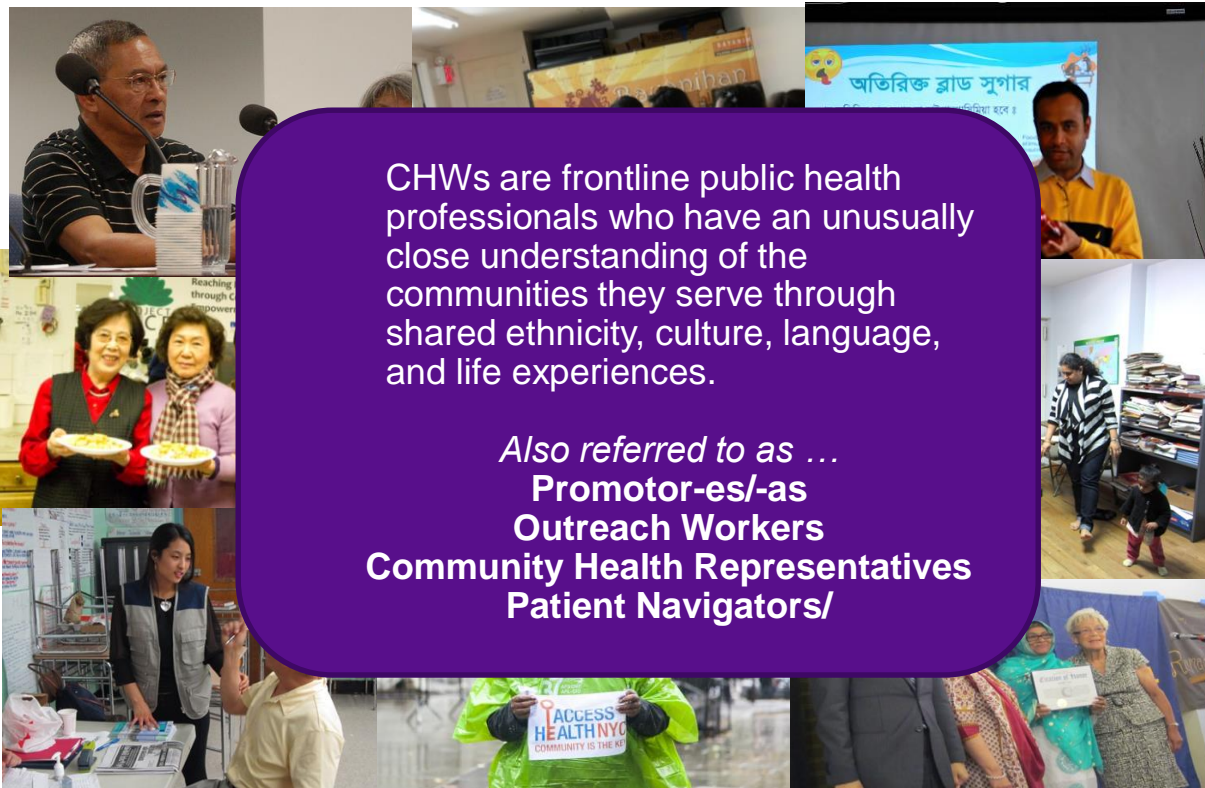
# What are priorities for reducing cancer disparities in Brooklyn?

## General



# Activities

# WHO ARE CHWs?

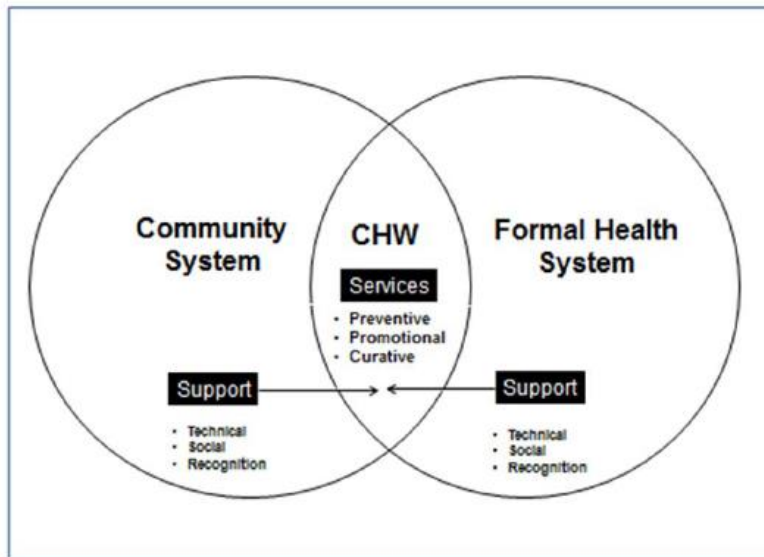


CHWs are frontline public health professionals who have an unusually close understanding of the communities they serve through shared ethnicity, culture, language, and life experiences.

*Also referred to as ...*  
**Promotor-es/-as**  
**Outreach Workers**  
**Community Health Representatives**  
**Patient Navigators/**

# CHW Approaches

- Improve access to health care resources
- Improve the quality and cultural appropriateness of service delivery
- Help others integrate disease prevention and management into their daily lives
- Organize communities to improve environmental, physical and social wellbeing
- Negotiate cultural & linguistic barriers to health
- Help others become active participants in their own health



USAID, *Community and Formal Health System Support for Enhanced Community Health Worker Performance Report*, 2012

[http://www.coregroup.org/storage/Program\\_Learning/Community\\_Health\\_Workers/chw%20evidence%20summit%20final%20report-19dec2012.pdf](http://www.coregroup.org/storage/Program_Learning/Community_Health_Workers/chw%20evidence%20summit%20final%20report-19dec2012.pdf)

# HIRING PCC SOCB COMMUNITY HEALTH WORKERS (CHWs): Across Multiple Cancer Conditions with a Focus on SDoH



**Alexandr:** "As a CHW for the Russian community of NYC, I am hoping to save lives in my community. Coming from different cultural backgrounds but bonded by the same language, the Russian community is very diverse, and each person is unique. Currently, I care for my family by arranging their medical and social care. I want to provide each member of Russian community I work with the same level of care."

**Background:** Born in Uzbekistan, Alexandr has an extensive clinical background.

**Language:** Russian



**Alice:** "We might have forgotten that curing cancer starts with preventing cancer in the first place, but you are not being forgotten. We are here to do this together!"

**Background:** Raised in Taishan from the southwest region of Guangdong Province of China, Alice is an experienced CHW who has worked on a stomach cancer prevention project for the past 3 years.

**Languages:** Toisanese, Cantonese, and Mandarin.



**Ceci:** "Latinos have high mortality rates from cancer, which may be due to the determinants of health and a lack of access to information. Also, Latinos are more likely diagnosed with cancer. I want to be able to assist others in my community."

**Background:** Born in Peru, Ceci has 12 years of experience as a CHW formerly with Bronx Lebanon. Her older and only sister had breast cancer and she lived through her journey.

**Language:** Spanish



**Zizi:** "Be a lamp, or a lifeboat, or a ladder. Help someone's soul heal. Walk out of your house like a shepherd." -Siddi Jalal al-Din Rumi

**Background:** Zizi grew up in Cairo and was formerly with the Arab American Family Support Center. She is passionate about providing human services.

**Languages:** Arabic, French



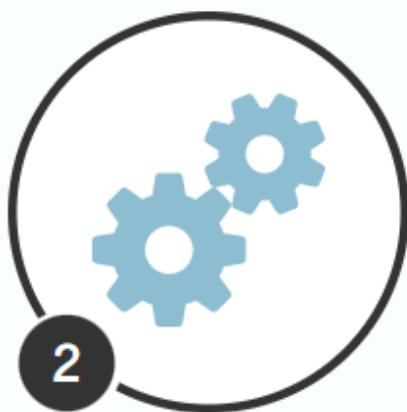
# Training our CHWs

Comprehensive, multidisciplinary training



## Equity & SDoHs

1. CHW Network of NY Core Competency Training:
2. Apicha: LGBTQ+ Cultural Sensitivity Training



## Technical

1. Getting started with REDCap
2. Introduction to Research with Immigrant populations
3. Basics of MS Office
4. CITI: Social & Behavioral Research
5. CITI: Good Clinical Practice



## Team Building

1. The Employee Guide to the Frame Leaders of Self
2. Working as a High Performing Team
3. Using the Behavioral Competency Model For Shared Success



# PCC Cancer Needs Assessment

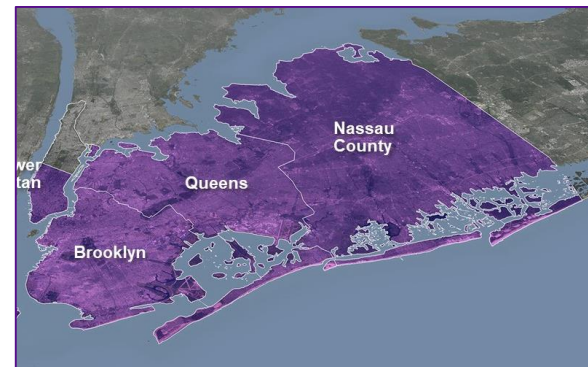
**COMMUNITY PRIORITIES:** COMMUNITY HEALTH NEEDS ASSESSMENTS AND OTHER DATA AT THE NEIGHBORHOOD AND COMMUNITY LEVEL, SOCIAL DETERMINANTS OF HEALTH, MAPPING OUT COMMUNITY RESOURCES, IDENTIFYING AND ADDRESSING GAPS/BARRIERS

**Objective:** To inform PCC programming and resources, and research using community-based survey methods to better understand the cancer-related challenges and needs of diverse communities across the PCC catchment area

**Methods:** Conduct a community needs assessment using a mixed method approach that is representative of PCC catchment area communities to guide PCC research and supporting cross-Cancer Center collaborations. Planning committee to include:

- ✓ Community and government stakeholders
- ✓ Basic, clinical and population scientists from PCC
- ✓ Collaborators from other NCI-funded NYC COEs
- ✓ Catchment area: Lower East Side, Brooklyn, Queens, areas of focus in Long Island (in partnership with NYU Langone- Long Island's Community Service Plan)

**Thematic Development:** Survey instrument and domains co-developed with SOCB's Brooklyn CAN & CAB, PCC clinicians and researchers, NYU & NYU LH LI's Community Service Plans, 5 NYC Cancer Center Community Outreach & Engagement Cores



# CONNECT NEIGHBORHOODS OF FOCUS

**COMMUNITY PRIORITIES:** COMMUNITY HEALTH NEEDS ASSESSMENTS AND OTHER DATA AT THE NEIGHBORHOOD AND COMMUNITY LEVEL, SOCIAL DETERMINANTS OF HEALTH, MAPPING OUT COMMUNITY RESOURCES, IDENTIFYING AND ADDRESSING GAPS/BARRIERS

## Invest in key neighborhoods:

- New York City is highly segregated residentially by race and poverty-level
- Neighborhood and place-based approaches and geographical targeting of resources are by default racial justice and equity strategies
- Amplify neighborhoods through Neighborhood Action Councils (NACs)

## Catchment Neighborhoods



**Bronx  
Neighborhoods**

*Morrisania  
Highbridge*

**Brooklyn  
Neighborhoods**

*Sunset Park  
East Flatbush*

# Successes and Challenges

# Successes



Hired 4 multi-lingual CHWs



Designed a large scale cancer needs assessment and an optional structural racism module



Translated cancer needs assessment into 8 languages



Inroads into new communities



Non-traditional survey recruitment



Culturally adapted nutrition curriculum



Development of culturally tailored cancer prevention outreach curriculum



Developing New Research Projects



COVID information sessions and vaccine pop-ups

# Problem Solving

## Challenges & Solutions

*Solution Based Approach*



COVID + Omicron



Contracts at New York University



Multilingual translations and review process



Complex IRB application



REDCap issues & other tech setbacks

Remote recruitment & administration during surges



Start early and remain persistent



Organization and teamwork



Close communication with IRB team



Constant monitoring of tech platforms



**What's Next: How will  
we educate other CHWs  
on our model?**

# Next Steps

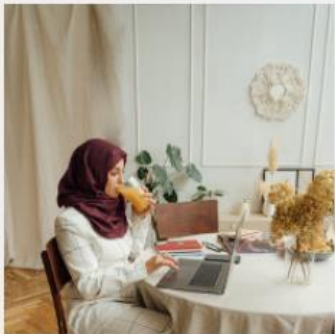
## Mixed Methods Process Evaluation

- Field notes
- Quantitative data on recruitment sites
- Qualitative data on survey recruitment and administration

## Build the Research and Evidence-base

- Build the CHW Evidence base
- Dissemination of Research Findings
- Share data back to communities of focus

# Program Impact: Looking Forward



## 1200 Surveys Administered in 9 Languages

- Brooklyn
- Queens
- Lower East Side
- Long Island



## 300 Individuals Navigated Across the Cancer Continuum

- Screening
- Follow-Up
- Supportive Services



## Community Embedded Outreach and Education

- Community-Based Organizations
- Faith-Based Organizations
- Third Places



# Discussion



**Thank You**