# Chicago Cancer Health Equity Collaborative: Adaptations in collaboration with our community partners during COVID-19

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### **ABTRACT:**

**Background.** The Chicago Cancer Health Equity Collaborative (ChicagoCHEC) partners community, professional, and academic institutions to address cancer health inequity in Chicago. Its Outreach Core focuses on the development and sustainability of the community partnerships.

**Objectives.** A key annual event is the Community Forum. This paper describes the processes, challenges, opportunities, and strategies used to transition from an in-person to a virtual format in 2020 and 2021 and a hybrid model in 2022.

**Methods.** Community-driven participatory and capacity-building approaches were used in planning and executing the forums. Post-forum survey data were used to assess audiences' perceived experiences.

**Results.** The inclusive, detailed planning led to high levels of engagement. Although the majority preferred in-person, a third preferred virtual or either.

**Conclusions.** Strong partnership is key to success in the complex planning and implementing of community activities regardless of delivery format. The hybrid model worked well, but overall the attendees preferred in-person speakers.

**KEYWORDS:** community–academic partnerships, cancer health equity, cancer outreach and education, cancer, low income and racial and ethnic minority populations; virtual and hybrid community events.

#### 1. BACKGROUND

The Chicago Cancer Health Equity Collaborative (ChicagoCHEC) was launched in 2015 with funding from the National Cancer Institute (NCI) under the U54 grant mechanism. It aims to build infrastructure between three academic institutions, Northeastern Illinois University (NEIU), University of Illinois at Chicago (UIC), and Northwestern University Lurie Cancer Center (NULCC), in close collaboration with diverse community and professional organizations to engage in cancer research, community outreach, awareness, and education and training, aiming for cancer health equity in Chicago. This is important because Chicago suffers disproportionately from cancer morbidity and mortality, especially in poor and racial and ethnic minority communities. The ChicagoCHEC organizational structure includes an Outreach Core (OC), charged with assuring community consultation, involvement and engagement throughout all the CHEC activities [1]. Figure 1 illustrates the OC Partner and Program Organizational Structure.

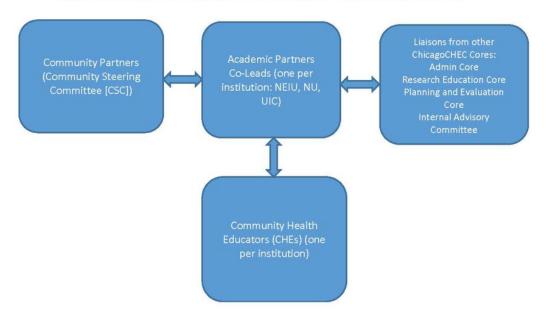


Figure 1: ChicagoCHEC Outreach Core & Program Organizational Structure

### The COVID-19 Impact on ChicagoCHEC Outreach Core activities

The SARS-CoV-2 (Covid-19) pandemic forced nearly all OC meetings to transition to virtual activities. The Community Forum (forum), a crowning annual event to showcase ChicagoCHEC projects and collaboration, was no exception. From 2016 to 2019, the annual forum was held inperson. When the pandemic hit, the forum went 100% virtual in 2020 and 2021 and hybrid in 2022. As one community member said, ""Cancer doesn't stop during COVID-19." Several studies have described the benefits related to the transition of community-academic meetings from in-person to virtual during the pandemic. [2-4] They include reduced facilitation costs and greater participant access for those who could not attend the in-person forums due to time and distance constraints or health reasons. Challenges include home or work interruptions or distractions to poor internet services and lack of familiarity with necessary technology. Virtual programming naturally lacks the informal relationship-building interactions available in inperson formats. Furthermore, online facilitation can be complicated due to differences in facilitation techniques, engagement approaches, discussion duration, and selected tools. Previous studies recommend incorporation of frequent, short breaks, enough time for technical issues, effective, well-planned facilitation, and a balance between participant and facilitator manipulation of elements in the online environment. [2-4]

As the virtual meetings matured and were assessed, OC had to determine the forum programming format in the post-pandemic era: fully in-person or a hybrid model. Our research questions are: How has the virtual vs hybrid formats affected the process and outcome of the forum? What were the positive and negative aspects of these formats in terms of planning, implementation and evaluation? What are the challenges and public acceptability of a hybrid model? What elements should be incorporated into future forum programming?

<sup>&</sup>lt;sup>1</sup> Henrietta Barcelo, ChicagoCHEC Community Steering Committee Co-Chair, ChicagoCHEC 2021 report.

#### 2. METHODS

Our approaches in planning and implementing a successful in-person, and recently, virtual and/or hybrid forums were the result of the: a) application of the ChicagoCHEC Engagement Model; and b) detailed and careful planning of delivery platforms using ongoing input from various ChicagoCHEC constituencies.

### 2.1. Application of the ChicagoCHEC Engagement Model

A strong trusting relationship among the OC members based on seven years of experience were instrumental to the virtual pivot of cancer and COVID-19 information access for low income and ethnic/racial minority communities. These communities have significantly higher rates of cancer morbidity and mortality than the city of Chicago overall, as well as higher COVID-19 infections and deaths [5].

### 2.2. Detailed Planning of the Virtual Annual Community Forum during 2020 and 2021

For five years, ChicagoCHEC's OC and Community Steering Committee (CSC), comprised of representatives of community-based and professional organizations, community residents and leaders, public officials and people living with cancer or cancer survivors, organized in-person annual forums. The CSC provided ChicagoCHEC with an outlet to share important cancer related project and training activities and address important community cancer related issues. The Programming Working Group subcommittee (PWG), established during a CSC strategic planning meeting, took charge of planning the virtual forum components: event theme, session topics, lectures and panels including speakers and panelists, promotional materials and many other logistics. With the pandemic, PWG had to promptly become familiar with the appropriate technologies. They had to: a) develop an online platform, a website with a "landing page" for the forum that contained the program and registration information and community resources; b) set up Zoom meetings and break out rooms; c) run Zoom conferences and webinars and administer real-time virtual survey responses; d) address any other last-minute issues or surprises such as problems with technology. We were fortunate to receive ongoing technical support from the

### PROGRESS IN COMMUNITY HEALTH PARTNERSHIPS: RESEARCH, EDUCATION, AND ACTION (PCHP). FORTHCOMING. ALL RIGHTS RESERVED.

academic institutions, including support during the actual 2020 Forum for "trouble-shooting" of any unforeseen technical problems.

Once the staff had gained confidence in virtual programming, they conducted an online minitraining to those who needed it. For the actual event, we prepared slide templates for speakers, and electronic resources to increase participants' cancer knowledge.

To increase forum accessibility, PWG developed a trilingual promotional flyer in English, Spanish, and Cantonese, and promoted it through social media and ChicagoCHEC networks. Finally, during the event, virtual interpretation/translation services were made available. The recorded conference allowed for further dissemination on the YouTube channel. All these activities involved time-consuming logistics, but the skills and knowledge acquired seem to have paid off two years later.

### 2.3. Planning and Implementing the Hybrid Format

PWG decided to implement a hybrid model for the 2022 forum based on results of the 2020 and 2021 forum evaluation and the available data on COVID-19. ChicagoCHEC partners and public audiences could participate through Zoom or attend one of our "watch parties", at *El Centro* (a campus of NEIU) or at the Chinatown Public Library. We collaborated with our Asian American community partners, a ChicagoCHEC priority population group, to set up the latter.

For the watch parties, PWG engaged in the following added activities: a) identify and secure two-day physical spaces accessible to diverse community groups such as the Hispanic/Latino and Asian Americans in Chicago; b) plan technology accommodations, e.g., securing screen and monitors for event projection and separate breakout rooms to stream the event in different languages; c) facilitate Zoom transmission and accommodate speakers/panelists and moderators' needs for Zoom presentations; and d) work with community partners to promote the "watch

parties" and arrange attendee transportation. Challenges of the in-person meeting portion of the hybrid format included: a) securing adequate staff already spread thin setting up technology, coordinating lunch and addressing in site logistics; and b) monitoring registration closely as the room capacity at *El Centro* was 70, necessitating a first-come-first-serve registration. Maintaining engagement with those in-person required more hands-on staff. Finally, the personal protective equipment (PPE) such as masks and the social distancing measures required by CDC and the Illinois Department of Public Health added more work for the staff as they had to monitor their enforcement, and set-up spaces to accommodate the social distancing requirements.

### 2.4. Forum Participatory Evaluations: The Forum Online Survey

The post-forum online survey was developed in collaboration with CSC members and staff, under the leadership of the ChicagoCHEC evaluation core (CEC), who also participated in OC meetings as liaisons. Each year the survey was reviewed and translated in English, Spanish, and Cantonese. The survey results are presented annually to the CSC for discussion on improving the implementation of the following year's forum.

**Forum Registration Form**. To track and monitor potential forum attendees and some biographical information, the promotional materials such as flyers included a link to the ChicagoCHEC conference virtual landing page and a bilingual registration form.

**Post-Forum Participants Survey.** During and after the event, all participants were encouraged to complete the online trilingual (English, Spanish, Cantonese) forum evaluation survey using a link provided to attendees. The 2022 watch party attendees completed a Spanish- or Cantonese-language paper survey in-person. The mostly Likert scale questions explored participants' perceived levels of satisfaction with different components of the forum, such as organization and content and the potential impact of the forum. Details are provided in Tables 2 and 3.

### 2.5. Data Analysis

IRB of participating institutions approved all study protocols and procedures. Forum survey data were entered into REDCap. Analysis included cross tables, pie charts,  $\chi^2$  test of independence, and t tests using the IBM Statistical Package for Social Sciences (SPSS), v22 [6].

#### 3. RESULTS

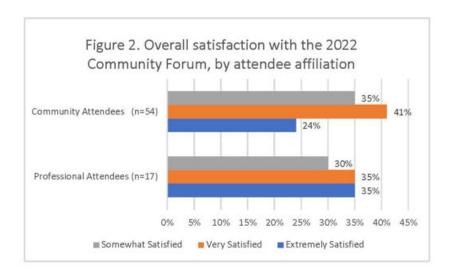
# 3.1 Selected Post-Survey Forum Evaluation Results [See December, 2022 ChicagoCHEC Forum Evaluation Summary. [7]

### Attendees' Socio-Demographic Characteristics

The 2020 -2021 forums were conducted over two days in September. The 2022 forum enabled participants to attend an in-person watch party in Chinatown or *El Centro* or log on via Zoom platform. **Table 1** shows selected characteristics of forum participants who responded to the survey by year.

**Forum attendance**. Overall, forums were well attended during the 2020-22 time periods. Most participants were women, of diverse racial and ethnic backgrounds, spoke English, and were community members, including cancer patients or survivors. Attendees reported hearing about the forum through CHEC networks (individuals and organizations) and academic partners.

Perceived satisfaction with various aspects of the forums (See Table 2). Overall, 2022 forum participants were extremely/very satisfied (65.4%). The satisfaction varied with participants' characteristics: greater proportion of community attendees were either *somewhat* or *very* satisfied with the 2022 forum, while greater proportion of professional attendees were extremely satisfied with the forum (See Figure 2).



Event organization/perceived topics relevant or interesting. 42% of 2022 forum participants reported that the event was very well organized. Another 57% reported that the forum program was either very relevant or extremely relevant to them, and 64% found conference topics interesting or extremely interesting. 52% found it very or extremely easy to relate to the 2022 speakers (See Table 2).

**Evaluation of Forum Program Sessions.** Assessment of program session varied by day and the specific topic. Participants who attended Day 2 rated the program sessions more favorably (good/excellent). [See **Figure 3**]

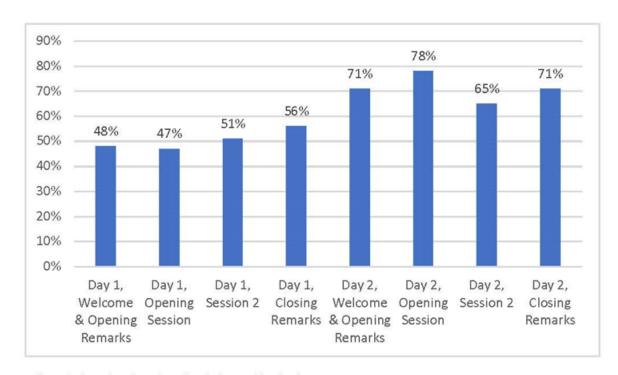


Figure 3. Evaluation of Forum Program Sessions

Day 1, Opening Session: Don't Count Me Out!

Day 1, Session 2: Neighborhood Violence and Lung Cancer

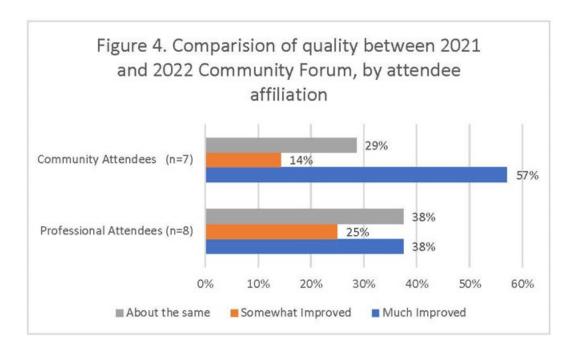
Day 2, Opening Session: Testimonials from Cancer Survivors: Hear their Informative and Motivational Stories

Day 2, Session 2: The Impact of COVID-19 on Cancer Screening: A Community Led Collaboration with ChicagoCHEC

**Forum Impact on Participants [See Table 3]** 52.7% of respondents indicated they were very or extremely likely to visit the ChicagoCHEC website or use resources learned at the forum with friends and family members, including sharing data from research studies presented on breast and lung cancer prevention and control, sharing personal stories from community members, and community health promotion resources and cancer screening services.

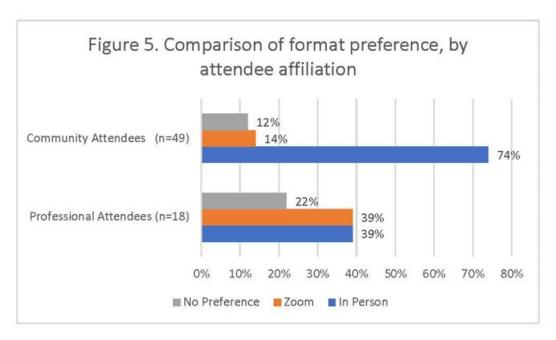
Comparing 2022 and 2021 Forums. Fifteen of 73 respondents (20.5%) indicated that they attended the 2021 Forum. When asked how the *quality* of the 2022 Forum compared to 2021,

46.7% indicated that the 2022 Forum was much or somewhat improved (20%), while 33.3% indicated that the quality of the 2022 Forum was about the same. **Figure 4** presents a comparison of responses from community vs. professional attendees. A greater proportion of community attendees indicated that the 2022 forum was much improved (57% vs. 38%), whereas a greater proportion of professional attendees indicated that the 2022 Forum was somewhat improved (25% vs. 14%).



 $X^2 = 0.61$ , df = 2, p value 0.74

Assessing the Hybrid vs. Virtual Formats. The majority (64%) of respondents indicated a preference for in-person format for future forums, 21% preferred the Zoom format, and 14% had no preference (see **Table 2**). Format preference differed between community and professional attendees (n=67). Seventy-four percent of community attendees preferred a future in-person format compared to 39% of professional attendees, while 39% of professional attendees preferred the Zoom format compared to 14% of community attendees. These differences were statistically significant (p=0.03) (see Figure 5).



 $X^2 = 7.1$ , df = 2, p value 0.03

Community needs and future programming. Future topics suggested were food access, nutrition, mental health, resources about financial assistance for cancer patients/survivors, breast and cervical cancer screening for transgender men, and discussions about cancer and genetics, including access to genetic counseling.

### 4. DISCUSSION

### 4.1. What Worked?

# 4.1.1. Engagement and Relationship Building during the Planning and Implementation Phase

At the onset of the pandemic in 2020, the shut-down of in-person activities prompted the CSC and OC to strategically plan for virtual programming. The CHEC team had to pivot to virtual and then hybrid formats. A CSC strategic planning meeting led to the establishment of four CSC working groups composed of members of the community partners and participating academic institutions. One of them, PWG, was formed to increase teamwork, efficiency, intentionality, and effective planning and delivery of the virtual forums and other community outreach and education activities. CSC and OC members freely signed up for the PWG based on their interests. The 10-member PWG worked to foster inclusive, collaborative, and engaging discussions that focus on the shared vision of achieving cancer health equity to improve community health. From the beginning of the pandemic, CSC and OC decided to implement, in close collaboration with ChicagoCHEC community partners, a virtual forum that specifically met community needs. The engaged partnership between community members and academic institutions made it possible to create and set up a tailored, community relevant program in a participatory manner. Leveraging community, academic, and institutional connections/networks, PWG symbiotically managed to bring in experts from diverse backgrounds as speakers and panelists at the recommendation of both CSC and OC members. The planning meetings were done through virtual semi-structured community conversations<sup>2</sup> that provided a fuller picture of community circumstances and needs that contribute to disparities in cancer-related information, access to screening and treatment, and knowledge of community resources. Community partners were involved in every step of the planning including identifying speakers, forum themes and topics and technology logistics. The 2020 to 2022 forum themes attest to the intentionality and contextualization as they address COVID and cancer health. The theme in 2020 was Virtual Community Forum – Addressing Cancer Together during COVID-19: The ChicagoCHEC Partnership; in 2021 was Working Together for Better: New Beginnings & New Normal in the

<sup>&</sup>lt;sup>2</sup> Ntihirageza, Jeanine, Tracy J. Luedke, Henrietta Barcelo, Joanne Glenn, Edgardo Sanchez Ramirez, Leilah D. Siegal, June McKoy et al. "Community-Driven Conversations: Partnership Building through CHEC-Ins." *Progress in Community Health Partnerships: Research, Education, and Action* 17, no. 1 (2023): 99-108.

Cancer Support and Survivorship Community; and in 2022 was Cancer Health and Mental Wellness – YOU, Family, Community. The three forums stand out from previous in-person ones, not only because of the level of engagement of community partners in the planning process but also for the convenience offered by remote programming. Participants did not have to commute, find parking, make childcare arrangements, etc., to make it to the conference. However, while technology platforms afford many benefits, there are several challenges, particularly for the targeted audience, such as access to internet/technology, difficulty to engage in discussions and networking, and lack of side conversations that are often enriching and a source of relationship building and nurturing.

### 4.1.2. Forum Marketing

From the program content to the development of the multilingual flyers, community and academic institution members all contributed ideas to make the material community friendly. The advertising was done through mobilization of ChicagoCHEC networks, use of social media and email lists and during related Zoom lectures and workshops. Community partners, connections, and networks played a crucial role in promoting the forums. Forum promotional materials were also posted on the ChicagoCHEC website as well as the virtual landing page for those seeking resources. The landing page includes information about the forums such as the agenda, speakers, registration links, and pictures from the past forums and community and educational events. The page also hosts community resources (ChicagoCHEC resource guide), links to ChicagoCHEC website, ChicagoCHEC Community report, and recorded events.

### **4.1.3.** Forum Delivery

To make the forum content accessible, the PWG provided interpretation/translation services, recorded the conference for later dissemination, and, to avoid Zoom fatigue, developed a 2.5-hour program each day with short breaks throughout the two-day event. These logistics made it possible for the conference participants to enjoy the forum without too many distractions. The 2022 changes addressed concerns expressed in the 2020 and 2021 forum evaluations.

### 4.2. Summary of Implementation Challenges and Response Strategies

Because just over half of all forum participants responded to the evaluation survey, there is the risk of selection bias. It is possible that participants most satisfied with the forums were also more likely to complete the survey, which would overestimate satisfaction with the event. It is also possible that those least satisfied with the event were more likely to respond, which would have the opposite effect. The Summary of Evaluation Findings for the Forum appears in an internal ChicagoCHEC OC Summary evaluation report [10].

### 5. Conclusions, Lessons Learned and Future Directions

### 5.1. Conclusions and Lessons Learned

This paper reports on collaboration efforts between the community and academic institutions for community outreach, engagement, and education moving from in-person programming to a virtual and hybrid delivery format to address cancer health disparities in Chicago. We described our core strategies and techniques in developing community relevant and responsive programming. During the engagement efforts, we learned the importance of being intentional, flexible, and resourceful to achieve mutually beneficial core partnerships. The outcome was inclusive virtual forums relying on local partner and community capacity. Our long-term engagement has demonstrated that university-community partnerships are dynamic, evolving, and expansive. Access has been one of the major benefits; however, among marginalized populations, access to technology is a major challenge for an all-virtual format. [Marsh 2021, Clark 2021]. Hybrid delivery formats can work and appears to be of community and professional preference, but from the logistical perspectives, requires more resources (time, staff).

Our experience shows that a hybrid model best fits the diverse community needs. We have also learned that a bottom-up approach to engagement, where the community members actively participate in idea generation, selection, and development leads to solid and lasting outcomes. Additionally, intentional listening contributed to building trust between communities and

academic institutions and community capacity building and sustainability. All in all, we owe the success of the 2020 to 2022 forums to this emphasis on intentionality and flexibility.

#### 5.2. Future directions for forums

An imperative to be mindful of the forum format came when we lost our Chinese partners when we went fully virtual. Future forums will mostly be in-person, but we will also continue to incorporate hybrid formats such as in-person watch parties as we did during the 2022 forum. These were organized to be more inclusive of community members who are not comfortable with technologies while accommodating those unable to attend in-person. We also plan to continue making materials/recordings available asynchronously.

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### Chicago Cancer Health Equity Collaborative: Adaptations in collaboration with our community partners during COVID-19.

### **TABLES**

Table 1. Selected Socio-demographic Characteristics of Forum Participants: 2020-2022

Characteristics	2020	2021	2022
	Virtual	Virtual	Hybrid
	(#) %	(#) %	(#) %
Forums Attendance No. of Participants			
(pre-registered)	148	71	119
Day One	101	75	(43) 58.9
Day Two	93	65	(23) 31.5
-No. of Survey Responders who			(73) 61.1
participated in either Day 1 or Day 2			
# Of Attendees to	N/A	N/A	
Watch Parties (in-person) at:			
El Centro-NEIU	N/A	N/A	14
Chinatown Public Lib.	N/A	N/A	37
Zoom Participation	133	91	68
Sex/Gender:			N=64
Female	(60) 85.7	(48) 94.1	(53) 82.8
Male	(8) 11.4	(2) 3.9	(11) 17.2
Race/Ethnicity:			N=64
Asian Am.	(7) 8	(4) 7.4	(2) 7.1
Black/African Am.	(16) 18.4	(9) 16.7	(4) 14.3
Hispanics/Latinos/ Latinx	(30) 42.9	(25) 52.1	(17) 60.7
Other Races/ Multiracial or decided not to	(17) 19.5	(14) 25.9	(10) 35.7
answer:			
White	(26) 29.9	(22) 40.7	(12) 42.9
Language :			
Spanish	(13) 17.6	(12) 24.5	(13) 25.5
Cantonese	N/A	N/A	(51) 74.5
Attendees Affiliation:			
Community residents	(7) 8	(3) 5.7	56.9
Academic	(30) 34.5	(23) 43.4	13.9
Community-Based Org.	(13) 14.9	(9) 17.0	12.5
Participants' Cancer Status			
Living with Cancer	N/A	N/A	(2)
Cancer Survivors	N/A	N/A	(12)
Participants heard about the Forum (more than one answer]			
-ChicagoCHEC -website/social media	N/A	(40) 74.1	(5)
-Friend or colleague	N/A	(8) 14.8	(7)

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-ChicagoCHEC staff/	N/A	(29) 53.8	(22)
faculty & academic institutional partners			
-Other	N/A	(12) 22.2	(7)

Table 2. Participants' Level of Satisfaction with Selected Forums Activities.

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Forum Characteristics	2020	2021	2022
	(Virtual) # %	(Virtual) # %	(Hybrid) # %
Overall Satisfaction:	# % N=81	N=54	N=72
-Not at all satisfied/Not	1.4	00	00
very satisfied			
-Not very satisfied	1.2	1.2	00
-Somewhat Satisfied	11.1	5.6	34.7
-Very Satisfied	54.3	44.4	38.9
-Extremely Satisfied	32.1	50.0	29.5
Levels of			N=72
Organization:			
Not at all organized/		0	(2) 3.0
not very organized			(2.5)
Organized		0	(26) 36
Very organized		(38) 71.7	(30) 42
Extremely organized		(14) 26.4	(14) 19
How Relevant were			N=70
Forum topics?		(6) 11 6	(20) 12
Not very relevant/		(6) 11.3	(30) 43
somewhat relevant		(22) (2.2	(24) 24
Very relevant		(33) 62.3	(24) 34
Extremely relevant		(14) 26.4	(16) 23
			31. 50
How Interesting were			N=72
the topics discussed:		0	(2) 2
Not very interesting		(3) 5.7	(2) 3
Somewhat interesting		(34) 64.2	(30) 42
Very interesting  Extremely interesting		(16) 30.2	(16) 22
Extremely interesting		(10) 30.2	(10) 22
H			N=71
How easy was to relate to the speakers			N-/1
-Not at all easy/not very		(1) 1.9	(12) 17
•		(1) 1.9	(12) 17
-Somewhat easy		(9) 27	(22) 31
-Very easy		(29) 54.7	(20) 28
- Extremely Easy		(14) 26.4	(17) 24
LAucinery Lasy		(17) 20.7	(17)27
Preferences of			N=64
Delivery format:			11, 04
In-person	(16) 38.1	(8) 23.5	(43) 64.2
Virtual	(5) 11.9	(10) 29.4	(14) 20.9
No preference	(21) 50.0	(16) 47.1	(10) 14.9

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**Table 3 Selected Impact of Forum Activities on Participants** 

Areas of Forum Impact	2020 (Virtual) # %	2021 (Virtual) # %	2022 (Hybrid) # %
How motivated are you to seek cancer care resources or community partnerships	N/A	(How much did this year's forum empower you to seek out)	N=69
-Not very motivated /Somewhat motivated		,	(29) 42.1
-Very motivated -Extremely motivated			(27) 39.1 (13) 18.8
How much the Forum encouraged you to seek health/medical care			N=68
-Not very encouraged		(2) 3.8	(2) 2.9
-Somewhat encouraged		(13) 24.5	(24) 35.3
Very encouraged		(29) 54.7	(27) 39.7
Extremely encouraged		(9) 17.0	(15) 22.1
How likely are you to recommend the CHEC forum to others			N=61
-Somewhat likely		(5) 9.8	(23) 37.7
Very likely		(26) 51.0	(22) 36.1
Extremely likely		(19) 37.3	(16) 26.2
How likely are you to visit the CHEC website or use resources learned at the forum?			N=55
Not at all likely		0	1. 1.8
Somewhat likely		(10) 19.2	(25) 45.5
-Very likely		(32) 61.5	(21) 38.2
Extremely likely		(10) 19.2	(8) 14.5

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Table 4. Implementation Challenges & Response Strategies

Challenges of virtual Events		Res	sponse Strategies Used by ChicagoCHEC
	Limited community participation in all steps in the planning of & implementation of program activities		Used of Community engagement strategies following CHEC Conceptual Model
	Lack of structure to facilitate communications and coordination		Establishment of a Community-Academic Program Planning Working Committee
	Poor planning and limited time to take care of logistics.		Engaged in detailed planning of program content and logistics
	Lack of knowledge of topics of interest to targeted communities		Identification of cancer-related topics of general interest and responsive to community needs
	Lack of linguistic, cultural, educational, and gendered-appropriates approaches in planning and implementation of the events.		Knowledge of needs of special population groups such as the disability community, LGBTQ+, racial/ethnic minorities, the poor, and persons living with cancer or cancer survival.  Development of linguistic, cultural, educational
			and gendered appropriate, and the like on all planned & implementation activities, including conference promotional materials
			Maximize outreach activities through social media and partners networks
	Technological issues: No access or limited access to computers, smart phones or home internet; connectivity issues; lack of familiarity with the use of online virtual program/software, & other Technical-related issues	<ol> <li>3.</li> </ol>	Consulted community members about potential barriers and how to address them.  Made available and conducted capacity-building technical support training on how to use the virtual platform, for those who requested such training.
	Community limited knowledge of cancer related resources and upcoming community events		Mobilized community and professional partners network to share financial & cancerrelated resources and upcoming events.  Maximized partners 'participation in the development of program (with topics of interests) and in the promotion of the Forum.  Established event website, specifically, microsite/webpage created as a virtual landing page for those seeking cancer related resources. The microsite includes information about forums agenda, speakers, registration links, pictures from past forums & other CHEC events, etc.
	Virtual fatigue		Developed a program of no more than 2.5 hrs. long.  Have different moderators with different tone of voices and moderation styles that maximizes audience participation and interactions  Plan for frequent opportunities for Questions and Answers and discussions.  Have short breaks.  Consider a short-two-day program.  Event Recording for later viewing