Division of Cancer Control and Population Sciences

NCI’s bridge to public health research, practice, and policy

Robert T. Croyle, PhD
Director, DCCPS
December 2, 2014
Joint NCAB/BSA Meeting
FOCUS: WHAT WE DO AND HOW WE PRIORITIZE

OUTLINE:

• About DCCPS
• Context of Prioritization
• Gaps in the Portfolio
• Implementation Science and Practice
About DCCPS
Funds Allocated to and Managed by DCCPS FY98-14

Approximately 9.6% of the total NCI budget in FY14 (excludes FDA funding).
FY14 DCCPS Grants Portfolio (n=789)

40% of total is health disparities-related research (317 grants)

- Tobacco Control: 114 grants (14%)
- Obesity Related: 109 grants (14%)
- Cancer Screening: 96 grants (12%)
- Health Services: 51 grants (6%)
- All Others: 419 grants (e.g., epi & genomics, surveillance (53%))
## Past to Present: DCCPS-Led RFAs FY98-FY13

<table>
<thead>
<tr>
<th>Research Area</th>
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<tbody>
<tr>
<td>Long Term Cancer Survivors Research</td>
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<tr>
<td>Prevention and Cessation of Tobacco Use by Children and Youth in the U.S.</td>
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<tr>
<td>Breast Cancer Surveillance Research</td>
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<td>Health Communications in Cancer Control</td>
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<td>Basic Biobehavioral Research on Cancer-Related Behaviors</td>
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<td>Regional Variation in Breast Cancer Rates in the U.S.</td>
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<td>Interdisciplinary Studies in the Genetic Epidemiology of Cancer</td>
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<td>Research in State and Community Tobacco Control Interventions</td>
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<tr>
<td>Cancer Intervention and Surveillance Modeling Network (CISNET)</td>
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<tr>
<td>Exposure Assessment Methods for Cancer Research</td>
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<tr>
<td>Cancer Care Outcomes Research and Surveillance Consortium (CanCORS)</td>
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<tr>
<td>DCCPS-Led RFAs, cont.</td>
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<tr>
<td>Cooperative Family Registry for Epidemiologic Studies in Colon Cancer</td>
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<td>Cancer Research Network</td>
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<td>Mechanisms of Physical Activity Change</td>
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<td>Increasing the Utilization and Impact of the NCI’s Cancer Information Service</td>
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<tr>
<td>Breast Cancer Family Registry</td>
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<tr>
<td>Improved Measures of Diet and Physical Activity for the Genes and Environment Initiative</td>
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<tr>
<td>Improving Effectiveness of Smoking Cessation Interventions in Low Income Adult Populations</td>
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<tr>
<td>Measures and Determinants of Smokeless Tobacco Use, Prevention, and Cessation</td>
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<tr>
<td>Replication and Fine-Mapping Studies for the Genes Environment and Health Initiative</td>
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<tr>
<td>Transdisciplinary Cancer Genomic Research: Post-Genome Wide Association Initiative</td>
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<tr>
<td>State and Community Tobacco Control Policy and Media Research</td>
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<tr>
<td>Population-Based Research Optimizing Screening Through Personalized Regimens (PROSPR)</td>
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## Centers of Excellence Initiatives

<table>
<thead>
<tr>
<th>RFA Title</th>
<th>Funding</th>
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<tbody>
<tr>
<td>Transdisciplinary Tobacco Use Research Centers (with NIDA, NIAAA, RWJF)</td>
<td>FY99 – FY08</td>
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<tr>
<td>Centers of Excellence in Cancer Communication Research</td>
<td>FY03 – FY12</td>
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<tr>
<td>Centers for Population Health and Health Disparities (with NIEHS, OBSSR, NHLBI)</td>
<td>FY04 – FY14</td>
</tr>
<tr>
<td>Transdisciplinary Research on Energetics and Cancer</td>
<td>FY05 – FY15</td>
</tr>
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</table>
Tobacco Centers of Regulatory Science – totally funded by FDA

- 14 Centers (7 managed by NCI)
- $53M in FY13
- $273M over 5 years

7 Research Areas:

- Diversity of tobacco products
- Reducing addiction
- Reducing toxicity
- Adverse health consequences
- Communications
- Marketing of tobacco products
- Economics and policies
## DCCPS-Led RFAs FY14 – FY15

<table>
<thead>
<tr>
<th>RFA Title</th>
<th>Partners</th>
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</thead>
<tbody>
<tr>
<td>Person-Centered Assessment Resources</td>
<td>12 other NIH ICs</td>
</tr>
<tr>
<td>Using Social Media to Understand and Address Substance Use and Addiction</td>
<td>NIDA and NIAAA</td>
</tr>
<tr>
<td>Center for Evaluation and Coordination of Training and Research (CECTR) in Tobacco Regulatory Science</td>
<td>FDA and trans-NIH</td>
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<tr>
<td>Population-based Research Optimizing Screening through Personalized Regimens (PROSPR) – Revision to Enhance the Collection of Cervical Cancer Screening Data</td>
<td>CDC and DCP</td>
</tr>
<tr>
<td>Cancer Intervention and Surveillance Modeling Network</td>
<td>CDC and AHRQ</td>
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Context of Prioritization
Strategic Initiatives (examples):

- Prevent and reduce tobacco use
- Promote prevention and wellness across the lifespan
- Help Americans achieve and maintain healthy weight
- Eliminate health disparities
Figure 1. Vision of the Health IT Ecosystem

- Personal Health Record
- Electronic Health Record
- Health Information Exchange
- Natl & Intl Health Analytics

- Quality Measures
- Public Health
- Clinical Research
- Clinical Guidelines

- Patient
- Practice
- Population
- Public

- Clinical Decision Support
- Public Health Policy
- Clinical Guidelines
Interagency

CDC
Centers for Disease Control and Prevention
CDC 24/7: Saving Lives, Protecting People™

HRSA
CENTERS for MEDICARE & MEDICAID SERVICES

USDA

FDA
U.S. Food and Drug Administration
Protecting and Promoting Your Health

AHRQ
Agency for Healthcare Research and Quality
Advancing Excellence in Health Care
- Common Fund (e.g., Science of Behavior Change)
- Tobacco Regulatory Science Program
- Collaborative Research on Addiction at NIH ("CRAN")
- NIH Obesity Research Task Force
- Patient-Centered Outcomes Research
- Office of Disease Prevention
Non-Government Partners

- American Cancer Society
- Legacy
- Susan G. Komen
- LIVESTRONG Foundation
- PCORI
- Patient-Centered Outcomes Research Institute
- Robert Wood Johnson Foundation
Gaps in the Portfolio
• How do decision making processes influence habitual behaviors, and how can that knowledge be used to design strategies that lead to adoption and maintenance of behaviors that reduce cancer risk?

• How does the level, type, or duration of physical activity influence cancer risk and prognosis?

• How does obesity contribute to cancer risk?

• What methods and approaches induce physicians and health systems to abandon ineffective interventions or discourage adoption of unproven interventions?
Types of Funding Gaps

- Disease Site
  - e.g., Liver Cancer Control
- Underrepresented Subpopulations
  - e.g., American Indian/Alaska Native
- Insufficient Intervention Evidence
  - e.g., Cessation within the Context of Lung Cancer Screening
- Low Utilization Despite Evidence
  - e.g., HPV Vaccination in Pediatric Settings
Implementation Science and Practice
Implementation science is the study of methods to promote the integration of research findings and evidence into healthcare policy and practice.
### Components of Participating Organizations

- National Institute of Mental Health (NIMH)
- National Cancer Institute (NCI)
- National Center for Complementary and Alternative Medicine (NCCAM)
- National Heart, Lung, and Blood Institute (NHLBI)
- National Human Genome Research Institute (NHGRI)
- National Institute on Aging (NIA)
- National Institute on Alcohol Abuse and Alcoholism (NIAAA)
- National Institute of Allergy and Infectious Diseases (NIAID) (Clarification per NOT-Al-13-034)
- National Institute on Deafness and Other Communication Disorders (NIDCD)
- National Institute of Dental and Craniofacial Research (NIDCR)
- National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)
- National Institute on Drug Abuse (NIDA)
- National Institute of Neurological Disorders and Stroke (NINDS)
- National Institute of Nursing Research (NINR)
- Office of Behavioral and Social Sciences Research (OBSSR)

### Funding Opportunity Title

**Dissemination and Implementation Research in Health (R01)**

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### Cancer Trends Progress Report – 2011/2012 Update

The **Cancer Trends Progress Report**, first issued in 2001 as the **Cancer Progress Report**, summarizes our nation’s progress against cancer in relation to **Healthy People** targets set forth by the Department of Health and Human Services. The report includes key measures of progress along the cancer control continuum and uses national trend data to illustrate where advances have been made.

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### In the Report

- **Director's Message**
- **Report Highlights**
- **Introduction**
- **Trends at a Glance**
- **Summary Tables**

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### Progress Report Tools and Resources

#### Appendices
- Data Sources (PDF)
- Dictionary
- Fact Sheet (PDF)
- FAQs
- Generate custom report
- Print this page
- Quick Tutorial
- Report Archive

#### Prevention
- Tobacco, Physical activity,
  - Diet, Sun, Environment

#### Early Detection
- Breast, cervical, colorectal
  - cancer screening

#### Diagnosis
- Incidence
  - Stage at diagnosis

#### Treatment
- Bladder, breast, colorectal, kidney,
  - lung, ovarian, prostate cancer treatment

#### Life After Cancer
- Costs of cancer care, Survival,
  - Cancer survivors and smoking

#### End of Life
- Mortality
  - Person-years of life lost
Research-tested Intervention Programs (RTIPs)

RTIPs - Moving Science into Programs for People

Use the link below to select a number of criteria, and see a list that contains programs from several topics.

Select from 151 Intervention Programs
RTIPs is a searchable database of cancer control interventions and program materials and is designed to provide program planners and public health practitioners easy and immediate access to research-tested materials.

Register your program now and be part of the RTIPs Community.

For more information on how to participate in a RTIPs review, read the RTIPs Submission and Review Process: A Guide for Program Developers

Search Research to Reality (R2R):
NCI's online community of practice links cancer control practitioners and researchers, for discussions, cyberseminars, and much more.

New Programs on RTIPs:
- Informed Decision Making
  -Thinking About Continuing Mammography Screening for Breast Cancer? A Decision Aid for 70-Year-Old Women (Post date: October, 2014)
- Survivorship
  -Project ENABLE II (Post date: September, 2014)
- Colorectal Cancer Screening
  -Healthy Colon, Healthy Life (Post date: August, 2014)

★ New programs are released periodically. Please check for updates.

DATA
State Cancer Profiles® (CDC, NCI)

COLLABORATION
Research to Reality® (NCI)

RESEARCH SYNTHESIS
Guide to Community Preventive Services®
(Federally supported)
U.S. Preventive Services Task Force®
(Federally supported)
Evaluation of Genomic Applications in Practice and Prevention (EGAPP)®
Additional Research Evidence Reviews

TOPICS
- Breast Cancer
- Cervical Cancer
- Colorectal Cancer
- Diet / Nutrition
- Informed Decision Making
- Obesity
- Physical Activity
- Public Health Genomics
- Sun Safety
- Survivorship
- Tobacco Control

WHAT'S NEW
Cancer Control P.L.A.N.E.T. now links to the international Cancer Control Partnership’s (ICCP) new web-portal. Learn more about their portal and search over 100 international cancer plans and emerging non-communicable disease plans at http://www.iccp-portal.org/cancer-plans.

E-NEWSLETTER
Sign up to receive monthly updates on Cancer Control P.L.A.N.E.T.

FEEDBACK
Quick Profiles for States

Choose a state below to get a report of cancer statistics and other related topics.

Data Topics Across the Cancer Control Continuum

Cancer statistics, charts, and maps by data topic across the cancer control continuum.

- Demographics
- Screening & Risk Factors
- Cancer Knowledge
- Incidence
- Prevalence
- Mortality
Administrative supplements for NCI cancer centers: collaborations with state and local HPV coalitions and programs

<table>
<thead>
<tr>
<th>Institution</th>
<th>PI NAME</th>
<th>Cancer Control Coordinator</th>
<th>State</th>
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<tbody>
<tr>
<td>UAB</td>
<td>Ed Partridge</td>
<td>Alison McGuire</td>
<td>AL</td>
</tr>
<tr>
<td>USC</td>
<td>Stephen Gruber</td>
<td>Samantha Garcia and Marisela Robles</td>
<td>CA</td>
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<tr>
<td>Yale</td>
<td>Thomas Lynch</td>
<td>Pamela Julian</td>
<td>CO</td>
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<tr>
<td>Moffitt</td>
<td>Thomas Sellers</td>
<td>Kelly Nam</td>
<td>FL</td>
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<tr>
<td>U of Hawaii</td>
<td>Michele Carbone</td>
<td>Hali Robinett</td>
<td>HI</td>
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<tr>
<td>Markey - U of Kentucky</td>
<td>Mark Evers</td>
<td>Amy Christian</td>
<td>KY</td>
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<tr>
<td>UNC Lineberger</td>
<td>Norman Sharpless</td>
<td>Sara Smith</td>
<td>NC</td>
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<tr>
<td>Rosewell Park</td>
<td>Donald Trump</td>
<td>Christy Widman</td>
<td>NY</td>
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<tr>
<td>Einstein Yeshiva</td>
<td>David Goldman &amp; Laurie Bauman</td>
<td>Dana Watnick</td>
<td>NY</td>
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<tr>
<td>Case</td>
<td>Stanton Gerson</td>
<td>Darla Fickle (rural) and Toyin Sokari (urban)</td>
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<td>Ohio State</td>
<td>Michael Caligiuri</td>
<td>Elizabeth Antognoli</td>
<td>OH</td>
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<tr>
<td>MUSC Hollings</td>
<td>Andrew Kraft</td>
<td>Kathleen Cartmell</td>
<td>SC</td>
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<tr>
<td>Vanderbilt</td>
<td>Jennifer Pietenpol</td>
<td>Todd Lawrence</td>
<td>TN</td>
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<td>MD Anderson</td>
<td>Ronald DePinho</td>
<td>Rosalind Bello</td>
<td>TX</td>
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<tr>
<td>Baylor</td>
<td>Kent Osborne</td>
<td>Casey Martinez</td>
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<tr>
<td>Huntsman - Utah</td>
<td>Mary Beckerle</td>
<td>Echo Warner</td>
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<tr>
<td>UVA</td>
<td>Thomas Loughran</td>
<td>Melissa Grossman</td>
<td>VA</td>
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<tr>
<td>Wisconsin Carbone</td>
<td>Howard Bailey</td>
<td>Sarah Mroz</td>
<td>WI</td>
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Challenges

- Increasing diversity of population
- How best to inform policy
- Understanding the changing health care context
- NCI’s role in obesity control
- The new information environment
- Role of upstream social determinants of health
- Prevention among cancer survivors
Discussion

• What areas of science need to be strengthened?

• What are the opportunities to increase prevention of cancer?

• How do we separate out individual behavior from broader public health interventions?

• How do we lessen the time from discovery to delivery in underserved populations?

• How do we achieve sustained delivery?

• What is the appropriate focus, scale, and strategy for NCI’s prevention early detection, HSR, and implementation science efforts?

• What, and how much, should NCI be doing, especially given other priorities and limited budgets?

• What are the responsibilities of funding partners, e.g., NIH, CDC, AHRQ, or other?