NCAB Ad hoc Subcommittee on Communications Meeting

Hyatt Regency Bethesda Hotel
Embassy/Patuxent Room
One Metro Center, Bethesda, MD
February 4, 2008
7:30 – 9:00 p.m.

Summary

Participants:
Dr. Jean deKernion, NCAB
Dr. Lloyd Everson, NCAB
Mr. Rich Folkers, NCI
Dr. Paulette Gray, NCI
Brooke Hamilton, NCI
Dr. Brad Hesse, NCI
Mr. Robert Ingram, NCAB
Ms. Lenora Johnson, NCI
Dr. Diana Lopez, NCAB
Dr. Karen Meneses, NCAB
Mike Miller, NCI
Dr. Carolyn Runowicz, NCAB
Ms. Patrice Pettinato (Rapporteur, The Scientific Consulting Group, Inc.)

Welcome
Dr. Diana Lopez opened the meeting at 7:00 p.m. and introduced Mr. Rich Folkers from the NCI Office of Media Relations; Ms. Lenora Johnson, from the NCI Office of Communications and Education; and Dr. Brad Hesse, from NCI’s Division of Cancer Control and Population Sciences (DCCPS).

NCI Office of Media Relations Update
Mr. Rich Folkers provided an overview of the newly created Office of Media Relations. It was created less than one year ago, initiated by Dr. John Niederhuber, NCI Director. The office works closely with Dr. Niederhuber to keep him informed of media coverage of the NCI and cancer-related topics, as well as public perception of the NCI and its science. It also helps Dr. Niederhuber translate and communicate the science to targeted audiences.

The office employs six experienced staff members, and its 2008 budget, excluding Federal dollars for four of the six staff, is $476,000. Media staff field media queries, process interview requests, and produce press releases and fact sheets to communicate scientific findings from the NCI to major media channels. On average, the media office receive 54 direct media requests per month, and the NCI averages 153 direct mentions in broadcast news services per month.
The office has saved the NCI a significant amount of money by re-establishing media training as an in-house function and for providing video communication in place of in-person interviews by Dr. Niederhuber. It also has developed its own video production process; for less than $5,000, it procured high definition equipment to produce up to date visuals and is able to produce its own B-roll for the Institute. For each video communication segment of Dr. Niederhuber, the office saves an estimated $2,000.

NCI Office of Communications and Education Update  Ms. Lenora Johnson provided a history of the Office of Communications and Education (OCE), which falls under the NCI Office of the Director (OD). Dr. Niederhuber combined the Office of Communications with the Office of Education and Special Initiatives after a thorough subcommittee review. The change was part of the NCI reorganization to help streamline activities by building on synergies that already existed in the OD.

After the reorganization discussion, a program review, organizational assessment, stakeholder analysis and technological assessment of the OCE were conducted to generate a set of recommendations. The program assessment revealed that the bulk of OCE work fell into nine categories: (1) communication leadership for NCI; (2) research, evaluation, and usability analysis; (3) content and materials development and management; (4) information technical services; (5) supporting operations and infrastructure; (6) management of NCI-facing channels; (7) management of partners and public-facing channels; (8) strategic planning, consultation and support for communications and education initiatives; and (9) management of divisions, offices, and centers accounts.

Stakeholder assessments of the OCE showed value and respect for high-quality work and a trust in NCI’s information. The assessments also indicated a need for a comprehensive approach for patient education and greater support for clinical trials recruitment and accrual, as well as more of a focus on minorities and underserved populations.

The new operating structure which was presented will offer a single point of access for NCI communication. The communications planning and coordination Branch will provide “client liaisons” to other division offices and centers. The OCE will work closely with Dr. Hesse’s group to connect the communications research and engage new technologies for targeting specific audiences and introducing different communities to NCI’s public health messages. It hopes to build and employ dynamic techniques, approaches, partnerships, and platforms in reaching these audiences, who have ever-changing needs.

NCI has already begun its process for developing and vetting the next version of the CIS. The current contracts end in January 2010 and a timeline for the recompetition was presented.

Ms. Johnson presented a set of vision goals which included but were not limited to activating a participative nature of communication that is more engaging of key audiences.

DCCPS Communications Research Update
The DCCPS is part of the extramural research community, supporting transdisciplinary grants for communications science. Dr. Brad Hesse explained the role of the Applied Research Branch,
where his work is positioned, DCCPS in relation to the OCE. DCCPS is responsible for collecting behavioral evidence that is translated in the OCE and others for targeting purposes. DCCPS enlists the use of scientifically supported surveys and surveillance reports to gauge public behavior and attitudes. OCE uses these results to help tailor NCI messages to intended audiences. Evidence-based approaches in communications are vital for making gains in population health.

Dr. Hesse showcased some current technology that is being used to reach today’s audiences. Self-contained applications are an effective tool for engaging people in self-administered behavior modification, and it is relatively inexpensive when compared with producing print materials that may not reach the public. Several self-contained messages were shown to the group, along with data that indicated effectiveness of the messages.

Current trends in cancer communication implicate social changes that are affecting the media. There has been a change from delivering one-way messages to the public to interactive communication (from a “push” to a “pull”), with the public actively seeking answers to health-related questions. The Internet has played a key role in this access to information, but the negative effect is seen in what is referred to as “data smog,” that is, too much information from too many sources, with too many conflicting messages. Another public trend involves the targeted audience. The scientific community is no longer dealing with one public, but many individuals and many small groups, all requiring different responses to their needs. Dr. Hesse stressed the need for more investment in cancer communications research to deal with these challenges today and in the future.

Both Dr. Hesse and Ms. Johnson provide the following considerations to the NCAB Subcommittee on Communications for supporting NCI’s communications efforts. These included:

- Convene a workgroup of creative thinkers, communications innovators, and researchers to share trends in communications and opportunities to consider for broadening or focusing research.
- Serve as a sounding board for strategic input and ideas—as communications is one of the first lines of pre-emptive offense against cancer but last funded.
- Provide feedback on the new CIS concept when it is posted for public comment.
- Help NCI identify and work with partners with whom we can combine resources in order to achieve population impact through communications initiatives and cost savings.
- Advocate for communicating science and complex clinical issues to the lay public.
- Help strategize to align research with the “effector arms” in communication and get the tools and evidence from communications laboratories into practice.

**Action Item**
Ms. Johnson agreed to provide Dr. Lopez and the Chair of the Subcommittee the minutes and discuss how the Subcommittee might be engaged to support NCI communication initiatives and will provide with a consolidated summary of anticipated need from all three represented groups: OCE, DCCPS, and the NCI Office of Media Relations.
The meeting adjourned at 9:10 p.m.

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