

Community Partnerships to Advance Science for Society (ComPASS)

Lead ICOs: NIMH, NIMHD, NINR, ORWH

Working Group: AoU, CSR, NCI, NCATS, NEI, NHGRI, NHLBI, NIA, NIAMS, NICHD, NIDA, NIDCD, NIDCR, NIDDK, NIEHS, NIMH, NIMHD, NINDS, NINR, NLM, OAR, OBSSR, ODP, ORWH, SGRMO

Cheryl Anne Boyce, Ph.D.

Assistant Director for Re-engineering the Research Enterprise

Office of Strategic Coordination- The Common Fund

DPCPSI, NIH



National Institutes of Health

Office of Strategic Coordination-The Common Fund

ComPASS Co-Chairs



Janine Austin Clayton, M.D., FARVO
Associate Director for Research on Women's Health
Director
Office of Research on Women's Health
Division of Program Coordination, Planning,
and Strategic Initiatives
Office of the Director (OD/NIH)



Eliseo J. Pérez-Stable M.D.
Director
National Institute on Minority Health and
Health Disparities (NIMHD)



Shelli Avenevoli, Ph.D.
Acting Director
National Institute of Mental Health (NIMH)



Shannon N. Zenk, Ph.D., M.P.H., R.N.
Director
National Institute of Nursing Research (NINR)

What is the NIH Common Fund?

- Funded by the Office of the Director, managed in partnership with the NIH Institutes and Centers
- Supports a set of NIH-wide scientific programs
- Fosters innovative ideas with the potential for transformative impact
- Intended to benefit the broad biomedical and behavioral research community



Accelerate
emerging
science



Remove
research
roadblocks



Enhance the
research
workforce



Support high-risk,
high-reward
science

Common Fund Science and Management are Collaborative



Scientists from diverse disciplines provide input as we plan new programs.



Researchers participate in interdisciplinary consortia to tackle shared goals.



Leadership and staff from Institutes, Centers, and the Office of the Director work together to design funding opportunities and oversee the projects.

The Common Fund Moves the NIH Mission Forward-Faster

- Supporting bold scientific programs that **catalyze discovery** across all biomedical and behavioral research
- Advances areas of biomedical and behavioral research important to the missions of multiple NIH Institutes and Centers
- Spurs subsequent biomedical and behavioral advances that otherwise would not be possible without an initial strategic investment



What is ComPASS?

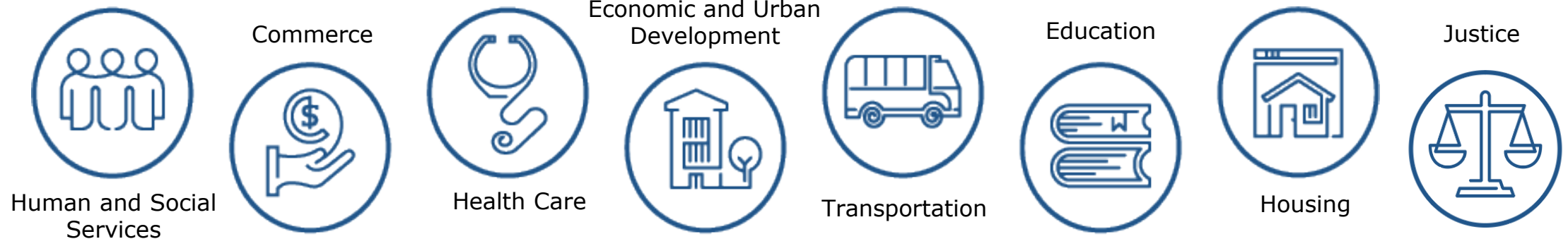


- **C**ommunity **P**artnerships to **A**dvance **S**cience for **S**ociety (ComPASS)
- Supported by the NIH Common Fund
- Health Equity Focus
- Community-Led
- Leveraging Structural Interventions and Multi-Sectoral Partnerships
- Intervening on Social Determinants of Health
- Improve Health Outcomes
- Reduce Health Disparities
- Advance Health Equity Research

Structural Interventions to Address Social Determinants of Health

"Structural interventions attempt to change the social, physical, economic, or political environments that may shape or constrain health behaviors and outcomes, altering the larger social context by which health disparities emerge and persist"

-Brown, et al 2019, American Journal of Public Health



Overall Goals of ComPASS

HEALTH EQUITY



1. To catalyze, deploy, and evaluate **community-led** health equity **structural interventions** that leverage partnerships across multiple sectors to reduce health disparities
2. To develop a **new health equity research model** for community-led, multisectoral structural intervention research across NIH and other federal agencies

Interventions to Address Social Determinants of Health

“Social determinants of health (SDOH) are the conditions in which people are born, grow, learn, work, play, live, and age, and the wider set of structural factors shaping the conditions of daily life” (NIH, 2023)

These structural factors include social, economic, and legal forces, systems, and policies that determine opportunities and access to high quality jobs, education, housing, transportation, built environment, information and communication infrastructure, food, and health care; the social environment; and other conditions of daily life.



ComPASS projects develop, test, and evaluate intervention and implementation strategies that address SDOH with the ultimate goal of improving health.

Community-Engaged from the Start: *Listening Sessions*

NIH conducted [eight listening sessions](#) to solicit input on the initiative. **More than 500 people** participated across all listening sessions.

Members from various interest groups provided input to inform the development of the innovative ComPASS Program.

Themes

- Community ownership
- Forging relationships and building trust
- Community capacity building
- Innovative public-private partnerships
- Navigating the NIH enterprise
- Create intervention across multiple sectors
- Data and evidence for structural interventions are needed



Innovations in Community-Led Research

- Community engaged approaches are recognized as key research strategies to address health disparities and advance health equity.
- Community-led research changes the process by which research has traditionally been conducted
- Community-led research requires a transformation in the processes and practices that govern research engagement
- Unique approach aligns with NIH's goal to enhance acceptability and sustainability of effective interventions to improve health equity and sustain positive impacts.



ComPASS Initiatives

- Program duration: 10 years
- Planned budget: Approximately \$200M over a 5-year period

Awards Managed by:

OTA-22-007 (OTA)
25 awards, FY23



**Community-Led, Health Equity
Structural Interventions (CHESIs)**



The Common
Fund

RFA-RM-23-001 (U24)
1 award, FY23



**ComPASS Coordination Center
(CCC)**



National Institute
of Nursing Research

RFA-RM-23-012 (UC2)
Up to 5 awards, FY24



**Health Equity Research Hubs
(Hubs)**



**NATIONAL
CANCER
INSTITUTE**



Examples of Structural Interventions

These examples have the potential to influence health outcomes:

- Criminal justice system policy changes to address structural racial/ethnic and socioeconomic discrimination
- Universal basic income programs and policies to address issues of economic instability
- High-speed broadband internet expansion to enhance internet connectivity and telehealth access in rural and other underserved communities
- Community revitalization investment projects to enhance neighborhood and community resources and facilitate health promoting behaviors

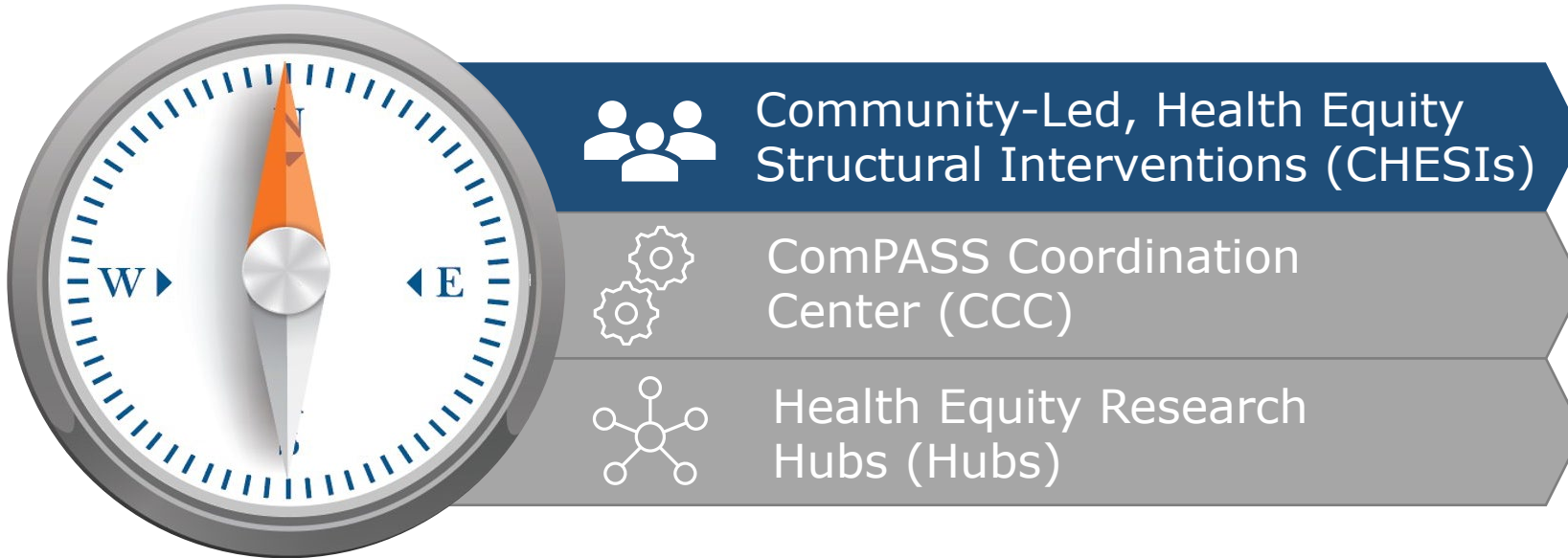


ComPASS Will Help Improve Health

- **Increase our understanding** of the mechanisms that produce and perpetuate health inequities and disparities
- Improve **multiple health outcomes**
- Build a **repository** of evidence-based health equity interventions
- Provide **capacity-building** and training curricula & resources
- Create innovative models to **hasten translation of discoveries** into policy and practice



Community-Led, Health Equity Structural Interventions (CHESIs)



Goal: Community organizations and research partners will develop and implement community-led, health equity structural interventions targeting social determinants of health

Community-Led, Health Equity Structural Interventions (CHESIs) Initiative: Three-Phased Approach

1

PLANNING (Year 1-2)

- Plan, develop, pilot (as appropriate) structural interventions
 - Capacity and partnership building
- Develop local Health Equity Research Assembly (HERA)

2

IMPLEMENTATION (Year 3-8)

- Implement community-led, health equity structural interventions, with local HERAs
- Interventions will influence health outcomes across multiple health conditions and diseases

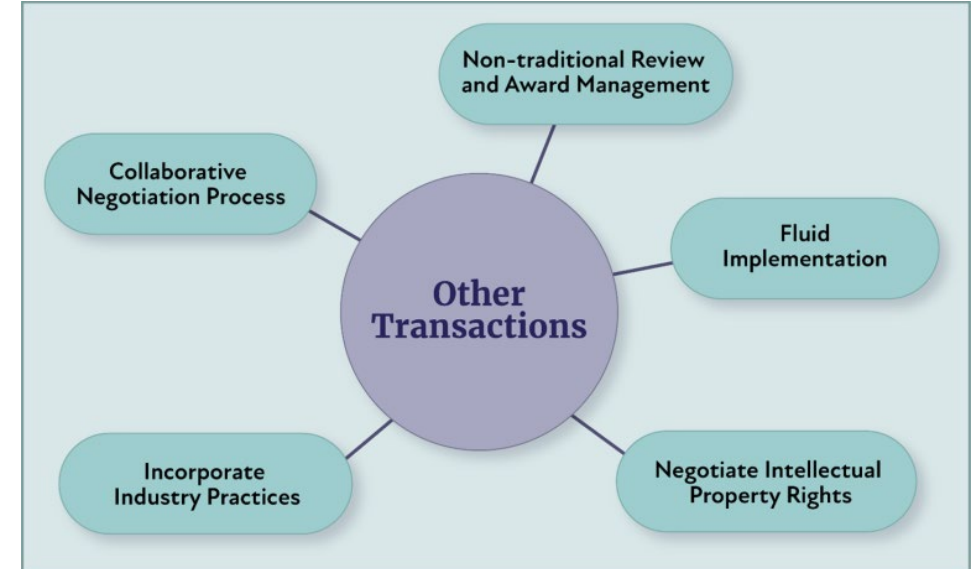
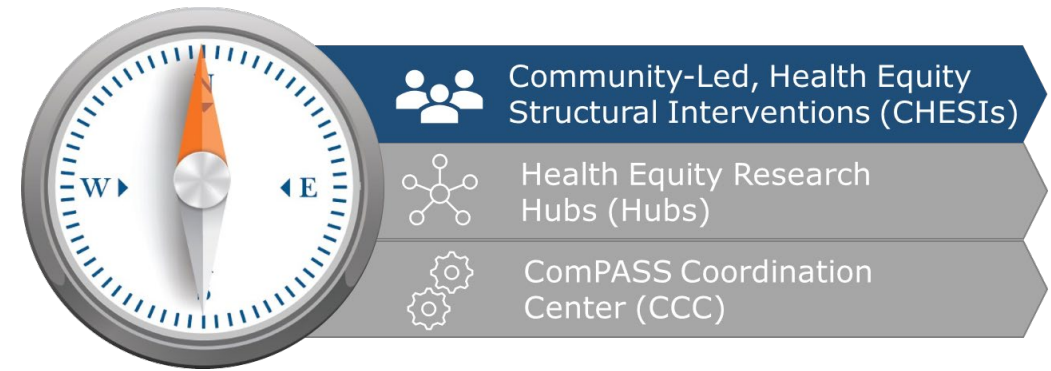
3

DISSEMINATION (Year 9-10)

- Assess health impacts of structural intervention research findings
- Develop dissemination and sustainability plan for structural interventions

Other Transactions Authority (OT)

- **Not a grant, cooperative agreement, or contract**
- OTs allow the **nimble addition or subtraction** of expertise, tools, methodologies, technologies, and partnerships to meet program needs
- OTs facilitate **engagement of nontraditional partners** as well as flexible award management, cost-sharing and IP/data ownership
- **NIH may propose or require changes** outside the scope of the ROA and/or application to meet program needs
- Reporting requirements may be **tailored for each award**
- Award **funding is different** (e.g., variable segment lengths, no future commitment, can be terminated or extended by NIH unilaterally...)
- Further guidance regarding funding mechanism flexibilities in the NIH [OT Policy Guide](#)



CHESI Initiative Strategic Community Outreach and Enthusiastic Response



Community-Led, Health Equity Structural Interventions (CHESIs)



Health Equity Research Hubs (Hubs)

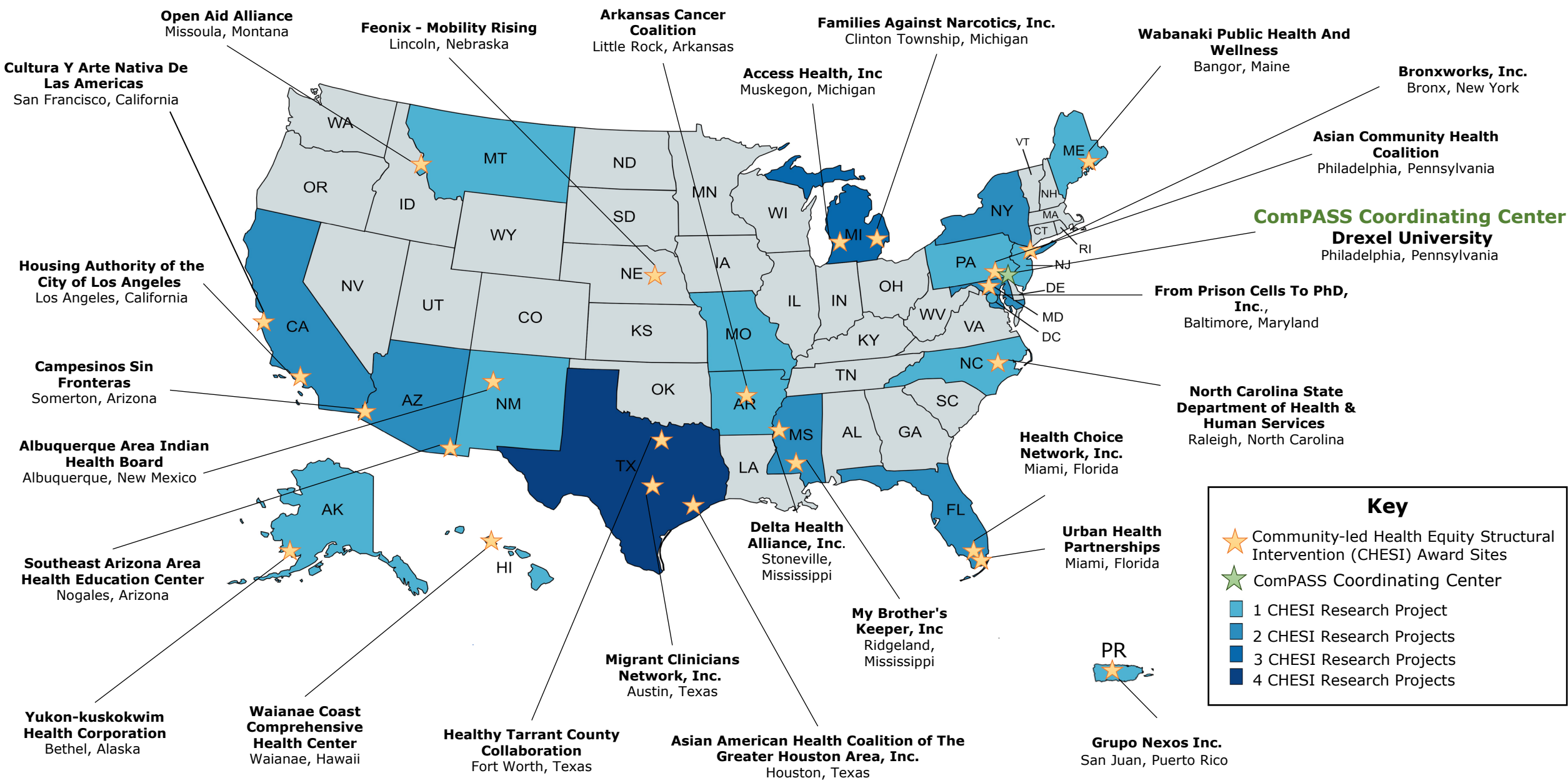


ComPASS Coordination Center (CCC)

Held **8** Technical Assistance Webinars and Office Hours with over **2,400** total participants

The first Full Application Technical Assistance Webinar had **780** attendees

3 Technical Assistance videos on YouTube had a total of over **3,300** views



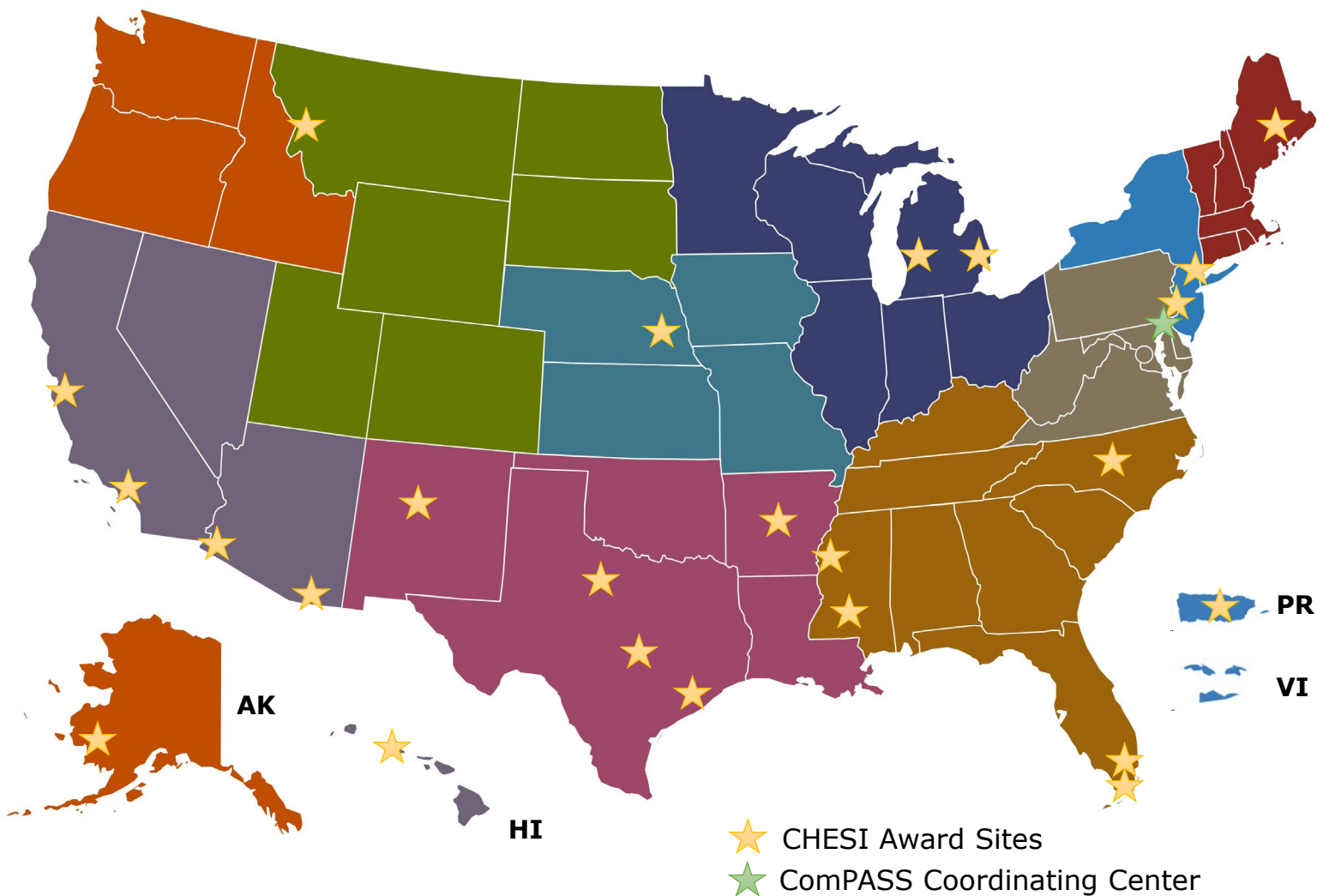
Community Partnerships to Advance Science for Society (ComPASS) Award Sites by State and U.S. Territory

Community-Led Health Equity Structural Intervention (CHESI) Awards

PI	Organization	Project Title	Intervention State(s)
Cammack, Ralph	Wabanaki Public Health And Wellness	Improving Health Outcomes Through Systems and Policy changes in Maine	ME
Caracostis, Andrea	Asian American Health Coalition Of The Greater Houston Area, Inc.	Addressing Systemic Barriers Impacting Health in CHC Communities	TX
Chung-Bridges, Katherine	Health Choice Network, Inc.	Addressing Food Insecurity in Underserved Communities	FL
Cornell, Samantha C	Access Health Inc	Strengthening Community-Driven Safety-Net Interventions to Improve Health and Economic Equity	MI
Eikenberry, Jacob (contact)	From Prison Cells To Phd, Inc. Southeast Arizona Area Health Education Center	Redefining & Investing in Community: Improving Telehealth Care and Educational Programs among People Incarcerated in Rural State Prisons	MD, MO
Joseph, Machli		Proyecto Juntos	AZ
Emrick, Gail	Nc State Dept/Hlth & Human Services	Agricultural Workers Digital Equity Initiative Community-Led Structural Intervention to Address Health Consequences of Community-Police Interactions	NC
Freeman, Elizabeth	Healthy Tarrant County Collaboration		TX
Fulmer, Linda Garcia, Deliana (contact)	Migrant Clinicians Network, Inc.		
Lopez-Correa, Anibal Yariel Madaras, Lazslo		Humanitarian Health Care Network: bringing the most vulnerable to care	TX
Gipson, June	My Brother's Keeper, Inc.	Achieving Optimal Sexual and Reproductive Health (SRWH Project)	MS
Hernandez, Roberto	Cultura Y Arte Nativa De Las Americas	Somos Esenciales: Community Revitalization and Health through Latino Arts and Entrepreneurship	CA
		Leveraging a community-driven approach to address the impact of social determinants of health on structural inequities among Miami-Dade County's intergenerational LGBTQ+ Community	FL
Iglesias, Andrea	Urban Health Partnerships		
Kubicek, Katrina	Housing Authority Of The City Of Los Angeles	Watts Rising: A Vision for a Healthier Watts	CA

PI	Organization	Project Title	Intervention State(s)
Lefferts, Brian (Contact)	Yukon-kuskokwim Health Corporation		
Keck, James		Neqkiuryaraq - The Art of Preparing Food	AK
Lefler, Valerie	Feonix - Mobility Rising	Reducing Health Disparities through Enhanced Mobility Support and Access	TX, MI
Matthews, Karen	Delta Health Alliance, Inc.	Partnership to Optimize Equity in Maternal and Infant Health	MS
Mitchell, Trena (contact)	Arkansas Cancer Coalition		
Karanja, Miriam		Cancer in Your Community: Strategies to Reduce Cancer and Chronic Disease in the Arkansas Delta	AR
	Waianae Coast Comprehensive Health Ctr		
Okihiro, May		Fostering Community Connections Through Native Hawaiian Cultural Values to Strengthen Youth Resilience, Health, and Well-Being	HI
	Open Aid Alliance		
Ramos, Rebecca		Counteracting Structural Barriers to Increase Access to Medications for Opioid Use Disorder (MOUD) Among Unhoused Montanans	MT
Sanchez Ceareo, Marizaida (contact)	Grupo Nexos Inc.		
Adames, Cristina Rivera, Eric		Puerto Rico Collaborative Advancement of Research, Innovations, Best Practices and Equity for Children, Youth and Families (PR-CARIBE)	PR
Torres, Eileen (contact)	Bronxworks, Inc.		
Kimiagar, Bijan		Healthy and Livable Bronx Partnership	NY
Torres, Emma	Campesinos Sin Fronteras	Achieving Equity in Farmworker Health Through Community-Led Research	AZ
	Families Against Narcotics, Inc.		
Waller, Raymond		Creating Statewide Community Partnerships: Spanning Boundaries between Public Health, Emergency Housing & Criminal Justice	MI
Wu, Dunli	Asian Community Health Coalition		
Lindsay Lynch		Asian Community-Led Health Equity Structural Intervention (Asian CHESI)	NY, NJ, PA, MD, DC
	Albuquerque Area Indian Health Board		
Yazzie, Sheldwin		Indigenous healthy homes and healthy communities: A community-led initiative to improve health and support Indigenous Resilience in the US Southwest	NM

Community-Led, Health Equity Structural Intervention (CHESI) Intervention Locations by HHS Region in the U.S.

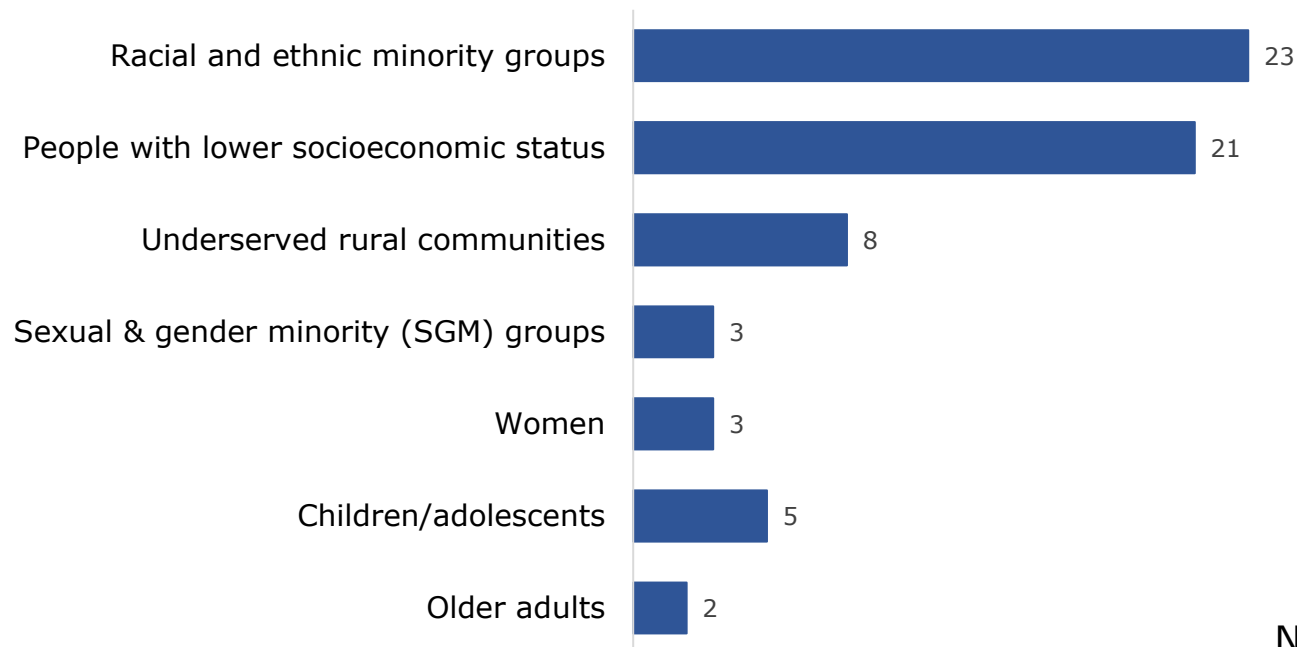


HHS Region	# of Projects	States/Territories Represented in Interventions
1	1	ME
2	4	NJ, NY (2), PR
3	3	PA, MD (2), (and DC)
4	5	NC, MS (2), FL (2)
5	3	MI (3)
6	6	AR, TX (4), NM
7	1	MO
8	1	MT
9	5	CA (2), HI, AZ (2)
10	1	AK

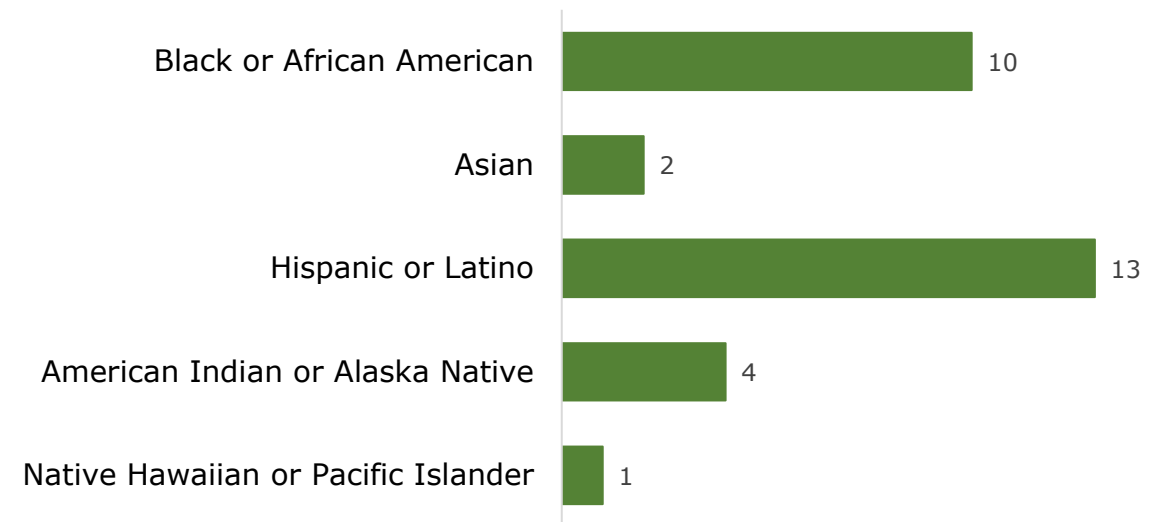
*Note that some interventions are taking place in multiple states

25 Community-Led, Health Equity Structural Interventions: Populations

Populations That Experience Health Disparities and Other Populations



Racial and Ethnic Minority Populations



Note: Awards that focus on more than one population experiencing health disparities are included more than once

Community-Led, Health Equity Structural Intervention Social Determinants of Health/Structural Factors

Broad-based thematic areas:

- Community Health Care Access and Quality
- Economic Development
- Neighborhood and Built Environment
- Social and Cultural Context
- Nutrition and Food Environment



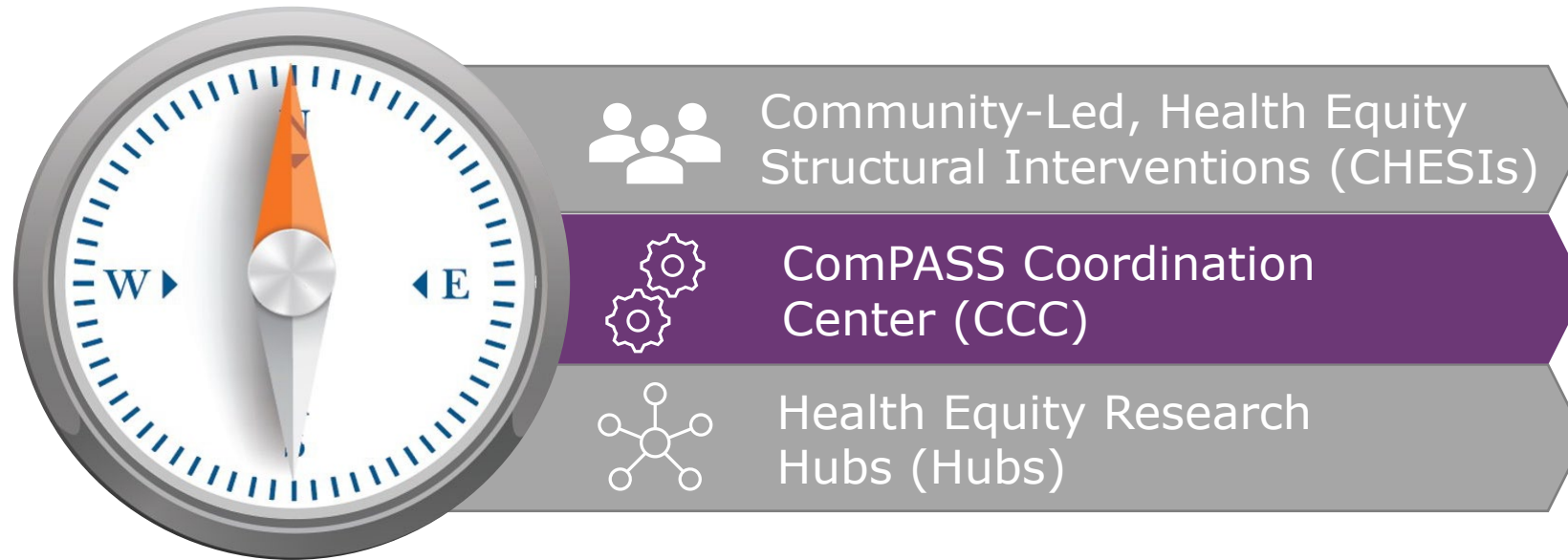
SDOH/Structural Factors of the 25 Community-Led, Health Equity Structural Intervention Awards



Community-Led, Health Equity Structural Intervention Awards: Examples

- Supporting access to healthy food in underserved rural communities through facilitating local food harvesting, processing, and distribution in the community and through the delivery of food boxes to local stores and individuals
- Addressing economic instability by developing a county-wide safety-net program for low-income workers who are asset limited, income constrained, employed but still struggle to afford necessities
- Improving access to quality healthcare for sexual and gender minority older adults by creating culturally appropriate and inclusive protocols in the local health system
- Promoting economic development, social cohesion, and access to healthy foods by investing in city infrastructure like housing and urban gardening
- Enhancing telehealth models in rural communities to improve preventative screening and disease management for cancer, depression, diabetes, high blood pressure, and other chronic diseases among agricultural workers

ComPASS Coordination Center (CCC)



Goal: CCC will serve as the leading entity for overall program management and coordination. The HERA will assemble of interdisciplinary subject matter experts.

- Initiate ComPASS research activities
- Collect common data elements
- Create infrastructure for data sharing and management
- Support long-term management of across research projects and hubs

ComPASS Coordinating Center (C3) (NINR)

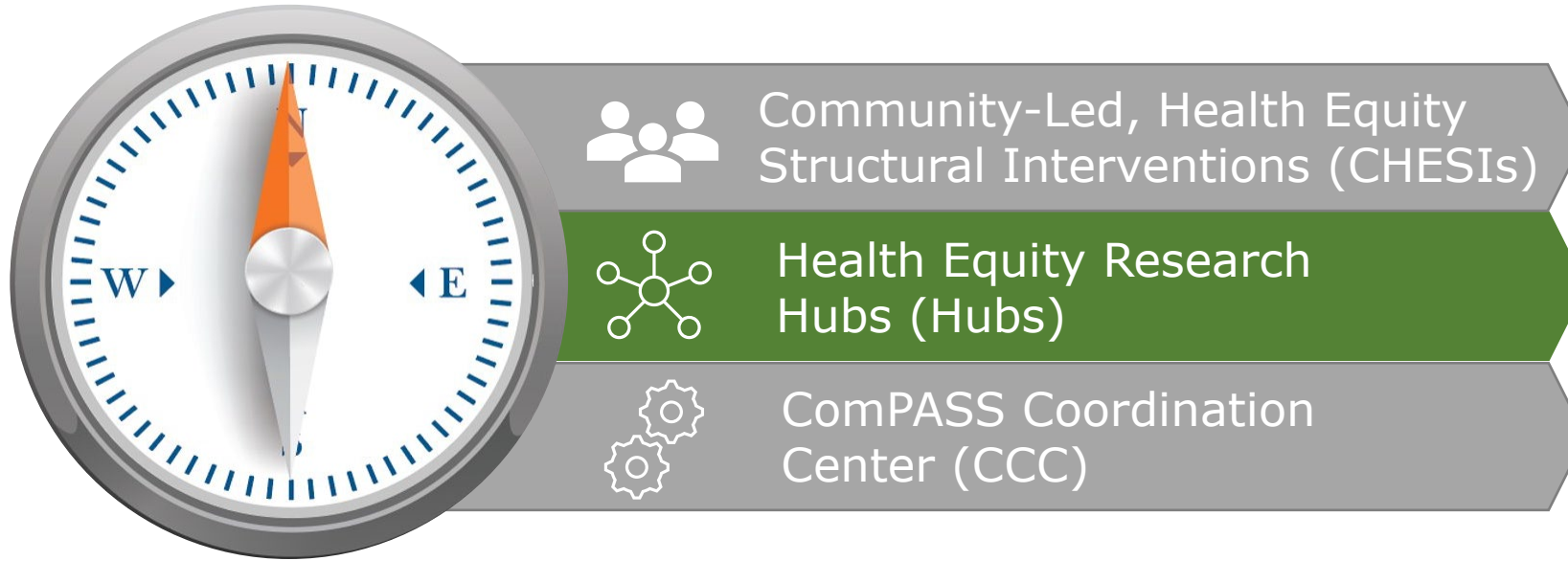
- **Principal Investigators:** Amy Carroll-Scott, Ph.D. and Jan Marie Eberth, Ph.D.
- **Organization:** Drexel University
- **Partners:** University of New Mexico College of Population Health and Mathematica
- **Description:** The ComPASS Coordinating Center will provide oversight for the planning, implementation, and evaluation of the ComPASS Program. They will direct multiple components of the ComPASS Program and provide the administrative assistance, data, and training needed to help ComPASS community-led research projects achieve their unique goals.



COLLEGE OF
POPULATION HEALTH



Health Equity Research Hubs (NCI)



Goal: Establish five research Hubs to:

- Provide scientific support
- Interface with the CC/National HERA to support local hands-on research training and capacity
- Provide ongoing research technical assistance
- Support quality assurance and risk management

Timeline

FY22-23

Published funding opportunities for CHESIs and CCC

FY23-24

Intervention planning and preliminary development

FY24-25

Refine intervention, start pilot, and identify common data elements

FY25-26

Complete and assess intervention pilot studies

FY26-29

Implement intervention

FY29-30

Finalize data activities and implement outreach and dissemination plan

FY30-31

Finalize dissemination activities and complete the ComPASS assessment

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Community-Led, Health Equity Structural Intervention (CHESI) Award Descriptions



National Institutes of Health

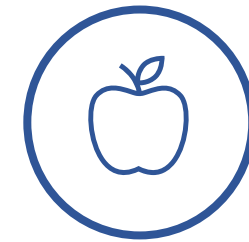
Office of Strategic Coordination – The Common Fund

Improving Health Outcomes Through Systems and Policy changes in Maine

- **Project Leader:** Ralph Cammack
- **Organization:** Wabanaki Public Health and Wellness
- **Structural Factors:** Food Security and Housing Quality
- **Research Partner:** Patrik Johansson, Washington State University
- **Intervention Location:** Bangor, Maine
- **Description:** The project will study approaches to improve the accessibility of fresh, traditional, and culturally appropriate foods for Wabanaki families. It also aims to fill in the gaps in data, sustainability, economic stability, and housing for Tribal leaders and communities in areas of food insecurity.



Wabanaki Public
Health & Wellness



Nutrition and Food
Environment



Social and Cultural
Context