



The CENTRAL Project

Centered on cancer survivors • Centered on caregivers • Centered on improving rural health

Title: A community-engaged and patient-centered approach to understanding the implementation of post-treatment survivorship care planning for rural lung cancer survivor: The CENTRAL Project

Re: Description of the CENTRAL Project

Principal Investigator: Dr. Marquita W. Lewis-Thames

Study duration: 07/01/2020-06/30/2022

Funder: Respiratory Health Association

There is a need to improve survivorship care coordination and identify strategies to improve *community-to-clinic* care for rural lung cancer survivors. However, few investigations have focused on survivorship care for rural residents. To develop interventions and identify strategies that facilitate rural survivorship care, important information about the implementation of survivorship care and unmet needs must be address. Therefore, the goal of this pilot study is to fill these knowledge gaps through community-engaged and patient-centered approaches through two specific aims:

Aim 1. Describe and assess similarities and differences in the implementation of post-treatment survivorship care planning in a strategically-selected set of rural communities in Illinois. We will conduct semi-structured interviews with rural lung cancer survivors and caregivers to describe care planning implementation for rural lung cancer survivors.

Aim 2. Identify post-treatment supportive care needs and trusted community supports. We will use focus groups with rural lung cancer survivors and caregivers to explore common supportive care needs.

The proposed project addresses a critical knowledge gap in survivorship care planning for rural lung cancer survivors, a medically underserved and disparate population. We plan to recruit 8 survivors and 8 caregivers for Aim 1 interviews. We plan to recruit 4 groups of survivors and 4 groups of caregivers (6-8 people/group) for Aim 2. We will observe the utmost safety and precaution for all participants and encourage over-the-phone interviews and zoom conference calls. For those that request to meet in-person, we allow a mix of virtual and in-person focus groups, with face masks and 6 feet distance between participants requesting an in-person focus group.

This pilot project is the initial step towards a larger trial to investigate strategies to adapt, contextualize, and test the effects of evidence-based strategies, such as peer coaching with tailored text messaging, on improving adherence to recommended, timely follow-up care for rural lung cancer survivors.

Collectively, Aims 1 and 2 will provide important information for a peer coaching curriculum by providing patient and family perspectives on survivorship care planning with healthcare providers, elucidate their supportive care needs, and help identify community resources and assets to improve survivorship care in rural settings. This pilot study will also build on Dr. Lewis-Thames' established rural partnerships and advance the capacity of partners in the Chicagoland area to collaboratively pursue community-engaged research to address rural cancer disparities.