

ATRN Newsletter



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ATRN and Penn State Hosts the Annual Summit



The ATRN convened its 11th annual Summit on October 19 and 20, 2021. The Summit planning committee selected the theme, Social Isolation and Connectedness, because of its huge impact upon health of Appalachians! Obviously, COVID-19 mitigation brought the risk from isolation and loneliness to the public forefront. But this was not just an issue brought on by COVID-19. In February 2020, the National Academy of Sciences (NAS) published a Consensus Study Report – Social Isolation and Loneliness in Older Adults. The NAS report documented that social isolation and loneliness significantly increases risk of premature mortality, comparable to, or even greater than, smoking or obesity! We were fortunate to have Dr. Julianne Holt-Lunstadt, a member of that NAS committee, as a keynote speaker. Dr. Ty Borders, Professor at the University of Kentucky, delivered the plenary that discussed contemporary issues in rural health research, practice and policy. Ms. Lauren Wood, Health Program Analyst with the Appalachia Regional Commission (ARC), reminded us that the ARC is a partnership agency of the federal government and 13 state governments focusing upon the 420 counties in Appalachia. Dr. Brian Hendricks and Mr. Wes Kimble from West Virginia University presented an application of bioinformatics to COVID-19 pandemic. Finally, we were especially grateful to the ATRN investigators who presented the results from a multi-institutional survey on COVID-19 in Appalachia in a plenary session!

The virtual meeting, managed by Kassalen Meetings and Events and hosted on Airmeeet, was comprehensive and well-attended! Ninety-one individuals from federal, state, and local agencies, community-based organizations, and academic institutions attended the 2021 Summit. We had specific breakout sessions on quantitative research, mechanistic actions, and community-engaged research – each related to social isolation and connectedness. The Summit also gave students and trainees an opportunity to disseminate research results and hone their presentation skills. Not to be missed were 13 posters and an update on the recent growth of ATRN as an organization! Of particular note, we heard about cutting-edge research on community-based research to address diseases of despair in Appalachia.

Stay tuned for the 2022 ATRN Summit, which will be hosted by the University of Kentucky! The ATRN Summit is one of the educational adventures that we look forward to each fall!

Gene Lengerich
Jennifer Iams

Wake Forest School of Medicine Announces New Paper on Community-Engaged Research

Isaiah Randall March 3rd, 2022

Wake Forest School of Medicine Program in Community-Engaged Research is proud to announce our paper “Community-engaged research in translational science: Innovations to improve health in Appalachia” was published.

Citation: Rhodes SD, Ballard PJ, Moore KR, Klein K, Randall I, Lischke M, Vissman AT, Lengerich EJ, Daniel SS, Skelton JA. Community-engaged research in translational science: Innovations to improve health in Appalachia. *J Clin Transl Sci.* 2021 Oct 7;5(1):e200. doi: 10.1017/cts.2021.862. PMID: 35047212; PMCID: PMC8727706.

Abstract:

Health disparities between Appalachia and the rest of the country are widening. To address this, the Appalachian Translational Research Network (ATRN) organizes an annual ATRN Health Summit. The most recent Summit was held online September 22-23, 2020, and hosted by Wake Forest Clinical and Translational Science Institute in partnership with the Northwest Area Health Education Center. The Summit, titled “Community-Engaged Research in Translational Science: Innovations to Improve Health in Appalachia,” brought together a diverse group of 141 stakeholders from communities, academic institutions, and the National Center for Advancing Translational Science (NCATS) to highlight current research, identify innovative approaches to translational science and community-engaged research, develop cross-regional research partnerships, and establish and disseminate priorities for future Appalachian-focused research. The Summit included three plenary presentations and 39 presentations within 12 concurrent breakout sessions. Here, we describe the Summit planning process and implementation, highlight some of the research presented, and outline nine emergent themes to guide future Appalachian-focused research.



THE ATRN and UKY Welcome the Northeast Kentucky AHEC

Interview with
David Gross, MPH
Director of the Northeast Kentucky Area Health Education Center (NE KY AHEC)

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Pictured: The Center for Health Education and Research (CHER) Building in Morehead, KY

Questions

1) Can you tell us about the Northeast Kentucky Area Health Education Center (NE KY AHEC) and the services you provide to Appalachian communities in Eastern Kentucky?

The NE KY AHEC (www.neahec.org) is one of 260 regional centers across the nation with a mission of enhancing access to quality health care in their designated service area. In our case, that's a 17-county region of northeastern Kentucky. We strive to achieve this mission through four primary strategies: 1) delivering health careers promotion programming to high school and college undergraduate students; 2) coordinating hundreds of clinical rotations each year within our region, from allied health students to medical and pharmacy residents; 3) facilitating dozens of continuing education activities each year; and 4) leading community health initiatives.

With regard to community health initiatives, since 2017 we have secured numerous federal grants focused on the opioid crisis in our region. Through these grants, the NE KY AHEC spearheaded development of the Northeast Kentucky Substance Use Response Coalition (www.nestycoalition.org), which received the National Rural Health Association's Outstanding Rural Health Program award for 2021. The Coalition's services include: 1) A Medication-Assisted Treatment (MAT) Training Resource Center, which includes educational activities and an MAT Mentorship Program; 2) A jail reentry program called First Day Forward that connects peer recovery support specialists to inmates arrested on drug-related crimes, and then links those individuals to treatment, recovery, employment, and other services upon their release; and 3) youth prevention programming.

2) What brings the NE KY AHEC to the ATRN network? What are you hoping to gain/share with this network of researchers, partners, and community members?

The NE KY AHEC is hosted by St. Claire HealthCare (a health care system based in Morehead, Ky.), which has a longstanding partnership with University of Kentucky researchers and the UK Center for Clinical and Translational Sciences. This arrangement, along with the NE KY AHEC's close connection with providers and health care organizations across our region, has helped us become an attractive partner for UK researchers whose projects target Appalachian Kentucky. Over the years, the NE KY AHEC has collaborated on studies/projects that include: lung cancer screening awareness; assessing the effectiveness of clinic-based dissemination of radon test kits; multilevel interventions aimed at increasing rates of colorectal cancer screening, follow-up, and referral to care; and the use of technology to assist in-home dementia caregivers. While our research expertise is limited, we hope to demonstrate that regional AHECs can serve as effective linkages between academic researchers and community-level health care partners.

3) Do you have any questions about the ATRN at this time?

Are any other regional AHECs members of the ATRN? If not, is this something the ATRN would be interested in? If so, the NE KY AHEC would welcome an opportunity to share this possibility with the other regional centers in Kentucky, as well as to regional centers in the other states served by ATRN through the National AHEC Organization. (Note: the NE KY AHEC's director serves on NAO's Board of Directors). Such collaborations could be beneficial to the ATRN's members, the regional AHECs in Appalachia, and the states/regions we jointly serve.

NEW

ATRN Strategic Plan

The ATRN Executive Leadership Committee is announcing the launch of our new strategic plan for the organization. This plan sets the course for the future of the organization and lays out five overarching goals that we'll work to accomplish in the next 2 years.

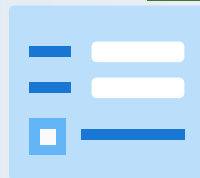


Guided by this plan, our efforts will focus on these five overarching goals:

1. Increase Membership and Membership Engagement
2. Strengthen Organizational Infrastructure
3. Engage in Strategic Community Partnerships
4. Accelerate Translational Research in the Appalachian Regions
5. Support the Professional Development of Stakeholders and of Members

To move the ATRN Strategic Plan forward, we invite you to join one of the ATRN Committees that include Membership, Policy and Procedures, Communications, Summit Planning, and Research and Education. We will need talented, committed people from diverse backgrounds, like yourself, that can be dedicated to helping the ATRN grow and reach our goals. Each Committee will have the opportunity to establish goals within the committee to support the five overarching goals.

[Click here to read more about the ATRN Committees and sign up to receive more information.](#)



Thank you for your continued dedication and collaboration as the ATRN aims to improve health outcomes across Appalachia by fostering collaborative interinstitutional and community-academic research partnerships.

Thank you,
The ATRN Executive Leadership Committee

WVCTSI one of 15 hub sites to lead national study of long-term effects of COVID-19 in adults



MORGANTOWN, W. Va. – Ian Moore

To better understand the long-term effects of COVID-19— symptoms that may continue or even begin after the initial virus infection—researchers at the West Virginia Clinical and Translational Science Institute at West Virginia University (WVU), are engaging underserved populations that are traditionally underrepresented in clinical studies.

Dr. Sally Hodder, director of the Institute and associate vice president for clinical and translational science at WVU, said this variety of demographics is integral to the success of the initiative because it will help paint a more inclusive picture when it comes to those experiencing PASC, or post-acute sequelae of COVID-19.

In collaboration with Dr. Clifford Rosen from the Maine Medical Center Research Institute, Hodder created the IDeA States Consortium for Clinical Research (ISCORE). She and Rosen are co-principal investigators of this project with WVU serving as the lead institution.



“The ISCORE Network is critically important to understanding PASC as underserved populations, traditionally underrepresented in clinical studies, are a major focus of ISCORE community engagement,” Hodder said. “Many of the ISCORE sites are located in areas of the country that have seen some of the highest COVID infection rates; offering rural and other underrepresented groups the opportunity to participate in this study will ensure that the study’s conclusions are generalizable throughout the United States.”

The ISCORE network is composed of 11 National Institutes of Health funded clinical and Translational Research Centers (nine CTRs and two CTSA programs), spanning the U.S. from Puerto Rico to Hawaii and serving multiple, diverse populations including rural, African American/Black, American Indian, Latinx, and Native Hawaiian/Other Pacific Islander. WVCTSI is one of 15 centers chosen to lead the study of PASC among adults and serves as the lead for 11 sites in the following states/territories: Hawaii, Kansas, Kentucky, Louisiana, Maine, Mississippi, Nebraska, North Dakota, Oklahoma, Puerto Rico and West Virginia.

West Virginia’s involvement is now more important than ever given recent high infection rates.

Hodder said she hopes West Virginia being at the forefront of a national effort to better understand PASC will lead to improved outcomes for COVID patients, returning them to their pre-COVID levels of function. “As effective treatments have been developed for acute COVID-19, we are just beginning to appreciate the breadth of post-COVID symptoms and advance the science so that effective treatments for this disabling complication of COVID may be developed,” said Dr. Clay Marsh, WVU vice president and executive dean for Health Sciences. Marsh also serves as the Coronavirus Czar for the state of West Virginia.

PASC symptoms may include headaches, fatigue, “brain fog,” shortness of breath, anxiety, depression, fever, chronic cough and problems with sleep.

“As an infectious disease provider at WVU, I’ve cared for many patients who are suffering with PASC and the most frustrating aspect for them and their families is the lack of knowledge we have to explain why this has happened to them,” RECOVER WVU co-investigator Dr. Rebecca Reece said. “We cannot only focus on acute infection but must also support research into fully understanding the extent of PASC and its impact on individuals as this condition prevents our patients from returning to their normal lives. RECOVER is a study that will provide much needed knowledge on the whole-body picture and impact of PASC.”

This effort is part of the National Institutes of Health Researching COVID to Enhance Recovery initiative. The RECOVER cohort will study tens of thousands of participants nationwide over four years to understand PASC incidence and spectrum of clinical symptoms, and to define the biologic mechanisms underlying PASC. In addition to adult participants, other sites will enroll pediatric and pregnant participants while still others will study tissue from individuals who have died. The ISCORE network is responsible for enrolling 909 participants into the study; if ISCORE site enrollment and retention targets are met, funding for the project is projected to be \$26 million. As the lead site for the ISCORE Network, WVCTSI will oversee recruitment, quality assessment, and manage budgets across the 11 sites. The ISCORE network is currently seeking participants who have had COVID in the past, tested positive in the past 30 days, people who are experiencing PASC, and individuals who have tested negative for the disease. Anyone interested can [find more information here](#) or by calling 304-581-1751.

WVCTSI Background

WVCTSI is funded by an IDeA Clinical and Translational grant from the National Institute of General Medical Sciences (U54GM104942) to support the mission of building clinical and translational research infrastructure and capacity to impact health disparities in West Virginia.



THE ATRN and the Ohio State University Welcome the Christ Episcopal Church

Interview with Reverend Sallie Schisler Christ Episcopal Church

501 Park Avenue
Ironton, OH 45638
Phone: 704-532-3528



Pictured: Reverend Sallie Schisler (Left) and the Christ Episcopal Church, Ironton, OH (Right)

Christ Episcopal Church, a church located in Ironton, Ohio. The mission of Christ Church is to be the light of Christ at 5th and Park. This church is very involved in local issues such as court advocacy program, working with the addiction community, a local food pantry and personal hygiene ministry for jails in Ohio and Kentucky.

Questions

1) What brought Christ Episcopal Church to join the ATRN Network?

If we want to be the light of Christ in our community, then we have to take the light into places that address health, wellbeing and personal care and get involved. I was attracted to the ATRN network because of its focus and outreach.

2) What has been your involvement with ATRN so far?

We currently have a member that sits on the southeast Ohio Community Advisory Board and the OSU CCTS External Advisory Board. This gives southeast Ohio a community voice with the research community.

3) Do you have any questions about the ATRN at this time?

I hope that the research efforts will effect the health and wellbeing of our rural area in a positive way; especially our children who are often the unintended victims of poverty.



THE ATRN and the Ohio State University Welcome Compass Community Health Care

**Interview with
Summer Kirby**
Chief Executive Officer

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Compass Community Health Care, a Federally Qualified Health Center (FQHC), located in Portsmouth Ohio. Their mission is to provide access to quality healthcare to all members of the community. Services include mobile outreach, primary care, women's health, mental health, pediatric focused occupational therapy and speech therapy as well as an onsite pharmacy along with assistance in insurance enrollment. To learn more about their services please visit their [Website](#).

Questions

What brought Compass Community Healthcare to join the ATRN Network?

I recall our introduction with the community engagement coordinator of southeast Ohio several years ago after receiving an invitation to meet and learn about ATRN. A few members of our team had the opportunity to meet with her and become aware of additional widespread resource connections situated right here in our community. The coordinator exemplifies local community pride connecting individuals to information, education and resources outside of our community, region and state. As we maintain connection and participation with the ATRN Network, the benefits of the Network continue to unfold and present new opportunities.

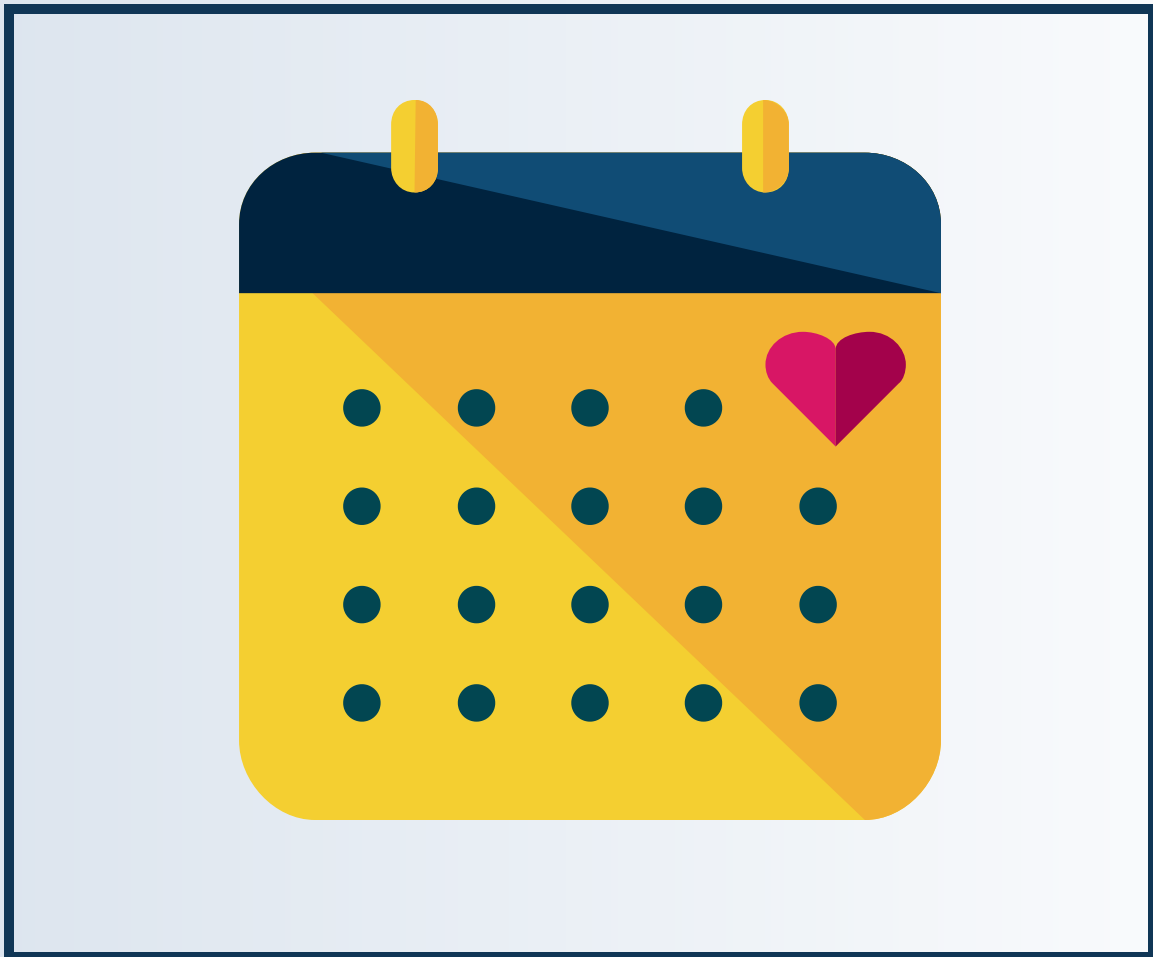
2) What has been your involvement with ATRN so far?

Compass Community Healthcare collaborated with a researcher from Nationwide Children's Hospital in Columbus, Ohio on a project regarding pregnant women with Hepatitis C regarding why some pass it onto their baby, while others do not. We have also had an exciting opportunity to collaborate with The Ohio State University on a research project to increase colon cancer screening among residents in our community. We have also been able to expand our discussion with representation from The Ohio State University and Nationwide Children's Hospital regarding mental health needs within the pediatric patient population.

3) Do you have any questions about the ATRN at this time?

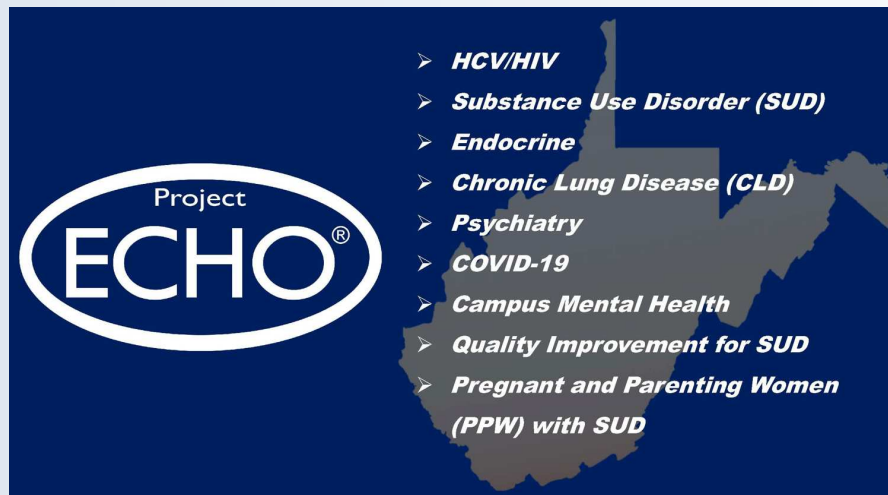
We look forward to ATRN continuing to provide accessibility to valuable resources, additional introductions and collaboration with prospective partnering organizations and more informative updates on current and potential research projects and programming. These opportunities assist in reducing some of the barriers to care experienced within all communities.

SAVE the DATE
for the
12th Annual ATRN Summit
November 14th-15th, 2022
at the University of Kentucky



Details are forthcoming! We look forward to seeing you there!!

Expanded partnerships lead to three new WVCTSI Project ECHO subject areas



The growth of new partnerships is leading to expanded offerings from WVCTSI Project ECHO (Extension for Community Healthcare Outcomes) this winter. Three new ECHO projects are underway. Using the ECHO “hub and spoke” model, each ECHO Project will include a brief expert presentation on a related topic, followed by a de-identified case presentation or policy/practice questions for discussion.

The first new ECHO is in collaboration with the WVU Center of Excellence for Addiction Medicine. The WVCTSI Project ECHO Program is launching a six-week cohort style ECHO program around quality improvement (QI) for substance use disorder (SUD). The project will introduce participants to QI, walk them through the process, and get feedback on their current or future QI projects. This project is funded by the State Opioid Response (SOR) grant through the West Virginia Department of Health and Human Resources (DHHR) and the Substance Abuse and Mental Health Services Administration (SAMHSA).

In the second ECHO, the WVCTSI Project ECHO Program is partnering with Joan C. Edwards School of Medicine’s Division of Addiction Sciences, and West Virginia University’s Department of Behavioral Medicine to launch a 12-session ECHO series for primary care organizations in the area of pregnant and parenting women (PPW) with substance use disorder (SUD). Participants from primary care settings across West Virginia are invited to participate and present de-identified cases for the interdisciplinary discussion during the sessions. One hour of Continuing Medical Education (CME) will be available for each session for all who participate. This project is supported by the Danya Institute.

These sessions take place via Zoom on the second Monday of each month from 12-1 p.m. Interested participants from West Virginia primary care settings should follow this [link](#) to register. The third ECHO Project is geared towards student support personnel working in various roles at West Virginia colleges and universities will be launched in February 2022. The West Virginia Higher Education Policy Commission and the West Virginia Community and Technical College System will be partnering with the Project ECHO team at the West Virginia Clinical & Translational Science Institute (WVCTSI) to offer a six-session ECHO series on Campus Mental Health. Each session of the series will include a brief expert presentation on a topic related to college student mental health, followed by a case study for discussion.

These sessions will take place via Zoom every other Tuesday from 12-1 p.m. starting on February 1, 2022. Participants from campus counseling centers, health centers, student support, advising, housing, activities, conduct, or campus safety offices will be invited to present cases for interdisciplinary discussion and should follow this [link](#) to register.

“What makes Project ECHO such a good mentoring and training program is its flexibility to be used for a variety of topics both clinical and non-clinical,” said Jay Mason, director of community programs and the WVCTSI Project ECHO. “We are excited to establish these new partnerships within West Virginia and expand the reach of the ECHO Program with these new projects.” These three new ECHOs are offered in addition to the six other ECHOs already facilitated by WVCTSI, creating a total of nine different subject areas available to participants.

All sessions are recorded and uploaded to the WV Project ECHO [YouTube page](#) for additional viewing. For more information on participating in the ECHO project, please contact one of the WVCTSI Project ECHO [team members](#). The ECHO platform, which originated at the University of New Mexico, is utilized nationwide to address various health needs in individual states.

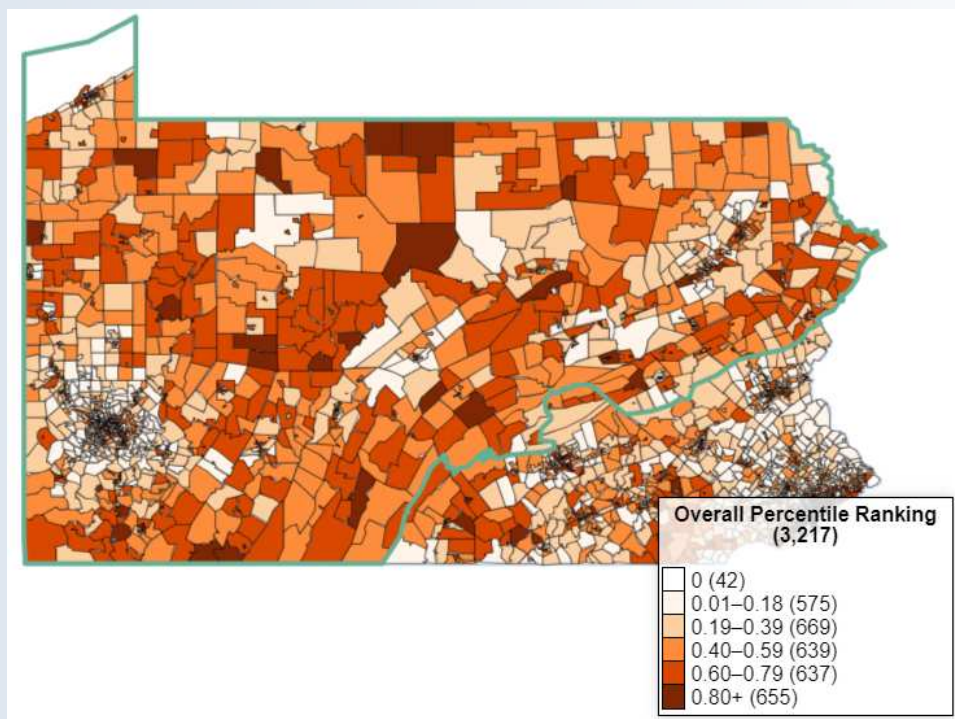
WVCTSI Background

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Appalachia- Rural, Urban?



PennState



Gene Lengerich

We have often heard that your ZIP code matters more to your health than your genetic code. This statement reveals the importance of the geographic location of where you live, work, worship, and relax. Similarly, geographic location and characteristics are important to how we approach translational research. For example, the Appalachian Regional Commission defines Appalachia as 420 counties in the eastern United States. Those 420 counties are then subdivided by different geographical characteristics, for example, northern, central and southern Appalachia. Also, though people often think of Appalachia as only being rural, there are distinct urban areas also. Appalachian Pennsylvania includes Allegheny County, greater Pittsburgh, which has approximately 1650 residents per square mile. Not far from Pittsburgh area is Forest County, with a population density of 17 persons per square mile. Quite a difference!

We at Penn State are building upon this recognition that geography and geographic location are building blocks to translational research in Appalachian Pennsylvania. First, we have developed a web-mapping tool, [LionVu](#), to help researchers, policy-makers, and concerned citizens better understand social determinants of health and health outcomes throughout Pennsylvania. Importantly, LionVu enables us to visualize Pennsylvania, and to contrast health in Appalachian Pennsylvania to non-Appalachian Pennsylvania. (Insert map of 2018 Social Vulnerability Index approximately here) Of particular interest to Penn State Cancer Institute is a 28-county area in central Pennsylvania that is our catchment area where we focus our efforts. Second, we also recognize the differences within Appalachian Pennsylvania. For example, a recent study found differences in the incidence and aggressiveness of prostate cancer between urban and rural of Appalachia, for both black and white men.¹ These foundational studies are now serving for further investigations into possible environmental exposures.

Yes, Appalachia includes both rural and urban areas. Differences in geography are important foundational building blocks to translational research in Appalachia.

1. McDonald AC, Wasserman E, Lengerich EJ, et al. Prostate Cancer Incidence and Aggressiveness in Appalachia versus Non-Appalachia Populations in Pennsylvania by Urban-Rural Regions, 2004–2014. *Cancer Epidemiology, Biomarkers & Prevention*. 2020;29(7):1365-1373.

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