

# ATRN Newsletter



## this issue

### The ATRN Welcomes iTHRIV



The integrated Translational Health Research Institute of Virginia (iTHRIV) is the newest university partner to join the ATRN. The Integrated Translational Health Research Institute of Virginia (iTHRIV) is a transformational cross-Commonwealth collaboration that leverages the latest advances in data science to accelerate innovation in health-related research and facilitate team science. Partners within iTHRIV include Carilion Clinic, Inova Health System, the University of Virginia, and Virginia Tech, as well as affiliates the Center for Open Science and the UVA Licensing & Ventures Group.

If you have any questions about iTHRIV, please contact ATRN Leadership member, Dr. Kathy Hosig (see contact info below).

**Kathy Hosig, PhD, MPH, RD**

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# The ATRN and UKY Welcome Laurel County Health Department

## Interview with

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## Questions

### 1) Can you tell us about the Laurel County Health Department and the services you all provide to Appalachian communities in Eastern Kentucky?

**Answer:** Laurel County Health Department is located in London, Kentucky. LCHD serves a population of about 60,000 in rural southeastern Kentucky. LCHD is dedicated to serving Laurel County in efforts to prevent, promote, and protect the public health of its citizens by providing quality health education, preventive health care and environmental services. LCHD has five overarching departments that includes: Administration, Clinical Services, Community Health, Environmental Health, and HANDS Home Visitation Program. To learn more about our services, please visit our website at [www.laurelcohealthdept.org](http://www.laurelcohealthdept.org) or like our Facebook Page @laurelcohealth.

### 2) What brings the Laurel County Health Department to the ATRN network? What are you hoping to gain/share with this network of researchers, partners, and community members?

**Answer:** Laurel County Health Department has a small staff of around 15 making it difficult to implement large scale research projects.

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

**Answer:** LCHD is interested in learning how small scale research projects can be implemented, as well as, learning from other partners and community members.

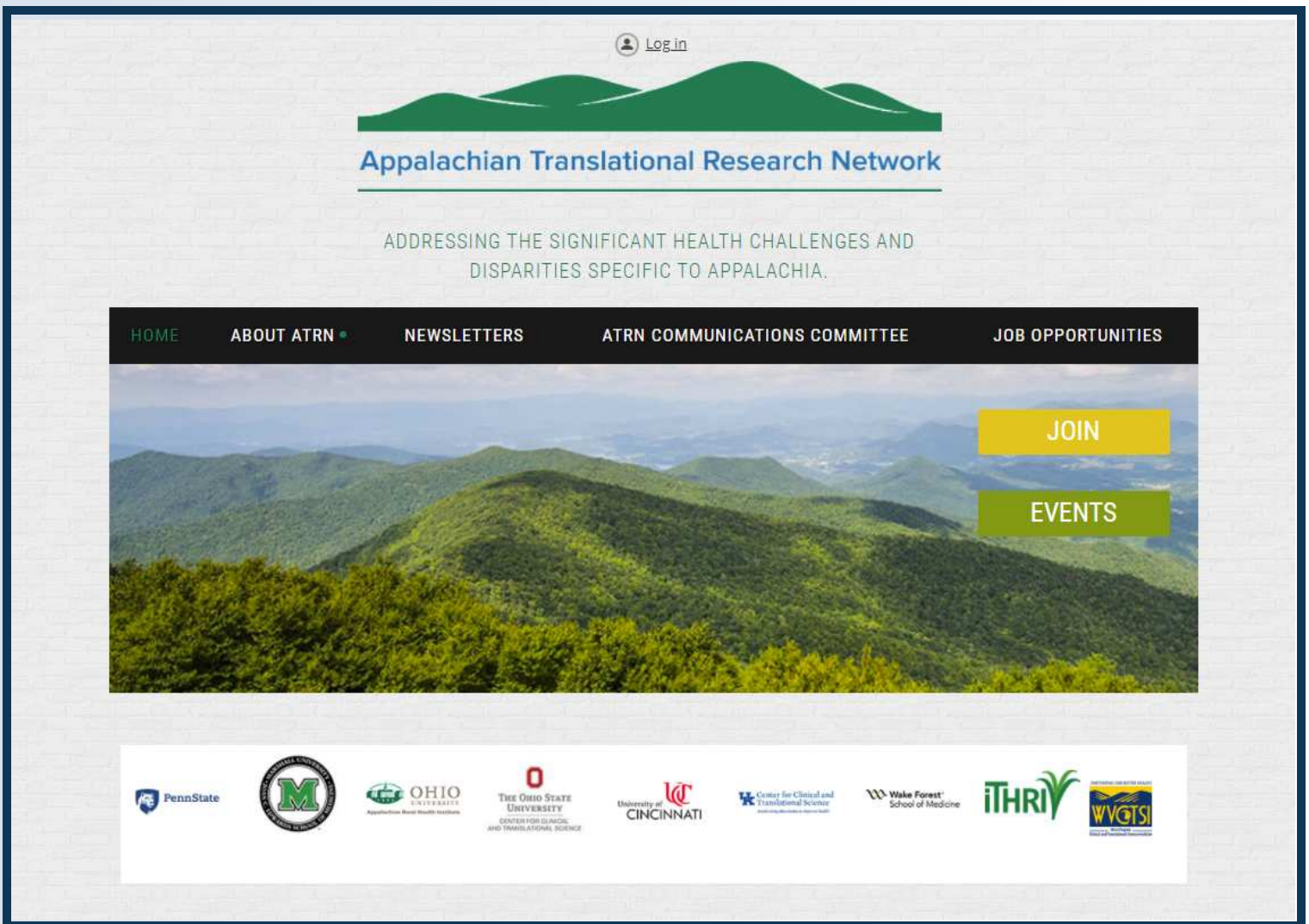


## DID YOU KNOW?

Brandi Gilley, MPH, RDN, LD was a 2018 CCTS Community Mini-Grant (SEED) Recipient who carried out a community needs health assessment in her local Southeastern KY region (collecting over 1,000 responses). As a result, two Priority Areas were identified to serve as the focus for July 2019 – June 2022: Substance Use Disorder (SUD) and Chronic Disease Prevention and Management.

# The ATRN has a NEW Website!

<https://appalachianresearchnetwork.org/>



Visit [appalachianresearchnetwork.org](https://appalachianresearchnetwork.org) to:



-Join the ATRN--**become a partner!**  
Membership Level details can be found [here](#)



-Subscribe to the ATRN Newsletter



-Find ATRN Leadership and  
Communications Committee Information



-Apply for job opportunities in the  
Appalachian region (as posted by  
our partnering academic institutions)



# Highlights from the Wake Forest CTSI Program in Community-Engaged Research

The Wake Forest Program in Community-Engaged Research has been particularly productive during the pandemic. Highlights from the Program include:

The Wake Forest-Community Research Partnership comprised of representatives from community organizations from across North Carolina and cross-disciplinary faculty and staff from across the Wake Forest School of Medicine recently was awarded a grant from the NIH National Institute of Nursing Research (NINR) entitled, **Harnessing the power of peer navigation and mHealth to reduce health disparities in Appalachia (R01NR019512)**. Led by Dr. Scott D. Rhodes (Wake Forest School of Medicine), Dr. Amanda E. Tanner (University of Carolina at Greensboro), and Mr. Antonio Del Toro (Western North Carolina AIDS Project [WNCAP]) as MPIs and by a highly involved steering committee of community members, this project is systematically integrating two evidenced-based strategies (i.e., peer navigation and mHealth) into a comprehensive culturally congruent, bilingual intervention to increase the use of needed HIV, STI, and HCV prevention and care services among racially/ethnically diverse gay, bisexual, and other men who have sex with men; and transgender persons in rural Appalachia. The team will test the integrated intervention through a longitudinal group randomized design, and based on findings, will develop and disseminate practice, research, intervention, and policy priorities and recommendations to reduce health disparities in rural Appalachia by conducting an empowerment theory-based community forum.

In December 2020, the Wake Forest-Community Research Partnership was also awarded the Wake Forest CTSI Established Team Science Award. This award is given to one well-formed, established, active team of researchers working across disciplines on a project that has made highly significant research contributions with notable scientific or clinical impact. The Wake Forest-Community Research Partnership includes representatives from community organizations from across North Carolina and cross-disciplinary faculty and staff from across Wake Forest. Partnership members may be involved with and committed to different projects as community needs and priorities evolve. This partnership has made contributions through both the development of innovative research methods aligned with community-based participatory research (CBPR) and the design, implementation, and testing of 15 evidence-based individual- and community-level interventions designed to reduce health disparities among particularly marginalized populations including rural populations; immigrants; and racial/ethnic, sexual, and gender minorities. The partnership is known nationally and internationally for its work in Latinx health, infectious diseases (including HIV), intervention science, and social determinants of health, including immigration policy. Dr. Scott D. Rhodes, Director of the Program in Community-Engaged Research, has been leading this CBPR-focused partnership since its inception in 2004 as PI or MPI. On some projects, however, he has served as co-investigator with staff serving as PI or MPI.

Finally, Dr. Scott D. Rhodes, Director of the Program in Community-Engaged Research, published an important paper that outlines nine lessons from HIV prevention, care, and treatment that are particularly relevant to reducing the impact of the COVID-19 pandemic. It also identifies ten innovative strategies to reduce exposure to SARS-CoV-2 among teams and community members engaged in community-based research. Implementation of these strategies can help ensure community-based research can safely continue during the pandemic and that communities and populations continue to benefit from research designed to improve health, promote equity, and reduce disparities. The paper is available at: <https://guilfordjournals.com/doi/10.1521/aeap.2020.32.6.455>

# Cincinnati CTSA Offering an Online Education Library



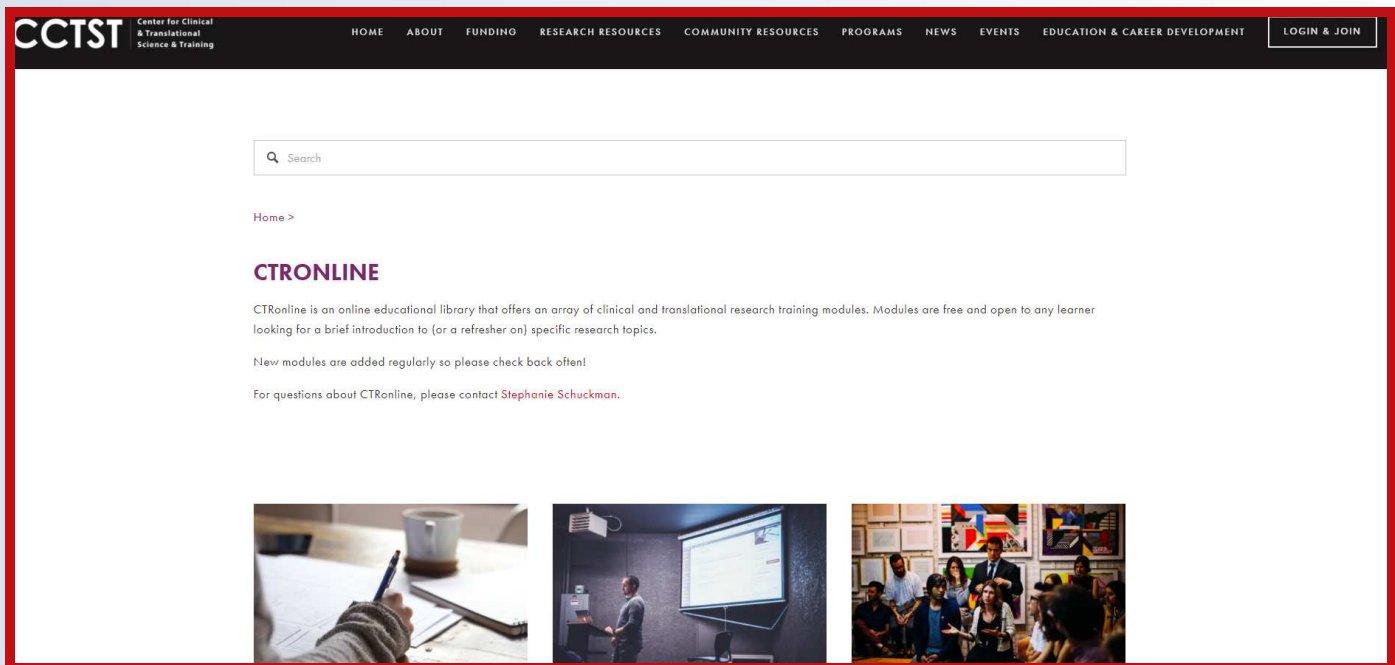
The Cincinnati CTSA, the Center for Clinical and Translational Science and Training (CCTST), is excited to announce the new look of our online educational library, CTRonline! CTRonline offers an array of clinical and translational research training modules and event recordings. All videos are free and open to any learner looking for a brief introduction to (or a refresher on) specific research topics.

## Current topics include:

- Career Development
- CCTST Grand Rounds
- Community Engaged Research
- COVID-19
- Health Equity & Social Justice
- Health Research Science Café
- Quality Improvement
- Study Design & Analysis

Click here to visit CTRonline!

New content is added regularly so please check back often.



APPALACHIAN TRANSLATIONAL RESEARCH NETWORK

# VIRTUAL ANNUAL SUMMIT

SAVE THE DATE

OCTOBER 19-20, 2021 | HOSTED VIRTUALLY BY PENN STATE

## BRIDGING THE GAP: RESEARCH NETWORKS FOR POSITIVE CHANGE IN APPALACHIA







# Updates from Ohio State

**COVID and health disparities in Appalachia:** The Ohio State University has received a \$5 million, two-year award from the National Institutes of Health RADx-UP program to support projects designed to rapidly implement COVID-19 testing strategies in populations disproportionately affected by the pandemic. The RADx Underserved Populations (RADx-UP) program will support research that aims to better understand COVID-19 testing patterns among minority and vulnerable populations; strengthen the data on disparities in infection rates, disease progression, and outcomes; and develop strategies to reduce the disparities in COVID-19 testing, treatment, and contact tracing.

The award is linked to Ohio State's Clinical and Translational Science Awards; Dr. Rebecca Jackson and Dr. Electra Paskett are the principal investigators. Using data from an Ohio State and Ohio Department of Health study, researchers chose 12 at-risk counties in Ohio that contain multiple census tracts with disproportionately high concentrations of minority and vulnerable populations and few or no COVID-19 testing sites. The intervention is a community-based participatory study that employs community health workers and patient navigators to facilitate testing and follow-up. Six of the 12 Ohio Counties are in Appalachia. The counties are Jefferson, Trumbull, Meigs, Muskingum, Ross, and Scioto.

## **OSU is adapting the Community Scientist Academy to an online/virtual format**

The Ohio State CCTS Community Engagement (CE) Program is adapting its Community Scientist Academy (CSA) to a virtual format and will be hosting two programs this Spring, including one for residents in the Appalachian Communities of Southeast Ohio. The CSA is a program designed for community stakeholders who want to learn about the translational research process and how they can get involved to positively influence/impact research conducted in their communities.

Completing the CSA program equips community members to engage with research teams as community experts/advisors, helping to ensure that research aligns with the health-related issues and outcomes of priority to their community. The new virtual format will allow the CE Program to bring the CSA into more underserved communities in rural and urban areas across the State of Ohio. More information will be available about upcoming CSA programs in the coming weeks as the program is fully adapted into a virtual format. If you are interested in learning more about the CSA program, please direct your questions to Ohio State CCTS Community Engagement Program Manager, Jeff Grever ([jeff.grever@osumc.edu](mailto:jeff.grever@osumc.edu)).

# WVCTSI receives 1.5 million NIH Grant for the National COVID Cohort Collaborative



Sally Hodder, MD, knew that West Virginia could be a leader in COVID-19 research, even in the early stages of the pandemic in the U.S. As early as March 2020, teams at the West Virginia Clinical and Translational Science Institute (WVCTSI) led by Dr. Hodder and WVU Medicine were hard at work to ensure that data from patients across the state could be analyzed to develop the most impactful research possible. The teams built a COVID-19 patient data registry that contained diagnoses, procedures, labs, medications, and outcomes for WVU Medicine patients tested for COVID-19. This registry became the foundation for this new funding award – a \$1.5 million grant to lead a multi-state consortium within the National COVID Cohort Collaborative (N3C).

Dr. Hodder is the WVCTSI director and associate vice president for clinical and translational research at West Virginia University. She saw enormous value in the initial West Virginia COVID-19 registry developed by Wes Kimble and his team in collaboration with WVU Medicine and took the project to the national stage by securing the funding to develop and lead the consortium.

“The collaboration with WVU Medicine on this effort has been top-notch. Ilo Romero, Dr. David Rich, and the WVU Medicine team are fabulous partners driving better patient care through data analytics here at WVU,” Hodder said. Romero serves as vice president and assistant chief information officer, and Rich serves as the chief medical information officer, both with WVU Medicine.

Leading the initiative to create a consortium with seven other Centers for Clinical and Translational Research (CTRs), all of which were enthusiastic about a collective data source, Hodder successfully applied for funding to support contribution of clinical data from the CTR consortium to the N3C, a data source being developed by the National Institutes of Health. N3C was established by the National Center for Data to Health in partnership with the National Center for Advancing Translational Sciences (NCATS) to build a centralized national data resource for the study of COVID-19. Dr. Hodder is leading the IDeA-CTR consortium within the N3C. Inclusion of data from West Virginia and other IDeA CTR states including Delaware, Louisiana, Maine, Mississippi, Nebraska, Oklahoma, and Rhode Island is important because they represent a collection of diverse and historically underserved and underrepresented populations. West Virginia, for example, ranks third behind Florida and Maine in having the oldest population and has a high prevalence of obesity, hypertension, and diabetes – conditions associated with an increased likelihood of COVID-19 mortality. Critically important, is a large, granular dataset that can examine associations of improved outcomes with various treatment.

Hodder advises that an essential component of this new funding is support for engagement of CTR investigators to use N3C to answer research questions related to COVID-19. “With access to this data, we will be able to leverage the incredible scientific minds all across our state and the CTR Network, answering research questions that directly relate to the populations for which our institutions are providing care,” said Hodder. “As we learn more and more about this new virus, having the most current and comprehensive data will be an invaluable tool with which to fight this pandemic.”

This grant is one of many recent initiatives from WVCTSI to address the COVID-19 pandemic. A total of 15 COVID-19 research projects have been internally funded to-date, spanning the clinical and translational science spectrum. More information on all of WVCTSI’s COVID-19 initiatives can be found here.

Full Story here: <https://www.wvctsi.org/news/story?headline=wvctsi-receives-1-5-million-nih-grant-to-lead-8-state-participation-in-national-covid-cohort-collabor>



# COVID-Focused Outreach Funding- Awarded to ATRN Chair, Dr. Melissa Thomas



The Greater Midwest Region (GMR) of the Network of the National Library of Medicine awarded funding to Dr. Melissa Thomas, Ohio University for a COVID-19 health information outreach project. The projects are funded through the GMR in an effort to enable organizations to develop and offer programs that will impact health literacy and health information needs related to COVID-19. A short description of the project is below:

## **Ohio University – Led by Dr. Melissa Thomas**

This project, titled “Addressing COVID-19 Concerns in Amish Country”, aims to develop and disseminate a culturally sensitive COVID-19 Fact Sheet for Amish communities and to provide a COVID-19 hotline to Amish community members staffed by a trained community member who can speak the primary language and address questions and misinformation. The proposed outreach program is the first to specifically address the cultural and access needs of COVID-19 health information among Amish communities and can serve as a best practices model that can be replicated across the country.

**For complete announcement, please visit the original website posting here:**

<https://news.nnlm.gov/gmr/2021/01/gmr-funds-two-new-covid-focused-outreach-awards/>

**For more information about Dr. Thomas' community-led research among Amish and Mennonite Communities, you can check out her photo book project, "Life Through Their Lens" at:**

<https://appalcare.org/life-through-their-lens-photo-book/>



# Diseases of Despair Diagnoses Increase in Pennsylvania

Matthew G. Solovey  
November 10, 2020

HERSHEY, Pa. – Medical diagnoses involving alcohol-related disorders, substance-related disorders and suicidal thoughts and behaviors – commonly referred to as diseases of despair – increased in Pennsylvania health insurance claims between the years 2007 and 2018, according to researchers from Penn State Clinical and Translational Science Institute and Highmark Health Enterprise Analytics. Princeton economists Anne Case and Angus Deaton proposed the concept of deaths of despair in 2015. Case and Deaton’s research observed a decline in life expectancy of middle-aged white men and women between 1999 and 2015 – the first such decline since the flu pandemic of 1918. They theorized that this decline is associated with the social and economic downturn in rural communities and small towns. These changes include loss of industry, falling wages, lower marriage rates, increasing barriers to higher education, an increase in one-parent homes and a loss of social infrastructure.

With the commonwealth’s considerable rural and small-town population, particularly around Penn State campuses, Penn State Clinical and Translational Science Institute led a research study to understand the rate of diseases of despair in Pennsylvania. Institute researchers collaborated with Highmark Health, one of the state’s largest health insurance providers. Highmark provides employer-sponsored, individual, Affordable Care Act and Medicare plans. Highmark Health’s Enterprise Analytics team analyzed the claims of more than 12 million people on their plans from 2007 to 2018. Penn State did not have access to Highmark member data or individual private health information. Although the insurance claims included members from neighboring states, including West Virginia, Delaware, and Ohio, the majority of the claims were from Pennsylvania residents. Researchers reported their results in *BMJ Open*.

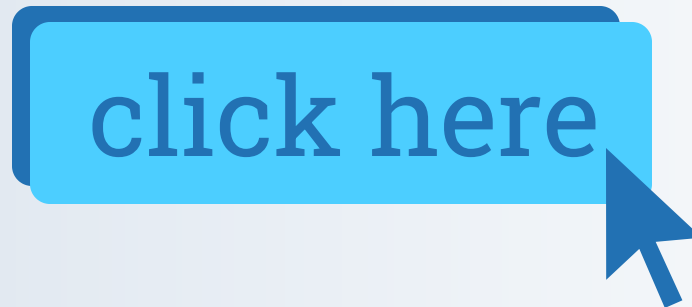
The researchers defined diseases of despair as diagnoses related to alcohol use, substance use and suicidal thoughts or behaviors. They searched the claims data for the International Classification of Diseases (ICD) codes related to these diagnoses. ICD codes form a standardized system maintained by the World Health Organization and are used in health records and for billing. The researchers found that the rate of diagnoses related to diseases of despair increased significantly in the Highmark claims in the past decade. Nearly one in 20 people in the study sample was diagnosed with a disease of despair. Between 2009 and 2018, the rates of alcohol-, substance-, and suicide-related diagnoses increased by 37%, 94% and 170%. Following Case and Deaton’s findings, the researchers saw the most substantial percentage increase in disease of despair diagnoses among men ages 35 to 74, followed by women ages 55 to 74 and 18 to 34.

The rate of alcohol-related diagnoses significantly increased among men and women ages 18 and over. The most dramatic increases were among men and women ages 55 to 74. Rates increased for men in this age group by 50% and 80% for women. The rate of substance-related diagnoses roughly doubled for men and women ages 35 to 54 and increased by 170% in ages 55 to 74. In 2018, the most recent year of claims included in the study, rates of substance-use diagnoses were highest in 18-to-34-year-olds. The rate of diagnoses related to suicidal thoughts and behaviors increased for all age groups. Among 18-to-34-year-olds, rates increased by at least 200%. The rate for all other age groups increased by at least 60%.

Future research can concentrate on identifying "hot spots" of diseases of despair diagnoses in the commonwealth to then study the social and economic conditions in these areas. With this data, researchers can potentially create predictive models to identify communities at risk and develop interventions.

**Full story here:** <https://news.psu.edu/story/638014/2020/11/10/research/diseases-despair-diagnoses-increase-pennsylvania>

# Would you like to subscribe to the ATRN Newsletter?



To submit content, please email the representatives below at each partnering institution :

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## Newsletter content includes:

- Researcher Spotlights
- Funding opportunities
- Seminars/Lectures
- Trainings
- Events
- Collaborations among partnering ATRN institutions
- Other—send your Communications Group representative an email with your ideas!