



Cancer Planning Learning Community

Session 1

Engaging Key Partners



The American Cancer Society has provided training & technical assistance to grantees of the **Centers for Disease Control and Prevention's National Comprehensive Cancer Control Program** for over 25 years.

We acknowledge and thank CDC for its support of ACS staff, and in the development and dissemination of this learning session, under cooperative agreement NU58DP007540 awarded to the American Cancer Society. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of CDC.



February 12, 2025

Learning Objectives

1. **Increase confidence** in engaging key partners in the cancer planning process.

2. **Increase awareness** of resources to aid in recruiting and sustaining key partnerships

3. **Provide examples** of traditional and non-traditional partners

Guest Panelists



Corrine Gillenwater, MPH

Analyst, Chronic Disease and Health Improvement,
Association of State and Territorial Health Officials



Elaine Russell

Program Director at Kentucky Cancer Consortium



Cassie Webb, MPH

Program Director for the Arizona Comprehensive
Cancer Control Program and oversees the Arizona
Cancer Coalition



Traditional and Non-Traditional Partners: Real World Examples



The key distinction between traditional and non-traditional partners? Traditional partners have a long-standing role in public health, while non-traditional partners bring new perspectives, resources, and expertise to address public health challenges.

Traditional Partners

- Healthcare systems
- State and Local Health Departments and Tribal Health Centers
- Hospitals/Clinics/FQHCs
- Mental/Behavioral Health Centers
- Physicians
- Schools/School Districts and Daycares
- Academic Institutions: Universities and Research Institutes
- Tribal Organizations
- Faith-based organizations
- Community-based organizations
- Primary care associations
- Not-for-profit organizations (e.g., the American Cancer Society)/ Non-Governmental Organizations (NGOs)
- Emergency Services (e.g., fire and police departments and emergency medical services)
- Pharmacies/Pharmaceutical Companies
- National Association of Community Health Centers
- Health Center Controlled Networks
- Community advocates



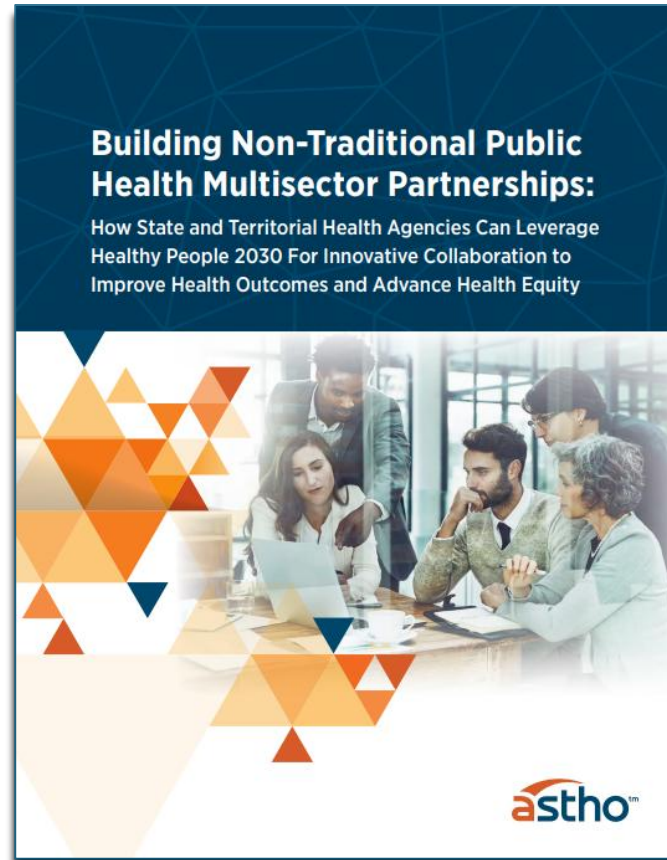
Public Health Coalitions

Non-Traditional Partners

- Dentists (associations, offices)
- Advocacy Groups – NAACP, LGBT Cancer Network, National Urban League, NIWRC, AMIGAS
- State Agencies: Department of Transportation, Department of Housing and Urban Development, Department of Labor, Bureau of Prisons
- Fitness Centers/YMCAs
- Grocery Stores
- Car Dealerships
- Local Businesses
- For-profit organizations (e.g., restaurants, retail stores (Wal-Mart/Amazon), airlines, banks)
- Sororities/Fraternities
- Technology companies
- Philanthropic Foundations
- Military
- National Guard
- Uber Health
- Lyft
- Agricultural workers (environ. exposure)
- Casino works (2nd-hand smoke)
- Firefighters
- Sports teams: major leagues, minor leagues, college level

Traditional and Non-Traditional Partners: Examples

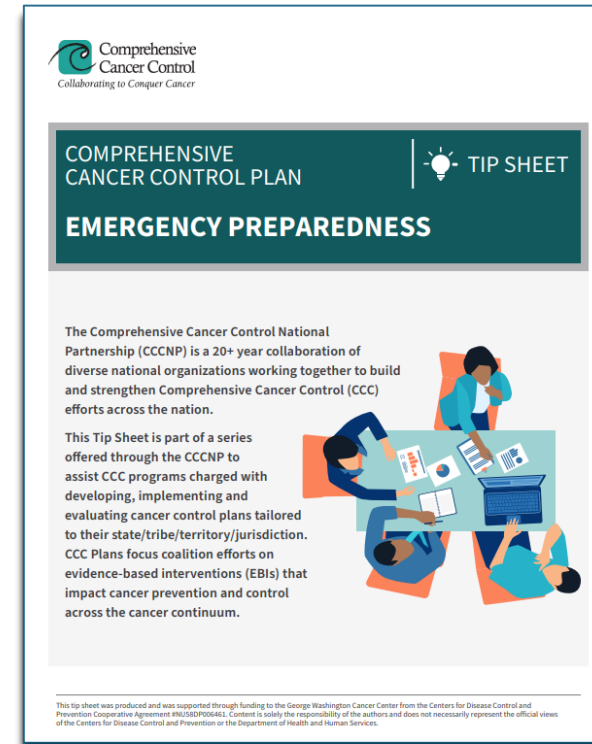
Resources



Building Non-Traditional Public Multisector Partners:
How States & Territorial Health Agencies Can Leverage
Healthy People 2030 For Innovative Collaboration to
Improve Health Outcomes & Advance Health Equity

<https://www.astho.org/topic/toolkit/building-non-traditional-public-health-multisector-partnerships/>

Resources



Cancer Plan Tip Sheets are designed to help CCC program staff, coalition staff, and volunteers to update their cancer plans.

Example from CRC Cancer Plan Tip Sheet



STEP 1 Engage Key Partners

Engage experts and organizations that focus on cancer risk factor reduction and those who focus on issues and concerns of cancer survivors. Include representatives from your populations of focus. Work with partners to leverage existing resources and adapt them for cancer survivor needs. Key Partners can be engaged in a variety of processes, such as looking at data; identifying objectives and strategies; setting priorities for the upcoming five years; and/or reviewing drafts. Some partners to engage include:

- Academic researchers studying cancer survivorship and reducing cancer health disparities in survivors
- **American Cancer Society**
- Behavioral health programs and partners, including tobacco and alcohol use programs supported by the **Substance Abuse and Mental Health Services Administration (SAMHSA)**
- Cancer centers, specifically outreach and education staff and survivorship clinics/programs
- **Cancer Support Community**
- Cancer survivor support programs
- Cancer survivors, especially those in your populations of focus
- Trusted community leaders with experience addressing health inequities in your community (e.g., people of color, people with disabilities, LGBTQ populations)
- Dietitians
- **LIVESTRONG**
- Local fitness centers and instructors
- Nutrition, physical activity, and obesity **programs** and coalitions
- Patient navigators
- Primary care providers
- **Tobacco control programs** and coalitions, including **state quitlines**
- Worksite wellness programs and employers
- **YMCA**

Tips for Sustaining the Engagement of Cancer Coalition Partners:

<https://acs4ccc.org/wp-content/uploads/2024/07/ACS-CCC-2024-Sustaining-Engagement-of-Coalition-Partners-v03.pdf>



Facilitative Leadership Toolkit:

<https://acs4ccc.org/wp-content/uploads/2023/04/ACS-Facilitative-Leadership-Toolkit-v19HR.pdf>



Call To Action

Reach out to a new or existing **coalition partner** and engage them in the cancer planning process.

ACS Colorectal Cancer Mortality Learning Community

Why? to increased your capacity to integrate interventions mitigating colorectal cancer mortality disparities into the cancer planning process.

Who should attend? NCCCP grantee program & coalition staff members & their coalition partners. The CRC Mortality Learning Community would be ideal for coalitions prioritizing CRC initiatives.

When? All meetings will be 3-4 pm EST

- May 1, 2025
- June 5, 2025
- July 10, 2025
- August 7, 2025
- September 4, 2025

Register Today!

https://zoom.us/meeting/register/jVtSzV6HTtGjlp_9d3Grvg#/registration



ACS Webinar for Cancer Coalitions:

What You Need to Know About Prostate Cancer Screening

- **April 17, 2025 (3:00 PM- 4:00 PM EST)**

We will discuss the history and biology of PSA testing & its clinical use; as well as explore the process of shared decision making, how it can best be implemented by doctors, and what patients need to consider in order to make an informed decision about being screened for prostate cancer.

Speakers:

- **Phillip E. Rodgers, M.D., FAAHP** - George A. Dean, M.D.
Professor and Chair, Department of Family Medicine, University of Michigan Medical School
- **William K. Oh, M.D.** - Director of Precision Medicine for Yale Cancer Center & Smilow Cancer Hospital, Service Line Medical Director of Smilow Cancer Hospital at Greenwich Hospital.

REGISTER TODAY!

https://zoom.us/webinar/register/WN_b7GzetNNSSKBmkxmtJHdSQ#/registration



Check out resources from ACS CCC!

acs4ccc.org

Your one-stop shop for coalition resources across ACS

Monthly Newsletter

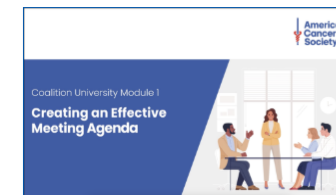


ACS Coalition University

Brief, [on-demand trainings](#) for CCC coalition staff & leadership

ACS Coalition University

This page provides links to interactive micro-learning modules organized by four ACS Coalition University topics: coalition meeting challenges, managing disagreements and conflicts, influencing people and building healthy teams.



Coalition University Module 1 : Creating an Effective Meeting Agenda

This micro-learning was created for cancer coalitions to help them plan impactful and effective agendas. This training module provides guidance on how to set clear expectations for what needs to occur before and during a meeting. Time spent planning an agenda will save time for all meeting participants by providing a clear set of topics, objectives, and time frames.

[Watch the Video: Creating an Effective Meeting Agenda](#)

[Download the Agenda Meeting Planning Template](#)

Thank you from your ACS CCC Team!



Sarah Shafir
Principal
Investigator



Katie Bathje
Strategic Director



Donoria Evans
Director, Data &
Evaluation



Disa Patel
Senior Data and
Evaluation Manager



Liddy Hora
Program Manager



Aubree Thelen
Program Manager

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