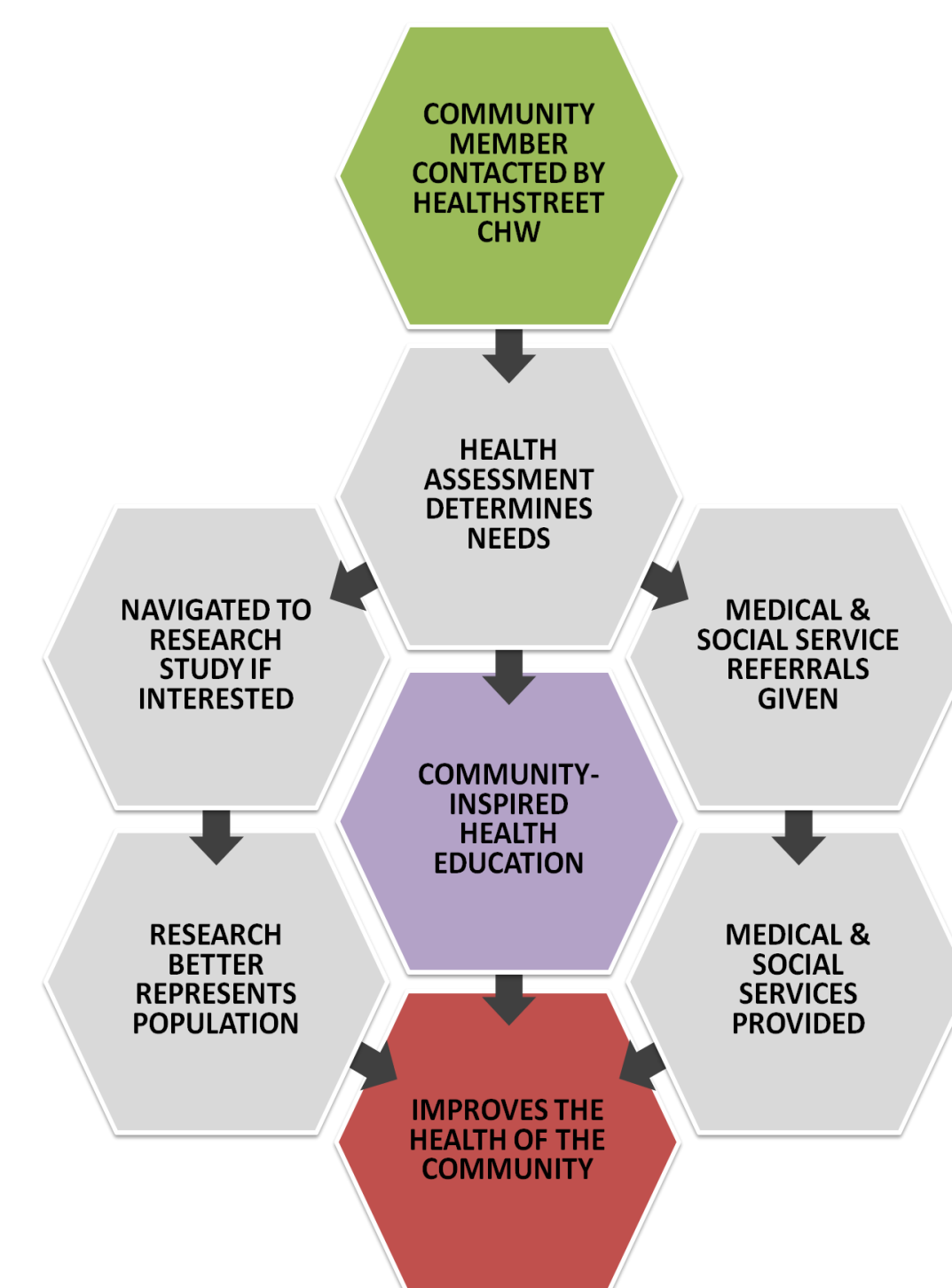


INTRODUCTION

- Historically, women, racial and ethnic minorities, older adults and those living in rural areas have been underrepresented in health research.
- Using internet-based technologies to recruit participants is increasingly popular but engagement of underserved populations is still low.
- Representativeness in research is important to ensure treatments are applicable to all populations.
- HealthStreet, a unique community-engaged recruitment effort, has shown to be successful in recruiting diverse, underrepresented populations.

METHODS

- Before coming to the University of Florida, HealthStreet was founded in 1989 by Dr. Linda Cottler at Washington University in St. Louis. It was scaled up for the Washington University CTSA Community Engagement Program in 2007. HealthStreet was established at the University of Florida in November 2011 to “take the pulse” of the community by assessing health problems and concerns of Florida residents.
- The program started in Gainesville in 2011, expanded to Jacksonville in 2013, and added Miami and 15 rural Florida counties in 2016. HealthStreet is aiming to increase the diversity of clinical trials by linking people in these communities to opportunities to participate in health research.

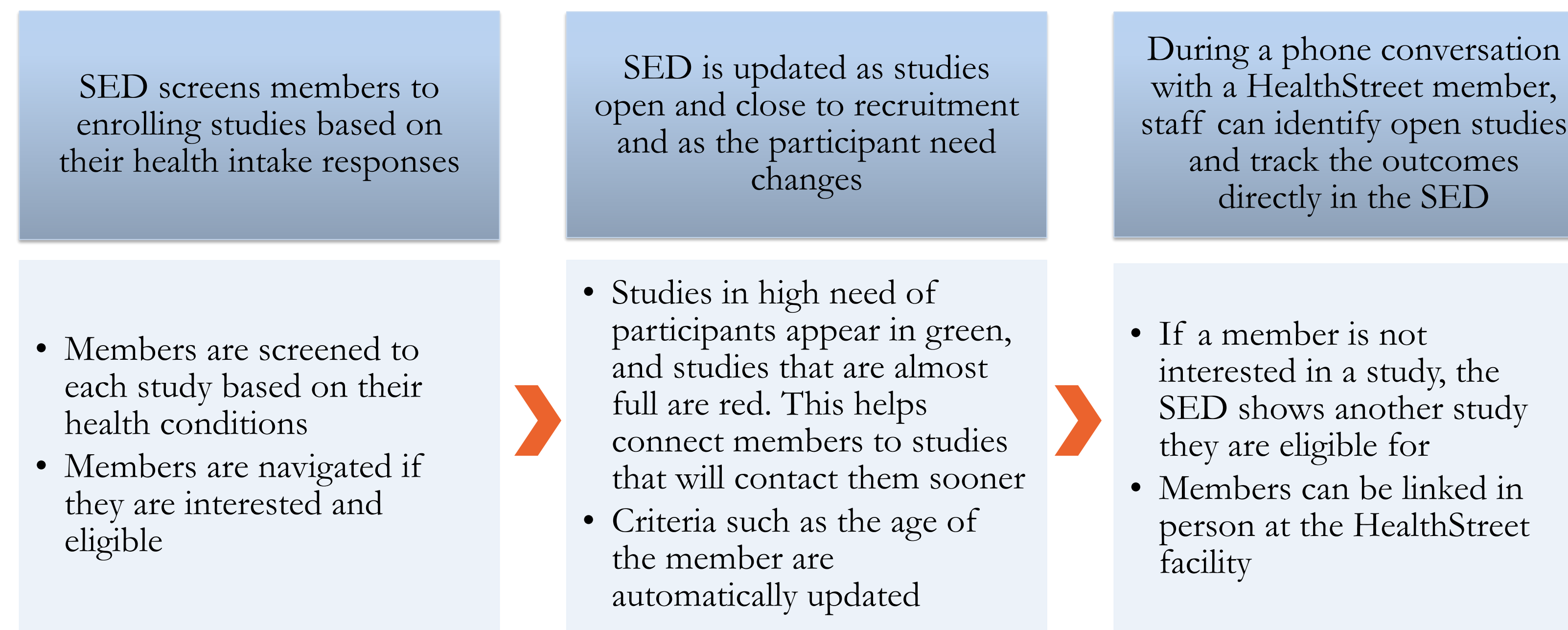


- Assessment Aim:** Assess medical problems and health concerns from community residents themselves
- Service Aim:** Link people, based on their needs and concerns, to medical and social services and opportunities to participate in research
- Education Aim:** Engage in bidirectional, health-promoting communication with and for the community
- Community Aim:** Increase the community’s trust in the research enterprise through meaningful collaboration

- Community Health Workers (CHWs) are the foundation of the HealthStreet model. CHWs administer informed consent and assess health conditions, health concerns and research perceptions of community members. They go out in the community where people live, work, and play, building meaningful face-to-face relationships.
- The HealthStreet Intake is a comprehensive health needs assessment completed by the CHW. It includes demographics, research perceptions, insurance, health concerns, health conditions, medications, substance use, and much more. After the health intake, the community member is considered a “HealthStreet member”.
- CHWs provide referrals to medical and social services based on a member’s needs and concerns. The HealthStreet team also provides a variety of services in the field and at our facility.

METHODS (continued)

- After conducting the health intake, CHWs explain health research studies the member may be eligible to participate in at the University of Florida or partnering institutions. A member is navigated to a study if they are interested in participating and eligible. HealthStreet tracks enrollment using coordinator feedback.
- Existing HealthStreet members are navigated to relevant research study opportunities using the Study Eligibility Database (SED)



Study Eligibility Database (SED) View

Member ID	Study Title	Navigated	Enrolled	Not interested
55500	Brain Functioning in Older Adults			7/27/16
55500	Impact of Sleep Timing on Physical Activity and Dietary Intake	7/27/16		
55500	Understanding Pain and Limitations in Osteoarthritic Disease	6/20/16	8/11/16	
55500	Weight Loss Intervention Surgical Effects on Function			

RESULTS

- 8131** HealthStreet members
- 7530** Navigations to Studies
- 2525** Enrollments to Studies
- 16** Colleges and Institutes Served
- 150** Investigators Served

Table 1: Top Health Conditions

1
2
3
4
5

Table 2: Top Health Concerns

1	Hypertension
2	Diabetes
3	Muscle/Bone Problems
4	Dental Problems
5	Weight Problems

As of July 31, 2016

RESULTS (continued)

Table 3: Demographics

	Overall (n=9890)
Female	56.9%
Average Age	43.20 ± 16.37 years
Ethnicity:	
Asian	1.36%
African-American	60.63%
Caucasian	32%
Other	6%
Latino/Hispanic	5.56%

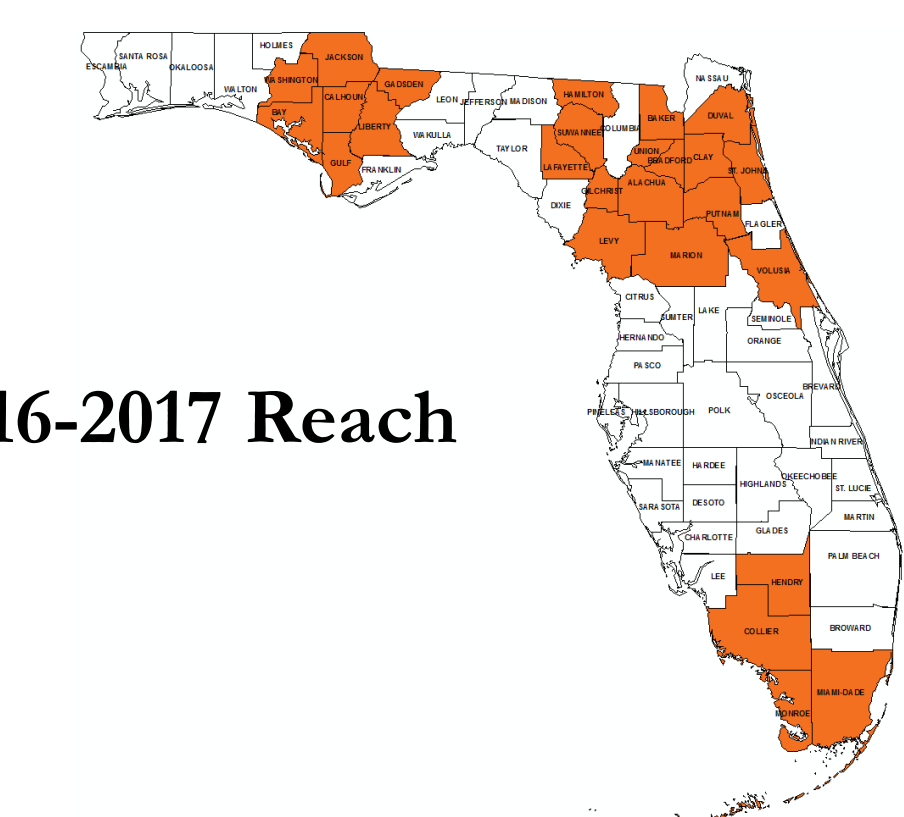
Table 3: Recruitment, Navigation and Enrollment Yields

Recruitment Yield	completed informed consents/ total contacted excluding ineligible	8,087/9,769 = 82.8%
Navigation Yield	navigated/completed health intakes	4,035/7,813 = 51.6%
Unadjusted Enrollment Yield	enrolled/completed health intakes	1,830/7,813 = 23.4%
Adjusted Enrollment Yield	enrolled/navigated	1,830/4,035 = 45.4%

DISCUSSION

- HealthStreet simultaneously works to give everyone a voice in health research while helping investigators from across the university meet their participant recruitment goals.
- Members’ health conditions and concerns can be used to inform investigators as they develop protocols.
- HealthStreet is one of the key recruitment resources in the newly formed Recruitment Center in the Clinical and Translational Science Institute.
- The program will continue to increase the community’s trust in the research enterprise through meaningful collaboration. The community health worker model has played an important role in improving the community’s trust in research by building relationships. Combined with the automated study eligibility database (SED), HealthStreet is improving recruitment to research studies.
- Due to success in the North Florida region, the program will be expanding to a total of 26 counties in the 2016-2017 academic year and Miami HealthStreet members have already been navigated to studies.

HealthStreet’s 2016-2017 Reach



ACKNOWLEDGEMENTS

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