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## Background

- Co-creation for Health Equity (CO-4) Health Equity) is a participatory engagement method for cancer prevention and control interventions in primary care and oncology clinics
- Engagement with invested partners to:
  - Plan implementation
  - Align workflows and
  - strategies to the local context
  - Ensure the intervention's change mechanism meets local priorities
  - Increase the success of the intervention

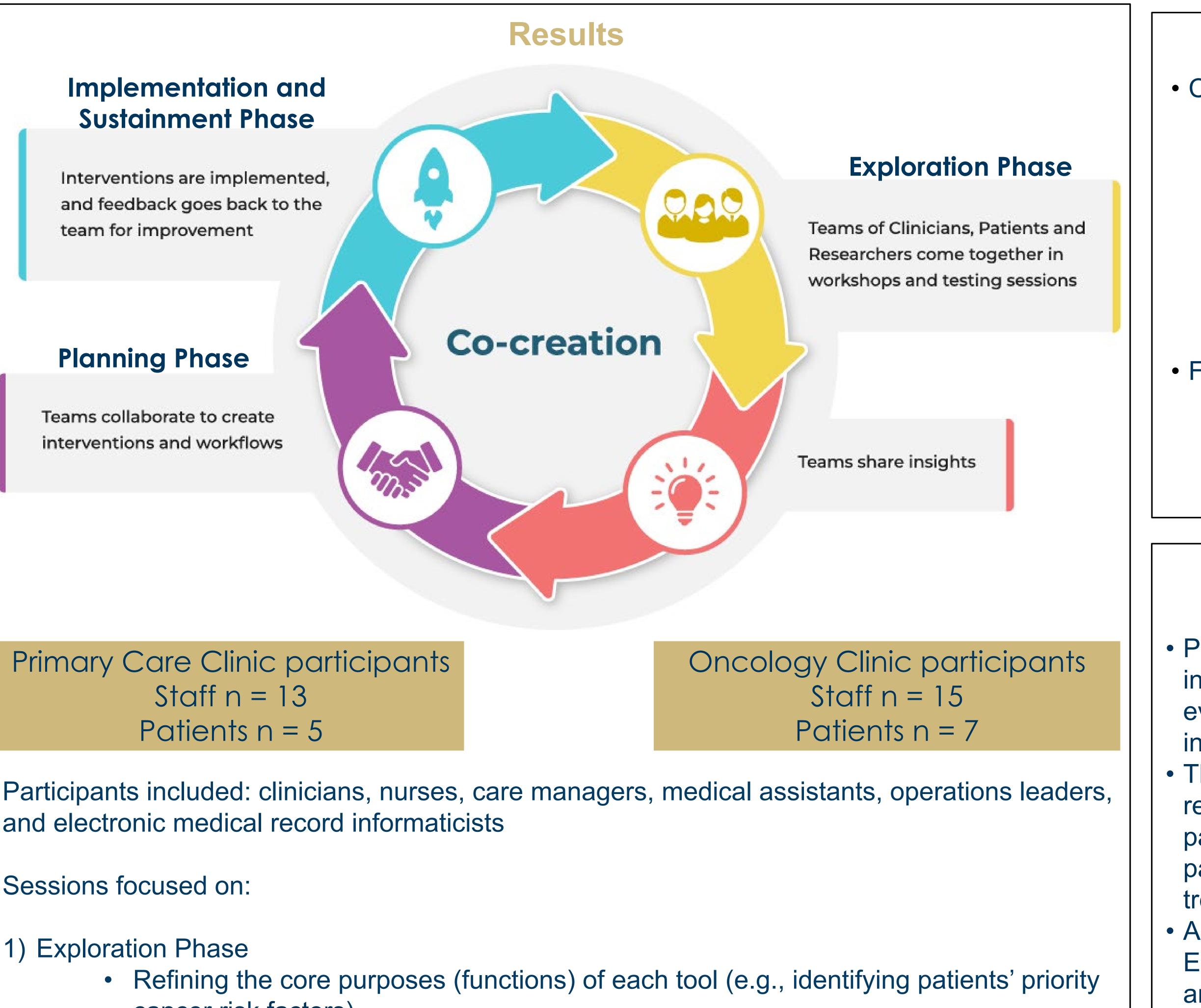
## **Methods**

- Included 4 to 5 sessions in which participants:
  - Identified and refined the intervention's core purposes (functions) to ensure
  - alignment with clinic priorities Refined and adapted concrete ways (forms) to meet those functions
- Sessions were conducted via Zoom and lasted 45-90 minutes
- The method can be utilized throughout the research phases

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# Engaging Invested Partners to Co-create Approaches to Design and Implement Cancer Prevention and Control Tools

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and electronic medical record informaticists

Sessions focused on:

- 1) Exploration Phase
  - cancer risk factors)
  - Adapting the workflows and strategies (forms) for intervention delivery
- 2) Planning Phase
  - User testing of tool prototypes
  - Consensus-building on options for clinic workflows

The research team developed matrices to track actions taken, partially taken, or planned for in response to partner recommendations.





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#### Conclusions

• CO-4 Health Equity Leveraged input from invested primary care and oncology partners Refined and adapted workflows and implementation strategies for two cancer prevention and control tools • Future directions Apply this participatory approach in other clinical innovations

**Evaluation outcomes** 

## Implications

 Participatory engagement methods inform the design, implementation, and evaluation of multilevel (complex) interventions

 This project offers guidance to researchers to balance input from

patients and clinical partners – key

partners for cancer prevention and treatment efforts

• Across study phases, Co-4 Health Equity guides partners to create, refine, and adapt an intervention and the clinic workflows needed for its delivery

## **Cocreation Webpage**

