Reducing the Risk of Breast Cancer Project

Response to Funding Conditions and Clarifications

Canadian Breast Cancer Foundation – Ottawa Chapter

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Canadian Environmental Law Association

April 27, 2006

Revised Project Workplan

Two general public meetings have been added to the workplan. The first public meeting will introduce the project to the broader community and give them the opportunity to input into the project. It will also provide project participants with an introduction and input from fellow citizens. The second meeting will offer another opportunity to share the learnings and outcomes of the project. It will hopefully encourage greater community engagement with and mobilization around the work. Timelines have been adjusted appropriately.

Section E. Project Workplan

List and Explain Project Activities in Detail	Project Team Members / Project Roles Involved	Start – End Date of Activities
Recruitment of citizen's panel. South Riverdale residents will be recruited by project staff for the citizen's panel. Community members will be recruited through existing networks, e-mail, telephone calls and word of mouth. If necessary, ads will be placed in the local community newspapers. Participants will be recruited from among those who participated in the *Community Right to Know* work, with additional interested residents as necessary. Some effort will be made to maximize the diversity of the panel. Already there is considerable interest in the project.	▪ The community liaison will be the lead recruiter. ▪ All other people related to the project will be encouraged to assist with recruitment.	July 1, 2006 to September 6, 2006.
Introductory community meeting. A general public meeting will be organized for all community members interested in attending. The meeting will be advertised and project participants will be encouraged to invite their neighbours. The meeting will include an introduction to the project, an explanation of its rationale and an opportunity for community members to provide feedback, suggestions and to help with the initial framing. Notes from the meeting will be summarized for the Initial Framing Meeting.	▪ Project staff will organize and facilitate the meeting. ▪ Community participants will be strongly encouraged to attend the meeting though their presence is not mandatory.	September 7, 2006

Pre-project evaluation. A pre-project evaluation form will be created with the help of a qualitative research analyst. This evaluation will emphasize project participant demographics, their reasons for being involved with the project, and their expectations for the project in order to develop baselines. All project team members will complete forms, with information from citizen panel members being most important.	▪ Project staff will create, distribute and collect the evaluations. ▪ A qualitative research analyst will assist with the design and analysis of results.	September 12, 2006
Initial framing meeting. The community participants will meet along with project staff and available advisory committee members (in person or by teleconference). The project structure and scope will be discussed and revised as necessary. Participants at all levels will provide input into the kinds of information needed, potential sources of that information and communication needs in terms of summarizing and presenting the information required to explore potential environmental causes leading to breast cancer.	▪ Community participants will lead this process with the support of the facilitator ▪ Advisory committee and project staff will provide guidance. ▪ Project staff will organize the meeting.	September 12, 2006
Information gathering. Research will be undertaken to locate and gather the information decided upon in the framing meeting. This information will include evidence for associations between environmental contamination and breast cancer and data on environmental exposures in the community. The information will compiled and preliminary summaries created for the research review meeting.	▪ The research consultant and project coordinator, both of whom are physicians, will lead and undertake most of the research ▪ Advisory committee members will provide expert help with this process. ▪ Community participants will assist in the information gathering depending on their interest and capacity, and in particular with local sources of knowledge.	September 13, 2006 to January 15, 2007

Research review meeting. Community members will meet to discuss and review the outcomes of the information gathering stage. They will identify gaps and provide guidance on how the research should be summarized to aide in their decision-making. Interested advisory committee members will have the option of attending or participating by telephone. This will be a facilitated meeting which will seek to gather input into the data summarization process.	▪ Community participants will lead this process to identify their information needs. ▪ The facilitator will support the process. ▪ Project staff will provide guidance. ▪ Project staff will organize the meeting.	January 16, 2007
Interim evaluation. Project staff will work with a qualitative research analyst to draft the evaluation form. As part of the research review meeting, project members will be asked to provide written feedback, through evaluation forms, on the process and their experience to this point. All members of the project will fill out evaluation forms with special emphasis on feedback from the community participants in the analysis. The findings from the evaluation will be integrated into the future meeting and process design to ensure that the process is learning and improving as it proceeds.	▪ Project staff will create, distribute and collect the evaluations. ▪ A qualitative research analyst will assist with the design and analysis of results.	January 16, 2007
Data summarization. The evidence gathered to this point will be synthesized. This will involve the creation of written summaries as well as presentations for the knowledge translation and recommendation development meetings. Summaries and presentations will be prepared with a focus on plain language, reflecting the science but presenting it in accessible ways. This phase of the work will culminate in a 'Resource Binder' being produced which will gather existing evidence, plain language materials and other resources identified. It will also include summary materials prepared by the project team. It may also include notes from the various experts' presentations made to the citizen's panel. These materials will be key to the knowledge translation process.	▪ Project coordinator and the research consultant will do the data summarization. ▪ Advisory committee will advise on science issues and the use of plain language.	January 17, 2007 to March 5, 2007

Knowledge translation meeting. The results of the research will be presented. This will take the form of both written materials – through the resource binder, and presentations by key knowledge translators. Community members will begin to discuss their initial reactions to the information presented, asking questions and engaging with fellow panel members. This will be an open forum meeting that gauges initial responses to the information. The project team will take detailed notes gauging the response of the group.	▪ Project coordinator and research consultant to present the results of the research and synthesis. ▪ Community citizen's panel participants will lead the meeting and discuss the information. ▪ Project staff to organize the meeting. ▪ The facilitator will support the process. ▪ Administrative Assistant to take detailed notes.	March 6, 2007
Recommendation development meeting. After time to further review the materials, community members will reconvene as a group to draw conclusions based on their sense of the risks posed and to develop recommendations for action to reduce risk.	▪ Community participants will engage in a second meeting to deliberate over the information and to develop recommendations. ▪ Facilitation will support the meeting ▪ Project staff to organize and prepare notes from meeting.	March 27, 2007
Report writing. The final report will summarize the information gathered, the synthesis of materials, describe the process and present the conclusions and recommendations of the citizen's panel. It will also include the results of the evaluation. The report will be distributed to all members of the project and be used as the basis for sharing lessons learned more broadly, in the community and beyond.	▪ Project coordinator and research consultant will write the project report. ▪ Advisory committee to provide feedback and guidance.	March 28, 2007 to May 20, 2007

Wrap-up community meeting. The results of the project will be presented at a meeting open to all community members. The meeting will describe the work undertaken, summarize the information gathered, and discuss the recommendations of the community panel. The meeting will also be an opportunity to discuss next steps, the possibility of a second project phase, and community aspirations to disseminate and act on the results.	▪ Project staff will organize and facilitate the meeting. ▪ Community participants will be strongly encouraged to attend the meeting though their presence is not mandatory.	May 31, 2007
Final evaluation. Revised evaluation forms will be created with the guidance of the qualitative researcher. Participants, project staff and the advisory committee will be sent project evaluation forms to provide feedback on their experience with the project and their opinion on how well the objectives were met. This evaluation will also explore the quality of the process. The need for a second project phase will be gauged.	▪ All members of the project will fill out evaluation forms with special emphasis on feedback from the community participants in the analysis. ▪ A qualitative research analyst will assist with the evaluation process.	June 1, 2007 to June 31, 2007.
Education, implementation and path forward. Community members, project staff and advisory committee members will be encouraged to disseminate the results of the project as well as lessons learned. All members of the project will be encouraged to begin implementing the recommendations at individual, community and political levels where appropriate. With sufficient community member interest and if recommended, a second phase of the pilot will be developed to organize and fund implementation efforts.	▪ All members of the project will be encouraged to participate. ▪ Project staff will undertake communications tasks for sharing lessons. ▪ Webmaster services will be hired to assist with dissemination of the final report.	June 1, 2007 to June 31, 2007 and beyond.

Revised Budget

The budget has been revised to account for the addition of two public meetings. The child care and meeting supply budgets have been increased. We have discovered since the original proposal was written that security costs will not be necessary, so extra money was available.

H1. Detailed Project Budget Calculation and Explanation

Budget Line Items	Year One	Year Two	Line Item Explanation **Expand / add rows as necessary**
Supplies & Services Line Items			*Include the rates and quantity used to calculate the Supplies & Services Line Items in explanation*
Meeting space rental	$0	$	Meetings will be free at South Riverdale Community Health Centre with no security costs because our community liaison will be present.
Meeting supplies and refreshments	$720	$	Pens, markers, paper and flipcharts for 6 meetings. Snacks and beverages for the 4 participant meetings.
Citizen's panel honoraria	$8,400	$	14 community participants X 4 participant meetings X $150 including preparation, research time and optional public meeting attendance. Scaled to compensate for participants' time but to avoid making compensation the main motivation for participation.
Taxi fare if needed	$160		$20 X 2 participants X 4 participant meetings.
Child care expenses	$540	$	$30 X 3 hours X 6 meetings for up to 2 workers for community participants' children as per South Riverdale Community Health Centre's arrangement. Maximum 6 toddlers or 3 infants per worker.
Telephone and teleconference	$450	$	Teleconference participation for advisory committee members X 2 meetings at $200 each plus $50 in long distance calls for communication with steering committee members and key informants.
Photocopying	$250	$	Copying of research articles, reports, and materials needed for meetings – 200 pages per member of citizen's panel, project team and steering committee (25) X $ .05 for
Community newspaper ads.	$100		Advertisements for citizen's panel X 2 X $50.
SUBTOTAL[1]	$10,620	$	

Salaries & Wages *(Note list benefits if applicable as a separate line item within this section)*			*Include hours worked and rate of pay for explanation of Salaries & Wages Line Items and how salary amount was determined (i.e. an organization's salary structure, community comparison etc.)*
Project Coordinator	$25,200	$	Project coordination X 20 days, research X 10 days, writing X 15 days X $560 (45 days). Discounted from normal consulting per diem as physician and environmental health expert of $800 per day due to the size of project and participatory nature.
Research Consultant	$22,400	$	Research 25 X days, writing X 10 days and meetings X 2 days X $560 (40 days). Discounted from normal consulting per diem as physician environmental health expert of $800 per day due to the size of project and participatory nature.
Community Liaison	$5,440	$	Participant recruitment and coordination X 6 days, meeting organization X 3 days, meeting preparation X 4 days, and proofreading/editing X 4 days $320 (17 days). Contract outside of his part time employ at South Riverdale Community Health Centre. Per diem based on self-employment equivalent of wage and benefits at South Riverdale.
Professional Facilitator	$4,000		$1000 per meeting
Administrative Assistant	$2,560	$	Project management assistance including assisting with meeting organization, teleconference organization, photocopying, materials organization and coordinating communications X 16 days X $160. Contract outside of her part time work at Canadian Association of Physicians for the Environment (CAPE). Per diem at market rate as contract self-employed.
SUBTOTAL[2]	$59,600	$	*Justify the budgeted amounts for Evaluation, Sharing Lessons Learned and Administrative / Overhead line items by listing the supplies and services that will be paid for.*
i. Sum of Subtotal[1] and Subtotal[2]	$70,220	$	
ii. Project Evaluation	$7,000	$	The project will hire a qualitative researcher and analyst to: ▪ Oversee and advise on the design/development of the evaluation forms - $800 ▪ Do the coding and data compilation - $1200 ▪ Do the data analysis - $1800 The project coordinator, research consultant and community liaison will: ▪ Design and develop the evaluation forms - $1200 ▪ Distribute and collect the evaluations - $0 ▪ Prepare the evaluation reports based on the data analysis - $2000 The above process includes pre-project, interim and final evaluations.

iii. Sharing Lessons Learned	$5,000	$	Sharing Lessons costs will include, depending on citizen panel recommendations: ▪ The cost of preparation and travel for presentations - $1200 ▪ The cost of printing and distribution of summary reports and discussion papers arising from the projects - $600 ▪ Time writing papers for academic journals - $2000 ▪ Printing, copying and support for peer to peer dissemination by community; members - $400 ▪ Time writing for the website and website editor costs for web posting - $800
iv. Subtotal[3] (i+ii+iii)	$82,220	$	
v. Administrative / Overhead (iv multiplied by 15%)	$12,333	$	CELA's administrative overhead will cover ▪ Office supplies; ▪ Fax machine; ▪ Computer equipment for the project coordinator and research consultant; ▪ Office space for the project coordinator and research consultant including rent, telephone, internet, maintenance, and insurance costs; ▪ Supervision by CELA's executive director; ▪ Bookkeeping by CELA's accountant, ▪ Office reception and assistance from CELA clerical staff.
vi. Total by Year (iv + v)	$94,553	$	
vii. Total Grant Requested (vi. Year One + vi. Year Two):	$94,553		

Scientific Base

In order to organize our work gathering research related to environmental exposure and breast cancer, we will start with known resources for substances suspected to be of concern. An essential source will be the Monographs Database of the International Agency for Research on Cancer (IARC). We will start with those that are known or hypothesized to be related to breast cancer. The work will also include a deeper look into the suspected, possible and probable carcinogens and their potential for a breast cancer impact.

An important additional category will be substances that have hormonal properties and whether they increase breast cancer risk. Estrogenic compounds for instance, tend to be both hormonal and carcinogenic, and therefore deserve special attention. The Breast Cancer and Environment Research Centers (BCERC) in the United States will be an important resource.

The research on substances potentially linked to breast cancer will be combined with information available on the major environmental and occupational toxins that community members are exposed to. This intersection will help to develop a sense of the community's risk profile. Participants will be able to look at the substances with suspected or demonstrated links to breast cancer and the level of exposure they are likely receiving.

Revised Evaluation Plan

The evaluation plan has been revised to include more direct outcome indicators of participants' improved understanding of scientific research and the breast cancer and environment associations. The indicators will serve to improve the evaluation of two objectives: increasing community participants' knowledge, and improving their skills in evaluating environment and health research.

Section F. Evaluation Plan

Project Objectives (what will change in terms of people's or the community's knowledge, skills/abilities, or practises)	**Outcome Indicators** **How will you know something has changed because of the project?**	**List how you will collect the information to determine what has changed for each objective** (i.e. survey, focus group, or activity logs etc.)
Project Objective To increase community participants knowledge of environmental exposures and their potential risks for breast cancer	Success will be demonstrated by 13 of 14 community participants reporting, through the evaluation, that their level of knowledge has significantly increased. Evaluation forms will include an opportunity for participants to briefly describe what they know about the links between environmental exposures and breast cancer at the start of the project and what they have learned at the end of the work. Additional evaluation will be done through project staff's evaluation of the project and their observation of community participants increased knowledge and comfort with making subsequent decisions.	Written evaluation forms, pre-project, at the interim evaluation stage and after project completion. Staff observation of process

Project Objective To increase the skills of community participants to evaluate scientific information related to environmental contaminants and in judging the level of hazard and risk.	Success will be demonstrated by 13 of 14 community participants reporting that their skills in evaluating scientific information and ability make informed decisions based on this evidence has improved. Participants will briefly describe what they have learned about the links between environmental exposures and breast cancer. These qualitative results will be collated and provide an indication of participants' skill in evaluating the information. Additional evaluation will be done through project staff's evaluation of the project and their observation of community participants' aptitude with scientific information and risk decision-making.	Written evaluation forms, pre-project, at the interim evaluation stage and after project completion. Staff observation of process
Project Objective To develop recommendations for action to prevent environmental causes of breast cancer.	Successful completion of this objective will involve: ▪ The creation, documentation and dissemination of conclusions and recommendations developed by community participants. ▪ The willingness of the participants to stay involved in the process from start to finish (completion rate). ▪ The number and quality of recommendations created. ▪ The participants impression of the success of the outcomes. ▪ The community's interest in moving to community action following this process.	Written evaluation forms pre-project, at the interim evaluation stage and after project completion. Completion of the final.report Focus group at the final citizen panel meeting to assess the success of the project.

Project Objective		
To successfully pilot a community-based, participatory, hazard and risk assessment project that can be a model for other community decision-making work both in South Riverdale and beyond.	The project will be evaluated for its strength as a pilot and model for similar future work. This process-based objective will be judged based on the participants' experience, opinions of the advisory committee and self-evaluation by project staff. Outside input into the usefulness of the results will be solicited as well. The evaluation will gather participants' opinions of the project process itself and its usefulness as an example of participatory environment and health learning and decision-making.	Written evaluation forms completed by all participants pre-project, at the interim evaluation stage and after project completion. Focus group feedback at the final meeting – facilitator will guide the group through an evaluation process.