

2021 Fraumeni Award Nominations

Lucille Adams-Campbell, PhD

Lucille Adams-Campbell, PhD was the first African-American woman to receive a PhD in epidemiology in the United States, and in 1995 when she directed the Howard University Cancer Center she was the only African-American woman to lead any cancer institute. She is currently the Associate Director of Minority Health & Health Disparities Research, Senior Associate Dean for Community Outreach and Engagement, and Professor of Oncology at Lombardi Comprehensive Cancer Center at Georgetown University Medical Center. Dr. Adams-Campbell has dedicated her career to studying cancer disparities experienced by African-Americans. Her research uses clinical trials, cancer epidemiology and etiology along with lifestyle interventions to elucidate the cancer risk in African-Americans and has led to over 200 peer-reviewed publications and international recognition as an expert in minority health and health disparities research. She is known for her “big picture” thinking and leadership on large collaborative projects. She is a co-PI on the Black Women’s Health Study, a 25-year cohort study following a 59,000 African-American women to gather epidemiological data on health risks and disease development. The cohort includes nested studies on breast density and breast cancer risk, breast cancer survivorship, and collection of breast cancer tumor tissue for examination of breast cancer subtypes. She has published analyses from this cohort to better understand cancer risk factors in Black women, including papers on (to name a few) obesity as a risk factor for colon adenomas and cancer, dietary risk factors for lung cancer, reproductive factors and exogenous hormones and risk of ovarian and endometrial cancer, and diabetes and breast cancer mortality. She is the Principal Investigator of a Center of Excellence for Health Disparities that focuses on metabolic syndrome and breast cancer risk in an exercise intervention clinical trial. Dr. Adams-Campbell oversees the Capital Breast Care Center (CBCC), a community-based patient navigation program. Her leadership in cancer research and prevention has been recognized in numerous honors, including election to the National Academy of Medicine and Induction into the D.C. Hall of Fame.

Rena J. Pasick, DrPH

Rena J. Pasick, DrPH has “more than twenty-five years’ experience working on cancer disparities in low-income ethnically diverse communities and clinical settings in the San Francisco Bay Area. I am trained in Public Health as a Health Educator. Based on my record of cancer disparities research, I was recruited to the UCSF Cancer Center in 2002 to serve in the new position of Director for Community Education and Outreach. Our initial objective was to establish our Center as a force for good in under-served communities. Toward that end, we created a Community Advisory Board (CAB) of influential leaders from our diverse communities, individuals who are proactive and eager for their communities to benefit from the resources of UCSF. Immediately the CAB formed a Faith Committee with the mission of building the capacity of African American church health ministries. Because UCSF had major NCI-funded Cancer Center initiatives in Asian and Latino communities, this became our focus. We developed a model for capacity-building that included ongoing training, technical assistance, and dissemination of evidence-based interventions to churches (e.g., NCI’s Body + Soul). To date, more than 70 churches in four counties have participated. Through this work, I developed the Graduated Community Engagement Model, which first entails building trust and lasting partnerships through education, training, and capacity-building service to communities addressing their cancer disparities. Second, we expose our partners to the benefits of research through use of evidence-based interventions. Third, we engage in community-based participatory research on community priority issues (e.g., prostate cancer research now under way). Based on those experiences, community leaders are receptive to and ready to promote participation in biomedical research.”