**Section: Contact Information**

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**Section: Project Requirements and Description**

**Group: Requirements to submit AOI**

A comprehensive review of previously published data has been completed. Yes

The specific aims are clear and focused. Yes

The investigator has appropriate experience and expertise to develop the concept proposal; if not, has identified a mentor or senior co-investigator. Yes

The investigator agrees to develop an initial draft of the concept proposal within 6 weeks of approval of the AOI and to finalize the concept proposal within 6 months. Yes

Project Title: Neighborhood Socioeconomic/Environmental Disadvantage and Psychosocial Outcomes in CCSS Survivors

Planned research population (eligibility criteria):

CCSS Expansion Cohort

Proposed specific aims:

1. Describe neighborhood socioeconomic and environmental disadvantage in long-term survivors of childhood cancer.
   1a. Describe the neighborhood socioeconomic disadvantage assessed by the area deprivation index (ADI, defined by 17 ADI sub-scores and the state and national ranking scores for the domains of income, education, employment, housing quality, crime index) at baseline and follow-up in CCSS survivors.
   1b. Describe the neighborhood environmental disadvantage using the Satellite-based measures (pollution PM 2.5 and NO2 levels) at baseline and follow-up in CCSS survivors.

2. Investigate associations between neighborhood socioeconomic/environmental disadvantage and cancer diagnosis/treatment.

3. Examine associations between neighborhood socioeconomic/environmental disadvantage and patient-reported symptoms and quality of life among survivors, adjusting for relevant treatment exposures.

4. Explore the impact of neighborhood socioeconomic/environmental
disadvantage on secondary malignancies in survivors, adjusting for relevant
treatment exposures (e.g., radiation, alkylating agents) and health behaviors (e.g.
smoking, physical activity, BMI).

Note: Only the Expansion Cohort will be used for this study given the enhanced
coding of address data.

Will the project require non-CCSS funding to complete? : No
If yes, what would be the anticipated source(s) and timeline(s) for securing funding? :

**Group: Does this project require contact of CCSS study subjects for:**
Additional self-reported information : No
Biological samples : No
Medical record data : No
If yes to any of the above, please briefly describe. :

**Group: What CCSS Working Group(s) would likely be involved? (Check all that apply)**
Second Malignancy : Secondary
Chronic Disease :
Psychology / Neuropsychology : Primary
Genetics :
Cancer Control : Secondary
Epidemiology / Biostatistics :

**Section: Outcomes or Correlative Factors**
Late mortality :
Second Malignancy : Primary

**Group: Health Behaviors**
Tobacco : Correlative Factors
Alcohol : Correlative Factors
Physical activity : Correlative Factors
Medical screening :
Other :
If other, please specify :

**Group: Psychosocial**
Insurance : Correlative Factors
Marriage :
Education : Primary
Employment : Primary
Other :
If other, please specify :
**Group: Medical Conditions**

Hearing/Vision/Speech :
Hormonal systems :
Heart and vascular :
Respiratory :
Digestive :
Surgical procedures :
Brain and nervous system :
Other :
If other, please specify :

**Group: Medications**

Describe medications :

**Group: Psychologic/Quality of Life**

BSI-18 : **Primary**
SF-36 : **Primary**
CCSS-NCQ : **Primary**
PTS :
PTG :
Other : **Primary**
If other, please specify : **Symptoms**

**Group: Other**

Pregnancy and offspring :
Family history :
Chronic conditions (CTCAE v3) :
Health status : **Correlative Factors**

**Group: Demographic**

Age : **Correlative Factors**
Race : **Correlative Factors**
Sex : **Correlative Factors**
Other :
If other, please specify :

**Group: Cancer treatment**

Chemotherapy : **Correlative Factors**
Radiation therapy : **Correlative Factors**
Surgery :

**Section: Anticipated Sources of Statistical Support**

CCSS Statistical Center : **Yes**
Local institutional statistician:
If local, please provide the name(s) and contact information of the statistician(s) to be involved.

Will this project utilize CCSS biologic samples?: **No**
If yes, which of the following?:
If other, please explain:

**Section: Other General Comments**

Other General Comments:

*Note: Only the Expansion Cohort will be used for this study given the enhanced coding of address data.*

I agree to share this information with St. Jude: **Yes**