Fostering Partnerships to Address Racism and Disparities in Cancer Care

October 24, 2022
2:30-4:00pm ET

Made possible with support from Genentech, a member of the Roche group
Agenda

• Welcome and Introductions

• Overview of Learning Collaborative

• Community/Health System Partnerships:
  → Addressing Inequalities in Breast Cancer Care for Black women: A Collaborative Model between Community and Health Care Providers
  → Eliminating Disparate Outcomes for Black Breast Cancer Patients
  → Addressing Health Inequalities in Prostate Cancer Care

• Q&A
Questions

To submit a question online, please click the Q&A icon located at the bottom of the screen.
Welcome & Introductions
Center for Health Care Strategies

Dedicated to strengthening the U.S. health care system to ensure better, more equitable outcomes, particularly for people served by Medicaid.

Together with our partners, our work advances:

Effective models for prevention and care delivery that harness the field’s best thinking and practices to meet critical needs.

Efficient solutions for policies and programs that extend the finite resources available to improve the delivery of vital services and ensure that payment is tied to value.

Equitable outcomes for people that improve the overall wellbeing of populations facing the greatest needs and health disparities.
Meet the Project Team

Shilpa Patel
Associate Director, Health Equity
Center for Health Care Strategies

Jahira Sterling
Program Associate
Center for Health Care Strategies

Dana E. Crawford
Scholar-in-Residence,
Zuckerman Institute,
Columbia University
Co-Creating Solutions to Address Racism and Disparities in Oncology: Project Overview
Co-Creating Solutions to Address Racism and Disparities in Oncology

• **Goal**: Support health system and community partners in meaningfully addressing institutional racism and bias and developing and piloting new interventions that are created for and by the community, in partnership with the health system.

• Together with three health system – community organization pilot site partnerships, we are working to:
  
  → **Contribute to the evidence base on effective and actionable strategies for health systems** to understand and address cancer-related health disparities in their communities

  → **Empower and uplift the voices of communities, and community-based organizations** doing ground-level work to address racial and ethnic health disparities in oncology

  → **Novel accountability measures that track progress for accountability and bias** that are co-developed with both health system and community stakeholders
## Co-Creating Solutions to Address Racism and Disparities in Oncology Overview

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<th>Community Partner</th>
<th>Health Care Partner</th>
<th>Location</th>
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<td>The Chrysalis Initiative</td>
<td>MD Anderson Cancer Center, Cooper Health</td>
<td>Philadelphia, Pennsylvania and Camden, New Jersey</td>
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<td>Cierra Sisters</td>
<td>Fred Hutchinson Cancer Research Center</td>
<td>Seattle, Washington</td>
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<td>Jefferson County Faith Based Alliance for the Advancement of Health Equity</td>
<td>O’Neal Comprehensive Cancer Center, University of Alabama at Birmingham</td>
<td>Birmingham, Alabama</td>
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Learning Collaborative Strategies

- Inside/outside approach
- Center BIPOC expertise and experience
- Develop shared language and understanding across partners
- Person-centered and race-explicit dialogue
- Race-explicit language
- Shared power and resources
- Intentionality Tracker
- Cross-disciplinary tools and resources
Initial Lessons Learned

• Opportunity for further refinement in learning collaborative strategies

• Existing means of communication and relationships need to be reexamined and reimagined

• Need for more upfront time and resources devoted to:
  → Unpacking relationship dynamics
  → Understanding and addressing root causes of oncology-related disparities and inequities
Addressing Inequalities in Breast Cancer Care for Black Women: A Collaborative Model between Community and Health Care Providers

Chrysalis Initiative & MD Anderson Cancer Center at Cooper Health
Meet the Team

Jamil Rivers
Founder, CEO, Chrysalis Initiative

Plyshette Wiggins
Health Equity Coordinator, MD Anderson Cancer Center at Cooper Health

Evelyn Robles-Rodriguez
Director, Outreach, Prevention and Survivorship, MD Anderson Cancer Center at Cooper Health
Eliminating Disparate Outcomes for Black Breast Cancer Patients

Cierra Sisters & Fred Hutchinson/ University of Washington/ Seattle Children’s Cancer Consortium
Meet the Team

Bridgette Richard Hempstead
Executive Director, Cierra Sisters

Katherine J. Briant
Assistant Director, Fred Hutchinson/University of Washington/Seattle Children’s Cancer Consortium
CIERRA SISTERS: ANTI-RACIST ONCOLOGY PROJECT

A PARTNERSHIP WITH FRED HUTCHINSON CANCER CENTER TO CO-CREATE SOLUTION TO ADDRESS RACISM & DISPARITIES IN ONCOLOGY

Presented by:
Bridgette Hempstead - Founder & Director of Cierra Sisters
Kathy Briant – Office of Community Outreach & Engagement, Fred Hutchinson Cancer Center
HISTORY

- Mistrust between Black community, medical researchers, and health care providers.
- Embedded in generations of lived experiences.
- Results in Blacks/African-Americans experiencing healthcare challenges.

*The New York Times*

Syphilis Victims in U.S. Study Went Untreated for 40 Years

By JEAN HELLER
The Associated Press

WASHINGTON, July 25—For 40 years the United States Public Health Service has conducted a study in which human beings with syphilis, who were induced to serve as guinea pigs, have gone without medical treatment for the disease and a few have died of its late effects, even though an effective therapy was eventually discovered.

The study was conducted to determine from autopsies what the disease does to the human body.

Officials of the health service who initiated the experiment have long since retired. Current officials, who say they have serious doubts about the morality of the study, also say that it is too late to treat the syphilis in any surviving participants.

Doctors in the service say they are now rendering whatever other medical services they can give to the survivors while the study of the disease’s effects continues.

Dr. Merlin K. DuVal, Assistant Secretary of Health, Education and Welfare for Health and Scientific Affairs, expressed shock on learning of the study. He said that he was making an immediate investigation.

The experiment, called the Tuskegee Study, began in 1932 with about 600 black men.
RACISM & INEQUALITY IN HEALTHCARE FOR AFRICAN AMERICANS*

- Blacks/African Americans:
  - Experience illness at higher rates.
  - Have lower life expectancy than other racial and ethnic groups.
  - Are one of the most economically disadvantaged groups in the U.S.
  - Have endured racism, bias and discrimination in American society for hundreds of years.

* Jamila Taylor, The Century Foundation, December 2019
  https://tcf.org/content/report/racism-inequality-health-care-african-americans/
• **Cierra Sisters** exists to transform the experience of Black people experiencing cancer by breaking the cycle of fear and empowering them to detect, treat, and overcome breast cancer.

• **Fred Hutchinson Research Center** unites innovative research and compassionate care to prevent and eliminate cancer and infectious disease.
PARTNERS (CONT’D)

**Cierra Sisters:** Bridgette Hempstead and Tigist Abebe (Project Manager)

**Fred Hutchinson Research Center:**
- Diversity, Equity & Inclusion (DEI) Core: Dr. Paul Buckley and Nikkita McPherson
- Hutchinson Institute for Cancer Outcomes Research (HICOR): Dr. Scott Ramsey, Judy Nelson and Karma Kreizenbeck
- Office of Community Outreach & Engagement: Dr. Jason Mendoza, Kathy Briant and Hallie Pritchett
ANTI-RACIST ONCOLOGY PROJECT

• **GOAL:** Co-develop solutions that can improve equitable health outcomes by addressing bias and racism in oncology access, quality and outcomes.

• **OBJECTIVES:**
  1. Facilitate interaction between community & healthcare system to build trust.
  2. Examine barriers preventing inclusion of Black women in research and clinical trials.
  3. Develop call to action to improve cancer care experience for Black women.
  4. Develop recommendations for collaboration to eliminate racism and disparities in oncology.
PROJECT PROGRESS
BY OBJECTIVE

1. Facilitate interaction between community & healthcare system to build trust.
   ✓ Recruitment of survivor and caregiver cohort for this project
   ✓ Fred Hutch Cancer Center launched “Inclusion & Equity in Research” Task Force

2. Examine barriers preventing inclusion of Black women in research and clinical trials.
   ✓ Community conversations with survivors and caregivers
   ✓ “Inclusion & Equity in Research” Task Force working groups
3. Develop call to action to improve cancer care experience for Black women.
   - Working with survivor and caregiver cohort to develop anti-racism/bias mitigation educational toolkit
   - Recruited oncologists for video interviews

4. Develop recommendations for collaboration to eliminate racism and disparities in oncology.
   - Recommendations report from “Inclusion & Equity in Research” Task Force
NEXT STEPS & DISSEMINATION

• Dissemination to occur through Cierra Sisters and Fred Hutchinson Cancer Center:
   Use the anti-racism/bias mitigation educational toolkit to deliver trainings to healthcare providers
   Continue ongoing dialogue to promote cancer health equity for Blacks/African-Americans through collaborative events such as annual World Cancer Day event
THANK YOU!

To learn more, visit Cierra Sisters at:
https://cierrasisters.org/
Addressing Health Inequities in Prostate Cancer Care

Jefferson County Faith Based Alliance for the Advancement of Health Equity & O’Neal Comprehensive Cancer Center, University of Alabama, Birmingham
Jefferson County Faith Based Alliance for the Advancement of Health Equity

O’Neal Comprehensive Cancer Center University of Alabama at Birmingham

Co-Creating Solutions to Address Racism and Disparities in Oncology

Monica L Baskin, PhD
Cancer Center Partner

Rev Robert A Sellers, Sr
Community Partner

Verlon E Salley
Health System Partner
Background

- Prostate cancer (PCa) is the leading cause of new cancer diagnosis and second leading cause of cancer related deaths among African American (AA) men in the United States.

- Overall, African American/Black men-
  - develop prostate cancer at younger ages
  - have earlier transformation of prostate cancer to more aggressive disease

- Compared with non-Hispanic White men, African American/Black men-
  - have 75% higher rate of newly diagnosed cases
  - 2 times more likely to die
  - have higher rates in Alabama and Jefferson County

Understand barriers and facilitators to PCa screening and care

Increasing prostate cancer awareness and screening

Provide anti-racism and racial bias training to oncology providers
Jefferson County Faith Alliance for the Advancement of Health Equity

• A non-profit organization including over 150 faith-based organizations and leaders dedicated to advocacy and advancement of health equity and the achievement of healthy outcomes for all residents of Jefferson County, Alabama.

  ➢ Using church-based liaisons, identified men for participation in the needs assessment survey and focus groups.
  ➢ Offered space for project events/meetings.
  ➢ Hosted educational activities and prostate cancer screening opportunities.
UAB Health System

• Under the leadership of the Vice President for Community Health Equity, efforts have been made to form and maintain community relations; bring together diverse groups across the health system to address issues related to diversity, equity and inclusion; and the provide training to employees to mitigate racism, discrimination and bias.

  ➢ Facilitated the use of a four-session video training led by UAB faculty addressing:
    1. Health disparities in general and in Alabama
    2. Role of place in health
    3. Role of bias in affecting providers’ thoughts/attitudes/decision-making
    4. Anti-racism framework

  ➢ Members of the O’Neal Comprehensive Cancer Center have been encouraged by cancer center leadership to complete these trainings.
O’Neal Comprehensive Cancer Center

• One of only 51 National Cancer Institute-designated comprehensive cancer centers in the country. For over 25 years, the Office of Community Outreach and Engagement (OCOE) has focused on education and screening activities aimed at eliminating persistent health disparities.
  ➢ Managed the financial resources, developed and implemented the study protocol, collected and analyze study data.
  ➢ Facilitated prostate cancer awareness and education opportunities
  ➢ Partnered with UAB clinicians and community partners to increase access to prostate cancer screening
What We Learned

• Survey (N=116; average age 56.2 years)
  ➢ 53% no history of screening
  ➢ 39% with a family history of prostate cancer
  ➢ 44% scored a 6 or lower (out of 10) on the Prostate Cancer Knowledge Scale
  ➢ 32% expressed high distrust of the health care system
  ➢ 91% endorsed experiencing discrimination in 3 or more settings
  ➢ 41% reported the highest level of exposure to racism

• Focus Groups
  ➢ “Because the majority of [Black men] don’t even know nothing about it. They don’t even go to the doctor. They’re like me. I didn’t start getting sick until I was in my mid-fifties. I’m 65 now. You know? I didn’t never get sick so I didn’t ever worry about no checkup or nothing…”

  ➢ “I’ve known guys that won't even go to the doctor...had good insurance.”

  ➢ “I can't really trust, to an extent, the white doctor, even though they may be Harvard grads or whatever, Alabama grads or whatever, but I still can trust one that looks like me a lot more than the other.”
Other Essential Team Members

• Jefferson County Alliance
  ➢ Rev Dr. Michael Wesley, Sr
  ➢ Walter Jackson

• O’Neal Comprehensive Cancer Center
  ➢ Claudia Hardy, MPA
  ➢ Bolanle Bolaji, MD
  ➢ Derrick Flowers
  ➢ Marcus Glover
  ➢ Rodney Tucker, MD
Audience Q&A
Contact Information

• For information on the *Co-Creating Solutions to Address Racism and Disparities in Oncology* initiative, please reach out to:

  ➔ **Shilpa Patel**: spatel@chcs.org
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