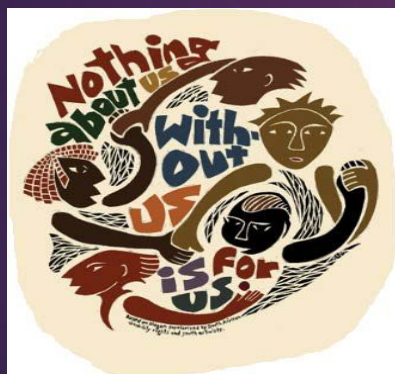


Institutional Humility & Engaging Diverse Communities in Cancer Research



KIM F. RHOADS, MD, MS, MPH, FACS

ASSOCIATE DIRECTOR FOR COMMUNITY ENGAGEMENT

UCSF HELEN DILLER FAMILY COMPREHENSIVE CANCER CENTER

1.28.2020

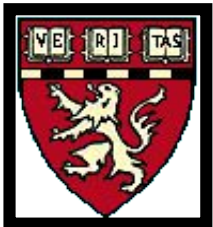
My background, training and experiences are diverse



BA '91: Linguistics
MS '93-96: Health Sciences



MD '93-98
Resident '98-'05: Surgery
Colorectal Fellowship '07
Health Policy Fellowship '08



MPH '06
Minority health disparities



**Assistant & Associate
Professor '08-'16**



**Board of Directors,
Bay Area Black Women's
Health Project ('93-'96)**



**Saturday School
for Community
Leaders ('95)**



**Community Based
Participatory
Research Training
('12)**



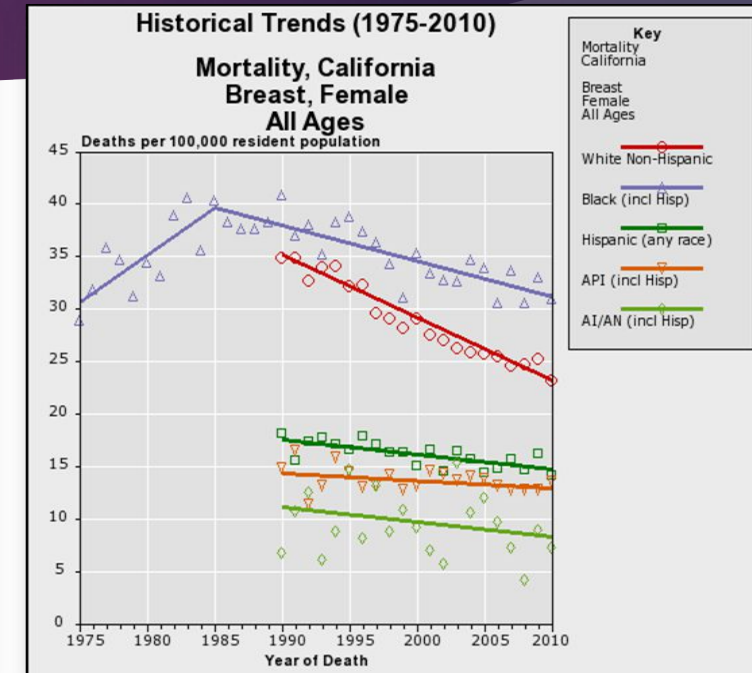
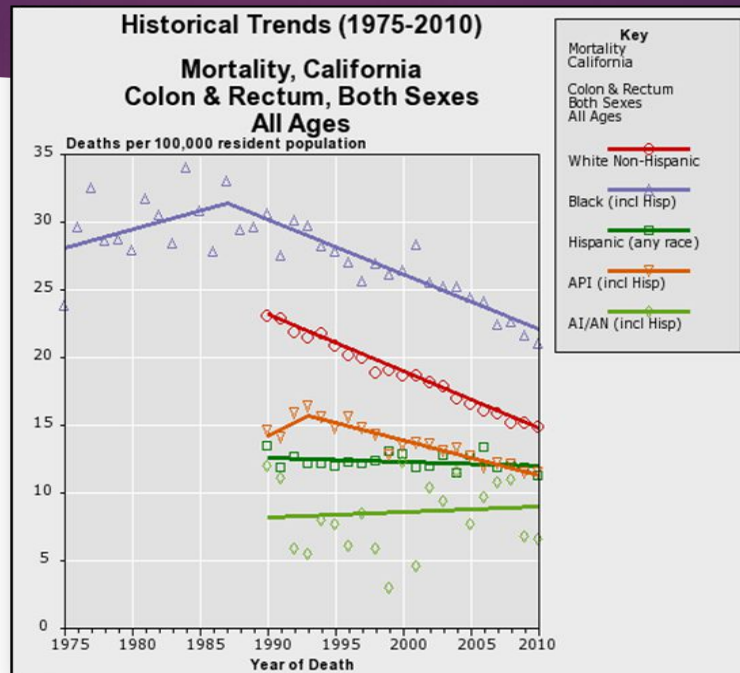
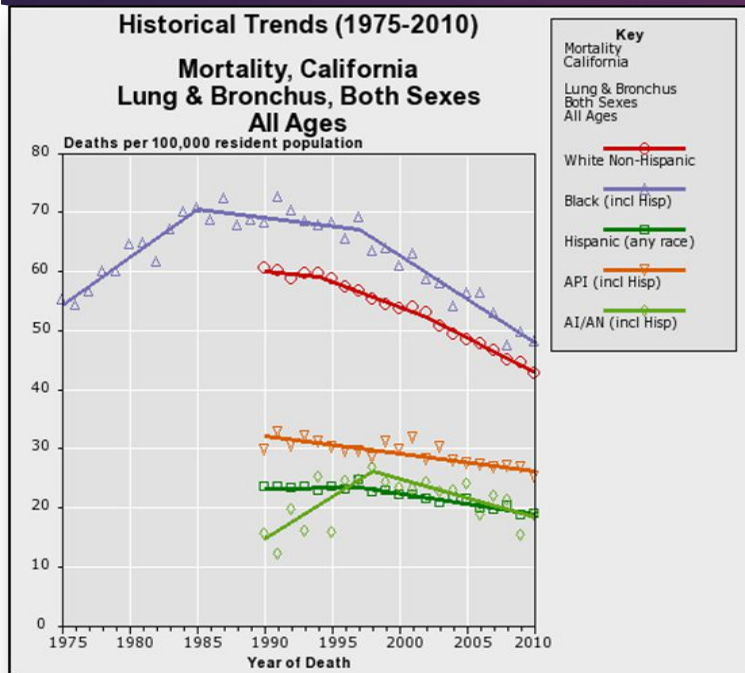
Jeannette Barnes (1935-1993)

Motivation for my work in health equity & disparities



- 58 years old
- Presented with a locally advanced breast mass (stage IIIB)
- Admitted for IV antibiotics; chemotherapy
- Died in the hospital
(never having received palliative radiation therapy)

Disparities in Cancer are Longstanding



NCI website: <http://statecancerprofiles.cancer.gov> last access 3/1/2015

Traditional explanations for disparities in cancer survival focus on the individual

Patient Characteristics

- ▶ Chronic disease/comorbid states
- ▶ Late stage at diagnosis

Insurance Status

- ▶ Lack of access to care contributes to poor outcomes

Genetic explanations

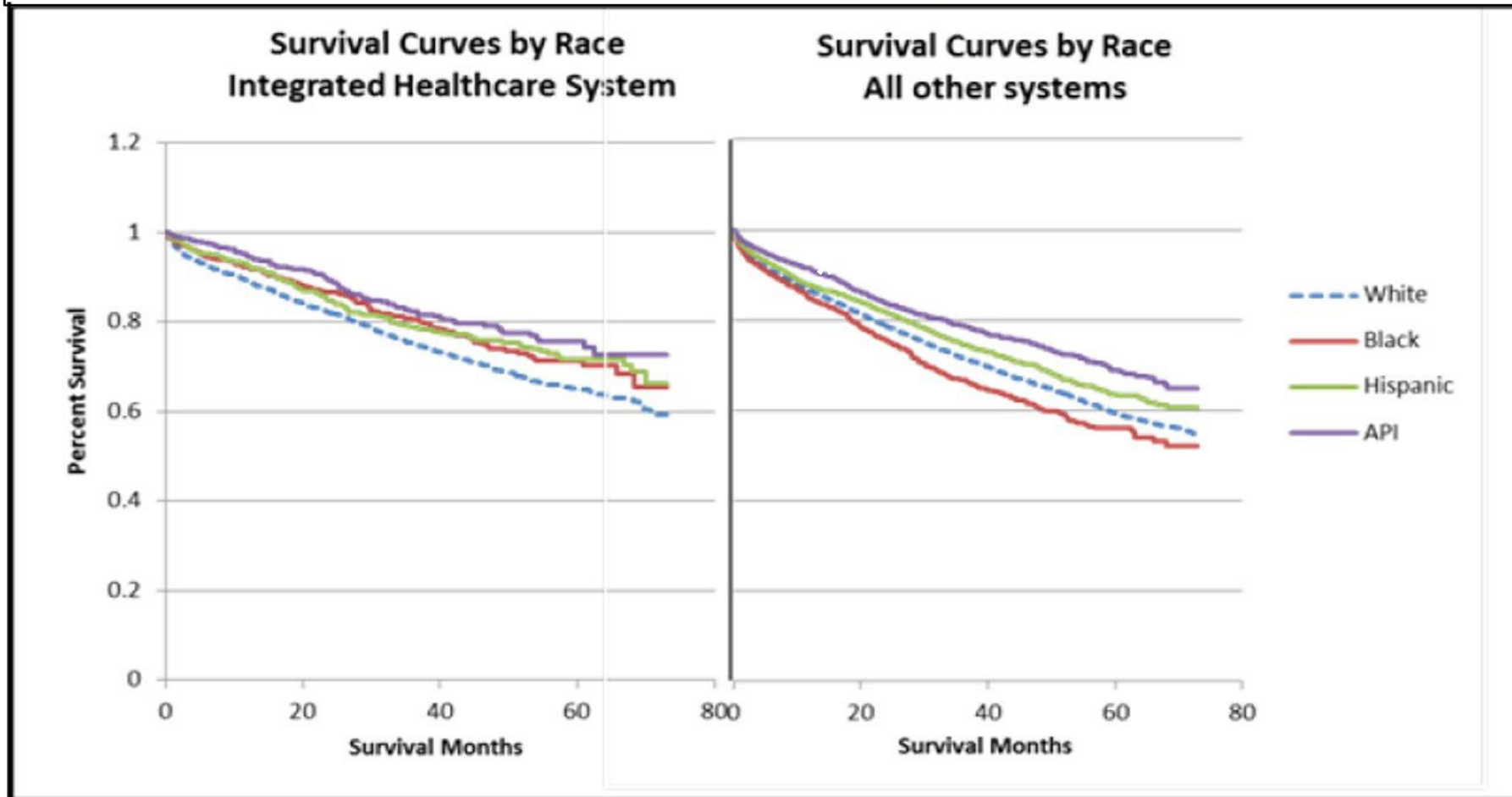
- ▶ Racial/ethnic minorities have more aggressive tumors



Health disparities are a
population level problem

No disparities in colon cancer survival within an integrated system

Kaplan-Meier Curves Comparing Survival by race/ethnicity in the integrated setting versus all other settings (Colon Cancer, stage I-III; California 2001-2006)



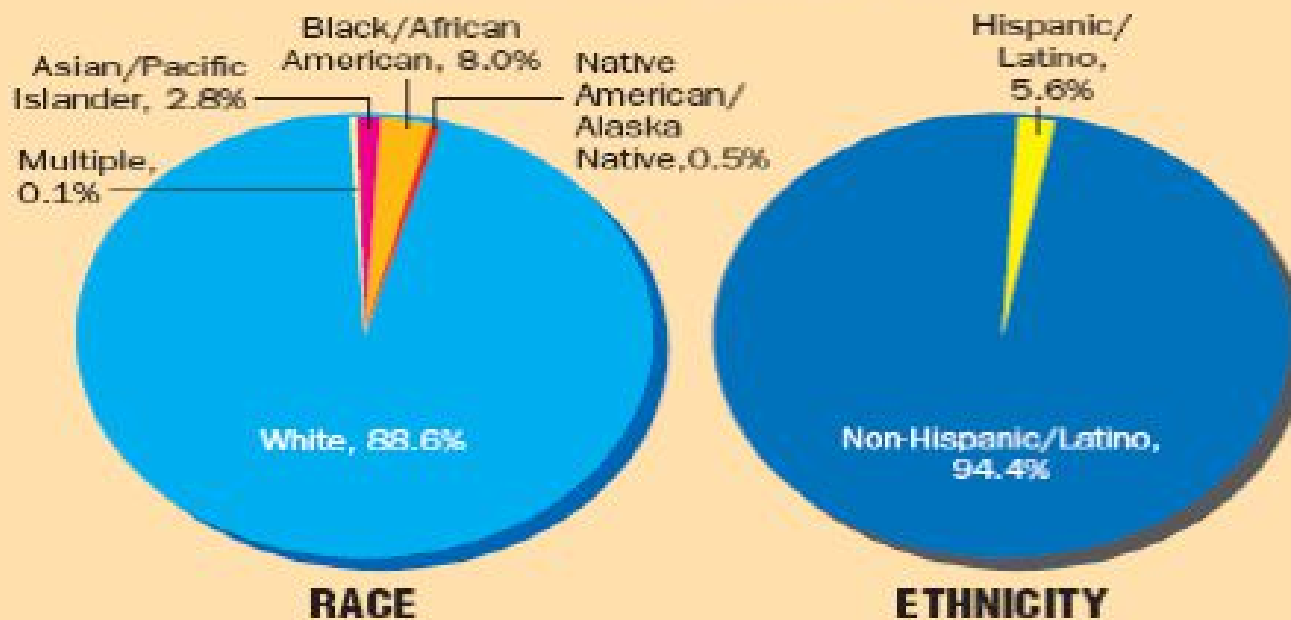
Rhoads KF &
Patel MI.
JCO 2015

Place Matters

**WHERE YOU GO
FOR CARE
DETERMINES WHAT
CARE YOU GET**

Racial/Ethnic Diversity is Low in Cancer Clinical Trials, Nationally

Enrollment by Race and Ethnicity
National Cancer Institute, Publicly Funded Cancer Clinical Trials
(Phase I-III Treatment Studies)
January 1, 2003 – June 30, 2005



Source: Baseline Study of Patient Accrual Onto Publicly Sponsored Trials, "Coalition of Cancer Cooperative Groups for the Global Access Project, National Patient Advocate Foundation, April 2006.

'Lack of Trust' is an
expected response to
(historically)
untrustworthy behavior

**FOOD FOR
THOUGHT**

Magnitude of structural & physician and patient barriers to inclusion

Methods:

- N=13 trials
- N=8800 patients

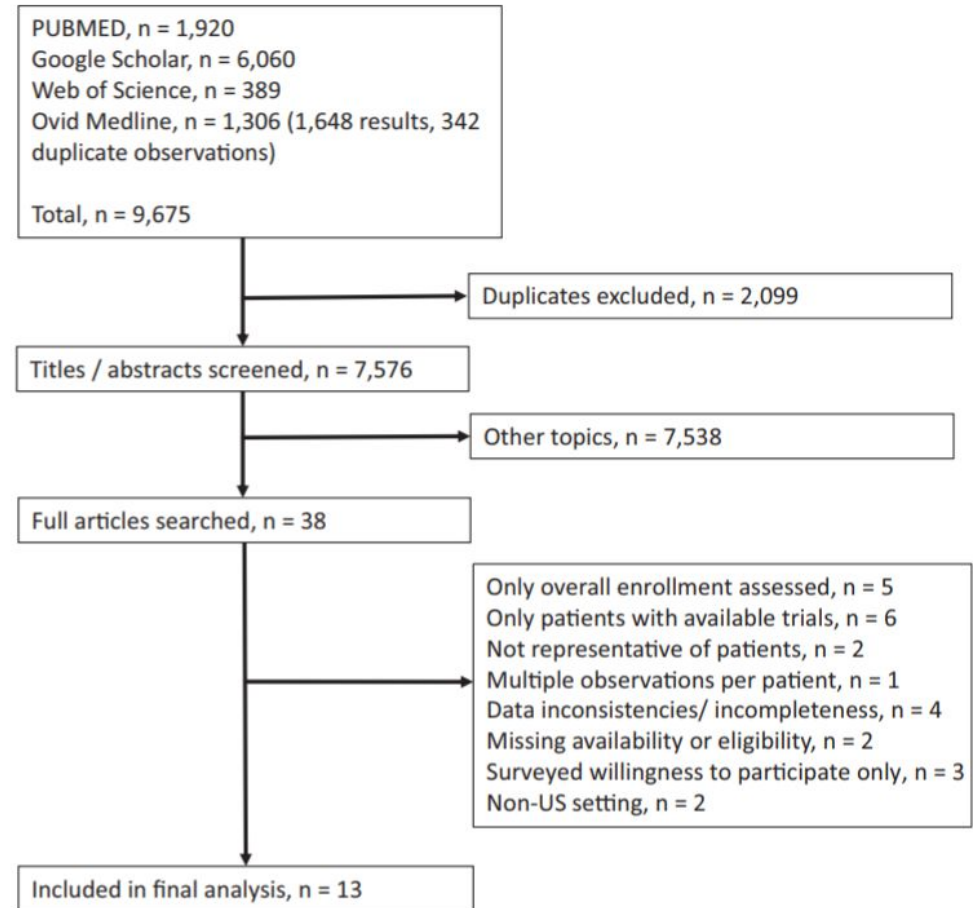
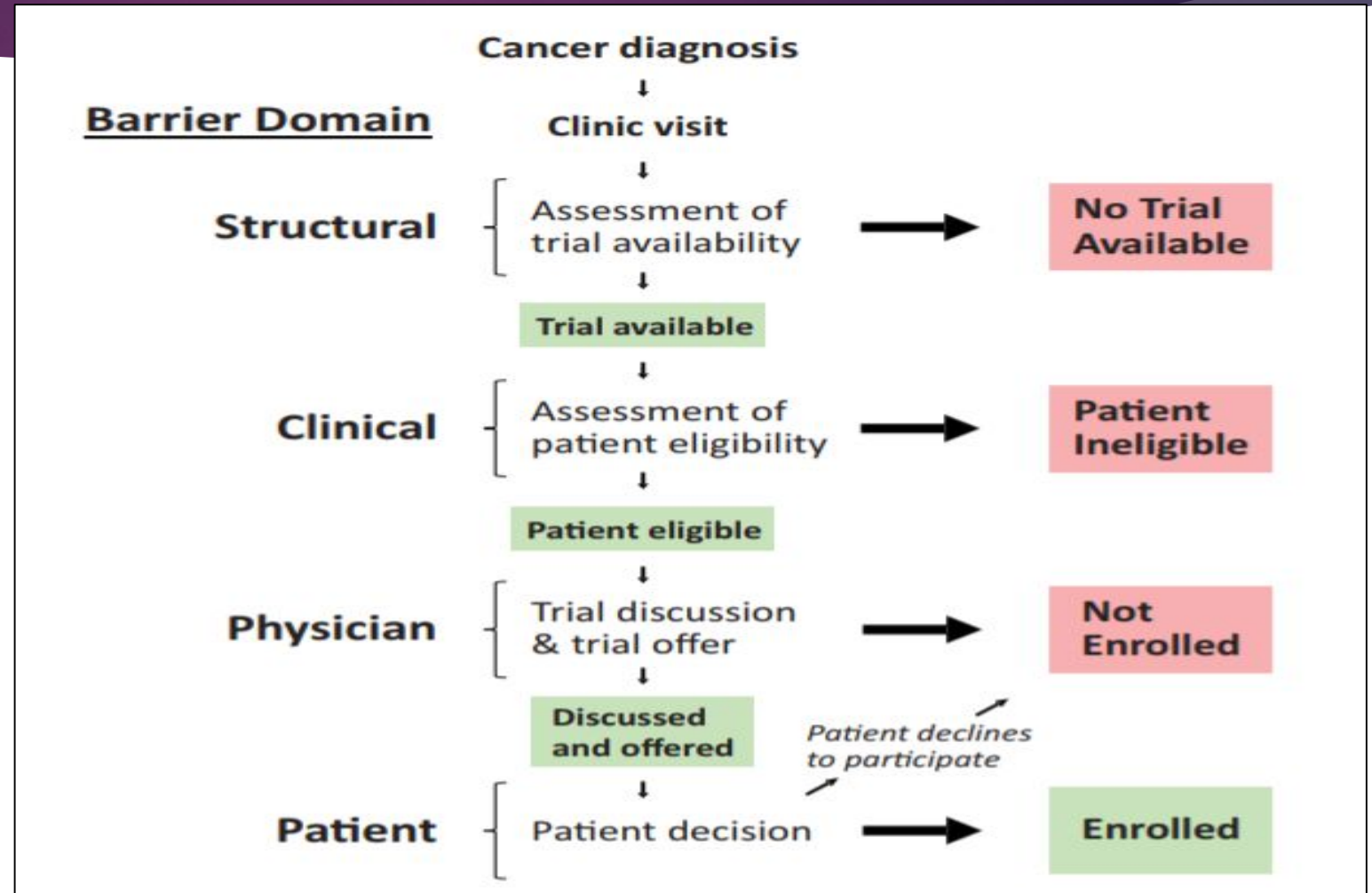


Figure 2. Selection of studies included in the analysis.

Magnitude of structural & physician and patient barriers to inclusion

Multi-level
determinants of
clinical trial
inclusion

Unger, et al. JNCI 2019



Magnitude of structural & physician and patient barriers to inclusion

252 | JNCI J Natl Cancer Inst, 2019, Vol. 111, No. 3

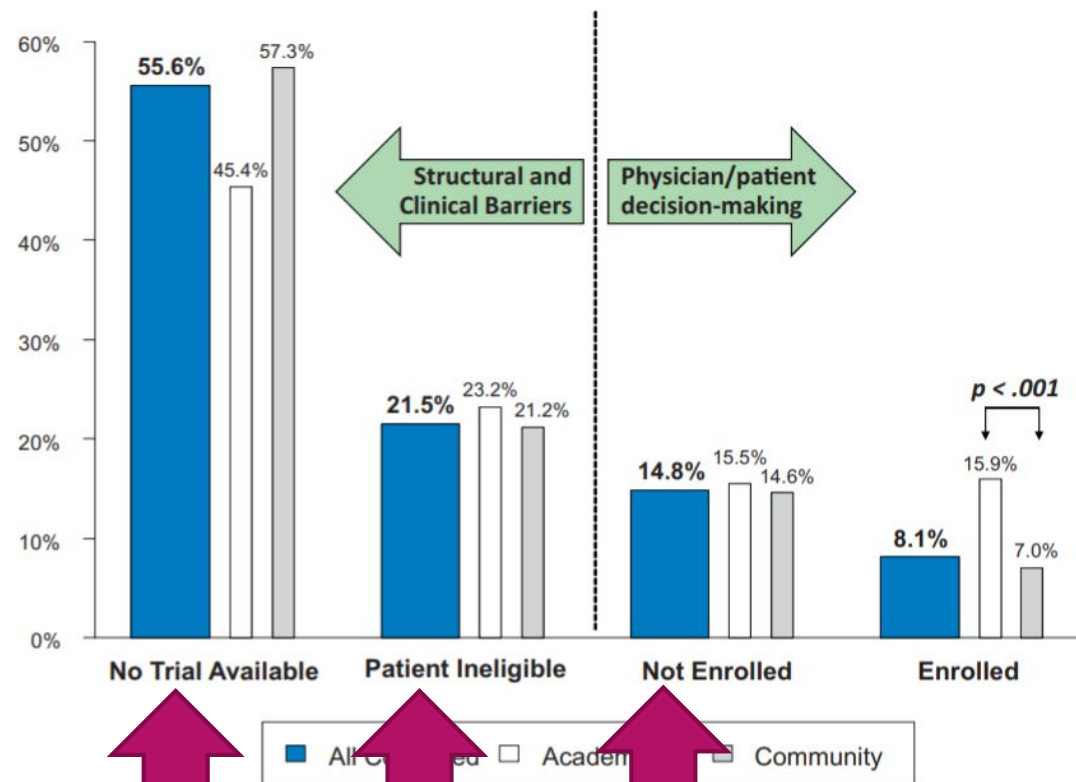
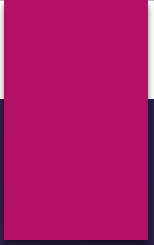


Figure 4. Magnitude of barriers for each domain for academic sites, community sites, and all combined. The P value was derived from a z score in a random effects model. A two-sided test was used.



Population level problems require system level solutions

Create Patient centered trial portfolios

- ▶ **Assess the match between available trials & patients**
 - ▶ Be intentional about the development of trial portfolios
 - ▶ Cancer Centers need to increase the efficiency of opening trials
- ▶ **Consider partnerships with community based care settings**
 - ▶ These settings serve a higher proportion of racial/ethnic minorities
 - ▶ But have a higher proportion of mismatch (patients to trials)
- ▶ **Leverage institutional opportunities to make participation appealing & feasible**
 - ▶ Community Advisory Board—consultation on trial design/recruitment approaches; cultural tailoring of materials
 - ▶ Patient Family Advisory Council—improving patient experience; reducing financial barriers, increasing financial transparency

The System Won't Change Unless We (Organize &) Demand It!



be the
change
you wish
to see in the
world...
-gandhi

UCSF Helen Diller Family
Comprehensive
Cancer Center

About

Office of Community Engagement

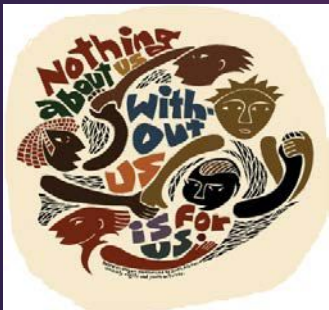
Office of Community Engagement

Working collaboratively
to eliminate the health disparities



Institutional Humility & Engaging Diverse Communities in Cancer Research

THANK
YOU!



UCSF Helen Diller Family
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