

# Abstract #193: Multidisciplinary Education and Action to Foster Equitable Cancer Care

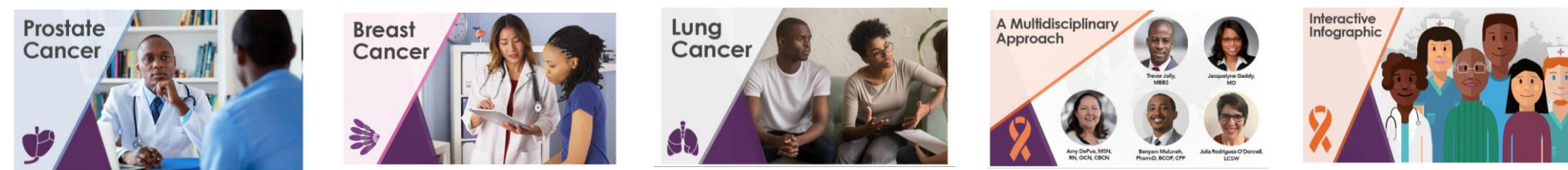
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## Background

- **Cancer care disparities:** when individuals with an identical cancer profile are not offered the same care option and the harm/benefit ratio to this option is identical<sup>1</sup>
- **Inequity:** when factors such as race, income or other socio-economic characteristics of a patient drive such disparities
- **Aim of educational intervention:** to increase healthcare professionals' (HCPs') **awareness** of cancer care disparities and **inspire action** to foster equitable cancer care

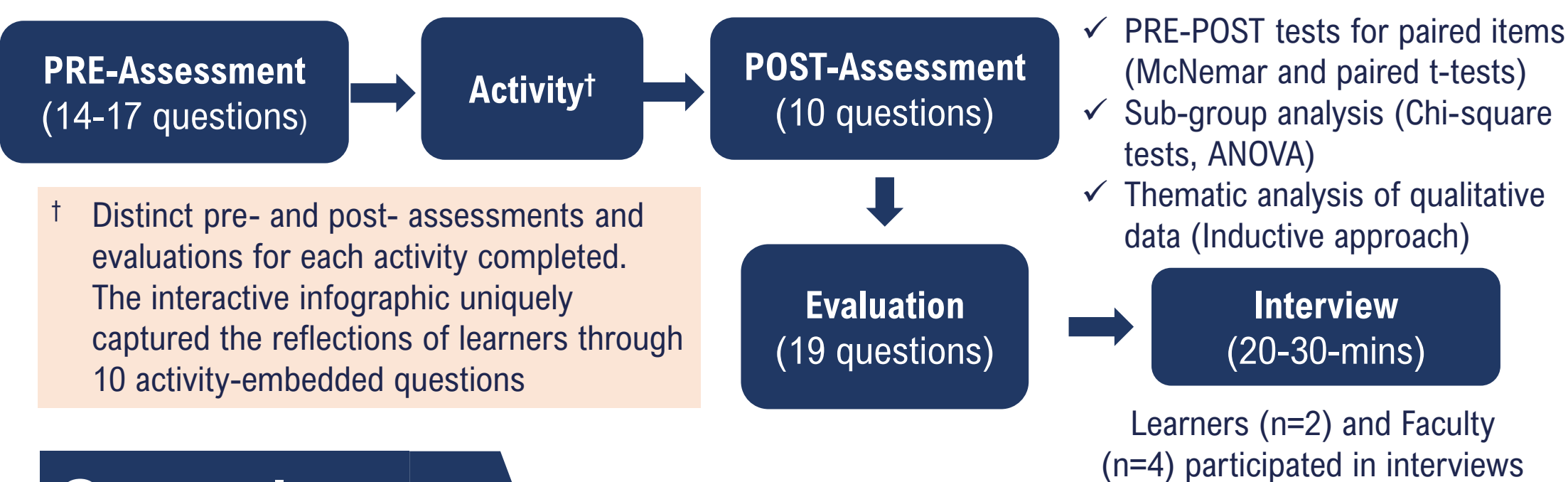
## Intervention & Methods

- **Three (3) journal activities with engaging case studies**
- **One (1) webinar (live & enduring online)**
- **One (1) interactive infographic**

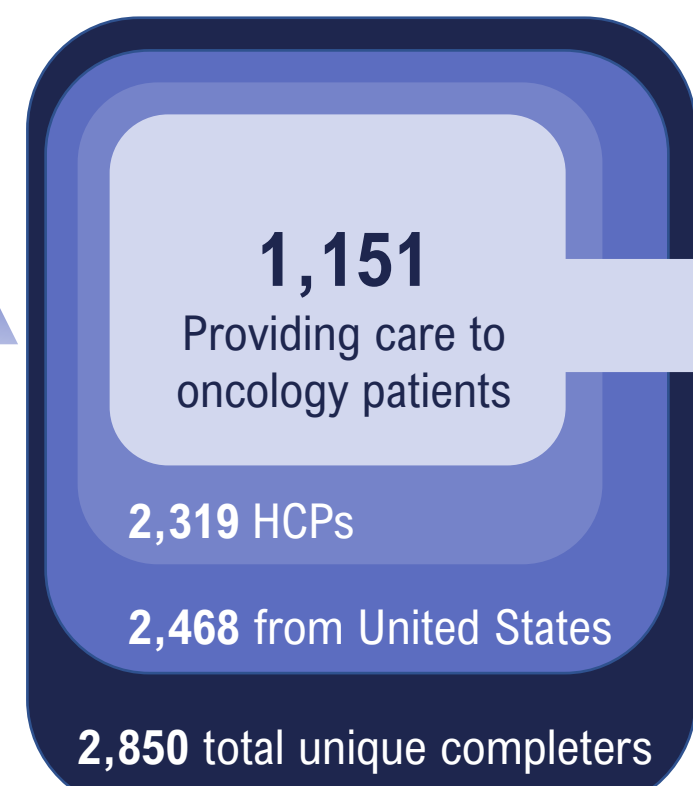


Deployed and evaluated November 2021 to December 2022

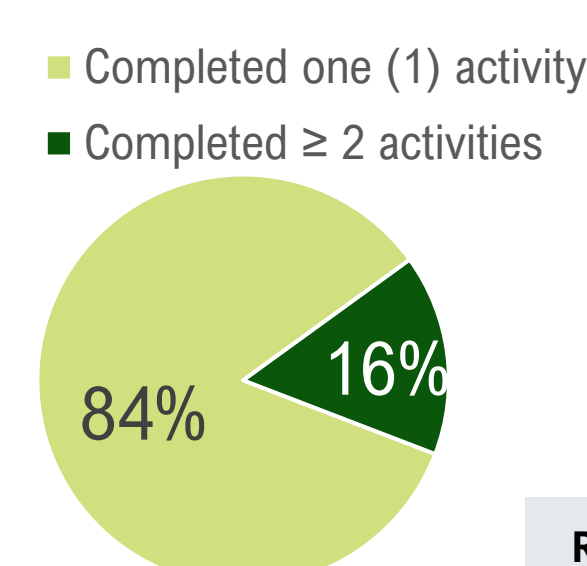
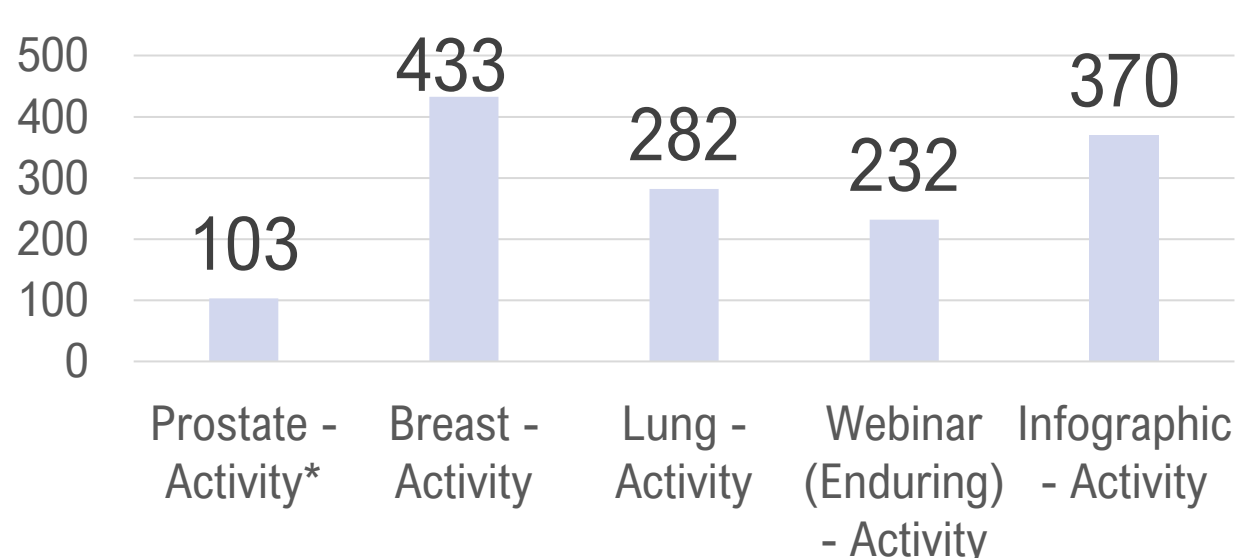
### Mixed-methods evaluation with longitudinal design



## Sample



### Target Learners by Activity (n = 1,151)



\*Prostate activity did not require participants to report involvement in oncology; n=103 are participants who confirmed involvement in other activity assessments.  
\*\*Profiles of participants who completed the live webinar (n=10) were not collected.

## Key Message / Conclusion:

### This 5-part educational intervention...

- ✓ Encouraged learning and reflection on factors driving disparities in cancer care
- ✓ Improved HCPs' knowledge and competency for identifying strategies that can tangibly enhance cancer care equity and resulting patient outcomes

A sensitization and problem-solving approach to addressing racial disparities during the activities reinforced:

- ✓ The importance of **multidisciplinary collaboration**

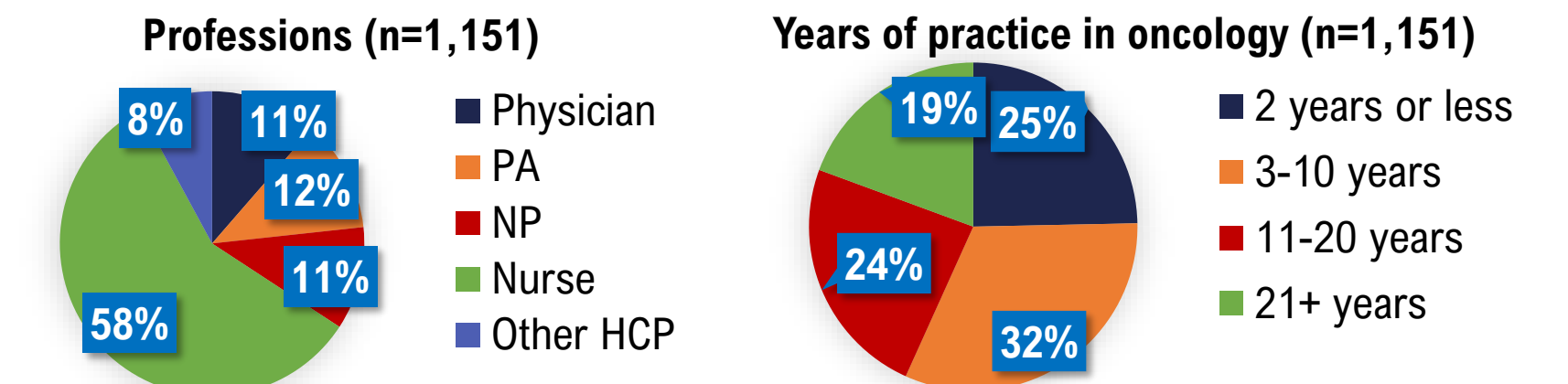
## Future Direction for Research

- **Monitor and address ongoing barriers** to ensure equitable cancer care is delivered to all cancer patients
  - **Opportunity for performance and quality improvement** research intervention:
    - ✓ Developed by oncology care team members based on local realities
    - ✓ With measurable action plans
    - ✓ Assessed for progress implementation and impact on patient health outcomes

## Results

### 1. Educational Reach

- **1,151 unique learners** from the US who are oncology HCPs
- **182 engaged in two or more activities** within the 5-part curriculum



### 2. Knowledge & Elicited Reflections

#### ABSOLUTE CHANGE PRE TO POST IN OVERALL KNOWLEDGE SCORE FOR EACH ACTIVITY

- Prostate article (n=97): **+56%**
- Breast article (n=399): **+22%**
- Lung article (n=269): **+38%**
- Webinar (enduring) (n=227): **+29%**
- Infographic (n=331): **+22%**

- **73% of responders in infographic (n=70)** recognized variance in patients' adherence to treatment plans, follow-up appointments and reporting of side effects in their practice setting due to:
  - Patients with different language, different ethnicity
  - Income / financial restrictions, homelessness
  - Transportation issues
  - Little to no implemented strategies to address barriers in clinical practice

### 3. Competence

**30%** More learners reported being confident at POST compared to PRE (n=1,151)

#### IMPROVEMENTS IN CONFIDENCE TO:

- ✓ Explain how healthcare disparities impact the diagnosis, treatment, and management of patients affected by cancer
- ✓ Address the personal factors impacting a patient's ability/willingness to pursue screening and/or treatment
- ✓ Identify practices that can foster equitable care to all patients affected by cancer

### 4. Practice Change & Barriers

- Open-ended responses from evaluation (n=1,151), questions embedded within infographic (n=107) and interviews (n=6) indicated:

#### STRATEGIES AND ACTIONS TO EQUITABLE CANCER CARE THAT LEARNERS PLAN TO IMPLEMENT:

- Multidisciplinary approach to care
- Open communication with patients to include frequent follow-ups
- Community outreach

*One thing is that right now, we're growing, and we don't have enough nurse navigators. I mentioned earlier, just the one social worker [...] there's not enough people per - the caseloads are too large*  
-Social Worker

*[I will] ask questions that are appropriate to the care of individual patients without assumptions that may be made about the patient and their home life, resources, or their desired outcomes.*  
-Oncology Nurse

#### BARRIERS TO ENSURING EQUITABLE CANCER CARE IS PROVIDED TO ALL PATIENTS:

- Lack of organizational support to adopting new approaches
- Lack of necessary infrastructure/shortage of staff
- Limited family support and/or caregiver participation
- Patients' mistrust of healthcare system and/or HCPs

**Reference:** National Cancer Institute (NIH). Cancer Disparities. 2022; Available from: <https://www.cancer.gov/about-cancer/understanding/disparities>.

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