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Background

- Low participation of Black, Hispanic, Latinx and other underrepresented racial/ethnic groups in clinical research remains a problem across the U.S.
- Recent studies have highlighted that stereotypes, assumptions, and bias play a role in lack of diversity in cancer trial participation.
- To help address this, the Association of Community Cancer Centers (ACCC) and American Society of Clinical Oncology (ASCO) piloted an implicit bias training program for clinical research teams.

Methods

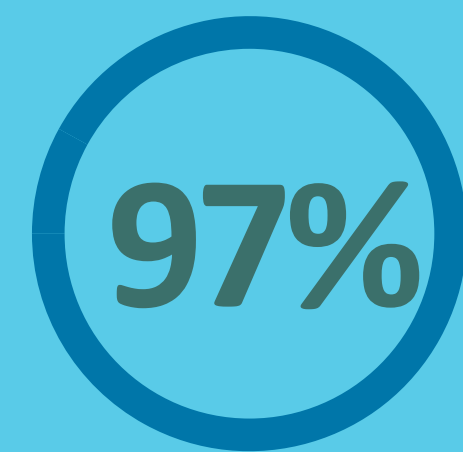
- Adapted from the Duke University *Just Ask™* program, the pilot program is comprised of eLearning modules which can be completed in about 60 minutes. A call was issued to member programs of both organizations.
- Features include education on diversity, equity, and bias in clinical trial participation, case vignettes, and strategies to mitigate disparities.
- After completing the training, all individual participants were asked to complete a retrospective pre/post survey to assess change in knowledge and attitude. Focus groups explored participants' experience with the training.
- Another survey was administered 6 weeks later to assess sustainability of changes in knowledge and attitude.

Results

- Research teams from 50 programs were selected for the pilot. 129 individuals consented, and 126 completed the training and evaluations (98% response rate).

Participant Demographics (n=119)	N (%)
Role	
Study Investigator/Enrolling Clinical Staff Member	49 (41)
Research Staff Member	40 (34)
Non-Research Staff Member	30 (25)
Years in Practice	
<5	41 (35)
5-10	25 (21)
11-20	25 (21)
≥20	28 (23)
Race/Ethnicity	
White	64 (54)
Asian American	21 (18)
Black or African American	16 (13)
Hispanic/Latinx	5 (4)
Multiple/Different Identities	13 (11)

Results



of participants were **extremely satisfied or satisfied with the overall course content**

- Most participants reported satisfaction with the course and indicated they would recommend it to a colleague and that they would recommend implementing it at their program.
- Suggestions to improve the course mainly concerned making the content more interactive.

Conclusions

- Pilot findings support the feasibility and utility of the training, which can help cancer programs to address disparities in clinical research.
- Next steps include modifying the course based on participant feedback, disseminating the training and supplementary resources, and exploring options for assessing the impact on upstream outcomes such as diversity in trial participation.



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ACKNOWLEDGEMENTS

This project was funded through Conquer Cancer, the ASCO Foundation by generous donors of the Equity, Diversity, and Inclusion Initiative. The authors thank participating research sites for their important contributions.

Results

Program Demographics (n=49 sites)	N (%)
Practice Type	
Academic Center	28 (57)
Hospital/Health System	17 (35)
Private Practice	4 (8)
Geographic Region	
South	21 (43)
Midwest	13 (27)
Northeast	10 (20)
West	5 (10)
Type of Area	
Urban	38 (78)
Suburban	8 (16)
Rural	3 (6)

Participant pre/post-training knowledge on key concepts

Key Concept	Mean Score Pre*	Mean Score Post*	Average % Change
Factors that result in lack of diversity in research	3.5	4.5	30%
Diversity and equity in health	3.6	4.5	26%
Difference between equity and equality	3.2	4.6	45%
Causes of health disparities	3.7	4.4	19%
How power dynamics shape interactions	3.5	4.2	21%

* Likert Scale (1=none, 5=excellent)

- 48% of participants reported that they had completed training on implicit bias and/or related topics prior to the pilot.
- Increased levels of knowledge were reported across all key training concepts, with an average % increase from 19% to 45%.
- Similar increases were observed for strategies for addressing implicit bias, with an average % increase from 10% to 31%.
- At 6 weeks post-training, there was a slight decrease in knowledge across most items, from -1% to -8%.