# 3, 2, 1, Go! Practical Solutions for Addressing Cancer Care Disparities

### Summary

Equitable outcomes and access to cancer care delivery in the United States are wildly variable across different populations. This is particularly true in the community setting where over 85% of cancer diagnosis and treatment occur, and an overwhelming number of underserved patients access the system.

To address the identified gaps, the Association of Community Cancer Centers (ACCC) along with the Global Healthy Living Foundation (GHLF), The Arizona Clinical Oncology Society, Hawaii Society of Clinical Oncology, and the Texas Society of Clinical Oncology have developed **3**, **2**, **1**, **Go!**—a groundbreaking community based education initiative that will help members better address the needs of underserved populations in these states.

As a part of the 3, 2, 1, Go! program, each state society will be tasked with aggregating  $\underline{\mathbf{3}}$  "goto" resources to advance equity in cancer care, make  $\underline{\mathbf{2}}$  recommendations to eliminate disparities in care, and identify  $\mathbf{1}$  major gap in care that they want to address.

With the support of ACCC and GHLF, the Hawaii Society of Clinical Oncology will focus on identifying and addressing disparities in care among the **Native Hawaiian and Pacific Islander** population.

## **Project Goals**

Through this initiative, we will empower oncology healthcare workers to:

- Identify and address challenges in providing care for underserved populations;
- Evaluate patient and provider perceptions regarding equity in access to care;
- Implement patient-centered approaches to increase guideline-concordant cancer screening among underserved populations;
- Develop interventions for promoting guideline-concordant treatment for underserved populations;
- Implement patient-centered communication strategies to overcome the informational barriers and close the disparities gap;
- Discuss relevant cancer clinical trial opportunities within the treatment plan for underserved populations; and
- Increase the quality of life and survivorship of patients with cancer from underserved communities.

We will collaborate with patient advocacy groups to empower patients and caregivers to:

• Advocate for personalized treatment options and inform treatment goals and priorities;

- Overcome cultural barriers and engage in shared decision making;
- Discuss cancer clinical trial opportunities with providers; and
- Review strategies for improving quality of life and survivorship.

#### A. Deliverables

As a part of this program, each state society will be tasked with setting up an Equity and Access Committee, aggregating and publishing state and local-level resources, implementing focus groups and surveys of patients and providers, hosting a health equity summit, and disseminating the resources and recommendations to promote equity in cancer care.

#### 1. Establishment of Equity and Access Committee

Each of the participating state societies will establish an Equity and Access Committee as part of their organizational structure. The purpose of this committee will be to oversee the 3, 2, 1, Go! initiative. Each society will be encouraged to include a wide range of providers from across the state to serve on the committee. In addition, relevant state patient advocacy agencies will be identified to participate in this program to ensure the representation of patient perspectives.

Committee meetings will take place at least once every other month, with duties and responsibilities performed during the intervening time. This committee will ultimately be responsible for setting the  $\underline{1}$  goal for this project, the  $\underline{2}$  recommendations for cancer programs and practices to implement, and the  $\underline{3}$  "go-to" resources.

Examples of recommendations for specific underserved patient populations:

Native Hawaiians and Pacific Islanders: Improving access to cancer care, patient
education on cancer screening, incorporating cultural values in health education and
services to enhance survivorship and quality of life.

#### 2. Aggregation of Local and State Level Resources

As part of the 3, 2, 1, Go! program, each of these state oncology societies will aggregate their local and state-level resources and place them prominently on their state society website. In addition, ACCC and GHLF will consolidate national best practices and policies relevant to the areas of interest for each state society.

#### 3. Focus Groups and Surveys

Each state society will conduct a series of focus groups and surveys of three distinct groups: 1. Providers across the state 2. Patient advocacy organizations serving the populations they are attempting to reach, and 3. Patients from the targeted communities.

The purpose of these focus groups and surveys will be to refine the two recommendations for programs and practices to implement and identify the main goal the state society wants to set. The results of the survey and summaries of the focus groups will be shared with all members of the state society and members of the impacted communities, when applicable.

#### 4. Health Equity Summit

The 3, 2, 1, Go! program implemented by each state society will culminate in a live Health Equity Summit organized by the state oncology society. This summit will bring together key stakeholders including members from the state oncology society, local and state-level patient advocates, and state and national level policymakers. The purpose of the Health Equity Summit is to promote the exchange of ideas to address disparities in cancer care for specific underserved populations, preview the recommendations identified for practices and programs by the Equity and Access Committee, and work collaboratively on setting the main goal for the state society to advance equity in cancer care.

### Timeline

Deliverable	Timing
Project kick-off	Jan 2021
Establishment of Equity and Access Committee	Mar 2021
Surveys and Focus Groups	May-July 2021
Aggregation of Resources	May-July 2021
Equity in cancer care virtual summit	Jan-Mar 2022
Webinar to disseminate learnings	Apr 2022
Final outcomes report	June 2022