

Evaluating the Western Pennsylvania Community Needs for Cancer Care, Education, and Treatment.

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Problem

NCI-designated comprehensive cancer centers are charged with identifying the major factors that characterize and influence the cancer burden in their catchment area (CA) to guide their outreach and research activities.

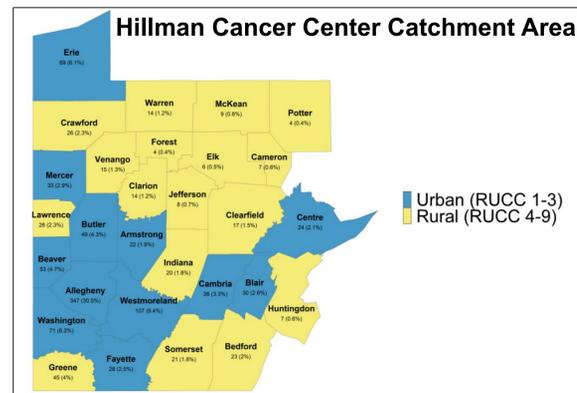
Objective

We sought to obtain beliefs and knowledge regarding cancer care, education, and treatment, specifically clinical trials (CT), across our 29-county CA population using an online survey based on the Cancer Focused Needs Assessment (CFNA) developed by the Mayo Clinic Comprehensive Cancer Center.

Methods

The CFNA included 105 questions on demographics, health and wellbeing, healthcare access, health information, cancer history, digital literacy, cancer CTs, and engagement with the cancer center. The CFNA was randomly distributed via SMS-text, phone-calling, and via COE outreach events from April 1, 2025-August 30, 2025. Eligibility criteria were 1) age 18-75 years and 2) primary residence in 29-county catchment area. Fraudulent and automated responses were minimized by implementing CAPTCHA verification, duplicate email/IP monitoring, and distribution specific QR codes. The respondent residential addresses were geocoded to confirm their county of residence and to determine their 2020 census tract and block.

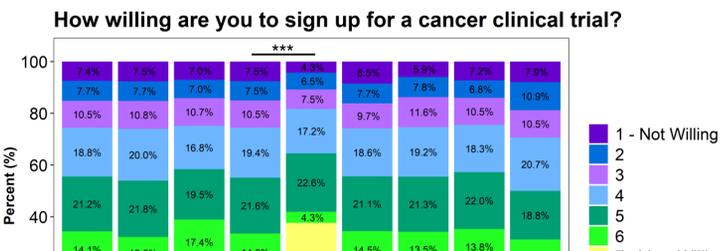
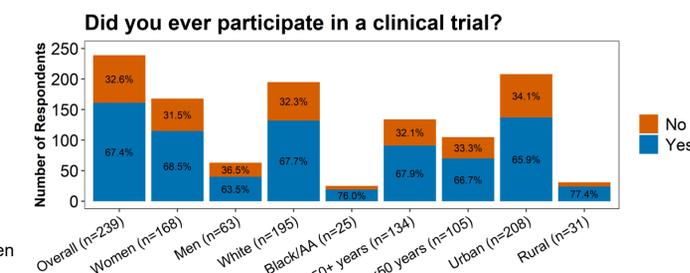
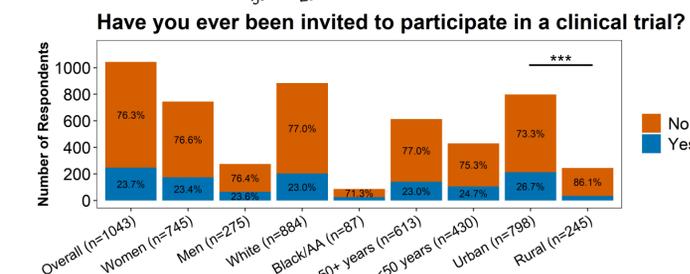
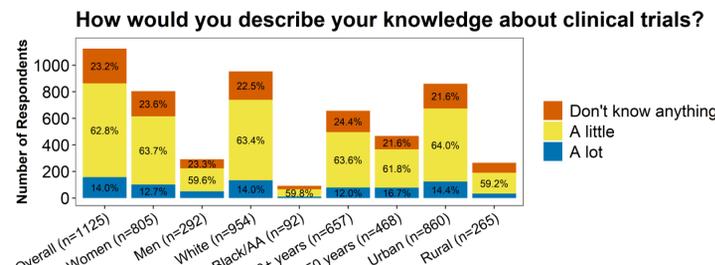
The results from this Cancer Focused Needs Assessment (CFNA) provide a survey of cancer-related attitudes and needs in western Pennsylvania, the catchment population of the Hillman Cancer Center. Respondents <50 years of age or identified as Black/African American were more worried about their cancer risk. Our CFNA also revealed a strong interest among respondents, especially among those identified as Black/African American, to learn about their genetic risk to develop cancer. Additionally, respondents from rural areas were less likely to have ever been invited to participate in a clinical trial.



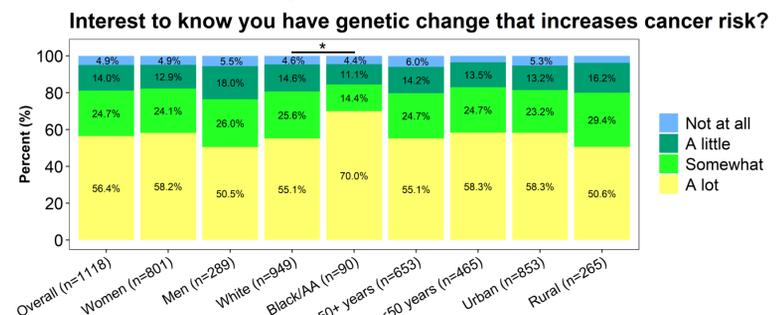
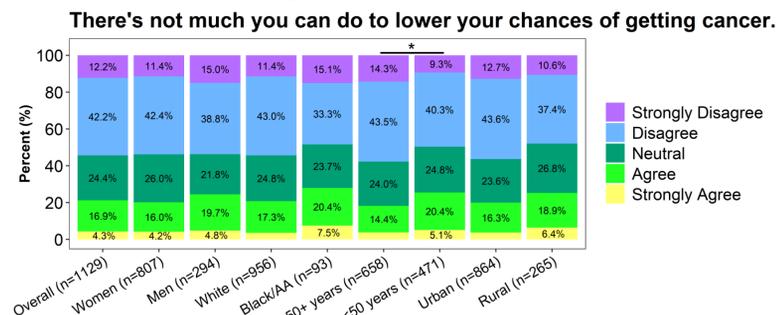
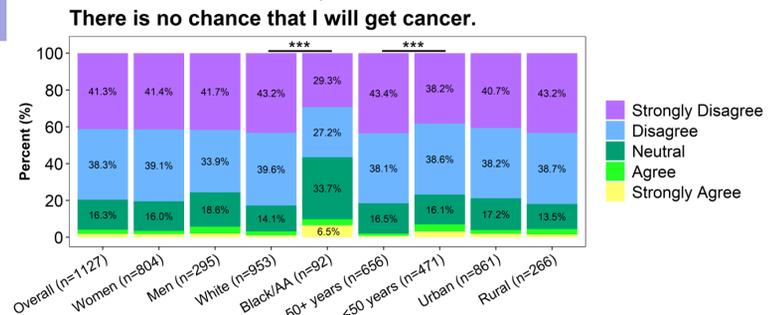
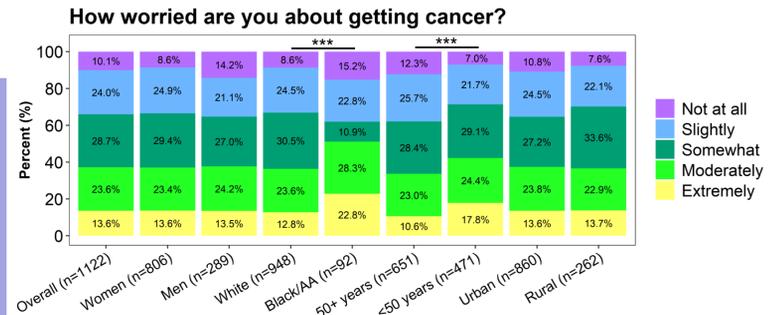
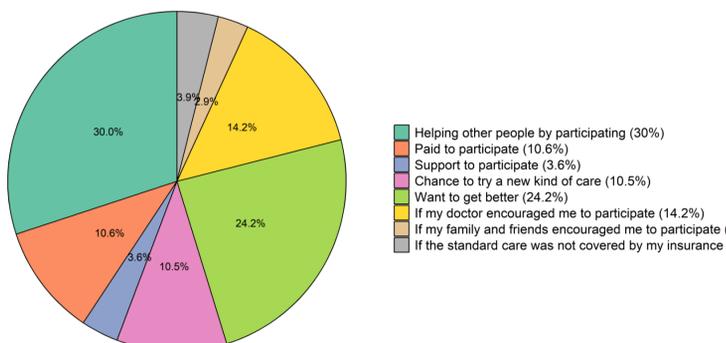
While 6% of the catchment area population identifies as non-Hispanic Black or African American, 8% respondents were non-Hispanic Black (n=89). Participation of respondents from rural areas of our catchment area reflected the population distribution (21% of catchment area vs. 23% of respondents). Over a quarter of respondents reported experiencing financial toxicity.

Almost a quarter of respondents did not know anything about clinical trials. Respondents residing in urban areas were 2.3X more likely to be invited to participate in a clinical trial compared to respondents residing in rural areas. Respondents who identified as Black/African American were more willing to want to participate in a cancer clinical trial. Two thirds of respondents were at least somewhat worried about getting cancer; ~45% thought there was nothing you could do to lower chance of developing cancer.

SELECTED 2025 SURVEY RESPONDENT CHARACTERISTICS	
N	1137
Age (years), mean (standard deviation)	52.0 (14.9)
Men, N (%)	298 (26.9%)
Black/African American, N (%)	93 (8.2%)
Hispanic (all races), N (%)	35 (3.1%)
Rural residence, N (%)	266 (23.4%)
SOCIAL AND ECONOMIC	
Rent home, N (%)	255 (23.2%)
Education level, N (%)	
High school or less	227 (20.1%)
Some college	326 (39.0%)
College	342 (30.3%)
Post grad	232 (20.6%)
Annual Income, N (%)	
0-20,000	114 (11.4%)
20,001-50,000	246 (24.6%)
50,000-100,000	324 (32.4%)
100,000 +	315 (31.5%)
Experiencing Financial Toxicity, N (%)	
Finding it very difficult on present income	97 (8.9%)
Finding it difficult on present income	170 (15.5%)
Getting by on present income	413 (37.8%)
Living comfortably on present income	416 (38.0%)
HEALTH AND CANCER	
History of Cancer, N (%)	339 (30.2%)
Family History of Cancer, N (%)	821 (72.2%)
Overall health, N (%)	
Poor	38 (3.35%)
Fair	166 (14.6%)
Good	489 (43.1%)
Very Good	351 (30.9%)
Excellent	91 (8.0%)



Which of the following would influence your decision to participate in a clinical trial?



The results from this CFNA provide a baseline assessment of cancer focused needs in western Pennsylvania. Respondents' strong desire for genetic testing indicates that this could be incorporated into patient risk profiles and community outreach. Future directions include comparing results with other cancer centers' CFNAs, improving recruitment of men and younger populations in subsequent assessments, and conducting follow-up surveys.

Funding

This project was supported in part by NIH/NCI P30CA047904.

Acknowledgements

We would like to thank Dr. Folakemi Odedina, Deputy Director for Community Outreach and Engagement at Mayo Clinic, and her team for developing and sharing the CFNA survey to administer to our population. Additionally, Scott Beach and Robert Keene from the Pitt University Center for Social and Urban Research helped develop the approach and logistics for survey distribution.

Note: Chi-square tests were utilized to evaluate differences in distribution in responses between groups. P-value thresholds correspond to p < 0.05 (*), p < 0.01 (**), and p < 0.001 (***).