Research Navigation Program to Enhance Diversity

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Background
Texas has significant cancer disparities and over 4.2 million people living in poverty.
- 16.6% of Texas population lacks health insurance (48.9% of Hispanics, 26.5% of Blacks, and 14.0% of Whites lacking insurance).
- These disparities contribute to
  - late-stage cancer diagnoses
  - lower survival rates
  - lower clinical trial participation due to high out-of-pocket expenses.
- Cancer clinical trials suffer from under-enrollment, with less than 10% minority participation.
- Patient-level barriers—financial constraints, fear, medical mistrust, and discrimination persist.
- Combining financial reimbursement with patient navigation increases patient accrual to cancer treatment clinical trials.
- Patient navigation initiatives can reduce disparities in minority participation in clinical trials.

Program Background
MD Anderson was a member of Project EMPACT (Enhancing Minority Participation in Clinical Trials); a national consortium formed to develop and implement a coordinated approach to address minority accrual into cancer clinical trials across multiple levels.
- Project EMPACT was modeled after University of Alabama-Birmingham (UAB)’s cancer center-based patient navigation program, aimed to provide equal access to clinical trials for low-resource and minority patients by helping them overcome barriers to participation and navigate through the healthcare system.
- The MD Anderson’s Center for Community-Engaged Translational Research (CCETR) staff were trained on this patient navigation model, trained and supervised the EMPACT site patient navigator at MD Anderson.

Objective
CCETR has Research Navigation Program To Enhance Diversity aims to
- aid patients with enrolling in a new therapeutic clinical trial or continuing participation in one
- improve patient understanding of clinical trials, facilitate access, and address post-enrolment concerns to ensure retention and completion.

Methods
We completed 16 interviews with departmental program chairs to learn more about how we can better support researchers/clinic staff in increasing racial/ethnic accrual:
- Understand how patients are put on trials, with recruiting diverse patients on trials
- Providing education on clinical trials
- Connecting patients with hospital services and community resources like the Lazarex IMPACT/CARE Program
- Serving as a contact for hospital support services and clinical trial participation

Results
The MD Anderson research navigation and reimbursement program, initiated in October 2020, has shown promising results.

Prioritized clinics: Identified clinics with prominent disparities and interested in implementing program:

Program Start Date: 6/2021
Genitourinary Medical Oncology
Investigational Cancer Therapeutics
Lymphoma/Myloma
Thoracic/Head and Neck Medical Oncology

Results
- 265 Patient Referrals
- 214 (81%) Received Research Navigation Services
- 113 (53%) Patients Approved for Lazarex FRP
- 64 (57%) Patients receiving reimbursement totaling ~$208k

Most Requested Research Navigation Services
- Assistance with Transportation
- Lazarex Financial Reimbursement Program and Services

Conclusion
Future efforts could focus on
- expanding the reach of the patient navigation program, evaluating and refining the program based on patient outcomes and feedback,
- providing sustained financial support for equitable access to clinical trials.

Currently, we are expanding the program to Lyndon B. Johnson (LBJ) MD Anderson Outpatient Clinic.

References