Category: Community Outreach and Engagement, and Community Representation and Inclusion – Completed Project

My Opción: Enhancing Access to Cancer Clinical Trials and Education in the Hispanic/Latino Community Through Community Engagement

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1. Background

The Knight Cancer Institute (KCI) is Oregon's only NCI-designated comprehensive cancer center across Oregon. Thirty-three percent of the catchment population lives in rural areas, and the Hispanic/Latino community is the fastest-growing demographic, representing 15 percent of the population. Despite a significant cancer burden among Hispanic/Latinos, participation in clinical trials is low (<5 percent in 2021). This disparity reflects non-biological barriers, including language, cultural mistrust, limited awareness, and systemic access obstacles. Addressing these challenges requires culturally responsive, community-centered strategies that prioritize trust, accessibility, and meaningful engagement.

2. Goals

Mi Opción, a project funded by the Genentech Health Equity Innovation Fund, was designed to increase engagement and participation of Oregon's Hispanic/Latino population in interventional cancer clinical trials. Secondary goals included identifying community-specific knowledge gaps and barriers, delivering culturally and linguistically tailored education about cancer care and clinical trials, and improving patient experience and care coordination through culturally mediated navigation.

3. Solutions and Methods

Three sequential, community-informed initiatives were implemented. The first initiative consisted of five structured community conversation forums conducted in Spanish across the catchment area and stratified by age, gender identity, and rural versus urban residence. These forums assessed understanding of clinical trials, perceived barriers, and opportunities for engagement. Initiative 2 used insights from the forums to develop culturally tailored educational materials addressing cancer care and clinical trial participation. Content was refined through a Community Engagement Studio, where community experts advised on messaging and format. Materials were disseminated via multimedia campaigns in partnership with a Latino-owned media company. Initiative 3 embedded a bilingual, culturally trained patient navigator within KCI care teams to support Hispanic/Latino patients from referral through treatment, including clinical trial decision-making. Project success was measured using quantitative and qualitative metrics, including changes in Hispanic/Latino clinical trial enrollment and engagement with educational content.

4. Outcomes

Five community forums were held across two metropolitan, one suburban, and two rural locations, engaging 55 Spanish-speaking participants (20 male, 35 female). The median age was 43 years (range 18–74). Participants identified key barriers, including cancer-related stigma, misinformation, language and literacy challenges, limited access to screenings and specialists, financial stress, and mistrust of healthcare systems. Eighteen short Spanish-language cancer education videos were produced and disseminated via social media, television, and radio audio formats. Since launch, these materials have achieved more than 50,000 views and supported partnerships with the Ventanilla de Salud of the Mexican Consulate and two federally supported community health centers serving farmworker and immigrant populations. Hispanic/Latino participation in interventional cancer clinical trials at KCI increased from 4.9 percent in 2022 to a sustained 10 percent during 2023–2025. The project also strengthened institutional–community relationships, increasing Hispanic/Latino representation on advisory boards, steering committees, and research advocacy teams.

5. Lessons Learned and Future Directions

Future efforts will focus on evaluating the impact of a culturally tailored Patient Navigator Program, expanding access to educational materials beyond the catchment area, and adapting this model for other historically underserved populations. This project demonstrates that intentional Clinical Research–Community Outreach and Engagement (COE) partnerships can produce measurable, sustainable improvements in equity and access to cancer clinical trials.