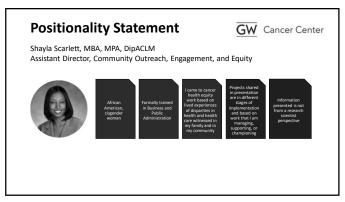
Boots on the Ground: Practical Tools and Ideas for Addressing Health Equity

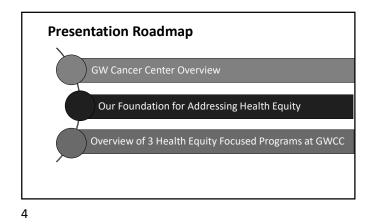
Shayla Scarlett, MBA, MPA, DipACLM Assistant Director, Community Outreach, Engagement and Equity GW Cancer Center Washington, DC

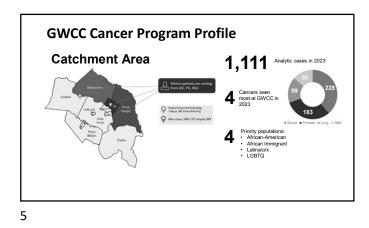
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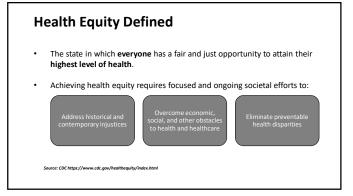
Disclosures

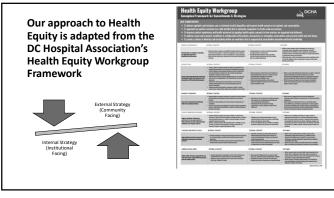
Our SCREEN Project is funded by Gilead Sciences



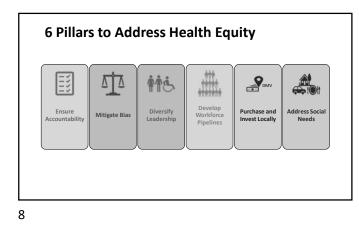






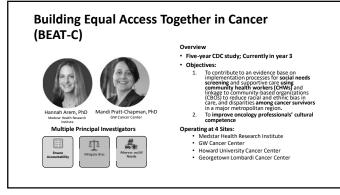


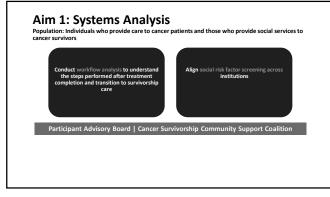
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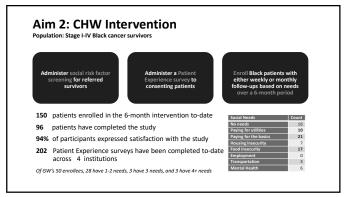




Building Equal Access Together in Cancer (BEAT-C)







Aim 3: Mitigating Bias and Creating Systems Change Population: Clinicians and staff who are patient-facing with cancer survivors across the participating institutions University of Diversity, Equity Clinicians and staff who are patient-facing with cancer survivors across the participating institutions University of Diversity, Equity Clinicians and staff who are patient-facing with cancer survivors across the participating institutions University of Diversity, Equity Systems control of Diversity, Equity Systems co

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Lessons Learned To-Date

- Audit the system that you are seeking to introduce an intervention in to understand how things are functioning in practice to identify if there are any process gaps; develop contingency plans to address any identified gaps
- Operate with an agile mindset when seeking to implement a systems change; Evaluate and do not be afraid to shift approaches when necessary
- Ensure that you have champions to advocate for your work
- Remember the mantra "Nothing about us, without us" Community engagement is key at all project stages
- Remember to concisely document program changes, improvements, or shifts in strategy in real time
- Diligently following up with key stakeholders is a must to get to your optimal reach
- Share your story with internal and external stakeholders to help build community and trust
- Having a community of practice across institutions invites shared learning, innovation, and support

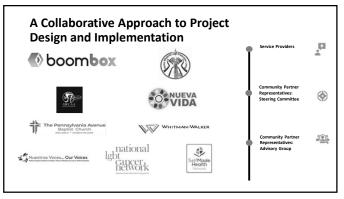
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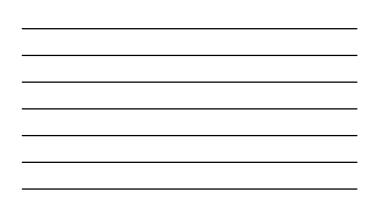
Strengthening Community Reach and Equity by Engaging Neighborhoods (SCREEN)

Strengthening Community Reach and Equity by Engaging Neighborhoods (SCREEN)



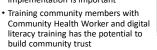






Lessons Learned To-Date

- Complex programs require ample time to fully implement
- Community collaboration in every aspect of program design and implementation is important





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Strategies for Advancing Sexual Orientation and Gender Identity (SOGI) Data Collection in Cancer Research

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Strategies for Advancing Sexual Orientation and Gender Identity (SOGI) Data Collection in Cancer Research



Sub-Committee Process for Advancing Sexual Orientation and Gender Identity (SOGI) Data Collection in Cancer Research



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Q1. Which of the following	Table 1. Original and Ravised SODI Items and Rationale for the Care Questions						
	Gentruct	Original Item	Original Response Options	Searce	Revised Texts	Rovised Response Cytome	Rationals
best represents how you think of yourself? [Check all that apply]:	Secul anieration	Minish of the References represents have your think of yourself (Seleen Okt))	- Leditor or gro - Straight (but is, next Technica or got) - Baenad - Fanenad - Fane Spirit - Fane Adflerent - Fane Adflerent - Spirit - Rock nachts - Spirit - Spiri	AddM Contrines	(c), which of the following bear represents here you think of yourself? [Could all that explu);	Brought is transmissed Ladease or pay Resenant Streament is AVAVC[Inso-Specified Jose 20/December 3. AVAVC[Inso-Specified Ladea 20/December 3. AvaVC[Inso-Specified Josef 2. AvaVVC[Inso-Specified Jo	The convertises that it leads to reprint the questions at the time mapping of the quegations would have their a aroune at the top of the requirement option like. The abox changed the individues to a abox requiredness to those at the explosition quegations are aption has been personnel as grant attribution therein to non LGETELAN requirements.
 Straight or heterosexual Lesbian or gay Bisexual 							For the option of Two Sprit for Anarctan Index/Nexts Techa Indextuals, please rore this is a maken park-Index term and not indextuals will seerify with this description.
 Bisexual [If respondent is AIAN:] Two-Spirit I use a different term [free text] I don't know Prefer not to answer 	Sex aniquest aclarity.	Shut so were no anigned at Soth, on pror organi term sentificate?	- Pertain - Mala - Mala - Conflicte and - Perfect not be answer	NOOM Sathdree	(2). What we were you assigned ectority, so your original latits certificand.	Fensile Mult Sourching artis (for complex ")," the legit despetition used in some states) (dark Naroc Foller not to ensure	In order to prove fue subling, the committee added is their option, their contrasts with a size makes other them Malko or invested to use appropriate request added and adding an option. For "concerning des", such as a concerning des- ress address of the addition of the concerned for addition in the future. A loss on system in some provided as an option in some provided as an option in some

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Lessons Learned To-Date

- Sometimes it is important to just start a task rather than wait for conditions to be perfect; Roll out SOGI questions in any new project that you are starting to help advance cancer research and clinical practice
- · Seek champions at different levels within the institutional system to advocate for collection of SOGI data
- Be responsive to feedback immediately, when possible
- Document reasons for non-disclosure (use optional question to document)
- Optimize system alignment for data flow across systems

Key Takeaways

- Health disparities do not exist in a vacuum; You must acknowledge structural racism and its impact on health outcomes
- 2. You must **optimize your data collection processes**; Probe deeper to get to the root causes of problems
- 3. Change starts when you **embed a health equity lens** in the fabric of everything you do (policies, hiring, communications)
- 4. Health equity is **intersectional;** there is no one size fits all approach
- 5. Community engagement must be at the center of every initiative or research project

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Resources

Trainings

- Implicit Bias: A Practical Guide for Healthcare Settings
- <u>Together, Equitable, Accessible</u> <u>Meaningful (TEAM) Training</u>
 <u>Oncology Patient Navigation</u> <u>Training: The Fundamentals</u>
- Toolkits & Resources
- <u>Diversity, Equity, Inclusion, &</u> <u>Justice Implementation Toolkit</u>
 <u>Barriers to Care Road Map</u>
- Patient Navigation Guide



Thank you!