

# Cancer Health Equity Committee Strategy Overview

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AMERICAN SOCIETY OF CLINICAL ONCOLOGY

# What is a health disparity?

- *“differences in the **incidence, prevalence, mortality, and burden** of diseases and other adverse health conditions that exist among specific population groups”-NIH working group on health disparities*
- *“Differences in health **outcomes** between groups that reflect social inequalities”-CDC*
- *“Differences in health outcomes that are closely linked to **social, economic, and environmental disadvantage**—often driven by the conditions in which individuals live, learn work and play”--WHO*

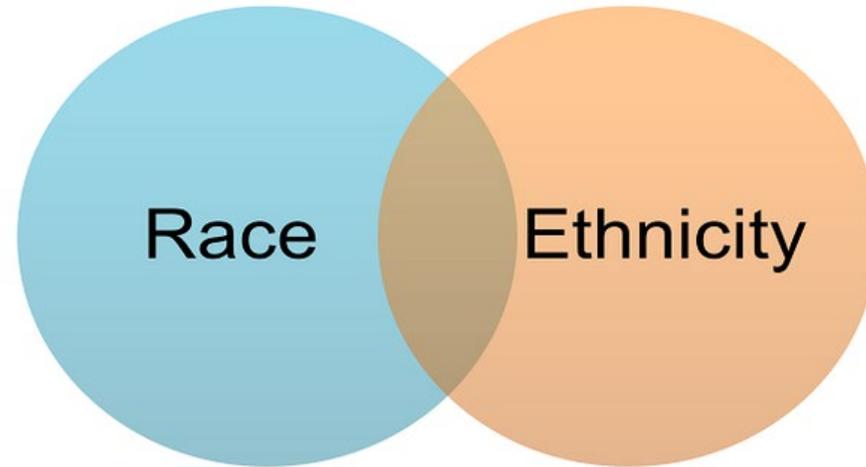
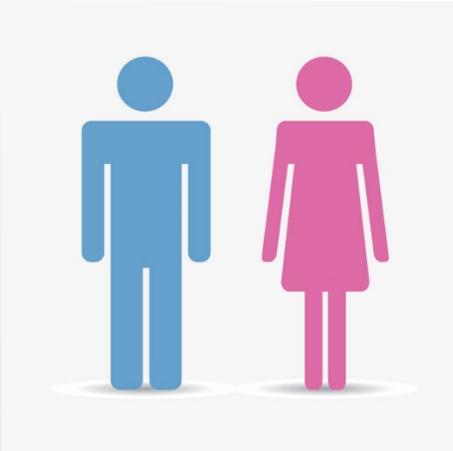
# What is a healthcare disparity?

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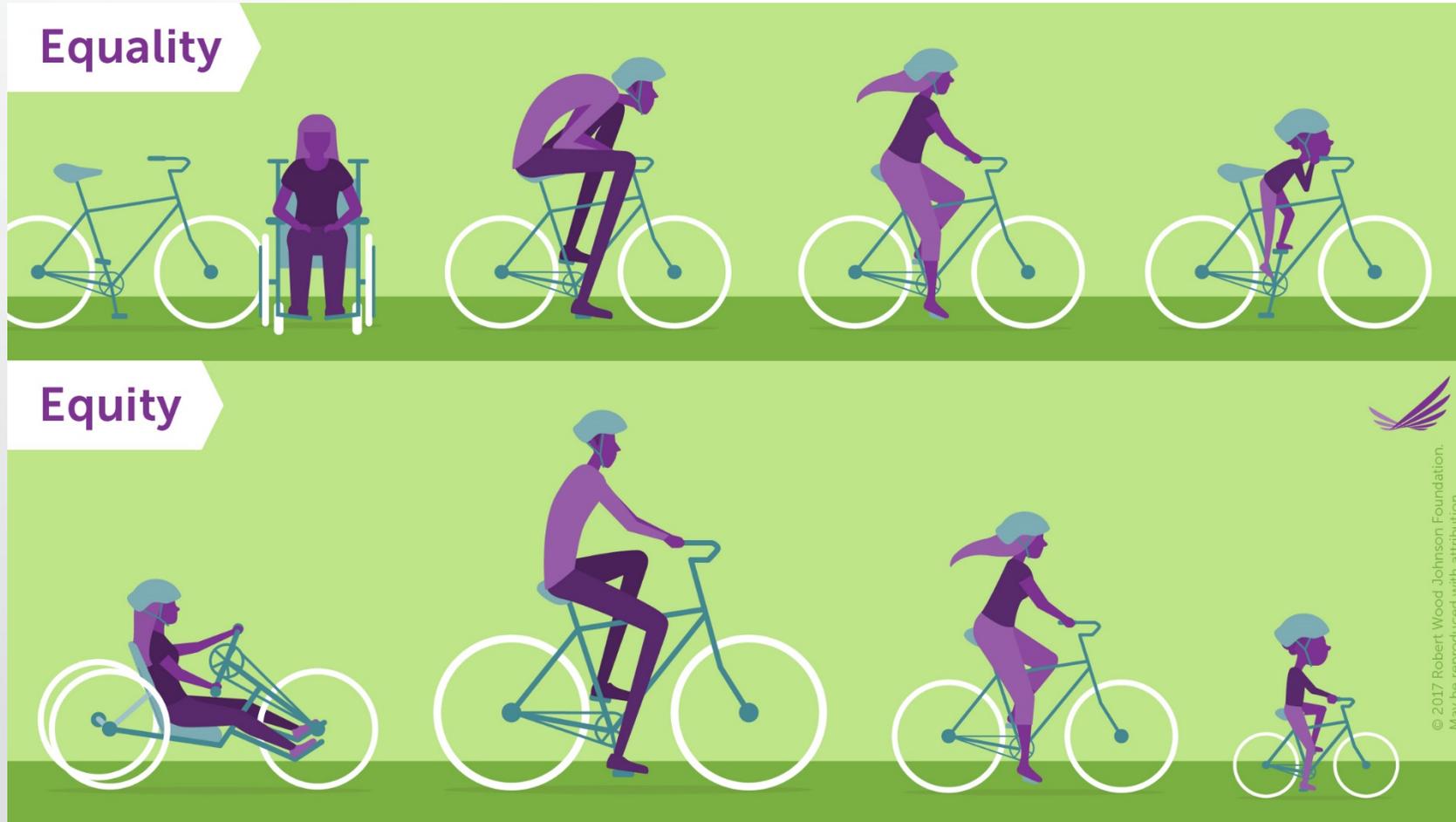
“Differences in the quality of health care that are not due to access-related factors or clinical needs, preferences and appropriateness of treatment. Difference in treatment provided to members of different racial (or ethnic) groups that is not justified by the underlying health conditions or treatment preferences of patients.”  
(Institute of Medicine Definition)

--source: HCUP health disparities toolkit

# Who can experience disparities?



# What does health equity mean?



“Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.”

RWJ Foundation

# Cancer Disparities and Health Equity: A Policy Statement from ASCO (2020)

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## Four Key Areas of Recommendations

1

Ensure Equitable Access to High Quality Care

2

Ensure Equitable Research

3

Address Structural Barriers

4

Increase Awareness and Action

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# Health Equity Vision, Mission and Strategic Pillars

## MISSION

Ensuring health care equity is integral in ASCO's efforts to conquer cancer through promotion of highest quality patient care, research, and education.

## VISION

A world where every patient has a fair and just opportunity and resources to obtain high quality, high value, affordable care that matches their individual preferences across the cancer continuum in all care settings.

## STRATEGIC PILLARS

Ensure Equitable  
Access to High  
Quality Care

Address  
Structural  
Barriers

Increase  
Awareness &  
Action

Ensure Equitable  
Research

# STRATEGIC GOALS & OBJECTIVES

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## Ensure Equitable Access to High Quality Care

- Access to coverage and affordable cancer care for all cancer patients
- Viability of practices and providers serving vulnerable populations
- Access to full range of services for patients with cancer and survivors
- Elimination of financial barriers and mitigation of financial toxicities resulting in lack of access to high quality care and poor outcomes

# STRATEGIC GOALS & OBJECTIVES

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## Address Structural Barriers

- Recognition and management of explicit and implicit bias
- Optimal use of Social Determinants of Health in education, practice and policy development
- Elimination of institutional discrimination in cancer care settings
- Delivery of culturally literate care reflecting multi-dimensional diversity of the patient population.
- Availability of culturally competent and diverse oncology workforce.
- Patients receive appropriate decision support and education targeted to their language, health literacy level and preferences.

# STRATEGIC GOALS & OBJECTIVES

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## Increase Awareness and Action

- Health equity is a strategic priority for ASCO
- Cultivate and expand partnerships that are community-driven and innovative
- Ensure organizational accountability through measurable outcomes
- Widespread availability and use of information and resources for providers, patients, caregivers and other stakeholders

# STRATEGIC GOALS & OBJECTIVES

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## Ensure Equitable Research

- Cancer research fully reflects diversity of cancer populations, with special attention to engaging underrepresented communities
- Research priorities are established in response to the needs of underrepresented communities
- Data collection reflects health equity priorities and drives development of meaningful policies and treatment

# **2020-2021 HEC Priorities**

**Katherine Reeder-Hayes, MD, MBA, MS**  
Chair, Health Equity Committee

# Current HEC Structure

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# Equitable Care for Special Populations

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## Disparities among Older Adults

- **Charge:** To identify strategies to reduce cancer disparities among older adults for the Health Equity Committee
- **Areas of focus:** Quality Improvement (integrating geriatrics/older adults focus); Clinical Trials (improving access and enrollment of older adults); Geriatric Assessment Use (investigating the use in oncology); and Provider Education and Training

## Sexual & Gender Minorities

- **Charge:** Developing and implementing a strategy to advance the recommendations of ASCO's 2017 SGM position statement
- **Areas of priority:** SOGI data collection, Education, Workforce Diversity, Quality of care, and Advocacy.

# Effectively Serving the Underserved

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## Charges:

1) Develop and execute a strategy to identify and understand the needs of providers who deliver care for underserved populations and communities to improve equitable access and quality of cancer care delivery.

2) Develop recommendations to better understand and address the needs of providers serving the underserved

## Multi-step approach:

- Step 1: Identification of Providers
- Step 2: Engage Providers to Identify and Understand Unmet Needs
- Step 3. Implement Recommendations

# Infusing Equity into ASCO's Educational Portfolio

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- A goal of the HEC is to integrate health equity topics into ASCO's educational portfolio including:
  - ASCO Annual Meeting Education Program
  - ASCO's Thematic Meetings and Symposia
  - ASCO eLearning (formerly ASCO University)
  - Cancer.net
  - Other media outlets (ASCO Post, ASCO Connection)
- The Education Subcommittee is charged primarily with identifying and developing the session proposals for the Annual and thematic meetings

# QUESTIONS?

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