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A NEW LOOK at CANCER CARE DISPARITIES

THE DEATH RATE FROM CANCER IS NOTABLY HIGHER FOR AFRICAN Americans than Caucasians, which derives from disparities in screening, diagnosis, engagement in clinical trials and therapeutic efficacy and less use of hospice and palliative care among African Americans.

"The causes of these complex disparities reflect social, cultural and economic inequalities more than biological differences," says **Lisa Whitfield-Harris, PhD, MSN, MBA**, assistant professor of nursing. "Addressing them effectively will require interventions that are developed in full partnership with the African American community."

She and two Jefferson colleagues—**Clara Granda-Cameron, DrNP, MSN**, assistant professor of nursing, and **Jeannette Kates, PhD, CRNP**, assistant professor of nursing and director of the adult-gerontology primary care nurse practitioner program—are collaborating on two studies that seek to clarify and begin addressing culturally based reasons for cancer care disparities within the African American population.

Promoting African American Engagement in Clinical Trials

The first study seeks to address the fact that—despite researchers' increasing efforts over the past 25 years—African Americans continue to be underrepresented in clinical trials. This underrepresentation means that trial results often do not accurately gauge a treatment's effectiveness for African Americans.

"Through this project, called **Empowerment Through Engagement: African Americans as Partners in Clinical Trials**, we will develop a culturally sensitive teaching tool to promote African

LEFT TO RIGHT: Yvonne Florence, Sisters R Us Circle of Survivors; Jeannette Kates, PhD, CRNP; Clara Granda-Cameron, DrNP, MSN; Lisa Whitfield-Harris, PhD, MSN, MBA

American community advocacy and engagement in clinical trials," says Dr. Granda-Cameron.

The study is a partnership between the Jefferson researchers and the cancer survivors' organization, Sisters R Us Circle of Survivors. It will use a community-based participatory research design and Freire's dialogue approach to explore participants' perceptions about participating in clinical trials, as well as concepts of racism, discrimination, resiliency and protective factors. The results will then be employed as the basis for collaborative development of the teaching tool.

Advance Care Planning among African Americans Diagnosed with Cancer

The second project explores perceptions of advance care planning among African Americans who have been diagnosed with cancer. "There is consistent evidence that African Americans are less likely to engage in goals-of-care discussions, complete advance directives or enroll in hospice or palliative care," says Dr. Kates.

Funded by a research grant from the provost's office, the project is using three structured instruments and follow-up conversations to measure and understand mistrust, decisional control preference and advance care planning readiness among study participants.

"Our goal is to use the information we gather in this study to create a culturally sensitive and highly effective intervention that helps increase the number of African Americans who engage in advance cancer care planning," explains Dr. Kates. ■