

# Developing Successful Initiatives to Address Diversity in Oncology



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VANDERBILT-INGRAM CANCER CENTER

# Disclosures

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- Consultant
  - Merck
  - Bristol-Myers Squibb
  - Grail Bio, Inc
  - AstraZeneca
  - NIH: Inclusive Participation COVID-19
- Honorarium
  - Pfizer/AONN
  - BioAscend
  - Oncopeptides

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MEHARRY  
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ALLIANCE

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S I N C E 1 9 9 9

# Objectives

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Participants will be able to

- Explain the difference between diversity and inclusion and why it matters
- Discuss the impact and role of a diverse workforce in medicine
- State 3 steps to achieving a diverse and inclusive work environment







# Baking 101

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# What is Diversity



- **Diversity** is differences in racial and ethnic, socioeconomic, geographic, and academic/professional backgrounds. People with different opinions, backgrounds (degrees and social experience), religious beliefs, political beliefs, sexual orientations, heritage, and life experience.

# What is Inclusion

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➤ **Inclusion** involves bringing together and harnessing diverse forces and resources in a way that is beneficial. Inclusion puts the concept and practice of diversity into action by creating an environment of involvement, respect, and connection—where the richness of ideas, backgrounds, and perspectives are harnessed to create business value and overall success.

Inclusion:  
“Making  
the Mix  
Work”





# Why Do Diversity & Inclusion Matter?

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# It's Good for Business!!

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“Companies ranking high in gender diversity outperform their competition by 15%. Those who practice ethnic diversity do better than their competitors by 35%”

~Sheree Atchenson, Forbes 2018

“Workplace diversity is an important predictor of a company's sales revenue and profitability. Companies with the highest amount of racial diversity average 15X more sales revenue than those with lower levels of racial diversity.”

~American Sociological Review, 2009



# International Journal of Radiation Oncology\*Biology\*Physics

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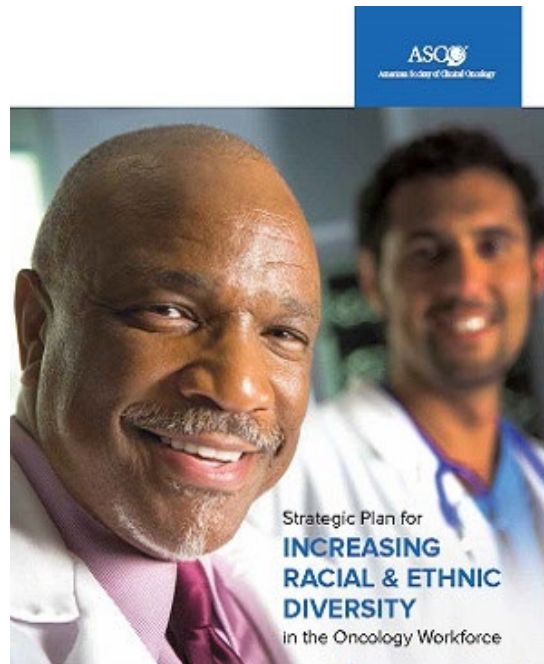
Editorial

## Why Workforce Diversity in Oncology Matters

Karen M. Winkfield, MD, PhD\*,  , Darlene Gabeau, MD, PhD†

## Diversity, Inclusion, and Representation: It Is Time to Act

*Johnson B. Lightfoote, MD, MBA, FACR<sup>a</sup>, Curtiland Deville, MD<sup>b</sup>, Loralie D. Ma, MD, PhD<sup>c</sup>,  
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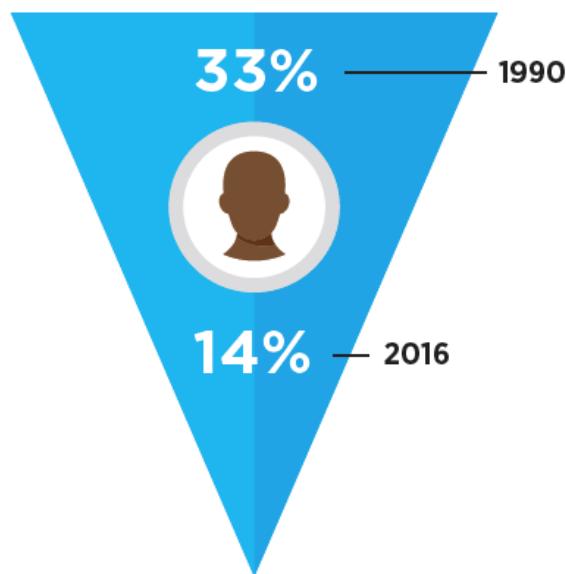
ASCO SPECIAL ARTICLE

## American Society of Clinical Oncology Strategic Plan for Increasing Racial and Ethnic Diversity in the Oncology Workforce

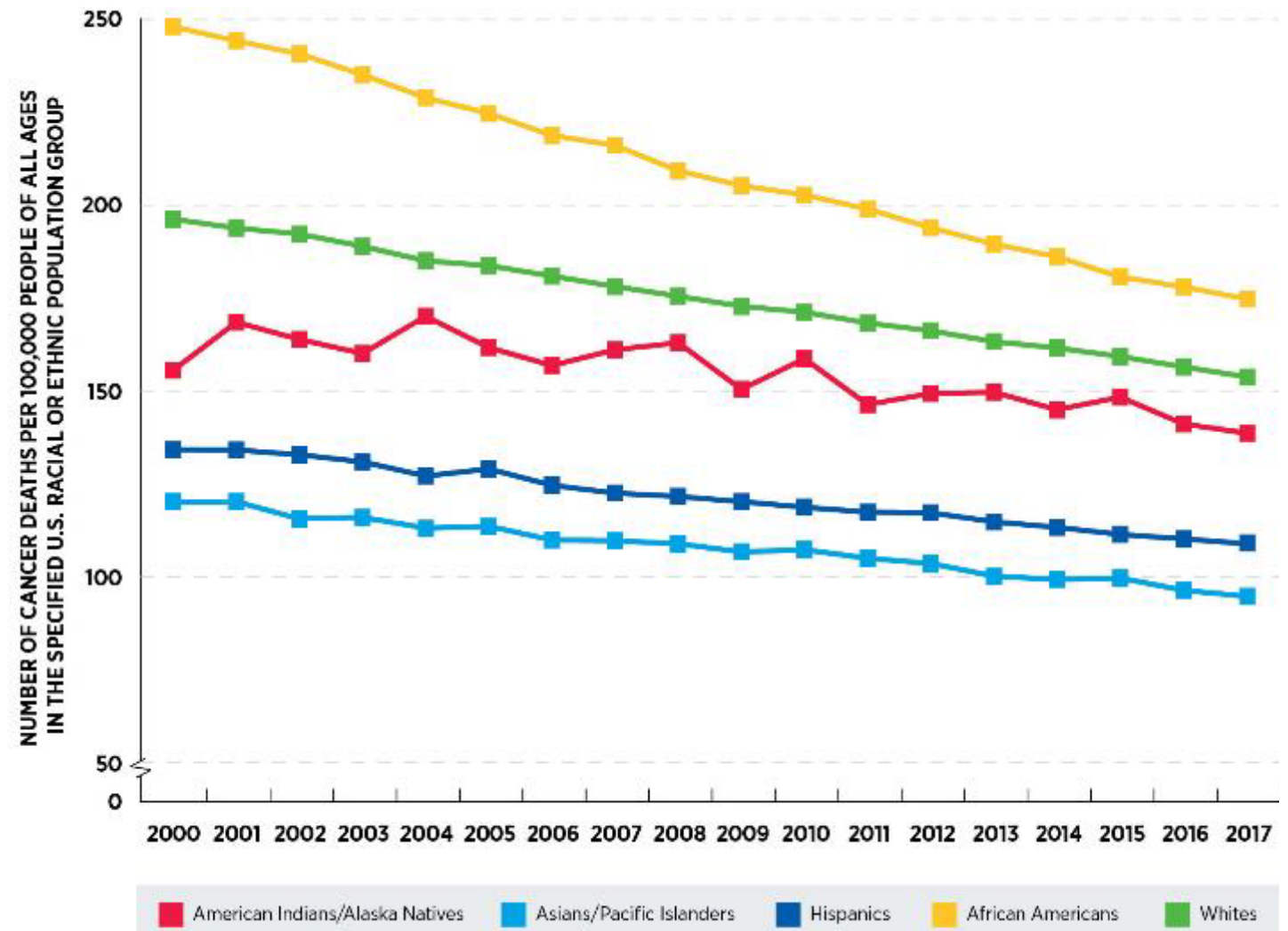
*Karen M. Winkfield, Christopher R. Flowers, Jyoti D. Patel, Gladys Rodriguez, Patricia Robinson, Amit Agarwal,  
Lori Pierce, Otis W. Brawley, Edith P. Mitchell, Kimberly T. Head-Smith, Dana S. Wollins, and Daniel F. Hayes*



DECLINE IN DISPARITY FOR OVERALL CANCER DEATH RATE BETWEEN AFRICAN AMERICANS AND WHITES



# Trends in Cancer Death Rates





# Cancer Control Continuum



**Cross Cutting Issues**  
Health equity, quality of care, communications, decision making

Adapted from the National Cancer Institute's figure *The Cancer Control Continuum*

# Development of an Actionable Framework to Address Cancer Care Disparities in Medically Underserved Populations in the United States: Expert Roundtable Recommendations

## Stakeholders who implement this framework.



Health care leaders, patient advocate groups, community outreach leaders, community-based organizations, lay, nurse and clinical navigators, researchers, industry, govt and policy leaders

## Medically underserved populations.



Racial/ethnic minority groups, rural populations, aged, adolescent/young adult], LGBTQ, differently-abled, immigrants and refugees, and under and uninsured communities.





## COVID-19 is an emerging, rapidly evolving situation.

[Public health information \(CDC\)](#) | [Research information \(NIH\)](#) | [SARS-CoV-2 data \(NCBI\)](#) | [Prevention and treatment information \(HHS\)](#)

Journal List > Elsevier Public Health Emergency Collection > PMC7462894

### Elsevier Public Health Emergency Collection

Public Health Emergency COVID-19 Initiative

*Int J Radiat Oncol Biol Phys.* 2020 Oct 1; 108(2): 475–478.

PMCID: PMC7462894

Published online 2020 Sep 2. doi: [10.1016/j.ijrobp.2020.06.042](https://doi.org/10.1016/j.ijrobp.2020.06.042)

PMID: [32890537](https://pubmed.ncbi.nlm.nih.gov/32890537/)

## Lessons From COVID-19: Addressing Health Equity in Cancer Care

[Malika L. Siker](#), MD,\*\* [Curtiland Deville, Jr.](#), MD,<sup>†</sup> [Gita Suneja](#), MD, MS,<sup>‡</sup> and [Karen Winkfield](#), MD, PhD<sup>§</sup>

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The COVID-19 pandemic that continues to ravage communities all over the United States is serving to highlight some of the long-standing inequities that have plagued our nation. At the time this article was written, members of the Black community accounted for 52% of COVID-19 deaths in Milwaukee County.<sup>1</sup> This is a striking disparity in a county where only 27% of the population identifies as Black.<sup>2</sup> Similar disparities are noted throughout the United States as other minority and vulnerable populations fall victim to complications from the virus.<sup>3, 4</sup>

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[An Unfortunate Legacy: COVID-19 Reveals Inequities.](#)

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[COVID-19 pandemic highlights racial health disparities.](#) [Lancet D

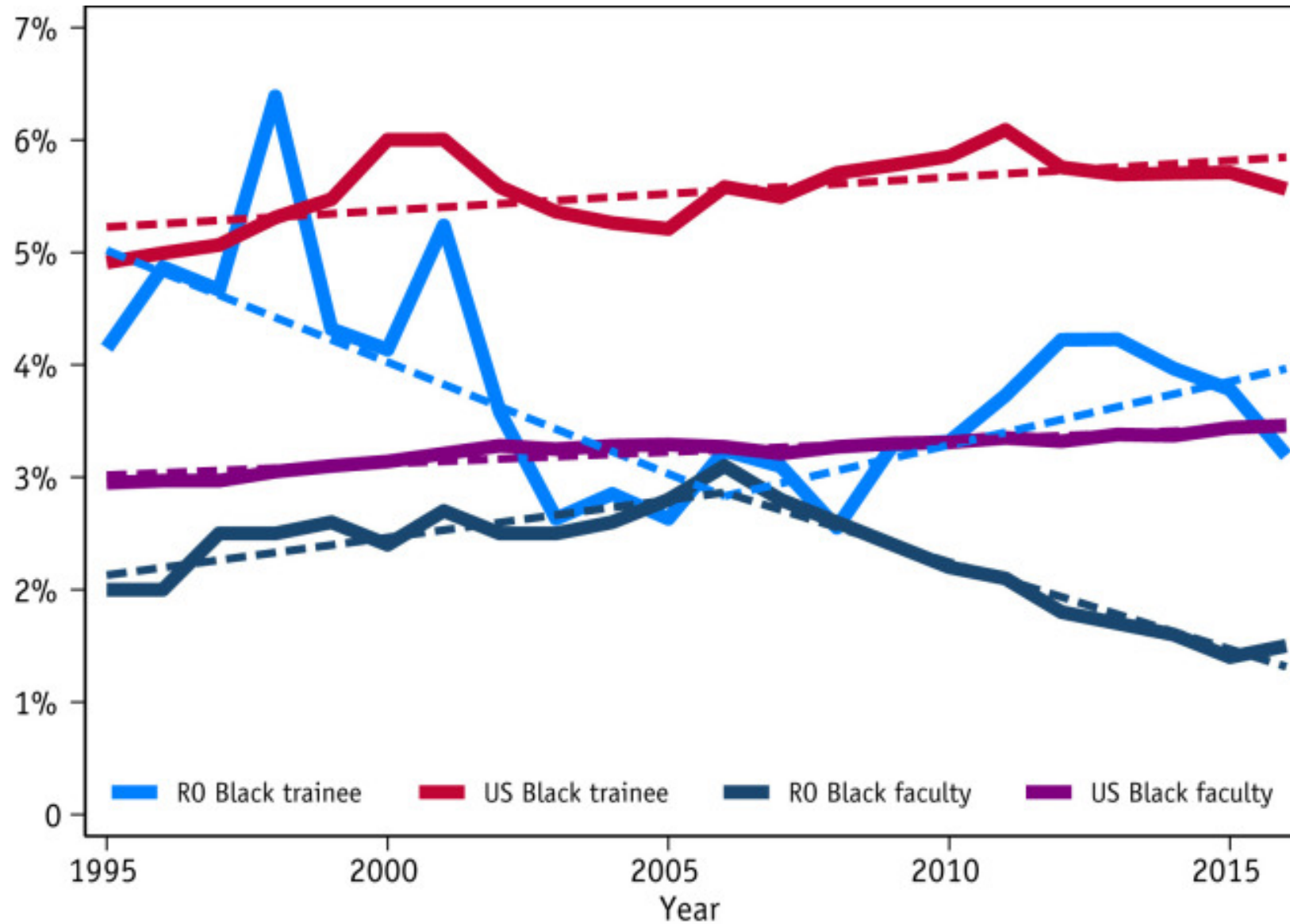
[Suggestions for Radiation Oncologists during the COVID-19 Pandemic.](#)



# How can radiation oncologists be engaged in bringing more equitable cancer care to the communities we serve?

- More Research and Advocacy for Health Equity
  - Clinical Trials
  - Policy implications for department, institution, etc
- Direct Collaboration With Communities and Community-Engaged Researchers
- Develop a Diverse Workforce Committed to Inclusive Excellence

## Representation of Black physicians in United States



Deville, et al. Int J Radiat Oncol Biol Phys. 2020 Nov 15; 108(4): 856–863.

## Oncology Physician Workforce



- White, 65.4%
- Asian, 17.6%
- Hispanic or Latino, 9.1%
- Black or African American, 5.1%
- Unknown, 2.7%
- American Indian and Alaska Native, 0.1%

<https://www.zippia.com/oncologist-jobs/demographics/>



# Oncology Nurse Workforce

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- White, 69.5%
- Black or African American, 12.9%
- Hispanic or Latino, 7.7%
- Asian, 7.6%
- Unknown, 1.9%
- American Indian and Alaska Native, 0.4%

# Oncology Social Work Workforce

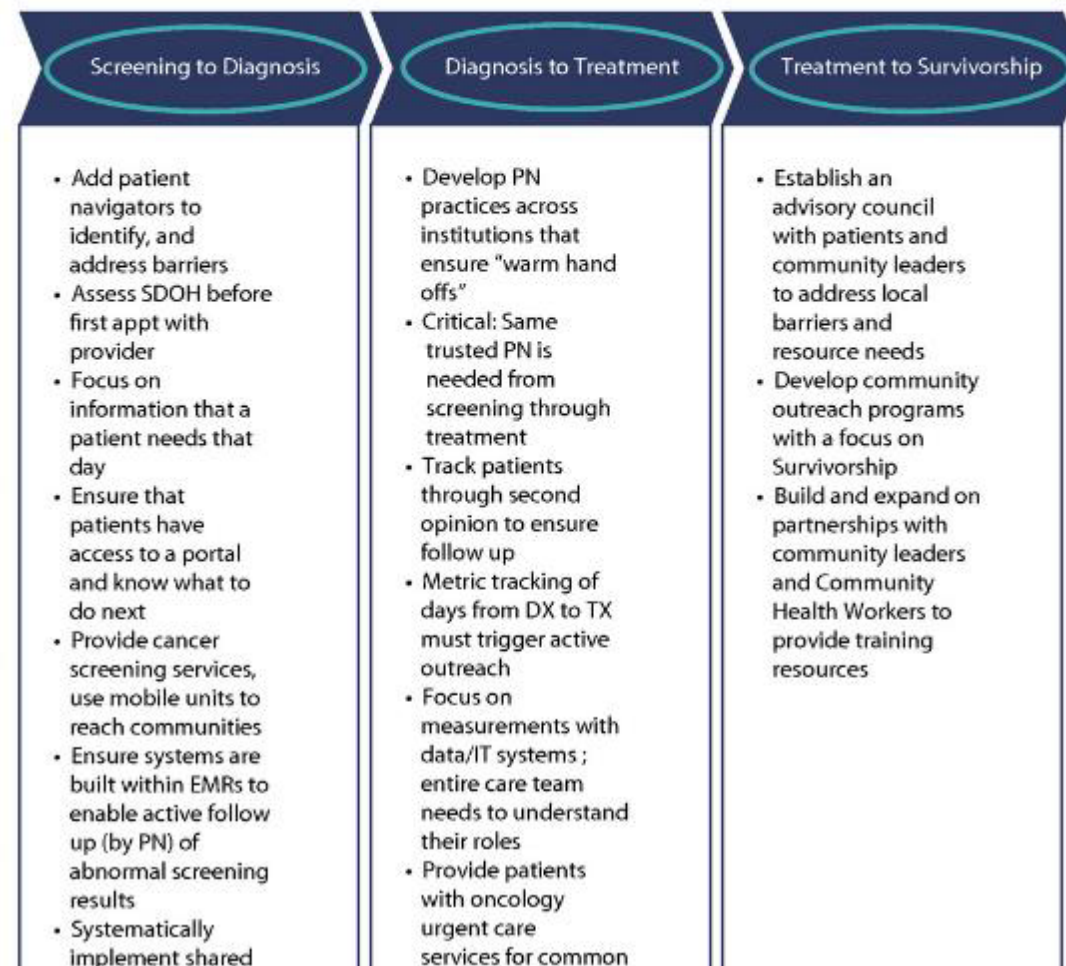


- White, 65.8%
- Black or African American, 17.4%
- Hispanic or Latino, 11.2%
- Asian, 2.2%
- Unknown, 2.1%
- American Indian and Alaska Native, 1.3%

# Development of an Actionable Framework to Address Cancer Care Disparities in Medically Underserved Populations in the United States: Expert Roundtable Recommendations

## Key Findings: High Impact Practices

## Priority Actions Between CCC Domains



### Community Engagement

• Engage non-traditional stakeholders • Build advocacy coalitions • Engage patients through trusted community partners • Leverage Technology and engagement platforms

### Patient Navigation (PN)

• Standardize best practices for lay navigation (focus on DX through Survivorship)  
• Include PN in cancer TX guidelines, clinical trial protocols, CMMI and clinical care teams  
• Establish community-academic partnerships to support PN • Enhance/Ensure reimbursement; emphasize and coordinate PN efforts across institutions

### Data Collection

• Develop toolkits to collect SDOH data • Collect sexual orientation/gender identity (SOGI) data • Work with payors to access claims data that highlight gaps in the CCC • Gather data directly from patients to inform programs • Conduct benchmark projects; share and expand

### Health Equity

• Implement the HHS action plan to reduce racial and ethnic health disparities • Build addressing SDOH impact into accreditation programs with teeth • Develop health equity scorecard for health systems • Build capacity for trusted community engagement



# Underserved Populations

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- Racial/Ethnic Minorities
- Rural vs. Urban
- Adolescent/Young Adult
- Geriatric/Older Adult Populations
- LGBTQ+/Sexual & Gender Minorities
- The differently abled
- Lower Socioeconomic Status

# Wake Forest Baptist Health: Population Health Navigation



M. Alejandra Combs, JD  
Patient Navigator - Hispanic

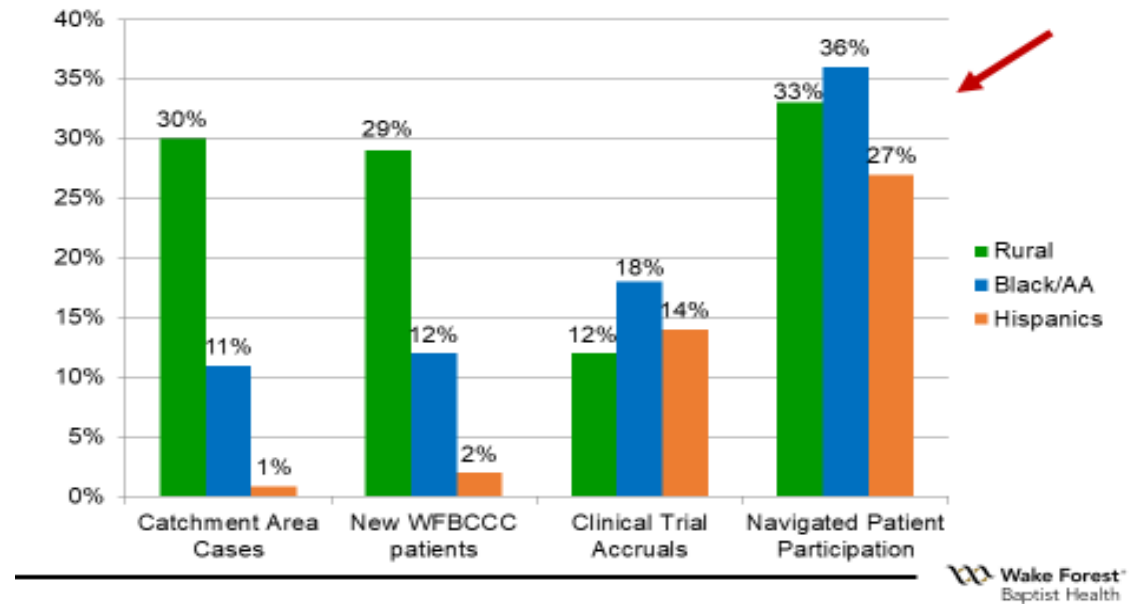


E. Copus, MSW  
Patient Navigator - Rural



A. Daniels, MS  
Patient Navigator - African

## Clinical Trial Participation



Strom C, Combs MA, Weaver KE, Ruiz J, Winkfield K. *Hispanic Patient Navigation: Improving Cancer Care & Clinical Trial Participation. Advancing the Science of Cancer in Latinos*. Poster Presentation. February 22, 2018. San Antonio, TX.

# What Will It Take?

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# **Vision, Commitment, Investment**

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- Dedication of top leadership to diversity and inclusion
- Incorporation of these values into the core mission of the profession/ institution/ department
- Identification of short-term achievable and long-term aspirational goals.



# Three-Step Approach

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1. Assessment
2. Alignment
3. Accountability

AAA

Diversity & Inclusion



# Workforce Diversity -Step 1

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# What Does Your Program Look Like?

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# What Does Your Program Look Like?

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# Step 2

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## Alignment







# Corporate Culture



# Share Responsibility

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- Your change agents must have a sufficient level of responsibility to achieve the necessary results
- Set them up for success by providing the proper tools, resources, and authority



# Step 3

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# Strategies

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- Implement performance measurements
  - Reward dedication to diversity among leadership and employees
  - Set specific diversity goals around recruiting, training, and professional development
- Require cultural proficiency/humility as a necessary component of patient care
- Blend professional and community activities

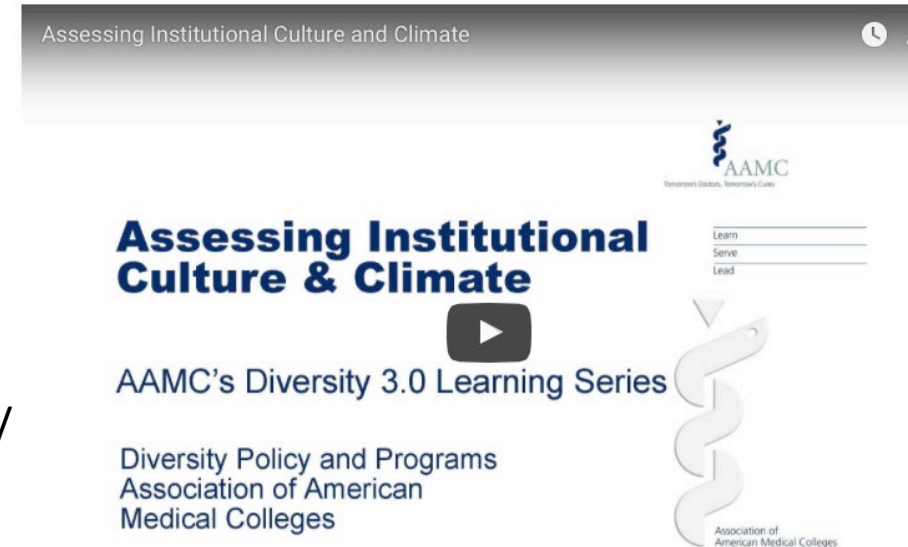
# Resources



Tomorrow's Doctors, Tomorrow's Cures®

<https://www.aamc.org/initiatives/diversity/>

## Assessing Institutional Culture and Climate Webcast



Project Implicit®



# Advances in Radiation Oncology

Available online 7 July 2020

In Press, Corrected Proof



Brief Opinion

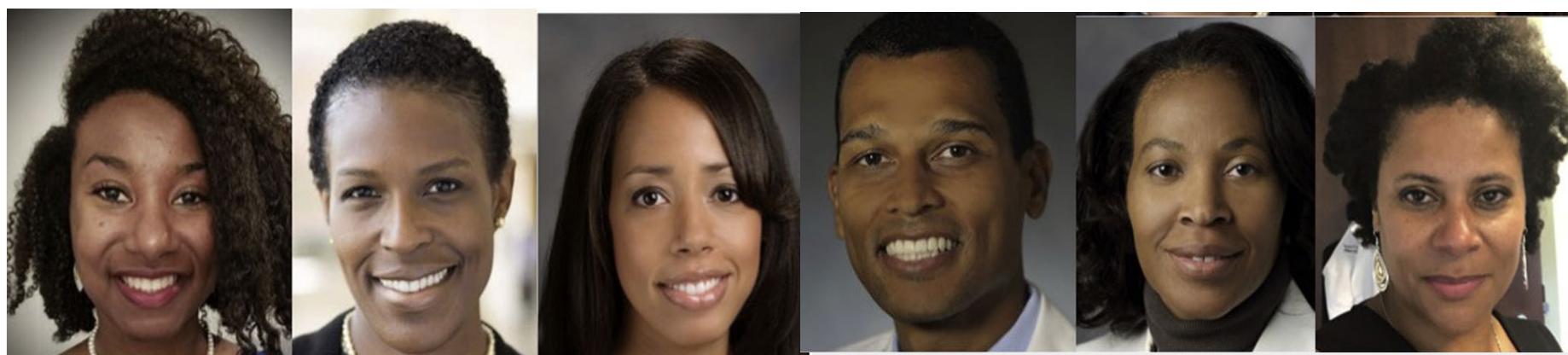
## Why Racial Justice Matters in Radiation Oncology

Christina Hunter Chapman MD, MS <sup>a, b</sup>, Darlene Gabeau MD, PhD <sup>c</sup>, Chelsea C. Pinnix MD, PhD <sup>d</sup>, Curtiland Deville Jr. MD <sup>e</sup>, Iris C. Gibbs MD <sup>f</sup>, Karen M. Winkfield MD, PhD <sup>g</sup>

Show more

<https://doi.org/10.1016/j.adro.2020.06.013>

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# ATIP: *A*cknowledgement, *T*ransparency, *I*ntentionality, re*P*resentation

## Intentionality

- Establish diversity, inclusion, and equity as a major area of focus within the ASTRO strategic plan
- Cultivate a Black leadership pipeline from the undergraduate through faculty levels
- Require demonstrated commitment to equity and inclusion as a prerequisite for ASTRO leadership positions
- Dedicate resources toward understanding and eliminating health disparities in radiation oncology
- Position diversity, inclusion, and equity activities in high visibility time slots and locations at ASTRO meetings

## rePresentation

- Commit to inclusive representation with critical mass, not tokenism

Elected leaders must demonstrate commitment to diversity, equity, and inclusion. Candidate statements for all leadership positions and elections must include specific plans for improving diversity and addressing health inequities

ASTRO's advocacy lobby must address health disparities in addition to issues of reimbursement

Create a position on the board representing healthy equity from a racial/ethnic group UIM

# The LEADS Approach to Reducing Racism

Individuals	
Learn	<ul style="list-style-type: none"><li>• Educate yourself about implicit and structural and systemic racism and the effect on Black patients and colleagues</li><li>• Read reputable literature and ask questions that will enhance understanding</li></ul>
Engage	<ul style="list-style-type: none"><li>• Ask Black patients and colleagues how they are coping</li><li>• Engage your family members in conversations and action steps about racism and privilege</li><li>• Speak to Black medical student groups about radiation oncology and offer to be a resource</li><li>• Facilitate research and mentoring opportunities</li></ul>
Advocate	<ul style="list-style-type: none"><li>• Lobby for equitable health care reform</li><li>• Vote in ways that eliminate racism and dismantle the rules, laws, norms, and structures that promote it</li><li>• Create diverse publication teams</li><li>• Look for Black representation on speaker panels</li></ul>
Defend	<ul style="list-style-type: none"><li>• Stand up against anti-Black microaggressions<sup>20</sup> that perpetuate racial inequity</li><li>• Stand up when patients make subtle or overt anti-Black comments</li><li>• Set the tone that racism is not tolerated at any level. Do not leave it to your Black colleagues to point out racism</li></ul>
Support	<ul style="list-style-type: none"><li>• Invest in success of Black colleagues Quote their research. Nominate them for positions of leadership Volunteer for their committees and help them produce great results</li><li>• Donate to organizations that support equity and Black advancement (eg, United Negro College Fund)</li></ul>





# Let Us Eat Cake!!!





# Thank you!!

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