

2nd Lung Cancer Health Equity Summit - Black and Hispanic Populations Navigating Lung Cancer: Stepping Stones to Equity

November 18-19, 2024 Atlanta, Georgia

The SCHEQ Lung Cancer Health Equity Summit was held Nov 18-19, 2024, at the Philadelphia College of Osteopathic Medicine in Suwanee, GA. The summit's aim was to bring together stakeholders across the lung cancer care continuum to not just talk about the issues impacting diverse and underserved communities, but to learn solutions that have been created and/or implemented that reduce disparities, and improve outcomes. The conference is also a place to build networks, relationships, and to lay the foundation for a greater community of those dedicated to helping and advocating for these patients.



KEYNOTES: MITIGATING STRUCTURAL AND COMMUNITY BARRIERS CAN REDUCE DISPARITIES



ATTENDEE THOUGHTS

We asked people what they thought was the greatest challenge in lung cancer navigation. The leading responses were:

1. Access and healthcare delivery
2. Research and clinical trials - design, data collection, collaboration, and diversity



Our MC

We asked people what they hoped to learn at the summit: The leading responses were:

1. Addressing barriers and disparities
2. Health equity strategies with actionable strategies and disparities in screening, treatment, and survivorship

"The most important part to me was that the summit signified the importance of health disparity in marginalized communities."

BY THE NUMBERS

117

Attendees

53

Organizations

8

Funders

10

Patient Advocacy Organizations

21

Sessions or Panels

HIGHLIGHTS:

PATIENTS, CAREGIVERS, AND SURVIVORS



The most important players in lung cancer are the patients, caregivers, and survivors that often are still left in the dark. They were represented in the audience, planning, committee, and in the program. They talked about navigating their diagnosis and how to advocate, they discussed challenges of stigma and nihilism, and organizations discussed their programs and resources to help their communities.

BIOMARKERS, TREATMENTS, AND CLINICAL TRIALS

While there have been significant advances in biomarkers and targeted therapies, not all populations are offered biomarker testing, informed about clinical trials, or offered optimal treatments.. Some of the barriers include lack of diversity in lung cancer cell lines, lack of workforce diversity at all levels,, and lack of nurse navigation services. One institution has greater diversity in their clinical trials because their community engagement office is diverse, reflects their patients' lived experience, speaks multiple languages and they always follow up.

WORKFORCE DIVERSITY, STRUCTURAL RACISM, AND MENTORSHIP

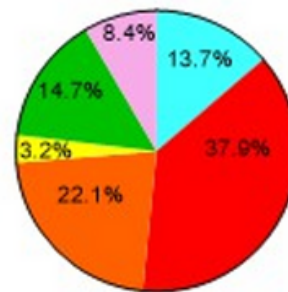
The lack of diversity in the biomedical workforce will not change overnight, but it has been shown that when patients have doctors from their lived experience and background, there is less bias in care. There are also language barriers for patients that do not speak English. Mentorship and training programs provide opportunities for scholars to get exposure to new research avenues, find a network of people that look like you, and open social media opportunities. It is also important to find mentors as you advance in your career that help you bring your authenticity and language to your role, but also navigate the challenges of being different.

“Attending the SCHEQ 2nd Lung Cancer Health Equity Summit is vital for anyone involved in lung cancer prevention and care. The comprehensive and high quality education was only eclipsed by the opportunity to network with leaders in lung cancer equity. This was a highlight of my year.”

HIGHEST RATED SESSIONS:

- Socioeconomic Drivers of Lung Cancer Disparities (solo presentation)
- Advances in Early Detection, Biomarkers, and Treatments (group presentation)
- Patient, Caregiver, and Survivors Perspectives; and Community Engagement to Increase Lung Cancer Awareness (panel discussions - tied)

ATTENDEE BREAKDOWN



- Patient, Caregiver, Survivor
- Trainee, Nonprofit, Government, Patient Advocacy
- Allied Health, Faculty, Researchers, Clinicians, Social Workers
- Payers, Insurers, Hospital Systems
- Industry
- Other



TAKEAWAYS - ACTION

- Always ask for a 2nd opinion
- Building and maintaining trust and trustworthiness is key to improving outcomes
- The working groups and roundtables facilitated more robust discussions
- Will launch working group and lung cancer webinar series
- We have shown that if you bring the right mixture of people together, the energy and motivation is electric