

## **Partnering and Building Opportunities Within North Carolina: A Qualitative Analysis of the Lineberger Comprehensive Cancer Center Clinical and Research Internship for Black, Indigenous, and People of Color (BIPOC) Undergraduate Students**

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### **1. Background**

Clinical trials are essential to improving cancer treatments for diverse populations. Almost 45 percent of the U.S. population consists of individuals from minority racial and ethnic groups; however, this diversity is not represented in the clinical trial participant population. Hesitancy of clinical trial participation includes historical trauma leading to mistrust, lack of access, lack of awareness, lack of comfort with the research process, and institutional discrimination and racism within the health care system. Enhancing clinical trial diversity is multifaceted. One solution is to enhance diversity of the clinical trial workforce, including principal investigators, clinical research coordinators, and research staff. To address this practice and research gap in clinical trial participation, Lineberger Comprehensive Cancer Center (LCCC) partnered with North Carolina Central University (NCCU), a historically black college and university (HBCU), to foster oncology workforce interest among undergraduate BIPOC students. The internship was presented by LCCC at the 2022 AACI CRI meeting.

### **2. Goals**

1. Explore program expectations and perceptions of students and mentors through semi-structured pre- and post-internship interviews and focus groups
2. Evaluate strengths and areas of improvement in program from qualitative data

### **3. Solutions and Methods**

This 10-week summer cancer clinical research internship included a two-week orientation with clinical trial training and four weeks of professional development including discussion of communication styles, creation of a LinkedIn profile, cancer clinical career panels, revision of their curriculum vitae or resume, and financial literacy. Each student (n=5) and mentor (n=5) received a stipend for participation. Each student was assigned a mentor and met bi-weekly to discuss roles of clinicians, scientists, and scholars in cancer and provided ongoing emotional and professional development support. Mentor interviews and intern focus groups were held to explore questions pertaining to expectations, impressions, experience, concerns, and feedback. Data was coded and analyzed for reoccurring topics and curriculum alterations.

### **4. Outcomes**

Qualitative analysis concluded that concerns of variety and accessibility, content missing from curriculum, support, racial concordance, need for clarity, exposure, and communication were most uplifted. Mentions of concerns, missing from curriculum, and exposure were more apparent during post-internship data whereas mentions of racial concordance were seen more in pre-internship interviews. Overall, students and mentors shared concerns about curriculum and clarity of the program's goals. Students and mentors praised the program, various clinical exposures and opportunities, and ability to expand mentorship and networking skills. One intern stated, "Even though there were... like little bumps in the road or some inconsistencies, I still gained an experience that I probably wouldn't have gained anywhere else."

## **5. Lessons Learned and Future Directions**

Qualitative analysis was integral to shaping the content, quality, and participant (mentor and intern) satisfaction. This analysis exemplified the essentiality to encourage and address continuous feedback to meet students' and mentors' needs. The overarching need for representation and equitable support was clearly expressed. Lessons learned from students and mentors will be applied to the Summer 2023 experience and include curriculum revision, on-campus housing, increased mentor involvement, and year-round career development and skill-building workshops. We have also differentiated the two consecutive summers: overview of cancer clinical trials and professional development (summer 1) and tailored curriculum and exposure (summer 2).