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Reflecting on 50 Years of Progress and Looking Ahead to the Future: *Highlights of the 2021 AACI/CCAF Annual Meeting*

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AACI Vice President/President-elect **Robert A. Winn, MD**, is director of VCU Massey Cancer Center. He served as chair of the 2021 AACI/CCAF Annual Meeting.

Commentary Overview

- This year's AACI/CCAF annual meeting provided an opportunity for AACI members to reflect on 50 years of progress while looking ahead to new discoveries and solutions to persistent challenges.
- Reducing cancer disparities, promoting health equity, and diversifying the oncology workforce were identified as areas for growth and improvement.
- The meeting also addressed topics including telehealth, the impact of COVID-19 on cancer centers, cancer care across the lifespan, and adapting clinical trials to patients' changing needs.

As chair of the 2021 AACI/CCAF Annual Meeting Program Committee, I was pleased to see more than 500 registrants join us for three days of innovative virtual programming.

Coinciding with the 50th anniversary of the National Cancer Act, this year's AACI/CCAF annual meeting provided a unique opportunity for AACI members to reflect on five decades of progress while looking ahead to new research discoveries and solutions to persistent challenges, such as health inequity and cancer disparities. These themes were woven throughout the meeting, which also addressed topics including telehealth, the impact of COVID-19 on cancer centers, cancer care across the lifespan, and adapting clinical trials to patients' changing needs.

Establishing Patient Trust

The ongoing pandemic has taught us many lessons over the past 20 months, transforming the ways we conduct research, deliver care, and engage with our communities. Telemedicine has become more widely available, and the need for psychosocial support for care providers has

become dramatically evident. The pandemic has also underscored the importance of making connections with the communities where our cancer centers are located. And as we've learned from the rollout of COVID-19 vaccines, we may have the most amazing cures and the best technology, but if we don't have the public's trust, it's clear that even scientific miracles have limits.

Establishing that trust requires us to recognize and honor the unique needs of disparate patient populations. To this end, the 9th Annual **Physician Clinical Leadership Initiative (PCLI)** panel focused on the differing care and treatment needs of pediatric, adult, and geriatric patients. It's also important to understand the needs of clinical trial participants and meet them where they are. Strategies discussed during the annual meeting included diversifying the clinical trials workforce, engaging in targeted community outreach efforts, and offering options to improve access, such as home health care and remote trials.

Reducing Disparities and Diversifying the Oncology Workforce

These themes were also discussed during a session that I moderated, about the many forms of cancer disparities—from racism in prevention, screening, and genetic testing, to lack of diversity in clinical trials—and the measures that cancer centers can take to reduce these disparities. Equal access to cancer care is a goal shared by our colleagues at the National Cancer Institute, as evidenced by the annual NCI Director's Report delivered by **Norman E. Sharpless, MD**. In his presentation, Dr. Sharpless described major factors limiting patients' access to cancer care, with a focus on poverty. He noted that in counties with persistent poverty, overall cancer mortality is 12.3 percent higher than in wealthier counties.

Henry Ciolino, PhD, director of NCI's Office of Cancer Centers, led a discussion about recent changes to guidelines for the Cancer Center Support Grant application. Of particular interest was the implementation of extensive plans to enhance diversity among cancer center members and leaders.

Recognizing the need to diversify the oncology leadership pipeline, AACI President **Caryn Lerman, PhD**, has dedicated her **presidential initiative** to leadership development, mentorship, and onboarding, with an emphasis on diversity. In a presentation during the meeting, she explained that this initiative aims to develop workshops and toolkits to help AACI cancer centers recruit and retain the best and brightest talent to their cancer centers, reflecting the racial, ethnic, and gender diversity of their centers' catchment areas.

AACI's previous president, **Karen E. Knudsen, MBA, PhD**, shared an update on her presidential initiative, which aimed to mitigate cancer health disparities. Dr. Knudsen collected demographic information about the catchment areas of AACI cancer centers to understand and address gaps in access to care related to transportation, internet access, health literacy, and other factors. A whitepaper compiling key data from the initiative will be published.

Valuing Health Equity

The meeting also provided a personal highlight for me, when I was honored as the first recipient of the **AACI Cancer Health Equity Award**. As director of VCU Massey Cancer Center, I have set an ambitious agenda to address health equity. Recognizing that connecting with a cancer center's catchment area is no longer a one-way street, at Massey we ensure that clinical research is tailored to and informed by our community, so that we can maximize local impact. As I stated when accepting the award, my goal is to eradicate cancer off the face of the planet and to eradicate disparities wherever they exist. I am proud to be vice president/president-elect of a dynamic, forward-thinking organization like AACI and feel fortunate to have the support of colleagues at AACI's 103 member cancer centers who share this mission.

Our Mission

Representing 103 of North America's premier academic and freestanding cancer centers, the Association of American Cancer Institutes is accelerating progress against cancer by empowering North America's leading cancer

About AACI Commentary

To promote the work of its members, AACI publishes *Commentary*, a monthly editorial series focusing on major issues of common interest to North American cancer centers, authored by cancer center leaders and subject

centers in their shared mission to alleviate suffering.

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