



## Reimagining Community Engagement and Equity in Cancer: A Virtual Conversation With Two Presidents

### AACI Resources

Dr. Robert A. Winn's [AACI Presidential Initiative: Inclusive Excellence](#)

AACI was incorporated in 1959. Learn more about AACI's history in [1959 – 2021: The History of the Association of American Cancer Institutes](#).

Over 100 academic cancer centers in North America are AACI members: [AACI Membership Directory](#)

AACI held its second [Leadership Diversity and Development Workshop](#) in March 2024.

[The Urgency of Now: Improving Cancer Outcomes Through Professional and Reimbursable Oncology Navigation](#) (March 2024 AACI Commentary)

[Assessing the Coverage of US Cancer Center Primary Catchment Areas](#)  
*Cancer Epidemiol Biomarkers Prev* (2022) 31 (5): 955–964

### Upcoming AACI Events

**June 24-26:** [16th Annual AACI CRI Meeting](#), Rosemont, IL

**October 19-20:** [DEI Summit](#), Chicago

*(co-hosted with the American Cancer Society and the Cancer Center DEI Network)*

**October 20-22:** [2024 AACI/CCAF Annual Meeting](#), Chicago

### Q&A

**Q: What do you think of [legislation aiming to dismantle DEI] and what are your organizations prepared to do to [combat] it?**

AACI stands with its cancer centers and opposes [legislation and other] misguided efforts to dismantle DEI. AACI partners with the American Cancer Society [and Cancer Center DEI Network] to host the [DEI Summit](#) each October. Attendees include individuals from academic cancer centers who are in DEI roles at their institutions.

**Q: One of the challenges of access to cancer care or clinical trials is that patients are sometimes under- or uninsured. How can institutions help change policies so that everyone can access this specialized care, especially in those states where Medicaid was not expanded?**

To learn more about AACI's advocacy and public policy efforts, visit [AACI Government Relations Forum](#) and [AACI Public Policy Resource Library](#). To get involved, contact AACI Senior Manager of Government Relations, [Jaren Love](#).

## **ACCC Resources**

[Just Ask! Increasing Diversity in Cancer Clinical Research](#)  
[Population Health Navigators: An Innovative Approach for Supporting Underserved Patients](#)  
[Appalachian Community Cancer Alliance: Improving Cancer Care in Rural Appalachia](#)

E-course: [Developing a Health Literacy and Clear Communications](#)

Mary Bird Perkins Cancer Center in Louisiana is a model for community engagement:  
[Bridging the Gap: Early Detection of Cancer for the Medically Underserved](#)

[A Rural Healthcare System Expands Cancer Care with a "Hub and Spoke" Model](#)  
[Implementing a Transportation Hub: A Holistic Approach to a Systemic Problem](#)  
[Addressing Inequitable Access to Clinical Trials in Cancer Research](#)

A resource for integrating the patient perspective: [Talk to Me](#)

Information about testing in a timely fashion: [Genetic Cancer Screening and Testing in a Medically Underserved Community](#)

[The Centers for Medicare & Medicaid Services Will Pay for Patient Navigation — Now What? A Look at the Emerging Role of Health Equity Institutes](#)

## **Q&A**

**Q: Why did ACCC remove "Community" from its name?**

This decision was made so that ACCC would be more representative of our multidisciplinary members who come from all types of cancer programs that serve the community: independent physician practices, enterprise level physician networks, small hospital cancer programs, major integrated delivery networks, academic cancer programs, and everything in between and wherever cancer care may be delivered over the next 50 years.

Learn more about [ACCC's recent rebranding](#).

**Q: ...[A]re there clinical trial specific navigators and if so how or where can an individual get training to become one?**

[Increasing Clinical Trial Accrual Through the Implementation of a Clinical Trials Navigator](#)

**Q: If community-based and faith-based organizations live in the space of screening and financial support of their communities, they don't know a lot about biomarker testing and the hope that clinical trials bring to their communities. We all need to spend time with them to help them to understand and answer their questions before we "engage them."**

[Social Drivers of Health: The Role of Representation in the Healthcare Workforce](#)

**Q: How/where did you learn how to talk to patients/participants at a level they understand/comprehend?**

ACCC offers an online course providing cancer care team members with the tools needed to be clear and concise in communication with patients, build awareness and skills regarding health literacy, and improve health equity.

[Let's Be Clear: Communicating to Improve the Cancer Patient Experience](#)

**Other Resources**

This peer-reviewed article cites work supporting that 80-85 percent of patients with cancer are being treated in their communities:

[Improving the Quality of Cancer Care in Community Hospitals](#)

*Ann Surg Oncol.* 2021 Feb; 28(2): 632–638

Webinar: [Best Practices for Patient Education Resources](#)

The [TEAM Medicine Model](#) for structured, supportive care in cancer centers. Many of these models for best practices are shared in abstracts at AACI's annual [Clinical Research Innovation](#) meeting.

The [Cancer Survivorship Provider Network](#) is an online community for all oncology focused providers, nurses/nurse navigators, social workers, allied health, administrators, and CBO organizational leaders.