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Reimagining Community Engagement and Equity in Cancer

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n 2020, this country was ravaged by COVID-19 bringing to light what we already knew existed—social and health inequities including a lack of access to clinical research. Eventually, we were able to

develop vaccines to address the disease. Yet acceptance and trust in these vaccines lagged, and only after we engaged with our communities could we achieve widespread vaccination.

At the same time, we experienced political unrest and high-profile instances of ongoing social injustice with the murders of Ahmaud Arbery, Breonna Taylor, and George Floyd.

We cannot change the past, but we can change the future. When I reflect on how ACCC as an organization can effect positive change, I know that **community engagement** and **equity** will be key.

Let's start with how we talk about historically marginalized populations. We need to think about the issue in a way that does not speak to a deficit but, instead, comes from a place of strength. What are the strengths of our community, and how do we as an institution build on those strengths in partnership with our community?

My colleague and friend, Robert Winn, MD, shared this gem in a speech delivered at the ACCC 50th Annual Meeting & Cancer Center Business Summit. "[Health care organizations have] been asking the wrong question about doing something different [with historically marginalized populations]. The question isn't 'How do we get trust?' but, instead, 'How do we become more institutionally trustworthy?'"

At this same meeting, I was privileged to facilitate a session that truly brought home the importance of community engagement. Two ACCC member programs shared how they partner with their communities and patients in meaningful ways to understand what quality health care looks like—not the cancer care team working the issue alone behind its building, but leaving the cancer center, going out into the community, and using what is learned to inform and drive their efforts. That is

the very definition of community engagement.

Equity. It's a word we hear daily. But advancement of health equity requires more than talk. Many organizations issued statements against social injustice and pledged to make changes. "We're going to bring an end to systemic racism!" And these organizations created new positions and hired chief diversity officers in an almost knee-jerk reaction to a structural inequity that has existed for a very long time. Fast forward to today—and few of those efforts are still in place. Instead, we found that in times of adversity, these diversity roles are some of the first to go.'

ACCC took a different approach. Instead of hiring a diversity officer, ACCC committed to integrating equity in everything it did, so equity became a part of the Association's DNA.

In 2020, Randall Oyer, MD, used his ACCC President's Theme to focus on equitable access to clinical trials. In her ACCC President's Theme, Krista Nelson, MSW, LCSW, OSW-C, FAOSW, identified "health equity and social justice as critical drivers of quality cancer care" and noted that "practice-based solutions were needed to reduce barriers and improve health outcomes." ACCC Immediate Past President Olalekan Ajayi, PharmD, MBA, championed efforts to develop education and resources to diversify the health care workforce so members of the multidisciplinary cancer care team reflect the communities they serve.

That's how an organization integrates and embeds health equity into every aspect of the organization's programs and activities.

In this, my first column, I am privileged to share the 2024-2025 ACCC President's Theme—Reimagining Community Engagement and Equity in Cancer.

ACCC is a community of individuals who can work together to create the change that we want to see. Person-centered care requires a multidisciplinary team. It also requires our organizations to reach into our communities and actively engage with and learn from the people we serve, anchoring equity at the center of our work.

References

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