

ACCESS Working Group Committee: Racial/Ethnic Inequities



ASTCT Chair: Eneida Nemecek

NMDP Chair: Rafeek Yusuf

Vice-Chair: Rayne Rouce

Committee Members:

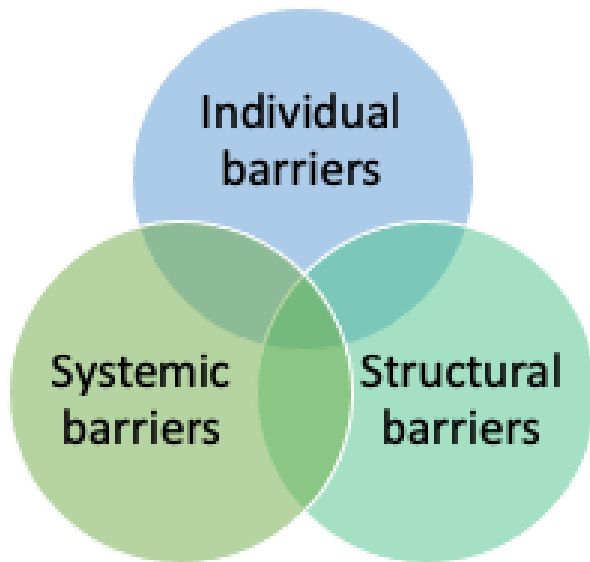
- Belinda Avalos
- Pavan Reddy
- Liz Welniak
- Meggan McCann
- Jackie Foster
- Steve Devine
- Frank Holloman
- Nancy DiFronzo
- Amber Ruffin

Goal for Our Committee

To improve equity in access and outcomes for all transplant and cell therapy recipients regardless of their race or ethnicity



Committee's Working Principles



- Race/Ethnicity are a proxy for multiple other factors influencing health inequities
- Racial/Ethnic inequities present through the transplant continuum and are influenced by individual, systemic and societal barriers
- In order to find solutions for racial/ethnic inequities, we must address those multiple factors

Initiatives to Address Racial/Ethnic Inequities

Initiative #1

Level the
knowledge

Initiative #2

Optimize
the data

Initiative #3

Workforce
Development

Initiative #1: Level the Knowledge

1. Review existing NMDP/ASTCT patient educational resources across transplant continuum for cultural sensitivity
2. Community Engagement Studios: Moderated sessions to obtain input from representatives from specific groups (Black, Latino, Asian, HPI, Indigenous) about transplant educational resources
3. Create a new index of modified patient educational resources, with date of review

Stakeholders: community representatives, transplant center members, NMDP Patient Services staff, representative from Awareness committee

Initiative #2: Race/Ethnicity Data Optimization

1. Pilot with selected centers from different regions of the US, public and private insurance mix, affiliated to NCI-cancer institute
2. Data gathering: # and summary demographics of potential patients in catchment areas, patients for which donor search was initiated and final disposition and reasons for drop, if applicable, patients who proceeded to BMT
3. Identify trends in data and opportunities for positive impact (collaboration with Poverty committee)
4. Develop & disseminate best practices guidelines for collection of R&E data in transplant centers

Stakeholders: Transplant center representatives, NMDP Health Services Research & CIBMTR staff, representative from Poverty committee

Initiative #3: Workforce Development

1. Collaborate with ASTCT (URM SIG, DEI committee) to support their ongoing projects to create a pipeline program for underrepresented trainees,
 - Start with physician workforce
 - If successful, continue to build similar programs for APPs, nursing, pharmacy, social workers, etc.

Stakeholders: Transplant center representatives, NMDP & ASTCT staff, Representatives from ASTCT URM SIG & DEI committee

Our Committee's ASK:

1. We **need volunteers** for our 3 initiatives! Email us if interested:

Eneida Nemecek; nemeceke@ohsu.edu

Rafeek Yusuf; ryusuf@nmdp.org

Rayne Rouse; rhrouce@texaschildrens.org

2. Monthly task force meetings will start shortly after Tandem