



# **Diversify** Clinical Teams to Build Trust

#### What should I do?

Demonstrate a commitment to building trust and credibility with a clinical team that

is representative of the populations you need to engage. Sustained efforts to increase diversity and improve equity and inclusivity in clinical trials starts with building trust.



## Why should I do it?

- → Build trust and transparency between participants, Sponsors, and clinical trial teams for long term engagement with clinical trials and research.
- → Increased and improved patient engagement and retention.
- → Reduced burdens for participants and clinical trial teams by streamlining processes and including participants as partners.
- → Increased compliance and participant adherence.
- → Improved outcomes with more robust data collection.
- → Increased access and awareness for participants to clinical trial participation.
- → Increased awareness for participants on clinical trial participation value and process.

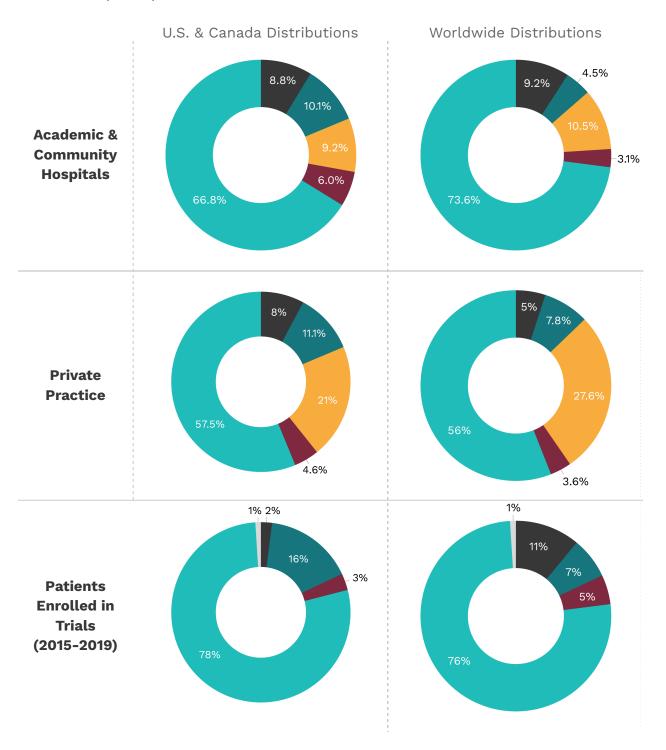
#### **Ethical Considerations**

Trust is hard to build and easy to destroy; therefore careful and respectful measures are needed. The clinical research team is the face of your clinical trials and they are critical to building trusted relationships with participants. The recommendations provided here should be used as a starting point and then customized for diverse communities or geographic areas, and for your trial.

# Diverse Representation Leads to Diverse Participation

Race and ethnicity of site staff influences the race and ethnicity of clinical trial participants.

- White
- Asian
- Black
- LatinX
- Other
- American Indian/Alaska Native



# Benefits/Value of diverse health care providers and clinical teams (for healthcare)

# INCREASE



# DECREASE



# IMPROVE 🛩

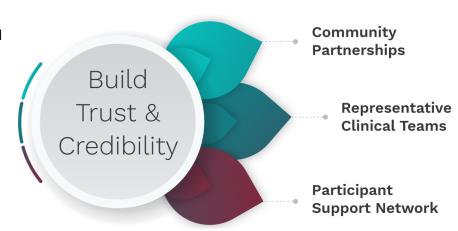


- Comfort of patients and caregivers
- Time health care provider spends with patient
- Trust in the healthcare system
- Wait times for treatments
- Time to screening
- Implicit biases
- Medication adherence
- Shared decision-making
- Patient understanding of cancer risk
- Patients perceptions of treatment decisions

The relationship between the clinical team is critical for continued participation and for a person-centric approach. Participants need to see themselves or communities represented in the clinical team. **Clinical staff** should be **representative** of the populations participating in the clinical trial. This is critical for building trust.

# Additional resources on building trust and credibility

- 1. <u>Develop</u>
  <u>Community</u>
  Partnerships
- 2. <u>Develop a Virtual</u>
  <u>Participant Support</u>
  <u>Network to Build</u>
  Trust



Use Artificial Intelligence / Machine Learning (AI/ML) to analyze Real World Data/ Evidence (RWD/RWE) from previous studies to identify the makeup of clinical teams by geographic location or clinical centers. Use digital platforms and solutions to identify clinical partners (including underrepresented Principal Investigators). Digital solutions, digital campaigns, and virtual visits and on demand videos can be utilized when designing a plan to diversify the clinical team and better match the populations of interest. See the "Elements of a Diverse, Equitable, and Inclusive Digital Clinical Trial" for details on using each of these tools.

# **Invite and Support Diverse Site Investigators**

#### Invite

- Use AI/ML to analyze real-world data to identify diverse clinicians from sites
  across the country. Start with recommendations from the "<u>Use Real-World</u>
  <u>Data and Real-World Evidence</u>" to optimize your queries, and identify the best
  data sources.
- 2. **Consult with professional societies** to identify institutions who are actively improving the culture and climate related to diversity, equity and inclusion for their clinical staff (e.g. New AAMC report assesses diversity, equity, and inclusion in medical schools).
- 3. Use digital marketing, on demand videos, and virtual visits to explain the process of leading clinical trials and **benefits associated** with them, to reach diverse clinicians from across the world, and support them with entering into the clinical trials industry.
- 4. Expand **invitations** to healthcare providers at **non-academic** medical center hospitals and clinics.
- 5. Look to **Federally Qualified Health Centers** for diverse clinical teams.
- 6. Work with senior principal investigators to develop an **apprenticeship program** for underrepresented clinicians; set-up a senior PI and junior co-PI program.
- 7. Learn how a **digital platform** such as <u>Inlightened</u> can help with reaching diverse clinicians and health care professionals.

# Support

- 1. Recognize and **reward investigators** for **innovative strategies** and meeting diversity goals.
- 2. Include **budget allocations** for training junior investigators, from underrepresented groups.
- 3. Implement a sustainable program to help **identify and train future principal investigators**.
- 4. **Collaborate** with Historically Black colleges and universities (**HBCUs**) and other institutions with medical professionals from underrepresented groups, to create fellowship and training programs.
- 5. Use digital platforms and solutions to develop online training programs.



- 6. Collaborate with professional societies (e.g. <u>Digital Medicine Society</u>, <u>American Medical Association</u>) and trade organizations (e.g. <u>Association of Clinical Research Professionals</u>, <u>Center for Information and Study on Clinical Research Participation</u>) to **develop training and education programs** for new investigators.
- 7. Examples of **support in action** to diversify clinical investigators:
  - a. <u>ABBOTT and Women as One Partner to Help More Underrepresented</u> Physicians Lead Clinical Trials.
  - b. <u>ABBOTT Launches New Initiative to Drive Diversity in Medical Research and Improve Care Among Under-represented Populations</u>.
  - c. <u>Diversity initiative backed by Bristol Myers Squibb Foundation, Gilead picks physicians for training.</u>
  - d. <u>GSK announces a \$10M program to advance Black people, Latinx people, women in STEM.</u>
  - e. Novartis Lights A Beacon Of Hope For Diversity And Inclusion.



### **References & Resources**

- 1. ABBOTT and Women as One Partner to Help More Underrepresented Physicians Lead Clinical Trials. Partnership to train more female and underrepresented physicians to pursue clinical trial research and help recruit clinical trial participants from historically underrepresented groups.
- 2. ABBOTT Launches New Initiative to Drive Diversity in Medical Research and Improve Care Among Under-represented Populations. Abbott's new initiative is focused on reducing barriers to access and building on enhancing diversity within its own clinical trials.
- 3. Addressing Equity, Diversity, and Inclusion of Black Physicians in the Oncology Workforce. ASCO programs for increasing diversity with the oncology clinical workforce.
- 4. <u>Addressing Racial Inequities in US Cancer Clinical Trials</u>. Minority groups who faced oppression since this country's founding are much less represented as physicians.
- 5. Adherence to cardiovascular disease medications: does patient-provider race/ethnicity and language concordance matter? Patient-physician race/ethnicity and language concordance may improve medication adherence and reduce disparities in cardiovascular disease by fostering trust and improved patient-physician communication.
- 6. American Medical Association. Continuing medical education (CME) for physicians.
- 7. <u>Association of Clinical Research Professionals</u>. Training, resources, and updates for clinical research professionals from across the clinical research industry.
- 8. <u>Association of Racial/Ethnic and Gender Concordance Between Patients and Physicians With Patient Experience Ratings</u>. Efforts to improve physician workforce diversity are imperative. Delivery of health care in a culturally mindful manner is essential.
- 9. <u>Black physicians help build trust in clinical trials, medical care after decades of skepticism</u>. Dr. Jackson Wright is successful at recruiting Black patients to participate in his research studies, in part because he— and much of his team—look like them.
- 10. <u>Center for Information and Study on Clinical Research Participation</u>. CISCRP provides high-quality educational resources, programs, and services that increase awareness and understanding of the clinical research process.
- 11. <u>Digital Medicine Society</u>. Resources on clinical trial participation. Clinical teams can use these to better understand the participant experience and prepare training materials for them.
- 12. <u>Diversity initiative backed by Bristol Myers Squibb Foundation, Gilead picks physicians for training</u>. Engaging and supporting on the community level by funding underrepresented physicians.
- 13. <u>FDA Drug Trials Snapshot</u>: 2015-2019 Drug Trials Snapshots Summary Report. A five year summary and analysis of clinical trials participation and demographics worldwide.



- 14. <u>Global Investigative Site Personnel Diversity and Its Relationship with Study Participant Diversity</u>. Under-representation in clinical trials can be addressed through identifying, hiring and supporting investigative site personnel to best reflect the patient communities that they serve.
- 15. GSK announces a \$10M program to advance Black people, Latinx people, women in STEM. GSK announced a commitment of \$10 million over 10 years to help Black, Latinx and female Philadelphia students overcome obstacles to their pursuit of careers in science, technology, engineering, and mathematics.
- 16. How Psychological And Cultural Safety Can Accelerate Diverse Patient Recruitment And Retention. One way to resolve issues facing clinical trial recruitment and retention is with a patient-centric trial design created on a foundation of psychological and cultural safety.
- 17. Impact of Physician Race on Patient Decision-Making and Ratings of Physicians: a Randomized Experiment Using Video Vignettes. Black patients viewed the doctor in a scripted vignette more positively, and were more receptive to the same recommendation, communicated in the same way, with a black vs. white physician.
- 18. "It's Important to Work with People that Look Like Me": Black Patients' Preferences for Patient-Provider Race Concordance. Patients with a race concordance preference felt more comfortable with their provider, perceived that it was easier to build a rapport with their provider, and emphasized the value of representation for themselves and their children.
- 19. <u>Minority Physicians' Role in the Care of Underserved Patients</u>. Diversifying the Physician Workforce May Be Key in Addressing Health Disparities.
- 20. <u>New AAMC report assesses diversity, equity, and inclusion in medical schools</u>. The report describes institutional practices to improve the culture and climate related to DEI among students, faculty, and staff.
- 21. Novartis Lights A Beacon Of Hope For Diversity And Inclusion. The Beacon of Hope program is a 10-year, multimillion dollar program being conducted in collaboration with 26 historically Black colleges, universities, medical schools, Thurgood Marshall College Fund (TMCF) and other key partners to create programs and alliances which address systemic health disparities across the research and medical development ecosystem.
- 22. Patient-centered communication, ratings of care, and concordance of patient and physician race. Comparing patient-physician communication in race-concordant and race-discordant visits indicates that increasing ethnic diversity among physicians may be the most direct strategy to improve health care experiences for members of ethnic minority groups.
- 23. <u>Physician Racial Bias and Word Use during Racially Discordant Medical Interactions</u>. Non-Black physicians with higher levels of implicit racial bias may use more words that reflect social dominance and anxiety when interacting with Black patients.
- 24. <u>Race, ethnicity of trial patients 'highly correlated' with staff of site investigators: study</u>. This survey mapped the diversity of global investigative sites, 3,200 sites worldwide.
- 25. <u>Race, gender, and partnership in the patient-physician relationship</u>. Patients seeing physicians of their own race rate their physicians' decision-making styles as more participatory.



- 26. Recommendations for Identifying and Developing New Investigators. Medical schools, industry sponsors, clinical research organizations (CROs), and physicians themselves should use active measures to identify, initiate, and train site investigators. Likewise, sponsors and CROs should provide structured opportunities for these new investigators to become involved in their clinical studies.
- 27. The Effects of Oncologist Implicit Racial Bias in Racially Discordant Oncology Interactions. Oncologists higher in implicit racial bias had shorter interactions, and patients and observers rated these oncologists' communication as less patient-centered and supportive.