ACCURE

ACCURE (Accountability for Cancer Care through Undoing Racism and Equity) worked for both Black and White patients!

Purpose of ACCURE

ACCURE improved racial differences in the quality and completion of treatment for Black and White patients with stage 1 or 2 breast and lung cancer. Two hospitals participated - Cone Health Cancer Center in Greensboro, NC and UPMC Hillman Cancer Center in Pittsburgh, PA.



At each cancer center, ACCURE trained a nurse navigator about challenges limiting care for Black patients, including implicit bias (unintentional attitudes) and institutional racism (racism built into policies, practices, and cultural norms).

Continuing education sessions were also held for all cancer center staff.

Nurse navigators used an electronic system called a real time registry that alerted the navigator when a patient missed an appointment or did not reach an expected milestone in care.

Process for Conducting Telephone Interviews

Specially trained members of the Greensboro Health Disparities Collaborative led telephone interviews with patients enrolled in the ACCURE study. As often as possible, the same interviewer led all (or most) of the interviews for the same patient. To protect patient privacy, answers to interview questions were tracked using a number system instead of patient names.

Findings from the Telephone Interviews

*Please note that the findings reflect general patterns we observed across all ACCURE participants who did and did not complete treatment by the end of the ACCURE study.

Information from the First Year of Interviews

All Participants

For all participants, physical health improved from the 1st to 2nd interview. Three months after the 1st interview, patients who did not complete treatment became less satisfied with their care, and 12 months after the 1st interview, patients who completed treatment displayed more trust of the health care system.

Blacks Patients Who Completed Treatment vs. Blacks Patients Who Did Not

At 3 months after the 1st interview, Black patients who completed treatment were more satisfied with the interactions from their health care team, as compared to Black patients who did not finish treatment. One year after the 1st interview, Black patients who completed treatment found it easier to understand health information and were less likely to distrust medical organizations and staff, compared to those who did not complete treatment.

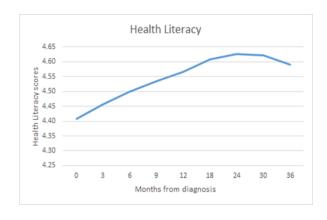
White Patients Who Completed Treatment vs. White Patients Who Did Not

During the 1st 2 interviews, White patients who completed treatment were more satisfied with the interactions from doctors and staff than White patients who did not complete treatment. One year after the 1st interview, White patients who completed treatment found it easier to understand health information than White patients who did not complete treatment.



Health Literacy Scores Over Three Years of Interviews

Over the course of the study, ACCURE researchers measured patients comfort with understanding health information using a concept called a health literacy score. Health literacy scores improved for all participants in the 1st 2 years, and decreased slightly in the 3rd year.



The Role of Telephone Interviews

Enrolled patients participated in telephone interviews over 3 years. In the 1st year, patients were asked to participate in 4 telephone interviews, answering questions about the following topics:

Health Status

Refers to the health (good or bad) of a person

Health Care Utilization

Measures a person's use of available health care services

Health Literacy

How well a person understands health information and services he or she needs

Perceived Racism

A person's experience of racial discrimination

Medical Mistrust

A person's distrust of health care systems and professionals

In the 2nd and 3rd year, enrolled patients participated in 2 telephone interviews each year and answered similar questions. The purpose of the telephone interviews was to gather information from patients on their experiences with the cancer care system,



Who led the ACCURE study?

The Greensboro Health Disparities Collaborative (GHDC) designed the ACCURE study and was awarded a 5-year grant from the National Cancer Institute to lead this study. GHDC started in 2003 as an outgrowth of the Partnership Project, an anti-racism training organization. The mission of GHDC is to assist communities in defining and resolving issues related to disparities in health.

This group is a community-academic-health agency partnership. Each member is required to attend the Racial Equity Institute's anti-racism training and monthly GHDC meetings.

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THE GREENSBORO **HEALTH DISPARITIES C**OLLABORATIVE PRESENTS FINDINGS FROM THE TELEPHONE INTERVIEWS OF THE ACCOUNTABILITY FOR CANCER CARE THROUGH UNDOING RACISM AND

EQUITY STUDY