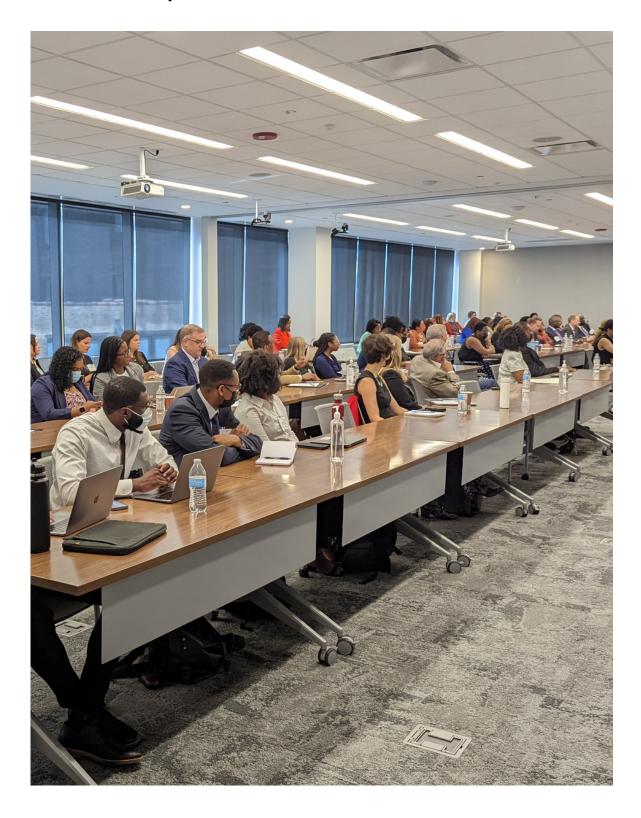


## **2022 Impact Report**

Annual Summary of CHI Initiatives to Make Healthcare More Equitable





#### Who We Are

The Center for Healthcare Innovation (CHI) is an independent, non-profit research and educational institute dedicated to making healthcare more equitable for all patients.

#### **Our Vision**

To be the leading global platform for meaningful change in health equity.

#### **Our Mission**

To bring together experts and ideas from all over the world to improve healthcare for everyone, regardless of socioeconomic status, gender, race, ethnicity, or other social determinants.

#### **Our Value Proposition**

Embracing new perspectives to make healthcare more equitable.

"An outstanding crosssectional representation of healthcare experts provided the basis for a stimulating discussion on the meaning of patient-centricity and healthcare value from diverse perspectives." – Dr. Greg Gilmet, MD, MPH, Vice President Medical & Scientific Affairs, Upsher-Smith Laboratories

#### **Our Values**

- Welcoming We bring together diverse viewpoints and invite all to participate
- Committed We see our work through
- Imaginative The possibilities for the next solution are endless
- Forward-thinking We're already thinking about what's next

#### **Our Objectives**

- Advocate for vulnerable, at-risk, and underserved patients.
- Convene influential leaders, thinkers, and doers to develop collaborative relationships to make healthcare equitable for all patients.
- Increase the understanding of the definition, framework, and metrics of health equity.
- Produce primary, impactful research focused specifically on the latest trends, challenges, and opportunities of health equity.
- Analyze, identify, and disseminate best practices for reducing healthcare disparities for underserved patient groups.
- Develop ideas for policymakers to eliminate obstacles to care and reduce health disparities.



#### **What Makes CHI Unique**

- We focus on research and education that aims to optimize healthcare as a core human value
- We are a 501(c)(3) non-profit, charitable organization dedicated to making healthcare more equitable for all patients
- We are rigorously objective, unbiased, and non-partisan
- We are an independent, neutral institute, not associated with or captive of industry, academia, government, or other institutions
- We approach our research, solutions, and education through a multi-perspective lens, including the patient, provider, pharma, pharmacy, payer, and policymaker perspectives
- We aim to bring in new perspectives into healthcare including consumerism, technology, artificial intelligence
- We are a global organization, and we view U.S. healthcare through a global lens
- We are an interdisciplinary group of innovative healthcare leaders, physicians, executives, entrepreneurs, authors, academics, and innovators
- We operate for the benefit of other healthcare groups including patients, providers, pharma, pharmacy, payers, and policymakers and we incorporate each unique perspective into our research

"The Healthcare Executive Roundtable on Patient-Centric Healthcare Value was excellent. The quality of the program and the expertise of the other executives added extreme value to the experience. It was an excellent use of my time." - Matt Portch, Team Lead Commercial Effectiveness, Pfizer

# Frequently Asked Questions

#### What is CHI?

We are a healthcare research and educational institute.

#### What type of organization is CHI?

We are an independent, objective 501(c)(3) non-profit.

#### What does CHI hope to accomplish?

We hope to improve healthcare for everyone, regardless of socioeconomic status, gender, race, ethnicity, or other social determinants.

#### What activities does CHI do to achieve these goals?

We advocate, research, educate, communicate, train, convene, and report on healthcare equity.

#### How does CHI make the world a healthier place?

Our research and education focus on improving healthcare equity, eliminating and reducing healthcare disparities, and increasing access for all patient groups.

#### How is CHI funded?

CHI is funded through a combination of grants from philanthropic foundations, program revenue from educational events and memberships, and individual and corporate donations from our Board of Directors and external stakeholders.

#### What are CHI's future goals?

- (1) Increase the quantity and breadth of our research and education,
- (2) Continue to attract the best and brightest human talent and grow our team, and
- (3) Continue our journey to be the leading global platform for meaningful change in health equity

## Facing the Challenges that Lie Ahead

Dear Center for Healthcare Innovation Community,

As the nation continues to recover from and adapt to the COVID-19 pandemic, health disparities remain at the forefront of critical issues facing millions of Americans. Since the Covid-19 pandemic laid bare the health inequities facing millions of Americans, there's been renewed dialogue and momentum across the industry for making healthcare more equitable for all, including historically marginalized communities of color, women, the LGBTQ+ community, and the differently-abled.

Historically marginalized groups continue to face considerable inequities in all facets of our healthcare system. The disproportionate impact of chronic diseases, the continued exclusion of many non-white patients in clinical research, and growing maternal health disparities in the US are all stark reminders of how far we have to go as a country. At the Center For Healthcare Innovation, our mission is to make healthcare more equitable for these historically marginalized groups.

Over the past several years, there's also been considerable momentum in the health disparity space. For the first time ever, many Americans are now aware that healthcare is fundamentally different for Americans based solely on race, ethnicity, gender, and other socioeconomic variables. Moreover, healthcare organizations across all sectors have begun prioritizing diversity, equity, and inclusion (DEI) and health disparity objectives. Making clinical trials more diverse has been a priority for many of the country's leading sponsors, sites, and clinical trial professionals. We've also seen many healthcare companies across the entire industry rethink the way organizations attract, recruit, hire, and promote diverse and underrepresented talent.

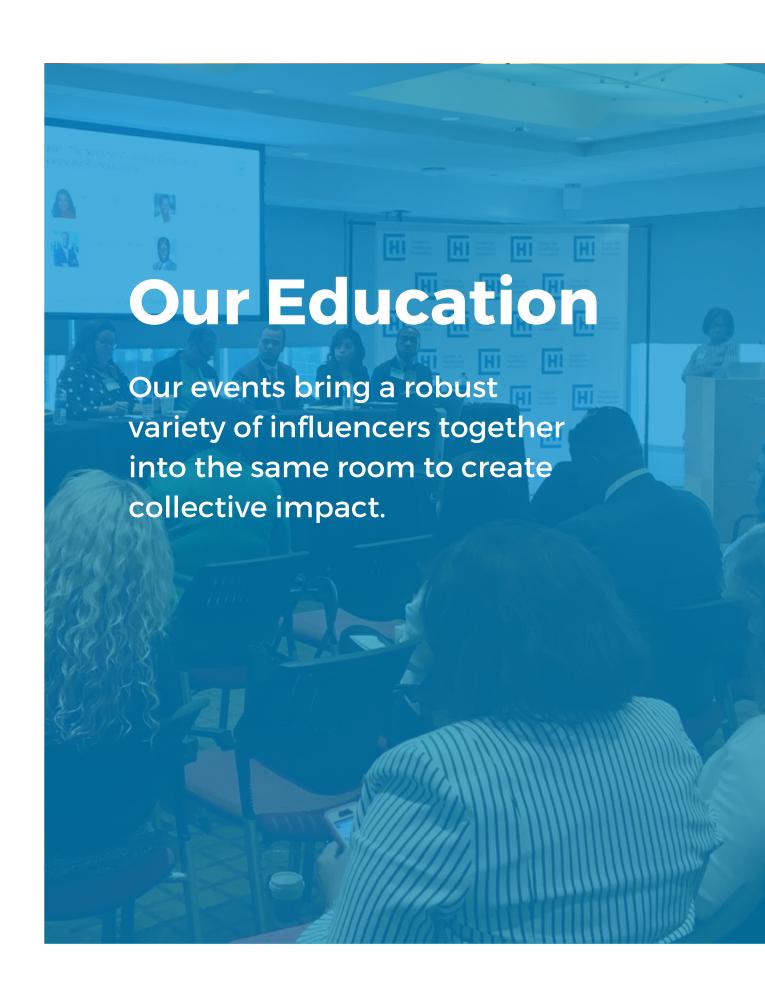
2022 was an exciting year for the Center for Healthcare Innovation. We resumed live, in-person educational events for the first time since 2019. We also launched our Diverse Talent in Healthcare, our cutting-edge virtual career fair platform designed to connect diverse and underrepresented students and professionals with DEI-focused healthcare companies and ancillary organizations. We organized a year-long, 10-part virtual educational series specifically focusing on increasing diversity in clinical research, with a specific focus on historically underrepresented communities. Our Science Runway STEM mentoring platform continues to mentor, encourage, and inspire young women and girls interested in STEM and healthcare careers. And we've continued to be a leader at the forefront of many of the country's critical health equity challenges and concerns.

As we look ahead to 2023, we are excited to be organizing leading in-person and virtual health equity events around the country. We've also strategically prioritized programs and initiatives that connect diverse and underrepresented professionals with healthcare organizations that are seeking diverse talent. Healthcare workforce diversity, particularly at the physician and executive level, is a critical issue that must be addressed as the US becomes a more diverse country. Additionally, We continue to prioritize diversity in clinical research, as it's vital to ensure the safety and efficacy of new treatments for all Americans.

We look forward to the new challenges the new year will bring. And we will tirelessly continue to bring together experts and ideas from all over the world to improve healthcare for everyone. We are committed to advocating for vulnerable, atrisk, and underserved patients. We will continue to convene influential leaders, thinkers, and doers to make healthcare more equitable for all patients. Finally, we will be leaders in identifying and disseminating best practices to make healthcare more equitable for all.

Joseph Gaspero CEO & Co-Founder Julius Pryor III
Chair of the Board of Directors

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# 10th Annual Diversity, Inclusion, & Health Equity Symposium

July 26: 8:00 - 4:00 PM CST (In-Person) July 27: 11:00 - 4:00 PM CST (Virtual) July 28: 11:00 - 12:00 PM CST (Virtual)

#### INTRODUCTION

CHI's Diversity, Inclusion, & Health Equity Symposium is one of the country's leading and longest-running events focusing specifically on health equity, health disparities, and critical diversity, equity, and inclusion (DEI) issues impacting healthcare in the U.S. The 3-day hybrid symposium features both live and virtual panel discussions, keynote addresses, a career fair, and networking opportunities. The symposium brings together leading healthcare executives, physicians, researchers, patient groups, academics, authors, clinical trial professionals, and DEI advocates in a collaborative forum to discuss health equity. The symposium focuses on the latest trends, challenges, and opportunities in the marketplace and workplace. Key opinion leaders and symposium participants will discuss new ideas and perspectives on (1) diversifying clinical trials to include underrepresented groups, (2) developing a diverse workforce and inclusive workplace, and (3) reducing systemic health disparities that disproportionately affect marginalized communities of color. The symposium also features a career fair that connects participants with many of the country's leading healthcare organizations specifically focusing on hiring underrepresented talent. This 3-day event also aims to address the broader health disparities that disproportionately impact marginalized communities in the U.S. Participants will learn the latest insights and industry-tested solutions, share new ideas and perspectives, and meet new industry and marketplace colleagues.

#### **VIEW EVENT RECAP**





# DIVERSE TALENT IN HEALTHCARE

Diverse Talent in Healthcare is a virtual career fair platform to connect innovative, DEI-focused healthcare and ancillary organizations with diverse and underrepresented professionals, including people of color, women, LGBTQ+ community, veterans, and the differently-abled. The career fair welcomes diverse job seekers of all career stages and all subsets of healthcare, including the provider, pharma, technology, and other domains. Employers will have the opportunity to meet and interview diverse jobseekers, collect résumés, and position your company in a competitive labor market.



575+
EVENT
ATTENDEES



320 RESUMES SUBMITTED



215
ORGANIZATIONS
REPRESENTED



TT EMPLOYER BOOTHS

## From Researcher to Patient: Making Clinical Trials More Diverse

#### **OVERALL PROJECT GOAL**

This 10-part virtual program series provides an in-depth exploration and review of diversity in clinical trials in the U.S. According to the FDA, African Americans and Hispanics comprise only 8% and 11% of clinical trial participants in the U.S., while comprising 13% and 19% of the total U.S. population. CHI's educational series will convene many of the country's leading clinical trial and diversity experts, physicians, scholars, researchers, authors, and key opinion leaders to explore the factors that have led to the historical and current underrepresentation of BIPOC patients in U.S. clinical trials.

In collaboration with members from the AGREED workgroup (AGREEDementia.org), this educational series also provides best practices, new clinical and research insights, and novel trends in building a more diverse and inclusive clinical trial and research ecosystem in the U.S.

#### IN PARTNERSHIP WITH







#### **Microaggressions and Implicit Biases in Healthcare**

#### Tuesday, January 4, 2022 | 11:00 AM - 12:00 PM CST

This educational program explores microaggressions and biases in the healthcare industry, including how they impact both patient health outcomes as well as employees of healthcare organizations. Microaggressions and implicit biases in the clinical care setting have a detrimental impact on patients' evaluation of needed services, health outcomes, patients' perception of the healthcare system, and overall quality of care. A recent study found that 73% of white medical students held "at least one false belief about the biological differences between races." In another example, the 2015 National Healthcare Quality and Disparities Report found that Black, Latin, American Indian, and Alaskan Native individuals receive worse care than White individuals for approximately 40% of quality measures. Moreover, microaggressions and implicit biases in the workplace impact employee productivity, organizational development, and external perception, among other negative outcomes. A 2019 Deloitte study found that "whether based on gender, age, race, ethnicity, sexuality, disability or military status, more than 60% of respondents reported a presence of bias in their workplace." Additionally, 70% of Black physicians and 69% of Asian physicians have experienced patient bias. This educational program brings together a distinguished group of industry experts to discuss strategies for patients, providers, teams, and organizations to address, reduce, and ultimately eliminate microaggressions.

**View Video** 

## **Understanding Health Literacy for Clinical Research Enrollment**

#### Thursday, February 3, 2022 | 11:00 AM - 12:00 PM CST

This program explores the intersection of health literacy and equitably recruiting patients of color to make clinical trials more diverse, equitable, and accessible. The U.S. Department of Health and Human Services defines health literacy as "the degree to which individuals can find, understand, and use information and services to inform health-related decisions and actions for themselves and others." Data indicates that only 36% of Americans have only basic or below basic health literacy skills. Lower health literacy is also more common in older adults, communities of color, medically underserved Americans. Additionally, limited health literacy costs the healthcare system money and results in higher than necessary morbidity and mortality. The CDC estimates improving health literacy could prevent nearly 1 million hospital visits and save over \$25 billion a year. Moreover, health literacy can impact clinical trial patient recruitment. According to Clinedge, Over 75% of all trials fall short of patient enrollment goals, and health literacy is a significant cause. Furthermore, patients of color and other diverse groups are underrepresented in clinical research. This program brings together experts to discuss effective strategies for properly communicating clinical trials to under-represented groups to make trials more diverse and representative of the U.S. population.

**View Video** 

## How the Prevalence of Chronic Diseases Impacts Clinical Research

#### Tuesday, March 3, 2022 | 11 AM - 12 PM CST

This education program focuses on chronic medical conditions in underrepresented groups and how these conditions impact clinical trial participation. Specifically focusing on kidney diseases, the discussion will center around eligibility criteria, safety, and dialogue with patients from underrepresented communities. One study found that a "lack of diversity in clinical trials is a moral, scientific, and medical issue. When trial participants are homogenous (e.g., primarily one gender, race/ethnicity, or age group), findings may be skewed and result in a body of clinical knowledge that is not generalizable"(1). New NIH data shows "35% of African Americans suffer from kidney failure and Hispanics have experienced a 70% increase in kidney failure cases since 2000"(2). Furthermore, African Americans are "10 times more likely to develop kidney failure related to hypertension, and 3 times more likely to progress to kidney failure than Caucasians"(3). In a study through the American Journal of Nephrology, in 3,000 chronic kidney disease-related clinical trials, only 34 were directed toward African Americans. With African Americans comprising 13.2% of the US population and having an elevated risk, this number is exceptionally low (4). This educational program brings together industry experts to discuss the impact of chronic conditions on clinical trial enrollment in underrepresented groups and solutions to address barriers in trial participation related to chronic diseases through patient communication, revised eligibility criteria, and community engagement.

**View Video** 

#### The Intersection of Genetics & Cancer in Clinical Trials

#### Thursday, April 7, 2022 | 11 AM - 12 PM CST

This program focuses on the intersections of genetics, Black Breast Cancer, and clinical trials. Black women are 41% more likely to die of breast cancer than white women, with Black breast cancer patients experiencing the lowest 5year survival rate of any race or ethnicity. Overall 5-year relative survival rates are 81% for Black women vs 91% for white women. Black women under 35 get breast cancer at twice the rate and die at three times the rate. A 2021 study published in Cancer Medicine found that Black women have a nearly three-fold increased risk of Triple-Negative Breast Cancer-an aggressive subtype of breast cancer. Despite these disturbing statistics, Black women are largely excluded from trials that study breast cancer drugs and treatments, which means that these fundamental safety and efficacy concerns aren't being answered for Black women's bodies. Moreover, with low participation rates in clinical trials, Black women miss access to newly emerging and often life-extending treatments not otherwise available. As documented by JCO Precision Oncology, Memorial Sloan Kettering Cancer Center, and many others, Black women experience many cancer drug side effects differently. Trial data, the resulting treatment protocols, and product development don't account for the many factors of Black Breast Cancer. We will not be able to change the devastating Black Breast Cancer mortality numbers unless we understand the physiology of Black women. We cannot do that until we have more Black women participating in clinical research. Featuring the expertise of Ms. Ricki Fairley, a breast cancer survivor and clinical trial expert, the webinar will discuss how to address common pitfalls that result in the underrepresentation of Black women in cancer clinical trials.

#### **Health Equity Concerns of Decentralized Clinical Trials**

#### Thursday, June 2, 2022 | 11 AM - 12 PM CST

The COVID-19 pandemic has accelerated a paradigm shift in the execution of clinical trials from site-based to decentralized trials, emphasizing increasing convenience and access to patients. Regulators' sentiment is in lockstep with the industry, issuing guidance for implementing the use of telemedicine services, remote monitoring, and home health visits. As broader adoption of decentralized trial activities continues, addressing health equity concerns around the "digital divide" or unequal access to internet technologies between low and high socioeconomic status (SES) populations must also be broad. Patient recruitment strategies will need to mitigate the barriers experienced by low SES populations who more commonly lack the prerequisite tools, such as broadband internet, to benefit from the decentralized services such as electronic consent and video conferencing. According to the Health and Human Services (HHS), 45% of people in poverty lacked broadband internet, with 26% having no internet access in 2019. This digital disparity becomes more pronounced based on age, race/ethnicity, and geography. Low SES minority groups such as African Americans (57%) and Latinos (52%) were less likely to have broadband internet when compared to their White (44%) counterparts. The digital gap is just as stark in the elderly groups, with 40% of those living in poverty lacking internet access. Finally, low SES households living in non-metropolitan areas were 7% less likely to have internet access than their metropolitan dwelling counterparts. Low SES and minority populations have long been underrepresented in clinical trials. As such, decentralized or hybrid clinical trial designs could benefit from incorporating health equity best practices into enrollment and retention plans. By convening many of the country's leading clinical trial and diversity experts, physicians, scholars, authors, and key opinion leaders, this program will explore health equity concerns of decentralized clinical trials in the U.S. This program will also provide best practices, new insights, and novel trends in building a more diverse and inclusive clinical trial ecosystem in the U.S. to explore health equity concerns in decentralized clinical trials.

**View Video** 

## **Increasing Diversity among Principal Investigators & the Clinical Trial Community**

#### Thursday, September 1, 2022 | 11 AM - 12 PM CST

This educational program will explore the relationship between communities of color, who are often underrepresented in clinical trials, and diverse teams of principal investigators. The discussion will focus on how building diverse teams of healthcare professionals and clinical trialists may result in better clinical trial patient recruitment and overall trial success. A 2020 study indicated that only 23% of African Americans and 26% of Latin Americans have a physician that shares the same race or ethnicity, while for white Americans, that number is 82% (1). Moreover, research often shows that minority patients prefer to be treated by minority doctors, and racial concordance between patients and providers may lead to better health outcomes. For example, in an analysis of over 100,000 patient surveys from 2014 to 2017, a team of Penn Medicine researchers found that patients were more likely to give the maximum patient rating score when they shared the same racial or ethnic background as their physician (2). This educational program convenes a group of clinical trial experts to discuss how increasing diversity among the ranks of providers, principal investigators, and other clinical trial professionals may result improve clinical trial recruitment among communities of color. This program is in partnership with the Black Healthcare & Medical Association.

**View Video** 

## **Engaging Historically Underrepresented Asian Communities in Clinical Trials**

#### Thursday, October 20, 2022 | 11 AM - 12 PM CST

This program explores the root causes of the underrepresentation of Asian Americans in U.S. clinical trials. According to the FDA's 2015-2019 Drug Trials Snapshots Summary Report, Asian comprised just 2% of U.S. clinical trial participants while comprising 6% of the overall U.S. population. Additionally, the latest census bureau data indicated that 20 million Americans identified as "Asian," and another 4 million checked boxes as "Asian" combined with another race group, for a total of 7.2 percent of the population. The results make the Asian population the fastest growing racial group in the United States at 35.5%. Many of the nation's leading health equity advocates and clinical trial leaders are concerned with the underrepresentation of specific Asian subgroups, overall demographic trends, and a growing Asian population in the United States. These concerns stem from a variety of factors, including social determinants of health, P.I. and clinical trialist demographics, and cultural and linguistic pitfalls. This program convenes a group of clinical trial experts, providers, and DEI executives to discuss best practices and recommendations for making clinical trials more inclusive for Asian Americans.

**View Video** 

## **Engaging Historically Underrepresented Hispanic Communities in Clinical Trials**

#### Thursday, October 27, 2022 | 11 AM - 12 PM CST

This program explores the root causes that result in the underrepresentation of Latin Americans in U.S. clinical trials. According to the FDA, Latin Americans comprised only 11% of the total clinical population for drugs approved in 2020, while Latin Americans comprise almost 19% of the total U.S. population. Furthermore, the number of Latin Americans in the U.S. is rapidly growing, and Latin Americans currently account for over half of the country's population growth. This discordance results from a variety of factors, including social determinants of health, PI and clinical trialist demographics, and cultural and linguistic pitfalls. This program Group convenes a group of clinical trial experts, providers, and DEI executives to discuss best practices and recommendations for making clinical trials more inclusive for Latin Americans.

**View Video** 

## **Engaging Historically Underrepresented Members of the LGBTQ Community in Clinical Trials**

#### Thursday, November 17, 2022 | 11 AM - 12 PM CST

This educational program will explore strategies to engage members of LGBTQ communities for participation in clinical trials. The discussion will focus on best practices for patient-centered engagement that can result in better clinical trial patient recruitment and retention. According to the Human Rights Campaign Foundation (HRC), approximately 20 million adults, or 8% of the U.S. population, identified as lesbian, gay, bisexual, transgender, and queer/questioning (LGBTQ) on the 2020 U.S. Census Bureau's Household Pulse Survey. The LGBTQ community comprises an increasingly diverse group with unique health needs that remain underserved and understudied, resulting in health disparities. In the oncology space, LGBTQ individuals have lower rates of cancer screening, higher rates of anal and cervical cancer, and greater breast cancer mortality. Continued underrepresentation in clinical trials limits the generation of clinical data that is essential for developing effective treatments for LGBTQ patients. An analysis conducted by the American Association for Cancer Research revealed that out of 348 sexual and gender minority studies funded by the National Institutes of Health (NIH) in 2018, less than 8% focused on cancer. Furthermore, quantifying LGBTQ representation in cancer drug trials is impeded by inconsistent data collection practices for sexual orientation and gender identity (SOGI) demographics. In a survey of 53 NCI Community Oncology Research Program (NCORP) practice groups, only 24% routinely collected sexual orientation data. Common barriers that are unique to LGBTQ communities include mistrust and/or lack of understanding of the clinical trials process, fears of exploitation, confidentiality, and study design concerns. Strategies for addressing these barriers must start with engaging community members and advocacy groups to provide input on research design, cultural competency training for research staff, and research education.

**View Video** 

## **Engaging Historically Underrepresented Members of the African American/Black Communities in Clinical Trials**

#### Wednesday, December 7, 2022 | 11 AM - 12 PM CST

Developing strategies to engage clinical trial participation in underrepresented groups will require a thorough understanding of past challenges, current attitudes, and future implications. Almost 50 years after the unethical research practices in the Tuskegee Syphilis study caused public outrage, remnants of mistrust among African American/Black communities continue to impact confidence in clinical trials. Despite decades of reforms aimed at establishing basic research standards and protecting the rights of trial participants, African American/Black communities remain underrepresented in clinical trials. In a 2020 FDA report on clinical trials resulting in 53 novel drug approvals, African Americans represented only 8% of U.S. clinical trial participants despite comprising 13% of the U.S. population. Across therapeutic areas, the gap between the disease population and trial representation widens. For example, in multiple myeloma (MM) oncology trials, a disease in which Black Americans account for approximately 20% of annual cases, the median percentage of Black Americans enrolled across 21 pivotal trials was just 4.5%. Strategies for proportional clinical trial representation must address cultural barriers to enrollment and improve upon outdated recruitment and retention practices. Increasing African American/Black participation in clinical trials ensures that treatments are adequately tested in populations to whom it will be marketed. Increased diversity in clinical trial populations can also yield racial and ethnic differences in disease progression and drug response across demographic groups.

# Understanding and Addressing Obesity Disparities in the U.S.

#### **OVERALL PROJECT GOAL**

Obesity is a serious disease that impacts millions of Americans. In fact, the US obesity prevalence was 42.4% in 2017 - 2018 and the number of Americans affected by obesity has grown significantly. According to the CDC, the prevalence of obesity increased from 30.5% to 42.4%, and the prevalence of severe obesity increased from 4.7% to 9.2%" from 1999-2019. Obesity can also lead to other chronic diseases such as diabetes and heart disease. More than 100 million Americans - nearly half of all U.S. adults - suffer from diabetes or pre-diabetes, while one in three U.S. children born after 2000 is expected to develop Type 2 diabetes. However, like most chronic conditions in the U.S., obesity disproportionately impacts marginalized communities of color. African Americans (49.6%) had the highest age-adjusted prevalence of obesity, followed by Hispanics (44.8%), and whites (42.2%). JAMA has recently reported: "For the first time in American history, life expectancies are falling, with declines for three consecutive years due in part to significant increases in midlife mortality from diet-related diseases". This three-part virtual education series explores obesity disparities, how obesity disease disproportionately impacts marginalized groups, and steps for building healthier communities. The educational series begins with a review of the disease, the associated stigmas, and common misconceptions. Part 2 of the series specifically explorers the factors that make obesity more prevalent in marginalized communities, including a discussion on social and political determinants of health. Part 3 of the educational series provides the latest trends and insights in rooting out obesity disparities to create healthier thriving communities.

#### IN PARTNERSHIP WITH









#### **Understanding Obesity as a Disease**

#### Tuesday, April 12, 2022 | 11 AM - 12 PM CST

This educational program explores obesity as a chronic disease that impacts millions of Americans. Over the past 25 years, the prevalence of obesity has increased from 30.5% to 42.4%, and obesity affects well over 100 million Americans. The disease of obesity also impacts children. In 2017, 17% of American children over 2 are affected by obesity, and 1 in 8 preschoolers has obesity. Obesity also puts Americans at serious risk to develop diabetes, hypertension, heart disease, and other chronic conditions. This educational program discusses the disease of obesity and why obesity rates have increased over the past generation. The program also explores the complex socioeconomic factors that result in obesity disparities that impact demographic and socioeconomic groups. The discussion also lays the groundwork for part 2 of the series that explores obesity disparities and why obesity is more prevalent in communities of color.

**View Video** 

#### **Exploring Obesity Disparities in Marginalized Groups**

#### Wednesday, June 8, 2022 | 11 AM - 12 PM CST

This program explores the root causes of obesity disparities in Black and Brown communities throughout the US. According to the CDC, obesity impacts 49.6% of African Americans and 44.8% of non-white Hispanic Americans, compared to only 42.2% of white Americans. Black and Brown children are also disproportionately affected by childhood obesity. 2017 CDC data indicates that among racial groups, obesity impacts 25.6% of non-white Hispanic children and 24.2% of African American children, compared to only 16.1% of white children. These obesity disparities result from a complex confluence of socioeconomic, environmental, cultural, and psychological factors. This webinar examines the causes that result in obesity disparities that disproportionately impact black and brown communities.

**View Video** 

#### **Creating and Sustaining Healthy Communities**

#### Tuesday, August 23, 2022 | 11 AM - 12 PM CST

The third and final program of CHI's obesity disparity series begins to offer actionable solutions for how communities, organizations, and individuals can work together to reduce obesity rates in black and brown communities. This program builds upon the first two programs in the educational series which explore obesity as a disease and why obesity disproportionately impacts communities of color. This educational program offers policy recommendations and practical steps that can address and ultimately reduce these disparities. This discussion brings together leading healthcare experts, community groups, and health equity champions to discuss the challenges outlined above as well as long-term solutions to reducing obesity disparities impacting communities of color.

**View Video** 

#### **Other CHI Webinars**

## **Equitable Access to Rare Diseases Therapies: Why We Must Think Differently To Ensure Broad Access for All**

#### Wednesday, February 23, 2022 | 11 AM - 12 PM CST

In this webinar, distinguished panelists representing diverse patient communities, healthcare providers, multifaceted manufacturers, and patient support providers, will address opportunities and challenges to equitable access to rare disease therapies. What gaps must be addressed? What approaches can be incorporated into the way rare disease therapies are developed and made commercially available? Given the high cost of many rare disease therapies, who have the onus for enabling solutions that are fair and far-reaching? The discussion promises to be both provocative and informative.

**View Video** 

#### Prenatal to Postpartum - Maternal Health Disparities in the U.S.

#### Thursday, April 21, 2022 | 11 AM - 12 PM CST

In the United States, Black women have three times the risk of maternal mortality (MM) than white women and a significantly higher risk for severe maternal morbidities, such as preeclampsia and other cardiovascular conditions. Furthermore, the issue of high maternal mortality also stems from social stigma and health inequities. For example, regardless of insurance status, socioeconomic status, age, or severity of their condition, the pregnancy-related mortality rate for Black women with college degrees is 5.2 times that of their white counterparts. Moreover, the COVID-19 pandemic has exacerbated maternal mortality for women of color and worsened maternal health disparities. This webinar will bring together leading experts to discuss the causes of these significant maternal health disparities and discuss innovative solutions to combat this serious issue in healthcare. The discussion will include leveraging new technologies and policies and providing patient-centered care that is responsive to the needs of patients no matter their insurance status, race, socioeconomic status, or age. Other solutions will include expanding healthcare coverage and access to comprehensive, high-quality, safe reproductive healthcare. Finally, at an organizational level, the discussion will highlight quality improvement and patient safety initiatives that hospitals can undertake to address the disparities in maternal mortality rates between women of color and white women.

**View Video** 

# Addressing Gender Disparities in Healthcare and STEM

## **The Science Runway**



#### Introduction

The Science Runway is a national mentorship and educational program that encourages, inspires, and mentors girls interested in STEM and healthcare-related fields. The Science Runway is a curated collection of personal stories of women who have inspiring careers in the STEM and healthcare fields and a mentorship program designed to inspire girls by showcasing the multitude of careers possible with a scientific foundation through mentoring sessions and virtual resources. The program welcomes girls from all backgrounds to participate and strongly encourages the participation of females from underrepresented backgrounds and minorities. The Science Runway aims to address the alarming gender disparities in STEM and healthcare-related fields by inspiring, encouraging, and mentoring girls to reach their full potential and follow their passion and excitement for science. In addition, we aim to incorporate diversity, equity, and inclusion themes into our programming to uniquely address barriers for BIPOC girls.

More info can be seen at thesciencerunway.org.

#### Virtual Mentor Sessions

The Science Runway continued its virtual sessions during the 2022 calendar year. Mentoring sessions are conducted monthly with Science Runway partner high schools. During the 2022 year, the Science Runway:

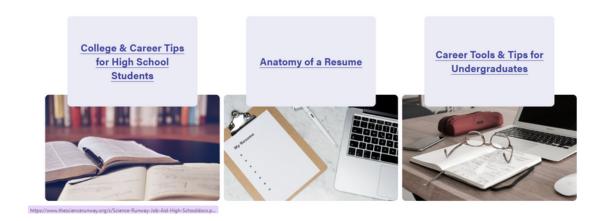
- Conducted mentor sessions with our 3 partner high school systems
- Conducted 20 virtual sessions
- Had 250 mentees participate in virtual sessions
- Had 24 different mentors participate in virtual sessions

#### **Expanded Virtual Resources**

The Science Runway team reshaped the mentor interview procedure to include a video component. The videos, posted directly on mentors' profiles, give girls another way to engage with the Science Runway and learn about exciting career paths. The short videos feature female STEM and healthcare leaders sharing their career experiences, their inspiration for starting and continuing a career in STEM/Healthcare, and sharing what a typical day looks like in their role. Additionally, the Science Runway team created additional career resources for young women and girls interested in STEM and Healthcare. Resources are geared towards high school and undergraduate girls' unique needs as they navigate their academics and early professional careers.



#### Resources



#### **Undergraduate Expansion**

The Science Runway team also laid the groundwork for an undergraduate expansion in the past year. The growth of Science Runway programming to the undergraduate level includes the launch of Runway Roundtables. These virtual roundtable discussions focus on topics such as "Bridging the gap between STEM student and STEM professional." In addition, the Runway Roundtables feature all female professional panels, and attendees participate in virtual post-roundtable mentoring and networking opportunities.

#### **Looking Forward to 2023**

Looking towards 2023, the Science Runways aims to increase our mentor cohort and further engage young women by expanding virtual resources and mentoring opportunities. By supporting young women and girls, especially those from underserved and underrepresented communities, the Science Runway will continue working to address the stark gender disparities in STEM and healthcare education paths and career fields.



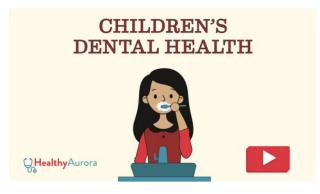
## **Healthy Aurora**



Healthy Aurora is a collaborative, community-wide education and outreach effort designed to increase health literacy, education, and awareness for all Aurorans. Our goal is to improve wellness by increasing literacy about health and healthcare options. Healthy Aurora provides easy-to-understand information about healthcare options, raises awareness of the importance of scheduling annual wellness and preventative exams. It also assists patients in building relationships with their doctors, demystifies healthcare options, and provides resources to help Aurorans understand and seek available insurance and coverage. Please visit healthyaurora.org for more information.















# Black Breast Cancer & Barriers to Clinical Trials Research



The overall goal is to change how the breast cancer ecosystem engages Black women regarding Black Breast Cancer and clinical trial research. We strive towards health equity for Black women diagnosed with or at risk for breast cancer, and also to get Black women the best breast cancer care. By conducting a rigorous research project, we will learn from developing targeted strategies to educate Black women to encourage and motivate clinical trial participation. This education will also address the need to foster better relationships with the medical community to favorably impact a genuine understanding of our unique breast cancer risks, screening recommendations, and the actionable steps Black women can take to achieve better health outcomes.

TOUCH, The Black Breast Cancer Alliance is collaborating with a stellar group of partners to do this vital work: Breastcancer.org, Citizen, Center for Healthcare Innovation, Equify Health, Morehouse School of Medicine and Susan G. Komen. Together, we aspire to uncover the most compelling messaging to educate and motivate clinical trial participation, and launch a robust marketing campaign. We hope to create the largest cohort of longitudinal clinical and patient-reported and genomic data of Black Breast Cancer patients in the US to serve as a databank for research. Our plan also calls for a provocative intervention to empower providers to communicate with Black patients more effectively.

# Consortium On Diversity & Equity (CODE)

The Consortium On Diversity & Equity (CODE) is a new CHI initiative focused exclusively on challenges and opportunities related to diversity, equity, and inclusion for the global biotechnology and pharmaceutical sectors Integration with four pillars: (i) workforce, (ii) workplace, (iii) clinical trials and (iv) marketplace. The mission is to facilitate the global biopharmaceutical industry as an exemplar for diverse, equitable, and inclusive business best practices that address social determinants of health and improve healthcare outcomes. The vision is to become a leading international resource for the biotechnology and pharmaceutical sectors to promote diversity, equity and inclusion in the workforce, workplace, clinical trials, and marketplace. One key overriding goal is achieving diversity, equity, and parity globally regardless of disability, ethnicity, gender, race, religion, sexual orientation, socioeconomic status, and veteran status.

#### **Our Impact**



5,600+

**Total Event Participants** 

16,500+

**Monthly Digital Impressions** 

750+

Girls Served by Mentoring Sessions via Science Runway

5,500+

Recepients of Research Reports

93%

**Event Satisfaction** 

3,000+

**Social Media Followers** 

## **Our Impact**

# Chronic Diseases Disproportionately Impact the Most Underserved Patient Groups

We've convened over 1,000 C-Suite and senior executives from the provider, pharma, payer, patient and other healthcare sectors to share new ideas around reducing barriers to care and addressing social determinants of health.

#### African Americans and Latinx individuals Represent 13% and 18% of the U.S. Population but only 5% and 3% of Clinical Trial Participants Respectively

CHI has led symposia and conferences focusing on diversity and clinical trials since 2011, and we've brought together over leading 700 clinical trial and diversity experts to share ideas and learn.

#### Women Represent 47% of the U.S Workforce but Only 24% of the STEM Workforce

Since 2016, CHI has worked to address this disparity through mentoring, energizing, and inspiring young women to explore their interests in STEM and enter STEM careers.

#### Black & Brown Physicians Comprise Only 10% of All Physicians in the US

We've compiled research and organized programs on the importance of building a diverse and inclusive healthcare workforce that is more representative of patients.

## **Supporting Innovation**

CHI offers our deepest gratitude to all the generous supporters who assist our efforts to make the world a healthier place through communication, education, training, symposia, reports, and research. We would like to give special thanks for the support, donations, gifts, and resources made by the following supporters:

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# Our vision is to be the leading global platform for meaningful change in health equity.



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