HCP & P/C EDUCATION | Abstract #: 2501

Centering the Patient Experience within TNBC Care and Fostering Equity in the Hispanic and Latina Populations

Authors: Tariqa Ackbarali, PhD, MS, CHCP[1]; Loyda Braithwaite, MSN, RN, AGPCNP-BC, AOCNP[2]; Claudia Tellez, MD[3]; Sara Tolaney, MD, MPH[4]
Affiliation: [1]MedliveCME, Needham, MA; [2]University of Wisconsin Carbone Cancer Center, Madison, WI; [3]Northwestern University, Evanston, IL; [4]Harvard Medical School, Boston MA

Support was provided by an independent educational grant from Gilead Sciences, Inc.

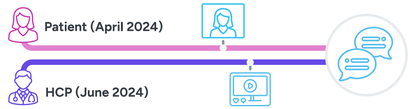
INTRODUCTION

In recent years, triple-negative breast cancer (TNBC) has transformed from a difficult-to-treat malignancy with few effective treatment options into an active area of research, where new treatments are emerging each year with a focus on improving options in earlier stages of disease. This is particularly important for Hispanic and Latina patients, who face numerous disparities in treatment access and quality of care. A tethered educational initiative was designed to ensure that clinicians and patients/caregivers are up to date with current and emerging TNBC treatments and recognize disparities in care for Hispanic/Latina populations, along with strategies to improve the quality of care.

METHODOLOGY

Interventions

Tethered Education



Patients were interviewed and their real-world stories were discussed throughout the activities. The reach of the clinician education was expanded via targeted micro-learning videos on LinkedIn to NPI-verified oncologists. Social media videos via Facebook and Instagram extended the educational reach among patients and caregivers.

Measurements and Data Collected

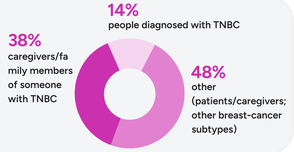
Patient education: engagement (platform views, social media views), present knowledge and attitudes, perceived barriers, intended behavior changes, and self-reported behavior changes

Clinician education: engagement (CME participants, learners and completers, micro-learning completers), changes in knowledge and competence, present attitudes and practice behaviors, intended practice changes, self-reported practice changes

RESULTS

Patient and Caregivers

399 platform views

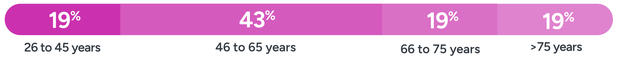


125,487 social media views

Race/ethnicity



Ages



Patient/caregiver outcomes: *rating of 4 or 5 on a 5-point scale



were confident* discussing a treatment plan with healthcare team after the education



were likely* to consider participating in a clinical trial as treatment for TNBC after the education

Patient/caregiver challenges navigating cancer care

- Availability of care team to answer new questions as they arise
- Lack of communication
- Access to care
- Scheduling and transportation
- Coordinating time for all the physician visits
- Support
- Lack of appropriate resources

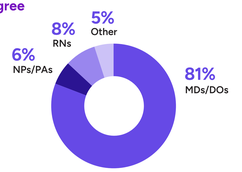
Intended behavioral changes post education

- Ask more questions of the medical team
- Continue to use online resources for information
- Discuss more with family to learn about genetics
- Share this education with community providers
- Screen earlier
- Ask my medical team about other treatment options
- Share this video with my family
- Feel more educated so in a better position to offer suggestions

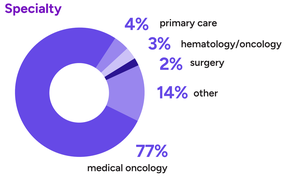
Clinician Education

3,337 Participants
898 CME enduring
Micro-learning:
2,439 NPI-verified oncologist completions

Degree



Specialty





of CME learners identified as current treaters seeing an average of 12 patients with TNBC per week



of CME learners completed the activity (639 learners, 566 completers)

Clinician Outcomes:

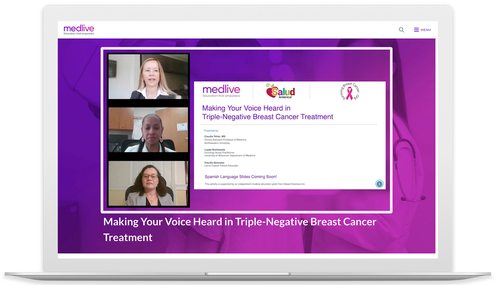


had increased recognition of antibody-drug conjugates (ADCs) as the preferred second-line option for biomarker-negative TNBC, reflected by a rise in ADC selection post-activity.



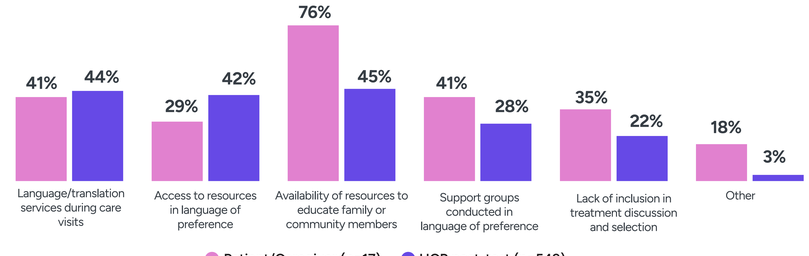
had an improved understanding of immune checkpoint inhibitor toxicities, though some learners may still underestimate long-term, endocrine-related side effects.

Modest gains in awareness of racial disparities in TNBC, suggesting clinicians recognize inequities but need further education on actionable solutions.

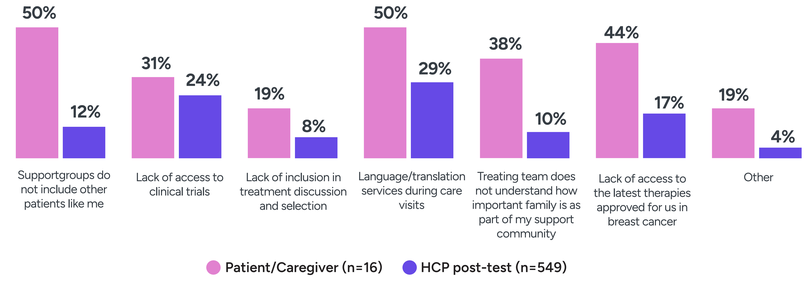


Tethered outcomes [Patient/caregiver vs Healthcare provider (HCP)]:

Perceptions of challenges experienced based on multilingualism



Perceptions of challenges experienced based on ethnicity



CONCLUSION

The identified disparities highlight the importance of culturally attuned approaches that extend education and support to familial/social networks, which are often critical for patients from Hispanic and Latina populations. Ethnicity-specific barriers highlighted a disconnect in recognizing the importance of peer representation and cultural similarity within support networks, which can greatly affect patient comfort and outcomes. These findings underscore a notable disconnect between what patients/caregivers prioritize and what clinicians perceive as challenges. Patients tend to emphasize the importance of community and cultural representation in support systems, while HCPs focus on logistical barriers, such as language services. Bridging this gap requires a dual focus: addressing systemic barriers while fostering culturally tailored support networks that resonate with patients' lived experiences.