Initial factors affecting recruitment of Black women in the U.S. Mid-South region diagnosed with or at elevated risk for de novo metastatic breast cancer

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Introduction

Data from the Surveillance, Epidemiology, and End Results and West Cancer Center and Research Institute (WCCRI) indicate Black women are almost twice as likely to be diagnosed with advanced stage or de novo MBC (dnMBC) compared to White women.

Disparities in breast cancer incidence and survival for Black women in the U.S. Mid-South are pronounced, and root causes are not fully understood.

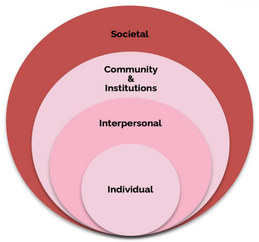
Extant research has identified the role of neighborhood structural vulnerability (e.g., rurality, racial composition etc.) as contributing factors to neighborhood deprivation and breast cancer mortality; however, little is known about factors specific to the U.S. Mid-South.

This mixed method study will allow us to explore the cultural and environmentally specific factors hindering access to and utilization of healthcare services.

The **ACCESS Study** (**A**chieving **C**ancer **C**are **E**quity through **S**ystematic **S**olutions) uses a rigorous and novel approach to explore root causes of breast oncology disparities among women in the Mid-South region and identify potentially actionable mechanisms and strategies for change.

Study Framework

Socioecological model (SEM)[1,2] examines the interplay between social factors. Critical race theory (CRT)[3] posits that racism and stigma are **everywhere**.





Societal: health related policy

Community & Institutions: access to resources & healthcare services

Interpersonal: social support & patient-clinician communication

Individual: self-perceptions & health behaviors

CRT is not just a component of the societal level but an integral part in understanding participants' experiences **in all levels** of the SEM.

Together, SEM and CRT help explain how the ubiquitous nature of racism and intersectional stigma influence multi-level factors associated with health outcomes for Black women in the Mid-South.

Objectives & Methods

Objective 1:
Explore the multilevel barriers and facilitators that influence screening behaviors, access to services, and timeliness, and receipt/utilization of care services:
- Pre-interview survey
- 90-minute in-depth interviews with photo elicitation
- Participant driven photographs (~5-7 photos/person) indicating health barriers/facilitators)

Objective 2:
Identify structural barriers and facilitators that influence healthcare engagement via observational go-alongs in the home/neighborhood and clinic settings:
- Field observations by researchers
- Ethnographic go-alongs in neighborhood and clinic settings
- Debrief after clinic go-along

Objective 3:
Explore healthcare clinicians' perceptions of interpersonal barriers and facilitators to quality care received by Black patients:
- 60-minute focus groups with clinicians who provide primary, oncologic, and gynecologic care in the Mid-South

Study Sample, Recruitment, & Enrollment



Target study sample:
Black women living in the U.S. Mid-South (N=150)

Sample 1: n=75 diagnosed with dnMBC.
Sample 2: n=75 identified as high-risk
- Self-report of known mutations, known family history of breast cancer (blood relative), or self-report of > 2 lifetime breast biopsies.

Potential participants engage with **race- and gender-concordant** study staff at both WCCRI and UTHSC.
Eligible participants identified through the WCCRI electronic medical record (EMR).

Results

As of October 20, 2025, 299 women have been screened with 28 enrolled and actively participating (i.e., study activities scheduled/completed).

Table 1: Enrollment Report as of October 20, 2025

	Sample 1 (dnMBC)	Sample 2 (High-Risk)	Total
Screened	117	182	299
Consented	22	16	38
Withdrawn	6	4	10
Active	16	14	28

Table 2: Days between consent and first study activity

	Sample 1 (dnMBC)	Sample 2 (High-Risk)
Mean (SD)	42.9 (32.9)	27.0 (19.8)
Range	11-111 days	7-62 days

Recruitment & Enrollment Successes:

EMR screening tool: identified thousands of potentially eligible patients in the WCCRI EMR.

Participant Engagement: no eligible study participant failed to complete all 3 activities, except one high-risk participant who became severely ill after completing the in-depth interview.

Sample Diversity for age, location, and income:
- Age ranges and means:
  - (Sample 1) 35-73 years; 57 years
  - (Sample 2) 37-72 years, 53.8 years
- Location: various neighborhoods in Memphis, TN; the Mississippi Delta; and rural Arkansas

Table 3: Percentage of income responses (n=26)

	Less than $20,000	$20,000 -29,999	$30,000 -39,999	$40,000 -59,999	$60,000 -99,999	$100,000 or more	Decline to answer
%	0%	27%	8%	15%	15%	8%	27%

Recruitment & Enrollment Challenges:

High-risk participants had fewer interactions with healthcare system:
- were harder to identify and recruit via the EMR
- required community-centric recruitment strategies

In-depth EMR review was required to:
- determine between dnMBC vs Stage 4a diagnosis
- distinguish between study eligible living vs deceased (sample 1 = 26, sample 2=5) patients.

Results

Recruitment & Enrollment Challenges continued:

Social Determinants of Health: impacted women's willingness and ability to participate in the study. Some reasons included:

Economic Stability: Patient work and schedule obligations

Social & Community Context:
- Caregiver responsibilities: demands of providing care for family members (e.g., young and adult children, adult relatives)
- Social support needs: not wanting to increase burden onto their caregivers

Figure 1:
Social Determinants of Health[4]



Discussion

The ACCESS study seeks to uncover the underlying drivers of dnMBC disparities among Black women in the U.S. Mid-South. Preliminary findings highlight the willingness of this population to engage in research when approached by race- and gender-concordant researchers and the complex, often unseen challenges to participate which justify the study's focus and innovative study design. Early challenges affirm the critical need for tailored, community-informed approaches in disparity-focused cancer research.

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