Early Outcomes from the IMPACCT Project (Improving Participation in Cancer Clinical Trials). An intervention to improve clinical trial participation among underrepresented cancer patients.

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Introduction

Despite advances in cancer screening and therapeutics, persistent barriers to equitable cancer care and clinical trial access remain for underrepresented populations, which include racial and ethnic minorities, non-English speaking patients, Medicaid recipients, elderly patients, and young patients. Clinical trial enrollment remains disproportionately low among these groups; trial participants often do not reflect the current demographics of the United States. While artificial intelligence (AI) tools have improved clinical trial patient matching, multiple barriers continue to limit trial participation. Understanding these barriers is essential to improve clinical trial representation.

Methods and Materials

We developed a three-phase prospective pilot project at a large academic cancer center titled IMPACCT (Improving Participation in Cancer Clinical Trials) to improve clinical trial representation among breast and GI cancer patients. The project integrates community engagement, provider education, and evaluation of outcomes.

Phase 1: Build Community Trust: IMPACCT Family

- Multidisciplinary team of Investigators
- Sisters' Journey Inc.
- 2 Community research fellows
- Breast cancer survivors with prior trial experience

Phase 2: "Just Ask" Implicit Bias Training

- Completed by Breast and GI Oncologists
- 6 E-learning modules on diversity, equity and strategies to improve inclusive trial enrollment

Phase 3: Post Training Evaluation: Provider and Patient Surveys

- Providers completed surveys assessing perceived barriers to clinical trials
- Patients completed surveys evaluating motivations and barriers to trial participation

Results

The "Just Ask" training intervention was conducted in January 2025. In the six months prior to the intervention, the breast cancer program enrolled 41 patients in clinical trials. In the six months following the intervention, enrollment increased to 75 patients as of June 2025. A total of 31 physicians participated in the training, including 20 from the breast medical oncology group (14 medical oncologists, 2 surgical oncologists, 1 radiation oncologist, and 3 radiologists) and 11 from the gastrointestinal oncology group (9 medical oncologists, 1 colorectal surgeon, and 1 radiologist). To date, 13 of the 31 participating oncologists have consented to participate and completed post-intervention surveys.

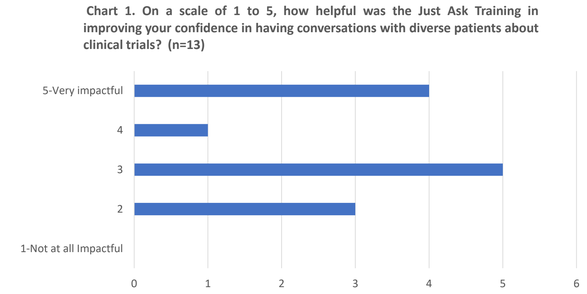
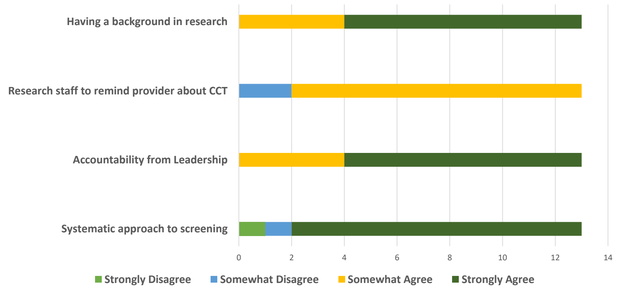
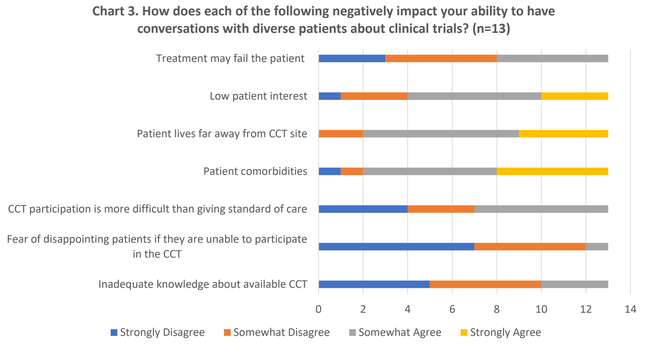




Fig. 1. Physician identified patient resources needed to facilitate conversations with patients about clinical trials (n=13)

Results Cont.





Discussion

The "Just Ask" training was a success because it catalyzed conversations around clinical trial barriers and facilitators at the community, physician and patient levels. Clinical trial enrollment did increase after the intervention. However, the intervention alone would not have been successful without the IMPACCT community meetings, weekly provider reminders and opportunities for patients to reflect on their enrollment experience via the patient survey. The intervention organically raised the visibility of clinical trials in all three groups. A continued sustained message to physicians, patients and community members is critical.

Physicians are willing and able to enroll patients into clinical trials. However, they need more resources to help patients. Physicians also note that accountability from leadership and a systematic approach to screening are vital to aid their ability to have conversations with patients about clinical trials. Future directions are ongoing and will reflect on the patient experience regarding obstacles and facilitators.



Fig. 2. Apple pie analogy. The "Just Ask" intervention is like a pinch of cinnamon in a larger pie. The intervention is only successful with the combined efforts of the other components of the pie. In our case the apples are the efforts of our patients, physicians and community members.

Conclusions

The IMPACCT project demonstrates early feasibility and promising signals of impact using the "Just Ask" intervention to improve clinical trial enrollment. The integration of community-based participatory research has proven both practical and effective, strengthening engagement between the cancer center and the community. These early findings suggest the intervention may be scalable across cancer types and clinical settings, with potential to inform broader equity-focused recruitment strategies in oncology trials.

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