# Improving Care and Outcomes for Cancer Survivors from Sexual and Gender Minority (SGM) Populations

PAR Concept Presentation to BSA/NCAB

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## SGM Cancer Risk, Risk Factors, and Survivorship

- More likely to have a cancer diagnosis, with higher rates of certain cancers
- Less likely to seek cancer care
- Disproportionately more challenges during cancer care
- SGM cancer survivors are more likely to have poorer health outcomes

# **SGM-specific Concerns in Cancer Care Delivery**

- Fear of disclosing SGM identity status in cancer care settings
- Stigmatization and discrimination due to SGM identity
  - (e.g., prostate cancer standard-of-care treatment options)
- Intersectionality of multiple minoritized identities
- Knowledge gaps among oncology providers for SGM patients
- Economic strains associated with SGM identity

#### Purpose of the PAR

- Fund observational and intervention research to:
  - further understand and address predictors of SGM disparities in cancer care
  - support innovative, feasible and effective interventions to address SGM disparities in cancer care
- Including:
  - systematic sexual orientation and gender identity (SOGI) measurement
  - identified endpoints of interest in cancer control

# **Key Scientific Areas for SGM Cancer Survivors**

 Understanding and/or addressing barriers to cancer treatment and follow-up care

Approaches to address risk factors for poorer mental and physical health outcomes

 Testing interventions focusing on providers to improve cancer care

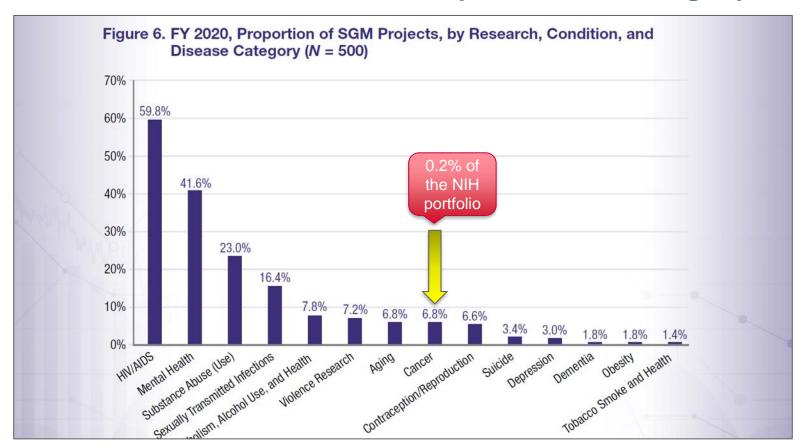
# **Sample Research Topics**

- Studies investigating barriers, such as discrimination and mistrust,
   faced by SGM cancer survivors particularly with multiple
   minoritized identities that affect treatment and follow-up care
- Research to understand and address oncology care providers'
   SGM-related knowledge gaps
- Testing individual- and system-level interventions focused on managing symptoms, functioning, and well-being for SGM survivors
- Studies of transgender and gender-nonconforming individuals to understand gender-affirming care and cancer treatment

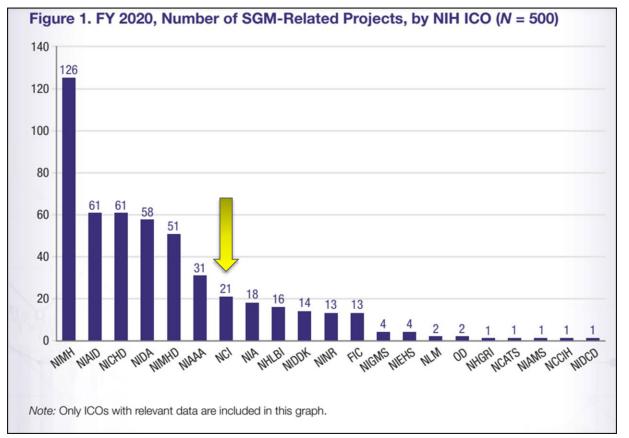
## Requirements

- Address a pressing need and/or gap in SGM cancer research
- Include a resource and data sharing plan
- Describe an existing or planned standardized SOGI data collection process
- Include community partner engagement

#### NIH Grants Focused on SGMs by Disease Category



# NIH Grants Focused on SGMs by ICO



## Portfolio Analysis (FY 2017-2022)

- NCI-funded, SGM-focused grants:
  - Five studied SGM individuals post-cancer diagnosis
  - Two focused on SGM cancer care delivery topics
- NOSI on "Research on the Health of Sexual and Gender Minority Populations" (NOT-MD-22-012) addresses broad health areas, without cancer emphasis
- CCSG administrative supplements (awarded in 2022) to support the implementation of SOGI measures

## PAR justification

Lack robust NCI research in SGM populations

 Current NOFOs do not address cancer care and health outcomes for SGM cancer survivors

 Demonstrate NCI's commitment to increasing and accelerating cancer control research for SGM survivors

#### BSA Reviewers: Gloria Coronado, Chyke Doubeni, Ana Maria Lopez

- Broad scope: PAR concept is broad but reflects an appropriate effort to catalyze research on SGM population cancer survivorship issues
- Terminology: strong support for defining terms, such as LGBTQ+ and SGM; suggest minor clarifications
- Intersectionality: clearly acknowledge the importance of addressing the complexity
  of multiple minoritized identities and impact on care and outcomes in proposals
- Defining outcomes: focus on advancing care and care-seeking to improve health outcomes in SGM cancer survivors
- Community partner engagement: clarify the community members necessary to engage in research with this population, including intersectional identity issues
- Policy issues: acknowledge the current legislative and policy barriers to conducting SGM-specific research

#### Conclusion

 SGM experience widespread discrimination and associated disparities in cancer care and outcomes.

 These have been attributed to treatment and survivorship care that fails to address SGM-specific needs.

 This PAR represents an opportunity to characterize and address SGM cancer health disparities.



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