



Health Equity Community Project ECHO

Medical Mistrust in Relation to Colorectal Cancer Screening

Friday, December 8, 2023



Before we begin..

Please put your name, health center, organization, and location in the chat!

Welcome to the December Health Equity Community Project ECHO Session



Each ECHO session will be recorded and will be posted to echo.cancer.org



You will be muted with your video turned off when you join the call.
Use the buttons in the black menu bar to unmute your line and to turn on your video.
If you do not wish to have your image recorded, please turn OFF the video option.



Today's materials will be made available on echo.cancer.org



Type your name and organization in the chat box



This ECHO session takes place on the Zoom platform.
To review Zoom's privacy policy, please visit zoom.us/privacy



Remember: Do NOT share any personal information about any patient

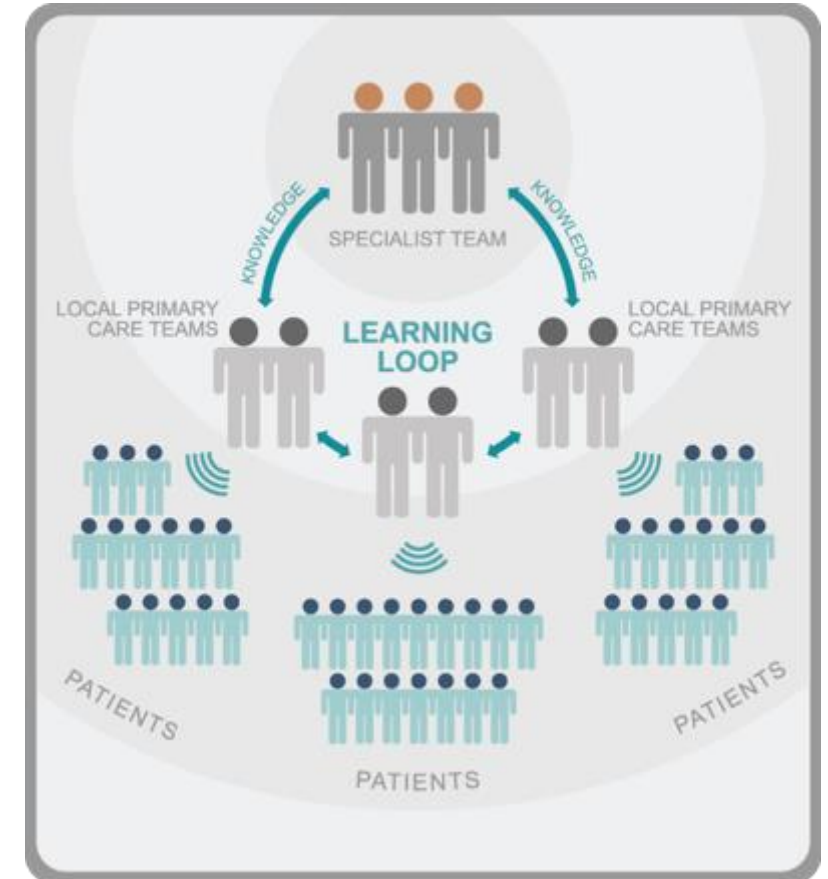


Questions about Zoom? Type them in the chat box to: Allison Rosen

What does Project ECHO do?

What does ECHO do?

- ▶ ECHO **effectively** and **efficiently** disseminates evidence-based strategies to improve cancer outcomes
- ▶ ECHO allows to **convene** for best practice sharing across health centers, institutions, and other silos
- ▶ For more information, please refer to your guidebook or visit www.echo.unm.edu



Health Equity Community Project ECHO Series

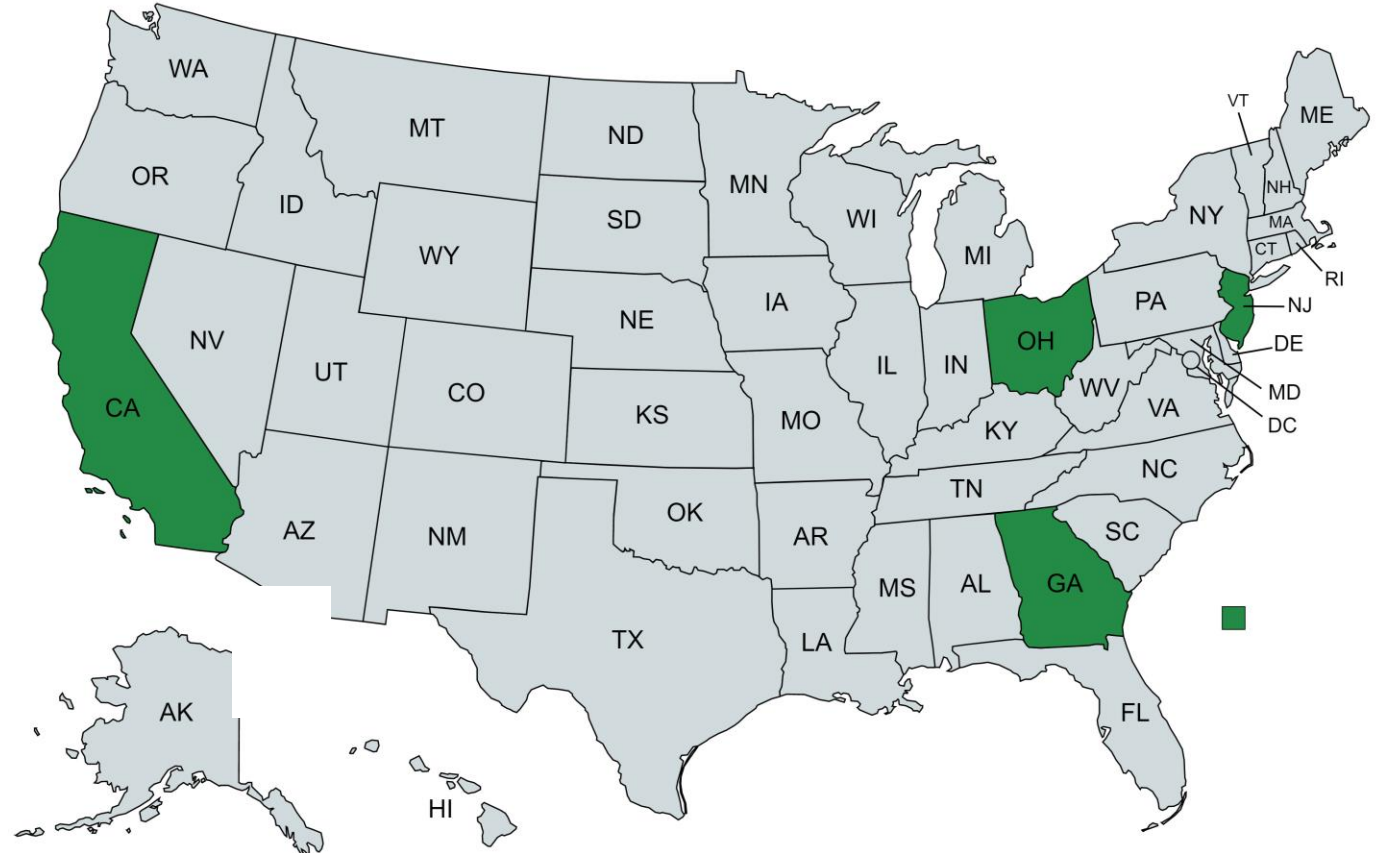
Purpose

- To share relevant health equity, medical mistrust, and colorectal cancer screening information with participants to enhance their community projects
- To provide participants with an opportunity to build their networks within their cohort and expert faculty
- To offer an opportunity for participants to share project-related challenges or questions; seeking feedback from expert faculty and cohort colleagues

Health Equity Community Project Sites (Cohort 2)



- **Asbury Park, NJ**
 - Visiting Nurse Association of Central New Jersey Community Health Center
 - Visiting Nurse Association Health Group
- **Dayton, OH**
 - Community Health Centers of Greater Dayton
 - West Care Ohio Inc. dba East End Community Services
- **Atlanta, GA**
 - Southside Medical Center
 - Urban Connected Atlanta/Bible Way Ministries International
- **Stone Mountain, GA**
 - MedCura Health Inc.
 - New Life Community Ministries, Inc.
- **Fremont, CA**
 - Bay Area Community Health
 - Vietnamese American Roundtable



Project ECHO Planned Topics

Session Date	Didactic Topics
September 28 2022	Understanding and Addressing Medical Mistrust: Introduction to the Group Based Medical Mistrust Scale
November 15, 2022	Measuring Mistrust using the Group Based Medical Mistrust Scale: Best Practices from a Community
January 27, 2023	Understanding Medical Mistrust Through the Colorectal Cancer Screening Lens
April 19, 2023	Patient Engagement Series: Fundamentals of Elevating Patient Voices Through the Use of Patient Advisory Councils and Governing Boards
June 29, 2023	Patient Engagement Series: Using Patient Voices to Improve Policies and Practices to Address Medical Mistrust in Relation to Colorectal Cancer Screening
August 24, 2023	Patient Engagement Series: Strategies for Sustaining a Highly Effective Patient Advisory Council and Governing Board
October 6, 2023	Effective Strategies for Addressing Medical Mistrust: Support from Healthcare Providers
December 8, 2023	Effective Strategies for Addressing Medical Mistrust: Patients Perspectives of Discrimination and Group Based Disparities
January 26, 2024	Effective Strategies for Addressing Medical Mistrust: Patients Suspicion of Healthcare Providers

December Agenda

Welcome and Introductions <i>ECHO Hub Introductions and Icebreaker</i>	10 minutes
Didactic Presentation <i>Effective Strategies for Addressing Medical Mistrust: Patients Perspectives of Discrimination and Group Based Disparities</i> Mark Manning, PhD Department of Psychology Oakland University	25 minutes
Didactic Q/A	5 minutes
Facilitated Discussion <i>Cohort 2 Sites (Roundtable)</i>	15 minutes
Wrap-up	5 minutes



ECHO Hub Introductions and Icebreaker

Project ECHO Introductions

ACS ECHO HUB Staff

- Cecily Blackwater, MPH
- Tracy Wiedt, MPH
- Allison Rosen, MS

ECHO Faculty

- Wayne B. Tuckson, MD, FACS, FASCRS
- Mark Manning, PhD
- Shana O. Ntiri, MD, MPH

For attendance purposes, please type your location, name, and organization in the chat box!



**What is your favorite
Winter activity?**

This question applies to everyone (Community Project sites, ACS staff, and our ECHO Faculty)! Feel free to come off mute or type your answers into the chat box!

About Our Didactic Presenter:



Mark Manning, PhD
Department of Psychology
Oakland University

A hand holding a large red question mark. The background is a dark gray gradient. The text is white with a thin orange outline.

Group-Based Medical Mistrust and Health- Behavior Decision-Making

MARK MANNING, PHD

OAKLAND UNIVERSITY, DEPARTMENT OF PSYCHOLOGY

Outline

Placing Group-Based Medical Mistrust (GBMM) in a decision-making framework

How can we reduce the effects of GBMM on health behavior decision-making



RACISM AND DISCRIMINATION

Perceived group-based discrimination:

Past racial injustices

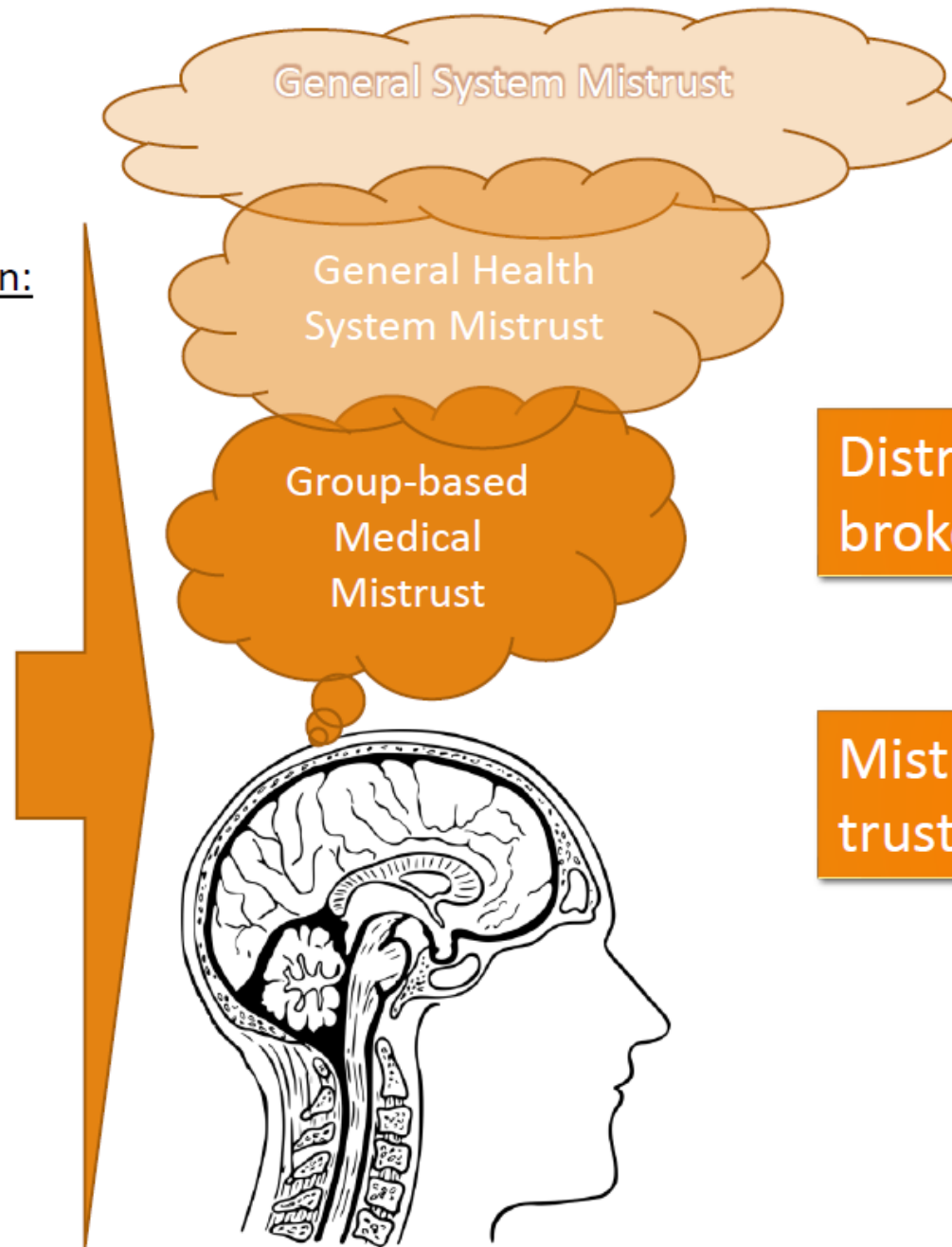
- Segregation
- Housing discrimination
- **Medical experimentation**

Contemporary racial injustices

- Policing incidents
- Unjust policies
- **Unequal access to healthcare**

Perceived personal discrimination:

Life experiences with unfair treatment due to race/ethnicity in different domains (e.g., **health and health-care**, employment, finances)



Distrust: Trust has been broken

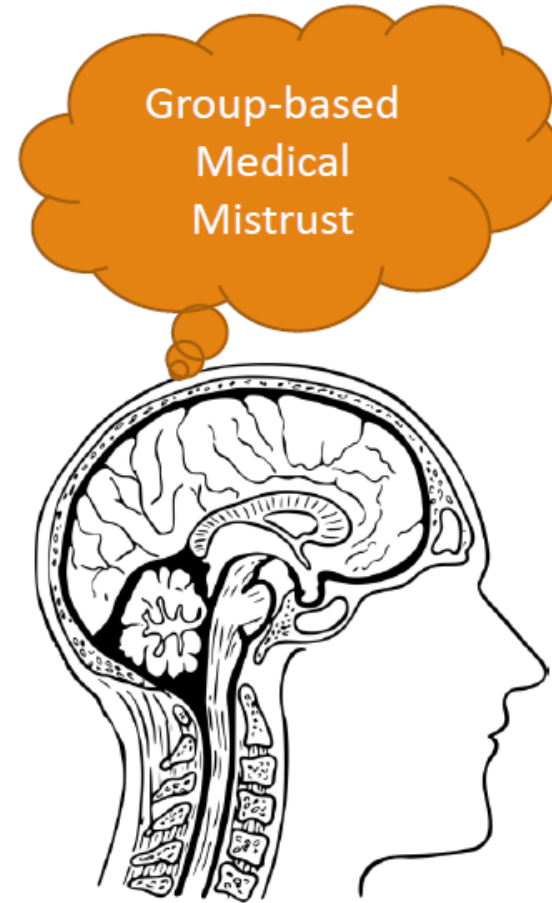
Mistrust: Suspicion has led to trust not being earned



- Being member of racial minority group
- Racial Identity
- Lower education
- Lower income
- Greater Residential Segregation
- Gender (greater mistrust among men)

- Longer relationship with treating clinician? (PCa patients) –
 - not regular PCP
- Not having a regular PCP
- Not having seen PCP for some time

- Health care satisfaction
- Perceived racism in healthcare
- Perceived provider racial bias



RACISM AND DISCRIMINATION

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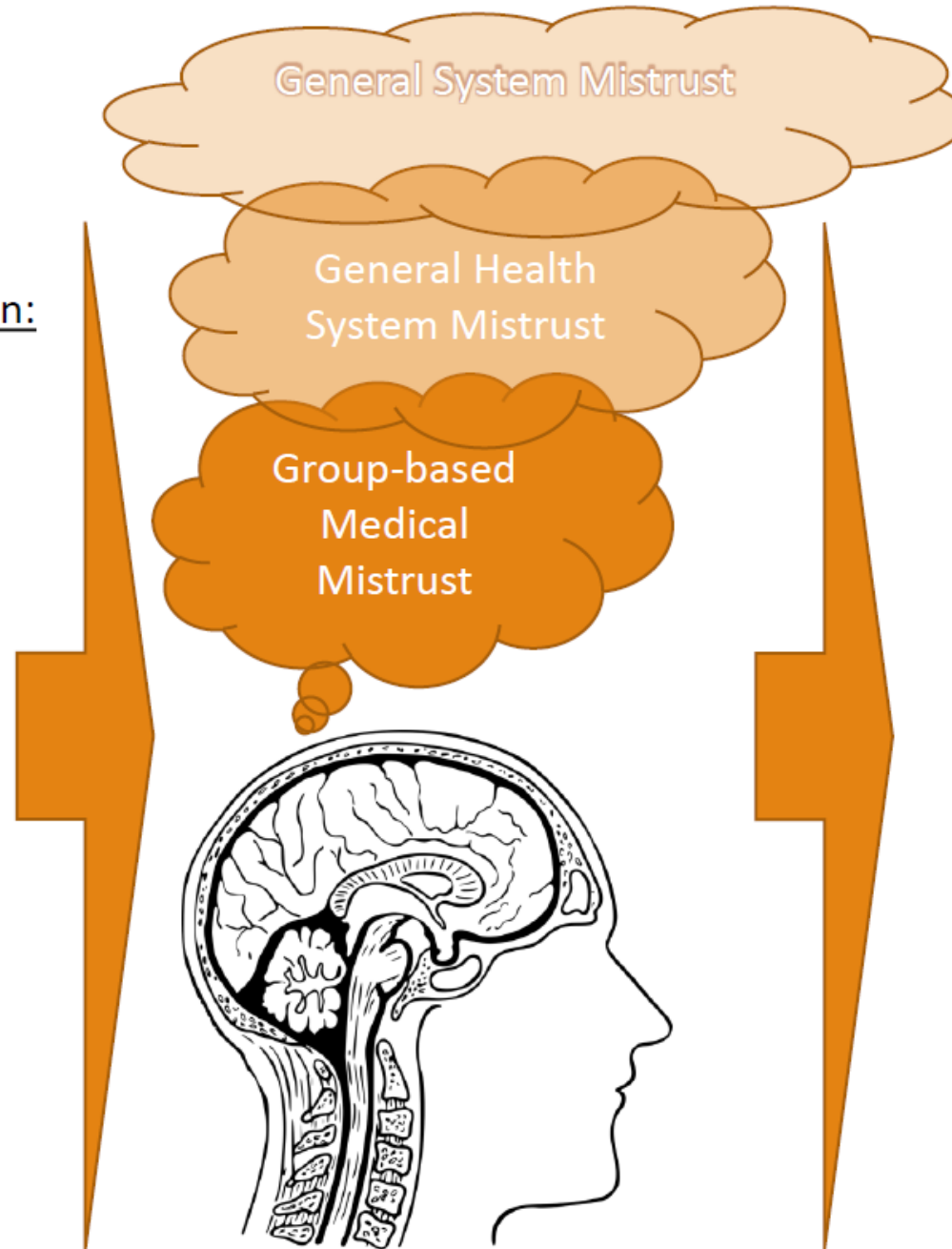
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BEHAVIORAL DECISION-MAKING

Favorable and unfavorable beliefs about behavior

- Information

Behavioral Cognition

- Attitudes about the behavior
- Self-Efficacy/Behavioral Control

Health Specific Cognition

- Susceptibility
- Seriousness

Group-based
Medical
Mistrust



Information

- Endorse unfavorable vs favorable information
- More perceived disadvantages re genetic counseling.

Behavioral attitudes and cognition

- Self-efficacy in patient–physician interactions
- Intentions to join organ donor registry
- Willingness to discuss clinical trial participation
- Vaccination hesitancy

Behavioral (dis)engagement

- Preventive cancer screening
- Seeing PCP/Physician communication
- Vaccination uptake
- Post-surgery adjuvant treatment

Context:

- State/Neighborhood you live in
- Employment/Health insurance
- Your family
- Your health care institution/people in your health care institution

What can we change?

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General System Mistrust

General Health System Mistrust

Group-based Medical Mistrust



BEHAVIORAL DECISION-MAKING

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- Behavioral norms
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Behavioral Decision:

- Should I see my doctor?
- Screen or Don't Screen?
- What kind of screening?

Routes for Intervention to Address Mistrust

Contextual Level: Demonstrate **honest** system-level commitment to addressing racial health disparities

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Group-based
Medical
Mistrust

Behavioral Decision-Making: Reduce the effects of mistrust with interpersonal connections

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Interpersonal Interventions

Patient centered communication

- Patient centered communication decreased the effects of **medical mistrust** on decision-making regarding bypass surgery in hypothetical scenario (Cuervas et al., 2019)

Commonwealth Fund: Understanding and Ameliorating Medical Mistrust Among Black Americans

- **Merck for Mother's initiative**: Trust building between OB-GYN and expectant mother midway through pregnancy; explore women's past experiences with the health care system, childbirth goals, safety concerns.
- **Kaiser Permanente - Effective Communication without Confrontation**: Targets vaccine hesitancy by training physicians to listen to patients and understand their challenges, information and misinformation, and connect around shared goal of protecting children.

Systemic/Institutional Interventions

“...many people distrust the policies or motives of institutions, not the people who work there. Building trust will require coupling efforts to **improve interpersonal relationships** with broader efforts to **change health care institutions**, ones that involve clear-eyed examinations of how these institutions have and have not supported the communities they serve.”

Boston's Brigham and Women's Hospital: Department of Medicine's Health Equity Committee

- Find concrete, in-house examples of racial differences in **care** and relation to health outcomes
 - Example: Black and Latino heart failure patients more likely admitted to general medicine vs cardiology specialist
 - Conversation revealed physicians' perceptions that White patients more likely to advocate for admittance to specialists.
 - Ideas: (1) Improve care in general medicine by offering more discharge follow-up services; (2) give hospitalized Black and Latino patients preferential access to cardiology services

UnityPoint Health system: LGBTQ clinic, Cedar Falls, Iowa

- LGBTQ individuals don't trust providers; don't disclose gender/sexual identity due to experiences with discrimination
- Clinic developed with cultural humility – acknowledging knowledge gaps and getting input from LGBTQ community members
- Clinic held twice a month: Positive impact on LGBTQ community; positive patient-level feedback

Take Home Message



Didactic Questions?

Facilitated Group Discussion

Addressing Medical Mistrust

Group Based Medical Mistrust Scale Baseline Results

- ✓ What interventions regarding medical mistrust among your patient population has your project site discussed in implementing?

Group Based Medical Mistrust Scale Baseline Results

- ✓ What interventions regarding medical mistrust among your patient population has your project site discussed in implementing?
- ✓ What role has your community-based organization partner and/or patient advisory council/governing board had in providing feedback for the interventions?



**Thank you ECHO Faculty
for joining our call today!**



Project ECHO Session Survey

Our FINAL Project ECHO Session



Shana O. Ntiri, MD, MPH

Date: January 26, 2024 at 9am PT/10am MT/11pm CT/12pm ET

Topic: Effective Strategies to Address Medical Mistrust: Patients Suspicion of Healthcare Providers

Next Steps

Group Based Medical Mistrust Scale Baseline Data:

- Continue to share results with Patient Advisory Council, Governing Board, and/or QI Committee

Individual Check-ins:

- Expect an end of the year email from Cecily outlining data activities for the next couple months

Project ECHO:

- ✓ ECHO Session #8: Friday, December 9, 2023 (60 minutes)
- ECHO Session #9: Friday, January 26, 2024 (60 minutes)

Thank You

About Our Case Study Presenter



**Bay Area Community Health
Vietnamese American Roundtable
Fremont, California**