

# FDA Efforts to Advance Racial and Ethnic Minority Participation in Clinical Trials

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• This presentation represents the personal opinions of the speaker and does not necessarily represent the views or policies of FDA

No conflicts of interest to declare

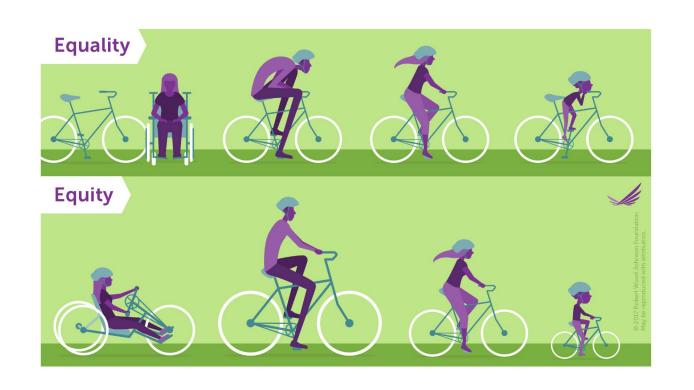
# FDA Office of Minority Health and Health Equity (OMHHE)

### **Mission**

To promote and protect the health of diverse populations through research and communication that addresses health disparities.

### Vision

To create a world where health equity is a reality for all.



## What We Do



## **Research and Collaboration**

- Intramural Research
- Extramural Research
- FDA Centers of Excellence in Regulatory Science and Innovation (CERSI) Projects
- Broad Agency Announcement (BAA)
- Other research opportunities
- Internships and Fellowships
- Academic Collaborations
- Stakeholder Input into Research Agenda



## What We Do



- Culturally and Linguistically Tailored Programs/Initiatives/Campaigns
  - Diversity in Clinical Trials Initiative
  - Language Access Program
- Health Education Materials
- Social Media
- Newsletter & E-alerts
- Website
- Health Equity Lecture Series & Webinars
- Stakeholder Meetings/Symposiums/Exhibits
- Collaborations and Partnerships





# Initiatives to Advance Racial and Ethnic Minority Participation in Clinical Trials

• FDA Guidance Documents for Industry

• OMHHE Diversity in Clinical Trials Initiative

OMHHE Enhance Equity Initiative



## **FDA Guidance for Industry**

Contains Nonbinding Recommendations

#### Collection of Race and Ethnicity Data in Clinical Trials

#### Guidance for Industry and Food and Drug Administration Staff

Document issued on October 26, 2016

For questions about this document, contact the FDA Office of Minority Health at 240-402-5084 or omh @fda.hhs.gov.

U.S. Department of Health and Human Services (HHS)
Food and Drug Administration (FDA)
Office of the Commissioner (OC)
Office of Minority Health (OMH)
Office of Women's Health (OWH)
Center for Drug Evaluation and Research (CDER)
Center for Drug Evaluation and Research (CBER)
Center for Devices and Radiologic Health (CDRH)

October 2016 Clinical Medical Contains Nonbinding Recommendations

#### Evaluation and Reporting of Age-, Race-, and Ethnicity-Specific Data in Medical Device Clinical Studies

## Guidance for Industry and Food and Drug Administration Staff

Document issued on September 12, 2017.

The draft of this document was issued on June 20, 2016.

For questions about this document regarding CDRH-regulated devices, contact CDRH at 301-796-5900 or CDRHPatientDiversity@fda.hhs.gov or CDRHClinicalEvidence@fda.hhs.gov.

For questions about this document regarding CBER-regulated devices, contact the Office of Communication, Outreach, and Development (OCOD) at 1-800-835-4709 or 240-402-8010.



U.S. Department of Health and Human Services Food and Drug Administration

Center for Devices and Radiological Health

Center for Biologics Evaluation and Research



## **FDA Guidance for Industry**

Enhancing the Diversity of Clinical Trial Populations — Eligibility Criteria, Enrollment Practices, and Trial Designs Guidance for Industry

> U.S. Department of Health and Human Services Food and Drug Administration Center for Drug Evaluation and Research (CDER) Center for Biologics Evaluation and Research (CBER)

> > November 2020 Clinical/Medical

### Diversity Plans to Improve Enrollment of Participants from Underrepresented Racial and Ethnic Populations in Clinical Trials Guidance for Industry

#### DRAFT GUIDANCE

This guidance document is being distributed for comment purposes only.

Comments and suggestions regarding this draft document should be submitted within 60 days of publication in the Federal Register of the notice announcing the availability of the draft guidance. Submit electronic comments to the <a href="https://www.regulations.gov">https://www.regulations.gov</a>. Submit written comments to the Dockets Management Staff (HFA-305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852. All comments should be identified with the docket number listed in the notice of availability that publishes in the Federal Register.

For questions regarding this draft document, contact (OCE/CDER) Lola Fashoyin-Aje, 240-402-0205, (CBER) Office of Communication, Outreach, and Development, 800-835-4709, or 240-402-8010, or CDRHClinicalEvidence@fds.hhs.gov.

U.S. Department of Health and Human Services
Food and Drug Administration
Oncology Center of Excellence (OCE)
Center for Drug Evaluation and Research (CDER)
Center for Biologics Evaluation and Research (CBER)
Center for Devices and Radiological Health (CDRH)
Office of Minority Health and Health Equity (OMHHE)

April 2022 Clinical/Medical



## **OMHHE Diversity in Clinical Trials Initiative**

An ongoing multi media campaign to raise awareness around the importance of diverse participation in clinical trials.



## **OMHHE Diversity in Clinical Trials Campaign**



**Videos** 

Newsletters & E-alerts

Webpage

Stakeholder Collaboration

**Podcasts** 

Social Media

Educational Materials
Translated into
11 Languages

Culturally & Linguistically Tailored Materials



## **OMHHE Diverse Participation in Clinical Trials** Podcast I Videos I Social Media









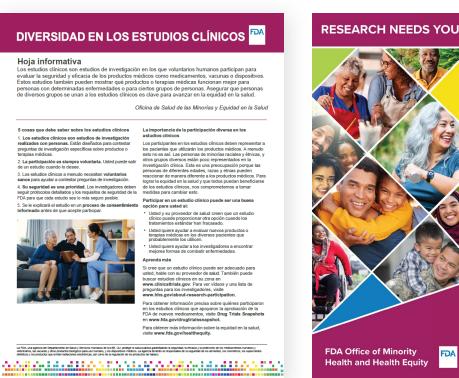
By choosing to join a clinical trial, we make sure that new medicines and treatments will work for us, our family, and our communities.

Learn more about #diversity in #ClinicalTrials: fda.gov/consumers/mino...



# OMHHE Clinical Trial Diversity Resources

### Fact Sheet (Spanish)

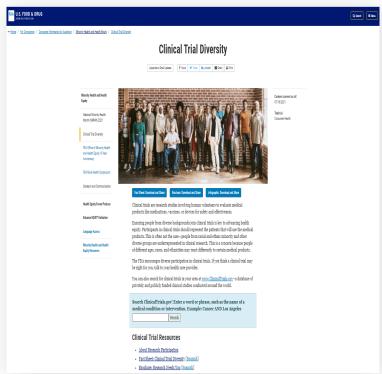


Brochure

#### Infographic

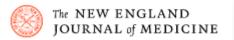


#### Webpage



## **Engaging Community Providers in Clinical Research**





#### **Integrating Research into Community Practice** - Toward Increased Diversity in Clinical Trials

Janet Woodcock, M.D., Richardae Araojo, Pharm.D., Twyla Thompson, Pharm.D., and Gary A. Puckrein, Ph.D.

The Covid-19 pandemic has ity and other underserved comsored clinical trials that supported Food and Drug Administration (FDA) approval of new molecular entities and original therapeutic pants.1

veloped to increase enrollment strategy that has not been scaled up in a sustainable way is engag-

underscored health inequities that clinician recommendations tients with cancer participate in affecting racial and ethnic minor- play an important role in helping clinical trials, even though more patients to consider participating than 50% will participate when munities in the United States, in clinical trials.2 Yet such engage- offered the opportunity.3 Comhighlighting, among other critiment is not widespread. Multiple munity clinicians can't present cal needs, the importance of in- barriers impede clinician engage- these opportunities to their pacreasing the diversity of partici- ment in research, starting with a tients if the trials are not accespants in clinical trials. Clinical lack of awareness and knowledge sible. trials provide evidence of medi- about clinical research. Many U.S. cal products' safety and effective- clinicians are not affiliated with ness (or lack thereof). Physicians' large academic medical centers often, to meet recruitment goals ability to extrapolate from trial or research institutions and may and timelines, industry sponsors results to their own patients therefore be unaware of current repeatedly use the same large would be dramatically improved research efforts, even if research sites and investigators to conduct if a trial's participants reflected is being conducted at nearby sites. clinical research. These sites and the product's intended patient Additional barriers are lack of investigators generally do not propopulation as accurately as pos- time and compensation for dis- vide care to underserved populasible. Yet in 2020, industry-spon- cussing trial participation with tions and are often not easily acpatients, failure to see clinical cessible to diverse communities. trials as an integral part of the In addition, much research that care continuum, concerns that is sponsored by the U.S. governparticipation may interfere with ment is conducted at major medbiologics included 8% Black or established patient-clinician rela- ical centers, which may serve pa-African American, 6% Asian, and tionships, and lack of recognitients in their local communities 11% Hispanic or Latino partici- tion for referring patients to tri- but often do not engage commuals.2 Community clinicians are nity-based clinicians. Many strategies have been de- usually not offered the training, mentorship, ongoing support, in clinical research could have of diverse populations, but they and resources they need to en-multiple benefits. These clinihave produced mixed results. One able sustained participation in cians are dedicated to the popu-

ing community clinicians in re-ticularly problematic barrier for of those populations. The cliniboth clinicians and patients. For cians' established, trusting pa-

There is considerable evidence example, less than 8% of pa-

Typical site-selection practices create another substantial barrier:

Engaging community clinicians lations they serve and committed Lack of trial access is a par- to addressing the health issues

N ENGL J MED 385;15 NEJM.ORG OCTOBER 7, 2021

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Woodcock J, Araojo R, Thompson T, Puckrein GA. Integrating Research into Community Practice - Toward Increased Diversity in Clinical Trials. N Engl J Med. 2021 Oct 7;385(15):1351-1353.





# **OMHHE Enhance Equity Initiative**



The FDA Office of Minority Health and Health Equity Enhance Equity Initiative highlights research projects and communication resources to enhance:

- <u>EQUITY in clinical trials</u> by supporting efforts to advance diversity in clinical trials
- <u>EQUITABLE data efforts</u> by increasing data available on diverse groups including, but not limited to, ethnicity, race, age, disability and geography
- **EQUITY of voices** by amplifying FDA's communication with diverse groups to ensure stakeholders, including consumers, are informed about FDA's efforts, and to understand diverse patient perspectives, preferences and unmet needs.

## **OMHHE Equity in Clinical Trials**





Project	Awarded To	Fiscal Year	Funding Mechanism	Status
Co-creation of digital tools to enhance young adult minority participation in COVID-19 trials	California State University, Fullerton	2022	RFA	On Going
Hispanic, black and pacific islandeR perspectives on COVID-19 oUtreach Strategies and patient centered outcomes (HeAR US)	Queens Medical Center	2022	RFA	On Going
COMmunity Mistrust and Institutional Trustworthiness to advance health EQuity research (COMMIT-EQ)	University of Maryland, Baltimore	2022	RFA	On Going
Center for Advancing COVID-19 Health Equity Research	Florida Agricultural and Mechanical University	2022	RFA	On Going
Utilizing the Pharmacy Advances Clinical Trials (PACT) Network to Achieve Diversity in COVID Clinical Trials: A Strategic Framework	Texas A&M University Health Science Center	2022	RFA	On Going
Bridging Gaps: Recruiting African American and Asian American Participants for COVID-19 Clinical Trials and	Howard University	2021	BAA	On Going

## **OMHHE Equity In Clinical Trials**

#### Journal of Translational Science



Research Article

ISSN: 2059-268X

# Attitudes towards clinical trial participation among people living with chronic hepatitis B

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Public Health Manager, Hepatitis B Foundation, 3805 Old Easton Road, Doylestown, PA, USA

#### Abstract

Background: Inclusion of diverse populations in clinical trials for chronic hepatitis B (CHB) is an integral part of development of new treatments. However, the assessment of the willingness of diverse patients to participate in hepatitis B clinical trials is understudied.

Methods: The Hepatitis B Foundation conducted an online survey regarding the willingness to participate in clinical trials among people living with CHB in the U.S. and outside the U.S. Descriptive demographic and bivariate analyses were conducted to identify relationships between willingness to participate and demographic characteristics.

Findings: Among all respondents, the overall willingness to participate in clinical trials was high. 73% were willing to participate in clinical trials, 21% were undecided, and only 6% were unwilling to participate. Among all respondents, Black or African American respondents showed the highest rate of willingness to participate in clinical trials (83%), compared with White respondents (64%) or Asians (63%) (p<0.001). Among all respondents, higher willingness to participate in clinical trials was observed among those living outside the U.S. (77%), those who identified as Black (83%) or identified as male (77%) (p<0.001). Respondents from the U.S. were more likely to be undecided about their participation (34%), compared with international respondents (17%) (p<0.001).

Interpretations: This study showed there was a lower overall willingness to participate in clinical trials among those from the U.S. compared to those outside of the U.S. This highlights the need to increase the engagement with patients living with CHB within the U.S. and in particular with Black or African American and Asian U.S. populations.

Keywords: chronic-hepatitis-B, clinical-trial-participation, diversity, under-represented-population, willingness-to-participate

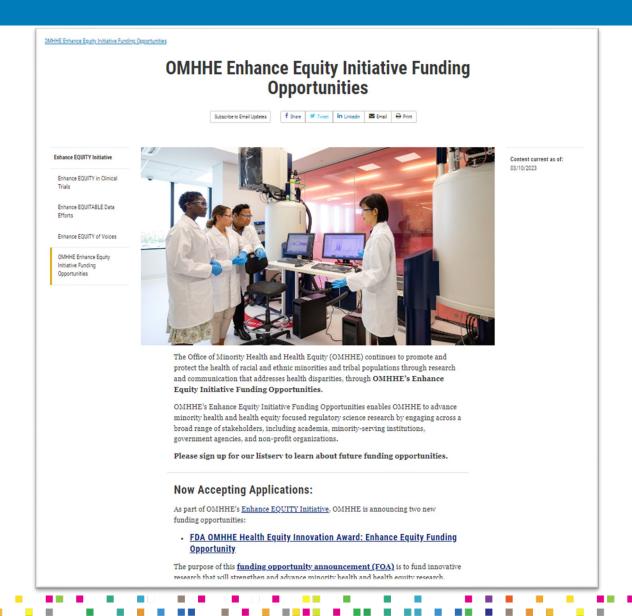
Disclaimer: This publication reflects the views of the authors and should not be construed to represent FDAs views or policies.

# OMHHE Initiatives to Advance Racial and Ethnic Minority Participation in Clinical Trials

**Looking Forward...** 



## **OMHHE Funding Opportunities**





# FDA OMHHE & NHGRI Genomic Science and Health Equity Postdoctoral Fellowship



#### Joint Fellowship Program

National Institutes of Health National Human Genome Research Institute

Food and Drug Administration
Office of Minority Health and Health Equity

genome.gov/NHGRIFDA-fellowship

Apply Starting February 15, 2021 Expected Start Date Summer 2023









## Thank You!





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