

# Role of the Research Institution: Clinical Trials Transformation Initiative Diversity Project NIMHD Inclusive Participation in Clinical Research Workshop

Luther T. Clark, MD, FACC, FACP
Global Medical and Scientific Affairs, Merck Research Laboratories

## CTTI Diversity Project Purpose

- Demonstrate the clinical, scientific, and economic impact of:
  - Increasing diversity in clinical trials, and
  - Adopting organizational-level practices that increase inclusion of diverse patient populations throughout the development lifecycle of medical products



## CTTI Diversity Project Scope

- Inclusion of women, racial minorities, and ethnic minorities in clinical trials
  - These groups, with historical underrepresentation in clinical research, were selected to enable development of focused recommendations and products
  - Individuals and populations are not monolithic, and it is important to consider intersectionality of demographic, disease, and socioeconomic factors that contribute to inequitable access and inclusion in clinical trials



### Interviews: Organizational-Level Diversity & Inclusion

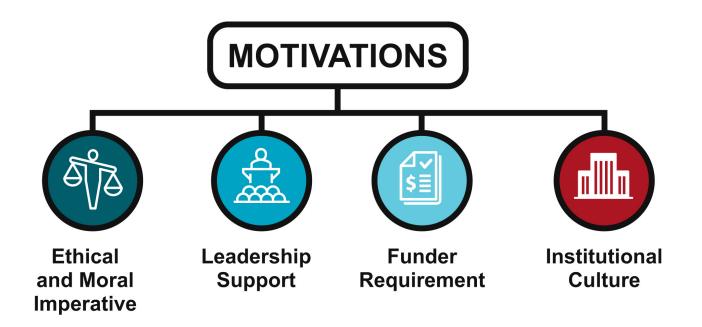
# 36 Senior-level leaders at 20 organizations

- 8 pharmaceutical and medical device companies (12 representatives)
- 4 patient advocacy organizations (9 representatives)
- 5 academic institutions (9 representatives)
- 3 non-academic medical care centers (6 representatives)

#### **Interview Topics**

- Organizational-level practices that promote and support diversity and inclusion in clinical trial populations
- Key motivations for creating the practices
- Related short- and long-term investments their organization made to support these practices
- Perceived subsequent return on investments





Motivations for organizational-level diversity and inclusion practices



#### Deterrents to investing in organizational-level diversity and inclusion processes



**Cost and Time** 



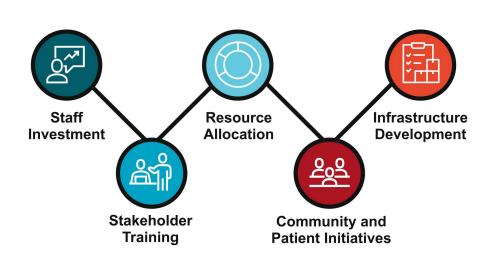
Impact Not Immediately Measurable



Employee
Unfamiliarity with
Diversity & Inclusion
Processes



## Organizational-level diversity and inclusion processes

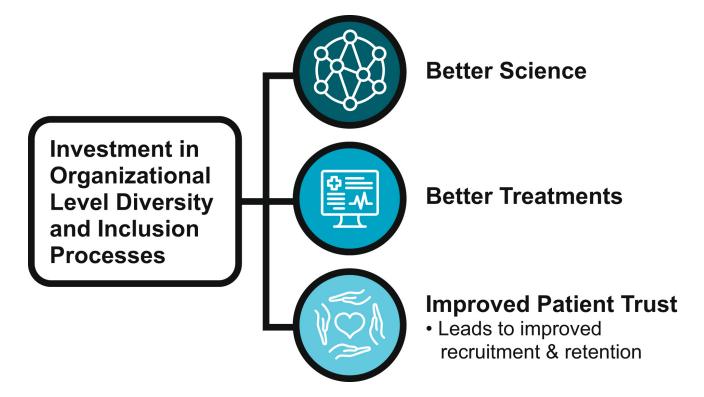


**Staff investment** most common approach mentioned:

- Supporting full-time positions
- Funding staff time to work on specific programs/initiatives
- Establishing smaller teams, cores, centers, taskforces to focus on D&I initiatives
- Maintaining a representative and diverse staff
- Hiring strategically, with a priority to hire diverse staff to mirror intended study populations



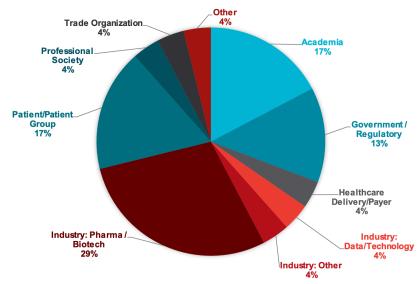
Return on investment from organizational-level diversity and inclusion processes





## October 2021 Virtual Expert Meeting

#### REPRESENTED STAKEHOLDER PERSPECTIVES



53 Attendees

#### **Meeting Themes**



Benefits evident – sustained commitment needed to realize and maintain success



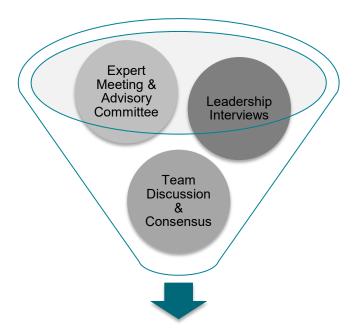
Cultural shifts needed – embed actions into strategy and operations of organization



All stakeholders required for change



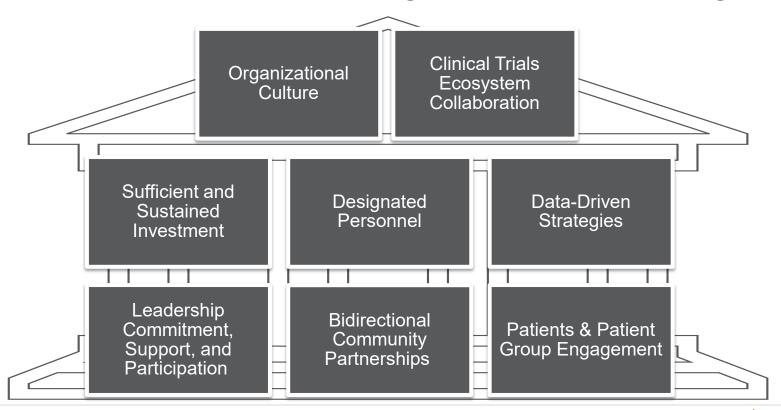
## Finalizing Recommendations



**CTTI Recommendations & Maturity Model** 



## Draft Recommendations: Organizational Strategies





## Maturity Model for Organizational-Level Strategies

#### What is a maturity model?

- A subjective, yet structured way to evaluate progress
- A holistic view of the major areas that are important for progress
- Give practical ways to
  - Measure in the absence of hard metrics
  - Establish goals
  - Gain organizational buy-in

**Diversity Maturity Model Purpose:** 

Provide a guide for research organizations to:

- assess their current organizational infrastructure for increasing diversity in clinical trials, and
- identify a desired future state





#### Maturity Model Example: Bidirectional Community Partnerships

Level 1 Initial	Level 2 Early	Level 3 Developing	Level 4 Implementing	Level 5 Optimizing
Community stakeholders not identified  Approach for partnering with communities served by the organization does not exist  Occasional community outreach for study recruitment	Study-by-study efforts to identify & engage community stakeholders  Community engagement is not coordinated within organization and is not linked to patient engagement activities  The organization is seeking advisement on requisite infrastructure to support community engagement activities.	Strategy for creating community partnerships and collaborations is being developed  Numerous clinical trials are collecting community input, but a study-by-study approach may still occur  Partnerships and insights are not communicated within organization or reflected in clinical rial diversity program strategy  Links with patient engagement activities are made but not coordinated across organization	Regular settings and practices created to discuss the needs of the community, share the organization's commitment to, and investment in, diversity in clinical trials  Outreach on design, planning, and conduct of clinical trials is completed through established community partnerships  Efforts at the program-level to identify community stakeholders.	Bidirectional community partnerships exist in the operation of clinical trial diversity efforts and the design and planning of clinical trials.  Community included in research strategy discussions  Ongoing organizational strategy for community partnerships is in place including standard procedures, plans to identify partners, investments, maintenance, and coordination. Iterative learnings from coordinated efforts across the organization are in place.



#### Maturity Model Example – Bidirectional Community Partnerships

#### Yale Center for Clinical Investigation (YCCI)

- Over a decade of community collaboration & listening
- Community priorities inform YCCI's priorities including COVID reprioritization
- "Help us discover" clinical research awareness campaign
  - Database of volunteers
  - Cultural Ambassadors
  - Advertising and media
  - New clinical research recruitment call center
  - Integrate community practices

- Community based health fairs and clinics
- Epic telehealth engagement
- Radio shows focused on health
- Social media outreach



**Level 5** Optimizing

## Health Equity Implications

Improve diversity and inclusion in clinical trials

Better and more generalizable evidence

Improved trust

Increased access and uptake of approved medical products

A component of improving health outcomes and advancing health equity



## Next Steps



Publication available: Enhancing Diversity and Inclusion in Clinical Trials. Clin Pharma and Therapeutics, https://doi.org/10.1002/cpt.2819



Finalize recommendations and maturity model



Launch publicly in Q2 2023



Developing concept proposal to convene related efforts around aligning work to achieve diversity in clinical trials



## CTTI Diversity Project Team

#### **Team Leaders**

Bernadette Siddiqi\* (MJFF)

Dawn Corbett (NIH)

Luther Clark (Merck)

Richardae Araojo (FDA)

Tesheia Johnson (Yale)

#### **Executive Committee Champion**

Robert Temple (FDA)

#### Social Science Lead:

Amy Corneli (CTTI/Duke)

#### Communications Lead:

Rae Holliday (CTTI)

#### **Project Manager:**

Sara Calvert (CTTI)

Kimberly Fisher (CTTI\*\*)

#### **Team Members**

Arisha Ali (Amgen)

Beverly Lorell (King & Spaulding)

Cassandra Beisel\* (Melanoma RF)

Cassandra Smith\* (J&J)

Cecelia Belmonte\* (Amgen)

Christina Brennan (Northwell Health)

Coleman Obasaju (Eli Lilly)

Dinorah Villanueva (J&J)

Diana Foster (SCRS)

Glendon Zinser (Susan G. Komen)

Heidi Pereira (Novartis)

Jaime Arango (CITI)

Jamil Rivers (Individual Patient)

Jane Williams (Syneos Health)

Jeff Sherman (DIA)

#### **Team Members (cont.)**

Jerrihlyn McGee (U Kansas MC)

Julia Yegorova (Genentech Roche)

Karlin Schroeder

(Parkinson's Foundation\*\*)

Katy Sadowski (TrailSpark)

Kaveeta Vasisht (FDA)

Kelley O'Donoghue (U Rochester)

Kimberly Fisher (Janssen)

Melania Boyce (EMD Serono)

Patricia Hurley (ASCO)

Ruma Bhagat (Genentech)

Susan Burriss (GSK)

Suzanne Maahs (Novartis)







Questions about CTTI Diversity Project?

Contact sara.calvert@duke.edu

## THANK YOU

www.ctti-clinicaltrials.org