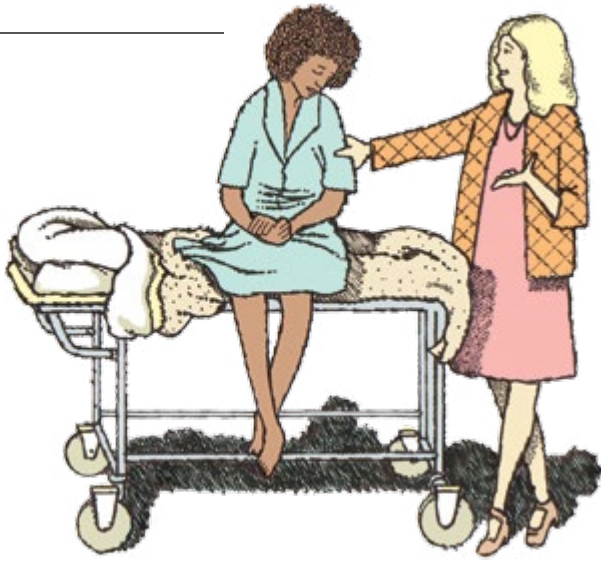


# GENI ENG



**Power of community, strength in diversity**

Growing up on a small farm in Jacksonville, Fla., as the great-granddaughter of a Chinese immigrant tenant farmer, Eng experienced cultural clashes as well as the power of community.



“I saw how communities can come together,” says Eng, professor of health behavior at the Gillings School. “That’s a large part of why I gravitate toward looking at culture and how it’s intertwined with health.”

Her Peace Corps service with community health workers in Togo strengthened her belief that one must address cultural values to change health behaviors.

For the last decade, Eng has highlighted the value of community and cultural awareness through her membership in the Greensboro Health Disparities Collaborative (GHDC), an academic-community coalition. “We have partnered with community members to fine-tune research questions, determine the methods most culturally authentic and appropriate to gain information that is hidden and elusive from mainstream society, and gain an insider’s view on why health inequities persist in these communities,” Eng says.

“Geni has the ability to be a true collaborator and to partner with very diverse groups,” says Jennifer Schaal, MD, GHDC’s secretary and a founding member. “She doesn’t try to run the show, and she’s able to share her

expertise without acting like she’s the only expert.”

Eng and The Partnership Project ([www.greensboropartnership.com](http://www.greensboropartnership.com))—which manages GHDC—began collaborating in 2003; Eng offered her expertise in community-based participatory research (CBPR), and the Project offered a framework for undoing

racism. “Using a systems approach, we are examining how the lack of transparency and accountability enables health care inequities to continue,” Eng says.

The group first designed the Cancer Care and Racial Equity Study, a two-year exploratory study funded by the National Cancer Institute, to better understand how cancer treatment was implemented at Greensboro’s Cone Health Cancer Center and why inequities were present. “We identified the pressure-point encounters that were different for white women and African-American women,” Eng says. “We explored the nuances of two groups of women going through the same cancer-care system but having different communication issues and different reactions to the protocols.”

Eng’s team works to narrow treatment disparities between black and white women with breast and lung cancers.





Their findings informed the development of a five-year study known as ACCURE (Accountability for Cancer Care through Undoing Racism and Equity). Begun in 2012 with UNC professor of medicine Sam Cykert, MD, as Eng's co-principal investigator, ACCURE is a National Cancer Institute-funded collaboration among UNC, The Partnership Project Inc., Cone Health and the University of Pittsburgh Medical Center.

"ACCURE tests the effectiveness of reorganizing cancer care in two cancer centers," Eng says. "We are aiming to optimize the quality of care and narrow treatment disparities between white and African-American patients with a first diagnosis of Stage 1 or 2 breast and lung cancers. Not receiving good care in these instances contributes to unnecessary deaths."

ACCURE's innovations are an electronic real-time registry that signals deviations from standards of care; training "nurse navigators" to use this registry and to communicate with patients and medical professionals about things that improve or prevent the achievement of optimal standards of care; the use of a "physician champion," who provides ongoing findings about race-specific treatment progress and promotes training in health-care equity for medical professionals; and patient engagement to generate an analysis of power and authority within the cancer-care system that informs the work of nurse navigators and physician champions.

"Our goal with this work is that disparities in treatment outcomes by race and ethnicity will fade," Eng says.

Left to right are Amondre Smith, ACCURE research assistant and senior at N.C. Central University; Nora Jones, Partnership Project Inc. executive director; Jennifer Schaal, former board chair of the Project; and Janet Jeon, ACCURE graduate research assistant and health behavior doctoral student at Gillings. The group came together in September at a meeting of the Greensboro Health Disparities Collaborative.



"This is to the benefit of all patients who have cancer."

Eng says that CBPR is important for North Carolina. "The changes in the state's demographics have been quite dramatic and rapid," she says. "Engaging these communities in research helps reveal their strengths. It is essential to see the people in our state not as targets, but as partners, which is critical to developing lasting change."

Nora Jones, GHDC member and president of Sisters Network Greensboro, an African-American breast cancer survivorship organization, has worked with Eng since the collaboration began.

"Geni truly appreciates community organizations, respects them and treats them as equal partners," Jones

says. "She has been a great asset to us as a community group, teaching us skills to be successful both in research and as a community organization overall."

—Michele Lynn



**7 KENAN DISTINGUISHED PROFESSORSHIPS AT UNC GILLINGS**

Drs. Gerardo Heiss, Michael Kosorok, Herbert Peterson, Barry Popkin, Mark Sobsey, James Swenberg and Steven Zeisel

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