50 Hoops LEGENDS

50 Hoops has partnered with the Senior Olympic Men AND the Women's Basketball teams (over 50) for nearly a decade. Senior Olympic Teams come from nearly a half-dozen cities to participate and play in 50 Hoops LEGENDS National Cancer Awareness Breakfast, Tournament and Health Fair. 2017-2019 City Networks: Dallas, Little Rock, Buffalo, Baltimore

FABULOUS 50 to Sexy at 60 (LEGENDS)

"FABULOUS 50 to SEXY at 60 " patient education Dinner Lecture series and Workshop expanded its network to Cleveland, OH and Tulsa, OK.

ACT I, II (LEGENDS)

AACT I, II again brought clinical education directly to patients. Our surveys show the trust level is greatly enhanced in face-to-face, multiracial settings where African Americans are comfortable and open to learning. This outreach continues to inspire them to begin to participate in clinical trials. AACT events outreaches to 7 – 12 cities annually.
Celebrating 20 YEARS!

As 50 Hoops wraps up its 20th Anniversary, it remains one of the most viable (small) patient education organizations in the United States. With the mortality rate of African Americans continuing to outdistance other races with cancer, diabetes, heart disease, Alzheimer's and other diseases, 50 Hoops has for nearly 20 years taken it's unique approach to patient education events throughout the United States, today having partnered in more than three dozen cities. Coalitions and Networks have been formed with both medical and community stakeholders. Ongoing networking encourages partners nationally to provide ongoing outreach. And, today 50 Hoops is proud of our legacy at this milestone of our patient and medical education.

However, even after 20 years, compared to Whites, African Americans are 29% more likely to die from cancer, heart disease and other illnesses. Some are illnesses which had they been diagnosed in time, could have seen better results. The mortality rate is twice (or more) as high for certain cancers and the highest of all races for some diseases. There exists an unequal burden of cancer among minorities and the underserved. African Americans will account for a disproportionate number of these cancers and men in particular have a 20% higher incidence rate and a 40% higher death rate from all cancers combined than white men. Five-year survival rates reveal that Blacks have the lowest rates, compared with all other ethnic groups.

Community Advocacy MATCHMAKING (LEGENDS)

In 50 Hoops’ Community Advocacy Site Training or CAM (community Advocacy Matchmaking) Luncheon Workshops became accredited in 2017. This year was first year the workshops offered CE credits. However, most importantly, CAM reached a new milestone, partnering with three prestigious medical universities, two who conducted CAM, utilizing 50 Hoops templates, format and program outline and working to produce independently highly successful CAM Luncheons as part of the “50 Hoops LEGENDS” Events. “Legends” events allow 50 Hoops to multi-task, expand and produce more quality local and regional events because the medical partners have a stake in the outcomes.

For Tampa, CAM has been a part of their medical and community outreach for more than a year. The University of South Florida Health’s “WeCARE” outreach utilizes CAM as a key medical/clinical component to teach clinical researchers how to access the minority communities.

In Raleigh/Durham, medical host Duke University Cancer Institute, their Office of health Equity adopted CAM in 2018 as part of their extensive ongoing outreach to bring researchers and community stakeholders together.

50 HOOPS™
Continued Need for Updated Patient Education Within the African American Communities

The most recent U.S. Census revealed more data related to the actual numbers of minorities in the US. Minorities who have the most disparities are fertile minds for disseminating disease education, and health resources. With new drugs in the pipeline, it becomes expedient that health access information be directed to this audience in ways that are effective and accepted.

Bottom line: The work is NOW, and will continue to be about patient education to minorities, and medical education for doctors and clinicians. The ongoing task is to create better ways to work together for greater health access for one, and better drug development for the other.
50 Hoops’ Cancer Education Breakfast SERIES:

50 Hoops is the first prostate cancer basketball tournament for men 35-50 and over which offers continuous cancer education throughout the breakfast and basketball tournament. Ed and Pat Sanders founded the company after Ed went through prostate cancer and treatment. Dr. Claus Roehrborn, Head of Urology at University of Texas Southwestern Medical Center urged the couple to form a needed prostate cancer outreach to target African American men. Today, 20 years later, 50 Hoops remains the only national prostate cancer basketball tournament in the United States, and presents prostate cancer education during the games, targeted to educate minority men about prostate cancer.

50 Hoops’ Disease Education SERIES:

The National Physician and Family Referral or NPFR Project (a subsidiary of 50 Hoops), was launched in 2000 with a grant from Pfizer to work with Howard University National Human Genome Center (NHGC) to develop special outreach to thousands of African American men and families nationally.

With the launch of our partnership with NHGC, we began nation-wide outreach for prostate cancer and looked at other diseases relevant to the study. In the process, 50 Hoops was able to leverage new national partners, and expand our patient education programs. In 2004, GlaxoSmithKline brought on 50 Hoops’ NPFR Project to develop a special African American community outreach targeted to African American men nation-wide. Along with P&E Associates, minority patient recruitment consultant, 50 Hoops was able to expand our cancer coalition network in over two-dozen U.S. cities.

50 Hoops has partnered with African American mega churches, community stakeholders, major cancer hospitals, health ministries, noted community health advocates and Black Expos. More than 80% of our work is done face-to-face at “ground-zero” community. Our patient education Lecture Series has reached over three-dozen cities in the United States over the past two decades. Praise God.
In 2018, 50 Hoops™ Cancer Breakfast and Prostate Cancer Basketball Tournament Programs Included:

50 Hoops National Cancer Breakfast Lectures: Annual cancer breakfast brings in women who bring along the men in their lives for the games that follow. Discussions include breast, colon, lung, prostate, Multiple Myeloma, thyroid, ovarian and kidney cancers among others.

50 Hoops National Prostate Cancer Basketball Tournaments and Health Fairs: Dallas is the home base for 50 Hoops Tournaments. Partnering with the Senior Olympics. Games include both men and women 40's, 50's 60's and 70's. Check our web for pix and videos. The Tournament featured physicians throughout the games discussing prostate cancer from notification to quality of life. In 2018 men were given FREE prostate screening at the 50 Hoops Games.
50 Hoops Cancer Breakfast Program Evaluation

1. Lecture was: Poor  Fair- **Good-100**  Excellent-**260**

2. Learned something/Understood better, topics: Yes-340  No-10

3. Rate my enjoyment: Poor  Fair- **Good-70**  Excellent-**260**

4. Would you attend another Breakfast Lecture and tell your friends? Yes-330  No

5. What did you get most out of the morning?
   a. Learned things about cancer that I did not know
   b. Info on prevention and support
   c. Testosterone will increase prostate cancer
   d. Awesome breakfast
   e. Importance of screening
   f. Q & A
   g. Networking, History of cancer with African Americans
6. What would you do to improve the Lecture Series?
   a. Nothing
   b. Every year is better than before
   c. Have more providers speaking on cancer
   d. 9:00 am start time

7. Did you complete the call to action? Yes-190   No-50

Rate program scale 1-10:  1  2  3  4  5-10  6  7-30  8-30  9-40  10-190

8. Comments/Suggestions?
   a. Really, very good program, keep up the good work
   b. Excellent program
   c. Very nice, good food
   d. Get tested
50 Hoops 2018 Summary
Event PSA Screening Report Dallas, TX

Total Participants Screened: 41
Male Participants: 41 - 100% of African American men over 50

<table>
<thead>
<tr>
<th>PSA Categories</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 to 0.9</td>
<td>26</td>
</tr>
<tr>
<td>1.0 to 1.9</td>
<td>8</td>
</tr>
<tr>
<td>2.0 to 2.9</td>
<td>3</td>
</tr>
<tr>
<td>3.0 to 3.9</td>
<td>2</td>
</tr>
<tr>
<td>4.0 to 4.9</td>
<td>1</td>
</tr>
<tr>
<td>5.0 to 5.9</td>
<td>1</td>
</tr>
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</table>

Age of Participants

<table>
<thead>
<tr>
<th>Age</th>
<th>Male</th>
</tr>
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<tbody>
<tr>
<td>20 to 29</td>
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<td>50 to 59</td>
<td>17</td>
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<tr>
<td>60 to 69</td>
<td>11</td>
</tr>
<tr>
<td>70 to 79</td>
<td>8</td>
</tr>
</tbody>
</table>

NOTE: Two considered HIGH
One - age 67 at 4.1
One - age 62 at 5.5
50 Hoops LEGENDS 2018
20th Anniversary Games
50 Hoops Screening Questionnaire PRE/POST Test

What do you know about PROSTATE CANCER?

PRE TEST

1. Name two types of tests used to detect Prostate Cancer.

<table>
<thead>
<tr>
<th>Test</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>ED</td>
<td>12</td>
<td>3.947684</td>
</tr>
<tr>
<td>PSA</td>
<td>112</td>
<td>36.84105</td>
</tr>
<tr>
<td>MBA</td>
<td>4</td>
<td>1.315785</td>
</tr>
<tr>
<td>DRE</td>
<td>88</td>
<td>28.947368</td>
</tr>
</tbody>
</table>

2. What are the symptoms experienced if you have Prostate Cancer?

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Difficulty urinating</td>
<td>76</td>
<td>82.894737</td>
</tr>
<tr>
<td>Weak Urine flow</td>
<td>64</td>
<td>21.052632</td>
</tr>
<tr>
<td>Headaches</td>
<td>16</td>
<td>5.2631579</td>
</tr>
<tr>
<td>Frequent Urination</td>
<td>96</td>
<td>31.578947</td>
</tr>
<tr>
<td>Constant pain</td>
<td>52</td>
<td>17.105263</td>
</tr>
</tbody>
</table>

3. Why do you think such a small number of African-Americans take part in clinical trials? (several answered more than one response)

<table>
<thead>
<tr>
<th>Reason</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not enough black physicians take part in research</td>
<td>116</td>
<td>26.126126</td>
</tr>
<tr>
<td>No one asks them</td>
<td>128</td>
<td>28.828829</td>
</tr>
<tr>
<td>Too many health risks for clinical research volunteers</td>
<td>44</td>
<td>9.9069099</td>
</tr>
<tr>
<td>The history of the Tuskegee study</td>
<td>112</td>
<td>25.225225</td>
</tr>
<tr>
<td>Other</td>
<td>44</td>
<td>9.9069099</td>
</tr>
</tbody>
</table>

Other answers include:
- People that answer others include
- Afraid to see doctor - to participate in the studies
- Not enough information on the subject
- Fears and other priorities/concerns
- Lower rate of testing and diagnosis
- Unconcern on the part of the US government
- No knowledge of them
- Fear of unknown
- Don’t trust the government

Chart for #3
Do you think the FDA does a good job of protecting clinical research volunteers?

<table>
<thead>
<tr>
<th>Response</th>
<th>Number</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>Yes</td>
<td>72</td>
<td>25.352113</td>
</tr>
<tr>
<td>No</td>
<td>104</td>
<td>36.619718</td>
</tr>
<tr>
<td>No opinion</td>
<td>108</td>
<td>38.028169</td>
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</table>

5 Would you be more likely to take in a:

<table>
<thead>
<tr>
<th>Type</th>
<th>Number</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>Government funded trial</td>
<td>72</td>
<td>25</td>
</tr>
<tr>
<td>Pharmaceutical funded trial</td>
<td>68</td>
<td>23.611111</td>
</tr>
<tr>
<td>Does not matter</td>
<td>100</td>
<td>35.211268</td>
</tr>
<tr>
<td>Would not take part in either</td>
<td>48</td>
<td>16.666667</td>
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</table>

POST TEST

<table>
<thead>
<tr>
<th>Response</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>ED</td>
<td>24</td>
<td>3.947368</td>
</tr>
<tr>
<td>PSA</td>
<td>136</td>
<td>22.36842</td>
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<tr>
<td>DMBA</td>
<td>16</td>
<td>2.631579</td>
</tr>
<tr>
<td>DRE</td>
<td>80</td>
<td>13.15789</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Condition</th>
<th>Number</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>Difficulty urinating</td>
<td>72</td>
<td>11.84211</td>
</tr>
<tr>
<td>Weak urine Flow</td>
<td>80</td>
<td>25.564103</td>
</tr>
<tr>
<td>Headaches</td>
<td>8</td>
<td>2.564103</td>
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<tr>
<td>Frequent Urination</td>
<td>104</td>
<td>33.33333</td>
</tr>
<tr>
<td>Constant pain</td>
<td>48</td>
<td>15.38462</td>
</tr>
</tbody>
</table>
AACT I features a panel of physicians in an open community discussion of critical diseases that affect the community. AACT I is designed to educate and answer disease questions and offer a clear understanding of its effects and mortality rate in the minority community. AACT II presents multiracial clinicians explaining trials with Q&A from audience about the clinical trials available for these diseases. It is during AACT II that we MATCH the community with specific clinical researchers and trials, assigning local community navigators to keep in touch with doctors and create opportunities for further discussions.
Community EVENTS

African American/Underserved Patient and Medical Education

50 HOOPS™
AACT I, II (African Americans in Clinical Trials) 2018
Outcomes Measurement and Impact REPORT

Outcomes Measurements and Collections Methods

Surveys, testimonials, telephone interviews with Call to Action participants and physicians who opt-in for follow-up.

(a) Surveys: (a) Pre-event Survey (b) Post Event Survey (c) Health Access and Clinical Trials Surveys and (d) Evaluation of Outcomes were charted and used as part of ongoing community research of African Americans in Clinical Trials participation. Also: written Surveys, small groups, video testimonials, sign-ups for 50 Hoops’ “African American Health Matters” monthly mobile health text message service and Call to Action.

THIS CTA (Call To Action) has allowed 50 Hoops to:

During 2018 AACT events, 50 Hoops develop nearly half dozen disease and community organizational partnerships at each event. We measured our event’s success through “Success Indicators” developed over the years:

Success Indicator 1:

Calling upon local community stakeholders, health ministries and health organizations to include ongoing monthly or quarterly clinical education segments into their programs utilizing clinical research professionals (CRPs). 50 hoops shares survey and CTA results with all local advisory teams and medical partners. All CTA organizations partner in this joint community initiative at the local level.

• Developed (on-the-spot) commitments for over 30 volunteer patient and community organizations and over a dozen Navigators between both key community stakeholders and CRPs.

Success Indicator 2:

50 Hoops has available a “AACT Workshop Folders” that can help with strategy and development. It is designed for both community stakeholders and clinical research professionals.

The training work folders give ideas for coordination of outcomes and measures success.

50 Hoops routinely does follow-ups with communities to assess progress of AACT follow-up. More than 87% of the (nearly four dozen visited) communities continue to provide (added) ongoing clinical education to constituencies through programs and health fairs. These coalition communities are included in “50 Hoops LEGENDS” (cities that carry on 50 Hoops projects in partnerships, using 50 Hoops’ templates, processes and procedures from advisory to completion and expanding the outreach of 50 Hoops).

• Distributed disease-related clinical trial information in cooperation with local national disease organizations and university teaching hospitals.

Success Indicator 3:

Participants (mostly underserved) expanded resources (oral, written and via browser on smart phone) about, the diseases, optimal treatment options and new clinical trials available.

• Field researched over 1000 participants and explored ways that encourage individuals to take the initiative on their own to seek the educational tools available within the community.

Success Indicator 4:

Participants register for the 50 Hoops’ FREE mobile health text message service, “African American Health Matters” which offers tips and information on diseases and related clinical trials. AAHM has over 60,000 subscribers which increase annually and are acquired during face-to-face events such as AACT I, II Workshops. They can also subscribe through their cell phone browsers at: www.africanamericanhealthmatters.com
• More than 1500 AACT event participants registered for the 50 Hoops FREE Mobile Health text message service, “African American Health Matters,” where subscribers receive monthly tips on over 15 different disease categories. Also AAHM alerts subscribers of clinical trials available in various diseases for which they are registered. AAHM mobile subscribers number 65,000 since 2009.

Outcomes Goals Measure and Impact

There exists an unequal burden of cancer among African Americans, Hispanics and the underserved. ACS reports African-Americans are more likely to develop cancer than all other racial and ethnic groups. African Americans in particular have a 20% higher incidence rate and a 40% higher death rate from all cancers combined than white men. Five-year survival rates reveal that Blacks have the lowest survival rates, compared with all other ethnic groups.

Measures:

• Pre and post-surveys knowledge about treatment options. (90% improvement)
• Understanding of consent forms, IRB, HIPPA help patients better navigate clinical resources. (86% better understanding use of Partner Outreach.
• More than 90% said they had increased knowledge and take back updated information about disease.
• As many as 89% of participants took information back to their groups, families and communities. Over 54% made appointments to ask more questions about trials and over 43% said they would participate in a clinical trial in the future.

AACT I, II PROGRAM GOALS MET:

In 2018 50 Hoops expanded our outreach to include several cities not previously visited. We were able to form networks from Georgetown University (grant partnered) to Samuel Merritt Hospital (community/faith-based partnered).

We covered nearly a dozen cities in 2018, comfortably cruising past our outreach goals for the year.

No matter where we present the AACT I, II Lectures, nearly half-dozen surveys are administered during the Lectures which measures the Success of the Lecture Series in each city. Some of the questions that the face-to-face education and surveys continue to reveal:

• More need for access by African Americans to health and disease information. Nearly 60% said that the AACT I, II Lectures offered them more access than other programs within the community.

• A need for more opportunities to learn about clinical trials and treatment options: 90% of participants in all AACT I, II cities surveyed agreed that there is a critical need for more continuous, ongoing programs like AACT I, II Lectures, and 82% believe that there is a need for better communications from clinical research professionals to alert them of important clinical trials within the community.

• There is a critical need to focus upon which clinical trials are of most interest (needed) in each city/region. In the northeast, it was discovered that various cancers such as multiple myeloma, breast, prostate, lung, bladder, COPD as well as cardiovascular diseases were of high interest. In the western regions Stroke, Heart attack, COPD, lung, breast and colon disease trials would draw their attention.

Finally, in each of the over half-dozen cities, 50 Hoops was able to either strengthen or add local AACT Coalitions and community navigators to our database, allowing us to return and continue our AACT I, II lectures in the future.
Program Strategies Reveal:

INCREASE UNDERSTANDING OF CLINICAL TRIALS: Through our partnerships we’ve reached tens of thousands of African Americans who have told us their need for more cancer education. With the growing prominence of 50 Hoops as a major, national African American disease education resource, we are committed to developing ways to educate and provide health enhancement programs and tools—both for the disease and for new drug discoveries. It has been found that FIRST, educating the community about the disease and tying this knowledge into UPDATING them about new clinical trials has proved effective to more interest in participation in trials within those communities we’ve impacted.

DEVELOP CLINICAL TRIALS PARTNERSHIP NETWORKING PATH BETWEEN COMMUNITY AND TRIAL RESOURCES: In each community Field Research has shown that working with local health ministries and existing health and cancer coalitions, offers enhanced understanding of prostate, breast, colon, lung cancer and multiple myeloma—among other cancers. The AACT I, II is one of those tools to help bring African Americans communities, stakeholders and health ministries in direct, face-to-face contact with medical and clinical professionals, best able to provide disease and clinical information. In so doing we enhance the work already being done, or kick-start African American disease and clinical education outreach efforts nationally.

MORE DISEASE AND CT INFORMATION: Working with an advisory team within each community also provides us with disease and clinical resources to distribute among the community. The AACT I, II Workshop provides printed materials, and digital tools that can be accessed by participants to learn more about clinical trials and the disease therapies associated with them.

ENCOURAGE SEEKING OF KNOWLEDGE: The format of the Workshop and Lecture Series allows for extensive Q&A from patients and participants to both learn and express their concerns.

With (AACT I) African American doctors presenting information they feel they can trust, followed by (AACT II) Clinical Research Professionals (CRPs) available to explain both the legal and health advantages—and disadvantages—of participation, the Workshop and Lecture Series begins to build trust among the community, even for longstanding existing medical institutions. The face-to-face approach brings audience closer to a more REAL exposure to clinical trials information than previously offered through radio and other no-contact approach to education and recruitment.

Lessons Learned:

Lesson learned were consistent across the board. There is a continuous, ongoing need for AACT I, II style health events. Repeat events brought much hope that the community is finally “getting it,” as it relates to educating African Americans in clinical trials. First Time events, need more events related African Americans in Clinical Trials. This shows that more is needed both in 50 Hoops’ established cities as well as new cities explored annually.

Traditionally, and as expected, the two segments resonated with the audiences. AACT I segment, with Physicians (many minority/women), opened the trust level for the participants by detailing the a-b-c’s of the diseases. During Q&A the audiences were canid about the disparities is the mostly minority health care system and as always, hungry for the information from physician panelists. This tells us 50 Hoops is unique and our strategies to educate within the African American communities resounded positively.

The AACT II segment with clinicians or doctors, offered participants a way to navigate into a variety of clinical trial information and trial opportunities. Clinical research professionals were able to answer questions (in a safe, trusting environment), which also offered more “legitimacy” within a minority-centered group setting. Clinicians were usually swapped with participant questions following the lectures, lasting up to an hour after program adjourned.
THE CALL TO ACTION

(CTA) is vital to 50 Hoops and opens both doctors and participants to make appointments, doctors speak at another (network’s) upcoming health event, or to get their personal and individual questions answered.

An average of 47% of the participants followed through with calls and appointments, letting us know that the energy generated by ACT I, II Lecture Series is one which is critically needed throughout the country.

Recognizing that with each city we’ve traveled, there are often dozens of pockets of African American communities, stakeholders --and opportunities to educate. The lessons learned means that our work is far from completed.

We need to keep in touch with our Advisory Teams, medical partners and clinicians and continue to evaluate the ongoing impact of AACT I, II.

The bad news is that locally, it is difficult to replicate this program for financial reasons on a quarterly or ongoing basis. The good news is that we have identified dedicated stakeholders and physicians who were so inspired that they have expressed a commitment to our CALL TO ACTION to continue to find new and creative ways (until we return) to bring AACT I, II back to their city to educate African Americans about clinical trials.

50 Hoops Celebrates 20 Years
National Medical Partners are key to 50 Hoops’ success.

Some of 50 Hoops’ National MEDICAL PARTNERS 1998 - 2018:

50 Hoops has partnered with some of the most prestigious Hospitals, Medical Centers and University Hospitals in the US, including M.D. Anderson (Houston), Fox Chase Cancer Center (Philadelphia), Karmanos Cancer Center (Detroit), Siteman Center for Advanced Medicine (St. Louis), University of Texas Southwestern Medical Center (Dallas), Texas Harris, Baylor Hospital ( Ft Worth), Parkland Memorial Hospital (Dallas), Houston Methodist, National Human Genome Center at Howard University (DC), University of Texas Medical Center ( Houston), Morehouse College of Medicine (Atlanta), Institute of Human Genetics at Chicago, Chicago State University, College of Health Sciences, The West Clinic (South Haven), Cleveland Clinic (Cleveland), University of South Florida (Tampa), Moffitt Cancer and Research Center (Tampa), Sutter Health and Samuel Merritt Cancer institute (Oakland), Austin Cancer Centers, US Oncology, the Memorial Sloan-Kettering Cancer Center (Louisville), Winthrop Rockefeller Cancer Institute (Little Rock), University of North Carolina (Chapel Hill) and Duke Cancer Institute (Raleigh), Roswell Park Cancer Institute (Buffalo, NY), University of Southern California/Norris Cancer Center ( Los Angeles, CA), Johns Hopkins (Baltimore/DC), Howard University and Georgetown University Medical Center (Washington, D.C.).

African Americans In Clinical Trials
Field Research  2009-2018

- 5%: Heart Disease
- 8%: Diabetes
- 9%: Breast Cancer
- 7%: Prostate Cancer
- 6%: Colon Cancer
- 5%: Other

Number
- 2250: 21.55%
- 1115: 10.72%
- 1720: 16.62%
- 950: 9.18%
- 630: 6.08%
- 550: 5.31%
- 620: 5.99%
- 550: 5.31%
- 600: 9.29%
- 10350: 9.95%

Other: seizure, arthritis, cholesterol, cervical cancer, sarcoidosis, allergies, thyroid.
African American/Underserved Patient and Medical Education Community EVENTS

AACT I, II 2018 National Program Evaluations

1. Lecture was: Poor  Fair-  Good-60  Excellent-230

2. Learned something/Understood better, topics: Yes-300  No-

3. Rate my enjoyment: Poor  Fair-  Good-80  Excellent-210

50 HOOPS ™
4. Would you attend another AACT I and II and tell your friends?  Yes 300  No

African Americans in Clinical Trials

AACT I, II Lecture Series

Lung Cancer in African Americans

Ray Page, DO, PhD
Dr. Ray Page is President and Director of Research at The Center for Cancer and Blood Disorders in Ft. Worth. He received his B.S. Degree from Southwestern University; a M.N. Degree at Baylor University; and completed a dual doctorate medical scientist program at the University of North Texas Health Science Center in Ft. Worth. He was Chief Fellow at M. D. Anderson Cancer Center, where he trained in oncology and hematology, and was recently named to the "Texas Super Doctor Hall of Fame." Dr. Page remains at the forefront of new drug development and anticancer therapies, and has been the principal investigator of over 150 oncology clinical trials.

Pancreatic Cancer in African Americans

Arthi Kumaravel, MD says, “Of all the fields in medicine, gynecology appealed to me because it is a field which provides ample opportunity for cancer screening and prevention, which is close to my heart”. She is a board-certified Gastroenterologist, affiliated with Texas Health Harris Methodist Hospital Fort Worth. She specializes in the diagnosis and treatment of various GI cancers, including pancreatitis, Barrett’s esophagus. She is a graduate of Cleveland Clinic Lerner College of Medicine of Case Western Reserve University, and a member of the American College of Gastroenterology, American Society for Gastrointestinal Endoscopy and the Texas Medical Association. She is the recipient of special honors, including ACG AstraZeneca Fellow award, and a ACG Fellowship2 Leadership grant.

Prostate Cancer in African American Men

General Urologist Ryan Mauck, M.D. evaluates and treats virtually every type of urologic concern—from enlarged prostates, to erectile dysfunction, and tumors. Dr. Mauck has served as the Chief of Urology at Parkland Health & Hospital System in Dallas since 2013, and is an Assistant Professor in the Department of Urology at UT Southwestern Medical Center. Board certified, he performs over 500 urologic procedures a year, including prostatectomies (both simple and radical). He says, “It’s important to me to involve my patients in their care, and really understand what’s going on and what their options are, which helps them make the most well-informed treatment decisions and really understand why we’re doing what we’re doing.”

5. What did you get most out of the evening?
   a. The Doctor’s heart for people and cures for sickness and disease
   b. Other than full stomach, great Info. to help me understand cancer in and educated form
   c. There are a lot of cancers that I didn’t know that is not detected at all times
   d. The entire lecture and presenters were very informative. I’ve learned about myself things that are afforded to me as an African American woman
   e. Education/information/motivation
   f. I need to change my eating habits and take better care of my diabetes
   g. Dr Arthi Kumaravel & her presentation
6. What would you do to improve the lecture Series?
   a. Nothing
   b. This was one of the very best group of doctors yet
   c. The programs are already timely, share the info, bring friends to attend
   d. Make sure the venue has a good audio delivery system. High ceilings and no sound barrier make it difficult to hear. Plus some videos were not clear because of the setup.

7. Did you complete the call to action? Yes-120  No-90
Rate program scale 1-10: 1 2 3 4 5 6 7-8 40 9-20 10-210

Dallas, San Diego, Washington, D.C., Fort Worth, Buffalo, Oakland, Memphis
8. Comments/Suggestions?
   a. I applaud the doctors, organizers, church personnel and others for their time to reach out and inform the group about cancers, treatments. Great proactive program
   b. Thank you. I am a professor of health economics. I read about this event in the newspaper and am so glad I came out I learned things I can incorporate into my courses to further student understanding.
   c. Very informative
   d. My first attendance of such a seminar. I was extremely impressed with all the presenters. Thank everyone for their time and attention in the positive information.
   e. The same as above more people need to be contacted we need more networking.
20th Anniversary DFW Recognitions
(Supported for five or more years)

Dr. Claus Roehrborn
Dr. Robin Skrine
Dr. Mary Quiceno
Dr. Rufus Green
Dr. James Race
The Potter’s House of Dallas
Oak Cliff Bible Fellowship

Pastor Lawrence Robinson
Pastor Rodney Derrick
Greg Smith (OCBF)
Gloria King (Group)

Some participants have supported 50 Hoops™ for nearly a decade:
• James Stafford (Group)
• Ester Davis
• Timothy Upshaw (50 Hoops Board)
• Jim and Judy Talley
• Gloria King (Group)
• Rick and Genevieve Thornton
• Leroy Greer
• Rev Donald Parish Sr. and First Lady Deborah Salone Parish
• Wolfram and Bruni Blattner
• Tom Dillon
• Monty Knapp
• Lee and Sheila Patterson
• Zachary Thompson
• Brenda Session
• Bob and Linda Williams
• Terry Wilson-Gray
• Don Hicks
• Ron Session (Parkland)
• Linda Kemp, and in memory of her husband, Buford Kemp

Thanks to all of you who have supported 50 Hoops’ patient education outreach 1998-2018

AACT I, II Lecture Series
(African Americans in Clinical Trials)
African American/Underserved Patient and Medical Education Community EVENTS

50 HOOPS™
50 Hoops partnered with the Multiple Myeloma research Foundation and worked with them to create a patient education event based upon 50 Hoops' African Americans in Clinical Trials (AACT I, II) Lecture Series and our “CAM” Community Advocacy (Site Training and) Matchmaking Conference Workshops.

Held in African American mega churches that are part of the 50 Hoops’ network, the event is called “There's A New Cancer (Initiative) In Town,” or TANCIT, and was presented in three cities to African American communities that have partnered with 50 Hoops over the past 20 years. TANCIT was developed in 3-4 formats, adaptable to each city’s availability within 50 Hoops networks and coalitions. The three formats which were presented included (a) Conference format (b) Luncheon or Dinner Workshop format and (c) Partnered (event) format.

The TANCIT Workshops are part of a national patient education and advocacy designed to bring awareness about Multiple Myeloma cancer to African American communities through bringing doctors, community leaders, survivors, churches and other leaders together for a better understanding of the disease and how to better outreach to educate African Americans about the disease and related cancer trials. “There's A New Cancer (Initiative) In Town,” addresses Multiple Myeloma and its growing impact upon the African American population, particularly our Baby Boomers and older.

50 Hoops is proud to have played a major role developing the concept and networking three of our partner cities for the premier of “There's A New Cancer (Initiative) In Town.”
Speakers and Advisory Team: “There’s A New Cancer (Initiative) In Town,” D.C.

MEDICAL HOSTS:
Washington, D. C.: Georgetown University/Lombardi Cancer Institute
Southaven, MS/Memphis, and TN: The West Clinic, Methodist Hospital
Oakland, CA: Kaiser Permanente
Community Advocacy MATCHMAKING

2018

Luncheon Workshop- Dallas, Texas
Luncheon Workshop- Tampa, Florida*
Luncheon Workshop- Durham, North Carolina*

*50 Hoops’ Legends: Replication by 50 Hoops’ medical partners:
UT Southwestern Medical Center
University of South Florida Health
Duke University Cancer Institute
Outcomes, Benefits of CAM Workshop Series

Site Investigators learned to utilize their knowledge about disease therapies currently being developed, to improve health literacy of their local community minority populations. Surveys show it helped them to make better choices about clinical studies that may benefit patients and caregivers.

1. Community Panel learned more about drug discoveries and therapies that impact diseases and which affect their health outcomes.

2. Through interaction with community stakeholders, clinicians and the care delivery system administrators learned how community advocacy provides better access for minority communities, within their outreach area and learn more about clinical trials to help patients make the best decisions about joining appropriate clinical trials.

3. Through CAM, researchers were able to understand cultural myths to help them better promote informed decision-making.

4. CAM highlighted comparisons and outcomes that matter to minority populations, by (a) creating ways to measure clinical knowledge and understanding of clinical trials, (b) Address cultural issues relevant to diseases that affect patients and caregivers, (c) measure the effects of CAM Workshop Series on personal decisions about disease and trials (d) educate clinicians on perceived barriers and benefits of community advocacy.

5. During 2018, CAM incorporated a wide variety of settings and diversity of participants to address individual differences and barriers to implementation and dissemination; and measure their access (through community stakeholders) to constituencies to provide information about clinical trials.
African American/Underserved  Patient and Medical Education  Community EVENTS

UT Southwestern Medical Center-Dallas

CAM
Community Advocacy MATCHMAKING

50 HOOPS ™
African American/Underserved Patient and Medical Education Community EVENTS
African American/Underserved Patient and Medical Education Community EVENTS

Duke University Cancer Institute - Durham

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African American Health Matters 50 Hoops’ FREE mobile health text message service has offered monthly health tips for over a decade on nearly two dozen diseases that critically affect our African American communities.

**Geographic areas covered by 50 Hoops**
National: Raleigh/Durham, NC, Memphis, TN, Dallas, TX, St. Louis, MO, Philadelphia, PA, Oakland, CA, Houston, TX, Louisville, KY, Cleveland, OH, Charleston, SC, Durham, NC, La Vegas, NV, Houston, TX, Tampa, FL, Atlanta, GA, Austin, TX, Savannah, GA, Washington, DC, Miami, FL, Chicago, IL, Little Rock, AR, Ft. Worth, TX, Buffalo, NY, Johns Hopkins, Baltimore, MD.

With over 60,000 subscribers, there has previously been no national marketing campaigns, or social media promotions because all of the subscribers are signed up face-to-face at 50 Hoops and 50 Hoops’ partnered events. Nearly 1200 subscribers per year have joined over the past decade, as the mobile health text messaging has gained popularity among our patient education audiences.