A common observation is crises often accelerate trends already underway. “The most difficult social problem in the matter of Black health…was to understand why so few White Americans were bothered by it. The poor Black lives were spent in the most unhealthy parts of the city and in the worst houses, with minimal medical attention.” This could easily be a current quote, but it was written by sociologist, W.E.B. DuBois in 1899. Unfortunately, this remains relevant today and COVID has unfortunately accelerated health care inequities in our minority populations, especially Black communities. There are, however, some hopeful signs the pandemic is beginning to hasten steps to address these inequities.

UCLA Radiology has taken steps under its control to help resolve some health care disparities. They include bringing UCLA Radiology expertise in diagnostic imaging, interventional radiology, and operations management directly to the Martin Luther King, Jr. Community Hospital (MLK), which serves a predominantly Black community. Our faculty, technologists, nurses, nurse practitioners and administrators run MLK’s Department of Radiology. This team delivers inpatient care of the highest quality, something UCLA Radiology takes pride in. Building on this track record, we are grateful for a future opportunity to incorporate our IR fellows into our MLK care team. They will provide superior care to our MLK patients while enriching their diverse clinical experience.

UCLA Radiology recently took another step to address inequities in care that predate the pandemic but have been exacerbated by the COVID crisis. Supported by a $2.7 million grant, the “Mammosphere Project” led by Drs. Ashley Prosper, Hannah Milch, Cheryce Fischer, and William Hsu, will broaden our contribution to reducing disparities faced by people of color (POC) especially in the more recently identified underserved medical environment of outpatient care. We will bolster preventive outpatient care by leveraging radiology’s role in breast cancer and lung cancer screening. Historically, participation in these screening programs in underserved minority communities has been low for various social, cultural and personal reasons. Less access to outpatient care has been exacerbated for POC in Los Angeles during this pandemic. Rising to meet the urgency driven by COVID, the Mammosphere Project has developed an innovative strategy to communicate through social and personal networks to increase participation in proven screening programs and to specifically narrow gaps in the diagnosis and treatment of both breast and lung cancer.

One of Mammosphere’s key innovations is using “influencer models” born of the social media age to improve health care. Another innovation is to boost poor adherence to lung cancer screening (LCS) guidelines by linking that care with better-established mammography screening in an effort to overcome socioeconomic, cultural and psychological barriers, especially among African-Americans, who have historically been diagnosed with lung cancer at higher stages and who have experienced lower five-year survival than Non-Hispanic Whites. They, however, have been shown to derive comparably greater mortality reductions with earlier lung cancer detection through LCS. This novel linking draws on varied resources: health care advocates, patient navigators, social networks, even transportation for more convenient access.

This project begins at an encouraging time in cancer screening as some structural racial barriers are beginning to fall. This March, the USPSTF lowered the age and smoking history cutoffs for low-dose LCS, effectively doubling screening eligibility among African Americans and women. There is clear urgency not only to rectify historical inequities, but also counter COVID’s effect on screening rates.

While the COVID crisis has brought tragedy across our nation, especially to minority communities, the innovation and tireless efforts of UCLA Radiology faculty offer a small ray of light and hope in reversing health care inequities. UCLA Radiology’s presence has had significant beneficial impact on the care of MLK patients and this pioneering engagement continues to grow substantially in its goal of reducing health care disparities by providing tangible, clinical benefits to our predominately Black underserved communities. We recognize the importance and urgency of these actions and we will be unrelenting in our efforts to build equity in health care.