



PROGRESS UPDATE SPRING 2021

Cory's Crusaders Financial Assistance Fund



Dana-Farber
Cancer Institute



The
Jimmy Fund



**Joseph Chabot, MS, Pediatric
Resource Program Director**

Introduction

Your support of Dana-Farber Cancer Institute is making a tangible difference in the lives of our families. Thanks to record-breaking contributions from our donors, we have been able to raise the cap on the financial assistance that we can provide to each eligible family from \$4,000 to \$5,000. This additional aid has been essential, as the needs of our families have been greater than ever in the face of the COVID-19 pandemic.

For many of our patients, the pandemic brought with it layoffs, reduced working hours, and lengthy delays in obtaining unemployment benefits and stimulus funds—leaving families with little or no income for extended periods of time. Patient assistance funds have been vital in bridging these gaps, helping families keep food on the table and pay for transportation so critical treatments were not missed or delayed. Thanks to philanthropy, we have also been able to cover rent and mortgage payments for many vulnerable families who found themselves on the brink of homelessness while their child was receiving care.

We are incredibly grateful for your compassionate support, which ensures that children who need treatment are able to receive it, regardless of their financial situation. Thank you.

Joseph Chabot, MS, Pediatric Resource Program Director

THE IMPACT OF PHILANTROPY

Thanks to the generosity of our donors, Dana-Farber's Pediatric Resource Program was able to provide support for our patients and families at a time when it was needed most, as shown in these stories.

Teri

In May 2014, Teri, now age 8, was diagnosed with a slow-growing brain tumor on her optic nerve. Teri initially responded well to treatment and was a cheerful second grader when she relapsed in 2019 and began a one-year outpatient chemotherapy regimen. Teri and her siblings live in central Massachusetts with their single mom, Carol, a self-employed manicurist who had to close her business due to the pandemic. Living on unemployment benefits, the family was struggling to keep up with their essential household bills. Patient assistance funds covered two mortgage payments, relieving Carol of the family's biggest monthly expense. Upon receiving the assistance, Carol said, "This is a weight off my shoulders; please thank whoever makes this possible."

Taylor

Since receiving a brain cancer diagnosis in June 2020, 2-year-old Taylor has been undergoing a treatment protocol that includes a year-long chemotherapy regimen in the Jimmy Fund Clinic. Taylor and his little brother live in New Hampshire with their parents, Susan and Mike. Susan left her full-time job as a customer service representative when Taylor fell ill, and Mike, a teaching assistant in the public school system, lost his part-time bartender job due to COVID-19. Facing a drastic reduction in income, the family soon experienced financial hardship. Patient assistance funds helped keep Taylor's family up to date on their mortgage payments and allowed them to focus their energy on caring for their children.



Lilliana Lopera-Jimenez, BS

RESOURCE SPECIALISTS ADVOCATE FOR VULNERABLE FAMILIES

For families who make the arduous journey through pediatric cancer treatment, resource specialists guide them to benefits such as health insurance, stable housing, and social security disability benefits for their child. When immigration issues threaten a family's stability, resource specialists partner with advocacy organizations that provide immigrants with pro-bono legal representation. The resource team provides attorneys with medical records and letters from oncologists, and ensures that parents, many of whom do not speak English, understand the process. These cases can take a year or more to wend their way through the system, but every step brings them closer to stability, better health insurance benefits, green cards, and anxiety relief.

Driven by her personal experience, Resource Specialist **Lilliana Lopera-Jimenez, BS**, has dedicated her career to helping families navigate complex administrative systems, including the immigration system, to improve their circumstances. At age 11, Lopera-Jimenez and her mother and brother fled war-stricken Colombia seeking political asylum. By the time she had graduated from high school, Lopera-Jimenez had successfully completed the paperwork required for her family to obtain political asylum and their green cards, paving her family's way to citizenship.

Currently, Lopera-Jimenez is working with a mother from Central America who escaped the gang that murdered her brother. Soon after her 8-year-old son was diagnosed with Hodgkin lymphoma, the mother received a deportation notice, and she is terrified of being sent back to her country where her child can no longer receive treatment. In addition to providing this family with patient assistance funds to pay for utilities and food, Lopera-Jimenez is encouraging advocacy groups to pursue a case for political asylum. If successful, the family will be able to remain in the United States, and the child will be eligible for full insurance benefits from MassHealth. Lopera-Jimenez is also managing other immigration cases for families from Colombia, Brazil, and the Dominican Republic.

"I understand what it's like to escape from political violence and live in a place where you don't understand the language. I've become empowered to make the system work for families who find themselves in terrible situations through no fault of their own."

-- Lilliana Lopera-Jimenez



Kira Bona, MD, MPH

INTERVENTION TARGETING POVERTY ADVANCES

One in five children diagnosed with cancer in the United States lives in poverty. **Kira Bona, MD, MPH**, and her team have demonstrated that poverty is associated with higher rates of relapse, decreased overall survival, and higher symptom burden—even when children are treated on clinical trials. For example, Bona’s team recently showed that children with neuroblastoma (the most common solid tumor in childhood) who were living in poverty and received immunotherapy on a clinical trial had a striking 25% lower survival rate compared to children who were not poor.

Since the 1960s, investigators have made tremendous advances against pediatric cancers by systematically identifying biological risk factors that predict poorer outcomes and targeting them with new treatment protocols, resulting in a cure rate of almost 90% for diagnoses that were once almost universally fatal. Based on extensive work demonstrating that poverty is also a major risk factor for decreased survival, Bona’s team is leading a first-of-its-kind intervention that targets two aspects of material hardship—transportation and food insecurity. The pilot intervention called PediCARE (Pediatric Cancer Resource Equity) provides newly diagnosed families at Dana-Farber and the University of Alabama at Birmingham Hospital with groceries from online delivery services, and transportation in the form of ride services or gas and parking.

Participants in the pilot study report that PediCARE reduces anxiety about putting food on the table and makes it easier to get to doctors’ appointments. All 38 families in the pilot have remained in the trial, demonstrating that PediCARE is feasible to administer, highly acceptable to parents, and improves basic needs.

Based on this success, Bona and her team are embedding the PediCARE intervention into therapeutic drug trials for patients with neuroblastoma and acute lymphoblastic leukemia, the two most common childhood cancers. These randomized studies of PediCARE will investigate whether adding this intervention to a clinical drug trial can lessen disparities in outcomes. Ultimately, Bona’s research aims to ensure that every child who is diagnosed with cancer has an equal chance of survival.

Poverty-associated outcomes in cancer treatment disproportionately impact Black and Hispanic children, who are two to three times more likely to live in poverty than white children in the United States.

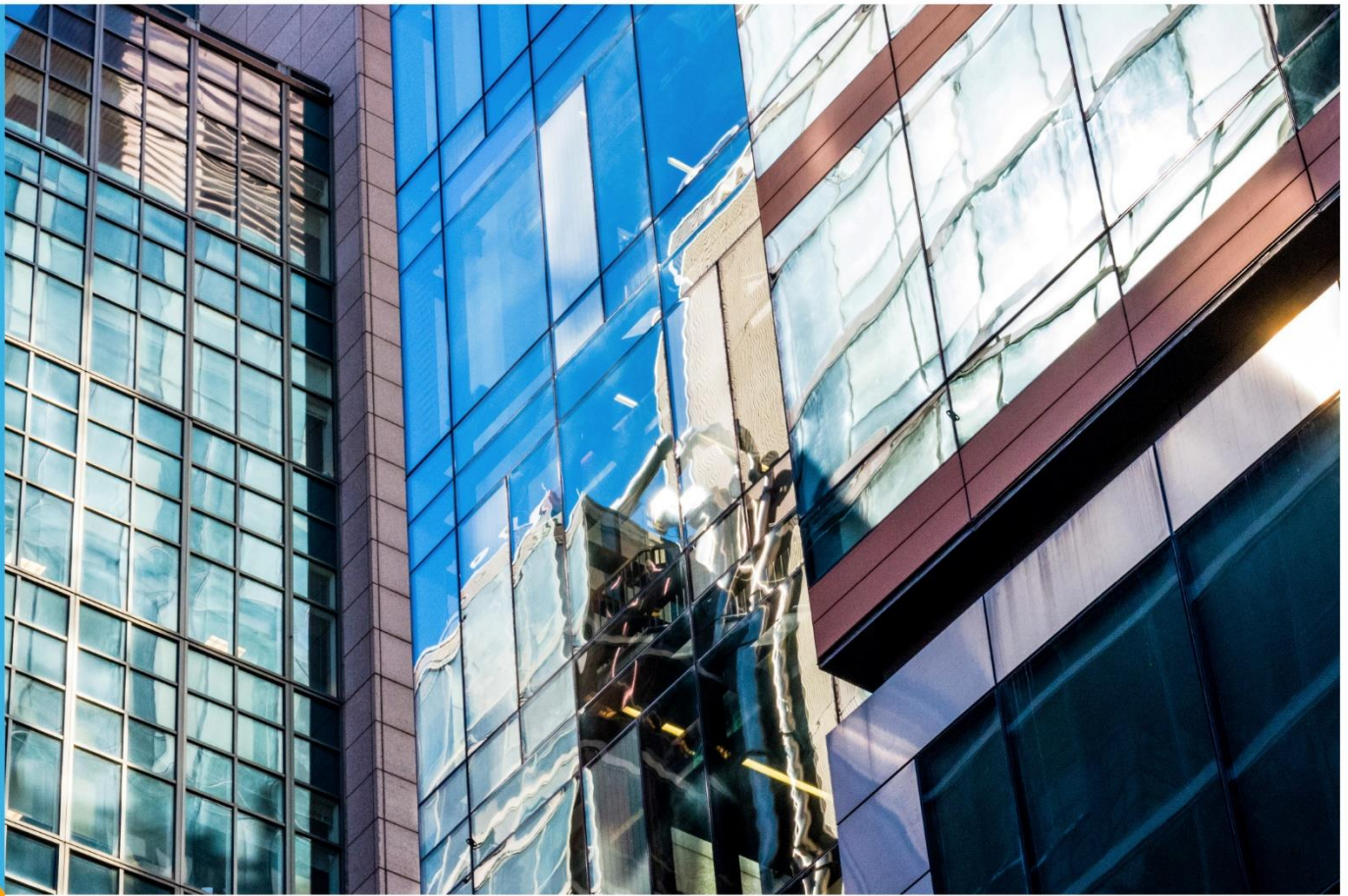
In the first investigations of poverty and survival conducted with the Children’s Oncology Group, Bona is studying poverty and survival outcomes for children with high-risk neuroblastoma as well as the correlation between poverty and cognitive late effects for children with acute lymphoblastic leukemia. Patients enrolled in these trials have contributed biospecimens for research, providing an unprecedented opportunity to study, for the first time, biomarkers associated with poverty.

The Impact of Your Philanthropy

Thank you for your generous support of the Pediatric Resource Program, especially during these difficult times. Cancer has not stopped because of COVID-19, and neither has Dana-Farber. Your compassionate contributions have helped our families keep food on the table, remain in their homes, and ease the financial burdens that can make it difficult to ensure that a child who needs treatment can receive it. Your remarkable commitment to helping those in need has been an inspiration to all of us, and we are grateful for your partnership.

Report written by Maria O'Meara





Dana-Farber Cancer Institute has been the top ranked cancer hospital in New England by U.S. News and World Report for 20 consecutive years, and is the only cancer center in the country ranked in the top 6 for both adult and pediatric cancer programs.



Dana-Farber Cancer Institute was named the #3 cancer center in the world by Newsweek in its World's Best Specialized Hospitals ranking.



450 Brookline Avenue, Boston, MA 02215 | dana-farber.org

© 2021 Dana-Farber Cancer Institute. All Rights Reserved. No part of this proposal may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopying, recording, or by an information storage or retrieval system, without permission in writing from Dana-Farber Cancer Institute.

10% of all designated gifts will support our Faculty Research Fund to advance Dana-Farber's research mission.