



Sandra, FINESTONE

Tell us a bit about your professional background

I am married and have 2 children, 2 grandchildren and 3 great grandchildren and feel incredibly blessed. My husband and I have a small accounting and tax practise in Orange County California. After my breast cancer diagnosis, I became very involved in patient advocacy but found that Mrs. Finestone was not really listened to in the medical and academic communities. I had gone back to school after having my children so had an **AA degree, a BA degree and a master's so thought why not a PhD. I formed a non-profit** to further the work I do. I am very invested in cancer research and believe the patient voice must be part of all phases of research. Good science will bring good results and good results mean better patient outcomes. I also believe that an educated patient makes a better patient and have worked hard to ensure that my patients are making their best decisions based on information that is particular to their cancer. I have reviewed research grants for many funders including the DOD, PCORI, Komen and sit on many advisory boards including a national Medicare committee to help again get information to patients. Locally I sit on two committees for the underserved and underinsured and also the local mental health board to help the population who is very often not heard and more often misunderstood. I continue to combine both parts of my professional life, the accounting piece is very finite and has closer, the psychology piece does not. The two parts of my life provide balance for me.

Why do you want to become a member of Cochrane's Governing Board?

I admire the work of Cochrane and was hoping that perhaps I could bring something of value to the Governing Board.

What are Cochrane's key opportunities and challenges and what can the Board do to help address them?

I think the sheer volume of information that is now available is overwhelming to researchers, clinicians and patients. If Cochrane could efficiently and effectively synthesize this data it would be of great benefit to everyone, and if this data could be used to identify gaps in research, successes and failures of research that also would be of great value. My assumption is that the board can direct approaches to both of these issues. The other challenge is the discrepancy in worldwide health care. Perhaps identifying innovative successful programs that can be grown and duplicated throughout the world and then disseminating this information the world could become a better place for those not so fortunate to live in my community. Where you live should not determine if you live.