Cancer Navigation:
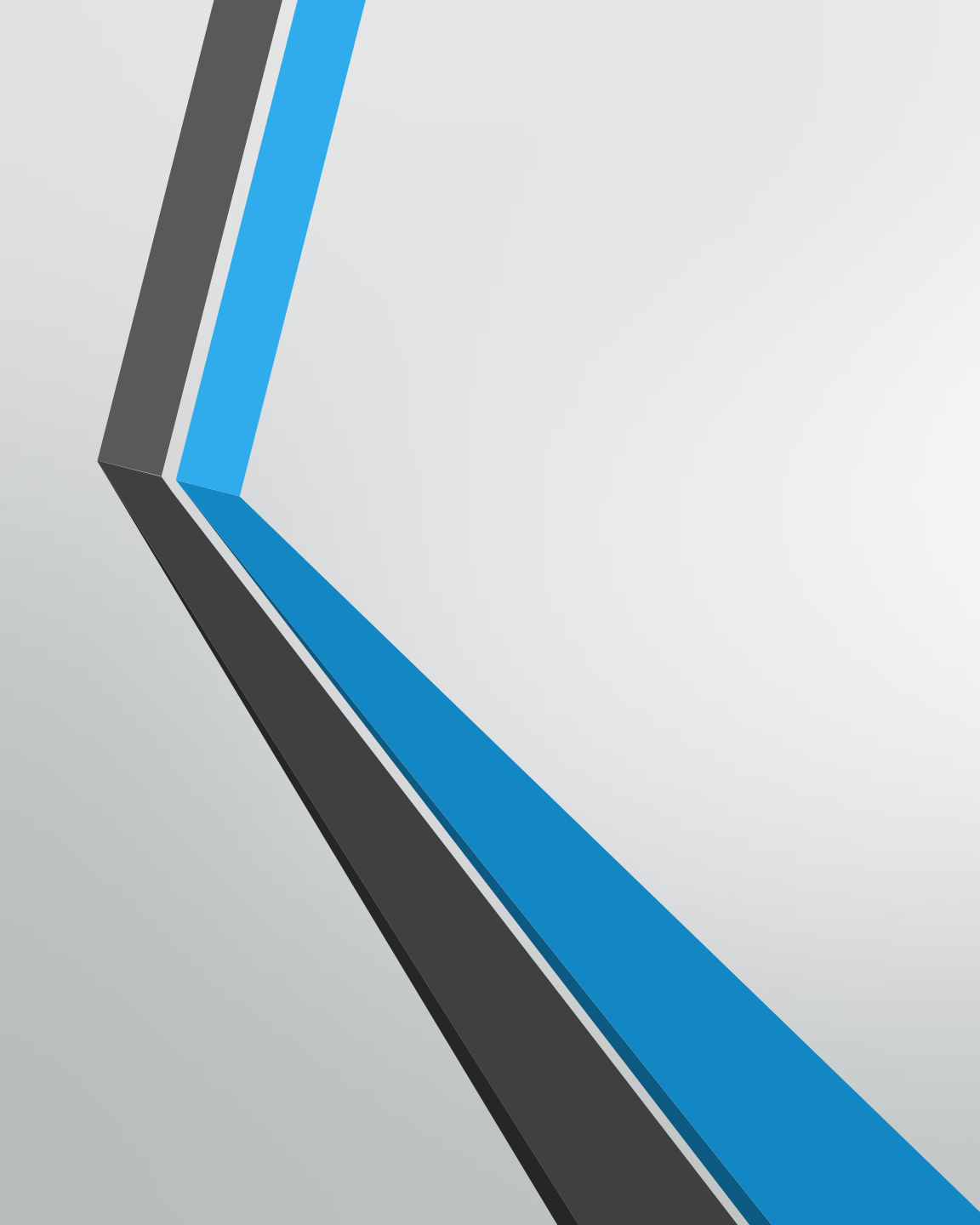
Navigating Cancer Patients

ACTION Project:

Access to Cancer Training, Information, Outreach and Navigation

Pre-Test

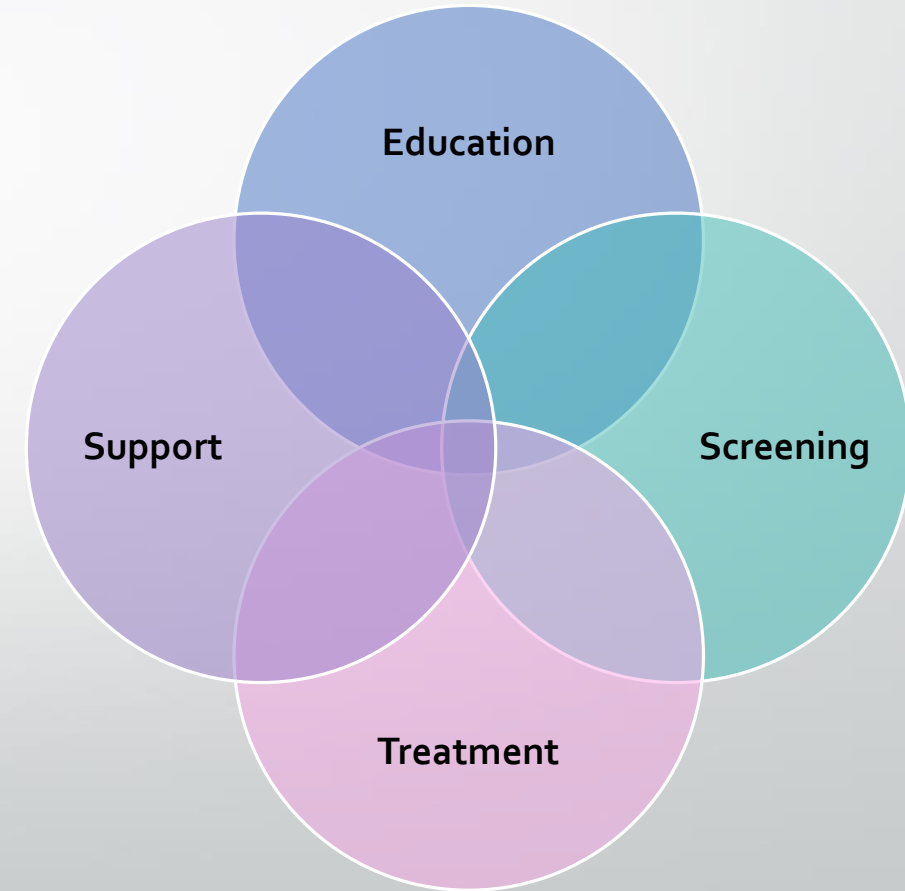**- ACTION Project:** Access to Cancer Training, Information, Outreach and Navigation

ACTION's purpose is to engage CHWs and partner organizations to deliver more effective cancer education on prevention, detection, treatment, and survivorship.

Learning Objectives

- CHWs will compare and contrast personal and system level barriers affecting cancer navigation.

- CHWs will discover the similarities between CHWs and Patient Navigators in the scope of cancer navigation.

- CHWs will gain practice in creating cancer navigation tools to use during their community outreach events.

- CHWs will identify the four phases of cancer navigation.

- CHWs will recognize the importance of communication skills in cancer navigation.

Outline

- Introduction
  - What is Cancer? and Cancer Types
  - Definition of Patient Navigation
  - Barriers to Cancer Navigation and CHW Roles in Addressing Barriers
  - Health Disparities
  - Definition of CHWs and Patient Navigators
  - Alternative Titles for Cancer Navigators
  - CHW Roles in Cancer Navigation
  - CHWs as Patients Advocates
- Communication Skills
- Four Phases of Cancer Navigation
  - The Education, Screening, Treatment, and Support (ESTS) Model
- References
- Questions/Thank You

Education

Screening

Support

Treatment

Ice-Breaker

- As you are wrapping the piece of yarn around your finger, please answer the questions below until you reach the end:
  - Name
  - Community area served
  - Why are you interested in cancer navigation?
  - What do you want to learn in this course?
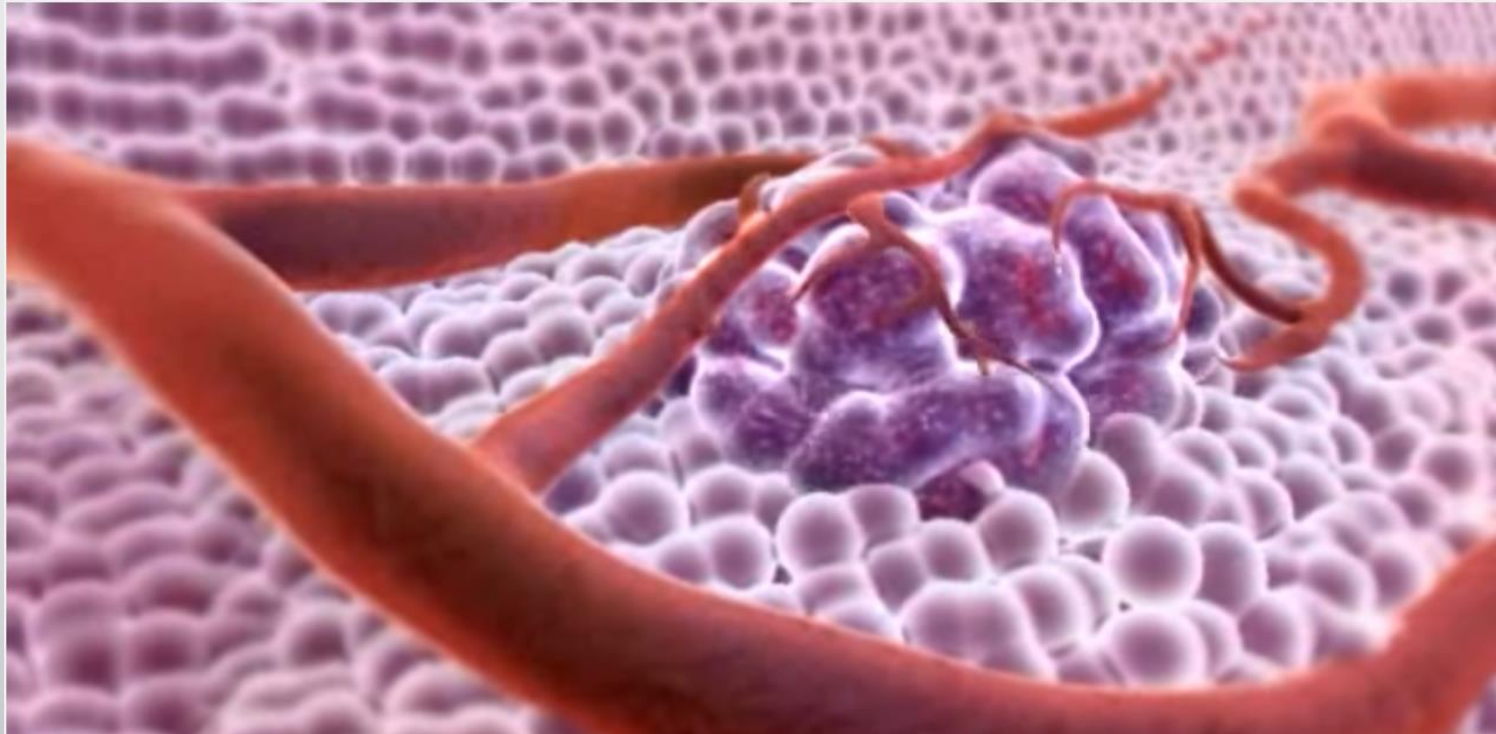 - How do you plan to use this information?

Introduction

What is Cancer?

- Group of more than 100 different diseases

- Develops almost anywhere in the body

- Cancer begins when cells start to grow out-of-control

- Cells may form a mass called a tumor

- Tumors may not always be cancer

- Malignant - Cancer

  - **Metastasis** - can grow and spread to other parts of the body

- Benign - Not Cancer

What is Cancer? Video

Link: https://youtu.be/LEpTTolebqo

Types of Cancer

- **Carcinomas** – begins in skin or the tissue that covers the surface of internal organs and glands (e.g. breast, lung, prostate, and colorectal cancer)

- **Sarcomas** – begins in tissues that support and connect the body (e.g. fat, bone, muscles, joints, tendons)

- **Leukemias** – cancer of the blood

- **Lymphomas** – begins in the lymphatic system
  - Lymphatic system – network of vessels and glands that help fight infection

Definition of Patient Navigation

- **Patient Navigation** – is the process of guiding the patients through the barriers resulting in better quality care for the patients, survivors and families.

http://www.pacificcancerfoundation.org/get-one-on-one-support/

Barriers to Cancer Navigation

Personal-Level Barriers

- Embarrassment
- Fear of finding cancer
- Fear of anticipation of pain
- Lack of transportation
- Child care
- Lack of knowledge of screening guidelines & recommended screening intervals
- Residency Status

- Gender
- Race-ethnicity
- Education
- Marital status
- Family history
- Religion
- Age
- Cultural issues

Barriers to Cancer Navigation

System-Level Barriers

- Out-of-pocket costs

- Lack of insurance

- Medical mistrust

- Poor referral rates

- Rural vs. Urban

- Language and cultural barriers

CHW Roles in Addressing Barriers

1. Serves as a liaison between communities and health care agencies

2. Provides guidance and social assistance to community residents

3. Enhances community residents' ability to effectively communicate with health care providers

4. Provides culturally and linguistically appropriate health or nutrition education

5. Advocates for individual and community health

6. Provides referral and follow-up services or otherwise coordinating care

7. Proactively identifies and may enroll eligible individuals in federal, state, local, private, or nonprofit health and human services programs

CHW Impact in Cancer Navigation

CHW Quotes:

"I helped a newly diagnosed cancer patient apply for coverage for breast and cervical cancer treatment services."

"Today I had a patient come in and say 'I truly appreciate everything you do and everything this facility does to help with getting this important test [colonoscopy].'"

"I had another patient last week thank me for being so kind. She was especially grateful for the prep visit, where everything was fully explained to her in advance."

Patient Quotes:

"I was referred to the program by my primary care physician. The staff was so kind and helpful. Thank you so much for helping me in my time of need."

Health Disparities in Patient Cancer Navigation

- **Cancer Health Disparities** – are detrimental differences that alter cancer incidence (new cases), cancer prevalence (all existing cases), and cancer mortality (deaths) that exist among specific population groups

- **Factors that Influence Health Disparities**:

  - Barriers to early detection & screening

  - Lack of medical coverage

  - Socioeconomic status

Defining CHWs and Patient Navigators

- **Community Health Worker** is an individual who connects others to needed health care and social services and is a trusted member of the community, with a close understanding of the ethnicity, language, socio-economic status, and life experiences of the community they serve

- **Cancer patient navigators** tend to focus on a single disease and help the patient from initial diagnosis all the way through the treatment process

CHWs and Patient Navigators are two words that are often used interchangeably.

Alternative Titles for Cancer Navigators

- **Different Titles for a CHW:**
  - Promotora/Promotor is a Spanish title that is well-known
- **Different Titles for a Patient Navigator:**

  - **Nurse Navigators —** professional nurses that tend to focus more on the clinical responsibilities

  - **Social Workers —** professionals with a Bachelors or a Master's degree in Social Work and a clinical license to work for patients in cancer treatment; tend to focus on non-clinical duties but have a strong emphasis in understanding psychosocial issues/appropriate mental and behavioral health interventions

  - **Patient Navigators —** multiple professional backgrounds; tend to focus more on non-clinical responsibilities like addressing the patients' barriers

  - **Peer Navigators —** volunteers who somehow relate to a cancer victim and/or live in the community they serve

Job responsibilities vary depending in which healthcare setting a CHW or Patient Navigator works.

CHW Roles in Cancer Navigation

- **Performance Objectives for Patient Navigators:**

  - **Patient Care** — facilitate a patient-focused care plan that is compassionate, adequate, effective for the treatment of cancer and the promotion of health

  - **Knowledge for Practice** — demonstrate a basic understanding of cancer, health care systems and how patients access care and services across the cancer continuum to support and assist patients

  - **Practice-Based Learning & Improvement** — improve patient navigation process through continual self-evaluation and quality improvement/promote & advance the profession

  - **Interpersonal and Communication Skills** — interpersonal and communication skills are key to establishing a mutual understanding with the patients, their families and health professionals in order to better relate pertinent information

  - **Interprofessional Collaboration** — involves partnering with different professionals to create a team to facilitate the patient's access to different services for both clinical and non-clinical services

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CHWs Can Serve as Patient Advocates

- **Definition of Advocacy** – is a key health promotion activity for overcoming major barriers to public health and occupational health.

- **Cancer Advocacy Objectives:**
  - Provide support to those living with cancer
  - Raise public awareness of the disease
  - Advance cancer research
  - Improve the quality of cancer care
  - Address legislative & regulatory issues that affect cancer care and research
  - Inform cancer patients with a residency status barrier about the few programs offering preventative cancer services

Communication Skills

Good Communication

KEY POINTS:

- Clear communication is very important between patients, their families, and the health care team involved with the patient

- Communication is important at different points during cancer care

- Patients with cancer have special communication needs

- Many patients and families want a lot of information and choose to make decisions about care

Good communication helps improve patients' well-being and quality of life.

Communication Team

- **Family Caregivers** – can be spouses, partners, children, relatives, or friends who help the patient with activities of daily living and health care needs at home

- **Health Care Team** – any medical or health personnel

- **Patient**

- **CHW**

- **Patient Navigator**

CHW Goals in Cancer Communication

GOALS:

- Create a trusting relationship with each member
- Aid by sharing information with each member
- Aid the patient and family by talking about emotional concerns
- Be an active listener

Communication During The Phases of Cancer

- Communicating about patient concerns and decision making is important during *all phases of treatment and supportive care* for cancer especially during certain important decisions.

- **IMPORTANT DECISION TIMES:**

  - When the patient is first diagnosed

  - Any time new decisions about treatment need to be made

  - After treatment, when discussing how well it worked

  - Whenever the goal of care changes

  - When the patient makes his or her wishes known about advance directives, such as a living will

CHWs Communicating with Cancer Patients

Diagnosed Cancer Patients – may experience fear and anxiety about treatments that are often exhausting, expensive, and complex

Effective Communication = Positive Results

- More satisfied with care and feel more in control

- More likely to follow through with treatment

- More informed

- More likely to take part in a clinical trial

- Better able to make the change from care that is given to treat the cancer to palliative care

  - **Palliative Care –** care given to improve the quality of life of patients who have a serious or life-threatening disease; goal is to prevent or treat the symptoms or side effects of the disease

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Cancer Patients' Role in Gathering Information

- Some patients and families may want to be very involved and make their own decisions about cancer care; others may want to leave decisions to the doctor.

- Some patients with advanced disease want less information about their condition.

- The need for information may change as the patient moves through diagnosis and treatment.

Patients and their families should let the health care team know how much information they want about the cancer and its treatment.

A Patient Centered vs. Doctor-Centered Health Professional

A Patient-Centered Professional

- Asks and recognizes patient concerns and uses them to build agenda

- Asks explicitly about the patient's thoughts

- Encourages patients to express their feelings

- Calls for patient involvement in decision-making

A Doctor-Centered Professional

- Sets agenda based on biomedical issues

- Assumes patient will volunteer thoughts if important

- Tends to focus the conversation away from the patient's feelings

- Regards decision-making as largely based on physician judgement

Culturally Competent Communication

Definition of Cultural Competency: Is the understanding of diverse attitudes, beliefs, behaviors, practices, and communication patterns attributable to a variety of factors

- Cultural factors influence cancer survival rates and patient/family quality of life.

- Learn about the cultural groups most frequently treated at your institution.

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Cultural History Check

- **B** – Beliefs and Values (that influence perceptions of illness)
- **A** – Ambience (living situation and family structure)
- **L** – Language and Health Literacy (role of interpreters, accuracy of translation, metaphoric meanings)
- **A** – Affiliations (community ties, religious and spiritual beliefs)
- **N** – Network (social support system)
- **C** – Challenges (cancer-related risks of home, work and life conditions)
- **E** – Economics (socioeconomic status and community resources)

Barriers Affecting Communication

- Age
- Socioeconomic Status
- Influence of Culture/Ethnicity/Language
- The Patient's Family
- Other Communication Barriers

Examples of Problems with Communication

- Patient does not fully understand all the facts about treatment.

- Medical information is not given in a way the patient can understand.

- Patient believes the doctor will tell them the important facts about treatment and doesn't ask questions.

- Patient is afraid to ask too many questions for fear of knowing the answer.

- Patient is afraid to take too much of the doctor's time and doesn't ask questions during the clinic visit.

Types of Learners

What Type of Learner are YOU?

Identifying Your Learning Type Questionnaire

Identifying Your Learning Type

Directions: Take the quiz to help identify your own learning style.

Question 1

When you study for a test, would you rather

- **a)** read notes, read headings in a book, and look at diagrams and illustrations
- **b)** have someone ask you questions, or repeat facts silently to yourself
- **c)** write things out on index cards and make models or diagrams

Question 2

Which of these do you do when you listen to music?

- **a)** daydream (see things that go with the music)
- **b)** hum along
- **c)** move with the music, tap your foot, etc.

Question 3

When you work at solving a problem do you

- **a)** make a list, organize the steps, and check them off as they are done

- **b)** make a few phone calls and talk to friends or experts

- **c)** make a model of the problem or walk through all the steps in your mind

Question 4

When you read for fun, do you prefer

- **a)** a travel book with a lot of pictures in it

- **b)** a mystery book with a lot of conversation in it

- **c)** a book where you answer questions and solve problems

Question 5

To learn how a computer works, would you rather

- **a)** watch a movie about it
- **b)** listen to someone explain it
- **c)** take the computer apart and try to figure it out for yourself

Question 6

You have just entered a science museum, what will you do first?

- **a)** look around and find a map showing the locations of the various exhibits
- **b)** talk to a museum guide and ask about exhibits
- **c)** go into the first exhibit that looks interesting, and read directions later

Question 7

What kind of restaurant would you rather not go to?

- **a)** one with the lights too bright

- **b)** one with the music too loud

- **c)** one with uncomfortable chairs

Question 8

Would you rather go to

- **a)** an art class

- **b)** a music class

- **c)** an exercise class

Question 9

Which are you most likely to do when you are happy?

- **a)** grin
- **b)** shout with joy
- **c)** jump for joy

Question 10

If you were at a party, what would you be most likely to remember the next day?

- **a)** the faces of the people there, but not the names
- **b)** the names but not the faces
- **c)** the things you did and said while you were there

Question 11

When you see the word "d - o - g", what do you do first?

- **a)** think of a picture of a particular dog
- **b)** say the word "dog" to yourself silently
- **c)** sense the feeling of being with a dog (petting it, running with it, etc.)

Question 12

When you tell a story, would you rather

- **a)** write it
- **b)** tell it out loud
- **c)** act it out

Question 13

What is most distracting for you when you are trying to concentrate?

- **a)** visual distractions
- **b)** noises
- **c)** other sensations like, hunger, tight shoes, or worry

Question 14

What are you most likely to do when you are angry?

- **a)** scowl
- **b)** shout or "blow up"
- **c)** stomp off and slam doors

Question 15

When you aren't sure how to spell a word, which of these are you most likely to do?

- **a)** write it out to see if it looks right

- **b)** sound it out

- **c)** write it out to see if it feels right

Question 16

Which are you most likely to do when standing in a long line at the movies?

- **a)** look at posters advertising other movies

- **b)** talk to the person next to you

- **c)** tap your foot or move around in some other way

Let's look at your results

Visual Learner

Did you answer mostly "A" to the questions? If so, you might also:

- ☐ Take numerous detailed notes
- ☐ Tend to sit in the front of class
- ☐ Usually neat and clean
- ☐ Often close your eyes to visualize or remember something
- ☐ Find something to watch if you are bored
- ☐ Benefit from illustrations and presentations that use color
- ☐ Are attracted to written or spoken language rich in imagery
- ☐ Prefer stimuli to be isolated from auditory and visual distractions
- ☐ Find passive surroundings ideal

Auditory Learner

Did you answer mostly "B" to the questions? If so, you might also:

☐ Sit where you can hear but needn't pay attention to what is happening in front

☐ Not coordinate colors or clothes, but can explain what you are wearing and why

☐ Hum or talk to yourself or others when bored

☐ Acquire knowledge by reading aloud

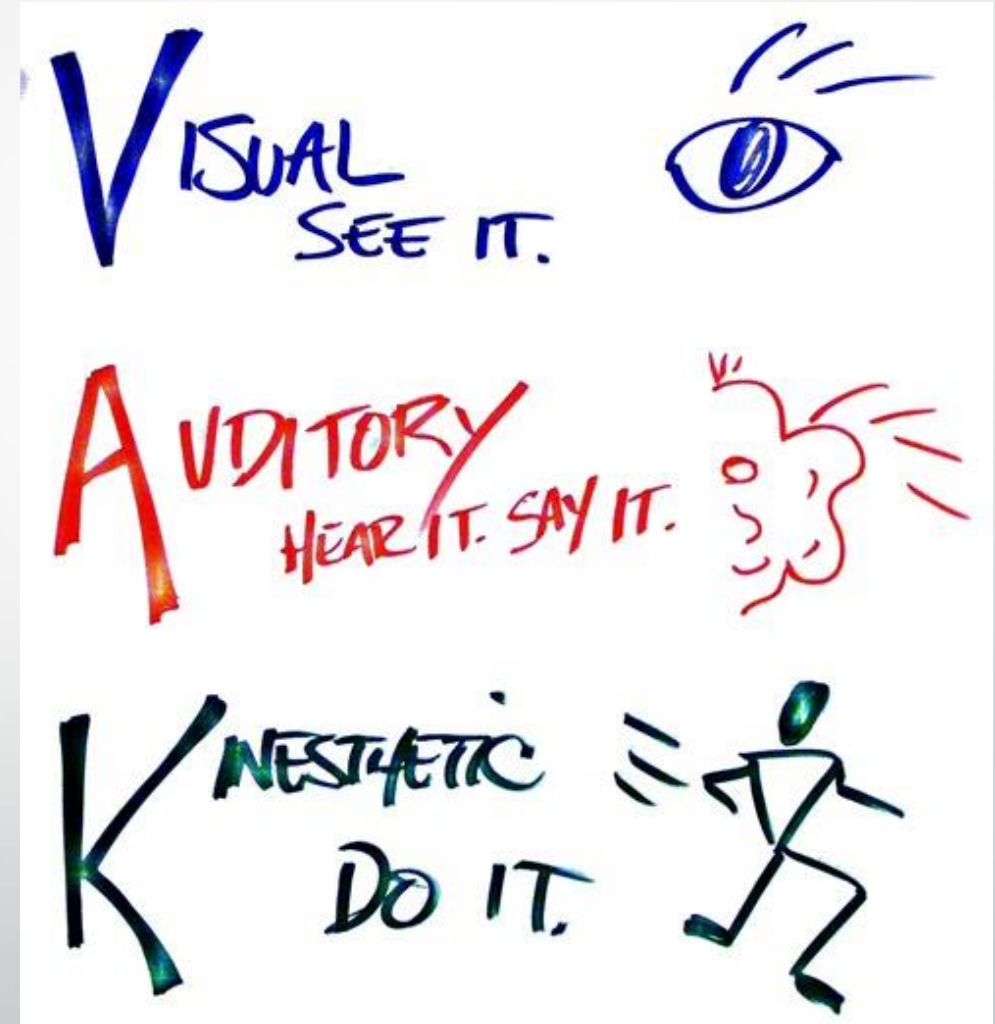☐ Remember by verbalizing lessons to yourself (if they don't, you might have difficulty reading maps or diagrams or handling conceptual assignments like mathematics)

Tactile/Kinesthetic Learner

Did you answer mostly "C" to the questions? If so, you might also:

☐ Need to be active and take frequent breaks

☐ Speak with your hands and with gestures

☐ Rely on what you can directly experience or perform

☐ Enjoy activities such as cooking, construction, engineering, and art

☐ Enjoy field trips and tasks that involve manipulating materials

☐ Be uncomfortable in classrooms where you lack opportunities for hands-on experience

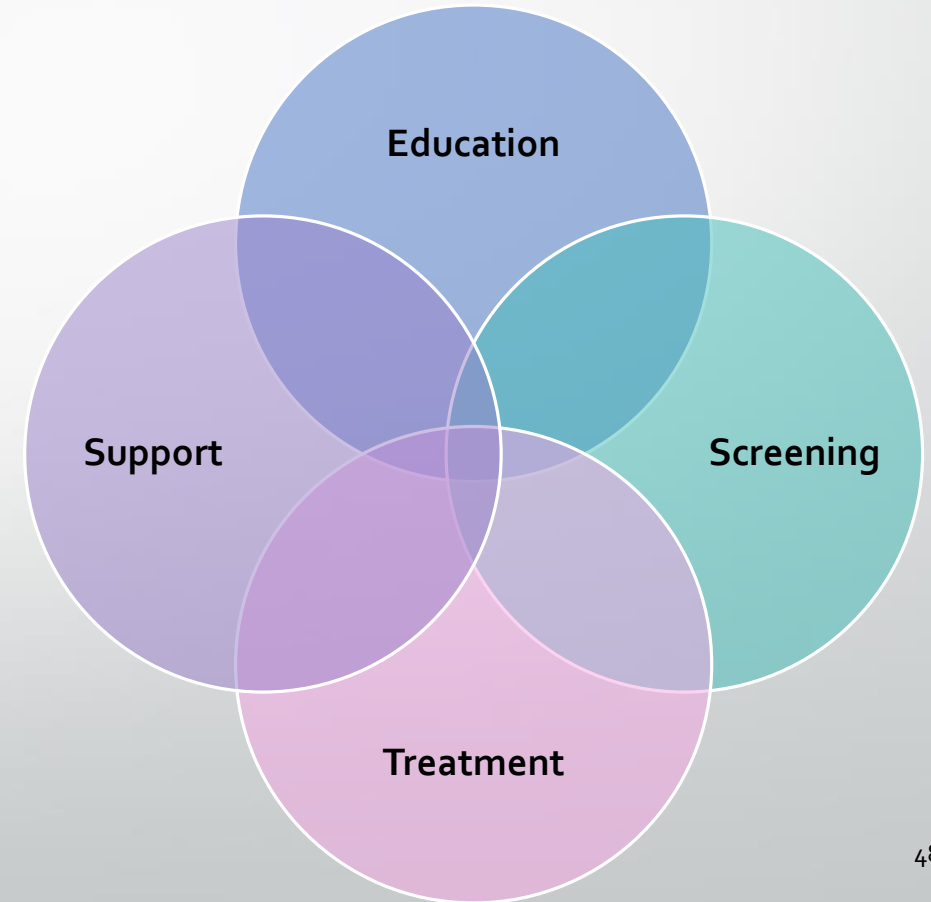☐ Communicate by touching and appreciate physically expressed encouragement, such as a pat on the back
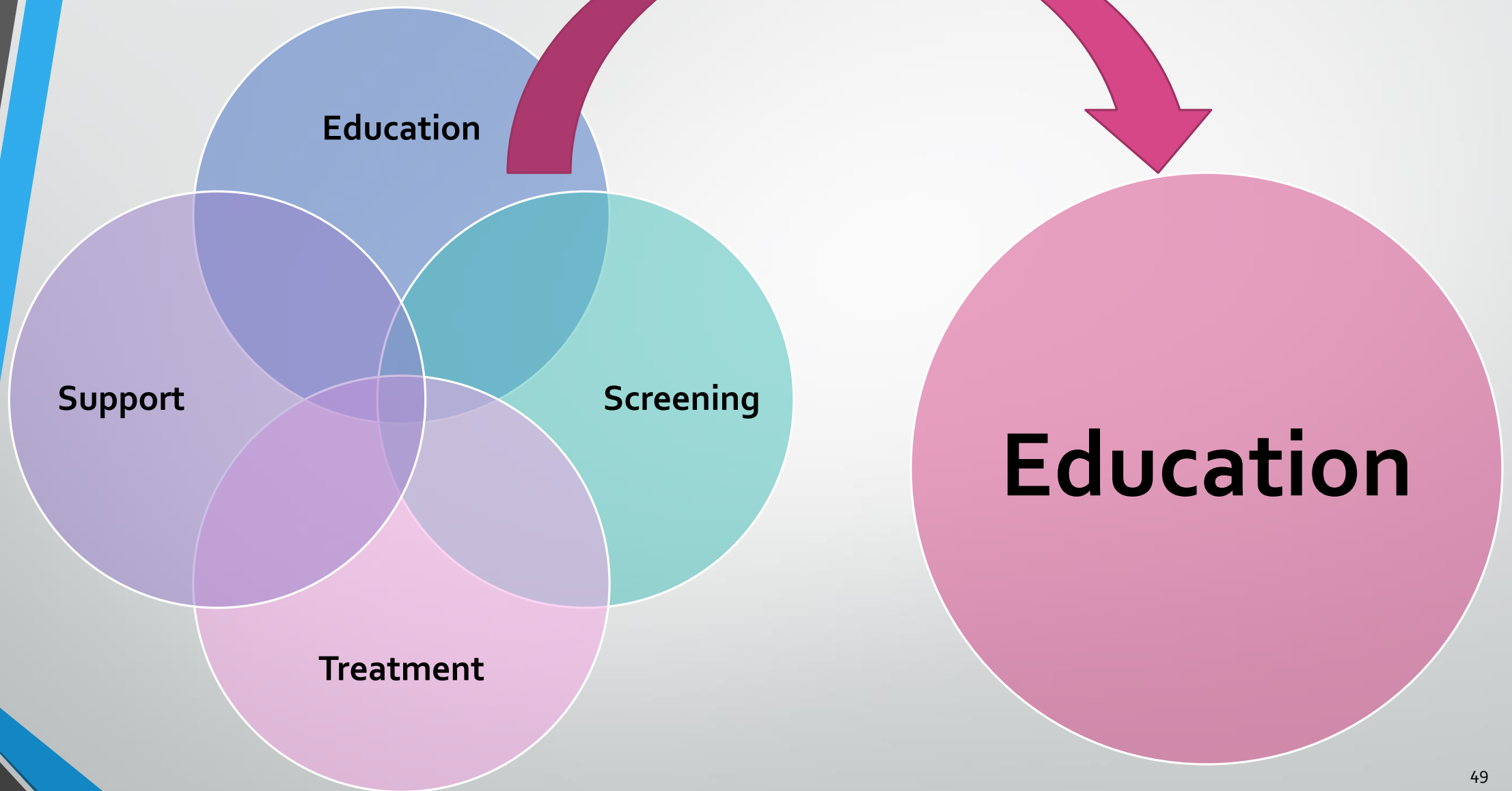
Types of Learners

☐ Visual

☐ Auditory

☐ Tactile/
Kinesthetic

Four Phases of Cancer Navigation

- ESTS Model

Education: The Professional

- **Professional:** Before helping the patient, they have to be knowledgeable and trained about the specific disease

  Examples of affiliated professionals:

  Physicians, Nurses, Social Workers, CHWs/Patient Navigators

  Oncologist – a cancer doctor

- Doctors require a college degree and medical school as well as certification

- Nurses can have a diploma or college degree and require state certification

- Social Workers require a college degree and state certification

- CHWs require certification in the state of Texas but not in other states

- Patient Navigators — currently there is no mandated state certification

- **ASK patients:** What can you tell me about the procedure before we even begin?

Education: The Patient

- **Patient:** Patient has to be educated on the importance of adhering to cancer guidelines

- Many patients are fearful of the cancer screening procedures because of lack of knowledge

- Navigation services—help patients understand their care options, make informed decisions and navigate exceedingly complex systems

Patient Questions to Ask the Doctor

1. What tests would you recommend for me?

2. How do I prepare?

3. Who will do the exam?

4. What is involved in the process?

5. Will it hurt?

6. When will I get results?

7. Do I need anyone with me?

CHW Considerations of Costs of Cancer Care

- Cancer diagnoses can be expensive

- Often a big source of stress and anxiety for cancer patients and their families

- Unplanned costs can be a barrier for following or completing cancer treatment plan putting health at risk and may lead to higher costs in the future

Understanding the Costs

- Personal costs depend on several factors:

  - Type of cancer treatment

  - How long patient needs to be treated

  - Where will patient be treated

  - Health insurance coverage

  - Supplemental insurance

- Medical costs (e.g. doctor appointments, cancer treatment, medication)

- Other costs (e.g. transportation and travel, family and living expenses, caregiving, at-home care, long-term care, employment, legal, and financial issues)

Cancer and Health Insurance

- Patient Protection and Affordable Care Act – March 2010
  - Law affects both access to and cost of cancer care
    - Private health plans are not allowed to place a lifetime limit (called a cap) on the dollar value of a person's coverage.
    - The law bans new plans and existing group plans from charging annual dollar limits on most covered benefits.
    - Insurers cannot deny coverage for pre-existing conditions, unless they are grandfathered individual health plans.
    - In the individual and small group market, the law eliminates the ability of insurance companies to charge higher rates because a patient is male or female or has a specific health condition.

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Cancer and Health Insurance

- People with no health insurance

  - Exempted from the health insurance requirement due to:

    - Financial hardship

    - Religious objections

    - Member of a federally recognized tribe or eligible for services through an Indian Health Services provider

    - Uninsured for no more than two months

    - In jail

    - Lowest cost plan option is more than 8.05% of person's income

    - Income below the tax filing threshold

    - Residency status

  - Buy insurance from the health insurance marketplace (insurance exchanges)

    - Premium and cost-sharing credits available to those earning up to 400% of the federal poverty level

Cancer and Health Insurance

- Removal of co-pays for **preventive services** by private health insurance plans

  - Recommended by [U.S. Preventive Services Task Force](#) (USPSTF)

  - Services include but not limited to:

    - Colorectal cancer screening tests - between ages of 50 and 75

    - Mammograms - women over 40 every one to two years

    - Breast cancer services - discussion of chemoprevention, referral to genetic counseling

      - Covered by specific health plans for high risk clients only

    - Cervical cancer screening tests - regular Pap smear test and HPV vaccine

    - Tobacco cessation interventions - counseling, some medication types

  - Medicare-covered preventive services with a grade of "A" or "B"

CHWs Partnering for Education

- **Educational/Community Partnerships:** CHWs may establish funding partners, partnerships within communities, and CHW networks to educate about cancer

- **Examples:**
  - **Direct:**
    - Contributing to a grant proposal to receive financial support for community efforts (e.g. Cancer Prevention and Research Institute of Texas)
    - Performing community outreach at local food pantries, ministries, health fairs, or health events (e.g. Relay for Life, word of mouth)
    - Referring to national cancer organizations (e.g. American Cancer Society)
  - **Indirect:** Social media, newspaper, radio, TV advertisements

Questionnaire Activity:

Myths & Facts about Cancer

MYTH OR FACT

Cancer is contagious.

Answer: Cancer is NOT contagious.

- Viruses that cause some cancers can be spread from person to person.

- However, cancers they cause cannot be spread.

  - For example,

    - Certain types of HPV – cause cervical, anal, and some kinds of neck and head cancers

MYTH OR FACT

If you have a family history of cancer, you will get it too.

ANSWER: Family history of cancer increases risk of developing the disease, but NOT a complete prediction.

- Estimated 4 out of 10 cancers can be prevented by:
  - Healthy eating habits
  - Maintaining a healthy weight
  - Exercising
  - Limiting alcoholic beverages
  - Avoiding tobacco products
- Certain inherited cancer genes put person at high risk for cancer, but doctor may recommend medications or surgery to reduce the chance that cancer will develop.

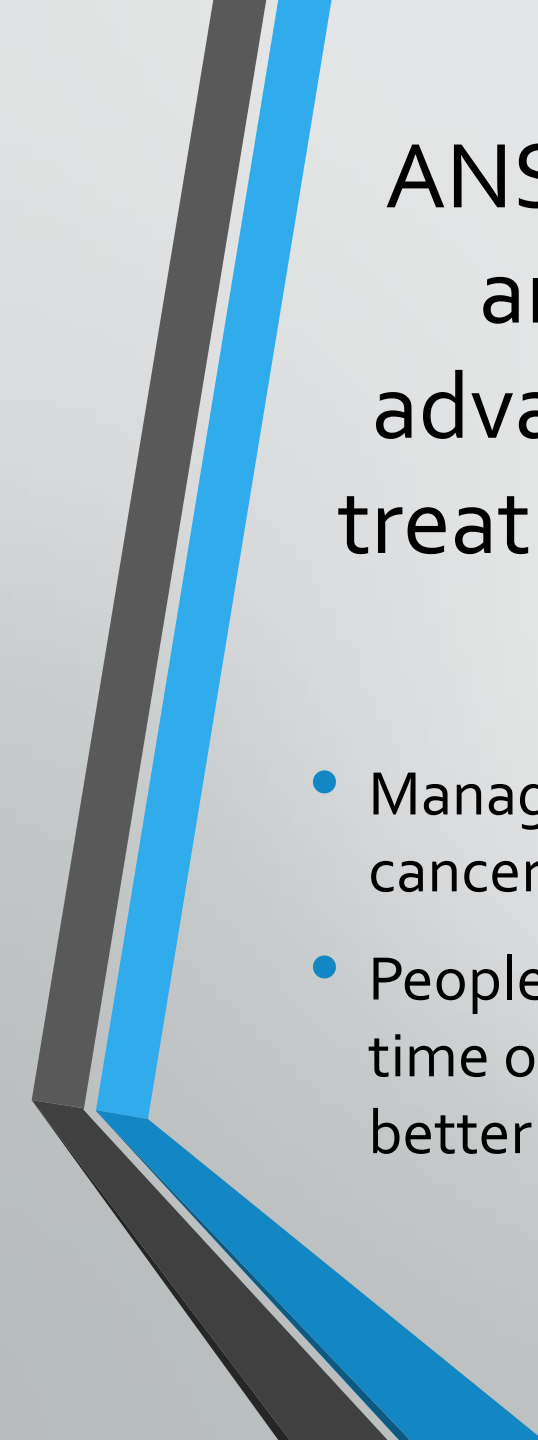# MYTH OR FACT

Cancer thrives on sugar.

ANSWER: There is NO conclusive evidence that proves eating sugar will make cancer grow and spread more quickly.

- All body cells, both healthy and cancer cells, depend on sugar to grow and function.

- Doesn't mean patient should eat a high-sugar diet

- Consuming a lot of calories from sugar has been linked to obesity, diabetes, and weight gain, which increase risk of developing cancer and other health problems.

MYTH OR FACT

Cancer treatment is usually worse than the disease.

ANSWER: Cancer treatments can cause unpleasant and sometimes serious side effects, but recent advances have resulted in many drugs and radiation treatments that are much better tolerated than in the past.

- Managing side effects, also called palliative care, remains an important part of cancer care.

- People receiving both treatment for cancer and to ease side effects at the same time often have less severe symptoms, more satisfied with treatment, and better quality of life.
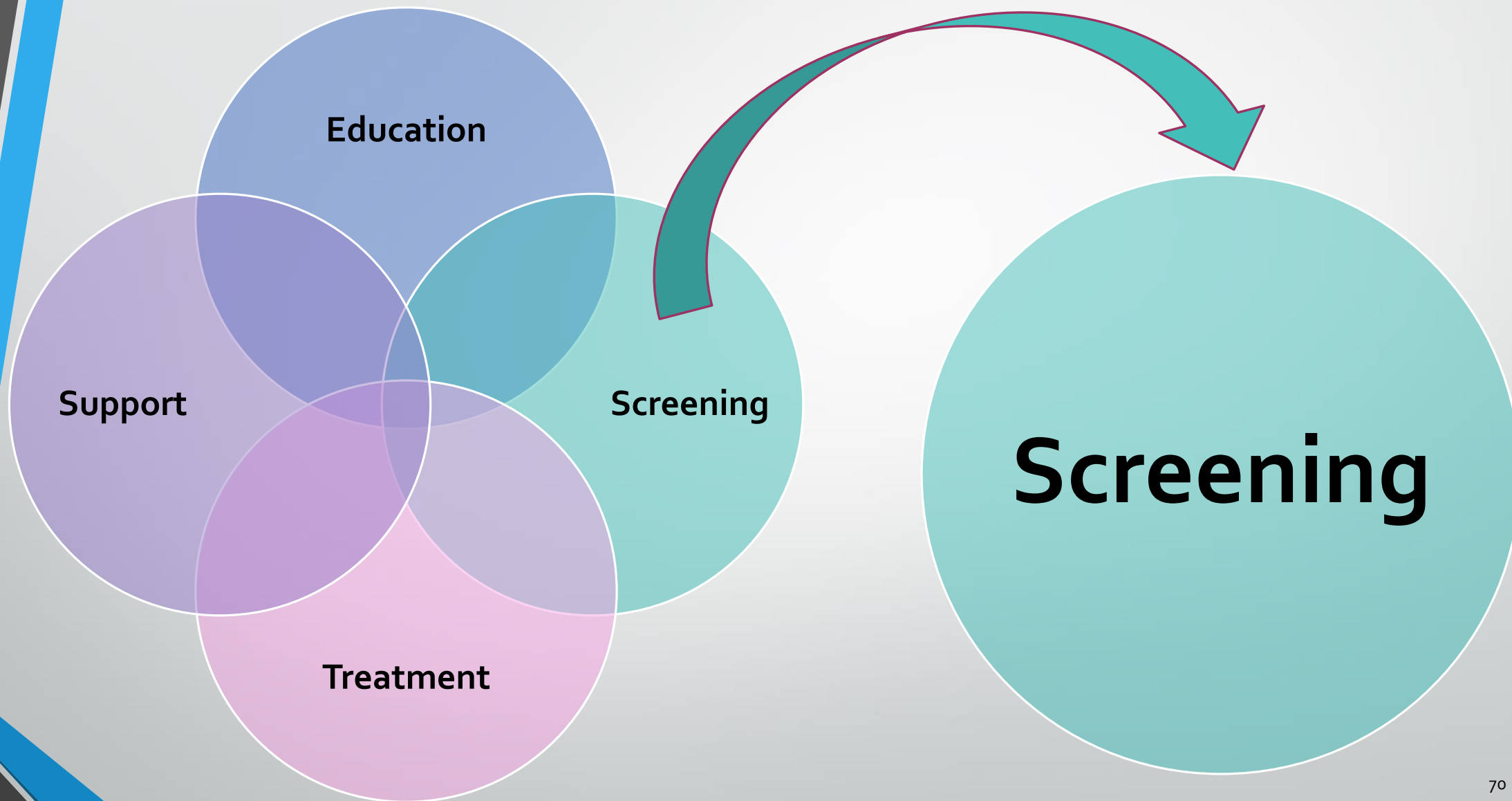
Resources/Tools

- Cancer Terms: Cancer Basics - http://www.cancer.net/navigating-cancer-care/cancer-basics/cancer-terms-cancer-basics

- Cancer Terms: Treatment - http://www.cancer.net/navigating-cancer-care/cancer-basics/cancer-terms-treatment

- Cancer Terms: After Treatment - http://www.cancer.net/navigating-cancer-care/cancer-basics/cancer-terms-after-treatment

- Cancer Types - http://www.cancer.gov/types

- Medical Illustrations Gallery - http://www.cancer.net/navigating-cancer-care/cancer-basics/medical-illustrations-gallery

Education: Group Activity

- Divide into respective Learner Type group as derived by the previous questionnaire activity
  - Group A: Visual
  - Group B: Auditory
  - Group C: Tactile/Kinesthetic
- Please refer to Handout: Types of Learners and read description of your assigned Learner type
- As a group, create an **education** tool about Cancer and/or a type of Cancer of your choice from the Handout: Types of Cancer
- Developed tool must be tailored to your Learner type
- Present your product with rest of the class

    Products may be used in your community when participating in cancer navigation.

What is Cancer Screening?

KEY POINTS:

- Looking for cancer before symptoms begin
  - Early detection makes cancer easier to treat or cure
  - Screening doesn't always mean that person has cancer
- Screening tests vary
  - Screening tests are not meant to diagnose cancer
- Risks may include:
  - Some tests cause serious issues
  - Possibility of false-positive tests – shows there is cancer when there really isn't
  - Possibility of false-negative tests – shows there is no cancer when there really is
  - *Finding the cancer may not improve the person's health or help the person live longer*
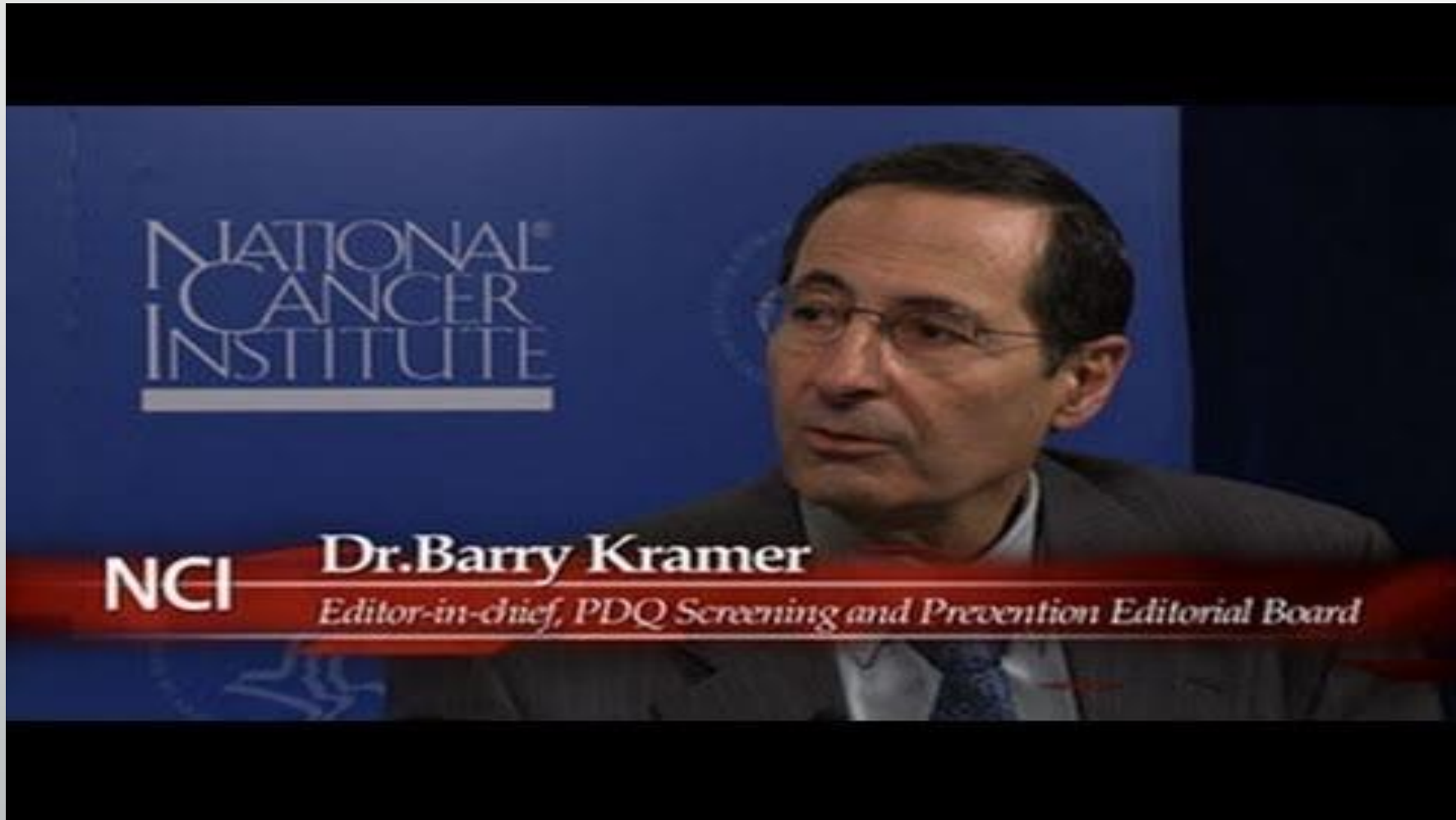
Types of Screening Tests

- Physical exam and history

- Laboratory tests

- Imaging procedures

- Genetic testing

In order to make an informed decision, ask your doctor what the benefits and risks are for each test.

Benefits of Screening

- Helpful in detecting cancers early and increasing survival

- Number of cancer deaths is lower today compared to the past
  - However, not always clear if due to early cancer detection from screening or increased effectiveness of cancer treatments

- Lower number of people who develop disease

Cancer Screening Video

Link: https://youtu.be/CXxAOI7SsuQ

CHWs Partnering to Promote Screening Partnerships

- **Community Clinical Partnerships:** CHWs may establish partnerships with the local clinics, pharmacies, resource centers, non-profit/national organizations, and CHW networks

- **Examples:**
  - **Direct:** Schedule a CHW to meet with the doctor(s) at the local clinics, pharmacist(s) at the local pharmacies, supervisor at the local resource center or a non-profit/national organization to coordinate services (e.g. organizations offering low- to no-cost preventative services)
  - **Indirect:** E-mailing or mailing information to local professionals

- Receiving referrals from a patients' Primary Care Provider makes keeping track of the patients' health information easier
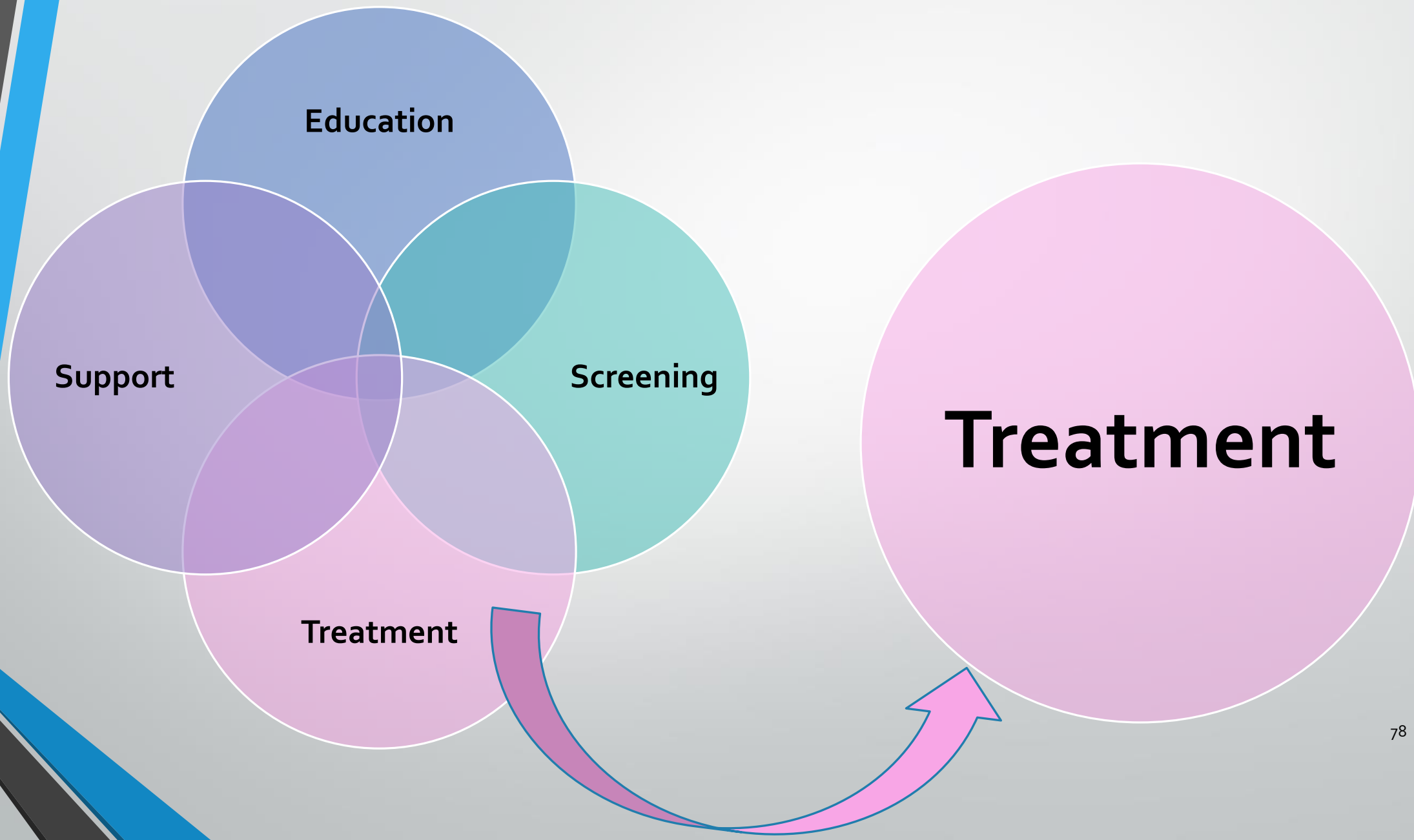
Resources/Tools

- Cancer Prevention and Early Detection – Medicare Coverage:
    - http://www.cancer.org/healthy/findcancerearly/cancerscreeningguidelines/medicare-coverage-for-cancer-prevention-and-early-detection
- Cancer Risk Check: https://www3.mdanderson.org/publicedu/prevention/index.cfm?pagename=index
- Types of Screening Tests:
    - http://www.cancer.net/navigating-cancer-care/prevention-and-healthy-living/cancer-screening
    - http://www.cdc.gov/cancer/dcpc/prevention/screening.htm

Screening: Group Activity

- Divide into respective Learner Type group as derived by the previous questionnaire activity
  - Group A: Visual
  - Group B: Auditory
  - Group C: Tactile/Kinesthetic
- Please refer to handout: Types of Learners and read description of your assigned Learner type
- As a group, create a **screening** tool about cancer and/or a type of cancer of your choice from the Handout: Types of Cancer
- Developed tool must be tailored to your Learner type
- Present your product with rest of the class

  Products may be used in your community when participating in cancer navigation.

Education

Support

Screening

Treatment

Treatment

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Making Decisions about Cancer Treatment

- Understand your diagnosis

- Know your options

- Understand the goals of treatment

- Ask about the side effects of each treatment option

- Consider the risks and benefits of each treatment option

- Get a second opinion

- Find help managing the cost of cancer care

- Consult guidelines or other decision-making tools

- Understand the role of statistics

Types of Cancer Treatment

- Multiple types of treatment
  - Depends on type of cancer patient has and how advanced it is
    - E.g. 1 treatment vs. combination of treatments
      - Surgery
      - Chemotherapy
      - Radiation therapy
      - Immunotherapy
      - Targeted therapy
      - Hormone therapy
      - Stem cell transplant
      - Precision medicine
- Clinical trials – research studies that involve people

Cancer Treatment Side Effects

- Side effects are complications that occur when treatment affects healthy tissues or organs

- Amount of side effects vary among patients

- Factors:

  - Type of treatment received

  - Amount or frequency of the treatment

  - Age

  - Other health conditions

Common Physical Side Effects (SEs)

- Anemia

- Appetite loss

- Constipation

- Hair loss (Alopeica)

- Nausea and Vomiting

- Sexual and Fertility Problems

- Sleep problems

- Memory or Concentration problems

- Urinary and Bladder problems

- Edema

Common Emotional Side Effects (SEs)

- Distress

- Anxiety

- Fear

- Depression

- Coping

- Attitude

What are Clinical Trials?

- Phases: 0–IV
  - Phase 0 – are very small trials that aims at deciding if a new agent should be tested in phase I
  - Phase I – aims to show that new treatment can be given safely to people
  - Phase II – provides more information about the safety of the treatment and how well it works
  - Phase III – tests treatment in a large group of people to determine how it will be used, often comparing it with a standard treatment
  - Phase IV – studies the long-term safety and effectiveness of the new treatment
- **DESIGNED TO:**
  - Prevent cancer
  - Find and diagnose cancer
  - Treat cancer
  - Manage symptoms of cancer or side effects from its treatment

Clinicians Raising Awareness of Cancer Trials Video

Link: https://youtu.be/cT_6nocLMgc

Why Are Clinical Trials Important?

- Trials are available for all stages of cancer
  - MYTH: only for people with advanced cancer and not responding to treatment
- Important to developing new methods to prevent, detect, treat cancer, or manage side effects that are safe, effective, and work better than current treatments
- Participant can leave study at any time for any personal or medical reason

Ask the doctor if a clinical trail is an option for the patient

Importance of Clinical Trials Video

Link: https://youtu.be/HuxA_ccCnUg

Clinical Trials and Health Insurance

- Patient Protection and Affordable Care Act – March 2010
  - People participating in clinical trials to treat cancer
    - Health Plans on or after January 1, 2014
      - Insurers not allowed to limit or drop coverage
    - Grandfathered health plans not required to comply

Complementary and Alternative Medicine (CAM)

- Definition: medical products and practices not part of standard medical care

  - Standard medical care
  - Complementary medicine
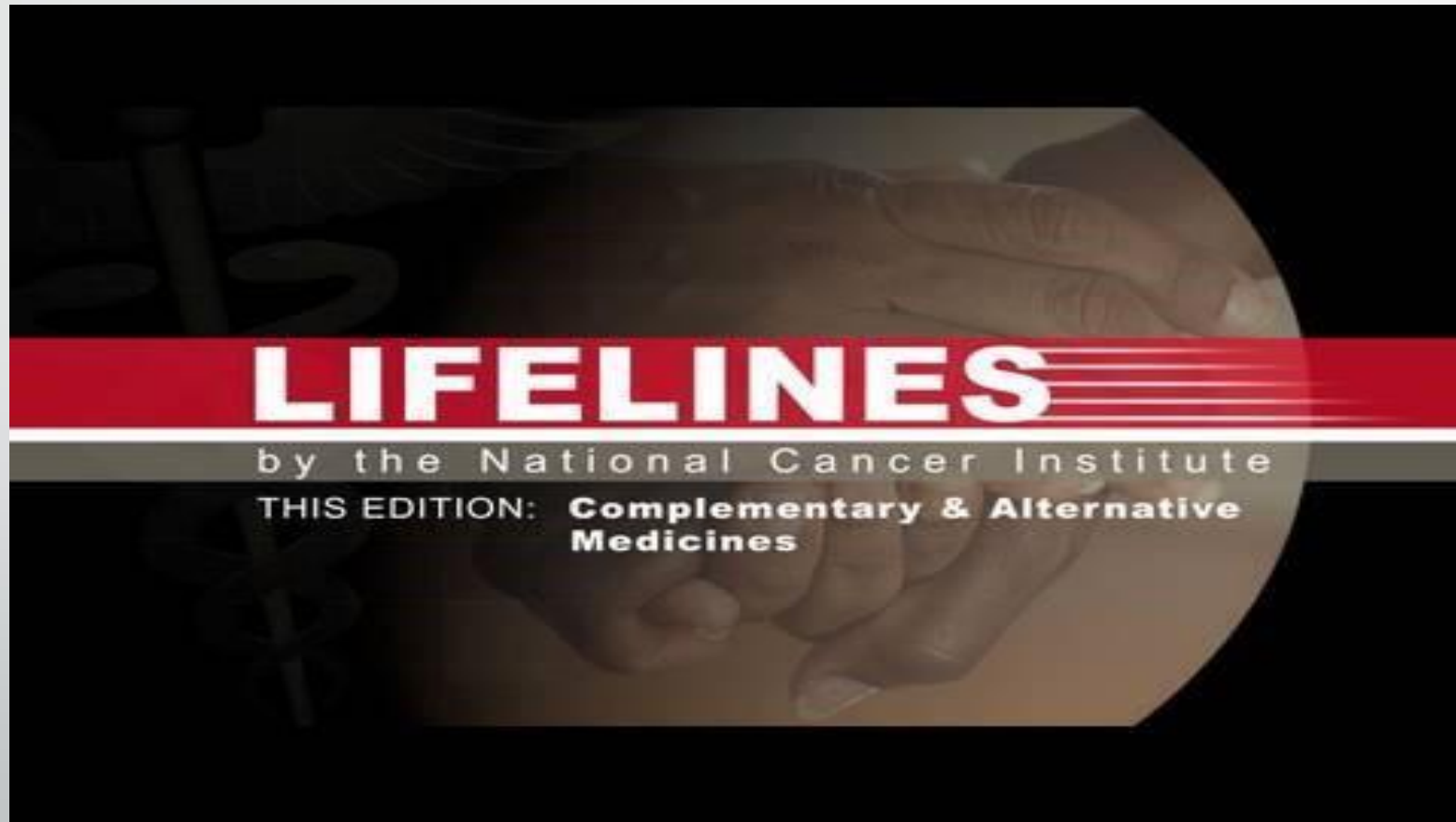 - Alternative medicine
  - Integrative medicine

Reasons Cancer Patients maybe Interested in CAM Methods

- May or may not relieve side effects of treatment without having to take more medication

- Some patients seek a less unpleasant treatment approach that might have fewer side effects

- Some patients prefer alternative theories of health and disease and alternative treatment

How safe is CAM?

- Some CAM approaches have been found to be safe and effective **WITH** physician knowledge and consent

- Others have been found to be ineffective or possibly harmful

- CAM therapies include wide variety of nutritional products and botanicals, known as "natural" products (i.e. dietary supplements, herbal supplements, and vitamins)
  - Although produced from nature, CAM therapies may affect how well other medicines work

What is CAM? Video

Link: https://youtu.be/zPgUiBPp9mY

CHWs Partnering for Treatment

- **Partnerships:** CHWs may establish clinical and funding partners to support cancer patients in finding and accessing treatment centers, and CHWs can assist by arranging logistics such as transportation and other needs like applying for Medicaid

- **Examples:**

  - **Direct:** Arranging transportation and day-care services, aiding in pre-eligibility for financial services, connecting with programs that offer low- to no-cost services (e.g. Texas C-STEP), and connecting cancer patients to resources for financial assistance (e.g. Medicaid for Breast and Cervical Cancer, their local hospital district, Patient Advocate Foundation and/or the ACA Marketplace)

  - **Indirect:** E-mailing or mailing information to local professionals
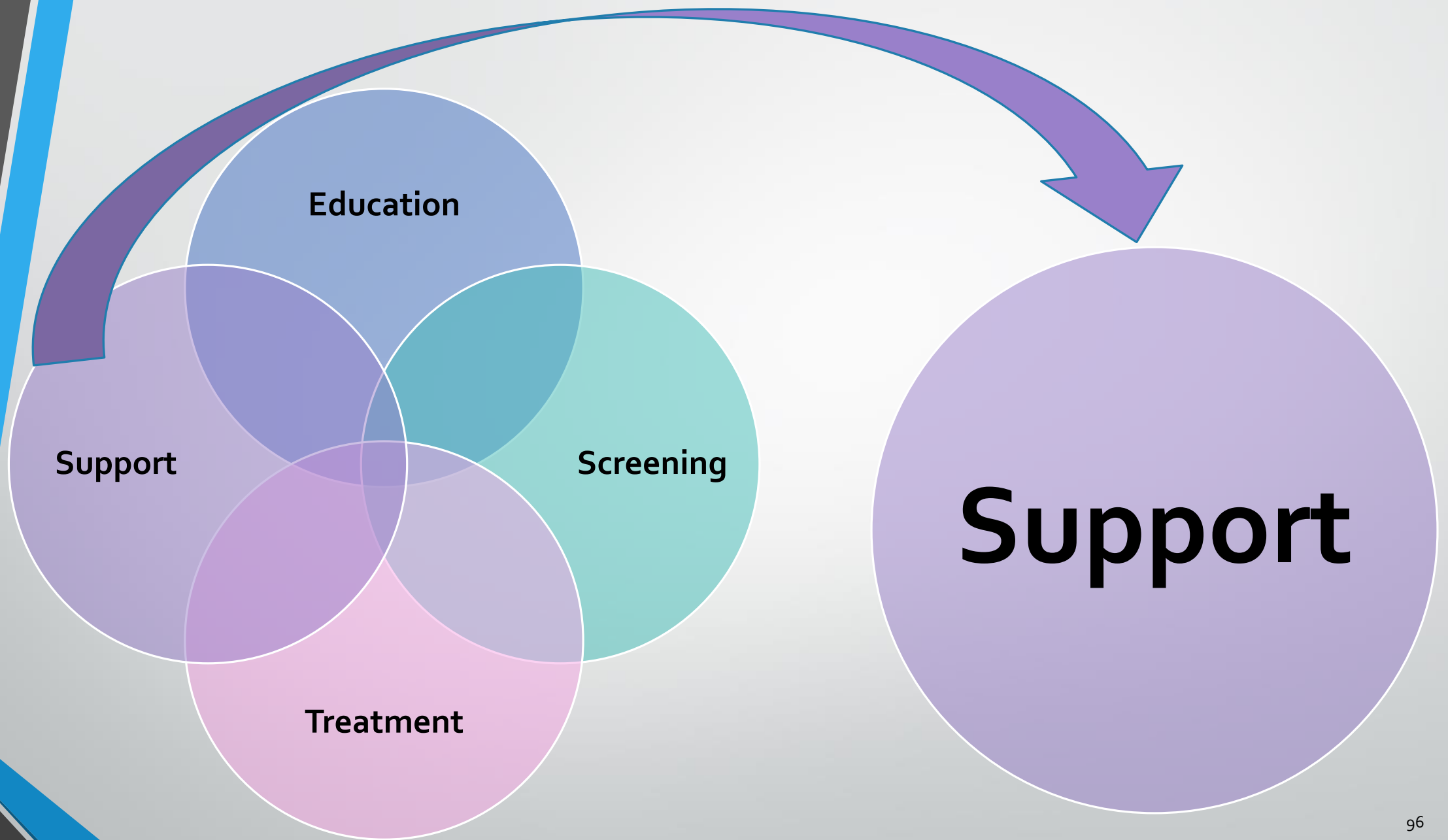
Resources/Tools

- Cancer Treatment Decision Tools and Resources: http://www.cancer.org/treatment/findingandpayingfortreatment/treatmentdecisiontoolsandworksheets/treatment-decision-tools-and-worksheets-landing

- Tools to Monitor Treatment: http://www.cancer.org/treatment/treatmentsandsideeffects/physicalsideeffects/toolstomonitortreatment/

- Clinical Trials Matching Service: http://www.cancer.org/treatment/treatmentsandsideeffects/clinicaltrials/app/clinical-trials-matching-service.aspx

- Clinical Trials Information for Patients and Caregivers: http://www.cancer.gov/about-cancer/treatment/clinical-trials

- Treatments and Side Effects: http://www.cancer.org/treatment/treatmentsandsideeffects/index

- Finding and Paying for Treatment: http://www.cancer.org/treatment/findingandpayingfortreatment/index

Treatment: Group Activity

- Divide into respective Learner Type group as derived by the previous questionnaire activity

  - Group A: Visual

  - Group B: Auditory

  - Group C: Tactile/Kinesthetic

- Please refer to Handout: Types of Learners and read description of your assigned Learner type

- As a group, create a **treatment** tool about Cancer and/or a type of Cancer of your choice from the Handout: Types of Cancer

- Developed tool must be tailored to your Learner type

- Present your product with rest of the class

  Products may be used in your community when participating in cancer navigation.

Education

Support

Screening

Treatment

Support

Support For Patient

Partnerships: Need to establish a strong support system from diagnosis all the way through the treatment

Support groups can help patients or their families

It's not easy living with cancer. You may have daily worries:

- Work
- Family
- Hospital stays
- Daily activities
- Medical costs
- Treatments
- Side effects

Possible Partnerships:

- Doctors
- Nurses
- Other members of medical team
- Counselor
- Social worker
- Family and friends
- Church
- Community and Support Centers
- CHWs

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Support For Family Caretakers

- A loved one's diagnosis has an impact on everyone involved.

- Caregiving can take an emotional and physical toll.

- Caregivers of a cancer patient need help and emotional support:

  - At diagnosis

  - During treatment at the hospital

  - During care in the home

  - After treatment ends

  - At the end of life

The life of a family caregiver changes in many ways when cancer is diagnosed.

Resources/Tools

- The following link provides a very detailed description of what you need to do as a cancer survivor *as well as a cancer patient.*

  - The guidebook contain several links to federal agencies & non-profit organizations where patients can seek support.

    - http://www.cancer.gov/publications/patient-education/life-after-treatment.pdf (English) pgs. 57-59 (2014)

    - https://pubs.cancer.gov/ncipl/detail.aspx?prodid=P015 (Spanish) pgs. 65-68 (2012)

- Find a cancer center by area, region, state, or name

  - http://www.cancer.gov/research/nci-role/cancer-centers/find

- Mobile Application for Cancer Management

  - http://www.cancer.net/navigating-cancer-care/managing-your-care/mobile-applications
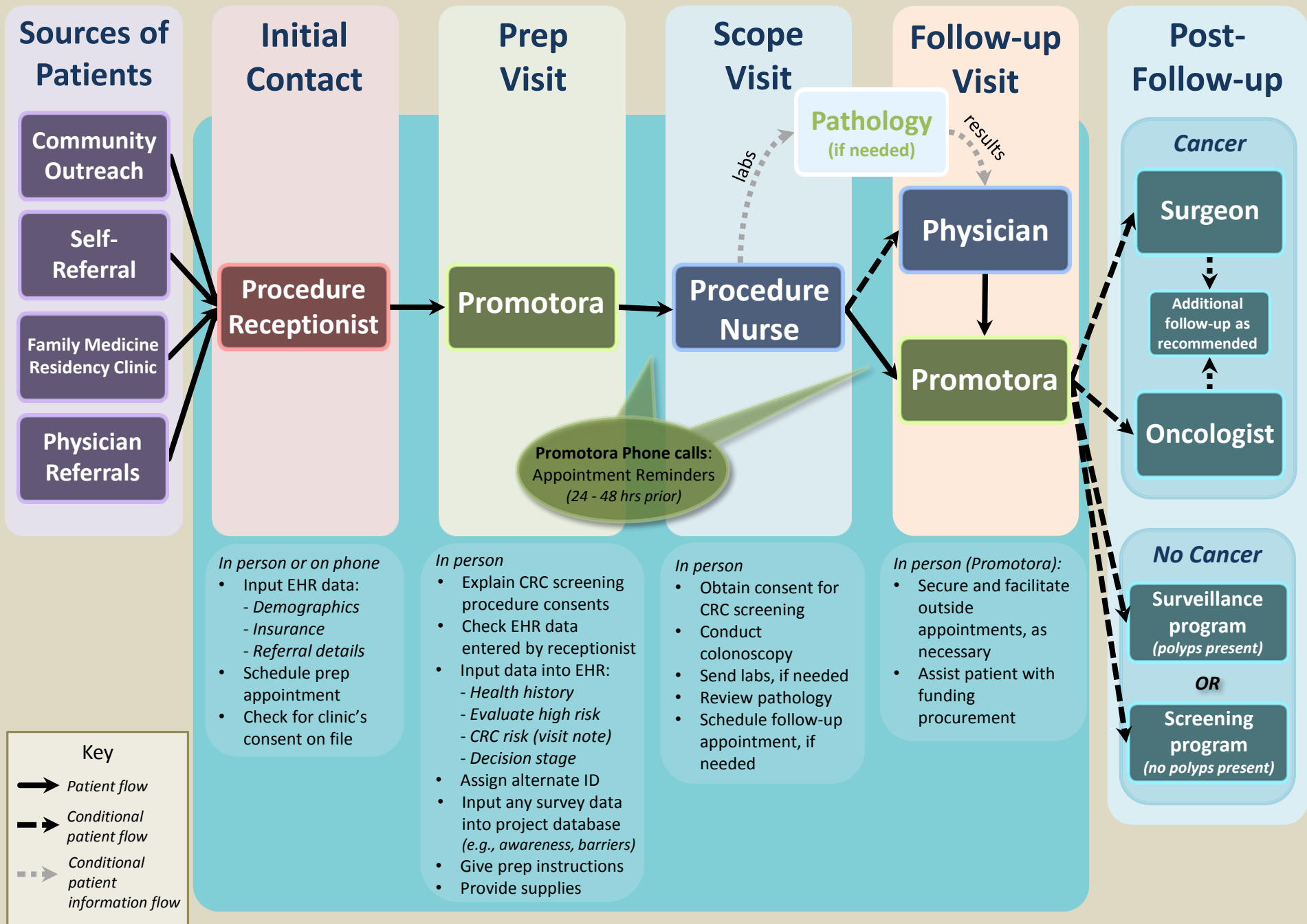
Support: Service Coordination Group Activity

- Resource List of Cancer Services Puzzle

- Present your product with rest of the class

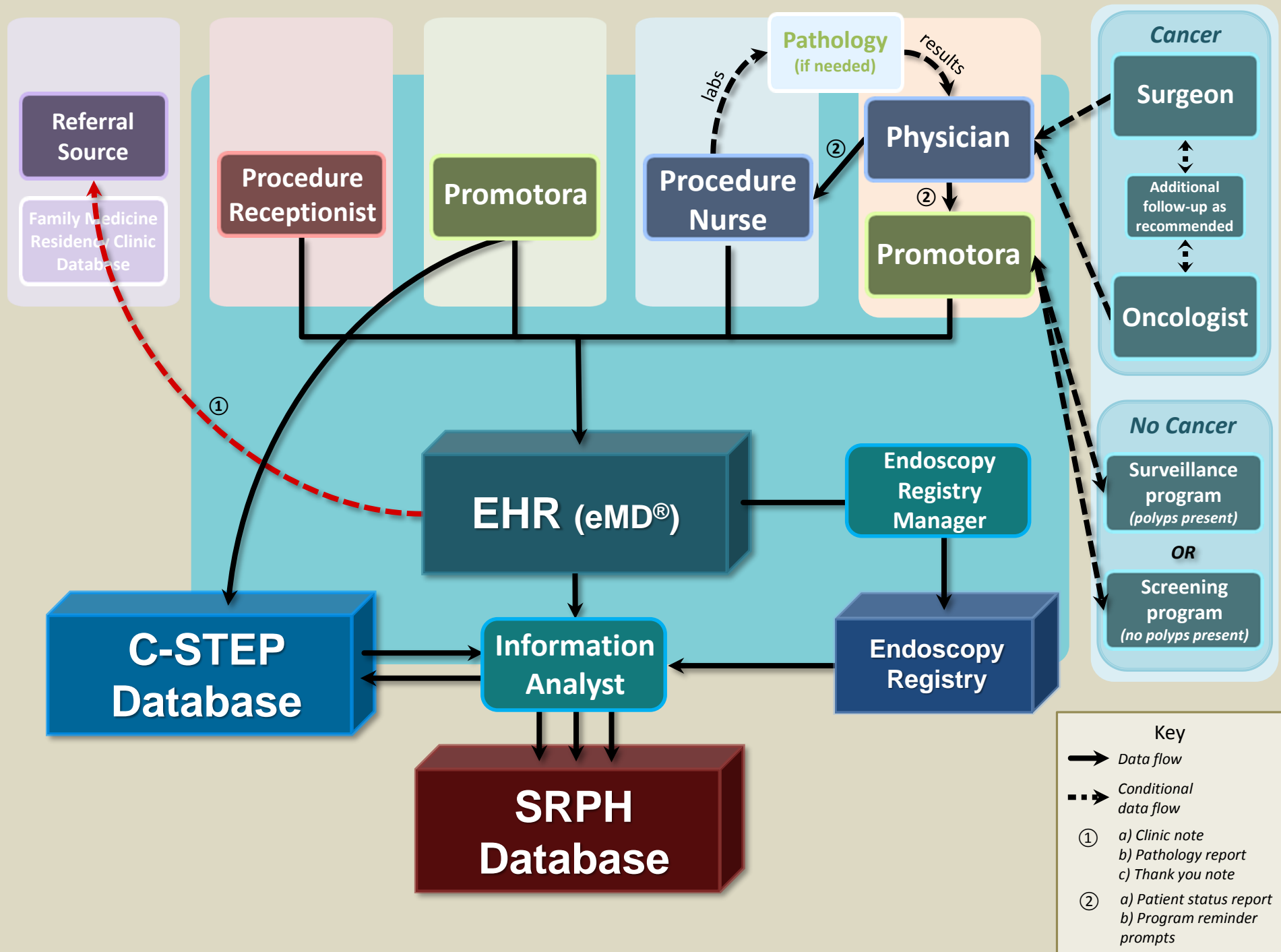*Products may be used in your community when participating in cancer navigation*

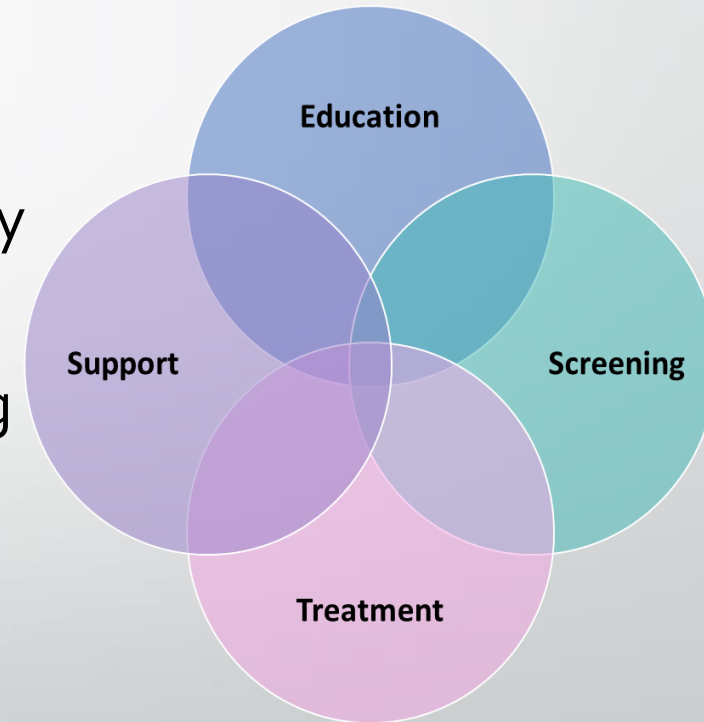# Example of Cancer Navigation: Patient Flow Schematic

Example of Cancer Navigation: Data Flow Schematic

Review

- Multiple personal-level and system-level barriers and health disparities exist, which impact access to cancer care.

- CHWs act as an intermediate between the patient, family caregivers, and the health care system.

- Good communication helps improve patients' well-being and quality of life.

- Remember, BALANCE!!!!!!

- The four phases of cancer navigation are Education, Screening, Treatment, and Support.

Education

Support

Screening

Treatment

Role-Play and Group Discussion: Case Studies

- Instructions
  - Divide the class into pairs
  - Refer to Handout: Case Studies
  - Each pair should choose a case study of their choice
  - Read and discuss discussion questions about your case study
  - Role-play within groups
  - Groups will be asked to volunteer to role-play for the rest of the class
  - Group discussion

References

- American Cancer Society, www.cancer.org/index

  Sociedad Americana del Cáncer, www.cancer.org/Espanol/cancer/

- Centers for Disease Control And Prevention, http://www.cdc.gov/cancer/index.htm

  Centros para el Control y la Prevención de Enfermedades

  http://www.cdc.gov/spanish/cancer/index.htm

- National Cancer Institute, National Institute of Health, www.Cancer.gov

  Instituto Nacional del Cáncer, www.cancer.gov/espanol/, 1-800-442-6237

- Willis, A., Hoffler, E., Villalobos, A., Pratt-Chapman, M. (2016). Advancing the Field of Cancer Patient Navigation: A Toolkit for Comprehensive Cancer Control Professionals. The George Washington University Cancer Institute. Washington, DC.

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- Ojinnaka, C. O., Choi, Y., Kum, H., & Bolin, J. N. (2015). Predictors of Colorectal Cancer Screening: Does Rurality Play a Role? *The Journal of Rural Health, 31*(3), 254-268. doi:10.1111/jrh.12104

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- http://www.cancer.gov/about-cancer/coping/adjusting-to-cancer/communication-pdq#section/_26
- http://www.cancer.gov/about-cancer/screening/patient-screening-overview-pdq
- http://www.cancer.gov/about-cancer/screening/patient-screening-overview-pdq#section/_31
- http://www.cancer.gov/about-cancer/treatment
- http://www.cancer.gov/about-cancer/treatment/types
- http://www.cancer.gov/about-cancer/treatment/side-effects
- http://www.cancer.gov/about-cancer/treatment/clinical-trials/what-are-trials
- http://www.cancer.gov/about-cancer/treatment/cam
- http://www.cancer.gov/publications/patient-education/life-after-treatment.pdf
- http://www.cancer.gov/about-cancer/coping/family-friends/family-caregivers-pdq#section/_7
- http://www.cancer.gov/about-cancer/advanced-cancer/care-choices/palliative-care-fact-sheet#q1

http://www.cancer.gov/about-cancer/treatment/clinical-trials/what-are-trials/phases

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- http://www.cancernetwork.com/oncology-journal/patient-physician-communication-oncology-what-does-evidence-show

- http://www.who.int/occupational_health/topics/workplace/en/index2.html

- https://www.mdanderson.org/education-and-research/resources-for-professionals/professional-educational-resources/i-care/ICAREguide_CultComp.pdf

- http://patientnavigatortraining.org/network/career/#

- http://cancersupportcenter.org/programs-activities/

- https://www.apha.org/apha-communities/member-sections/community-health-workers

- http://www.cancerresearchuk.org/about-cancer/causes-of-cancer/can-cancer-be-prevented

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- http://www.facingourrisk.org/understanding-brca-and-hboc/publications/newsletter/archives/2011fall/insurance-for-genetic-counseling.php

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- http://www.cancer.net/navigating-cancer-care/prevention-and-healthy-living/cancer-screening
- http://www.cancer.net/sites/cancer.net/files/asco_answers_clinical_trials.pdf
- http://www.cancer.net/navigating-cancer-care/how-cancer-treated/making-decisions-about-cancer-treatment

Questions

- Do you have any questions over the Cancer Navigation CEU?

https://muhc.ca/sites/default/files/micro/m-Questions/question.png

Post-Test

Thank You!!