Perceptions of Breast Cancer Navigation from Survivors and Oncologists

Maia Jacobs, BS, James Clawson, PhD, Elizabeth D. Mynatt, PhD
Georgia Institute of Technology, Atlanta, GA

Abstract

Cancer navigators provide patients with personalized educational, physical, and psychosocial support throughout their cancer journey. To better understand the value of navigation, we examine the perceptions that breast cancer survivors and medical oncologists hold towards cancer navigation. Our findings indicate that cancer navigators provide a support service not found elsewhere in the healthcare system, and reveal a need for cancer navigators to be included in future technological interventions aimed at improving the cancer care experience.

Introduction

Over 230,000 women in the United States are diagnosed with breast cancer annually. One strategy to improve the quality of care provided to breast cancer patients is the use of patient-centered care. Patient centered care places high emphasis on patient-provider communication with an overarching goal of engaging patients in the disease management process while taking into account both the physical and psychosocial needs of the patient.

We examine one such patient-centered profession known as cancer navigation. Cancer navigators provide individual support for cancer patients by offering support, guidance, and answering questions, with the responsibilities divided between service and nurse navigators. Service navigators are trained to help patients identify and overcome barriers that may hinder a patient’s ability to receive treatment (for example, distributing gas cards or teaching patients to apply for social security benefits when financial challenges are present). Nurse navigators work with patients to help provide information and answer any medical questions. Although cancer navigation programs have a strong focus on patient-centered care, cancer navigators are not currently considered primary stakeholders in the healthcare space. Further, navigators do not receive the necessary technological support to effectively communicate with patients, find critical resources for patients, or expand the navigation practice. The value placed on the navigators by the traditional healthcare stakeholders indicates a need for researchers to support them in future work.

Methods

For this project, we investigated the perceptions breast cancer survivors and providers held toward the local cancer navigation organization. We conducted interviews and focus groups in a rural community that included three cancer clinics and one cancer navigation organization consisting of five navigation professionals. During the study we met with six breast cancer survivors and two medical oncologists. Each of these conversations focused on the healthcare delivery processes currently in place in the community, specifically exploring how each of the different players interact with one another to deliver care. From these discussions we were able to determine the high regard each of these stakeholders place on cancer navigation.

Breast Cancer Survivors

Of the six breast cancer survivors interviewed, only one had utilized the cancer navigation services (the other five survivors had all experienced treatment for their cancer prior to the creation of the local navigation organization). She spoke about her cancer navigator with appreciation for providing emotional support to both herself as well as her family:

“It kind of made me feel a lot better about having to have surgery. She was also a breast cancer survivor, so she was able to relate her experience with mine. She was there during surgery and stayed with my family and checked up on me after.”

Many of the breast cancer survivors who did not have a cancer navigator also believed that the navigation program was a valuable resource. One of these survivors described the lack of emotional support she felt when going through her own breast cancer treatment:

“You were just told what to do... It was just a clinical environment, everything was very clinical, there was no personalization. She had the personalization [the patient with a navigator]. You’ve got to have the personal part.”

Another breast cancer survivor who underwent treatment prior to the existence of a local cancer navigation program expressed how important she thought individualized care could be for patients:
“When I went through it we didn’t have that, and that’s a real great asset for us, these cancer navigators. Because you get so much, you get somebody one on one, a nurse comes in and sits down and just starts focusing on you individually. That is something I never had. I don’t remember anything like that.”

Ultimately, the breast cancer survivors recognized cancer navigators as providing emotional and individualized support not found elsewhere in the healthcare system. Their opinions begin to demonstrate that cancer navigators play a valuable role in providing patients with a more positive cancer care experience. However, many of the survivors did not have access to navigation services during treatment. By including cancer navigation in future health system growth and research, more patients may be able to access and benefit from these services.

Medical Oncologists

The two oncologists we interviewed observed that patients who interacted with cancer navigators were more informed about and more engaged in their disease management. One of the oncologists describes the change she sees in patients who work with cancer navigators:

“There are some patients who are very anxious when they come in or uneducated and don’t know to ask or are too scared to ask. Those patients, if the breast cancer navigator is in close connection with them... then I find that they’ll start to ask better questions. But if they’re anxious and/or not educated and there’s no connection made with one of those organizations then they are very hard to pull information out of or get them to ask questions.”

This statement shows that cancer navigators are able to affect the care provided to patients by improving the discussions patients have with their providers. The other medical oncologist made similar comments, indicating that patients with a cancer navigator are more active in their care and have a broader knowledge base in regards to the disease:

“We have some patients that are very passive, that rely on us to make the decisions, but I think we have other patients that are much more involved and much more informed. And I think one of the things that could facilitate that is the cancer navigators program”

By suggesting that navigators are able to affect patient engagement through their emotional and educational support, these oncologists have provided insight into why cancer navigation is a valuable resource that improves the traditional care provided by a health system.

Conclusion

Through the sentiments of breast cancer survivors and health providers, we have shown how primary stakeholders in healthcare value the role of cancer navigators. Cancer patients described the individual care and social support from navigators as being a valuable asset in personalizing a clinical process, while medical oncologists viewed the informational support provided by navigators as a useful asset for their patients. By providing support that benefits the primary players in cancer care, navigators themselves prove to be an important asset in improving future healthcare systems. However, navigation remains a small practice that benefits only a fraction of breast cancer patients and providers. Developing technology to support these navigation professionals will be critical in supporting navigation growth and in providing a better experience for people diagnosed with breast cancer.

References