

## Improving Access to Patient Navigation for Spanish-Speaking Patients

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The hard-won improvements in treating and detecting breast cancer at an early stage are accompanied by an unacceptable truth—not everyone has benefitted from these triumphs. Susan G. Komen’s Scientific Advisory Board estimates that as many as 30% of breast cancer deaths could be avoided if everyone had access to timely, high-quality care. Although members of the Latino community represent the second fastest growing racial/ethnic group in the United States, they are less likely to have access to high-quality care, and they experience poorer health outcomes.<sup>1</sup> Among Hispanic and Latina women in the United States, an estimated 28100 new cases of breast cancer were diagnosed and about 3100 breast cancer deaths were expected in 2021, making breast cancer the most diagnosed cancer type and the leading cause of cancer deaths for all Hispanic and Latina women during that year.<sup>2</sup>

Primary language challenges combined with lack of insurance, high cost of treatment, issues with health literacy, beliefs or fears related to culture, distrust of the health care system, and complexities with immigration status often compound to drive delays in follow-up care and cause disparate health outcomes for Spanish-speaking Latino patients.<sup>3</sup> Additionally, when compared with White people who are not Latino, these individuals are 3 times more likely to be uninsured and less likely to have a medical home, and they tend to be diagnosed with breast cancer at later stages.<sup>4</sup>

The evidence confirms what we intuitively know—patients who have support in coordinating their care, communicating their preferences, understanding their diagnoses, and managing logistics through patient navigation have better

outcomes. Personalized medicine harnesses science to manage an individual’s unique traits and disease, and navigation ensures that a patient’s support is customized by leveraging available community resources, tools, and providers. Thus, the goal of navigation is that every patient receives the best care possible.

### Improving Access

At Komen, our experiences in communities across the country have demonstrated the power of navigation and have revealed significant access issues across populations, particularly in underserved communities. Susan G. Komen’s [Patient Care Center](#) makes navigation accessible through the [Komen Breast Care Helpline](#) to anyone living in the United States and its territories with the goal of having no one face breast cancer alone.

The Patient Care Center offers information, education, emotional support and guidance, access to services, financial assistance, and additional patient support through navigation. The program’s convenience and accessibility break down geographic barriers and allow people across the country to access compassionate and supportive care no matter where they live. The Patient Care Center has been successful in overcoming certain care barriers, yet data collected have highlighted opportunities to improve language accessibility. Between April 1, 2022, and March 31, 2023, 20% of the more than 37000 people served by the Patient Care Center identified themselves as having Hispanic or Latino heritage. Of patients served during that period, 7% of helpline callers and 11% of navigated patients indicated that Spanish was their preferred language.

### The Case for Spanish-Speaking Support

As the navigation program grew, Komen’s navigators use of translation services increased. Translation services are a helpful tool; however, they do not fully address language barriers, and they often contribute to misinformation and frustration.<sup>4</sup> Navigation conducted in the patient’s preferred language is associated with timely follow-up, especially among Spanish speakers with breast cancer screening abnormalities.<sup>5,6</sup>

Offering education and support by Spanish-speaking navigators is preferred for a truly patient-centered approach.<sup>7</sup> Matching a patient’s needs to a culturally- or linguistically-concordant navigator builds trust with patients and supports self-advocacy during the health care journey. Adequate language services provided by Spanish-speaking navigators also help reduce and eliminate delays in care and improve health outcomes.<sup>3,7</sup>

In addition to language concordance, the method of communication can improve access to navigation services. Ninety-five percent of Spanish speakers who have contacted the helpline have made phone calls rather than using email or web forms. Delivering navigation by telephone or video-conferencing allows anyone with telephone access to receive care without the cost burdens of transportation or dependent care.<sup>8</sup> Further, remote support reduces distress and improves anxiety, depression, emotional distress, and fatigue.<sup>9</sup>

An increased workforce and streamlined method of communication could increase accessibility of navigation for Spanish speakers. However, navigation of Spanish-

speaking patients can increase a caseload considerably because of longer average call times and days enrolled for this service. Due to linguistic challenges, navigating Spanish-speaking patients often is more time intensive, as more support is needed to communicate with other agencies and apply for other programs.

### Workforce and Technology to Improve Access to Spanish-Speaking Support

To ensure that Patient Care Center services are accessible to Spanish-speaking patients, our leadership identified opportunities to improve the accessibility and quality of services and to grow capacity to serve them through workforce and technology.

The Patient Care Center's bilingual staff was increased by 67% (ie, 5 additional bilingual staff members). After these bilingual navigators were added, the need for translation services decreased 50% from its peak.

Technology can be harnessed to better match Spanish-speaking patients with the support they need, including:

- Spanish options were provided in the interactive voice response system
- Automated email response were available in Spanish
- Callers' preferred language were identified, and patients were matched with Spanish-speaking staff
- Breast health information materials and communication templates were furnished when navigators addressed barriers to care.

### The Steps Your Organization Can Take

Komen's Patient Care Center has improved accessibility for Spanish-speaking patients by bolstering our team of bilingual staff and leveraging technology. For other patient support programs or service lines considering the needs of non-English speaking populations, some considerations include:

1. Hiring processes for a bilingual workforce must include a step for assessing the language proficiency of candidates. Komen worked with a translation services company

to ensure the proficiency of any Spanish-speaking candidates, particularly because navigators needed to be comfortable with medical terminology.

2. Populations experiencing disparities are likely to present with various complex needs, and resolution of those needs may require more time than required for other patient populations. When surveying served communities, organizations and staff must be prepared for the intersectionality of community barriers and its impact on caseload. Consider staff capacity, training, and resources needed to address the complex barriers of the population served. After bilingual staffing is increased to improve capacity, those staff members also need translated resources and educational tools to accomplish their tasks.
3. The availability of patient support services by phone in addition to by email increases equitable accessibility of the service, especially for an underserved population. Spanish-speaking individuals assisted by the Patient Care Center preferred phone calls to written communication.

Komen provides patient navigation workforce development to other organizations through Komen's [Patient Navigation Training Program](#), which meets the 2024 Medicare Physician Fee Schedule training requirements for reimbursement of navigation services.<sup>10</sup> 

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### References

1. Funk C, Lopez, H. 2. Hispanic Americans' experiences with health care. Pew Research Center. June 14, 2022. Accessed January 16, 2024. <https://www.pewresearch.org/science/2022/06/14/hispanic-americans-experiences-with-health-care/>
2. *Cancer Facts & Figures 2021*. American Cancer Society. 2021. Accessed January 15, 2024. <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2021/cancer-facts-and-figures-2021.pdf>
3. Simon MA, Tom LS, Nonzee NJ, et al. Evaluating a bilingual patient navigation program for uninsured women with abnormal screening tests for breast and cervical cancer: implications for future navigator research. *Am J Public Health*. 2015;105(5):e87-e94. doi:10.2105/AJPH.2014.302341
4. Paz K, Massey KP. Health disparity among Latina women: comparison with non-Latina women. *Clin Med Insights Womens Health*. 2016; 9(suppl 1):71-74. doi:10.4137/CMWH.S38488
5. Robie L, Alexandru D, Bota D. The use of patient navigators to improve cancer care for Hispanic patients. *Clin Med Insights Oncol*. 2011;5:1-7. doi:10.4137/CMO.S6074
6. Charlot M, Santana MC, Chen CA, et al. Impact of patient and navigator race and language concordance on care after cancer screening abnormalities. *Cancer*. 2015;121(9):1477-1483 doi:10.1002/cncr.29221
7. Steinberg EM, Valenzuela-Araujo D, Zickafoose JS, Kieffer E, DeCamp LR. The "battle" of managing language barriers in health care. *Clin Pediatr (Phila)*. 2016;55(14):1318-1327. doi:10.1177/0009922816629760
8. Sabesan S, Simcox K, Marr I. Medical oncology clinics through videoconferencing: an acceptable telehealth model for rural patients and health workers. *Intern Med J*. 2012;42(7):780-785. doi:10.1111/j.1445-5994.2011.02537.x
9. Cochrane Gynaecological, Neuro-oncology, and Orphan Cancer Group; Ream E, Hughes AE, Cox A, et al. Telephone interventions for symptom management in adults with cancer. *Cochrane Database Syst Rev*. 2020;6:CD007568. doi:10.1002/14651858.CD007568.pub2
10. Patient navigation training program. Susan G. Komen. Accessed January 23, 2024. <https://www.komen.org/about-komen/our-impact/breast-cancer/navigation-nation-training-program/>