

# Navigators help patients overcome health-care inequities

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Traversing the healthcare system can be daunting for almost anyone. Add in the many obstacles that low-income uninsured populations face, and it becomes tremendously more difficult. But a new Northwestern Medicine study shows that guidance from trained navigators can help patients overcome healthcare inequities.

In a study published Feb. 25 in the *American Journal of Public Health*, community navigators worked with uninsured Spanish-speaking women in DuPage County to obtain timely follow-up care after an abnormal breast or cervical cancer screening result. Postponed diagnosis after an abnormal test can lead to less effective treatment and lower chances of survival.

Ninety-seven percent of the Spanish-speaking patients in the study were recent immigrants and two-thirds did not finish high school. They had significantly lower income, lower health literacy, less confidence self-managing health and more distrust of the [healthcare system](#) than English-speaking patients in DuPage.

Though these barriers put Spanish-speaking women at a higher risk for stalled follow-up care, patients in the navigation study did not have longer follow-up times than their English-speaking counterparts.

The project is part of an ongoing series of studies focusing on patient navigation and barriers to care across a variety of populations in the Chicagoland area and Illinois.

The work is led by Dr. Melissa Simon, MD, George H. Gardner, professor of clinical gynecology at Northwestern University Feinberg School of Medicine and an obstetrician/gynecologist at Northwestern Memorial Hospital.

Simon's interest is not just academic: She experienced what it's like to struggle for health care firsthand while growing up in a low-income family in Detroit.

"Healthcare reform in the United States has opened the doors for many, but millions remain uninsured," said Simon. "Community navigator programs may have a key role to play in improving the health of the nation's most vulnerable populations."

During the five-year study, six navigators worked with 477 uninsured women in DuPage County who had received abnormal breast or cervical screens. The navigators helped make appointments, provided interpreter services, referred patients to community services and gave emotional support.

The study's investigators calculated each patient's follow-up time, which is defined as the number of days between the abnormal breast or cervical screen and the diagnostic test that resolves the abnormal screening test into a cancer or non-cancer diagnosis, such as a colposcopy, diagnostic mammogram or breast biopsy. Obtaining a definitive diagnosis more than 60 days after an abnormal screen was considered delayed follow-up.

Median follow-up time for women in the study was 29 days for breast screening abnormalities and 56.5 days for cervical screening abnormalities. The study found no differences in likelihood of delayed follow-up between Spanish-speaking patients working with navigators and English-speaking patients, despite barriers faced by the former group. DuPage patients who worked with navigators also had shorter

follow-up times than patients living in similar suburban counties outside Chicago who did not receive help from navigators.

According to Simon, programs with a similar navigation model wouldn't be difficult for other communities to implement, as long as they had funding. Navigators don't need to be medical experts - they receive extensive training on the job. They don't even need a degree. Rather, they understand the social conditions in the community and can build relationships with community resources. Most importantly, they feel comfortable advocating for patients and confident speaking to healthcare providers.

"There are a lot of people like this in a community. It could be the woman at the local beauty shop or someone in the ministry," Simon said. "They're people who have it in their hearts that they want to do good for others. You just have to tap into the talent."

Provided by Northwestern University

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