

Meeting Needs in the Community

The health care system is complex, with many barriers to accessing and maintaining quality care in a timely manner. The most common barriers include those related to finances, language and cultural differences, health care system access, transportation and fear. Delays in diagnosis and treatment, which often stem from these barriers, can lead to poor breast cancer outcomes. Specific populations often face unique challenges and barriers and are disproportionately burdened with higher breast cancer death rates.

Patient navigation is a process by which a trained individual – patient navigator – guides patients through and around barriers in the complex breast cancer care system. The primary focus of a patient navigator is on the individual patient, with responsibilities centered on coordinating and improving access to timely diagnostic and treatment services tailored to individual needs. Patient navigators offer interventions that may vary from patient to patient along the continuum of care and include a combination of informational,



Evidence has shown an improvement in 5-year survival rates of breast cancer patients who were navigated from screening through resolution¹.

emotional and practical support (i.e., breast cancer education, counseling, care coordination, health care system navigation and access to transportation, language services and financial resources).

Patient navigators are typically found in hospitals and community-based organizations. There are different types of navigators in the breast cancer care system, and the most common types of navigators are community health workers or lay navigators, nurses and social workers. Different types of navigators may support a patient at different points along the continuum of care. For example, a lay navigator may guide a patient into breast cancer screening, while a nurse navigator begins navigation after an abnormal mammogram to guide a patient into diagnostic services, through breast cancer treatment and into survivorship.

Our FY17* Community Investment

\$11.8 million in community grants providing patient navigation

What the Community Says



Based on 2015 Komen Affiliate Community Profiles, **1 out of every 5 target communities indicates the lack of availability of patient navigation** as a barrier to receiving timely and adequate breast cancer care across the United States.**



To address these concerns, Komen Affiliates have identified strategies to **increase availability of local patient navigation** (e.g., community partnerships and focus on funding patient navigation grants) for medically underserved individuals.

How Komen Supports Navigation Through the Continuum of Care



Komen-funded navigators educate individuals about breast cancer and the importance of **screening**, locate available and affordable screening services, secure transportation and provide translation.

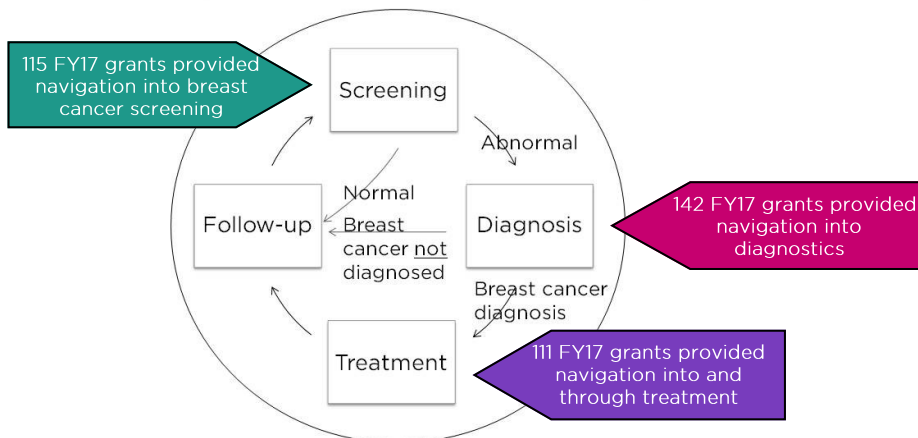


Komen-funded navigators ensure that individuals with an abnormal breast cancer screening receive follow-up **diagnostic services** and address individual barriers to care (e.g., cost of services, transportation, and psychological support).



Komen-funded navigators assist patients throughout breast cancer **treatment** by locating financial resources, securing transportation, and assisting with care coordination for timely treatment initiation. Navigators also provide emotional support and locate available quality-of-life interventions.

Breast Cancer Continuum of Care



Number of US Affiliate and Komen Headquarter grants that support navigation in each stage through the continuum of care, April 1, 2016—March 31, 2017***

65% of all US Affiliate and Komen Headquarters-funded programs included **patient navigation** in FY17*



Learn more about breast cancer



Find your local Komen Affiliate



Get involved & support our Bold Goal

1. Freeman, H. Patient Navigation: A community centered approach to reducing cancer mortality. J Cancer Educ; 21(Suppl): S11-S14, 2006.

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*Fiscal Year 2017, April 1, 2016—March 31, 2017 **393 target communities were interviewed or surveyed; not all target communities provided data ***311 unique grants represented, some grants provide navigation through more than one stage in the continuum of care