



A new year is underway, and so are opportunities with National Navigation Roundtable with lots of good news!

In this issue:

- ***The Community Preventive Services Task Force (CPSTF)***
- ***ACS Cancer Facts and Figures***
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The Community Preventive Services Task Force (CPSTF) Recommends Patient Navigation Services to Increase Cancer Screening and Advance Health Equity



The Community Preventive Services Task Force (CPSTF) recommends patient navigation services to increase [breast](#), [cervical](#), and [colorectal cancer](#) screenings among historically disadvantaged racial and ethnic populations and people with lower incomes. The recommendation is based on a systematic review of 34 studies.

Patient navigation services are expected to advance health equity when implemented among these populations who often have lower screening rates.(1) With timely and appropriate follow-up care and treatment, patient navigation services may improve health for these groups.

The recommendations for patient navigation services complement CPSTF's recommendations for [interventions engaging community health workers](#) and [multicomponent interventions](#) to increase breast, cervical, and colorectal cancer screenings.

What are Patient Navigation Services for Cancer Screening?

Healthcare systems provide patient navigation services to help patients overcome barriers to accessing cancer screening. Services are often offered to populations experiencing greater disparities in cancer screening, including people from historically disadvantaged racial and ethnic populations and people with lower incomes. Services include client reminders, reduced structural barriers or improved assistance getting around them, reduced out-of-pocket costs, one-on-one group education services or a combination of these approaches.

Patient navigation services are delivered by community health workers, patient navigators, healthcare professionals, nurses, social workers, or others. They are often designed to be culturally- and language-

appropriate.

Why is this important?

Screening for breast, cervical, and colorectal cancers, combined with appropriate follow-up diagnosis and treatment, can reduce cancer mortality, and in some cases reduce cancer incidence. (2-4) Compared with the general population, cancer screening rates are lower among people from historically disadvantaged racial and ethnic groups and people with lower incomes.(1) Identifying and expanding the use of evidence-based interventions to increase screening could help reduce some of these screening disparities.

For More Information:

The Community Guide

- [Cancer Screening](#)
- o [Cancer Screening: Patient Navigation Services to Increase Breast Cancer Screening and Advance Health Equity](#)
- o [Cancer Screening: Patient Navigation Services to Increase Cervical Cancer Screening and Advance Health Equity](#)
- o [Cancer Screening: Patient Navigation Services to Increase Colorectal Cancer Screening and Advance Health Equity](#)
- [CDC, Cancer Prevention and Control](#)
- National Cancer Institute, [Evidence-based Cancer Control Programs](#)

**When choosing to use patient navigation as an evidence base intervention don't forget to incorporate the PONT standards:

- o [Oncology Navigation Standards Of Professional Practice](#)

References

- 1 Sabatino SA, Thompson TD, White MC et al. Cancer screening test receipt - United States, 2018. *MMWR* 2021;70(2):29-35.
- 2 U.S. Preventive Services Task Force (USPSTF). Breast cancer: screening. Bethesda (MD): 2016. Accessed June 15, 2022. www.uspreventiveservicestaskforce.org/uspstf/recommendation/breast-cancer-screening
- 3 USPSTF. Cervical cancer: screening. Bethesda (MD): 2018. Accessed June 15, 2022. URL: www.uspreventiveservicestaskforce.org/uspstf/recommendation/cervical-cancer-screening
- 4 USPSTF. Colorectal cancer: screening. Bethesda (MD): 2021. Accessed June 15, 2022. www.uspreventiveservicestaskforce.org/uspstf/recommendation/colorectal-cancer-screening



2023 Cancer Facts and Figures Released

Last week, ACS released Cancer Facts & Figures 2023, the organization's annual report on cancer facts and trends. Data shows that the overall cancer mortality rate has dropped 33% since 1991, averting an estimated 3.8 million cancer deaths and representing a positive step forward in our goal to end cancer.

Two of the report's most critical findings are driven by substantial changes in cancer prevention and screening in the last decade.

- [Cervical cancer](#) rates in women ages 20-24 decreased by 65% from 2012 through 2019, due in part to the introduction of the human papillomavirus (HPV) vaccine. This steep drop-off is the first real-world evidence that HPV vaccination can reduce cancer incidence and has led to increased optimism around expanding research to develop additional cancer prevention vaccines.
- By contrast, prostate cancer, already the second leading cause of cancer death for men in the US, increased by 3% per year from 2014 through 2019 following two decades of decline. The report also highlights significant disparities in the Black community, as the incidence of prostate cancer is 70% higher in Black men than in White men.

This year's [special section reviews lung cancer incidence](#), survival, mortality, risk factors, and screening prevalence with a focus on racial and geographic disparities. It is intended to inform anyone interested in learning more about lung cancer, including policy makers, researchers, clinicians, cancer control advocates, patients, and caregivers.



Incase you missed it....

Call to Action Series Archived sessions

Consider a "watch" party with your department and administration.

Session 1: *Barriers and Opportunities to Measuring Oncology Patient Navigation Impact: A National Survey:* [archived recording](#)

Session #2: *Oncology Navigation Standards of Professional Practice – PONT Standards:* [archived recording](#)

Session #3: *Flexibility, Adaptation and Roles of Patient Navigators in Oncology during COVID-19:* [archived recording](#)

Session #4: *Evaluating Sustainability of Patient Navigation Programs in Oncology by Length of Existence, Funding, and Payment Model Participation:* [archived recording](#)

Roundtable Round-up



The [American Cancer Society National Breast Cancer Roundtable](#) on (ACS NBCRT) and the [American Cancer Society National Roundtable on Cervical Cancer](#) (ACS NRTCC) need your help in disseminating surveys to identify the priorities of these two recently launched Roundtables.

Each survey takes approximately 10 minutes to complete, and is tailored to three specific audiences: providers/clinicians, patients, and partners.

ACS NBCRT & ACS NRTCC hope to hear from persons with the lived experience of cancer, particularly those from historically underrepresented populations and people experiencing health disparities. Please forward this on to others within your comprehensive cancer control coalition networks!

Clinician/Provider Surveys:

- Cervical (deadline of 2/7/23): [NRTCC Provider](#)

- Breast (deadline of 2/7/23): [NBCRT_Clinician](#)
- Patient Surveys:
- Cervical (deadline of 2/7/23): [NRTCC_Patient](#)
 - Breast (deadline of 2/7/23): [NBCRT_Patient](#)
- Partners' Surveys (any partner that is not a clinician):
- Cervical (deadline of 2/7/23): [NRTCC_Partner](#)
 - Breast (deadline of 2/7/23): [NBCRT_Partners](#)

What we're reading:

1. **JONS** article: [The Return on Investment of a Successful Navigation Program Becoming Familiar with Business Performance Metrics as a Method to Evaluate Navigation Services](#)
2. The Paper Gown: [The Compelling History of Patient Navigators](#)
3. Komen Newsroom: [Stand for H.E.R. Patient Navigation Program Breaks Down Barriers for Black Patients](#)
4. MacPac: [Medicaid Coverage of Community Health Worker Services](#)
5. Fred Hutch Cancer Center: [Navigating cancer and barriers, one person at a time](#)
6. [NCI-funded study for cancer survivors](#) designed to help with weight management strategies using an evidence-based protocol using physical activity, diet, stress management, and lifestyle strategies. This research is crucial to fill the identified gaps for weight management resources that ASCO published earlier this year in the [Exercise, Nutrition & Weight Management Recommendations](#). This robust research identified the need to develop more evidence-based resources for cancer survivors. o Enrollment for this study will be closing on March 1st, 2023!



NNRT's Workforce Task Group Co-Chair, **Linda Burhansstipanov, MSPH, DrPH**, (Cherokee Nation) published in **JONS** [Navigating Special Populations](#)

Dr. Burhansstipanov has worked in public health since 1971. She taught at universities for 18 years (California State University Long Beach and UCLA). She developed and implemented the Native American Cancer Research Program at the National Cancer Institute from 1989-1993. She worked at the AMC Cancer Research Center in Denver for 5 years before founding Native American Cancer Research Corporation (non-profit). She also is the President of Native American Cancer Initiatives, Incorporated (minority womans for-profit). She is the principal investigator and subcontractor for >3 NIH grants and PI for a NIMHD 2017 Phase I SBIR to develop a tablet app to evaluate Patient Navigation Services. She also is on the NIMHD Scientific Advisory Council. She serves on multiple federal advisory boards. She has over 125 peer-reviewed publications, of which most address Native American cancer, genetics, CBPR, evaluation, patient navigation, survivorship, public health and data issues.

Resources to share:

- [Biden-Harris Administration Announces Record-Breaking 16.3 Million People Signed Up for Health Care Coverage in ACA Marketplaces During 2022-2023 Open Enrollment Season](#)
- AONN+ Provides Unique Professional Development Opportunity: [Calling All Navigators to Join the BOLD Mentorship Academy](#)
- National Patient Advocate Foundation [storytelling](#) curriculum
- February 4 is [World Cancer Day](#), an initiative of the Union for International Cancer Control to significantly reduce illness and death caused by cancer.
- The GW Cancer Center's Cancer Survivorship [E-Learning Series](#) now includes a module summarizing the American Society of Clinical Oncology (ASCO) guidelines on managing chemotherapy-induced peripheral neuropathy in survivors of adult cancers and fertility preservation in patients with cancer. Learn strategies to help prevent peripheral neuropathy and methods to assist with fertility preservation.
- Medical debt continues to decline: [National Health Statistics Reports](#)



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