

# Social service barriers delay care among women with abnormal cancer screening

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A recent study performed by researchers at Boston Medical Center (BMC), Boston University School of Medicine (BUSM), Boston University School of Public Health (BUSPH), and Tufts Medical Center found that women with multiple barriers to healthcare, especially those with social barriers such as problems with housing and income, experienced delays in cancer screening follow up compared to those with fewer barriers or no social barriers.

The study, which appears online in the *Journal of General Internal Medicine*, was led by Sarah Primeau, MSW, research assistant in the department of general internal medicine at BUSM.

Previous studies on healthcare barriers have shown that training individuals from the community, known as patient navigators, to provide emotional and logistical support to patients is an effective way to care for patients in a culturally sensitive way. However, these studies have not addressed whether patient navigators are also effective in addressing social service barriers such as financial problems, employment issues, health insurance, housing constraints and adult and child care.

"Social barriers are more complex than other obstacles to healthcare such as transportation or language and will likely require interventions that healthcare providers and patient navigators aren't traditionally trained to provide," said Primeau.

The study looked at 1,493 subjects enrolled in the Boston Patient

Navigation Research Program (PNRP), a study performed at BMC from 2007-2010 that used patient navigators to help [women](#) with breast and cervical [cancer screening](#) abnormalities. The researchers used the data to separate the women into groups based on how many social barriers the navigator was able to identify. They then examined the data to see how long it took for each patient to reach a final diagnosis from the time of the initial abnormal screening test.

The researchers found that it took longer to achieve a final diagnosis in the patients with multiple barriers to healthcare, and that having one or more social barrier further increased the follow up time. The results of this study indicate that there is a continued need to better understand and overcome complex social obstacles to patient care.

"The findings suggest that not all women benefit equally from patient navigation and there is a need for more research into the innovation of cancer care delivery, and into a possible new model of patient navigation enhanced by legal advocacy," said senior author, Tracy A. Battaglia, MD, director of the Women's Health Unit at BMC and associate professor of medicine and epidemiology at BUSM.

Provided by Boston University Medical Center

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