

Addressing social needs may help mitigate distress and improve the health of women with cancer

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A new study published by Wiley early online in *Cancer*, a peer-reviewed journal of the American Cancer Society, has identified unmet social needs in women with gynecologic cancer that could be addressed to improve care for patients and lessen disparities. For example, identifying



patients who reported needing help with reading hospital materials resulted in the use of a cancer care navigator who provided patient education and support, facilitating physician-patient communication and adherence to care recommendations.

The prospective survey-based study conducted at Olive View-UCLA Medical Center, a public safety net hospital near Los Angeles, included 135 women, many of whom were immigrants and living below the federal poverty level. Nearly two-thirds (65.2%) of patients had at least one unmet social need (the lack of a basic resource), and 37.8% of patients screened positive for psychological distress. Help with reading hospital materials was the most frequently reported need (30.4%). Needing someone to talk to, social isolation, housing instability, financial toxicity, food insecurity, and transportation difficulties were also prevalent.

"While it is not within the power of individual healthcare systems or providers to modify social determinants of health, these data offer hope that we can implement programs to reduce healthcare disparities by addressing unmet <u>social needs</u>," said senior author Abdulrahman K. Sinno, MD, of the Sylvester Comprehensive Cancer Center at the University of Miami Miller School of Medicine. "It's important that we focus on addressing social needs regardless of the social, economic, and political inequities that precede them because these needs are ultimately downstream mediators of poor health outcomes."

In addition to using <u>cancer</u> care navigators to help with reading hospital materials, other social needs such as food insecurity, housing instability, and lack of transportation were addressed by connecting patients with available resources. These resources include Meals on Wheels America, Project Angel Food, county-sponsored housing programs, and transportation assistance programs. Furthermore, for patients who screened positive for distress, a <u>social worker</u> with mental health



specialization and a psychiatry team were embedded into the clinic to remove barriers to mental healthcare.

"In the future, we plan to demonstrate the utility and <u>cost effectiveness</u> of identified social need intervention algorithms not only for improving quality of life and health outcomes, but also for reducing healthcare disparities," said Dr. Sinno.

More information: Natsai C. Nyakudarika et al, Universal social needs assessment in gynecologic oncology: An important step toward more informed and targeted care in the public safety net, *Cancer* (2021). DOI: 10.1002/cncr.33761

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