## **Cancer Screening: Patient Navigation Services to Increase Screening for Cervical Cancer**

## **Summary Evidence Table**

Abbreviations Used in This Document

- Intervention components:
  - o CR: client reminder
  - o GE: group education
  - o OE: one-on-one education
  - RSB: reducing structural barriers
  - o SM: small media
- Cancer types
  - o BC: breast cancer
  - CC: cervical cancer
  - CRC: colorectal cancer
- Screening tests
  - o Pap: Papanicolaou test
- Others
  - o CHW: community health worker
  - o FQHC: federally qualified health center
  - HS: high school
  - o N/A: not applicable
  - NR: not reported
  - o PCP: primary care provider
  - Pct pts: percentage points
  - o PN: patient navigator
  - RCT: randomized control trial
  - USPSTF: United States Preventive Services Task Force

## Notes:

- Suitability of design includes three categories: greatest, moderate, or least suitable design. Read more
- Quality of Execution Studies are assessed to have good, fair, or limited quality of execution. Read more
- Race/ethnicity of the study population: The Community Guide only summarizes race/ethnicity for studies conducted in the United States.

Study	Intervention Characteristics	Intervention Deliverer	Population Characteristics	Results
		Details		
Author year:	Location: Moloka'i, Hawaii, US	Type of deliverers	Population of focus:	Screening test: pap test
Braun et al.,		engaged, and services	Asian American or Pacific	
2015	Population density: rural	delivered:	Islander living in Hawaii	Up to date or repeat screening:
		CHWs (lay navigators):		up to date
Study design:	Setting: community and clinic	all intervention	Eligibility criteria:	
Individual RCT		components	Medicare beneficiaries	Self-report or medical record:
	Intervention duration: 48		residing in Moloka`i, Hawaii	self-report
Suitability of	months	Training: an initial 48-		
design:		hour evidence-based	Sample size:	Follow-up Time: NR
Greatest	Intervention details:	navigator training	Intervention: 242	
	Type of cancer addressed: BC,	program, with quarterly	Control: 246	Results:
Quality of	CC, and CRC	continuing education		Pap test:
execution:		sessions	Attrition: N/A	Intervention:
Fair	Type of services provided: CR +			Pre: 38/128 = 29.7%
	OE + RSB, appointment	Supervision: initial	Demographics for	Post: 79/128 = 61.7%
	scheduling assistance + RSB,	supervision by nurse,	intervention group (for all	Change: 32.0 pct pts
	childcare assistance + RSB,	later by other healthcare	cancer types):	
	reduce admin barriers + RSB,	professionals	Age, mean: 68 years	Control:
	transportation assistance		Gender: 63% female; 47%	Pre: 47/132 = 35.6%
		Matching to	male	Post: 56/132 = 42.4%
	CR: mailed reminders to patients	population: recruited	Race/Ethnicity: 50% Asian;	Change: 6.8 pct pts
	due for a cancer screening	from local community,	42% Native Hawaiian; 8%	
	OE: outreach education	one Hawaiian and one	other	<b>Absolute difference</b> : +25.2 pct pts
	RSB, appointment scheduling	Filipino	Employment: NR	Relative difference: +64.5%
	assistance: made appointments		Income: NR	
	and follow-up appointments for	Educational	Education: 39% <hs; 33%<="" td=""><td></td></hs;>	
	patients	background: NR	HS; 28% >HS	
	RSB, childcare assistance: made		Insurance: 100% insured	
	arrangements to take care of	Payment: NR	Established source of care:	
	family while participants were at	- aymener inc	NR	
	appointment	Methods used to	Baseline screening of	
	RSB, reduce admin barriers:	interact with	intervention group: 25% for	
	communicated with providers and	participants:	any CRC screening	
	completed paperwork	Both: CR by phone or	any cite sercening	
	RSB, transportation assistance:	mail and other services		
	arranged transportation to	face-to-face		
	appointments	lace-to-race		
	appointments			
	Intervention intensity: 2 or			
	more contacts			
	more contacts			
	Control group: alternative			
	education on nutrition and			
	Euucation on nutrition and			

Study	Intervention Characteristics	Intervention Deliverer Details	Population Characteristics	Results
	relevant cancer education material from another healthcare facility on island			
Author year:	Location: New York City, New	Type of deliverers	Population of focus:	Screening test: pap test
Dietrich et al., 2006	York, US	engaged, and services delivered:	Females receiving care from FQHCs serving communities	Up to date or repeat screening:
Study design:	Population density: urban	Prevention care manager: all intervention	with high proportions of people who were from	up to date
Individual RCT	<b>Setting</b> : community and clinic (FQHC)	components	historically disadvantaged groups and had lower	Self-report or medical record:
Suitability of design:	Intervention duration: 18	<b>Training:</b> 7 hours of training, including review	incomes	medical records
Greatest	months	of USPSTF recommendations,	Eligibility criteria: Females 50-69 years of age	Follow-up Time: 3 months
Quality of execution:	Intervention details: Type of cancer addressed: BC,	barriers to cancer screening, and role-	who were overdue for at least 1 cancer screening,	Results: Pap test:
Fair	CC, and CRC	playing telephone calls	were patients of the clinic for at least 6 months, had no	Intervention:
	Type of services provided: OE + RSB, appointment scheduling assistance + RSB,	Supervision: calls to patients monitored to ensure quality and	plan to move or change clinic for 15 months, and spoke English, Spanish, or	Pre: 494/696 = 71.0% Post: 543/696 = 78.0% Change: 7.0 pct pts
	reduce admin barriers + RSB, transportation assistance + SM	consistency; call logs reviewed at monthly	Haitian Creole	Control: Pre: 486/694 = 70.0%
	OE: trained prevention care manager provided information on	meetings to ensure intervention fidelity	Exclusion: females who were acutely ill or currently receiving cancer treatment	Post: 486/694 = 70.0% Change: 0.0 pct pts
	screenings and barriers to care RSB, appointment scheduling	Matching to population: based on	Sample size:	<b>Absolute difference</b> : +7.0 pct pts
	assistance: prevention care manager helped with scheduling	patient language	Intervention: 696 Control: 694	Relative difference: +9.9%
	screening  RSB, reduce admin barriers: for	Educational background: mostly	Attrition: 1%	
	participants who reported difficulty communicating with	college graduates	Demographics for	
	their physicians, cards listing overdue screenings were sent as	Payment: NR	intervention group: Age, mean: 58 years	
	communication tools; provided direction to screening facilities	Methods used to interact with	Gender: 100% female Race/Ethnicity: NR	
	RSB, transportation assistance: helped participants to find means of transportation to appointments	participants: Remote: mail and telephone	Employment: NR Income per year: based on median income at	
		'	participants' zip code: 34%	

Study	Intervention Characteristics	Intervention Deliverer Details	Population Characteristics	Results
	SM: prevention care manager		<\$25,000; 39% \$25,000-	
	sent accurate information about		\$40,000; 27% >\$40,000	
	screening via mail		Education: NR	
			Insurance: 93% insured; 5%	
	Intervention intensity: 2 more		uninsured; 2% unknown	
	contacts; series of telephone		Established source of care:	
	support calls		100% go to the clinics	
			Baseline screening of	
	Control group: usual care		intervention group: 71% up	
			to date with pap test	
Author year:	Location: Houston, Texas, US	Type of deliverers	Population of focus:	Screening test: pap test
Fernandez-		engaged, and services	Vietnamese American	
Esquer et al.,	Population density: urban	delivered:	females working in nail	Up to date or repeat screening:
2020		Lay health workers: OE1	salons, majority with annual	up to date
	<b>Setting</b> : community (FQHC)	or GE	income <\$40,000	
Study design:		PN: navigation services		Self-report or medical record:
Pre-post with	Intervention duration: 36		Eligibility criteria:	self-reported
comparison	months	Training: NR	Aged 18 years or older, self-	Fallow on Theory Francish
Cuitability of	Tutomical dataile.	Companision, ND	identified as Vietnamese,	Follow-up Time: 5 months
Suitability of	Intervention details: Type of cancer addressed: BC	Supervision: NR	located in the Houston, Texas area for at least 3	Results:
<b>design</b> : Greatest	and CC	Matching to	years, and currently working	Pap test:
Greatest	and CC	population: NR	in a nail salon in Houston in	Intervention:
Quality of	Type of services provided: OE1 or	population: NK	a neighborhood with a dense	Pre: 0%
execution:	GE + OE2 + RSB, appointment	Educational	population of Asian	Post: 31/37 = 83.8%
Fair	scheduling assistance + RSB,	background: NR	businesses and residences	Change: 83.8 pct pts
ı un	reduce admin barriers + SM	background: WK	businesses and residences	Change, 65.6 per pro
	reade damin barriers : 511	Payment: NR	Sample size (for both BC	Control:
	OE1 or GE: brief educational		and CC):	Pre: 0%
	sessions delivered one-on-one or	Methods used to	Intervention: 186	Post: 14/28 = 50.0%
	in small groups by Vietnamese	interact with	Control: N/A	Change: 50.0 pct pts
	lay health workers to their nail	participants:	,	J. J. J. J. P.
	salon peers	Both: face-to-face and	Attrition (for both BC and	Absolute difference: +33.8 pct pts
	OE2: education and booster	telephone	<b>CC)</b> : 10.2%	Relative difference: +67.6%
	education; counseling on setting	-	_	
	up appointment		Demographics for	
	SM: locally-developed cancer		intervention group (for	
	screening brochures given to		both BC and CC):	
	each nail salon worker at the		Age, mean: 47 years	
	enrolled venues. Navigation		Gender: 100% female	
	services only provided to		Race/Ethnicity: 100% Asian	

Study	Intervention Characteristics	Intervention Deliverer Details	Population Characteristics	Results
	participants not up to date with		Employment: 100% nail	
	screening:		salon employees	
	RSB, appointment scheduling		Income: 46% <\$20,000;	
	assistance: outreach coordinator		43% \$20,000-\$39,999; 11%	
	set up appointment		≥\$40,000	
	RSB, reduce admin barriers:		Education: 26% grade 9 or	
	taught participants how to pose		less; 55% grade 10-12;	
	questions to the provider,		18% some college or more	
	requested info about screening		Insurance: 25% private; 3%	
	costs, and got screening results,		Medicare; 2% self-pay; 23%	
	assisted with paperwork		county-level public	
			insurance; 29% marketplace	
	Intervention intensity: 1 or		insurance; 17% no	
	more contacts		insurance; 2% other	
			Established source of care:	
	Comparison group: OE1 or GE		75% have PCP	
	+ SM		Baseline screening of	
			intervention group: 0%	