

DGIM Project Summary

Name of Project. The Patient Cancer Outreach, Navigation, Technology and Support (Patient COUNTS) Project: Addressing Care for Asian Americans with Cancer

Investigator(s). Tung Nguyen (PI and primary contact): Tung.Nguyen@ucsf.edu; Scarlett Lin Gomez, Salma Shariff-Marco, Janice Tsoh.

Research questions

- 1) Is it feasible to develop a patient navigation program (in-person and web portal) in English, Cantonese, Mandarin, and Vietnamese for Asian American patients with newly diagnosed colorectal, liver, or lung cancer that is acceptable to them?
- 2) Can the navigation program improve guideline-adherent treatment and quality of life among these patients?

Brief Background/Significance. Cancer is the most common cause of death for Asian Americans, but many Asian American cancer patients do not receive appropriate treatment or patient-centered survivorship care. There are few studies of Asian American cancer patients and only one small one on patient navigation. There are also few health-related web-based platform available for Asian Americans in general and those who have limited English proficiency in particular.

Inclusion/exclusion criteria.

Inclusion: self-identifies as Asian American, ages 21 or older, lives in San Francisco, speaks English, Mandarin, Cantonese, or Vietnamese, has stage I-III colorectal, lung, or liver cancer, has not yet undergone treatment; and is willing to stay in the study for six months.

Exclusion: Any medical or psychological conditions precluding informed consent.

Method of contact/recruitment. Flyers, Direct referral from providers, referral from cancer registry.

Benefits/burden for participants. Participation may increase patient stress level by adding more activities, but the intent of patient navigation interventions is to lessen stress by providing logistical, informational, and social support. Many cancer patients may have caregivers who may also be under stress, and abuse potential does exist. Navigators will be trained to identify high-risk situations (such as suicidal ideation, abuse) and provide an initial response (including referral to mental health or social resources). Dr. Janice Tsoh is a clinical psychologist who will be notified and review all such situations to determine the optimal response. There is a potential loss of privacy although best practices in data collection, storage, and analysis will be employed. Potential benefits include positive health outcome or patient engagement and knowledge.

Any benefits or burden to DGIM practitioners? Potential benefits include more navigational support for patients with cancer. Potential burden is to reach out to eligible patients and answer questions, which can be deferred to research team.

Timeline for recruitment (projected start and stop dates): 3/1/19-6/1/20

Funding source: BMS Foundation

Potential for DGIM collaborators? Yes

Do you agree to notify us when recruitment is completed? Yes

Date form completed: 1/15/19