Who Would Benefit from a Peer Navigator vs. Who Wants to be a Peer Navigator? A Survey of Canadian Adolescents and Young Adults with Cancer

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INTRODUCTION

- Patient navigation has been shown to overcome barriers to care.¹
- Many adolescents and young adults (AYAs) would prefer to receive navigation from a peer cancer survivor through a digital app.²
- Determining which AYAs would benefit from navigation and who is best suited to provide navigation could optimize service delivery.

METHODS

- A survey was administered to Canadian AYAs diagnosed with cancer between the ages of 15-39 at a cancer centre and online through social media.
- Participants were asked for their peer navigation needs and preferences, psychosocial wellbeing, clinical and sociodemographic characteristics.
- Descriptive statistics, t-tests, and chi-square tests were calculated.

RESULTS

Participants (n=436) were on average 31.2 years of age (SD 6.3), 3.3 years post-diagnosis (SD 3.8), 65% identified as women and 63% identified as White.

RESULTS

Participants who desired support from a peer navigator: more likely to be younger and female; they also reported higher anxiety, depression and loneliness scores, lower social support and coping behaviours, and poorer overall health, than those who did not (Tables 1 and 2).

Table 1. Connecting with a peer navigator (chi-square test results)

Variable	No (%)	Yes (%)	χ² (p-value)
Sex Male Female	167 78 (46.7) 89 (53.3)	164 38 (23.2) 126 (76.8)	20.135 (<.001)
Location Urban Rural	168 154 (91.7) 14 (8.3)	164 134 (81.7) 30 (18.3)	7.160 (.007)
Health Poor Fair Good Very good Excellent	180 5 (2.8) 28 (15.6) 66 (36.7) 57 (31.7) 24 (13.3)	180 6 (3.3) 51 (28.3) 72 (40.0) 34 (18.9) 17 (9.4)	14.056 (.007)

Table 2. Connecting with a peer navigator (t-test results)

Variable	No			Yes			t-test
	N	Mean	SD	N	Mean	SD	(p-value)
Age	191	30.24	6.50	184	31.79	5.73	-2.44 (.015)
Life satisfaction	175	7.07	2.02	178	6.45	1.91	2.96 (.003)
GAD-7	177	4.79	4.88	177	6.88	5.02	-3.98 (<.001)
PHQ-9	175	4.84	4.96	175	7.99	5.94	-5.38 (<.001)
UCLA	169	11.28	13.25	170	20.41	14.95	-5.95 (<.001)
SPS	169	35.99	4.47	176	34.03	5.23	3.73 (<.001)

Participants interested in becoming a peer navigator: more likely to be female, to have completed treatment and to have higher anxiety and loneliness scores than those who did not (Tables 3 and 4). However, they reported lower anxiety and loneliness than AYAs who desired support from a peer navigator.

Table 3. Becoming a peer navigator (chi-square test results)

Variable	No (%)	Yes (%)	χ² (p-value)
Sex Male Female	121 67 (55.4) 54 (44.6)	204 47 (23.0) 157 (77.0)	34.865 (<.001)
In treatment No Yes	136 71 (52.2) 65 (47.8)	228 144 (63.2) 84 (36.8)	4.226 (.040)

Table 4. Becoming a peer navigator (t-test results)

\		No			Yes	t-test	
Variable	N	Mean	SD	N	Mean	SD	(p-value)
GAD-7	129	5.12	5.01	218	6.29	5.07	-2.090 (.037)
UCLA	119	12.08	13.71	215	18.14	15.08	-3.628 (<.001)

DISCUSSION

- AYAs who desired support from a peer navigator reported poorer psychosocial wellbeing.
- In contrast, AYAs interested in becoming peer navigators reported better psychosocial wellbeing, but more anxiety and loneliness than those not interested being navigators.
- Institutions should consider screening patientreported outcomes to identify those in need of navigation and ensure navigators are provided with support and opportunities to connect with fellow peer navigators.
- Findings from this study informed the development of a digital peer navigation program for AYA focusing on lymphoma, sarcoma, breast and testicular cancer (referred to as PeerNav[™]). An RCT of the AYA PeerNav[™] program is underway.

REFERENCES

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