

A mixed-method community pilot of a digital social care referral platform for individuals with cancer

Abstract

Background

Over 8 million patients experiencing cancer face Social Determinants of Health (SDoH) challenges such as food, housing, and financial insecurity that directly impact their health outcomes. While patients may participate in SDoH screening with their provider, it is not well understood if patients would conduct self-screening and act on referrals to community services.

Objective

We conducted a mixed-methods study to determine the feasibility and acceptability of a patient-centered digital social care referral platform, ConnectedNest.

Methods

We recruited 14 cancer-focused community-based organizations (CBOs) and 41 patients and caregivers affected by cancer to participate in a 3-month pilot study. Patients and caregivers used the application on their own mobile device. They completed an initial social needs assessment and were prompted to connect to organizations that could address their personalized social needs. We used a combination of platform usage metrics, user experience surveys, and participant interviews to understand the variation in how the platform was used and opportunities to strengthen design and implementation.

Results

Participants reported needs across 14 categories; the top 3 reported needs were physical activity, financial strain, and mental health. Using our social care referral platform, approximately 39% of participants were able to connect with local CBOs. Three topic areas emerged from the participant interviews highlighting that engagement in the technology. Participants reported that personal struggles identifying and connecting to CBOs for resources was a motivating factor for their participation in this study. They also identified that roles were important in determining who the technology was for. The third topic, identified by participants were the challenges throughout the referral process with ConnectedNest.

Conclusion

Our results show that participants will self-screen and connect to social care resources. This new design provides them with more agency, which could address needs and improve outcomes. Future research should examine this in clinical settings if social needs addressed through a patient-led approach improve health outcomes.