

WeCanConnect: Development of a Community-Informed mHealth Tool for People with Disabilities and Cancer

Susan Magasi, Jennifer Banas, Bruriah Horowitz, Judy Panko Reis, Kimberly The, Tom Wilson, David Victoson

Progress in Community Health Partnerships: Research, Education, and Action, Volume 13, Special Issue 2019, pp. 39-40 (Article)

Published by Johns Hopkins University Press *DOI: https://doi.org/10.1353/cpr.2019.0033*

➡ For additional information about this article https://muse.jhu.edu/article/730018

| Program In Conservative Headin Factorershops Research, Education, and Active |
|---|
| ADDITION TO A TAXABLE |
| A second se |
| THE R P WAS ADDRESSED. |
| Many as a present data as in some of these followed in the second se second second sec |
| B Reach Reactor International Security |
| R. Annuali, Andrew Weinferschler, Sanz Scatter & HeapPill Science Appendix |
| Canada and and and and and and and and an |
| Bran France |
| P. Therein Street a construction of the street for a street |
| B STATE STRUCTURE AND THE REPORT OF A DATE OF A DATE OF A DATE. |
| Applied State International Contraction Contraction Contraction |
| NETWORKS INTERPORT OF CONTRACT ON A DATA OF CONTRACT OF CONTRACTO OF CONTRACT OF CONTRACT OF CONTRACT OF CONTRACT. OF CONTRACT OF CONTRACT OF CONTRACT OF CONTRACT OF CONTRACT OF CONTRACT OF CONTRACT. OF CO |
| · Contraction of the second seco |
| NON-A-READ & COM LANS |
| With the second se |
| NATE OF STREET |
| (a) Specific Residue (a) Specific Approximate Specific Residue (a) Sp |
| The Art States |
| R. Samuel Constant Restance Section in the Association Science Scie |
| |
| termine . |
| and these of Parameters, State Space in Theory Society' |
| WHERE DO IN AND |

COMMUNITY POLICY BRIEF



WeCanConnect: Development of a Community-Informed mHealth Tool for People with Disabilities and Cancer

Susan Magasi, PhD¹, Jennifer Banas, PhD², Bruriah Horowitz, MPH³, Judy Panko Reis, MS, MA⁴, Kimberly The, MS¹, Tom Wilson, MS⁴, and David Victoson, PhD³

(1) University of Illinois at Chicago; (2) Northeastern Illinois University; (3) Northwestern University; (4) Access Living

What Is the Purpose of this Study?

- To explore the cancer care experiences of people with disabilities diagnosed with cancer to identify their unmet support needs and priorities.
- To describe the development of an mHealth cancer support tool that integrates people with disabilities and cancer's
 perspectives to address these needs and priorities.

What Is the Problem?

• Cancer care for people with disabilities is rife with uncertainty and obstacles, not only from disease and treatment-related sequelae, but also from its impact on disabling conditions and functional capacity, and a health care system lacking accessibility and disability competence. As a result, people with disabilities and cancer often have unmet informational and social support needs.

What Are the Findings?

- People with disabilities experience many barriers across the cancer care continuum, including a lack of accessible services and disability competent providers.
- As a result, people with disabilities may feel socially isolated and often do not have practical, evidence-informed advice on how to manage their cancer and their disability together.
- Peer support can mobilize strengths within the disability and cancer communities to bridge some of these gaps. mHealth tools for a smart phone, tablet, or laptop hold promise to deliver peer support intervention in an accessible and scalable manner.

Who Should Care Most?

- People with disabilities with cancer should be aware of the power of peer support to help them navigate the uncertainty and isolation in cancer diagnosis, treatment, and survivorship.
- Cancer care providers should understand the lived realities of people with disabilities and cancer, and tailor treatment plans and recommendations accordingly.
- Cancer support organizations and nonprofits should recognize disability as part of the human experience and provide inclusive, disability welcoming services and supports.
- mHealth and app developers should recognize people with disabilities as a potential beneficiary and consumer of their products and thus design products that are accessible and inclusive.

Recommendations for Action

40

- Cancer care facilities and providers must meet or exceed federal accessibility laws.
- Cancer care providers must be trained in disability competence as a part of their basic training and continuing education.
- People with disabilities and cancer should be encouraged to find peer support within both the disability and cancer communities.
- It is, therefore, essential that cancer support organizations embrace disability, whether preexisting or the result of cancer, as part of the human experience and ensure that their services are accessible, inclusive, and welcoming.
- Researchers should partner with members of the disability community to further understand and address the needs of people with disabilities and cancer.