

2019 Community Health Needs Assessment Community Engagement Summary



Kaiser Foundation Hospital
Woodland Hills Medical Center

Community Engagement Summary: What We Learned

Kaiser Foundation Hospital Woodland Hills

Overview

2019 Community Health Needs Assessment & Strategic Learning Questions

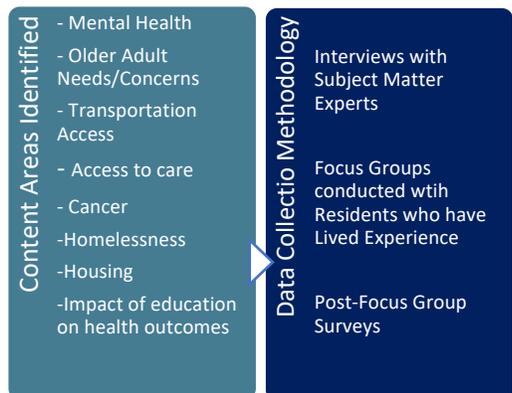
The purpose of the 2019 Community Health Needs Assessment (CHNA) was to obtain community member input to identify the greatest health needs in their community, identify current resources, as well as areas for improvement. Kaiser Permanente Community Benefit Managers and consultants were first provided with secondary data that was used to identify the areas of greatest need within the communities. Based on these data points, each region developed “Strategic Learning Questions” (SLQs) that guided the methodology to glean richer information about the greatest health concerns direct from community members and local-area Subject Matter Experts. An “At-a-Glance” overview of the SLQs is provided below.

Strategic Learning Questions – At-a-Glance

- 1) Why is the lack of higher education linked with a number of negative health outcomes in WH/WV?
- 2) What factors impede access to health care for low-income/Latino community members?
- 3) What factors contribute to poor health outcomes such as obesity and what assets exist in the community to address these health issues?
- 4) What factors are leading to the high stroke prevalence and death rate in WH/WV (particularly in the black community)?
- 5) What specific stressors or circumstances contribute to poor mental health in WH/WV?
- 6) What factors contribute to housing issues in WH/WV and how does this contribute to chronic homelessness?
- 7) What are the most important needs of older adults in WH/WV?
- 8) How does a lack of transportation impact access to care and health outcomes in WH/WV?
- 9) Why are cancer rates higher than average in WH/WV, and what resources does the community?

Engagement Process

A wide range of sectors were included during the Community Engagement Process (CEP) to ensure the most robust representation possible during the CHNA process. Input was obtained from two primary stakeholder groups: (1) Subject Matter Experts (SMEs) who had content knowledge about the issues identified via the SLQs and (2) community residents who lived within the boundaries of the Woodland Hills region who could speak to these issues.



Engagement Type	Total	# of Participants
SME Interviews	14	16*
Focus Groups	6	72
Post-Focus Group Survey	39	collected across 3 FGs

*Two of the interviews included 2 SMEs.

- › **Subject Matter Experts.** A total of 16 SMEs were interviewed to help answer the SLQs developed by the CB Manager. A series of tailored SME Interview Protocols were designed to address the various SLQs so that the



SMEs addressed the question(s) they were most knowledgeable about. SME's included Public Transportation officials, counselors working with at-risk and low-income youth and their families, education experts working in the Office of Education and local school districts, high-level management at NAMI, Public Health department representatives, law enforcement, and homeless assistance coordinator.

- › **Community Residents.** A total of six focus groups were conducted with community residents. Each focus group protocol was tailored to capture specific information relevant to the group that was convened. Focus groups were conducted with the following populations: older adult residents, Latino/Hispanic and Black community residents, and low-income residents. A post focus group survey was developed and collected to obtain the demographic information of the individuals in attendance and to be able to quantify the primary health concerns in a more standard manner.

Important notes regarding the layout and content of this report:

1. Information is organized based on the SLQs identified on page 1.
2. The level of detail and information included within each SLQ section will vary based on the information that was compiled through the community engagement process. Information gleaned through the process reflects the availability of subject matter experts, access to local residents, and lived experience with the specific subject matter.
3. The information presented in this document is not meant to be a comprehensive summary or compilation of available information about the specific topic or resources available to address each topic. This report is meant to reflect the primary themes and lessons learned from the rich data obtained through the community engagement process utilized to inform the CHNA.

Learning Framework Summary

Four Primary Concerns: Across all engagements conducted, the primary health concerns that emerged are highlighted below as key “take aways” along with a corresponding quote for each to help illustrate the sentiment across engagements.



Take Away #1: Housing Affordability

“Our greatest need is affordable housing; the high rent is making living in the area largely unsustainable. And when you look at housing issues in our cities, homelessness is the fastest growing issue.”

- Subject Matter Expert,
Oxnard Police Department



Take Away #2: Mental Health

“Mental health is a huge concern. Everyone has stressors in their life that impact their mental health. We need tools to cope that aren’t just medicine.”

- Focus Group Participant



Take Away #3: Obesity and Diabetes

“Chronic diseases like diabetes are a primary concern – they are the leading causes of premature death and highest contributors to health care costs.”

- Subject Matter Expert,
Public Health



Take Away #4: Quality Health Care is a Greater Concern than Access to Care

“I don’t feel like I get good care or even that our doctors care about us. They just want to get us out as fast as possible and move on to the next patient. Our system is broken.”

- Focus Group Participant

Post Focus Group Survey/Evaluations

Post focus group surveys/evaluation forms were collected at 3 of the 6 focus groups conducted, as surveys were not able to be collected at the 2 older adult focus groups or at the low-income focus group with Reseda residents. The information gleaned from these surveys provides a sense of the types of residents that participated in the process, as well as their primary health concerns. A summary of findings is presented below.

Survey Respondent Demographics		
Location (n=39)	Bethel AME Church (n=18)	46%
	Santa Paula Resident Group (n=13)	33%
	First 5 Parent Group – Oxnard (n=8)	21%
Age (n=37)	18 to 25	14%
	26 to 34	14%
	35 to 49	24%
	50 to 64	30%
	65+	19%
Gender (n=38)	Female	76%
	Male	24%
Race (n=37)	Black/African American	46%
	Hispanic/Latino	43%
	Mixed Races	5%
	Asian	3%
	White	3%

The below health concerns are ordered based on level of concern expressed by respondents.

Level of Concern with Specific Issues (n=39)*					
Health Categories	Not at all Concerned	Somewhat Concerned	Neutral	Moderately Concerned	Very Concerned
1. Cancer	11%	8%	3%	18%	61%
2. Heart disease (stroke, heart attack, other)	8%	13%	5%	34%	40%
3. Diabetes	8%	14%	8%	16%	54%
4. Obesity	13%	15%	8%	18%	46%
5. Mental health and mood (depression, anxiety disorder, suicide, etc.)	18%	12%	12%	18%	39%
6. Bone and muscular health (arthritis, osteoporosis, etc.)	17%	9%	17%	23%	34%
7. Alzheimer's or dementia	19%	17%	14%	29%	22%
8. Mobility (ability to walk and easily move around as desired)	14%	14%	22%	22%	30%
9. Oral Health	10%	23%	21%	21%	26%
10. Traffic accidents/fatalities	13%	24%	13%	24%	26%
11. Substance abuse (illegal drug use/addiction)	35%	14%	14%	14%	24%
12. Sexually transmitted infections (chlamydia, HIV, HPV, genital herpes, gonorrhea, etc.)	45%	11%	14%	6%	25%
13. Other (n=10) "other responses provided" (n=4): affordable insurance, domestic violence, healthy food, high blood pressure.	0%	20%	10%	0%	70%

*Due to rounding, some percentages do not total 100.

Lack of Higher Education Linked with a Number of Negative Health Outcomes in Woodland Hills/West Ventura

Main Theme: There are Several Challenges to Obtaining Higher Education

When discussing the correlation between lack of higher education and greater negative health outcomes, **the underlying issues of WHY someone might not obtain higher education are important factor to consider.** Among the primary themes mentioned are:



1. High cost of education

Not surprisingly, a major barrier to obtaining higher education is the ever-increasing cost of education. This issue impacts low-income residents most predominantly. However, the rising cost of education also limits the options available to middle income families.

2. Need to focus on family responsibilities

Some youth do not seek higher education because they need to focus on meeting more fundamental daily needs before they can consider going to college, despite having a desire to seek higher education. For instance, both SMEs and community residents discussed how some youth have to help support their families, and thus going to college after high school is not an option. This is illustrated by a quote provided by counselors from the BreakThrough Program, located in the Conejo Valley Unified School District, that serves at-risk and low-income youth who stated, “some of the kids we serve need to work right after college in order to support themselves or their families. They are born into a cycle of needing to work and higher education isn’t always an option for them. We see this primarily in lower socio-economic status families and/or generational poverty. Students that grow up in lower poverty households are expected to work much sooner.”

Additionally, among low socio-economic and Latino families, the percentage of youth having to help with taking care of their younger siblings or other responsibilities is much higher. During a focus group conducted in Santa Paula, a resident echoed this sentiment when she shared, “It’s hard for me to focus on college. I’m a senior in high school right now and I have to help take care of things around the house, so I don’t even put as much effort as I should to look into options for college. I have to help take care of my siblings and clean, while my mom is working several jobs. I think college is important and I’d like to go, but it might not work out for me because of other obligations.”

3. Lack of role models or knowledge about going to college

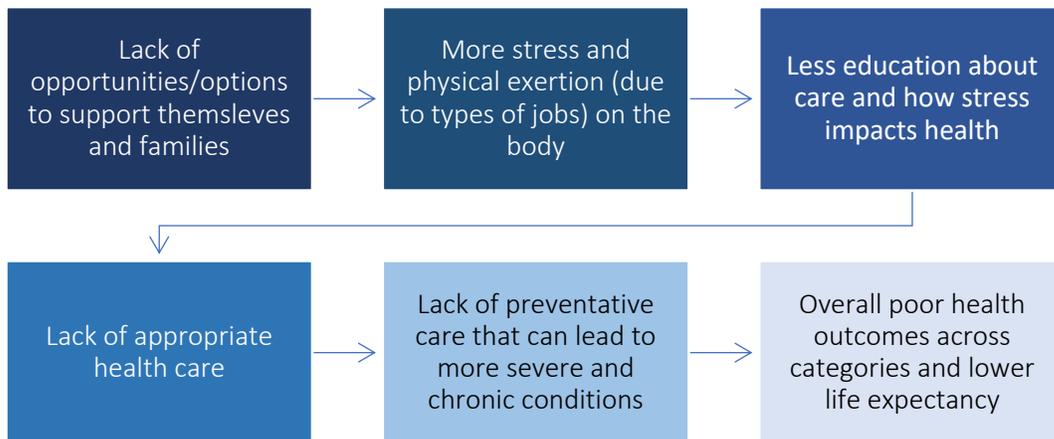
Subject matter experts discussed how the lack of role models has a large impact on youth’s beliefs about their own ability to attain higher education. “Students who don’t have those examples may not be pushing themselves as much and often think college is out of their reach.” Additionally, certain students struggle with understanding the process and all that is involved with seeking higher education, because their parents or caregivers do not understand the system. As one SME stated, “we see families who don’t even know how to navigate the process or help their children prepare for college. These parents do not know what steps their child needs to take, so then it all falls on the child to ensure they are doing all the right things. If these children are not self-motivated to go to college and seek out the resources they need to engage in the process, they likely will not go.”

4. Unstable home environment

Youth who are in the foster system or in verbally/physically abuse households may have trouble getting through middle and high school, which will result in a lesser likelihood of attaining higher education.

› Negative Health Outcomes Stemming from Lack of Higher Education

A wide range of SMEs were asked to discuss how a lack of higher education impacts health outcomes. SMEs described a sequential process (pictured below) of how a lack of education can lead to overall poor health outcomes.



Identified Areas of Opportunity

› Provide Workshops Outlining the College Admission Process to Parents & Caregivers

All SMEs described that family support and engagement is a primary predictor of seeking higher education. Thus, one of the primary areas for growth would be to address this issue among families that do not understand how to navigate the system. It would be beneficial to offer workshops specifically for parents that outline the college application process so that they can engage in the process with their children. The majority of interviewees and focus group participants engaged in this process were not aware of existing resources. Those that were aware indicated a need for more resources or greater marketing of resources. These workshops could be provided to parents when their children enter middle school or made available to all parents who are interested in learning more about this process.

Additionally, given that immigrant Latino families might experience the most difficulty with this issue, it would be beneficial to tailor content to meet the needs of these families and describe how the education process is different from what they may be used to in their country of origin.

› Engage Youth in Conversations about College at an Early Age

Educate youth about college at a young age. "Have guest speakers come and speak to the kids at middle schools, so all kids are able to have role models and examples of people who went to college. Students are more likely to attain higher education if it's a less daunting experience. It's important to address all areas."

"To improve educational attainment and higher education, we have to level the playing field. It's important to expose all students to their options at an early age so that they have a bigger perspective about what's available to them. And it's also imperative to include parents who don't know how to navigate the system, to teach them about the process and how they can support their children."

Factors that Impede Access to Health Care for Low-Income/Latino Community Members

To identify factors that impede access to care for low income/Latino Community members, 2 Public Health officials were interviewed and 3 focus groups were conducted with low-income/Latino community members. Emergent themes are presented below. Of note, quality of care was reported by residents to be a larger issue than access to care. Meaning, residents did report being able to generally access care when needed, however, the larger concern was the quality of care provided. Residents reported issues with their interaction with doctors, receptionists, long wait times to be seen by doctors, difficulty scheduling appointments, and long referral times for specialty care.

Cost

- "The health care system is expensive."
- "Not all low-income individuals are insured."
- "How the health insurance is set up seems unjust. We are paying our health insurance through our employer or covered CA and we still need to pay our co-pay."

Quality of Care

- "It's difficult trying to find the best appointment time when you have kids and a job."
- "Have to wait a really long time to be seen by the doctor."
- "It's take forever to get an appointment scheduled, so I'll try natural remedies."
- "Doctor rushes to see you."
- "Long wait times for referrals."

Factors Contributing to Obesity and Stroke

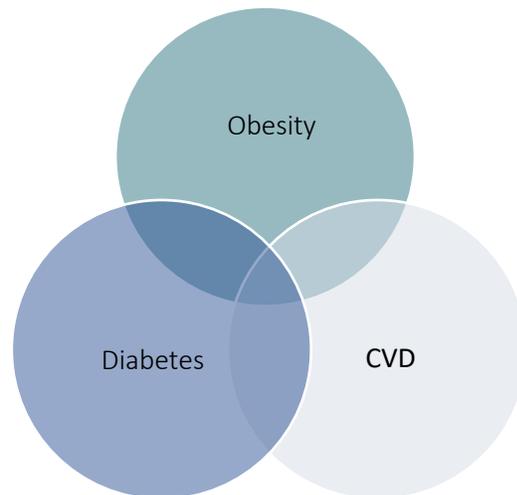
The following two SLQs are combined in this section, as the two diseases in question are correlated: (1) what factors contribute to poor health outcomes such as obesity and what assets exist in the community to address these health issues? and (2) what factors are leading to the high stroke prevalence and death rate in WH/WV (particularly in the black community)? To address these questions, engagements were conducted with Public Health Officials and Epidemiologists, as well as community residents (i.e. Latino/Hispanic and Black residents) who were able to speak to these issues.



The Link Between Obesity, Diabetes & Stroke

Given the strong correlation between diabetes and cardiovascular diseases (CVD), including stroke, it is important to look at these chronic health conditions together.

Obesity has been shown to be linked with both diabetes and CVD. Additionally, research has shown that individuals with diabetes are at an increased risk for CVD.



Service Area is Seeing Increased Trends in Obesity and Stroke

Obesity

- Increases in adult obesity
- Increases in child obesity (especially in Santa Paula and Oxnard)
- Children whose moms are obese during pregnancy are more likely to be obese

Stroke

- High numbers of African Americans who had a stroke and died within the area in 2017
- African Americans as a whole are disproportionately affected by chronic diseases

Factors Contributing to Poor Health Conditions Impacting the Likelihood for Onset of Obesity, Diabetes and Stroke

Race/Ethnicity

- "African Americans are vulnerable to strokes in particular. As a whole, they are more likely to be overweight and obese and more likely to engage in rough physical activity, which are all risk factors for stroke."
- "This is an area we need to do more outreach in and have started to collaborate more with local churches."

Environment

- "Some communities don't have sidewalks or streets that are conducive for walking or exercise."
- "Don't feel safe taking my kids to the park, they are often filled with homeless people and in some areas gang members."

Access to Health & Affordable Food

- "Access to healthy affordable food is a primary concern. Lower income communities aren't going to buy expensive fruit when they have a limited budget and can get less healthy food at a much lower cost."
- "Even for non low-income families, paying for expensive food takes its toll on the family with the high cost of living to factor in as well."

Low Income Status

- "Lower wage earners tend to have multiple part time jobs, meaning they don't have flexibility. Having multiple jobs to make rent won't give you much time to develop healthy habits or go on a run with your family."

Available Resources Identified through the Engagements

While there are likely many educational programs and health resources offered throughout the Woodland Hills and West Ventura areas the below resources were specifically mentioned by interviewees.

› Provided through the Public Health Department

Obesity. Have a nutrition education program that works primarily within the school district, doing farm to table demonstrations on healthy eating, educating students, and hoping that this may trickle down to the parents. The Public Health Department offers a Woman, Infant, and Child Program that provides supplemental food assistance in the form of coupons to pregnant woman and mothers who have children between the ages of 0 – 5. However, there is low utilization for these resources, as the feedback has been that women do not want to be on file for receiving public assistance, especially now during the current political climate. Additionally, a Chronic Disease Prevention Program is available that provides exercise classes and nutrition demonstrations. This program collaborates with school districts and conducts health screenings in nontraditional settings like grocery stores.

Diabetes. Several diabetes programs are offered in many communities, including the Department of Public Health, the YMCA, and other local community organization.

Stroke. The Department of Public Health operates a triage system through Emergency Medical Services with designated primary care facilities for stroke victims, that works to ensure stroke patients receive the care they need in a timely manner. They also provide brain image reports to the hospitals so that patients get needed care. In regards to stroke prevention, there are several exercise classes available for residents that work to prevent stroke and fight obesity. Public Health community nurses also provide one-on-one education about proper nutrition and physical activity. Additionally, Chronic Disease Prevention and Treatment workshops are offered at different locations across the San Fernando Valley and Ventura.

› Opportunities for Improvement & Recommendations

Education and Outreach. The primary recommendation across engagements was to increase awareness about the issue and provide education about how to create healthy nutritious meals. For the communities that are at greater risk for obesity and diabetes, like the Latino/Hispanic community providing them with the tools to lead a healthy life style is imperative. To be most effective with messaging, it will be important to develop educational campaigns that will resonate with the community. Research has shown that the use of “Fotonovelas” to present public health-related information has had positive outcomes.

Stressors and Circumstances that Contribute to Poor Mental Health in Woodland Hills/West Ventura

In order to address this topic, interviews were conducted with 2 Public Health officials, 1 NAMI official, and the topic was discussed across all 6 focus groups conducted.

Reasons for Mental Health

Economic Pressure/Cost of Living

- "Daily stressors of life are leading to more mental health issues."
- "The cost of living creates anxiety."

Cyber Bullying

- "There is an increase in the level of cyber bullying among our youth that leads to anxiety, depression, and overall bad mental health."

Expectations to Succeed

- " In terms of our young people, they have way too much pressure on them to succeed and to be on the fast track to success. As a society we tell them that if they don't stay on that fast-track that they'll never have the opportunity to be happy."

Substance Use

- "We see that substance use can perpetuate mental health conditions."
- "Substance use has a strong link to suicide."

Trauma

- "We see the impact of generational trauma on mental health, with parents and grandparents with unresolved mental needs. The family system as a whole is then impacted, which directly funnels down to the child. Some children are more resilient than others, but it still impacts them."

Factors Contributing to Housing Issues in WH/WV and How this Contributes to Chronic Homelessness

Number One Reason for Housing Issues = High Cost of Living

› High Rent and Cost of Living

The high cost of rent and cost of living in the area was identified as the primary source of concern across all individuals engaged with during the CEP. Southern California has one of the highest rent/mortgage rates in the country and a rising cost of living. It is becoming increasingly difficult to purchase a home or rent an apartment in a safe and secure neighborhood. This is a primary area of concern for all residents living in the area.



Homelessness & Chronic Homelessness

› How is this Defined?

There are various definitions for homelessness and chronic homelessness, however, the definitions provided by Vulnerable Populations Deputy working with this population are:

Homeless. Someone who is living in an area not meant for human residency. Also, someone who doesn't have legal tenancy, which includes people living in a storage unit, an RV, hotel, outside space not meant for human residency, and individuals who are couch surfing (i.e. sleeping on different friends' or families' couches).

Chronic Homeless. Someone who has been homeless for over a year and is using/accessing a majority of the resources for homeless individuals.

Current Trends in the Homeless Population

- › Elderly Anglo women over the age of 55
- › Women with children
- › Veterans
- › Individuals newly released from prison/jail

› Barriers faced by Homeless Individuals

Lack of affordable housing options. Another barrier faced by the homeless is the lack of available housing and affordable housing.

Ingrained routines. One primary concern among the chronically homeless is that they have been homeless for so long that it has become a way of life for them and breaking that chain can be difficult. People establish their routines and find a place to sleep and where they spend their day to day. It can be a huge hurdle working to address these issues with chronically homeless individuals.

Unpredictability among certain homeless populations. In contrast to the barrier mentioned above, the lives of homeless individuals can also be very unpredictable from day to day. It is also difficult to keep track of certain individuals, making it difficult to provide services.

› How can this be Addressed?

Working to alleviate homelessness in the area is a complicated problem that requires the input of different agencies with different skill sets. The experience of Vulnerable Population Deputies working with the population has been that "every single case and every single person is different. To address the chronically homeless and homeless overall, you have to approach it from different sides." Therefore, there is no one solution to

address this issue, given that the reasons for homelessness vary. This large scale and complex problem will need to be viewed from various angles for progress on the issue to be made.

› **Known Resources Among SMEs and Focus Group Participants**

While many additional housing resources exist within the Woodland Hills/West Ventura area, below outlines the primary resources identified by individuals engaged in the CEP.

Vulnerable Population Deputies and Officers. The Ventura County Sheriff's Office and Oxnard Police Department have designated Vulnerable Population Deputies and Officers that work specifically with the homeless population in order to provide them with necessary resources.

Ventura County Health Care Agency. The health care agency runs a program called One Stop that provides services to individuals who are close to being homeless or are homeless.

Salvation Army. A charitable organization that provides aid and resources to homeless individuals.

Homeless Management Information System. Federal database that tracks service provision among homeless individuals. The only caveat with this system is that it is not accessible to law enforcement entities, which would be beneficial for tracking the local homeless population and service provision.

Lutheran Social Services. Faith based organization that provides services.

Manna Conejo Valley Food Bank. Food resources for individuals in need.

Not in My Back Yard: Connecting the Divide

- › **NIMBY-ism.** A common theme that emerged through the CEP process was a dissonance between the identification of the increasing homeless population and the need to provide these individuals with services, while at the same time believing that the population is dangerous and makes the community less safe. One SME in particular spent a great deal of time discussing the stigma around homelessness, during which the concept of "NIMBY-ism" (i.e. not in my back yard) was brought up. Essentially, NIMBY-ism reflects an opposition to developments in one's own neighborhood, including things like shelter for homeless individuals. The general consensus among the population is that, while homelessness is an issue and homeless individuals require a place to stay, there is also general fear and hesitation in moving homeless populations near residences. To properly address the increasing homeless population, this concept will need to be addressed with local residents.

Older Adult Needs and Transportation Concerns

The following two SLQs are combined and will be described together in this section: (1) what are the most important needs of older adults in WH/WV and (2) how does a lack of transportation impact access to care and health outcomes in WH/WV? To address these questions, 2 focus groups were conducted with the older adult population and interviews were conducted with the Ventura County transportation commission, and a former board member of the Ventura County Area Agency on Aging.

Most Important Needs & Concerns of Older Adults

Safety

- "Safety. Our sidewalks are terrible, the drivers don't pay attention to pedestrians."
- "We need crosswalk lights that last longer. I have a hard time crossing the street in the allotted time."
- "Fear of falling is an important concern."
- "The sidewalks are unsafe and aren't easy for all kinds of people who have walkers."

Affordable Housing for Seniors

- "There are lots of new developments in the west valley, but they are all luxury homes. Housing is not affordable."
- "More senior housing. There's more camaraderie."
- "Senior housing is helpful when living on limited income."
- "More section 8 housing for seniors."

Transportation Options

- "Better bus service."
- "ACCESS is good, but it's always late and then you have to reschedule the doctor appointment."
- "Make it easier to get ACCESS and more affordable bus transport."

Addressing Co-occurring Conditions

- "Among older adults there are many co-occurring conditions that need to be addressed."

Asthma/Air Quality

- "I have asthma, I got it as an adult, but when I moved here it got much worse because of the bad air quality."
- "The air quality here is really bad."

Medication Reconciliation

- "Seniors often have multiple doctors and may be hospitalized with multiple medications. It's often unclear to them what to take when. Additionally, the print on the bottles is very small, making it difficult for seniors to read."

Key Themes: How Lack of Transportation Affects Access to Care & Health Outcomes

The issue of lack of transportation only arose as a concern during the older adult focus groups. Other resident groups did not bring up or discuss transportation issues. Among the older adult residents, the following concerns were discussed about transportation.

› Having to reschedule doctor visits

Most of the seniors present at the focus groups indicated that they can no longer drive themselves and rely on public transportation to get to where they need to be. Many reported using ACCESS, however, that service often arrives late, forcing seniors to have to reschedule their doctor's visits. Seniors also shared there is a lack of affordable public transportation options that make it difficult for them to get out. Another consideration is that although some cities offer dial-a-ride, it is a curb-to-curb service so the person requesting the ride has to be able to make it from their home to the curb, which isn't always easy for someone with mobility issues who doesn't receive assistance.

› Increased isolation among Seniors

Seniors tend to be a more isolated group and are at risk of suffering from depression because of it. Most of the seniors present at the focus groups indicated that they no longer drive themselves and rely on public transportation to get to where they need to be. If they live alone, this makes it difficult for them to be social and interact with others.

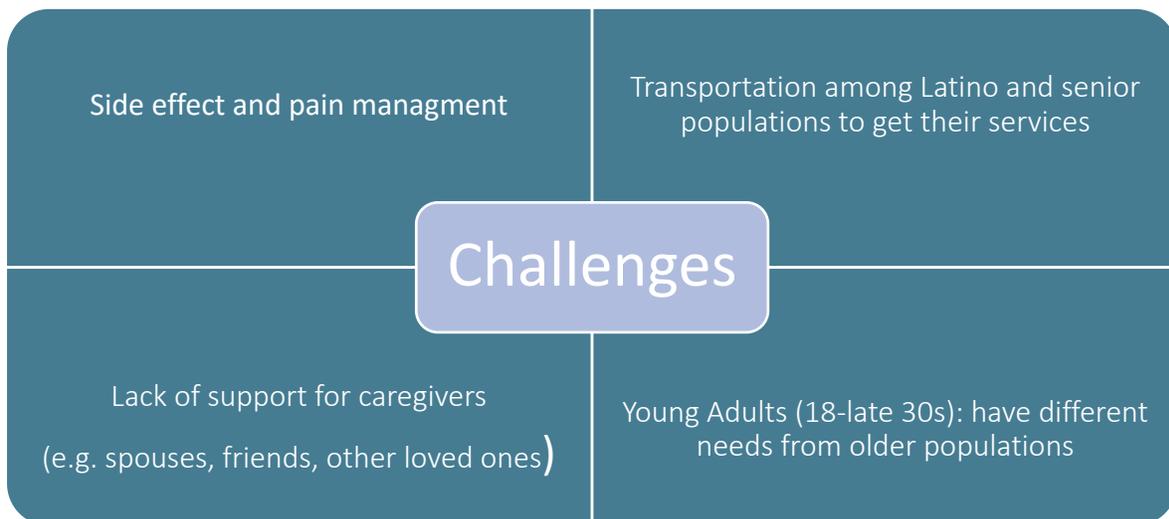
Contributing Factors for High Cancer Rates in Woodland Hills Area

Data have indicated that cancer rates are higher than average in the Woodland Hills area, which is likely primarily driven by the high older adult population in this region. To further understand contributing factors, concerted efforts were made to speak with local experts who could specifically address *why* cancer rates are higher than average in the service area. An expert who could speak to the specific contributing factors was not able to be accessed during the community engagement process, however, an expert who provides support to cancer patients and their families was interviewed. This individual provided valuable information that illustrated the unique barriers faced by cancer patients, available resources, and community concern around cancer.

Concern Related to Cancer

Across nearly all resident engagements conducted, cancer was among the primary concerns identified. Focus group participants shared stories about family members and friends who had been diagnosed with cancer and how the disease is cause for concern; “cancer is everywhere, there is not one person who hasn’t been impacted by this terrible disease. Either a loved one has been diagnosed with it or they themselves have it.” Discussions also ensued about how participants wished doctors engaged in more frequent cancer screenings.

Challenges Experienced by Cancer Patients and their Caregivers



Community Resources

- › **Cancer Support Community.** The primary support identified during the engagement process was the Cancer Support Community. This agency's service areas include the west side of the San Fernando Valley all the way up to Santa Barbara and provides support and resources to anyone with cancer, cancer caregivers, children with pediatric cancer, and children whose parents have died of cancer.
 - › This agency provides support groups, education workshops, and mind-body classes to people with cancer to proactively get involved in their recovery; additionally, yoga, meditation, and Zumba classes are provided free of cost to members.
 - › Specific cancer support groups include: brain, prostate, gynecological group, and multi-cancer support groups. These support groups are an important to the cancer continuum of care, as the trauma of having cancer can lead to mental health issues.