

ESTABLISHING STANDARDS FOR INTEGRATED CANCER CARE FOR PEOPLE EXPERIENCING HOMELESSNESS: A DELPHI STUDY



cancerless

Cancer prevention and early detection among the homeless population in Europe: Co-adapting and implementing the Health Navigator model



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BACKGROUND

Target population	People experiencing homelessness (PEH) face significant barriers to accessing high-quality cancer care (Asgary, 2024).
Cancer care delivery problem	Despite the growing recognition of the need for integrated cancer care for PEH (Jeleff et al., 2024), no standardized framework currently exists.

METHODS

A Delphi study gathered expert consensus on integrated cancer care standards for PEH. The process began with a rapid literature review of six databases, focusing on prevention, screening, treatment, and palliative care for PEH, resulting in the inclusion of 8 relevant papers to refine the standards. The Delphi survey involved 146 experts in social care, healthcare, and NGOs across the EU, with 34 participants providing input.

The literature review highlighted the benefits of integrated cancer care for people experiencing homelessness (PEH), such as better access to preventive services, higher screening participation, and improved treatment outcomes. The Delphi process established 11 refined standards for cancer care, validated by expert feedback, and included six additional innovative suggestions. Concerns about feasibility and overlaps with existing initiatives were raised and addressed in revisions. The final standards stress the integration of healthcare and social support, the value of peer-to-peer networks, and the necessity of anti-bias training for providers.

RESULTS

11 standards covering cancer care for PEH

CONCLUSIONS

Integrated care	These standards advocate for collaborative models addressing medical and social determinants of health, particularly in palliative care.
Health inclusion	Their implementation promises to close gaps in cancer care disparities for PEH and improve health equity.