

# NCONN 3rd Annual Conference

## Faculty Spotlight: Harold Freeman



Harold P. Freeman, MD, FACS, founded the concept of patient navigation and serves as an NCONN Board Advisor. He started the first Patient Navigation program in Harlem, New York, in 1990. He is now the president and founder of the Ralph Lauren Center for Cancer Care and Prevention in New York City, which includes the Harold P. Freeman Patient Navigation Institute. Freeman will be giving the Welcome Address at the 3rd Annual NCONN Conference, which will take place September 8-10 in San Diego, California. Here is a closer look at his extraordinary life.

### A Man With a Mission

At 77 years of age, Harold Freeman covers a lot of territory. He works every day, plays tennis, and travels frequently—often as an ambassador for the patient navigation concept he pioneered. During his storied career, Freeman served as president of the American Cancer Society (ACS), which named an award after him. He met 5 US presidents, including 3 whose cancer panels he chaired. He has also worked alongside champion cyclist and cancer survivor Lance Armstrong and other celebrities. In fact, Freeman is so well known that President Barack Obama remembered the first time he met Freeman better than Freeman remembered meeting him.

It was in New York City, right before the 2008 Democratic primary, when Freeman met with the future president during a campaign stop. “He had come out of Chicago, and Lance Armstrong and I were meeting with him because Lance had arranged a meeting and brought me along,” said Freeman. “He shook my hand, and he said he’s glad to meet me again.” Freeman told the presidential candidate that he could not recall meeting him previously. “Oh, yes,” [Obama] said. “We met before. I came to hear you speak and I liked what you said.”

What then-Senator Obama liked hearing was most likely the argument Freeman has made consistently throughout his career: Cancer patients, no matter what their income, should have access to the medical advances that can prolong and perhaps save their lives. To that end, Freeman pushed the envelope on administrative rules to set up a free breast cancer clinic at Harlem Hospital in New York City. He also convinced Hugh Carey, New York’s governor at the time, to fund screening centers for poor women. Later, Freeman developed the patient navigation concept, which has been used to help thousands of patients overcome barriers to cancer treatment.

Even more impressive than meeting presidents and working with celebrities is Freeman’s journey from a racially segregated boyhood in Washington, DC, to a career in which he emerged as a leading voice for eliminating disparities in cancer care for poor and medically underserved people and as an authority on the roles poverty and race play in healthcare treatment and outcomes.

But what was it that set Freeman on this path? “My early life of being a young, black person in a segregated city, living in poverty but surrounded by educated people, was really the set of ingredients that led me to do what I did,” he told *Oncology & Biotech News*. “The experience of growing up in a world that was unfair taught me that social injustice should not be tolerated, [going] beyond race...I came out of it with a feeling that I needed to be a champion for social justice for everyone.” Freeman emphasized that none of this left him bitter. “I ended up with an enlarging experience,” he said.

Freeman’s beliefs were framed by a sense of pride and responsibility stemming from his family history. His great-great-grandfather was a plantation slave in North Carolina who bought his freedom in 1838 with \$3000 saved from carpentry work done on the side. One great-granduncle graduated from Harvard Dental School, becoming the nation’s first black dentist. Like Freeman, his grandfather was a physician.

“I’m looking at an ancestor who came out of slavery and raised a family, where his son became a dentist and owned a home in Washington, DC, by 1845, 7 years after coming out of slavery,” Freeman said, explaining where he gets his inspiration. “If he did that, I mean, I’m challenged to do a lot more. So that’s a good thing for me to think about.”

Freeman was 13 when his own father—who put himself through law school by working extra shifts at night—died of testicular cancer. His mother, who was a schoolteacher, struggled financially to raise her 3 sons. Schools were still segregated when Freeman was growing up, but he was able to attend Dunbar High School, an academically elite institution for black students. He also earned a scholarship to The Catholic University of America, where he was a championship level tennis player.

After obtaining his medical degree from Howard University in Washington, DC, he went to New York to train in cancer surgery at the renowned Memorial Sloan-Kettering Cancer Center—and to work in the predominantly poor and black community of Harlem, where he believed he could make a difference.

He discovered that all too often he was unable to put his advanced oncology training into use, finding many of his patients too ridden with cancer at their first appointment. “That drove me to try to understand the meaning of poverty and race and how to disentangle the meaning of race from the meaning of poverty,” he said.

Freeman’s tenure as president of the ACS from 1988 to 1989 helped him realize that the connection between poverty and lack of access to care he observed in Harlem was universal, regardless of race or location. “I was seeing the universality of the meaning of being poor and the combination of being poor and having a lethal disease,” said Freeman.

Today, Freeman is happy to see the growing popularity of the patient navigation concept he pioneered, which now often encompasses even those patients with financial resources and insurance coverage. “If there’s human benefit from navigation, then let it work, irrespective of whether it’s for rich people or poor people,” Freeman said. Calling the lack of access to timely, quality care a moral issue in our society, Freeman added that he considers the most important use of navigation remains helping the medically underserved—until we no longer have medically underserved patients. And that, said Freeman, will always be his foremost goal.