Partnering with African American Breast Cancer Survivors to Create a Media-Based Breast Health Intervention

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Background

On a national level...
- Breast cancer mortality is highest among ethnic minorities, the poor and the underinsured.
- Medically underserved women have lower rates of routine screening mammograms.

African-American women...
- Are more likely than any other ethnic group to present with a late stage breast cancer at initial diagnosis.
- Face a significantly higher risk of dying compared to women in other ethnic groups.

Numerous factors have been identified as contributing to the delay in time to seek medical care, including:
- Access to care, distrust of the medical profession, experiences of discrimination, health beliefs, religiosity, spirituality, and other factors.

Milwaukee, Wisconsin...
- Consistently rated one of the country’s most segregated large metropolitan areas for African Americans in the United States.
- African American women living in Milwaukee County have the highest breast cancer mortality rate when compared to women of other ethnic groups in the county.
- Milwaukee has suffered deindustrialization, with segregated urban blacks disproportionately affected as jobs and the tax base suburbanized.

Objectives

First, to identify key knowledge, attitudes and behaviors related to breast screening practices among low-income African American women living in central Milwaukee. Next, to create a documentary film weaving together the wisdom of breast survivors around these key themes.

Methods

We conducted a community-based participatory research (CBPR) project using focus group methodology.

We partnered with four central city African-American churches to recruit 84 women from our target population (nine zip codes): Under- and uninsured African-American women residing in Milwaukee’s central city.

We conducted 8 focus groups - querying these domains about breast cancer knowledge, attitudes and behaviors:
- Screening (self exam, clinical exam, mammography)
- Barriers to participating in screenings
- Barriers to relative surveillance
- Strategies to improve screening behaviors

Focus group discussions were audiotaped, transcribed verbatim, an analyzed using thematic content analysis procedures.

Results

Content analysis revealed three prominent themes: (1) knowledge and behavioral barriers to routine screenings (for example, generational differences in attitudes about touching one’s breasts or having a stranger touch one’s breasts); (2) barriers related to the health care system (for example, concerns about repeat delayed appointments due to health systems problems); and (3) barriers to relative surveillance (for example, little to no outreach to family members in cases of premenopausal breast cancer).

Documentary: Sharing the Wisdom: the Legacy of Breast Cancer

Segment Titles:
- Reactions (to a cancer diagnosis)
- Early detection
- Family history (and genetic counseling)
- Body Image (breast removal & reconstruction)
- Knowing your options
- Support systems (family, friends, faith communities)
- Words of wisdom

Conclusions

- Widely disparate environmental and socioeconomic contexts mean that not every woman has the same opportunity to initiate or sustain optimal screening practices.
- While breast health education is an essential part of addressing breast cancer disparities, our project reinforces the need for additional research and interventions focusing upstream, particularly the need to improve physician-patient communication and health care system factors.
- Breast health education through documentary film, such as Sharing the Wisdom, can be a very powerful tool to complement other health promotion strategies.
- As a result of this study, we are partnering with an inner city community health center to trial the role of a navigator:
  - to assist women who make appointments for mammography,
  - to assist women with any recommended follow-up (such as ultrasound or biopsy),
  - and to connect women with a primary care physician and other social services.

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