REACHing Vietnamese-American Women: A Community Model for Promoting Breast Cancer Screening

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Vietnamese REACH for Health Initiative Coalition Vietnamese Community Health Promotion Project (Suc Khoe La Vang!)

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Background

- Vietnamese numbered 1.2 million in the 2000 Census and constituted the second most rapidly growing Asian population in the U.S.
- Most Vietnamese American women are immigrants and have limited English proficiency.
- These women have low rates of receipt for breast cancer screening.





REACHing Vietnamese Women: A Community Model for Promoting Cancer Screening

- Project Periods:
 - September 30, 1999-September 29, 2000 (Coalition/ Planning)
 - September 30, 2000-September 29, 2004 (Cervical)
 - September 30, 2004-September 29, 2007 (Breast)
- Study type: Community-based participatory research with a controlled intervention trial (quasi-experimental)
 - Intervention Site: Santa Clara County, CA
 - Control Site: Houston, TX
- Target population: Vietnamese adult women
- Health priority areas: Deficits in cervical and breast cancer screening and management





Vietnamese REACH for Health Initiative (VRHI) Coalition

Ngoc Bui-Tong, M.H.A., Chair

- American Cancer Society, Silicon Valley/Central Coast Region Unit
- Asian Americans for Community Involvement
- Blue Cross of California
- Community Health Partnerships of Santa Clara County
- Catholic Charities—Youth Empowered for Success (Y.E.S.) and John XXIII
- Indochinese Resettlement and Cultural Center, Inc.
- Kaiser Permanente
- Northern California Cancer Center
- Premier Care of Northern California Medical Group, Inc.
- Santa Clara County Public Health Department & Ambulatory Health Services
- Santa Clara Family Health Plan
- Southeast Asian Community Center
- Vietnamese Voluntary Foundation, Inc.
- Vietnamese Physician Association of Northern California
- UCSF Vietnamese Community Health Promotion Project
- 2 community representatives





VRHI Breast Cancer Prevention Action Plan Objectives

As measured by pre-test and post-test telephone interviews, by April, 2007 among Vietnamese adult women in Santa Clara County, CA:

- 95% will know that they should have a mammogram at least every other year
- 90% will have had a mammogram within the preceding 2 years
- 90% will have had at least one clinical beast examination within the preceding 2 years
- Screening clinical breast examination and mammogram rates will be significantly higher in the intervention community than in the comparison community





Phase 1: Development of VRHI Breast Cancer Prevention Action Plan

- Quarterly VRHI Coalition meetings
- Annual Coalition retreats
 - Revised vision and mission statements
 - Consensus on intervention strategies
 - Intervention planning
 - Data
- Annual Community Forums
 - Barriers to CBE and mammography
 - Feedback and approval of intervention strategies





Bi-monthly Coalition Meeting



Annual Retreat









Phase 2: Implementation of Community Action Plan

Targeting Patients:

 Media Campaign
 Lay Health Worker (LHW) Outreach

 Targeting Health Care System:

 Support of "Every Woman Counts!" CDC's Breast and Cervical Cancer Control Program

 Cross-cutting Intervention:

 Vietnamese Patient Navigator

 Targeting Physicians:

 Continuing Medical Education Seminars



1. Media Campaign

- Researchers created media strategy, events and media products
- Coalition reviewed strategies and products, gave feedback and final approval, participated in media products, and provided volunteer staff for the events





Media Campaign

 Television ads: produced six TV spots and aired on two Vietnamese-language stations



 Radio ads: produced six radio spots and aired on four Vietnamese-language stations

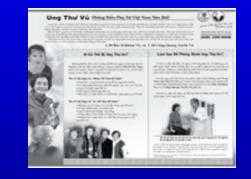




Print Media

- Print ads: produced 13 newspaper ads and placed on 7 newspapers/magazines
- Newspaper articles: produced and published six breast cancer-related articles









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Breast Cancer Booklet

45,000 breast cancer information booklets







Distributions of Media Products at

Health Fairs, Tet Festivals











Promotional Items

• 8,500 roses

• 7,500 calendars







2. Lay Health Worker Outreach (LHWO)

- Randomized comparative trial of LHWO in the context of a media campaign
- Community-based organizations recruited lay health workers, managed their work, and provided feedback to the Coalition
- LHWs recruited 1,100 Vietnamese women from their social networks (22 women/LHW).
- LHW conducted small group (3-10 women) education outreach activities for intervention group with delayed (after evaluation) outreach for control group.





Flip Chart







3. Support "Every Woman Counts" (EWC)

- EWC is California's implementation of the National Breast and Cervical Cancer Control Program.
- Encourage Vietnamese doctors to join EWC
- Make a list of EWC providers
- Advertise EWC 1-800 telephone number in our media campaign to refer woman to EWC program
- Advocate state support EWC program





4. Vietnamese Patient Navigator

- Aim: To help uninsured or underinsured Vietnamese-American women in Santa Clara County have access to Vietnamese-language breast cancer screening services
- Total 844 callers:
- 161 called for mammograms and clinical breast exam
- 191 called for Pap tests
- 370 called for breast and cervical screening
- 122 called for other information related to health





5. Continuing Medical Education (CME) Seminars

- Vietnamese-American women who see Vietnamese-American physicians (most of whom are male) are less likely to obtain breast screening tests.
- Goals of 2 CME seminars in 2006 and 2007 for Vietnamese-American physicians were to:
 - Update their knowledge
 - Encourage them to recommend and provide CBEs and mammograms
 - Promote culturally sensitive methods of educating and providing breast screening to these women
- Approximately 50 physicians attended each of 2 seminars in 2005 and 2006.





VRHI Breast Cancer Prevention Evaluation Plan: Cross-sectional Preand Post-Intervention Surveys

- Random dialing telephone survey in 2004 and 2007
 - Listed Vietnamese surnames (37) sampling
 - Harris County, Texas (control) and Santa Clara County, California (intervention)
- Eligibility
 - women
 - Age >18 in 2004 (this presentation include only those age 40+)
 - Age > 40 in 2007
 - resident of either county
 - self-identified as Vietnamese, Vietnamese-American, or Vietnamese-Chinese
 - if more than one eligible respondent in household, randomly selected one woman



Sample Sizes and Response Rates

	Unknown Eligibility	Eligible	Responded	AAPOR Response Rate
Pre-Control	941	2014	1005	39.9%
Pre- Intervention	800	1701	1004	47.5%
Post- Control	1128	1530	765	38.6%
Post- Intervention	1083	1511	838	42.7%





Sociodemographics

	Cont (HC)	Cont (HC)	Int (SCC)	Int (SCC)	Int Change vs. Control	
	Pre	Post	Pre	Post	Change	
Age (mean)	55.5	56.9	56.3	56.7	0.4 vs. 1.4	
Yrs. In U.S.	16.1	17.9	14.5*	16.5*	1.0 vs. 1.8	
% Poor/No English	58	64	58	68	10 vs. 6	
% < High school	48	49	47	49	2 vs. 1	
% Unemployed	54	53	33*	58	25 vs1*	
% Never Married	8	6	5*	8	3 vs2*	
% Below poverty	30	24	28	26	-6 vs2	
% w/ health insurance	73	72	82*	75	-7 vs1	



*p<0.05 for intervention vs. control comparison



Exposure to Vietnamese Language Media about CBE and Mammogram in Last 6 Months

	Cont (HC)	Int (SCC)	
	Post	Post	
Seen TV ad	31%	69%*	
Heard of radio ad	58%	81%*	
Seen newspaper ad	60%	78%*	
Seen newspaper article	43%	59%*	
Seen booklet	12%	38%*	
Seen calendar	9%	32%*	
Seen silk rose	6%	69%*	



* p<0.05 for intervention vs. control comparison



Clinical Breast Examination (CBE)

	Cont	Cont	Int	Int	Int. Change
	(HC)	(HC)	(SCC)	(SCC)	vs. control
	Pre	Post	Pre	Post	Change
Heard of CBE	74%	88%	76%	88%	12 vs. 14
Ever Had CBE	83%	86%	92%*	90%	-2 vs. 3*
CBE w/i 1 yr	59%	57%	73%*	69%*	-4 vs2
CBE w/i 2 yrs	74%	72%	84%*	80%*	-4 vs2



* p<0.05 for intervention vs. control comparison



Mammography

	Cont (HC) Pre	Cont (HC) Post	Int (SCC) Pre	Int (SCC) Post	Int. Change vs. control change
Heard of Mammogram	81%	84%	87%*	92%*	5 vs. 3
Ever had mammogram	85%	87%	92%*	92%*	0 vs. 2
Mammogram w/i 1yr	60%	57%	70%*	71%*	1 vs3
Mammogram w/i 2 yrs	74%	73%	83%*	84%*	1 vs1



* p<0.05 for intervention vs. control comparison



Other Breast Screening Measures

	Cont (HC) Post	Int (SCC) Post
Thought about getting CBE if never had one	35%	41%*
Ever asked doctor for CBE	35%	41%*
Doctor ever recommended CBE	69%	76%*
Thought about getting mammogram if never had one	59%	59%
Ever asked doctor for mammogram	40%	47%*
Doctor ever recommended mammogram	73%	81%*



*p<0.05 for intervention vs. control comparison



Conclusions

- Community-based participatory research to promote breast cancer screening among Vietnamese American women is feasible.
- Media campaign can reach Vietnamese American women with messages about breast cancer screening.
- The campaign encouraged women and doctors to discuss breast cancer screening





Conclusions

- Preliminary analyses showed no communitywide intervention effect on breast cancer screening outcomes.
 - The campaign may not have lasted long enough.
 - The baseline rates of screening were higher than expected in the intervention community.
 - Increasing rates of breast cancer screening in this community may require more direct outreach (such as lay health workers) rather than media-led campaigns.









LHW Flip Chart

UNG THƯ VÚ: NHỮNG ĐIỀU PHỤ NỮ VIỆT NAM NÊN BIẾT







LHWO Logistics

- Coalition recruited 5 community-based agencies.
- Agencies utilized social networks to recruit 50 Vietnamese lay health workers (10 LHWs/agency).
- Researchers and agency trained LHWs to conduct education outreach.
- LHWs recruited 1,100 Vietnamese women from their social networks (22 women/LHW).
- LHW conducted small group (3-10 women) education outreach activities for intervention group with delayed (after evaluation) outreach for control group.





LHWs small group session

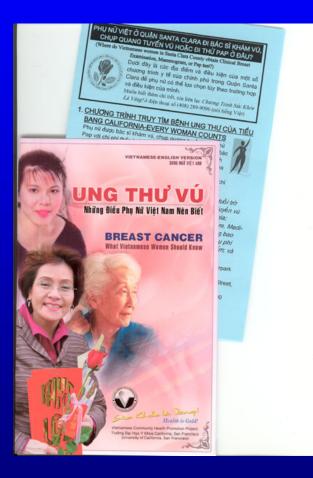






3. Support "Every Woman Counts"









Breast Cancer CME Seminars

 Approximately 50 physicians attended each of 2 seminars in 2005 and 2006.











VRHI Breast Cancer Prevention Evaluation Plan

- Pre-intervention (baseline) survey designed and conducted in 2004
- Breast Cancer Prevention Action Plan implemented 2004-2007
- Post-intervention survey conducted in 2007



