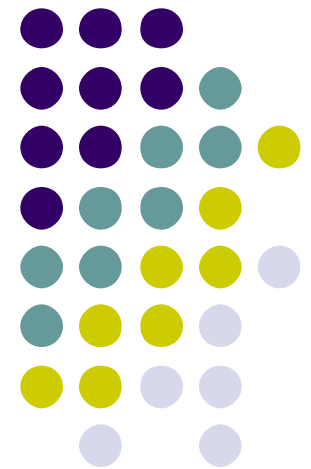


A Women's Navigators Program: Moving Breast Cancer Awareness from Margin to Center in African American Communities

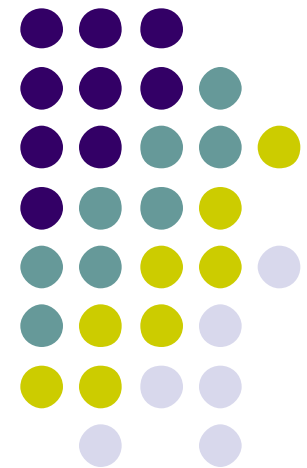
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Women's Navigators Program:

*Winning the Fight against Breast Cancer through
Training and Education*

Funded by:
Susan G. Komen Breast Cancer
Foundation, Greater Atlanta Affiliate
Atlanta 2-Day, It's the Journey
Foundation



Women's Navigators Program:

Winning the Fight against Breast Cancer through Training and Education



- Project Description

- Culture-specific breast cancer education program focusing on older low-income African American women.
- Located in the School of Nursing at Georgia State University.
- Originated in 2002 with the goal to reach 10,000 women in the metropolitan Atlanta area by 2010 with breast health education



Project Overview

- The project seeks to reach older African American women with:
 - breast health educational materials
 - information about mammography screening
 - Mammography resource sites
 - preventive education materials
- The project uses Women Health Navigators (lay health advisors) to distribute this information to older African American women who live in the Greater Atlanta metropolitan area.

Major Components of the Project



- Recruitment and Training of an Outreach Coordinator
- Recruitment of Community Leaders as Navigators
- One-day Training Program for Navigators
- Outreach to African American women in the Community
- Follow-up Activities
- Evaluation of Project



Study Goals

- **Overall Goal**

- To sustain the Navigators Program in the local community when external funding is over.

- **Three Objectives**

- To document the specific breast health messages that WHNs can provide.
- To dialogue with social institutions regarding ways to incorporate breast health/preventive education in their organizations.
 - Churches
 - Schools
 - Neighborhood Centers
 - Employment Settings
- To create policy around including Navigators as part of the infrastructure of social institutions.

Research



- Social Networks:
 - **NCI Funded Community-based Studies**
 - Witness program (Erin, et al., 1996)
 - Intervention in Beauty Salons (Forte, 1995)
 - Mail Reminder Education (Carney, et a., 2005)
 - Telephone Counseling (Messina & Grimson, 2002)



Breast Cancer Trends

- Incidence
 - Remained level from 1992 to 2000 among AAW.
- Mortality
 - Decreased significantly by 1.1% per year from 1991 to 2003 among AAW.
 - Death rates for African American women remain 37% higher than Caucasian women (*Smigal, Jemal, Ward, et al. (2006)*).
- By 2003 the same percentage of Caucasian and African American women got mammograms.
- The less educated are still the least likely to get a mammogram
- Decrease in mammogram utilization (*MMWR (2007), 56(03):49-51*).



Introduction

- Reasons for Continued High Mortality Rates in African American Women
 - Socioeconomic factors (*Lambert & Demesnes, 1996; Garza, et al., 2005; Kirsch, Jungebut, Jenkins, et al., 2002*)
 - Cultural/Ethnicity factors
 - Beliefs (*Holm, Fran & Curtin, 1998*)
 - Attitudes (*Phillips & Cohen, 1995*)
 - Access:
 - Living in marginalized communities (*Hall, et al., 2005*)

Marginalized Communities



- People and groups who are positioned in places that are far away from the resources they need such as hospitals, food and water, and schools.
 - People without healthcare resources
 - People who are socially excluded
 - People who experience inequalities in the distribution of resources and power.

(Hall, et al., 2005)



Conceptual Framework

- Marginalization Theory
 - A critical feminist nursing theory developed by Hall, Stevens, and Meleis, 1994, *Advances in Nursing Science*, 16(4): 23-41.
 - Concepts:
 - Voice
 - Power
 - Testimony
 - Differentiation
 - Hope



Purpose of Study

- To determine if Women's Health Navigators could serve as educational ambassadors/leaders for promoting breast cancer awareness and mammography screening in low-income African American communities.
- To determine if WHNs could sustain breast health messages in their respective neighborhoods and communities.



Research Questions

- What are the experiences of WHNs in promoting breast health in African American communities?
- What are the facilitators/barriers that WHNs encounter in promoting breast health in African American communities?
- What are the strategies that WHNs use in maintaining ongoing breast health messages and visibility in African American communities?

Methods



- Qualitative Study
 - To uncover the lived experience of WHNs who serve as community leaders in promoting breast health in African American communities.



Methods

- Data Generation Strategies
 - Focus group data
 - Face-to-Face interviews



Data Analysis

- Quantitative data – Descriptive Statistics
- Qualitative data – Content Analysis



Findings

- **Description of Sample**

- Quantitative Data

- Navigators (n = 20)

- Age Range 26-54 years; Mean Age 41.1
- Educational Level 100% - HS
 25% - College Degree
- Income \$25,000 - >\$75,000
- Survivors 30% (n=6)

Research Question #1: What are the experiences of WHNs in promoting breast health in African American communities?



- Three Themes
 - “Giving Back”
 - “Feeling Good about Self”
 - “Taking Responsibility”

Giving Back



- These comments mostly related to the Navigators having a sense of giving back and helping the community.
- Kara states:
 - “I really enjoy being a Navigator. It’s my way of giving back to the community. So many times people help you out with your problems, but seldom do you take the time to give back [and help someone else]. Sometimes we make excuses for not helping people out, but this is a good program and it makes me feel good that I can help somebody else.”

Feeling Good About Self



- Maryann states:
 - “We have learned a lot of information; some of the stuff [breast cancer facts] we can now break down so we can better help the women to understand the importance of getting a mammogram. This makes me feel good about myself when I can learn these difficult words...and information. We need more programs like this one; things are explained in plain English so people can understand what you are really talking about.”

Taking Responsibility



- Carolyn states:
 - “We got to begin to help our sisters understand that you can survive breast cancer. I am a three year survivor and I believe that we have to take the responsibility and show our sisters that they can beat this thing. It doesn’t mean you are going to die...now, you are going to have some trying and crying times, but you can get through it. And, I feel I have been blessed and it is my responsibility to get the word out..to let my sisters know they can beat this thing.”

Question 2: What are the facilitators/barriers that Navigators encounter in promoting breast health in African American communities?



- Themes:
 - Facilitators
 - “Knowing the places to go”
 - “Working Smarter and Being Organized”
 - Barriers
 - “Filling out the forms”
 - “Everybody doesn’t want to be bothered”
 - “Places [businesses] don’t understand what you want to do”

Knowing the Places to Go and Being Organized



- Jane states:
 - “One of the things that really helps me to give out the information is knowing the places to go and knowing your neighborhood. You have to know the places that will let you give out your information... Most places will let you give out the information especially if a lot of women shop there.”

Working Smarter and Being Organized



- Francis states:
 - “The only way you can get your women is that you work smart; you got to be organized in what you are doing. What I do is I get a group of women at church like women’s day or a health fair or whatever...some where between 30 and 50 women, then I get them to fill out the forms and then I give out the education packets. But, if you have to do it one by one, you will never get finish.”



Filling out the Forms

- Portia states:
 - “Most of the ladies don’t want to fill out the forms. They are eager to get the cancer information, but they do not like to give you that personal information, even when I tell them its for keeping up with the numbers we reach and we want share it with anybody; they still ask what are we going to do with it.”

Everybody does not want to be bothered



- Sally states:
 - “I am amazed that some women say they do not have the time to stop and get the [breast cancer] information; they don’t want to be bothered. They are rushing...they are too busy. They say they want the gifts that we give out, but they don’t want the education packet...they think you are going to ask them some personal questions, I guess.”

Places [businesses] do not understand what you want to do



- Janet states:
 - “A lot of places don’t understand what you want to do. They think you are trying to sell something or going to interfere with their sales...they don’t want you on their property...or they say that they have decided to support other breast cancer organizations...you really have to do a lot of explaining before they let you on their property to give out information.”

Question 3: What are some strategies that Navigators can use in maintaining ongoing breast health messages in African American communities?



- Themes
 - “Keeping up with your contacts”
 - “Staying committed”

Keeping Up with Your Contacts



- Sharon states:
 - “I believe that once you make your contacts you have to keep up with them. At church, I keep my contacts informed about what’s going on...that way the next time we want to have a meeting it won’t be so hard to get in.”

Staying Committed



- Ester states:
 - “The only way you can keep this program going is to stay committed...this is not a one time thing. For one thing you have to constantly remind the women that they need to get their mammogram every year; they need to get to know me and I need to get to know them. So, the next time the church has a health fair, they [women] will know who I am.”



Conclusions

- There are strong data to suggest that African American women can be reached with breast cancer information using WHNs.
- Navigators can serve as ambassadors that connect women with social institutions in their communities.



Conclusions

- Next Steps
 - Begin dialogue (focus groups---round table discussion) with the leadership of social institutions regarding ways to incorporate breast health/preventive education in their organizations.
 - Navigators
 - Social Institutions
 - Research should continue to focus on practices that connect women to the breast health resources in their respected communities.