# SOMAI WOMONS St I Calth Awaren

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## Introduction

may be as high as 60,000, as many are arriving in the state through secondary migration. Minnesota has the largest population of Somali immigrants estimate approximately 30,000 Somalis live in Minnesota. 1,2 and refugees in the United States. The most recent Community-based estimates indicate that the population data

appears to present breast cancer at an earlier age than the population of women as a whole, and tends to exhibit a more advanced cancer at the time of diagnosis<sup>3</sup>. Minnesota's Somali population because data are not It is difficult to determine breast cancer incidence in known is that the group identified as currently available for specific sub-populations. What is "African American"

that Somali women face breast cancer disparities including: There are several significant factors increasing the likelihood

- Low awareness of breast cancer; Low awareness of treatment and survival rates;
- Language barriers and lack of health literacy;
- Little to no experience with preventive health regular screening practices; and care and
- Mistrust of the U.S. health system

## The Somali Women's Breast Cancer Project seeks .

- increase knowledge and awareness of breast cancer among Somali women, and

increase screening rates among women aged 40 and older.

In order to address the above factors, this project focuses on individualized health education sessions with 1-3 Somali

women using a home visit model.

(1) Ronningen, B. 2004. Estimates of Selected Immigrant Populations in Minnes Minnesota State Demographic Center.

(3) Susan G. Komen for the Cure. 2007. Facts for Life: Racial and Ethnic Differen www.komen.org (2) U.S. Depa rtment of Hor eland Security a nd Im migration a nd Natu



# Qualitative Research

and attitudes about breast cancer among Somali women Four focus groups were conducted to identify knowledge

### Focus **Group Demographics** (n=35)

Years lived in the U.S.
Range: 1 mo 13 yrs.
Average: 5.8 yrs.
Preferred language for
health information
Somali: 91%
English: 0%
Somali + English: 9%

# **Key Themes Identified**

participants reported never having a mammogram because they were unaware or fearful of the screening measures would be very helpful. women felt that information about risk factors and because they did not consider it a treatable condition. Focus group participants were fearful of breast cancer procedure. Most

# Implications for Program Design

effective in the Somali community. recommendations for designing a program that would be seffective in the Somali community. These included: Focus group participants had several important that would be

- Using a face-to-face, conversational model;
- Educating women in small groups;
- Providing detailed information about risk factors and screening techniques;
- Incorporating visual components; and
- Recognizing the influence of religion on health.

home visit model for conducting breast can These recommendations led to the development of the cer outreach.

# The Home Visit Model

has conducted home visits with women rise buildings in Minneapolis and St. number of Somali residents. Since 2005, the Somali Women's Br Paul that have a large 글. Cancer P WO -income roje high

country. they serve, on breast health information and home visit protocols. Community Health Workers
Four Somali community health workers understood and in creating an environment of trust and They share language, culture, and religion with the women they serve, as well as the experience of coming to a new comfort. This is crucial in ensuring health have mes sages trained

# **Home Visit Content**

language homes to provide last 1 to 2 hours and cover the following information: The community health workers meet with women in about breast cancer. education session These ⊒. sessions the Somali typically their

- Breast cancer risk factors;
- Mammography and the recommended frequency; Breast self-exams and breast c ancer symptoms
- measure existing breast health knowledge knowledge gain. A brief oral pre-test is given at the start of the home repeated at the end of the home visit to Figure 1 describes these results measure The visit to

### Follow-up Visits

follow-up visits with women learn if/how participants share breast health information and 2006. measure long-term gain in breast he who have obtained a mammogram since the home with other women. 2007, community health workers began Follow-up visits identify to who had ne number of women alth home knowledge; conducting visits in 2005 visit;

# Conclusions

women it serves. health knowledge prior to a home visit. contacted at least 6 months later still retained accurate information, and 76% had obtained The Somali Women's Breast Cancer Project is having a significant impact on breast cancer awareness among women it serves. Overall, pre-test results indicate that fewer than 10% of the women reached had adequate This project's value is substantiated by the fact that 98% of the women a mamm ogram. among breast the

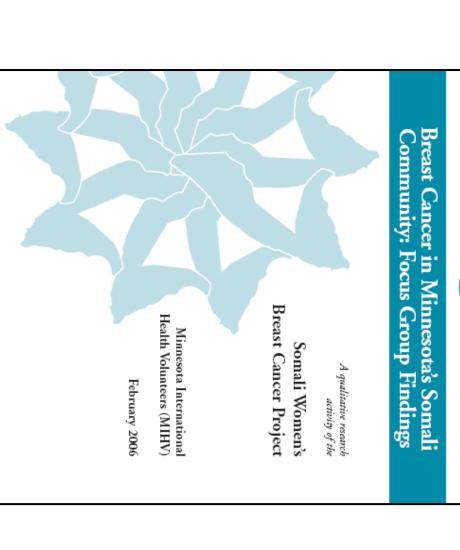
When asked if they discussed the information they learned in home visits with other women, 85% reported they had. fact, most women indicated they had told approximately 5 other women. myths that prevent women from seeking mammograms. ollow-up visits have also provided encouraging data about how women have shared their knowledge with This is an important step in breaking others. down the

The healthcare and cancer survival were essentially nonconcepts for most Somali women that require changing perceptions about the causes and outcomes Somali Women's Breast Cancer Project is providing crucial health education to its beneficiaries existent in Somalia or in refugee camps. as Se both prev are breast new entive

### Figure

### Pre, leasuring Post, and Changes Follow-up Breast Questionnaire Health Knowledge Results

	Before the home visit (n=427)	After the home visit (n=427)	Follow-up visit (n=61)
Can you name 3 risk factors for breast cancer?			
% with 0 correct answers	53%	1%	0%
% with 1 correct answer	36%	2%	26%
% with 2 correct answers	11%	1%	51%
% with 3 correct answers	0%	96%	23%
Do you know what a mammogram is?			
% with correct answer	54%	99%	100%
At what age should a woman have a 1st mammogram?			
% with correct answer	27%	98%	97%
How often should a woman then have a mammogram?			
% with correct answer	7%	99%	98%
How often should women conduct a breast self-exam?			
% with correct answer	3%	98%	97%



# Focus Group Findings

Breast Cancer in Minnesota Somali Community

conducted by MIHV in This report details the results of breast cancer focus gr Somali community, please contact MIHV. www.mihv.org 2005. For technical assistance oups among Somali women about conducting focus groups



This project is supported by the Mir Susan Ö Komen the nnesota **Affiliate** 

