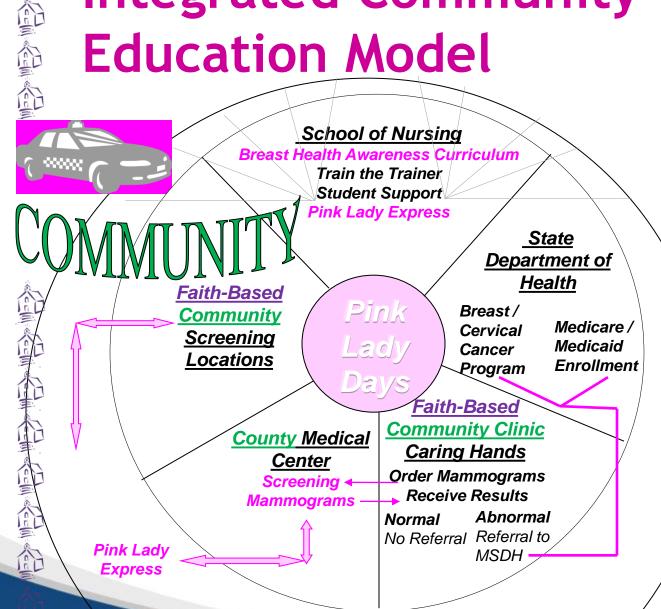
# Integrated Community Education Model: Breast Health Awareness to Impact Late Stage Breast Cancer

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# Integrated Community **Education Model**









# Purpose of the Study

• The purpose of the study was to generate and test an integrated community education model in a medically underserved area that has evidence of significantly higher mortality rates from breast cancer.



# **Objectives of Study**

Develop a three pronged integrated community intervention model:

- 1. faith based care
- 2. community agency involvement
- 3. state agencies resource referral network



## Methodology

Train the Trainer seminars to 10 key women in 10 churches

- Faith-based church ministry in the county served as PCP
- The local County Medical Center served as partner to provide the screening mammograms on four designated Saturdays ("Pink Lady Days").
- The State Department of Health, Breast/Cervical Cancer program (BCC) served as the primary referral source
- A network of four churches in the county area were selected to serve as screening locations for the Pink Lady Days and to participate in publication of the events.
- The Pink Lady Express



# **Participants**

- Demographic Data (N = 53)
- RACE
- African American/Black
- Caucasian/White
- AGE
- < 20 years of age</li>
- 21 29 years of age
- 30 39 years of age
- 40 49 years of age
- 50 59 years of age
- 60 69 years of age
- >70 years of age
- No age data indicated

# PARTICIPANTS (%)

48 (90)

5 (10)

mean age,52

2 (3)

4 (7)

6 (11)

15 (28)

13 (25)

5 (9)

5 (9)

3 (5)







## **Findings**

- 16 (30%) had never had a mammogram
- 18 (34%) had no primary care provider
- 18 (34%) did not perform monthly SBE
- 19 referred for mammograms based on abnormal physical exams
- 3 AA women, ages 49, 48 and 37 were diagnosed as having early stage cancer development



#### Conclusions

 The integrated community model provided three women with life-saving early diagnosis and treatment as well as providing potentially hundreds of women with a network of breast health, self-monitoring, and referral sources for breast health problems in the future.





# Strengths of Study

- Provision of important information to potentially at risk participants
- Raising community awareness of the importance of breast health
- Partnerships with community, state and religious affiliations (networking)
- Creating a pool of women to teach about breast health



### Limitations

- Funding for mammograms
- Timing for interventions
- Small number of sites used





#### Recommendations

- Replicate study in other areas
- Seek funding for mammograms
- Build more partnerships among agencies
- Be sensitive to timing of screening days (try for October - breast health month)
- Schedule follow up meetings related to training efforts





