



**HACER POR LA SALUD:
EDUCATION AND
PREVENTION OF
BREAST CANCER
AMONG LATINAS IN
SOUTHERN MINNESOTA**

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PROJECT BACKGROUND

Prioritizing the health of all Minnesotans is essential so that all have an opportunity to live a full and healthy life. In Minnesota, just like in the rest of the country, breast cancer is the leading cause of cancer death in Latina women. One of the reasons for this may be because Latina women often get diagnosed with breast cancer at a later stage.¹ In addition, breast cancer ranks first among new cancer cases in Latina women and Latinas also have one of the lowest five-year survival rates.

Hispanic Advocacy and Community Empowerment through Research (HACER) in collaboration with Mayo Clinic carried out a project with the following goals in mind:

-  1. To provide culturally approach educational workshops and free breast screening to Latina women from the rural areas; specifically, the cities of Mankato, Madelia, and St James in Minnesota.
-  2. To prevent breast cancer late-stage diagnosis in these women through these screenings.
-  3. Decrease breast cancer incidence and mortality among Latina women living in Mankato, Madelia, and St James.

¹Racial and Ethnic Differences. Susan G. Komen, 2021.
<https://www.komen.org/wp-content/uploads/Racial-Ethnic-Differences-Tri-Fold-9-15-FINAL-1.pdf#:~:text=A%20delay%20in%20diagnosis%20can%20lead%20to%20a,to%20be%20diagnosed%20with%20late%20stage%20breast%20cancers>

METHODS

Community engagement through interviews to inform educational workshops

In the fall of 2023, HACER conducted 19 interviews and one workshop with women who identified as Latina from the cities of Mankato, Madelia, and St. James. Participants were recruited through in-person and social media outreach, with 19 out of 100 registered women completing interviews. Eligibility for participation was determined through a registration form.

These interviews revealed systemic, economic, psychosocial, and cultural barriers affecting screening utilization among Latina women during and after the pandemic. Using the collected data, HACER designed educational workshops tailored to the unique cultural and religious perspectives of Latina women regarding their bodies.

Organizations such as the Breast Cancer Education Association, Minnesota's SAGE program, Hope Chest for Breast Cancer Foundation, Angel Foundation, and Susan G. Komen provided educational resources for the workshops. Participants completed pre- and post-surveys to assess the knowledge gained from the workshop. Additionally, a 5-point Likert scale survey was used to evaluate the relevance of the workshop's content and activities to their individual experiences and cultural backgrounds.






FINDINGS

Community interviews revealed systemic, economic, psychosocial, and cultural barriers affecting screening utilization among Latina women during and after the pandemic.

Regarding factors limiting access to physical breast exams or mammograms, participants identified the lack of health insurance as the primary barrier. The second major factor was the lack of information about programs or resources for free breast cancer screenings and navigating the healthcare system in rural areas. While language barriers exist, participants mentioned that interpreters help communicate with healthcare providers. However, some women felt less confident asking questions about breast cancer prevention when using interpreters.

Although 75% of interview participants stated that the cost of mammograms could be prohibitive without insurance, they remarked that medical expenses and screening tests are excessively high in the United States. Lastly, 26% of interview participants cited being undocumented as a critical factor affecting access to mammograms. Women who highlighted this issue stated that undocumented individuals often fear seeking support due to their immigration status, which they believe restricts their access to health services.

During the interviews and workshops, myths about breast cancer were discussed to evaluate how misconceptions influence women's self-care practices. Here are the responses from participants during the interviews:

	<i>Myths</i>	<i>What participants said</i>
	If I do not have a family history of breast cancer, I won't get it	80% said that this statement is false. Those that said this statement is false emphasized the unique nature of each body.
	Wearing a bra can cause breast cancer	Almost 80% of participants said that this statement is false. Although, this is a common myth that has been heard by many participants.
	Breast cancer only happens to middle aged & other women	Most participants acknowledged that there may be a higher possibility of developing breast cancer as one ages, but those that believed this statement is false was due to the possibility of having breast cancer at any age.
	Breast cancer always causes a lump you can feel	About half (53%) of the participants said this statement is false, while a couple were not sure. Those that said this statement is false said that sometimes you do not feel a lump, it can be different symptoms such as secretions and pain.
	Annual mammograms guarantee that breast cancer will be found early	About 63% of participants said this statement is true. Those that said this statement is false believed that although a mammograph is a great tool, it is not 100% certain. Those that were not sure said that radiation from mammographs can also be dangerous.

INTERVENTION

EDUCATION THROUGH WORKSHOPS AS A TOOL FOR EMPOWERING LATINAS TO PRIORITIZE THEIR HEALTH

WORKSHOP #1

The first educational workshop took place in Mankato on December 2nd in a conference room at HACER's Mankato office. Eleven self-identified Latina women attended and actively participated in the workshop. They engaged in various activities and asked personal questions related to breast cancer, its signs and symptoms, and other health issues such as cervical cancer. A volunteer from the Susan G. Komen Foundation provided information about their organization and its support for women diagnosed with breast cancer. Additionally, a health representative from the SAGE program attended to offer information about accessing free or low-cost breast and cervical cancer screenings through their resources.



KEY FINDINGS

Knowledge increased among program participants

100% of participants knew the cause of breast cancer after the workshop.

83% of participants reported an increase in their knowledge of the causes of breast cancer.

Participants reported their intent to change their behavior

100% of participants no longer cited being too busy to make time for a doctor's visit as a reason for delaying seeing a doctor

100% of participants no longer cited fear of a diagnosis as a reason fo delaying seeing a doctor.



Participants reported a reduction in reasons that might lead them to delay visiting a doctor

INTERVENTION

EDUCATION THROUGH WORKSHOPS AS A TOOL FOR EMPOWERING LATINAS TO PRIORITIZE THEIR HEALTH

WORKSHOP #2

The second educational workshop was held in Madelia on March 16 in the cafeteria of Madelia High School. Ten self-identified Latina women attended and actively participated in the workshop. A coordinator from the Breast Cancer Education Association provided information about the organization's mission and their commitment to early detection, diagnosis, treatment, and survivorship. Additionally, a health representative from the SAGE program attended to share information about SAGE and its mission to improve access to breast and cervical cancer screening.



KEY FINDINGS

67% had an increase in knowledge about the causes of breast cancer at the end of the workshop compared to the beginning

90% of participants stated that they agreed more with the statements about personal, family history & relationships with breast cancer, as well as with the importance of performing medical examinations for its early detection

70% of participants stated that they felt more confident in their knowledge and ability for the early detection of breast cancer as well as more confident in conducting



INTERVENTION

EDUCATION THROUGH WORKSHOPS AS A TOOL FOR EMPOWERING LATINAS TO PRIORITIZE THEIR HEALTH

WORKSHOP #3

Workshop #3 took place at the Mayo Clinic Health System in St James on May 18, 2024. Four self-identified Latina women attended. The low attendance was in part attributed to the numerous events happening in the city and churches at the same time. The participants were all aged 55 and older. Among them, 75% reported having a high school diploma, and the same percentage were born outside the United States, specifically in Mexico or El Salvador.

Regarding the evaluation of the cultural appropriateness of the workshops, the results were the following:

- 90% of participants were satisfied or highly satisfied with workshop content, resources, activities, and facilitator expertise. They also felt that the workshop activities were designed considering their cultural beliefs.
- 100% of participants agreed that workshop facilitators understand their experiences and problems and that it was easy to obtain necessary information about breast cancer in the workshop.



KEY FINDINGS

100% of participants said that they feel more confident talking to their partner or family about breast cancer, as well as getting regular mammograms & physical exams.

70% of participants stated that they felt more confident in their knowledge & ability for the early detection of breast cancer as well as more confident in conducting regular self-exams

75% of participants agreed that the activities, resources, and materials used in the workshop were relevant, easy to understand & made with their beliefs in mind.

75% of participants expressed being very satisfied with the content, activities & resources of the workshop, as well as with the expertise & respect shown by the facilitators



MOBILE CLINIC: BREAST CANCER SCREENING IN MADELIA, MN

Latina women in Madelia encountered significant obstacles in accessing cancer screenings due to the absence of nearby clinics. To address this issue, HACER, in collaboration with the Mayo Clinic Health System and the SAGE program, organized a free mobile clinic to provide breast and cervical cancer screenings for Latina women in Madelia and the surrounding areas. This event took place at Madelia High School on May 23. HACER spearheaded outreach efforts, participating in various events.

Approximately 25 women registered for the screenings through an online link or by phone. However, about 12 of these women were deemed ineligible for screening through the SAGE program due to factors such as age, insurance status, and pre-existing medical conditions. On the day of the event, 17 women were successfully screened, with 13 receiving pap smears.

In addition to the SAGE program's eligibility guidelines, other barriers that prevented women from being screened at the event included:



Time constraints due to work



Fears about the impact of legal status on receiving help from government programs



High costs of screenings for those with health insurance.

Women who fell outside the eligible age range expressed disappointment. For instance, an under-30 single mother with a history of breast tissue issues, no insurance, and low income needed preventive screenings but was excluded from SAGE eligibility. This underscores the challenges in accessing preventive healthcare due to strict eligibility criteria and systemic barriers.

REFLECTIONS & FUTURE DIRECTIONS

These results suggest the workshops were effective in increasing knowledge about breast cancer and addressing barriers to seeking medical care.

The complete knowledge gained among participants about the causes of breast cancer indicates the workshop's success in providing clear and comprehensive information. The high percentage of participants reporting increased knowledge suggests that the workshop was engaging and informative. The elimination of "being too busy" and "fear of a diagnosis" as reasons for delaying doctor's visits implies that the workshop effectively addressed common psychological and practical barriers to healthcare.

The workshops significantly enhanced participants' knowledge and confidence regarding breast cancer detection and prevention. These improvements are likely to lead to:



Increased proactive health behaviors, such as regular screenings and self-exams.



Greater openness in discussing breast cancer within families, fostering a supportive environment.



Adoption of healthier lifestyle choices, potentially reducing cancer risk.

Organizations like HACER and others should consider offering culturally tailored workshops to encourage breast health education among Latinas and other populations that may have high risk. This is done while always considering cultural and linguistic factors that can help Latino people learn more about breast cancer and feel empowered to act.

These workshops should provide people with guidance on the health system, Internet resources, books and periodicals, services, support groups, access to diagnostic tests, and available medical treatments

The results suggest that culturally tailored educational initiatives can be effective to improve breast cancer awareness and preventive behaviors, ultimately contributing to early detection and better health outcomes.



HACER

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THANK YOU!



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