

Innovative Breast Cancer Education Programs for African-Americans

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The Witness Project

“In church, people witness to save souls. At the Witness Project, they witness to save lives,” said Mattye J. Willis, deputy director of the Witness Project, a national program that enlists African-American breast cancer survivors to share their stories with other African-American women in their community to educate them about the disease.

The Witness Project reaches women through their local churches. “This is where women are comfortable talking about themselves. “I am your sister, I am concerned about your health,” said Ms. Willis. “Witnesses also reach out to men through the church. Many women will move faster if the men in their lives are supportive.”

Early detection is the witnesses’ main message. “We want to challenge deeply held cultural beliefs that a woman should not touch her body or talk about her health,” said Ms. Willis. From 6 to 8 weeks after the initial meeting, witnesses (volunteers) follow up with each woman and help set up mammography appointments. They also help with any barriers to screening, such as arranging for transportation and child care.

Established in 1991 by the Arkansas Cancer Research Center in Little Rock, the Witness Project was initially funded by the Komen Foundation. In October 1997, the Centers for Disease Control provided a \$1 million, 4-year grant for replicating the program nationwide.

The East-West Breast Express

“Go to the people.” That is the simple concept behind a program developed by Selma Morris, MEd, director of the Comprehensive Breast Center at Emory University School of Medicine and a member of the African American Woman’s Initiative (AAWI). The East-West Breast Express provides breast health education and screenings to African American women at bus stops, train stations, and other public transportation sites.

The concept for the Breast Express originated in 1994, when a fellow bus passenger commented on Ms. Morris’ pink ribbon. “When I explained that the ribbon symbolized breast health, she did not understand what I was talking about,” said Ms. Morris. Over the next few days, several other people inquired about the pin and the idea for the program was born.

Community health advocates and volunteers visit train and bus stations to provide “one-on-one” education in Atlanta (in partnership with MARTA [Metropolitan Atlanta Rapid Transit Authority]) and Oakland, California (in partnership with BART [Bay Area Rapid Transit]), where the program is coordinated by Bonnie Wheatley, project director of the Breast Cancer Early Detection Program in Oakland and an AAWI member.

Individuals take a short survey to determine the level of their breast health knowledge and receive a bag with educational information and free gifts (ie, Tropicana coupons, ethnic cookbooks). Mobile vans are also on site to provide free screenings.

The program, funded by the Komen Foundation, was tested in Atlanta and Oakland from April to July 1998. Each program reached over 2,000 women and men. Of those eligible, 50% had mammograms. Now, Ms. Morris is working to expand the program to a national level.

Harlem Hospital Patient Navigator Program

Navigating the health care system can be an insurmountable barrier for many women when it comes

to taking care of themselves, especially when they no or inadequate insurance. Helping women navigate through the system, from screening to diagnosis to treatment and beyond, is the idea behind the Patient Navigator Program at Harlem Hospital in New York.

“The Patient Navigator is designed to remove the cultural, economic, social and medical barriers to quality health care,” said Harold P. Freeman, md, who developed the program in 1990 and is director of the Department of Surgery at Harlem Hospital Center and former president of the American Cancer Society.

The idea for the program is based on research showing that poor people, including the underinsured and uninsured, endure greater pain and suffering from cancer and face greater obstacles in obtaining and using health insurance. In addition, the poor often do not seek needed care if they cannot pay for it, must make extraordinary personal sacrifices to obtain and pay for health care, and have a fatalistic attitude that prevents them from gaining quality health care.

The Patient Navigator Program is the nucleus of the Cancer Control Center, which was established in late 1989 with the mission of reducing the disproportionately high incidence of and mortality from cancer in the Harlem community. The “navigator” is a proactive patient advocate—distinct from the hospital social worker—who focuses on the specific needs of cancer patients and guides those patients through the system.

“The role of the patient navigator is to help patients understand their options. Let us worry about the obstacles,” said Dr. Freeman. For example, the patient navigator can establish emergency Medicaid coverage for patients, ensuring that they do not have to wait for or miss diagnostic or treatment procedures.

Patients enter the program through free screening clinics at the hospital. The clinics are promoted by outreach workers, who spread the word about the need for early detection at beauty salons, senior centers, and other community hubs. Patient navigators then identify patients who need “navigation” due to abnormal breast examinations. Through a series of visits and follow-up phone calls, patient navigators make sure that patients’ fears about diagnosis and treatment are allayed and that they do not “fall through the cracks.”

Impact of the Program

In 1997, of the more than 2,000 people who were screened through the Patient Navigator Program, nearly half were uninsured. As proof of the program’s impact on the community, the diagnosis of women with stage I breast cancer has increased from 1 out of 20 women in 1989, to 4 out of 10 women. The average length of time between initial breast examination and biopsy for the uninsured decreased to 10 days. In contrast, at most public hospitals across the country, the length of time can be as long as 60 to 90 days, according to Dr. Freeman.

The program is funded in part through support from the Komen Foundation New York Affiliate, New York Race for the Cure.

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