Background

It is difficult to understand breast cancer disparities without some explanation of their context. The National Cancer Institute (2006) estimates that, based on current rates, 12.7 % of women born today will be diagnosed with breast cancer at some time in their lives. According to the most recent data, mortality rates continue to decline in European American women. For example, in the decade of 2001-2004, the rate decreased by 3.7% annually, however, African -American women are more likely to die from breast cancer than European American women ().

Cancer disparities in North Carolina are evident as well. North Carolina at a rate of 200.7 has cancer mortality rates that are higher than the national average of 193.5. Robeson County is one of 10 eastern coastal area counties that have the highest cancer rates. In particular, North Carolina's breast cancer mortality rates are comparable to the national rate (26.4, NC/25/5 national). Robeson County is one of 3 having the highest mortality rates from breast cancer. In addition to high cancer rates, Robeson County is the poorest of North Carolina's 100 counties with *persons living below poverty* at 30.4 %.

Purpose

One purpose of this proposed research project is to address the increasing disparity in women obtaining mammograms. The research question for this proposed study is "to what extent will action research intervention increase knowledge about the causes and treatment of breast cancer in minority women". Specifically this study also seeks to determine what do minority women in Robeson County know about mammograms, self breast examinations and clinical breast examinations.

Goals

education

Saving OurSelves: A Rural Breast Cancer Education Project

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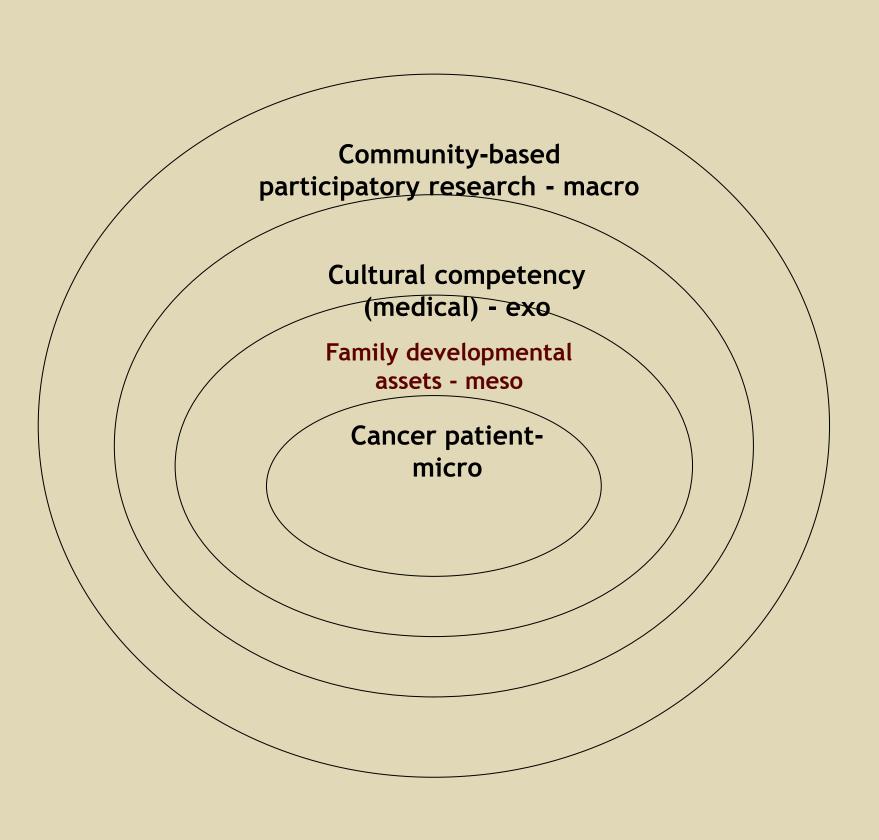
GOAL#1: Identify and recruit a core group of minority women who are interested in breast cancer education

GOAL #2: Develop and maintain a data base of women interested in breast cancer

GOAL #3: Increase the number of breast cancer activities of Sisters Network Southeastern NC (SNSENC)

The Family Model of Health Education (FMHE) utilizes the following theoretical foundation:

- Ecological systems theory
- Family developmental assets
- Community-based participatory research (C-BPR)
- PRECEDE PROCEED
- Cultural competency



Methods

The research design for this study is community-based participatory - "an alternative orientation to inquiry that stresses community partnership and action for social change and reductions in health inequities as integral parts of the research enterprise". Convenience nonprobability sampling, particularly snowball and heterogeneity purposive nonprobability sampling are the methods of enrollment to this study. Approximately 200 women will be targeted to participate in the proposed project.

SNSENC (Sisters Network SE NC)

- The Gift for Life Block Walk® (the annual door-to-door campaign) and the Pink Ribbon Awareness (the monthly community outreach presentations) are the primary activities. The 3 block walks of 2005, 2008 and 2009 yielded n=308 participants. Participants responded to the following items:
- Did you know that breast cancer is the most common cancer among African American women?*

Do you perform monthly breast exams? Do you receive annual clinical breast exams (during physical exams)

Have you ever had a mammogram? If yes, when was your last mammogram? If no, what are some of the reasons you have never had one?*

* Not an item on 2005 questionnaire

Results

Three (3) community forums

N= 61 face-to-face encounters

No return participants

N= 12 return volunteers

N = 6 new members

Conclusions

Mesosytemic relations are the primary relationships in Robeson county among the observed tri-ethnic participants: family, friends, church, and social organizations. Exosystem relations such as print media, and electronic media do not facilitate participation as effectively.

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