GUIDELINES FOR FLIPCHART

Page 2: What comes to mind when you hear “breast cancer?”

List words on poster paper. When list is completed, look for ways to make negative words and responses more positive and hopeful. For example, if someone says “death,” change it into “life and survival.” Ask if anyone knows someone who has survived cancer (Can turn it around and talk about survival and prevention – also about one’s health care rights)

Page 3: How does “breast health” affect you?

Write down responses. Then flip the chart to see answers. Discuss and emphasize how it affects all women and the fact that breast cancer is the most common cancer for Hmong women.

Page 4: What do you want to learn today (related to breast health)?

Acknowledge responses and assure participants you will try to answer their requests. Write them down to go over at the end of the session to reinforce what you’ve covered and check to see if you’ve met their needs.

Pages 5-6: Address Common Barriers to Breast Cancer Screening:

- Fears
- Misperceptions
- Modesty
- Karma – Bad Luck - Fate
- Lack of Information (where to go)
- Cost
  - Discuss it is her right and her insurance will cover an annual mammogram
- Family Responsibilities
- Men in Family Do Not Show Support
- Language Barriers
- A Doctor Does Not Mention It
- Having A Male Do The Examination
- Traditional Practices Are More Effective
- Not A Priority
- Do Not Believe In Fighting Illness
Page 7: Risk Factors and Risk Reduction:

- Older age
- Your breast disease history
- Your family breast cancer history
- Late menopause
- Never given birth or had a child when over the age of 30

* Emphasize that although these are the risk factors – all women are at risk since most women who get cancer do not have any of these risk factors.

Allow the women to ask questions. Be prepared to answer questions on diet and nutrition, but do not be afraid to say, “I don’t know.” Sometimes you may have to suggest they talk to their health provider.

Page 8: The Benefits of Early Detection:

- Breast cancer has a very high survival rate if found early.
- More treatment options.
- Almost every woman can live a long and healthy life after breast cancer if it is found early.
- You being healthy increases your family’s health
- Finding the cancer early is simple and can be done by each and everyone of us

Page 9: There are 3 ways the American Cancer Society suggests to detect breast cancer:

- Mammograms
- Clinical Breast Examinations
- Breast Self Examinations

Page 10: Mammograms

Get a mammogram as often as your doctor recommends. Follow-up on your results. Learning the results of your mammogram is very important. If you have not received your screening results within 10 days, ask your doctor or call the mammography facility. Chances are your mammogram will be normal. The most important thing is that women 40 to 49 years old should receive a mammography every one to two years. After the age of 50, women should have mammograms every year. As you grow older, your chances of having breast cancer increases. This simple breast x-ray is quick, easy, and safe. In fact mammograms use less radiation than a dentist’s x-ray. And a mammogram can give you a big head start on treatment. You and your doctor may feel a lump as small as a pea. But a mammogram can detect or find a cancer as small as the size of a pinhead, which may be up to two years before you can feel it. By the age of 40, women should have received their first
mammogram. Your doctor will be able to compare this x-ray with future exams. **Talk about mammogram and what happens.** really explain what to expect and how it feels – don’t say it doesn’t hurt, because it does hurt or make many feel uncomfortable for a short period of time – but the benefits outweighs the brief feeling of uncomfortableness. Need to address situation that occurs when some women have a mammogram and it doesn’t detect lump. i.e. importance of knowing your own body and having the doctor or nurse do the clinical exam as well – that’s why all 3 are necessary. **Need to talk about health care rights – some MDs may not recommend to the woman to obtain a mammogram; therefore, some may have to demand or ask for the mammogram – especially for some with Asian MDs.** Also talk about how women who know their bodies, can ask for second opinion is they do not agree with their doctors. (encourage questions)

**Page 11: Clinical Breast Exams (CBE)**

Someone who is technically trained such as your gynecologist, health care provider, or breast health specialist does a professional breast examination. Your health care professional may be more likely to notice subtle changes and know the appropriate tests and follow-up care needed if a change is found. Have a regular clinical breast exam and ask your doctor to answer any questions or concerns you may have. All women over the age of 20 should have a clinical breast exam every year. (encourage questions)

**Page 12: Breast Self-Exam**

Monthly breast self-exams are very important. It helps you to get to know your own breasts. Learning about breast anatomy can help you more easily identify what you are seeing and feeling in your breasts when you do a breast self-exam. Knowing what changes to expect each month or as you grow older will make you more aware of abnormal changes that may require medical attention. You also need to know that many breast cancers are curable but only if they are found early. Plan to examine your breast at the same time every month. It will not take long. Protect yourself by doing breast self-examinations. If you think you have found a lump, or any changes such as skin dimpling in one part of the breast, red skin, and a bloody or spontaneous discharge from the nipple you should see a doctor right away. Most breast lumps are not cancers, but you will not know if you do not ask. Starting at the age of 20, all women should check their breasts every month for lumps, swelling, dimpling skin, and bloody discharge because most breast tumors are found during a breast self-exam. (encourage questions)

**Page 13: The Seven P’s: How to do Breast Self-Exam (BSE):**

Demonstrate each of the seven P’s.

- ✔ Positions ([page 14](#))
  - Have the women stand with you to practice the visual positions

- ✔ Perimeter ([page 15](#))
Palpation (page 16)
- Have the women practice palpitation on their arm and on the arm of someone else

Pressure (page 17)

Pattern of Search (page 18)

Practice with Feedback (page 19)
- Practice with the breast models to find all the lumps in the breast
- As the women practice on the breast models, walk around the room and make comments and suggestions on their technique. Be encouraging. Give praise.

Plan of Action (page 20)

Set up a plan of action that will include:

- Monthly self-examination
- Regular doctor’s examination
- Regular mammography
- Regular Pap smear test and regular physical check-up

- Have the women verbally tell you their plans of action for doing a breast self-exam and make suggestions on how they can remember to do it every month (i.e. do BSE on the day you get your check; do BSE 2-3 days after your period ends, etc.). Let the women give their ideas on how to remember to do BSE. Explain that doing these will help them to enjoy good health without worry.

Page 21: Pap Smear Test

A Pap test is an examination of the cervix by a doctor or nurse. Having a regular Pap test can help you to detect early signs of cervical cancer. It is important to detect these signs early because cancer is like a seed; it can start very small and can be difficult to see, but in time, it can grow and spread, much like the weeds in your gardens. Start having Pap tests once a year, beginning at an early age of 18 or when you become sexually active. [Discuss the cultural barriers i.e. when seeking medical care, there is nothing to be ashamed of or embarrassed about.] We have to understand that professional providers provide medical care. They are not there to look at you for your individual physical appearance. It is also important to have your partner or husband support you. (encourage questions)

Page 22: Final P – Peace of Mind

- Remind them that their health equals their families’ health, and that practice makes perfect!