Maximizing Cancer Prevention and Early Detection Among Latinos

Satellite Conference and Live Webcast
Thursday, February 4, 2010
1:00 - 2:30 p.m. Central Time

Produced by the Alabama Department of Public Health
Video Communications and Distance Learning Division

Faculty
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Director
Institute for Health Promotion Research
UT Health Science Center at San Antonio

Part 1
• How do providers address cancer from a Latino perspective?
  – What we’ve found: Physicians
  – What we’ve found: Latinos
  – Strategies to use

Part 2
• How do you engage community, policy-makers, etc. in Latino cancer prevention?
  – What we’ve found
  – Strategies to use

Dr. Differences: Racial
• Clinical trials (CTs) attitudes and practices of Latino physicians
• Purpose
  – Analyze physician data (N=695, stratified by ethnicity) to test associations of ethnicity with physicians’ participation in and attitudes towards referral of patients to CTs
Dr. Differences: Racial

- Results (P < .05)
  - Physician race/ethnicity significantly associated with
  - CT involvement
  - Type of CT for which the physician is likely to recommend a patient

Dr. Differences: Racial

- Belief in scientific value of CTs
- Factors that would influence recommendation for a patient to participate

Dr. Differences: Racial

Association of Physician Race/Ethnicity + CT Participation

<table>
<thead>
<tr>
<th>Item</th>
<th>Overall (N=297)</th>
<th>White (N=398)</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>CT Involvement</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patients inquired about CTs</td>
<td>29.4%</td>
<td>21.5%</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>I referred patients, CT by other</td>
<td>48.8%</td>
<td>42.1%</td>
<td>&lt;.01</td>
</tr>
<tr>
<td>I recruited other patients, CT by self</td>
<td>20.0%</td>
<td>16.2%</td>
<td>&lt;.05</td>
</tr>
<tr>
<td>I have never been involved</td>
<td>36.5%</td>
<td>43.4%</td>
<td>&lt;.01</td>
</tr>
</tbody>
</table>

Dr. Differences: Racial

Association of Physician Race/Ethnicity + CT Participation

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<thead>
<tr>
<th>Item</th>
<th>Overall (N=297)</th>
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<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>CT Value</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Strongly Disagree or Agree</td>
<td>13.1%</td>
<td>18.0%</td>
<td>9.3%</td>
</tr>
<tr>
<td>Undecided</td>
<td>17.9%</td>
<td>19.4%</td>
<td>16.7%</td>
</tr>
<tr>
<td>Agree</td>
<td>59.1%</td>
<td>53.7%</td>
<td>63.0%</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>10.0%</td>
<td>8.8%</td>
<td>10.9%</td>
</tr>
</tbody>
</table>

Dr. Differences: Racial

Association of Physician Race/Ethnicity + CT Participation

<table>
<thead>
<tr>
<th>Item</th>
<th>Overall (N=297)</th>
<th>White (N=398)</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Factors Influencing Recommendations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Improve medical condition</td>
<td>85.0%</td>
<td>84.2%</td>
<td>85.7%</td>
</tr>
<tr>
<td>My familiarity with protocol/physician/ institution</td>
<td>58.3%</td>
<td>52.2%</td>
<td>62.8%</td>
</tr>
<tr>
<td>Patient’s desire to advance med knowledge</td>
<td>50.8%</td>
<td>16.2%</td>
<td>22.9%</td>
</tr>
</tbody>
</table>

Dr. Differences: Racial

- Conclusions
  - Latino physicians were significantly less involved in CTs than white physicians
  - Latinos found less scientific value in CTs

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2
### Dr. Differences: Racial

- **Implications**
  - Need bilingual teams to help address language barrier and increase CT opportunities for Latinos
  - Need concurrent education to increase opportunities for Latino physician involvement

### Dr. Differences: Gender

- **Physician gender differences in general cancer prevention attitudes**
- **Purpose**
  - Analyze physician data (N=722, only Latino/White) to test associations of gender with prevention practices and attitudes

### Dr. Differences: Gender

- **Results (P < .05)**
  - Gender differences occurred for 7 of 49 of the general and cancer-specific practices and attitudes tested
  - Female gender predicted discussion of physical activity, violence, and use of substances
  - Male gender predicted belief in effectiveness of PSA

### Dr. Differences: Gender

- **Conclusions**
  - Female physicians were more likely to discuss general health prevention activities than male physicians
  - Women were more likely to recommend Pap smears

### Dr. Differences: Gender

- **Implications**
  - Need for doctor-patient behavior counseling/communication
  - Health care systems need to accommodate doctor's extra time
  - Doctor training should include teaching cultural sensitivity and more education on proper screening guidelines

### Dr. Views: Tobacco

- **Factors associated with physician involvement in tobacco control advocacy and cessation counseling**
- **Purpose**
  - Survey 800+ Texas physicians on their motivation/skills to get involved in smoking cessation and advocacy
**Dr. Views: Tobacco**

- **Results**
  - Only 53% of respondents “always” ask about smoking
  - Less than 40% “always” ask smokers if they want to quit
  - Only 25% “always” prescribe aids for patients wanting to quit

- **Conclusions**
  - Doctors’ involvement in tobacco control policies is part of a cluster of attitudes/behaviors that make them more likely to help smokers quit

**Dr. Views: Tobacco**

- Respondents were more likely to do tobacco prevention if they
  - Admire people involved in advocacy efforts
  - Feel confident in their abilities to promote tobacco prevention
  - Received specific tobacco-related training at school or CME

- **Implications**
  - It is vital to involve physicians in tobacco counseling, prevention, and policy-making early on, preferably during their training years
  - It would be ideal to widely include tobacco prevention and control in medical school curricula

**Part 1: How do Providers Address Cancer from a Latino Perspective?**

- Strategies to use

**Latinos: The Iceberg of Culture**
Latino Cancer: Cultural Myths

- Fear: cancer = death
- Fatalism
- Mothers take care of family, children first
- No realization or awareness that cancer normally grows slow enough to be detected and treated on time
- Other cultural myths (herbs, etc.)

Latino Cancer: Cultural Myths

- “There is little I can do to prevent cancer”
- Latinas ages 40+ attitudes share this perception at an alarmingly large percentage
  - Mexican American 39.5% Agree
  - Central American 36.8% Agree
  - Puerto Rican 33.5% Agree
  - Cuban 34.3% Agree

Cultural Competency

- Communications
  - Disseminate cultural/language appropriate materials to stress prevention and clarify health myths
  - Use Promotoras
  - Capitalize on community strengths

Cultural Competency

- Physicians
  - Understanding role
  - Address culture and folk medicine use

Latina BC: Trends

<table>
<thead>
<tr>
<th></th>
<th>Latinas</th>
<th>Whites</th>
</tr>
</thead>
<tbody>
<tr>
<td>Had a mammogram in last two years (women ages 40+)</td>
<td>66%</td>
<td>71%</td>
</tr>
<tr>
<td>Tumor size &gt; 1 cm</td>
<td>83%</td>
<td>76%</td>
</tr>
<tr>
<td>Diagnosed with Stage III/IV cancer</td>
<td>47%</td>
<td>Below 40%</td>
</tr>
<tr>
<td>Positive lymph nodes</td>
<td>28%</td>
<td>24%</td>
</tr>
</tbody>
</table>
Latina BC: Family Influence Study

• “The influence of primary support persons’ perceptions on patients’ perceived barriers to treatment amount Latinas with breast cancer in Texas”

Latina BC: Family Influence Study

• Purpose
  – Examine concordance between Hispanic cancer patients’ and primary support family members’ perceived barriers to treatment

Latina BC: Family Influence Study

• Setting
  – Community clinic/referrals in San Antonio, Texas

• Participants
  – 83 patient-family pairs

Latina BC: Family Influence Study

• Methods
  – Patients/family members given a 202-item survey on
    • Genetic testing awareness
    • Attitudes and interest
    • Barriers to breast cancer treatment

OLS Regression Results for Patient Perceived Barriers to Breast Cancer Treatment

<table>
<thead>
<tr>
<th>Education (vs. High School)</th>
<th>Model 1</th>
<th>Model 2</th>
<th>Model 3</th>
<th>Model 4</th>
<th>Model 5</th>
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<tr>
<td>High School Grad</td>
<td>1.68</td>
<td>6.37</td>
<td>1.89</td>
<td>1.68</td>
<td>1.89</td>
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<td>Tech College, College or Beyond</td>
<td>-1.45</td>
<td>-0.111</td>
<td>-1.18</td>
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<tr>
<td>Annual Household Income (&lt; $25,000)</td>
<td>-0.167</td>
<td>-0.167</td>
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<td>-0.167</td>
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<tr>
<td>($25,001 - $50,000)</td>
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<tr>
<td>(&gt; $50,000)</td>
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<tr>
<td>Gender and Relation of Primary Support Person</td>
<td></td>
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<tr>
<td>Husband</td>
<td>-0.205</td>
<td>-0.515</td>
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<tr>
<td>Female family member</td>
<td>-0.385</td>
<td>-0.385</td>
<td>-0.385</td>
<td>-0.385</td>
<td>-0.385</td>
</tr>
<tr>
<td>Male family member</td>
<td>-0.385</td>
<td>-0.385</td>
<td>-0.385</td>
<td>-0.385</td>
<td>-0.385</td>
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<tr>
<td>Interaction Effects</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Education (vs. High School)</td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>High School Grad</td>
<td>-0.779</td>
<td>-0.982</td>
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<td>Tech College, College or Beyond</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Annual Household Income (&lt; $25,000)</td>
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<td>($25,001 - $50,000)</td>
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<tr>
<td>(&gt; $50,000)</td>
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Adjusted R²: 0.08, 0.14, 0.11, 0.20, 0.29
Latina BC: Family Influence Study
• Summary
  – Patient responses closely resemble family members
  – Gender of a patient’s primary support person is not significant, but…

Latina BC: Family Influence Study
• Survivors with less than high school diploma have higher levels of concordance with their family members than their peers with more education

Latina BC: Family Influence Study
• Conclusions
  – When cancer literacy is low, family members are utilized more readily for decision-making
  – Hispanics often have lower cancer literacy and low SES…

Latina BC: Patient Navigation
• Pilot test navigation (PN) to assist Latinas
  – Worked with Texas clinics to test PN efficacy to reduce lag time between abnormal breast cancer screening results to confirmatory tests and start of treatment

Latina BC: Patient Navigation
• “Follow-up of abnormal cancer screening tests”
  – We partnered with community clinics to chart reviews/determine adherence to interval screening for BC among Hispanic/non-Hispanics
Latina BC: Patient Navigation

- Sample size: 651 (53% Latina)

<table>
<thead>
<tr>
<th></th>
<th>SF</th>
<th>San Diego</th>
<th>Harlingen</th>
<th>SA</th>
<th>Miami</th>
<th>NY</th>
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<tbody>
<tr>
<td>Latina</td>
<td>72</td>
<td>49</td>
<td>72</td>
<td>48</td>
<td>53</td>
<td>50</td>
</tr>
<tr>
<td>Non-Latina White</td>
<td>171</td>
<td>-</td>
<td>50</td>
<td>48</td>
<td>38</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>243</td>
<td>49</td>
<td>122</td>
<td>96</td>
<td>91</td>
<td>50</td>
</tr>
</tbody>
</table>

Latina BC: Patient Navigation

- Time to diagnosis: Longer time to diagnosis among Latinas with poorer English proficiency*

* sub-group analysis: Latinas

Latina BC: Patient Navigation

- Time to treatment: Latinas started treatment at 13 wks; whites 7.5 wks

Part 2: How do You Engage Community, Policy-makers, etc., in Latino Cancer Prevention?

- What we’ve found

Network: Redes En Acción

- The National Latino Cancer Research Network
  - Network development
  - Research
  - Training
  - Awareness
- www.redesenaccion.org
Network: Redes En Acción

- **Infrastructure**
  - National network of 1,800+ people and groups to conduct research, training, and awareness

- **Training**
  - Supported more than 225 training positions

Network: Redes En Acción

- **Research**
  - Fostered 18 NCI-funded pilot research programs for $925K
  - Pilot researchers then leveraged it into approximately $100M in new funding

Network: Redes En Acción

- **Education/Awareness**
  - *Redes* produced more than 30 cancer education materials and 12 TV PSAs, developed an online bilingual cancer experts directory, and conducted more than 2,400 community events

  - [www.redesenaccion.org](http://www.redesenaccion.org)

The Facts

- Hispanic kids eat too much fat, cholesterol, and added sugar
  - 68% of their diets are pizza, desserts, chips, soda, burgers, fruit juice

The Facts

- White kids watch 2:45 hours of TV a day
- Hispanic kids watch 3:23 hours a day
  - An extra hour of TV = 167 extra calories a day
The Facts
• For every 1 white parent who says neighborhood safety is a barrier to physical activity...
  – 4 Hispanic parents do the same
• 1 of 2 white youths play team sports
  – 1 of 4 Hispanic youths do

Salud America! 20 Pilots

<table>
<thead>
<tr>
<th>Name</th>
<th>Institution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shari Barkin</td>
<td>Vanderbilt University</td>
</tr>
<tr>
<td>Cristina Barroso</td>
<td>UTSPH, Brownsville</td>
</tr>
<tr>
<td>Alexy Arauz Boudreau</td>
<td>Mass. Gen Hospital</td>
</tr>
<tr>
<td>Dina Castro</td>
<td>U. North Carolina</td>
</tr>
<tr>
<td>Dharma Cortes</td>
<td>U. Mass</td>
</tr>
<tr>
<td>Claudia Galindo</td>
<td>U. Maryland, Balt.</td>
</tr>
<tr>
<td>Zan Gao</td>
<td>U. Utah</td>
</tr>
<tr>
<td>Meizi He</td>
<td>UT San Antonio</td>
</tr>
<tr>
<td>Harris Huberman</td>
<td>State U. of NY</td>
</tr>
</tbody>
</table>

Salud America! Research Agenda
• Top research areas ranked by Delphi survey participants

<table>
<thead>
<tr>
<th>Research Area</th>
<th>Rank</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family</td>
<td>1</td>
<td>2.18</td>
<td>1.13</td>
</tr>
<tr>
<td>Community</td>
<td>2</td>
<td>2.61</td>
<td>1.15</td>
</tr>
<tr>
<td>School</td>
<td>3</td>
<td>3.00</td>
<td>1.17</td>
</tr>
<tr>
<td>Society</td>
<td>4</td>
<td>3.53</td>
<td>1.57</td>
</tr>
<tr>
<td>Individual</td>
<td>5</td>
<td>3.68</td>
<td>1.44</td>
</tr>
</tbody>
</table>

Family Pilot: La Familia en la Cocina
• Dr. Miriam Vega, Latino Commission on AIDS
  – Understand Latino mother-child communication on nutrition, eating, activity
  – Results to influence health policy
Part 2: How do You Engage Community, Policy-makers, etc., in Latino Cancer Prevention?

- Strategies to use

Study: CGN/Buena Vida

- Method
  - *Buena Vida* magazine test of 3 registry recruitment methods among South Texas Hispanics into the Cancer Genetics Network (CGN) boosted accrual
  - N=153
    - X1=46
    - X2=43
    - X3=64

Study: CGN/Buena Vida

- Summary
  - Additional info/interpersonal contact increased accrual

- Implications
  - Expect to spend more resources in planning/prep
  - Engage in institutional partners more

Study: CGN/Buena Vida

- Get local cancer registries to urge participation in CTs, with approval to be contacted directly from researchers
- Increased public communication on CTs may increase the likelihood of participation among refusers

Project: Tobacco Prevention

- San Antonio Tobacco Prevention & Control Coalition
Project: Tobacco Prevention

• Vision
  – “A smoke-free community” via
  • Role model media campaign
  • Increased knowledge and use of accessible, effective resources
  • Led by and effective, self-sustaining coalition

Project: Tobacco Prevention

• Mission
  – To improve the health of all Bexar County residents by promoting a smoke-free environment and prevention and cessation of tobacco use

Project: Tobacco Prevention

www.tobaccofreesa.org

PSAs: Wave 1

• 4 PSAs
  – Clinical trials are a beneficial option for Latinos
  • Spurred 500+ calls to CIS helpline
  • Still air today
  – www.redesenaccion.org/psa.html

PSAs: Wave 2

• Purpose
  – 6 PSAs to boost Latinos’ awareness of breast, cervical, and colorectal cancer screening
• PSA pre-testing
  – Latino focus groups
  • CIS feedback
PSAs: Wave 2
• Production
  – PSAs by Sprocket Productions
• Distribution
  – Nov. ‘09 on new “SaludToday” website
  – Jan. ‘10 to Spanish-language TV

Latinos Online
• 47% of English-speaking Hispanics used Internet on handheld device
  – 28% white
• Hispanics are main users of wireless on-ramps to Internet
• 20% of Hispanics spend 30 hours/week online
• 88% of Hispanic social media profiles are teens/young adults

New Site: SaludToday
• Spur better health for Latinos at www.saludtoday.com
• Features
  – Blog on Latino health
  – PSAs
  – Sharing real-life health success stories

New Site: SaludToday
• Post your real-life health success stories
• Health resources

Why Is This All so Important?

Acknowledgements
• National Cancer Institute
  – Redes En Acción: The National Latino Cancer Research Network: Grant No. (0U01 CA114657)
• Robert Wood Johnson Foundation
  – Salud America! The RWJF Research Network to Prevent Obeisty Among Latino Children
Acknowledgements
• Susan G. Komen for the Cure
• Cancer Therapy and Research Center, San Antonio, Texas

Mil Gracias!
• To find out more about the IHPR or collaborative opportunities, email us at ihpr@uthscsa.edu
• Join our national Latino research networks at
  – redesenaccion.org (Latino cancer)
  – salud-america.org (Latino child obesity)

Mil Gracias!
• Get Latino health news/research/videos
  – Blog
    • SaludToday.com/blog
  – Twitter
    • Twitter.com/SaludToday
  – YouTube
    • Youtube.com/user/SaludToday
  – Facebook:
    • facebook.com/pages/SaludToday/160946931268

Faculty
Amelie G. Ramirez, DrPH
Director
Institute for Health Promotion Research
UT Health Science Center at San Antonio

http://ihpr.uthscsa.edu
www.saludtoday.com