Breast and Cervical Cancer Screening

<table>
<thead>
<tr>
<th>Screening Type</th>
<th>Disability</th>
<th>No Disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mammogram in past 2 years</td>
<td>70.4</td>
<td>79.1</td>
</tr>
<tr>
<td>Pap in past 3 years</td>
<td>62.2</td>
<td>76.6</td>
</tr>
</tbody>
</table>
Women with Disabilities (WWD)

• WWD have the same chance of getting breast cancer as women without disabilities

But—some may have higher risk due to:
  – Obesity
  – Delay in having children
  – Excess radiation exposure
  – Delay in diagnosis due to not getting screenings on a routine schedule
  – Unsuccessful or inaccurate screenings
Barriers to Mammography

- Lack of Information for WWD
- WWDs’ Attitudes
- Lack of Physical Access
- Providers’ Attitudes
- Providers’ Knowledge and Skills

OODH 3-Prong Approach
1. Education to WWD
2. Education to Radiologist Technologists
3. TA to Mammography Facilities
CDC’s Right To Know Campaign

• Appropriate Information:
  • Culturally relevant messages and materials that encourage women to be screened
  • Increase breast cancer screening among women aged 50 years and older with mobility impairments
CDC’s Right To Know Campaign

- Poster series
- MP3 recordings
- Banner ads
- Low tech fliers
- Ad slicks
- Tip sheet
- Dissemination guide
- CDC.gov/TheRightToKnow

It’s your life. No one can protect it better than you.

Breast Cancer is the most common cancer in women. And living with a disability does not make you immune. Know the facts about breast cancer and why you need to make screening a regular part of your health care.

- An estimated 200,000 new cases of breast cancer will be diagnosed in American women this year.
- Women with disabilities are just as likely to be at risk for breast cancer as women without disabilities; the biggest risk factors are being a woman and aging.
- The chances of getting breast cancer increase with age. One out of every 8 women will get breast cancer at some point in her life.
- Finding breast cancer early increases chances of survival. If breast cancer is caught early, 9 out of every 10 women survive more than 5 years.
- Getting tested regularly for breast cancer is the best way for women to lower their risk. Mammography can help find cancer early when it’s most treatable.

Getting Screened

As a woman living with a disability, you may face a number of challenges that make it difficult to get a quality mammogram and clinical exam. Here are some tips to make it easier.

When scheduling a mammography, ask:

- How should I dress?
- How do I prepare if I use a wheelchair or a scooter?
- Can the machine be adjusted so I can remain seated?
- How long is the appointment and can I have additional time if I need it?

Let the scheduling staff know that you can/cannot:

- Sit upright with or without assistance
- Lift and move your arms
- Transfer from your chair/scooter
- Underdress/dress without assistance

When preparing for your mammogram, remember:

- Wear a blouse that opens in the front
- Wear a bra that you can easily remove
- Do not wear deodorant or body powder
- Talk to your healthcare provider about any disability-related concerns

If you are between the ages of 40 to 49, talk to your doctor about when and how often you should have a screening mammogram. If you are between the ages of 50 to 74, be sure to have a screening mammogram every two years.
CDC’s Right To Know Campaign

• Attitudinal Barriers:
  – Overwhelmed with other personal health issues
  – Believe they are “immune” to breast cancer
  – Worried about being a burden to staff
  – May have had a previous bad experience

It may take more energy, but it’s worth it.

— JUNE, BREAST CANCER SURVIVOR

June, who was born with cerebral palsy, knows first-hand that we’re not immune to breast cancer just because we live with a disability. She tells us to ask for an accessible screening and not let the system decide what’s best. Finding her cancer early allowed June to go on with her life. Screening allowed her to take control. If you are between the ages of 40 to 49, talk to your doctor about when and how often you should have a screening mammogram. If you are between the ages of 50 to 74, be sure to have a screening mammogram every two years.

BREAST CANCER SCREENING THE RIGHT TO KNOW

For more information, visit www.cdc.gov/RightToKnow or call 1-800-CDC-INFO (232-4636) 1-888-232-6348 (TTY)
Physical/Mobility Disabilities:
Let staff know if you use a wheelchair, scooter, walker, or cane. Ask if the facility is accessible (ask about the parking lot, building entrance, elevator, waiting area, exam room, and restrooms). Tell the staff if you can sit upright without assistance, stand, lift and move your arms, or undress and dress without assistance, and transfer from your wheelchair or scooter to another chair. You can ask to remain in your wheelchair or scooter during the mammogram and whether you can be accommodated if your wheelchair does not have removable arms. Tell staff if you experience spasticity or other physical issues that may interfere with the mammogram procedure.

Resources:
1. American Association on Health & Disability
   www.aahd.us
2. Breast Health Access for Women with Disabilities (BHAWD)
   www.bhawd.org
3. Center for Research on Women with Disabilities
   www.bhawd.org/flowd
4. The National Women’s Health Information Center
   www.nwhin.gov
5. National Cancer Institute
   www.cancer.gov
6. Susan G. Komen for the Cure
   www.komen.org
7. North Carolina Office on Disability and Health
   www.fsg.unc.edu/~noodh

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Oregon Breast and Cervical Cancer Program
Oregon Partnership for Cancer Control
Women with Disabilities Health Equity Coalition

This publication is available in alternate formats upon request.

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Breast Health Educational Materials

What is a mammogram?
A low-dose X-ray picture of the breast used to detect breast cancer. Mammograms can show breast changes like cysts, lumps or tumors. Research has found that most changes found are not cancer.

Tips for women with Disabilities: Getting Your Mammogram

Q: How often should a woman get a mammogram?
The National Cancer Institute recommends that women age 40 and older have mammograms every 1 to 2 years. Women with disabilities may be at higher risk due to:
- Obesity
- Lack of or delayed childbearing
- Radiation exposure
- Delayed diagnosis
- Lack of preventive screening

Q: How can I, a woman with a disability, maintain my breast health effectively?
- Have regular breast exams - perform self exams once a month, get a clinical breast exam from your doctor, and get a mammogram if you are 40 years of age or older, or if your doctor recommends it.
- Call your doctor's office if you notice a lump or thickening of the breast, a dimple, discharge from the nipple, or skin changes on the breast.
- Schedule the mammogram when your breasts will be least tender, usually the week after your period.
- Prepare for the mammogram by wearing a blouse that opens in the front or a top that is easily removed. Don't wear underarm deodorant or powder or lotion on or near the breasts.
- Be prepared to provide information on changes in your medical history, the date of your last period, your current medications, and any chronic pain or breast problems.

Be a self-advocate! When scheduling the appointment, inform staff of your particular disability and request any reasonable accommodations needed, such as extra time, a sign language interpreter, or assistance with dressing. If you had a prior mammogram, tell the technologist what accommodations had worked for you in the past.

Depending upon your disability, consider requesting the following accommodations when scheduling the appointment:

- Blind or Visual: Inform staff if you will need alternate formats of printed material such as large print, computer disc/CD-ROM, Braille, or cassette tape.
- Communication Disabilities: Inform staff it might take extra time for you to communicate effectively with them. Let staff know your preferred method of communication.
- Deaf or Hard of Hearing: Use the Relay Telecommunications system when scheduling or calling the office. Let staff know if you need a sign language interpreter. Invite a friend or family member to go with you. Let the medical staff know about your hearing loss and how they can help you communicate and understand.
- Emotional Disability: Before the exam, prepare emotionally by thinking about the importance of a mammogram and practicing relaxation and deep breathing techniques. Use these techniques during the exam to lessen anxiety. Invite a friend or family member to go with you if she will help make you feel more at ease.
- Intellectual Disabilities: Ask questions if you don’t understand something. If you have a caregiver, have her accompany you to the appointment and stay for the exam if you need her to. You may take notes or have your caretaker take them.
RTK Community-Based Education

Breast Cancer

- How is the husband going to feel?
- Resources
- How to get help with insurance
- Fears
- Proper exam
- Hereditary
- Family history
- Dead
- Last friend
- Help system
- Different ways
- Dead
RTK Community-Based Education
RTK Community-Based Education
Right To Know Community Education

Goals

- How does breast cancer?
- What are our chances of getting breast cancer?
- What is breast cancer?
Physical Barriers to Mammography

• Lack of Access:
  – Transportation
  – Path of travel from parking lot to exam room
  – Screening room and/or equipment
### SW Region Mammography Facilities

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>City</th>
<th>Evaluation Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bay Area</td>
<td>Coos Bay</td>
<td>2011</td>
</tr>
<tr>
<td>Oregon Imaging</td>
<td>Springfield</td>
<td>2009</td>
</tr>
<tr>
<td>Peace Harbor</td>
<td>Florence</td>
<td>2009</td>
</tr>
<tr>
<td>Providence</td>
<td>Medford</td>
<td>2009</td>
</tr>
<tr>
<td>Rogue Valley Medical Center</td>
<td>Medford</td>
<td>2009</td>
</tr>
<tr>
<td>Three Rivers Women's Imaging</td>
<td>Grants Pass</td>
<td>2012</td>
</tr>
<tr>
<td>Sky Lakes Medical Center</td>
<td>Klamath Falls</td>
<td>2012</td>
</tr>
<tr>
<td>Oregon Imaging Centers, University District</td>
<td>Eugene</td>
<td>2012</td>
</tr>
<tr>
<td>Oregon Imaging Centers, Barger</td>
<td>Eugene</td>
<td>2012</td>
</tr>
<tr>
<td>Oregon Medical Group, The Cedar Clinic</td>
<td>Eugene</td>
<td>2012</td>
</tr>
<tr>
<td>Cedar Clinic Mammography at Center for Women's Health</td>
<td>Eugene</td>
<td>2012</td>
</tr>
<tr>
<td>Santiam Memorial Hospital: Imaging Department</td>
<td>Stayton</td>
<td>2012</td>
</tr>
</tbody>
</table>
Providers’ Barriers to Mammography

• Attitudes and Skills:
  – Do not address the needs of WWD
  – Do not allow enough time for the exam
  – Do not provide accurate screening

Tips for Mammography Staff:
How to Serve Women with Disabilities More Effectively

General Tips for Mammography Staff on How to Serve Women with Disabilities:

Policies and Procedures
Establish policies and procedures that ensure:
  • Adequate physical access is provided for women with disabilities throughout the Department and adhere to standards of the American with Disabilities Act
  • Appropriate questions are asked while scheduling appointments
  • Documentation of issues relating to encounters with women with disabilities
  • Training of new personnel on issues relating to women with disabilities

Scheduling
  • Ask the patient if she might need special accommodations
  • Provide longer appointment times and/or exams conducted by two technologists, when necessary for a patient
  • Occasionally, a patient will have traveled a significant distance and will have experienced difficulties obtaining accessible transportation, such as cost. It would be helpful if a radiologist was scheduled to read the mammogram at such an appointment, with results delivered before the patient leaves.

Day of Appointment
  • Let the patient know what to expect
  • Ask the client what assistance she needs
  • Communicate directly with the patient
  • Assure the patient that any discomfort experienced during the exam only lasts a few seconds

On-going Training
  • Make all staff members aware of the viewpoints of women with different kinds of disabilities
  • Portray women with disabilities as women first

Tips on How to Serve Women with Specific Types of Disabilities:
Blind or Visual Disabilities
  • Tell the patient you are in the room before you approach her
  • Ask if she would like a sighted guide to walk through the facility with her
  • State directions and describe materials clearly
  • Provide information in alternative formats (e.g. Braille, large-print, or audio format)
  • If the patient has a Service Animal, allow the animal to accompany the patient. Do not pet or talk to it without permission.
Training Mammography Technologists

- August 2009: Eugene OR – 47
  - OODH
- March 2010: Portland OR – 35
  - OODH + Kaiser Permanente
- June 2010: Bend OR – 24
  - OODH + Office of Women’s Health Region X
- April 2011: Hood River OR – 80
  - OODH + Oregon Society of Radiologist Technologists (OSRT)
- May 2014: Portland OR – 76
  - OODH + OSRT + Susan G. Komen
- Fall 2014: Nationally (on-line)
  - OODH + American Society of Radiologist Technologists
Training Offered…

- Perspectives and stories from 4 women with various disabilities
- Positioning Techniques and Strategies
- Appropriate Communication and Etiquette
- Disability Data
- CEUs
Questions for Panelists

- “Breast cancer” …means to you?
- How much did you know about mammograms…?
- Positive experiences with screening?
- Improvements?
- Advice for the audience?
Training Evaluation

• For all 5 trainings:
  – Satisfied to Highly Satisfied: 97%-100%

• For 4 trainings
  – Significant increase in their knowledge of:
    • general disability knowledge and definitions and;
    • positioning techniques.
Outcomes from training
Outcomes from training
Outcomes from training

OHSU Breast Center
Wheelchair
Outcomes from training

Welcome, you are at the clinic.
Bienvenida, estás en la clínica.
Outcomes from training

Thank you for waiting.
Gracias por haber esperado.
Outcomes from training

Taking more pictures.
Vamos a tomar más imágenes.
Outcomes from training

Doctors looking at your pictures.
El doctor/la doctora está revisando las imágenes que tomamos.
Outcomes from training – 6 month follow-up

• Shared with others at their facility
• When scheduling an appointment, ask if assistance or more time is required
• Made physical improvement(s):
  – More accessible dressing room
  – Increased signage – rooms more clearly marked – added Braille
  – Evaluated and improved disabled parking spots
• Talked to facility’s manager about increasing appointment times
Questions?

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Special Thanks!
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