

# Addressing Cancer Disparities Through Community Engagement: Improving Breast Health Among Haitian Women

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**C**ancer is a significant part of the national dialogue on health disparities and is a priority for Healthy People 2010 (Smedley, Stith, & Nelson, 2003; U.S. Department of Health and Human Services, 2006). The ultimate causes of cancer disparities are not well understood but likely arise from a complex interplay of factors that impede awareness about screening and limit access to preventive and follow-up care; such factors include, but are not limited to, low socioeconomic status, culture, education level achieved, literacy, social injustice, and poverty (Albano et al., 2007; Braveman & Gruskin, 2003; Chu, Miller, & Springfield, 2007; Singh, Miller, Hankey, & Edwards, 2003). The factors affect access to care and cancer survival and yield an uneven distribution of cancer morbidity and mortality that substantially affects marginalized and disadvantaged populations (Brookfield, Cheung, Lucci, Fleming, & Koniaris, 2009). For example, African American women are disproportionately burdened with poor breast and gynecologic cancer outcomes, often as a result of late-stage diagnoses (Tammemagi, 2007). As a result, identifying special populations that suffer a heavy burden of cancer, determining the causes, and applying relevant interventions to eliminate the disparities are critical (Freeman, 2004).

Immigrants living in the United States are a special population that is impacted heavily by health disparities. International-born status has many implications for women regarding healthcare access, including breast and cervical cancer screening (Goel et al., 2003). For example, immigrant women from ethnically diverse populations tend to have lower incidence but higher mortality from breast cancer; reasons most often cited for this disparity are structural in nature (e.g., late presentation because of limited access to care, healthcare navigation miscommunications, low English proficiency, citizenship status, economic marginalization, social conditions that arise from a combination of these factors) (Andrulis & Brach, 2007; de Alba, Hubbell, McMullin,

**Purpose/Objectives:** To describe processes for fostering community engagement among Haitian women to facilitate breast health education and outreach that are consonant with Haitians' cultural values, literacy, and linguistic skills.

**Data Sources:** Existing breast cancer education and outreach efforts for Haitian immigrant communities were reviewed. Local community partners were the primary source of information and guided efforts to create a series of health-promoting activities. The resultant partnership continues to be linked to a larger communitywide effort to reduce cancer disparities led by the Tampa Bay Community Cancer Network.

**Data Synthesis:** A systematic framework known as the CLEAN (Culture, Literacy, Education, Assessment, and Networking) Look Checklist guided efforts for improved communications.

**Conclusions:** Community engagement forms the foundation for the development and adaptation of sustainable breast education and outreach. Understanding and considering aspects of Haitian culture are important to the provision of competent and meaningful care.

**Implications for Nursing:** Nurses should expand their skills, knowledge, and competencies to better address the changing demographics of their communities. Nurses also can play a critical role in the development of outreach programs that are relevant to the culture and literacy of Haitian women by forming mutually beneficial partnerships that can decrease health disparities in communities.

Sweningson, & Saitz, 2005; Echeverria & Carrasquillo, 2006; Seeff & McKenna, 2003). In addition, immigrant women often experience more breast and cervical cancer and mortality than women born in the United States because of a lack of preventive care access in their countries of origin (Kramer, Ivey, & Ying, 1999; Lewis, 2004) and belief systems incongruent with preventive screening behaviors (Consedine, Magai, Spiller, Neugut, & Conway, 2004; McMullin, De Alba, Chavez, & Hubbell, 2005; Suh, 2008). In general, cancer education and outreach in Haitian communities in the United States