Healthcare Factors for Obtaining a Mammogram in Latinas With a Variable Mammography History

John R. Scheel, MD, PhD, Yamile Molina, PhD, Gloria D. Coronado, PhD, Sonia Bishop, BS, Sarah Doty, MSW, LICSW, Ricardo Jimenez, MD, Beti Thompson, PhD, Constance D. Lehman, MD, PhD, and Shirley A.A. Beresford, PhD

Purpose/Objectives: To understand the relationship between mammography history and current thoughts about obtaining a mammogram among Latinas and examine the mediational effects of several healthcare factors.

Design: Cross-sectional survey.

Setting: Federally qualified health centers (Sea Mar Community Health Centers) in western Washington.

Sample: 641 Latinas nonadherent and adherent with screening mammography.

Methods: Baseline survey data from Latinas with a mammography history of never, not recent (more than two years), or recent (less than two years) were analyzed. Preacher and Hayes methods were used to estimate the mediation effect of healthcare factors.

Main Research Variables: The survey assessed mammography history, sociodemographic and healthcare factors, and current thoughts about obtaining a mammogram.

Findings: Latinas’ thoughts about obtaining a mammogram were associated with mammography history. Having had a clinical breast examination mediated 70% of differences between Latinas with a never and recent mammography history. Receipt of a provider recommendation mediated 54% of differences between Latinas with and without a recent mammography history.

Conclusions: These findings emphasize the importance of the patient–provider relationship during a clinic visit and help inform how nurses may be incorporated into subsequent screening mammography interventions tailored to Latinas.

Implications for Nursing: As providers, health educators, and researchers, nurses have critical roles in encouraging adherence to screening mammography guidelines among Latinas.

Breast cancer is the leading cause of cancer death for Latinas, and Latinas are more likely than non-Latina Caucasians to be diagnosed with breast cancer at a later stage and to die from the disease (American Cancer Society [ACS], 2015; DeSantis, Ma, Bryan, & Jemal, 2014). The causes of this disparity in late-stage diagnosis have many origins; however, Latinas’ lower adherence to screening mammography guidelines compared to other races and ethnicities remains a major contributing factor (ACS, 2015). Healthcare factors, such as having health insurance and a usual source of care, appear to be important and may contribute to behavioral disparities (Gonzalez et al., 2012; Jerome-D’Emilia & Suplee, 2015; Nuño, Castle, Harris, Estrada, & García, 2011). The impact of healthcare factors on women’s thoughts about mammograms may underlie these associations, based on psychosocial research concerning conscious thought and behavior (Baumeister, Masicampo, & Vohs, 2011). However, despite interventions to address these factors, nonadherence...