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A high proportion of patients with breast cancer in the Philippines present at an advanced stage and have a rapid, unfavorable outcome. Providing breast cancer education and early detection to this population is important to help reduce this health disparity. This article describes the impact of a trainthe-trainer program, with mission groups traveling to the Philippines to promote female residents' breast cancer awareness, knowledge, and intent for future screening.

## AT A GLANCE

- Breast cancer poses a significant threat for women in the Philippines, and a lack of information and resources in this vulnerable population contributes to the health disparity.
- There is a need to increase awareness and education for this vulnerable population, and a train-the-trainer program improved awareness and increased screening practices.
- Engaging local government, health department, community members, and healthcare providers is important to ensure program sustainability.

early detection; Philippines; health resources; breast neoplasms; organizations

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## **Breast Cancer Early Detection**

An academic-community partnership in the Philippines

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ike other low- and middleincome countries (LMICs), a disproportionate cancer burden exists in the Philippines. Breast cancer is the most common type of cancer and a leading cause of cancer death among women in the Philippines (Global Cancer Observatory, 2019). The Philippines has the highest incidence of breast cancer in Asia, with 1 in every 13 women being expected to develop this disease during her lifetime (Philippine Breast Cancer Network, n.d.). Of 79,019 new cases of cancer in women of all ages in the Philippines in 2018, 24,798 (31%) were breast cancer, with age-standardized incidence and mortality rates of 52.4 and 17.5 per 100,000, respectively (Global Cancer Observatory, 2018).

Like many LMICs, the Philippines has a dual health system that consists of a public and a private sector. The public healthcare system delivers primary care, including health promotion and preventive services, through rural health units, healthcare centers, and barangay (local town) health stations (Dayrit, Lagrada, Picazo, Pons, & Villaverde, 2018). About 40% of the hospitals in the Philippines are public (World Health Organization [WHO], 2012). Healthcare providers are concentrated in urban and metropolitan areas; therefore, there is a dearth of healthcare manpower in rural areas.

In February, the Congress of the Philippines (2019) approved the Universal Health Care Act (Republic Act No. 11223) and the National Integrated Cancer Control

Act (Republic Act No. 11215) (Congress of the Philippines, 2018). Universal health care will be administered by the Philippine Health Insurance Corporation, a government corporation, and will include coverage for essential services from preventive to palliative care (Congress of the Philippines, 2019). Mammography likely will not be covered because it is not included in the WHO (2019) list of essential health services for universal health coverage (Republic of the Philippines Department of Health, n.d.).

## **Breast Cancer Early Detection** in the Philippines

Education, early detection, and prompt diagnosis of breast cancer significantly improve the chances of successful treatment and survival (WHO, 2018). In LMICs, such as the Philippines, where population-based screening mammography programs are unavailable and mammography is not readily accessible or financially within reach (Department of Health, n.d.), the Breast Health Global Initiative recommends alternative strategies for early detection, including breast health awareness education programs and clinical breast examinations (CBEs) (Anderson et al., 2017). In addition, the Philippine Cancer Society (2014) recommends mammography for women aged 50 years or older, a monthly breast self-examination (BSE), and an annual CBE for women aged 25 years or older.

The Philippine Breast Cancer Control Program (P-BCCP) is a government program that focuses on public information and health education, case finding, and