

Community-Based Participatory Approach to Reduce Breast Cancer Disparities in South Dallas

Kathryn Cardarelli^{1,2}, Rachael Jackson², Marcus Martin², Kim Linnear², Roy Lopez³, Charles Senteio⁴, Preston Weaver⁵, Anna Hill⁷, Jesse Banda⁶, Marva Epperson-Brown⁵, Janet Morrison⁵, Deborah Parrish⁸, JR Newton⁹, Marcene Royster¹⁰, Sheila Haley², Camille Lafayette², Phyllis Harris², Jamboor K. Vishwanatha¹¹, and Eric S. Johnson¹

(1) School of Public Health, University of North Texas (UNT) Health Science Center; (2) Center for Community Health, UNT Health Science Center; (3) Federal Reserve Bank of Dallas; (4) Namamai, Inc.; (5) Central Dallas Ministries; (6) East Dallas Development Corporation; (7) Dolphin Heights Neighborhood Association; (8) Hope Restoration, Inc.; (9) University of Texas Southwestern Medical Center; (10) Parkland Health and Hospital System; (11) Graduate School of Biomedical Sciences, UNT Health Science Center

What Is the Purpose of This Study?

- To develop and assess the efficacy of an educational intervention to promote increased knowledge about the importance of early detection to reduce breast cancer mortality.
- To increase uptake of breast cancer screening practices for low-income African American women in South Dallas. The Dallas Cancer Disparities Coalition led the effort through its Community Advisory Board, in collaboration with a local university.

What Is the Problem?

- The South Dallas area, predominantly composed of racial and ethnic minorities and impoverished residents, experiences higher cancer mortality rates than Texas and the United States.
- Multiple barriers to cancer prevention exist in this population, necessitating an innovative, community-led approach to addressing breast cancer disparities.

What Are the Findings?

- The prevention program was successful in improving uptake of screening mammography and breast self-examination, as well as increases in knowledge.
- The program did not significantly impact fear and fatalism perceptions, nor did it significantly enhance participants' sense of control, but these factors also did not predict receipt of the screening measures.
- Community involvement in all phases of the study increased the community's capacity for prevention as well as sustainability of the program.
- The educational intervention continues in an expanded form as a state-funded prevention program.

Who Should Care Most?

- Cancer prevention program professionals.
- Medical care providers and hospital systems serving low-income African American women.
- Community coalitions.

Recommendations for Action

- Balance the use of evidence-based interventions with the needs and assets of the targeted audience.
- Measure community-based participatory research processes to continuously strengthen coalition partnerships.
- Disseminate intervention findings to community members first.
- Acknowledge that cancer prevention programs aimed at hard-to-reach populations require innovative, and sometimes resource-intensive, approaches to engage the community.