

BEFORE BREAST CANCER DIAGNOSIS

funded by Advancing a Healthier Wisconsin Endowment and designed by the

Racine Collaborative Work Group

Background

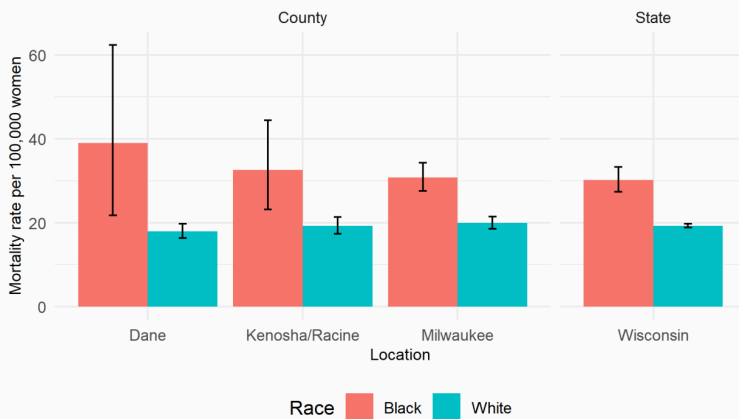
During the Racine Collaborative Work Group's data exploration, the work group members reviewed significant data that guided the group's design process:

- Wisconsin has the third largest Black-White disparity for female breast cancer mortality.
- Racine County has the second largest Black-White disparity for female breast cancer mortality in Wisconsin.
- Black women have higher rates of "late-stage" breast cancer diagnoses in Wisconsin.

The RCWG also had many conversations with community leaders, local nonprofits, and community stakeholders to gather supplemental information to inform the design process.

Based on the findings from the data exploration process, the RCWG determined that the focus of the group would be to reduce breast cancer mortality rates amongst Black women in Racine County.

Figure 12: Breast Cancer Mortality Rates
Black and White Women, Wisconsin Counties and State, 2010-2019



Figures 1 and 2: Breast Cancer Disparities Between Black and White Women in Wisconsin. Madison, WI: University of Wisconsin Carbone Cancer Center and Wisconsin Department of Health Services; 2022. Available online at: www.wiscancer.org.

Figure 1.

Figure 9: Breast Cancer Mortality,
Black and White Women, Southeastern Region, 1995-2019

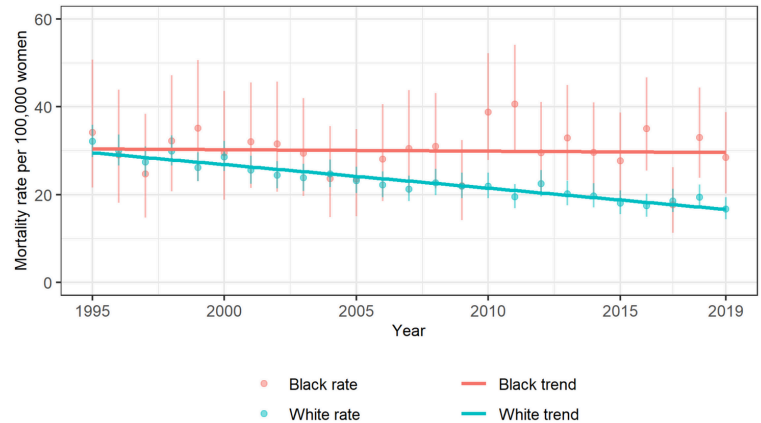


Figure 2.

Program Overview

To address the disproportionate impact breast cancer mortality has on Black women, we seek to intervene **Before Breast Cancer Diagnosis**.

To achieve this, we will work with Planned Parenthood of Racine to 1) identify breast cancer risk assessment tool(s) and integrate standardized processes 2) incorporate trained community health workers to prepare women for risk assessments, navigate high risk women to relevant resources/care, and support follow-up and receipt of care; and navigate and support average risk women who are under-screened (not receiving appropriate screening) to mammography; and 3) assess the efficacy and impact of the intervention on individuals and systems. As a group, we recognize that we will likely not see an impact on mortality rates within the timeframe of our project, however, the RCWG believes that through targeting the "root causes" of breast cancer, this project will have a long-term impact on reducing breast cancer disparities within our community.

Key Activities

- Hiring/Training CHWs at Racine PPWI
- Working with clinic staff to improve workflow, incorporate risk assessments and SDOH assessment, and make appropriate referrals.
- Identify community resources to serve as referral network.
- Conduct outreach to provide awareness about our program.
- Create marketing/messaging campaigns/materials to support outreach.
- Develop a curriculum/training that centers racial equity and patient experience.
- Identify policy and advocacy opportunities.

Program Aims

- Aim 1:** To integrate systematized breast cancer risk assessment into standard clinic procedures using community health workers at Planned Parenthood.
- Aim 2:** To navigate high-risk and under-screened women to relevant services (i.e., genetic counseling, risk management, screening/surveillance)
- Aim 3:** To evaluate the implementation process across sites and impact of breast risk assessment efforts on patient, provider, and system-level factors.

Community Partners

- Planned Parenthood of Wisconsin
- MCW genetic testing & counseling
- Ongoing development of community referral network

Collaborative Work Group Initiative Network



Great Lakes Inter-Tribal Council, Inc.
Lac du Flambeau, Wisconsin

