Sociocultural considerations in cancer prevention and control: breast and cervical cancer in low-resource countries

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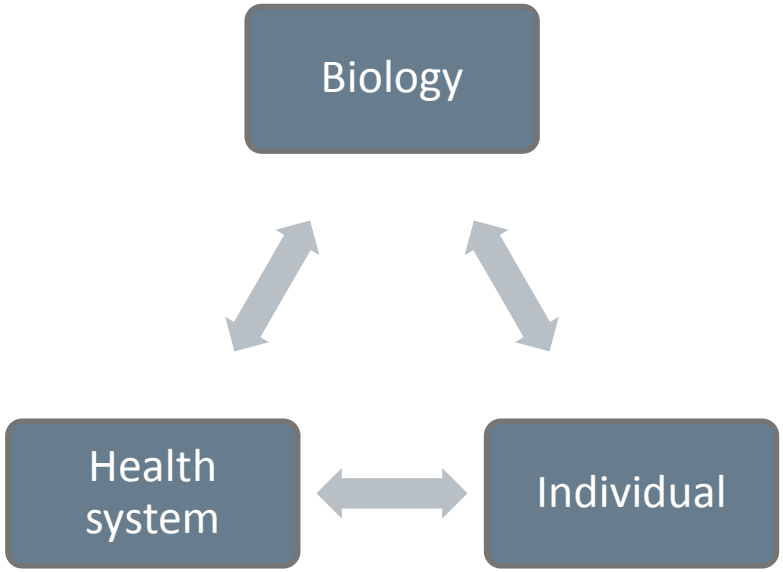
Outline

- What do we mean by sociocultural considerations?
- Why are they important for cancer control? Examples from breast and cervical cancer programs.
- Lessons learned and recommendations.

Social and cultural factors

- Cultural factors
  - Beliefs, customs, practices, and behaviors shared by a group.
- Social factors
  - Education, income and occupation, ethnicity, race, religion, political affiliation, and geography.



1. Determinants of illness and health
2. Influencers of health interventions

Ecological models for health interventions

- *Ecology* refers to relationships of organisms and their environments.
- In health, it refers to the belief that health behavior has multiple levels of influences:

  Individual ↔ interpersonal ↔ community ↔ institutional ↔ policy

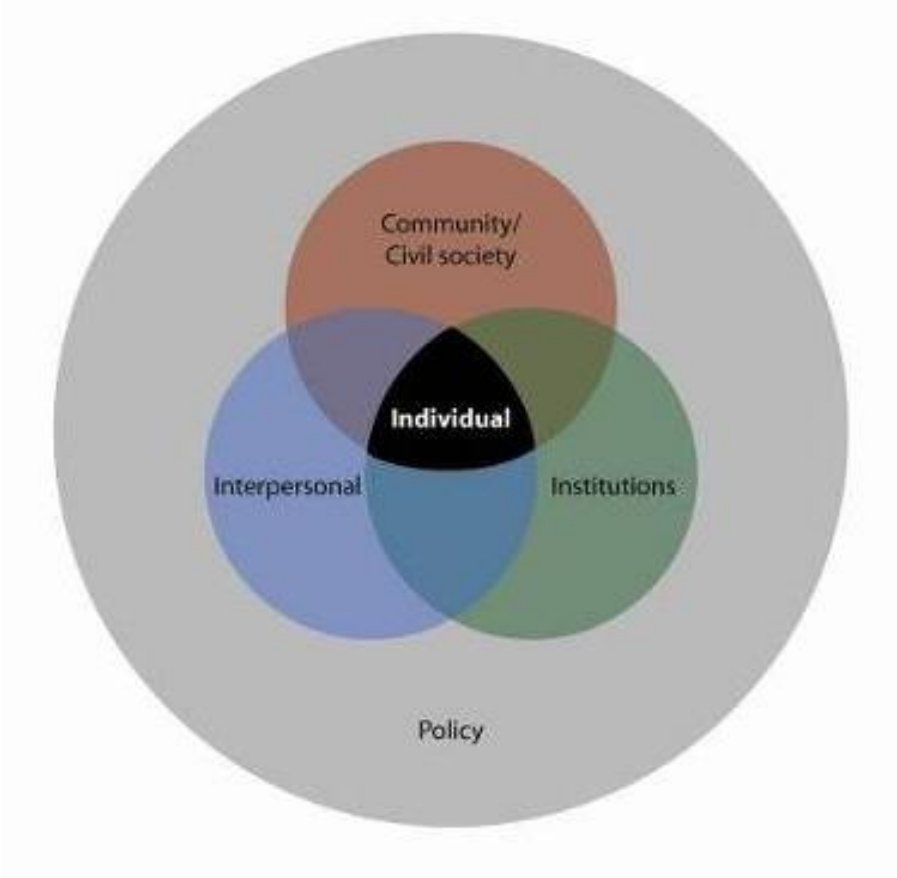
Four core principles:

1. Multiple influences on health behaviors at all levels.
2. Influences interact across levels.
3. Ecological models are behavior-specific.
4. Multi-level interventions have greatest likelihood of impact.

Sallis, Owen, and Fisher, 2008.

An ecological approach to HPV vaccine

- In 2006, we needed framework for gathering data to develop program strategies and educational materials for introducing HPV vaccine.
- Considered factors related to:
  - Individual girls,
  - Interpersonal influencers like family and teachers,
  - Community influencers like cultural and social leaders,
  - Institutional actors like health workers, and
  - Policy environment.



Bingham et al., 2009.

Why is this important for cancer control?

- We strive to make all health care effective, efficient, acceptable, and available on an equitable basis.
- BUT for cancer prevention and control, social and cultural factors can make this particularly challenging.

Stigma

- Strong stigma attached to cancer because of lethality, lack of understanding of disease process, and fear of contagion.

Time lag

- Cancer prevention has a long time lag prior to its benefit; many cultures not future-oriented.

Expense

- High cost of cancer treatment leads to inequitable access and family impoverishment.

Examples from breast and cervical cancer

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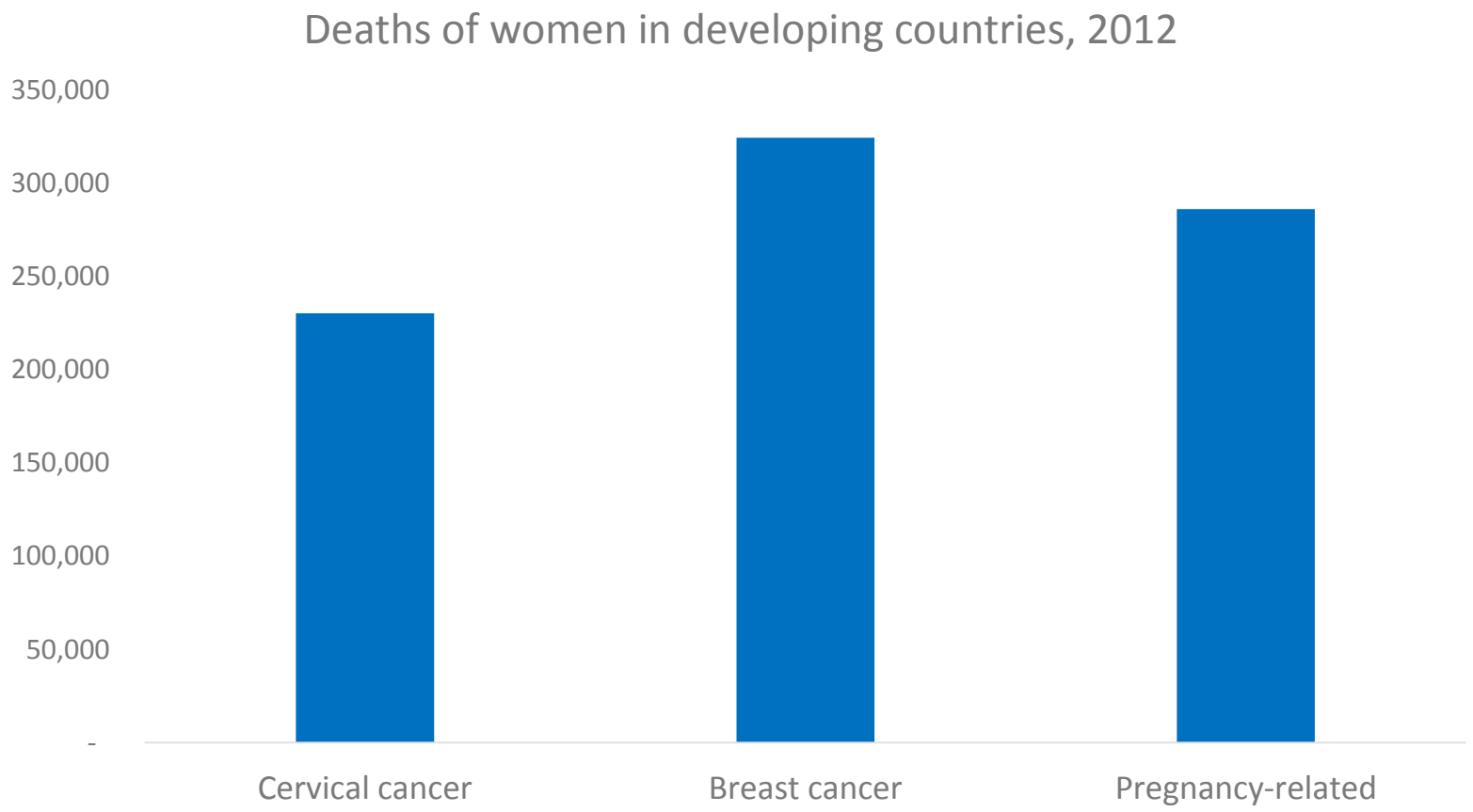
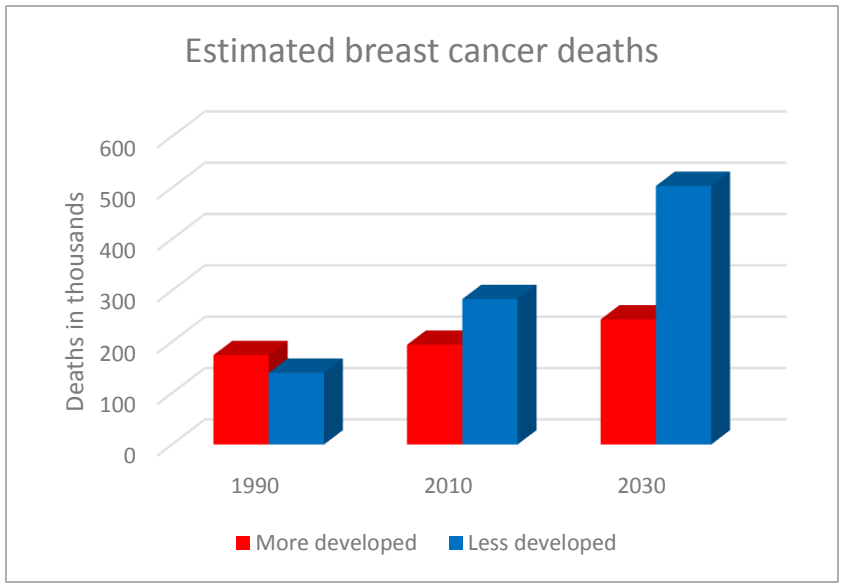
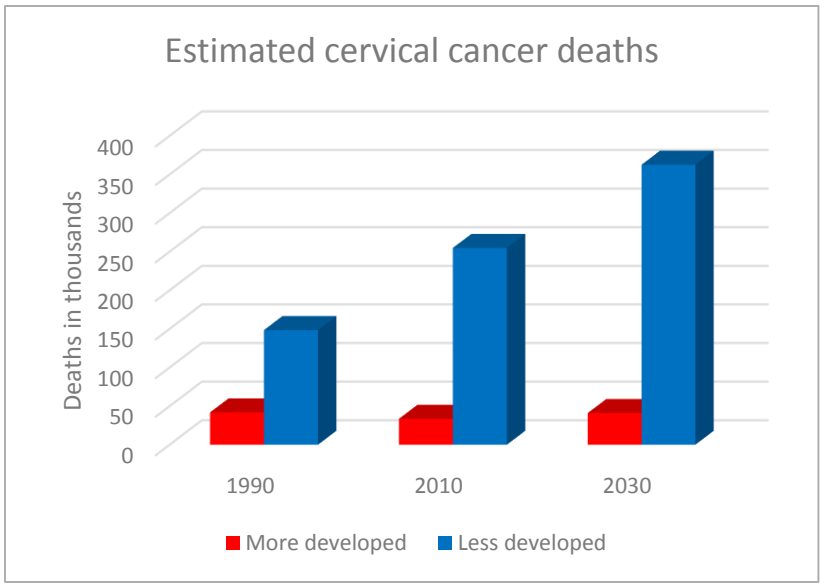
Breast and cervical cancer deaths have outstripped maternal mortality—and continue to rise



Differences between rich and poor are growing



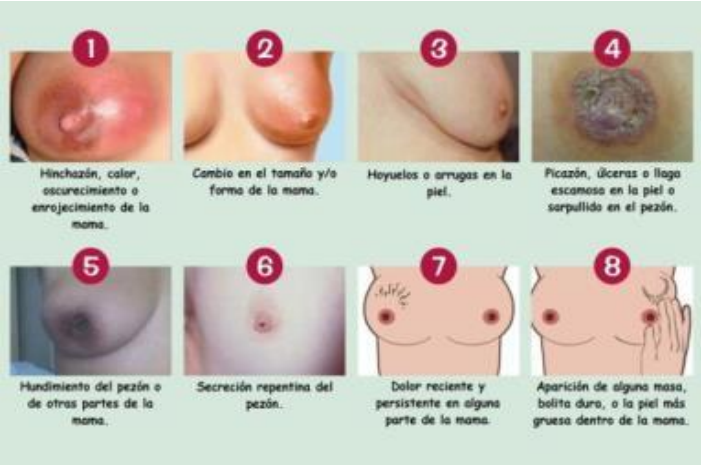


Sources: Pisani et al., 1999; GLOBOCAN 2008; GLOBOCAN 2012.

Opportunities for breast and cervical cancer prevention and control

- Breast cancer
  - Early detection through screening or symptom awareness.
  - Linkage to effective treatment and psycho-social support.

- Cervical cancer
  - Primary prevention by HPV vaccine.
  - Screening and treatment for precancer.



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Sociocultural factors related to sexuality

- Beliefs about the body related to sexuality can affect women's willingness to seek treatment for symptoms associated with the breasts or genitals, delaying early detection or surgery.
- Beliefs about disease causality being related to sexual behavior can raise concerns about being stigmatized or blamed for breast or cervical cancer.
- Concerns about loss of sexual function or desirability (especially with loss of breast) can drive treatment decisions.
- Concerns about impact of HPV vaccine on sexual risk-taking.
- Modesty concerns can prevent women from being examined by a health worker—especially a male provider.

Fatalism: a cultural construct

- Fatalism is the general belief that all events are determined by fate (Oxford English Dictionary).
- The intensity and extent of fatalism can be affected by ethnicity, religion, and social status.
- In health, it is often operationalized as negative or passive attitudes regarding preventive health practices and disease outcomes (de los Monteros and Gallo, 2011).
- In breast and cervical cancer, it can affect willingness to seek screening or to accept treatment.
- It can be especially difficult to counteract if survivors are rare or not visible.

Fertility: a cultural value

- Less important for older women and cancer treatment considerations.
- Very important—e.g., in Africa—for parents worried about possible effects of HPV vaccine on young adolescent girls.

PATH/Jackie Sherris

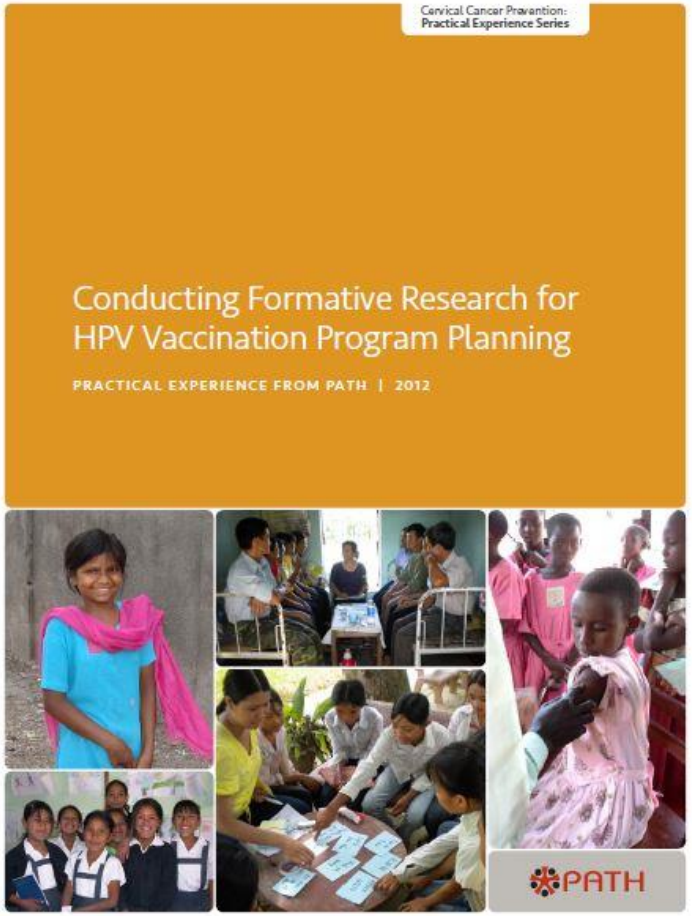
Age, gender, and social position: mid-adult women at disadvantage

PATH/Will Boase

- In many societies, mid-adult women have low autonomy for seeking care, and may be seen as no longer needing health care services (e.g., for child-bearing).
- Women are less likely to have access to economic resources for travel to screening or follow-up care.
- Social customs often dictate that women put the needs of partners and children before their own health.

Lessons and possible solutions: how to start

- Critical role for formative research.
  - Identify potential factors and concerns.
  - Develop conceptual framework like ecological model to guide questions.
- Search literature, already rich in some areas.
- Assemble multi-disciplinary team.



Sometimes easier to change technology than to change culture

- The *care*HPV™ test for cervical cancer can be used with self-collected vaginal specimens.
- Can overcome some modesty concerns (although it may raise others) as well as make collection in the community possible (reducing travel and cost barriers).

Instancia por la Salud y el Desarrollo de las Mujeres/Guatemala Ministry of Health

Cancer survivors can play critical role

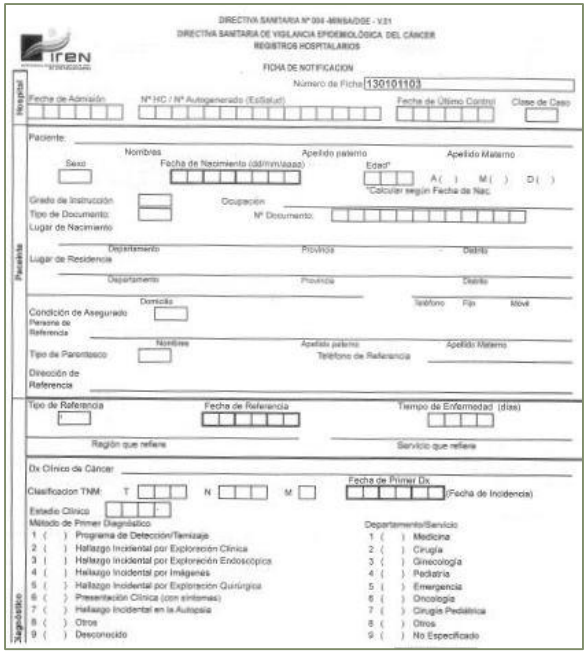
- Reach to Recovery International (UICC and Cancer Council Queensland) is one example, for breast cancer.
- Local groups for breast or cervical cancer are in many countries.
  - Patient support groups.
  - Advocacy.
  - Visible models of what treatment can achieve.
  - Reduce stigma.

Patient navigators: helping women with breast cancer in Peru

PATH/Tara Hayes-Constant

- Cancer patients and their families in Peru face fragmented systems for diagnosis, treatment, and rehabilitation.
- Local volunteer group worked with PATH to develop curriculum and resource materials.
- Now being adopted and expanded by INEN, national cancer institute in Lima.

Include key socio-cultural variables in information systems to enable tracking and analysis



DIRECTIVA SANITARIA Nº 004-MINSA/DGE - V.01
DIRECTIVA SANITARIA DE VIGILANCIA EPIDEMIOLÓGICA DEL CÁNCER
REGISTROS HOSPITALARIOS

FICHA DE NOTIFICACION

Número de Ficha: 130101103

Hospital
Fecha de Admisión | Nº HC / Nº Autogenerado (EsSalud) | Fecha de Último Control | Clase de Caso

Paciente
Nombres | Apellido paterno | Apellido Materno
Sexo | Fecha de Nacimiento (dd/mm/aaaa) | Edad* A( ) M( ) D( )
*Calcular según Fecha de Nac.
Grado de Instrucción | Ocupación
Tipo de Documento | Nº Documento
Lugar de Nacimiento: Departamento | Provincia | Distrito
Lugar de Residencia: Departamento | Provincia | Distrito
Domicilio | Teléfono | Fijo | Movil
Condición de Asegurado
Persona de Referencia: Nombres | Apellido paterno | Apellido Materno
Tipo de Parentesco | Teléfono de Referencia
Dirección de Referencia

Referencia
Tipo de Referencia | Fecha de Referencia | Tiempo de Enfermedad (días)
Región que refiere | Servicio que refiere

Diagnóstico
Dx Clínico de Cáncer | Fecha de Primer Dx
Clasificacion TNM: T N M | (Fecha de Incidencia)
Estadio Clínico
Método de Primer Diagnóstico
1 ( ) Programa de Detección/Tamizaje
2 ( ) Hallazgo Incidental por Exploración Clínica
3 ( ) Hallazgo Incidental por Exploración Endoscópica
4 ( ) Hallazgo Incidental por Imágenes
5 ( ) Hallazgo Incidental por Exploración Quirúrgica
6 ( ) Presentación Clínica (con síntomas)
7 ( ) Hallazgo Incidental en la Autopsia
8 ( ) Otros
9 ( ) Desconocido
Departamento/Servicio
1 ( ) Medicina
2 ( ) Cirugía
3 ( ) Ginecología
4 ( ) Pediatría
5 ( ) Emergencia
6 ( ) Oncología
7 ( ) Cirugía Pediátrica
8 ( ) Otros
9 ( ) No Especificado

IREN

- Big competition for space in health information systems.
- Need to include variables to ensure ability to track for equity and reach to under-served groups.
- Especially difficult for new services.

Conclusions

- Sociocultural factors play a critical role in determining how people react to health messages and health services.
- Both informal and systematic qualitative research on these factors can provide valuable insights.
- The role and magnitude of impact of these factors is specific to particular topics and geographies.
- Careful attention to sociocultural issues is essential for effective and equitable programs to control cancer.

Thank you!

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www.path.org/our-work/womens-cancers