Think Beyond “LOVE PINK”:
The Olive Branch Of Hope
@ University of Toronto Scarborough

The effects of the Think Beyond Love Pink BC Awareness Campaign were greater than we had originally anticipated. We did not expect the campaign to have such quick traction among our targeted age group.

We were delighted to discover that our student volunteers were so impacted by the Campaign that they organized and launched an official student club for The Olive Branch of Hope at the University of Toronto at Scarborough.

BC awareness will continue to grow as this student club will educate, empower and provide a forum for young adults to engage with the discussion on how BC affects women of African Ancestry.

The Think Beyond “Love Pink” Breast Cancer Awareness Campaign was designed by the Olive Branch of Hope, funded by the Women’s Exchange Program at Women’s College Hospital, and conducted in partnership with Dr. Juliet Daniel of McMaster University, The Black Health Alliance, The Canadian Breast Cancer Foundation, HERC (The Health Equity Research Collaborative), and Taibb Community Health Care to raise awareness of Breast Cancer and health among women of African Ancestry (WAA).

The project had a duration of twelve months.

Research Question
Our hypothesis was that a culturally-relevant breast cancer awareness and education campaign would influence change in health practices in premenopausal WAA.

Project Goal
To develop and execute a breast awareness and education program that targets young (age 18-45) WAA across the GTA.
Think Beyond “Love Pink”
Breast Cancer Awareness Campaign

The Issue

TOBOH Breast Cancer (BC) Support Services was founded in 2001 when it was discovered that there were no known BC support services for WAA. Since then, we have determined that some cultural attitudes in African-Caribbean communities may be preventing WAA from undergoing BC screening, treatment, or seeking support services after a BC diagnosis.

A TOBOH-conducted survey of WAA revealed that: 66.4% WAA didn't conduct a Breast Self Exam (BSE), 20.9% forgot, 12.7% didn't know what to look for, and 8.2% were afraid of what they would find so choose not to perform a BSE. Additionally, many WAA are single parents, and their priorities to provide for their family frequently overrides their own healthcare. Most WAA are also reluctant to discuss breast health with family or friends for fear of stigma/abandonment. These are disturbing facts in light of the racial disparity in TNBC (an aggressive subtype) prevalence and outcomes.

Our “Think Beyond ‘Love Pink’” BC awareness and educational campaign is designed to target young WAA and address their emotional/physical needs. The GTA has a rapidly growing racially diverse population and many new immigrants have deep-rooted, counter-productive attitudes to cancer and cancer treatments. Hence, there is a dire need for our type of awareness/educational initiatives to increase cancer survival rates in ethnic communities. While we may not be able to control BC incidence in WAA, we can minimize the risks and improve their quality of life.

The Method

Our primary activities to achieve both our long term and short term goals were:

- **Three Community workshops and one Symposium**
  The Workshops occur in three different areas of the GTA and included a Zumbaathon to actively engage participants in fun exercise and encourage WAA to embrace and pursue healthy lifestyles. The workshops/information session themes included: (i) Healthy nutrition, (ii) Healthy lifestyle options (exercise, not smoking), (iii) Prostate cancer awareness, (iv) Pros and Cons of naturopathic/herbal remedies and drug interactions and, (v) Life after BC with BC survivors.

- **Survey**
  WAA were recruited to participate in a “benchmark” survey to determine their knowledge and understanding of breast health and BC prior to involvement in our “Think beyond “Love Pink”” campaign.

Survey Findings

At each workshop, there were pre- and post-workshop questionnaires given to the attendees. The pre-workshop questionnaire was designed to ascertain the level of BC awareness of each attendee prior to receiving the information that would be shared at the session.

The post-workshop questionnaire was designed to assess the impact that the information had on the attendees’ knowledge and awareness of BC, and also, which steps they are now willing to take towards certain health practices.

We found that after the workshop, there was a significant rise in the willingness to get a mammogram within the next three months among the attendees. Prior to the session, the majority of attendees were not sure when they planned on getting a mammogram.

We also found that after the workshops, there was a slight rise in some of the attendee’s reluctance to get a mammogram due to the issues of physical discomfort and exposure to radiation associated with the exam.

Recommendations for Further Research and Next Steps...

Policies and practices within the health care system that are inclusive to the unique needs of this vulnerable group of women of WAA are much needed. Cancer treatments need to be tailored to the genetic, biological make up of groups that are most at risk of getting aggressive types of cancer. We believe that there needs to be more research into why the certain members within ethnic communities are at higher risk of being diagnosed with aggressive types of cancers so that treatments can be designed to increase their chances of survival.

There also needs to be research into using less evasive screening methods, innovative treatment options that have less side effects, perhaps exploring new treatments in Latin America and Cuba. This will involve greater funding to cover the cost of drugs and treatments for cancer patients that are unemployed, precariously employed or low income.

For our next steps, we will continue our campaign with the next phase: Saliva Collection.

Currently, we are recruiting WAA who are willing to (i) provide saliva samples using the Oracollect Swabs by DNA Genotek for genetic studies of BC in WAA, and (ii) complete an epidemiological questionnaire and a family history tree of cancer incidence that will help to shed light on potential epidemiological factors that may predispose WAA to BC. We plan to have saliva collection events around faith-group and community activities (e.g. Black History Month-February 2018) and we will capitalize on local GTA healthcare workers’ symposiums and conferences whenever possible.
Think Beyond “LOVE PINK”
Breast Cancer Awareness Workshops & Symposium

WORKSHOP #1: Toronto/York Region
Saturday, October 1st, 2016
Parkwood Village Recreation Room

WORKSHOP #2: Peel Region
Saturday, October 16th, 2016
Mississauga SDA Church

Participants listened intently to Blessing Bassey, (PhD Candidate and Education Campaign Organizer), as she explains the recent research on the specific strain of an aggressive form of BC that affects WAA.
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**WORKSHOP #3: Durham Region**
Sunday, November 6th, 2016
McLean Community Centre

**WORKSHOP #4: Hamilton**
Saturday, March 18th, 2017
Philpott Memorial Church

The Hamilton workshop was held on a cold and snowy Saturday, but those that attended found the workshop was very informative and fun. Our volunteers were all undergraduate students from McMaster University. Participants listened intently as they learned about genetic counseling for breast cancer and they laughed and sweated as they participated in a 30-minute Zumba workout.

**SYMPOSIUM**
Sunday, November 19th, 2016
North York Civic Centre

At the end of the first volunteers’ meeting for Think Beyond Love Pink, I was very excited to see work targeted towards women like me who are often overlooked in projects targeted towards a majority group.

As a previous Cancer Research Analyst, I was excited whenever black people wanted to be recruited when I approached them. However, since we are in the minority, I felt that it would be a long way before culturally-specific interventions would be considered for our demographic even though great initiatives were provided for cancer. The Think Beyond Love Pink campaign, however, offered a cultural-specific focus to black people.

In the campaign, I witnessed black people who were not only interested in their health and research, but also wanted others to be too. I was even more encouraged by well-attended offshoot events where Think Beyond Love Pink went to universities, right at the doorstep of young black people.

This campaign went beyond merely making us aware of breast cancer; it further connected the black community by motivating and awakening people like me, young black women with a passion for health and societal change, to keep on going and keep on connecting with those with similar visions. Now, as a nursing student, I am better endowed to think of and act on ways that I can be more culturally competent in the classroom, at the bedside, and in community health functions.

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