

UFHCC Research Day 2017 | Abstract Template

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LIST ALL AUTHORS and AFFILIATIONS – underline presenting author

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TITLE

Developing breast cancer survivorship research in a rural/micropolitan community setting: opportunities and challenges

HYPOTHESIS:

In this descriptive study, we examined characteristics of breast cancer survivors recruited through a community-based program (HealthStreet) that links people to research studies. We sought to understand differences in demographics and attitudes towards research between survivors navigated to or enrolled in research and those neither navigated or enrolled.

BACKGROUND/AIMS:

Breast cancer is the number one cancer diagnosis (30%) among women who receive medical care for cancer at the UF Health/Shands Hospital. A large cohort of breast cancer survivors live in the UFHCC catchment area. Diverse cancer cohorts are important to enroll in cancer survivorship research. The aim of this study was to explore 1) demographic characteristics and 2) factors associated with being navigated and/or enrolled in research studies, including demographics and attitudes toward research participation, among breast cancer survivors in the HealthStreet database.

METHODS:

The sample included community members recruited through HealthStreet (HSt), a community-based epidemiological person-centered surveillance program at the Department of Epidemiology at the University of Florida, since October 2011. Community Health Workers engage community members, assess their health, and refer them to needed services and to research studies that meet their interests. As of July 2017, the cohort included 9,559 community members, including 759 who reported history of cancer. Females who self-reported history of breast cancer (N=144) were identified. Demographics, history of breast cancer, and attitudes toward research participation from the intake form were analyzed by whether the survivors were never navigated or navigated/enrolled in a UF research study.

RESULTS & CONCLUSIONS

The majority (58%) of breast cancer survivors received their diagnosis in 2010 or later and lived in UFHCC catchment area counties (79%). Survivors were mostly middle aged (40-69 years of age; 73%), identified as African American (47%) or white (49%), and had completed at least a high school education (91%). Significant proportions were divorced/separated/widowed (49%), overweight or obese (43%), and food insecure (39%). Over half had Medicaid/Medicare insurance (52%); an additional 38% had private insurance. Over half (59%) reported receiving health care services at UF Health/Shands. In terms of outcomes, 65% were navigated at least once or enrolled in a study. Those never navigated, compared to navigated/enrolled, were more likely to have education less than 12 years (84% vs. 95%, $P=0.033$), have no health insurance (15% vs. 8%; $P=0.055$), and live outside the catchment area (32% vs. 16%; $P=0.026$). Survivors never navigated had lower (but significant) interest in participating in research (80% vs. 98%; $P<0.001$), but their attitudes toward sharing medical records were similar with those navigated/enrolled (85% vs. 92%; $P=0.25$). In conclusion, this cohort of breast cancer survivors engaged by the HSt model presents opportunities to study issues related to racial disparity, persistent poverty, and obesity among survivors and conduct research using their medical records. Their interest in research can be translated into enrolling diverse research samples. Researchers need to be educated to the opportunity this cohort presents.