NPWH Podium Session
Friday, September 27, 2024 – 10:30 am – 11:30 am
Breakout Session O

Poster ID#: RI-2024-1

Impact of Education for Evidence-Based Screening Mammography in Black Women Aged 40-49

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Objectives:
1. Describe differences in breast cancer mortality rates by race and ethnicity.
2. Evaluate the impact of annual screening mammography on breast cancer mortality for Black women ages 40-49.
3. Describe the impact of structural and historical racism on breast cancer disparities.

Abstract Text

Breast cancer is the most commonly diagnosed carcinoma in the United States (U.S.), accounting for 30% of all cancers diagnosed in women. While the incidence of breast cancer in Black and White women is similar, 12.7% and 13.1%, respectively, Black women have a 41% higher mortality rate. Black women are diagnosed with breast cancer at younger ages, in later stages, with more aggressive cancer types, and have 10% lower five-year survival for every stage of the disease. Federally Qualified Health Centers (FQHCs) follow breast cancer screening guidelines that recommend mammography beginning at age 50, which may put Black women at a disadvantage and lead to persistent disparities.

This quality improvement (Q.I.) project aimed to evaluate the impact of an educational presentation on providers' mammogram referrals for Black women seen at FQHCs in the northeast U.S. The Q.I. project also aimed to assess the providers' beliefs and attitudes about their intention to change their referral practices before and after the education using the Continuing Professional Development-Reaction Questionnaire (CPD-RQ). During the 12-week pre-education period, 253 de-identified charts were reviewed, and there was a 12.3% missed opportunity rate for providers to refer Black women between the ages of 40-49 for a mammogram. Two hundred twenty-nine charts were reviewed post-education, and the missed opportunity rate dropped significantly to 7.4% ($z=1.79$, $p=0.037$).

Ten medical providers participated, and they completed an adapted CPD-RQ following a 60-minute educational presentation about breast cancer morbidity/mortality among Black women. The providers reported referring all low-risk women ages 40-49 annually for mammograms 100% of the time, with the American College of Obstetricians and Gynecologists as their primary guideline.

The results suggested the educational module positively impacted referrals for screening mammograms for Black women aged 40-49. They did not appear to affect the providers' attitudes and beliefs regarding disparities in breast cancer morbidity and mortality or their intent to change practice, as the data suggested they were already referring all women beginning at age 40. This project provided evidence for FQHCs to apply a health equity lens to clinical guidelines to improve the breast cancer mortality gap that adversely impacts Black women.

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Poster ID#: RI-2024-3

Improving Menstrual Knowledge and Self-Efficacy Among Young Women with Intellectual and Developmental Disabilities

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Objectives:
1. Describe existing disparities related to menstrual health among women with intellectual and developmental disabilities.
2. Discuss the effectiveness of a menstrual health education program for improving menstrual knowledge and self-efficacy among women with intellectual and developmental disabilities.
3. Explain the value of community based participatory research concepts in creating sustainable programs to improve health outcomes among populations with health disparities.

Abstract Text

Purpose: Our objective was to improve menstrual knowledge and menstrual-related self-efficacy among young women with intellectual and developmental disabilities (IDD). Methods: Framed by a Community-Based Participatory Research model, we explored menstrual knowledge and menstrual-related self-efficacy prior to and following the implementation of a disability-appropriate menstrual health and hygiene education program for young women with IDD using a pre-post intervention design, followed by qualitative focus group interviews. Community stakeholders were engaged throughout the research process, informing project development, intervention, interpretation of results, and next steps. Participants (n=20) attended a 90-minute interactive educational program on topics including female anatomy, the menstrual cycle, period self-care, and using period products. Participants completed researcher-developed questionnaires, the Menstrual Knowledge Assessment Tool (MK) and Menstrual Management Self-Efficacy Scale (SE) before and after the intervention. Participants attended focus group interviews in the days following the intervention. Results: Participants ranged in age from 18 to 31 years (M 22.6, SD 3.6) and had an average IQ of 54.37 (range 42-72, SD 7.6). MK scores increased significantly following participation in the program, $z=-3.56$, $p<.001$, with

median scores increasing from 12.5 to 17. Likewise, SE scores increased significantly from pre (M=39.85, SD 8.81) to post (M=45.50, SD 7.40), t (-4.253), p<.001. During the focus groups, participants discussed their preference for small groups and intimate settings when learning about sensitive topics, the importance of learning about their bodies so they could better care for themselves, and their questions about how menstrual health relates to sexual health and pregnancy. Implications: Nurse practitioners with expertise in menstrual health can positively impact the menstrual knowledge and menstrual self-efficacy of women with IDD using disability-appropriate educational strategies. Partnering with community stakeholders (teachers, parents, counselors, coaches, etc.), informs strategies to meet the needs of all and creates sustainable programs to improve health outcomes. Our effective menstrual health program has been adopted and integrated into the regular curriculum for female students enrolled in a post-secondary education program for young adults with IDD.