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Project Good News - Engaging priority CALD communities to reduce the stigma associated with cancer

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Project Good News - Engaging priority CALD communities to reduce the stigma associated with cancer

Abstract

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Project Good News - Engaging priority culturally and linguistically diverse (CALD) communities to reduce the stigma associated with Cancer

ENHANCING OUTCOMES FOR PRIORITY POPULATIO

This study investigates the stigma and other barriers members of culturally and linguistically diverse (CALD) communities experience to undertaking cancer screening and seeking help for cancer symptoms.

Authors: L Phillipson (Lead) J Hall L Pitts T Hunt

Background

Members of CALD communities can experience stigma and other barriers to undertaking cancer screening and seeking help for cancer symptoms.

Methods

Qualitative research with Macedonian and Serbian community members in the Illawarra-Shoalhaven was conducted to identify cancer stigma beliefs and attitudes, and barriers to discussing cancer and screening. Methods: Eight focus groups were conducted in 2012 with Serbian (n=37) and Macedonian (n=32) community members using a structured discussion guide. Thematic analysis, informed by stigma theory, was used to understand cancer related; stigma, practices and screening behaviors.

Results

Cancer was perceived as 'bad news', a death sentence strongly associated with fear and destiny, and was not openly discussed. There was a low perceived efficacy for treatment and seeking cancer screening tests. To stimulate community discussion and spread some good news, an integrated and tailored social marketing program 'Project Good News' is being developed including; community newsletters, radio scripts, speaker presentations, and project website.

Conclusion

Discussion: Community research is being translated into a tailored integrated and evidenced based community social marketing program 'framed' to emphasise good news about cancer and promote improved survival rates in Australia. Collecting and promoting personal stories of cancer survival was identified as critical to facilitate open community discussion and improve screening. Resources and health belief findings will be able to be used by health professionals to communicate with, and engage, CALD patients and family members in screening and treatment. Conclusion: Targeted community research was prioritised to be able to tailor Social Marketing community resources and events and inform delivery of culturally sensitive care and information. Community participation is critical to address the identified culturally specific cancer stigma beliefs in Serbian and Macedonian Communities.

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