

BREAST HEALTH INITIATIVE FOR NEWCOMERS

TRAIN THE TRAINER GUIDE

Calgary Immigrant Women's Association



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Acknowledgments

Calgary Immigrant Women's Association (CIWA) is proud to present the first *Breast Health Train-the-Trainer* guide since the beginning of CIWA's Breast Health Project in 2008. Updated with current information, this guide is based on CIWA's breast health curriculum. The Breast Health Project would not have been possible without the funding support of the Canadian Breast Cancer Foundation – Prairies/NWT Region.

Calgary Immigrant Women's Association Vision, Mission and Values

Vision: Empower immigrant women. Enrich Canadian society

Mission: To engage and integrate immigrant women and their families in the community

Values: Equality, Empathy, Collaboration, Innovation



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1. INTRODUCTION

INTRODUCTION

The purpose of the breast health project is to enhance the capacity of ethno-cultural/immigrant communities to educate its members about breast health and promote positive breast health practices by sharing its knowledge and resources, and providing training to individual members.

This guide will provide breast health community educators with current information on breast health, breast cancer, early detection and screening. This knowledge can be used to help immigrant women in their communities gain a better understanding of health concepts, breast health and how to access services in Calgary. Through this guide, we aim for women to gain skills and embrace a proactive approach toward their health.

Learning Objectives:

- 1- To increase awareness about breast health and the early detection of breast cancer among immigrant and refugee women
- 2- To promote positive breast health practices and preventive measures
- 3- To increase immigrant women's access to available health services

Target Audience:

All immigrant women, age 18 and up, including those who are permanent residents, visitors and or Canadian citizens, living in the City of Calgary and surrounding areas.

Prerequisite/Eligibility for Training:

- committed to working for the community in ways which involve people and encourage participation
- have excellent communication and facilitation skills
- be caring and empathetic
- be understanding, supportive, and culturally sensitive
- have the ability to focus on the needs and issues of individual people, their communities and cultures
- be able to reflect on their actions and motivations

Learning Commitment:

To complete this course, the learner must:

- Attend and complete training course provided by the project coordinator at CIWA
- Review the breast health guide and curriculum summary
- Review the PowerPoint slides, handouts, and other materials provided for their educational sessions
- Deliver a minimum of two educational session for the women in their community (Note: Each session must include 10 – 12 participants)

2. COURSE OVERVIEW

COURSE OVERVIEW

The Breast Health Train-the-Trainer course is offered six times a year and is delivered within the regional location. The course is free of cost and child care will be provided on request. One on One support, shadowing, mentoring, co-facilitation and observation opportunities will be provided during all times. The course includes:

- **(One) Breast health workshop** per course, conducted on one day for eight hours. This workshop is designed to educate trainees about breast health, breast anatomy, breast cancer, early detection, breast self-exam, clinical breast exam, screening and health care system in Canada. It is planned to enable the trainees and help them feel confident in delivering the breast awareness message to women with mild to moderate learning difficulties in their communities with first language support
 - A guest speaker is invited from the medical profession, preferably a family physician, to convey medical or specific health information
 - A facility tour to one of the clinics, who provide services to women, e.g. North East Calgary Women's Clinic to familiarize the participants with available services, and to create awareness about:
 - a) importance of having a family doctor
 - b) availability of Walk-in clinics
 - c) how to access health services
- **(Four) Skill building workshops** per course for three hours each, divided in to weekly sessions and aimed to build the following skills:
 - **Communication and interactive skills**, teaching the participants the ability and the knowledge to talk to groups and individuals, how to express your ideas in a manner that will be understood, being able to operate in diverse environment with different type of people in a culturally sensitive and respective manner
 - **Basic computer skills**, providing some training on MS Word, MS Excel and PowerPoint, which can help them to develop and deliver the presentations as well as complete documentation and record keeping of evaluation forms
 - **Outreach and recruitment skills**, training them on how to arrange for the educational sessions in an effective and productive manner. Capacity building on the importance of networking and how to arrange group meetings, and other

tools on how to be interactive and how to recruit community educators in their sessions

- **Practicum and follow up skills**, enabling the participants to practice what they have learned during the course in a group setting to make them more confident to deliver their learning's in a real group setting. This part will also reflect the goals of the experience and the duties required during their real educational sessions. It will also help the students to build self confidence and make them to reassess themselves

Upon completing the training, the trained facilitators will have the skills, knowledge and resources needed to educate women within their respective communities about breast health. The trained facilitator will deliver a minimum of two breast health educational sessions. Each session must include 10-12 attendees.

3. BREAST HEALTH CURRICULUM

BREAST HEALTH CURRICULUM

The curriculum is a series of four units comprised of lessons on various topics.

Each unit provides the rationale for the topic, learning objectives, background information, and activities to be completed for each unit. References and resources for further research and information, handouts and pamphlets which may be used as supporting materials are provided by the end of the training.

Unit One: Health Literacy seeks to increase the health literacy of participants. This unit acts as a foundation for this curriculum because health literacy may be low even with high English proficiency. For this reason, it is recommended that this unit be reviewed whenever necessary. The objective of this unit is to teach women about prevailing concepts in health care specifically stressing the importance of yearly check-ups and preventative methods.

Unit Two: Breast Health is designed to provide participants with an in-depth understanding of breast health, breast cancer and other breast conditions. It will equip the participants with knowledge to understand normal and abnormal breast changes throughout a woman's lifetime. As participants become breast health aware, they will be able to notice abnormal changes earlier and report them to a medical professional.

Unit Three: Early Detection and Screening includes information about when and how to conduct breast self-exams and the changes to look/feel for, when to have a mammogram and the importance of a clinical breast exam. It will be stressed that getting regular screening tests increases the chances that if breast cancer is developed it will be found early when it's most treatable. Participants will review breast health resources made available by the Canadian Breast Cancer Foundation and Alberta Health Services. The importance of being breast cancer aware will be reinforced in a culturally sensitive manner. This unit will highlight the benefits of a healthy lifestyle, annual medical checkups and engaging in regular screening practices.

Unit Four: Accessing Health Services aims to increase understanding on how to navigate the health system in Canada to access breast screening services. It will inform participants on: female exclusive medical clinics, screening test facilities, finding a family doctor, and booking appointments.

UNIT ONE

HEALTH LITERACY

UNIT ONE

HEALTH LITERACY

Introduction:

This health literacy unit intends to clarify health concepts often used in breast health education. This unit enables participants to develop health literacy and to understand health terms with the Canadian context. The goal of this unit is to equip participants with the vocabulary and knowledge needed to understand breast health and the subsequent units in this curriculum. As participants expand their vocabulary with health-related words and terminologies, they will learn how to discuss health related topics such as breast cancer.

This unit consists of two lessons, each containing guided learning activities.

The first lesson, *Health Terms* will:

- familiarize participants with the vocabulary needed to comprehend oral and written breast health information
- reinforce the importance of staying healthy, looking for signs and symptoms, having yearly checkups, and focusing on prevention and early detection

The second lesson, *Cancer Facts* explains:

- what cancer is, how it spreads, causes of cancer, and how common cancer is
- the importance of early detection and how it can affect the survival rate

Rationale

The Canadian Council of Learning defines health literacy as an ability of “individuals to access and use health information to make appropriate health decisions and maintain basic health” (Ottawa 2007). Health literacy means that individuals can: read and process health information, communicate health needs to medical professionals, and take appropriate health measures based on the information and instructions they receive. More so, health literate individuals have the knowledge, skills and confidence to manage health on a daily basis. Enhanced health literacy confers a range of benefits: it enforces prevention, early recognition and intervention, and reduction of stigma associated with many diseases.

Individuals with low health literacy skills are at a disadvantage in their capacity to fully obtain, process, or understand written and verbal cancer information. These individuals often do not understand basic terms such as risk and symptoms, cancer specific terms like tumor, and concepts such as the cure. Such barriers impair communication and discussion about breast cancer and screening methods that detect the disease at an earlier and more treatable stage.

Culture determines the various ways that participants understand cancer, the way they explain it, and their attitudes towards it. For instance, in some cultures concepts such as “cancer” or “risk factor” do not exist nor have contradictory meanings to those held in Canada. Lack of knowledge or misinterpretation of these concepts affects the health behavior of participants in terms of prevention. In addition, superstitions may prevent some women from engaging in preventative behaviors that will improve their health. The second lesson specifically aims to introduce participants to cancer basics and dispel myths or stigmas surrounding the disease. A thorough understanding of health concepts is crucial for comprehending the subsequent units in this curriculum.

Objectives

- Participants become familiar with cancer-related medical vocabulary
- Participants understand and can define: risk factor, cancer, prevention and other concepts discussed
- Participants demonstrate comprehension by completing tasks through the activities
- Students will comprehend concepts related to breast health promotion and prevention to enhance their health

Unit One - Health Literacy

Lesson 1 - Health Terms

Concentrates on the vocabulary needed to promote a precautionary and proactive approach to health. It will give participants the tools to choosing a healthy lifestyle. It clarifies the concepts of prevention, early detection and risk factors as well as the difference between a family doctor and a walk-in clinic. The lesson will explain yearly physical checkups stressing that a clinical breast exam is part of it. An underlying emphasis will be placed on the importance of regular checkups and early detection to reduce risk of discovering cancer at a more serious and progressive stage.

Quick Facts

Did you know that the breast cancer death rate has fallen by more than 35% and is currently the lowest it has been since 1950? This improvement in survival rates for women with breast cancer is due to an increase in screening practices which detect cancers at an earlier and more treatable stage. For women to engage in screening practices, they first need to understand the importance of maintaining their health. It is important for participants to understand the health terms and concepts explained below.

Staying Healthy

Many people stay healthy through the lifestyle choices they make. Examples of positive lifestyle choices are **eating healthy**; take pleasure in eating a variety of foods, which are lower in fat, high in grains, vegetables and fruits. Another good habit is **staying physically active**, make physical activity a part of your daily living. A healthy lifestyle gives you more energy and makes you look and feel better, it lowers your risk for many diseases and also leads to better overall health. **Unhealthy habits** such as smoking or drinking too much alcohol are not good for your health. Choosing to eat foods high in fat or sugar should also be limited.

Another way that people stay healthy/ reduce their risk of getting sick is by getting a **yearly check-up** by their family doctor to make sure that nothing is wrong.

Family Doctor & Walk-in Clinic

Having a regular family doctor, and going for regular checkups, has been strongly associated with screening participation.

A family doctor can help you and your family with most medical issues. They also provide routine check-ups and annual or periodic check-ups. It is necessary to call Health Link Alberta to find a family doctor who is accepting new patients. If a female doctor is not available then you may go to Calgary's North East Women's Clinic. This facility is operated by female practitioners and they only accept female patients. It is recommended that you make an appointment in advance.

An annual check-up or a physical check-up is an appointment when your doctor checks you to make sure that you are healthy. These check-ups are done either once a year or once every two or three years. A routine or general check-up is a regular check-up to take care of health problems such as, flu, chronic illnesses like high blood pressure, etc. It is important to ask your doctor when you should make an appointment for a check-up. Your doctor will want to have more check-ups. If you:

- smoke
- drink alcohol
- are not physically active
- have a poor diet
- have a lot of stress

Finding health problems early can save your life. Your doctor will send you for screening tests if you have a chance of getting a disease or a health problem. For example, he/she can send you for a test for cancer.

Walk-in clinics are for people who do not have a family doctor or when your family doctor cannot see you. You can get the same help at a walk-in clinic as a family doctor. Anyone can go to a walk-in clinic, but wait times are long. It is important to have a family doctor because you will always see the same doctor, and they keep your medical history. This will make it easier for the doctor to help you.

Signs and Symptoms

A **sign** is something that a medical professional can notice on your body. It can include such things as a rash, bruise or a high body temperature.

A **symptom** is something that you can feel, like pain or tiredness.

Risk Factors

An aspect of personal behavior or lifestyle, an environmental exposure, or an inborn or inherited characteristic associated with an increased likelihood of disease or other health-related event or condition.

Preventive measures can be taken to reduce some risk factors, like smoking. Other risk factors, like a person's age or gender, can't be changed. A risk factor can be related to your lifestyle (such as diet), genetics (such as family history) or an environmental exposure (such as radiation). For instance, lack of exercise is a moderate risk factor for breast cancer. Women who are not active have a higher chance of getting breast cancer than women who are active. Age is a high risk factor for breast cancer, but this can't be changed. Knowing health risk can help you understand your chance of getting cancer. Understanding health risks means that you will know how to stay healthy.

Prevention

Prevention refers mainly to lowering the risk of getting a disease rather than completely eliminating the risk. Prevention starts with one's own health habits such as eating right, staying physically active, limiting alcohol and avoiding tobacco. Prevention also includes regular healthcare checkups and recommended healthcare screenings. In all, self-care and prevention are about adopting risk-reducing habits, making wise choices, and minimizing risk.

Preventive measures are actions that you can take to reduce your risk of developing a disease like cancer. Examples include choosing not to smoke and eating healthy. Preventive measures may also include surgery to remove organs that may develop cancer.

The good news is that most behaviors that are typically under our control and reduce the risk of breast cancer are part of a healthy lifestyle. Making healthy choices can have rewards beyond breast cancer prevention. Choosing a healthy lifestyle can lower the risk of other types of cancer as well as many other chronic diseases such as diabetes and heart disease.

Early Detection & Screening

Early detection means early treatment. It means that the disease is found at an early stage, when it is easier to treat, before it has grown large or spread to other sites.

Screening means checking or testing for disease in a group of people who do not show any symptoms of the disease. It is important to get annual check-ups by your medical professional and discuss available screenings which are right for you. Cancer screening tests include blood tests and mammograms. These tests are safe and cause only temporary mild discomfort.

Refer to and use the following activities/handouts:

Activity 1: Healthy Habits	(Page#65)
Activity 2: Doctor's Visit	(Page#66)
Activity 3: Anna's Story	(Page#67)
Activity 4: Food Log	(Page#68)
Activity 5: Exercise Log	(Page#69)
Activity 6: Reminder Slip	(Page#70)
Handout 2: Signs & Symptoms	(Page#91)
Handout 7: Signs & Symptoms	(Page#97)

Unit One - Health Literacy

Lesson 2 - Cancer Facts

Concentrates on explaining what cancer is, how it spreads, how it is caused, how cancers differ, and how common cancer is. Participants will learn what constitutes cancer and will be able to differentiate from cancer facts and myths.

The purpose of this lesson is to establish context and make the women feel comfortable talking and asking questions about breast cancer with their friends, family and doctor.

Quick Facts

The term “cancer” refers to a group of many related diseases that have to do with cells. Cells are small microscopic structures that make up our bodies and all other living things. Each cell contains DNA, which controls the way that it grows, functions, and reproduces. Sometimes the DNA of the cell is changed in a way that disrupts growth and causes the cell to grow in an uncontrolled manner. When this happens, cells do not die when they should and new cells form when the body does not need them.

This uncontrolled cell growth can create a lump of cells called a tumor. A benign tumor is not cancerous. It can often be removed, and in most cases, they do not come back. The cells in a benign tumor do not spread to other parts of the body. Malignant tumors are cancerous. Cells in these tumors can invade nearby tissues and spread to other parts of the body. The spread of cancer to a new place in the body is called metastasis. Malignant tumors that do not spread to other parts of the body manage to divide and grow, making new blood vessels to feed itself in a process called angiogenesis.

The specific cause of cell growth disruption is unknown. However, there are many factors which are linked or are believed to increase the risk of cancer. These include lifestyle choices such as smoking, environmental factors, and genes.

There are more than 100 different types of cancer. Most cancers are named for the organ or type of cell in which they start - for example, cancer that starts in the breast is called breast cancer.

How does cancer spread?

Cancers can originate almost anywhere in the body. Sometimes cancer cells break away from the original tumor and travel through the lymph and blood system to other areas of the body, where they

keep growing and can go on to form new tumors. This is how cancer spreads. The spread of a tumor to a new place in the body is called metastasis.

It is important to diagnose cancer at an early stage before it grows or spreads to other parts of the body. An early diagnosis means that treatment can start sooner and there is a better chance of survival. Visiting a doctor for a yearly checkup and screening for cancer is the best method of early diagnosis.

What causes cancer?

Cancer is often perceived as a disease that strikes for no apparent reason. While scientists don't yet know all the reasons, many of the causes of cancer have already been identified. Besides intrinsic factors such as heredity, diet, and hormones, scientific studies point to key extrinsic factors that contribute to the cancer's development: chemicals (e.g., smoking), radiation, viruses and bacteria.

Many people have a fear that cancer is contagious. Cancer is not contagious. It is not possible to get cancer from living, working or being around a person who has cancer. You cannot get cancer by having sexual intercourse or by touching someone who has cancer. People also fear that it is their own fault that they get cancer. This is not true. A person does not get cancer because they lie, steal, cheat, do not believe in god, or because of any other such reason. A person is never blamed for getting the disease. But remember that you are responsible for taking care of your body through regular exercise, eating well, limiting alcohol and not smoking.

Can cancer be prevented?

You can reduce various risk factors which may affect your chances of getting cancer. Healthy habits include staying fit, eating well, limiting alcohol and not smoking. Some risk factors like gender and age cannot be controlled. Because one cannot completely prevent the risk of getting cancer, it is important to be aware of your body so that you can report any abnormal changes to your doctor. It is also important to go to an annual check-up so that your doctor may examine you for signs of cancer. If cancer runs in your family, you should talk to your doctor about which cancer screenings are right for you. Remember that screening for cancer helps detect the disease early at a more treatable stage.

Why is early detection important?

Detecting cancer early can affect the outcome of the disease for some cancers. When cancer is found, a doctor will determine what type it is and how fast it is growing. He or she will also determine whether cancer cells have invaded nearby healthy tissue or spread to other parts of the body. In some cases, finding cancer early may decrease a person's risk of dying from the cancer.

Early cancer may not have any symptoms

Some people visit the doctor only when they feel pain or when they notice changes like a lump in the breast or unusual bleeding or discharge. It is best to get checked even if symptoms are not present, because the stages of early cancer may not have any symptoms. That is why screening for cancer is important, particularly as you get older. Screening methods are designed to check for cancer in people with no symptoms.

Cancer Survivors

According to National Cancer Institute (NCI), “a cancer survivor is one who remains alive and continues to function during and after overcoming a serious hardship or life-threatening disease. In cancer, a person is considered to be a survivor from the time of diagnosis until the end of life”.

According to Canadian Breast Cancer Foundation (CBCF) “with advances in cancer detection, diagnosis and treatment, more and more people are living with cancer and living longer than ever before. Today there is an increased focus on helping people with cancer and their families cope with cancer as a chronic disease. Most recent data indicates a five-year survival rate for breast cancer is 88 percent in North America. 5 year survival rate for men is 80% and 88% for women. Research is making a difference!”

Advocacy

Advocacy is working to provide support for a cause, policy or action. Advocacy is also the pursuit of influencing outcomes. Everyone has the ability to advocate on their own behalf or on behalf of others. We advocate because we see a perceived inequality or imbalance. When we advocate, we are asking for change. Real change is made possible by people who are committed to making a difference. In North America, many celebrities who have had cancer are now advocating for a cure for cancer by bringing awareness and fundraising for medical research. They also hope to empower individuals and those affected by cancer.

Survivor Support

There are a number of resources available for cancer survivors that offer support and information. Survivorship programs, support groups, professional counseling and other resources are available to help people adjust to life after cancer. Some organizations have been designed specifically for survivors. They provide tips and practical tools to deal with common challenges faced by cancer survivors. Other resources offer opportunities for people to share their fears, worries, concerns, experiences, strength and hope.

Some cancer survivors feel they want to "give something back" and choose to support other survivors. There are a number of local and national cancer support programs.

Refer to and use the following activities/handouts:

- | | |
|------------------------------------|----------------------|
| Activity 9: What Is Cancer? | (Page#73) |
| Activity 10: Definitions | (Page#74, 75) |
| Activity 11: Case Studies | (Page#76) |
| Activity 18: Mina is Sick | (Page#84) |
| Activity 20: Cancer | (Page#86) |

UNIT TWO

BREAST HEALTH

UNIT TWO

BREAST HEALTH

The Breast Health Unit is designed to provide participants with an in-depth understanding of breast health. It will first explain the anatomy of a healthy breast. By teaching women what changes are normal and which are not, women will be more aware of when to seek medical attention. Women will be introduced to breast cancer before being taught the risks and the measures they can take to ensure that any abnormal changes are caught early. As women become more aware about breast health, they will be able to teach other women in the community about breast health.

This unit consists of two lessons, each containing guided learning activities.

The first lesson, *Healthy Female Breast* will:

- familiarize participants with the basic anatomy of a women's breast
- explain normal and abnormal changes to the breast
- five steps of being breast aware

The second lesson, *Breast Cancer* explains:

- what breast cancer is, and stages of breast cancer
- treatment of breast cancer and the importance of early detection
- statistics of breast cancer in Canada

These lessons discusses the main types of breast cancer, identifies the risk factors, dispels breast cancer myths, and provides the most recent statistics on breast cancer.

Rationale

Breast health education empowers immigrant women however they face many barriers to receiving information about breast cancer. Breast cancer is the most common cancer among women and the second leading cause of cancer deaths in women today.

In 2008, CIWA conducted a needs assessment “CIWA’s Needs Assessment” with several focus groups from various CIWA’s programs and services, which indicated individuals with limited health literacy tend to have less knowledge of anatomy. These women were not able to differentiate

between normal and abnormal changes of a breast occurring in a women's lifespan. Consequently, these women were not able to grasp cancer control concepts such as screening and early detection.

Objectives

- Participants learn about the anatomy of breast, normal and abnormal changes to the breast
- Participants understand the importance of early detection and five steps of being breast aware
- Understand prevalent stigmas and fears about cancer

Unit Two - Breast Health

Lesson 1 - Healthy Female Breast

This lesson will familiarize participants with the basic anatomy of a women's breast. Many women do not learn about breast health until they start to breastfeed or they have a problem that needs medical attention. It is important for women to become familiar with the normal anatomy and function of their breasts so that they can recognize abnormal changes at an early stage. This lesson outlines basic information on breast composition, development, and typical changes occurring throughout a women's lifetime.

Quick Facts

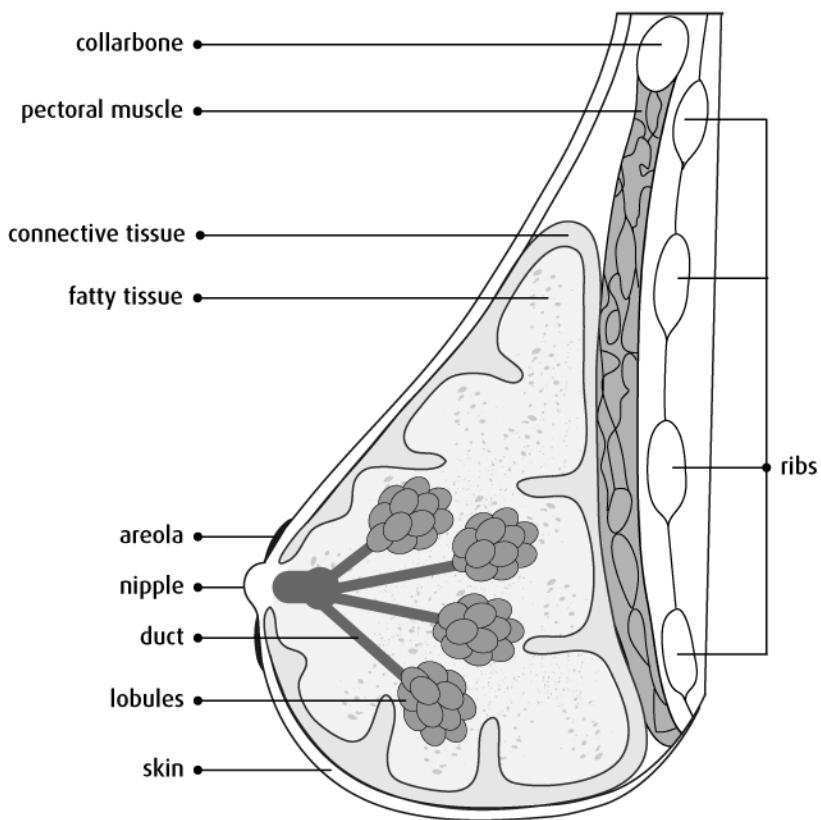
Becoming familiar with breast anatomy and physiology can help you understand the normal changes that occur during your lifetime. This knowledge is a good place to start learning about health problems and conditions that affect the breasts.

Anatomy

The major parts of a breast include:

- glands (lobules) that produce milk
- milk ducts that transport milk from the glands (lobules) to the nipple
- nipple
- areola (pink or brown pigmented region surrounding the nipple)
- connective (fibrous) tissue that surrounds the lobules and ducts
- fat

The Breast



At the center of the breast is the nipple, surrounded by a circular area called the areola. The nipple can be different sizes- flat, round, or cylindrical in shape. The colour of the nipple is determined by the thinness and pigmentation of its skin.

In the areola there are Montgomery's glands which may appear as tiny, raised bumps on the surface of the areola. The Montgomery's gland helps lubricate the areola. The nipple and areola also contain specialized muscle fibers that respond to stimulation to make the nipple erect.

The breast also contains lymphatic vessels that connect to lymph nodes located around the breasts edges and in nearby tissues of the armpits and the collarbone. Lymphatic vessels carry lymph fluid containing lymphocytes (white blood cells that fight disease) and have an important implication in the spread of cancer from the breast to other areas of the body.

Function of the Breast

The main function of the breast is to produce milk. The breast contains mammary glands that are responsible for milk production. After women give birth, breasts undergo lactation, where the milk ducts carry the milk produced by the mammary glands to the nipples.

Size and Shape

The size and shape of women's breasts varies considerably, depending on the amount of breast tissue and fat present. Some women have large breasts because they have a large amount of breast tissue. Other women have a smaller amount of tissue with little breast fat.

A woman's breasts are hardly ever the same size or shape. It is not abnormal for one breast to be slightly larger or smaller, higher or lower, or shaped differently than the other.

The size and characteristics of the nipple also is different from one woman to another. In some women, the nipples are constantly erect. In others, they will only become erect when stimulated by cold or touch. Some women also have inverted (turned in) nipples. Inverted nipples are not a cause for concern unless the condition is a new change.

Normal Breast Changes

Most women experience changes in their breasts throughout their lifetime. These changes can be attributed to many factors such as changes in hormones during adolescence, the menstrual cycle, pregnancy, breastfeeding, while taking certain hormones, such as birth control, or it may be a part of the normal aging process.

Adolescence

- For most girls, the breasts grow during adolescence. During this growth period it is possible for breast lumps to form. Such lumps are usually part of normal breast development

Menstrual period

- During menstrual periods, women may experience many changes as a result of changing hormone levels. The milk glands and ducts enlarge and the breasts retain water which causes the breasts to enlarge or feel lumpy. Breasts may also feel swollen, tender, or painful

Pregnancy

- During pregnancy, breasts will change in preparation for breastfeeding. The breasts become larger and firmer as the number of mammary glands increase for milk production. The areola becomes darker in color and the nipples become larger. Breasts may feel tender or more sensitive

Breastfeeding

- During breastfeeding, the breasts can change size several times a day in response to milk production. A woman may continue to have some secretions for a few months or up to one or two years after stopping to breastfeed

Menopause

- After menopause, a woman's body produces lower levels of the hormone estrogen. Breasts lose fat and tissue and become less firm, less dense and change shape
- When taking hormones (for menopause or for birth control) your breasts may become denser

Abnormal Changes

A woman should seek medical attention if she notices any of the following:

- changes to the size or shape of one or both breasts
- unusual, persistent pain in the breast or armpit area
- swelling under the armpit or below the collarbone
- nipple changes, including change in the shape or position of a nipple, or a nipple that becomes pulled inward (inverted)
- a lump on your breast or under the armpit
- discharge from one or both nipple (fluid that is not milk or is bloody)
- skin changes , including irritation, redness, a rash or scaly skin, or a pucker on the breast

Regular breast self-examination will make it easier for women to notice any breast changes.

Most breast changes will not be cancer, but should still be discussed with a doctor.

Breast Awareness

Although most breast changes are not a sign of breast cancer, it is important to be breast aware (to know what changes to look and feel for) so that any abnormalities can be spotted earlier. Women will be able to better tell if the changes they are experiencing are not part of the normal changes experienced by women and can seek medical help in advance.

5 STEPS TO BEING BREAST AWARE *

1. Know how your breasts normally look and feel.
2. Know what **changes to look for**.
3. **Look and feel** for changes.
4. Report any changes to a doctor.
5. Go for a free mammogram if you are of the appropriate age, or if recommended by a doctor.

By finding breast abnormalities in the early stages, mammograms can save lives. Women at the appropriate age can get a free mammogram through their **regional breast screening program**.

Refer to and use the following activities/handouts:

Activity 13: Definitions	(Page#79)
Activity 16: Know your breasts	(Page#82)
Activity 17: Breast Changes	(Page#83)
Handout 1: The Breast	(Page#89, 90)
Handout 3: Normal Breast Changes	(Page#92)
Handout 4: Abnormal Breast Changes	(Page#93, 94)
Handout 5: Five Steps	(Page#95)

Unit Two - Breast Health

Lesson 2 - Breast Cancer

This lesson aims to introduce participants to basic information about the disease. Participants are encouraged to discuss their previous understanding, knowledge and experience related to breast cancer. They learn the word "survivor" and the number of women who have fought breast cancer and survived. The importance of early detection is stressed and women are taught that breast cancer can be treated if caught early.

Quick Facts

Cancer can happen almost anywhere in the body. If it starts in the breast then it is called breast cancer. Breast tissue covers a large area, extending up to the collarbone and from the armpit to the breastbone. Several types of tumors may develop within these different areas of the breast.

1 in 9 Canadian women are expected to develop breast cancer during her lifetime (by the age of 90).
1 in 29 Canadian women will die from breast cancer.

Stages of Breast Cancer

Identifying the cancer stage tells you how serious the disease is. The stages depend on:

- the size of the tumor
- whether the cancer is invasive or non-invasive (meaning whether it spreads to other parts of the body)
- whether lymph nodes are involved
- whether the cancer has spread beyond the breast

The stage of the cancer tells doctors how to treat it. The higher the stage of cancer at diagnosis, the worse the prognosis. Breast cancer is most treatable at the earliest stage (stage 0) rather than the later stages (stage IV).

Causes of Breast Cancer

Breast cancer is a complex disease with no single cause. The exact causes of breast cancer are not known. Also, it is not possible to predict exactly when cancer will occur or how it will progress. Nor is it possible to predict which cancer cells will be treated successfully and which will progress and spread to other parts of the body.

Having one or more risk factors does not mean that a person will get breast cancer. Often women with no risk factors are diagnosed with breast cancer. The biggest risk is being a woman and aging.

How Does Breast Cancer Spread?

Cancer can spread through the bloodstream or the lymphatic system. Metastasis is a condition where cells break off from the cancerous growth or tumor and travel through the blood stream or lymphatic system to other areas of the body.

Cancer cells can spread to many parts of the body including the bones, liver, lungs or brain. Because most often cancerous cells first spread to the lymph nodes under the arm, it is important to check under the arms for swelling or lumps.

If cancer started in the breast and found in other parts of the body, it is called metastatic breast cancer.

How is Breast Cancer Found?

Breast cancer is most treatable when it is found early. Early breast cancer usually does not produce any symptoms. It is important for women to understand this and the steps they can take to prevent late stage cancer.

Early Detection

There are several ways to help a woman find breast cancer early in the disease. These include:

Being Breast Aware and Breast Self-Examination (BSE) - It is important for women to know how their breasts normally look and feel. It is important that women understand the abnormal and normal changes occurring to the breast. Any abnormal changes should be reported to the doctor. BSE prescribes certain standardized techniques for examining the breasts at the same time of each month it is often promoted as a way of screening for breast cancer. *The Canadian Breast Cancer Foundation's "Five Steps of Being Breast Aware"* are outlined in the previous lesson. It is important to note that clinical breast exams and mammography are the most reliable methods of finding breast cancer.

Clinical Breast Exam - This is an exam performed by a health care professional to feel for any changes in the breast. Women should have a clinical breast exam at least every two years if over the

age of 40. If an irregularity is found then the mammogram or an ultrasound will be used to clarify the problem.

Mammography - A mammogram is an x-ray of the breast which can find small breast cancer lumps or precancerous changes in the breast. These lumps may be so small a woman can't feel them with her fingers.

A screening mammogram is used to look for breast disease in women who have no breast concerns. A diagnostic mammogram is used when a woman has symptoms or if there are other barriers to accurate testing like breast implants.

Biopsy- A biopsy is considered the most accurate way to find out if a breast lump or abnormal tissue is cancerous. A sample of the tissue is removed by the surgeon or radiologist and examined under a microscope by a pathologist who is able to make a diagnosis. If the tissue is found to be cancerous, treatment will be needed.

Please refer to the attached handouts for the guideline highlighting a breast plan for women of different age groups.

Breast Cancer Treatment

Breast cancer treatment can consist of one or several of the following: surgery (the surgery may be a mastectomy or a lumpectomy and may also include the removal of lymph nodes), chemotherapy, radiation therapy, hormone therapy, and immunotherapy.

Prognosis

The prognosis depends largely on the stage of the cancer. Cancers found in the early stage have the best chance of being treated. Cancers in the later stages will require more intensive and invasive treatments.

Statistics of Breast Cancer in Canada

According to the Canadian Cancer Society, breast cancer continues to be the most common cancer diagnosed amongst Canadian women (excluding non-melanoma skin cancers):

Incidence and mortality

Incidence is the total number of new cases of cancer.

Mortality is the number of deaths due to cancer.

The Canadian Cancer Society estimates that in 2013:

- 23,800 women will be diagnosed with breast cancer. This represents 26% of all new cancer cases in women in 2013
- 5,000 women will die from breast cancer. This represents 14% of all cancer deaths in women in 2013
- on average, 65 Canadian women will be diagnosed with breast cancer every day
- on average, 14 Canadian women will die from breast cancer every day
- 200 men will be diagnosed with breast cancer and 60 will die from it

Estimated number of new cases of breast cancer in females by age:

- 7,200 breast cancer cases diagnosed in women 70+
- 6,400 breast cancer cases diagnosed in women 60-69
- 5,900 breast cancer cases diagnosed in women 50-59
- 3,300 breast cancer cases diagnosed in women 40-49
- 1,055 breast cancer cases diagnosed in women under 40

Trends in breast cancer

The breast cancer incidence rate in women in Canada rose through the early 1990s but decreased in the early 2000s. This increase occurred because mammography was used more often and breast cancer screening programs were introduced, which meant that more cases of breast cancer were found. Another reason may be the increasing use of hormone replacement therapy (HRT) among post-menopausal women, which has been linked to a higher risk of breast cancer. The decrease coincided with a large drop in the use of HRT among post-menopausal women when its role in breast cancer was publicized.

Breast cancer death rates in women have gone down in every age group since at least the mid-1980s. This reduction in death rates reflects the impact of screening and improvements in treatment.

Refer to and use following activities/handouts:

Activity 9: What is Cancer?	(Page#73)
Activity 10: Definitions	(Page#74, 75)
Activity 14: True or False	(Page#80)
Activity 19: Breast Health Word Scramble	(Page#85)
Activity 20: Cancer	(Page#86)
Handout 2: Signs & Symptoms	(Page#91)
Handout 4: Abnormal Breast Changes	(Page#93, 94)

Breast cancer statistics source is Canadian Cancer Society; <http://www.cancer.ca/en/cancer-information/cancer-type/breast/statistics/?region=on#ixzz2vbJn36Qv>

Cancer information / Cancer type / Breast / Statistics Advisory Committee on Cancer Statistics: (2013).

Canadian Cancer Statistics 2013. Toronto, ON: Canadian Cancer Society.

UNIT THREE

EARLY DETECTION AND SCREENING

UNIT THREE

EARLY DETECTION AND SCREENING

This unit is designed to teach participants the importance of being breast aware. It will be stressed that most people diagnosed with breast cancer are at average risk, and it is not clear which factors act together to cause the cancer. This unit includes information about how to be breast aware including what changes to look/feel for, when to have a mammogram and the importance of a clinical breast exam. It will be stressed that getting regular screening tests increases the chances that if breast cancer is developed it will be found early when it's most treatable. Participants will review breast health resources made available by the Canadian Breast Cancer Foundation and Alberta Health Services. The importance of being breast cancer aware will be reinforced in a culturally sensitive manner.

The unit consists of four lessons, each containing guided learning activities.

The first lesson, *Breast Cancer Risk Factors* will:

- gain knowledge on inherited and environmental risk factors
- help participants that knowing the risk factors, can make changes in our lives to help reduce our risk of breast cancer

The second lesson, *Clinical Breast Exam* will:

- teach the meaning and importance of a clinical breast exam
- stress the importance of family doctors and periodic checkups

The third lesson, *Mammogram* will:

- explain the importance of a mammogram
- explain the procedure of getting a mammogram, including making appointments

The fourth lesson, *Age Life Plan* will:

- detail a breast health plan according to age
- equip participants with an action plan so that they get screened

Rationale

Breast health information needs to be accessible to immigrants at all English levels. Our goal is to provide accessible breast health information to immigrants of varying English levels. By providing culturally sensitive material we ensure that immigrant women are provided with an opportunity to learn about the importance of early detection and screening. This unit provides an interactive breast education program which educates and empowers women to be proactive about their breast health. This unit breaks down this information and makes it accessible to learners of all proficiencies.

Objectives

- Participants are introduced to and learn concepts relating to breast cancer awareness
- Participants can identify the difference between a family doctor and a walk-in clinic
- Participants will learn the importance of early detection and regular screening

Unit Three - Early Detection and Screening

Lesson 1 - Breast Cancer Risk Factors

This lesson aims to teach learners about how to reduce the risk of dying from cancer. Learners should understand what they can do to prevent breast cancer. Breast cancer prevention starts with healthy habits, such as limiting the amount of alcohol and staying physically active. It is important to stress the importance of breast cancer detection (discussed further in the next unit).

Quick Facts

Being breast aware means, knowing how your breasts normally look and feel. Being breast aware is not a screening method but it will help you notice changes to your breast so that you can have them checked by a doctor.

Remember that it is possible for breast cancer to develop without any noticeable changes. This is why breast screening is important. It is important to understand the lifestyle factors that may affect your risk of breast cancer and what you can do to stay healthy. There are certain steps you can take towards staying healthy.

Breast Cancer Risk Factors*

Researchers believe that a combination of inherited factors and environmental factors must be present for breast cancer to develop.

Inherited factors are genetic factors that we receive from our parents or grandparents, for example, an inherited gene abnormality.

Environmental factors are factors that can change throughout life. Examples of environmental factors include diet, lifestyle choices, such as amount of exercise, and exposure to chemicals. Conclusive research has established the breast cancer risk factors, which are listed below. Several modifiable risk factors for breast cancer are related to the way we live – making changes in these areas of your life will help you to reduce your risk of breast cancer.

*Source of risk factors: Canadian Breast Cancer Foundation

Non-Modifiable Risk Factors	Modifiable Risk Factors
Gender and age	Body weight
Personal cancer history	Physical activity
Family cancer history and genetics	Alcohol use
Early menstruation late menopause	Smoking
Breast density	Exposure to hormones
Breast condition	Pregnancy and breastfeeding
	Radiation exposure

Ongoing research is providing more information about how inherited and environmental causes work together to result in the DNA changes at the cellular level that lead to breast cancer.

With knowledge about risk factors we can make changes in our lives to help reduce our risk of breast cancer.

What can I do to reduce my risk of breast cancer? Breast cancer prevention begins with various factors you can control. For example: **Limit alcohol.** If you choose to drink then limit yourself to no more than one drink a day.

Control your weight: Being overweight or obese increases the risk of breast cancer. This is especially true if obesity occurs later in life, particularly after menopause.

Get plenty of physical activity: Being physically active can help you maintain a healthy weight, which, in turn, helps prevent breast cancer. Start slowly by including at least 30 minutes of activity each day. It can be as simple as walking the dog, gardening, or taking a stroll in the park.

Breastfeeding: Women who breastfeed for at least a year have a slightly lower risk of developing breast cancer.

Discontinue hormone therapy: Long-term hormone therapy increases the risk of breast cancer. If you're taking hormone therapy for menopausal symptoms, ask your doctor about other options. You may be able to manage your symptoms with non-hormonal therapies, such as physical activity. If you decide that the benefits of short-

term hormone therapy outweigh the risks, consider using the lowest dose that's effective for your symptoms, and plan to use it only temporarily.

Avoid exposure to environmental pollution: The Canadian Breast Cancer Foundation provides an introduction to some of the key topics in this area; "Cancer research and studies of workers health have proved that some chemical exposures cause cancer. The International Agency for Research on Cancer has identified over 100 known carcinogens (cancer-causing substances) in our environment, with many more suspected as probable or possible causes of cancer. You may be surprised to know that most of the chemicals made and used in North America have not been assessed for their risk to human health or their impact on the environment. Since 1994, Canada has included health and environmental effects in its assessment of the risk of chemicals. However, the risk-assessment approach looks at chemicals in isolation, whereas in real life we are exposed to a mix of chemicals at low levels every day".

What else can I do? Be breast aware! If you notice any changes in your breasts then go to the doctor. Also, ask your doctor when to begin mammograms and other screening procedures to detect breast cancer. Remember, that cancer is most treatable when it is found early. Remember, it's not always possible to prevent breast cancer. By practicing healthy habits, however, you're taking an active role in breast cancer prevention.

Look For These Changes:

- Changes to the size or shape of one or both breasts
- Unusual, persistent pain in the breast or armpit area
- Swelling under the armpit or below the collarbone
- Nipple changes, including change in the shape or position of a nipple, or a nipple that becomes pulled inward (inverted)
- Redness
- Discharge from one or both nipples
- Lumps or thickening
- Skin changes, including irritation, rash or scaly skin

- Dimpling or puckering

If you are not sure if a change is significant, check again after your next period, or a few weeks later if you are no longer menstruating.

Refer to and use following activities/handouts:

Activity 7: Risky Activities ***(Page#71)***

Activity 8: Health Risks ***(Page#72)***

Unit Three - Early Detection and Screening

Lesson 2 - Clinical Breast Exam

The participants are guided through activities which will teach the meaning and importance of a clinical breast exam. Guided activities will stress the importance of family doctors and periodic checkups.

Quick Facts

Finding breast cancer early when it is still small usually means that it is more treatable. Treatment for breast cancer at an early stage is less aggressive. This means that there are fewer side effects for the patients.

Breast screening means checking breast, when the woman is healthy. This means that the breasts should be checked regularly even if there are no signs or symptoms. Breasts are checked through clinical breast examinations and screening mammograms.

A periodic check up or a physical check up is an appointment when your doctor checks you to make sure that you are healthy. These check-ups are done either once a year or once every two or three years. A routine or general check-up is a regular check-up to take care of health problems such as the flu or chronic illnesses or high blood pressure. It is important to ask your doctor when you should make an appointment for a check-up. Your doctor will want to have more check-ups If you:

- smoke
- drink alcohol
- are not physically active
- have a poor diet
- have a lot of stress

Finding health problems early can save your life. Your doctor will send you for a mammogram if he believes there is something wrong with your breast.

Family Doctor & Walk-In Clinic

You can get a clinical breast exam by your family doctor or at the walk-in clinic.

A family doctor can help you and your family with most medical issues. They also provide routine check-ups and annual or periodic check-ups. It is necessary to call Health Link Alberta to find a family doctor who is accepting new patients. If a female doctor is not available then you may go to Calgary's North East Women's Clinic. This facility is operated by female practitioners and they only accept female patients. It is recommended that you make an appointment.

Walk-in clinics are for people who do not have a family doctor or when your family doctor can not see you. You can get the same help at a walk-in clinic as a family doctor. Anyone can go to a walk-in clinic, but wait times may be long. It is important to have a family doctor because you will always see the same doctor, and they keep your medical history. This will make it easier for the doctor to help you.

Refer to and use the following activities/Handouts:

Activity 6: Reminder Slip (Page#70)

Activity 15: Doctors and Clinics (Page#81)

Unit Three - Early Detection and Screening

Lesson 3 - Mammogram

The participants are guided through activities which will teach the meaning and importance of a mammogram.

Quick Facts

A screening mammogram is an x-ray of the breast. The x-ray can find small breast cancers before there are any signs or symptoms. In many cases, the earlier the cancer is found the more successful the treatment will be. As well, there will be more treatment options or less aggressive treatment.

Mammography has been widely tested and proven to help reduce deaths from breast cancer in women who start regular screening from the age of 40. The benefits of regular breast cancer screening are shown from the age of 40 and increase as the woman ages. Earlier detection by mammography has helped to improve the length and quality of life of people diagnosed with breast cancer while reducing breast cancer death rates.

Usually women who are at greater risk for developing breast cancer start mammograms earlier.

Since organized breast screening programs began in Canada in the late 1980's, mammography has helped to reduce deaths from breast cancer by more than 35 per cent.

Remember that the time to go for screening mammograms is when you feel fine and do not have any breast symptoms. If you are ever worried about a breast problem, whatever your age, see your doctor. All of the organized breast screening programs in Canada offer free mammograms to women. A health care provider's referral may be needed for women 40 – 49.

Age of eligibility: 40 – 69

Targeted Age groups (women can self-refer): 50 – 69

Doctor's referral required for first appointment only: 40 – 49

For women outside the eligible age, a doctor's referral is required.

Mobile services are available.

Source; Canadian Breast Cancer Foundation, Alberta Breast Cancer Screening Program 1.866.727.3926
<http://www.cbcf.org/prairies/AboutBreastHealth/EarlyDetection/Mammography/Pages/Where-to-Get-a-Mammogram.aspx>

But what if?!!!

I feel healthy and I have no symptoms

I have no family history of breast cancer

I have small breasts

YES you still need to... HAVE REGULAR SCREENING MAMMOGRAMS

What results can a mammogram show?

Normal Result: A normal result means no signs of breast cancer were found. About 93% of women screened have a normal result.

Abnormal Result: Only a small number of abnormalities will be cancer; however, any abnormality should be checked right away. Your healthcare provider will arrange for the needed tests. Other tests may include a diagnostic mammogram, an ultrasound, or a biopsy.

Refer to and use the following activities/Handouts:

Handout 6: Mammogram (Page#96)

Unit Three - Early Detection and Screening

Lesson 4 - Age Life Plan

This lesson summarizes and reinforces the screening information presented in the previous lessons. Participants will learn which screening methods are appropriate for their age. They will know how to take care of their breast health throughout their life.

Quick Facts

Women 20 to 39 years of age

- Know what looks and feels normal for you so you can notice any unusual changes in your breasts
- See your healthcare provider regularly for a health check-up

Women 40 to 49 years of age

- Speak with your healthcare provider about your risk of breast cancer and the risks and benefits of screening mammograms
- Have your breasts examined every year by your healthcare provider as part of your regular health check-up
- Check your breasts regularly for unusual changes. Detail a breast health plan according to age

Women 50 to 69 years of age

- Be sure to get a screening mammogram at least every two years, as decided by you and your healthcare provider
- Have your breasts examined every year by your healthcare provider as part of your regular health check-up
- Check your breasts regularly for unusual changes

Women 70+ years of age

- Speak with your healthcare provider about whether you should continue to have regular mammograms

- Have your breasts examined every year by your healthcare provider as part of your regular health check-up
- Check your breasts regularly for unusual changes

UNIT FOUR

ACCESSING HEALTH SERVICES

UNIT FOUR

ACCESSING HEALTH SERVICES

This unit teaches participants how to navigate the health system in Canada so that they may access breast screening services.

It will inform participants about: women's medical clinics, breast cancer screening facilities, finding a family doctor and booking appointments.

The unit consists of three lessons, each containing guided learning activities.

In the first lesson, *Finding a Family Doctor* the participants are guided through activities which:

- explain the importance of having a family doctor
- provide information about visiting a family doctor, considerations for choosing a family doctor, and confidence to ask appropriate questions
- stress the importance of periodic checkups and screening tests

In the second lesson, *Women's Clinics & Walk-ins*, the participants are guided through activities which:

- explain the main purpose of walk-in clinics
- explain the options of health clinics existing in Calgary

In the third lesson, *Health Link Alberta*, the participants are guided through activities which:

- explain when it is good to call Health Link Alberta
- explain the type of advice and information they offer

Rationale

Our research indicated that many immigrant women did not know the types of health care offered to people living in Alberta. Many did not understand that basic health care is free in Canada. Others were pleased to learn that female specific clinics exist in the city.

There are different types of health care for people who live in Alberta. In this unit we will discuss:

- Family doctors
- Walk-in clinics
- Health Link Alberta

Unit Four - Accessing Health Services

Lesson 1 - Finding a Family Doctor

Quick Facts

Having a regular family doctor, and going for regular checkups, has been strongly associated with screening participation.

A family doctor can help you and your family with most medical issues. They also provide annual or periodic check-ups. It is necessary to call Health Link Alberta to find a family doctor who is accepting new patients. You will need to show your Alberta Personal Health Card to the receptionist. You need to make an appointment to see a family doctor. Having a family doctor means that you see the same doctor each time. If a female doctor is not available then you may go to Calgary's North East Women's Clinic. This facility is operated by female practitioners and they only accept female patients. It is recommended that you make an appointment before you go.

An annual check-up or a periodic check up is an appointment when your doctor checks you to make sure that you are healthy. These check-ups are done either once a year or once every two or three years. It is important to ask your doctor when you should make an appointment for a check-up. Your doctor will want to have more check-ups if you:

- smoke
- drink alcohol
- are not physically active
- have a poor diet
- have a lot of stress

Finding health problems early can save your life. Your family doctor orders laboratory tests such as blood tests and ultrasounds. Your doctor will send you for screening tests if you have a chance of getting a disease or a health problem. For example, she/he can send you for a mammogram to test for breast cancer. A family doctor can help you take care of most health problems. A family doctor can answer questions you have about your health. If you do not understand something, ask your doctor to explain.

Family doctors keep a record of your medical history. You will fill out forms about your personal information and your medical history on your first visit. Your medical history includes your and your family's health issues or past illnesses. Your medical history includes information about your blood relatives (for example: parents, grandparents, children, and brothers or sisters). They will ask you questions such as:

- Have you or any one in your family had serious health problems?
- At what age did these begin?

Your doctor will:

- keep test results from other doctors
- regular check-ups (visits to your doctor when you do not have any symptoms to make sure you are healthy)
- past illnesses (sicknesses)
- medicine: (drug; medication; something you take when you are sick to make you feel better)
- vaccination (medicine given by a needle; helps prevents sickness)
- lab tests (a test done where they have special equipment)
- scans (a test that is done to take pictures of the inside of your body)
- x-rays (pictures of the bones)

A regular or periodic check-up has five parts:^{*}

1. On your first visit to a doctor, the doctor will ask you questions about your medical and family history. The doctor will ask questions such as:
 - Has anyone in your family had cancer, heart disease, diabetes, or other health problems?
 - Do you drink?
 - Do you smoke?
 - What do you eat every day? Do you eat fruit or vegetables? Do you eat sweet and fried food?
 - What medicines do you take?
2. The doctor or a nurse will measure your height and weight; take your temperature, blood

pressure (the pressure of blood in the tubes that carry blood through the body) and pulse (the regular beating in the arteries/tubes in the body). They will check your eyes, ears, nose, mouth, skin, stomach, breast, heart, and lungs.

3. Doctors do tests and screenings to see if there are any problems. They test the blood and urine (pee) to see if there is anything wrong. They will check your eyes, ears, nose, mouth, skin, stomach, breast, heart, and lungs.
4. A doctor will do other exams and tests. For women, they examine the breasts to check for lumps. Lumps can be a sign of breast cancer. They do pelvic exams to check the lower belly and inside the vagina, they do a test called a Pap smear to collect cells near the womb to check for cancer of the cervix (lower part of uterus). They may send women for a mammogram (x-ray of breasts) from 40 years of age to check for breast cancer.
5. The doctor will tell you how to stay healthy. This will include advice on diet (the food you eat everyday), exercise, smoking, drinking, etc.

Doctors may also give injections (i.e., medicine given through a needle) called “vaccines” to children to prevent them from getting measles, mumps etc...

A family doctor can help you take care of most health problems. A family doctor can answer questions you have about your health. If you do not understand something, ask your doctor to explain. You can ask questions such as:

- What's wrong with me?
- Can you draw me a picture or show me what's wrong?
- What causes this type of problem?
- Is this serious?
- Can I give this illness to someone else, and if so, how and for how long?
- Are there any activities or foods I should avoid until I'm better?
- When can I return to school or work?
- How can I prevent this from happening again?

* Taken from; “CIWA’s Health Talk” done for the development of Health Literacy Curriculum for English language Learners

Unit Four - Accessing Health Services

Lesson 2 - Walk-In Clinics

This unit explains that walk-in services are a good alternative if a family doctor is not available. It is stressed that they do not replace the need of a family doctor. Various options in Calgary are discussed focusing on services offered to females.

Quick Facts

You can go to a walk-in clinic at any time. You can go to a walk-in clinic if you do not have a family doctor or if your family doctor is not available. You can get the same help at a walk-in clinic as a family doctor. Anyone can go to a walk-in clinic, but wait times can be long. You do not need an appointment to go to a walk-in clinic. They see people as they come in on a first come first serve basis. The wait times can be very long, up to four or five hours. When you visit a walk-in clinic for the first time, you will have to fill out forms and show your Alberta Personal Health Card. Walk-in clinics do not replace family doctors. You need to have your own family doctor for regular follow-up and also for annual physical checkup.

It is important to have a family doctor because you will always see the same doctor, and they keep your medical history. This will make it easier for the doctor to help you.

You should call your doctor if:

- you are not sure what the walk-in clinic doctor told you to do
- your problem is getting worse
- the walk-in clinic doctor asked you to let him know how you are feeling
- you want to find out the results of a test done at a walk-in clinic

Walk-in clinics are for people who do not have a family doctor or when your family doctor cannot see you

Northeast Calgary Women's Clinic

You have a choice to see a female doctor if you wish. If you are unable to find a female family doctor then you may go to a clinic that provides services for women only.

The Northeast Calgary Women's Clinic, is a non-profit service to the community. They provide services for issues relating to "female parts", such as: family planning, birth control, fertility issues, pregnancy care, cervical cancer screenings, and breast checks etc.

You should make an appointment before going to the clinic.

Calgary Primary Care Network

A Primary Care Network (PCN) offers different health care services for your basic, everyday health needs, as walk-in clinic and or family doctor. You do not need a doctor's note to go to this clinic.

There are six primary care networks in and around Calgary; South Calgary, Calgary Rural, Calgary Foothills, Calgary West Central, Highland and Mosaic.

The Mosaic PCN helps people who live in North East (NE) and parts of South East (SE). Family doctors at the Mosaic PCN can arrange for an interpreter for you. You must ask for an interpreter when you make an appointment.

Mosaic PCN has three clinics where anyone can go:

- **After Hour Clinic:** for people who need help after the doctor's offices close. You need to call Health Link Alberta first before you go there.
- **Women's Health Clinic:** This clinic is for women's health problems. You do not need a doctor's note to go this clinic.
- **Chronic Disease Clinic:** A chronic disease is a sickness that does not end for example:
 - Cancer: group of cells that grow uncontrollably; can spread to many parts of the body; causes a person to be very sick

- Diabetes: disease where there is too much sugar in the blood There is a problem with making food into energy
- High blood pressure: the pressure of the blood in your vessels is high

Unit Four - Accessing Health Services

Lesson 3 - Health Link Alberta

This will teach learners about this nurse telephone advice service. Guided activities will reinforce that this is free service offering advice and health information 24 hours a day, 7 days a week. Learners will learn how to call Health Link Alberta and ask for an interpreter.

Quick Facts

Health Link Alberta is a nurse telephone advice and health information service. You can call Health Link Alberta for information about health like how to find a doctor or how to find a hospital or clinic. You can also talk to a nurse if you are sick and you want to know how to get better. You can call them a 24 hour a day, 7 day a week.

Health Link Alberta is free to call. You can call them from anywhere in the province by dialing:

Calgary: (403) 943-5465

Edmonton: (780) 408-5465

Alberta: 1-866-408-5465

You can ask to speak to someone in your own language.

Instructions for Calling Health Link Alberta

Dial the Health Link Alberta number.

You will get a recording that says:

You have reached Health Link Alberta.

If this is a medical emergency hang up and dial 911.

Otherwise please stay on the line..."

"For information on health services press 1

If you have symptoms press 2 to speak to a nurse"

If you need an interpreter say:

"I speak _ (your language)_; I speak _____; I speak _____"

Repeat three times.

Wait for the interpreter to come on line (say hello).

If you speak Mandarin you can call 403-943-1554 for Health Link Alberta in your language.

If you speak Cantonese you can call 403-943-1556 for Health Link Alberta in your language.

Do not call Health Link Alberta when there is a serious health problem or if someone's life is in danger, call 911 for help

4. BREAST CANCER FACTS AND MYTHS

FACTS AND MYTHS

There are many myths about the causes and detection of breast cancer that are unfounded or simply untrue. Here are some of the common myths about breast cancer causes that you may have seen or heard reported in the media.

Myth: Antiperspirants/Deodorants cause breast cancer

The Facts: Several studies have been conducted on the link between antiperspirants/deodorants and breast cancer and to date there is no conclusive evidence that they increase your risk of breast cancer.

Some deodorants contain aluminum. You may be advised not to wear deodorant containing aluminum when you go for a screening mammogram. This is because it could show up on the mammogram images and may lead to an inaccurate result by making breast cancers and other abnormalities harder to detect.

If you are concerned about the ingredients in your personal care products, follow the precautionary principle – use simpler products and read the label so you avoid anything with “perfume” or “fragrance.”

Myth: Bruising the breast causes breast cancer

The Facts: There is no scientific evidence that bumping or bruising your breast increases the risk of breast cancer. The Canadian Breast Cancer Foundation encourages all women and men to practice being breast aware. Know what changes to check for and if you notice any unusual changes discuss them with a health care provider.

Myth: Wearing an underwire bra causes breast cancer

The Facts: No research shows that wearing an underwire bra – or any other kind – increases your risk of breast cancer.

Myth: Radiation by mammography causes breast cancer

The Facts: Modern mammography equipment requires very small doses of radiation. Research confirms that the risk of harm from radiation exposure by mammography is very low. Radiation would need to be delivered to the breast tissue at 100-1000 times higher than used for mammography in order to have a statistical increase in breast cancer risk.

The benefits of the earlier diagnosis and treatment of breast cancer far outweigh the risk of the small dose of radiation received during a mammogram.

Myth: Men don't get breast cancer

The Facts: Men have breasts and can develop breast cancer. Their risk, however, is very low, with less than one per cent of all breast cancer cases in Canada occurring in men. Despite the small number of cases, breast cancer in men is not well understood, stigmatized, and may be misdiagnosed or diagnosed at a later stage.

Men, like women, are encouraged to be breast aware and discuss any unusual changes in their breasts with a health care provider.

Myth: Abortion and miscarriage cause breast cancer

The Facts: Abortion does not increase the risk of breast cancer. Scientific evidence demonstrates that there is no link between breast cancer and spontaneous abortion (miscarriage) or induced abortion. These findings are supported by:

- American College of Obstetricians and Gynecologists
- Collaborative Group on Hormonal Factors in Breast Cancer
- National Cancer Institute (USA)
- Society of Gynecologic Oncologists of Canada
- Society of Obstetricians and Gynecologists of Canada
- World Health Organization

Myth: Cell phone use causes breast cancer

The Facts: There is currently no conclusive link between cell phone use and the increased risk of breast cancer. The International Agency for Research on Cancer concluded in 2011 that radiofrequency fields, such as those from cell phones, may cause cancer but more research is needed before this is confirmed.

If you are concerned about cell phone use and the possible link to cancer:

- reduce the amount of time you use a cell phone or consider texting instead of talking
 - use a headset instead of holding the phone next to your ear
 - don't carry your cell phone next to your skin (e.g., in your bra)

Myth: Breast implants cause breast cancer

The Facts: Several studies conclude that having cosmetic breast implants does not increase breast cancer risk. However, implants can sometimes make it harder to see breast tissue, and abnormalities including cancers, on mammogram images.

If you have breast implants, continue to have regular mammograms but make sure to let the breast screening program know that you have implants when booking your mammogram appointment. A special technique called implant displacement views can be used to screen women with implants.

Refer to and use the following activities/Handouts:

Activity 12: Myths and Facts (Page#78)

Activity 14: True or False **(Page#80)**

5. ACTIVITIES

ACTIVITIES

Appendix

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Activity 1 - Healthy Habits

Please answer the questions below in detail

1. Do you eat healthy and engage in regular physical activity?

2. Why is it bad to smoke and drink a lot of alcohol?

3. Do you ever visit your doctor to make sure you are healthy? How often do you go?

4. Is visiting a doctor yearly a part of your routine? Please explain why it is good to get an annual check up?

1. How do these habits and routines make you healthy and prevent illness?

Activity 2 - Doctor's Visit

PART I:

In the space below, write a story about a time when you were sick. Describe what kind of pain or symptoms you had. Write about the steps you took to get better (for example, did you go to the doctor?)

PART II:

Once you have finished your story about a time when you were sick, work with a partner to role-play a visit to the doctor's office. Your partner will play the role of doctor and ask you the following question based on your story:

1. What are your symptoms?
2. What does your pain feel like?
3. How do you stay healthy?
4. Why is your health important to you?

Activity 3 - Anna's Story

Your task is to write a paragraph about Anna's lifestyle. First read the story. Then use the questions below and your vocabulary list to write the paragraph.

Anna is a 40-year-old woman and a mother of three children. Although Anna would like to set an example for her kids and lead a healthy lifestyle, she says she doesn't have the time. Instead of eating a balanced healthy diet, she often eats fast food because it is quick and easy. After work, Anna spends most of her time indoors in front of the television. She has tried to quit smoking for years now but has had little success. Anna often tells her friends that smoking is a way to cope with stress. She doesn't drink alcohol. Anna doesn't have a family doctor but she occasionally goes to the walk-in clinic when her children are not feeling well. She doesn't go for annual checkups because she feels well and is not experiencing any symptoms of illness. Anna believes that because she is young, she will not be diagnosed with a serious disease such as cancer.

Anna has adopted some poor health habits. Try to answer the following questions in your paragraph:

- Name some of the unhealthy habits Anna has adopted.
Why do you think these are bad?
How does a healthy lifestyle prevent illness?
- What actions could Anna take to stay healthy?
- What are the benefits of a proactive and balanced lifestyle?
- Why is it important to have an annual checkup?
- When you go for an annual checkup, what kind of screening tests does a doctor do?
- Why is early detection of a disease important?

Activity 4 - Food Log

Consider what you have learned so far. In your opinion, do you live a healthy lifestyle?

Use the template below to keep a food diary for 3 days. Look at the **Canada's Food Guide** to assess whether you are eating a well balanced diet.

	Day 1	Day 2	Day3
Breakfast			
Mid-morning			
Lunch			
Mid-afternoon			
Evening meal			
Before bed			

Activity 5 - Exercise Log

Stay motivated by logging in the activities you do. Remember that you should be active for at least 30 minutes a day most days of the week. Get your family involved and have fun!

	ACTIVITY	TIME
DAY 1	<i>Example/ Shoveling the snow</i>	<i>20 minutes</i>
DAY 2		
DAY 3		

Activity 6 - Reminder Slip

Fill out the slip below. Remember that you should get a physical exam once a year to make sure that you are healthy. Cut along the dotted lines and place the slip on your refrigerator to remind you of your next doctor appointment.

My last physical exam was on _____

I should schedule my next appointment for_____

Activity 7 - Risky Activities

Carefully consider what you have learned so far about healthy living. Your task is to write down what the consequences are of the actions below. Read what you have written to a partner or your instructor.

- Smoking
 - Unhealthy foods
 - Not exercising
 - Not getting an annual check-up

Activity 8 - Health Risks

What are some risks in your life that you can control? In the boxes below, list the risks which are under your control and the ones which are not.

Risk's I can control	<ul style="list-style-type: none">•••
Risk's I can't control	<ul style="list-style-type: none">•••

Activity 9 - What Is Cancer?

Read the following information about cancer. Circle any words or phrases you do not understand. Discuss them with your instructor.

Did you know?

Breast cancer is one of the most common forms of cancer in women. In Canada, 1 in 9 women will develop breast cancer in their lifetime. Each week, 100 women will die from breast cancer. There are some steps you can take to lower your risk of developing the disease or dying from it. It is important to understand what cancer is and the actions you can take to stay healthy.

What is Cancer?

While the causes of breast cancer are not fully understood, research shows that you can lower your risk of developing the disease or dying from it, by minimizing lifestyle and environmental risk factors and through breast cancer screening.

The term “cancer” refers to a group of many related diseases that have to do with cells. Cells are small microscopic structures that make up our bodies and all other living things. Sometimes cells do not die when they should and new cells form when the body does not need them.

This uncontrolled cell growth can create a lump of cells called a tumor. A benign tumor is not cancerous. It can often be removed, and in most cases, it does not come back. The cells in a benign tumor do not spread to other parts of the body. Malignant tumors are cancerous. Cells in malignant tumors can invade nearby tissues and spread to other parts of the body. The spread of cancer to a new place in the body is called metastasis.

What can you do about it?

You can reduce risk factors which may affect your chances of getting cancer. Healthy habits include staying fit, eating well, limiting alcohol and not smoking. Some risk factors like gender and age cannot be controlled. Because one cannot completely prevent the risk of getting cancer, it is important to be aware of your body so that you can report any abnormal changes to your doctor. It is also important to go for an annual check up so that your doctor may examine you for signs of cancer. Screening methods are designed to check for cancer in people with no symptoms. If cancer runs in your family, you should talk to your doctor about which cancer screenings are right for you. Remember that screening for cancer helps detect the disease early at a more treatable stage.

Activity 10 - Definitions

Circle the statement which best defines the term

Disease

- i. an illness or sickness and people usually get certain symptoms or signs
- ii. is something you catch from other people when you are old

Cells

- i. are small microscopic structures that make up our bodies and all other living things
- ii. the area of a country in which you were born

Cancer

- i. a disease where abnormal cells divide without control. It can stay in one place or spread to other parts of the body.
- ii. a terrible illness that destroys parts of your body, and then always leads to death

Tumors

- i. a lump of cells caused when cells grow at an uncontrolled rate. It may or may not be cancer.
- ii. lumps in the body which cause cancer.

Malignant

- i. cells which are cancerous and can spread to other parts of the body
- ii. tumors which are not cancerous and do not spread to other parts of the body

Benign

- i. not cancerous; does not spread to other parts of the body
- ii. something that causes cancer to spread to other parts of the body

Prevention

- i. taking actions to stop a disease from happening
- ii. going to the doctor when you are sick

Screening test

- i. a medical test that can find a disease early when it is most curable.
- ii. a test a person takes once they show symptoms of illness

Activity 11- Case Studies

Read the case studies below. Then list the preventable and non-preventable causes.

Case study 1 – Alma

Alma lived in Edmonton. Alma's job was delivering newspapers and was always very active as she got lots of exercise from walking. She enjoyed being outside and getting up early, even in the winter. Alma had been a heavy smoker all her life. A few weeks after her 50th birthday, he developed shortness of breath and went to the doctor. It turned out that she had lung cancer.

Case study 2 – Kate

Katie comes from Calgary. She has two children – Matt and Sarah – and a busy full time job as a journalist with the Calgary Herald. She loves her job and is always at her computer. Kate eats organic food, and goes swimming twice a week. Both Kate's mother and grandmother died of breast cancer. Kate developed breast cancer when she was 35 years old, but because it was diagnosed early, she was successfully treated and now carries on her busy life.

Case study 3- Lena

Lena is a 45 year old woman who lives with her husband. Lena loved to cook healthy meals for her grandchildren. She also enjoyed taking long walks in the park. She always ate healthy, took plenty of exercise, and didn't smoke. When Lena found a lump on her breast she went to her doctor. Soon she was diagnosed with cancer and died shortly after. It was a big surprise to everyone.

Preventable Causes

Non-preventable Causes

Activity 12 - Myths and Facts

The following statements have been made about cancer. You may have even heard them yourself. Many myths exist about cancer because no one knows yet how it is caused or how it can be cured. Carefully read the statements below and write down if the statement is a myth or fact.

No.	True	False	Statement
1			It is not possible to completely prevent getting cancer, but you can reduce your chances of dying from cancer
2			All individuals diagnosed with cancer will die from it
3			In a process called metastasis, cancerous cells can break free from a growth and spread to other parts of the body
4			A benign growth is not life-threatening
5			At least half of all cancers can be prevented through healthy living
6			The number of new cancer cases and deaths continues to rise steadily as the Canadian population grows and ages
7			A person can tell if they have cancer based on their symptoms
8			A person can tell if they have cancer based on their symptoms
9			Eating a balanced diet, being active and not smoking may decrease some risks of developing cancer

Activity 13 - Definitions

Match the word to its meaning. The first word is done for you.

WORD	MEANING
Areola	A low-dose x-ray of your breast
Cancer stage	A growth or lump that was not cancer
Mammogram	The most likely outcome
Clinical Breast Exam	This tells you how serious the disease is
Benign breast disease	An exam that a doctor does to check your breasts
Metastasis	Extends up to the collarbone and from the armpit to the breastbone
Nipple	The area around the nipple
Prognosis	Identifying the disease by the signs and symptoms
Breast Tissue.	Where breast milk comes from
Diagnosis	Cancer spreading to other parts of the body

Activity 14 - True or False

Explain that because of the strong feelings about cancer, there are many myths about it. Sometimes these myths get confused with the facts. Brainstorm the differences between a fact and a myth. Before you go onto the next step, come up with a working definition of each.

<i>STATEMENT</i>	<i>TRUE OR FALSE</i>
Example: I'm only 36. Breast cancer happens only in older women	<i>FALSE</i>
Nobody in my family has breast cancer so that means I can't get it	
Women with more than one risk factor typically get breast cancer	
You can prevent breast cancer	
Having a mammogram every year is bad and will cause cancer	
Breastfeeding can increase my risk of breast cancer	
While the risk of breast cancer increases with age, all women are at risk for getting breast cancer	
Most women who get breast cancer have no family history of the disease	
Having a male relative with breast cancer, can also increase your risk	
Most women diagnosed with breast cancer have no known risk factors except being a woman and getting older	
Because the causes of breast cancer are not yet fully known, there is no way to prevent	

Activity 15 - Doctors and Clinics

Fill in the blanks

A FAMILY DOCTOR

1. You need an _____ to see a family doctor
2. The doctor will keep your _____ and _____ history
3. You see the _____ doctor each time

Same Appointment Family Medical

A WALK-IN CLINIC

1. You do not need an _____ to see a doctor here
2. The _____ times are long

Activity 16 - Know Your Breasts

Read the important message below. Next time you have a minute to yourself try to GET TO KNOW YOUR BREASTS!

Women come in many different shapes and sizes. So do breasts! It's normal for some women to have perky full breasts, others have small breasts. The look of nipples is also different between women. No two breasts are alike, even the ones you have. One might be smaller than the other and have a different shape. It's important to know how your breasts usually look like. If they change then ask your doctor if this is normal.

How do your breasts normally look and feel like?

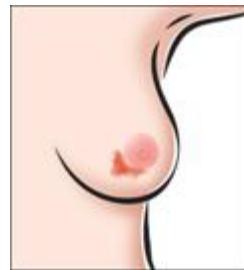
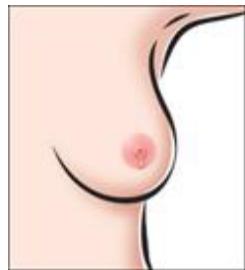
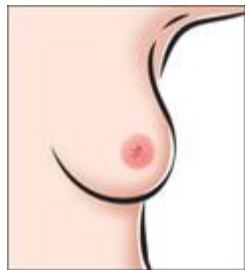
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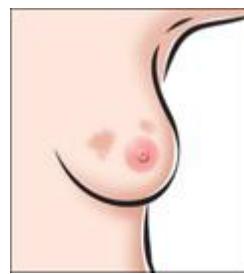
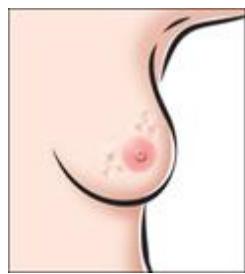
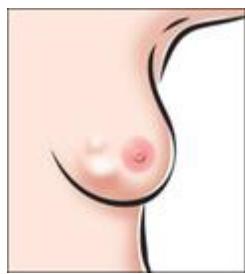
1. Stand in front of the mirror with your shoulders back and look at your breasts from all sides. Look underneath your arms too.
2. Feel your breasts with your fingertips.
3. Do this once in a while and if you notice a change that does not go away after your next period then visit your doctor.



Activity 17 - Breast Changes

Write down what is wrong with the breast.





Activity 18 - Mina Is Sick

Listen to the story.

What do the bold words mean?



This is Mina.

Mina is **sick**.

Coughing is a **symptom**



Mina goes to the **doctor**



The doctor looks at Mina's **throat**

Mina gets **medicine** for



her **cold**

Activity 19 - Breast Health Word Scramble

T L H A E H _____

B T A S R E _____

C R N A C E _____

S R R V V U I O _____

K O L O _____

L E F E _____

C H G E N A _____

P L U M _____

P P L E N I _____

R S H A _____

D M P L I E _____

D C T O R O _____

M M M M A O G R A _____

A I C W _____

Activity 20 - Cancer

Place flashcards into sentence blanks

DISEASE

HEALTHY

TREATED

ONCE

SYMPTOMS

1. Cancer is a serious _____.
2. People with cancer sometimes don't have _____.
3. Go to your doctor to make sure you are _____.
4. Go to the doctor _____ a year.
5. Cancer can be _____ with medicine.

6. HANDOUTS

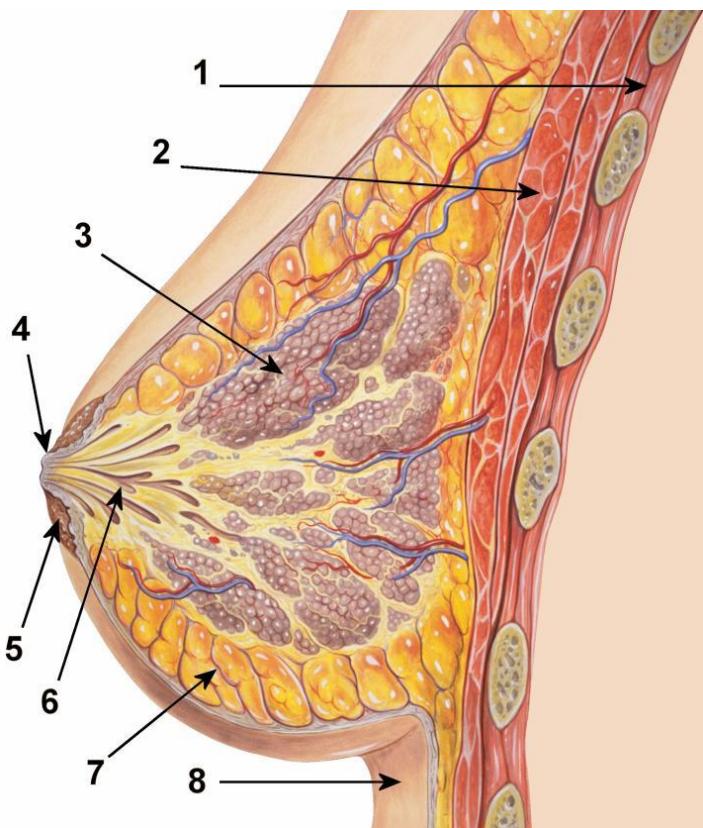
HANDOUTS

Appendix

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3	Normal Breast Changes	92
4	Abnormal Breast Changes	93
5	Five Steps	95
6	Mammogram	96
7	Signs & Symptoms	97

Handout 1- The Breast

A. Medical Terms



- | | |
|----------------------|---------------------|
| 1. Chest wall | 5. Areola |
| 2. Pectoralis muscle | 6. Lactiferous duct |
| 3. Lobules | 7. Fatty tissue |
| 4. Nipple surface | 8. Skin |

B. Breast Facts

- The main purpose of the breast is to produce milk for babies to breast feed.
- The size and shape of women's breasts is different between women.
- A woman's breasts are hardly ever the same size or shape. It is not abnormal for one breast to be slightly larger or smaller, higher or lower, or shaped differently than the other.
- There are many things you can do to make sure that your breasts are healthy.
You can:
 - Eat healthy
 - Exercise
 - Not smoke
 - Drink less alcohol
 - Visit your doctor for a clinical breast exam. Go once a year so that any abnormal changes can be caught early
 - If you notice a sign or experience a symptom then go to your doctor and ask about it

Handout 2 - Signs & Symptoms

In your opinion, which of the following statements are abnormal changes to the breast and which are normal? Read the statements, beside each sentence write (A) for abnormal change and (N) for normal change.

- For most girls, the breasts grow during adolescence. During this growth period it is possible for breast lumps to form.
- Changes to the size or shape of one or both breasts.
- Swelling under the armpit or below the collarbone.
- Nipple changes, including change in the shape or position of a nipple, or a nipple that becomes pulled inward (inverted).
- During pregnancy, breasts will change in preparation for breastfeeding
- A lump on your breast or under the armpit
- Swelling during pregnancy or menstruation (period)
- Discharge from one or both nipple/s (fluid that is not milk or is bloody)
- Skin changes , including irritation, redness, a rash or scaly skin, or a pucker on the breast
- After menopause, a woman's body produces lower levels of the hormone estrogen. Breasts lose fat and tissue and become less firm, less dense and change shape
- Unusual, persistent pain in the breast or armpit area.

Handout 3 - Normal Breast Changes

These are normal changes occurring in the breast in a women's lifetime:

Adolescence

- For most girls, the breasts grow during adolescence. During this growth period it is possible for breast lumps to form. Such lumps are usually part of normal breast development.

Menstrual period

- During menstrual periods, women may experience many changes as a result of changing hormone levels. The milk glands and ducts enlarge and the breasts retain water which causes the breasts to enlarge or feel lumpy. Breasts may also feel swollen, tender, or painful.

Pregnancy

- During pregnancy, breasts will change in preparation for breastfeeding. The breasts become larger and firmer as the number of mammary glands increase for milk production. The areola becomes darker in color and the nipples become larger. Breasts may feel tender or more sensitive.

Breastfeeding

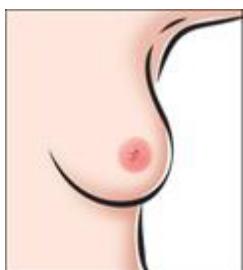
- During breastfeeding, the breasts can change size several times a day in response to milk production. A woman may continue to have some secretions for a few months or up to one or two years after stopping to breastfeed.

Menopause

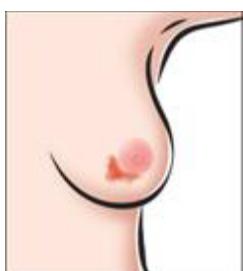
- After menopause, a woman's body produces lower levels of the hormone estrogen. Breasts lose fat and tissue and become less firm, less dense and change shape.
- When taking hormones (for menopause or for birth control) your breasts may become denser.

Handout 4 - Abnormal Breast Changes

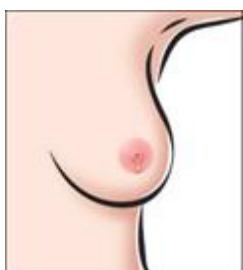
- Changes to the size or shape of one or both breasts.
- Unusual, persistent pain in the breast or armpit area.
- Swelling under the armpit or below the collarbone.
- Nipple changes, including change in the shape or position of a nipple, or a nipple that becomes pulled inward (inverted).



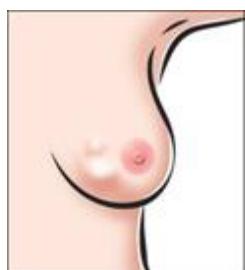
- Redness



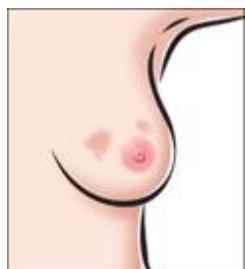
- Discharge from one or both nipples



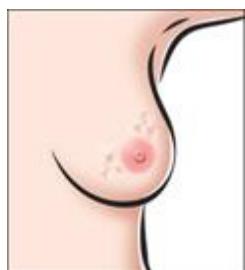
- Lumps or thickening.



- Skin changes, including irritation, rash or scaly skin.



- Dimpling or puckering.



If you are not sure if a change is serious, check again after your next period. If you no longer have your period, then check a few weeks later.

Handout 5- Five Steps

Five steps of being breast aware

STEPS TO BEING BREAST AWARE

1. Know how your breasts normally look and feel.
2. Know what **changes to look for**.
3. **Look and feel** for changes.
4. Report any changes to a doctor.
5. Go for a free mammogram if you are of the appropriate age, or if recommended by a doctor. By finding breast abnormalities in the early stages, mammograms can save lives. Women at the appropriate age can get a free mammogram through their **regional breast screening program**.

*Courtesy of Canadian Breast Cancer Foundation

Handout 6 - Mammogram



Handout 7- Signs & Symptoms

Some changes to the breast are normal but some are not.

Changes	Is this normal?
Example: <i>Teenage girls may have lumpy breasts.</i>	Yes
One or both breasts change size or shape.	
Swelling under the armpit or below the collarbone.	
The nipple changes shape. It puckers or becomes inverted.	
During pregnancy, breasts will get bigger and change in preparation for breastfeeding.	
A lump on your breast or under the armpit	
Swelling during pregnancy or menstruation (period)	
Discharge from one or more nipple (fluid that is not milk or is bloody)	
A rash or redness on the breast.	
After menopause, breasts lose fat and tissue and become less firm, less dense and change shape	

7. EVALUATIONS

Name: _____ Location: _____ Date: _____



Breast Health Initiative for Newcomers
Train-the-Trainer Survey
(To be completed after completing the Train-the-Trainer Course)

1. Please circle the statement that represents your understanding of breast health prior to participating in the training.

I did not know what breast health was.	I heard about breast health but knew very little.	I knew some things about breast health.	I knew what breast health was.
--	---	---	--------------------------------

2. Please circle the statement that represents your understanding of breast health after participating in the training.

I still do not know what breast health is.	I have some understanding of breast health but still have many questions.	I have a general understanding of breast health and only have a few questions.	I fully understand what breast health is.
--	---	--	---

3. Please circle the lesson(s) that you feel were most useful to you.

Health Literacy	Cancer Basics	The Healthy Female Breast	Introduction to Breast Cancer	Understanding Risk
Prevention and Breast Cancer	Be Breast Aware	Clinical Breast Exams	Mammograms	Age Life Plan
Women's Clinics	Finding a Family Doctor	Filling out Forms	Booking Appointments	

4. Did you gain any new skills?

No	Yes
----	-----

5. If yes, please circle any new skill(s) you gained from participating in the training

Presentation skills	Facilitation skills	Computer skills	Communication skills	Organizational skills
---------------------	---------------------	-----------------	----------------------	-----------------------

6. On a scale from 1 to 4, how confident are you with educating others in your community about breast health? 1=Not Confident and 4= Completely Confident

Not Confident 1	Somewhat Confident 2	Confident 3	Very confident 4
--------------------	-------------------------	----------------	---------------------

7. What part of the training did you like? Please explain.

8. What you would like to see improved in the training? Please explain.

9. In addition to facilitating educational sessions in your community, please circle other activities you will do to promote breast health.

Talk to my doctor about breast health	Talk to my family about breast health	Conduct regular breast self-examinations	Schedule regular screenings
--	--	---	--------------------------------

8. GLOSSARY

8. GLOSSARY

211	the number you call for community, social and government resources
911	the number you call for police, fire or ambulance
A.M.	before noon (12:00 p.m.) or mid-day; time of day; the morning
Accepting	to agree to take (e.g. the doctor is accepting patients = the doctor is taking new patients)
Accessible	available, on hand, understandable, usable for disabled persons
Advice	something someone (such as a doctor) tells (suggests) you to do
Afternoon	the part of the day from noon (12:00pm) until sunset
AHS	Alberta Health Services an organization that is responsible for providing health care for all eligible residents in Alberta; runs health care in Alberta
APHC	Alberta Personal Health Card a card that lets you use health care services that the government will pay for
Alcohol	is a drink that can lower your attention and slows your reaction, for example beer, wine, liquor, etc.
Allergy	something (i.e. dust or food or to something that touches the skin) that makes you sick; there are different reactions people can get: sneezing, itching, a runny nose, swelling, trouble breathing, etc.
Ambulance	a vehicle that takes sick or hurt people to the hospital quickly in an emergency
Anemia	tired, low iron, not enough red blood cells
Annual Check-up / Periodic Check-up	
	a visit to a doctor when you are not sick to make sure you are healthy
Antibiotic	drug, medicine, drug that kills bacteria
Anti-inflammatory	
	a drug that brings down swelling and pain; for example aspirin, cortisone
Anxiety	a feeling of worry or fear
Application	a form in which you request something (e.g. an application form for Alberta Blue Cross, signing up for additional insurance)
Appointment	
	a time you agree to meet or see someone

Arthritis	pain in joints; disease of the joints that causes swelling, pain, heat, and a sense of stiffness (hard to move)
Ask	to seek information/ directions
Assess	to find out what is wrong
Assistance	to help or assist
Asthma	disease that makes it hard for people to breathe; long term disease of swelling of the airways of the lungs; disease of lungs or respiratory system
Backache	pain in the back
Bank machine (Automated Teller Machine – ATM)	
	a machine that gives cash from your bank account
Biking	to ride a bike
Blanket	a piece of cloth used on a bed; used to keep a person warm
Bleeding	loss of blood
Blood pressure	
	the pressure/ force made by blood inside blood vessels (vessels: tubes that carry blood to different parts of your body; pressure: how much something is pushing on something else)
Blood test	you have blood taken from your arm using a needle and it is sent to the laboratory to be checked
Bones	parts of the body that makes the skeleton
Brain	part of the body that allows us to make sense of the world; it controls our whole body
Breathing	to take air into and out of the lungs
Broken	to crack or split; fracture
Brother	a boy or man who has the same parents as you
Bruise	when you are hurt and the skin turns black or blue
Burn	when you hurt/injure yourself by touching something very hot. Your skin gets red, sore or blistered.
Buttocks	part of the human body; butt, bottom, bum
Calm	without excitement; to be cool, composed. Not showing anger, happiness or sadness

Cancer when the body has no control over cells that begin to split; group of cells that grow uncontrollably. Cells are what make up our bodies. Cancer happens when these cells do not grow normally.

Caplets a solid, stretched out (long) tablet (medicine), coated to make it easy to swallow

Capsules a small gel pill that has medicine inside. It melts in the stomach.

Cardiologist

a heart doctor

Cardiology medical department that treats heart problems

CAT scan (CT scan)

test that shows inside body parts, scan, special x-ray, test

Cavity tooth decay, holes in teeth; damage to teeth

Cervix the lower part of the uterus

Check / Examination

to look at; to try and find if there is something wrong

Check blood pressure

to look at the amount of force/pressure with which your blood is pumped (moved) through the body. If too high or too low it is not good.

Check ear look inside the ear for problems

Check Pulse

look at how fast your heart is working (number of beats per minute)

Check throat

look inside the mouth at the back to see the throat

Check-in to let someone know that you are there for an appointment or to see the doctor

Chewing bite or grind food with your teeth before you swallow

Chiropractic

a person who works to make the health of a patient better by adjusting the back and other parts of the body.

Choking when you cannot breathe because something is blocking the air from reaching the lungs (for example a piece of food) or because of an allergic reaction and the throat is swollen

Cirrhosis disease of the liver (liver gets damaged)

Clammy cold and sweaty

Clinical psychologist

a person who studies the mind and how people act

Cold illness which affects the nose and throat (coughing, sneezing, sore throat, runny nose)

Community refers to a group of people living in the same area

Community Health Centre

a type of health centre that provides free health care. It is located in a community/ area of a city.

Condition a medical problem, a disease, an illness

Confirm to make sure; verify (e.g. to verify that you will be able to go to an appointment)

Confused cannot think clearly

Congestion (stuffy nose/blocked nose)

hard to breath from your nose

Conscious awake; aware of what is around you

Consciousness

to be awake

Constipation

hard stool/ poop that does not come out

Cough quick noisy push of air from mouth

Coverage when you have insurance such as Alberta Health Care that pays for health care (help from a doctor or nurse)

Cream a semi-solid form of medication (like lotion); thick liquid

Chronic disease/illness

a sickness that does not end; for example: heart disease, diabetes, cancer

Cut to break the skin with a sharp object (such as a knife, scissors or a scalpel)

Date of birth

when you were born, the day, month and year you were born

Dental to do with teeth and gums

Dentist a teeth and gum doctor

Department

an area within the hospital like emergency department or maternity department

Depression sadness or unhappiness that lasts a long time

Dermatologist

skin doctor

Device a thing made for a particular purpose/reason; a tool or machine (i.e. measuring tool)

Diabetes disease with too much sugar in the blood, problem making food into energy

Diagnose test, find out, figure out, learn cause, name

Diagnosis finding out the cause of an illness, condition, disease, medical answer

Diarrhea watery poop/stool

Digestive problems

with how the body absorbs food and uses it for energy

Discuss talk about; talk with; talk over

Disease illness; sickness

Divorced to end a marriage

Dizziness/ dizzy

feeling wobbly/ faint, to lose balance; not steady

Doctor a person who treats (takes care of) you if you are sick

Dose/ dosage

amount of medicine, chemical, or radiation; amount, size

Drops medicine that is in a liquid form (for eyes or ears or nose)

Drowning sinking, to go under water and not being able to breathe

Drowsy / Drowsiness

sleepy, not fully awake

Drugs (medication/ medicine)

used to treat (care for/heal) or prevent (stop) illnesses or disease. You take these when you are sick and want to get better.

Drugs (illegal)

something like medicine which is not legal that people take for pleasure
(such as: marijuana, opium, cocaine, etc.)

Ear drops medicine that you put into the ear

Earache pain in the ear

(EKG/ECG) ECG electrocardiogram heart test

Elevator a lift that carries people from one floor to another; you take an elevator
when you cannot or do not want to climb the stairs

Emergency urgent, threat, disaster, crisis

Emergency contact

person you would want someone to call if you were hurt or unwell

Emergency Department

The place in the hospital you go when you have a life threatening problem
and you need help straightaway

(EMT) Emergency Medical Technician/ Paramedic a health care worker; works
on an ambulance and takes care of sick or hurt people.

Employment status

if you are working or not working (employed or unemployed)

Evening time of day between afternoon and night (5:00 pm – 9:00 pm)

Examination

to try and find if there is something wrong

Excessive too much of something

Exercise physical activity, work out (i.e. run, walk, play soccer, etc.)

Expiry how long something (like medicine) can be kept and still be safe and
effective (work well)

Eye drops medicine that you put into the eye

Fainting to suddenly lose consciousness; pass out

Family a group of people who are related (e.g. mom, dad and children)

Family doctor/ physician

a health care provider who you go to visit to keep you healthy or who you
visit when you are sick

Family history

health information about your family

Father male parent

Fatigue very tired/ weak

Fever body temperature is too high; your body is trying to fight an infection (sickness)

Fine okay, well, good

First come-first served

no appointment needed, people are seen in the order they come (arrive)

Five senses

ways we perceive (take in) things (sight, sound, taste, smell, touch)

Flossing to clean between teeth with a string/thread

Flu illness (virus) that affects breathing (respiratory system) or stomach (intestinal system)

Food poisoning

sick from bad food (old or dirty food)

Fracture break (e.g. to break a bone)

Friend a person you know well and trust

Gastrology type of health care to help people with stomach diseases / sicknesses

Gender male or female

Good fine, okay, well

Great very good

Grind press or clench

Habit something that you do repeatedly (over and over again), such as waking up at the same time every day, biting your nails, smoking, etc.

Hang up to put the phone down or turn off; to end a call

Hay fever allergic reaction; affects breathing and eyes; causes sneezing, a runny nose and itchy, watery eyes

Headache pain in the head

Health /Healthy

you feel good and you do not have a health problem

Health care

the care you get from a doctor/nurse, health centre or at a hospital to keep you healthy or make you well when you are sick

Health care card

a card that helps cover the cost of health care/ services (for example: Alberta Personal Health Card)

Health care providers

people who take care of your health; they keep you healthy or make you well when you are sick (i.e. doctors, nurses, lab attendants, etc.)

Health insurance

a program where you pay a small amount of money each month to help pay for big medical cost that you may have (e.g. Alberta Blue Cross)

Health Link Alberta

a telephone service you can phone to get health information and speak to a nurse. You can ask for an interpreter. Toll free in Alberta: 1-866-4085465

Hear one of the 5 senses; to be aware of sound by the ear

Heart an organ that pumps blood

Heart attack

the heart gets damaged (hurt)

Helpful useful, to assist

Herbal medicine

a medicine prepared with herbs

Hesitate to pause or hold back

Hollow something that is empty on the inside; not filled

Hospital a place where you go if you are very sick or injured

Hurting to be in pain

Immediate right away; at once

Immunization /vaccination/inoculation

getting a vaccine; medicine given through a needle that prevents sickness

Immunize to protect again disease, usually giving medicine through a needle

In pain hurting, sore

Infant	a small baby; new born baby (before they can walk or talk)
Infection	disease; illness; sickness; virus; bug; illness caused by germs; a sickness you get from germs

Inflammation

swelling, pain, heat, redness

Information desk

located in the entrance of a hospital or health center where you can go to ask questions; front desk where you can ask question

Inhaler	breathing medicine/drug, asthma medicine, device that helps give medicine into the breathing tubes
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Injection	to give medicine by needle; booster; dose
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Injury	you have hurt a part of your body
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Interpreter	a person trained to translate information from one language to another
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Itchy	to want to scratch skin; irritation maybe from a bug bite, or something that you have touched that makes you want to scratch
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Jogging	running slowly
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Joint	where bones come together (join)
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Kidney	organ that filters/ cleans the blood
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Lab	Laboratory your medical tests go here to get checked
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Lab tests	a test done where they have special equipment and trained staff (for example, a blood test, urine or stool test, etc.)
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Life threatening

you have a serious problem and could die if you do not get help right away

Located	Location where something is
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Lotion	a liquid type cream that is used on the skin
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Lungs	breathing organs
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Machinery	equipment that moves, something that helps a person do something (e.g. cars, robots, clocks, screws, etc.)
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Major injury

to get hurt badly, maybe life-threatening

Malaria	fever caused by a bite from an infected mosquito
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Manage	to be in control, take care of, and watch
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Married	a union between two people; like a contract; matrimony; husband and wife
Massage	to rub a body part to ease pain and aches
Measuring	to calculate (measure) how much of something; amount (e.g. 10mL of medication)

Medical Emergency

when there is a life threatening problem (could cause death) and you need help right away

Medical/Health History Form

tells the doctor which problems you and your family have now or have had in the past; it includes your personal information

Medical test

a kind of medical procedure done to find out if something is wrong, or see if the illness is getting better or worse, and see how to treat the patient

Medication drug, pill, medicine

Medicine drug; medication

Mental health services

helps people with feelings, emotions, how they think and personal problems

Message to communicate information with someone who is not there (e.g. leave a voice mail, email, note)

Morning beginning part of the day; time between sunrise and noon (12:00pm)

Mother female parent

Muscles a source of power within the body; the heart is a muscle

Muscular pain sore muscles

Neighbors a person who lives next door to you or close to you

Neurology a type of health care that helps people with problems with the brain and spine (nervous system)

Next of kin your closest family member (person you would want to contact in an emergency)

Non-life threatening

not a serious problem; person will not die if they do not get help immediately

Not so good

so-so; bad

Numb/ numbness

to not feel

Nurse a health professional who gives medical care to sick or hurt people.

Nutrition what you eat and how it affects your health

Obstetrics/ gynecology

type of health care for women during pregnancy and childbirth and with female health problems

Ointment a semi-solid substance (thick cream) that you apply to skin to soothe aches or relieve itch

Okay good; fine

Oncology/Cancer

Center it is to help people with cancer

Operator someone who answers the phone

Ophthalmology

type of health care that helps people take care of their eyes

Optometrist

a doctor who cares for the eyes

Oral/Dental health

to take care of teeth

Orthopedic type of health care that helps with bones and joints

Over the counter

medicines anyone can buy

Overdose to take too much medicine

Overweight

weighing more than you should (having more body fat then is healthy); too heavy

Pediatrician

children's doctor

Pediatrics/Children's Clinic

Health care for children; helps with health problems of children

Pap smear/ Pap

A test for the cancer of the cervix (the lower part of the uterus)

Paper cut a cut you get when a paper slices your finger

Paramedics (EMT)

a person trained to give emergency medical treatment

Parenting being a father or a mother; raising kids; information (skills and experiences) used to teach and care for a child

Patch a bandage that has medicine on it

Patient a person being treated for a medical problem

Personal information

Name, address, telephone number, Alberta Personal Health Card number, family history

Pharmacist

a person who works in a pharmacy and fills the prescriptions

Pharmacy where you buy medicine

Photo ID a document with a picture of you that says who you are

Physical check-up

to check the body to see if it is healthy

Physician a doctor

Physiotherapy

treatment for pain and weakness through exercise

Plastic surgery

Surgery to fix or change external (outside) body parts so that they look or function (work) better

P.M. After noon (12:00pm)

Podiatry treating feet problems, medical care for feet, foot doctor

Poison something that can hurt or kill a person; can be something that you eat/drink or that you breathe in

Post-natal services

Help women get with a new baby - information on how, when and what to feed your baby.

Pre-natal services

help pregnant women get before the baby is born

Pregnancy a baby is growing inside you for 9 months

Prescription

a note from a doctor to get special medicine

Prevent to stop something from happening (to stop you from getting sick/ injured)

Problem difficulty; trouble

Proof verifies confirm; show that something is true or not true

Prostate part of a man's reproductive system a walnut-sized gland that men have; located just below the bladder

Psychology

type of medical care for the mind (how you think) and feelings

Pulse the regular beating in the arteries; your heart pumping blood through your body

Purse bag; used to carry money, keys, etc.

Questions enquiry; examine; probe; ask

Radiology/Diagnostic Imaging

X-ray department; where they take pictures of the bones and other parts inside the body

Rash irritation of the skin, causes redness of the skin; skin is itchy and/or red

Reaction your body's response to something you eat or touch; an allergy (for example something that you touch makes you itchy)

Receptionist

You see this person first when you go to a health centre. They answer the phone, schedule appointments, and take your information.

Recorded message/Answering machine

A telephone message you get when no one is there to answer your call; may have information about hours and location

Recovered feeling better after being sick; healed

Recovery getting better after being sick

Reduced-fee

to pay less than regular cost (amount of money)

Referral	a note that your doctor writes so you can see a special doctor
Refill	number of times you can get more medicine from the drugstore without going back to the doctor
Registration	
	sign up; enroll; join
Repeat	to do again; so say again; to go over
Restroom	where people use the toilet; wash their hands
Runny nose	
	unusual amounts of nasal fluid; nose dripping watery; often due to a cold or allergies
Safely	free from risk; carefully
Schedule	all things to be done or all events to occur at or during a time period.
Screening	a medical test, that checks for certain health problems (e.g. Pap smear, mammogram, etc.)
Sedative	medicine that calms you; may cause you to sleep
Seizure	a sudden disorder of the brain that can make your body shake and you can go unconscious.
Sensitive	easy to hurt or damage; sore
Separated	married but not living together
Serious	important; vital; critical
Severe	very bad
Shortness of Breath	
	hard to breath; cannot get enough air
Shoulders	part of the body between neck and arm
Sick	do not feel good and you have a health problem
Side effects	
	reaction; reaction to medicine (a reaction someone might have to medicine. Some side effects are a rash, breathing problems, throwing up or a cough.)
Sign-in	check-in; to let the receptionist know you are there and why
Single	a person who is not married or common law (not married but living together)

Sister a female who has the same parents as you

Smell one of the 5 senses; to perceive through nose

Sneeze/ sneezing

force of air through nose and mouth (with force)

Sore throat pain in the throat

Soreness hurt, pain, ache

So-so okay; all right; fair

Sour type of taste; lemon

Specialist a person who is an expert for a health issue

Sprain muscle injury or tear

Spray liquid medicine that you squirt; mist (e.g. nose spray is inhaled through the nose)

Stairs set of steps that go up or down

Stomach internal body part; where food goes to digest

Stomach ache

pain in your belly/ tummy/ stomach

Stress pressure; worry

Stroke sudden loss of brain function caused when the supply of blood to the brain stops.

Struggling to have difficulty; hard to complete

Suffers to feel pain (in body or mind)

Surgeon doctor who operates on a patient

Surgery/Operation

Doctor cuts you open to remove a sickness or fix a body part that is not working well; you need to be asleep during it

Surname last name

Sweet type of taste; sugar, candy

Swollen/ Swelling

puffed up

Symptoms a sign of sickness or disease; warning

Syrup a thick liquid medication that you drink

Tablets pill; powder pressed into a solid

Taste	one of the 5 senses; perceive through the mouth/tongue (sour, sweet, spicy, etc.)
Teeth	part of the body; found in the mouth; used to chew food
Teething	when a baby's first teeth start growing
Temperature	
	how hot or cold something or someone is; fever
Terrible	very bad; awful; horrible
Thermometer	
	a tool used to measure temperature
Throat	part of the body; in the front of the neck; below the chin
Thumbs	part of the body; first digit on the hands
Tingling	to have a pricking or stinging feeling; feeling pins and needles
Toilet	restroom; bathroom; a place you go to empty your waste (pee or poop) and flush with water after
Tomorrow	the day after today
Toothache	pain in your tooth
Treatment	a way to make you better when you are sick or hurt; medicine; therapy
Trouble breathing	
	cannot breathe well, short, quick breaths or long, hard breath
Tuberculosis (TB)	
	Infectious disease that affects your lungs and other parts of the body
Ultrasound	a type of radiology (x-ray); used to see inside the organs inside the body
Unconscious	
	When someone is not awake but not asleep and will not wake up; non-responsive; can be a life threatening problem
Uncontrolled	
	not under control
Underweight	
	weighing less than you should (less than what is healthy)
Urgent	something that needs to be done right away

Urgent care centre

A place where you go if you are sick or injured and need same day treatment

Urology type of health care to help people who have problems with their urinary tract (bladder, peeing)

Uterus an internal part of a woman's body where the baby grows; womb

Utility Bill a statement (letter) sent to you at your home for water, gas or electricity

Vaccination

medicine given through a needle; helps prevents a disease (sickness); needle; poke with a needle

Victim a person who suffers because of what someone has done to them or happened to them

Vision to see

Visit to go and see

Visiting hours

the time when you can go and see someone in a hospital

Vitamins tiny things in food that the body needs to be healthy

Vomit to throw-up from the stomach

Wait to stay in one place;

Waiting room

where you wait to see the doctor

Walk-in clinic

where you go to see a doctor; you do not need an appointment

Wallet something in which you carry your papers and money

Warning sign of trouble; alert

Weigh to measure how heavy something is

Weight how much something weighs

Wheezing breathe with a whistling sound. It is a sign that a person is having trouble breathing.

Widowed a person whose husband or wife has died (passed away)

Work out exercise; to do physical activity (i.e. run, walk, play soccer, etc.)

Wrists part of the body; between the hand and the forearm

X-ray A picture of the bones and other parts inside the body

Yellow Pages

a book where you can look up telephone numbers

9. REFERENCES

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