Applied Research Collaboration Kent, Surrey and Sussex





Co-producing an intervention toolkit with and for women of Black African and Black Caribbean descent to promote early presentation with breast cancer symptoms



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Public Summary:

There is scientific evidence that women of Black African and Black Caribbean descent in the UK are more likely to die than White women after being diagnosed with breast cancer. This project aimed to develop a culturally appropriate intervention toolkit to raise awareness of breast cancer among Black women in the UK.

Fourteen women from Kent, Surrey, Sussex, and London participated in four coproduction sessions online where they discussed the content and format of the intervention toolkit: 4 women with a personal history of breast cancer, 5, without, and 5 healthcare professionals (4 midwives and 1 public health apprentice). All participants were of Black African or Caribbean descent, except for one midwife who was of Asian descent. One Patient and Public Involvement (PPI) representative of mixed White and Black African descent, with personal experience of breast cancer, facilitated the sessions.

The participants were consulted on the potential content of a breast cancer awareness intervention that could be delivered in ante or post-natal settings, where women are most likely to talk and breast changes.

The participants suggested that the intervention should include a video of a Black woman demonstrating how to check own breasts, and advice on how to navigate the healthcare system to seek medical help. Antenatal classes, post-partum checks at 6 weeks, and routine health visitor checks were identified as opportunities to provide breast health/breast cancer education. It was also recognised that midwives and health visitors might need additional training to deliver breast health education.

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Public and Community Involvement:

A breast cancer survivor of mixed White and Black African heritage was involved as PCI (Public and Community Involvement) representative for the whole duration of the project. She advised on the draft project application, the ethics documents, and the planning of each co-production session. She participated in and helped facilitate all the co-production sessions and provided feedback on the interpretation of the findings from each co-production session. The involvement of the PPI representative was in line with the plans outlined in the application. The PPI representative will continue to collaborate with the research team in relation to the publication of the project findings, will advise on the dissemination plans, and will contribute to the drafting of bids for future funding.

Dissemination:

A presentation is planned for the one-day conference "Breast Cancer Research Among Black Women", organised the Manchester Cancer Research Centre in Manchester on 12 March 2024. Further presentations are envisaged for the one-day conference "Let's talk about Black women and Breast Cancer" to be held in London, October 2024, and the British Psychological Society Division of Health Psychology Annual Conference, Stirling, Scotland, 6-7 June 2024.

Impact and Implementation:

Impact activities are likely to take place at a later date when the project findings have been finalised and published.

Publications (insert any links to published papers here)

One manuscript is in progress. This manuscript summarizes the key findings of the project and details the approach of coproduction that was used in the project.

What next?

Further funding is needed to refine the intervention and test its acceptability by healthcare professionals and pregnant and post-partum women, and the feasibility of delivering the intervention in ante- or post-natal settings. Potential funders have been identified such as the National Institute for Health and Care Research (NIHR), the Research for Patient Benefit funding stream.

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