



Asian American Research Center on Health

Abstract

Title: [Feasibility of a Multicomponent Breast Health Education Intervention for Vietnamese American Immigrant Women.](#)

Authors: [Nguyen-Truong CKY¹](#), [Pedhiwala N²](#), [Nguyen V³](#), [Le C³](#), [Vy Le T⁴](#), [Lau C³](#), [Lee J⁵](#), [Lee-Lin F²](#).

Author Information:

1. Washington State University.
2. Oregon Health and Science University.
3. Asian Health and Service Center.
4. Albina Head Start.
5. Portland State University.

Publication: [Oncol Nurs Forum.](#) 2017 Sep 1;44(5):615-625. doi: 10.1188/17.ONF.615-625.

Abstract:

PURPOSE/OBJECTIVES:

To determine the feasibility and acceptability of an intervention with targeted cultural and health belief messages to increase rates of mammography among Vietnamese American (VA) immigrant women.

DESIGN:

One-group, pre-/post-test, pilot, quasiexperimental design.

SETTING:

Portland, Oregon, metropolitan area.

SAMPLE:

40 VA immigrant women aged 50 years or older.

METHODS:

Participants who had not had a mammogram within the past 12 months were recruited. The intervention consisted of one interactive group teaching session, followed by individual counseling delivered about 10 days later to overcome barriers to screening. Participants completed a baseline survey prior to the group teaching and again at 12 weeks after the session.

MAIN RESEARCH VARIABLES:

The intervention, guided by the Transtheoretical Model of Change and the Health Belief Model, involved movement in stage of change based on women's readiness, as well as perceived susceptibility, perceived benefits, perceived common barriers, and perceived cultural barriers. Mammogram completion and knowledge of breast cancer and mammography were examined.

FINDINGS:

The recruitment response rate was 58%. Knowledge about breast cancer, breast cancer susceptibility, and the benefits of mammography as related to breast cancer significantly increased following the intervention.

CONCLUSIONS:

Acceptability of the targeted program, good feasibility, and very low attrition was achieved.

IMPLICATIONS FOR NURSING:

This intervention can be adapted for other populations, including other Asian groups, and other cancer screenings.