AD_____

Award Number: DAMD17-03-1-0676

TITLE: Increasing Adherence to Follow-Up of Breast Abnormalities in Low-Income Korean American Women: A Randomized Controlled Trial

PRINCIPAL INVESTIGATOR: Annette E. Maxwell, M.D., Ph.D.

CONTRACTING ORGANIZATION: University of California at Los Angeles Los Angeles, CA 90024

REPORT DATE: September 2005

TYPE OF REPORT: Annual

PREPARED FOR: U.S. Army Medical Research and Materiel Command Fort Detrick, Maryland 21702-5012

DISTRIBUTION STATEMENT: Approved for Public Release; Distribution Unlimited

The views, opinions and/or findings contained in this report are those of the author(s) and should not be construed as an official Department of the Army position, policy or decision unless so designated by other documentation.

20060315 058

Predict and provide states of the second provide of states of provide states of sta	F	REPORT DOC	UMENTATIO	N PAGE		Form Approved OMB No. 0704-0188
Second and the second and any expension of any present of any penalty for large barrier with a caleboard memory in a calebo	data needed, and completing	and reviewing this collection of i	nformation. Send comments re-	garding this burden estimate or an	y other aspect of this of	collection of information, including suggestions for reducing
1. REPORT DATE (02-MR/YYY) 2. REPORT TYPE 4. THE AND SUBTILE 5. ONTEX OF 100 4. THE AND SUBTILE 6. Annual 5. CONTEXCT WIMBER 5.	4302. Respondents should be	e aware that notwithstanding an	v other provision of law, no pers	on shall be subject to any penalty		
4. TTLE AND SUBTITLE 5CONTRACT NUMBER Increasing Adherence to Follow-Up of Breast Abnormalities in Low-Income 5CONTRACT NUMBER Korean American Women: A Randomized Controlled Trial 5CONTRACT NUMBER D.ADD17-03-1-0676 5PROGRAM ELEMENT NUMBER S. AUTHOR(S) 5FROGRAM ELEMENT NUMBER Annetie E. Maxwell, M.D., Ph.D. 5FASK NUMBER E-mail: amaxwell@ucle edu 5FASK NUMBER T. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) 8PERFORMING ORGANIZATION REPORT University of California at Los Angeles 8PERFORMING ORGANIZATION REPORT Los Angeles, CA 90024 9PERFORMING ORGANIZATION REPORT S. SPONSORIMONTOR'S AGENCY NAME(S) AND ADDRESS(ES) 10. SPONSOR/MONITOR'S ACRONYM(S) 12. SAMIY Medical Research and Materiel Command 11. SPONSOR/MONITOR'S REPORT Ford Detrick, Maryland 21702-5012 11. SPONSOR/MONITOR'S REPORT 13. SUPPLEMENTARY NOTES 11. SPONSOR/MONITOR'S REPORT 14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who have missed therif first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal marmorginas and with KA women who have beer referref tof follow-up appointment (at-risk women).	1. REPORT DATE (DI	D-MM-YYYY)	2. REPORT TYPE	· · · · · · · · · · · · · · · · · · ·		
Increasing Adherence to Follow-Up of Breast Abnormalities in Low-Income Korean American Women: A Randomized Controlled Trial 56. GRANT NUMBER DAMD17-03-1-0676 56. GRANT NUMBER DAMD17-03-1-0676 56. GRANT NUMBER Annetic E. Maxwell, M.D., Ph.D. 56. TASK NUMBER E-mail: amaxwell@ucla edu 7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) University of California at Los Angeles Los Angeles, CA 90024 5. SPONSORIMO INGRGANIZATION REPORT NUMBER 5. SPONSORIMONTOR'S AGRONYM(6) 10. SPONSORIMONTOR'S AGRONYM(6) 11. SPONSORIMONTOR'S AGRONYM(6) 12. DISTRIBUTION / AVAILABILITY STATEMENT Approved for Public Release; Distribution Unlimited 13. SUPPLEMENTARY NOTES 14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve (KA) women who require follow-up diagnostics after volume breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve (KA) women who have been referred for follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve (KA) women who have been referred to follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve (KA) women who have the arread to frain first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers and case managers. Half Findings: We have diffied a number of barriers tack A women who have designading an intervention that the appen available resources when appropriate, and serving as an advocate in the community to raise awareness and adherence.			Annual		1	Sep 2004 - 31 Aug 2005
Korean American Women: A Randomized Controlled Trial b. GRATI VINIBER DAMD17-031-0676 Sc. PRORAM ELEMENT NUMBER S. AUTHOR(S) Annette E. Maxwell, M.D., Ph.D. S. AVENDRES S. AVENDRES<			f Breast Abnormali	ties in Low-Income	54	CONTRACT NUMBER
E. AUTHOR(5) Sc. PROGRAM ELEMENT NUMBER Annette E. Maxwell, M.D., Ph.D. 5. ASK NUMBER E-mail: amaxwell@ucla.edu 5. TASK NUMBER T. PERFORMING ORGANIZATION NAME(5) AND ADDRESS(ES) 9. PERFORMING ORGANIZATION NAME(5) AND ADDRESS(ES) University of California at Los Angeles 9. PERFORMING ORGANIZATION NAME(5) AND ADDRESS(ES) Los Angeles, CA. 90024 9. PERFORMING ORGANIZATION REPORT NUMBER 10. SPONSOR/MONTOR'S ACRONYM(5) 1. SPONSORING / MONITORING AGENCY NAME(5) AND ADDRESS(ES) 10. SPONSOR/MONITOR'S ACRONYM(5) 1. SPONSOR/MONTOR'S ARCONYM(5) 11. SPONSOR/MONITOR'S ACRONYM(5) 1. SPONSOR/MONITOR'S ACRONYM(5) 11. SPONSOR/MONITOR'S REPORT 1. SPONSOR/MONTOR'S REPORT NUMBER(5) 1. SUPPLEMENTARY NOTES 11. SPONSOR/MONITOR'S REPORT 1. SUPPLEMENTARY NOTES 11. ABSTRACT 7. Per purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics. Whe are coducted exploratory on edo-one interviews with leatin care providers who have designed an intervention that will utilize a per navigator model and plan to test the intervention to assist Korean American (KA) women who require follow-up recodure exploratory on the set on the resources on the part of providers who made actifies a number of barriers that KA women who need a clouw-up recodure exploratory on under of topowide giagnostis. W					5b	. GRANT NUMBER
S. AUTHOR(S) Annette E. Maxwell, M.D., Ph.D. Sd. PROJECT NUMBER Se. TASK NUMBER E-mail: amaxwell@ucia.edu Sv. TASK NUMBER T. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) B. PERFORMING ORGANIZATION REPORT NUMBER University of California at Los Angeles Los Angeles, CA 90024 B. PERFORMING ORGANIZATION REPORT NUMBER S. SPONSORING / MONITORING AGENCY NAME(S) AND ADDRESS(ES) I. SPONSOR/MONITOR'S ACRONYM(S) U.S. Army Medical Research and Materiel Command Fort Detrick, Maryland 21702-5012 II. SPONSOR/MONITOR'S REPORT NUMBER(S) 12. DISTRIBUTION / AVAILABILITY STATEMENT Approved for Public Release; Distribution Unlimited II. SPONSOR/MONITOR'S REPORT NUMBER(S) 13. SUPPLEMENTARY NOTES II. SPONSOR/MONITOR'S MORE ON TAXES IN the computed exploratory one-to-one interviews with health care providers who erequire follow-up diagnostics. When we conducted exploratory one-to-one interviews with health care providers who serve CA women with abormal mammograms and with KA women who have been referred for follow-up agointment (at-risk women). Soppe: We have clearlifted a number of barriers bit KA women who need actifies the intervention in a randomized trial among KA at risk women. Mail Utilize a peer navigator model and plan to less the intervention in a randomized trial among KA at risk women. Mail Utilize a peer navigator model and plan to less the intervention in a randomized trial among KA at risk women. Mail Utilize a peer navigator model and plan to less the intervento in a randomized trial among KA at risk w					D,	AMD17-03-1-0676
Annette E. Maxwell, M.D., Ph.D. E-mail: amaxwell@ucla.edu T.PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) U.S. Army Medical Research and Materiel Command Fort Detrick, Maryland 21702-5012 S.SPONSORING / MONITORING AGENCY NAME(S) AND ADDRESS(ES) U.S. Army Medical Research and Materiel Command Fort Detrick, Maryland 21702-5012 11. SPONSORING / MONITORING AGENCY NAME(S) AND ADDRESS(ES) U.S. Army Medical Research and Materiel Command Fort Detrick, Maryland 21702-5012 12. DISTRIBUTION / AVAILABILITY STATEMENT Approved for Public Release; Distribution Unlimited 13. SUPPLEMENTARY NOTES 14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-0-one intervention to assist Korean American (KA) women who require follow-up mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that Major Findings: We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of understanding of the importance of follow-up designators and case managers, language barrier, lack of transportation, lack of understanding of the importance of follow-up after of getting lexibar should assist women by providing transportation and translation, providing support by answering guestions and directing them to other available resources when appropriate, and serving as an advocate in the community to raise awareness and adherence. 16. SEURITY CLASSIFICATION OF: B. REPORT U.U. B. REPORT B. REPORT					5c	PROGRAM ELEMENT NUMBER
E-mail: amaxwell@ucla.adu 56. TASK NUMBER 7. PERFORMING ORGANIZATION NAME(\$) AND ADDRESS(E\$) 8. PERFORMING ORGANIZATION REPORT University of California at Los Angeles 8. PERFORMING ORGANIZATION REPORT Los Angeles, CA 90024 10. SPONSORIMONTOR'S ACENCY NAME(\$) AND ADDRESS(E\$) U.S. Army Medical Research and Materiel Command 10. SPONSORMONITOR'S ACENOY NAME(\$) Fort Detrick, Maryland 21702-5012 11. SPONSORMONITOR'S REPORT 12. DISTRIBUTION / AVAILABILITY STATEMENT Approved for Public Release; Distribution Unlimited 13. SUPPLEMENTARY NOTES 14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-lisk women.) Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal marmorgames and with KA women who have been referred for follow-up diagnostics. We have designed an intervention in at manomized trial among KA at fisk women. Major Findings: We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of the and resources on the part of providers should assit women by providing transportation and translation, providing support by answering questions and directing them to other available resources when appropriate, and translation, providing support by answering questions and directing them to other available resources when app					5d	. PROJECT NUMBER
E-mail: amaxwell@ucla.edu 8. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) 8. PERFORMING ORGANIZATION REPORT University of California at Los Angeles 9. SPONSORING / MONITORING AGENCY NAME(S) AND ADDRESS(ES) 10. SPONSOR/MONITOR'S ACRONYM(S) S. SPONSORING / MONITORING AGENCY NAME(S) AND ADDRESS(ES) 10. SPONSOR/MONITOR'S ACRONYM(S) U.S. Army Medical Research and Materiel Command 10. SPONSOR/MONITOR'S ACRONYM(S) Fort Detrick, Maryland 21702-5012 11. SPONSOR/MONITOR'S REPORT 12. DISTRIBUTION / AVAILABILITY STATEMENT Approved for Public Release; Distribution Unlimited 13. SUPPLEMENTARY NOTES 14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope. We have conducted exploratory one-to-ne interviews with health care providers who serve KA women with abnormal mammograms and with K women who have been referred for follow-up appointment (at-risk women). Scope. We have conducted exploratory one-to-ne interviews with health care providers who serve KA women with abnormal trait will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women. Rajor Findings: We have identified a number of barrises that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, la		, w.e., i n.e.			5e	. TASK NUMBER
7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) 8. PERFORMING ORGANIZATION REPORT University of California at Los Angeles 90024 9. SPONSORING / MONITORING AGENCY NAME(S) AND ADDRESS(ES) 10. SPONSOR/MONITOR'S ACRONYM(S) U.S. Army Medical Research and Materiel Command 11. SPONSOR/MONITOR'S ACRONYM(S) Fort Detrick, Maryland 21702-5012 11. SPONSOR/MONITOR'S ACRONYM(S) 12. DISTRIBUTION / AVAILABILITY STATEMENT 11. SPONSOR/MONITOR'S REPORT Approved for Public Release; Distribution Unlimited 13. SUPPLEMENTARY NOTES 14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-ne interviews with health care providers who serve KA women with abnormal marmograms and with KA women who have been referred for follow-up gapointment (at-risk women). Scope: We have conducted exploratory one-to-ne interviews with health care providers who serve KA women with abnormal marmograms and with KA women who have been referred for follow-up anogram designed an intervention that Major Finding: We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, lack of time and resources on the part of providers and case managers, language barrier, lack of time angestrase avariagets should assist women by					5f.	WORK UNIT NUMBER
University of California at Los Angeles NUMBER Los Angeles, CA 90024 10. SPONSORING / MONITORING AGENCY NAME(S) AND ADDRESS(ES) 10. SPONSOR/MONITOR'S ACRONYM(S) 9. SPONSORING / MONITORING AGENCY NAME(S) AND ADDRESS(ES) 10. SPONSOR/MONITOR'S ACRONYM(S) 10. SPONSOR/MONITOR'S ACRONYM(S) 11. SPONSOR/MONITOR'S REPORT 11. SPONSOR/MONITOR'S REPORT NUMBER(S) 12. DISTRIBUTION / AVAILABILITY STATEMENT Approved for Public Release; Distribution Unlimited 13. SUPPLEMENTARY NOTES 14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA wome who have been referred for follow-up agpointment (at-risk women.) Scope: We have conducted and plan to test the intervention in a randomized trial among KA at risk women. Major Findings: We have identified a number of barriters that KA women who need a follow-up, and fear of getting lost and being heipless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation, act of understanding of the importance of follow-up, and fear of getting lost and being heipless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; p						
Los Angeles, CA 90024 10. SPONSORING / MONITORING AGENCY NAME(S) AND ADDRESS(ES) 10. SPONSOR/MONITOR'S ACRONYM(S) U.S. Army Medical Research and Materiel Command Fort Detrick, Maryland 21702-5012 11. SPONSOR/MONITOR'S ACRONYM(S) 12. DISTRIBUTION / AVAILABILITY STATEMENT Approved for Public Release; Distribution Unlimited 11. SPONSOR/MONITOR'S REPORT NUMBER(S) 13. SUPPLEMENTARY NOTES 13. SUPPLEMENTARY NOTES 14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up pointment (41-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women. Major Findings: We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, lack of transportation, lack of understanding of the importance of follow-up ad das das due being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assit women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence. 15. SUBJECT TERNS A Cherence to follow-up of breast abnormalities, low-income Kor	7. PERFORMING OR	GANIZATION NAME(S)	AND ADDRESS(ES)			
9. SPONSORING / MONITORING AGENCY NAME(S) AND ADDRESS(ES) 10. SPONSOR/MONITOR'S ACRONYM(S) 1.S. Army Medical Research and Materiel Command 11. SPONSOR/MONITOR'S ACRONYM(S) Fort Detrick, Maryland 21702-5012 11. SPONSOR/MONITOR'S REPORT 1.1. SPONSOR/MONITOR'S REPORT 11. SPONSOR/MONITOR'S REPORT NUMBER(S) 11. SPONSOR/MONITOR'S REPORT 12. DISTRIBUTION / AVAILABILITY STATEMENT Approved for Public Release; Distribution Unlimited 13. SUPPLEMENTARY NOTES 14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women. Major Findings: We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, including lack of understanding of the importance of follow-up and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; jroviding supoport by answering questions and directing			s			
U.S. Army Medical Research and Materiel Command Fort Detrick, Maryland 21702-5012 11. SPONSOR/MONITOR'S REPORT NUMBER(S) 12. DISTRIBUTION / AVAILABILITY STATEMENT Approved for Public Release; Distribution Unlimited 13. SUPPLEMENTARY NOTES 13. SUPPLEMENTARY NOTES 14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women. Major Findings: We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managed barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assit women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence. 15. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention 17. LIMITATION OF ABSTRACT 18. NUMBER (Include area code) 19. NAME OF RESPONSIBLE PERSON <td>Los Angeles, CA</td> <td>90024</td> <td></td> <td></td> <td></td> <td></td>	Los Angeles, CA	90024				
U.S. Army Medical Research and Materiel Command Fort Detrick, Maryland 21702-5012 11. SPONSOR/MONITOR'S REPORT NUMBER(S) 12. DISTRIBUTION / AVAILABILITY STATEMENT Approved for Public Release; Distribution Unlimited 13. SUPPLEMENTARY NOTES 13. SUPPLEMENTARY NOTES 14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women. Major Findings: We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managed barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assit women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence. 15. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention 17. LIMITATION OF ABSTRACT 18. NUMBER (Include area code) 19. NAME OF RESPONSIBLE PERSON <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
U.S. Army Medical Research and Materiel Command Fort Detrick, Maryland 21702-5012 11. SPONSOR/MONITOR'S REPORT NUMBER(S) 12. DISTRIBUTION / AVAILABILITY STATEMENT Approved for Public Release; Distribution Unlimited 13. SUPPLEMENTARY NOTES 13. SUPPLEMENTARY NOTES 14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women. Major Findings: We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managed barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assit women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence. 15. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention 17. LIMITATION OF ABSTRACT 18. NUMBER (Include area code) 19. NAME OF RESPONSIBLE PERSON <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
Fort Detrick, Maryland 21702-5012 11. SPONSOR/MONITOR'S REPORT NUMBER(S) 12. DISTRIBUTION / AVAILABILITY STATEMENT Approved for Public Release; Distribution Unlimited 13. SUPPLEMENTARY NOTES 14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women. Major Findings: We have identified a number of barriers that KA women who need a follow-up poolding understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and transportation, providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence. 15. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling interven				SS(ES)	10	SPONSOR/MONITOR'S ACRONYM(S)
11. SPONSOR/MONITOR'S REPORT NUMBER(S) 12. DISTRIBUTION / AVAILABILITY STATEMENT Approved for Public Release; Distribution Unlimited 13. SUPPLEMENTARY NOTES 14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that Will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women. Major Findings: We have identified a number of barriers that KA wome who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence. 15. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention 17. LIMITATION OF ABSTRACT 18. NUMBER OF PAGS 19. NAME OF RESPONSIBLE PERSON 19. TELEPHONE NUMBER (include area code)			teriel Command			
NUMBER(S) 11. DISTRIBUTION / AVAILABILITY STATEMENT Approved for Public Release; Distribution Unlimited 13. SUPPLEMENTARY NOTES 14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up adposites. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women. Major Findings: We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence.	Fort Detrick, Mary	and 21702-5012				
Approved for Public Release; Distribution Unlimited 13. SUPPLEMENTARY NOTES 14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women. Major Findings: We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence. 16. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention 16. SECURITY CLASSIFICATION OF: 17. LIMITATION OF ABSTRACT 18. NUMBER of RESPONSIBLE PERSON 16. SECURITY CLASSIFICATION OF: U U 19.					11	
13. SUPPLEMENTARY NOTES 14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women. Major Findings: We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence. 15. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention 16. SECURITY CLASSIFICATION OF: 17. LIMITATION OF ABSTRACT 18. NUMBER of RESPONSIBLE PERSON of ABSTRACT 19b. TELEPHONE NUMBER (include area code) 9						
14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women. Major Findings: We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence. 16. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention 16. SECURITY CLASSIFICATION OF: 17. LIMITATION OF ABSTRACT U U 9	Approved for Publ	ic Release; Distribι	tion Unlimited			
14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women. Major Findings: We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence. 16. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention 16. SECURITY CLASSIFICATION OF: 17. LIMITATION OF ABSTRACT U U 9						
14. ABSTRACT Purpose: The purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women). Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women. Major Findings: We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence. 16. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention 16. SECURITY CLASSIFICATION OF: 17. LIMITATION OF ABSTRACT U U 9						
Purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women).Scope:We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women.Major Findings:We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence.16. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention16. SECURITY CLASSIFICATION OF:17. LIMITATION U18. NUMBER OF PAGES19a. NAME OF RESPONSIBLE PERSON16. REPORT UUU9	13. SUPPLEMENTAR	Y NOTES				
Purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women).Scope:We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women.Major Findings:We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence.16. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention16. SECURITY CLASSIFICATION OF:17. LIMITATION U18. NUMBER OF PAGES19a. NAME OF RESPONSIBLE PERSON16. REPORT UUU9						
Purpose of this study is to design an intervention to assist Korean American (KA) women who require follow-up diagnostics after routine breast cancer screening who have missed their first follow-up appointment (at-risk women).Scope:We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women.Major Findings:We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence.16. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention16. SECURITY CLASSIFICATION OF:17. LIMITATION U18. NUMBER OF PAGES19a. NAME OF RESPONSIBLE PERSON16. REPORT Ub. ABSTRACT UC. THIS PAGE U19b. TELEPHONE NUMBER (include area code)						
Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women.Major Findings:We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence.18. NUMBER OF PAGES19a. NAME OF RESPONSIBLE PERSON16. SECURITY CLASSIFICATION OF:UU919b. TELEPHONE NUMBER (include area code)						
Scope: We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women.Major Findings:We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence.18. NUMBER OF PAGES19a. NAME OF RESPONSIBLE PERSON16. SECURITY CLASSIFICATION OF:UU919b. TELEPHONE NUMBER (include area code)	Purpose: The pu	rpose of this study	is to design an inter	rvention to assist Ko	rean America	n (KA) women who require follow-up
Scope. We have conducted exploratory one-to-one interviews with health care providers who serve KA women with abnormal mammograms and with KA women who have been referred for follow-up diagnostics. We have designed an intervention that will utilize a peer navigator model and plan to test the intervention in a randomized trial among KA at risk women.Major Findings: Major Findings: We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence.18. NUMBER OF ABSTRACT19a. NAME OF RESPONSIBLE PERSON16. SECURITY CLASSIFICATION OF:UU919b. TELEPHONE NUMBER (include area code)	I ulayinostics alter i	ouune preast cance	er screening who ha	ive missed their first	follow_up and	ointment (st_rick womon)
Wajor Findings:We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence.15. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention16. SECURITY CLASSIFICATION OF:17. LIMITATION U18. NUMBER OF PAGES19a. NAME OF RESPONSIBLE PERSONa. REPORT Ub. ABSTRACT Uc. THIS PAGE UUU919b. TELEPHONE NUMBER (include area code)	Gube we have	conducted explora	IOTV ONE-TO-ONE INTE	rviews with health ca	are nrovidere :	who some KA women with obnormal
Image: We have identified a number of barriers that KA women who need a follow-up procedure encounter, including lack of provider interest, lack of time and resources on the part of providers and case managers, language barrier, lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence.15. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention16. SECURITY CLASSIFICATION OF:17. LIMITATION U18. NUMBER OF PAGESUUUUUUU9	will utilize a peer r	avigator model and	d plan to test the int	red for follow-up diag	gnostics. We	have designed an intervention that
lack of transportation, lack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence.15. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention16. SECURITY CLASSIFICATION OF:17. LIMITATION OF ABSTRACT18. NUMBER OF PAGES19a. NAME OF RESPONSIBLE PERSONa. REPORT UUU92919b. TELEPHONE NUMBER (include area code)	major rinuings.	we have identified	a number of barrier	's that KA women wh	no need a follo	W-Un procedure encounter
Tack of understanding of the importance of follow-up, and fear of getting lost and being helpless at an unfamiliar and large health care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence.15. SUBJECT TERMSAdherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention16. SECURITY CLASSIFICATION OF:17. LIMITATION OF ABSTRACT18. NUMBER OF PAGES19a. NAME OF RESPONSIBLE PERSON OF PAGESa. REPORT UUUU919b. TELEPHONE NUMBER (include area code)	I including lack of p	rovider interest, lac	k of time and resou	rces on the part of p	roviders and a	ase managers language herrier
translation large realth care facility. We found that the peer navigator should assist women by providing transportation and translation; providing support by answering questions and directing them to other available resources when appropriate; and serving as an advocate in the community to raise awareness and adherence.15. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention16. SECURITY CLASSIFICATION OF:17. LIMITATION OF ABSTRACT18. NUMBER OF PAGES19a. NAME OF RESPONSIBLE PERSON OF PAGESa. REPORT UUU919b. TELEPHONE NUMBER (include area code)	I Iack OF transportat	ion, lack of underst	anging of the impor	tance of follow-up a	nd fear of get	ling lost and being beloless at an
Serving as an advocate in the community to raise awareness and adherence. 15. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention 16. SECURITY CLASSIFICATION OF: 16. SECURITY CLASSIFICATION OF: 17. LIMITATION OF ABSTRACT 18. NUMBER OF RESPONSIBLE PERSON OF ABSTRACT 16. ABSTRACT C. THIS PAGE 19b. TELEPHONE NUMBER (include area code) U U 9		le rieaith care facili	IV. VVE found that the	le neer navigator sh	ould acciet wa	man by providing transportation and
15. SUBJECT TERMS Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention 16. SECURITY CLASSIFICATION OF: 17. LIMITATION OF ABSTRACT 18. NUMBER OF PAGES 19a. NAME OF RESPONSIBLE PERSON a. REPORT b. ABSTRACT c. THIS PAGE U 19b. TELEPHONE NUMBER (include area code) U U 9 19b. TELEPHONE NUMBER (include area code)	serving as an adv	ng support by answ scate in the commu	vering questions an	d directing them to o	ther available	resources when appropriate; and
Adherence to follow-up of breast abnormalities, low-income Korean women, randomized controlled trial, peer counseling intervention 16. SECURITY CLASSIFICATION OF: 17. LIMITATION OF ABSTRACT 18. NUMBER OF PAGES a. REPORT b. ABSTRACT c. THIS PAGE 19a. NAME OF RESPONSIBLE PERSON U U U 9 19b. TELEPHONE NUMBER (include area code)			wy to raise awaler	icos anu aunerence.		
intervention 16. SECURITY CLASSIFICATION OF: 17. LIMITATION OF ABSTRACT 18. NUMBER OF PAGES 19a. NAME OF RESPONSIBLE PERSON a. REPORT b. ABSTRACT c. THIS PAGE U 19b. TELEPHONE NUMBER (include area code) U U U 9 19b. TELEPHONE NUMBER (include area code)						
16. SECURITY CLASSIFICATION OF: 17. LIMITATION OF ABSTRACT 18. NUMBER OF PAGES 19a. NAME OF RESPONSIBLE PERSON a. REPORT b. ABSTRACT c. THIS PAGE U 19b. TELEPHONE NUMBER (include area code) U U 9		w-up of breast abn	ormalities, low-inco	me Korean women,	randomized o	ontrollea trial, peer counseling
a. REPORT b. ABSTRACT c. THIS PAGE U U U U 9		SIFICATION OF:				19a. NAME OF RESPONSIBLE PERSON
U U U UU 9 ^{code)}					UF FAGES	19b TELEPHONE NUMBER Vinclude and
	-			E11E	a	

.

Table of Contents

____

Cover1
SF 2982
Table of Contents3
Introduction4
Body4
Key Research Accomplishments5
Reportable Outcomes5
Conclusions6
References6
Appendices6

Award: DAMD17-03-1-0676 Author: Annette E. Maxwell, Dr.P.H.

Introduction:

The purpose of this study is to design an intervention to assist Korean American women who have been identified with a potential breast abnormality through the Breast Cancer Early Detection Program (BCEDP) and who have missed their first follow-up appointment (at-risk women). Intervention activities will include reminder phone calls or home visits by a trained peer counselor to explain the importance of follow-up procedures, emotional support, help with transportation to follow-up appointments, translations, organizing care for children or grandchildren during medical appointments, and other assistance to overcome barriers to follow-up identified during the initial phase of the study. We will collect extensive process measures including number and type of intervention activities requested and delivered in order to estimate the feasibility for institutionalizing intervention activities. We will conduct a follow-up survey to evaluate the effectiveness of the intervention in increasing adherence to follow-up procedures.

Body:

The following activities listed in the Statement of Work have been completed:

Task 1:

As part of the exploratory phase of the study, we had planned to review 30 charts in order to learn more about women who do and do not undergo diagnostic follow-up procedures in a timely manner. As explained in the previous progress report, we have dropped this plan. This change to the original Statement of Work was approved by the Grants Officer.

- a. We developed discussion guides for telephone interviews with health care providers and with Korean women for the exploratory phase of the study (Phase I). These discussion guides have been attached in the previous report.
- b. We have identified 15 women who received referral for follow-up procedures in the past 12 months and conducted telephone interviews with these women.
- c. We have identified 3 health care professionals through participating sites and conducted semi-structured telephone interviews.
- d. We have drafted the following intervention components and have translated them into Korean language:
 - 1. HIPAA Research Authorization
 - 2. Initial assessment and intervention form
 - 3. 6 month telephone follow-up survey
 - 4. Verbal Consent and Recruitment Script for Participation in the INTERVENTION PROTOCOL and Follow-up Survey with Korean American women (Phase II: Prospective Arm)

- 5. Verbal Re-Consent Script for Participation in the Follow-up Survey with Korean-American women (Phase II: Prospective Arm)
- 6. Verbal Consent and Recruitment Script for Participation in the Telephone Survey with Korean American women in the USUAL CARE GROUP (Phase II: Retrospective Arm)
- 7. Chart review patient letter

Above items and the protocol for the next phase of the study have been submitted to the UCLA IRB and DOD HSRRB and have been approved.

- g. We have established procedures to identify women who missed follow-up appointments on a daily basis.
- h. We have established randomization procedure.

Task 5:

- a. We have transcribed and translated audiotapes from semi-structured interviews in Phase I.
- b. We have analyzed data from Task 1. These findings have been summarized in Table A and have been attached.

Key Research Accomplishments:

Since our last report, we have completed the exploratory phase (Phase I) of our study. This included one-to-one in-depth interviews with 3 health care providers who serve Korean American women with abnormal mammograms and with 15 Korean American women who have been referred for follow-up diagnostics to examine barriers and predictors of adherence to follow-up of breast abnormalities and to identify culturally and linguistically sensitive methods of interventions to increase rate of adherence among Korean American women. Using interview findings, we have designed an intervention that will utilize a peer navigator model and plan to test the intervention in our next phase (Phase II), in a randomized trial among Korean American at-risk women who have missed their first appointment for a follow-up test after a routine annual breast cancer screening visit. We have submitted protocol and study materials for this phase to both the DOD and UCLA IRB and have received full approval from both institutions. In the next few weeks, we will hire peer navigators and train them before we implement our intervention in our 3 study sites, KHEIR, Koryo Health Foundation, and Moon Kim Clinic.

Reportable Outcomes:

Health care providers stated that Korean American women who need follow-up procedure(s) face language barriers, lack transportation, do not understand the importance of follow-up and the fact that procedures are paid through the Cancer Detection Program, and have the fear of getting lost and being helpless at an unfamiliar and large health care facility. Both providers and Korean American women stated that a peer navigator could help women in overcoming these barriers to diagnostic follow-up and also serve as an advocate in the community to raise awareness and adherence. We will collect extensive process measures including number and type of intervention activities requested and delivered in order to estimate the feasibility for institutionalizing intervention activities. We will conduct chart reviews and a follow-up survey to evaluate the effectiveness of the intervention in increasing adherence to follow-up procedures.

We have attached a summary of findings from the exploratory phase of our study in the appendix (Table A). We have also presented our findings at the Conference of Hope Conference in Philadelphia in June 2005.

Conclusions:

Findings from the exploratory phase suggest that a peer navigator model will greatly facilitate adherence to follow-up of breast abnormalities by Korean American at-risk women who have missed their first appointment for a follow-up test after a routine annual breast cancer screening visit. We have therefore designed an intervention that will utilize a peer navigator model and plan to test this intervention in our next phase.

References:

N/A

Appendices:

- 1. Original Statement of Work
- 2. Summary of Phase I exploratory interview findings

Statement of Work

Task 1:Setup and Formative Research (Months 01-06)

- a. Develop chart review forms; develop discussion guides for semi-structured interviews (English and Korean, using standard translation procedures including back translations)
- b. Identify women who received a referral for follow-up procedures in the past 12 months from BCEDP logs. Conduct chart reviews (N=30) and telephone interviews (N=20) with these women (Angela Jo, Kim Young)
- c. Identify 5 health care professionals through participating sites and conduct semi-structured interviews (Maxwell, Jo, Young)
- d. Draft intervention components (strategies, scripts, materials) and assessment forms (intervention activity logs, needs assessment questions) all materials in English and Korean language
- e. Hire and train 3 mature, English-Korean bilingual Korean American peer counselors
- f. Establish procedures to identify women who missed follow-up appointments on a daily basis
- g. Pretest intervention in 6-10 KA women, revise and finalize
- h. Establish randomization procedure

Task 2:Enroll subjects into randomized trial (Months 07-30)

a. Identify eligible subjects (N=253 during the 2 year recruitment), randomize into the study and administer verbal informed consent to intervention subjects (choice of English or Korean).

Task 3:Conduct Intervention (Months 07-33)

- 1. Conduct telephone needs assessment and counseling for each newly enrolled intervention subject (N=86). Contact each intervention subject at least once every other week until completion of diagnostic follow-up/treatment. Offer intervention components as appropriate. Document all contacts, responses to needs assessment questions, intervention requests and activities.
- 1. Conduct alternative protocol for intervention subjects who cannot be reached by telephone.
- 2. After completion of the follow-up survey, provide intervention to women in the control group who did not complete follow-up procedures.

Task 4:Data Collection (Months 3-40)

- a. Collect and compile log sheets from contacts with intervention subjects (process measures) into a data base (months 7-35)
- b. Develop (draft, translate, back translate, pretest, revise) follow-up survey based on the Adherence Model (months 3-12)

Annette Maxwell, Dr.P.H. DAMD17-03-1-0676

- c. Hire and train interviewer(s) to conduct follow-up survey (months 12-13)
- d. Conduct post-intervention survey with all subjects (N=160) 6 months after referral for diagnostic follow-up. Administer verbal consent prior to conducting survey to subjects in the control group (months 13-40)
- e. Conduct chart reviews for all subjects (N=160) 6 months after referral for diagnostic follow-up (months 13-40)

Task 5:Data Management and Analysis (Months 1-42)

- a. Transcribe and translate into English audiotapes from semi-structured interviews.
- b. Analyze qualitative and quantitative data from Task 1.
 - For qualitative data analysis, summarize transcripts from semi-structured interviews, including key points and notable quotes (in English and Korean language) using standard procedures (Krueger 1994); compare and consolidate summaries prepared independently by two Korean speaking investigators (Drs. Jo and Kim); sort findings by the domains of the Adherence Model.
 - For quantitative analysis, tabulate findings from semi-structured interviews, including specific needs expressed, services requested and barriers and concerns voiced about follow-up procedures. Tabulate findings from chart reviews by adherence status.
- c. Set up data entry programs and enter information from intervention log sheets, needs assessments, intervention requests and activities (process measures)
- d. Set up data entry program and enter information from 6 month follow-up survey
- e. Set up data entry program and enter information from chart reviews
- f. Data management and cleaning will be ongoing
- g. Data analysis, preparation of annual reports and manuscripts.

	Provider Interview Findings	Patient Interview Findings
	Language barrier	Language barrier
	Lack of transportation	Lack of transportation
	Lack of knowledge of importance of follow-up	Fear of getting lost and being helpless
Barriers	Fear of getting lost and being helpless at an	Unable to complete paperwork by self
	unfamiliar and large health care facility	Fear of getting reported to the authorities
	Unable to fill out paperwork by self	➤ Not understanding that the follow-up is free of
		charge to them
	Peer navigator could help in overcoming the	Peer navigator could help in overcoming the above
	above barriers	barriers
	Speaking the English language	Speaking the English language
Deediators	Having transporta	Having friend or family member accompany to
r reulcuors	Having knowledge of the importance of breast	follow-up visit(s)
	cancer	Having clear and accurate understanding of breast
	Having knowledge of the importance of follow-	cancer, screening tests, follow-up tests, and related
	up tests	issues.
	Assist with translation and transportation	Assist with translation and transportation
	Help with paperwork	Help with paperwork
	Accompany to doctor visits	Accompany to doctor visits
	Educate patients on the importance of follow-up	Provide accurate information regarding breast
Suggested roles	Educate patients on the details of the CDP	cancer, screening tests, follow-up tests, and related
of peer	program (i.e. free of charge to enrollees, no risk	issues.
navigator	of deportation)	Answer questions that they may have
	Answer questions that patients may have	Provide emotional support
	Provide emotional support	Educate patients on the details of the CDP program
	> Advocate in the community for breast cancer	(i.e. free of charge to enrollees, no risk of
		deportation)

Table A: Summary of Phase I exploratory interview findings

•

.