

Goals: The assessment of breast cancer screening program attitudes among women from Wielkopolska. The research was ordered by the Center of Cancer Prevention and Epidemiology in Poznań. It was conducted between 30. 01. 2009 and 11. 02. 2009.

Materials: The research has been conducted in the Breast Cancer Screening Program target group (women between 50 to 69 years old). This program is financed in Poland by Ministry of Health. Participants were divided into six groups of 7-12 women by place of residence and level of education.

Methods: The Focus Group Interview was used. The conversations was led by the moderator. The discussion was conducted as informal as it was possible. The main aim of moderator was to encourage women to exchange opinions spontaneously.

Conclusions:

1. None of the women had a mammography in last two years.
2. Women do not attend breast cancer screening program because they do not receive invitations.
3. Mammography in mobile mammography units is the best solution for women from villages because they do not have to worry about traveling to the city.
4. Some of the women from families without the history of cancers think that they will never be diagnosed with cancer.
5. The biggest irrational reason for avoiding mammography is the fear of cancer diagnosis.
6. The recent mass media mess about the low quality of mammography is still in women's memory.
7. Most of the respondents avoid contacts with the health service.

Key words: breast cancer screening program, cancer, women, mammography.

Breast cancer screening program attitudes among women from Wielkopolska. The report from Focus Group Interview (FGI) studies

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Goals

The aim was to assess breast cancer screening programme attitudes among women from Wielkopolska. The research was ordered by the Centre of Cancer Prevention and Epidemiology in Poznań. It was conducted between 30.01.2009 and 11.02.2009.

Methods

The Focus Group Interview was used. The scenario for the discussion was prepared. The conversation was led by the moderator in groups of 7-12 women. The discussion was conducted as informally as possible. Usually the conversations took 2 hours. The main aim of the moderator was to encourage women to exchange opinions spontaneously.

The Focus Group Interview is a standard method used in social science. The role of the moderator is to make discussion easier by asking questions and suggesting topics. Conversation takes place mainly between members of the group, not between members and researcher/moderator. This method provides the confrontation of the attitudes among the people from the group and reduces the influence of the moderator's opinions and prejudices on the results.

The method does not follow the rules of random selection but enables one to select general, dominant opinions and beliefs from the trial/sample about the population.

Materials

The research has been conducted in the Breast Cancer Screening Programme target group (women between 50 and 69 years old). This programme in Poland is financed by the Ministry of Health. None of the women had a mammography in the last two years. Participants were divided into six groups of 7-12 women by place of residence and level of education:

- Group 1: inhabitants of villages situated far from the big city,
- Group 2: residents of a town located near the city (Mosina),
- Group 3: residents of a town with fewer than 70 000 inhabitants (Rogoźno) with secondary education,
- Group 4: residents of a town with fewer than 70 000 inhabitants (Puszczykowo) with secondary and higher education,
- Group 5: residents of Poznań with secondary education,
- Group 6: residents of Poznań with secondary and higher education.

Results

1. The biggest irrational reason for avoiding mammography is the fear of cancer diagnosis. Many women still think that cancer is incurable.

2. Women do not attend the breast cancer screening programme because they do not receive invitations and do not have any information about the programme.
 3. Some of the women from families without a history of cancer think that they will never be diagnosed with cancer and that is why they do not have to undergo mammography.
 4. Inhabitants of Poznań are discouraged by the time they have to spend waiting for the mammography.
 5. Most of the respondents avoid contacts with the health service and go to the doctor only if symptoms of illness appear.
 6. Inhabitants of villages situated far from the big city do not have money to travel to the city to attend the breast cancer screening programme. The estimated cost of such a journey is 100 PLN, which is too expensive for many women.
 7. Visitors of Poznań do not know the topography of the city. Invitations to the breast cancer screening programme with a public transport map included would be a reasonable solution.
 8. Mammography in mobile units is the best solution for women from towns and villages because they do not have to worry about travelling to the city.
 9. Lack of information as a reason for the low participation rate in the breast cancer screening programme. Many women get the information about the mobile unit's arrival too late or even after the mobile unit's departure.
 10. Obligatory participation in the breast screening programme as a way of encouraging women to attend the programme.
 11. The recent mass media mess about the low quality of mammography (especially in mobile units) is still in women's memory. There are no clear data about the quality of medical equipment in health care facilities.
 12. Most of the respondents did not remember any media campaign about the breast cancer screening programme.
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Conclusions

1. The mass media campaign should be based on "positive goals" – encouraging and motivating instead of frightening.
2. The mass media campaign should be constant and massive.
3. Posters and leaflets about the breast cancer screening programme should be spread in different places.
4. Latest mammography results could be mandatory during visits to the public health system.
5. Invitations for the breast cancer screening programme should be short and encouraging.
6. Information about the medical staff's qualifications and the quality of equipment in mammography clinics and mobile units should be specified, available in writing.
7. Inhabitants of villages and small towns should be informed sooner about the mobile unit's arrival.

References

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