

A MEMBERSHIP ORGANISATION
FIGHTING CANCER TOGETHER

PREVENTING CANCER IN THE WORKPLACE

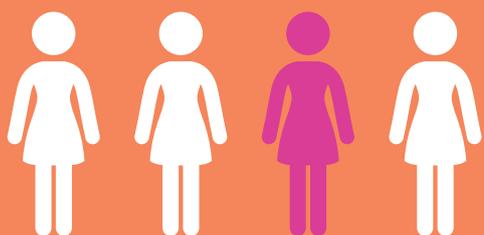
TACKLING BREAST CANCER IN THE WORKPLACE

A WIN FOR EVERYONE



bupa.com/cancer
uicc.org

THE FACTS ABOUT BREAST CANCER



BREAST CANCER REPRESENTS
1 IN 4 OF ALL CANCERS IN
WOMEN WORLDWIDE

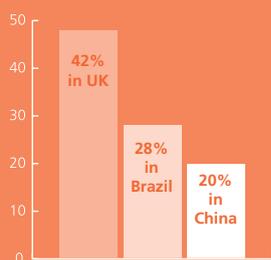
GLOBALLY, BREAST CANCER IS THE MOST
FREQUENT CANCER AMONG WOMEN IN
ALL REGIONS OF THE WORLD



IN 2010, THE ESTIMATED COSTS OF NEW BREAST CANCER
CASES WAS **USD 26.6 BILLION** OF WHICH **45%** WERE IN
MEDICAL COSTS AND ANOTHER **28%** IN INCOME LOSSES¹



BREAST CANCER IMPACTS WOMEN OF WORKING AGE:
IT IS THE LEADING CANCER KILLER AMONG WOMEN AGED
20 TO 59 YEARS



The % of breast cancers that can be prevented by not drinking alcohol, being physically active and maintaining a healthy weight²



Among mothers the risk of breast cancer decreases by **4%** for every 12 months of breastfeeding³



Mammographic screening reduces a women's risk of dying from breast cancer by between 20-25%

1. Bloom DE, Cafiero ET, Jané-Llopis E, et al. (2011). The Global Economic Burden of Non-communicable Diseases. Geneva: World Economic Forum.
2. World Cancer Research Fund International. <http://www.wcrf.org/int/cancer-facts-figures/preventability-estimates/cancer-preventability-estimates-food-nutrition>
3. Collaborative Group on Hormonal Factors in Breast Cancer. (2002). Breast cancer and breastfeeding: collaborative reanalysis of individual data from 47 epidemiological studies in 30 countries, including 50302 women with breast cancer and 96973 women without the disease. Lancet. 360:187-195.

EXECUTIVE SUMMARY

Today, breast cancer represents one in four of all cancers in women.¹

Breast cancer exacts a heavy financial toll on women, their families, business and societies in all countries. In 2010, the estimated costs of new breast cancer cases was USD 26.6 billion of which almost 50% were in medical costs and another 28% in income losses.² While there is a misconception that breast cancer affects mostly older women in developed countries, the facts are that breast cancer killed over 500 000 women in 2012, 60% in less developed regions and around 1 in 5 women under 50 years of age.^{1,3} This is despite the existence of effective early detection measures that have been proven to save lives.

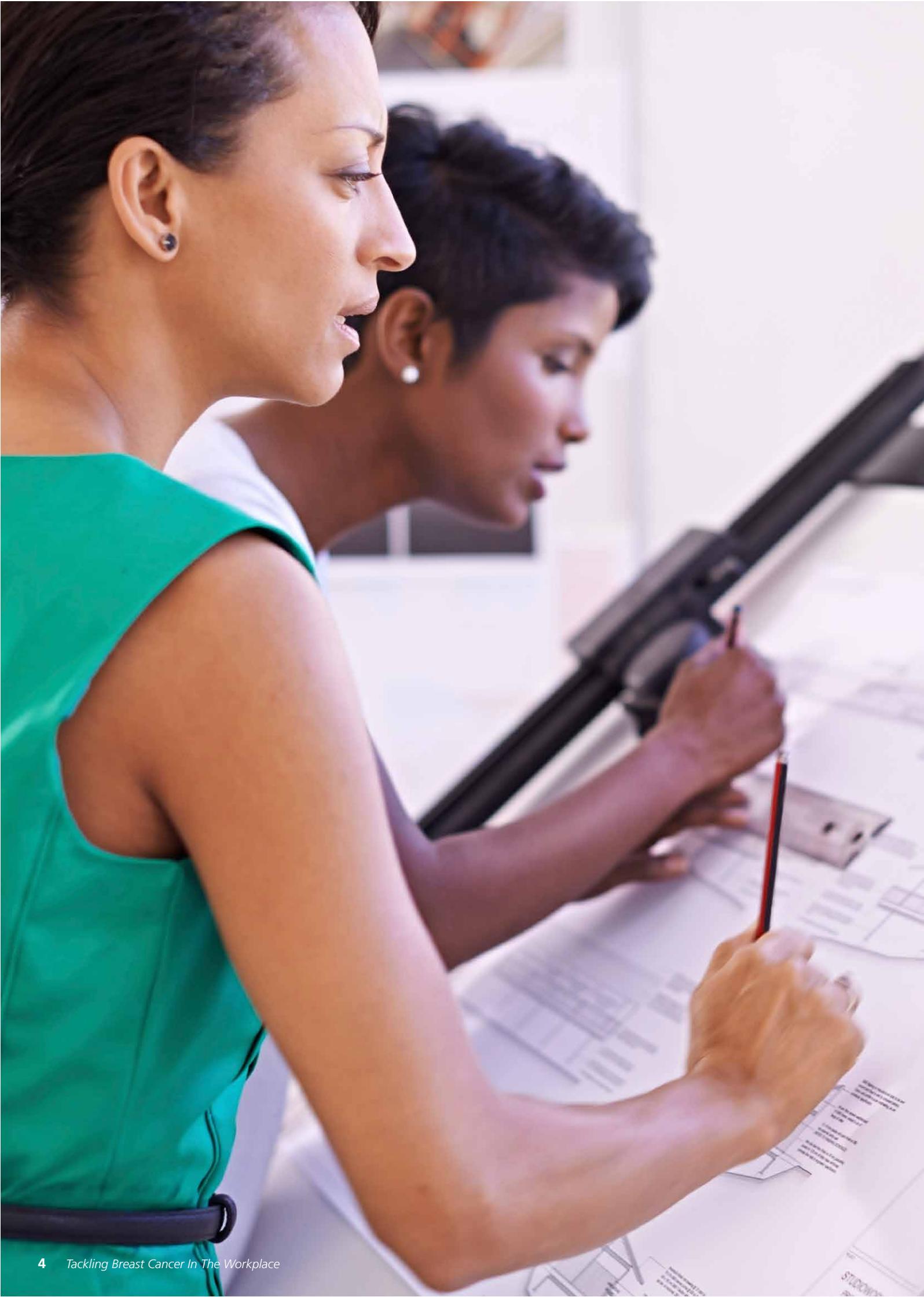
With women now representing 40% of the total global labour force of 3.28 billion, the workplace provides a remarkable opportunity to heighten awareness of the benefits of spotting breast cancer early.⁴ For women, detecting breast cancer early means a much higher chance of surviving this disease and maximising quality of life. For business, promoting early detection can generate savings in medical costs compared with the cost of treating more advanced breast cancer, and avoid lost productivity.

This guide is designed to support you to implement a breast cancer workplace initiative as part of a wider employee health programme with the following elements:

- Prevention – Addressing some of the main risk factors for breast cancer through a best practice employee health and wellbeing programme
- Early Detection – Increasing breast awareness and encouraging women to take part in breast cancer screening
- Living and Working with Breast Cancer – Supporting women with a breast cancer diagnosis

The guide offers information for best practice workplace policies that will support positive behaviours that reduce the risk of breast cancer, and guidance on how to design a programme that suits the needs of your employees while delivering a return on investment. We also highlight how different businesses can support a breast cancer workplace initiative in different ways – from simply including reminders for screening in payslips to encouraging the use of breast awareness mobile health apps.





CONTENTS



WHY SHOULD AN ORGANISATION SUPPORT EARLY DETECTION OF BREAST CANCER?	6
The global challenge of breast cancer	6
Breast cancer affects women in their most productive years	6
The benefits to business of tackling breast cancer in the workplace	7
What can employers do to tackle breast cancer in the workplace?	7
The importance of prevention	7
Early detection	9
Benefits to employers of promoting screening	10
Living and working with breast cancer	11
HOW TO BUILD A SUCCESSFUL PROGRAMME	12
Diagnose	13
Create a business case for leaders	13
Assess workplace needs	14
Design	15
Assign responsibility for programme management	15
Design a programme based on what works	15
Support women living and working with breast cancer	20
Install	21
Invest in a communications strategy that inspires participation	21
Support women to overcome barriers to participation	22
Evaluate	24
Build in a framework for monitoring and evaluation	24

Why should an organisation support early detection of breast cancer?

The global challenge of breast cancer

Breast cancer is now the most common cancer in women worldwide and the most frequent cause of cancer death in women in less developed regions. An estimated 1.67 million women were diagnosed with breast cancer in 2012 and there were 6.3 million women alive who had been diagnosed with breast cancer in the previous five years. Breast cancer now represents one in four of all cancers in women.¹

As well as having devastating impacts on individuals and families, breast cancer has a tremendous economic cost globally. The estimated costs of new breast cancer cases in 2010 was USD 26.6 billion, of which almost half were in medical costs and another 28% in income losses.² The rising burden of breast cancer worldwide and the existence of proven early detection methods support the urgent need for effective responses to manage and curb the social and financial costs of this disease.

Breast cancer affects women in their most productive years

There is a misconception that breast cancer is just an older woman's disease. Yet the fact is that breast cancer is having an enormous and growing impact on women of working age. It is the leading cancer killer among women aged 20 to 59 years.⁵

Additionally, while globally the incidence of breast cancer is much lower in women under the age of 40, it tends to be more aggressive and these young women are more likely to die from their disease. A breast cancer diagnosis also has a disproportionate impact on the capacity of young women to return to work.⁶

For business, there is also an imperative to address the rising economic cost of early deaths from breast cancer. In the US alone, in 2008 deaths from breast cancer in women aged less than 50 years resulted in an estimated total productivity loss of USD 5.49 billion.³



The benefits to business of tackling breast cancer in the workplace

Prevention and early detection can improve a business bottom line through avoiding lost productivity and reducing medical costs associated with advanced breast cancer:

- Globally, advanced breast cancer management is three times more expensive compared to early breast cancer management.⁷ This is because advanced breast cancers require aggressive, expensive, and resource-intensive treatments that are costly to perform and have serious physical, mental, emotional and financial effects on patients and their carers. They are also less likely to respond to therapy, and most often prove incurable in any healthcare setting.
- The value of retaining women in the workforce and maximising a woman's contribution to future economic growth is a key consideration for businesses worldwide. While many women return to work after a diagnosis of breast cancer and thrive in a supportive workplace environment, women with more advanced cancer and women who have undergone aggressive chemotherapy are especially likely to experience a disruption in employment.

What can employers do to tackle breast cancer in the workplace?

There are a number of key elements to a breast cancer workplace initiative:

- Prevention – Addressing some of the main risk factors for breast cancer through a best practice employee health and wellbeing programme
- Early Detection – Increasing breast awareness and encouraging women to take part in breast cancer screening
- Living and Working with Breast Cancer – Supporting women with a breast cancer diagnosis

The importance of prevention

Although many risk factors for breast cancer are out of a woman's control – such as family history – there are several choices every woman can make to reduce her risk such as drinking less, getting fit and maintaining a healthy weight (see page 8 for more details).

By establishing a workplace culture that values employee health and provides a range of tools and resources that support employees to make healthy choices, a woman can be supported to modify her behaviour to maximise her own health and wellbeing and take steps to protect against breast cancer.

Making healthy choices can prevent breast cancer

Regularly drinking alcohol can increase the risk of breast cancer in women of all ages.⁸

- Regularly drinking even small amounts of alcohol can increase the risk of breast cancer. A review of the evidence in 2012 found that even having 1 drink a day (around 1.5 units) could increase the risk of breast cancer by 5%.⁹
- The risk increases the more a woman drinks.

Maintaining a healthy weight can reduce the risk of breast cancer¹⁰

- Excess body fat and adult weight gain are linked to an increased risk of breast cancer in post-menopausal women*

Being physically active can protect against breast cancer¹⁰

- Physical activity is likely to protect against breast cancer in post-menopausal women.
- The World Cancer Research Fund International defines insufficient physical activity as less than 30 minutes of moderate activity five times per week, or less than 20 minutes of vigorous activity three times per week, or equivalent.

Breastfeeding can protect against breast cancer

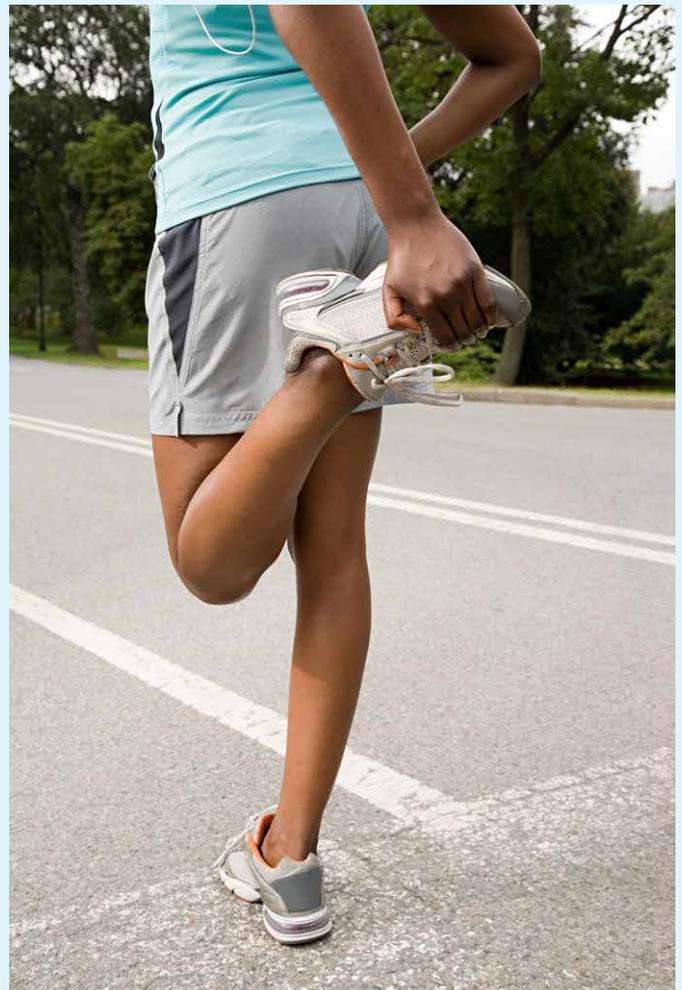
- Among mothers the risk was shown to decrease by 4% for every 12 months of breastfeeding.¹¹ Yet research shows that working mothers have lower rates of breastfeeding than non-working mothers, especially those returning to full-time employment or before breastfeeding is established.¹²
- Employers can play a role in encouraging breastfeeding by working mothers by providing a supportive environment.
- Mothers who wish to breastfeed may also delay returning to work if their workplaces do not provide a supportive environment.¹³

The World Health Organization recommends exclusive breastfeeding up to 6 months of age, with continued breastfeeding along with appropriate foods up to two years of age or beyond.¹⁴

Resources

World Cancer Research Fund International, Our Cancer Prevention Recommendations

<http://www.wcrf.org/int/research-we-fund/our-cancer-prevention-recommendations>



* As breast cancer is hormone-related some of the factors that modify risk are different after menopause.

Early Detection

With women now making up 40% of the global labour force, investing in initiatives that support the detection of breast cancer at early stages has value for women and their families as well as for business.

Breast Awareness is a mainstay of detecting breast cancer early

The purpose of promoting breast awareness is to encourage women who recognise any changes in the look or feel of their breasts to seek timely medical care.

For many women around the world, particularly in developing countries where mammographic screening programmes are not available, workplace education programmes that increase awareness of the importance of being breast aware and seeking help for signs and symptoms will greatly enhance the chance of surviving breast cancer just by ensuring that a cancer is diagnosed at a less-advanced stage.

For young women being breast aware, recognising changes to their breasts and understanding the importance of seeking care when symptoms are present is essential for detecting breast cancer early, as mammograms are not recommended for this age group.¹⁵

Being Breast Aware

Many campaigns around the world are encouraging women to know their bodies and be aware of the look and feel of their own breasts. It is important that all women know the changes in their breasts that could indicate the presence of breast cancer. Common changes that could be due to breast cancer include:

- A lump or thickening in the breast
- A change in the shape or size of the breast or nipple
- Dimpling of the skin or the nipple
- Discharge or blood from the nipple
- A rash or changes to the skin around the breast
- Swelling or a lump in the armpit

These changes do not necessarily mean a woman has breast cancer. However, if a woman notices these, or any other changes in the breast, she should see her doctor.

Early Detection of Breast Cancer – The Basics

- Detection of breast cancer while it is still small and confined to the breast provides the best chance of successful treatment and maximising quality of life.
- Awareness is the first step towards early detection. This means a woman should be aware of the normal look and feel of her breasts so she can spot any changes that may be a sign of breast cancer.
- Screening mammograms (breast x-rays) look for early signs of breast cancer in women without symptoms. Mammograms may find a breast cancer that is too small to feel.
- Breast cancer screening does not diagnose cancer. It identifies women who need more tests to find out if cancer is present.
- Guidelines for mammographic screening can differ between countries. The World Health Organization recommends organised population-based mammography screening for women aged 50 – 70 years linked with timely treatment.
- Routine mammographic screening is not recommended for women under 40.

Screening Mammography Saves Lives

The primary benefit of breast screening mammograms is that some women will have a breast cancer found at the earliest possible stage before it has caused any symptoms and when treatment is likely to be most successful. While figures vary for different regions, overall, screening reduces a women's risk of dying from breast cancer by between 20-25%.

Where organised mammographic screening programmes exist, the workplace can play an important role in improving participation by informing women of when to be screened and supporting access to quality services.

Benefits to employers of promoting screening

- **Early detection through screening can reduce the indirect costs associated with breast cancer.** In a US study of breast cancer diagnoses, it was estimated that an employer could save \$2,035 per year per breast cancer patient in net patient time costs* if breast cancer is diagnosed through early screenings rather than in an advanced stage of the disease.¹⁷
- **Investments in breast cancer screening in the workplace can generate direct cost savings.** A US study reported that it would take an investment of only \$1.10 per person per month for the typical employer to reach near full compliance among their eligible employees to cover breast cancer screening, and that this would yield savings of up to \$0.55 per member per month.¹⁸

For any organised programme, the benefits of screening should be viewed alongside the possible harms, such as anxiety, overtreatment or risks from x-rays, and the focus should be on informed choice.

A review of the UK screening programme found that women invited for breast screening have a 20% reduced chance of dying from breast cancer compared with what it would be without a screening programme.¹⁶



“At IBM, we design health promotion programmes to improve access, increase quality, reduce costs and drive innovation. These programmes address both global and local priorities such as access to evidence-based preventive services that include breast, colorectal and cervical screenings.”

Kyu Rhee, MD, Chief Health Officer, IBM

* Indirect non-medical costs of care, such as patient time associated with travel to, waiting for, and seeking medical care

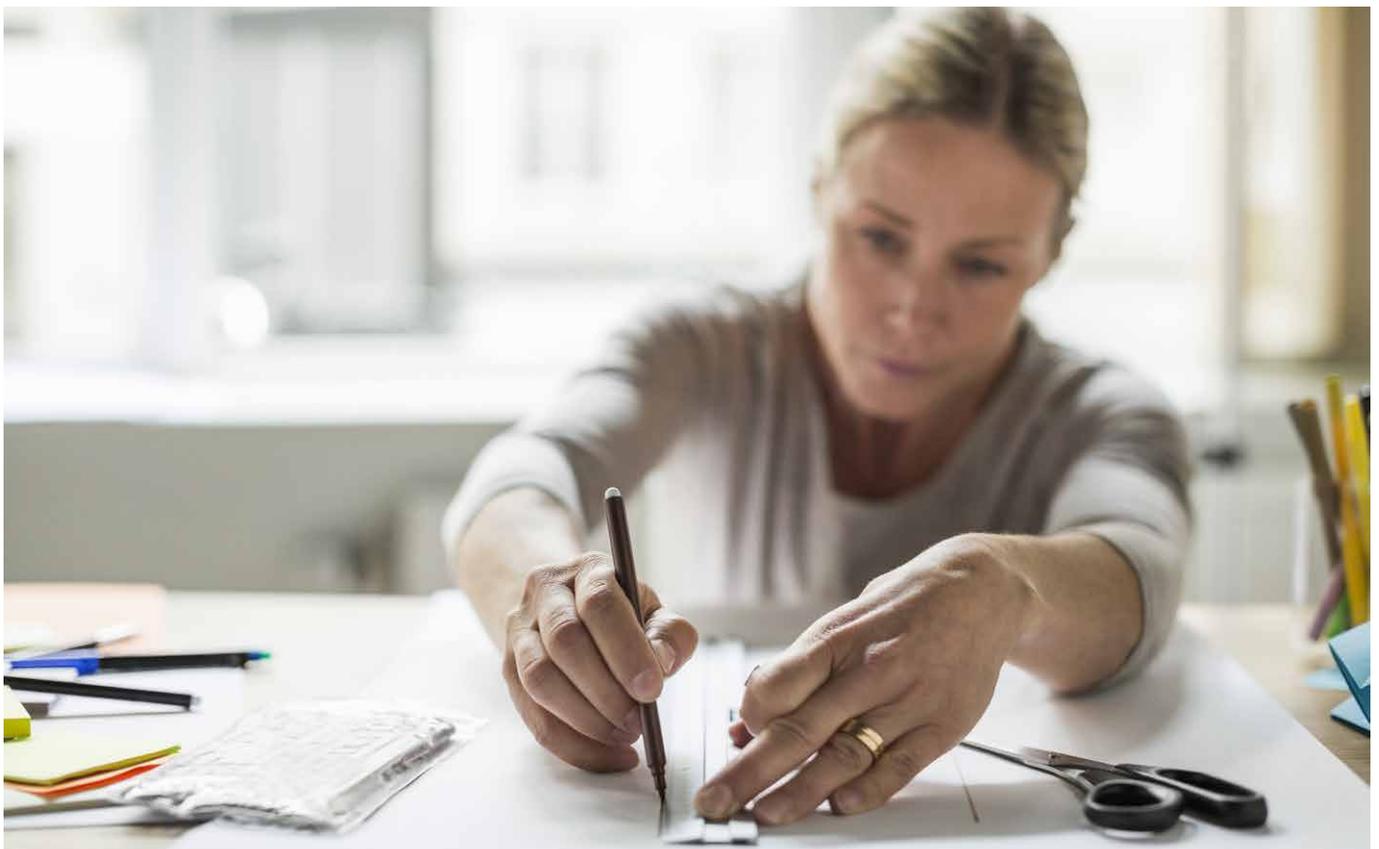
Living and working with breast cancer

Many women choose to return to the workforce after a diagnosis of breast cancer – these women may have successfully negotiated treatment but others may be living with advanced or metastatic disease. This means the cancer has spread from where it started, or has come back some time after the woman was first treated for her breast cancer. One third of all women diagnosed annually with early breast cancer will go on to develop metastatic disease and 1 in 6 women will be diagnosed with metastatic breast cancer.

For all women with a diagnosis of breast cancer and their carers, receiving support in the workplace can be a significant factor both from a personal and a practical standpoint. A job can restore normality, routine, stability, social contact and income.¹⁹ A supportive approach from employers can reduce anxiety and provide the skills and confidence to deal with cancer at work. Women living with breast cancer can be encouraged to know that when they return to work they are likely to find a workplace environment that is willing to help them adapt to the challenges they face from their illness.

Supporting women living with breast cancer also means empowering them to make healthy choices. A recent review of 85 studies involving 164,416 breast cancer survivors found indications of links between better survival after breast cancer²⁰ and:

- A healthy body weight
- Being physically active
- Eating foods containing fibre
- Eating foods containing soy
- A lower intake of total fat and, in particular, saturated fat.

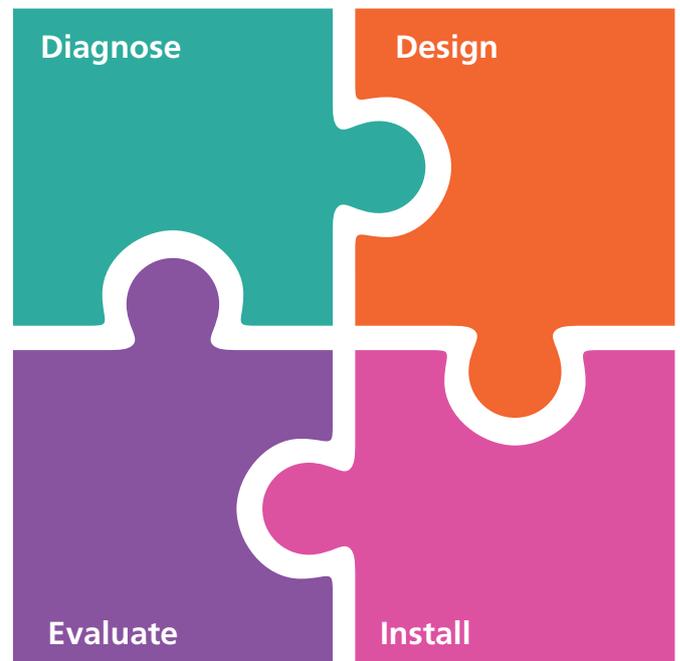


HOW TO BUILD A SUCCESSFUL PROGRAMME

Any effective employee health and wellbeing initiative should incorporate four fundamental components - diagnose, design, install and evaluate.

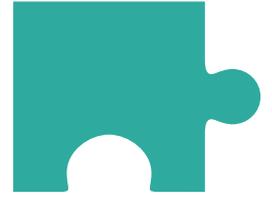
The four components fit together as pieces of a puzzle. They are interlinked and part of a cycle that should be reviewed and improved on a regular basis to best meet the needs of your business over time.

Here, we describe each of these components supported by evidence, case studies, tools and resources that are designed to help guide your selection of a tailored solution for your workforce.



DIAGNOSE

Every organisation should assess their workplace needs and create a business case for leaders to ensure a breast cancer programme is relevant and will be well received.



Create a business case for leaders

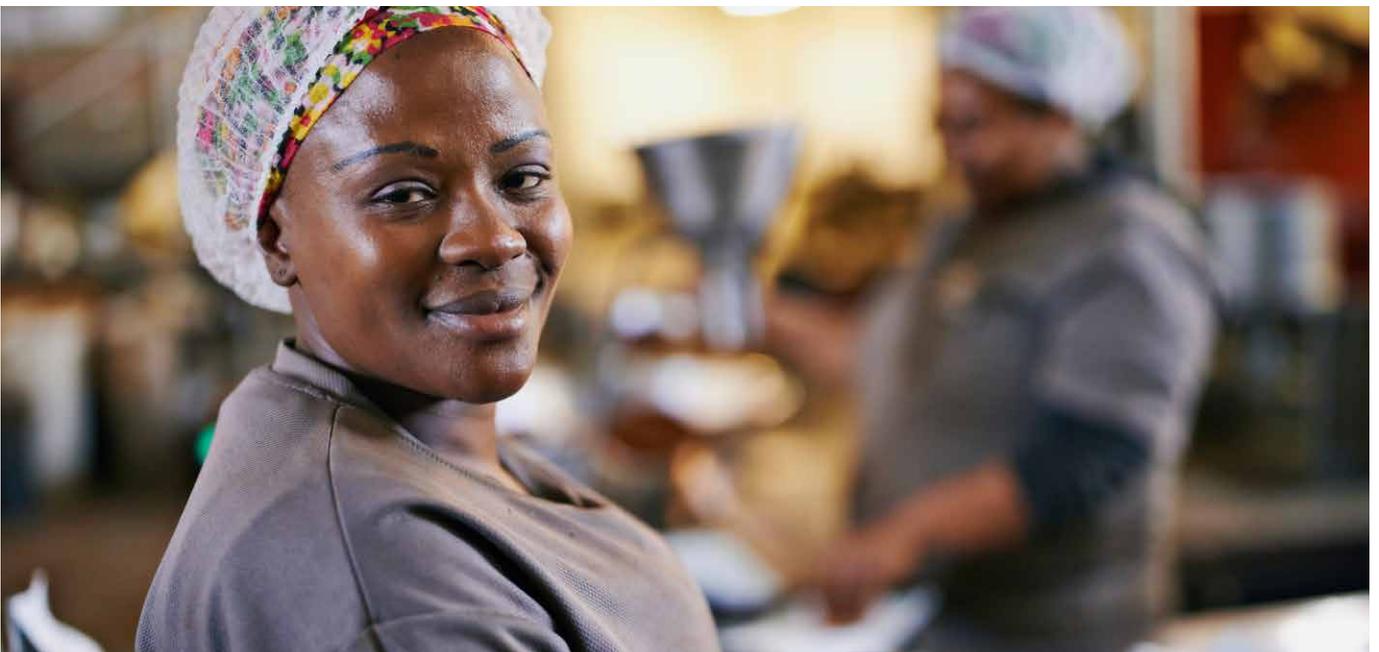
Convincing senior leaders of the value of investing in a workplace early detection initiative is essential.

Investing in the health and wellbeing of employees may already be integrated into strategic business plans but being able to articulate the value of interventions to both the business as well as to your employees in clear and simple terms will be critical to moving forward.

To help you, this guide includes evidence for both the health and financial benefits of increasing awareness amongst your employees of the benefits of early detection, and encouraging appropriate-aged women to seek breast cancer screening.

Based on this evidence, the key messages to communicate are:

- Breast cancer represents 1 in 4 of all cancers in women worldwide
- In 2010, the estimated costs of new breast cancer cases was USD 26.6 billion of which almost 50% were in medical costs and another 28% in income losses.
- Prevention and early detection can improve a business bottom line through avoiding lost productivity due to early death and reducing medical costs.
- Investing in early detection measures can help to retain skilled workers, as more women will avoid the impairment associated with aggressive treatment of advanced breast cancer.



Assess workplace needs

Selecting a strategy that is relevant to your organisation's needs, employees' interests and available resources is critical.

Some examples are:

- **The availability of breast cancer screening services.** Knowing if organised screening services are available is likely to be the first step in designing a programme that is tailored to your local resources and environment. In many low- and middle- income countries, the absence of regional or national screening services means that workplaces can create the greatest impact by promoting breast awareness, recognition of signs and symptoms of breast cancer and the importance of seeking timely medical advice.
 - Your Ministry of Health or national or regional cancer society, many of whom are UICC members, are good points of contact to find out if organised breast cancer screening services are available in your country or region. To search UICC's global database of member organisations, go to: <http://www.uicc.org/membership>
 - In some countries, it is possible to search for local mammography services. For example in the United States you can search the FDA Mammography Facility Database: <http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfMQSA/mqsa.cfm>
- **The age distribution of the workforce.** It makes sense to focus on breast awareness for a predominantly younger workforce, as mammographic screening is not recommended for women less than 40 years.
- **Presence of health insurance benefits.** Well-educated women employed in professional jobs with health insurance and a usual point of care are more likely to be engaged in screening and may already have high rates of participation in organised mammography programmes. Greater efforts may be needed to reach women in low-paying jobs or who lack health benefits in order to increase use of breast cancer mammographic screening services²¹ and educate women on being breast aware.
- **Socio-economic status.** One-on-one education programmes designed to increase use of mammography services targeted to lower income women showed greater effects than programmes that do not target low-income women.²²



UICC members can play a pivotal role in engaging businesses worldwide to adopt best practices in breast cancer prevention and early detection in the workplace, leveraging their knowledge and experience of what works best in different settings.

Julie Torode, Director Advocacy & Programmes, UICC

DESIGN

Every organisation should develop its own programme based on proven, effective interventions that are tailored to the local environment and the needs of employees.



Assign responsibility for programme management

Leadership engagement is key to realising a healthy workplace. A programme actively supported by senior management has a firm foundation and contributes to a positive workplace culture. Where leaders are openly seen to 'set the pace' and support their employees' participation in organised cancer prevention and early detection programmes, the chances of employee engagement will be maximised.



Design a programme based on what works

Here we provide a selection of interventions, including links to resources and case studies that are designed to assist you to create a breast cancer programme around the three key elements of:

- Prevention
- Early detection
- Supporting women with breast cancer

Prevention

Employees can be supported to reduce their risk of breast cancer through a health and wellbeing programme that supports maintaining a healthy weight, staying active and drinking less alcohol. In addition, creating a breastfeeding friendly workplace can encourage breastfeeding which can reduce breast cancer risks.

Resource

Employees can be encouraged to build walking into part of your daily routine by downloading an app like 'Ground Miles' and keeping track of their steps.

<http://groundmiles.bupa.com/>

Breastfeeding friendly workplaces

Workplace policies such as providing a clean, private space to express and store milk, providing lactation breaks and having the support of managers and co-workers will support a mother to breastfeed longer have the potential to decrease the number of new breast cancer cases in the future.

Supporting mothers to breastfeed longer can also have a number of other wide-ranging benefits to businesses. Employers value the improved retention of female employees after maternity leave, which reduces the loss of skilled staff and costs associated with recruitment and retraining or replacement. Improved health of mother and baby and increased staff loyalty from this family-friendly intervention are also seen to provide benefits, including reduced absenteeism.^{23,24}



Resources

International Trade Union Confederation: South Africa: Decisions for Life Brochure on Breastfeeding in the Workplace

<http://www.ituc-csi.org/south-africa-decisions-for-life?lang=en>

Breastfeeding Friendly Workplace: Breastfeeding Room Toolkit

<http://www.breastfeedingfriendly.com.au/>

Early Detection

A programme that provides a mix of approaches and incorporates employee ownership can bring greater benefits than a 'one-size-fits-all' strategy.²⁵

BUILDING BREAST AWARENESS



USING WORKPLACE COMMUNICATION CHANNELS

Use workplace communication channels to deliver educational and motivational materials (newsletters – electronic and printed; posters; brochures, videos) to convey educational or motivational material about being breast aware. Interactive sessions can also be conducted using presentations and educational tools designed for the workplace



Resources

Susan G. Komen

Multi-lingual breast awareness educational materials

http://www.shopkomen.com/cart.php?m=product_list&c=99

Young Women Taking Care (Spanish)

<http://www.shopkomen.com/PDF/KOMEED006200.pdf>

CDC's The Right To Know Campaign: Protect Yourself from Breast Cancer

<http://www.cdc.gov/cancer/dcpc/publications/breast.htm>

Cancer Research UK: Breast Cancer Leaflet

<http://publications.cancerresearchuk.org/cancertype/breast/breastleaflet.html>

McGrath Foundation Curve Lurve



Curve Lurve is the McGrath Foundation's education initiative, aimed at increasing breast awareness in young Australians.

The Curve Lurve programme encourages workplaces to take an active interest in encouraging their staff to be breast aware through a free Facilitator's Guide available at www.curvelurve.com.au.

The Facilitator's Guide describes how to run a breast awareness session. No medical experience is required. The sessions have been designed to be educational but interactive. The facilitator can choose what elements work best for their workplace from a range of resources and tools:

- Curve Lurve trailer – the perfect icebreaker to start their session
- Powerpoint presentation on breast awareness, myths and risks
- Posters – to help promote their session
- Sharing the Lurve Video – stories from Australian women
- Breast Awareness Video – how to check your breasts
- Breast Awareness Cards – a printout to give attendees after the session to remind them to be breast aware
- 'Risky Business' quiz. For this quiz participants are broken into teams and asked to answer 20 questions related to breast cancer risks.

The free McGrath Foundation Curve Lurve app is also available that includes a guided breast examination session and the ability to set a reminder each month to Look, Lurve, Learn!

Some feedback from previous sessions:

- Excellent overview - came away knowing more about the true risk factors.
- Nice, easy to understand content.
- Loved the Risky Business Game!
- I thought I was clued up but I still learnt something
- I felt comfortable to ask 'silly questions'
- Session duration is just right for people taking time away from work to know more about breast cancer.



SMARTPHONE APPS

Smartphone apps have the potential to provide a personalised and interactive format for increasing breast awareness. The current focus on applying technology solutions is largely due to their scalability and relatively low cost. Providing options to access information on breast cancer via apps has the potential for broad reach to employees across different environments and cultures.

While we don't yet have any definitive data on their effectiveness, it is clear that smartphone apps have the capacity to deliver several of the essential 'ingredients' of tried-and-tested strategies used to motivate people to take on positive behaviours.²⁶ For example, researchers have concluded that apps can deliver functions related to autonomy, self-belief, competence and shaping knowledge, all of which are important for raising breast awareness and supporting women to recognise the signs and symptoms of breast cancer.



Resource

BREAKTHROUGH BREAST CANCER The iBreastCheck app

The iBreastCheck app, developed by Breakthrough Breast Cancer, delivers custom weekly, biweekly or monthly reminders to be breast aware. It features a video and slideshow that help the user know what signs to look for and teaches them to "Touch, Look, Check (TLC)" – touch and look for any changes, and check anything unusual with their doctor. The app also includes a quiz that creates a personalised report on how lifestyle choices affect the user's breast cancer risk.

<http://www.breakthrough.org.uk/about-breast-cancer/touch-look-check>

ENCOURAGING WOMEN TO PARTICIPATE IN AGE-APPROPRIATE ORGANISED BREAST CANCER SCREENING

Employees can be encouraged to participate in screening through:



USING WORKPLACE COMMUNICATION CHANNELS

Improving communications about the availability and coverage of mammography services is effective in encouraging women to use breast cancer screening services. Interactive sessions can also be conducted using presentation and educational tools designed for the workplace.



Resources

An NHS leaflet as an example of supporting informed choice on breast cancer screening.

<http://www.cancerscreening.nhs.uk/breastscreen/publications/nhsbsp.pdf>

FDA: Office of Women's Health: Fact Sheets and Postcards on Mammography in English & Spanish

<http://promotions.usa.gov/fda-womens-health.html>;
<http://www.fda.gov/ForConsumers/ByAudience/ForWomen/TakeTimetoCareProgram/ucm116698.htm>

Canadian Breast Cancer Foundation Ontario: Breast Health and Screening for Breast Cancer.

This downloadable PDF brochure has key information about breast health, risk reduction, and breast cancer screening in 11 languages.

<http://www.cbcf.org/ontario/YourDollarAtWork/EducationAwareness/Resources/Pages/Multilingual-Brochure.aspx>



"BreastScreen Victoria has successfully partnered with a number of Australian companies – including the major banks, local councils, professional service firms and other corporate organisations – to increase awareness and reminders about the importance of breast screening and breast health. The experience has ranged from face-to-face and video conference presentations, information packs and resources, attendance at staff wellbeing expos, to information included on intranets and other internal communication channels. Some workplaces have included breast screening reminders on employees' pay slips."

Vicki Pridmore, CEO, BreastScreen Victoria



ONE-ON-ONE EDUCATION²²

- One-on-one education delivers information to individuals about cancer screening with the goal of informing, encouraging, and motivating women to seek mammographic screening if they are an appropriate age.
- These messages are delivered by healthcare workers or other health professionals, lay health advisors, or volunteers, and are conducted by telephone or in person. This includes worksite settings.
- Employees can partner with providers to deliver one-to-one education or promote access to free local cancer services that provide individual counselling on cancer.



Resource

An example of a local service that offers one-one-one education is the American Cancer Society Breast Cancer Screening Education and Navigation Programme that aims to educate 1,000 underserved and uninsured women residing in Cook County, Illinois about breast cancer screening

<http://www.cancer.org/healthy/morewaysacshelpsyoustaywell/communityhealth/illinois/chicago-il-breast-cancer-screening>

Support women living and working with breast cancer

For employers, there are many simple actions that you can take to minimise the impact on daily work operations and support your employees. Making adjustments such as changes in tasks, hours, or function and maintaining open communication can be important factors in getting women back to work successfully. Some workplaces have an employee assistance programme or other type of support network to help employees affected by cancer or other illness.¹⁹

Countering discrimination in the workplace should also be supported through the application of workplace policies that protect breast cancer patients and their carers. In some countries cancer is classified as a disability, meaning that reasonable adjustments must be made so that survivors are not disadvantaged as a result of physical or psychosocial changes associated with their treatment.²⁷



Resources

'Macmillan at Work' provides a range of expert training, consultancy options, and resources to help employers manage cancer in the workplace, including an e-newsletter, and a free work and cancer toolkit.

<http://www.macmillan.org.uk/Cancerinformation/Livingwithandaftercancer/Workandcancer/Macmillanatwork/MacmillanatWork-B.aspx?origin=employerspagepanel>

Living with and beyond cancer is a free book, developed in collaboration with Bupa members who have had cancer, to help others understand challenges faced by people after cancer treatment, including in the workplace.

<http://www.bupa.co.uk/beyondcancer>

INSTALL

Every organisation should deliver breast cancer early detection activities via a communication strategy and support women with breast cancer



Invest in a communications strategy that inspires participation

The use of cancer screening services increases when employees receive consistent communication and reminders about cancer screening. Communications around breast cancer prevention and early detection can be integrated into your employee health and wellbeing strategy or some employers may choose to have a breast cancer focussed communications campaign.

Some important issues to be aware of:

Opportunities to increase social support and peer-to-peer education

Friends, family members and peers can play a role in promoting breast awareness and participation in screening. For example, peer education has been found to be effective for increasing the knowledge, beliefs, and practice of women related to breast cancer.²⁸

The need to dispel myths

Even where the level of understanding of the benefits of detecting cancer is high in your workplace, there may be little knowledge of how to prevent breast cancer and at what age screening is appropriate.

- In a study of 1,808 Asian American Pacific Islander women 95.3% of the women believed that if breast cancer is found early, it can be cured. However, when it came to attitudes about screening for cancer, approximately 56% of the women believed that a mammogram is only needed when they have symptoms. More specifically, 57% of the women believed that they only needed a mammogram when they had a breast lump. In addition 52.8% did not believe that there was much they could do to prevent breast cancer.²⁹

Opportunities to link with public campaigns

Breast Cancer Awareness Month, marked in countries across the world every October, helps to increase attention and support for the awareness, early detection and treatment as well as palliative care of this disease for women with advanced breast cancer.

- In 2014 Etihad Airways, the national airline of the UAE, extended its breast cancer awareness campaign to guests and employees at Abu Dhabi International Airport. Coordinated by the Etihad Airways Medical Centre, the initiatives are part of the airline's wider efforts to promote breast cancer awareness among employees and in the community, particularly during October. In partnership with the Health Authority of Abu Dhabi and Lifeline Hospital Group, the Etihad Airways Medical Centre hosted a mobile breast cancer mammography screening unit for employees and employees' wives. In addition, all female employees, regardless of age, were offered a free consultation at a breast cancer awareness drop-in clinic operating at the centre.

For more information, go to: <http://www.etihad.com/en-th/about-us/news/archive/2014/etihad-takes-breast-cancer-awareness-campaign-to-auh/>

The importance of being sensitive to culture

Be conscious of possible cultural sensitivities to discussing breast awareness and cancer screening in the workplace. There may be hesitancy to talk about breast cancer due to stigma, fear and misinformation associated with the disease, particularly in terms of prevention, treatment and the potential positive outcomes.³⁰ Taking into account local language and culture and using trusted channels of communications, such as peer educators, are likely to maximise participation.



Resource

CDC, Workplace Health Promotion: Communications

<http://www.cdc.gov/workplacehealthpromotion/planning/communications.html>

Support women to overcome barriers to participation

Reducing out-of-pocket expenses

Reducing the cost of screening increases demand for and use of services. Employers can reduce the costs of cancer screening by paying for the screening tests or their administrative costs if applicable.

Addressing issues of access

The effectiveness of workplace-based group education programmes increases when additional support, such as assistance in scheduling and attending screening is provided. Employers can consider a number of options to assist access such as providing paid time off from work to participate in breast cancer screening programmes during work hours.



BSR

Breast Cancer Awareness Raising in Vietnam



The HERhealth workplace program, run by BSR, is an education programme for women working in low skilled, export oriented sectors, reaching over 300,000 women in over 250 factories and farms in Bangladesh, China, Egypt, India, Indonesia, Kenya, Pakistan, and Vietnam.

The programme strives to improve awareness and behaviour related to general and reproductive health, to challenge harmful taboos, to promote preventative care, and to increase access to critical health products and services.

In Vietnam, breast cancer awareness was highlighted as one of the issues to be addressed by the programme. The mortality rate for cancer is 73.5%, much higher than the world average of 59.7%, and higher than the average for developing countries (67.8%). The programme found that only 40% to 50% of women workers in factories have heard of breast cancer, highlighting the importance of raising awareness.

In each factory and farm, a group of women was selected as peer health educators, and are provided with a series of training sessions that take place at work. This included important facts on the disease as well as guidance on how to conduct self-breast examinations. The peer educators were then responsible for organising sessions for their peers. A baseline and an endline survey were conducted among workers and factory management to measure the impact of the programme in terms of knowledge and behaviour change.

From 40-50% of women that had heard about breast cancer at the start of the programme, after programme implementation, close to 100% were aware of breast cancer. The number of women that know about self-examination for breast cancer increased from 38% to over 80% after HERhealth.

EVALUATE

Every organisation should monitor and evaluate programmes for return on investment and continually seek to improve outcomes.



Build in a framework for monitoring and evaluation

A framework for monitoring and evaluation should be built into a programme from the start and carried out through the lifetime of the project in order to:

1. Demonstrate whether the programme increases breast awareness and behaviour change
2. Learn from experience of what works and what needs improvement and use these lessons learned and employee feedback to improve the programme's effectiveness
3. Calculate the costs of implementation and on-going costs of the programme

It is important to measure progress against baseline indicators around breast cancer awareness and early detection. For example:

- Assessing changes in employee knowledge, attitudes, and beliefs about breast cancer prevention and screening:
 - Evaluate changes in employee knowledge of current breast cancer early detection health benefits and guidelines
 - Measure changes in employees' knowledge of their risks for breast cancer
 - Assess changes in employee awareness of existing workplace breast cancer screening programmes, policies, and benefits
 - Assess changes in employee awareness of behaviours that may reduce breast cancer risk
 - Measure changes in the number of women that know about self-examination for breast cancer

- Assessing changes in levels of employee behaviour change:
 - Increases in the number of employees that regularly check for signs and symptoms of breast cancer
 - Increases in the number of employees participating in organised screening programmes

Ongoing measurements every 6 to 12 months after programmes begin are usually appropriate measurement intervals, but measurement timing should be adapted to the expectations of the specific programme.



Resource

For a detailed description of an evaluation plan for workplace programmes that promote breast cancer screening go to the Centers for Disease Control and Prevention (CDC): Workplace Health Promotion, Breast Cancer Screening site at:

<http://www.cdc.gov/workplacehealthpromotion/evaluation/topics/breast-cancer.html>

REFERENCES:

1. Ferlay J, Soerjomataram I, Ervik M, et al. (2013). GLOBOCAN 2012 v1.0, Cancer Incidence and Mortality Worldwide: IARC CancerBase No. 11 [Internet]. Lyon: International Agency for Research on Cancer. Available from: <http://globocan.iarc.fr>, accessed on 21 October 2014.
2. Bloom DE, Cafiero ET, Jané-Llopis E, et al. (2011). The Global Economic Burden of Non-communicable Diseases. Geneva: World Economic Forum.
3. Ekwueme DU, Guy Jr GP, Rim SH, et al. (2014). Health and economic impact of breast cancer mortality in young women, 1970–2008. *Am J Prev Med.* 46:71-9.
4. The World Bank. <http://data.worldbank.org/indicator/SL.TLF.TOTL.IN>; <http://wdi.worldbank.org/table/2.2>
5. WHO (2013). Fact Sheet No339. Available at: <http://www.who.int/mediacentre/factsheets/fs334/en/>. Geneva: World Health Organization.
6. National Breast Cancer Foundation. (2014). Not just an older woman's disease: breast cancer in your 20s and 30s. Sydney: National Breast Cancer Foundation.
7. Zelle SG, Baltussen R. Personal communication. Global calculations based on: *BMJ* 2012;344:e614 doi: 10.1136/bmj.e614 (Published 2 March 2012).
8. IARC Monographs on the Evaluation of carcinogenic risks to humans. Alcohol Consumption and Ethyl Carbamate, Vol. 96. Lyon, France: International Agency for Research on Cancer, 2010.
9. Seitz HK, Pelucchi C, Bagnardi V, La Vecchia C (2012). Epidemiology and pathophysiology of alcohol and breast cancer: Update 2012. *Alcohol Alcohol.* 47:204-212.
10. World Cancer Research Fund / American Institute for Cancer Research. Continuous Update Project Report. Available at: <http://www.dietandcancerreport.org/cup/index.php>.
11. Collaborative Group on Hormonal Factors in Breast Cancer. (2002). Breast cancer and breastfeeding: collaborative reanalysis of individual data from 47 epidemiological studies in 30 countries, including 50302 women with breast cancer and 96973 women without the disease. *Lancet* 360:187–195.
12. Australian Institute of Health and Welfare. (2011). 2010 Australian National Infant Feeding Survey: Indicator results. Canberra: AIHW.
13. Mandal B, Roe BE, Fein SB. (2012). Work and breastfeeding decisions are jointly determined for higher socioeconomic status US mothers. *Review of Economics of the Household*, 28 July, 1-21. doi:10.1007/s11150-012-9152-y
14. WHO. Health topics: Breastfeeding. Available at: <http://www.who.int/topics/breastfeeding/en/>
15. Cancer Research UK. Who is screened for breast cancer? Available at: <http://www.cancerresearchuk.org/about-cancer/type/breast-cancer/about/screening/who-is-screened-for-breast-cancer>
16. Marmot MG, Altman DG, Cameron DA, et al. (2013). The benefits and harms of breast cancer screening: an independent review. *Br J Cancer.* 108:2205–2240.
17. Yabroff KR, Davis WW, Lamont EB, et al. (2007). Patient Time Costs Associated with Cancer Care. *J Natl Cancer Inst.* 99:14-23.
18. Pyenson B, Zenner PA. (2005). Cancer Screening: Payer Cost/Benefit Thru Employee Benefits Programs. Commissioned by C-Change and the American Cancer Society. New York: Milliman Inc.
19. Macmillan Cancer Support. Managing Cancer in the Workplace. <http://www.macmillan.org.uk/Cancerinformation/Livingwithandaftercancer/Workandcancer/Supportformanagers/Employersguide/Managingoverview.aspx>. Accessed: September 12, 2013.
20. World Cancer Research Fund International. Continuous Update Project Report: Diet, Nutrition, Physical Activity, and Breast Cancer Survivors. 2014. Available at: www.wcrf.org/sites/default/files/Breast-Cancer-Survivors-2014-Report.pdf
21. Allen JD, Stoddard AM, Mays J, Sorensen G (2001). Promoting breast and cervical cancer screening at the workplace: results from the Woman to Woman study. *Am J Public Health.* 91:584-590.
22. The guide to community preventive services. Increasing cancer screening: One-on-one education for clients. <http://www.thecommunityguide.org/cancer/screening/client-oriented/OneOnOneEducation.html>
23. Eldridge S, Croker A. (2005). Breastfeeding friendly workplace accreditation: Creating supportive workplaces for breastfeeding women. *Breastfeeding Rev.* 13:17-22.
24. Smith JP, McIntyre E, Craig L, et al. (2013). Workplace support, breastfeeding and health. *AIFS journal Family Matters* No. 93, 201.
25. Centers for Disease Control and Prevention. Breast cancer screening: <http://www.cdc.gov/workplacehealthpromotion/implementation/topics/breast-cancer.html>
26. West R, Michie S. Suitability of smartphones for delivering behaviour change techniques. University College London, September 2013. Available at: <http://www.rjwest.co.uk/slides.php>.
27. McCabe Centre for Law & Cancer, Cancer Council Victoria. (2013). Making the law work better for people affected by cancer. Melbourne: McCabe Centre for Law & Cancer.
28. Gözümlü S, Karayurt O, Kav S, Platin N. (2010). Effectiveness of peer education for breast cancer screening and health beliefs in eastern Turkey. *Cancer Nurs.* 33:213-220.
29. Dang J, Lee J, Tran JH. (2010). Knowledge, Attitudes, and Beliefs Regarding Breast and Cervical Cancer Screening among Cambodian, Laotian, Thai, and Tongan Women. *J Cancer Educ.* 25:595–601.
30. See more at: <http://middleeast.geblogs.com/en/stories/curing/10000-women-receive-breast-cancer-screenings-in-saudi-arabia-2/#sthash.PgGUeKwL.dpuf>



Union for International Cancer Control
Union Internationale Contre le Cancer
62 route de Frontenex • 1207 Geneva • Switzerland
Tel +41 (0)22 809 1811 Fax +41 (0)22 809 1810
email info@uicc.org • www.uicc.org

Bupa
15 - 19 Bloomsbury Way, London, WC1A 2BA
www.bupa.com • [@bupa](https://twitter.com/bupa)

