

INVESTIGATING WOMEN'S NARRATIVES OF BREAST CANCER RISKS: Exploring Environmental Health Literacy In A Population At Risk

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CONTEXT

- **THE ISSUE:** In 2018 over 627,000 women worldwide will die from breast cancer (WHO, 2018). North American women face a lifetime risk for breast cancer of 1 in 9 (Canadian Cancer Society, 2018).
- **CAUSE:** Multiple environmental and lifestyle factors interact with genetic susceptibility throughout life (Russo, 2011).
- **KNOWLEDGE TRANSLATION:** Predominant constructions of breast cancer risk centre on lifestyle, ignoring environmental factors (Brophy et al., 2012; Brown et al, 2006; Gray et al., 2017; Lupton, 1994; McArthur, 2013; Schettler, 2014; Sweeney, 2014).

RESEARCH QUESTIONS

How do women who work in an environment with a demonstrated risk of breast cancer:

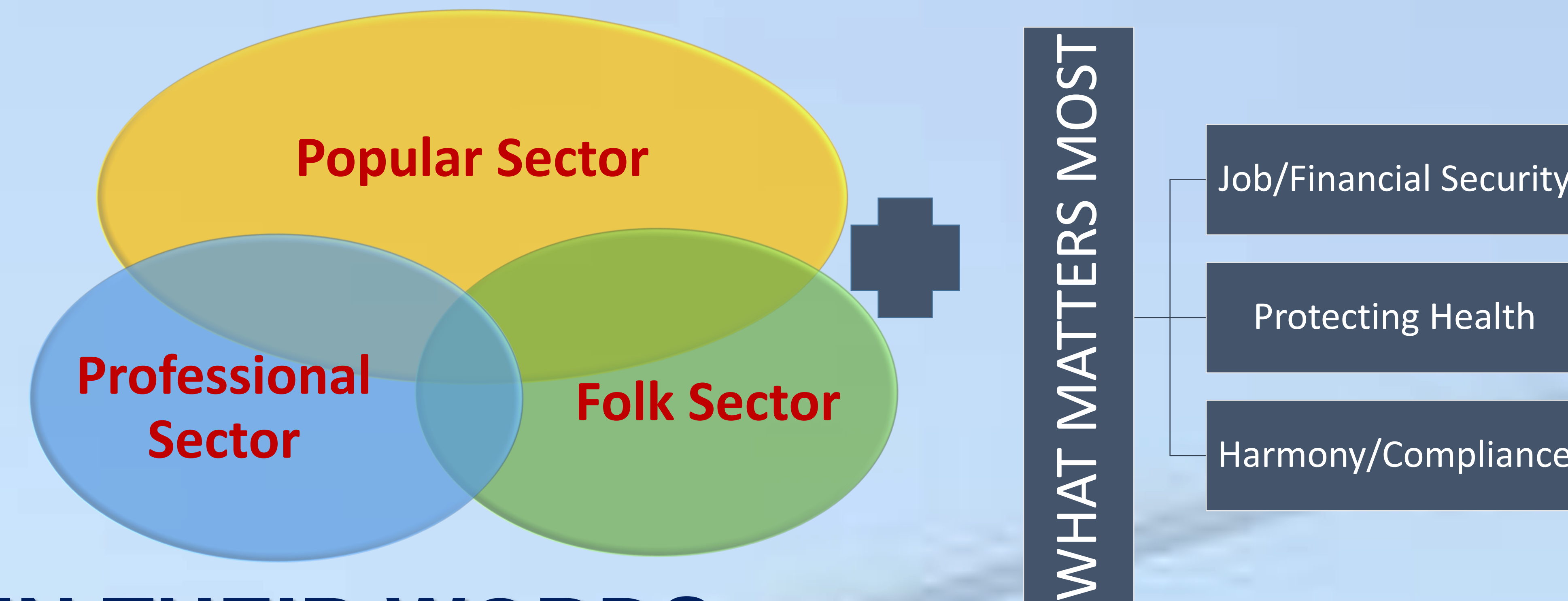
- understand their own risk?
- make decisions about risk mitigation?

THEORY

ARTHUR KLEINMAN'S CULTURAL MODEL:

- How people understand and make decisions about personal health and health risks is influenced by 3 overlapping domains: Popular, Professional and Folk Sectors.
- Which domain has the most influence and how much the domains overlap depends on *what matters most* to a person.

KLEINMAN'S CULTURAL MODEL



IN THEIR WORDS

"Windsor is pretty well known for cancer research at this point. These studies need to be more in the media, make it well known. I am not saying you should plaster it on the side of a building that if you work here this could put you at risk. But definitely put it out there in the community, like: 'hey this may be of use to you, this research could affect you.' I think that is important."

"If 30 people, or 20 people have breast cancer at the bridge, how many at the tunnel, how many the main office, how many at Metropolitan Hospital, how many in Windsor period? When I was at the Cancer Clinic for myself I was amazed at the [number of] files. I am like 'what is happening?'"

"I got hired in my 20s and they literally never brought up health issues whatsoever ... We had 4 months of training, and I would love for that to be part of what a new hire finds out about. We are very concerned about the fumes at work and every once in a while they will send some company out to test it and then they come back with the results that it is all fine. But I don't see how that can be completely true."

"The media and scientists were starting to let us know about the ill effects, but not really anything at the workplace... We were bullet proof and we were led to believe that there wasn't anything to worry about."



"It doesn't run in my family, and I work with so many people that have had breast cancer and we all worked in the same environment. It's on our minds every time we hear somebody say 'I have breast cancer'. We think, 'geez, you know, they worked here.' You kind of have to wonder what is it about my environment?"

"I think that my employer could probably do more for us as far as a cleaner environment. There is enough technology. I think it becomes a financial thing, they just don't want to invest that money in a better, say, a filtration air system and things like that. But I mean, hey, it's my job. I have shown up there every day. I kind of don't have a choice because I do have kids to provide for so it's just one of those things. I have to suck it up and go to work kind and hope that breast cancer isn't my number."

SAMPLE & METHODS

- **LOCATION:** Ambassador Bridge, a locale with exposures demonstrated to elevate risk for breast cancer (Villeneuve et al, 2018).
- **SAMPLE:** 25 women who work or have worked at the Ambassador Bridge.
- **DATA COLLECTION:** In-depth interviews

PRELIMINARY ANALYSIS

Women spoke of:

- **WHICH DOMAIN TO TRUST:** Difficulty ascertaining credible sources of information.
- **PERSONAL BELIEFS:** Environmental exposures that elevate risk (vehicle exhaust, radiation, stress and shift work).
- **EXPERIENCE & HEARSAY:** Unexpectedly high level of breast cancer and other health problems among coworkers. Anecdotal reports of 10-20+ cases in past 2 decades.
- **WHAT NEEDS TO BE DONE:**
 - ✓ Desire for a future study documenting breast cancer cases.
 - ✓ Strategies for improving environmental health literacy, specifically on breast cancer.
 - ✓ Individual and collective solutions for risk mitigation.

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