

# Feasibility of a Multicomponent Breast Health Education Intervention for Vietnamese American Immigrant Women

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This research was supported, in part, by grants from the Oregon Health and Science University School of Nursing Innovation Grants Program and Washington State University in Vancouver (External Mentoring Program and New Faculty Research Start-Up).

Nguyen-Truong, Nguyen, Le, Vy Le, Lau, and Lee-Lin contributed the conceptualization and design. Nguyen-Truong, Nguyen, Le, Vy Le, and Lau completed the data collection. Nguyen-Truong, Pedhiwala, Nguyen, Le, Lau, Lee, and Lee-Lin provided statistical support. Nguyen-Truong, Pedhiwala, Nguyen, Le, Vy Le, Lau, and Lee provided the analysis. All authors contributed to the manuscript preparation.

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Submitted December 2016. Accepted for publication April 4, 2017.

Keywords: Vietnamese; breast; mammography; intervention

ONF, 44(5), 615–625.

doi: 10.1188/17.ONF.615-625

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

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

**Setting:** Portland, Oregon, metropolitan area.

**Sample:** 40 VA immigrant women aged 50 years or older.

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

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

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

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

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

**B**ecause Asian Americans are diverse, originating from more than 50 different countries and speaking more than 100 languages (Gomez et al., 2013), studying different Asian groups separately is imperative. In particular, the cultural health beliefs and practices of Vietnamese American (VA) immigrant women may differ from those of other racial/ethnic groups, which has the potential to affect cancer risks and outcomes (Solanki, Ko, Qato, & Calip, 2016). Data concerning disparities in breast cancer screening from 1990–2008 demonstrate that breast cancer rates are declining among non-Hispanic American women but increasing among Asian American women (Gomez et al., 2013). In addition, VA immigrant women experienced a statistically significant 1.2% annual increase in breast cancer (95% confidence interval [CI] [0.1, 2.2]) (Gomez et al., 2013). Further, this population's rate of mammography (64%) is below the Healthy People 2020 goal of 81.1% (HealthyPeople