

2018



Multicultural Awareness Campaign Final Report Greater Victoria, BC



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Introduction

VIRCS has been on the forefront in improving the quality of services provided to the immigrant and refugee populations of the Capital Regional District (CRD). Founded in 1989, VIRCS assists in the settlement and adjustment of immigrants and refugees in Canada, through the provision of services designed to increase the newcomer's participation in Canadian society.



In July 2016, VIRCS received funding from the Canadian Breast Cancer Foundation (CBCF) which then later merged with the **Canadian Cancer Society** to launch an innovative *Breast Cancer Awareness & Prevention* project to engage immigrant men and women. This was a new addition to the ongoing and successful Healthy Women, Healthy Community Program established through the Settlement Department at VIRCS.

The focus of the 2 year project was to improve education about breast cancer within the multi-ethnic communities of Greater Victoria. It identified gaps in community resources, and provided awareness education to women and men, maintaining consideration of cultural sensitivity issues.

This project concluded on June 29th 2018 and was conducted in two phases:

- *Phase 1 from July 2016 to June 2017* –Over 500 newcomers and immigrants in Victoria, BC, Canada were interviewed or surveyed to determine their awareness and pre-existing knowledge of breast cancer. The results of these surveys and interviews were summarised in the [Multicultural Awareness Campaign Survey Report](#), which is available on VIRCS' website.
- *Phase 2 from July 2017 to July 2018* - The Phase 1 report was disseminated along with recommendations to improve the education and connectedness of the immigrant populations within Victoria about breast cancer, and to identify gaps in community resource education. This information assisted with workshop planning, resource collaboration and implementation of project activities. The survey results were used to design and implement workshops and engage with community stakeholders in resource collaboration/allocation to provide newcomers with accessible and culturally competent information and services related to breast health.

This report describes the activities completed in Phase 2 of the Multicultural Awareness Campaign for Breast Cancer within immigrant communities of Greater Victoria, BC. Any questions or comments about this report can be sent to keri@vircs.bc.ca.

The Healthy Immigrant Effect and Access to Healthcare Services

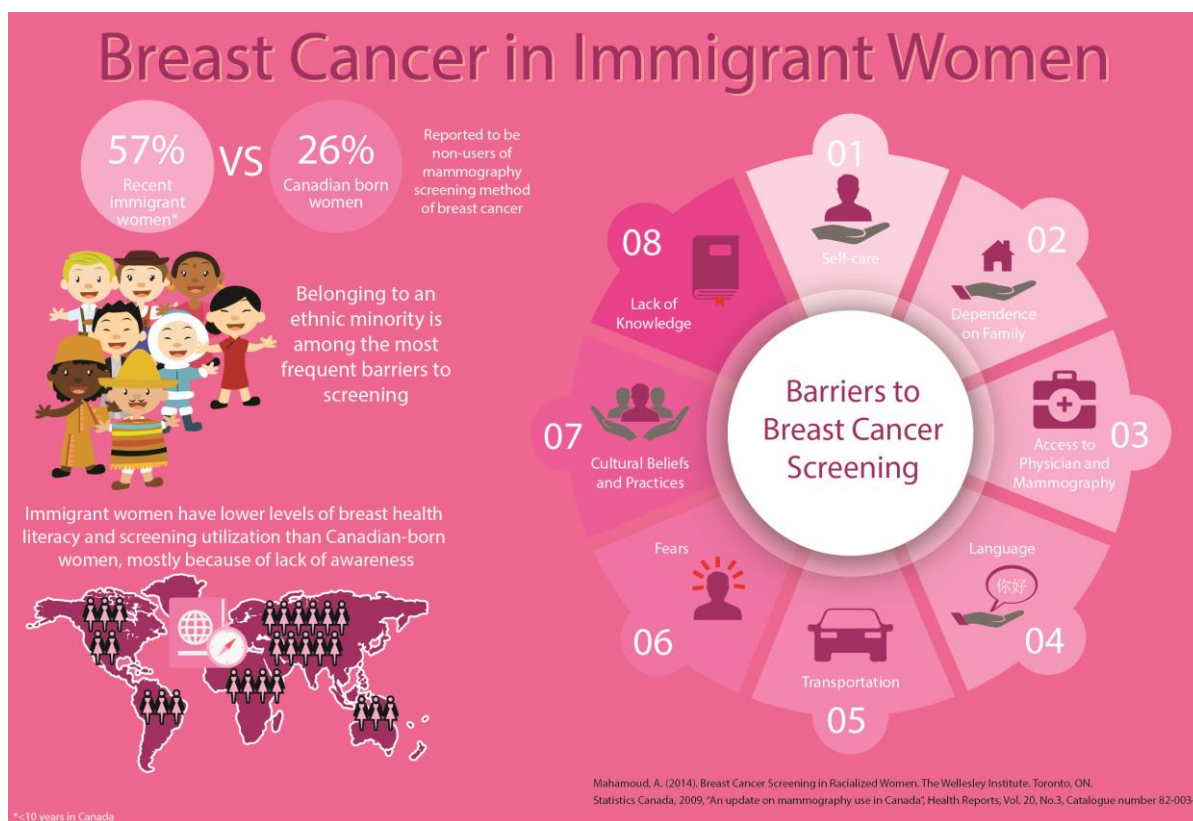
According to research, immigrants on average are healthier on arrival to Canada compared to the general population. This health advantage declines and eventually disappears following settlement (Lebrun 2012). Various reasons for the initial immigrant health advantage exist, such as self-selection of healthier people who are motivated to try and immigrate; or the effect of immigration authorities making entry for the sick and frail difficult through medical screening (Lebrun 2012; Citizenship and Immigration Canada 2011). Other reasons for the healthy immigrant effect may include socio-cultural superiority of diet, physical activity, and restricted use of substances such as alcohol (Gushulak et al. 2011).

Following migration and settlement, immigrant markers of health, on average, begin to decline (Gushulak et al. 2011). In particular, refugees, low-income immigrants, and non-European immigrants are at the highest risk for experiencing declining health following migration (Gushulak et al. 2011). While health status is not equivalent across all subgroups of immigrants, similar factors such as economic status, access to transportation, linguistic competence, and other socio-cultural barriers often affect the accessibility of health care services (Gushulak et al. 2011). A shorter length of stay in Canada and low English language proficiency are strongly correlated with barriers to access health care and the decision to access primary and preventative care (Lebrun 2012).

In 2005, one third (36%) of new immigrants reported no knowledge of either of Canada's official languages, English or French, making linguistic challenges one of the most significant barriers for immigrants trying to access health services (Gushulak et al. 2011). One study found that poor proficiency in English or French is significantly associated with poor self-reported health, with a greater association seen among women (Pottie et al. 2008). Significant improvements in translation services and cultural sensitivity training for health care providers have resulted in noticeable improvements in treatment and management of health conditions in immigrants (Gushulak et al. 2011). However, a large disparity still exists in understanding and uptake of preventative health measures and public health education initiatives (Gushulak et al. 2011).

In particular, immigrant women seem particularly vulnerable to low rates of preventative healthcare uptake (Ahmad et al. 2011). One study found that Canadian women born in Asia were two times less likely to have had a mammogram in their lifetime compared to Canadian-born women (Maxwell et al. 2001). Surveys have found that childcare, household duties, and familial orientation are the major self-reported reasons for placing a low priority on self-care among female immigrants (Ahmad et al. 2005). Women reported that they were hesitant to place a burden on their family by taking a day off or by asking a family member to take them to a clinic (Ahmad et al. 2005).

Figure 1: Immigrant Women and Breast Cancer Screening in Canada



In the case of breast health, breast screening uptake amongst both Asian (i.e., East Asian, Southeast Asian, South Asian, and Arab/West Asian) and Hispanic immigrants appears to be hampered by cultural norms treating discussion and examination of the breast as taboo. Additional factors include: misinformation about the benefits and risks of screening, extreme fear and fatalism associated with breast cancer, and false perception of low susceptibility (Sun et al. 2010; Lu et al. 2012; Austin et al. 2002; Vahabi 2011). Finally, cancer in general is its own taboo, due to associations with death and beliefs in fate or karma (Schoueri-Mychasiw et al. 2013).

Numerous studies have been undertaken to assess the efficacy of breast screening promotion strategies among immigrant women. In one study, concept mapping with immigrant women allowed self-identification of the health promotion methods they believed would improve screening, including: engagement of the family unit, use of first language in education, peer learning, improved access to family practitioners, education through socio-cultural specific media, opportunity for two-way dialogue, and provision of print materials to take home (Ahmad et al. 2013).

A systematic review of intervention strategies reveals that combining multiple strategies and interventions is more effective than offering single interventions (Lu et al. 2012). Community-

based workshops combined with supports such as scheduling/transportation assistance, mobile screening services, cultural sensitivity training for health professionals, and training of outreach workers to assist physicians with overcoming language and cultural barriers all were found to be effective (Lu et al. 2012). Media campaigns and mailed educational materials were not found to improve uptake of screening guidelines (Lu et al. 2012). Cost effectiveness and long term sustainability of various programs have not yet been sufficiently studied.

Phase 2: Multicultural Awareness Campaign Activities

VIRCS recognizes that newcomers often consider health issues to be a family issue. Therefore, Phase 2 of the campaign focused on delivering outreach activities and Family Health Talks to provide meaningful education about breast cancer awareness.

From October 2017 to June 2018, VIRCS delivered 10 client-centred project activities in which about 40 newcomer women and men in as well as the multicultural staff participated in the workshop activities completed. In Phase 1, almost 34% of survey respondents recommended various methods of education for breast cancer awareness and education such as workshops, courses, support groups, print materials, and face-to-face meetings. Prevention of breast cancer and general knowledge were the two most important topics people wanted to learn about. **(Workshop topics covered are listed in Table 1, below).**

The participants' countries of origin were diverse, with 15 countries represented: Syria, Libya, Afghanistan, China, Sudan, Eritrea, Egypt, Iran, Saudi Arabia, Colombia, Chad, Mexico, Palestine, Nigeria, and Japan. The volunteer recruitment and selection was an ongoing project activity. Two volunteer orientation meetings were held: one in February and the other in June. Four breast health champions were identified to continue the education and awareness activities in the fall.

Workshops were designed to address the various, unique challenges faced by newcomers to Canada regarding breast cancer awareness and general healthy lifestyle practices. These mainly included: cultural sensitivity challenges, how family members can be supportive, a general understanding of the BC healthcare system, and local services and agencies that help family members who have received a positive cancer diagnosis.

Table 1: VIRCS' Event & Workshop Schedule from October 1st 2017 to June 30th 2018

#	WORKSHOP TITLE	DATE	# PARTICIPANTS
1	Breast Cancer Awareness Info Day - VIRCS WEAR PINK!	05-Oct	8
2	VIRCS WEAR PINK! Access to Community Resources and Info - VMHFF	14-Oct	10
3	Introduction to Breast Cancer & Women's Wellness (Intro to Breast Cancer)	21-Feb	6
4	How to Support a Family Member with Breast Cancer	28-Feb	12
5	Cultural Perceptions around Women's Health & Wellness	05-Mar	12
6	Eating Well & Food Security - Useful Tips for Everyday Living	19-Mar	8
7	Eating Well - Food Safety and Cooking Demo	09-Apr	14
8	Family Health Talk - Cancer Risk Reduction	16-Apr	7
9	Family Health Talk - Stress Reduction	30-Apr	9

Note: There were two volunteer meetings: February 14th 2018 and June 13th 2018

The information shared during the project activities was delivered using a variety of methods, including: outreach initiatives, peer support for language translation, PowerPoint presentations, interactive activities, quizzes and games with prizes, a healthy cooking demonstration, pair discussions, and the availability of linguistically diverse printed materials from the Canadian Cancer Society for participants to take.



One workshop facilitator had experienced supporting an immediate family member through this experience. She was also fluent in a second language, which worked well for some participants. Childminding was also provided in the early part of the program to encourage mothers to attend. Food and bus tickets were provided to participants. Participants completed evaluations at the end of each workshop.

In all, the workshop activities created a community of participants who were eager to learn about the Canadian Health Care System, to practice English, and to learn more about breast cancer and the health services they could benefit from.

October is usually celebrated as breast cancer awareness month. VIRCS' organized two Wear Pink! Days to launch Breast Cancer Awareness activities in October 2017, signature events designed to spark culturally sensitive interest in the topic. Two Breast Health Advocates/Champions were engaged to deliver an



interactive quiz to attendees at both VIRCS Wear Pink Days. The events were held at the VIRCS' downtown office and at the VIRCS' Multicultural Health and Food Fair at CDI College.

At the downtown office event, staff and clients were reminded to wear pink on that day to express their solidarity in making breast cancer awareness and knowledge sharing an issue that all members of the family should address together. Provided were pink food and drinks, prizes for the 3 persons who wore the most pink, and more. A breast cancer survivor was the guest speaker at this event. She was invited to speak for 45mins about her experience as a breast cancer survivor. She explained why it is important to be an advocate for your health, and described the strength she gained from walking through this experience with the support of her family and employer. Words cannot describe how touching it was to hear her story of strength and resilience. Photos of the [Wear Pink Day](#) event can be viewed on VIRCS' Facebook page.

Table 2 (below) outlines the Project Activity Schedule from July 2017 to June 2018.

Table 2: Project Activity Schedule - July 2017 to June 2018

#	Activity	Duration
1	Disseminate project report to community resource agencies, immigrant serving not for profit organisations	July
2	Volunteer recruitment intake and orientation activities	August
3	Assemble project team and conduct weekly meetings to plan a breast cancer awareness campaign for October	September
4	Launch Wear Pink! Campaign at VIRCS and the Multicultural Health and Food Fair	October
5	Volunteer meetings and debriefing	November
6	Christmas Winter Break & VIRCS office move	December
7	Volunteer recruitment, intake and orientation at new office	January
8	Recruit and assemble project team Breast/Women's Health Advocate Program	January to May
9	Launch series of workshops	February to May
10	Project team meetings and activities	February to May
11	Create project promotion materials	February to May
12	Post on social media about monthly workshops	February to May
13	Collect of participant feedback	February to May
14	Conduct background research for Breast/Women's Health Advocate Program	April to May
15	Find donations for survey prize incentives	August to January
16	Begin writing survey report	March to June
17	Write final report and submit for approval	June to July
18	Submit final report to funder	June/July
19	Breast Health Advocate Program	July and Ongoing

Participant Feedback, Successes and Challenges

Overall, participants consistently found the family health talk workshops to be relevant to their needs, valuable, and of high quality to their needs. Overall, *How to Support a Family Member with Breast Cancer* had the highest workshop satisfaction. *Eating Well – Food Safety and Cooking Demo* had the highest number of participants, with 14 persons in attendance. In terms of relevance and value, the *Stress Reduction* workshop was important for participants in the context of their daily challenges in their settlement and adjustment to Canada, and in dealing with ongoing stressors. Based on the participants' evaluations, the *Cancer Risk Reduction* topic had the highest referral as a workshop that they would recommend a friend to attend. Similarly, in terms of the overall quality this workshop was found to be excellent in terms of the absence of ways to improve it. One thing to keep in mind, no participant provided an evaluation that indicated an Ok or a ranking below this average. This is a strong testament to the high level of satisfaction with all of the workshops delivered in the campaign. (The evaluation form used can be viewed in Appendix 1.)

At the *VIRCS WEAR PINK! Day* events, participants were able to express their solidarity for breast cancer awareness by wearing pink. All VIRCS' staff were able to participate in the awareness activities planned for that day, which engaged over 50 people. *The WEAR PINK! Day 2* was held at CDI College at the VIRCS' Multicultural Health and Food Fair. Participants were excited to attend this annual community event, which allowed them to network with over 20 community service organisations that offer services with respect to health, wellness, food security, and other needs. Over 150 people attended this community event. Again, Breast Health Champions/Advocates were able to test participants' awareness of breast cancer myths and facts, and each participant was given a small treat for taking the quiz.

There were a few challenges that arose during the project. On the day of the first workshop Introduction to Breast Cancer, it had snowed in Victoria. This workshop had the lowest number of attendees. The availability of childminding was disrupted during the middle of the project but was later addressed and resolved. Also, some participants were reluctant to have their photos taken and, therefore, did not sign the consent waiver. A last challenge encountered was the planning of 15 to 30 participants to sign up mammography screening. At each workshop, we had a sign-up sheet for this activity; however, one attendee present had already arranged for her own mammography screening, while the other did not meet the eligibility requirements. As a result, this activity did not happen.

The success of this project required significant volunteer effort. The volunteers also became the participants' learning supports during workshops by sitting beside a participant to clarify anything that was not clear. A challenge encountered was the unavailability of Arabic translators. Their presence would have helped create a more culturally safe environment. Nevertheless, this did not impact the amount of fun experienced at each workshop. Another added value was that most participants are mothers and the workshops presented a great opportunity for them to make connections with each other and with new participants. Although attendance levels were somewhat lower in this phase of the project, several participants invited their family members to come to the workshops, and also remained committed to attending. They even began inviting their friends to join them.

Table 3: Family Health Talk - Workshop Scorecard Matrix on Satisfaction, Relevance, Referral and Quality

Ranking from Highest to Lowest	Overall Rating	Relevance & Value	Workshop Referral	Workshop Quality
1.	How to Support a Family Member With Breast Cancer	Family Heath Talk- Stress Reduction	Family Heath Talk- Cancer Risk Reduction	Family Heath Talk- Cancer Risk Reduction
2.	Eating Well & Food Security- Useful Tips For Everyday Living	Family Heath Talk- Cancer Risk Reduction	Cultural Perceptions Around Women's Health & Wellness	Cultural Perceptions Around Women's Health & Wellness
3.	Introduction to Breast Cancer & Women's Wellness (Intro to Breast Cancer)	Eating Well- Food Safety and Cooking Demo	Family Heath Talk- Stress Reduction	Introduction to Breast Cancer & Women's Wellness (Intro to Breast Cancer)
4.	Cultural Perceptions Around Women's Health & Wellness	How to Support a Family Member With Breast Cancer	Eating Well & Food Security- Useful Tips For Everyday Living	Eating Well- Food Safety and Cooking Demo
5.	Family Heath Talk- Cancer Risk Reduction	Introduction to Breast Cancer & Women's Wellness (Intro to Breast Cancer)	Eating Well- Food Safety and Cooking Demo	How to Support a Family Member With Breast Cancer
6.	Family Heath Talk- Stress Reduction	Cultural Perceptions Around Women's Health & Wellness	How to Support a Family Member With Breast Cancer	Family Heath Talk- Stress Reduction
7.	Eating Well- Food Safety and Cooking Demo	Eating Well & Food Security- Useful Tips For Everyday Living	Introduction to Breast Cancer & Women's Wellness (Intro to Breast Cancer)	Eating Well & Food Security- Useful Tips For Everyday Living

Note: Please refer to Appendix 2 for individual workshop scorecards

Breast Health Advocate/Champion

VIRCS' created a **1 in 8 Campaign** for Breast Health Champions/Advocates to provide education and awareness about women's health issues. One of the goals of this campaign is to bridge the gap between newcomers lack of access to family doctors and receiving information about breast cancer in Canada.

One Breast Health Advocate/Champion will speak with 8 women and men in their life about why women's health is important and key information about breast cancer. In turn, each person receiving information will be asked to share what they have learned with 8 other women and men. First year students from the UBC Island Health Medical Program designed wallet cards and pamphlets for distribution. The wallet card provides information and key reminders about breast health information. In recognizing that the Breast Health Champions/Advocates are volunteers with their lives and busy schedules, we wanted them to deliver the outreach activities in an engaging and meaningful way. The Breast Health Advocate/Champion will pass along a wallet card and/or pamphlet to someone they will have an intimate but light conversation about immigrant women's health. Based on the success of the Wear Pink! Days, we have found that wearing pink clothing and serving pink food creates a warm and inviting atmosphere for people to be curious in asking questions. The Breast Health Advocate/Champion can choose to think out of the box and organize a Wear Pink party/mixer at home with friends. Invitees can show up wearing pink and play the facts and myths game about breast cancer and then move into a small group discussion about the new information that they learned. Another option on a smaller scale is to organize a one-on-one get together with a pink theme and do the same activities.

The Breast Health Advocates/Champions were selected based on their interest, language competency in both English and a second language, and commitment to advocate for immigrant women to see their health as a priority in order to give their best to support the family. All Advocates/Champions are female and, unfortunately, we were unable to find a male champion/advocate. Sixty two percent of these champions are between ages 20 to 30 while the others are within the 40 to 50 age group.

Given the younger age range of the champions, we recognized the importance to also share information about cervical cancer as this topic is more relevant for the younger social network of the champions/advocates. To ensure the commitment of volunteer they will receive a \$10 gift card to a local coffee shop. The 2018 Breast Health Champions/Advocates are Soraya Centeno, Ana Maria Pavon Marin, Kyoungmi Lee, Sangyal Tsomo, Mabel Martinez Dussan, Corrine Palatchi, Emem Adesoye, and Mabel Martinez.



Conclusion

In all, VIRCS is again grateful for the financial support from Canadian Cancer Society. This breast cancer awareness project for newcomers has enabled 40 immigrant women, men and their families to receive information and tools to improve their awareness and importance of health, and wellbeing to make their settlement into Canada more optimistic. VIRCS is thankful for the opportunity to deliver such a meaningful program that has a positive impact on our clients, volunteers and staff.

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Appendix 1: Workshop Evaluation Form

Workshop Title:

Date:

1. Today's workshop was...

Excellent Very good Good OK Not good Other

Any comments:

2. Did you learn anything new?

Yes No Other

Please comment:

3. Is there anything we can do to make this workshop better?

Yes No I am not sure

If yes, please comment:

4. Would you recommend this workshop to a friend?

Yes No I am not sure

5. Any other comments?

Appendix 2: Multicultural Breast Cancer Awareness Campaign Individual Workshop Score Cards

Workshop # 1	
<i>Introduction to Breast Cancer & Women's Wellness (Intro to Breast Cancer)</i>	
Date of Workshop:	Number of Participants:
February 21, 2018	6
Overall Satisfaction	
66% of participants found the workshop to be excellent	
33% of participants found the workshop to be very good	
Relevance & Value	
100% of participants found the information to be relevant and valuable	
Workshop Referral	
*Not measured for this workshop	
Workshop Quality	
50% of participants said the workshop could be improved	
33% of participants said that no improvement is needed	
16% of participants were not sure if the workshop could be improved	
Other Comments	
Having time to make conversations slowly other than rushing (would be beneficial)	
More time	

Workshop #2

This workshop had the highest rating for overall participant satisfaction.

How to Support a Family Member With Breast Cancer

Date of Workshop:

Number of Participants:

February 28, 2018

11

Overall Satisfaction

71% of participants found the workshop to be excellent

28% of participants found the workshop to be very good

Relevance & Value

100% of participants found the information to be relevant and valuable

Workshop Referral

57% of participants said they would recommend this workshop

28% of participants said they would not recommend this workshop

14% of participants said they were unsure of they would recommend this workshop

Workshop Quality

71% of participants said the workshop could be improved

28% of participants said that no improvement is needed

Other Comments

More time to make research

Good job

Thank you

Workshop #3	
<i>Cultural Perceptions Around Women's Health & Wellness</i>	
Date of Workshop:	Number of Participants:
March 7, 2018	12
Overall Satisfaction	
56% of participants found the workshop to be excellent	
22% of participants found the workshop to be very good	
22% of participants found the workshop to be good	
Relevance & Value	
100% of participants found the information to be relevant and valuable	
Workshop Referral	
100% of participants said they would recommend this workshop	
Workshop Quality	
44% of participants said the workshop could be improved	
44% of participants said that no improvement is needed	
11% of participants were not sure if the workshop could be improved	
Other Comments	
More deep problems needed	
High number of participants	
Thank you	
Opportunity to talk and share	

Workshop #4	
<i>Eating Well & Food Security- Useful Tips For Everyday Living</i>	
Date of Workshop:	Number of Participants:
March 19, 2018	8
Overall Satisfaction	
71% of participants found the workshop to be excellent	
28% of participants found the workshop to be very good	
Relevance & Value	
86% of participants found the information to be relevant and valuable	
Workshop Referral	
86% of participants said they would recommend this workshop	
14% of participants said they were not sure if they would recommend this workshop	
Workshop Quality	
57% of participants said the workshop could be improved	
14% of participants said that no improvement is needed	
28% of participants did not respond	
Other Comments	
Less paper work may be better	
Needed more understanding	
Help each other or tell people to come	
Workshop may need to be simpler so participants can understand more	

Workshop #5	
<i>Eating Well- Food Safety and Cooking Demo</i>	
Date of Workshop:	Number of Participants:
April 9, 2018	14
Overall Satisfaction	
11% of participants found the workshop to be excellent	
88% of participants found the workshop to be very good	
Relevance & Value	
100% of participants found the information to be relevant and valuable	
Workshop Referral	
66% of participants said they would recommend this workshop	
11% of participants said they would not recommend this workshop	
11% of participants said they were not sure if they would recommend this workshop	
11% of participants did not respond	
Workshop Quality	
44% of participants said the workshop could be improved	
33% of participants said that no improvement is needed	
22% of participants were not sure if the workshop could be improved	
Other Comments	
Fun quiz, video demonstration, etc. would be helpful	
We should try to cook by ourselves	
New and fun way of learning food safety (chef cooking and teaching at the same time)	
Thank you	

Workshop #6	
<i>Family Health Talk- Cancer Risk Reduction</i>	
Date of Workshop:	Number of Participants:
April 16, 2018	7
Overall Satisfaction	
33% of participants found the workshop to be excellent	
66% of participants found the workshop to be very good	
Relevance & Value	
100% of participants found the information to be relevant and valuable	
Workshop Referral	
100% of participants said they would recommend this workshop	
Workshop Quality	
16% of participants said the workshop could be improved	
50% of participants said that no improvement is needed	
33% of participants were not sure if the workshop could be improved	
Other Comments	
Thank you so much	

Workshop #7	
<i>Family Heath Talk- Stress Reduction</i>	
Date of Workshop:	Number of Participants:
April 30, 2018	9
Overall Satisfaction	
<p>33% of participants found the workshop to be excellent</p> <p>44% of participants found the workshop to be very good</p> <p>11% of participants found the workshop to be good</p> <p>11% of participants found the workshop to be ok</p>	
Relevance & Value	
100% of participants found the information to be relevant and valuable	
Workshop Referral	
100% of participants said they would recommend this workshop	
Workshop Quality	
<p>11% of participants said the workshop could be improved</p> <p>22% of participants said that no improvement is needed</p> <p>55% of participants were not sure if the workshop could be improved</p> <p>11% of participants did not respond</p>	
Other Comments	
<p>It was helpful for the stress buster remedies</p> <p>More activities needed</p> <p>Thank you</p>	

Appendix 3: Family Doctors on Vancouver Island: Information Guide

Why is it important to have a Family Doctor?

- To create a relationship between the family and the doctor and create trust.
- These relationships are important as having a connection will help the doctor better understand how to help you if they get to know some social aspects of your life and your family.
- A family doctor will get to know your past and present medical information, and so will be better able to identify future problems. This will result in a more thorough and personal experience that you would not receive through a walk in clinic.
- For children having a family doctor can be important in watching the child grow and mature, and to better identify problems if there is a change in behavior or health
- As seen in the work of “international research of Dr. Barbara Starfield and the Canadian studies by Marcus Hollander, that demonstrated improved patient outcomes, reduced mortality, decreased hospitalizations and reduced health-care costs” as benefits of having a family doctor (see “[Five reasons why you need a family doctor](#)”).

How to Find a Family Doctor in Victoria

- Call **8-1-1** which will connect you with a healthcare professional at [HealthLink BC](#) who can help you identify any physicians in the community who are accepting new patients. They also will be able to provide you with information regarding walk-in clinics in your area. Translation services in more than 130 languages also are available.
 - If you are deaf or hearing impaired, you can call **7-1-1**.
- Ask family/friends whether their family doctor is taking new patients.
- If there is a walk in clinic that you go to regularly, it is worth asking whether any of the doctors there is taking on new patients. Also, getting to know a specific doctor there may convince them to take you on as a patient.
- Finally, the Victoria Medical Society website provides a list of [doctors in Victoria who are accepting new patients](#).

Is it Possible to Find Languages Spoken by Physician?

- The [Physician Directory](#) on the College of Physicians and Surgeons of British Columbia College of website allows one to search for a doctor who speaks another language besides English.
 - The language(s) spoken by any individual physician is also displayed when searching doctors generally.
- [Iamsick.ca](#) is a website where one can search for clinics and other medical resources in a certain area. Searches can also be limited to specific languages spoken.

Alternate Options for Someone without a Family Doctor

- Find a neighbourhood Walk in Clinic via an internet search using Google maps
- Access sexual health clinics for specific purposes (e.g., [Island Sexual Health](#), located at 3960 Quadra St, Suite #101, in Victoria, BC V8X 4A2)
- The hospital is an option for emergencies that cannot wait for long wait times at a walk in clinic.
 - The hospital may also have a lengthy wait time, but may be worth approaching if further care is most likely needed (ex. CT scan, stitches, X-ray, emergency surgery...)
- Speak to a pharmacist for questions regarding medication, bee stings, or allergies as they may be useful in assisting