

Counseling increased mammography use among low-income women with health insurance

June 29 2010

Even with health insurance, low-income women had lower rates of mammography screening than middle-class women, but a counseling program increased the likelihood of screening.

"[Health insurance](#) is a necessary condition for screening, but it is apparently not a sufficient condition," said Nasar Ahmed, Ph.D., chair of epidemiology and biostatistics at the Robert Stempel College of Public Health and [Social Work](#) at Florida International University.

Ahmed was the lead researcher on a recent report published in *Cancer Epidemiology, Biomarkers & Prevention*, a journal of the American Association for Cancer Research, which sought to determine the best way to increase compliance among low-income women.

The researchers identified 2,357 women who were non-compliant with their mammography screening, and randomly assigned them to one of three groups. The first group acted as a control, while the second group consisted of those who received a formal letter from their managed care organization reminding them of the need for screening. The third group received a second letter from their primary physician and, if still non-compliant, counseling from lay health workers.

The women in the trial had an average age of 53 years; 45 percent of the target population was white, 12 percent was Hispanic and 43 percent was

black. Participants' annual family income was about \$7,000 and all had health insurance for the previous five years.

Despite having health insurance, however, the screening rate in the control population was only 13.4 percent.

For the women who received a letter from their managed care organization, the rate increased to 16.1 percent.

The largest increase was for the women in the personal counseling group, where the rate was 27.1 percent, still well below general population rates. A letter from their primary care physician increased the likelihood of screening by 80 percent, while personal counseling tripled the rate of screening.

James Marshall, Ph.D., professor of oncology at the Roswell Park Cancer Institute, and a senior editor of [Cancer Epidemiology, Biomarkers & Prevention](#), said this study shows how low-income populations have challenges that go beyond mere finances.

"A middle-class person can hop in their car and go to the clinic. How does a low-income woman find someone to watch her kids and find the transportation?" said Marshall. "Also, middle-class people take the culture of bureaucracy for granted, but it can be intimidating for low-income people."

Marshall said Roswell Park has programs where lay health counselors go into area churches to reach minority, low-income [women](#) and they have found that process to be effective. In addition, Roswell Park has instituted a special navigator program for patients.

"A person from the community can make all the difference in the message," said Marshall, who was not associated with this report.

Provided by American Association for Cancer Research

Citation: Counseling increased mammography use among low-income women with health insurance (2010, June 29) retrieved 4 May 2024 from <https://medicalxpress.com/news/2010-06-mammography-low-income-women-health.html>

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