

# Jordan Breast Cancer Program

## An enabling environment for prevention and early detection in low resources settings

Ms. Rana Ghafary  
Head of Advocay and Policy Unit

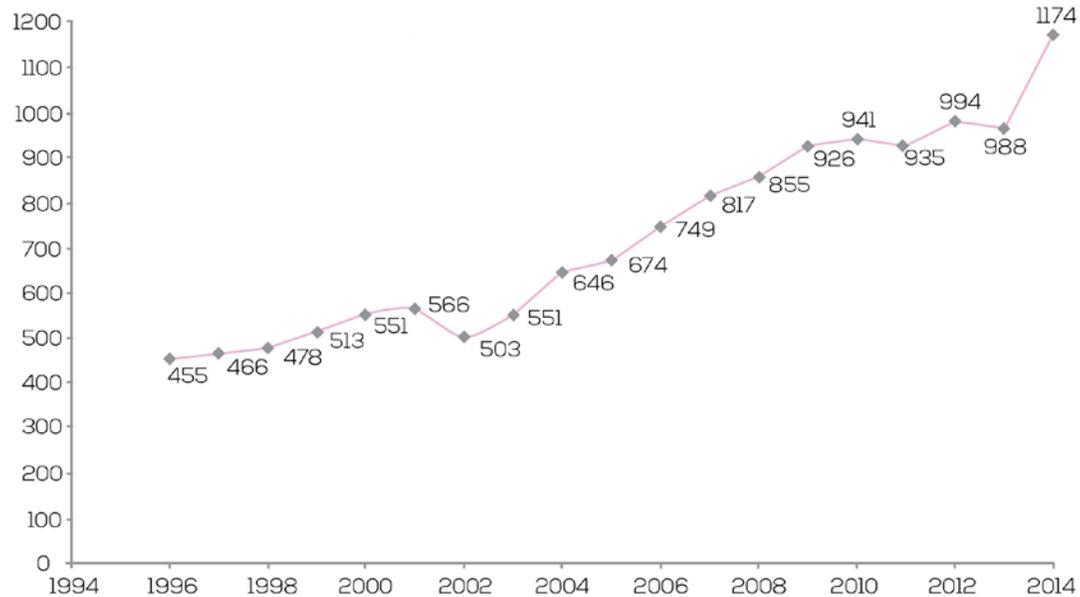


**Jordan Breast  
Cancer Program**

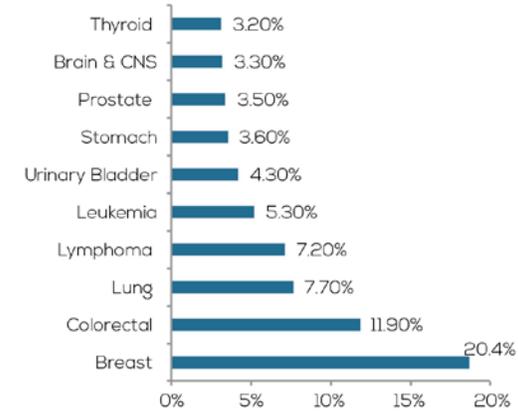
البرنامج الأردني لسرطان الثدي

# Jordan Breast Cancer Program

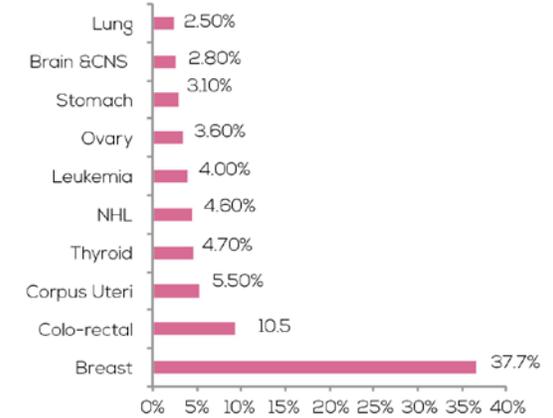
Over the past years breast cancer continues to grow on yearly basis



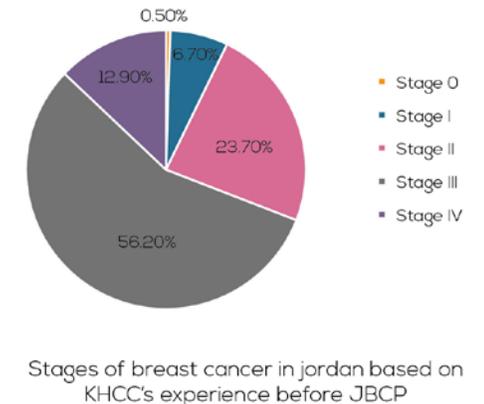
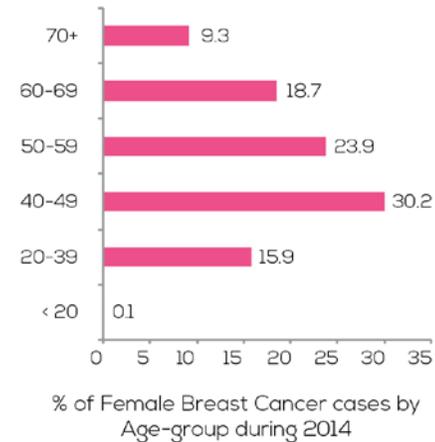
Breast cancer is no.1 cancer in Jordan



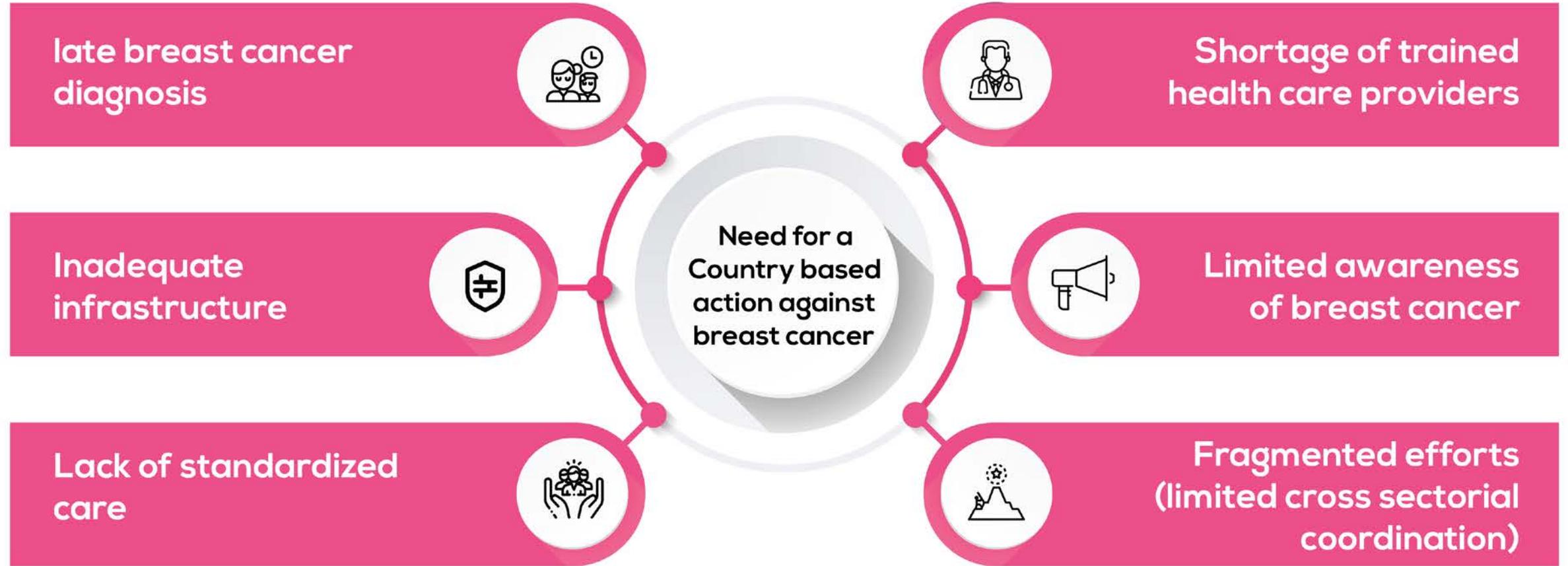
Ten most common cancers among Jordanians (both genders) 2014



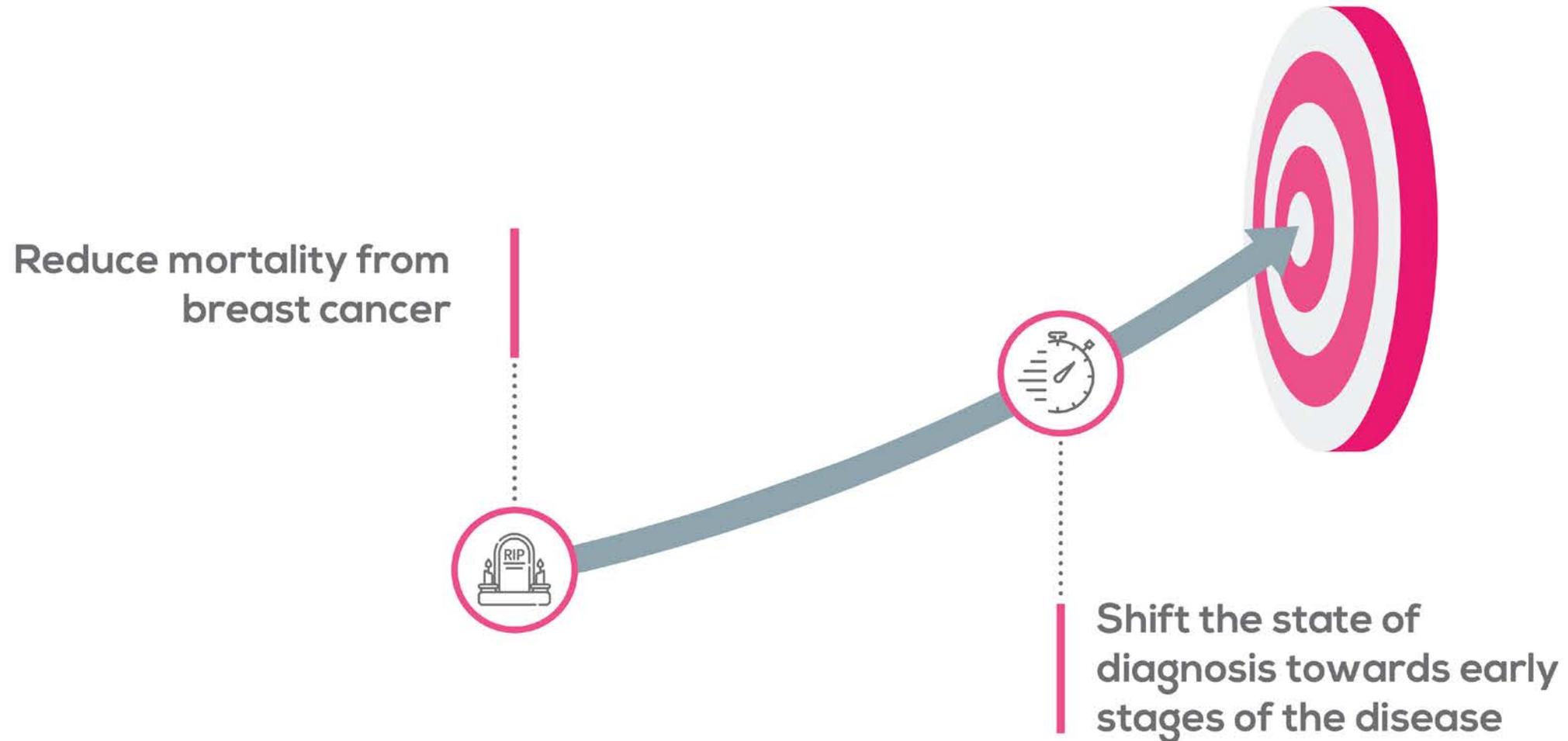
Ten most common cancers among Jordanian females, 2014



# Late diagnosis and shortcomings of the health care system presented the need for national interventions



# Leadership of national breast cancer early detection efforts was entrusted to KHCF/KHCC in cooperation with the Ministry of Health



# JBCP's strategic vision was based on a needs analysis study that indicated four groups of main challenges hindering early detection of breast cancer in Jordan

## Capacity Building

Lack of



Training facilities



Training programs



Trained Female Technicians



Academic/Training curricula

## Service Delivery



Unequal access to service



No screening policy



Unequal distribution of service

## Quality Assurance

Lack of



Certification programs



Performance management programs



Policies/ Procedures

## Public Awareness



Taboo/ social cultural barriers



Fear of diagnosis

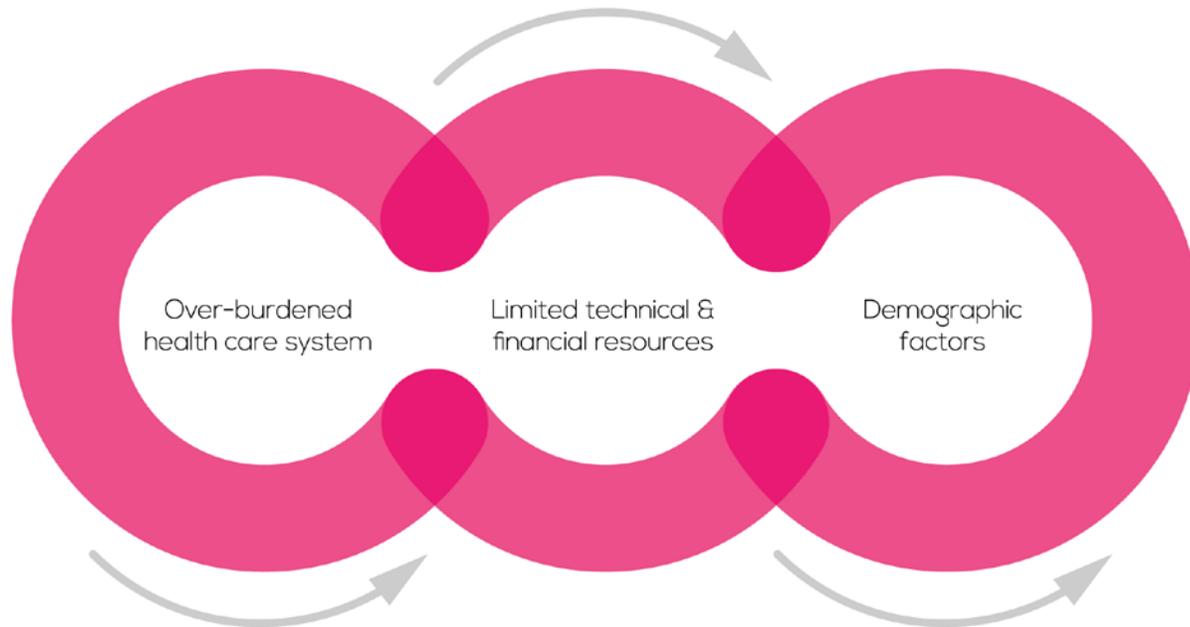


Mis-conceptions about the disease



fragmented awareness efforts

# Operating in a limited resources setting Jordan planned its country action against breast cancer based on the “early diagnosis” approach



## Jordan's Early detection strategy

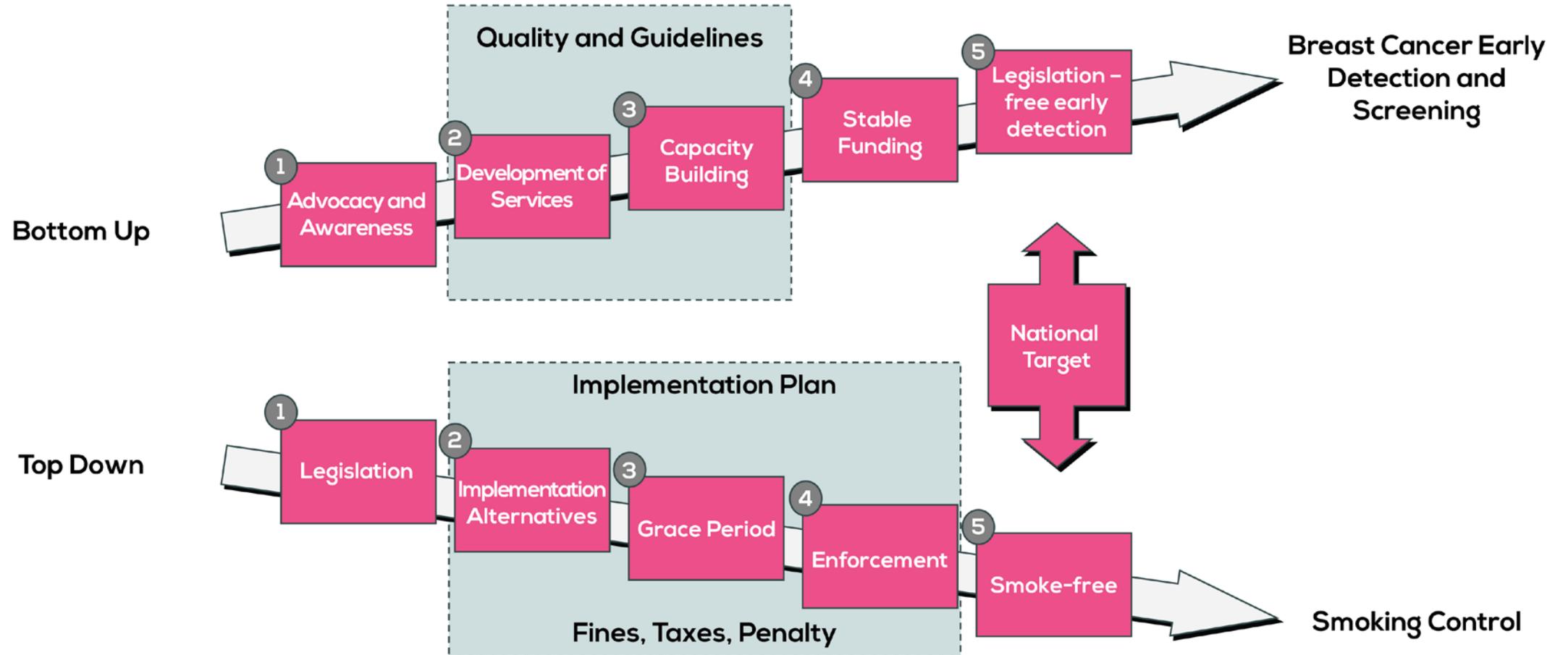


**Early diagnosis**

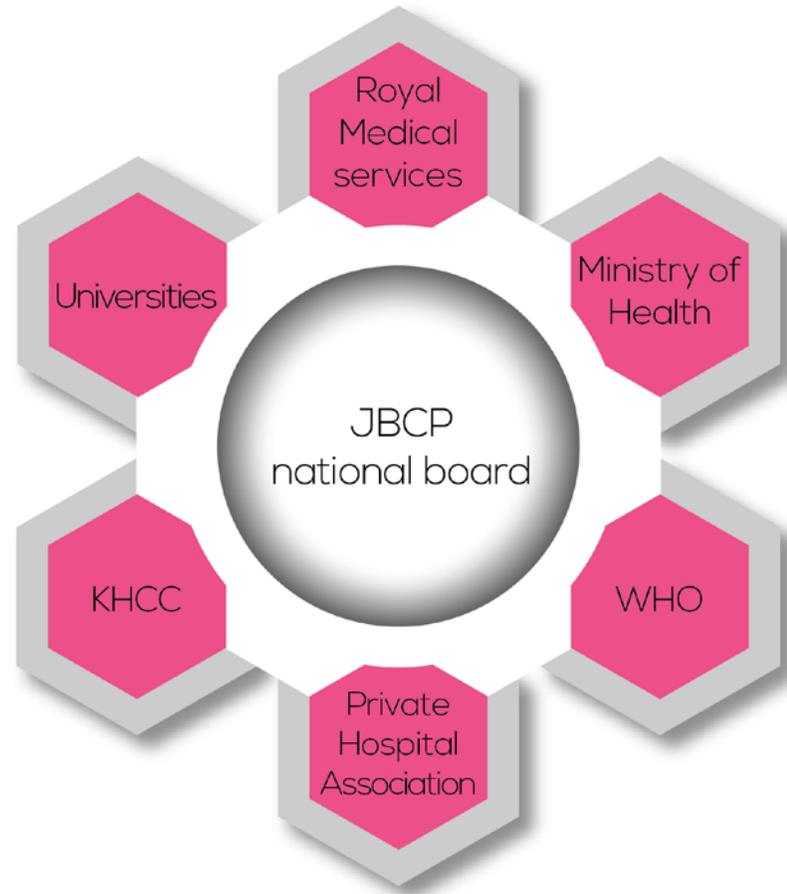


**Population based screening**

JBCP's current efforts in the development of services and capacity building enable early diagnosis and will serve as preparatory steps in case of early detection strategy upgrade



## JBCP's participatory approach maximizes breast cancer early detection efforts in a limited scenario setting



- **Coordinated and aligned efforts from planning to implementation**
- **Synergy across sectors involved in breast cancer control**
- **Pooling/Capitalizing on limited available resources**
- **Maximized reach and impact in interventions implemented**

# Our Approach and Scope of Work

Breast Health **System Strengthening** to ensure **supply** and **access** to Quality Services

## Service Delivery

Infrastructure and Equipment

HR and Capacity Building

Opportunistic Screening

## Quality Management

Guidelines and SOPs

Accreditation

Creating an **Enabling Environment** to Increase demands through: SBCC, Advocacy and policy Change

## Social Marketing and Health Education

Outreach

Mass Awareness campaigns

Training

## Advocacy and Policy

Advocacy at the Community Level

Advocacy at the Policy level

Data and Information for **Strategic planning** and **Policy Decisions**

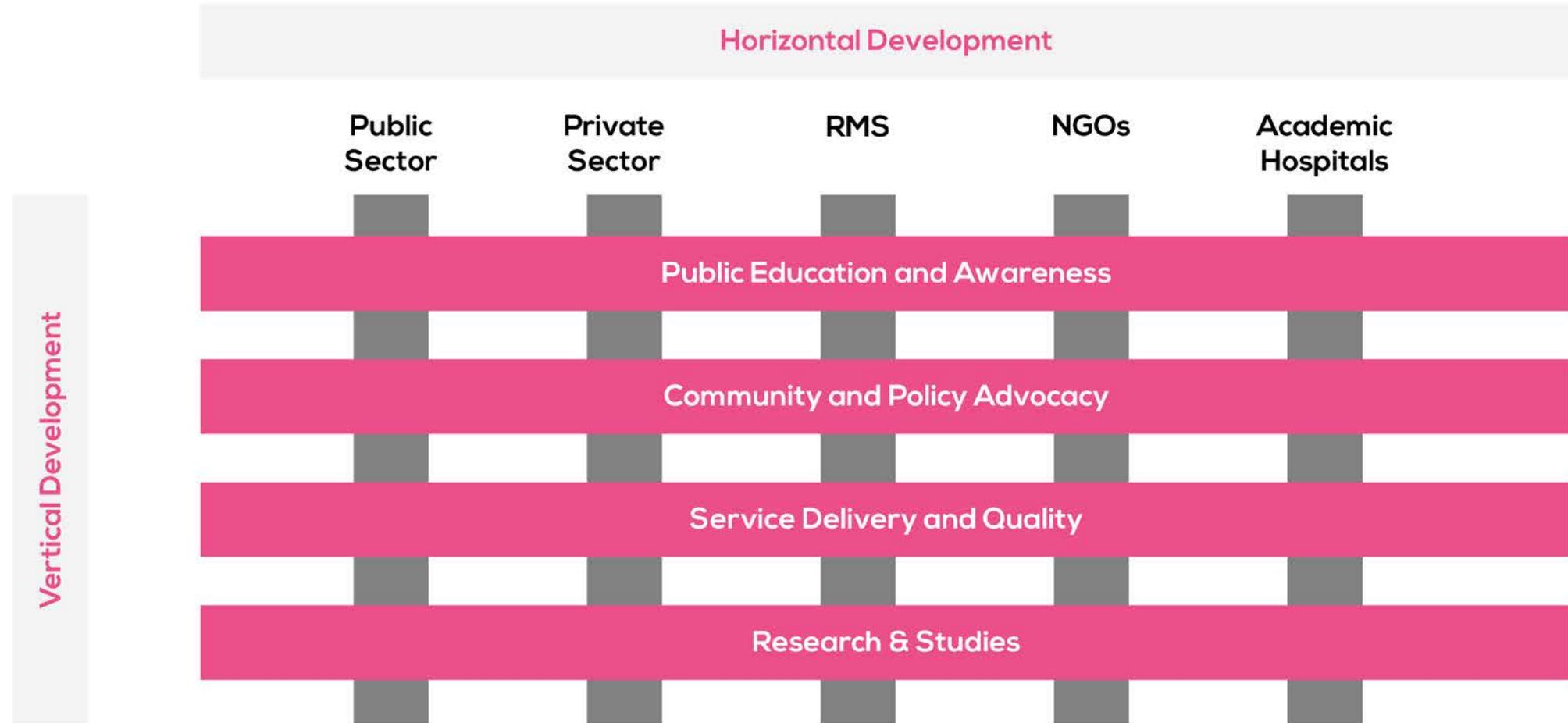
## Monitoring and Evaluation

Reporting and Progress management

Studies and Research

National Database

# Our multidimensional interventions are implemented across various health sectors



# JBCP improves early detection service delivery through strategic infrastructure upgrade and service provision

- The introduction of new service provision solutions (mobile units connected to KHCC )
- Mammograms offered directly to **22,300 less privileged** women in underserved areas



- **Strategic infrastructure upgrades** across sectors ( **33** units across the kingdom)
- Redirecting infrastructure investments towards activating existing units and improving quality of service



# JBCP implements multilayered capacity building programs to increase supply of trained health care providers involved in early detection

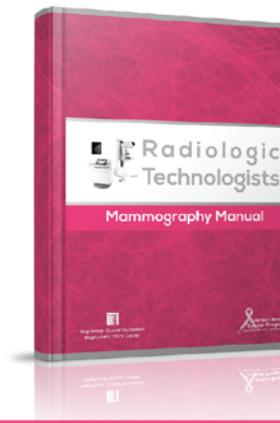
## On the Job training :

- Local and international
- Trained **49 radiologists** **105 radiographers** from all sectors. **779 attended** JBCP's conferences
- Conferences, workshops, observer-ships
- **Introduction** of critical supplementary training courses for physicists, biomedical engineers
- Training **200** of frontliners and other disciplines in the breast cancer early detection continuum



## Institutionalization of technical education: in universities:

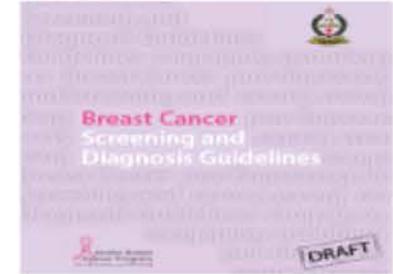
- First radiographer's mammography manual to address breast imaging and quality management
- Integrated into the curricula of two Jordanian universities within three undergraduate courses attended by 300 students



# JBCP enables early detection through the introduction of quality management interventions



- The Introduction of the **first** in the region certification program for breast imaging units
- Supported **23 units** across sectors through accreditation



- The Introduction of the **first** national screening and diagnostic guidelines
- The endorsement of the guidelines by MoH
- Training of **200** frontlines FM,GP, etc...

# JBCP effectively utilizes all communication methodologies to disseminate the early detection message

## Mass media

Every year out campaign reaches **800,000**

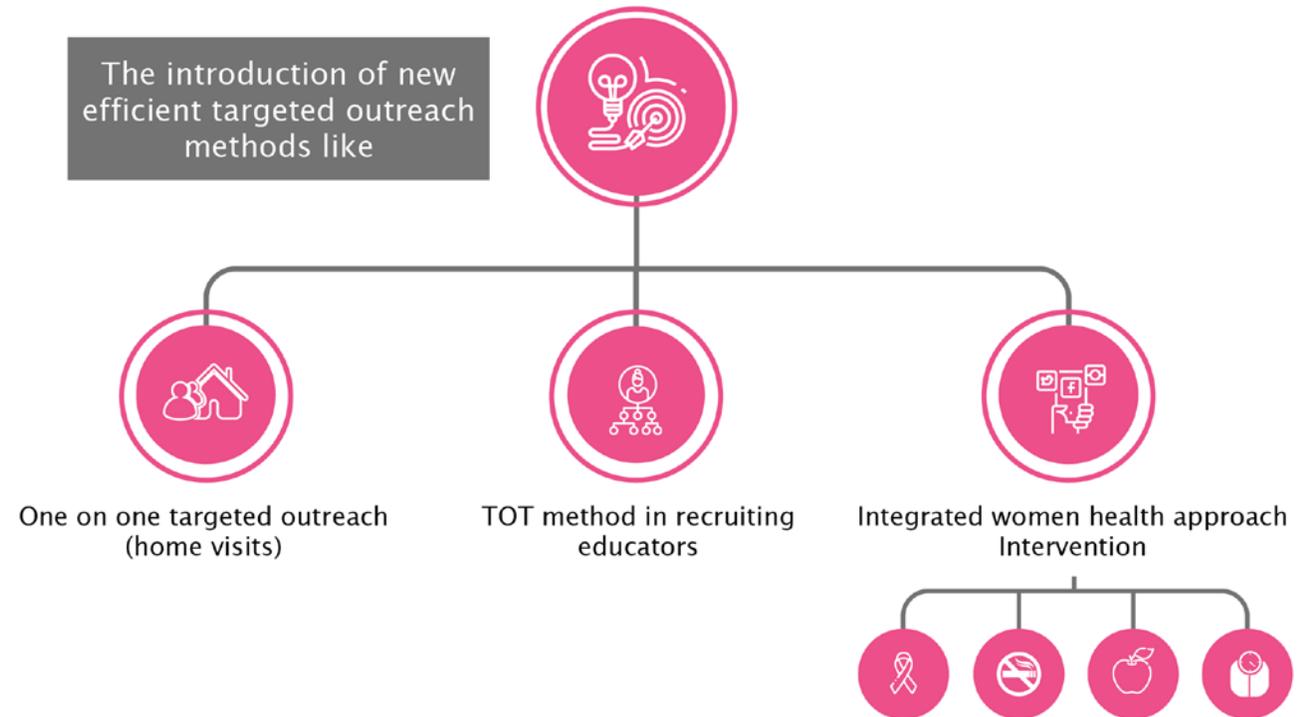
-  **50,000** IEC material
-  **2000** Retweet
-  **20,000** New Likers
-  **26** Web Banners
-  **10,000** TV Spots
-  **5,000** Radio Spots
-  **1,700,000** Email Shots
-  **40,000** Sms message
-  **35** PSA in magazine and newspapers

## Outreach

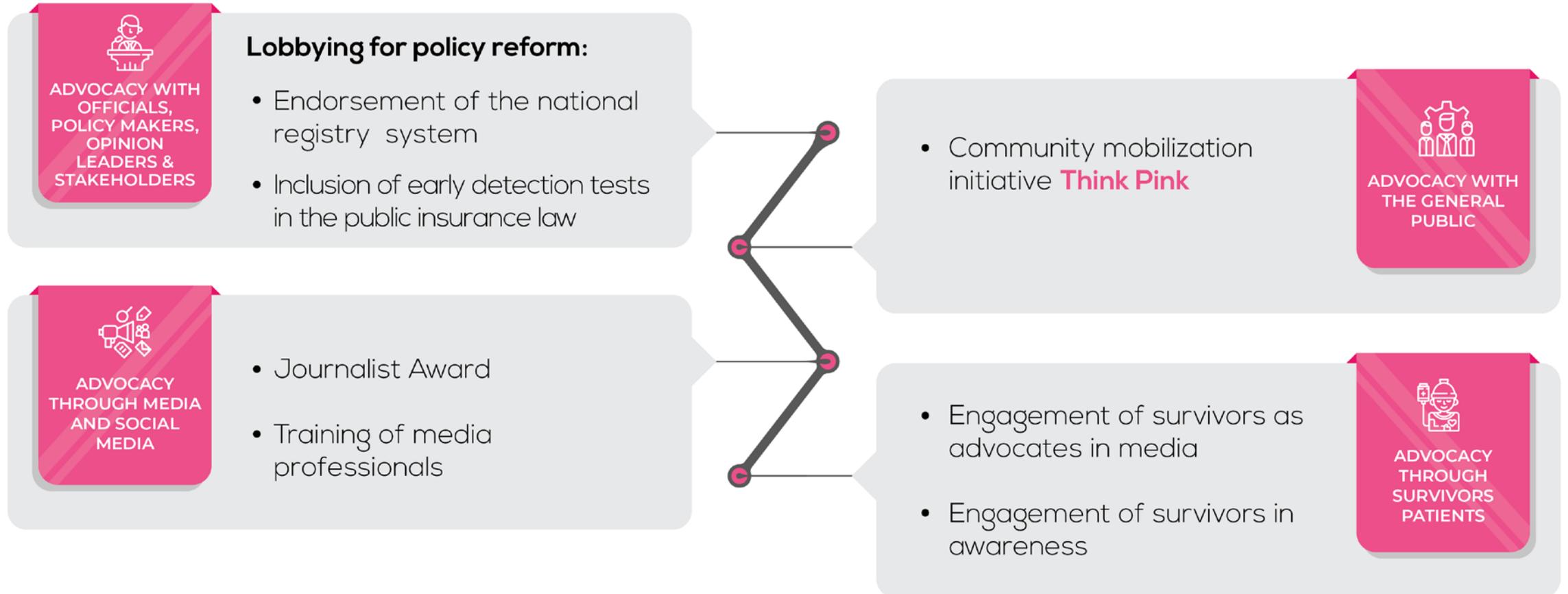
-  **1,200** lectures attended By **30,000** Participants
-  **8,000** Home Visits in remote areas
-  **40** roadshows reaching **6,000** people
-  **15** open days reaching **7,500** family member

# JBCP created innovative methods to maximize reach and impact of its awareness program despite of limited resources

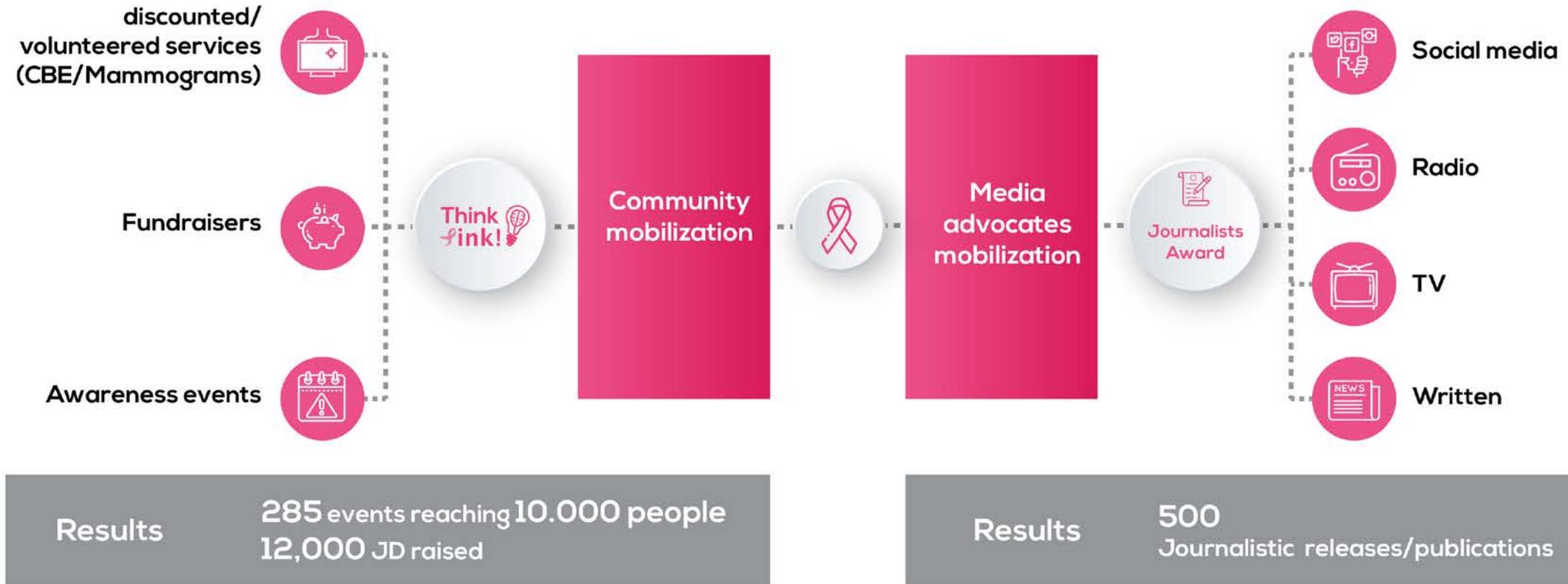
- The maximized use of social media and social media influencers
- The involvement of opinion and community leaders to disseminate the early detection message
- Pooling in resources through public private partnership and in kind donations
- The creation of a community mobilization initiative **“Think Pink”** that urges people to lead awareness activities



# JBCP advocates with various stakeholders to create an enabling environment for early detection at all levels



# JBCP innovatively created mobilization initiatives that guide advocates towards implementing supportive actions of early detection



Maximized reach, pooling of available resources (including those of partners), reduction in program overall costs

# JBCP's research and studies feed its interventions with needed scientific based evidence to enable their success



**National Database**



**Research Studies**

- Study of knowledge, Attitudes and Practices (KAP) of Jordanian women aged 25-65 years towards Early Detection and Screening of Breast Cancer
- Filling the Gap-Increasing Awareness, Availability and Accessibility of Breast Cancer Services
- Assess Health Care Provider's Knowledge, Attitude and Practices towards Early Detection Screening Methods in Jordan



**Program M&E**



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Friends Of Cancer Patients  
نحن معكم We're With You  
الإمارات العربية المتحدة United Arab Emirates

# Pink Caravan Experience in UAE - Benefits and Challenges

Presented by:

**Dr. Sawsan Al Madhi**

Director General

Friends Of Cancer Patients (FOCP)

Sharjah, United Arab Emirates



أصدقاء مرضى السرطان  
Friends Of Cancer Patients  
نحن معكم We're With You

- Founded in 1999 in Sharjah, United Arab Emirates
- Under the directives and patronage of Her Highness Sheikha Jawaher bint Mohammed Al Qasimi
- Committed to help cancer patients and their families financially and morally
- On a mission to create a more cancer aware society through our Kashf programs



“  
**Cancer is no longer a personal problem. The rising rate of cancer incidence makes it a public issue that requires shared responsibility among all.**”

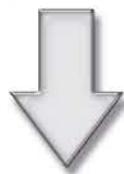
**Her Highness Sheikha Jawaher Bint Mohammed Al Qasimi**  
Wife of the Ruler of Sharjah, UAE  
Founder and Patron of Friends of Cancer Patients  
International Ambassador of the World Cancer Declaration for Union for International Cancer Control (UICC)  
International Ambassador for Childhood Cancer for UICC  
Patron of the First Global NCD Alliance Forum

## Reducing Cancer Mortality in UAE

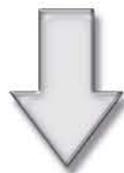


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**Cancer Prevention & Spreading Awareness**



**Early Detection of Cancer**



**Cancer Treatment & Financial Access**

## Key Factor



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Key factor to reducing UAE's Cancer

Mortality rate = **Multisectoral**

**Collaboration**

to achieve

**'UAE Vision'**; *"to reduce*

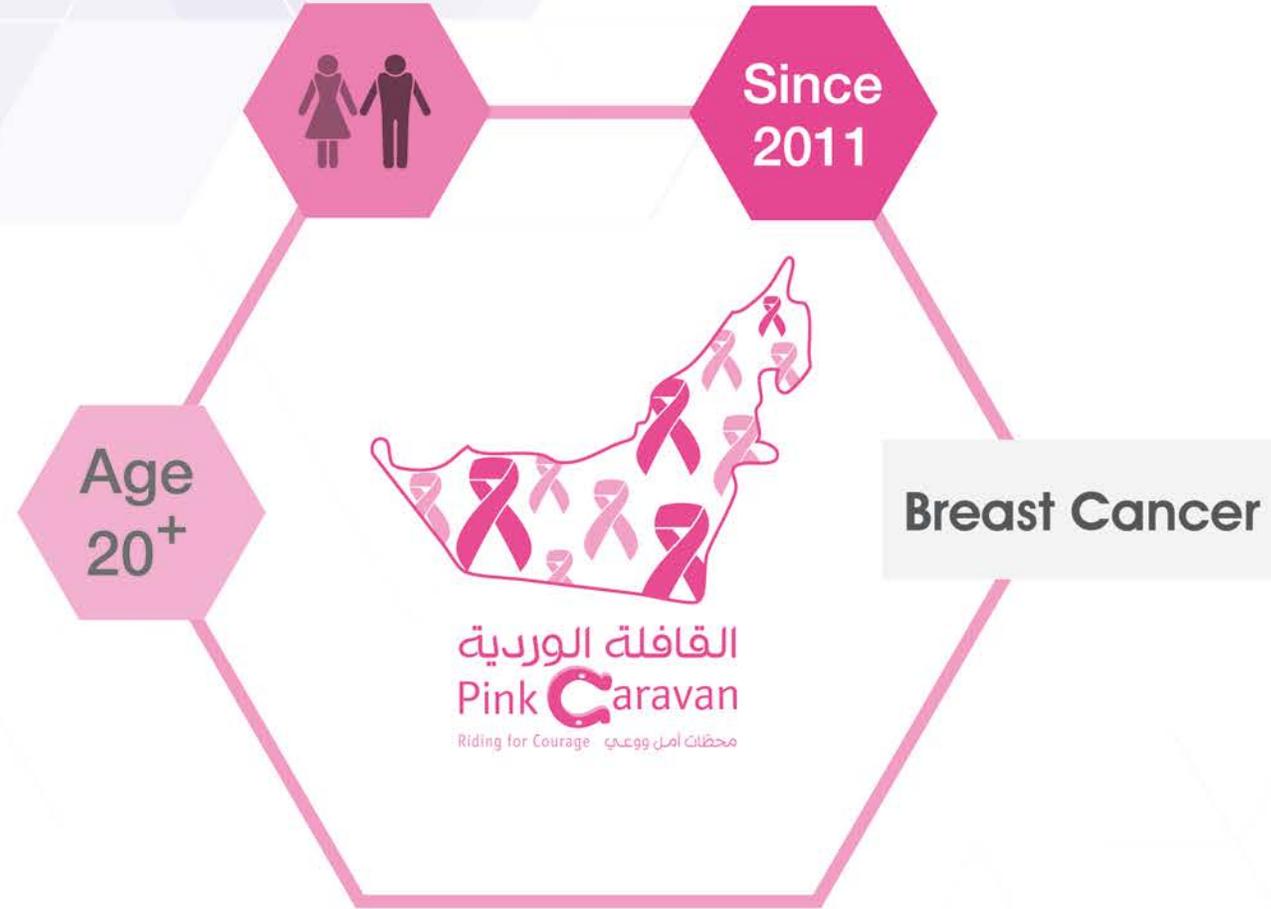
*NCD mortality rate by 25% by 2025"*



كشف  
Kashf  
الكشف المبكر للسرطان  
Early cancer detection

- Launched in 2010
- Kashf which means “detection” in Arabic, is an initiative by FOCP for early detection of cancer
- Create awareness and help promote screening methods and prevention for the early detectable cancers





Pink Caravan

# Pink Caravan Statistics



2011 - 2018

56,806

مجموع الفحوصات السريرية  
Total Clinical Examinations

7

إمارات  
Emirates

175

كيلومتر  
Kilometers

16,504

ماموغراما  
Mammogram

2,238

الاشعة الصوتية  
Ultrasound

46,545

10,261

684

عيادة طبية  
Clinics

569<sup>+</sup>

فارسي  
Riders

61

Positive cases  
حالات تم اكتشافها

770<sup>+</sup>

متطوع  
Volunteers

# Cancer prevention and spreading awareness



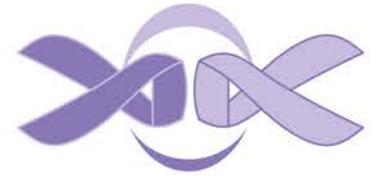
**EARLY  
DETECTIONS  
IS THE BEST  
PREVENTION**



# Early detection of cancer

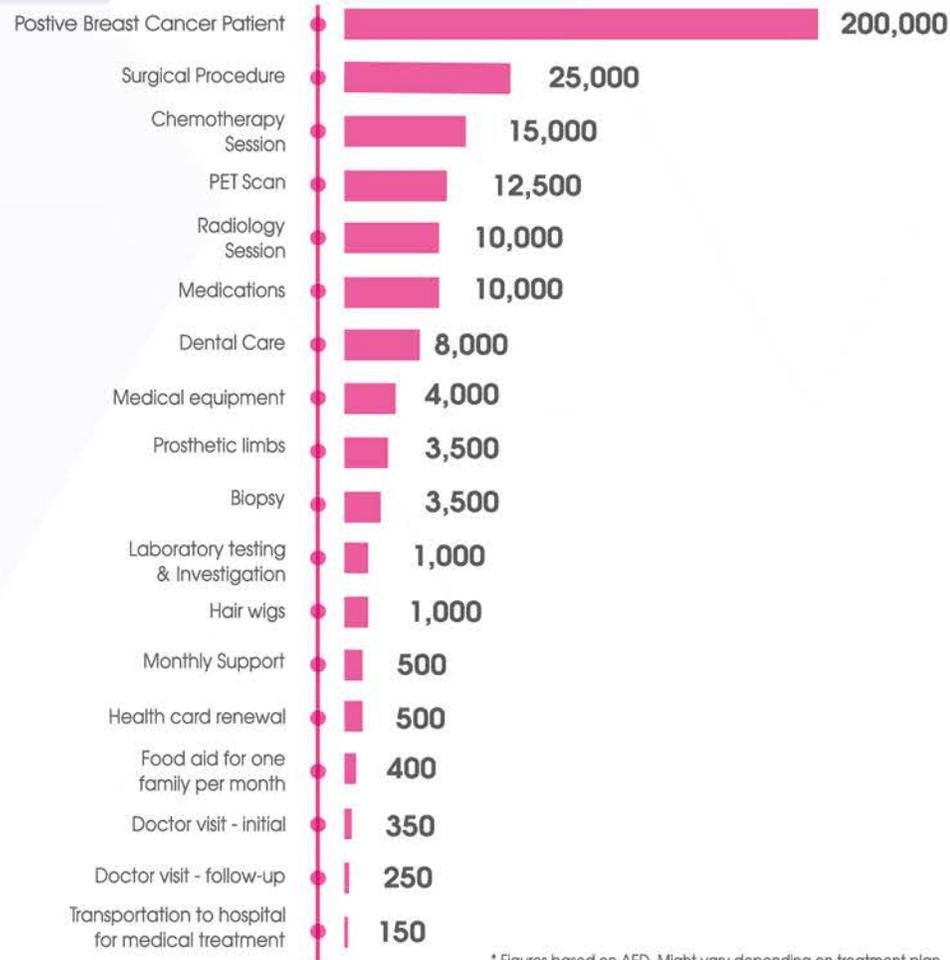


# Cancer Treatment & Financial Access



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## PATIENT SUPPORT COSTS\*



\* Figures based on AED. Might vary depending on treatment plan

## WHERE THE MONEY GOES



**56,806**  
Patients  
Screened in  
National  
Breast Cancer  
Programme



# Thank you

If you have any further questions, please contact **FOCP** offices:

+971 6 506 5542 | [info@focp.ae](mailto:info@focp.ae) | [www.focp.ae](http://www.focp.ae)

# Barriers and Opportunities for Early Detection of Breast Cancer in the Middle East

**Dr. Rola Shaheen MD FRCPC (Chair of session)**

**Medical Director & Chief of Radiology**

**Peterborough Regional Health Center-Ontario-Canada**



**World Cancer Congress**  
Kuala Lumpur, Malaysia  
1–4 Oct 2018

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- Track 2: Advances in screening and early detection

Disclosure of interest: None declared

# • Introductions

## • Barriers and Opportunities for early detection of breast cancer in the Middle East

- Mrs Rana Ghafary

- Dr.Mohamed Shalaan

- Dr.Rola Shaheen

- Dr.Sawsan Madhi

- Dr.Ibtihal Fadhel



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Disclosure of interest: None declared

# 1-Creating an enabling environment for prevention and early detection programs in low resources setting

Rana Ghafari

Head of advocacy and policy unit- Jordan Breast Cancer program

King Hussein Cancer Foundation

Amman- Jordan



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Disclosure of interest: None declared

## 2-The significant barriers for early detection of breast cancer in the Middle East

- The Gaza experience –Dr.Rola Shaheen
- The Egypt experience-Dr.Mohamed Shalaan

Dr.Mohamed Shalaan

Head of Breast Cancer Foundation of Egypt



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# 3-Lessons learned from opportunistic and organized screening approaches in Middle east

Dr.Sawsan Madhi

Director General FOCP

Friends of Cancer Patients

Sharjah- United Arab Emirates



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- Track 2: Advances in screening and early detection

Disclosure of interest: None declared

# 3-Lessons learned from opportunistic and organized screening approaches in Middle East

- **Dr. Ibtihal Fadhil**

- *Chair- Eastern Mediterranean NCD Alliance*
- *Former Regional adviser-NCD-WHO-EMRO*



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# Panel Discussions

- Highlights of how to do more with less- KHCF model
- Knowing the barriers is the first step in winning the battle against breast cancer
- The perception of opportunistic screening- a step in the right direction?
- Why should organized screening be the “way to go”
- Propose a solution & Take action



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Disclosure of interest: None declared

# The Global Breast Cancer Burden: Variations in Epidemiology and Survival

Gabriel N. Hortobagyi,<sup>1</sup> Jaime de la Garza Salazar,<sup>2</sup> Kathleen Pritchard,<sup>3</sup> Dino Amadori,<sup>4</sup> Renate Haidinger,<sup>5</sup> Clifford A. Hudis,<sup>6</sup> Hussein Khaled,<sup>7</sup> Mei-Ching Liu,<sup>8</sup> Miguel Martin,<sup>9</sup> Moise Namer,<sup>10</sup> Joyce A. O'Shaughnessy,<sup>11</sup> Zhen Zhou Shen,<sup>12</sup> Kathy S. Albain,<sup>13</sup> on Behalf of the ABREAST Investigators

## Abstract

Breast cancer is the most common type of cancer and the most common cause of cancer-related mortality among women worldwide. However, the burden is not evenly distributed, and, according to the best available data, there are large variations in the incidence, mortality, and survival between different countries and regions and within specific regions. Many complex factors underlie these variations, including population structure (eg, age, race, and ethnicity), lifestyle, environment, socioeconomic status, risk factor prevalence,

- \*Variations:**
- **Incidence**
- **Mortality**
- **Survival**



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# The Burden of Breast Cancer in MENA



**Our patients!  
WHY?**



## BARRIERS TO BREAST CANCER SCREENING AND TREATMENT AMONG WOMEN IN EMIRATE OF ABU DHABI

**Objectives:** The objectives of this study were to explore attitudes and beliefs among major national groups of women resident in the Emirate of Abu Dhabi (EAD) in relation to breast cancer screening and treatment.

**Design:** A qualitative study utilizing age and nationality specific focus group discussions and interviews in all parts of EAD.

**Setting:** Study was conducted among women living in various areas of EAD during April-September 2009.

**Participants:** A total of 329 participants divided into four nationality groups and categorized into two functional groups (well women and regular screeners) were included

Walaa K. Sabih, MBChB, MSc; Jalaa A. Taher, MBBS, MPH;  
Carol El Jabari, MPH; Cother Hajat, MBBS, PhD;  
Salim M. Adib, MD, DrPH; Oliver Harrison, MA, MBBS

### INTRODUCTION

Breast cancer is the most frequent cancer affecting women globally and is a major public health problem in many developed and developing countries.<sup>1-3</sup> Public health data indicate that the global burden of breast cancer in women, measured by incidence, mortality and economic costs is substantial and on the increase.<sup>2</sup> Although breast

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*In the Emirate of Abu Dhabi (EAD), ... recent estimates were of 26 new cases of breast cancer per 100,000 among women.<sup>6</sup>*

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## Significant Barriers:

- Fear of discovering they might have cancer
- Embarrassment
- Distrust in health care staff & insurance systems
- Unawareness of common risk
- Unveiling the reliance on local herbal healers and cauterization ( which may delay treatment)



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Disclosure of interest: None declared

# Comparative Baseline Needs Assessment for Breast Cancer Awareness & Management in ME



**Dr. Rola Shaheen MD, FRCPC**

**Jan 22<sup>nd</sup> 2018**

Harvard Medical School Center for Global Health Delivery

Dubai- UAE

## Panel Discussion

- Dr. Sawasn Madhi- **United Arab Emirates**
- Dr. Mohamed Shalaan – **Egypt**
- Mrs. Taghreed Nusairat- **Jordan**
- Dr. Fatina Al Tahan- **Kingdom of Saudi Arabia**
- Dr. Marwa Meslemani- **Bahrain**



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Disclosure of interest: None declared

# Acknowledgement

- Susan G Komen for the Cure-USA
- King Hussein Cancer Foundation (Jordan Breast Cancer)- Jordan
- Friends of Cancer Patients- UAE



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Disclosure of interest: None declared

# Advisors & Surveys Reviewers

## Core Advisors:

### -Study design, ethics & methodology:

- Derek Muradali-Canada
- Max Rosen- USA
- Priscilla Slanetz-USA
- Sughra Raza-USA
- Ben Anderson-USA
- Ali Abu Alfa- Lebanon/ USA

### -Study results & recommendations

- Rifat Atun-USA
- Afsan Badhelia-USA
- Felicia Knaul-USA

## Survey Reviewers & /or Advisors

- Michael Wertheimer-USA
- Adnan Kassis- UAE
- Elize Gershater-Canada
- Norran Hussein-Egypt
- Salma Jaouni-Jordan
- Nihad Abu Sittah- Canada
- Ron Esinberg- USA
- Mahesh Setty-USA
- Keith Martin- Canada
- Ming Wang- Australia
- Colin McArdle –USA
- Nadia Rahwangi –Egypt
- Tom Manigione-USA
- Barri Blauvelt-USA
- Sankaranarayanan-India
- Anthony Miller -Canada

## Workshops Advisors

- Tejas Mehta-USA
- Maysa Abu Khalaf-USA
- Suad Abu Tahoun- Tunis
- John Bridges-USA
- Eman Al Khadra- USA
- Khelda Jabar-USA
- Sarwat Hussein-USA
- Jalaa Taher- UAE
- Asem Mansour-Jordan
- Farah Zaabi-UAE
- Sahar Abo Omar-UAE
- Naglaa Abdel Razek-Egypt
- Fatema Al Melhem-KSA
- Fatina Al Tahan-KSA
- Alexandra Economacus-UAE
- Rana Al Nabulsi-UAE
- Amid Abu Hmaidan- Qatar
- Nabil Dabouni-UAE
- Ibtihal Fadhil-Egypt
- Ali Al Bawardi- UAE



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Disclosure of interest: None declared

# • Summary

- Barriers & opportunities exist within the continuum of breast cancer care in the ME including early detection and diagnosis
- Discussion encompassed pros and cons of both opportunistic and organized screening in the wide spectrum of health care settings in the Middle East
- A snapshot of successful models in ME enhances doing more with less in the limited resources settings



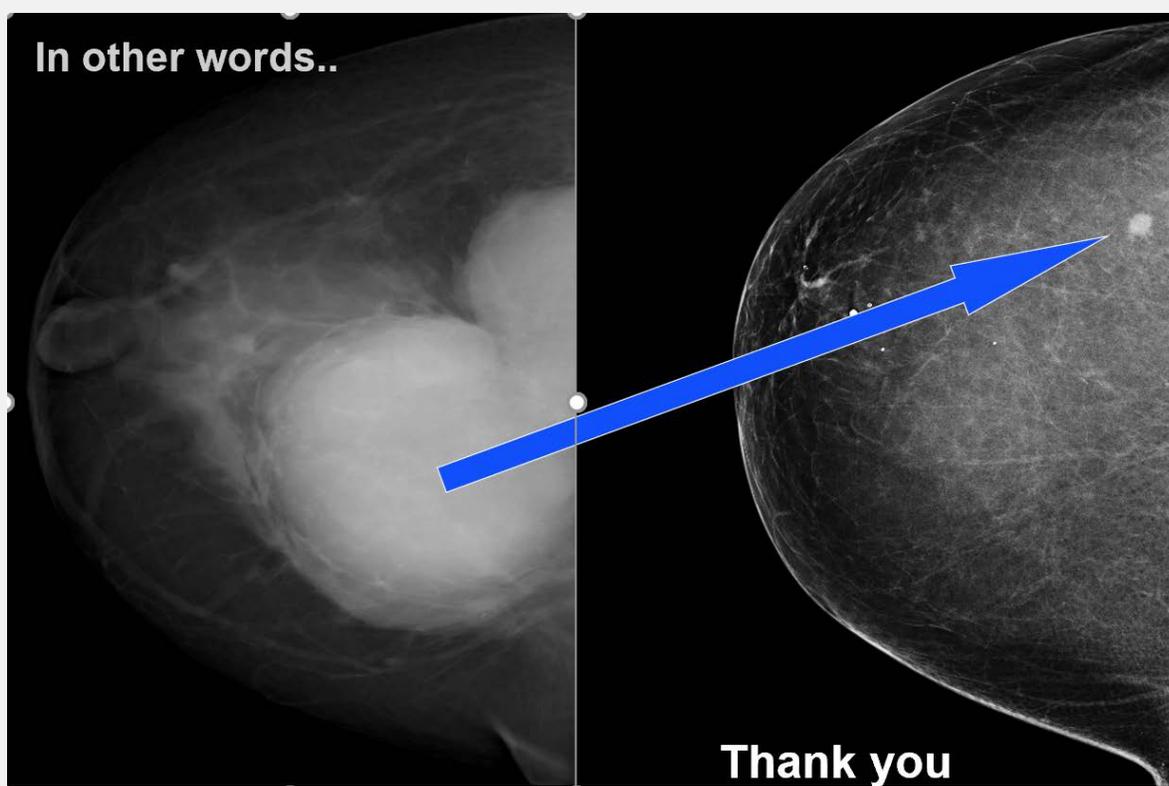
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Disclosure of interest: None declared



*Thank You!*

[Rola.Shaheen@sympatico.ca](mailto:Rola.Shaheen@sympatico.ca)



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Disclosure of interest: None declared

# The Significant Barriers For Early Detection of Breast Cancer In The Middle East



- *The Gaza Experience*

Dr.Rola Shaheen-MD FRCPC



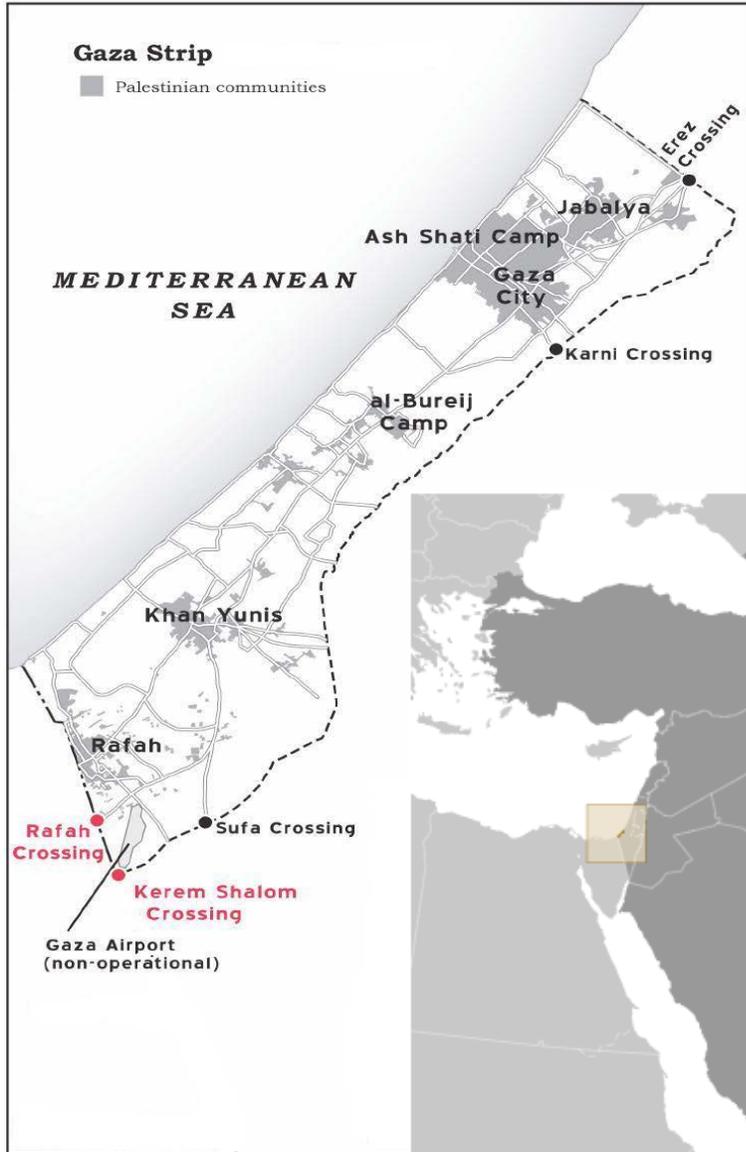
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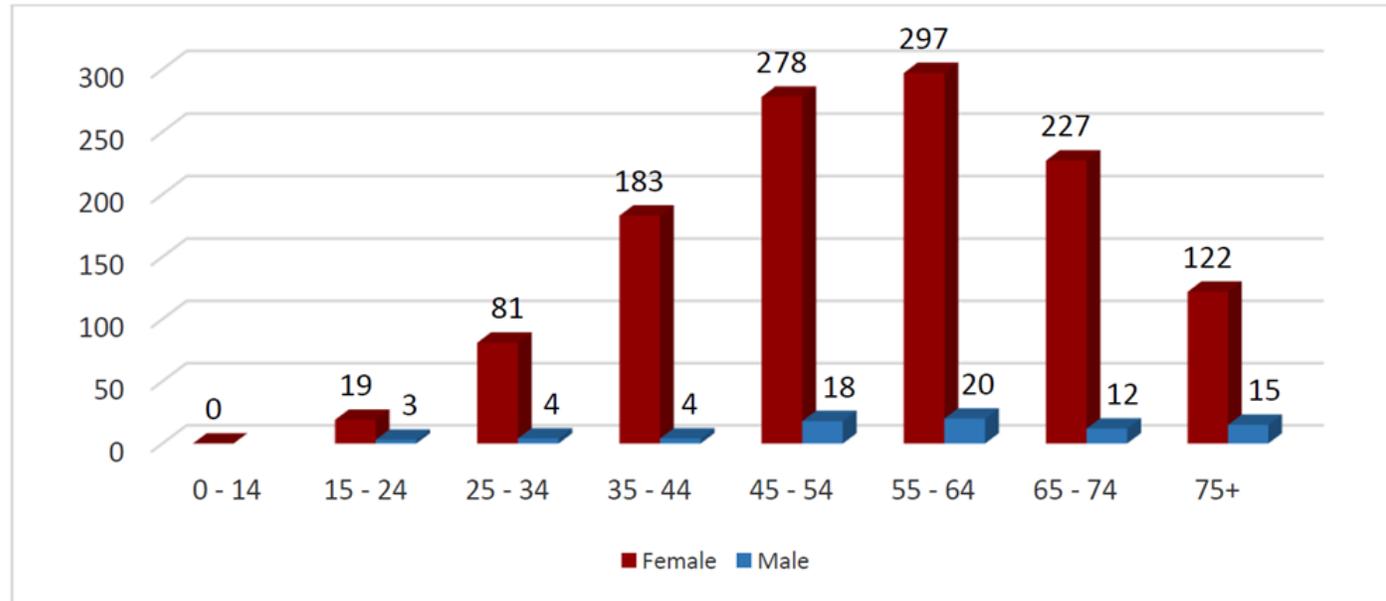
## Gaza strip

- One of the most densely populated cities in the world
- Population of 1.8 million living in total area of 360 sq km



# Background: Breast cancer in Gaza

- Most common cancer in Gaza -18.1% of all cancers & 31.4% of all women cancer in Gaza
- Leading cause of cancer death for women living in Gaza
- Women present in late stages



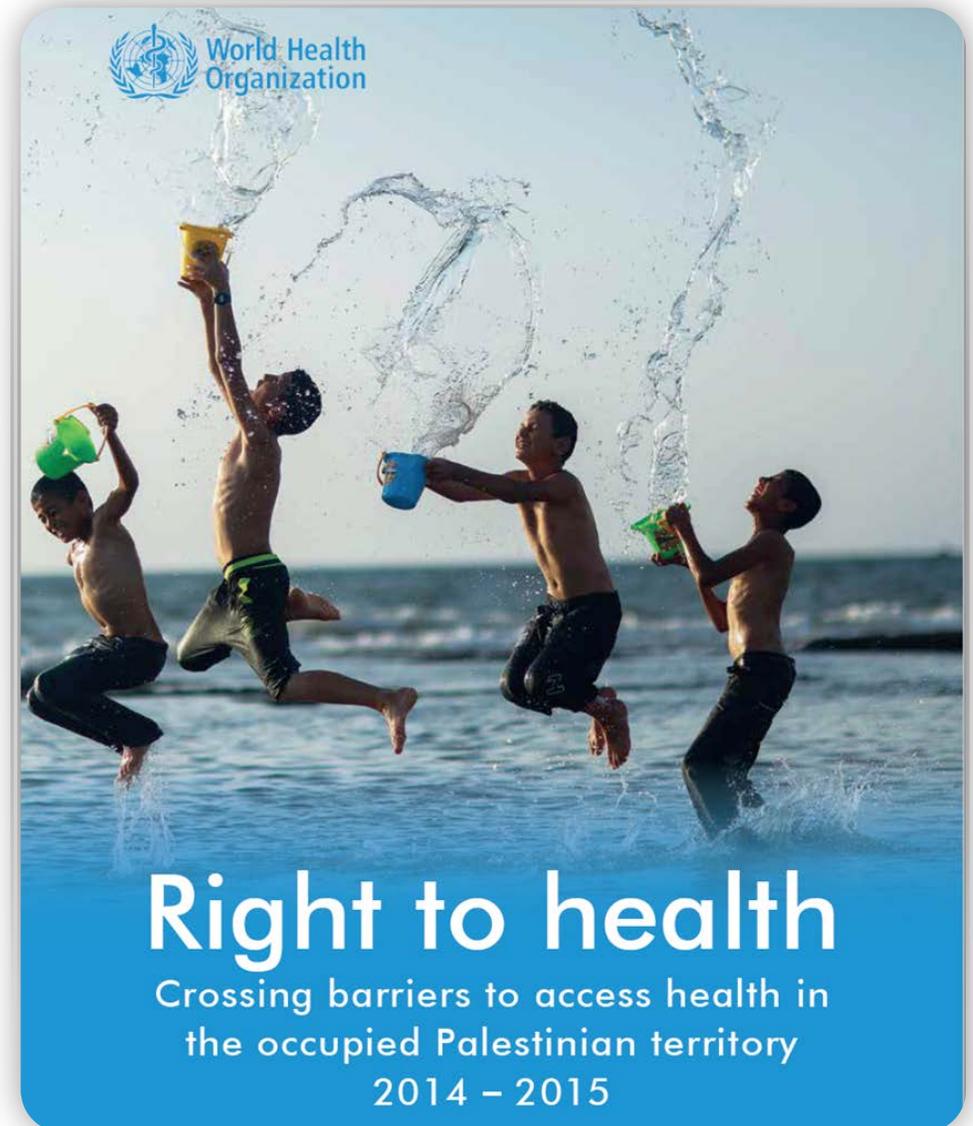
شكل رقم(15): عدد حالات سرطان الثدي حسب الجنس و الفئة العمرية 2009-2014



# Reasons for referrals outside of Gaza

- The most frequent needed specialties were for *oncology* (33%) & orthopedics (16%)

- medical equipment (37%)
- needed pharmaceuticals (23%)
- diagnostic services (14%)
- advanced specialized treatment centre (7%)
- specialized human resources (6%)
- rehabilitation services (3%)
- availability (long waiting list) (3%)
- other reasons (6%), (including family pressure 0.9%)



# Research Projects

- In 2011 a study was published addressing Gaza women & breast ca
- In 2012 a multicentral comparative baseline needs assessment for breast cancer awareness and management in MENA



## Barriers and opportunities for early detection of breast cancer in Gaza women

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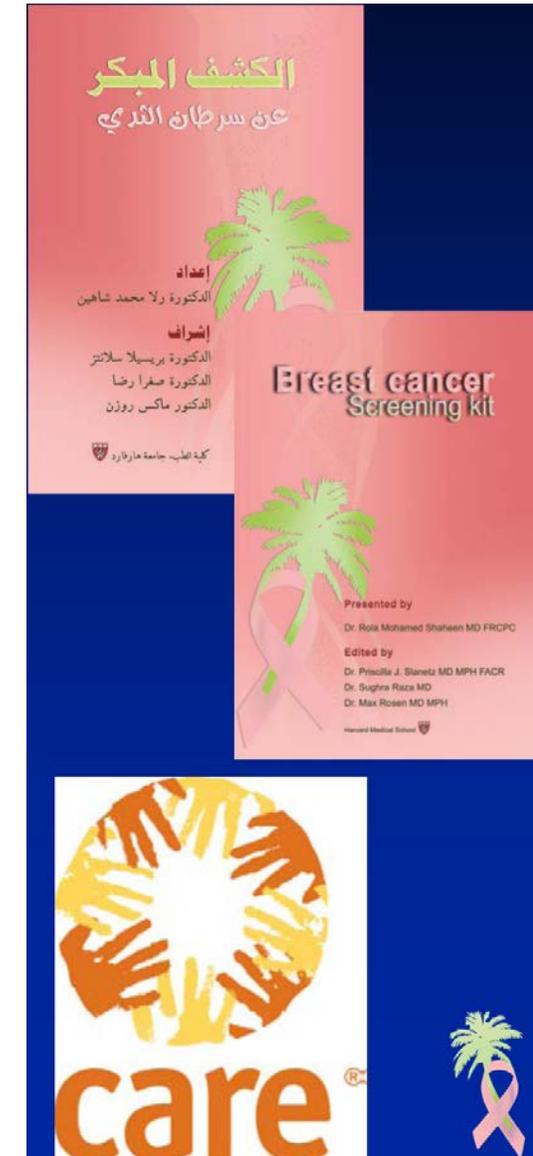
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### ABSTRACT

A survey of 100 women living inside Gaza (WIG) and 55 Gaza women residing outside Gaza (WOG) was conducted to investigate barriers and opportunities for breast cancer screening, and to better understand possible differences based on residency. The survey found that over 90% of both groups were willing to undergo a diagnostic mammogram for a breast complaint and 86% of WIG and 85% of WOG believed survival was increased with early detection. However, only 27% of WIG and 50% WOG were willing to undergo screening mammography. Religion and culture were not barriers to mammography for over 94%



# Objectives

- Assess barriers & opportunities for early detection of breast cancer in Gaza
- Identify Gaza women's awareness, access, & attitudes toward breast cancer
- Identify Gaza health care providers' knowledge, attitude & practice in breast cancer

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## Comparative Baseline Needs Assessment for Breast Cancer Awareness & Management in



**MENA Workshop**  
January 20th 2012- Egypt



# Kick off meeting- Sharm El Sheikh- Jan 2012



# Methods

- In May & June 2014:
  - 100 Gaza women  $\geq$  30 years had structured interviews
  - 100 healthcare providers completed the surveys (available in English and Arabic)
- Convenience and representative sampling across all districts and socio-economic backgrounds
- Data collection & analysis using coded matrix on excel



Sample was proportional to the % of population of each governorates:  
 Gaza-35; North-20; Middle-14; Khan Yunis-19; Rafah-12)  
 The interviews were conducted in Arabic by 2 field researchers



# Women's Survey Assessment

1. Women's demographics & risk factors
2. General knowledge about breast cancer
3. Attitude toward general breast health care
4. Attitude toward breast screening
5. Attitude toward mammography
6. Attitude toward diagnostic work & biopsy
7. Perception of women on resources
8. Perception of women on barriers
9. Identification of opportunities



# Health Care Providers Survey

1-Demographics

2-Nature of medical practice

3-Knowledge & awareness of breast cancer

4-Cultural considerations/ barriers

5-Breast cancer screening practice

6-Breast cancer management: diagnostic, biopsy, surgery, oncology & radiation

7-Resources & geographical considerations

8-Quality, cancer registry & accreditation

9- Continuous education & research



# Results

## Women's survey:

- 25% practice self breast examination
- 87% never had mammogram or had been offered breast exams
- 80% agreed to seek breast work up when needed

## Health care providers' survey:

- 60% offered breast exams
- 68% offered screening mammography
- 13% believe mammography causes cancer
- 59% believe breast ca is fatal disease
- 50% don't get opportunity to attend medical conferences

# Results

- Gaps are identified in breast cancer awareness and management for both women and health care providers in Gaza with several opportunities for improvement
- Although cultural, geographic, socioeconomic barriers for early detection of breast cancer among Gaza women exist, these women are interested in obtaining appropriate care if, or when, a specific breast problem is identified
- While barriers are not unique to Gaza, targeted intervention should include national & international collaboration to overcome geographic & economic barriers



# Conclusion

- Barriers & opportunities exist for early detection of breast cancer in Gaza among women and health care providers
- The framework of recommendations for improving breast health care would be most effective if driven within the boundaries of actionable items and within realistic expectations of cultural norms
- Priority actions should aim to improve average breast healthcare status for women and reduce health inequalities
- It is crucial to facilitate access to social support networks during care, quality of basic amenities and choice of provider.
- Engaging Health care providers in improving breast health status is an integral and essential component of strategic planning to advance health performance in Gaza



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- Track 2: Advances in screening and early detection

Disclosure of interest: None declared

# Thank you!

