

### 1 PURPOSE / OBJECTIVE

This assessment provides strategic and reliable information about the **access to and availability** of preventive healthcare services for breast cancer in the Guadalajara Metropolitan Area (GMA).

**OBJECTIVE OF THIS STUDY** ▶ **Identify areas** relevant to improving the efficiency of early breast cancer detection and document **barriers or difficulties** along the care pathway from the personal perspective of women utilizing existing healthcare platform and providers offering services.

**CONTRIBUTORS** ▶ A total of **594** testimonies were gathered from different actors as follows:

**2** employees of State Coordination for Breast Cancer who were interviewed.

**522** users of primary care, mammography services or patients at Jalisco Institute of Cancerology.

**71** healthcare providers

### 2 BREAST CANCER IN GUADALAJARA



In Mexico, breast cancer is the **second cause** of female deaths by cancer (15.4 percent). In 2012 the country recorded an **increase from 14 to 15** per 100,000 women in mortality from breast cancer.

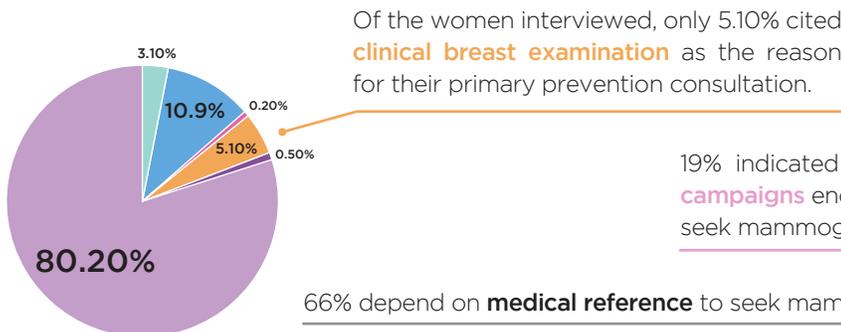
**70%** 70 percent of breast cancer diagnoses occur in **stage II and above**.

There are **1,029,204 breast cancer cases** registered in public health institutions throughout the country (2012).

**66.7%** of the women in Guadalajara rely on **primary healthcare** for mammography screening,

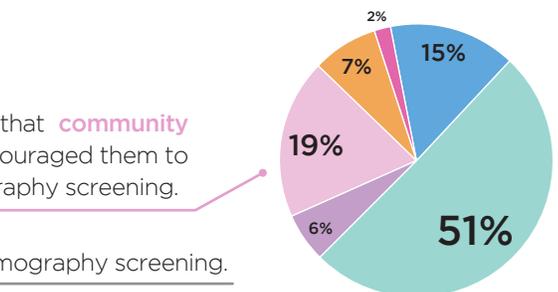
**19.4%** rely on **secondary healthcare** institutions

**8.3%** from the **private sectors**



19% indicated that **community campaigns** encouraged them to seek mammography screening.

66% depend on **medical reference** to seek mammography screening.



- Family planning or contraceptive services
- Pregnancy or puerperium
- Sexually Transmitted Infections
- Breast clinical examination
- Psychological counseling
- Other health-related issues

- By other healthcare reference
- Intern medical reference
- Other
- By invitation of a relative
- Dissemination community campaigns (organized by NGOs, municipalities, etc)
- By own decision

### 3 BARRIERS & OPPORTUNITIES

 Health centers in GMA have **poor infrastructure and human resources**.

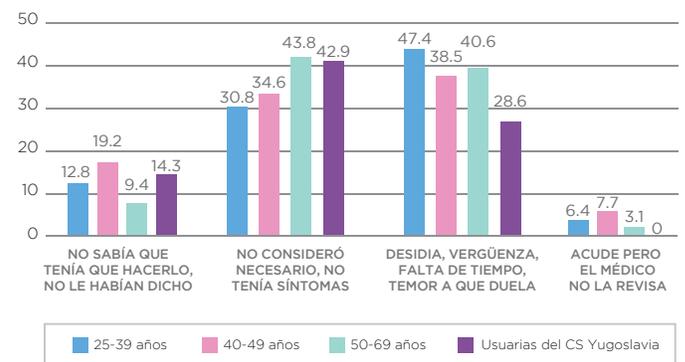
 **Education programs** that educate the general population about breast cancer prevention and health care are still needed.

 There are **few specialists in the GMA** to better interpret diagnostic results.

 **6 out of 10** women in Guadalajara **have not received** a clinical breast examination or mammogram.

 Breast cancer screening in Guadalajara depends largely on **breast self-examination**, which deviates from the recommended mammography for population screening of breast cancer.

 **Lack of interest / laziness** is identified as the main reason women don't get clinical breast examination; whereas fear of encountering a problem is of least concern when clinical breast examination is considered.



PRINCIPALES RAZONES PARA NO ACUDIR A LA EXPLORACIÓN CLÍNICA

### 4 RECOMMENDATIONS TO IMPROVE BREAST CANCER CARE

1

There is a need to **improve infrastructure and increase human resources** at healthcare centers including building capacity on breast cancer care.

2

**Sensitization** among the general population is still needed to improve breast cancer prevention and screening rates.

3

**Education on risk factors and clinical breast examination** is essential to better inform the population at large as currently only patients seeking breast health services receive this information as part of their medical consultation.