

Friend to Friend Program



Volunteer Handbook

Volunteer Handbook for the Friend to Friend Program

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Welcome to the Friend to Friend Program and THANK YOU for volunteering your time and energy to this project!

The Friend to Friend Program

The Friend to Friend Program is funded by the National Cancer Institute and sponsored by the American Cancer Society--Minnesota Division, Inc; Senior Resources; the Minneapolis Public Housing Authority; Minnesota Department of Health; and the University of Minnesota. The purpose of the program is to encourage women living in Minneapolis high-rises to have regular mammograms.

The program includes three major components:

- 1) a Friend to Friend Party in each high-rise where ACS volunteers, including a health professional, deliver the mammography message and participants are encouraged through small group discussions to sign up for either a mammogram or to be reminded on their annual screening date
- 2) an informal sign-up session held within two weeks of the party for women who weren't able to attend the Friend to Friend party; residents attending the party are encouraged to bring a friend who wasn't at the party to this session
- 3) assisting residents who sign up to get a mammogram

The Handbook

This handbook has been developed to help familiarize you with the Friend to Friend Program and to provide you with instructions and examples for planning and conducting the Friend to Friend Party and the Sign-up Session. Sections are tabbed for ease in accessing information. The "Example" section includes photocopies of most materials used in promoting the event, and the "Resource" section is where you will find phone numbers, definitions, etc. Each section is numbered beginning at "1" and a "contents" list is provided for each section.

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Examples

- General “Picture” Poster
- Friend to Friend Party Announcement Poster - pink
- Sign-up Session Announcement Poster - yellow
- Invitation to be put in building’s newsletter
- Summary Sheet completed by Team Captain after meeting with Resident Coordinator
- Invitation letter sent to eligible residents of the high-rise

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How to Plan and Conduct the Friend to Friend Party and the Mammogram/Reminder Card Sign-up Session

Conducted by ACS volunteers, the objective of the FRIEND TO FRIEND PARTY is to sign up everyone attending the meeting for either a mammogram or the reminder card system. The goals are to:

- *Establish medical credibility of the program
- *Address barriers to screening and cancer myths
- *Deliver repeatedly the “mammography message”
- *Encourage women to take ownership of their annual breast cancer screening needs

The MAMMOGRAM/REMINDER CARD SIGN-UP SESSION is held within two weeks after the Friend to Friend Party and is conducted by ACS Volunteers. The Sign-up Session provides an opportunity to sign up for those women who weren't able to attend the Friend to Friend Party, or who are not comfortable attending social functions, and to continue building social support for breast cancer prevention.

Planning and Promoting the Friend to Friend Party and Mammogram/Reminder Card Sign-up Session

Note: A Newsletter/tabloid will be mailed to all female residents of the high rises by MDH in March and in May.

Before the Friend to Friend Party

1. Contact (phone) the Resident Coordinator of the building and set up date and time for the planning meeting.
(See: Resources, Building Information List, for Resident Coordinator name/phone.)
2. Meet with Resident Coordinator and Resident Planning Committee, and using the “**Step by Step Checklist**”, found inside front pocket of Volunteer Handbook, plan the events.
 - Choose date and time for Friend to Friend Party.
 - Choose date and time for Mammogram/Reminder Card Sign-up Session.
 - GO over **Planning Checklist for Resident Coordinator**, found in Site Packet and decide who will be responsible for which duties.
 - Record each team member’s agreed upon duties on “**Step by Step Checklist**” (Indicate name or initials next to the duty.)
 - Give Resident Coordinator the completed **Planning Checklist for Resident Coordinator** which indicates tasks for which she will be responsible.
 - Arrange to be put on the agenda for the Resident Council Meeting.
(See Resources, Building Information List)
 - Give **General “Picture” Posters and Announcement Posters**, found in Site Packet, to Resident Coordinator.
(See: Examples)
 - Ask Resident Coordinator if there is a central location where Friend to Friend materials could be posted after the Party & Sign-up sessions have been held.
 - Complete **Summary Sheet**, found in the Site Packet, and forward to ACS Coordinator in self-addressed stamped envelope. **THIS NEEDS TO BE DONE IMMEDIATELY.** (Team Captain’s responsibility)

Note: Invitations will be sent out after receiving the summary sheet: they should be sent out at least 10 days prior to the event to allow for the return of the RSVP's.

3. Call Speaker Coordinator to schedule speaker.
(See: Resources, Key Phone Numbers.)
4. Attend Resident Council Meeting.
(See: Scripts)
5. Call Resident Coordinator to see that room has been reserved, etc.
6. Call and confirm speaker.

The week before the Party:

7. Call ACS Coordinator to find out how many RSVP's have been received.
8. Order refreshments (cake size determined by RSVP's).
(See: Resources, Refreshment Ordering Information.)
9. Pick up **PARTY BAG** at ACS headquarters, 3316 W. 66th St., Edina.

The day of the Friend to Friend Party

10. Call Resident Coordinator and arrange to be let into the building.
11. Pick up the cake.
12. Set up for program.
 - ACS Volunteers use **Step by Step Checklist** as a guide.
 - Resident Coordinator uses **Planning Checklist** as a guide.
13. Conduct program.
 - Introduction by ACS Volunteer, 5 minutes
(See: Scripts)
 - Health Professional Talk, 8-15 minutes
(See: Scripts)
 - Group discussion facilitated by ACS Volunteer, 30-40 minutes
(See: How to Lead Small Groups)
 - Complete **Sign-up form** for each participant:
 - If signing up for mammogram: get insurance coverage info.
 - If they want to schedule with their own doctor ask if they would like to fill out the letter to their physician; get physician/clinic name & address (see physician list if needed).
 - If signing up for reminder card: have them fill out the card.
 - If they don't want to sign up for anything--have them write the reason why and also the mammogram info section of the form (they don't have to fill in their name if they don't want to)
 - Ask if they are interested in a BSE session or tour of HCMC (back of form)
 - Collect all forms (make sure your initials are on the back of the sign-up form), cards and letters and give to Team Captain.
 - Refreshments
 - Conduct drawing for door prize.
14. Clean up.

Team Captain:

15. Indicate number who attended on the site packet form on the front of the red site folder.
16. Check sign up forms to see that all needed information has been completed and place them in the large envelope.

After the Party

17. Take down Announcement Posters (pink ones).
18. Complete and return Volunteer Feedback Form using self-addressed stamped envelope.

Team Captain:

19. Return completed sign-up forms, physician letters and reminder cards to ACS Coordinator in large envelope which is provided.

ACS Coordinator:

20. Give forms to MDH for tallies.
(MDH will send back tallies and names of people who filled out physician letters for follow-up.)

Before Sign-up Session

21. Check with Resident Coordinator to make sure announcement posters for Sign-up Session have been put up (yellow ones).
22. Confirm room.

The Day of the Sign-up Session

23. Contact Resident Coordinator and arrange to be let into the building.
24. Pick up/take along: Sign-up Session Bag, Site Packet.
25. Go to reserved room and set up for Sign-up Session
 - .ACS Volunteers use Step Checklist for a guide
 - .Resident Coordinator use Planning Checklist for a guide
26. Conduct Sign-up Session
 - Give each woman who registers a ticket for the door prizes.
 - Give ticket to women bringing a friend who signs up.
27. Conduct drawing for door prize.
28. Indicate the number who attended the party on the form on the front of the site packet.
29. Clean up.

After the Sign-up Session

30. Take down Announcement Posters (yellow ones).
31. Return completed sign-up forms, physician letters, reminder cards and site packet to Team Captain.
32. Complete and return Volunteer Feedback Form using self-addressed stamped envelope.

Team Captain:

33. Return completed sign-up forms, physician letters, reminder cards and page from front of site packet to ACS Coordinator.
34. Bring remaining supplies (bags, etc.) to ACS Headquarters.
35. Send hand-written Thank You Note to Resident Coordinator and other resident volunteers.
(Thank you notes are in the Site Folder, additional copies may be obtained from the ACS Coordinator.)

ACS Coordinator:

36. Return all forms to MDH.

Follow-up

38. MDH: File reminder cards in monthly folders and send out each month.
40. MDH: Send out physician letters completed at the sessions.
39. MDH: Schedule mammograms for those who requested them.
41. ACS Volunteer: Contact women who filled out physician letter to see if they have made arrangements to get a mammogram.
37. Put up Ethnic group posters.
42. ACS Coordinator: Send out thank you's, certificates, and results upon completion of all parties/sign-up sessions.

How to Lead a Friend to Friend Group Discussion

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How to lead a Friend to Friend Group Discussion

Training for ACS Group Discussion Leaders

How to lead a Friend to Friend Group Discussion

Your goals as a group discussion leader

- To gain trust and develop rapport with the group participants
- To get to know each participant, especially their attitudes and barriers regarding mammography
- To learn their mammography “history”--how many, how regularly
- To educate the participants about the importance of mammography
- To encourage all the women to sign up for either a mammogram or a reminder card

The focus group: A valuable research tool

Although the group discussions you will be leading are not focus groups in the pure sense, you will be using some of the same skills and techniques that are used to gather data for research purposes.

A focus group is a carefully structured and planned group discussion of roughly seven to ten participants, led by someone trained to elicit honest opinions on a particular subject or subjects. The leader’s job is to create a permissive and comfortable environment that encourages all points of view and allows every group member to have a chance to speak. Her task is to stimulate discussion even on sensitive issues without making participants feel defensive.

In a focus group, the moderator or discussion leader remains carefully neutral on the subjects being discussed. The leader is a “blank page”, asking the questions, then encouraging but not participating in the discussion.

In a true focus group, the questions to be asked are carefully planned, the discussion is usually recorded, and the transcriptions are analyzed. The final product is a focus group report.

The Friend to Friend Discussion Groups: Borrowing from focus group techniques

As in focus groups, your aim will be to create a warm and non-threatening environment in which all the women in the group feel comfortable sharing their views as honestly as possible. In a successful group discussion, the participants’ comments feed on one another, sparking new ideas and encouraging the full range of opinions.

While a focus group leader is a neutral question-asker and listener, your role as a discussion leader will be slightly different. You should be neutral where you can be, especially during the first few questions, but you needn't hide the fact that you are an advocate for mammography. You will be asking questions, but you will also participate in the discussion in the manner described below in "Your Part in the Discussion." You will provide education, as well.

Just as in a focus group, you will need to follow the "questioning route", keep participants on the subject, curtail the ramblings of a group dominator, and bring out the opinions of the shy members.

You needn't worry, however, about being the "perfect" discussion leader. Your goals are enjoyable ones--to gain participants' trust and confidence, develop rapport, and encourage honest discussion of their attitudes toward breast cancer and mammography. Your ultimate goal, of course, is to encourage as many women as possible from your group to sign up for a mammogram or reminder card.

Breaking your own social habits

For most of us, our only experience with group discussions has been in social or work situations. Some of the habits you have developed for these purposes should be avoided, if possible, when you're leading a group discussion. For instance, in social settings we nod and smile to show we approve of what someone says. Or in a work setting you may frown and disagree with a point someone is making. In a group discussion, the participants are sensitive to such signs of approval and disapproval. Because they often want to please the leader, they may give the answer they think you want to hear. Try to become aware of your own habits--both your verbal and non-verbal feedback--that could affect participants' answers. Remember, you're 'trying to get at their true feelings!

In social and work conversations, we are accustomed to giving our own opinions, another habit you may need to work on. At first, it may seem like torture to keep silent, but muster all your self-discipline to keep from expressing your personal viewpoints, except where appropriate, as described below.

Characteristics of a successful discussion leader

- You should be a good listener, a skill that comes naturally to some and is more difficult for others. Leading a good discussion requires a surprising amount of concentration. Your follow-up probes often are a response to their comments; You *never* want to miss an opportunity to get more valuable information!
- Become familiar with your questioning route so you won't need to read from it. Your questions should seem spontaneous. Even in a true focus group, the question order sometimes falls apart, which is fine, especially in these group discussions. If a woman brings up mammograms when you're talking about breast cancer, for example, let her continue. You'll want to cover all the topics listed--but it's okay to let the women dictate the order.
- You should be able to control the group discussion *unobtrusively*. Try to keep the discussion to the planned topics, a task that isn't always easy! When clearly irrelevant topics are brought up, subtly guide the discussion back. You don't want to be rude, of course, but sometimes you will need to be firm. Sometimes, however, digression leads to fruitful discussion in directions you could not have predicted. Use your own judgment on how far to let a digression go.
- Be watchful for shy or quiet participants. Make certain they have the chance to talk, especially if other group members dominate. Turn to them and ask them the question, addressing them by name. "Jane, do you agree with Mary, or disagree? (Explain)" or "Jane, what is your experience with having mammograms?"
- To cut off an overly talkative participant, you may have to interrupt gently. Your body language can help as well; Stop looking at the talker, or even turn your body away from her. You'll learn how to walk the fine line between rudeness and firmness.
- To encourage all points of view and honest answers, use statements such as "We're interested in hearing both the positive and negative things you have to say about . . ." If several members have stated similar opinions, say something like, "Does anybody have a differing opinion?" Another way to elicit and give permission for a contrary view is to say "Some people feel . . ." or "Others have said . . ." Then "Do any of you feel that way too?" Beware of the power of the group to subtly discourage members from disagreeing with the majority.

- To get more information than a woman initially volunteers, use such phrases as “Could you explain?”, “Say more”, and “Go on.” You’ll be surprised at how much more you can get!

Your volunteer training session will provide more tips, as well as plenty of practice on how to remain as neutral as possible, how to encourage honest discussion, and how to handle difficult situations.

Group Discussion Content

The questions: carefully planned and worded

The following “rules” are essential for focus group questions. However, since these group discussions are less formal than focus groups and aren’t used for research purposes, you can have more latitude. You may find some of the suggestions helpful, but don’t worry if you “break the rules.”

- Questions must be stated in as **neutral** a manner as possible, so that they do not suggest, however subtly, what the “correct” answer should be.
- Questions usually go from the **general to the specific**, from the easy to answer to the more difficult. For example, “What is your opinion of the medical care you get?” is more general and might be used early in the discussion. while “What kinds of things get in the way of your keeping a doctor’s appointment?” is more specific and personal, and would be used later, once you’ve gained their trust, and they feel more comfortable answering. (Notice that the latter question is worded to avoid eliciting a defensive response. Compare that question with, “Why don’t you keep doctors’ appointments sometimes?”)
- Questions are usually **open-ended**, because they generate more productive answers and reveal what is on the participants’ mind, rather than reflecting what the discussion leader *thinks* is on their mind. “Do you worry about gaining weight when you’re pregnant, because you think your husband might not like you to get fat?” is clearly a leading question. “How do you feel about gaining weight while you’re pregnant?” is open-ended and, with follow-up probes, may generate all kinds of answers you may never have dreamed of. (In focus groups where that question was asked, we discovered, to our surprise, that boyfriends and husbands were far more likely to be pushing food at them!)
- Questions should not put the participant on the defensive. “**Why**” questions are rarely used for that reason--the questioner sounds like an interrogator. In conversation we often ask “why”, so you may have to work at breaking another habit! An alternative to “Why haven’t you asked your doctor to order a mammogram,” might be “How do you feel about asking your doctor to order tests like mammograms?” The first suggests a judgment, the second is more neutral.

- Questions that require a “**yes**” or “**no**” are usually avoided, simply because those one-word answers can end the discussion very quickly! (If you realize you’ve asked a “yes” or “no” question, just add “Explain,” or “Could you say more?”)

Keeping the message clear and simple

The topics for these group discussions are **breast cancer and mammograms**. We do *not* want to discuss breast self exam (BSE) at this time. We learned from focus groups completed after the first intervention (1992) that if we have too many educational messages, as we did last year, we obscure our real purpose, which is to encourage women to a) sign up to get a mammogram from us, or b) sign up for the reminder card program if they prefer to get a mammogram from their own doctor, and c) to continue getting mammograms regularly according to the guidelines.

The educational message of the group discussions will be limited to five key points, which are designed to encourage women to get regular mammograms as well as address the most common myths and barriers to regular mammography, as identified in focus groups.

Five Key Points

- Mammograms detect tumors smaller than does any other method--including breast self exam and breast exam by your doctor. (These lumps can be as small as two pin heads and can be seen in a mammogram two years before they can be felt.)
- The nation’s health experts and all major health organizations recommend mammograms for women over 40. The American Cancer Society guidelines are: All women over age 40 should have a mammogram once every two years, and all women over age 50 should have a mammogram every year. (Doctors don’t always suggest a mammogram. What to do or say if your doctor doesn’t suggest one.)
- Four of five women who get breast cancer had no family history.
- Breast cancer occurs in women of all ages, but it occurs much more frequently in older women.
- A mammogram creates a sensation of pressure but usually is not painful.

A major goal of the discussions

The group discussion questions will also help you identify how each woman feels about mammography personally, whether or not she gets *regular* mammograms, and if she doesn't, why. In other words, you'll want to assess the personal myths and barriers for each woman, so you can address them, either in the group discussion, or during the sign-up period. Since these are tougher, more personal questions, you will ask them later in the discussion, when you have gained their confidence and are beginning to understand how they feel about these topics.

The Questions and Your Role in the Group Discussion

The questions are listed below, followed by suggestions for your responses to particular questions or statements. Also included are some likely responses from participants. based on previous focus groups.

Your job will be easier if you become familiar with the information in this section *before* the discussion! Note: These responses are suggestions. Don't feel you have to repeat them verbatim. Your own words, said in a conversational tone, will be much more effective than a memorized message: "Questions and Answers" following this section can prepare you for the unexpected question.

Introductions

First let's go around the circle and introduce ourselves. Also tell us a little about yourself--about your family, maybe, where you're from, how long you've lived in this building.

I'll begin. My name is _____ and I'm an American Cancer Society volunteer. (Keep to a brief, general introduction, such as "I have X children. I grew up in X, but I've lived in the Twin Cities for X years. . .")

This is your chance your change to give your opinion on a variety of subjects. Please feel free to say anything that comes to your mind.

I'll start the discussion by asking some questions. For this first question. I'll start with you, (participant's name) and then I'll go around the circle. But after that you're welcome to speak whenever you have something to say.

Breast Cancer

Aside from what you've heard here today, what have you heard or read about breast cancer? (For example, from TV, magazines, friends, relatives?)

Some will tell about friends and relatives who have had breast cancer. Others may mention mammograms right away. Other likely responses will be related to beliefs they hold that are not substantiated by facts. Here you may have the urge to correct them right away. However, in order to keep the communication open and remain neutral, yourself, hold off on giving the "right" answers until later.

I'd like to hear your thoughts about what X (the health professional speaker) said here today. Anything that he/she said that you disagree with or found especially interesting? Were there any surprises? What were they?

Here you should remain neutral again, except for supporting the statements made by the speaker. If they disagree with something the speaker said, ask other members how they stand on that issue, and only after others have spoken, offer your support of the accurate facts.

How concerned are you, personally, about breast cancer?

A common answer to this question is either "I'm concerned, because there's cancer in my family," or "I'm not worried because there's no cancer in my family." After everyone has answered this question, ask for comments about breast cancer being inherited. Then repeat the following facts: It's true that your chances of getting breast cancer are greater if your mother, sister, or daughter had breast cancer. But four out of five women who get breast cancer don't have a history of it in their families!

As you get older, does breast cancer become more of a concern or less? Explain.

After all the women have had a chance to answer, repeat the fact that the older you get, the greater your chances are of having breast cancer, so you're never too old for a mammogram.

Where does breast cancer fit in as a worry to you, compared to other health concerns you have? Is it at the top of your concerns--at the bottom? Where would you put it?

Having other health concerns that push breast cancer to the bottom of the "concern list" is a barrier to getting a mammogram for some women. Others may say breast cancer is a big concern. After the women discuss where breast cancer fits in as a concern: remind those who do worry that getting regular mammograms can give them peace of mind, and for those who don't worry about breast cancer, suggest that getting a mammogram is quick and simple, and should be a regular part of their check-ups, so that breast cancer doesn't become a big worry someday.

Mammograms

Now let's talk about mammograms for a bit. Just so we know that we're all talking about the same thing, here's a picture of a mammogram. (Pass around the photograph of a woman getting a mammogram.)

Aside from what you've heard today about mammograms or breast X-rays, what have you heard or read about them?

In earlier focus groups, this is where the group has come alive! Showing the picture of a woman having a mammogram usually prompts plenty of discussion and even laughter. The most common point of discussion related to the discomfort or even pain--either that they've heard that mammograms are painful, they've experienced it themselves, or that they disagree that it's painful. If the topic of pain is brought up here, explore it with all the women. Let those who have had mammograms describe how they feel about the experience. Usually, (from earlier focus groups) several will say it wasn't bad at all, or that it just pinched a bit. The ideal is to have those who have had mammograms give assurance to those who are concerned about pain. If this doesn't happen, you should say that "most women find that it isn't painful--that the worst is a pinching or squeezing feeling for a short time." Give your own experience if appropriate. Also add that it's more uncomfortable for younger women during their menstrual period. Your final point on the subject of discomfort should be: "If you find it painful, you can tell the technician, and she can let up a bit." (It's important for the women to feel they have some control.)

Despite the value of mammograms, most women do not get regular mammograms. How many of you have had at least one mammogram?

How many of you get mammograms every year--with your annual check-up, for example.

Can we assume that those of you who didn't raise your hand have never had a mammogram?

With these three questions, you will be able to identify those who will need to be encouraged to get a mammogram from the Friend to Friend Program, and those who are more likely to be candidates for a reminder card. If you prefer, you can take some quick notes to help you when you're signing individuals up later. Some will be vague about how many mammograms

they've had or when, and others may feel they are doing everything "right" because they had one or two mammograms sometime in the past. You should emphasize that getting *regular* mammograms--either every two years or once a year, depending on age--is important.

How would you describe the physical experience of getting a mammogram?

Ask this question *only* if the topic wasn't discussed earlier. Your part in the discussion is outlined above.

In your opinion, what are the main reasons a woman doesn't get a mammogram? Probe for barriers such as: I'm afraid of what I might find out, fear of pain, just haven't had time, can't afford it, don't have transportation.

While this question is stated in a general way to avoid making any women feel defensive, your goal is get women who haven't gotten mammograms to say why. Here's your chance to identify any barriers the women may have to getting mammograms. Each barrier has a possible response from you--but ask first for responses from other members of the group. Think about how you could respond to the barriers mentioned above. For example, "I'm afraid of what I might find out" could be countered by, "The earlier breast cancer is found and treated, the better your chances are of a complete recovery." "Can't afford it," and "transportation problems" are both solved by the Friend to Friend Program.

Talking to Your Doctor

X (the health professional speaker) talked about the fact that doctors don't always suggest that you get a mammogram. How many of you have a doctor who never suggested that you get one? Can you think of any reasons he or she might not have suggested a mammogram to you?

What kinds of things might keep you from asking your doctor to set up a mammogram appointment for you?

Have any of you have ever made a suggestion to your doctor regarding your own care? What did you say? Do you feel you were successful? What ideas do any of you have for making suggestions to your doctor regarding your own care?

After everyone has had a chance to answer these questions, (not everyone will have an opinion, of course) you might make some suggestions of your own regarding what to say to a doctor. Your own experience at talking to a doctor would be helpful. Give them a specific suggestion for what to say to their doctor. Example: Tell them that doctors appreciate it when a patient is involved in her own care. Say to the women, “You can just say, ‘We’ve had a program in our high-rise about breast cancer and mammograms, and I’d like to have one. How do I do that?’”

The Friend to Friend Buddy System

You probably all have friends and neighbors who don’t get out much and aren’t here tonight and need encouragement and help to get a mammogram. How many of you know someone like that? Describe that person. What kinds of things could you do to help someone like that? How many of you are willing to be a part of the Friend to Friend Buddy System?

After others have offered their suggestions, you can suggest (if not already mentioned) that they may want to encourage a friend to get a mammogram, tell them about the program, give them a brochure (show it), tell them that it’s free, and offer to go together. Also say “There will be a second sign-up session in this building in a few days. Bring a friend to sign up then and you’ll both have another chance at a drawing for a grocery store coupon.”

Does anyone have anything more they’d like to add, or questions they’d like to ask about breast cancer or mammograms?

Don’t feel you need to have all the answers! Here are two cancer hotline numbers you can provide to the women for answers to their cancer questions:

American Cancer Society of Minnesota Hotline: 1-800-ACS-2345

National Cancer Institute Hotline: 1-800-4-CANCER

Sign-up Period

After the discussion is completed, say the following to the women in your group: (Don't read this "script", however: just make certain you cover all the points in your own words.)

Now is your chance to sign up for a mammogram through the Friend to Friend Program or a reminder card if you prefer to get a mammogram from your own doctor. Remember, the mammogram is free if you don't have medical coverage--and we'll provide transportation if you need it.

This is also your chance to sign up for other Friend to Friend activities- -the tour of a Hennepin County mammogram clinic and a breast self exam class.

I'd like to talk with each of you individually. I'll start with _____(name of group member). The rest of you can help yourself to coffee and cake and bring it back here to the group, so I have a chance to talk with each one of you.

Don't forget to stay after the sign-up for the drawing for a grocery gift certificate. You have to be here to win!

(Note: You might find it easier to have a volunteer serve the women at their seats, so they don't wander away permanently!)

Tips for Signing Women Up

- Your goal is to try to encourage every woman to sign up for either a mammogram or a reminder card. Don't coerce a woman, however, if she seems very reluctant.
- Use the knowledge you have gained about each woman during the group discussion to give specific encouragement during the sign-up. For example, if you know that a woman who has never had a mammogram had a sister who died of breast cancer, (a true story) say something like, "Because of your sister, you have a special reason for needing a mammogram, don't you?" Convey that you have a personal interest in each woman, and that you, *care* about their well-being.
- If you have learned through the group discussion that a woman is fearful of having a mammogram or appears reluctant during the sign-up period, you might encourage her to take the tour of the Hennepin County mammogram

facility to see what it's like. (She'll have another chance to sign up after the tour.)

- Remind each woman of the second sign-up session and encourage them to bring a friend. Tell them that by attending the second sign-up, both their friend and they are eligible for another drawing for a grocery gift certificate.

Questions and Answers About Breast Cancer and Mammograms*

Remember: if you don't have the answer to a question, yourself, pass on these hotline numbers:

American Cancer Society of Minnesota Hotline: 1-800-ACS-2345

National Cancer Institute Hotline: 1-800-4-CANCER

What are my chances of surviving if I get breast cancer?

Survival depends primarily on the stage of the disease at the time it is detected. If a lump is found by mammography before it is large enough to be felt, the cure rate is nearly 100 percent.

Is breast cancer related to chemical pollution in the environment?

No. Chances of developing breast cancer do not seem to be increased by exposure to chemicals found in the environment.

Are women with very large breasts more likely to get breast cancer?

No. The size of the breast is not related to the development of breast cancer.

Am I at risk for breast cancer if I have breast cysts?

Only a very small number of women with fibrocystic breasts have a slightly increased risk of developing breast cancer and those women can be identified by a pathologist's examination of the breast tissue.

*(Compiled from several sources, including American Cancer Society and National Cancer Institute)

Does the use of hormones to relieve menopausal symptoms cause breast cancer?

Most researchers agree that the use of hormones for contraception or menopausal symptoms does not increase breast cancer risk.

If a breast lump is painful, is it more likely to be a cancer?

As a breast cancer is developing in the breasts, it usually does not cause pain. In the early stages of breast cancer, a woman usually is unaware of any symptoms.

Does a blow to the breast or handling the breasts during lovemaking, by a doctor or during mammography cause breast cancer?

No. Breast cancer is not associated with bumping, bruising, or handling the breasts in any way.

Does mammography cause breast cancer?

Recent improvements in mammography equipment and technique have greatly lowered the amount of radiation needed to produce a high quality image of the breast tissue.

What are calcifications?

Calcifications are small calcium deposits in the breast that are found only by mammography.

Microcalcifications are tiny specks of calcium that may be found in an area of rapidly dividing cells. When many of these are seen in one area, they are referred to as a cluster and may indicate a small cancer. About half of the cancers detected by mammography appear as a cluster of microcalcifications, the other half appear as lumps.

These coarse calcium deposits are found in about half of all women over age 50 and are usually associated with benign conditions.

Thinking About Getting a Mammogram

Questions and Answers

What are the risk factors for developing breast cancer and how can women protect themselves against it.?

Simply being a woman and getting older puts you at risk. More than 75% of cases occur in women over age 50. The risk is also increased if you:

- have a history of breast cancer in your family;
- never had children:
- had your first child after age 30:
- began menstruating before age 12:
- began menopause after age 50:
- or eat a high-fat diet.

There is no way to prevent breast cancer. But the best protection is early detection and prompt treatment. Early detection includes regular screening mammograms, breast exams by a health professional and monthly breast self-exams.

What are the chances of developing breast cancer? What are the current statistics on survival?

Breast cancer is the most common form of cancer in American women, and one in nine women will develop it in her lifetime. *If detected early*, breast cancer can often be treated effectively with surgery that preserves the breast.

Five-year survival for breast cancer is:

- 91% if the cancer has not spread:
- 69% if it has spread to nearby organs:
- 18% if it has spread throughout the body.

When detected and treated early, breast cancer need not be life-threatening.

If I do not have a family history of breast cancer, can I still develop it?

Yes. *In fact, 80% of women who develop breast cancer have no family history of the disease.* While chances of getting breast cancer increase if a family member has also had it, this does not mean that a woman is not at risk, if no one in her family has had breast cancer.

What is a mammogram?

A mammogram is an x-ray picture of the breast. Usually two views of each breast are taken—one from the side and one from above. This way, the physician can identify very small lumps or other changes before they can be felt by a woman or her physician.

There are two types of mammograms: screening and diagnostic. A screening mammogram is an examination for women who have no symptoms. It is done to detect a lump or other symptoms before they appear. A mammogram is taken every one to two years from age 40-49 and every year from age 50 on. Diagnostic mammograms are necessary for any woman who has symptoms of breast cancer, regardless of her age.

If I don't have a lump, why should I have a mammogram?

The most common warning sign of breast cancer is a lump or thickening of the breast. However, often there aren't any tangible signs of breast cancer until the disease has progressed into its advanced Stages.

That's why a mammogram, which can detect breast cancer before it can be seen or felt, is so important. Other warning signs are a change in the size or shape of the breast, discharge from the nipple, or a change in the color or texture of breast or skin around the nipple.

How much does a mammogram cost? If I can't afford it, can I receive financial assistance?

A mammogram costs between \$50 and \$250. More than 30 states have passed laws that require insurers to reimburse part or all of the cost of screening mammograms, or at least offer the benefit to subscribers.

If you are not covered by an insurance plan, there are hospitals and health clinics that offer assistance or free mammograms. Ask your American Cancer Society volunteer for more information about how mammograms are covered by Medicare and/or Medicaid.

Do I have to get a mammogram before age 50? Isn't breast cancer a disease of the elderly?

Even though more than 75% of breast cancer cases are in women over age 50, the American Cancer Society still recommends:

- That you get a baseline mammogram between the ages of 35 and 39 for later evaluation and a physical examination every three years.
- Beginning at age 40, you should have a physical examination and mammography screening every one to two years.
- Beginning at age 50, both the physical examination and mammogram should be performed every year.
- If you have a family history of breast cancer, you should talk to your physician about getting mammograms more frequently or beginning at an earlier age.
- All women perform breast self-examination monthly.

Do I need to prepare for a mammogram?

Yes. Ask your American Cancer Society volunteer for a list of instructions on how to prepare for your mammogram. You should still check with the office where you will be having the mammogram however, for any specific instructions.

I already had one mammogram and it was negative. Why do I need another one?

It is quite possible that abnormalities in your breast, which were not yet visible in your last mammogram, will now be identified. You have a much better chance for survival if you can detect breast cancer in its earliest, most treatable stage—before you have any symptoms.

How can I be sure that I am getting a mammogram that is of high quality and safe?

If a mammography facility is accredited by the American College of Radiology, the facility's machines and staff have met specific quality criteria. If you cannot find an

accredited facility near your home, there are five questions you can ask to make sure a facility is of high quality. Ask your American Cancer Society volunteer for a list of these questions. In terms of safety, of radiation exposure the radiation exposure from modern low-dose mammography equipment is minimal and the medical benefit to the patient far outweighs any potential risk.

How is a mammogram taken?

A trained radiologic technologist positions one breast between two plastic plates that compress the breast, spreading it out so that the x-ray can produce as precise an image as possible.

He or she then takes the x-rays from above the breast, and from side to side. The procedure is repeated for the other breast and only takes a few minutes.

Then a specially trained physician, called a radiologist, reads the mammogram to determine if any suspicious areas exist.

Will the mammogram hurt?

The pressure caused by flattening the breasts may be slightly uncomfortable, but it should not be painful. If it is, however, you should tell the technologist taking the x-rays and he or she will ease the pressure.

What is the procedure if a lump is found?

In some cases, the physician may order aspiration biopsy (removal of fluid) of a breast lump. In other cases a tissue biopsy is recommended. This surgical removal and microscopic examination of the lump is the only way to determine whether cancer cells are present.

If the biopsy indicates the presence of cancer cells, you and your physician will confer about treatment options. Even if a biopsy is recommended based on the results of a mammogram, more than 80% of lumps are benign (not cancer). However, any breast lump must be examined by a physician.

My physician has never suggested that I get a mammogram. Why should I have one?

Although most physicians do recommend a mammogram for women who are 40 and older, not all do. Don't wait. The coordinated effort of each woman and her physician provides the best means for controlling breast cancer. It is important that you select a physician with whom you are comfortable and can discuss your concerns.



Scripts

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ACS Volunteer Talk to Resident Council Meeting

My name is X and I'm an American Cancer Society volunteer. I'm here as part of the Friend to Friend Program, which is a mammogram screening program here in your high rise. This is our second year in your building. No doubt some of you were involved in the program last year. In a minute, I'm going to give you some results from last year's program.

Purpose: The purpose of Friend-to-Friend is to encourage women to have regular mammograms or breast x-rays--because the earlier breast cancer is found, the better. Friend to Friend is a program for all women living in Minneapolis high-rises.

Sponsorship: The program is sponsored by several organizations--the American Cancer- Society, Senior Resources, the Minneapolis Public Housing Authority, the Minnesota Department of Health and the University of Minnesota.

Overview: The Friend-to-Friend program includes several activities. The main activity is a Friend to Friend Party, which will be a bit different from the one which was held in this building last year. This year, a doctor or nurse will be giving a talk and answering questions. Also, there will be small group discussions so all the women have a chance to participate,

Other Activities: Besides this party, the Friend to Friend Program includes several other activities. If enough people are interested, we can have a group outing to tour the mammogram clinic at Hennepin County, to see what it's like to get a mammogram. We also would like to hold a class for teaching breast self exam.

We hope to get as many women as possible in this building to sign up for a mammogram this year. Mammograms will be offered free to any woman who doesn't have medical coverage. And The Friend to Friend Program will provide transportation to a Hennepin County Medical Center clinic for women who need it.

Report on Last Year's Campaign

Volunteer: Refer to the Resource List for Outreach Intervention Tallies for specific statistics for your building. Stats should include:

- how many women were eligible for a mammogram, how many attended the party,
- how many received a mammogram through the Friend to Friend Program,
- how many received reminder cards to get a mammogram from their own physician.

Friend to Friend Introductory Talk (by ACS volunteer)

(About 4 minutes)

Welcome! Thanks for coming (today/tonight).

Before I say any more, I'd like to be sure that everyone can hear me. Does anyone want to move up to the front to hear better? (Be encouraging, so women feel comfortable saying yes. then give them time to move up.)

My name is_____ and I'm an American Cancer Society volunteer. I'm here as part of the Friend to Friend Program, which is a mammogram screening program here in your high rise.

The purpose of Friend-to-Friend is to encourage women to have regular mammograms or breast x-rays--because the earlier breast cancer is found, the better. Friend to Friend is a program for all women living in Minneapolis high-rises.

The program is sponsored by several organizations--the American Cancer Society, Senior Resources, the Minneapolis Public Housing Authority, the Minnesota Department of Health and the University of Minnesota.

The Friend-to-Friend program begins with (today's/tonight's) party, and can include several other activities, depending on the interest of the residents.

We hope to get as many women as possible in this building to sign up for a mammogram. The Friend to Friend Program will provide transportation to a Hennepin County Medical Center clinic for those women who sign up to have a mammogram through this program. Some women may choose another option--to see their regular doctor for a mammogram, either right away, or at their regular appointment during the year. We will send reminder cards to those women if they ask for us to.

The goal of Friend to Friend is to reach as many women residents in the high rises as possible. We're hoping to set up a "buddy system", where women help each other get mammograms.

We know that some women find it easy to get out and go to a doctor. Some of you are already getting regular mammograms. But there are other women in the buildings who don't see a doctor regularly and don't get regular mammograms. These women might be willing to get a mammogram if they had someone to encourage them, remind them. and maybe even go

you are 50 or older, you should get a mammogram every year. Having a mammogram every now and then just isn't enough.

I know that some of you already follow the recommended guidelines and get mammograms regularly through your doctor. But some of you don't get mammograms regularly, because your doctor hasn't suggested it. Am I right? So some of you may be wondering, "If mammograms are so important, why hasn't my doctor recommended one?"

There are several reasons why your doctor may not have encouraged you to get one. First, as you all know, doctors are very busy. (PERSONAL COMMENT HERE IF APPROPRIATE) And your doctor usually has a lot to talk with you about, often having to do with a health problem you have. So mammograms aren't necessarily a priority.

Also, the doctor you see regularly may be a specialist--a diabetes or arthritis specialist, for example. This doctor may assume that you have another doctor who gives you regular check-ups and mammograms. Specialists often don't see it as their job to recommend such tests as mammograms--even though they think they are very important.

Now if there's one thing you remember from my talk, I hope it's this: If your doctor hasn't suggested that you get a mammogram, there is no reason you can't ask to have one yourself. Doctors appreciate a patient interested in her own health. It's okay to ask your doctor questions and make suggestions. So don't hesitate to ask.

You can also get your mammogram through the Friend to Friend Program, which is especially easy. It's free if you don't have medical coverage. And the program will provide transportation to a Hennepin County mammography clinic if you need it. You'll have a chance to sign up for a mammogram later (today/tonight.)

Some women say, "I'm too old to bother with getting a mammogram."

Well, you're never too old for a mammogram. As you get older, your chances of having breast cancer increase. That means if you are 75, 85, or even 95, you should be getting a mammogram every year!

How many of you have no breast cancer in your family? (ALLOW TIME FOR THEM TO RAISE THEIR HANDS) I know a lot of women say to themselves, "I don't need to get a mammogram, because there's no breast cancer in my family."

The truth is this: If your mother or sister have had breast cancer, your risk is higher than average. BUT: Four out of five women who get breast cancer had no family history of it. Isn't that surprising? Four out of five women who get breast cancer had no family history of breast cancer.

I know some women put off having a mammogram because they're afraid it's going to be painful. The Friend to Friend Program has talked to a lot of women in the high rises about this issue, and while some women say it pinches or is uncomfortable, most say it isn't painful. Younger women sometimes have tender breasts near or during their period, so if you're younger, make your mammogram appointment for a week to two weeks after your period. If any of you find a mammogram to be painful, feel free to ask a technician to use less pressure.

I know that a few women have questions about the amount of radiation in a mammogram. As I said before, the radiation is about equal to the amount in a dental X-ray. And the pressure from a mammogram does not cause any injury to the breast.

The American Cancer Society and I strongly recommend that every woman in this room who's 40 years old and older should have mammograms regularly--every one to two years, if you're between 40 and 50, and every single year, if you're 50 or older.

I'll be happy to answer any questions now, if you have some

- To have the key concepts of the educational message introduced by a credible health professional
- To debunk the most common myths about breast cancer and mammography

Five Key Points

- Mammograms detect tumors smaller than does any other method-- including breast self exam and breast exam by your doctor. (These lumps can be as small as two pin heads and can be seen in a mammogram two years before they can be felt.)
- The nation's health experts and all major health organizations recommend mammograms for women over 40. The American Cancer Society guidelines are: All women over age 40 should have a mammogram once every two years, and all women over age 50 should have a mammogram every year. (Doctors don't always suggest a mammogram. What to do or say if your doctor doesn't suggest one.)
- Four out of five women who get breast cancer had no family history.
- Breast cancer occurs in women of all ages, but it occurs much more frequently in older women.
- A mammogram creates a sensation of pressure or momentary discomfort, but usually is not painful.

Script for Presentation by Health Professional *The Friend to Friend Program*

Introduction: *The ACS volunteer will introduce you briefly. Before beginning your talk, you should add any other relevant information about you background and experience with women's health, breast cancer, and mammography.*

If someone told you that simply having your picture taken could save your life, would you do it? I expect most of you would, right?

Well, that's exactly what a mammogram can do. It's a picture--an X-ray--of your breasts, and it *can* save your life, because it can detect breast cancer in it's earliest, most treatable stages.

A mammogram is safe and easy to get. It's a low-dose X-ray--about equal to the amount you get from an X-ray of your teeth at the dentist's. For those of you who haven't had a mammogram. I'll describe what it's like. A technologist, who is almost always a woman, puts each breast between two plates and flattens the breast to get a good picture. You will feel a pressure on your breast. It takes just a few minutes.

You all received a string with two beads on it when you came in (today/tonight.) Does anybody have an idea what these beads represent? (PAUSE FOR RESPONSES.) Feel the larger bead between your fingers . . . This larger bead is the size of a breast lump or tumor that you or your doctor would be able to feel by touch. In other words, if your doctor does a physical exam of your breasts, or if you do breast self exams regularly, a lump would have to be a little over one-half inch in size before it can be felt.

Now roll the smaller bead between your fingers . . . Pretty small, isn't it? It's only about 1/12 of an inch across--about the size of two pinheads. This is the size of the lump that a mammogram can find!

Why is this so important? Feel the bigger bead again--it's seven times larger! If you or doctor find a lump in your breast the size of this bigger bead, it has been in your body *two years longer* than it would be if you found it with a mammogram. The earlier you find a breast cancer, the better--because breast cancer, like all cancer, can spread. And catching it early, when the lump is very tiny, means a woman has a very good chance of complete recovery. So a mammogram really is a picture that could save your life.

That's why all the experts, and at least 12 major health organizations, including the American Cancer Society, strongly recommend that every woman age 40 and over get regular mammograms. If you are between the ages of 40 and 50, you should get a mammogram every one to two year: If

with them. Also, it's just more fun to go with someone else. So be thinking (tonight, today) about those friends or neighbors *you* know whom you could help by being a buddy.

Besides this party, the Friend to Friend Program includes several other activities. On (date) we will be holding another mammogram sign-up session for women who weren't able to come to this meeting. Here's your chance to encourage a friend to get a mammogram along with you.

Also, if enough people are interested, we can have a group outing to tour the mammogram clinic at Hennepin County, to see what it's like to get a mammogram. Those of you who have never had one might find this especially interesting. We'll provide the transportation.

And one more activity the American Cancer Society and the Friend to Friend Program will offer in this building, if enough women are interested, is a class which teaches breast self exam. Later during the group discussions, you'll have a chance to tell us if you're interested in any of these activities.

At the end of the party there will be a drawing for a prize, so hang on to the ticket you received when you came in. The prize is a good one--a coupon for groceries! So be sure and stay until after the drawing.

There will be a second drawing for groceries at the sign-up session to be held (date). If you bring a friend down to the sign-up session, both of you will be able to enter that drawing for more free groceries.

Now I'd like to introduce X, who is a nurse (doctor) etc. (Get introduction information from the speaker before your talk.)

The Friend to Friend Program
Presentation by Health Professionals

Total time: Approximately 7 minutes plus questioning period

Please note: The purpose of having you speak to the women in these high-rises is two-fold: The first is the obvious educational message you can provide. But perhaps most important is the fact that you represent the medical field and thus can provide much-needed medical credibility to the Friend to Friend Program. Our post-campaign focus groups told us that one of the most significant reasons women are not signing up for mammograms from the Friend to Friend Program is that they don't see us as having the medical credibility that their physician has. If the physician has not recommended mammography, then our recommendation is meaningless to some women.

We also learned in the past-campaign focus groups that including too many topics in our talks obscured our main messages about mammography. Therefore, we are not discussing breast self exam or clinical breast exams, even though these are also important aspects of total breast health. Try to keep to the key points, if possible, even during questioning. (If BSE is brought up, discuss its importance, of course--but stress that it is NOT A SUBSTITUTE FOR MAMMOGRAMS.)

Where appropriate, include personal anecdotes and suggestions based on your experience as a health professional (A nurse might say, "As a nurse, I know how hard it is to talk to a busy doctor sometimes. But I've learned that the best way is to...")

Another tip: Because most women in the audience are older, speak clearly, loudly, and slowly. Ask if everyone can hear you. A number of women missed our educational messages last year because they couldn't hear.

Purpose of the talk

- To establish medical credibility for the Friend to Friend Program and its mammogram messages.
- To directly address a) the reasons some doctors may not be suggesting that their patients get mammograms and b) the appropriateness of patients requesting mammograms from their physicians.

Examples

General “picture” poster

Friend to Friend Party announcement poster - pink

Sign-up Session announcement poster - yellow

Invitation to be put in building’s newsletter

Summary Sheet completed by Team Captain after planning meeting with Resident Coordinator

Invitation letter sent to eligible residents of the high-rise

This is a copy of the GENERAL OR "PICTURE" POSTER; actual size is 11"x14". Copies of this poster are in the Site Packet and are given to the Resident Coordinator for distribution in her building.

Friend to Friend

A Mammogram Screening Program for Your Health

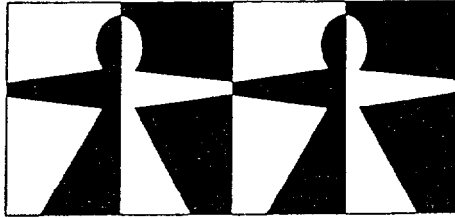


Jackie Cooper, age 54
2433 5th Avenue South

Lucille Keppen, age 77
1717 Washington Street NE

**For every woman 40 and over...
a mammogram is a must!**

Friend to Friend Program
REMINDER



Party

DATE: _____

TIME: _____

PLACE: _____

*Information on breast cancer screening

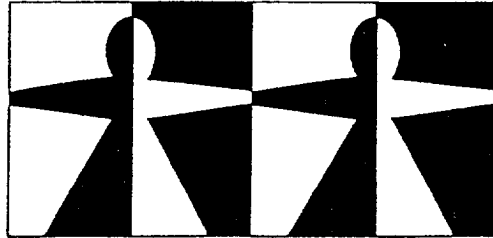
*Cake and coffee

*Drawing for Grocery Store Gift Certificate

Sponsored by Minnesota Division of the American Cancer Society;
Minnesota Department of Health, University of Minnesota;
Senior Resources and Minneapolis Public Housing Authority.

Friend to Friend Program

REMINDER



Sign-up Session

DATE: _____

TIME: _____

PLACE: _____

Sign up for a mammogram...
and a chance to win free groceries.

Bring a friend to sign up and
you both have a chance to win!

Drawing for Grocery Store Gift Certificate
will be held at _____ o'clock.

Sponsored by Minnesota Division of the American Cancer Society;
Minnesota Department of Health; University of Minnesota;
Senior Resources and Minneapolis Public Housing Authority

Invitation to be put in building's newsletter:

A Friend to Friend Party sponsored by the American Cancer Society and the Minnesota Department of Health will be held

(date) _____, at (time) _____,

in (location) _____. A physician or nurse will be available at the party to answer your questions about breast cancer or mammograms. Cake and coffee will be served and a drawing will be held for a grocery store gift certificate. Please come enjoy the party--even if you already get regular mammograms--and no matter what your age.

If you are unable to attend the party, a separate informal sign up session will be held (date) _____, (time) _____, (location) _____. Watch for posters!

SUMMARY SHEET

(To be completed at the planning meeting and forwarded to ACS Coordinator. Use self-addressed stamped envelope.)

Building Address: _____

FF Party

Sign-Up Session

Date	_____	_____
Time	_____	_____
Location	_____	_____

VOLUNTEER INFORMATION

Team Captain:	_____	Phone:	_____
Team Members:	_____	Phone:	_____
	_____	Phone:	_____
	_____	Phone:	_____
Resident Coordinator:	_____	Phone:	_____
Other resident volunteers:	_____	Phone:	_____
	_____	Phone:	_____
	_____	Phone:	_____
Social Worker:	_____	Phone:	_____

PROMOTION OF EVENT

Date general posters will go up: _____
who will post? _____

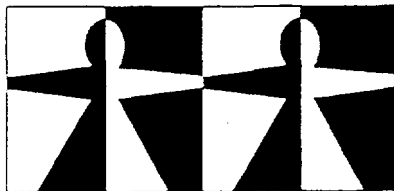
Party

Sign-up Session

Date announcement posters will go up:	_____	_____
Who will post?	_____	_____

Central location for FF materials:
Where? Yes No Checking on

YOU ARE INVITED



- What:** **The Friend to Friend Party**
- physician/nurse guest speaker
 - sign up for free mammograms
 - cake & coffee
 - chance to win free groceries
- When:** **2:00 p.m., Tuesday, April 20**
- Where:** **Community Room in your building**
620 Cedar Avenue South

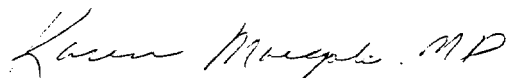
Dear Friend,

I would like to invite you to a very important event in your building that can make a difference in your health and life. We're calling it a party, because there will be cake and coffee and a chance to win free groceries. But it's more than a party. You will also learn some very interesting facts about breast cancer that every woman should know.

A physician or nurse will be available at the party to answer your questions about breast cancer and mammograms. And if you're 40 or older, you can schedule a mammogram (breast x-ray) that we can provide to you at no cost!

Please come and enjoy the party--even if you already get regular mammograms, and no matter what your age. If you have any questions or need assistance getting to the party, please call Jeanne Dungey at 627-5463.

Sincerely,



Karen Margolis, M.D.

P.S. If you are unable to attend the Friend to Friend Party, an informal sign-up session will be held April 27th at 2:00 p.m. in the Community Room, 620 Cedar Avenue South. If you sign up for a mammogram or reminder card or bring a friend who signs up for one, you are eligible for a chance to win a grocery store gift certificate.

The Friend to Friend program is sponsored by the Minnesota Department of Health, the American Cancer Society, the University of Minnesota, Senior Resources, and the Minneapolis Public Housing Authority.



Job Descriptions for Friend-to-Friend Program

CONTENTS

Team Coordinator/Speaker Coordinator	1
Team Captain	2
Team Member	3
Health Care Speaker	4
Resident Coordinator	5

Team Coordinator/Speaker Coordinator

Major Function:

*To Coordinate the Interventions with the Team Captains and Health Care Professionals.

Responsibilities:

1. Call the Team Captains to remind them of the approximate date of the Interventions.
2. Arrange Health Care Professional to speak at the Interventions after notified by the Team Captains of the arranged dates of the Intervention.
3. Serve as a resource for the Team Captains and the Speakers.
4. Communicate to the Friend-to-Friend Working Group regarding the status of the Interventions.
5. Communicate with American Cancer Society Staff person/s.

Team Captain

Major Function:

*To manage Friend-to-Friend team members and communicate with the Team Coordinator/Speaker Coordinator.

Responsibilities:

1. Coordinate planning dates and Intervention planning.
2. Coordinate planning dates and Intervention dates with Residents and Team Members.
3. Communicate the date and time of the Friend to Friend Party and the Mammogram/Reminder Card Sign-up Session to the Team Coordinator/Speaker Coordinator.
4. Provide feedback and evaluation comments to the Working Group representative.

Team Member

Major Function:

*To plan, promote and implement Friend-to-Friend mammography screening program.

Responsibilities:

1. Choose a team leader.
2. Volunteer for team tasks, i.e. distribution of materials, etc.
3. Plan Friend-to-Friend Party and Mammogram/Reminder Card Sign-up Session.
4. Implement Party and Sign-up Session.
5. Facilitate small group discussion.
6. Sign up participants for a mammogram or reminder.

Training Requirement:

1. Orientation to Friend-to-Friend Program.
2. Facilitator Skill Training.

Health Care Speaker

Major Function:

*To present general information about mammography in high rise buildings.

Responsibilities:

1. Review American Cancer Society mammography guidelines.
2. Understand Friend-to-Friend breast health program.
3. Review and follow the script for a 15-minute presentation.
4. Be available to answer questions at program for 4 months.

Time Commitment:

*Minimum of one program per month (scheduled March through June, days and evenings).

Resident Coordinator

(high rise building resident)

Major Function:

*Works with ACS Friend-to-Friend Volunteers to organize Resident Planning Committee and plan and conduct Friend-to-Friend Party and Sign-up session.

Responsibilities:

Determined at the planning meeting between ACS Volunteer and Resident Coordinator.

Resources

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Phone Numbers for Key People	1
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Phone Numbers for Key People

ACS Coordinator Diane Colley, 925-6338

Speaker Coordinator Lilly Perry, 473-5490

Outreach Coordinator Jeanne Dungey, 627-5463

NIC Grant Coordinator Shelly Heck, 627-5449

ACS Volunteers

(as of 3/1/93)

Asplund, Lorraine	560-0232
Barber, Barb	930-3006
Barret, Donna	544-5497
Brynstad, Phyllis	946-1857
Christian, Betty	(w) 476-3018, (h) 559-2829
Daninger, Linda	(w) 725-2030, (h) 455-9747
David, Carol	293-0223
Elliot, Elaine	(w) 673-20993, (h) 824-3883
Fisher, Janet	926-4587
Frederick, Gretchen	(w) 863-5279, (h) 522-8378
Glewwe, Kathy	(w) 348-5618
Gruninger, Kay	(w) 348-5618
Hallgren, Val	863-4612
Helland, Robyn	(w) 348-5618
Jacobson, Marsha	
Johnson, Judy	(w) 338-6411
Klatt, Linda	933-8534
Lasher, Deb	(w) 625-1155, (h) 550-1378
Lerman, Rita	596-7803
Mandt, Rachel	831-7360
Markling, Kay	(w) 623-5535, (h) 688-7008
Perry, Lilly	473-5490
Robinson, Mary	(h) 522-6787
Rossman, Connie	929-5726
Sogard, Rose	
Strodthoff, Connie	478-6573
Taylor, Gene	378-2525
Thompson, Anita	863-5946
Valot, Judith	481-1144

BUILDING INFORMATION LIST

315 Lowry Ave. N. 55411
(Lowry Towers)

192 apts. 67 eligible women

Social Worker:

Lylla Adkins, 521-5784 (TF)

92 Resident Coordinator:
93 Resident Coordinator:

Dorothy Sandvick, #605, 522-2740

Resident Council Date:
Resident Council Contact:

first Tuesday, 7:00 p.m.
Al Hinman, #1309, 522-3880

Newsletter:

620 Cedar Ave. S. 55454
(Cedar Hi Apts.)

115 apts. 32 eligible women

Social Worker:

Kathy Veranth, 342-1346 (Th)

91 Resident Coordinator:
92 Resident Coordinator:
93 Resident Coordinator:

Millie Hermanson, #707, 338-4293
Kay Green, #409, 339-9539

Resident Council Date:
Resident Council Contact:

1st Wednesday, 2:00 p.m.
620 Cedar Organization, Box 100, 342-0080

Newsletter:

710 2nd St. NE. 55413
(Dickman Park Apts.)

35 apts. 24 eligible women

Social Worker:

Bill Melton, 379-3019 (T, 12:45-2:30)

91 Resident Coordinator:
92 Resident Coordinator:
93 Resident Coordinator:

Betty Doherty, #101, 379-4447
Deloris Wilson, #304, 331-1954
Marilyn Krueger, #309, 379-3325

Resident Council Date:
Resident Council Contact:

1st Tuesday, 1:30 p.m.
Marilyn Krueger, #309, 379-3325

Newsletter:

800 5th Ave. N. 55405

64 apts. 13 eligible women

Social Worker:

Joan Carter, 377-6628
(W: 1st&3rd-am, 2nd&4th-pm)

92 Resident Coordinator:
93 Resident Coordinator:

Flo Castner, #406, 374-2491
Flo Castner, #406, 374-2491

Resident Council Date:
Resident Council Contact:
Newsletter:

1st Wednesday, 5:30 p.m.
Flo Castner, #406, 374-2491

809 Spring St. NE. 55413

32 apts. 12 eligible women

Social Worker:

Nancy Ellwein, 379-8411
(1st&3rd F, 8:30-10:30)

92 Resident Coordinator:
93 Resident Coordinator:

Mille Haas, #204

Resident Council Date:
Resident Council Contact:

(no regular schedule)
O.J. Lumphrey, #106, 379-7517

Newsletter:

828 Spring St. NE. 55413

188 apts. 101 eligible women

Social Worker:

Rhonda Peterson & Nancy Ellwein, 379-1305
(Rhonda=T-9:30-4:30;
Nancy=W-12:30-4:30, Th-8:30-2:30)

9 1 Resident Coordinator:
92 Resident Coordinator:
93 Resident Coordinator:

Marie Sutton, #509, 378-2642
Renee Lotz, #506, 331-3733

Resident Council Date:
Resident Council Contact:

1st Monday, 7:00 p.m.
Jane Hermanson, #302, 378-1563

Newsletter:

1225 8th St. S. 55404 **86 apts.** **26 eligible women**
(Elliot Twins Apts.)

Social Worker: Terri Sachs, 348-9326 (W,am)

92 Resident Coordinator: Terry Paulson, #801, 371-9326
93 Resident Coordinator:

Resident Council Date: 1st Tuesday, 7:00 p.m.
Resident Council Contact: Bruce Splittstoesser, #1103, 370-0872

Newsletter:

1314 44th Ave. N. 55412 **219 apts.** **154 eligible women**
(Hamilton Manor)

Social Worker: Joan Carter, 521-7141 (MT-pm,F)

91 Resident Coordinator: Helen Blackledge, #405, 522-7172
92 Resident Coordinator: NONE
93 Resident Coordinator:

Resident Council Date: 2nd Monday, 7:00 p.m.
Resident Council Contact: Laretta Siede, #536, 588-5304

Newsletter:

1515 Park Ave. S. 55404 **196 apts.** **68 eligible women**

Social Worker: Kathy Veranth, 339-7581 (MF-am, W-pm)

91 Resident Coordinator: Eleanor Mueller, #1709, 339-9243
92 Resident Coordinator: Harriet Karkowski, #1201, 343-0465
(filled in for E.M.)
93 Resident Coordinator: Harriet Karkowski, #1201, 343-0465

Resident Council Date: 1st Tuesday, 7:00 p.m.
Resident Council Contact: Eleanor Mueller, #1709, 339-9243

Newsletter:

1627 6th St. S. 55454

115 apts. 30 eligible women

Social Worker:

Lisa Feige, 342-1335 (TTh,pm)

92 Resident Coordinator:

Ruth Johnson, #801, 339-4754

93 Resident Coordinator:

Resident Council Date:

1st Thursday, 1:00 p.m.

Resident Council Contact:

Ray Dressler, #1012, 339-6504

Newsletter:

**1710 Plymouth Ave. N, 55411
(Friendship Manor)**

102 apts. 16 eligible women

Social Worker:

John Egge, 521-9616 (TTh-pm)

92 Resident Coordinator:

Rhea Sinclair, #104, 521-4226

93 Resident Coordinator:

Resident Council Date:

1st Tuesday, 1:30 p.m.

Resident Council Contact:

Rhea Sinclair, #104, 521-4226

Newsletter:

1717 Washington St. NE. 55413 181 apts. 123 eligible women

Social Worker:

Rhonda Peterson & Nancy Ellwein, 788-6780
(Rhonda=M-9:30-4:30, W-9:30-12:30;
Nancy=F-10:30-4:30)

92 Resident Coordinator:

Lucille Keppen, #705, 788-5680

93 Resident Coordinator:

Lucille Keppen, #705, 788-5680

Resident Council Date:

1st Tuesday, 7:00 p.m.

Resident Council Contact:

Don Ocks, #1405, 782-0622

Newsletter:

1815 Central Ave. NE. 55418

334 apts. 164 eligible women

Social Worker:

Bill Melton, 788-6366 (MWTh, 9:30-11, 1-3)

92 Resident Coordinator:

Darlene McCollough, #1811, 331-6840

93 Resident Coordinator:

Amanda Rocek, #1313, 781-3245

Resident Council Date:

1st Tuesday, 7:00 p.m.

Resident Council Contact:

Amanda Rocek, #1313, 781-3245

Newsletter:

2121 16th Ave. S. 55404

92 apts. 35 eligible women

Social Worker:

Mary Carroll, 342-13 11 (Th)

92 Resident Coordinator:

Gwen Flattum, #806, 871-2631

93 Resident Coordinator:

Resident Council Date:

1st Thursday, 7:00 p.m.

Resident Council Contact:

Marie Thibado, #402, 872-0086

Newsletter:

2415 3rd St. N. 55411

63 apts. 21 eligible women

Social Worker:

Joan Carter, 529-1233 (Th)

92 Resident Coordinator:

Kathryn Kendrick, #307, 529-8847

93 Resident Coordinator:

Resident Council Date:

1st Thursday, 1:00 p.m.

Resident Council Contact:

Jim Cantrell, #210, 521-9029

Newsletter:

2419 5th Ave. S. 55404

126 apts. 23 eligible women

Social Worker:

Betty Vaughan-Meyers, 871-7471
(M, 9:30-11:30; T, 1:30-3:30; W, 9-11, 1-3)

91 Resident Coordinator:

Annie Farmer, #512, 871-0165

92 Resident Coordinator:

Jan Gaslin, #505, 872-6842

93 Resident Coordinator:

Jan Gaslin, #505, 872-6842

Resident Council Date:

2nd Friday, 2:00 p.m.

Resident Council Contact:

Dale Gaslin, #505, unlisted

Newsletter:

2433 5th Ave. S. 55404

126 apts. 28 eligible women

Social Worker:

Betty Vaughan-Meyers, 871-7471
(M, 9:30-11:30; T, 1:30-3:30; W, 9-11, 1-3)

91 Resident Coordinator:

Annie Farmer, #512, 871-0165

92 Resident Coordinator:

Jan Gaslin, #505, 872-6842

93 Resident Coordinator:

Jan Gaslin, #505, 872-6842

Resident Council Date:

2nd Friday, 2:00 p.m.

Resident Council Contact:

Dale Gaslin, #505, unlisted

Newsletter:

2728 Franklin Ave. E. 55406

150 apts. 87 eligible women

Social Worker:

Kathy Veranth, 333-5734 (W-am, F-pm)

91 Resident Coordinator:

Mary Logan, #905, 333-3925

92 Resident Coordinator:

Beverly Warner, #1306, 332-1746

93 Resident Coordinator:

Beverly Warner, #1306, 332-1746

Resident Council Date:

2nd Tuesday, 2:00 p.m.

Resident Council Contact:

Beverly Warner, #1306, 332-1746

Newsletter:

3116 Oliver Ave. N. 55411

31 apts. 20 eligible women

Social Worker:

Joan Carter, 588-6962
(W-1st & 3rd pm, 2nd & 4th am)

91 Resident Coordinator:

Mable Lohmeyer, #203, 522-2740

92 Resident Coordinator:

None

93 Resident Coordinator:

Resident Council Date:

3rd Wednesday, 1:00 p.m.

Resident Council Contact:

Theresa Kronberger, #105, 521-1893

Newsletter:

3205 37th St. E. 55406

28 apts. 15 eligible women

Social Worker:

Betty Vaughan-Meyers, 729-8056
(F, 8:30-10)

91 Resident Coordinator:

Laurie Sanchez, #502, 729-5184

92 Resident Coordinator:

Evelyn Churaman, #301, 722-0408

93 Resident Coordinator:

Laurie Sanchez, #502, 729-5184

Resident Council Date:

1st Wednesday, 1:30 p.m.

Resident Council Contact:

Laurie Sanchez, #502, 729-5184

Newsletter:

3755 Snelling Ave. S. 55406

28 apts. 19 eligible women

Social Worker:

Betty Vaughan-Meyers, 721-4180
(F, 1-2:30)

91 Resident Coordinator:

Zelma Mills, #202, 729-0034

92 Resident Coordinator:

Myra Cornman, #404, 724-6893

93 Resident Coordinator:

Myra Cornman, #404, 724-6893

Resident Council Date:

1st Tuesday, 2:00 p.m.

Resident Council Contact:

Myra Cornman, #404, 724-6893

Newsletter:

DEFINITIONS

Announcement posters: posters that will be posted in high rises to announce the date/time of the Friend to Friend party (hot pink) and the Sign-up Session (yellow). *(Found in Site Packet)*

Certificate of Appreciation: Sent with the Thank you Letter to Resident Volunteers after Sign-up Session has been held. *(Found in Site Packet)*

Friend to Friend Brochure: Explains Friend to Friend program, lists reasons to have a mammogram, etc. Available at the Friend to Friend Party and Sign-up Session. *(Found in Site Packet)*

Friend to Friend Party: Party in each high rise where women will be encouraged to sign up for either a mammogram screening or the reminder card system. Consists of a speech by a health professional and small group discussions. Objective: to sign up everyone attending the meeting for either a mammogram or the reminder card system; goals: establish medical credibility of the program, address barriers to screening and cancer myths, deliver the “mammography message”, encourage women to take ownership of their annual breast cancer screening needs.

Friend to Friend Volunteer: ACS volunteer who acts as a liaison between the NCI Grant staff and high rise building residents. This person will guide and assist the high rise building residents in planning and implementing the Friend to Friend program.

General or “picture” poster: Posted in high rise after planning meeting. *(Found in Site Packet)*

Health Care Speaker: ACS volunteer who presents general information about mammography at the Friend to Friend Party.

Invitation Letter (for Friend to Friend Party): Sent to all female residents of the high rise after Summary Sheet has been received; includes RSVP and self-addressed stamped envelope. *(Examples found in Site Packet and in Volunteer Packet)*

Mammogram/Reminder Card Sign-up Form: Registers women for mammogram screening and/or reminder card. Appointments will be scheduled from these forms and information entered in reminder card system. Filled out by the ACS volunteers at Friend to Friend Party and at the Sign-up Session. *(Found in Site Packet)*

Newsletter/Tabloid: A tabloid distributed in the high rises in March and May. It describes the Friend to Friend program, etc.

Outreach Coordinator: NCI Grant staff member who coordinates the Friend to Friend program and other activities involving high rise residents.

Party Bag: Materials needed the day of the Friend to Friend party. Prepared by MDH and available for pick up at ACS headquarters. Each bag is prepared for a specific building and has a checklist with the building name/address stapled to it. Contents--nametags, pencils, magnets, tickets for door prize, napkins, forks, cups, plates, sweetener/creamer, extra coffee, sign up forms for mammogram/reminder card, Friend to Friend brochures. (*Available at ACS Headquarters.*)

Planning Checklist for Resident Coordinator: Lists all the activities that need to be performed at the highrise prior to the event and the day of the event. Completed at the planning meeting between ACS volunteer and Resident Coordinator. Division of responsibilities to be decided at the planning meeting between the ACS Volunteer and the Resident Coordinator. Check off duties Resident Coordinator has agreed to and give to her. (*Found in Site Packet*)

Resident Coordinator: High rise building resident who works with Friend to Friend volunteer to organize Resident Planning Committee and plan and conduct Friend to Friend Party and other Friend to Friend activities.

Resident Planning Committee: Committee of high rise residents who organize and promote Friend to Friend Party and Sign-Up Session activities.

Sign-up Session for Mammogram or Reminder Card: held in high rises within 14 days after the Friend to Friend Party. Conducted by ACS volunteers. Objective: to offer residents another opportunity to: **sign up for services**, look at the "mammography message" again, network and build a "buddy system".

Site Packet: Given to Team Captain. Forms, checklists, promotional and resource materials needed by volunteers for conducting Party and Sign-up Session. Contents: Map and directions to building (4 copies), planning checklist for resident coordinator, summary sheet and self-addressed stamped envelope, posters--general, announcement, & ethnic groups, copy of news release/announcement for building newsletter, mammogram/reminder card sign-up forms, physician/clinic lists, certificates for volunteers, copy of thank you letter to be sent to resident volunteers.

Step-by-Step Checklist for Conducting the Friend to Friend Party and Sign-up Session: Lists all the steps involved in planning and implementing the Friend to Friend Party and the Sign-up Session. Used by ACS Volunteer. (*Found in Volunteer Packet*)

Summary Sheet for Friend to Friend Party and Sign-up Session: Used to inform MDH of date/time of Friend to Friend Party and the Sign-up Session. Filled out by ACS Volunteer after meeting with Resident Coordinator and submitted to ACS Coordinator in self-addressed stamped envelope. *(One per site; found in the Site Packet.)*

Team Captain: ACS volunteer who manages Friend to Friend Team Members and communicates with the Team Coordinator/Speaker Coordinator.

Team Coordinator/Speaker Coordinator: ACS volunteer who coordinates the interventions with the Team Captains and Health Care Professionals.

Team Member: ACS volunteers who plan, promote and implement Friend to Friend mammography screening program.

Thank You Letter to Resident Coordinator/Volunteers: Sent to Resident Volunteers sometime after the Mammogram Sign-up Session with the Certificate of Appreciation. *(Examples found in Site Packet and Volunteer Handbook)*

Volunteer Feedback Form: Completed by ACS Volunteers after Party and Mammogram Sign-up Session. *(Found in Volunteer Handbook)*

Volunteer Handbook: Information given to ACS volunteers at the training session. Includes handbook including resource lists and examples of forms, Step-by-Step checklist, Volunteer Feedback Form & self-addressed stamped envelope.

REFRESHMENT ORDERING INFORMATION

Arrangements have been made with Super Mom's Bakery to have cakes billed to the Minnesota Department of Health.

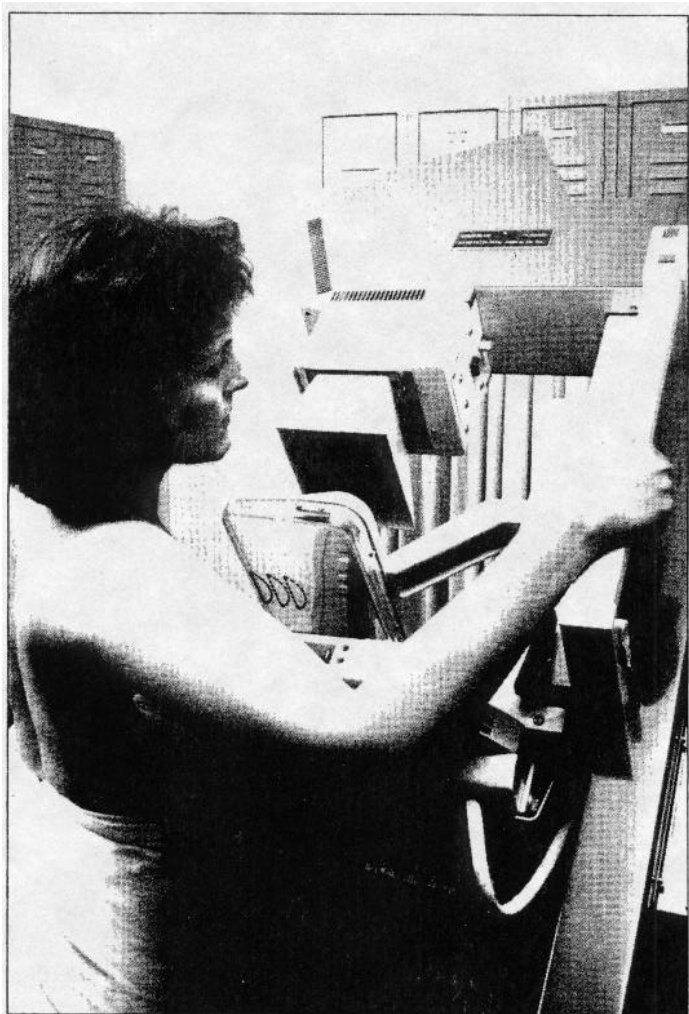
- Call 459-CAKE (459-2253) to order cake; Val or Kelly will take your order.
- Tell them you are working with the Minnesota Department of Health who has a billing arrangement with them.
- Indicate the size of cake you would like:
1/2 sheet serves 32-48; full sheet serves 64-96
yellow cake, white frosting, pink lettering: Friend to Friend
- Tell them at which Super America station, you would like to pick it up. The yellow page listing is below.

SuperAmerica W Co Rd 42 & S Brnsv	435-2040
SuperAmerica 13820 Grove Dr N Mpl Gry	420-7131
SuperAmerica 7601 Jolly Ln N Bklyn Pa	493-4131
SuperAmerica 5337 Shoreline Blvd Mound	472-5559
SuperAmerica 1155 1st E Shop	445-1144
SuperAmerica Commissary 625 2 St St Paul Pa	459-7041
SuperAmerica-Division Ashland Oil Inc—	
Minneapolis—	
16161 S Cedar Av Hwy	432-4565
SuperVideo	432-4633
12500 Co Rd S Brnsv	694-4265
3701 Sunset Dr Spring Pa	471-7638
SuperAmerica Group Inc—	
Anoka—	
East Main Station 657 E Main St Anoka	421-2211
West Main Station 750 W Main St Anoka	421-6590
Andover Station	
3631 NW Bunker Lake Blvd Andvr	421-1930
Home Office 1240 W 95 St Simgon	867-6100
Minneapolis—	
2445 Bloom Av	724-4266
3500 Bloomington Av	729-1153
5250 Bloomington Ferry Rd Simgon	942-8530
300 NE Broadway St	379-2639
636 NE Broadway St	379-3013
4740 Cedar Av S	724-3358
5000 Central Av NE Columbia Hts	571-6346
1600 Chicago Av	333-7565
3744 Chicago Av	827-4241
3155 NW Coon Rapids Blvd Coon Rds	421-7901
12750 Co Rd S Brnsv	890-0738
1221 County Rd 40 E App Wy	432-3838
SuperVideo	432-6767
1910 N Douglas Dr Grdn Wy	542-9153
7445 NE East River Rd Fridy	571-2695
5700 Excelsior Blvd St Louis Pa	922-2445
615 Flying Cloud Dr Chaska	445-1554
5 Franklin Av E	670-9722
107 Franklin Av E	670-1618
1020 Franklin Av E	670-4302
3807 Fremont Av N	522-4511
2125 Glenwood Av	377-8823
101 W Grant St	670-7364
2501 Hennepin Av	374-3930
2391 Hwy 7 Chanhon	474-9405
Hwy 13 & Co Rd 30 Brnsv	890-2495
Supermom's Deli	890-6925
5720 Hwy 65 NE Blaine	785-9715
7295 NE Hwy 65 Fridy	571-0295
2600 Hillshire Gdr Wy	546-7395

SuperAmerica Group Inc—	
Minneapolis—	
1001 NE Johnson St	785-5380
3914 E Lake St	729-7656
4327 E Lake St	721-7306
801 W Lake St	823-6046
3600 W Lake St	920-7132
2618 Lowry Av N	522-3544
320 Lowry Av NE	781-3067
1100 Lyndale Av N	529-1337
2200 Lyndale Av S	377-0404
2325 Lyndale Av S	671-4605
3100 Lyndale Av S	822-2711
4000 Lyndale Av S	822-6724
4300 Lyndale Av S	822-9996
7500 Lyndale Av S Richd	869-4044
8600 Lyndale Av S Simgon	864-2730
200 Main St Ely Avr	441-1130
1617 Mainstreet Hdb	938-4212
2431 NE Marshall St	785-6446
3800 Minnesota Av	729-7995
5154 Norman Ln A Pym	553-0564
3455 Nicollet Av	822-6828
7720 Nicollet Av Round	866-1246
2015 NW Northdale Blvd Coon Rds	755-9666
13195 Pioneer Trl Eon Prairie	944-0904
Deli	944-9529
6355 Palm Chase Dr Eon Prairie	946-0929
6000 Potomac Av	869-1344
5200 Poplar Rd	726-1787
5667 University Av NE Fridy	574-1913
9021 University Av NE Blaine	786-3450
10565 University Av NE Blaine	755-0914
1000 University Av SE	379-2628
1057 University Av SE	379-7829
5205 Vernon Av Edna	929-3678
5050 West Broadway Crystal	537-5557
6545 West River Rd Elyon Co	560-1171
10811 NW Xerox St Coon Rds	421-5701
1255 1st St N	445-1144
121 5th St	332-9042
5101 34th St	724-5083
7818 34th St Crystal	541-9555
1820 37th St NE	789-8566
1911 57th St N Elyon Co	560-0061
824 W 66 St Richd	866-7854
2915 W 66 St Richd	866-3011
14425 W 76 St Eon Prairie	937-6891
1601 E 90 St Simgon	864-8156
1260 W 95 St Simgon	861-1911
Supermom's Deli	861-0143

St Paul—	
3155 Century Av N White Bear Lake	779-2277
11 Century Av S Maplewood	739-0714
2640 Co Rd 1 Mpls Wk	785-2733
Supercare Pharmacy	785-2623
7142 S East Palm Douglas Rd Cottage Grove	459-3855
1380 Ford Pkwy St Paul	690-3036
2785 Hamline Av Roseville	631-1241
1350 Carpenter Av W Fridy	645-7461
2172 Kensington Av Roseville	489-1108
Supercare Pharmacy	489-1778
Supermom's Deli	489-1667
399 N Lexington Pkwy St Paul	646-1611
390 Maryland Av E St Paul	774-7270
1146 Payne Av St Paul	771-0221
1425 Rice St Paul	458-7663
1225 S Robert St West St Paul	457-4690
545 St Paul Park Rd St Paul Park	459-6963
2116 Silver Lake Rd St Paul	631-3504
577 Smith Av S St Paul	228-9098
54 Stalling Av N St Paul	649-0700
1375 Town Centre Dr St Paul	688-2670
1750 White Bear Av N St Paul	770-5121
375 White Bear Av N	776-6580
1351 Woodlawn Dr Wobury	739-6016
1426 Yankee Doodle Rd Eagan	452-9853
Deli	452-7461
291 E 7 St	225-9567
1734 W 7 St St Paul	698-2032
SuperAmerica LaPeville 10612 US St W Urd	435-2622
SuperAmerica Store 13014 Main St Rogers	428-4736
SuperAmerica Store 5343 Up and Dr N Mpl Gry	494-3555
SuperAmerica # 4342	
13220 Sunset Av App Wy	431-6630

Thinking About Getting a Mammogram

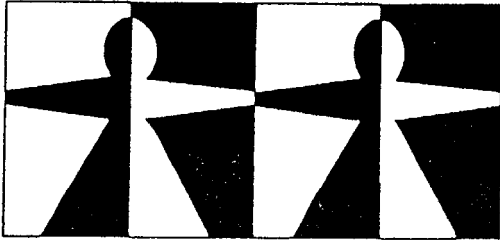


Side View



Top View

Two mammograms (low-dose x-rays) are taken of each breast. One view is taken from the top (above), another is taken from the side (left). The shield will press slightly down on the breast to get the best results.



Friend to Friend Program

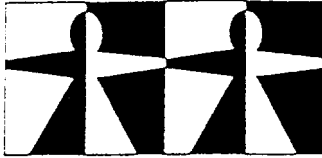
A FRIENDLY REMINDER FROM THE
FRIEND TO FRIEND PROGRAM

**IT'S TIME TO GET
A MAMMOGRAM**

PLEASE CALL YOUR DOCTOR OR CLINIC TO
SCHEDULE AN APPOINTMENT

Mammogram Month

MAMMOGRAM REQUEST FORM



Friend to Friend Program

(For women who are NOT covered by Group Health, MAO, North Memorial Senior Care, U-Care.)

Name: _____

Address _____ Apt. # _____

Phone # _____ Date of Birth _____

1. Do you have health coverage?

_____ Yes: What kind? _____

2. When was your last mammogram?

Month _____ Year _____

Never had a mammogram _____

3. Have you ever been a patient at Hennepin County Medical Center?'

_____ Yes

_____ No

4. Could you go for an appointmet on:

(Please circle "Yes" or "No.")

Wednesday morning? Yes No Wednesday afternoon? Yes No

Thursday morning? Yes No Thursday afternoon? Yes No

Friday morning? Yes No Friday afternoon? Yes No

FOR OFFICE USE ONLY

Mammogram scheduled for: _____

F R I E N D T O F R I E N D S I G N - U P F O R M

Your name: _____ Date of Birth: _____

Address: _____ Apt. # _____ Phone: _____

With whom can we leave a message if you don't have a phone?

Name: _____ Phone: _____

Date of last mammogram: Month _____ Year _____ Never had one _____

Would you be interested in a breast self-examination (BSE) session offered through the American Cancer Society?

___ Yes ___ No



STOP HERE
THE ACS VOLUNTEER WILL HELP YOU COMPLETE THE BACK OF THIS SHEET.

.....

ACS Volunteer Complete:

ACS Volunteer Name

Date: _____

Circle: Party / Sign-up

5/4/93:C:JD

OFFICE USE ONLY

- ___ mammo scheduled
- ___ reminder card filed
- ___ physician letter sent for Mngm
- ___ physician letter sent for Rmdr
- ___ MBCCCP referral

Choose one of the options in section A or B. Otherwise, complete section C.

A. Choose from Options #1-3 if date of last mammogram is OVER 10 MONTHS AGO or NEVER:

OPTION #1:

Would you like the Friend to Friend Program to help you schedule a mammogram?

Yes

Do you get your health coverage from one of the following: Group Health, MAO, North Memorial Senior Care or U-Care?

Yes: **(Complete the Physician Letter)**

No: **(Complete the Mammogram Sign-up Form)**

No: (Go to Option #2)

OPTION #2:

Would you like the Friend to Friend Program to help you schedule a mammogram with your own doctor?

Yes: **(Complete the Physician Letter)**

No: (Go to Option #3)

OPTION #3:

Do you plan to schedule your mammogram with your own doctor?

Yes

No: (Go to Option #4)

B. Choose from Options #4 & #5 if date of last mammogram is WITHIN the past 10 months:

OPTION #4:

Would you like the Friend to Friend Program to remind you when you are due for a mammogram?

Yes: **(Complete the Reminder Card)**

No: (Go to Option #5)

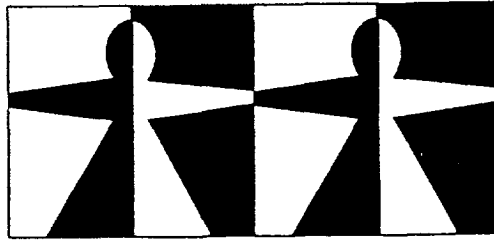
OPTION #5:

Would you-like us to help you remind your doctor to notify you when you are due for a mammogram?

Yes: **(Complete the Physician Letter)**

No: (Go to C.)

C. If you are not choosing one of the above options, please tell us why:



**FRIEND TO FRIEND
PROGRAM**

Dear Dr. _____ ,

I am participating in the Friend to Friend Program sponsored by the American Cancer Society. This program is funded by the National Cancer Institute and administered from the Minnesota Department of Health.

Both American Cancer Society and National Cancer Institute guidelines suggest women age 40-49 receive a mammogram every two years and women age 50 and older receive a mammogram every year.

Please: _____ Call me so that I may schedule a mammogram.
Phone: _____

_____ I have had a mammogram within the past year. Please notify me when I am due for my annual mammogram (if you don't routinely do this).

Sincerely,

signature

date



Minnesota Department of Health
717 Delaware Street Southeast
P.O. Box 9441
Minneapolis, MN 55440-9441



**ACS Friend to Friend Volunteer
Feedback Form**

Name _____ Building _____

1. Overall, how well was FF received by women in this high-rise?

Poorly Well Very Well

Comments: _____

2. How effective was the planning committee in carrying out the FF program?

Poorly Well Very Well

Comments: _____

3. What worked well in this high-rise?

4. What did not work well in this high-rise?

5. Approximately, how much time did you spend working with this high-rise?

_____ Total number of hours over a time period of _____ days.

6. Would you consider being an ACS FF Volunteer again?

Yes

Maybe

No

Comments: _____

7. What suggestions do you have for improving the FF Program?

IC #375-0010



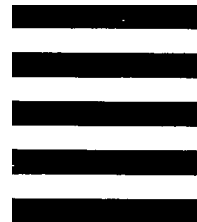
NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO 7225 MINNEAPOLIS MN

POSTAGE WILL BE PAID BY ADDRESSEE

MINNESOTA DEPARTMENT OF HEALTH
717 DELAWARE STREET SE
POST OFFICE BOX 9441
MINEAPOLIS MN 5540-9275
Cancer Control Section



Step By Step Checklist Mammogram/Reminder Card Sign-Up Session

BEFORE THE FRIEND TO FRIEND PARTY

- Contact (phone) the Resident Coordinator of the building and set up date/time for planning meeting.
- Meet with Resident Coordinator and Resident Planning Committee: Plan the event and complete the *Planning Checklist for Resident Coordinator* and the *Summary Sheet*.

At the meeting between ACS Volunteer & Resident Coordinator

1. Choose date and time for **FRIEND TO FRIEND PARTY**.
Date: _____ Time: _____ Location: _____
2. Choose date and time for **MAMMOGRAM/REMINDER CARD SIGN-UP SESSION**.
Date: _____ Time: _____ Location: _____
3. Go over **PLANNING CHECKLIST FOR RESIDENT COORDINATOR**. The following lists the duties on the Planning Checklist.

Planning Checklist

Prior to the Friend to Friend Party:

- Put up the general "picture" poster
 - 1) affix labels with Resident Coordinator's name/phone
 - 2) when will they go up? _____
 - 3) Suggested places: elevators, by mail boxes, laundry room, etc.
- Reserve room/table & chairs for the Friend to Friend Party
- Reserve room for the Mammogram/Reminder Card Sign-up Session
- Put notice in building's newsletter
- Put up announcement posters (pink ones)
 - 1) fill in date/time
 - 2) when will they go up? _____
 - 3) Suggested places: by mail boxes, laundry room, elevators, etc.

The Day of the Party

- Make coffee
- Put out cake, napkins, plates, forks, etc.
- Arrange tables and chairs
- Greet participants & give them beads
- Pass out name tags
- Give guest half of double ticket for door price
- Clean up
- Take down announcement posters (pink ones) after the Party

Before the Day of the Sign-up Session

- Put up announcement posters (yellow ones)
 - 1) Fill in date & time
 - 2) When will they go up? _____
 - 3) Suggested places: by mailboxes, elevator, laundry room, etc.
- Confirm room

The Day of the Sign-up Session

- Make coffee
- Clean up
- Take down poster (yellow ones) after the Sign-up Session

- 4. Give Resident Coordinator the completed PLANNING CHECKLIST of tasks for which she will be responsible.
 - 5. Give **GENERAL POSTERS** and **ANNOUNCEMENT POSTERS** to Resident Coordinator.
 - 6. Ask Resident Coordinator if there is a central location where Friend to Friend materials could be posted, after the Party & Sign up sessions have been held.
 - 7. Arrange to be put on the agenda for Resident Council Meeting
*See Resources: Building Information List
- Complete SUMMARY SHEET found in Site Packet and forward to ACS Coordinator.
(Team Captain's responsibility)
- Contact Speaker Coordinator.

NOTE: MDH SENDS INVITATIONS AFTER RECEIVING THE SUMMARY SHEET. (At least 10 days prior to the event.)

TEAM MEMBER DUTIES AFTER PLANNING MEETING

- Attend Resident Council Meeting.
- Contact Resident Coordinator to see that room has been reserved, etc.
- Confirm speaker: If Speaker Coordinator has not called, call her to make sure a speaker has been scheduled.

Week Before the Party

- Contact ACS Coordinator to find out how many RSVP's have been received.
- Order refreshments based on RSVP's.
*See Resources for Refreshment Ordering Information
- Pick up PARTY BAG at ACS headquarters.
*3316 West 66th Street, Edina

The Day of the Party

- Call Resident Coordinator and arrange to be let into the building.
- Pick up the cake
- Set up for program
 - _____ Make coffee
 - _____ Put out cake, napkins, plates, forks, etc.
 - _____ Arrange tables and chairs for groups
 - _____ Put nametags at tables
 - _____ Greet participants and give beads and half of ticket for door prize
 - _____ Offer participants coffee
 - _____ Direct women to sit in groups of 5-10 at the tables
 - _____ Have women fill in nametags at the table
 - _____ **Group Discussion Leader:** initiate group introductions, including introduction of the ACS volunteers in each group.
(see "Your Role in the Group Discussion")
 - _____ **Group Discussion Leader:** ask "Ice-breaker" question, 5 minutes. (see "Your Role in the Group Discussion")
 - _____ Ask group members to pick up their beads and feel both the big one and the small one. Ask for guesses as to what these beads mean. Make it a game, but don't give away the answer. (Arouse their curiosity, make them laugh, get them involved! Tell them to listen carefully, and they'll find out what the beads are all about later. (If someone make a correct guess, congratulate her, and add that they will all learn more about the beads later.)
- Conduct program
 - _____ Introduction by ACS Volunteer, 4 minutes (see script)
(The ACS volunteer giving this talk should begin when most of the women have finished talking about the beads. She may need to interrupt the group discussion in order to begin her talk.)
 - _____ Health Professional Talk, 8-15 minutes (see script)
 - _____ Group Discussion: facilitated by ACS volunteers, 30-40 minutes
(see How to Lead Small Groups)
 - _____ Complete sign up form for each participant:
 - If signing up for mammogram: get insurance coverage info.
 - If they want to schedule with their own doctor ask if they would like to fill out the letter to their physician; get physician/clinic name & address (see physician list if needed)
 - If signing up for reminder card: have them fill one out
 - If they don't want to sign up for anything-have them write the reason why and mammogram info section of the form (they don't have to fill in their name if they don't want to).
 - _____ Collect all forms (make sure your initials are on the back of the form), cards and letters and give to Team Captain.
- Refreshments
- Clean Up
- Team Captain:**
 - _____ Indicate number who attended on the form on front of the red site folder.
 - _____ Check sign up forms to see that all needed information has been completed and place them in the large envelope.

After the Party

- Take down Announcement Posters (pink ones)
- Complete & return Volunteer Feedback Form using self-addressed stamped envelope

Team Captain

- Return completed sign up forms, physician letters & reminder cards to ACS Coordinator in large envelope which is provided
- ACS Coordinator: give forms to MDH for tallies.
(MDH will send back tallies and names of people who filled out physician letters for follow-up.)

Before Sign-up Session

- Check to make sure **Announcement Posters for Mammogram/Reminder Card Sign-Up Session** have been put up (yellow ones)
- Confirm room.

The Day of Sign-up Session

- Contact Resident Coordinator and arrange to be let in the building.
- Take along Party Bag & Site Packet
- Go to the reserved room and set up.
- Conduct Sign Up Session
 - Give each woman who registers a ticket for the door prizes
 - Give ticket to women bringing a friend who signs up
- Conduct drawing for door prize.
- Indicate the number who attended the Sign up Session on the form on the front of the Site Packet.
- Clean up

After the Sign Up Session

- Take down Announcement Posters (yellow ones)
- Return completed sign-up forms, physician letters, reminder cards and site packet to Team Captain.
- Complete & return Volunteer Feedback Form using self-addressed stamped envelope.
- Team Captain:**
 - Return completed sign-up forms, physician letters, reminder cards and page from front of site packet to ACS Coordinator.
 - Bring remaining supplies (Party Bags, etc.) back to ACS.
 - Send hand written THANK YOU NOTE to Resident Coordinator and other resident volunteers.
- ACS Coordinator:**
 - Return all forms to MDH.
- Follow-up:**
 - Put up Ethnic group posters
- MDH:** Schedule mammograms
- MDH:** File reminder cards in monthly folders and send out each month
- ACS Volunteer:** Contact women who filled out physician letter to see if they have made arrangements to get a mammogram.

