Sample Talking Points for One-to-One Conversations

This resource is based on the Listen, Respond, Ask model. Refer to that educator resource for more guidance on using the talking points listed below.

Getting started: Introduce yourself

Introduce yourself and the organization you work with, and ask the other person’s first name and a basic question about them.

Examples:

• If you are on public transit, you might ask where the person is coming from or where in the city the person lives. (Asking where the person is heading might also give you some clues about how much time you have to talk with her or him).

• If you are also Hispanic/Latina, you might also ask about where the person or her family is from, verify her country of origin and offer a positive comment about her country of origin or culture, and share your own cultural background. If you are not Hispanic/Latina, this question may feel intrusive or alarming to the listener.

NOTE

If you are doing telephone outreach, be especially mindful of others’ time. Let them know how long you expect the conversation to last and ask if they currently have the time to talk to you. If they do not, ask if you can set up a time for another telephone call in the next couple days. Or, try to schedule a time to meet face-to-face.

Next steps

If the person you approach does not have time or is not interested in talking with you at that time you can:

• Give the educational handout or a flyer with your organization’s or Komen’s contact information to the person.

• Ask for the person’s contact information to call her in the future, or you can share your contact information or a business card so she can contact you.

If the person you approach has some time and is interested in talking with you, use the following examples of one-to-one conversations to guide your breast cancer conversation with the listener. There is one example of one-to-one conversations for each of Komen’s four Breast Self-Awareness Key Messages.
Key Message: Know Your Risk

ASK  Do you know the two most common risk factors for breast cancer?
     What do you know about breast cancer?

NO  RESPOND
   □ The two most common risk factors for breast cancer are being a woman and getting older.
   □ Breast cancer is the most common cancer among Hispanic/Latina women. They are more likely to be diagnosed at a later stage than non-Hispanic women. They are also more likely to be diagnosed with larger and more difficult-to-treat tumors. This is likely due to fewer women getting screened and delays in getting back to the doctor for a follow-up after abnormal screening results.
   □ Breast cancer occurs when cells in the breast divide and grow without their normal control and form malignant (cancerous) tumors.

YES  RESPOND & LISTEN
     Invite the person to talk about her or his knowledge about and experience with breast cancer personally or in her family.

ASK  Do you know someone that has had breast cancer? How do you know that person? Is it someone in your family?

YES  If the person that has breast cancer is in the person’s family, you can share the following talking points:
     □ Breast cancer in your immediate family does not mean that you will also have breast cancer, but it is important to tell your doctor that someone in your family has breast cancer because it may increase your risk.

NO  □ Most women in the U.S. who develop breast cancer do not have a family history of breast cancer.
ASK Whether the person knows someone that has or had breast cancer or not, you can ask the following:

*Did you know that the two most common risk factors for breast cancer are being a woman and getting older?*

RESPOND & LISTEN

Share that there are two actions that people can take to learn more about their personal risk:

- Talk with both sides of your family about your family health history.
- Talk with your doctor about your own personal risk of breast cancer.

ASK Before ending your conversation, you can evaluate your success in communicating your message by asking:

*Can you name the two most common risk factors for breast cancer?*

You may also ASK:

*Did you learn anything about breast health today that you did not know before? Can you think of a friend of family member with whom you will share the information you received today?*

Additional talking points can be found in the [Breast Self-Awareness Key Messages](#) resources. Additional information about how to evaluate your one-to-one conversation can be found in [Tips for Evaluating Your Program](#).
**Key Message: Get Screened**

**ASK**  
(If speaking with a woman)  
*Have you ever been screened for breast cancer?*  
If you know the woman’s age, you could also ask:  
*Have you had a clinical breast exam?*  
*Have you had a mammogram?*

**NO**  
**RESPOND & ASK**  
*What has prevented you from getting a screening?*  
*Have you thought about getting screened?*

**LISTEN**  
The woman may be afraid, have no primary care provider, not know where to go or have other barriers.

**RESPOND**  
- *It is important for us to take good care of ourselves and get screened regularly.*
- *Breast cancer can feel scary, but it can be treated. Screening tests can find breast cancer early, when the chances of survival are the highest.*
- *There are resources in the community that can help you with a free screening/finding a provider/getting health insurance.*

**YES**  
**RESPOND & ASK**  
*That’s great! You are such a good role model for your family and community.*  
*What made you get screened?*  
*What kind of screening did you have?*  
*When did you have your last screening?*

If it was a clinical breast exam and it was more than three years ago, or if it was a mammogram and more than one year ago, or if the woman has never had a screening:

**LISTEN**  
The woman may be afraid, have no primary care provider, not know where to go or have other barriers.

**RESPOND**  
- *It is important for us to take good care of ourselves and get screened regularly.*
- *Cancer can feel scary, but it can be treated, and finding it early increases the chances that treatment will be successful.*
- *There are resources in the community that can help you with a free screening/finding a provider/getting health insurance.*

You can also refer to the Barriers and Responses resource to help you prepare for addressing barriers that some women face.
If the woman had a screening within the recommended timeframe:

**ASK**  Do you know what the results were?

**LISTEN & RESPOND**

**NO**  Encourage the woman to contact the provider that conducted the screening. You may ask if she knows how to contact the provider.

**YES**  If results were negative, encourage the woman to continue to get screened. You may ask when her next screening is scheduled and give her a *Breast Self-Awareness Messages* card to remind her to report any breast changes to her health care provider.

If the results showed something abnormal or follow-up was required, but she has not followed up, inform her that it is important to follow up. For example, the screening may need to be repeated because she moved. If it showed something abnormal, remind her that it does not necessarily mean cancer, and that it is important to follow up and obtain a diagnostic test to find out more. Encourage her to follow-up!

**ASK**  Before ending your conversation, you can evaluate your success in communicating your message by asking:

*Will you talk to your doctor about what breast cancer screening is right for you?*

*Will you schedule a breast cancer screening with a health care professional in the future?*

You may also **ASK**:

*Did you learn anything about breast health today that you did not know before?*

*Can you think of a friend or family member with whom you will share the information you received today?*

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Additional talking points can be found in the *Breast Self-Awareness Key Messages* resources. Additional information about how to evaluate your one-to-one conversation can be found in *Tips for Evaluating Your Program*. 
Key Message: Know What is Normal for You

ASK  Do you think that you know how your breasts normally look and feel?
What kinds of changes in your breast should you report to your provider?
Can you tell if there are changes?

RESPOND & ASK
That’s great!
What changes in your breast would you notice and report?

LISTEN
The person may not know all of the warning signs or changes in the breasts.

RESPOND
☐ The signs of breast cancer are not the same for all people. It is important to know how your breasts normally look and feel.

☐ Describe the signs that the person should be looking for (see below), and encourage her or him to be alert for changes.

☐ It is important to talk to your health care provider about any changes in your breast/chest area.

☐ If you are speaking with a man: You can encourage/support the women in your family to get breast care. They should see a health care provider if they are concerned about a change in their breasts. As a man, you can also get breast cancer.

YES, BUT… The person may say that she or he knows what to look for, but would be afraid to report them.

ASK  Why not?

LISTEN
If you are speaking with a woman, try to understand why she may be afraid, may not be comfortable with her body, or not really know what to say to her provider. She may also have inaccurate information.

If you are talking with a man, he may not believe he needs to be concerned about these women’s issues. However if the woman is his wife, he can encourage her to learn what changes should be reported, be aware of changes and encourage her to see her provider if a change is noted. Remind him that her health is important to his family and he can care for his family by caring for his wife in this way. He should know that he should be aware of and also report changes to his breast/chest area.
RESPOND

Whether you are speaking with a woman or a man, and depending on her or his response, you may:

- Give a refresher or explain the warning signs or changes that the person is not already looking for (see below).
- Encourage the person to learn about changes that should be reported to her/his provider.
- There are changes that you might notice your face or arm. It is important to be aware of changes in the breasts, too.
- It is important to communicate any changes in the breasts or breast area to a health care provider. The health care provider can discuss appropriate screening options.

NO RESPOND

- If you are speaking with a woman, inform her that it is important to know how breasts normally look and feel, and that it is okay to look at herself naked in a mirror and touch her breasts to get to know how they normally look and feel. Then use the Breast Self-Awareness Messages card to discuss each of the changes that should be communicated to her health care provider:
  - Lump, hard knot or thickening inside the breast or underarm area
  - Swelling, warmth, redness or darkening of the breast
  - Change in the size or shape of the breast
  - Dimpling or puckering of the skin
  - Itchy, scaly sore or rash on the nipple
  - Pulling in of your nipple or other parts of the breast
  - Nipple discharge that starts suddenly
  - New pain in one spot that does not go away

If you are speaking with a man, you can:

- Discuss how he can support/encourage the women in his family to take care of themselves by learning the warning signs, encouraging them to be aware of changes and seeing their providers if they notice changes.
- Inform him of the importance of knowing what is normal for him.
- Discuss changes that he should report to his health care provider.

ASK

Before ending your conversation, you can evaluate your success in communicating your message by asking:

Will you visit a health care provider if you notice any changes in your breasts?

You may also ASK:

Did you learn anything about breast health today that you did not know before?

Can you think of a friend of family member with whom you will share the information you received today?
**Key Message: Make Healthy Lifestyle Choices**

**ASK**  Do you know that there are things we can do that may reduce our risk of breast cancer?

**YES**  RESPOND & ASK

That’s great! What are the risk factors you know?

**LISTEN**

Give the person the opportunity to share what she or he already knows about breast cancer risk factors, and then share with any risk factors that were not mentioned (suggested) talking points are below.

**NO**  RESPOND

That’s okay. Let me tell you about them. There are some risk factors for breast cancer that we cannot control. The two most common risk factors are being a woman and getting older. But there are some risk factors that we can control, and things that we can do that may help reduce our risk of breast cancer.

Some of the other risk factors we cannot control are:
- Having your first period before the age of 12
- Late menopause (after the age of 55)
- Exposure to high levels of radiation at a young age
- Family history of breast cancer – particularly mother or sister, or any man in your family with breast cancer
- Personal history of cancer

Now let’s look at the risk factors that we can control, and actions that we can take to reduce our risk of getting breast cancer:

- **Maintain a healthy weight.** What do you do to maintain a healthy weight? I exercise, and I make sure that I have a variety of fruits and vegetables on my plate for every meal.

- **Lack of physical activity.** I know that you are going to tell me that you don’t have money or time for the gym. Me neither! But you can walk to the park and play with your children/grandchildren, or walk around the block or dance. I climb the stairs in my house, from the basement to the second floor and use cans of food as weights. There are many things we can do at home that are free and don’t take much time.

It is important to share the risk factors that we cannot control, as well as the ones that we can control. Start with the risk factors that we cannot control so that you can end on an empowering note by sharing what can be done that may reduce their risk of breast cancer.

In order to limit or reduce fear or anxiety, it is important to communicate after you share this list that having these risk factors does not mean that the listener will get breast cancer. It does mean that she or he should communicate with a doctor about personal risk, be alert for changes in the breasts and obtain the recommended screenings. Share that most women in the U.S. who are diagnosed with breast cancer do not have any of these risk factors aside from being a woman and getting older.
Alcohol consumption. A drink socially from time to time may be okay. Studies show that drinking alcohol often (one drink of alcohol per day) increases breast cancer risk. Limiting your alcohol use may reduce risk.

Use of menopausal hormones. We recognize that some women have symptoms of menopause like hot flashes or other discomfort. Sometimes a doctor will prescribe medication to help with the symptoms, but it is important to know that going through menopause does not mean that you are sick. Those symptoms are normal. Don’t take the medication without supervision or advice from your doctor. Most doctors prescribe these hormones at as low a dose as possible and for as short a time as possible.

Breastfeeding. Breastfeeding is good for babies, but it is also good for moms. It may also help us to reduce risk of breast cancer.

ASK

Before ending your conversation, you can evaluate your success in communicating your message by asking:
What actions will you take to maintain a health lifestyle?

You may also ASK:
Did you learn anything about breast health today that you did not know before?
Can you think of a friend of family member with whom you will share the information you received today?

Additional talking points can be found in the Breast Self-Awareness Key Messages resources. Additional information about how to evaluate your one-to-one conversation can be found in Tips for Evaluation Your Program.