

# EDUCATOR RESOURCES



## Sample Talking Points for One-to-One Conversations

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

### **Getting Started: Introduce Yourself**

Introduce yourself and your organization, and ask the other person's first name and a basic question about them.

#### **Example:**

- 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).
- You could compliment her or him on an article of clothing or accessory. You can ask where they got it and if it was a gift.

### **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 person an educational handout or a flyer with your organization's or Komen's contact information.
- 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 are examples 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?*

*What do you know about breast cancer in the Black and African American communities?*

**NO** **RESPOND**

*The two most common risk factors for breast cancer in the general population are being born a woman and getting older.*

*Breast cancer occurs when cells in the breast divide and grow without their normal control and form malignant (cancerous) tumors.*

*The incidence (new cases) of breast cancer under the age of 40 in Black and African American women is higher than that of white women.<sup>1</sup>*

*Breast cancer is the most common cancer among Black and African American women in the U.S. Black and African American women are more likely to be diagnosed at a later stage than white women and are also more likely to be diagnosed with larger and more difficult-to-treat tumors.<sup>1</sup> This is likely due to fewer women getting back to the doctor for a follow-up after abnormal screening results.*

**YES** **RESPOND & LISTEN**

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

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**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.*

*Was your relative young (under the age of 40) when she or he was diagnosed with breast cancer? If so, being related to that person may increase your risk as there may be a genetic link.*

*Have you asked other family members about the health history of previous generations? This information should be shared with your doctor so that he or she can help you assess whether you are at a higher risk.*

**NO**  *Most women in the U.S. who develop breast cancer do not have a family history of breast cancer.*



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\*\*](#).

**ASK** Whether the person knows someone who 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 in the general population are being born a woman and getting older?*

**RESPOND & LISTEN**

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

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

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**ASK** *Did you know that the Black and African American women are more likely to develop breast cancer at a younger age than are white women?<sup>1</sup>*

**YES**  *Black and African American women diagnosed with breast cancer at a young age generally have a more aggressive form of the disease.<sup>1</sup>*

or **NO**

**RESPOND & LISTEN**

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

- Talk with both sides of your family about your family health history.*
- Talk with your doctor about your own risk of breast cancer.*
- Talk with your doctor if you think you are at a higher than average risk of developing breast cancer.*

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**ASK** *Did you know that the Black and African American women are more likely to develop triple negative breast cancer than other racial/ethnic groups?<sup>1</sup>*  
*What do you know about triple negative breast cancer?*

**YES**  *Triple negative breast cancer is an aggressive type of cancer that generally has a poorer prognosis (outcome) than some other types of breast cancer.*

or **NO**

**RESPOND & LISTEN**

- Talk with both sides of your family about your family health history.*
- Talk with your doctor about your own risk of breast cancer.*
- Talk with your doctor if you think you are at a higher than average risk of developing breast cancer.*

## 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

*Have you thought about getting screened?*

*What kept you from getting screened?*

LISTEN

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

*Black and African American women are at a higher risk than white women of being diagnosed at a younger age and with a more aggressive form of breast cancer.<sup>1</sup>*

*There are resources in the community that can help you with a free screening, finding a provider or 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 getting free screening, finding a provider or getting health insurance.*



You can also refer to the [Barriers to Screening and Suggested Responses](#) resource to help you prepare for addressing barriers that some women face.



You can use [My Breast Health Resource List](#) to keep track of the local resources available to your audience.

**If the woman had a screening within the recommended time frame:**

**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!

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**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?*



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 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?*

**YES** **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 changes that the person should be looking for (see next page), and encourage her or him to be alert for any change.
  - 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 or 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.

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**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. She may not have insurance or a health care provider. If you are talking with a man, he may not believe he needs to be concerned about these women's issues. However if he has a partner or 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 partner or 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 in 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 next steps.*



Additional talking points can be found in the [\*\*\*Breast Self-Awareness Key Message\*\*\*](#) resources. You may also use the [\*\*\*Men Can Get Breast Cancer\*\*\*](#) brochure. Additional information about how to evaluate your one-to-one conversation can be found in the [\*\*\*Tips for Evaluating Your Program\*\*\*](#).

## 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 or 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 or family member with whom you will share the information you received today?*



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.

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### **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 a chance to share what she or he already knows about breast cancer risk factors, and then share 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 born 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

*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.*



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 talk 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 born a woman and getting older.

- ❑ **Participate in 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.*
- ❑ **Limit alcohol intake.** *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.*
- ❑ **Limit 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. You should talk to your doctor before using any hormonal medications. Most doctors prescribe these hormones at as low a dose as possible and for as short a time as possible.*
- ❑ **Breastfeed.** *Breastfeeding is good for babies, but it is also good for moms. It may also help us to reduce risk of breast cancer. Breastfeeding is associated with a lower risk of breast cancer, including triple negative breast cancers. White women were twice as likely to breastfeed for longer than one year than African American women.*



Emphasize that Black and African American women are more likely to be diagnosed before 40, are more likely to develop aggressive triple negative breast cancer, and have more than a 40 percent higher mortality rate than white women.



If there is a saying to describe being drunk, use it. It will often make the listener laugh and insert a little bit of humor to the conversation.



You have just shared a lot of information. Provide a brief summary of actions the listener can take that may reduce her risk of breast cancer. To end on an empowering note, you might ask what actions she will take to maintain a healthy lifestyle and may reduce her 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 healthy 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 or 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. More information about how to evaluate your one-to-one conversation can be found in [\*Tips for Evaluation Your Program\*](#).