



Overview

According to the Surveillance Epidemiology and End Results program of the National Cancer Institute, cancer is the second leading cause of death for Hispanics/Latinos in the U.S., accounting for about 20 percent of all deaths. Research shows that many Hispanics/Latinos fail to recognize symptoms of cancer, which frequently leads to late detection and therefore poor treatment outcomes (Center to Reduce Cancer Disparities). Factors contributing to the high rate of deaths from cancer among Hispanics/Latinos include: language barriers, cultural beliefs, among others (National Cancer Institute). To address this alarming trend, **LIVESTRONG** in November 2010 launched a national public education campaign to generate awareness of its free resources available in English and Spanish for Hispanics/Latinos affected by cancer. The campaign was comprised of various highly targeted outreach initiatives and anchored by a community health worker (or *promotores*) training program designed to empower cancer survivors by equipping them with the necessary resources.



Challenge

A lingering stigma associated with cancer within the Hispanic/Latino population often deters individuals from seeking the services and support they need to fight their cancer, fearing they will be ostracized from their communities (American Cancer Society). To further compound this problem, many Hispanics/Latinos are not aware of the wide range of resources available to them (Gruskin, Rodriguez, Vega, 2009).

Objectives

1. Increase utilization of **LIVESTRONG**'s culturally appropriate resources and services for Hispanic/Latinos affected by cancer.
2. Generate awareness about **LIVESTRONG**'s culturally appropriate resources and services among key Hispanic/Latino influencers, media and the community.



Market Research

To inform the campaign strategy, **LIVESTRONG** engaged an independent research firm to conduct focus groups and a telephone survey with Hispanics/Latinos in seven priority markets: San Francisco, San Diego, Austin, San Antonio, Lower Rio Grande Valley, Miami and New York/New Jersey. The market research was designed to identify: (1) awareness levels of **LIVESTRONG** and its services; (2) beliefs and misconceptions regarding cancer survival and treatment; and (3) the most effective communication channels for reaching target audiences.

Methods

Telephone Survey

The following section presents a profile of Hispanic/Latino respondents surveyed in 2011. Survey results were weighted by age, gender and region to help account for the over-representation of women and seniors in telephone landline samples and to ensure that each target market was proportionally represented when all surveys were combined. With these adjustments, the survey sample is reasonably representative.

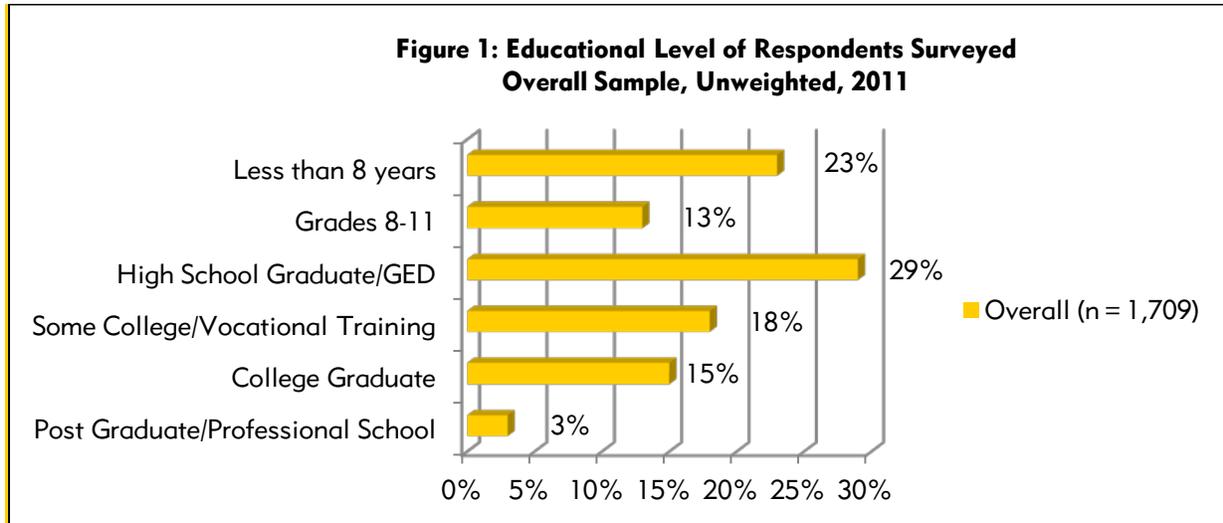
Table 1 presents the cultural heritage of Hispanics/Latinos surveyed. More than half of all respondents (54 percent) were of Mexican heritage, followed by 14 percent who identified themselves as Cuban, 12 percent as Central American, nine percent as South American, and seven percent as Puerto Rican. Two-thirds (67 percent) of all respondents completed the survey in Spanish.

**Table 1: Cultural Heritage of Respondents Surveyed
Overall Sample, Un-weighted, 2011**

	Mexican	Cuban	Central American	South American	Puerto Rican	Refused
n = 1,816	54%	14%	12%	9%	7%	4%

*Table based on: Q2a: "What Hispanic group do you most identify with?"

Figure 1 presents the educational level of respondents. More than one-third of respondents surveyed had less than a high school education, followed by 29 percent who had a high school diploma or GED equivalent. Approximately half of all respondents reported a household income of less than \$22,000, the federal poverty line for a family of four.



*Chart based on Q27: "What is the highest level of schooling you completed?" Base excludes respondents who answered "don't know/refused."

A total of 61 percent of survey respondents were women and 37 percent were 55 years or older, indicating a skew toward women and older respondents.

Table 2 presents the weight corrections applied to age, gender, and regional distribution.

**Table 2: Demographics of Respondents
Overall Sample, Un-weighted and Weighted, 2011**

Age	Unweighted Sample	Weighted Sample (Matched to Actual Population)
18-34	19%	39%
35-54	38%	38%
55-64	17%	11%
65 and older	20%	12%
Gender		
Gender	Unweighted Sample	Weighted Sample
Men	39%	50%
Women	61%	50%
Region		
Region	Unweighted Sample	Weighted Sample
San Antonio	11%	8%
Austin	11%	9%
Rio Grande	11%	38%
San Francisco	11%	21%
San Diego	11%	10%
New York/New Jersey	22%	5%
Miami	22%	9%

* Results exclude respondents who answered "don't know/refused." Totals may not add to 100% due to rounding error.

Focus Groups

All focus groups were conducted during week days and at professional focus group facilities, equipped with one-way mirrors for observing. Two focus groups in each market were conducted with younger, acculturated Hispanics/Latinos who speak predominantly English and two focus groups were conducted with older, Spanish-dominant Hispanics/Latinos born outside of the United States. All participants were screened for their ability to read and write to ensure that they were able to comment on written material. In addition, all the English/bilingual participants were required to use the Internet once a week or more. At least half the Spanish-dominant participants in each group were required to use the Internet weekly.

*A total of 12 participants were recruited for each group, resulting in eight to ten participants attending each group. The majority of participants in Austin were of Mexican heritage, while participants in New York were from Puerto Rico, the Dominican Republic, and parts of Central and South America. A total of 35 individuals participated in the study.

Statements presented in this report regarding majority and minority opinions on particular topics or in response to specific marketing materials are based not only on the frequency by which statements were made by participants but also in how those responses were delivered, including the tone and emphasis of a statement, emotional context, and body language.

*It should be noted that the educational requirements set for this study (the ability to read and write and the ability to use the Internet) may not be typical for many Spanish-dominant speakers in the United States.

Results

Overall market research findings revealed that despite name recognition, many participants were unclear about the purpose of **LIVESTRONG** and had little, if any, awareness of its cancer resources. In terms of beliefs surrounding cancer, participants most frequently cited a fear of death and suffering, the difficulty of telling friends and relatives and the cost of medical treatment. The study also found marked differences in the way that Hispanics access cancer-related information, depending on the market. For example, respondents in Miami and New York indicated that their physician was the primary source of health information, followed by the Internet; whereas respondents in California and Texas obtained the majority of their information from television and radio.

Telephone Survey Findings

- More than two-thirds (69 percent) of Hispanics/Latinos reported that they believe only half the people diagnosed with cancer survive, if not fewer.
- The purpose of **LIVESTRONG** is not well understood among many in the Hispanic/Latino community. Among Hispanics/Latinos who were familiar with **LIVESTRONG**, approximately one-third (32 percent) reported that the purpose of the foundation was to support cancer research.
 - Half reported that the purpose of the foundation was to inspire people to take part in the fight against cancer and an additional 11 percent reported that the foundation aims to connect people with cancer services.

- A total of eight percent of respondents who had heard of **LIVESTRONG** reported that they did not know the purpose of the organization.
- More than half (53 percent) reported that they believe cancer is most often caused by a person's behavior or lifestyle.
- When asked why people do not get screened regularly for cancer, most frequently cited cost (34 percent) and fear of the result (29 percent).
- Nearly half (46 percent) of Spanish-dominant speakers reported that they do not read well in either Spanish or English, suggesting that non-written communication channels such as one-on-one interactions and Spanish-language media (radio and television) might be important strategies for reaching this population.
- Among Spanish-dominant speakers who had looked for medical information in the past, the primary source of health care information was a doctor or health care provider.

Focus Group Findings

- When discussing their concerns surrounding cancer, participants across all groups most frequently cited a fear of death and suffering, the difficulty of telling friends and family that they have a life-threatening disease, and the cost of medical treatment.
- Despite assertions that they are comfortable talking about cancer and that they believe people with cancer can survive, most participants reported that if diagnosed with cancer they would tell no one outside of their close family.
- Participants across all groups reported that people with cancer are often stigmatized and isolated.
- Findings suggest that the Internet is the primary source by which Hispanics/Latinos access health-related information, followed by a primary care physician.
- Although participants across all groups identified physicians as an important source of health information, few, if any, East Coast participants reported that they would turn to a nurse, *promotora*, social worker, or pharmacist. (It should be noted that the term "*promotora*" was not recognized by most New York participants.) This pattern may be due, in part, to the relative affluence of focus group participants.
- When asked to name words associated with **LIVESTRONG**, participants most frequently cited positive, inspirational terms and phrases including "alive, perseverance, opportunity, hope, live fully, against all odds, courage" and "fight."



Strategy

The market research study was invaluable in helping to refine the overall campaign theme and messages in order to resonate with target audiences. Based on insights from target audiences who participated in the study, the strategic approach was to implement a multimedia campaign that addressed cancer stigma and other top concerns relating to cancer via multiple channels: earned and paid broadcast, print, outdoor and online media, in addition to the distribution of online and printed **LIVESTRONG** resources. The campaign was brought to life by leveraging credible spokespeople – one of **LIVESTRONG**'s most valuable assets – which consisted of Spanish-speaking promotores, cancer survivors, physicians and Hispanic Global Envoy and Mexican actress Lorena Rojas. Further, the data and insights from the study will continue to inform **LIVESTRONG**'s strategic approach to reaching Latino audiences in their communities, including the clinics they commonly rely on for their healthcare needs.



Implementation

Considering that Hispanics/Latinos in each of the seven priority markets access health information via multiple channels, **LIVESTRONG's** multimedia campaign was uniquely tailored to each market to disseminate messages. To that end, **LIVESTRONG**:

- Shared the results from the study with comprehensive cancer control programs state, tribe or territories to help guide their strategies to target Hispanic/Latinos affected by cancer
- Developed a media training for existing **LIVESTRONG** Promotores that incorporated talking points using results from the market research study
- Conducted website content analysis to appropriately update a user-friendly Spanish-language website while ensuring cultural relevancy
- Engaged spokespeople, including promotores, survivors and physicians for earned media opportunities in seven key priority markets to address cancer issues affecting the Hispanic community (e.g. stigma) and increase awareness of available resources
- Engaged Lorena Rojas, Mexican actress and cancer survivor, for select media opportunities to help normalize the discussion about cancer and contribute to the elimination of stigma
- Disseminated a widely publicized **LIVESTRONG** survey to identify Hispanic cancer survivors' most pressing needs during and after treatment and inform program development
- Implemented earned and paid media efforts (broadcast, print, online and outdoor) to generate awareness of **LIVESTRONG's** free, Spanish-language resources, including the opening of the **LIVESTRONG** Cancer Navigation Center in Austin



Impact

Through its national public education campaign, **LIVESTRONG** reached its target audience across the seven priority markets. The following results are a testament to the success of the program.

- **Objective 1 outcome:** generated more than 400 phone intakes, approximately 150 online inquiries and 100 visits to **LIVESTRONG**'s cancer navigation services, representing a 40 percent increase in the number of Hispanics who accessed services during the first eight months of the campaign.
- **Objective 2 outcome:** **LIVESTRONG** formed relationships with key influencers including then Austin Mayor Pro Tem Mike Martinez, and leaders from organizations such as the Hispanic/Latino Physicians Association, Las Comadres and El Buen Samaritano. Additionally, **LIVESTRONG** generated awareness via more than 21.5 million media impressions highlighting **LIVESTRONG** promotores, survivors and other spokespeople, campaign messages, Spanish-language website and toll-free number.

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