

bloom

Issue

07

February

2011

Reach to Recovery International - RRI

Reach to Recovery International is committed to improving the quality of life for women with breast cancer and their families.

04

Advocacy: What is it?

09

LIVESTRONG on Advocacy

13

16th RRI Conference in Taiwan November 2011

A Life in service to others

In memory of
Maria Augusta Amado
1929-2010



Maria Augusta Amado was honoured with Portugal's Order of Merit, a prestigious award in recognition of her service to the community.

Maria Augusta Amado founded Portugal's 'Vencer e Viver' in 1982, after being diagnosed with breast cancer in 1979 and undergoing a mastectomy.

Inspired by the French movement 'Vivre comme avant', she formed a group of volunteers dedicated to supporting women with breast cancer, their families and friends.

She will be remembered for her faith and strong sense of purpose, a courageous woman, a caring mother, and much loved wife, a woman with dignity and true fighting spirit.

Maria Augusta worked with dedication and passion to establish the Vencer e Viver movement, applying her energy, skills and determination to create a volunteer group active in 10 hospitals in the north of Portugal.

Her friends and community today honour her memory by reflecting on her sense of solidarity with women affected by breast cancer, her love and respect of life's joys, and her compassion for supporting people in need, fighting to ease their suffering and offer dignity to others, both in a physical and spiritual sense.

Her 28 years of service as the founder and a volunteer of Vencer e Viver will not be forgotten and the spirit of her advocacy will live on as the movement continues.

Get involved in Bloom

Do you have a contribution?

If you have a story, a poem, an event, a news item, or any type of creative piece, please email our editorial team:

info@reachtorecoveryinternational.org

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Contents

04 Advocacy: What is it all about?

04 World Cancer Day - Palestine

05 A report from the Nordic Breast Cancer Conference

06 Breast cancer survival in Queensland, Australia

A new Atlas of Cancer in Queensland has highlighted a disparity in breast cancer survival between regional and urban women in Queensland.

07 LIVESTRONG: Changing the Course of Cancer Through Advocacy

09 Breast Cancer Network Australia

Informing and empowering women affected by breast cancer.

12 Supporting patients through team work

A case study from the Cancer Patients Aid Association of India.

13 16th RRI Breast Cancer Support Conference in Taiwan 2011

The latest exciting news and updates from the conference organisers and volunteers.

16 Global Kitchen goes to Portugal

17 Advocacy at the heart of World Conference on Breast Cancer

bloom

Issue 07 February 2011

Bloom is published by Reach to Recovery International. Contributions to Bloom are welcome, please email info@reachtorecoveryinternational.org. For more information about RRI, go to www.reachtorecoveryinternational.org.



We respectfully acknowledge the Indigenous women of our global community, the traditional custodians of our environment.

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Message from Ann Steyn

President of Reach to Recovery

Greetings to you all!

We all know the important role that advocacy plays; but perhaps the word intimidates us slightly. This edition of Bloom is devoted to advocacy and shows the many possibilities that are open to us.

Leonie Young demystifies the word. She says advocacy is “striving for what we believe in”. She points out that we don’t have to be political or in a high profile campaign. Each one of us has our own story to tell and we can use it in many different ways. In fact many people are advocates without even realizing it! Her article can be found on page four.

Breast Cancer Network Australia (BCNA) is a leading voice in breast cancer advocacy. They say advocacy comes in all shapes and sizes, and all of it is important.

Read about their exciting strategies and initiatives on page nine. They even have a road map for advocates which can easily be used by groups still grappling with the route they wish to take. These articles can be found on pages ten and eleven.

Dr Joanne Aitken tells of the research that has been done in Queensland in order to better understand the survival patterns of women from differing parts of Queensland. Using this research the needs of varying communities can be identified (please refer to page six).

All advocates wish to improve the survival rate of breast cancer patients and their quality of life.

Our Nordic sisters at their Breast Cancer Conference (page five) also realize that they are advocates for all those in Scandinavia with breast cancer, and of course **LIVESTRONG** (page seven) is known globally for its advocacy work for all cancers. We can also read about the training that The Cancer Patients Aid Association in Mumbai give their volunteers (page twelve).

All in all I am very excited about this issue and I hope you enjoy the read!

Please don’t forget to register for the 16th RRI Conference in Taiwan this coming November. If you do so before the end of June you qualify for a special early bird registration fee, don’t miss it!

Email annsteyn@reachtorecoveryinternational.org



Ann Steyn

More information about the conference can be found on pages 13-15 and at the conference website:

www.reachtorecovery2011.org

Warm Reach to Recovery greetings to you all!

Join the carnival!

An invitation from ‘a performancelife e.V.’
Cologne, Germany

Since 2001, the artist Siglinde Kallnbach has collected expressions of empathy and solidarity for people with cancer, taking his exhibition, a performancelife e.V. around the world.

On International Women’s Day this year, March 8, a performancelife e.V. participated in the Cologne-Ehrenfeld carnival parade.

The parade was colourful, joyful, and fun – and now the work of a performancelife e.V. continues!

If you’d like to find out more, email verein@a.performancelife.com.



Artist Jürgen Raap has painted a special and colourful canvas in preparation for the carnival parade.

Advocacy: What is it all about?

When most people hear the word ‘advocacy’ their first reaction is “That’s not for me, I don’t want to be political”. In reality, most people practice advocacy but they just don’t realize they do.

Sometimes advocacy is political, sometimes it’s compromising, debating, persuading; sometimes it’s none of that, but merely enthusiastic passion. It is about striving for what we believe in.

Advocacy is a tool we use to bring about change. It can change unfair treatment; improve services and access to services or remove barriers.

Advocates come in many forms. Lawyers are best known as advocates in our community but in the breast cancer world, we are advocates too. One of the most powerful advocacy tools we all have is our own story. We can use it in so many ways to illustrate important issues. After all our own story is what brings us together as women who have been affected by breast cancer.

A very simple example of advocacy and making a difference in a small way, and something that drives me, is the use of words to describe the cancer experience and people who are affected by cancer.

We hear many terms used to describe people whose lives have been affected by cancer, such as “victim” or “sufferer” as well as phrases to describe how someone is coping with their diagnoses like “win or lose their battle” with cancer. In the scheme of things it may seem insignificant to be concerned about the use of words, however, in reality the terms used to describe people whose lives have been affected by cancer can have an enormous impact on community perceptions. These perceptions or misconceptions can influence how government, policy makers and funding bodies fund research and support programs in the community. It most certainly affects how people perceive themselves and can have a huge impact on how they get through everything they have to with their cancer diagnosis.

If we can find ways to bring hope and optimism to peoples’ lives, even when this may seem impossible, then we can begin to have an influence on the personal impact of cancer.



Leonie Young
Brisbane, Australia

If you don’t think you are an advocate, just think of times you have talked to another woman about her breast cancer journey, or the times when you helped someone find information, or have spoken up for someone who is not confident.

Of course, there are people who use their advocacy skills to raise awareness in the political arena, who sit on committees and influence decisions made in relation to cancer and raise awareness in a more public way. When we all work together, great things can happen.

In the words of Margaret Mead: “Never doubt that a small group of thoughtful committed citizens can change the world; indeed, it’s the only thing that ever has.”

World Cancer Day - Palestine



In the lead up to World Cancer Day on February 4, the Patient’s Friends Society-Jerusalem conducted workshops in Nablus and Hebron for health professionals from all work sectors.

Part of the program was a presentation by the women from the support group, Sunrise.

They shared their experiences and responded to questions from participants. Their contribution was very impactful and provided an important avenue for improving patient-professional communications.

You can follow the work of the Patient’s Friends Society-Jerusalem on Facebook – just search for their name!

A report from the Nordic Breast Cancer Conference



The Danish Breast Cancer Organisation (DBO) hosted the 10th Nordic Breast Cancer Conference in Copenhagen on September 17 and 19, 2010.

More than 300 volunteer breast cancer counsellors and advocates from Iceland, the Faroe Islands, Sweden, Norway and Denmark took part in the conference.

The spirit of togetherness continues to be very strong between Scandinavian countries, and this conference, held every second year in one of the Nordic countries, provides a forum for continuing education as well as sharing experiences.

After a reception at the beautiful old Copenhagen Town Hall, the conference opened with a full program of presentations by leading specialists in the breast cancer field who described, among other things, the latest advances in breast cancer treatment. A number of speakers addressed the overall conference theme, "Life after breast cancer", and covered such topics as the late side effects of treatment, how to avoid lymphoedema, the relationship between faith and recovery, the influence of lifestyle on prognosis and the risk of breast cancer after many years of working at night.

There was also time to talk with each other informally and enjoy a social program including musical interludes by Michala Petri on the recorder accompanied by Lars Hannibal on guitar, an after-dinner concert of songs written and presented by prisoners from a Copenhagen jail, and a potpourri of songs by children dressed as characters from the fairytales of Hans Christian Andersen.

The most important aspect of the conference was that we were all breast cancer survivors, involved in the task of helping those who are only now being diagnosed and starting their treatment, to show them how much we care and work for them – that we are advocates for all those in Scandinavia with breast cancer.

In 2012 we will meet again in Stockholm, where the Swedish breast cancer organisation will invite us to share our experiences and plans for continuing support of those with a breast cancer diagnosis.

DBO president, Helle Viola Haugaard, welcomed the more than 300 delegates to the 10th Nordic Breast Cancer Conference at the Copenhagen Town Hall.

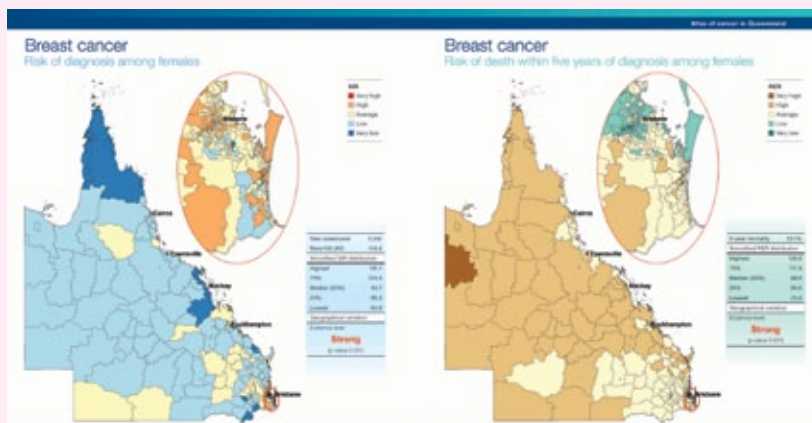


Participants in the 10th Nordic Breast Cancer Conference in Copenhagen.



Breast cancer survival in Queensland, Australia

Mapping the differences in survival outcomes between regional and city women



A new Atlas of Cancer in Queensland has highlighted a disparity in breast cancer survival between women who live in cities in Queensland, close to major treatment centres, and regional women, who are more likely to die within five years of diagnosis.

The Atlas provides a better understanding of survival patterns so that researchers can identify the factors that influence outcomes for women affected by breast cancer, to increase survival rates.

The Atlas will also enable organisations such as Cancer Council Queensland to provide targeted support for women in high risk areas, with the cooperation of state and local governments and health agencies.

The Atlas was published by Cancer Council Queensland (CCQ) on its 50th Anniversary, and provides a comprehensive picture of how cancer incidence and survival varies across the 478 statistical local areas in Queensland, for all major cancers.

Director of Research for CCQ, Professor Joanne Aitken, says publication of the Atlas is a significant step forward for improving breast cancer survival in Queensland.

“The Atlas is significant for its contribution to our understanding of how breast cancer incidence and survival affects Queensland women differently depending on where a woman lives.

“The incidence of breast cancer among women

living in affluent areas was higher than the Queensland average (10% higher for most advantaged and 2% higher for advantaged areas), while the incidence among women living in disadvantaged (4% lower), most disadvantaged (6% lower), outer regional (10% lower) or remote (15% lower) areas was below the Queensland average.

“Variations in incidence by socioeconomic status have been linked mainly to lifestyle factors, with women in affluent areas being more likely to delay childbearing, have fewer children and/or use hormone replacement therapy, which are all risk factors for developing breast cancer.

“There was also a marked gradient for survival, which decreased with increasing remoteness of residence and greater disadvantage. Females diagnosed with breast cancer while residing in affluent areas had higher survival (11% lower risk of death for the most advantaged areas), while the risk of dying within five years after diagnosis among females in outer regional and remote areas was an estimated 12% and 14% higher respectively than the Queensland average.

“Combined, this meant that 73, or 10% of deaths due to breast cancer within five years of diagnosis among females living in these areas could have been prevented during the ten-year study period if survival rates matched the Queensland average.

“Research studies examining socioeconomic disparities suggest this is likely to reflect differences in stage

at diagnosis, but it may also be influenced by treatment access or quality.”

The new Atlas was unveiled just as Cancer Council Queensland prepares to commence a major research investigation into the disparity in outcomes for Queensland women affected by breast cancer.

The study will investigate both clinical and psychosocial outcomes to help identify the reasons for the disparities, to improve survival rates.

“Our researchers are seeking to investigate diagnostic and treatment pathways, access to, and utilisation of supportive care services, rates of recurrence, and survival for Queensland women newly diagnosed with breast cancer.

“Breast cancer is the most common cancer diagnosed in Queensland women, and a third of all women diagnosed will experience high levels of psychological distress, which is greatest for younger and poorer women.

“While there is some variation within areas, our research shows that women diagnosed with breast cancer while living in outer regional areas of Queensland are about 33 per cent more likely to die from their cancer within five years than those in the major metropolitan area of South East Queensland.

“The survival gap between women living in remote areas of the state and women in South East Queensland is even greater, at nearly 66 per cent.”

The study will involve all women aged 20-79 years recently diagnosed with breast cancer being asked to complete telephone and self-administered surveys to assess how individual and area-level factors (remoteness, socioeconomic and demographics) influence:

- Diagnostic and treatment pathways and processes
- Supportive care utilisation
- Rates of recurrence
- Survival

“The study will help improve our understanding of the underlying reasons for inequalities in clinical and psychosocial outcomes,” Prof Aitken said.

“Variations may be caused by a range of factors, including, but not restricted to, environmental factors, access to screening and diagnostic services, stage at diagnosis, access to effective treatment and care, migration of cancer patients, the mix of cancer types present in that region, or even chance.”

Prof Aitken says the report and findings from the research project will provide a rationale for greater allocation of funding and resources to improve detection and survival outcomes for women affected by breast cancer across the whole of Queensland.

To view the Atlas or find out more about the breast cancer outcomes project and Cancer Council Queensland’s 50th Anniversary, go to www.cancerqld.org.au.



LIVESTRONG: Changing the Course of Cancer through Advocacy

LIVESTRONG® opened its doors in 1997 as the Lance Armstrong Foundation, not long after world champion cyclist Lance Armstrong received his cancer diagnosis. In the beginning, the organisation was small and the mission to the point: Fight like hell. Over the course of the past 14 years, LIVESTRONG has grown exponentially in size and reach, so far directly helping more than two million people and reaching 200 million whose lives have been affected by cancer, including survivors living with the disease as well as their friends, family, loved ones and health care providers.

LIVESTRONG retains that fight like hell spirit today, by serving those affected by cancer and empowering them to take action. The needs of cancer survivors are at the center of every initiative the organisation undertakes. LIVESTRONG works to connect people affected by cancer, in English and Spanish, to the resources and information that they need to receive support throughout their cancer experience.

LIVESTRONG carries this survivor focus through to its advocacy efforts. The

organisation began as a grassroots effort, and through this community approach now stretches far beyond its Texas hometown. LIVESTRONG launched its global initiative in 2009, and has successfully taken its mission worldwide by amplifying the voices, experiences and stories of cancer survivors. This includes launching pilot programs in South Africa and Mexico to fight stigma, while educating local organisations on how to lead a survivor-informed advocacy movement. LIVESTRONG's global efforts also include convening anti-cancer experts, government leaders and survivors at international conferences including the Clinton Global Initiative in New York, the LIVESTRONG Summit in Dublin, and the Union for International Cancer Control in Shenzhen, China.

Advocacy – whether it takes the form of a signature on a petition or organising a LIVESTRONG Day event to raise awareness – will always remain a key component in the quest to conquer cancer. LIVESTRONG offers many ways for people to become advocates, from one-time actions to ongoing

commitments. For those interested in the latter, the LIVESTRONG Leader program provides an opportunity for individuals to lead advocacy efforts in their communities by sharing their stories, raising awareness and educating others on the fight against cancer. There are more than 500 LIVESTRONG Leaders, representing 60 countries around the globe.

Ashleigh Moore, a LIVESTRONG Leader in Adelaide, travels throughout South Australia hosting “Cancer Conversations” in the local Aboriginal community. This initiative aims to represent the views of those affected by cancer and promote these perspectives to health professionals, government officials and the community.

Henrike Hirsch, a LIVESTRONG Leader in Oldenburg, Germany, aims to fight stigma and discrimination of young adults with cancer through education and awareness. She regularly speaks to high school students on the value of skin cancer prevention and sun protection, while stressing the importance of early detection and screening.

Jere Carpentier, a **LIVESTRONG** Leader in California, has shared the story of her three cancer diagnoses with the California State Assembly in an effort to have the pill form of chemotherapy covered by insurance companies. Her story has been featured in numerous news outlets, leading to an invitation to travel to Washington D.C. and speak with lawmakers about cancer program and research funding.

For every action there is an equal and opposite reaction. As more people are diagnosed with cancer, it is crucial to counterbalance these statistics with positive action to fight the disease. When **LIVESTRONG** Leaders and advocates tell their stories, they represent the 28 million survivors worldwide and their voices amplify a message that must be heard: Now is the time to push for attitude and policy changes that will shine a spotlight

on this disease that knows no cultural, national or socioeconomic boundaries. **LIVESTRONG** advocates every day for all survivors, rooted in the knowledge that strength is unity. Each and every advocate that signs up to fight can help change the current course of cancer.



Visit www.LIVESTRONG.org/TakeAction to learn more on becoming an advocate today.



Breast Cancer Network Australia

BCNA is the peak national organisation representing Australians affected by breast cancer. We inform, empower, represent and link together more than 55,000 individuals and 285 member groups nationally. Our work seeks to ensure that women diagnosed with breast cancer are provided with the very best information, services and support possible, no matter who they are or where they live.

For more information, or to join our online community, visit www.bcna.org.au or Freecall 1800 500 258 (Australia only).
The voice of Australians personally affected by breast cancer.



Our work in advocacy

For over ten years BCNA has been a leading voice in breast cancer advocacy in Australia.

We do this through a range of strategies and initiatives including:

- Our internationally recognised **Seat at the Table** program attracts, recruits, trains and supports women to actively participate in committees, boards and forums, to positively influence decision making. The women sit alongside scientists, doctors and academics to influence decisions about breast cancer treatment and care, ensuring that the needs of

women personally affected by breast cancer are considered.

- **Training Women to Represent** through BCNA's Advocacy and Science courses provides women with the knowledge, skills and confidence to sit on medical, scientific and health planning committees. This training has been used as a model for other groups, here and overseas, keen to undertake similar work.
- **Representing women on clinical trials** to ensure written information for women is clear and understandable, that quality of life issues are considered and that the progress of trials is reported back to these women.

- **Working with government** to bring about changes that will improve the lives of those affected by breast cancer. BCNA advocated strongly for two government schemes which were introduced recently in Australia. These schemes allow for:
 - o provision of a national reimbursement for external breast prostheses, and
 - o a rebate through Medicare for breast MRI screening for women under the age of 50 who are at high risk of breast cancer.
- Humanising issues such as gene patenting by **sharing personal stories** which highlight the personal

impact of being a BRCA1 or BRCA2 gene carrier. BCNA made a powerful presentation to the recent Senate Inquiry into gene patents ensuring they considered the end user in this complex commercial consideration.

- **Collaboration with our 'sister' breast cancer organisations** in Australia, each of which has a distinct niche and focus, in order to complement each other's work in our aim to achieve the best outcomes for women with breast cancer. This sharing extends to other cancer groups: BCNA's *My Journey Kit* provided the model for the Ovarian Cancer Australia's Resilience Kit.

"I soon realised my contribution was not medical, it was practical... in fact I had a lot to offer." Kaye, QLD, Australia

- **Advocating for improved treatments for women.**

- o In 2001 BCNA led a successful national campaign to have the drug Herceptin made available to women with HER2+ secondary breast cancer via the Prescribed Benefits Scheme (PBS). This important achievement ensured broad access to

this life saving treatment representing a cost saving of around \$50,000 for each individual woman.

- o BCNA's advocacy helped achieve changes in the way Tykerb can be prescribed, allowing greater flexibility for women's treatment options.

- **Working with other organisations** such as the

national depression initiative beyondblue, to develop a joint fact sheet about depression and breast cancer for women: <http://www.bcna.org.au/fact-sheets>

- **Educating the doctors of tomorrow** through women making presentations to third year medical students about their personal experience of breast

cancer, and highlighting the importance of effective communication between doctors and their patients.

- **Participating in and presenting at national and international conferences and forums** targeted at health professionals and women personally affected by breast cancer.

“ It's great news (that Herceptin is now available). It looks like the Prime Minister was listening and Breast Cancer Network Australia has done some great lobbying.” Janet, VIC, Australia

“ Both BCNA and beyondblue want to provide quality information and support for women affected by breast cancer and depression – and their families. We hope that through this partnership women will know there are places they can go for help.” beyondblue CEO, Leonie Young

“ I gained a good sense of the emotional aspects of things and what patients did/did not like about the way doctors/nurses handled her situation. Very helpful.” Medical student

A roadmap for advocates

Changing the system

In the simplest terms, advocacy is about using your voice to bring about change. For Breast Cancer Network Australia it's about influencing people such as doctors and health professionals, public servants, politicians and researchers, to get them to do things differently, to get better outcomes for women.

Often when we think of advocacy, we think about big campaigns. We think about people power – women burning their bras in the 1960s; the people of Egypt out in the streets chanting and calling for reform; orchestrated media campaigns undertaken by people of influence and power. It can all seem a bit overwhelming and impossible.

But advocacy comes in all shapes and sizes – and all of

it is important. Not all women are interested in public, high profile campaigns. Individual advocacy can simply be about chipping away at the system, achieving change on a small scale, making a difference for one person or a handful of people in a local community.

Individual advocacy can sometimes happen almost without us realising that it's occurred. It might be as simple as giving feedback to your GP about a good surgeon they could consider referring women to. Or it might be about asking your doctor to write down some information for you. Some women prefer the power of the pen, writing a letter to the editor of the local paper, or to a local politician, inspiring others to change their thinking and actions.

Larger scale advocacy campaigns that could benefit hundreds or thousands of women may focus on bringing

about change that improves access to a particular treatment, or that delivers a fundamental reform in the way health professionals work. Effective advocacy on this scale involves careful planning, networking with decision makers and others who can influence them, and a thoughtful and considered approach to the problem you are trying to solve.

Banding together with other women or organisations such as BCNA who are seeking the same or similar outcome, can help make the seemingly unachievable a reality. Sharing the load, making decisions together and using your individual strengths can make the job easier and bring fresh ideas and enthusiasm for your project. Sometimes you can find allies and supporters from the most unlikely quarters. It always pays to keep an open mind about who might support and assist your campaign. But it can also

mean compromise and other challenges, and sometimes it can be hard to keep a group together over the long haul.

But if advocacy results in positive change for even one person, then it's worthwhile, because each woman's experience of breast cancer is important, and every single woman deserves the best possible treatment and care that she can get.

So you've identified a problem that you think needs to be changed, but what do you do now? The following checklist is an example of a tool that BCNA provides to members who have informed us of an issue affecting their community. It may help you to plan your approach, and help you get the change you want and need!



Making change happen

- Is the issue a national or a local issue? If it's a national issue, is there a consumer organisation or group that might be well placed to work on the issue?
- Be clear about what it means for women. Can you define the issue or problem clearly?
- Do your homework and make sure you have your facts correct. If you don't know where to find the right information, try and identify someone with expertise who might be willing to help you. Sometimes help can come

from the most surprising places.

- Know who you need to influence. Who is the decision maker who can make change happen? Try getting to know them before you ask them for something. Who are your potential allies? Talk to them about the problem, and find out what they think the solution might be.
- Build relationships with people who have some influence ahead of time. Try not to make your first contact with a local politician or doctor about asking them to do something. If you can,

attend an event where they will be present, and introduce yourself. Have a conversation and be interested. When you see them next time, they may be more likely to want to meet with you, and may be more open towards you and the issue that you wish to discuss.

- Be clear about what it is that you want. What's the solution to the problem? Writing it down in one sentence forces you to be succinct and clear. Ask others if your solution is realistic?
- Be prepared to use a variety of approaches.

- Use women's stories as a way to highlight the problem. The stories are compelling and emotive. Stories personalise the issue and show others the implications and impact of the problem.
- Consider the role of the media, but use caution. The media can be your best friend or your worst enemy. Try not to publicly embarrass the person you want to influence. Give them an opportunity to respond directly to you, before 'going public'.
- Be persistent. The wheels often turn slowly – it takes time to effect change.

A checklist for change

Getting your message across

- You've finally got a meeting with the local person who makes decisions. What do you do now?

Planning

- Know exactly **who** it is that you need to talk to, and why!
- Be specific about what you want.
- Be clear about what you want to say. Take some time to write down your messages.

In the meeting

- Use one profound statistic to highlight your issue.
- Limit the number of people attending the meeting. 2 or 3 speakers at a meeting are enough.
- Appoint a note-taker.
- Before you leave the meeting, sum up the agreed action and timelines.

Follow up

- Follow up with a written letter of thanks. Thank them for the meeting and confirm the agreed action and timelines

For more information, or to join our online network, visit www.bcna.org.au or Freecall 1800 500 25 (Australia only).





Supporting patients through team work

This case study from the Cancer Patients Aid Association in India demonstrates the important role that volunteers can play in building capacity to support women with breast cancer...

Cancer Patients Aid Association (CPAA) is a 40 year old organisation working to meet the needs of cancer patients in India.

Like so many non-government organisations around the world, CPAA operates with limited resources, and has innovated to develop a workshop to build volunteer capacity.

The workshop helps CPAA to identify and train long-term volunteer partners and can be adapted by other non-government organisations that support women affected by breast cancer.

CPAA has developed a three-day Psycho-oncology Volunteers Training Programme, held every month to engage dedicated community members who are committed to regular volunteering for their cause. The programme develops the volunteers' basic skills, establishes professional boundaries, informs volunteers of relevant rules and regulations, and builds specialist knowledge of psychological, social, and spiritual challenges faced by cancer patients.

CPAA's programme was developed by a qualified clinical psychologist.

Over the past two years, CPAA has successfully trained 250 participants to become volunteer counsellors. The training programme seeks to match the values and principles of the volunteers with the mission of CPAA, to build volunteer commitment.

More information about the programme and other CPAA initiatives is available on the CPAA website.

Programme structure

Day 1

The first day of the programme introduces cancer and the CPAA philosophy. This includes an exploration of participants' motivation for volunteering and emphasises the importance of their commitment. Change, grief and loss are covered, with examples related specifically to cancer, and participants are encouraged to find parallels in their own non-cancer experiences.

Day 2

The second day of the programme discusses CPAA's '4E' counselling model: Education, Empathy, Empowerment and Exit. Genetic counselling and palliative care are also covered.

Day 3

The third day of the programme covers ethics, signs and symptoms of stress and burnout, and self-care. The "Post-Traumatic Growth Inventory" builds participants capacity to be introspective and self-aware.



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REACH TOWARDS A NEW HORIZON

Reach Towards a New Horizon

16th Reach to Recovery International
Breast Cancer Support Conference



Take advantage of our early bird registration before 30 June by visiting us at
www.reachtorecovery2011.org



The 16th Reach to Recovery International Breast Cancer Support Conference will be convened in Taipei, Taiwan by the Formosa Cancer Foundation and the Taiwan Breast Cancer Alliance and the Foundation of Breast Cancer Prevention and Treatment. We warmly invite you, your fellow survivors, and colleagues to visit the beautiful island and to blend our Eastern/Western experiences of breast cancer support together!

The conference will take place from 10 - 12 November 2011 – take advantage of our early bird registration before 30 June by visiting us at www.reachtorecovery2011.org!

This message is proudly brought to you by your conference hosts:

We are a family

We are a family, no matter what color you are, what language you speak, or where you live. We all share the mark of breast cancer, united in our commitment to support each other.

This will be the first time the Conference has been convened in Asia. We are pleased that Taiwan has the opportunity to host you as our guest, one of our family members, to celebrate a family reunion and enjoy Taiwanese hospitality.

Connect with one of our angels

Once you complete the registration online, a breast cancer survivor sister from Taiwan Breast Cancer Alliance will be assigned to you as your angel. You will hopefully have the opportunity to meet at the conference, where she can welcome you! Your angel will also make a gift to present to you when you attend the conference, symbolic of our special connection. Our team of angels is currently training to learn more about your cultures, how to connect with you online before you come, speaking English, dancing, making handicraft, and any courses which could enrich your experience at the conference.

Conference programme

Exploring three key themes to reach our horizon: Impact, Care, Revival

Each day of the conference will focus on a different theme, impact, care and revival, respectively.

Day 1

The first day of the conference will focus on the impact of breast cancer, including topics that cover the impacts of breast cancer on individuals, families, relationships and employment.



Reach Towards a New Horizon

16th Reach to Recovery International Breast Cancer Support Conference

Day 2

The second day of the conference will focus on the issue of care, exploring what it means to treat the whole person and build wellness for life. Day two will include aspects of oriental culture, such as Tai-Chi, Zen-meditation, and acupuncture.

Day 3

The third day will focus on revival, exploring the ways that breast cancer survivors can transform trauma into an opportunity for empowerment, with many women using their experience to support others and build greater community capacity to address breast cancer.

We welcome your feedback and suggestions about the conference programme.

email regiser@reachtorecovery2011.org



Highlights from a computer course – using a mouse...

We are certified computer users!





Reach Towards a New Horizon

16th Reach to Recovery International
Breast Cancer Support Conference

Taste the healing power of food in Taiwan!



Food for Asian people is not just food, but also a medicine. We believe that food has more healing power than any medicine. As we all know, most breast cancer survivors encounter diet problems. Do you have your own personal recipe that can help maintain good nutrition and a healthy diet during and after chemotherapy? Please join us and share it with our global family by submitting an abstract.

In a spirit of fun, we would like to present you, our guest, with the best recipes from Taiwan at the conference, and we have therefore organised a cooking contest. The contest will be held in three stages: first round selection, second round selection, and finals.

First round selection: each Taiwan Breast Cancer Alliance (TBCA) group member selects two best recipes, one for during treatment for coping with taste change and the other one for after treatment for rebuilding physical health, and organizes a team to enter second round selection.

Second round selection (regional selection): TBCA geographically divides group members into different regions to



Recipes recommended by chefs from famous restaurants for breast cancer survivors – eat for good health during Chinese New Year holiday.

represent northern, central, and southern Taiwan. This round aims to find the best regional recipes to enter the finals.

Finals: The best recipes of Taiwan will be decided, and the champion team will present their recipes at this conference. Which team is going to be the winner? We will know the answer in May – the winning recipe will be published in Bloom.

Contest press conference

Recipes recommended by chefs from famous restaurants for breast cancer survivors – eat for good health during Chinese New Year holiday.

Keep an eye out for the next edition of Bloom for more news about the conference and the work of our team of angels. And please register today to join us as we reach towards a new horizon together. www.reachtotherecovery2011.org

Taiwan Breast Cancer Alliance



Highlights from first round selection – eat and taste, then vote.

To share your recipe or breast cancer support experience at the conference, please consider submitting on Abstract. www.reachtotherecovery2011.org/abstract.asp

Global Kitchen



This edition, Global Kitchen brings you a dish from Portugal.

Welcome to Global Kitchen, where we feature exotic recipes and home cooking from cultures around the world.

If you have a recipe to share, please email info@reachtorecoveryinternational.org

Portugese tarts

Ingredients

- 3 egg yolks (I prefer 2 egg yolks and 1 whole egg)
- 115g /4ozs caster sugar
- 2 tbsp cornflour
- 230ml/8.11fl ozs Cream (I don't use cream, I use milk)
- 170ml/6fl ozs Milk
- 2 tsp vanilla extract (I use Queen Vanilla Bean Paste)
- 300g/10.6 ozs rolled puff pastry (I use one sheet of puff pastry)

Method

1. Lightly grease a 12-hole 80ml muffin tray.
2. Put the egg yolks, sugar and cornflour in a pan and whisk together. Gradually whisk in the cream and milk until smooth.
3. Place the pan over a medium heat and cook, stirring, until the mixture thickens and comes to the boil. Remove from the heat and stir in the vanilla extract. Transfer the custard to a bowl, cover the surface with cling film to prevent a skin forming and leave to cool.
4. Preheat the oven to 200C.
5. Cut the pastry dough sheet in half, put one half on top of the other and set aside for 5 minutes. Roll up the pastry tightly from the short end and cut the pastry log into 12 x 1cm rounds. Lay each pastry round on a lightly floured surface and use a rolling pin to roll out until each is 10cm in diameter.
6. Press the pastry rounds into the muffin tin. Spoon the cooled custard into the pastry cases and bake for 20-25 minutes, or until the pastry and custard are golden. Leave the tarts in the tin for 5 minutes, then transfer to a wire rack to cool completely.



Servings:

Makes 12

Level of difficulty:

Intermediate

Preparation time:

25 minutes, plus cooling time and 5 minutes standing

Cooking time:

40 minutes



Advocacy at the heart of the **World Conference on Breast Cancer**

Information can be life saving -- especially when it comes to breast health. As countries like Canada, United States, Australia and the United Kingdom become more diverse, populations shift and information sharing about health becomes more challenging.

Leila Springer, President of the World Conference on Breast Cancer who lives in Toronto, Canada, and is originally from Barbados, knows through her personal and professional experiences that “when immigrants arrive they often gravitate toward their own communities and do not venture outside of their immediate circle to share or receive information, even if that information could be life saving.”

This reality causes an insular view of breast cancer for many immigrants and others worldwide.

“The various cultural attitudes towards breast cancer are rooted in how it’s perceived and treated in a person’s country of origin. We often think of the cancer battle as one that needs more equipment or research, but what is also needed, and often underestimated, are tools and information to help us understand

the cultural differences and why many populations do not access the care available to them,” explains Ms Springer.

At each World Conference on Breast Cancer, delegates from around the world have attended and continue to attend to expand the tools, information and communication between countries in hope of making a difference when they return to their communities. At the heart of the World Conference on Breast Cancer is the theme of breast cancer advocacy.

“Community building is an important part of advocating for service delivery change. And, it is the Conference’s delegates’ connection to local communities around the world that teach us about the disparities, cultural myths, differences, reluctance to seek breast cancer screening, family challenges and the code of silence that can be a barrier to timely and life-saving care for the person newly diagnosed with breast cancer.”

The Conference not only equips delegates to be advocates when they return home, but it is a focus of the sessions.

Two advocacy highlights of the 2011 World Conference on Breast Cancer are:

Fran Visco, our first keynote, who is a renowned speaker on breast cancer advocacy and received the American Cancer Society Distinguished Service Award in 2008 and was named one of the 40 most influential people in the Pharmaceutical Industry by World Pharmaceutical Frontiers Magazine in 2008 and 2009.

Ranjit Kaur, CEO, Breast Cancer Welfare Association Malaysia, will share a case study about advocacy and community outreach work in Malaysia where she and her team have launched MURNI (Mobile Unit Reaching Nationwide with Information) that offers women community-based services through a mobile unit that can reach out to outlying areas and rural communities to improve the quality of life for women in general and women with breast cancer in particular.

“The World Conference on Breast Cancer aims to break through by equipping local advocates to share information and educate their communities about breast cancer,” says Ms Springer.

To learn more about the World Conference on Breast Cancer or to register for the World Conference on Breast Cancer 2011 in Hamilton, Canada, please visit us at

www.wcbcf.ca.

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EVENTS

HAMILTON ONTARIO, CANADA June 2011:

[World Conference on Breast Cancer](#)
June 7 - 11, 2011

For more information visit www.wcbcf.ca/conference/home/

TAIPEI, TAIWAN November 2011:

[16th Reach to Recovery International Breast Cancer Support Conference](#)
November 10 - 12, 2011

For more information visit www.reachtotherecovery2011.org

VIENNA, AUSTRIA March 2012:

[8th European Breast Cancer Conference](#)
March 21 - 24, 2012

Go to www.ecco-org.eu/Conferences-and-Events/EBCC-8/page.aspx/2163

Our mission

Reach to Recovery International is built on a simple yet universal principle: a woman who has lived through breast cancer and gives of her time and experience to help another woman confronting the same experience is a valuable source of support. Reach to Recovery International is committed to working to improve the quality of life for women with breast cancer and their families through a wide range of services offered worldwide.

For more information about RRI and bloom, please email info@reachtotherecoveryinternational.org or visit our website at www.reachtotherecoveryinternational.org

