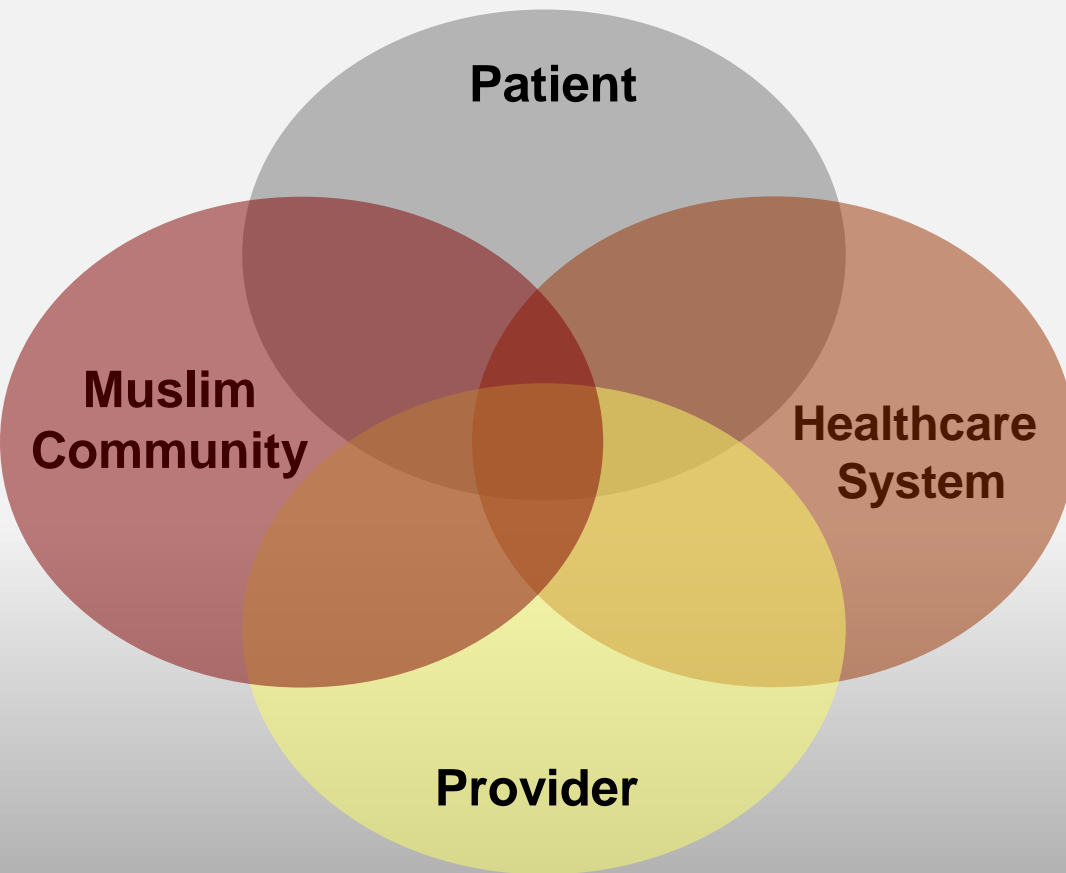


# The Influence of Modesty Concerns and Fatalistic Beliefs upon Breast Cancer Screening Practices amongst American Muslims

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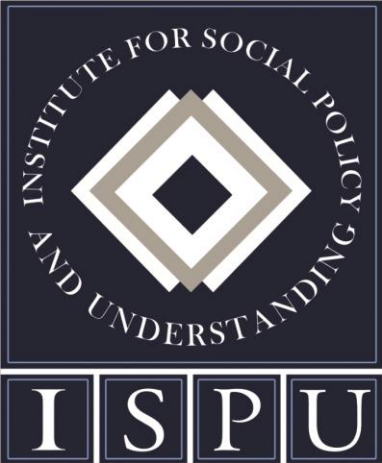
# Research Interests



- Islam influences
  - Patient Health Behaviors
  - Provider Practice of Medicine
  - Bioethical decision-making
- Cultural Accommodations
  - Who [What values] ?
  - How [to what extent] ?

# American Muslims

- Demographically Diverse
  - ~7 million
    - 20-24% Indigenous African American
    - 18-26% South Asian American
    - 24-26% Arab American
- Socio-economically Diverse
  - 65% Foreign-born, 35% Native
  - African Americans: lower socioeconomic strata, hx of racism
  - Arab & South Asians: skilled laborers, business owners



Council of Islamic Organizations  
of Michigan

- Community-based Participatory Research
  - Partners
    - An American Muslim policy think-tank
    - 2 Islamic Umbrella Organizations [>25 mosques]
    - A community health organization
  - 2 Phases
    - 12 semi-structured interviews with community leaders
    - 13 FGs at mosques sampled for ethnic diversity



**ACCESS**

Arab Community Center for Economic and Social Services

Community Health & Research Center

# Aims

- Identify Key Islam-related health beliefs
- Explore how these beliefs influence health behaviors & healthcare-seeking patterns

# Islam & Health

- Gives meaning to health and disease
  - What constitutes disease
    - Pregnancy is a “blessing” → not in favor of contraception
  - Responses to disease
    - Cancer is fate → prevention not a priority

# Islam & Health

- Ethico-Legal System
  - Health behaviors
    - Reduced alcohol consumption → decreased health risk
  - Manner in which healthcare is received
    - Gender concordance → influence healthcare seeking patterns

# Islam & Health

- Identity
  - Post- 9/11 discrimination may influence health behaviors





JUNE 2011

REPORT

# ISPU

## MEETING THE HEALTHCARE NEEDS OF AMERICAN MUSLIMS:

Challenges and Strategies for Healthcare Settings

Aasim Padela, MD, MS, Katie Gunter, MPH, MSW, & Amal Killawi, MSW



Institute for Social Policy and Understanding

- **Series of Papers**
  - **Traditional Healing Practices Among American Muslims: Perceptions of Community Leaders in Southeast Michigan.** JIMH 2011 Jul 8 e-pub
  - **American Muslim Perceptions of Healing: Key Agents in Healing and Their Roles.** QHR [in-press]
  - **The Role of Imams in American Muslim Healthcare: Perceptions of Community Leaders in the Southeastern Michigan Muslim Community.** JRH 2011 50(2):359-364
  - **Religious Values and Healthcare Accommodations**

# What is known about Breast Cancer in American Muslim community?

# Screening Guidelines

- NCI/ACS
  - Women 40 or older get mammograms q 1-2 yrs
- CDC & USPSTF
  - Women aged 50-74 get mammograms q 1-2 yrs
- Healthy 2020 Goal
  - 81.1% of females btw 50-74 get screened
- Clinical Breast Exam
  - Annually after age 40

# Breast Ca in All-Muslim samples

- 226 Muslim women aged >40 in Cali – 2005
  - 54% had a mammogram in past 2 yrs
  - Irani Muslims had lower rates (47%)
- 39 Muslim women (only 6 >40 yrs)
  - None had a mammogram
  - Only 1 practiced breast self-exam in past yr [32 had heard of it]

# Breast CA in Ethnic Samples

- 54 South Asian women in Canada
  - 38.5% had CBE ever
- 199 South Asian women in CHS
  - 39% had a mammogram in past 2 yrs
- 570 Arab women in MI
  - 68.9% had a mammogram in past 1 yr
- 365 Arab women in MI
  - 58.1% had a mammogram in past 2 yrs

# Summary

- Breast cancer screening (mammography & CBE) is underutilized in American Muslim population
- Some sociodemographic factors (access, education) may predict higher rates
- NO EXPLICIT EXAMINATION OF RELIGIOUS FACTORS

# Do Islamic Values and Beliefs Influence Breast Cancer Screening Practices?

## Islamic Values

- Modesty
- Fatalistic Belief

## Breast Cancer Screening

- Clinical Breast Exam
- Mammography Rates

# Benefits of the Study

- Using community-based research methods we can:
  - Spread awareness among physicians and patients
  - Develop religious and community based ways to encourage breast cancer screening
  - Build relations for future academic research within the Muslim community



# Specific Aims

1. Determine breast cancer screening rates within the three major subpopulations of Muslims in Greater Chicago
  - Hypothesis: lower rates than recommended by Healthy People 2020

# Specific Aims

- Test measures of Islamic religiosity (modesty and fatalistic belief) and examine their associations with breast cancer screening
  - Hypotheses
    - Higher gender-concordance/modesty concerns → lower rates
    - Higher fatalistic beliefs → lower rates

# Outcome Measures

## Breast Cancer Screening Practices<sup>1</sup>

7. Have you ever had a clinical breast exam (a breast exam performed by a healthcare practitioner to check your lumps)?

<sub>1</sub> Yes

<sub>2</sub> No

8. Have you ever had a mammogram?

<sub>1</sub> Yes

<sub>2</sub> No

If YES → Was the mammogram performed within the last two years?

<sub>1</sub> Yes

<sub>2</sub> No

## Modesty

35. To what extent to you agree or disagree with each of the following statements:

	<b>Completely agree</b>	<b>Somewhat Agree</b>	<b>Somewhat Disagree</b>	<b>Completely disagree</b>
a. Maintaining modesty is important to me	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
b. My clothing demonstrates a commitment to Islamic modesty.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
c. I practice gender segregation when having a dinner party at home	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
d. An unmarried man and unmarried women should not be alone together	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
e. I always look for a female doctor for myself	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
f. Hospital gowns are not modest	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
g. I have delayed seeing a doctor when I know the doctor is male	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

## Religious Health Fatalism Questionnaire

36. To what extent do you agree with the following statements?

	<b>Completely agree</b>	<b>Somewhat Agree</b>	<b>Somewhat Disagree</b>	<b>Completely disagree</b>
a. If I just pray to Allah about my health, He will work it out	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
b. When I am sick, I give my burdens to Allah and let Him handle it	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
c. Allah will take care of my health because I have found favor in his sight	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
d. If Allah wants me to have better health, He will provide.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
e. I don't worry about my health because it is in Allah's hands	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
f. If I am sick, I have to wait until it is Allah's time for me to be healed	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

**Completely  
agree**

**Somewhat  
Agree**

**Somewhat  
Disagree**

**Completely  
disagree**

g. When I have a health problem,  
I pray for Allah's will to be done.

1234

h. As long as I stay focused in prayer, I  
will be healed of any sickness.

1234

i. Spiritual people should accept  
whatever Allah has meant for them

1234

k. I trust Allah, not man, to heal me.

1234

l. If a person has enough faith, healing  
will occur without doctors having to do  
anything

1234

m. Sometimes, Allah allows people to  
be sick for a reason

1234

n. If I become ill, Allah has intended that  
to happen.

1234

o. Whatever illnesses I will have, Allah  
has already planned it.

1234

p. Sometimes someone can be ill because of disobedience to Allah

\_1\_2\_3\_4

q. I don't need to improve my health because I know it is up to Allah

\_1\_2\_3\_4

r. I can control a small health issue, but only Allah can control a big health issue.

\_1\_2\_3\_4

# Independent Variables

- Sociodemographic predictors
  - Level of education, Marital status, Insurance status, US citizenship and length of US residency
- Islamic Religiosity measures (Organic)
  - Psychological Measure of Islamic Religiousness
    - Positive Religious Coping and Identification
    - Punishing Allah Reappraisal
  - Self-rating of Religiosity



# Collecting the Data

- Approach Muslim women at
  - mosques (Islamic schools)
  - community centers
  - cultural events
- Completion of a paper survey
- \$10-\$20 for participation in study

# ***Acknowledgments***

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- Ahlam Jbara
- Ifrah Magan
- YOU!!!

# Possible Next Steps

- Qualitative studies on Intervention Possibilities
  - Mosque-sermons about fatalism
  - Mosque-based mobile mammography vans

# Possible Next Steps

- Refine fatalism vs. determinism
  - FGs/interviews on teasing out construct and influencing of choices
  - In-depth study of theological basis underlying constructs → ? Mosque-sermons