

A photograph of two women standing outdoors in a grassy area with trees in the background. The woman on the left has short, curly blonde hair and is wearing a leopard print long-sleeved shirt and dark pants. The woman on the right has long, wavy blonde hair, wears glasses, and is wearing a leopard print cardigan over a black top and dark pants. Both women are smiling at the camera.

UCDAVIS
CANCER CENTER

WeCARE!

**Community-Based
Cancer Peer
Navigator Program**

A special advertising supplement to Sacramento News & Review

The History of the WeCARE! Breast Cancer Peer Navigator Program

When Susan Grenda learned she had breast cancer four years ago, the diagnosis left her overwhelmed by a maelstrom of emotions.

There was disbelief.

There was confusion.

There was frustration.

There was sadness.

And, more than anything, there was fear – fear of the malignancy inside her, fear of surgery, fear of complications, fear of the effects on her loved ones, and fear of the unknown.

Grenda's experience was by no means unique. Newly diagnosed cancer patients invariably confront an onslaught of worries and questions as they cope with the news, and those with breast cancer face additional concerns about body image, relationships and treatment choices.

A unique program at the UC Davis Cancer Center aims to make the first few months after diagnosis easier for women.

Known as the WeCARE! Community-Based Cancer Peer Navigator program, the program matches trained breast-cancer survivors with newly diagnosed women for up to six months for one-on-one support. It was made possible through a \$128,000 grant from the Safeway Foundation.

Safeway considers breast cancer one of the most significant women's health issues. The company's Breast Cancer Research and Awareness campaign raises more than \$19 million annually from customers and employees for breast-cancer research, prevention and early detection programs during October, breast cancer awareness month.

"We are committed to working together with our employees, customers and supplier partners to help find a cure for breast cancer," Karl Schroeder, president of Safeway Northern California Division, said. "But while we focus on the research, we see an opportunity to benefit from the lessons and experiences of survivors. Their success can be passed on and shared with others. We are pleased to partner with the UC Davis Cancer Center and believe this program will go a long way in helping newly diagnosed women ultimately reach the road to recovery."

The first team of peer navigators, also known as "cancer coaches," started in January

2009. Among the class of 14 recruits was Grenda, a Roseville mother of two.

"I think for most people who have not been through it, a cancer diagnosis just feels like a death sentence," Grenda said. "This program is an awesome idea because it not only gives new patients a resource but also introduces them to vibrant, positive women who have come through treatment and continue to live fulfilling lives. That is huge."

Marlene von Friederichs-Fitzwater, Ph.D., MPH, the program's founder, could not agree more. She is an assistant adjunct professor with the UC Davis School of Medicine as well as director of the Cancer Center's Outreach Research and Education Program. She is also a cancer survivor.

Recalling her own experience at the time of diagnosis, von Friederichs-Fitzwater says new patients often feel helpless, bewildered and alone – even if they have supportive family and friends.

"The idea behind our program is that having an experienced, trained cancer survivor at your side can make a world of difference as you travel this path," von Friederichs-Fitzwater said. "We don't want anyone to have to make that journey alone."

A region-wide scope

More than 1,400 new breast cancer cases are expected in the four-county Sacramento region, according to estimates from the American Cancer Society and the California Cancer Registry. Not wanting to reserve the benefit of peer navigation exclusively for patients at UC Davis, von Friederichs-Fitzwater took pains to give the program a wide scope.

Toward that end, the WeCARE! program is offered free to any cancer center or clinic and additional sites are signing on every day to add the program to their patient and



survivor services. All training, materials and support for other sites is free. A state-wide conference will be held in 2012 to bring all the peer navigators and site project coordinators together for additional learning and sharing. A WeCARE! Connections electronic newsletter will be available in January 2012. Tahoe Forest Cancer Center in Truckee and Fremont-Rideout Cancer Center in Marysville, part of the UC Davis Cancer Care Network, came on board in 2010 along with Mercy San Juan and Kaiser Permanente, South Sacramento with a commitment to providing first-rate, community-based cancer care.

"For some newly diagnosed patients, the idea of waiting a couple weeks for that first appointment can feel like forever. It's like this alien monster inside of you, and you want it out now."

MARLENE VON FRIEDERICHS-FITZWATER

WHAT TO DO IF YOU ARE A NEWLY DIAGNOSED BREAST CANCER PATIENT

Are you a newly diagnosed breast cancer patient? Do you feel anxious or confused about treatment options or need help coping with the disease? The WeCARE! Community-Based Cancer Peer Navigator program can help. We will match you with a trained breast cancer survivor who will serve as your "cancer coach" and help link you to resources, support and mentor you on effective problem-solving and coping strategies. The program is free and available to anyone in the community newly diagnosed with breast cancer.

There's no need to travel through the cancer experience alone or without a well-qualified guide. Contact Janelle (Elle) Mefford at Janelle.mefford@ucdmc.ucdavis.edu or 916-734-5786 for more information and to be assigned to a WeCARE! Community-Based Cancer Peer Navigator.



New Friends Find New Normal

BY ANNA BARELA

Linda Mann and Cecily Jean (CJ) Kane owe their friendship to UC Davis Medical Center's WeCARE! Community-Based Peer Navigator program. CJ survived breast cancer eight years ago; Linda is going through her second round of treatments for the disease. Paired up through WeCARE!, CJ guides Linda through treatment as the two discover they have a lot in common and enjoy spending time together.

During CJ's cancer treatments, a hospital nurse coached her through. CJ appreciated practical advice for coping, like "bring lipstick to the hospital." The nurse also bought her a marsupial pouch to hold post-surgery drains without ruining her shirt with safety pins.

"She was a wonderful resource," CJ said. "I thought, wouldn't that be wonderful if I could, somehow down the road, give back?"

Years later, CJ saw a newspaper ad seeking mentors for WeCARE! She signed up, completed training, and was paired with Linda. Six months before retiring from her post as assistant superintendent in a Monterey school district, Linda's

career to-do list had been trumped by radiation, chemotherapy and surgery. Her retirement plans to relocate to Sacramento with her sister were expedited, and her focus shifted completely.

"In some ways it made things easier," Linda recalled. "I had been challenged to imagine what I would do to fill my time after I retired. I had a total shift in focus. It became less on filling my schedule with things and more on appreciating every day — appreciating feeling good on the days that I felt good, and really relaxing and enjoying life."

Life's new joys include Linda's meetings with CJ. They meet almost weekly over coffee or lunch with frequent calls in between. CJ applauds Linda for staying active and is happy to plan around Linda's frequent travel schedule. Linda is leading a normal life, but — as CJ and Linda both attest — after breast cancer there is a new normal.

"Any major life change creates a new normal," CJ said. "You learn to adapt. You learn what's there for you and what you can give back to life and your community."

ARE YOU ELIGIBLE? How to become a peer navigator

Any breast cancer survivor who completed her treatments at least two years ago, has good interpersonal communication skills, is available to complete the necessary training and to work with a breast-cancer patient as needed for up to six months is eligible to be a peer navigator. The initial day-long training session covers the basic information needed to be a peer navigator and additional advanced trainings are available throughout the year.

Being a successful navigator or "cancer coach," however, takes more.

"Peer navigating is a particular kind of support with COPE at its core," Janelle Mefford, project coordinator for the WeCARE! Community-Based Cancer Peer Navigator program, said.

COPE — the model addressed during training — stands for Creativity, Optimism, Planning and Expert information. It is a set of interaction tools all navigators are expected to learn and use in coaching and empowering newly diagnosed patients. It is the difference between being a good friend and being a good navigator.

"Navigating is more than being someone's buddy," she said. "It's an orderly process with the specific goals of helping someone work through obstacles and improve their problem-solving and coping skills."

Besides understanding and using COPE, Mefford said the best navigators are those who were strongly proactive during their own treatment. They also tend to come from one of two camps: those who had a lot of support and want to make sure others do as well and those who had no support and want to make sure no one goes through the same experience.

"Most of all, it's very important to be a good listener," she added. "The training will give navigators everything else it takes to provide special support to a cancer patient."

Anyone interested in becoming a peer navigator can begin the process by contacting Patti Robinson at (916) 734-0823 or patricia.robinson@ucdmc.ucdavis.edu.

A Cancer Patient Finds Hope through Cancer Survivor

BY ALEXANDRA GREENE

Veronica Java's life as a writer and environmental education specialist quickly unraveled after she was diagnosed with breast cancer at the age of 52. After two surgeries, 16 doses of chemotherapy and 30 radiation sessions, she appreciated the important role UC Davis' WeCARE! Community-Based Cancer Peer Navigator program played in her cancer journey. Last year the program introduced Sally, a cancer survivor, to Veronica (aka Roni), a scared and overwhelmed cancer patient. Since then, Sally has given Roni unconditional emotional, physical and psychological support.

"At a time in your life when cancer absolutely robs you of every feeling of normalcy and all you want is your normal life back, having a peer navigator lets you know you're not crazy," Roni said.

Roni had no idea how quickly her life would change when she visited her doctor in June 2010 for a mammogram. She returned for a second mammogram afterward and asked the technician why she needed a follow-up visit. The technician said the doctor wanted to take a second look at a certain area and pointed to a spot on her body.

"I reached up and touched my right armpit. I pressed around and there it was – a little round ball that felt like a marble or grape. My jaw hit the floor," Roni said.

Roni had no idea how quickly her life would change when she visited her doctor in June 2010 for a mammogram.

A month later she received a call from her gynecologist who said, "Roni, I'm so sorry. It's cancer. Your life is going to change a lot from this moment forward." She was diagnosed with cancer type 2A, which is an early and treatable, yet aggressive form of the disease.

Soon after her diagnosis, Roni had two surgeries to determine if her lymph nodes were cancerous. Then she participated in four studies. During the clinical trial she experienced 43 out of 85 possible side effects, which included hair loss, a blood clot and discolored skin and nails.

"Being a cancer patient, the first thing I lost was feeling like a woman. Pretty soon I didn't feel like a person anymore. Just a patient."

She received some physical and emotional support from her family, including her 22-year-old daughter. However, sometimes she was hesitant to share her feelings with them and felt alone with more questions than answers.

Before she began the clinical trial that required six months of chemotherapy, Sally, a cancer coach from the UC Davis peer navigator program, contacted her to offer support. Roni did not know much about the program at first, but she quickly discovered how valuable and unique it is. According to Roni, having someone who walked that path before you is amazing because it helps take the fear down.

At one point Roni struggled with depression, and Sally provided comfort when no one else understood her. She experienced the hardest time emotionally halfway through chemotherapy, but she didn't want to confide in family members to avoid worrying them. Sally referred Roni to a cancer hotline where she shared her feelings with another cancer survivor.

Afterward, Roni told Sally how much she appreciated her help and Sally replied, "You don't ever have to worry about burdening me or trying to spare my feelings. I've been there. When you don't want to tell your mom or friends what you're feeling remember you can always tell me." Sally was the best listener and Roni said her troubles never scared Sally off.

Another unforgettable time was when Sally helped her after her chemotherapy ended in May 2011. Doctors encouraged her to undergo radiation treatment, but fear initially made her hesitant. Sally accompanied her to a radiation department and told doctors Roni had a lot of questions and to answer them honestly.

"When I ran out of bravery or strength, Sally would help me come up with questions. Sally said 'stick up for yourself' and she would help me be strong," Roni said.

Usually peer navigators work with patients for up to six months, but Sally has stayed connected to Roni since last fall. "On my last day of chemo Sally showed up at the lab with an arm full of flowers for me. On my last radiation she showed up at the lab with a rose bush to symbolize growth, hope and future."

Roni recently finished 30 sessions of radiation treatment and started a five-year course of medication, but Sally's guidance has helped her feel strong enough to continue the



cancer journey. Their relationship is more than just a cancer coach assigned to a cancer patient. It has become a long-lasting friendship between two women who had cancer and survived. Roni was fortunate to have support from family and friends. However, many times she only wanted Sally by her side because she understood and lived through it.

Roni has considered becoming a peer navigator like Sally to make a difference in other people's lives. She recognizes the importance of having such a resourceful person by your side when you have cancer because it decreases confusion, sadness and anxiety.

"If the navigator program doesn't find you, you need to find them right away because you need somebody in your corner. Having someone who has walked that walk before you is more valuable than all the riches in the world. Let friends and family help you, but don't turn down the opportunity to have a peer navigator."

Roni vividly remembers Sally telling her something she hopes every person with cancer remembers. "I personally made a choice that I am not cancer. Cancer does not sum up who I am. It's not my identity. If a person chooses to feel like a victim, then that will be their reality."

Program Trains Cancer Survivors to be Cancer Coaches

BY ALEXANDRA GREENE

Karen Dunn vividly remembers the time she went to a hospital to have a scan performed to determine whether her breast cancer had spread. As she sat in the hallway, she felt scared but most of all alone.

Now the 62-year-old cancer survivor volunteers as a “cancer coach” in the UC Davis Cancer Center’s WeCARE! Community-Based Cancer Peer Navigator program. This is her way to give back to others so they don’t go through such a traumatic experience without anyone to guide and support them.

“I offer hope,” Karen said. “When you tell someone ‘I’m a 26-year survivor’ they go ‘I can do this’ and there’s hope.”

Her breast cancer survival story began after the birth of her second child when she was 36-years-old. While breastfeeding, she noticed her newborn son would only drink milk from her right breast. She discovered a small lump on her left breast. Her doctor said it was an infection in her milk duct. However, when antibiotics didn’t work, she visited a gynecologist who diagnosed the mystery lump as a cyst. After a failed attempt to aspirate it, she met with a surgeon to surgically remove it.

At this point, Karen had visited three medical

cancer experience.

Karen said it would have been less traumatic if she would have had a peer navigator to help with her cancer battle because she felt so alone.

“I was probably too out of it to ask for more help. I felt like I was in a big blur,” Karen said.

She also acknowledges she was encouraged from a close relative to keep her feelings private and not tell anyone she had cancer.

Two years ago was when Karen first learned how to make a difference in other cancer patients’ lives and provide them with the emotional support she didn’t have. Nearing retirement, she read a newspaper article on the UC Davis peer navigator program.

“I thought I’m going to have time to do some things for other people and give back,” Karen said. “I remembered I didn’t necessarily have that [support], so I wanted to make sure someone wouldn’t be in the same situation I was.”

She went through a series of steps to become a peer navigator and after completing the required health screening and training, Karen was matched with breast cancer patients for usually up to six months at a time. She has provided one-on-one support to five patients and looks forward to guiding more in the

“When you tell someone ‘I’m a 26-year survivor’ they go ‘I can do this’ and there’s hope.”

KAREN DUNN

professionals, but she still had no idea what was really inside her body. After surgery, the surgeon told Karen that hidden behind the cyst was a ring of cancer cells, and she had to determine her next course of action soon. Ultimately, she had her entire left breast removed because of the size and location of the cancer.

“I unfortunately had to go right back to work at five weeks after surgery, and I was like a zombie that first week back,” Karen said.

Six months later she had reconstructive surgery. Today, almost 30 years later, her cancer has not returned, but she will never forget her

future as a coach, mentor and support system, so they don’t feel the loneliness she endured nearly three decades ago.

“I will continue with this program until I can’t do it anymore. It’s probably one of the most meaningful things I’ve done in my life.”

The required training uses a cognitive/behavioral model that improves problem-solving and coping skills, so peer navigators are able to empower the women they are assigned to in very meaningful ways. Some women desire more support than others, but Karen never hesitates to be the kind of friend they



need and give them her time and energy.

“It depends on what they want out of the relationship,” she said. “And I’m very willing to give them more than they may want.”

She worked with one woman for 10 months and formed a close relationship with her. The patient needed greater emotional support because she underwent longer chemotherapy sessions, had an unavailable family and struggled with poverty. Karen went with the patient to her first doctor’s appointment, seven different chemotherapy infusion sessions and met her after surgery at the hospital – providing snacks, informational pamphlets, hats, an attentive ear and reassurance that she was not alone in this cancer journey.

She was a reference when the patient applied for housing and helped her pack when she moved. When the patient called, Karen listened and let her talk about her problems or worries, coaching her in ways to improve her problem-solving and coping skills.

“I’ve been more receptive to her than other people because she needed more,” Karen said.

One of the most memorable moments Karen had is when she surprised the patient with a sandwich and cookies after her last chemotherapy session.

“It’s a milestone to get through all those chemo sessions.”

Not only is Karen helping this patient stay strong, but she said she feels more satisfied with herself.

“What I get out of it is a good feeling inside that I’m doing something to help people who need it.”

Karen advises others who have cancer to talk about their feelings, rather than keeping them inside. They shouldn’t listen to other people who tell them it’s not worth talking about because a support system is vital. A program that provides one-on-one support from someone who has experienced a similar journey to the patient’s situation is a unique and effective way to address loneliness, fear, anxiety and confusion.

“The best thing I can do is be there for somebody else and be the longevity that they can see so they can go ‘This will be me. I’ll be all right.’”

Richard Bold:

Peer Navigators Provide Personal Touch

BY ANNA BARELA

For 14 years, Richard Bold, M.D., has served as Professor and Chief Medical Director of Cancer Center Clinics at UC Davis Cancer Center's division of Surgical Oncology. Every day, women with breast cancer come through his office and he either delivers the diagnosis or is the first doctor to treat them. For Bold, the WeCARE! Community-Based Cancer Peer Navigator program helps facilitate the treatment process as well as helps his patients cope emotionally.

Breast cancer cases account for about 60 percent of Bold's practice. He can provide extensive medical information about all the different parts of treatment and is up front with his patients that treatments will take over their lives temporarily. But he looks to WeCARE! for personalized patient support.

Bold said, "I've never had breast cancer. The peer navigator program offers that personal touch."

He compares the difficulty of getting through breast cancer to being thrown into freezing water during Navy Seal training and being told to figure out how to survive. Newly-diagnosed patients are anxious with questions they may not feel comfortable asking their surgeon. They have fears that are often based on experiences of relatives treated before today's medical advancements. Although every woman's breast cancer treatment will be unique, having a navigator who has been through it can help alleviate the fear.

According to Bold, "Treatment of cancer is really scary – it's an unknown. This is a way for that patient to get past that unknown because there is somebody who has done it right next to them and is willing to answer those questions. We're going to give them medical information; they're going to help them translate and share common experiences."

Because patients have an alternate source for questions and reassurance, the program facilitates and even expedites treatment. If a patient forgets to ask a particular question during their doctor's appointment or is nervous about an upcoming treatment, they may postpone or reschedule the treatment. With a navigator, their questions and fears are resolved between visits and the patient is comfortable proceeding.

"It reduces a lot of the questions, a lot of the anxiety," Bold said. "It allows them to get to treatment, be less anxious, stay on time and get it all delivered."

Throughout treatment, Bold sees peer navigators as complementary to support groups and other resources for cancer patients. Support groups are mostly current patients, while peer navigators are trained and have come through to the other side of treatment. Also, while group settings can be beneficial for sharing, peer navigation provides one-on-one support where patients can feel comfortable airing their most private concerns.

Finding navigators with a heart to help patients is critical to WeCARE! Bold actively recruits navigators, carefully selecting former patients who show potential and interest. He looks for survivors several years out of treatment who wish they would have had a program like this when they were patients or simply desire to make a difference in cancer patients' lives.

"They do it out of the goodness of their heart," Bold said.

Bold hopes the WeCARE program can continue its expansion beyond UC Davis Medical Center. He knows many patients depend on the program and is grateful to the Safeway Foundation for helping make it financially possible. He also knows more funds and more navigators are needed to ensure sustainability.

"I wish we could do it for everybody. I wish we had money to do it for everybody and I wish we had enough trained navigators to do it for everybody. We're working on all of those."

Scott Christensen:

DOCTORS & PATIENTS APPRECIATE WE CARE!

BY ANNA BARELA

Scott Christensen, M.D. – 20-year Professor of Medicine specializing in medical oncology at UC Davis Cancer Center – treats breast cancer patients in the months and years following surgery. He touts the benefits of the WeCARE! Community-Based Breast Cancer Peer Navigator program.

"The WeCARE! program is really important in providing peer support for patients who are newly diagnosed with breast cancer," said Christensen. "While every individual's journey is unique, there is a benefit that many have expressed in the ability to be connected to somebody who has already had a journey of their own. I think there's a lot of power in that."

Christensen consistently hears positive feedback from patients participating in the program. Patients like the ability to clarify with their navigators which questions to ask during doctor visits and appreciate the reassurance from navigators that numerous questions are normal. They walk into their appointments with less anxiety and more focused questions, making the time spent with their doctor more valuable.

According to Christensen, "It helps people to hone where their major concerns are so they actually get the information they need to make decisions."

Christensen does whatever he can to support navigators who volunteer with WeCARE! Recently, he gave a presentation to a group of navigators, answering questions and familiarizing them with his role. He appreciates their time and effort.

Christensen said, "This is a very special gift for people to give a commitment of their time and themselves in support of another person. I can't say enough good things about the people who choose to do this work."



Training of WeCARE! Breast Cancer Peer Navigators

Emotional care of the cancer patient is not well understood and is often neglected in cancer care systems. In addition, there is a high cost to patients and health care systems when such care is neglected.

"We know that higher levels of distress are often associated with more time needed during doctor visits and a greater number of calls to the clinic, frustrating both doctors and patients," according to Fred J. Myers, MD, MACP, Executive Associate Dean & Professor of Medicine, UC Davis, School of Medicine

These patients also visit emergency rooms more often to confront symptoms that can be made worse by heightened levels of distress. This distress is often not addressed and approximately 30 to 50 percent of those living post primary cancer treatment continue to experience prolonged distress. While it is unclear why some cancer patients experience better emotional adjustment than others, we do know that a number of risk and resilience factors can influence adjustment among cancer patients and survivors, including social support, good coping skills, optimism and effective problem-solving skills.

"Research has shown us that poor applied problem-solving skills are linked to prolonged distress, quality of life and even implicated in cancer progression and poor outcomes," Marlene M. von Friederichs, Ph.D., MPH, assistant professor, hematology/oncology, UC Davis School of Medicine and director of the UC Davis Cancer Center Outreach Research & Education program, said. She directs the WeCARE! Community-Based Cancer Peer Navigator program and developed the curriculum for the required training.

According to more than 130 studies, an important individual difference that influences problem-solving behaviors is a person's problem-solving style or appraisal. Problem-solving style refers to

a person's self-appraisal of their problem-solving abilities and attitudes (i.e. their self-evaluated capacity to resolve problems). The potential power of one's problem solving style is nicely reflected in Mahatma Gandhi's observation, "If I have the belief that I can do it, I shall surely acquire the capacity to do it even if I may not have it at the beginning."

After reviewing a number of cognitive and behavioral models of applied problem solving, von Friederichs-Fitzwater selected the one that seemed most relevant and useful to use with

Peer navigators can truly be "cancer coaches" and help patients improve their coping and problem solving skills, while also providing emotional support, excellent resources and hope.

cancer patients and survivors: the COPE model. COPE is an acronym for Creativity, Optimism, Planning and Expert information and the model has been successfully used with cancer caregivers, cancer patients and patients of other chronic illnesses. COPE starts with helping individuals view their challenges and problems from a more creative perspective.

"It's the kind of 'out of the box' thinking that leads to more creative solutions," von Friederichs-Fitzwater said. "If we can step back from a challenge or problem and 'reframe' it in a different light, new solutions become more apparent."

The model includes optimism as a key component to help someone diagnosed with cancer to have hope, even on a minute-by-minute or daily basis.

"Our focus can then move from one of despair to one of making the best of this present time," she added.

When compared with taking a trip to a foreign land with a strange new culture and language, the diagnosis of cancer requires a plan and a travel guide – analogies for the cancer experience where the cancer survivor, trained as a peer navigator or "travel guide" can make the "trip" less stressful and more pleasant. The planning component of the COPE model also empowers the patient and puts at least some control back in her hands. Plans must be flexible and subject to change, but even a one-day plan can reduce anxiety.

The expert information factor is used by the peer navigator to help the patient know where to go to get accurate, relevant information and to formulate questions to ask their physician. As a cancer survivor, the peer navigator has a better sense of the kinds of questions to ask than an overwhelmed, newly diagnosed cancer patient. As one patient commented, "I don't even know what I don't know about this disease!"

Once trained in the COPE model, the peer navigators can truly be "cancer coaches" and help patients improve their coping and problem solving skills, while also providing emotional support, excellent resources and hope. Additional advanced training is offered in the COPE model beyond the initial required training of all peer navigators as well as classes on clinical trials, doctor/patient communication and Breast Cancer 101. *All training and materials are free and interested breast cancer survivors can contact Patti Robinson at patricia.robinson@ucdmc.ucdavis.edu or 916-734-0823 for information on upcoming training dates.*

CURRENT WECARE! COMMUNITY-BASED CANCER PEER NAVIGATOR PROGRAM PARTNERS

South Sacramento Kaiser Permanente

Claudia DeYoung, M.D.,
Breast Health Leader, 916-688-6597
or Claudia.A.Deyoung@kp.org

Tahoe Forest Cancer Center Truckee, CA

Ann Ajari, M.S.W., 530-582-6450
or aaajari@fhd.com

Fremont-Rideout Cancer Center Marysville, CA

Contact Nancy Kirkpatrick at
nkirkpatrick@frhg.org

UC Davis Cancer Center

WeCARE! Breast Cancer Project Coordinator,
916-734-5786 or
janelle.mefford@ucdmc.ucdavis.edu

Mercy San Juan Medical Center Oncology Services

Ann Chrisler, RN, Oncology Nurse Navigator,
Chrisler.Ann@chw.edu or 916-962-8892 or
Rachel McConachie, RN, Oncology Nurse
Navigator, Rachel.McConachie@chw.edu or
916-962-8892.

The WeCARE! Community-Based Cancer Peer Navigator program is partially funded by the Safeway Foundation, which seeks to improve quality of life by supporting charitable programs in the communities Safeway serves. The foundation funds causes such as cancer research, education, food banks and programs focused on assisting people with disabilities.

A Susan G. Komen, Sacramento Valley Affiliate grant received in mid-2011 will help expand the WeCARE! breast cancer program into four rural counties: Plumas, Sierra, Nevada and Butte. Hospitals, clinics and other healthcare providers are invited to inquire about bringing the program to their communities.

To become a WeCARE! Community-Based Cancer Peer Navigator partner site, please contact Marlene M. von Friederichs-Fitzwater, Ph.D., M.P.H., Principal Investigator & Program Director, 916-734-8810 or marlene.vonfriederichs-fitzwater@ucdmc.ucdavis.edu



Safeway Foundation Supports WeCARE!

The WeCARE! Community-Based Cancer Peer Navigator program launched in 2009 with a grant from the Safeway Foundation, Inc. and with their continued support, the program has expanded throughout the greater Sacramento area and beyond.

"We are so pleased with the community's acceptance and commitment to the Program," said Marlene M. von Friederichs-Fitzwater, Ph.D., MPH. "We now have partnering sites offering the program at Kaiser South Sacramento and Mercy San Juan with Mercy General and the Mercy Cancer Institute coming on board later this fall."

The program will be offered at Memorial Medical Center in Modesto later this year and is already in operation at Tahoe Forest Cancer Center in Truckee and Fremont-Rideout Cancer Center in Marysville.

"Our goal is to have the program widely available throughout California and to create a WeCARE! Breast Cancer Peer Navigator Network with a quarterly newsletter and annual symposium where survivor peer navigators and project coordinators can share information and learn from one another," von Friederichs-Fitzwater added.

Karl Schroeder, president, Northern California Division of Safeway said, "Through the generosity of our employees and customers, Safeway is able to make a significant impact by funding important programs such as WeCARE! that focuses on patient care and raising awareness about breast cancer."

The WeCARE! program offers a way for breast cancer survivors to "give back" in a meaningful way and for newly diagnosed breast cancer patients to have a trained guide be at their sides during the breast cancer experience. A win-win for both women!

"We are so grateful for the support and encouragement that the Safeway Foundation provides to us and for the opportunity to be in the Safeway stores in our region during October (Breast Cancer Awareness Month) to share information about the WeCARE! program," von Friederichs-Fitzwater said.

For more information on becoming a partner in the WeCARE! program, please contact Marlene von Friederichs-Fitzwater at marlene.vonfriederichs-fitzwater@ucdmc.ucdavis.edu or contact Janelle Mefford at Janelle.mefford@ucdmc.ucdavis.edu or phone 916-734-5786 for information on how to become a breast cancer peer navigator.

