

Program Spotlight: Tu Historia Cuenta

Program Overview

Tu Historia Cuenta is a research initiative aimed at increasing genetic risk awareness and breast cancer testing among Spanish-speaking Latinas in California. In its community-based approach, promotores (community health workers) led virtual educational sessions that reached approximately 1,800 Latina women.

The program was also tested in federally qualified health centers (FQHCs), though challenges with clinical coordination limited its effectiveness in that setting. Currently, the program is shifting to a hybrid model that combines community outreach with clinic-based care that will be implemented from September 2025-August 2027.



During the program's virtual, one-hour educational sessions, promotores provided information about genetic risk and guide participants through a family history survey to assess cancer risk.

All materials were adapted in Spanish - rather than translated - and co-created with promotores to ensure they were clear and culturally appropriate.

Participants identified as high risk were offered support through the genetic testing process, if they chose.

Early results showed strong engagement with education and outreach, and the program continues to refine its approach to follow-up testing and care.

Implementation Approaches



Community-based Model

The community-based model utilized promotores to deliver virtual education sessions and follow-up with a family history survey. Tu Historia Cuenta provided free genetic testing for those identified as high risk.



Clinic-based Model

The clinic-based model was implemented in two FQHCs. However, clinics faced barriers, such as competing priorities, a lack of incentives tied to quality improvement (QI) metrics, and complex workflows, making it difficult for patients to complete genetic testing.



Hybrid Model

The proposed hybrid model combines community outreach with clinic-based care. Promotores will identify high-risk individuals through education and outreach and help connect them to local clinics for testing and follow-up, with free testing available as a backup option.

Family History Assessment



In the community- and clinic-based models, Tu Historia Cuenta utilized the **Pedigree Assessment Tool** to identify high-risk women. However, due to challenges with accurate self-reporting, promotores began assisting with the survey.

The team is now exploring switching to the **Seven-question Family History Screening (FHS-7)** tool, which was preferred by community-based organizations (CBOs) in a **2023 study** focused on risk assessment and genetic testing for hereditary breast and ovarian cancer in Latina women.

Key Partners

Several organizations have supported the program throughout its development and implementation.

Visión y compromiso

Provided training and supervision for promotores.

Promoters for Better Health

Assisted with community outreach efforts.

The Latino Cancer Institute

Served as a community partner and helped disseminate program updates.

Lessons Learned

- 1 **Not every person wants genetic testing.** Even when all logistical barriers are removed, not all individuals will pursue genetic testing. Some people prefer not to know their risk.
- 2 **Promotores can be empowered to teach about genetic risk.** With scripted materials and video training, promotores felt empowered and confident in their ability to educate their communities.
- 3 **Education must adapt to virtual platforms.** The transition to virtual sessions during the COVID-19 pandemic highlighted the importance of technology access and adaptability.
- 4 **Clinics are overwhelmed and under-resourced.** Clinics face staffing shortages and competing demands, making it difficult for providers to participate in continuing education related to breast cancer risk assessment.
- 5 **Risk assessment and genetic testing are not required for FQHCs.** FQHCs are not required to report on risk assessment or genetic testing, making it more challenging to prioritize.



Next Steps

The program will continue testing its hybrid model, which combines community-based outreach with navigation to clinical settings for testing.

Promotores remain central to the model, as they are often more effective than clinics in initiating conversations and building trust.

However, long-term program sustainability remains uncertain unless funding continues or clinics adopt new incentives for preventive care.