Implementation for Community Programs

Implementation for Community Programs

This chapter contains the tools and details to help you implement your well-planned CRC screening and prevention program. Program implementation is when you put your ideas, planning and hard work into action. This chapter is divided into two sections based on the readiness assessment levels that are relevant to implementing community-based programs. That is, the tools and information in this chapter are intended for programs that are not based in or work closely with a clinic or CRC screening provider. You may use all the tools in either section based on your program's level of readiness or you may pull a tool from any section that best fits your program.

This chapter includes methods and tools for working with community partners, planning events, launching a public awareness campaign, and conducting individual-level counseling for patients. Read through the entire chapter to get an idea of different types of programs. Use the results from your readiness assessment to determine which program components are appropriate and useful. For example, if the results of the readiness assessment show that increasing public awareness of CRC is still needed then level one program methods and activities will help you reach your program objectives.

The methods and tools in this chapter are intended to be used to promote prevention, risk reduction and screening information described in chapters two and three. Ideally, programs will focus on both increasing screening and reducing risk factors among community members. If your community does not yet have access to a clinic or your program is unable to work with a clinic, risk reduction and prevention may be the center of your program.

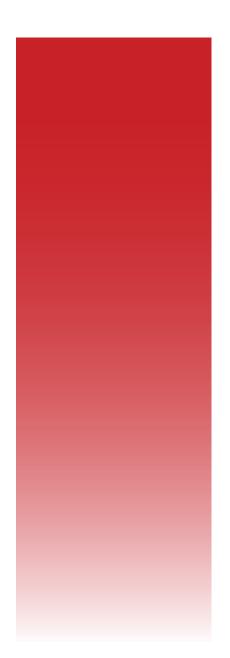


"They said,
'No, they don't
need that. They
don't need that
prevention and
education. What
they need is
research.' Yes, we
do, but we also
need this other
track alongside of it
to help us."

-Julia Davis-Wheeler,

Tribal Council, Nez Perce Tribe

Courtesy: 2002 President's Cancer Panel



Level One- Community Awareness

Increasing community awareness is a good place to start if your program is not yet working with health care providers or clinics. Although working with clinics will make a well-rounded program, community-based efforts alone can impact CRC awareness. Level one implementation components include materials and ideas for community education, modifiable risk reduction, media campaigns, and event planning.

Get to Know Your Clinic

One of the first steps to implementing your CRC screening and prevention program is connecting with the clinic. It is important to understand what screening services they offer and what they are already doing to address CRC. If you do not already work with (or for) the clinic you should set up a preliminary meeting. This meeting can be the first step in establishing a partnership and will give you an idea of what screening services are available. Below is a list of questions to ask in the initial meeting:

- What CRC screening services and tests do you offer? If you do not offer colonoscopies, where do you refer patients for colonoscopies?
 - When are services available (e.g., clinic hours)?
 - What are the GPRA screening rates in our community?
 - Do you talk to patients about CRC screening? If so, what do you say to them?
 - Do you reach out to tribal members over the age of 50 and remind them to be screened? If so, what are you doing now to remind them?
 - We are building a CRC screening and prevention education program. Do you have any suggestions?
 - Can we continue to work together to increase screening rates?
 - What are the best ways for us to continue to work together? What are our next steps in building this partnership?

Remember the main purpose of connecting with the clinic is to build a partnership to increase screening and survival rates for CRC. The more you can work with your clinic, the more effective the community portion of the program can be because patients are more likely to follow through with screening if they know exactly where to go and what to expect.

Collaboration with Similar Programs

The next step to establish an effective program is to partner with similar programs in your community. If you do not know or do not work with the tobacco coordinator, diabetes coordinator, or any other healthy lifestyle leader, you should set up a meeting. Building partnerships with other coordinators may give you access to their program participants, health events, and other health promotion tools. If your program focuses on modifiable risk reduction (described in chapter two), you can team up with other coordinators to have a more efficient approach.

The larger you can build your partnership network, the more awareness and acceptance there will be for your CRC prevention program. Below is a list of potential people to reach out to and how they can support your program:

Who	How they support your program		
Traditional healers (e.g., Medicine man or woman)	Access or encourage clients who may be uncertain of Western or conventional medicine		
Community groups (e.g., cancer survivors group, elders group, or diabetes groups)	'		
Tobacco, diabetes, or other health program coordinators	Support and coordinate risk reduction programming (e.g., exercise and nutrition classes) and refer clients to your program		
Cancer coalition, health board members, health committee members	Support community acceptance of your program by spreading the word and help coordinate community events.		

Once you've built partnerships in the community, program implementation can begin. Many community-based programs focus on risk reduction (as described in chapter two) because risk reduction education does not depend on coordination with the clinic. Furthermore, programs that focus on increasing physical activity and healthy eating habits reduce the risk for multiple chronic diseases including CRC, type two diabetes and cardiovascular diseases.

Below are methods for increasing CRC awareness and community education ideas.

Media Campaigns

Media campaigns are one of the most common methods used to promote community health. Community relevant campaigns are a non-invasive way for information to reach a large number of people. Media includes brochures, TV commercials, posters, tribal newsletters, posters at clinics,

Who	How they support your program		
Counselors Spiritual Leaders	Your program can refer clients to counselors or spiritual leaders for emotional support, including helping patient overcome fear of screening or dealing with cancer diagnosis.		
Financial assistance programs	It is important to know of any program that may be able to help patients with the financial burden of screenings.		
Transportation organizations (if the clinic is not nearby)	You may need to help clients get to screening or treatment services. Connecting with a transportation service (e.g., bus company) may help clients follow through with screening and treatment.		

or any other form of communication. 1Media campaigns, especially when combined with individual reminders, can lead to an increase in cancer screening behavior. ²In the Pacific Northwest, the Oregon Health Authority (in contract with Metropolitan Group) and NPAIHB's The Cancer You Can Prevent campaign improved CRC screening rates in Clatsop County, OR.

The Oregon Health Authority (in contract with Metropolitan Group) and NPAIHB's complete Cancer You Can Prevent media toolkit is included as Appendix B. Your program can use any of the tools and materials in the Media Toolkit.

This toolkit includes a number of media materials and examples. Your program may use the provided materials as they are or use the ideas and messages present here to create your own materials. Beyond the suggestions below, think about how and where messages best reach people in your community. The table below is a list of media tools and ideas for how to use each one. Examples and modifiable tools are listed next to each component and are found in the toolkit

pocket of this chapter.

Media campaigns can be a simple way to increase public awareness. In addition to ongoing media campaigns (e.g., posters, PSA, and brochures), media can be used to promote community events.

Media Component	Ideas for how or where to use Tribal media tools	Tool reference number
Brochures	Have available at events and community sites	6.1.1 -6.1.4
Fact Sheets	Make sure they are relevant to your communities	2.1-2.9; 6.1.5- 6.1.7
Flyers	 Have available at events and community sites. Post in community sites (e.g., message boards or clinics) Give out to community members. Give to workplaces to share with employees. Publicize community events (e.g., health fair or other events people can learn about CRC). 	6.1.8- 6.1.11; 6.2.4 (Event planning)
Posters	 Post in community sites, workplaces, or clinics Publicize community events 	
Press release	Send to Tribal newspaper for publicationEvent program publications	Appendix B, pgs. 9-11
Newspaper article or advertisement	 Submit to your local magazine, newsletter, or newspaper Give to local businesses to send out to employees in workplace newsletters or emails 	Appendix B, pgs. 12-13; 6.1.12 & 6.1.13
Mail outs (e.g., postcards, cards)	Send out to all community members who are 50 or older	6.1.14- 6.17
Emails	 Give sample emails to community leaders, workplace supervisors, health care providers and others to send out to their contacts Email your contacts about CRC, possible events, and talking points for CRC 	6.1.18 - 6.1.21
Radio or TV Public Service Announcements (PSA)	Public Service Announcements Contact your local radio station to see if they will read your PSA script Ask the clinic to play your PSA in the waiting room	

Media Component	Ideas for how or where to use Tribal media tools	Tool reference number
Speakers at presentations or community events with talking points	 Identify spokespeople Ask them to speak at a community event (e.g., health fair, powwow or CRC education event) 	
Spokesperson (e.g., a cancer survivor) Stories	 Use stories or quotes for newsletters, posters or other materials Ask people to share their stories with others in the community either at events or on their own 	Appendix B, pgs. 3-6
CRC Readers' Theater Script (a play or stage reading script) ³	 Use "What's the big deal?" theater script or create your own community play or readers' theater Make a stage production with the CRC Readers theater script Invite community members to participate in a group reading event Read the script aloud on a radio show 	Appendix C
Websites or social media (e.g., Facebook or Twitter)	 Consider developing a website with CRC screening information including screening locations, options, and costs Share event information or overall CRC prevention tips online Create a video with a spokesperson who will tell their CRC story and post it on Youtube or Facebook Create a safe place for people to have online discussion about CRC, screening, diagnosis, and treatment Use a readers' theater script to create a short movie to post online Promote community health events 	6.1.22
Talking points for health talks	Present to a group of elders, potential partners (e.g., radio broadcaster) or to a community group Talk to people you know about CRC prevention basics.	
Presentation Slides	Community	
Games or interactive presentation materials Use after any presentation to engage and quiz the community on CRC facts		6.1.23, 6.1.24

Community Education and Event Planning

Community education can vary from one-time events to ongoing health talks or a series of risk reduction workshops (see chapter three). When planning educational event(s) be sure to consider costs, materials, location, and what is possible in your community.

With the tools provided, consider community education options listed below to increase public awareness of CRC:

- Host an informational table at a highly visible location
- Host a table at a health fair
- Plan a CRC screening and prevention informational session
- Plan a series of workshops on CRC education and awareness
- Work with the Diabetes coordinator or other health, nutrition, or fitness people to coordinate health classes or events (e.g., group walking days, cooking classes, or fitness classes)
- Host a small community informational meeting with people you know to help you spread the word
- Give a presentation at a tribal council or health board meeting
- Ask a CRC survivor, family member of CRC patient, or someone who has been screened to share his or her story
- Host a large CRC event day with multiple tables and resources including:
 - o Health care providers
 - o Risk reduction education
 - o Screening information
 - o Kiki (a giant inflatable colon available for events)
 - o Storytellers
 - o Healthy lifestyle presentation

For examples go to youtube:

http://www. youtube.com/user/ ANTHCepicenter/ videos

Consider hosting an educational CRC event during CRC awareness month: March



Kiki the Colon

Contact Eric Vinson at NPAIHB for more information. evinson@npaihb.org It is important that events are well planned and evaluated for further improvement. There are multiple event planning resources located in the toolkit pocket of this chapter.

Event planning tools included:

6.2.1	Considerations for planning your event
6.2.2	Day of event checklist
6.2.3	Post Event Checklist
6.2.4	Presenter checklist
6.2.5	Event flyer templates
6.2.6	Sign-in sheet for events
6.2.7	Event Evaluation Instructions
6.2.8	Participant Evaluation Form
6.2.9	Summary evaluation Spreadsheet
6.2.10	Event Comments Summary Form
6.2.11	Post-Event Program Team Evaluation

Recruiting Participants

Once you decide what type of education events your program will coordinate, you will need to consider how to encourage community members to attend events and activities. Media and advertising campaigns are one way to spread the word, but you should also consider promoting events through people. Identify appropriate places and times to talk to community members. Events (e.g., powwows or health fairs) and community sites are good times to connect with people.

Beyond talking to people at community events, it is effective to have high profile tribal members (people who many community members know and look up to) advocate for CRC prevention. Identify community leaders or people who many others look to for guidance. Ask them to be champions for your program by spreading the word. This may mean they tell their friends why CRC screening is important or that they speak on behalf of CRC screening at a local event. Below is a list of locations to recruit individuals:

- Community centers
- Workplaces
- Health fairs
- Powwow
- Tribal Treaty and Restoration Events
- Fitness center
- Health clinics
- Homes of target population
- Sweat lodges
- Long houses

While planning events, make your workshops and activities engaging and interesting. Try using games or story telling instead of traditional presentations. Don't make every presentation exactly the same; try new and exciting styles to keep people interested. Also, ask people what kind of activities or presentations interest them most. You can ask people before an event what they are interested in or you can ask them after to learn what they enjoyed most. At the end of an event ask your participants to spread the word. For example, if ten people come to your first workshop and they really like it, ask them to each bring one friend to the next prevention workshop to double participant rates.

Be sure to consider accessibility and convenience for your target population. Can people get there easily or will you need to provide transportation? Frequent and short (less than 60 minutes) workshops have been shown to attract and retain more participants than longer workshops⁴. Other ways to increase attendance at your event or workshop include providing incentives and making sure your events are accessible. Incentives (e.g., prizes, small gifts, or food) do not have to be expensive. There are differing opinions on the use of incentives, so maybe just use them for the first couple of events. Be creative and think what would help you attend a community event.

Level one tools will help you increase community awareness about CRC prevention and screening. Tools in this level include materials for developing a media campaign and coordinating events.

Level Two- Individual Awareness and Motivation

Media campaigns and events are useful community-wide methods of increasing CRC awareness. Unfortunately, media messages may not reach every individual in the target population and individuals may not be immediately willing to participate in health events or workshops. Individual counseling can build on community awareness efforts. Level two describes strategies for increasing individual motivation. Below are ideas for individual education and counseling.

Individual Counseling

Health care providers or community health workers can conduct patient counseling. Sometimes community (or non-health care provider) counseling can be effective because CHRs or other program workers may have more "We advertised that we had local speakers who were gonna tell their experience of cancer survivorship. They came to listen to that."

- Tribal Focus Group, 2011

time to spend with patients. One-on-one counseling and health messaging may be more fitting for some individuals because each conversation can be tailored. In some cervical cancer programs, people were more receptive to individual counseling because they felt that someone was more invested in their health and wellbeing⁵.

Any kind of individual health counseling can be used to make the patient feel more comfortable with the disease, screening process and treatment. Simple and clear messaging will help the patient make informed and educated decisions about his or her health. Some cervical cancer programs have shown that giving patients detailed and complete information increases the likelihood that a patient will follow through with screening and on-going prevention efforts⁶.

Although there are many types of counseling, this toolkit focuses on motivational interviewing because it respects AI/ AN cultural values and is a promising tool for promoting CRC screening⁷.

Motivational Interviewing

Motivational interviewing (MI) ⁸is a counseling technique used to help way of communicating with individuals to increase their inner desire forand commitment andto change. MI was developed for substance abuse related health behaviors and addictions, but can also be applied to improving individual motivation for other health behaviors. Many communities use MI to promote patient behavior changes related to physical health, including overcoming barriers to receiving CRC screening. The MI method involves building trust with individual clients to guide them to find their own inner strength to change a behavior. MI is a powerful tool to help people make changes because it targets people's own motivation and ability to create solutions for themselves.

How Does Motivational Interviewing Work?

The basic components of MI are collaboration, drawing out ideas patients already have, and not forcing change on patients⁹. Motivational interviewing works by focusing on relationship building. MI focuses on the interviewer and the patient being equal in the conversation and in their overall relationship. The interviewer is non-judgmental and empathetic (i.e., the interviewer is sensitive to the patient's emotions and can see the world through the client's eyes). The conversation is centered on increasing the patient's

awareness of the behavior and its consequences, risks, or other issues. The purpose of the interview is to explore the patient's own thoughts on a behavior and encourage his or her inner motivation. Throughout the process, the interviewer supports change and helps the patient identify current resources to make healthier choices for him or herself.

Native Communities and MI

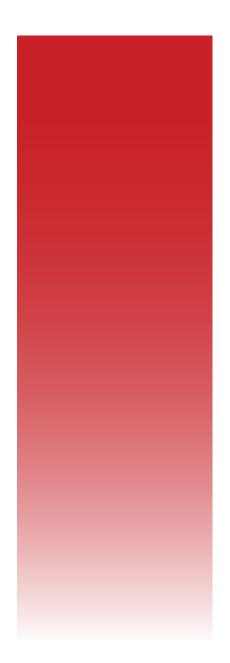
MI works well for many AI/AN communities for multiple reasons:

- MI promotes working with communities and not telling them what to do
- MI values a holistic and balance-oriented view of change and behavior
- MI relies on non-confrontational interaction
- MI engages people in solving their own problems
- MI respects the person's right to his or her own opinions
- MI supports self-efficacy (i.e., a person's willingness and ability to change) by supporting current strengths and resiliency
- MI fosters patients' belief in the possibility of change

Motivational interviewing focuses on encouraging people to gain control over their lives and supports the idea that communities have their own resources to bring about health and wellness. A respectful attitude, awareness of how problem behaviors affect the community, and teaching through doing are important cultural values that may help to facilitate change among AI/AN communities.

For a brief outline on how to conduct MI, refer to tool 6.3 in the toolkit pocket of this chapter.

Level two builds from level one by focusing on individual needs. Level two includes tools and information for working with people who may be reluctant to be screened.



Examples of Existing Community Programs in Native Communities

There are successful programs that focus on CRC risk reduction and prevention among tribal communities. CRC screening and prevention programs are often integrated with other public health programs to promote preventive screening and overall health. Below are some successful CRC programs in tribal communities:

<u>South Puget Intertribal Planning Agency (SPIPA) Colon</u> Health Program

The SPIPA Colon Health Program is rooted in community participation and serves seven southwest Washington tribes. The Colon Health Program reaches out to the tribal communities by connecting with patients at tribal health fairs and using community health representatives known as Patient Navigators. Patient Navigators promote screening and encourage tribal members to sign up for screenings at community events. As an added incentive for those who sign up for screening, the program does quarterly drawings for prizes. SPIPA also uses iPads to show colorectal health information in an interactive and entertaining way.

CRC Programs in Alaska

There are three CRC screening and awareness programs for Alaska Natives: the Southcentral Foundation's Medical Services Screening and Prevention "Colorectal Screening Program;" the Arctic Slope Native Association "Screening for Life Program;" and the Alaska Native Tribal Health Consortium (ANTHC) "Colorectal Cancer Program." Like SPIPA's Colon Health Program, ANTHC's Colorectal Cancer Program takes advantage of Patient Navigators to spread awareness and encourage community members to be screened. ANTHC also takes a culturally targeted approach in their cancer education program by utilizing tools such as a Healing Drum to symbolize tribal collaboration.

For more information on ANTHC's program visit their website at www.anthctoday.org/epicenter/colon/

Cherokee Nation

In Oklahoma, the Cherokee Nation Comprehensive Cancer Control Program (CNCCCP) has taken a slightly different approach. The CNCCCP obtained a giant replica of the a human colon to raise community awareness at a Cherokee National Holiday celebration to emphasize the importance of screening and prevention. Visitors can walk through a "Super Colon" that displays the various stages of CRC. They combined the larger than life visual with important CRC facts and pre- and post-quizzes. To encourage visitor participation, door prizes were raffled-off to people who completed the post-quizzes.

5-2-1-0 Let's Go! Program

The 5-2-1-0 program doesn't target CRC specifically, but is a simple approach for overall healthy living.

- 5 Eat 5 fruits and vegetables every day.
- 2 Limit screen time (TV, computer, video games) to 2 hours or less each day.
- 1 Strive for 1 hour of physical activity a day.
- 0 Limit the consumption of sugar sweetened beverages.

The number design is an easy way for people to remember small ways to improve their health. Patients pick a number and work on adding that number and its related behavior to their daily routine. They gradually work on adding all of the numbers and behaviors. This program shows that individuals can make small changes in their lifestyle to lower their CRC and other chronic disease risk. For more information, visit the Let's Go Program website: www.letsgo.org

Implementation for Community-Based Programs Summary

This chapter described two levels of community-based CRC screening and prevention program implementation. Level one focused on increasing community awareness through media campaigns and educational events. Level two was centered on individual level change and included tips for individual counseling and motivational interviewing. Useful tools and guides are included for each type of community-based programming.

Tool Box Description

6.1

- Community awareness media tools begin with 6.1. These tools and templates can be used for community education and mass media campaigns.
- Many of these tools are successful examples of CRC campaigns and small media materials.

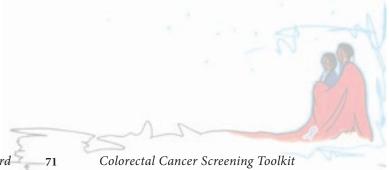
6.1.1	CDC CRCS Brochure
6.1.2	CRC Mini Brochure Native American
6.1.3	CRC screening brochure 10.07 Forest county Potawatomi AI & AN
6.1.4	Simple Colon
6.1.5	ACS CRCS Fact Sheet
6.1.6	CDC CRCS Fast Facts
6.1.7	Urban Indian CARES-fact-sheet AI & AN
6.1.8	CRC Poster Native American
6.1.9	Medicine Wheel Poster Michigan
6.1.10	PosterMichigan AI & AN
6.1.11	Urban Indian CARES poster AI & AN
6.1.12	Colon Native Final
6.1.13	CRC Daily Astorian fullpage v.6
6.1.14-17	Mailout Cards
6.1.18	UCAN Advertorial full page employee v.10
6.1.19	Sample Email Blasts
6.1.20	Basics for Starting a Social Media Campaign

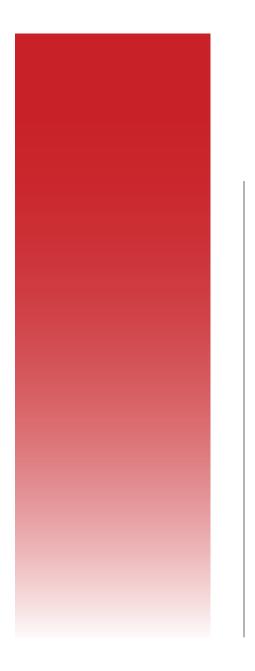
-	1		
١.	4		

- Event planning tools begin with 6.2. These tools and worksheets will help ensure any community event is well planned and evaluated.
 - 6.2.1 Considerations for event planning
 - 6.2.2 Day of Event Checklist
 - 6.2.3 Post Event Checklist
 - 6.2.4 Presenter Checklist
 - 6.2.5 Event Flyer template
 - 6.2.6 Sign in sheet for events
 - 6.2.7 Event Evaluation Instructions
 - 6.2.8 Participant Evaluation Form
 - 6.2.9 Summary Evaluation Spreadsheet
 - 6.2.10 Event Comments Summary for Participant Evaluation
 - 6.2.11 Post-Event Program Team Evaluation

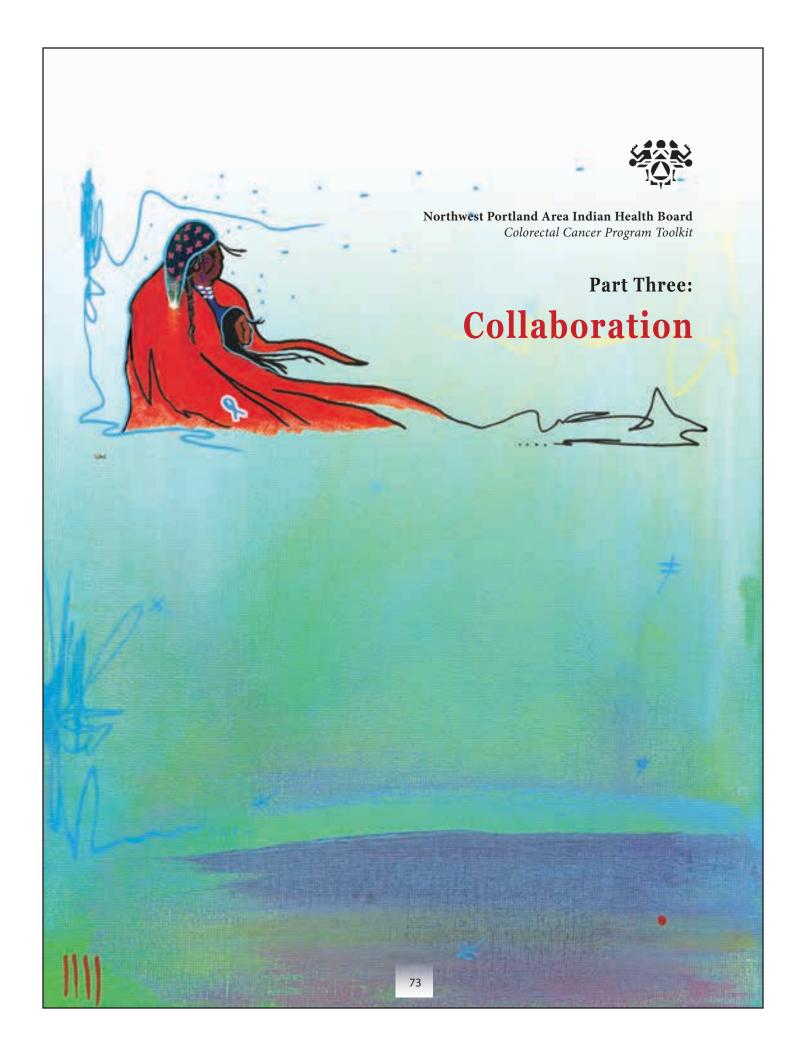
6.3

- This tool is intended to instruct someone who does not yet have a background in MI and is unable to attend training. The basic tips should allow anyone to utilize some MI techniques in one-on-one patient interactions.
 - 6.3.1 Basic Tips for Motivational Interviewing













Northwest Portland Area Indian Health Board