

Cancer Screening in the **African Methodist** Episcopal (AME) Church Community



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CDC ACKNOWLEDGMENT



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HOUSEKEEPING



- Today's webinar will be recorded and accessible via our project website.
- Please use the Q&A feature to submit any questions.
- If you have any technical issues, please message Aubree Thelen via the chat.
- We kindly ask that you complete our brief survey at the end of the webinar.

WEBINAR OBJECTIVES



- Provide an overview of the American Cancer Society's (ACS) pilot project to promote colorectal cancer (CRC) screening in the African Methodist Episcopal (AME) church community
- Detail the process and importance of crafting tailored colorectal cancer screening messaging
- Highlight the significance of partnerships between the AME church, local health systems, and other community partners in efforts to increase colorectal cancer screening and reduce barriers to care
- Share helpful resources created through this project to promote colorectal cancer screening in the AME church community

FEATURED SPEAKERS





Megan Burns

Program Manager
National Roundtables

American Cancer Society



Rev. Dr. Noah Nyamaropa



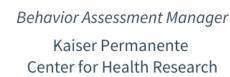
Pastor

Mt. Zion AME Church

Mansfield, Georgia



Jennifer Sanchez Rivelli, MA





Nikki Hayes, MPH

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Jamie Thompson, MPH
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Rev. Dr. Noah Nyamaropa

Pastor

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PROJECT OVERVIEW

COLORECTAL CANCER (CRC)



Colorectal cancer is preventable, treatable, and beatable.



More than **HALF** of colorectal cancer deaths can be prevented by screening and early detection.



Survival rate when colorectal cancer is caught **EARLY**

COLORECTAL CANCER DISPARITIES

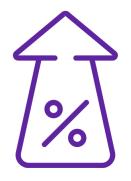


Colorectal cancer (CRC) is preventable, treatable, and beatable.

And yet...



CRC is the **SECOND** leading cause of cancer related death in Black men and women.



They are about 20% more likely to get CRC and about 40% more likely to die from it than most other groups.



Only about 65% of Black adults are up-to-date with potentially life-saving screening.

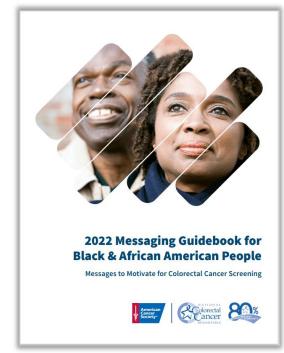
^{*} American Cancer Society. Cancer Facts & Figures for African American/Black People 2022-2024

ACS NCCRT MARKET RESEARCH



In 2022, the American Cancer Society National Colorectal Cancer Roundtable (ACS NCCRT) released its *Messaging Guidebook for Black & African American People: Messages to Motivate for Colorectal Cancer Screening.*

- Most Black and African American respondents who were unscreened for colorectal cancer identified themselves as being somewhat religious.
- The majority of those who are very religious indicated their beliefs impact health care decisions.
- Only 1 in 5 respondents had received health information in a religious setting.







OVERVIEW



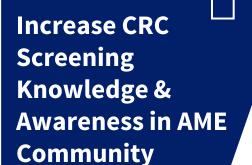
A collaborative project aiming to:



Develop & Share
Tailored Health
Messages Unique
to Atlanta East
District



Address
Barriers to
colorectal (CRC)
Screening



Establish & Constant Strengthen
Community
Partnerships to
Begin Addressing
Barriers to Care

Key Partners:







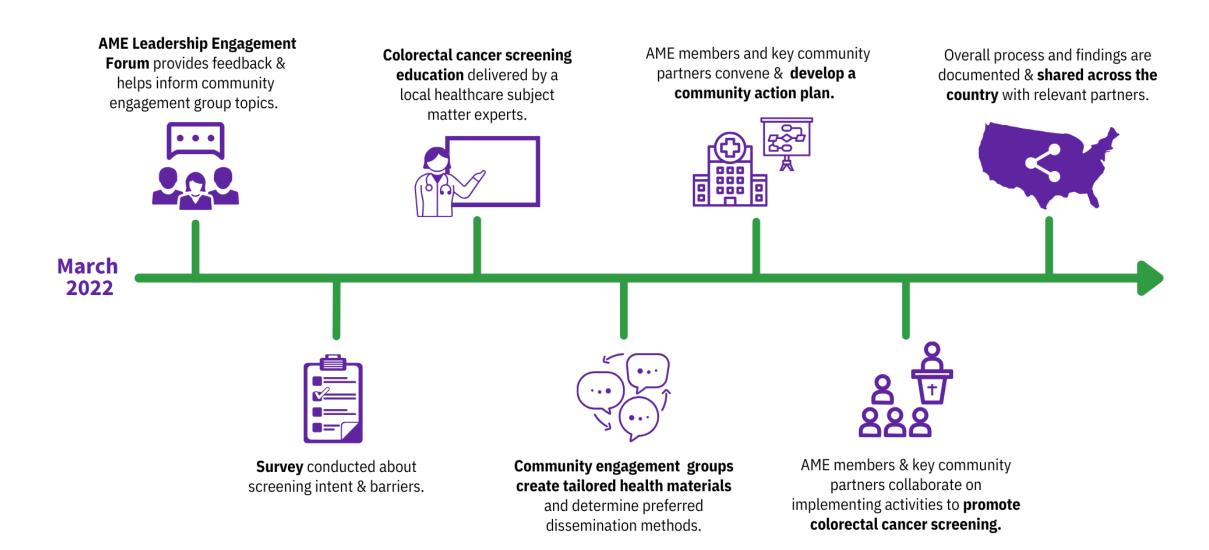
** KAISER PERMANENTE.

Center for Health Research



PROCESS







TAILORED MESSAGING

Jamie Thompson, MPH

Senior Research Associate

Kaiser Permanente Center for Health Research





Jennifer Sanchez Rivelli, MA

Behavior Assessment Manager

Kaiser Permanente Center for Health Research





HOW DID WE CREATE TAILORED MESSAGING?



Kaiser Permanente Center for Health Research uses an adapted version of Boot Camp Translation, a validated **community engagement approach**, to develop culturally and locally relevant health messaging and materials in diverse communities.

- ENGAGE participants in translating health information into ideas, messages, and materials that are understandable and meaningful to community members
- BUILD a community-based solution to address local health concerns
- RECOGNIZE that each population has unique cultural, linguistic, social, and economic context that impacts how they receive and act on health information

OUR COMMUNITY ENGAGEMENT APPROACH



This approach focuses on three core themes:

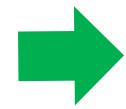
LISTEN

Helps community
leaders and
champions learn from
community members
about barriers and
gaps in care



EMPOWER

Share health information in a collaborative way



CO-CREATE

Develop messages and materials that resonate with and motivate community members to take control of their health

COMMUNITY ENGAGEMENT SESSIONS



- Participants In-Person at Antioch AME Church
- Participants at Each Virtual Follow-Up Session
- 6 Churches from AME East Atlanta District Represented

- 3 Key Themes Identified
- 8 Messages Created
- 11 Original Materials Crafted

Boot Camp Translation (Stone Mountain, GA, October 2022)



BARRIERS TO CRC SCREENING





Individual Perceptions / Attitudes (fear, discomfort, invincibility)



Time and Opportunity (childcare, work, office hours, transportation)



Medical Mistrust



No Provider Recommendation or Unclear Explanation of Screening Options



Insurance / Cost Related (awareness/understanding, financial concerns, non or underinsured)

KEY THEMES AND MESSAGES





Incorporate faith-based concepts into colorectal cancer screening messaging.

- Faith over fear! Get screened for colorectal cancer today.
- Honor God by taking care of your body. Get screened for colorectal cancer today.
- Your faith, your health. Get screened for colorectal cancer today.
- Listen to the gospel's call to live whole and healing lives. Get screened for colorectal cancer today.



Increase CRC awareness & knowledge through personal connections.

- Share your cancer story. It can save lives.
- I need you to survive. Get screened for colorectal cancer today.



Empower individuals through the strength of their community.

- You are not alone. We are in this together.
- There is nothing we cannot talk about on a Sunday morning.

PREFERRED DELIVERY CHANNELS & MESSENGERS



Preferred Church Delivery Channels

- Print materials (e.g., flyers, pamphlets, message cards) distributed at the service
- Digital materials (e.g., videos) shown during the service
- Email and newsletters



Preferred Community Delivery Channels

- Cancer awareness events
- Social media platforms



 Black and African American men and women in positions of power

Messengers

- Church leaders
- Fellow congregants
- Cancer survivors





Listen to the gospel's call to live whole and healing lives. Get screened for colorectal cancer today!



Honor God by taking care of your body. Stop cancer by getting screened today.

more often in Black people.

Get screened today.

nealthy lifestyle changes.

vegetables, and stay hydrate

risk of colorectal cancer.

Talk to your doctor about which screening test is right for you.

For more information, visit cancer.org



Colorectal **Cancer** is Preventable!

Honor God by taking care of your body Get screened for colorectal cancer today!

Colorectal cancer is the 2nd leading cause of cancer-related death in Black and African Americans.

Black and African Americans are about 20% more likely to get colorectal cancer and 40% more likely to die from it than most other groups.

20,700

Black and African American people will be diagnosed with colorectal cancer this year.

7,200 Black and African American

people will die from colorectal cancer this year.

The good news: Colorectal cancer can be prevented or treated if

found early.

There is a 90% survival rate found or treated early.

> EARLY DETECTION = 90% SURVIVAL

This is why getting screened early is important!

your health. If you're 45 or older.

There are affordable

get screened today!

Take control of

screening options. One option is a simple at-home test called a FIT It looks for hidden blood in your stool (poop). If blood is found, your doctor will recommend

a colonoscopy.

TALK TO YOUR DOCTOR about which option is right for you!



Are you 45-75 vears old? Black and African Americans are about **20%** more likely to get colorectal cancer and 40% most other groups.

people are alive 5 years after diagnosis when colorectal cancer testing happens early.

Family history of colorectal cancer can affect the screening age and testing options available to you.

Talk with your provider about the best choice for you.

FIT	FIT-DNA	CT Colonography	Colonoscopy
Checks for blood in the stool	Checks for blood and altered DNA in the stool	Checks for polyps (small growths) in your colon that can become cancer using X-ray imaging	Checks for polyps (small growths) in your colon that can become cancer using a flexible tube
At-home test No prep needed Uses a water sample from your stool Mail the test to the lab or return it to clinic	At-home test Delivered to your door No prep needed Collect a stool sample Mail the kit to the lab	Out-patient procedure Minimally invasive No sedation required Prep needed - you must clear your colon by using medication before the test	Out-patient procedure Your provider will refer you to a trusted specialist near you Prep needed - you must clear your colon by using medication before the test
Every year if test result is normal	Every 3 years if test result is normal	Every 5 years if test result is normal	Every 10 years if findings are normal
You will need a colonoscopy if your result is abnormal	You will need a colonoscopy if your result is abnormal	You will need a colonoscopy if your result is abnormal	Calls for anesthesia Specialist will remove any small growths found and send them for further testing You will need a ride to and from
	Checks for blood in the stool i	Checks for blood in the stool At-home test No prep needed Uses a water sample from your stool Mail the test to the lab or return it to clinic Every year if test result is normal You will need a colonoscopy if your result is	Checks for blood in the stool At-home test No prep needed Ail the stool Bigure 1 At-home test Delivered to your door No prep needed Ail the st to the lab or return it to clinic Every year if test result Tou will need a colonoscopy if your result is proval in the stool Tou will need a colonoscopy if your result is promal Checks for polyps (small growths) in your colon to your door using X-ray imaging Out-patient procedure No lead to out-patient procedure No sedation required Prep needed - you must clear your colon by using medication before the test Every year if test result Tou will need a colonoscopy if your result is promal





COLORECTAL CANCER CAN BE PREVENTED

Honor God by taking care of your body. Get screened for colorectal cancer



When should I get tested?



The colon, also known as the large intestine, is part of the digestive system. Colorectal cancer occurs when small

Men and women need to get

tested for colorectal cancer starting at age 45 even if they feel healthy.

You can complete a simple at-home test, called a FIT. If the test finds hidden blood

in your stool (poop), you may colonoscopy, A colonoscopy your colon before the





COLONOSCOPY

3-5

SOURCE: American Cancer Society

from God, and you are not your own? (I Corinthians 6:19) ime Management

Be very careful, then, how you live - not as unwise but as wise, making the most of every opportunity, because the days are evil. (Ephesians 5:15-16)

at Right and Rehydrate

Do not join those who drink too much wine or gorge themselves on meat.

anage Yourself

Therefore, I urge you, brothers and sisters, in view of God's mercy, to offer your bodies as a living sacrifice, holy and pleasing to God - this is your true and proper worship.

lenty of Rest and Sleep

...he said to them, "Come with me by yourselves to a quiet place and get some rest."

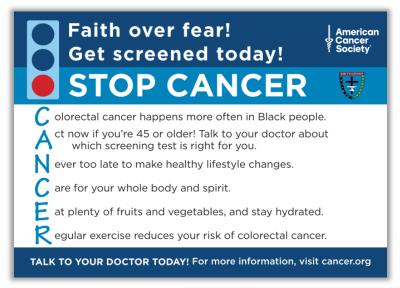
ive for the Lord

So whether you eat or drink or whatever you do, do it all for the glory of God.

ncourage Others to do the Same Therefore encourage one another and build each other up, just as in fact you are doing. (I Thessalonians 5:11)

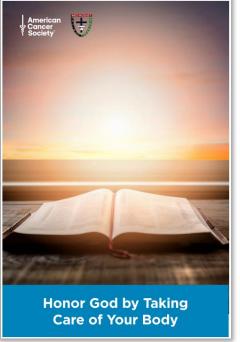
Talk to your doctor about the right colorectal cancer screening test for you. For more information, visit cancer.org













Dear God...

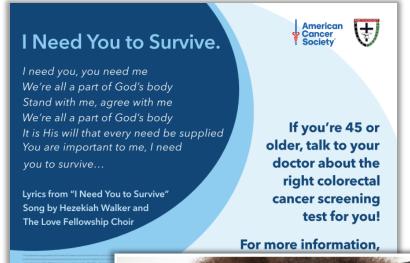
Please keep my grandpa extra safe today. He has to do a test at the doctor's office and he's feeling scared. Please promise me that you will be watching over him and help him to be brave and strong. Thank you for always being with me.

"Faith is confidence in what we hope for and assurance about what we do not see." Hebrews 11:1

Talk to your doctor about the right colorectal cancer screening test for you. For more information, visit cancer.org

[ADD PROVIDER CONTACT INFORMATION & LOCAL RESOURCES]











My name Is Tamika. I'm 54. I kept getting messages from my doctor's office that I needed to get screened for colorectal cancer using an at-home test called a FIT but no one explained why. I had so many questions! Where would my test sample go? What would they do with my sample?

I felt nervous but God gave me the strength to talk to friends at church and the faith to contact my doctor and put trust in my medical care. My fear of completing the test was nothing compared to my fear of dying from colorectal cancer.

My FIT test came back abnormal and I needed to get a follow-up colonoscopy. I was diagnosed with stage 2 colorectal cancer. Luckily, my cancer was found at an early stage and could be treated.

Faith over fear! Your life depends on it – get screened for colorectal cancer today.

Learn more about colorectal cancer and screening options at www.cancer.org.

Talk to your doctor today!



My name is Henry. I was diagnosed with stage 4 colorectal cancer at age 47. Earlier this year, I had blood in my stool, but I ignored it. I was always tired, but I was working 12-hour shifts and just didn't have time to go to the clinic. I finally decided to see my doctor after getting a colorectal cancer screening pamphlet at church. Because of my symptoms, my doctor told me I needed a colonoscopy right away. The results showed I had cancer.

Trust your body. Looking back, I wish I had made the time to get screened when my doctor first recommended it when I turned 45. Keep fighting the fight. I'm here today because cancer did not win. I did!

Learn more about colorectal cancer and screening options at www.cancer.org.

Talk to your doctor today!



My name is Cynthia. I lost my father, Daryl, to cancer at the age of 61. He was diagnosed with stage 4 colorectal cancer. He didn't want to get screened, but the cancer might have been prevented if he did. Don't let your family lose you too.

My father didn't get a chance to beat cancer, but you can still beat it!

Testing saves lives, but only if people get tested. There are affordable screening options – talk to your doctor about which colorectal cancer screening test is right for you.

Learn more about colorectal cancer and screening options at www.cancer.org.

Talk to your doctor today!



My name is Ruth. When I turned 45, my doctor recommended that I complete an easy at-home colorectal cancer screening test called a FIT. It came back abnormal. My doctor said I had to get a follow-up colonoscopy and the results showed that I had stage 1 colorectal cancer.

I was so surprised because I had no symptoms, felt totally fine, and don't have a family history of cancer. I was scared too, but found comfort and strength in my faith knowing that God is with me. I'm so grateful that I got screened ontime. My cancer was found early and could be easily treated!

Don't delay - get screened today!

Learn more about colorectal cancer and screening options at www.cancer.org.

Talk to your doctor today!



COMMUNITY ACTION PLANNING

COMMUNITY ACTION PLANNING SUMMIT









COMMUNITY ACTION PLAN

Promoting Colorectal Cancer Screening Among AME Church Communities

The American Cancer Society (ACS), in partnership with the Atlanta East District of African Methodist Episcopal (AME) churches, convened a small group of key community partners and thought leaders for a Community Action Planning Summit on promoting colorectal cancer screening among AME church communities.

By leveraging critical connections between AME churches, local health systems, and other community partners/coalitions, the partners aim to increase colorectal cancer screening, reduce barriers to care, and improve screening intent among AME church community members.

The purpose of the community action plan is to foster stronger partnerships, establish tangible and feasible commitments, and engage in highly interactive conversations to identify solutions to overcome community-

Activity

Share colorectal cancer screening information with the church membership through in-person speakers and videos of survivors and healthcare providers



By Whom?

- American Cancer Society
- · Cancer support community
- Community organizations
- Health systems
- Media ministry
- · Regional cancer coalitions



Continuous



What's Needed?

- · Identify survivors who will share their
- Identify healthcare providers to record videos and be speakers at the churches.
- · Create an interview script.
- · Create the videos

What Will Our Impact Be?

· Number of video stories (survivor and physician



Participants Attended In-Person at Antioch AME Church representing:

- AME Church Leadership and Congregants
- Local Hospital Systems
- **Community Partner Organizations**



Activities Proposed for Inclusion in the Action Plan





COMMUNITY ACTION PLAN ACTIVITIES





Develop a tailored community colorectal cancer screening resource



Train non-clinical navigators within the church community



Promote a colorectal cancer screening day across the district



Build connections and share information between AME leadership and hospital systems



Educate and raise awareness through inperson speakers and videos of survivors or healthcare providers



Fundraise at the district level to support costs of colorectal cancer screening or transportation to screening



Disseminate findings and lessons learned to educate decision-makers about the initiative

CRC SCREENING AWARENESS SUNDAY



9 Churches participated



51 activities were conducted including reading CRC facts during service, distributing tailored materials, playing PSA videos, CRC guest speakers, distributing FIT kits, and more



Over 1,000 congregants reached





AME CHURCH RESOURCE GUIDE:

PROMOTING SCREENING FOR COLORECTAL CANCER IN THE AME CHURCH COMMUNITY

The AME Church Resource Guide provides helpful resources for promoting colorectal cancer screening among the members of the AME Church community including:

- Information about the collaborative project with the Atlanta East District
- Quick start steps for developing & implementing a community action plan using communitybased colorectal cancer screening messages
- Suggestions for going above & beyond the quick start activities
- Planning worksheets and materials



Nikki Hayes, MPH

Chief, Comprehensive Cancer Control Branch

Division of Cancer Prevention & Control Centers for Disease Control & Prevention







DISCUSSION

CLOSING



- Scan QR code to visit our website where you'll find:
 - A digital copy of the AME Resource Guide: Promoting Screening for Colorectal Cancer in the AME Church Community
 - A recording of today's webinar
- Please complete the post-webinar survey
- Questions?
 Contact: <u>Megan.Burns@cancer.org</u>







Thank You!

