

Preparation

Create your partnership

There may be several individuals and organizations that can assist you in the design, planning and implementation (or putting into action) of your supportive relationships intervention activities. Supportive relationship interventions have been implemented with the assistance of a wide range of partners.

Example partners to help implement your intervention include:

- health care facilities
- health care providers
- social workers
- parents and family members
- religious leaders and faith-based organizations
- media personalities
- local universities and researchers
- health departments
- media and communications' specialists
- community centers
- community organizations
- community members and leaders
- local businesses, including barber shops
- health educators
- patient advocacy groups

Remember that some training may be required to implement the intervention. To save time and money, it is helpful to find partners who have already received this training. If this is not possible, you may have to provide your own training on certain topics: risk factors associated with colorectal cancer, signs and symptoms of colorectal cancer, lifestyle behavior changes that reduce risk associated with colorectal cancer, screening techniques, communication strategies regarding non-judgmental feedback and reinforcement, how to build cultural competence, how to help individuals with problem solving strategies, proper counseling attitude, community resources and maintaining confidentiality.

Try to think of partners that can serve a variety of roles. For example, you may need partners to help you design your intervention activities, such as health educators, while some partners may be more helpful in conducting your intervention activities, community centers or teachers for instance. It is important to involve these partners from the beginning of your intervention development through the implementation of your intervention.

Do not forget to consider partners that may help you with evaluating your intervention. To evaluate a supportive relationships intervention, or any other intervention, it is often useful to seek out technical assistance from local colleges, universities or others with this experience. Academicians and others with evaluation experience may be partners that you should consider engaging from the very beginning to assist in designing and planning.

For more information on engaging partners, go to [Partnerships](#).

Identify your population

Colorectal cancer supportive relationships may benefit from interventions that suit the needs of various subgroups with regard to gender, race/ethnicity, age or other sociodemographic characteristics.

As you start to consider your own population, it will be important to identify important aspects of your population:

- What is your population?
- Are there subgroups within this population?
- What are the geographic boundaries?
- What are the shared social and cultural characteristics of this community?

For more information on identifying your population, go to [Assessment and Prioritization](#).

Supportive relationship interventions can take place in a variety of settings, including communities, worksites, health care facilities, faith-based organizations, and homes. The setting that you select should reflect your population and your goals and objectives:

- What location is convenient?
- What are the hours of operation?
- Will transportation be required for some or all participants?
- Does the site have facilities and equipment needed for activities?
- Is there a cost associated with use of this site?

For more information on settings for colorectal cancer interventions, go to [Colorectal Cancer in Different Settings](#).

If your staff requires training, you will also need to figure out whether you are able to train the staff at your site, or if they will need to attend training elsewhere.

Record your intervention goals and objectives

If you and your partnership have not formed your intervention goals and objectives, you will need to work with your partners to do so. Although you may refine your goals and objectives, it is important to start with some idea of what you want to accomplish for this intervention. The goal of supportive relationship interventions is to enhance supportive relationships among family members, friends, colleagues, neighbors, organizations or community representatives in order to promote colorectal cancer prevention and screening behaviors. In turn, these behavior changes can help to improve quality of life and reduce risk for colorectal cancer-related health problems and associated medical costs. If your partnership is also interested in addressing lifestyle risk factors, please refer to [Nutrition](#), [Physical Activity](#) or [Tobacco](#).

An example of a colorectal cancer supportive relationship intervention goal and objective:

- Goal: Improve community awareness and support of colorectal cancer screening and prevention
- Objective: Organize and facilitate two to four colorectal cancer prevention and screening support groups in the community

With supportive relationships, as with other efforts to prevent or manage colorectal cancer, it is important to set realistic goals and objectives. This usually requires having a good idea of the community's needs and may involve the development of intermediate outcomes, such as changes in attitudes or readiness to be screened and to practice healthy lifestyle behaviors.

It may be helpful to create a logic model to organize your goals, objectives and the action steps needed to meet your goals and objectives. Some funding sources have very specific logic models for your partnership to use, so be aware of different requirements. For more information on developing goals and objectives, go to [Preparing for Your Intervention in Readiness and Preparation](#).

Assess your community capacity and needed resources

Supportive relationships strategies come in a variety of shapes and sizes. Some interventions will require materials and resources to create tip sheets, worksheets, resource guides or informational brochures. Others may require meeting rooms, areas for fitness activities or a kitchen for cooking demonstrations. Some strategies may require a dedicated phone line for a hotline or follow-up phone calls.

You may consider creating a resource management plan in which you review your current resources and resource requirements and identify at what points in the intervention you will need these specific resources. As you develop your budget, be sure to incorporate the costs for these types of resources.

Supportive relationships interventions may also require certain skill sets depending on the specific strategies used. For example, it may be necessary to possess skills in providing support or encouragement, problem-solving, leadership or other capacity-building activities.

Likewise, evaluation of supportive relationships interventions can be complex and may require assistance from researchers and other partners who have experience with study design, measurement development, data collection, data analysis or translation of research findings into practical implications for your community.

Evidence from previous work on supportive relationship interventions suggests they can be developed with a wide range of available funds and resources. Supportive relationships have performed well with a variety of different financial, personnel, space, equipment and materials considerations.

Previous work in supportive relationships has found:

- A range of low-cost intervention alternatives, such as buddy systems, to high-cost interventions, such as physician counseling and tailored counseling through computer programs, are available and effective.
- Most of the costs for these interventions stem from personnel time and training:
 - Staff time to design, develop, implement and evaluate the intervention
 - Training of staff/health care providers/lay health workers
 - Cultural competence training for staff working with the community
- Space may or may not be an issue. Some interventions may be carried out in environments such as health care facilities that do not require rental fees, but an investment may need to be made to rent space for certain intervention activities or staff trainings.
- Equipment and materials may or may not be issues for consideration. Some interventions involve providing telephone support or on-line support while others may require worksheets, videos, culturally appropriate food, or manuals to provide support in preventing and screening for colorectal cancer. Most of the equipment or materials are relatively inexpensive to acquire and distribute.
- Money or other types of incentives should be considered as part of competitions/contests or as positive reinforcement

The [Readiness and Preparation](#) and [Capacity](#) sections provide information and resources to help you think about the resources you might need for your intervention. For specific examples of tools and resources for colorectal cancer that have been created and used by other communities, visit [Tools and Resources for Colorectal Cancer](#).

Design your intervention activities

- *Consider your campaign messages*

Think about what you want people to receive from the supportive relationships and how you would like them to respond. For example, you may want people to feel more encouraged in their efforts to change lifestyles. You may also work with your partners to decide what changes are feasible, based upon the amount of political and/or community support and available funding.

These interventions are most effective when characteristics of your population are taken into consideration (see [Assessment and Prioritization](#)). This may require you to spend time building relationships with people within the community. People within the population can help you identify the community's readiness to change as well as specific behaviors and outcomes that your intervention should address.

Examples of supportive relationship intervention strategies:

- Providing a variety of culturally appropriate options and being mindful of the types of social support (informational, tangible, appraisal) that might be helpful
- Using a variety of recruitment strategies
- Creating materials and processes to encourage families to reinforce and provide tangible assistance in creating lifestyle changes

- Creating a lay health advisor manual and training to provide increased support for colorectal cancer prevention and screening
 - Providing telephone support for colorectal cancer prevention and screening
 - Creating a directory of colorectal cancer and related programs available in the community
 - Sending information and resources to participants' family members or friends providing tips on how to offer support in preventing and screening for colorectal cancer
 - Developing booklets with tips to encourage community support for colorectal cancer prevention and screening
 - Encouraging pastors, health ministers or other faith-based representatives, to educate their congregations about the risk factors associated with colorectal cancer and the importance of screening
- *Design your supportive relationships intervention objectives*

By starting with defining your objectives you can determine what it is you want your participants to get from your intervention. You can then develop action steps that will help you accomplish these objectives. Action steps generally include activities like providing your participants with tangible support or reinforcement and encouragement (emotional support) for healthy lifestyle changes. Once you have developed your action steps, you can begin your intervention. There are many creative ideas for different sessions and activities. Go to [Tools and Resources](#) to see examples of what others have used.

- *Create a timeline and assign roles and responsibilities*

Work with your partners to decide on the timeline for the intervention as well as who will be responsible for carrying out the intervention activities. Be very specific about roles, tasks and timelines to ensure that the intervention is implemented successfully. Include information about when your intervention will begin and who will be responsible for each activity.

Identify potential barriers

Think about the potential barriers that may be encountered along the way and prepare your reaction to these barriers.

Some barriers you may encounter in implementing your colorectal cancer intervention include:

- Cost – Develop a budget and estimate costs of creating the supportive relationships intervention and maintaining it over time. Challenges may also be faced regarding the lack of funding or other types of support from institutions, organizations or communities.
- Resources and personnel – Determine whether your partnership has the needed personnel and resources identified above. A substantial amount of personnel time is required for all phases of interventions:
 - Planning and preparation phases – how to get access to participants, how to build supportive interactions into participants' everyday lives, how to address participants' readiness to change their lifestyle behaviors

- Implementation and evaluation phases – how to keep participants active in the intervention, how to track participants and their behaviors over time
- Maintenance phases – how to keep participants from discontinuing colorectal cancer prevention and screening behaviors and how to allocate resources to sustaining the intervention activities over time
- Accessibility – Ensure that most, if not all, individuals from the population will be exposed to the intervention strategies at one time or another
- Support - Families and friends have a strong influence on how individuals practice healthy lifestyle behaviors.
- Cultural competency- People from racial or ethnic groups may understand and learn best from information and resources that reflect their own culture. Language barriers or literacy may limit the reach of intervention materials. Appropriate types of support and providers of support may vary by culture.
- Susceptibility – People must be aware of the risk factors for colorectal cancer and when screening is appropriate before they are encouraged to change their behaviors.
- Social, economic and environmental factors- Poverty, unemployment and access to resources can have a strong influence on the intervention. Other priorities, such as stress, illness and family, also may get in the way of making lifestyle changes.

While all interventions will encounter unique barriers, you can learn from others' experiences. Barriers that have been encountered in other supportive relationship interventions are summarized below:

- Recruitment strategies and materials may need to be modified to suit the needs of the particular individuals or families you are working with in terms of culture, language, reading level or other characteristics.
- Participant contact information needs to be updated frequently. Cell phone numbers, e-mail addresses and physical addresses may change frequently.
- While support may increase, efforts to change behavior may remain unsuccessful if there is an absence of policies, environments, promotions or programs supporting those healthy behaviors.
- Transportation may not be available to all participants.
- The many responsibilities and stressors of families that may inhibit their ability to take part in activities. Interventions may need to consider parental work schedules, religious holidays and other commitments in developing their schedule of activities. Incorporating intervention activities into existing family patterns and schedules and providing programs that meet the needs of individuals of multiple ages, as well as having the support interventions at worksites, schools or in community settings where participants naturally gather, can increase the likelihood that families will be able to participate.
- Simply providing information to participants may not translate into utilization of the materials. It may be necessary to clearly explain how the materials can be helpful and to describe specifically how to use them. Opportunities for dialogue and ongoing encouragement are strengths of supportive relationships interventions.
- Staff may not be comfortable in making supportive phone calls to participants' homes. Training may be helpful in providing staff with reinforcements or strategies to overcome their discomfort.
- In some groups or communities there may be social barriers to colorectal cancer prevention and screening. Supportive interventions work with

- community members and organizations to develop strategies to encourage support for lifestyle behavior changes.
- In faith-based organizations, leaders may not want to be involved in certain aspects of the intervention or believe that it is inappropriate to share health messages from the pulpit.
 - In many small communities, worksites or faith-based settings it may be difficult to maintain confidentiality, particularly in smaller congregations or rural communities that may have fairly dense social networks.
 - In rural communities it may be difficult for people outside the community to be effective in delivering interventions.
 - It is difficult to determine which individuals may respond better to different types of supportive relationships intervention strategies.
 - Although health care providers generally believe in the importance of counseling, patients or clients may not get all the support they need in the limited time they spend with the health care provider. In addition to having limited time during an office visit, health care providers may not have training in behavior change strategies.
 - Physician perceptions that many patients do not follow their recommendations may limit their desire to engage in supportive interventions. Physicians may also be hesitant in providing this type of support because of inadequate reimbursement for counseling. It may be helpful to expand the provision of this type of formal support to others in the medical care system.

Plan your evaluation methods and measures

- *Pre-test your intervention strategies*

Use focus groups or individual interviews with community members to ensure the strategies are appropriate for the intended audience. When testing the strategies, consider how well they are understood as intended, whether the information is clear, whether the information is perceived as useful, whether the participant perceives the activities to be supportive and how well the information or activities are recalled or remembered.

- *Consider your evaluation strategy*

In order to determine if your supportive relationships intervention is working, you will need to evaluate your efforts. It is important to design your evaluation in the planning phase of your intervention because you will need to be able to measure change in order to measure the impact of your intervention strategies. To measure change, you will need to have an idea of what is happening right now.

As with all interventions, it is useful to consider process, impact and outcome evaluation. Process evaluation enables you to assess if your program is being implemented as intended. You might consider collecting registration and attendance forms to determine who is, and is not, taking part in your program. This information can also provide information on how frequently individuals are participating. It is also useful to collect information on how satisfied individuals are with the various program activities and materials. With community support interventions, it is also useful to assess the process used to develop and plan the various activities.

In order to assess the impact of your activities, it is important to develop intermediate outcomes (changes in attitudes, perception of support for changing behaviors, level of comfort discussing screening with health care professionals, readiness to make these behavior changes) and long-term outcomes to assess. It is important to develop these intended outcomes and related evaluation questions with input from all partners.

You might consider collecting information through the use of standardized surveys which can be given face-to-face at the program site, in individuals' homes or over the phone. Keep in mind that contact information changes frequently so it must be kept up-to-date. These surveys may collect information on changes in the levels of the various types of social support thought to impact changes in healthy behaviors (informational, tangible, or emotional/appraisal), as well as changes in behavior. In addition, surveys should include items to assess exposure to interventions and utilization of materials. The ways you choose to track behavior will depend on a number of factors, including resources, time, personnel available and the appropriateness of the measure for the setting.

Remember to focus evaluation on the objectives of the intervention. If the objective was to increase tangible support, it is important to assess tangible support. It may be useful to assess if these changes in support influenced readiness to change lifestyle behaviors.

- *Challenges to evaluating supportive relationship interventions*

There are several challenges in evaluating supportive relationships interventions that should be considered:

- It is often difficult to establish causality. Some individuals might have changed their colorectal cancer-related behaviors on their own or through relationships with others that were not part of the intervention. Therefore, it is important to get as much information as possible about the reasoning behind changes made.
- It is difficult to attribute a change in colorectal cancer-related behaviors to one particular intervention.
- When the supportive relationships strategy is used along with other strategies (the most effective way to create change), it is difficult to figure out which intervention strategies led to the changes that were observed in the evaluation.