

Title of Intervention: A Cancer Risk Appraisal Package to Increase Employee Screening Compliance

Intervention Strategies: Individual Education

Purpose of the Intervention: To increase employees' compliance with colorectal cancer screening recommendations

Population: Federal employees aged 40 and older

Setting: Federal agencies in Washington State; worksite-based, home-based

Partners: Local university

Intervention Description:

- Individual Education: The intervention group was mailed a cancer risk appraisal package, which included two letters tailored using information from a baseline survey. The first letter listed six risk factors (age, family history, health history, high fat intake, low fiber intake, and physical activity) for colorectal cancer along with the employee's risk of getting colorectal cancer (categorized as normal, moderate or high) compared to their peer group. The second letter provided general facts about colorectal cancer including the importance of the screening and the availability at the worksite clinic.

Theory: Not mentioned

Resources Required:

- Staff/Volunteers: Staff to create and mail package
- Training: Not mentioned
- Technology: Computer, printer
- Space: Not mentioned
- Budget: Not mentioned
- Intervention: Colorectal cancer risk appraisal letter templates, access to individual data, envelopes and postage
- Evaluation: Questionnaires, worksite clinic logs

Evaluation:

- Design: Randomized controlled trial
- Methods and Measures: A questionnaire assessed colorectal cancer-related beliefs and knowledge, perceived susceptibility to colorectal cancer, knowledge and perceived benefit of screenings and intention to get screened within the next year.

Outcomes:

- Short Term Impact: There were a significantly higher number of individuals in the intervention group that indicated that they intended to be screened than in the control group.
- Long Term Impact: The intervention group had a higher compliance rate for screening during the three-month follow-up period (not significant).

Maintenance: Not mentioned

Lessons Learned: Education of health care providers may contribute to increasing the participation rate in screening. Educational programs for working populations may be needed to help change employees' knowledge and misconceptions about screening.

Citation(s):

Lee CY. A randomized controlled trial to motivate worksite fecal occult blood testing. *Yonsei Med J.* Jun 1991;32(2):131-138.