

Title of Intervention: A Culturally Sensitive Colon Cancer Risk Counseling Intervention for Relatives of Colorectal Cancer Patients

Intervention Strategies: Supportive Relationships, Individual Education

Purpose of the Intervention: To increase adherence to screening guidelines among individuals with first-degree relatives who have had colorectal cancer

Population: Hawaiian adults, aged 40 and older, who had a family history of colorectal cancer in one first-degree relative

Setting: Hawaii; health care facility-based, home-based

Partners: Hospitals, local university

Intervention Description:

- Supportive Relationships: Participants received individual one-hour, face-to-face health counseling sessions with a health educator. The session included a tabletop flip chart to review general information about colorectal cancer, risk factors, colorectal cancer screening modalities and screening guidelines. Follow-up phone calls included a review of action plans, reinforcement of information about risk reduction options and further counseling if needed. Positive reinforcement was provided to those who had taken appropriate screening actions. If the participant had been screened by the time of the follow-up calls, the call was used to discuss results and answer any new questions.
- Individual Education: Participants received tailored materials, including a pocket folder with a personal risk profile and feedback about perceived benefits and barriers to screening, personal risk information, a personal screening recommendation chart and an action planning form.

Theory: Precaution Adoption Process Model

Resources Required:

- Staff/Volunteers: Nurse educator or trained health educator
- Training: Training in curriculum
- Technology: Not mentioned
- Space: Space for counseling sessions
- Budget: Not mentioned
- Intervention: Print tailored materials, tabletop flip chart, pocket folders, participant data, screening recommendation charts, action planning forms
- Evaluation: Access to patient medical records, statistical software, provider surveys, participant surveys

Evaluation:

- Design: Randomized controlled trial
- Methods and Measures:
 - Information about participants was collected by telephone interview to inform the tailored intervention materials, including family history of cancer, personal history of cancer, personal lifestyle risk factors, age, gender, ethnicity, education, income, marital status, religious affiliation, health insurance coverage and source of regular health care.
 - Patients completed a survey that assessed hypothetical mediating outcomes and participants' perceptions of the amount of new information learned, usefulness of the information, helpfulness of personalized booklets, rating of the nurse/health educator and other health behaviors, including physical activity, smoking, alcohol intake, other cancer screening and dietary behaviors.
 - Providers completed a survey to verify participants' self-reports of screening during the intervention and medical records were checked for verification.

Outcomes:

- Short Term Impact: Knowledge and perceived risk increased in the intervention group. The colon cancer risk counseling intervention was rated higher than the control for the amount of new information learned and for usefulness of the information.
- Long Term Impact: In the intervention group, there was a significant increase in screening adherence at four months.

Maintenance: Not mentioned

Lessons Learned: Future research should test the effectiveness of a colorectal cancer risk counseling intervention in real-world settings such as primary care settings where a family cancer history is part of routine health assessments.

Citation(s):

Glanz K, Steffen AD, Taglialatela LA. Effects of colon cancer risk counseling for first-degree relatives. *Cancer Epidemiol Biomarkers Prev.* Jul 2007;16(7):1485-1491.