

**Title of Intervention:** Wellness for African Americans through Churches (WATCH)

**Intervention Strategies:** Individual Education, Supportive Relationships

**Purpose of the Intervention:** To improve diet and colorectal cancer screening rates among African American adults

**Population:** African American adults

**Setting:** Churches in five rural eastern North Carolina counties; faith-based

**Partners:** None mentioned

**Intervention Description:** Participants were assigned to one of two intervention components: newsletters/video tapes or lay health advisors.

- Individual Education: The newsletters/video intervention included four targeted videotapes that showed members of their community discussing and engaging in healthy lifestyle behaviors. Three videotapes were mailed to participants' homes bi-monthly for the first six months; the fourth mailing was sent a few months later. In addition, three personalized computer-tailored newsletters were mailed to participants' homes bi-monthly for the first six months; the fourth mailing was sent a few months later. The intervention newsletters were tailored using baseline survey data. They addressed fruit and vegetable consumption, physical activity, colorectal cancer screening and dietary fat intake.
- Supportive Relationships: The other intervention strategy used lay health advisors to reach the targeted population, provide education and promote social support for behavioral change through the "natural" social networks of individuals in a given community. Lay health advisors were also expected to organize and conduct at least three church-wide activities focused on spreading information and enhancing support for healthy eating, physical activity and colorectal cancer screening.

**Theory:** Social Cognitive Theory, Transtheoretical Model, Health Belief Model, social support models

**Resources Required:**

- Staff/Volunteers: Volunteer lay health advisors, pastors, videographer
- Training: Training for lay health advisors
- Technology: Audiovisual equipment
- Space: Meeting space
- Budget: Not mentioned
- Intervention: Newsletter materials, postage, education materials, videos, access to baseline data
- Evaluation: Survey

**Evaluation:**

- Design: Randomized controlled trial
- Methods and Measures:
  - Surveys gathered demographic and anthropological information, diet, physical activity, colorectal cancer screening and feedback on the interventions.
  - Post-intervention focus groups assessed participant reactions to the intervention strategies.

**Outcomes:**

- Short Term Impact: The newsletter/video intervention significantly improved fruit and vegetable intake and recreational physical activity. Those who spoke with a lay health advisor were significantly more likely to get a non-invasive screening test.
- Long Term Impact: Among those 50 years and older who received the newsletter/video intervention, there was an increase in colorectal cancer screening.

**Maintenance:** Not mentioned

**Lessons Learned:** Future research should explore the optimal dose, delivery and duration of tailored and lay helping programs. Future interventions should also explore the feasibility and effectiveness of other lay health advisor training options, such as delivering more intensive training in a “retreat” prior to starting the intervention and then adding more booster sessions and follow-up contact. Further research is necessary to determine the optimal factors needed to enhance the capacity of individuals, social networks and organizations such as churches and other community groups to achieve healthier behaviors.

**Citation(s):**

Campbell MK, James A, Hudson MA, et al. Improving multiple behaviors for colorectal cancer prevention among African American church members. *Health Psychol.* Sep 2004;23(5):492-502.