

Title of Intervention: Project PREVENT

Intervention Strategies: Supportive Relationships, Individual Education

Purpose of the Intervention: To reduce behavioral risk factors for colorectal cancer among individuals with positive screenings

Population: Adults aged 40 to 75 who had a recent positive colorectal cancer screening

Setting: Boston, Massachusetts, Raleigh Durham North Carolina and Charlotte, North Carolina; home-based

Partners: Dana-Farber Cancer Institute, Duke Comprehensive Cancer Center

Intervention Description:

- Supportive Relationships: Motivational and goal-setting telephone sessions were delivered by a health educator. Follow-up calls were conducted over the following four months and tailored to the individual's level of motivation for change. Detailed computer-based counseling protocols were used to conduct counseling sessions.
- Individual Education: Computer-generated tailored progress reports were printed and mailed to reinforce the phone counseling and goals addressed. Tailored self-help materials were also created and mailed to individuals. These included a binder with a personalized health behavior profile, graphs, a tailored guidebook, a logbook to track goals, progress, to-do lists and behavior-specific tip sheets. The guidebook also contained detailed information about personal risk factors and suggested strategies for improvement. Some risk factors were addressed jointly to promote improvement in multiple areas at once.

Theory: Social Cognitive Theory

Resources Required:

- Staff/Volunteers: Health educators
- Training: Health educators were given training and ongoing supervision from an expert in motivational interviewing through an initial joint on-site meeting, ongoing conference calls and counseling reviews.
- Technology: Computers, printers
- Space: Space for health educators to conduct calls
- Budget: Not mentioned
- Intervention: Paper, envelopes, postage, binders, brochures, logbooks, tip-sheets, counseling protocols, Computer-assisted interviewing (CATI) program, guidebooks, telephone
- Evaluation: Survey, including measures from the food frequency questionnaire, the Nurse's Health Study questionnaire, the quantity frequency index for alcohol consumption and the Community Health Activities Model Program for Seniors (CHAMPS) Activities Questionnaire for Older Adults

Evaluation:

- Design: Randomized controlled trial
- Methods and Measures:
 - Surveys were used to obtain feedback on the intervention from participants, in addition to gathering behavioral risk factor data.
 - Health educators rated each participant's level of engagement or buy-in during phone calls using a subjective five-point scale.

Outcomes:

- Short Term Impact: Over half the participants were characterized as having "total buy-in." A higher level of worry was significantly associated with greater "buy-in," and having a greater number of personal risk factors at baseline was significantly associated with lower "buy-in." Individuals in the intervention group had a significantly greater improvement in healthy lifestyle behaviors.
- Long Term Impact: Not measured

Maintenance: Not mentioned

Lessons Learned: Developing strategies for health care providers to quickly screen for multiple risk behaviors for colorectal cancer is worthy of further investigation.

Citation(s):

Emmons KM, McBride CM, Puleo E, et al. Project PREVENT: a randomized trial to reduce multiple behavioral risk factors for colon cancer. *Cancer Epidemiol Biomarkers Prev.* Jun 2005;14(6):1453-1459.

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McBride CM, Puleo E, Pollak KI, Clipp EC, Woolford S, Emmons KM. Understanding the role of cancer worry in creating a "teachable moment" for multiple risk factor reduction. *Soc Sci Med.* Feb 2008;66(3):790-800.