

**Title of Intervention:** Increasing Colorectal Cancer Screening by Mailed Home Screening Kits

**Intervention Strategies:** Environments and Policies, Individual Education

**Purpose of the Intervention:** To increase colorectal cancer screening in Israeli adults

**Population:** Israeli adults aged 50 to 74

**Setting:** Haifa, Israel; home-based

**Partners:** Health care facilities, laboratory

**Intervention Description:**

- Environments and Policies: One intervention group received a free home screening kit and instructions by mail while the other intervention group received a card that allowed them to request that a free kit be sent by mail as soon as possible. A central lab processed the tests free of charge to individuals and sent results to the participants' primary health care provider.
- Individual Education: Half of the individuals in each intervention group received an informative leaflet describing colorectal cancer risk factors and the importance of early cancer detection.

**Theory:** Not mentioned

**Resources Required:**

- Staff/Volunteers: Staff to coordinate mailings
- Training: Not mentioned
- Technology: Not mentioned
- Space: Not mentioned
- Budget: Not mentioned
- Intervention: Screening kits, kit request cards, informative leaflets, paper, envelopes, postage
- Evaluation: Trained phone interviewers, surveys

**Evaluation:**

- Design: Post-test only
- Methods and Measures:
  - Compliance for testing and reasons for compliance or non-compliance were assessed by a telephone survey.
  - Participants' intent to be screened was compared in the group who received request cards with those who returned the request card but never completed the kit.
  - A review of the National Screening Program Database assessed screening compliance.

**Outcomes:**

- Short Term Impact: Not measured
- Long Term Impact: The overall compliance rate increased, with a slightly higher, but non-significant, response to the mailed kits over the kit request card. Women complied significantly more than men; older adults complied more than younger. The leaflet appeared to have no impact on screening compliance.

**Maintenance:** Not mentioned

**Lessons Learned:** Not mentioned

**Citation(s):**

Ore L, Hagoel L, Lavi I, Rennert G. Screening with faecal occult blood test (FOBT) for colorectal cancer: assessment of two methods that attempt to improve compliance. *Eur J Cancer Prev.* Jun 2001;10(3):251-256.