



Increase Participation in Colon Cancer Screening in African Americans: An Educational Intervention

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Background

- Colorectal cancer (CRC) is the third leading cause of cancer related deaths.
- Estimated new cases of CRC in 2017 is more than 135,000 and estimated deaths from CRC is more than 50,000.
- In the United States, the incidence rates of CRC have decreased, which is attributed to colon cancer screening; however this trend has not been seen in African Americans (AAs).

Clinical Problem

- AAs are at a higher rate for CRC.
- Experience disproportionate incidence and mortality rates from CRC than any other ethnic group.
- This health disparity is partially attributed to low uptake of CRC screening.

Clinical Question

- Will the implementation of an educational intervention facilitated by a nurse practitioner navigator increase CRC screening knowledge while increasing CRC screening participation among AAs.

Implementation

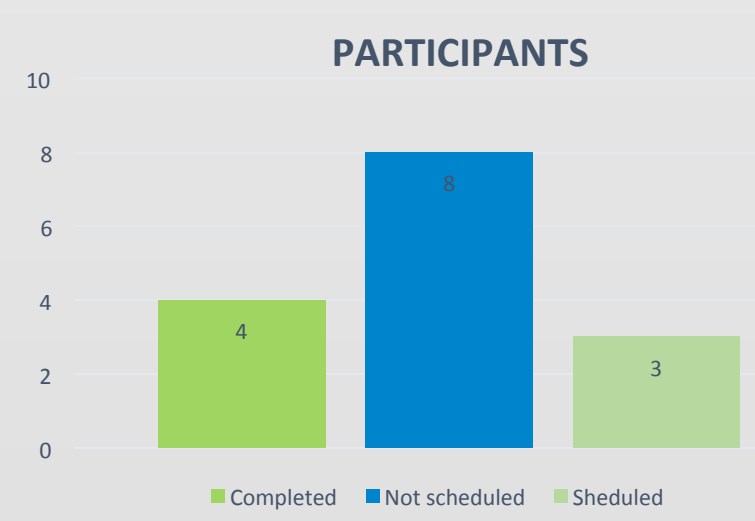
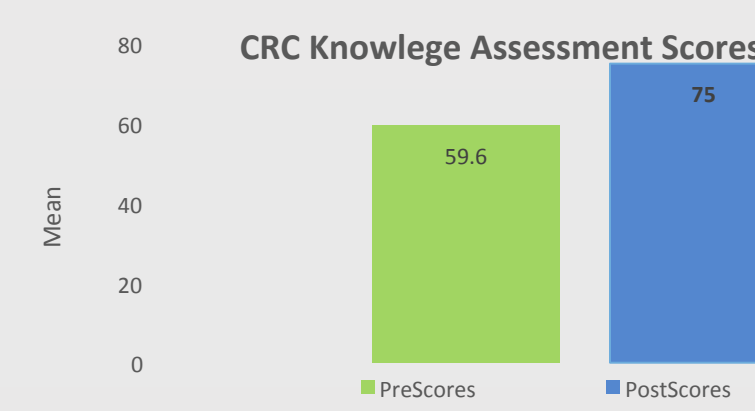
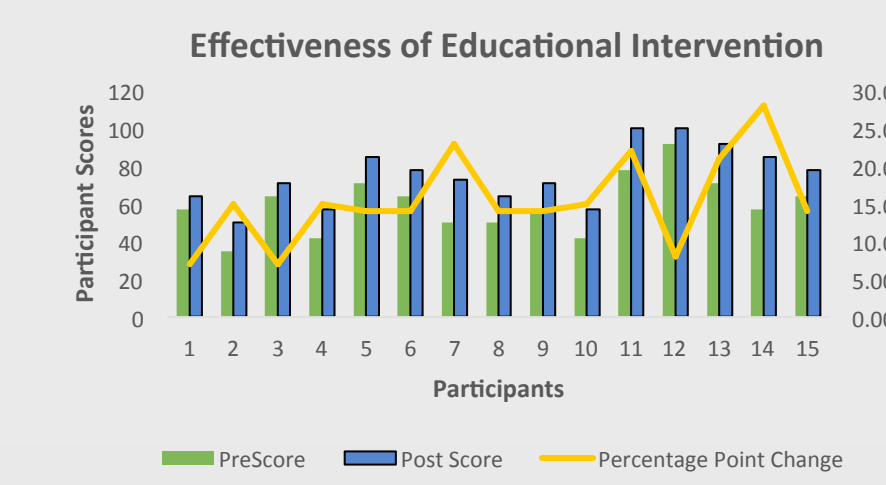
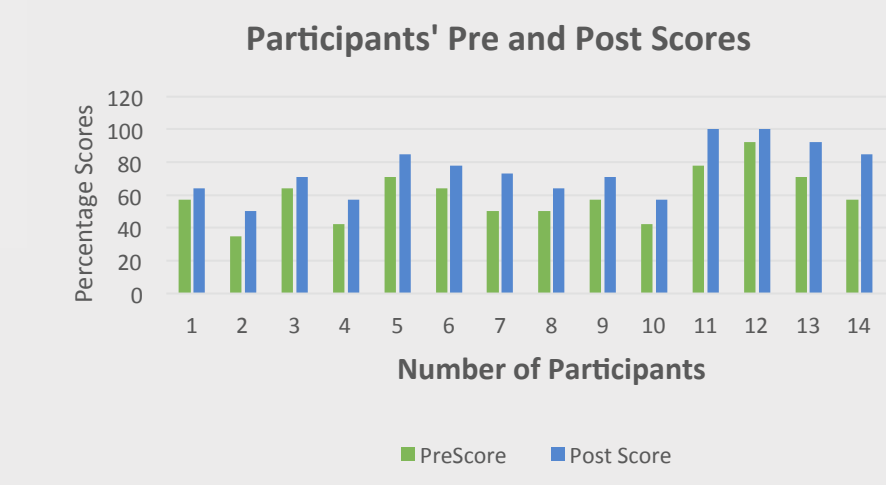
- Recruitment of participants were AAs aged 45-75 who were average risk (no family history CRC, without symptoms, and not up to date with CRC screening).
- Pre-CRC Knowledge Assessment Survey was administered.
- Educational intervention –PowerPoint presentation that consisted of overview of the anatomy and physiology of the colon, overview of CRC, risk factors for CRC, review of CRC screening methods, the importance of CRC screening, and the importance of good bowel prep.
- Post CRC Knowledge Assessment Survey was administered.
- Chart audit was completed to identify participants who scheduled or completed the colonoscopy.

Outcomes

- 63 participants referred, only 15 met criteria (n=15).
- All participants showed increase in post CRC Knowledge Assessment survey scores.
- All but three of the participants exceeded the benchmark.
- The intended outcome of increase participation was not met.

Practice Implications

- Health care providers must be culturally competent.
- Providers must be able to offer more than one screening modality understanding that the best screening test is the one likely to get done.
- More studies are needed to determine the impact of the role of the advanced practice nurse as the patient navigator on increasing CRC screening knowledge and uptake of CRC screening among AAs.
- Nurse leaders have to be involved in policy making decisions at local, state, and federal levels to ensure that all individuals have access to health care.
- Nurse leaders have to continue to identify strategies that culturally tailored interventions to get AAs involved in screening.
- Developing strategies to increase CRC screening in AAs should target both patients and health care providers.



References

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