

**UCLA  
FILIPINO AMERICAN  
HEALTH STUDY**

**Training Manual for  
*Colorectal Cancer Screening*  
Health Educators**

# **TABLE OF CONTENTS**

**Content and Process of the Discussion Group Session**

**Colorectal Cancer Screening Educational Curriculum**

**Introduction**

**Colorectal Cancer Screening, Awareness, Knowledge and Personal Experience**

**Facts on Colorectal Cancer and Importance of Screening**

**Getting Ready for a Stool Blood Test**

**Barriers to doing a Stool Blood Test**

**Facilitators to doing a Stool Blood Test**

**Conclusion**

**Racial/Ethnic Patterns of Colorectal Cancer in the United States**

**Health Educator Checklist**

## **CONTENT AND PROCESS OF THE DISCUSSION GROUP SESSION**

The discussion group sessions will be held at participating community organizations, churches, or at a private home. As the participants arrive, they will be greeted by the UCLA research staff, the health educator and the project liaison from the respective organization and be introduced to other participants, if needed. The UCLA research staff, health educator or project liaison will offer refreshments and ask the participants to be seated in a circle. We will allow 10-15 minutes for the participants to get to know each other and to get comfortable talking to the group. The health educator will follow a discussion outline (see attached educational curriculum) to encourage a group discussion on colorectal cancer screening. She will also provide information and will correct misinformation as needed.

An important component of this intervention will be the delivery of specific information and recommendations for screening. An annual stool blood test, sigmoidoscopy every 5 years and colonoscopy every 10 years will be introduced and recommended as screening tests for colorectal cancer. The proper way of doing a stool blood test will be demonstrated and group members will be encouraged to discuss their need to have a stool blood test with their physicians. Participants who have had a stool blood test prior to the intervention will be asked to describe their experience and any difficulties they may have encountered. During the group discussion, barriers to obtaining a stool blood test will be reviewed. The health educator will address especially those barriers that are pertinent to any of the group members by inviting opinions and advice from other group members. If needed, the health educator will counter and educate the group members in how to deal with each of these barriers, using an established format for response to these barriers. (See sample responses to barriers listed in the educational curriculum.) The health educator will make a strong recommendation to the participants to do a stool blood test every year since it is the easiest and cheapest method of getting screened for colorectal cancer.

The health educator will use a checklist to ensure, that all pertinent issues are addressed. On the checklist, the health educator will check off or note any additional issues that are discussed. We will use this information as process measures to describe the content of the intervention as it was actually delivered.

Finally, participants will receive an informational package in English and Tagalog which will summarize the information on colorectal cancer screening. Patients with no health care provider will also be given a letter of request to obtain a stool blood test from the Asia Pacific Health Care Venture (APHCV).

The objectives for the intervention with respect to knowledge, attitudes and behaviors are the following:

#### KNOWLEDGE:

*After the group session, participants will know:*

- That a stool blood test is a screening test for colorectal cancer
- That a stool blood test is a routine exam that should be done even if one has no symptoms
- Where they can get a stool blood test
- How to do a stool blood test
- When they will next need to do a stool blood test

#### ATTITUDE:

*After the group session, participants will understand that:*

- Cancer is not universally fatal
- Survival from cancer improves with early detection
- Cost and inconvenience of screening is worthwhile

#### BEHAVIOR:

*After the group session, participants will be able to:*

- Request for a Stool Blood Test
- Do a Stool Blood Test
- Have a strategy to obtain cancer screening on a regular basis

## **Outline of a 60-90 Minute Program to Encourage Colorectal Cancer Screening**

### **I. INTRODUCTION**

- ❖ Introduction of the *health educator*
- ❖ Explain purpose of the group discussion
  - In today's session we will talk about an important health issue among Filipino-Americans. We will be discussing colorectal cancer screening as well as behaviors and attitudes of Filipino-Americans toward this procedure. It is hoped that we can increase colorectal cancer screening rates through this educational session.

*The health educator will raise the following issues, encourage a group discussion, and provide information as needed.*

### **II. COLORECTAL CANCER SCREENING AWARENESS, KNOWLEDGE AND PERSONAL EXPERIENCE**

- ❖ What have you heard about colorectal cancer?
  - Colorectal cancer is a cancer occurring either in the colon or the rectum. The colon is the large bowel or large intestine while the rectum is the one that connects the large bowel to the anus.<sup>1</sup> (*Show poster with illustration of colon.*)
  - Colorectal cancer is the second largest cancer killer in the United States.<sup>1</sup>
  - Among Filipino males living in the U.S., 44% of those with colorectal cancer die within 5 years of diagnosis compared with only 14% of those with prostate cancer.<sup>2</sup> (*Show poster with graph on colorectal cancer survival rates.*)
  - Among Filipino females living in the U.S., 32% of those with colorectal cancer die within 5 years of diagnosis compared with only 19% of those with cervical and 15% of those with breast cancer.<sup>2</sup> (*Show same poster on survival rates.*)
- ❖ Do you know anybody who had or who has colorectal cancer?

---

<sup>1</sup> National Center for Chronic Disease Prevention and Health Promotion. Centers for Disease Control and Prevention (Atlanta, GA), 2004. (<http://www.cdc.gov/cancer/screenforlife/info.htm>).

<sup>2</sup> Surveillance, Epidemiology and End Results (SEER), 1988-1994.

❖ Would you know of any risk factors for colorectal cancer?

*(Show poster on risk factors).*

- Colorectal cancer is diagnosed most commonly among men and women who are 50 years of age or older. The risk of developing this cancer increases with age.<sup>1</sup>
- Those who have a personal or family history of colorectal polyps or cancer, inflammatory bowel disease or certain inherited cancer syndromes are at increased risk for colorectal cancer.<sup>3</sup>
- Other risk factors include: diet mostly from foods high in fat, especially from animal sources, physical inactivity, obesity, diabetes, smoking and alcohol intake.<sup>4</sup>

❖ What are the symptoms of colorectal cancer?<sup>3,5</sup>

*(Show poster on signs and symptoms of colorectal cancer).*

- Colorectal cancer may have no symptoms at all. But if present, these include:
  - Blood in the stool
  - Frequent stomach aches, pains or cramps
  - Change in bowel habits (e.g., constipation, diarrhea, decreased caliber of stools)
  - Weight loss
  - Iron deficiency anemia

❖ Knowing that colorectal cancer may occur without any symptoms, regular screening is important, particularly for those at risk, in order to detect cancer at an early stage when it is most amenable to treatment. Would you know of any screening test of colorectal cancer? Have you heard of any procedure that can be done to detect colorectal cancer during its early stages? Mammography is an example of a screening test for breast cancer. Is there anything similar for colorectal cancer?

- The types of colorectal cancer screening tests are: Fecal Occult Blood Test, Flexible Sigmoidoscopy, Colonoscopy, and Double-Contrast Barium Enema.

❖ Have you heard the term **stool blood test** or fecal occult blood test (FOBT)?

❖ What is a stool blood test? How does it check for colorectal cancer?

- The **Fecal Occult Blood Test** or **Stool Blood Test** is a screening test that could detect blood in the stool that is not visible to the naked eye. Since colorectal cancer may bleed, a positive stool blood test may indicate the presence of this type of cancer.

---

<sup>3</sup> Maxwell, AE. Colorectal Cancer Lecture, 2004.

<sup>4</sup> American Cancer Society, Inc.

([http://www.cancer.org/docroot/CRI/content/CRI\\_2\\_2\\_2X\\_What\\_causes\\_colorectal\\_cancer.asp?nav=cri](http://www.cancer.org/docroot/CRI/content/CRI_2_2_2X_What_causes_colorectal_cancer.asp?nav=cri)).

<sup>5</sup> Centers for Disease Control and Centers for Medicare and Medicaid Services. Colorectal Cancer Screening for People with Medicare. March 2003.