

Increasing Appropriate Colorectal Cancer Screening: Interventions Engaging Community Health Workers

Summary of Community Preventive Services Task Force Recommendation*

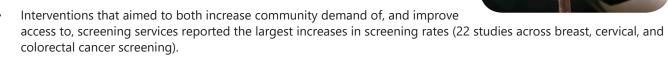
The Community Preventive Services Task Force (CPSTF) recommends interventions that engage community health workers to increase screening for colorectal cancer by colonoscopy or fecal occult blood test (FOBT). This intervention approach is cost-effective for screening with colonoscopy and may also result in net cost savings.

The CPSTF also recommends interventions that engage community health workers for breast and cervical cancer screening.

Major Findings*

The CPSTF recommendation is based on evidence from a systematic review of 66 studies (search period through July 2017). Included studies evaluated intervention effects on breast (36 studies), cervical (29 studies), or colorectal (17 studies) cancer screening use.

• Interventions that engaged community health workers, independently or as part of a team, increased colorectal cancer screening when compared with no intervention or usual care (17 studies).



Interventions that engage community health workers to increase colorectal cancer screening are typically implemented in underserved communities to improve health and can enhance health equity.

What are Interventions Engaging Community Health Workers?*

Interventions that engage community health workers to increase colorectal cancer screening implement one or more intervention approaches reviewed by the CPSTF. These approaches are divided into two strategies: increasing demand for, and improving community access to, cancer screening.

Cancer Screening Intervention by Strategy	
Increase Community Demand	Increase Community Access
 Group Education One-on-one Education Client Reminders Small Media 	 Interventions to Reduce Structural Barriers Reducing Administrative Barriers Assisting with Appointment Scheduling Providing Transportation Providing Language Translation Providing Child Care



Community

Facts about Colorectal Cancer

- Colorectal cancer is the third most common cancer in men and in women.¹
- Screening can find precancerous polyps—abnormal growths in the colon or rectum—so they can be removed before turning into cancer. Screening also helps find colorectal cancer at an early stage, when treatment often leads to a cure.²
- Among adults aged 50 to 75 years, one quarter have never been screened.³



Learn More

*Read a complete summary of the systematic review and CPSTF Finding

www.thecommunityguide.org/findings/cancer-screening-interventions-engaging-community-health-workers-colorectalcancer_

CDC Colorectal Cancer

https://www.cdc.gov/cancer/colorectal/

National Cancer Institute, Cancer Control P.L.A.N.E.T.

https://cancercontrolplanet.cancer.gov/planet/

¹Centers for Disease Control and Prevention. Colorectal Cancer Statistics. Atlanta (GA): 2019. Retrieved from: <u>https://www.cdc.gov/cancer/colorectal/statistics/</u> ²Centers for Disease Control and Prevention. Screen for Life: National Colorectal Cancer Action Campaign. Atlanta (GA): 2019. Retrieved from: <u>https://www.cdc.gov/cancer/colorectal/sfl/</u>

³Centers for Disease Control and Prevention. Quick Facts Colorectal Cancer Screening in U.S. Behavioral Risk Factor Surveillance System – 2016. Atlanta (GA): 2019. Retrieved from: <u>https://www.cdc.gov/cancer/colorectal/pdf/QuickFacts-BRFSS-2016-CRC-Screening-508.pdf</u>

Established in 1996 by the U.S. Department of Health and Human Services, the Community Preventive Services Task Force (CPSTF) is an independent, nonfederal panel of public health and prevention experts whose members are appointed by the director of CDC. The CPSTF provides information for a wide range of decision makers on programs, services, and other interventions aimed at improving population health. Although CDC provides administrative, scientific, and technical support for the CPSTF, the recommendations developed are those of the CPSTF and do not undergo review or approval by CDC. Find more information at <u>www.thecommunityguide.org</u>.

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