



CANCER PREVENTION & RESEARCH INSTITUTE OF TEXAS

Award ID:
PP180031

Project Title:
Get FIT to Stay Fit. Stepping Up to Fight Colorectal Cancer in the Panhandle.

Award Mechanism:
Evidence-Based Prevention Programs and Services

Principal Investigator:
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Entity:
Texas Tech University Health Sciences Center

Lay Summary:

Abstract and Significance Need: Even though more adults are getting recommended colorectal cancer (CRC) screening tests, the under and uninsured generally have the lowest screening rates. This is common in low income, minority and rural populations. The Texas panhandle has unique demographics due to higher uninsured populations and large number of refugees from other countries in the area. This region is designated by the Council of Governments as COG1 and 22 counties out of the 26 are designated as medically underserved areas, similarly, 23 counties are designated as health professional shortage areas by the U.S. Department of Health and Human Services. CRC is a significant burden for the communities in the Panhandle. Ten counties have higher CRC incidence rates when compared to the rest of Texas; six of those counties are currently not part of our program service area. CRC cancer mortality rates among Hispanics are higher than the rest of the state. African Americans represent only 5.6% of the region's population but have the highest CRC cancer mortality rate which is also much higher than the rest of Texas. The overall cancer mortality rates in COG1 are higher than the rest of the state. Major factors include large uninsured populations who are not screened leading to progression of precancerous lesions into invasive cancer. The majority of the counties in COG1 are rural, and rural health priorities have not changed in the last decade with access to health care being identified as high priority followed by emergency services, primary care and health insurance. Early detection through screening can prevent CRC morbidity and mortality. However, the latest Texas Behavioral Risk Factor Surveillance System data on adults ages 50 to 75 claim only 46% of people in the Panhandle are up to date with screening. Our project is intended to continue to improve the screening rates for CRC in the entire Panhandle area totaling 26 counties. Overall Project Strategy: The name of the project is Get FIT to Stay Fit, Stepping up to fight Colorectal Cancer in the Panhandle. We have successfully adapted an existing multi-component evidence-based program to meet the needs of a much more rural and diverse region. Based on the results of our current program which has achieved a 79% test completion rate, we will continue to address two critical barriers to screening: 1) Lack of knowledge and awareness of CRC and CRC screening and 2) Lack of access to screening and diagnostic services. We will target low income, undereducated and minorities including refugees through our program components: Outreach/Education via CHWs, in-house Outreach Coordinator, social and local media; No cost CRC screening tests and clinical services to under/uninsured residents of the region; Patient navigation for

supporting test completion and treatment to care. Specific goals: 1) Increase community awareness and knowledge about CRC and CRC screening 2) Increase CRC screening rates in underinsured and uninsured population of COG1-all counties in the Panhandle region 3) Increase uptake of diagnosis and treatment services for CRC to reduce the numbers of advanced cases 4) Build a sustainable screening, diagnosis and treatment network for CRC 5) Disseminate the Get FIT to Stay Fit project's results and outcomes. Innovation: Aspects of the program that are innovative include integrating the program components that targets the uninsured while recruiting participants from where they live, seek health care and socialize. This has been successful with the diverse refugee groups which led to the creation of educational videos in four different languages. We will assess dietary/health habits to gather primary data that will assist with future CRC educational and screening activities. African Americans are at high risk for CRC and we will offer screening at age 45 and work with community leaders to address barriers to screening through further adaptations to our educational materials. New features include: 1) Expand to additional counties in the panhandle that were not part of the original grant which will be all 26 counties in the Panhandle region 2) Facilitate repeat screening of enrolled participants, FIT/colonoscopy eligible 3) Facilitate the creation of a CRC screening coalition to sustain screening services and referrals to care 4) Facilitate the dissemination of the Get FIT to Stay Fit program, focusing on applicability to other rural regions in Texas. 5) Offer diagnostic colonoscopies to uninsured/underinsured patients referred by area PCPs 6) Offer endorectal ultrasound screening to patients with positive rectal polyps/neoplastic lesions. Significance and Impact: The program will improve CRC screening rates, increase awareness in the region and reduce the incidence of invasive CRC in COG1. We will work with our partners to implement local policies through the formation of a CRC coalition to foster sustainable screening and treatment services beyond CPRIT funding.