

# The Fayetteville Area Inter-Faith Commitment to Colorectal Health Awareness and Cancer Reduction in African Americans (The FAITH Project)

Phyllis D. Morgan, PhD, APRN, BC  
Assistant Professor, Department of Nursing  
Fayetteville State University

# PROJECT TEAM MEMBERS

- Phyllis D. Morgan, RN, PhD – Principal Investigator
- Indira Tyler, RN, M.S. – Co-Principal Investigator
- Minister Rosie McMillan, M.A. - Project Coordinator
- Dr. John R. Jones, Gastroenterologist – Primary Physician Consultant
- Dr. Dantzler, Internal Medicine Physician
- Dr. Carr-Johnson, Family Practice Physician
- Dr. Terri Moore-Brown, Social Worker
- Dr. Joshua Fogel, Biostatistician

# Supporters of the Project

- Funded by DHHS Centers for Medicare and Medicaid Services 110CMS300100/01
- Fayetteville State University Department of Nursing
- American Cancer Society
- Local churches and ministers

# The FAITH Project

- CRC increases with age - 50 years and older
- CRC 3<sup>rd</sup> leading cause of cancer deaths among African Americans
- 5-year survival rate
  - 64% Caucasians
  - 55% African Americans

(ACS, 2007)

# The FAITH Project

- CRC 2015: 4<sup>th</sup> leading cause of cancer deaths in NC (ACS, 2005)
- 59.2% NC residents have not had a flexible sigmoidoscopy or colonoscopy w/in 5 years (Battle, 2004)

# The FAITH Project

- The purpose of this educational intervention is to increase CRC screening for colonoscopy among African Americans within the Fayetteville area.

# The FAITH Project

- The expected outcomes of this project are as follows: 1) Participants will have an increased knowledge for colorectal cancer prevention and screening modalities; 2) Decrease in cancer fatalism; and 3) Increase in colonoscopy colorectal screenings.

# The FAITH Project

- Quasi-experimental design with pretest and posttest measures
- Prospective randomized control delay design with the full educational program as the experimental intervention.
- Black churches have been randomly assigned to 2 groups, colorectal cancer intervention group or delayed control group. We plan to recruit an equal number of participants in each group for a total of 500 participants.



# Hypotheses

- H1: The culturally targeted colorectal health educational intervention will increase colorectal health knowledge among participants at a greater level than the control group of a standard video and brochure on colorectal cancer.
- H2: The culturally targeted colorectal health educational intervention will decrease cancer fatalism among participants at a greater level than the control group of a standard video and brochure on colorectal cancer.
- H3: The culturally targeted colorectal health educational intervention will increase colorectal screening rates among participants at a greater level than the control group of a standard video and brochure on colorectal cancer.

# The FAITH Project

- Inclusion criteria: 1) African Americans 50 years of age and older; 2) resides within the Fayetteville/Cumberland county area; 3) willing to participate in a church based educational program in a group setting; 4) willing to participate in a telephone follow-up interview to discuss screening for CRC; and 5) able to provide verbal and written consent to participate in the project.

# The FAITH Project

- Treatment Group
  - F/U 1 month fact sheet mailed, 2 months phone call, 3 months phone call, 6 months phone call or until postcard is received
- Delayed Intervention Group
  - 3 months later full intervention
  - F/U 1 month fact sheet mailed, 2 months phone call, 3 months phone call, 6 months phone call or until postcard is received

# The FAITH Project

- \$45 incentive
  - \$25 after participating in the educational program
  - \$20 after return of the validated post cards

# Pre-Post Test Questionnaires

- Demographics (Personal and Medical Characteristics)
- Cancer Fatalism
- Colorectal Cancer Knowledge
- BriefRCOPE (Religiosity/Spirituality)

# The FAITH Project

- 66 participants recruited
  - Women 39
  - Men 27
- Age (R=50-92 y.o; M=64.89 y.o; SD=8.677)
- Religious Affiliation
  - Baptist 64
  - Non-Denominational 1
  - Missing 1

# The FAITH Project

- Marital Status

– Married	41	62.1%
– Single and Never Married	5	7.6%
– Separated	3	4.5%
– Divorced	8	12.1%
– Widowed	9	13.6%

# The FAITH Project

- Household Income

– Less than \$9,999 per year	6	9.1%
– \$10,000-19,999 per year	13	19.7%
– \$20,000-29,999 per year	2	3.0%
– \$30,000-39,999 per year	9	13.6%
– \$40,000-49,999 per year	10	15.2%
– \$50,000-59,999 per year	14	21.2%
– \$60,000-69,999 per year	2	3.0%
– \$70,000 or greater per year	6	9.1%
– Missing	4	6.1%



# The FAITH Project

- Educational Status

– Less than high school	9	13.6%
– High school diploma	29	43.9%
– Associate degree	10	15.2%
– Bachelor's degree	13	19.7%
– Master's degree	3	4.5%
– Missing	2	3.0%

# The FAITH Project

- Employment Status

– Full-time	16	24.2%
– Part-time	4	6.1%
– Unemployed	5	7.6%
– Retired	41	62.1%

# The FAITH Project

- Health Insurance Coverage
  - No      6      9.1%
  - Yes     60     90.9%

# The FAITH Project

- Have you ever discussed CRC screening with your physician?

– No	14	21.2%
– Yes	52	78.8%

# The FAITH Project

- Have you discussed CRC within the past year?
  - No 32 48.5%
  - Yes 34 51.5%

# The FAITH Project

- Have you ever been tested for CRC?
  - No 16 24.2%
  - Yes 49 74.2%
  - Missing 1 1.5%

# The FAITH Project

- Have you been tested for CRC within the past year?

– No	43	65.2%
– Yes	23	34.8%

# The FAITH Project

- Have you ever had a FOBT?
  - No      20      30.3%
  - Yes     46      69.7%



# The FAITH Project

- FOBT within the past year
  - No      40      60.6%
  - Yes     26      39.4%

# The FAITH Project

- Have you ever had a colonoscopy?
  - No 16 24.2%
  - Yes 48 72.7%
  - Missing 2 3.0%

# The FAITH Project

- Colonoscopy within the past year
  - No 42 63.6%
  - Yes 23 34.8%
  - Missing 1 1.5%

# THE FAITH PROJECT: Lessons Learned

- Time is of essence
  - Questionnaires were condensed
  - No more than 3 hours of complete time
- Incentives are essential
- Connecting with the community is important
  - Connect with ministers and church congregants
  - Health care ministry is important
  - Establishing Trust is important
- Challenging to implement program during summer months
- Coincidentally more churches from intervention vs control

# Questions

# Thank You!