

Using Intervention Mapping to design a health education program to increase colorectal cancer screening in Puerto Rico

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The University of Texas Health Science Center at Houston, The University of Puerto Rico Medical Sciences Campus The project was supported by: U54 UPR/MDACC Partnership for Excellence in Cancer Research: U54CA096297(UPR): U54CA096300 (MDACC).



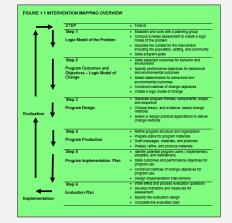
Background

- Colorectal cancer (CRC) is the second most common cancer in both men and women in Puerto Rico (PR).
- The U.S. Preventive Services Task Force recommends screening for CRC using fecal occult blood testing, sigmoidoscopy, or colonoscopy in adults 50 to 75 years of age.
- · Although largely preventable through screening and treatment of precancerous polyps, CRC incidence and mortality continue to increase in PR, while screening rates remain low1.

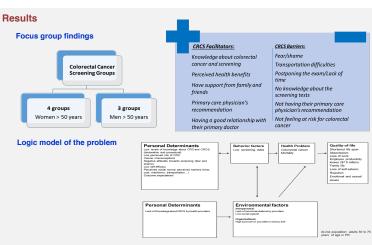
CRC is the 2nd highest cause of cancer-related mortality in women and third highest in men.

Methods

- · We used Intervention Mapping (IM), a systematic method for developing theory and evidence-based interventions using communitybased participatory methods.
- Reviewed community clinic data on CRCS.
- Conducted literature review of factors influencing CRCS.
- Completed a qualitative study including focus groups and interviews with community members and healthcare partners to identify:
 - · Community needs and resources.
 - · Specific sub behaviors related to CRCS (performance objectives) and determinants (factors) of CRCS.
- We developed matrices of change objectives by crossing performance objectives and determinants. These matrices drove decisions about intervention content, methods, materials and strategies.



1 Puerto Rico Comprehensive Cancer Control Plan: 2015-2020.Puerto Rico Cancer Control Coalition and Puerto Rico. Comprehensive Control Program San Juan, Puerto Rico, December 2014.



Matrix of change objectives

for p

Performance Objectives	KNOWLEDGE 1. About CRC 2. About CRCS 3. About insurance	BALANCE	EXPECTATIONS	EFFICACY/SKILLS	PERCEIVED SOCIAL NORMS	ATTITUDES: Perceived survivability
PO9.0T SCREND FOR COLONOSCOPY	198. Stear that colonated by a bit does every 10 years for according to the for according to the stear for according to the stear respect to complete an colonated provided to the togs for colonated to the get a referral from doctor	0995 States the advantage of doing colonatory 0996, Ballives there and a state of the state and a state of the state of the state of the state of the state of the state of the state of the state DBML to inverse DBML to inv	0598. Expects that (The/We gets a colonescopy the risk of CRC or detact it early evolution of the the thermal of the thermal colonoccopy will allow them to before having to before having to get another one (if negative)	529. Expresses confidence in ability to identify with him/her to apt 5590. Expresses confidence in prep 559. Expresses confidence in ability to complete colonoscopy	NVB. Believes that other adults like them identify parson identify parson them to the appt. SNBb. Believes that other a adults like them get colonoscopy SNBC. Believes like them correctly	ATT93. Believes that colonascop is useful and important identify cancer and polyag (pre- cancer) ATT95. Believes that correctly completing completing more accurate test ATT96. Believes that the test results will give that measure that searn if that searn if destected early destected early dest curred

Identification of Methods and Practical Applications

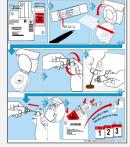
Used two overarching methods containing other methods: Entertainment Education and Behavioral Journalism. We develop messages and educational materials including a tailored interactive multimedia intervention, newsletters and printed materials.

	Change Objective	Methods	Practical Applications (Strategies)	Components	Ideas for materials - existing	Ideas for materials - create
patients	K4, K5b, K8b, K8c, K9b, K9c	Images	20. Images of instructions for FIT/FOBT/Prep (including locations	Image with voiceover (video)	Images of tests &	
				+ comparison chart	instructions (Coronado)	
				Infographics		
patients	K2a, K2b, K5a, K8a, K9a	Persuasion, modeling, cues		Discussion, Infographics,		(video) Risk curve
				video		
patients	\$2a, \$2b, \$3, \$5a, \$8a, \$9a, 087, 088a, 089a,	Consciousness reising	1.+2. including info on risk of CRC	Infographicss / HE small		
	OE1, OE11b, OE3, ATT3a, ATT2, ATT4, ATT9a,			media/newsletter		
	ATTER					
patients	ATTSD, ATT9a, ATT9a	Modeling	14. Person who had had CRC + detects it early	Video		2. Testimonial patient - CR
						detected early
patients	ATTER, ATTER, ATTEC, ATTER, ATTER, ATTEC,	Modeling	26. Person who has been screened - expert patient	Video		3. Testimonial patient -
	ATT9d, ATT9e,					getting CRCS
atients	K1, K2a, K2b, K2c, K3, K4, K5a, K5b, K6, K7,	Behavioral Journalism: information, skill	25. Lecture, Newsletter or magazine using interviews,	newsletter interviews,		Interviews (TV, radio, news
	KSa, KSb, KSc, K9a, K9b, K9c, K9d, K10a, K10b,	training, social reinforcement, modeling,	Newspaper: letters to the director, editorial commentary.	scripts		tlak shows, etc.)
	K11a, K11b, K11c, SE1a, SE1b, SE1c, SE2a,	tutoring, discussion, concealing, vicarious	Display print: billboards, posters, brochures, flip-charts. Radio:			
	\$E26, \$E3, \$E4, \$E5, \$E6, \$E7, \$E8a, \$E8b, \$E8c,	reinforcement, intensive role model histories	news itemps, interviews , (PSAs). TV: news stories, talk shows,			
	\$59s, \$59b, \$59c, \$510, \$511s, \$511b, \$511c, ;		interviews, entertainment education.			
	5N1, 5N2, 5N3, 5N4, 5N5, 5N6, P5N7, 5N8#,					
atients	D82, 087, D886, D896, O82a, O826, O82c, O87,	Modeling w/Reinforcement	15. Video of pt talking w/physician about CRC	video	VLP script	4. video scene PCP -
	OE115, SE1#, SE15, SE1c, SE2#, SE25, SE3, SE7,					patient(s) CRC/CRCS
	\$N2, \$N3, ATT2, ATT3a, ATT3b, ATT5d, ATT7					

Program production

- · Reviewed of existing programs and materials that met change objectives
- · Chose tailored interactive multimedia application and print material as delivery channels
- Developed design documents for new materials
- Developed the flow chart, script, images, interactive segments, etc. for the tailored program
- Develop interview guides to be used for developing behavioral journalism stories for newsletters





Universidad de Puerto Rico

Recinto de Ciencias Médicas

Material from Dr. G. Coronado and Kaise Permanente Center for Health Research

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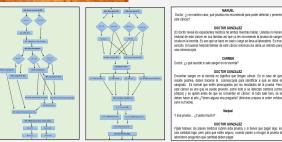
DOCTOR GONZALEZ

a) Dis expectentes medicus un emissio inscrinta mensio e câncer en sus familias así que yo les recomiendo la prueba reta. Es uno que se hace en case y luego se lleva al laborado man historial familiar de este câncer enfonces les dará un re

CARMEN n mi excreta?

stro caso, qué p

vda para poder delectar v preve



Manipel DOCTOR GONZALEZ te Manuel, los planes módicos cubren esta prueba, y si tenes que pagar algo, es a cantidad baja, pero para que estes seguro, cuando pasen a recoger la prueba al costoro pregumen que cantidad decen pagar.

Sample of Script

Sample of Flow Chart

Next steps

- · Finish developing the intervention program
- Conduct usability testing
- Implementation
- Evaluation (Outcome and cost effectiveness)

Conclusion

Guided by IM principles and steps and using entertainment education and behavioral journalism, we used community level information, existing literature, theory, and new data to develop an intervention that will likely influence CRCS in PR.

Acknowledgements

- Association of Primary Health Care of PR
- Recruitment of clinics for colorectal cancer screening study
- HealthproMed and Castañer General Hospital
- Recruitment of focus groups participants
- Puerto Rico Colorectal Cancer Coalition

Education and colorectal cancer and screening educational materials

University of Puerto Rico (UPR) Medical Services Office and the UPR Bayamón Educational Services Program and the Cancer