Crack the Walnut! How Community Outreach Research Coordinators Can Empower African American Men to Come Out of Their Shell to Make an Informed Decision About Prostate Cancer Screening, a Cancer Prevention Project


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1. Background

American Cancer Society acknowledges the importance of an informed decision-making (IDM) process for prostate cancer screening (PCS). Prostate cancer incidence is 1.6 times higher in African American (AA) men compared to Caucasians, with mortality rate 2.4 times higher. AA men are frequently diagnosed with an advanced stage because they’re less likely to have screenings. Discussing the advantages/disadvantages of PCS increases awareness, but many physicians find it difficult to provide comprehensive, unbiased education to patients. PCS outreach programs with an investment in patient navigation are needed to empower AA men about their choices and increase informed decision making. To reach these objectives, a project was developed to assess “Education and informed decision making for prostate cancer screening in a high-risk African American community”.

2. Goals

A. To improve knowledge of prostate cancer in a high-risk population.
B. To empower men to make an informed decision about prostate cancer screening and provide information about the risks/benefits of PCS.

3. Solutions and Methods

Hosting the research project:

- Research Coordinator was responsible for overseeing different aspects of the program. Working closely with medical residents, researchers, physicians, navigators, patients, and managing data entry.
- A research project was conducted during the “For Men Only” health fair, where only men can participate to foster an environment of comfort and safety.
- South Pointe Hospital is located in a high-risk community, has free parking and is on a bus line. South Pointe Hospital has a positive reputation within the community with an emphasis on addressing health and wellbeing in Warrensville Heights, OH, and surrounding communities.
- The event was marketed/advertised using community favored stakeholders and various media platforms (radio, flyers at barbershops and other trusted community organizations, mailers).

Protocol:

- All patients were given an educational presentation about PCS, including all aspects of IDM, aimed at increasing the patient’s ability to make an informed decision regarding PCS.
- Pre/post-tests were given to evaluate improved knowledge about PCS.
- After the educational intervention, patients had the option to complete free (grant-funded) same day screening (PSA/ DRE) onsite.
• Patients were navigated after the event to ensure appropriate follow-up according to screening results.

4. Outcomes

1. The test consisted of 15 questions to give information about the risks/benefits of PCS. The analysis resulted in a median improvement of +3. (Median Pre=9 Post=12)
2. The majority of patients (85%) indicated they wanted screening.
3. Overall, 82% of patients favored IDM before screening.
4. Most patients (73%) found the information “very helpful” (within a 5-point Likert scale) in decision-making.

5. Lessons Learned

Lessons Learned:

• The Research Coordinator is vital to the success of community outreach studies.
• AA men are willing to participate in research studies when they understand study objectives and feel supported.
• Our education-based IDM model led to significant improvement in knowledge about prostate cancer screening.
• Most patients preferred education prior to screening. Our approach, paired with the use of a navigation program, is feasible and was positively received by a large high-risk group.

Future Directions:

• Offering studies that compare the IDM model to shared decision making among high-risk AA communities.
• Use this research model at other locations and tailor it to address other disease sites.