

# Project HEAL

*Health through Early Awareness and Learning*

*Sherie Lou Z. Santos, MPH, CHES*

*Colonel Jimmie L. Slade, MA*

*Patricia Corbin*



# Project HEAL



- + Supported by the National Cancer Institute
- + Operated from the University of Maryland
- + Community-based, faith-based project in Prince George's County, Maryland
- + Aims to identify the best method for training community health advisors. Two methods:
  - + Traditional classroom training with high technical assistance/support
  - + Web-based training with low technical assistance/support

# Project HEAL



- + Train community health advisors (CHAs) in African American churches to deliver a 3-workshop series on breast, prostate, and colorectal cancer
- + Two study conditions (randomized 15 churches):
  - + Technology (**n=7 churches**):
    - + Web-based CHA training curriculum
    - + Minimal technical assistance/support
  - + Traditional (**n=8 churches**):
    - + Traditional in-person CHA training
    - + Maximum technical assistance/support

# Project HEAL Structure



## Community Health Advisor Training & Certification

- Online-based training
- Traditional live instruction

## Workshop 1:

### Kickoff

- Enrollment
- Informed Consent
- Baseline Survey
- HEAL Overview
- Cancer Overview

## Workshop 2:

### Breakout Sessions

- *Men:* Prostate Cancer
- *Women:* Breast Cancer

## Workshop 3:

### Culminating Session

- Colorectal Cancer
- Spirituality & Health
- Local Resources
- Postsession Survey

## Sustainability

- 12 month follow-up assessment
- 24 month follow-up assessment

# Community-Based Participatory Research (CBPR)

- + “Community-based participatory research is an **applied collaborative approach** that enables community residents to more **actively participate in the full spectrum of research** (from conception – design – conduct – analysis – interpretation – conclusions – communication of results) with a goal of influencing change in community health, systems, programs or policies” (OBSSR, 2012).

# Principles of CBPR

1. Recognizes community has a unit of **identity**
2. Builds on **strengths and resources** within the community
3. Facilitates **collaborative, equitable** involvement of all partners in all phases of the research
4. Integrates knowledge and intervention for **mutual benefit** of all partners
5. Promotes a **co-learning and empowering** process that attends to social inequalities

# Principles of CBPR

- 6. Involves a **cyclical and iterative process**
- 7. Addresses health from both **positive and ecological perspectives**
- 8. **Disseminates findings** and knowledge gained to all partners
- 9. Involves **long-term commitment** by all partners

(Israel, Schultz, Parker, & Becker, 1998)



# CBPR in Academic Research

- + Traditional distrust of the medical community and negative associations of academic research often found in African American community
- + Partnerships and CBPR increase ownership of the intervention
  - + Development of a true partnership increases trust in the community
  - + Ownership of the intervention increases participation

(Parrill & Kennedy, 2011)



# CBPR: Project HEAL

- + Conducted throughout all phases of the project
- + Employs assistance and viewpoints of a multidisciplinary Advisory Panel (n=8)
- + Community Partner
  - + *Community Ministry of Prince George's County*
  - + Assists with recruitment and program implementation for Project HEAL
    - + Identification of eligible churches in Prince George's County
    - + Facilitates church recruitment
    - + Participates in team meetings and attends events





## *Community Ministry of Prince George's County*

- + Interfaith nonprofit organization assisting with human service needs in Prince George's County
- + Assists with recruitment and program implementation for M-PACT and Project HEAL
  - + Identification of eligible churches in Prince George's County
  - + Facilitates church recruitment
  - + Participates in team meetings and attends events

# Community Engagement – *Lessons Learned*

- + Development of trust over time
- + Balancing perspective of researchers and community partner
  - + “Partner” is key word
- + Communication between researchers and community-based organization
- + Experience – be patient, persistent, and prayerful with participants

# Evaluation: RE-AIM Framework

- + Reach
  - + % of eligible congregation members enrolled
  - + Number of participants attending educational workshops
- + Efficacy
  - + Knowledge
  - + Perceived benefits and barriers
  - + Self-efficacy
  - + Screening status
  - + Ratings of program
- + Adoption
  - + Cooperation rate of churches
    - + # agreed / total approached

# Evaluation: RE-AIM Model (cont.)

## + Implementation

- + Number of workshops
- + Number of CHA trainees and completion of training
- + Adherence to program delivery protocol
- + Self-report of modifications or problems with program delivery
- + Relationship of implementation to pre-existing church & CHA characteristics

## + Maintenance

- + Number of additional training cycles
- + Amount of supplemental funding
- + Amount of additional health promotion activities
- + Number of health-related collaborative activities with networks/partners

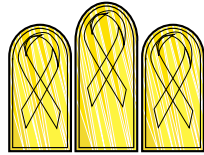
# 12- and 24-month workshops

- + 12- and 24-month survey administration
- + PowerPoint slide with preliminary findings
- + Paper-based report with preliminary findings and additional resources
- + Discussion with Pastors, CHAs, congregation participants, and study staff
  - + How to improve Project HEAL
  - + How to keep Project HEAL going
  - + Ideas for future health projects





# PROJECT HEAL



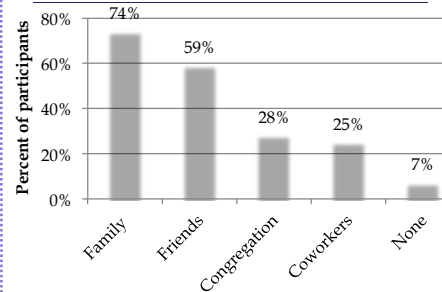
You are receiving this report because you took part in Project HEAL (*Health through Early Awareness and Learning*). Project HEAL is based in churches, led by

trained Community Health Advisors, and is spiritually-based. Your trusted Community Health Advisors gave key information about breast, prostate, and colorectal cancer that African American men and women need to hear. After attending the Project HEAL workshops, you may still have questions. Your Community Health Advisors are ready to talk with you. If they do not have the answer, your University of Maryland team members will help you get the answers you need.

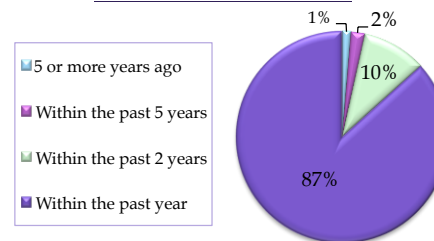
We will continue the partnership with your church to spread factual information about breast, prostate, and colorectal cancer and the benefits of early detection. The information we learn from projects like this helps to inform the work that many churches will do in their local communities. We are giving you this report to share what we learned from the Project HEAL 12-month surveys and give you resources to help better your health. ***Because of your help, we can make a difference in the community!*** If you have any questions about this project, please feel free to contact Dr. Cheryl L. Holt at (301) 405-6659 or by email at [cholt14@umd.edu](mailto:cholt14@umd.edu).

***We pray that you may enjoy good health!***

## Who have you shared Project HEAL health information with?



## Your last doctor visit



***Most Project HEAL participants have visited a doctor for a routine checkup within the past year.***



### Breast Cancer Knowledge at 12 Months

*Many women were not aware that older women are more likely to get breast cancer than younger women. Many women also did not know that Black women are more likely to die from breast cancer than White women.*

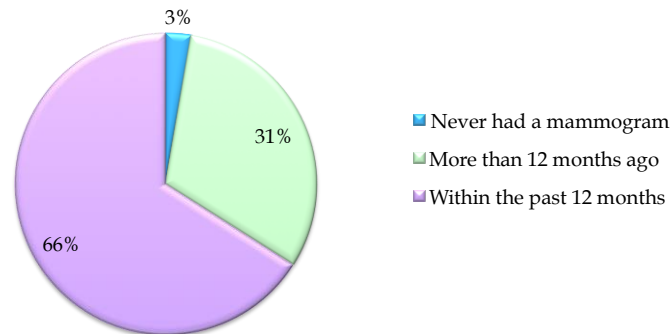
- Only **29%** knew that older women are more likely to get breast cancer than younger women.
- Only **39%** of women believed that the treatment for breast cancer is better than the cancer itself.
- **50%** knew that Black women are more likely to die from breast cancer than White women.
- **62%** of women knew that mammograms **do not** find all breast cancers.
- **68%** knew that bumping or bruising the breasts **does not** lead to breast cancer.

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### Breast Cancer Screening at 12 Months

*Many of the women are up-to-date with breast cancer screening (mammogram in the past 12 months).*

When did you have your last mammogram?



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### Low-Cost or Free Breast Cancer Screening

**Maryland Breast and Cervical Cancer Screening**  
Free screening for eligible women residing in Maryland  
Phone: (800) 477-9774

### Prostate Cancer Knowledge at 12 Months

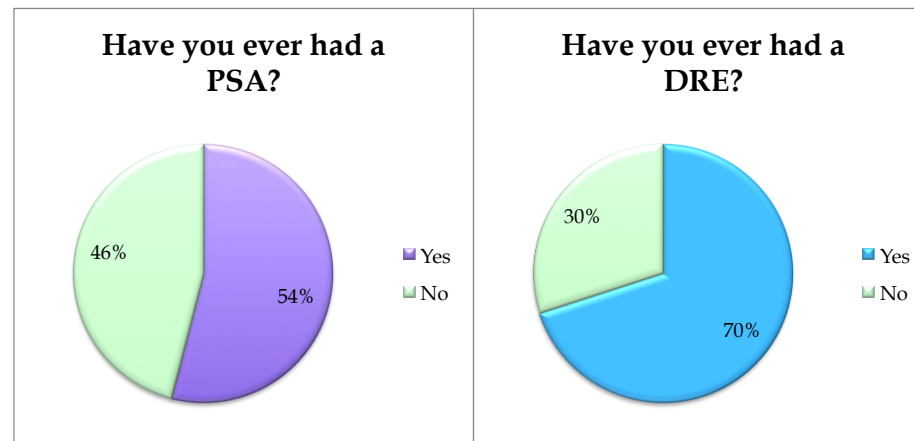
*Many of the men in Project HEAL were not aware of important issues around prostate cancer even after attending the workshops. Project HEAL needs to do a better job educating men about the limitations of prostate cancer screening.*

- Only 29% of men were aware that doctors and experts disagree as to whether prostate cancer screening should be recommended for all men.
- Only 40% felt that not all prostate cancers would kill a man.
- 49% knew older men are more likely to get prostate cancer than younger men.
- 57% knew prostate cancer can be treated without removing the prostate itself.
- 68% of men **did not** know that prostate cancer screening could lead to unneeded biopsies and treatment.

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### Prostate Cancer Screening at 12 Months

*Slightly more men had had the Digital Rectal Exam (DRE) completed. Have you talked to your doctor to decide what is best for you?*



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### Low-Cost or Free Prostate Cancer Screening

#### **Men Take Ten Prostate Cancer Early Detection and Education Program**

Free prostate cancer screening to men 40 and older in the DC metro area

Phone: (202) 806-7697

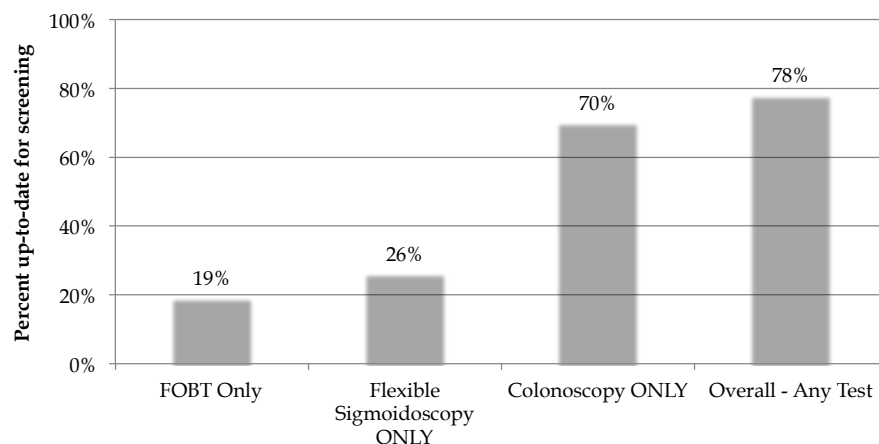
### Colorectal Cancer Knowledge at 12 Months

*Most of the Project HEAL participants agreed that both men and women are at risk for colorectal cancer. Most were aware that early detection for colorectal cancer can save their life.*

- 77% knew that the risk of colorectal cancer becomes greater as a person gets older.
- 88% knew that colorectal cancer is the cancer of the colon or rectum.
- 90% disagreed with the statement “colorectal cancer screening is not necessary if there are no symptoms.”
- 94% knew that both men and women are at risk for colorectal cancer.
- 98% agreed that bleeding is a symptom to report to your doctor.

### Colorectal Cancer Screening at 12 Months

*Almost 80% of men and women were up-to-date on colorectal cancer screening (colonoscopy within 10 years, flexible sigmoidoscopy within 5 years, OR FOBT within past year).*



### Low-Cost or Free Colorectal Cancer Screening

**Cancer Prevention, Education, Screening, and Treatment (CPEST) Program**

Free colorectal cancer screening to eligible Prince George's County residents

Phone: (301) 883-3526

### Health Resources

Health Topic	More Info At:	Screening Guidelines*
Cervical Cancer	<i>American Cancer Society</i> <a href="http://www.cancer.org/cancer/cervicalcancer">http://www.cancer.org/cancer/cervicalcancer</a>	Cytology (pap smear) every 3 years for women ages 21-65
Dental Health	<i>Centers for Disease Control and Prevention – Division of Oral Health</i> <a href="http://www.cdc.gov/oralhealth">http://www.cdc.gov/oralhealth</a>	Regular dental check-ups; at least once a year
Diabetes	<i>American Diabetes Association</i> <a href="http://www.diabetes.org">http://www.diabetes.org</a>	Screening for type 2 diabetes in adults with elevated blood pressure
Heart Disease	<i>American Heart Association</i> <a href="http://www.heart.org">http://www.heart.org</a>	Hypertension (high blood pressure) and cholesterol during annual physical
HIV/AIDS	<i>AIDS.gov</i> <a href="http://www.aids.gov">http://www.aids.gov</a>	Screening for HIV infection ages 15-65 or those at increased risk
Lung Cancer	<i>American Cancer Society</i> <a href="http://www.cancer.org/cancer/lungcancer">http://www.cancer.org/cancer/lungcancer</a>	Annual low-dose computed tomography in adults ages 55-80 with 15+ years smoking history
Mental Health	<i>National Institute of Mental Health</i> <a href="http://www.nimh.nih.gov">http://www.nimh.nih.gov</a>	No Guideline Available
Nutrition	<i>Nutrition.gov</i> <a href="http://www.nutrition.gov">http://www.nutrition.gov</a>	Visit <a href="http://www.choosemyplate.gov">www.choosemyplate.gov</a> for individual guidelines.
Sickle Cell Anemia	<i>National Heart, Lung, and Blood Institute</i> <a href="http://www.nhlbi.nih.gov/health/health-topics/topics/sca">http://www.nhlbi.nih.gov/health/health-topics/topics/sca</a>	No Guideline Available
Thyroid	<i>American Thyroid Association</i> <a href="http://www.thyroid.org">http://www.thyroid.org</a>	No Guideline Available
Vaccinations	<i>Centers for Disease Control and Prevention – Immunization Schedules</i> <a href="http://www.cdc.gov/vaccines/schedules/easy-to-read">http://www.cdc.gov/vaccines/schedules/easy-to-read</a>	<u>Flu</u> – Yearly starting at age 19 <u>Tdap</u> – 1 dose starting at age 19 with one Td booster every 10 years <u>Shingles</u> – 1 dose age 60 and above **You may require additional vaccines. Speak to your healthcare provider for your specific needs.
Vision Health	<i>National Eye Institute</i> <a href="http://www.nei.nih.gov">http://www.nei.nih.gov</a>	Eye exam every 1-3 years if you have vision problems or glaucoma risk
Physical Exam	<i>Centers for Disease Control and Prevention</i> <a href="http://www.cdc.gov/family/checkup">http://www.cdc.gov/family/checkup</a>	Physical exam every 1-2 years

\*More screening information can be found at <http://www.uspreventiveservicestaskforce.org>

## Health Insurance

### *Affordable Care Act*

Get Covered! Get Seen! Get Healthy!! Open Enrollment for 2015 coverage under the Affordable Care Act has ended. Visit [www.MarylandHealthConnection.gov](http://www.MarylandHealthConnection.gov) to see if you can still get coverage (certain life changes and special circumstances) or to see if you qualify for Medicaid (available year round). Already enrolled? Learn what to do and expect next! Then, use your coverage to get seen by medical professionals to become a healthier you! Open enrollment for 2016 runs between November 1, 2015 – January 31, 2016.

### *Medicare*

- Telephone Number: (800) 633-4227
- Website: <http://www.medicare.gov>

### *Medicaid*

- Telephone Number: (800) 492-5231
- Website: <http://mmcp.dhmh.maryland.gov>

## Sources of Support

Learning that you, a family member, or a friend has cancer can change your life and the lives of those around you. Many organizations offer special support programs for men and women with cancer or for loved ones. Places where you can go for support:

- Doctors, nurses, and other members of your health care team
- Social workers, counselors, or members of the clergy
- Support groups – groups may offer support in person, over the telephone, or on the Internet
- National Cancer Institute information specialists at 1-800-4-CANCER (1-800-422-6237) and at LiveHelp (<http://www.cancer.gov/help>)

## Links/Resources

- American Cancer Society
  - Telephone Number: (800) 227-2345
  - Website: <http://www.cancer.org>
- National Cancer Institute
  - Telephone Number: (800) 422-6237
  - Website: <http://www.cancer.gov>
- Centers for Disease Control and Prevention
  - Telephone Number: (800) 232-4636
  - Website: <http://www.cdc.gov>
- National Institutes of Health
  - Website: <http://www.nih.gov>
- U.S. Preventive Services Task Force
  - Website: <http://www.uspreventiveservicestaskforce.org>
- CHAMP Lab
  - Website: <http://www.champhealth.org>

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Our community partner: Community Ministry of Prince George's County

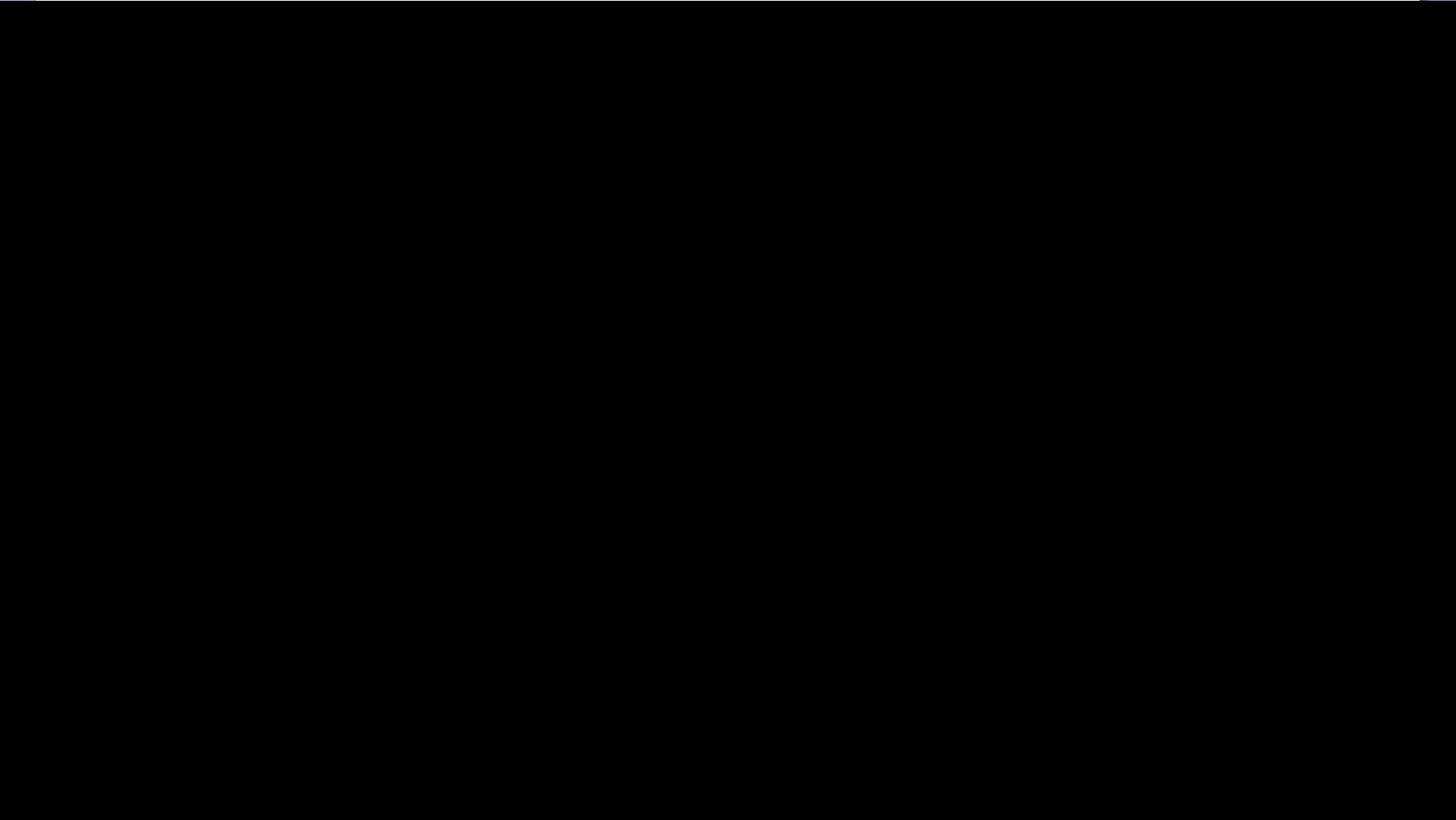


# The Community Health Advisor Perspective

- + Community Based Participatory Research (CBPR) in action
  - + Church leadership buy-in
  - + Planning & scheduling workshops
  - + Stirring up interest – (advertising and publicity)
  - + Engagement
  - + Maintaining the momentum through all three workshops

# 12- and 24-month workshops: *Through a CHA's eyes*

- + Continued engagement
  - + Maintaining the connection through (text messaging, newsletters, postcards)
  - + Reminders and advertising for 12 & 24 month workshops
- + 12 & 24 month workshop outcomes
  - + Curiosity and ownership of findings
  - + Enthusiastic feedback
    - + Identifying enhancers and barriers to participants continued engagement
    - + How to make it better, get more participation
    - + Ideas for future health education and awareness offerings
  - **Health education and awareness topics in monthly devotionals**
  - **Project HEAL workshops annually in designated awareness month**





# References

- + Office of Behavioral and Social Science Research. (2012). Community-based participatory research. Retrieved from [http://obssr.od.nih.gov/scientific\\_areas/methodology/community\\_based\\_participatory\\_research/index.aspx](http://obssr.od.nih.gov/scientific_areas/methodology/community_based_participatory_research/index.aspx)
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- + Parrill, R. & Kelledy, B. R. (2011). Partnerships for health in the African American community: Moving toward community-based participatory research. *Journal of Cultural Diversity, 18*(4), 150-154.
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# Additional Publications

- + Santos, S.L.Z., Tagai, E.K., Wang, M.Q., Scheirer, M.A., Slade, J., & Holt, C.L. (2014). Feasibility of a web-based training system for peer community health advisors in cancer early detection among African Americans. *American Journal of Public Health*, 104(12), 2282-2289. doi: 10.2105/AJPH.2014.302237. PMCID: PMC4232123
- + Holt, C.L., Tagai, E.K., Scheirer, M.A., Santos, S.L.Z., Bowie, J., Haider, M., Slade, J., Wang, M.Q., & Whitehead, T. (2014). Translating evidence-based interventions for implementation: Experiences from Project HEAL in African American Churches. *Implementation Science*, 9(66). doi: 10.1186/1748-5908-9-66. PMCID: PMC4057552

# Thank you!

- + For more information:

- + Dr. Cheryl L. Holt, *Principal Investigator* – [cholt14@umd.edu](mailto:cholt14@umd.edu)
- + Sherie Lou Z. Santos, *Program Manager* – [ssantos1@umd.edu](mailto:ssantos1@umd.edu)
- + Website: [bit.ly/CHAMPLab](http://bit.ly/CHAMPLab)
- + Twitter: @ChampUMD
- + Facebook: [www.facebook.com/ChampLab](http://www.facebook.com/ChampLab)
- + Blog: <http://champlabumd.tumblr.com>

- + Our community partner:

- + Community Ministry of Prince George's County
- + [www.cmpgc.com](http://www.cmpgc.com)

# Questions?

