

80%
by 2018



*Recommended Messaging
to Reach the Unscreened*



2017
COMMUNICATIONS
GUIDEBOOK

See Communications Companion Guides for
Messaging to Hispanics/Latinos and Asian
Americans about Colorectal Cancer Screening



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Dear 80% by 2018 Colleagues:

In 2014 we launched our challenge to achieve a nationwide 80% colorectal cancer screening rate by 2018. I am in awe of how far we have come in the past three years. When we began, we knew we would be excited if 50 organizations signed our 80% by 2018 pledge. As I write, we are at 1,400 and counting! And it is because of you – your passion, your work, and your knowhow – that what we do makes a real difference and saves lives.

We are now seeing some great signs of progress. For instance, data from Health Resources and Services Administration (HRSA) about screening rates at federally qualified health centers (FQHCs) show significant gains in colorectal cancer screening rates for these centers. The rates have climbed two percentage points each year for the past three years and in 2015, jumped by nearly four points to 38.3 percent. The 2015 HEDIS rates have gone up notably for Medicare plans to 67.2%, and the 2015 rates from the National Health Interview Survey got off a plateau and jumped from 59% in 2013 to 63% in 2015, meaning nearly 4 million more people were screened.

But our work is not nearly done. Colorectal cancer remains the second-leading cause of cancer death in the United States, when men and women are combined, and too many Americans are not being regularly screened. And we know that those who are still unscreened are those who are the most difficult to reach. As we draw another year closer to 2018, we need to redouble our efforts to change this reality. I am glad to take on this challenge, and if you've signed the 80% by 2018 pledge, I know you are too!

I am excited to present to you the 2017 Edition of the Communications Guidebook, which focuses on three key unscreened audiences, featuring tools and information that will help you reach out to them. Additionally, there are new sections, such as sections to provide advice on earning earned media and engaging celebrities.

As a reminder, a companion guide for Hispanics/Latinos is also available, and this year we are launching a new Asian American Companion Guide for Messaging about Colorectal Cancer Screening. As always, the resources in these guidebooks are not intended to replace any partner's outreach effort, campaign or media blitz around colorectal cancer screening. Rather, we hope the information will supplement your current efforts and magnify our collective voice with these critical audiences.

I thank you all for your continued efforts and partnership in the 80% by 2018 initiative. If we can achieve 80% by 2018, 277,000 cases and 203,000 colorectal cancer deaths would be prevented by 2030. We have a moral obligation to do everything possible to achieve that goal.

Finally, I would like to thank the American Cancer Society, the Centers for Disease Control, and the members of the NCCRT Public Awareness Task Force who work diligently on these resources each year.

With your help, we can make 80% by 2018 a reality!



Richard C. Wender, MD
Chair, National Colorectal Cancer Roundtable
Chief Cancer Control Officer
American Cancer Society, Inc.

Overview

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Expanding Success: Doubling Down our Efforts to Reach the Unscreened

Introduction

Colorectal cancer incidence rates have dropped 30% in the U.S. over the last decade among adults 50 and older. The percentage of the population up to date with recommended colorectal cancer screening increased from 54% in 2002 to 65.7% in 2014.¹ More people now have insurance coverage for colorectal cancer screening. Top health systems are already achieving 80% screening rates, and Massachusetts is already screening over 76% of their eligible population, the highest state screening rate in the nation.

These factors help to validate that an average national screening rate of 80% is indeed achievable. More importantly, we know that 203,000 lives can be saved by 2030 if we can achieve 80% by 2018, a truly astounding number.² However, to ensure that we can achieve this goal as a nation, it is critical to reach the unscreened.

The members of the National Colorectal Cancer Roundtable (NCCRT) conducted extensive strategic planning to determine how to get to an 80% screening rate. The NCCRT's Public Awareness Task Group worked with the American Cancer Society to conduct market research, determine priority populations who are not receiving screening and test key messages. The target audiences included:

- Newly Insured,
- Financially Challenged,
- Insured Procrastinators/Rationalizers,
- African Americans, and
- Hispanics.

Sample Uses of Tested Messages

Get screened. It could save your life | View in [Web Browser](#)

 BlueCross BlueShield of Illinois

 American Cancer Society



DON'T TAKE CHANCES WITH COLON CANCER.

Screening Facts

Dear %%First Name%%,

Did you know colorectal cancer is the second leading cause of cancer death in the U.S., when men and women are combined?* Screening may prevent cancer through detection and removal of precancerous growths, as well as detect cancer at an early stage.

There are actions you can take to help protect your health. Talk to your doctor about getting screened. Several screening options are available, including simple take home options. For questions about your benefits, call the number on the back of your member ID card.

Screening Facts

GET SCREENED



Call your doctor to schedule an appointment.

GET INFORMED



Visit cancer.org for colon cancer facts.

SCREENING OPTIONS



Visit cdc.gov for screening information.

Follow Us



bcbsil.com

This message is brought to you by Blue Cross and Blue Shield of Illinois and the American Cancer Society.

The information provided in this email is based on research from organizations such as the American Cancer Society and the Centers for Disease Control. This information is not intended as medical advice nor meant to be a substitute for the individual medical judgment of a doctor or other health care professional.

*From the American Cancer Society.

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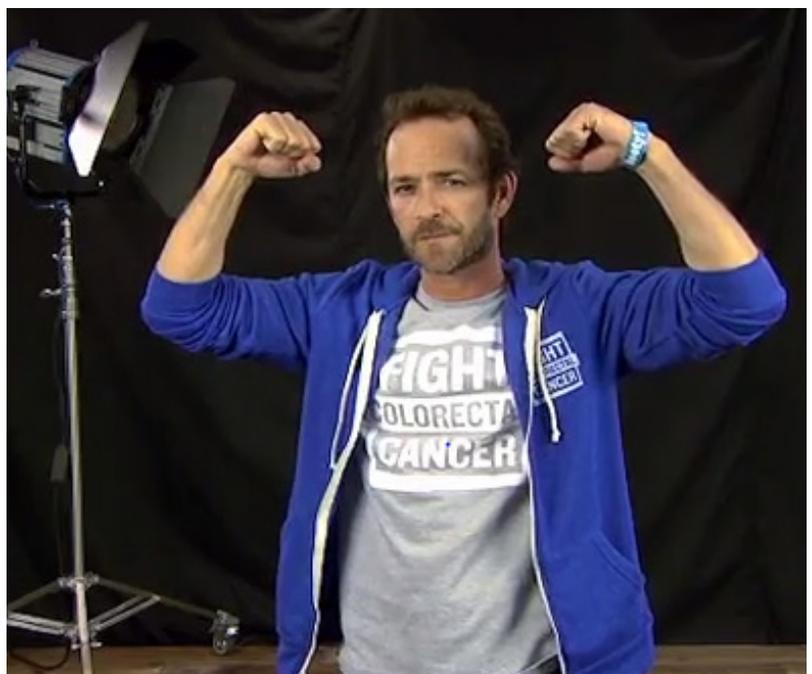
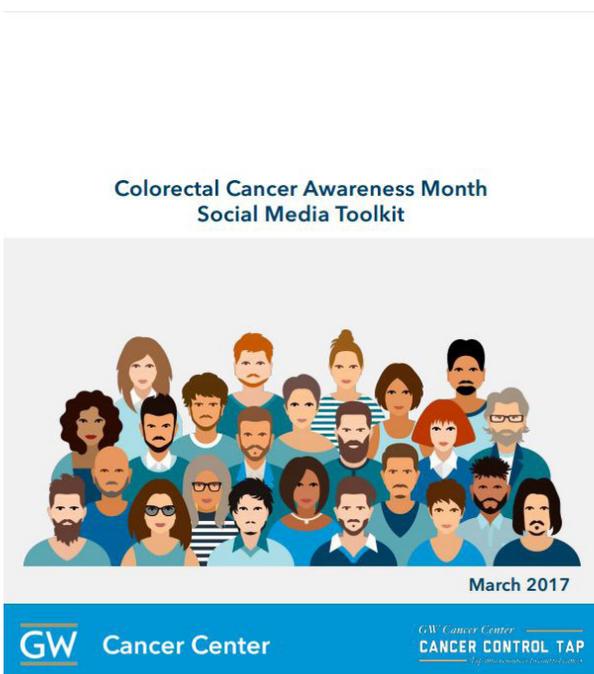
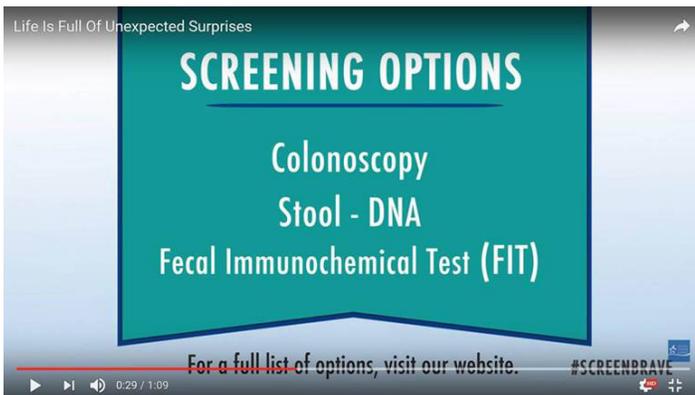
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Sample Uses of Tested Messages

In 2015, the messages for our target audiences presented in this guide were shared with NCCRT members, 80% by 2018 partners and others for their own use. We were excited to see these messages appear in a wide variety of formats from health plan reminder postcards to PSAs featuring celebrities to social media toolkits, making the 2015 Communications Guidebook one of our mostly widely used tools.

Our hope is that our partners continue to use these messages in 2017 with their continued creativity and cleverness in order to get through to the unscreened and move them to action.

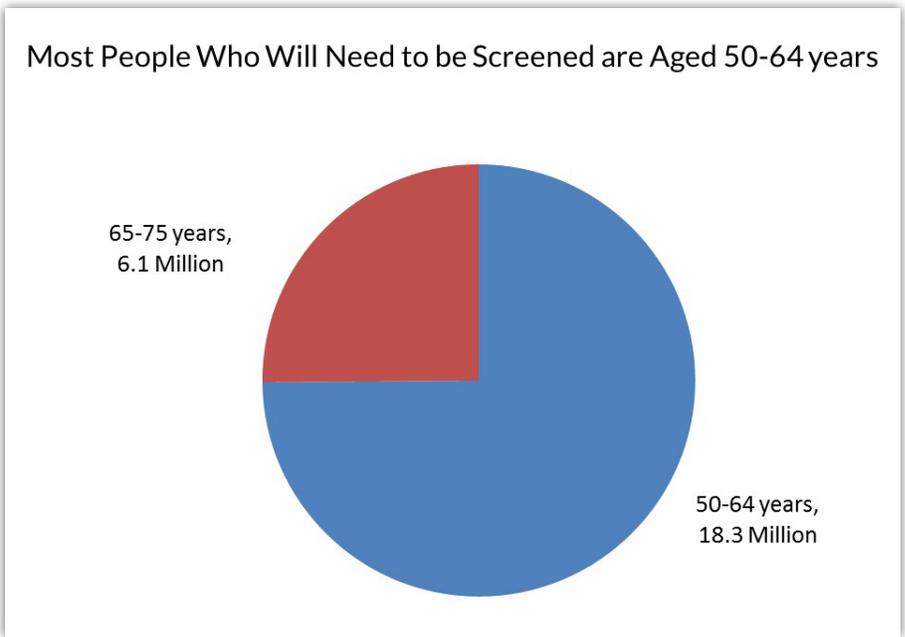


Learning About the Unscreened

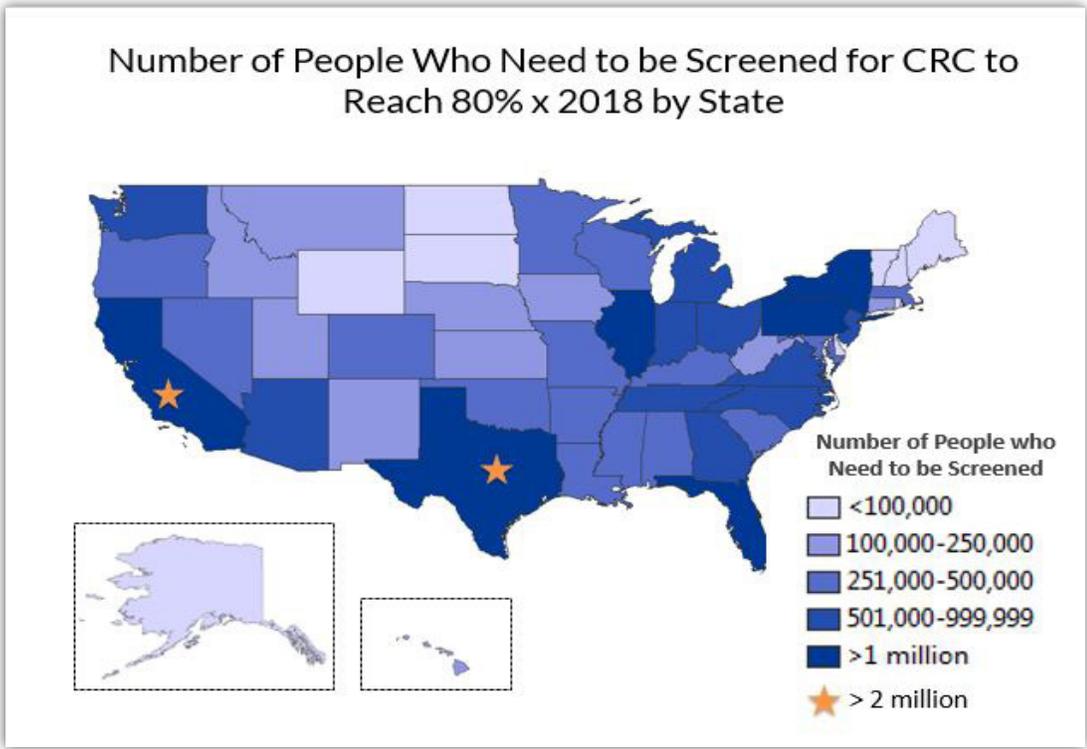
Characteristics of the Unscreened

Screening Demographics

It's important to know more about the populations we are targeting. Screening rates are particularly low in certain subgroups (Hispanics, Medicaid, Uninsured). There is an equal need between men and women. The chart to the right shows the importance of targeting efforts to reach the unscreened toward a slightly younger audience, as most people who need to be screened are 50-64 years old.

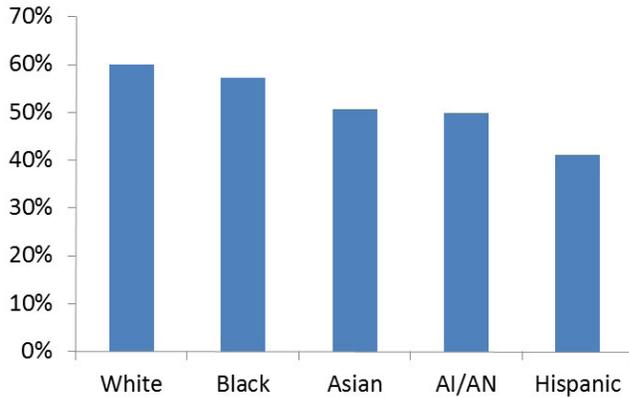


It's also worth noting that the number needing screening varies widely by state. The map below shows where those who need to be screened are most likely to reside, purely in terms of population. The number of people who need to be screened by state is a function of their population of 50- to 75-year-olds and to a lesser extent, colorectal cancer (CRC) screening prevalence. For example, California's CRC screening prevalence is about the national average, but because of their large population, they have the greatest number of people in need of CRC screening.



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CRC Screening Prevalence by Race/Ethnicity

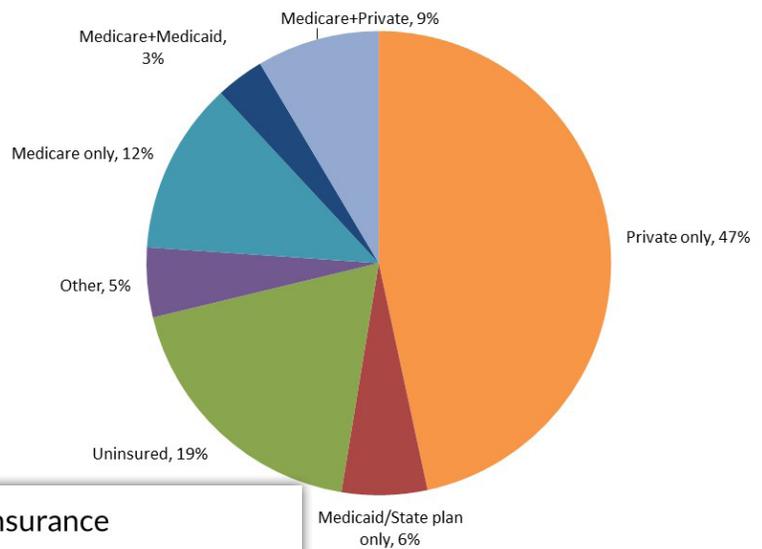


AI/AN=American Indian/Alaskan Natives

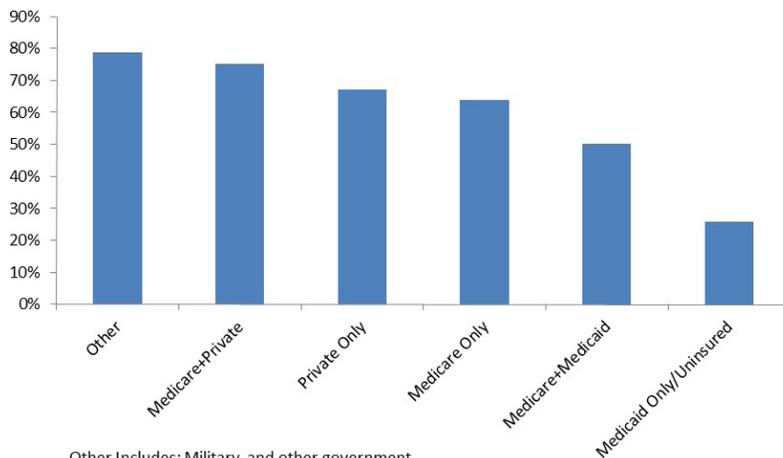
Screening Demographics

The chart above shows the colorectal cancer screening rates by ethnicity. The chart to the right shows the insurance status for people who have not been screened for colorectal cancer: 47% percent of those who need screening have private insurance; 18% have Medicaid plus another type of coverage; and 12% have Medicaid only. The chart below shows the insurance coverage for those who have been screened.

Insurance Status of People Who Need to Be Screened



CRC Screening Prevalence by Insurance



Other Includes: Military, and other government

Estimated Number Needing Colorectal Cancer Screening to Achieve the NCCRT 80% by 2018 Goal by Region and State

Region/State	CRC Screening Rate %	Number Needing Screening	Region/State	CRC Screening Rate %	Number Needing Screening
Northeast	68.7	3,949,400	Midwest	64.5	5,005,800
Connecticut	71.9	227,100	Illinois	60.8	1,032,400
Maine	73.1	92,100	Indiana	60.2	554,400
Massachusetts	76.0	339,700	Iowa	66.0	217,500
New Hampshire	74.7	79,200	Kansas	64.3	203,800
New Jersey	62.1	767,900	Michigan	68.8	649,500
New York	69.3	1,314,200	Minnesota	70.1	316,100
Pennsylvania	66.4	1,020,300	Missouri	63.7	470,000
Rhode Island	72.6	63,500	Nebraska	60.6	151,200
Vermont	71.0	45,400	North Dakota	57.4	63,900
South	63.8	9,610,000	Ohio	62.9	939,600
Alabama	65.5	392,100	South Dakota	62.0	68,000
Arkansas	56.7	305,400	Wisconsin	70.8	339,400
Delaware	71.2	63,500	West	64.2	5,825,500
DC	66.8	39,900	Alaska	55.5	70,700
Florida	65.6	1,688,400	Arizona	58.2	639,500
Georgia	67.3	674,900	California	66.3	2,724,200
Kentucky	62.9	385,000	Colorado	64.7	415,300
Louisiana	60.0	417,100	Hawaii	63.6	119,700
Maryland	70.1	389,900	Idaho	60.1	145,700
Mississippi	58.2	285,300	Montana	56.1	119,000
North Carolina	68.4	696,400	Nevada	58.3	271,600
Oklahoma	58.3	363,900	New Mexico	57.4	214,300
South Carolina	64.7	405,800	Oregon	64.4	343,900
Tennessee	64.7	536,700	Utah	67.6	158,200
Texas	58.1	2,198,700	Washington	66.6	539,700
Virginia	67.8	586,600	Wyoming	55.6	63,700
West Virginia	63.2	180,400	Total	64.9	24,388,000

Screening rates in this table were calculated using 2012 Behavioral Risk Factor Surveillance System (BRFSS) data. Refer to the source³ for additional information on the BRFSS screening rate confidence intervals and lower and upper limits for the number needing screening.

Demographic and Emotional Profile

In 2014, the American Cancer Society (ACS), with guidance from the Centers for Disease Control and Prevention (CDC), conducted market research with a representative sample of 1,023 U.S. adults 50 years of age or older, followed by qualitative interviews with select audiences. The purpose of each assessment was to understand the rationale of those being screened compared with the unscreened.⁴

Demographic and psychographic data were assessed to determine which audiences were best to microtarget. Microtargeting specific audiences will inform strategy, ensuring appropriate messages are communicated through the best channels to make the most impact.

	Demographic Profile	Emotional Profile
AGE	More likely to be younger than those screened; nearly two-thirds are 50–59 years of age	Think they already are taking care of their health
INSURANCE STATUS	More likely to be uninsured (nearly one-quarter) than those screened	Fearful of the unknown
INCOME	Slightly lower income than those screened, with over one-half earning under \$40K per year	Fearful of preparation/procedure
RACE/ETHNICITY	More likely to be Hispanic than those screened (nearly 5 in 10 eligible Hispanics are not being screened)	Focused on more immediate health concerns
EDUCATION	Slightly more likely (around 7 in 10) to have less than a 4-year college degree than those who have been screened	Procrastinators
CANCER CONNECTION	Less likely to be a cancer survivor (<7%) and less likely to have a close friend/family member with cancer than those screened (just over half)	Rationalize reasons for not being screened
		Lack sense of urgency around the issue
		Have an “I know best” attitude
		

Top Barriers To Screening

It's important to know more about the populations we are targeting. Overall, unscreened audiences have some similarities in attitudes, aspirations, values, fears and other psychological criteria (psychographics) as the unscreened, but they all have unique barriers and will respond best to personalized messages. When we look at the barriers to screening, we are able to see these main barriers emerging within the target populations.

1 RATIONALIZED AVOIDANCE

While the unscreened base is knowledgeable about screening, they fail to recognize its importance and have typically rationalized avoidance.

5 NO DOCTOR RECOMMENDATION

Many cite that their doctor has not recommended screening to them. This is the number one reason among the Black/African Americans, and the number three reason among the Hispanics.

2 LACK OF AFFORDABILITY

Socioeconomic gaps are evident in the unscreened population. Affordability is the number one issue given for not being screened.

6 NO PERSONAL CONNECTION

Interestingly, the unscreened are less likely to have a personal connection to cancer. They tend not to have had a close friend or family member with cancer, or are unaware of their family history.

3 NO SYMPTOMS OR FAMILY HISTORY

The unscreened often feel that screening messages do not apply to them, either because they do not have symptoms or do not have a family history of the disease.

4 NEGATIVE CONNOTATION

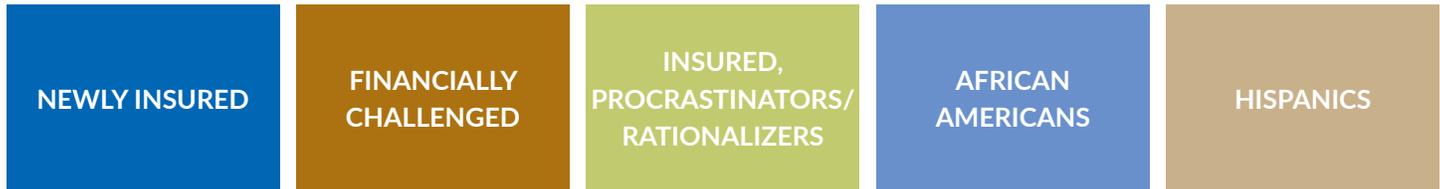
The unscreened population typically has some baseline familiarity with the tests, particularly colonoscopies. However, there is a negative connotation with the test, as many of the unscreened describe it as invasive, unpleasant, or embarrassing.

7 LOW LEVELS OF HEALTHY BEHAVIOR

Despite self-identifying as "healthy" at similar levels as the screened, the unscreened population underindexes on numerous metrics of healthy behavior, such as caring about their health, visiting the doctor, or talking to their doctor about screening.

5 Priority Populations

The following five priority populations were identified, based on the research conducted by the American Cancer Society and with input from the NCCRT Public Awareness Task Group. This research will be discussed in more detail throughout this guidebook:



Messages have been tested with each of these groups, though there is overlap between audiences. African Americans and Hispanics cut across all target groups but will need special focus if we are to get to 80% by 2018. Hispanics are a priority audience due to their low screening rate (52%).⁵ African Americans are a priority audience due to their high colorectal cancer incidence rate.⁶

The outreach gaps include low socio-economic groups and the newly insured, but also include some surprises, such as individuals with insurance who are just not responding to our traditional, rational messages about screening.

Several of our 80% by 2018 partners are successfully reaching the financially challenged audience, offering information and low-cost screening. Though a few NCCRT members are extremely strategic in their use of data to drive outreach to subpopulations, most partner campaigns focus on overall awareness and do not have campaign messages that have been tailored for niche audiences.

Additionally, the growing availability of health insurance creates a strong opportunity for action, given that affordability is the number two barrier to screening and that with insurance comes improved screening access.

On the whole, these subpopulations could benefit from amplified efforts backed by tested messages about the importance of screening.

How to Reach the Unscreened

Effective Pathways To Screening

It's important to communicate messaging through the proper channels in order to reach our goal to get adults over 50 screened for colorectal cancer. Below depicts the pathway to screening, which will play a critical role in outreach efforts.

Unscreened may be knowledgeable about screening tests but have rationalized avoidance. To change behavior and overcome the barriers limiting screening, personalized messages must:

- Make the case for early detection
- Eliminate real and perceived barriers
- Align systems to reinforce messages
- Engage family and community networks

In order to do this, the messages must:

- Elicit support and testimony from peers and survivors to localize and connect the unscreened with those affected by colorectal cancer
- Engage family and community networks to articulate the need for screening and make it relevant to each person
- Align systems to reinforce messages and equalize the importance of screening among consumers and physicians
- Destigmatize the test and perceived barriers to conquer fear and provide information on screening options

We will motivate the desired action by:

- Identifying influencers and using the right messengers to dispatch the messages
- Using tested messaging
- Executing campaign assets
- Using effective communication channels
- Measuring and improving upon our successes

Motivation

The most effective messages will resonate with the priority audience, both rationally and emotionally, and include a call-to-action that motivates. The American Cancer Society and the NCCRT Public Awareness Task Group developed twelve messages to test with our priority unscreened audiences, taking the following six core motivators into consideration.

Support and Testimony

Hearing about someone else's screening experience relieves concerns and provides reassurance that the procedure is not as bad as perceived. It can also help make the connection about why screening is important.

Empowerment and Control

Feeling accomplished and proud comes with making a positive impact on health, allowing them to fix and prevent issues.

Physical Survivor/ Expectation

They want to stay in good health for as long as possible and may need to better understand the impact that the role of screening plays in that decision, as well as the toll that colorectal cancer can take on people like them.

Trust

Trust in a healthcare provider or other messenger can motivate to action.

Options

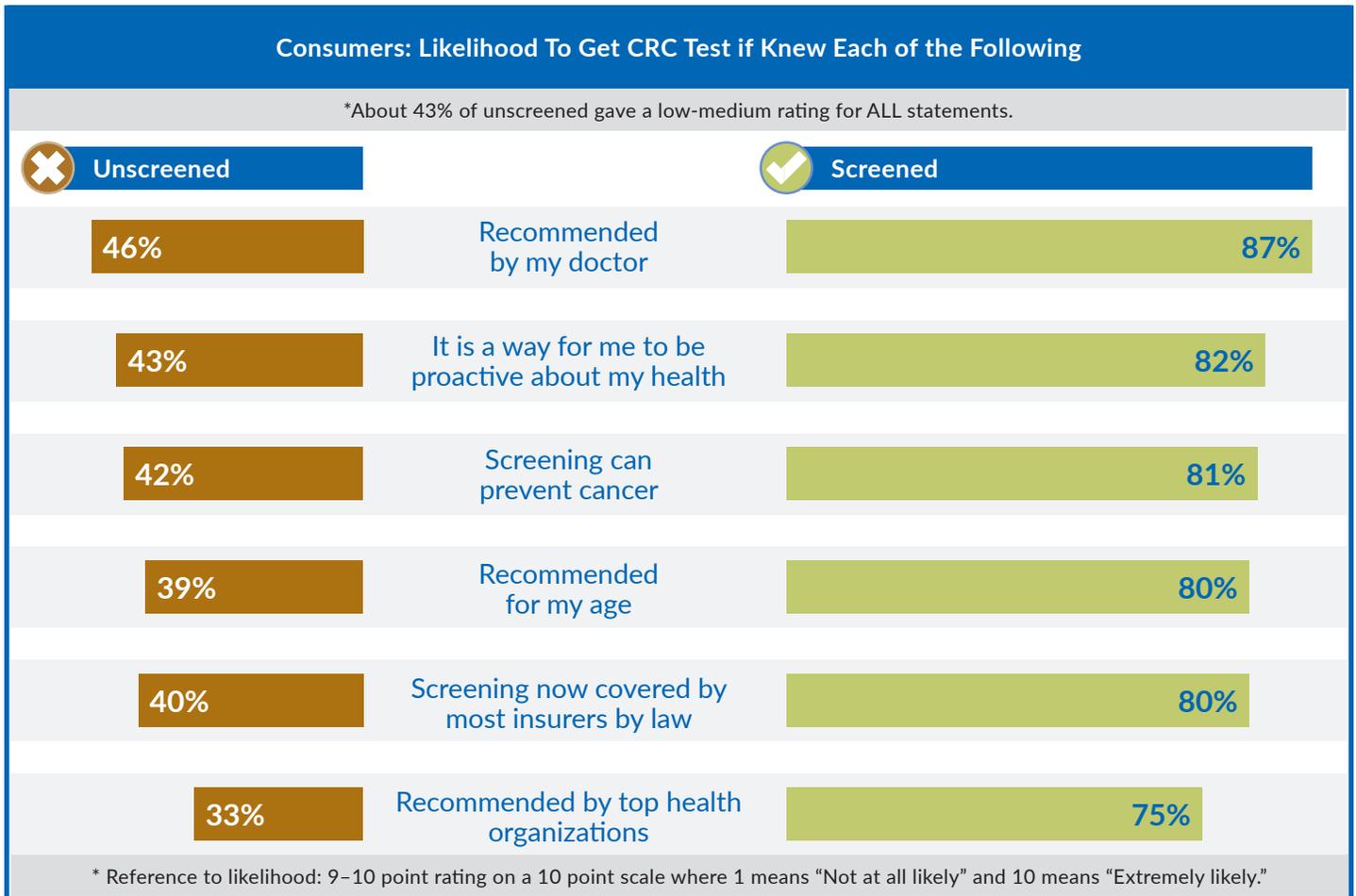
Some consumers need a different pathway to screening and want to be informed, knowledgeable, prepared and responsible about their health.

Affordability

Becoming more knowledgeable about screening coverage and options is important to these audiences.

Logical/Rational Messages are Less Effective with the Unscreened

Additionally, logical and rational messages about the benefits of screening will likely be insufficient to move the unscreened base. The data below show the likelihood that individuals would be screened if they were aware of specific information.



To break down screening inertia and overcome barriers, we designed messaging that is tailored to address specific concerns, that resonates with consumers, and that is delivered through effective and trusted channels.

The Importance of the Right Messenger

The right messengers are critical to reaching the unscreened. Important messengers to reach all of our priority audiences are:

Physicians are viewed as a trusted source for health information.

It's been well documented that physicians play a critical role in encouraging patients to get screened and providing information on the importance of colorectal cancer screening. Physicians need to understand some of the very real barriers that stop the unscreened from following through. **It's also important to note that our priority audiences are not regularly visiting their physician so we must look beyond physicians to reach these audiences.**

Survivors make it personal.

Less than half of the unscreened have a family history or personal connection to colorectal cancer. By sharing personal stories through survivors, it helps put a face on colorectal cancer and create urgency for testing, particularly if the survivor comes from the prioritized community.

Community organizations and nonprofit organizations must be mobilized.

Again, many of the unscreened do not regularly go to the doctor. Community organizations can play a key role in directing audiences to screening resources and informing them of their testing options.

Insurance carriers clear up confusion.

Insurance carriers are able to educate their constituents on coverage and screening options, and address concerns about affordability.

Celebrities can help break through the clutter.

One of the challenges to the public health community is to engage the unscreened at a more emotional level and break through the clutter of competing priorities and/or procrastination/rationalization. Finding someone who is well-known – a “celebrity” – to deliver the screening message is one way to do that. See our new resource on Engaging Celebrities for more advice at <http://nccrt.org/tools/80-percent-by-2018/80-by-2018-communications-guidebook/#new>

While all of these messengers are key, each audience has individual needs. Of added importance is knowing your audience and reaching them through the proper channels, with the best messages.

Keys to Successful Messaging

These messages are NOT meant to replace any organization's signature campaign on colorectal cancer screening. General awareness of screening is high, and it needs to stay that way. Rather, the NCCRT is challenging groups to think more strategically about reaching the unscreened and incorporating these tested messages into those efforts.

Messaging should NOT be focused on broad awareness but instead needs to be aligned with the six core emotional motivations that might compel unscreened individuals to get screened in the future.

Messages that will resonate the best with unscreened individuals should specifically:



Address misperceptions and fears around the test;



Feature testimonies from those who have been screened; and



Provide patients with the information and knowledge they need, including potential alternative screening solutions, to feel prepared and responsible about the process and results.

Motivating the Unscreened

As partners in the 80% by 2018 effort, we encourage you to consider various ways to incorporate and adapt these tested messages in your communications to your unscreened constituents. These messages can be made even more powerful with creativity and/or delivery by the right messenger.

Top-rated Messages: Market Research Results

Message #1

There are several screening options available, including simple take-home options. Talk to your doctor about getting screened.

Why does this message work?

Ties to emotional driver of empowerment

- Consumers have a need to be informed, knowledgeable, prepared and responsible about their health.
- This message allows consumers to feel control regardless of barriers they may face (e.g. affordability, fear, etc.).

Alleviates a diverse set of barriers

- Diminishes fear associated with standard procedures and prep.
- Too easy for even procrastinators to put off.
- Suggests a more affordable option.

Appeals more than other “options” messages

- The phrase “at home” was very important to the success of this message. Other “options” messages that did not specify the test could be done at home did not resonate as well with consumers.

Message #2

Colorectal cancer is the second-leading cause of cancer death in the U.S. when men and women are combined, yet it can be prevented or detected at an early stage.

Why does this message work?

Ties to emotional driver of empowerment

- Educates people about their ability to take control of their own health through prevention and early detection.
- Detecting issues early means that there is an opportunity to fix problems and prevent future issues.
- Appeals to the desire to stay in good health as long as possible.

Challenges assumptions

- Challenges the assumption that colorectal cancer “can’t happen to them,” particularly for those who don’t believe they are at risk unless they have symptoms or a family history.

Appeals more than other “empowerment” messages

- Describes the problem while simultaneously giving the consumer a way to address it.

Message #3

Preventing colon cancer or finding it early doesn't have to be expensive. There are simple, affordable tests available. Get screened! Call your doctor today.

Why does this message work?**Ties to emotional driver of empowerment**

- Consumers have a need to be informed, knowledgeable, prepared and responsible about their health.
- Encourages consumers to take control of their health, while addressing concerns about affordability.

Alleviates major barrier

- Hits the affordability issue head on.
- Alleviates the stress of financial hardships that often comes with health care.

Appeal of "options" message continues

- Couples "options" messages with key information about why those options might work for them.

Uniquely appealing message for the Newly Insured.**Message #4**

Most health insurance plans cover lifesaving preventive tests. Use the health benefits you are paying for to get screened for colon cancer. Call your doctor today.

Why does this message work?**Ties to emotional driver of empowerment**

- This message empowers people who are newly insured to use their newly acquired health insurance to have a positive impact on their health.
- This group feels optimistic about their health after receiving coverage. At a time when they are feeling newly empowered and optimistic, now is the time to motivate them to get screened.

Alleviates major barrier

- This messages also addresses affordability issues by educating the audience about access to services they may not have enjoyed before.

Uniquely appealing for Newly Insured audiences

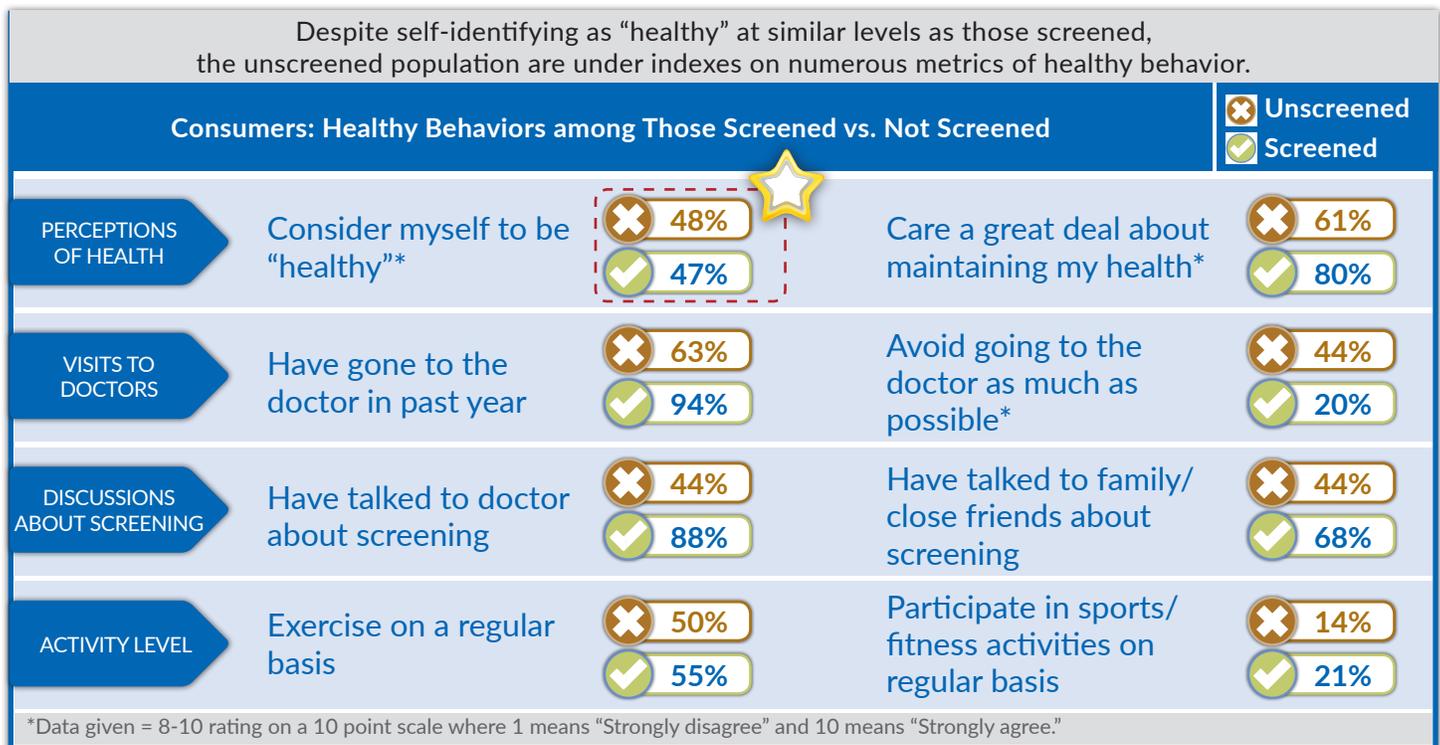
- While the other top three messages resonated with all groups, this message was unique, in that it only resonated with the newly insured.
- This message taps into the interest of the newly insured to use benefits they may not have enjoyed previously.

The most effective messages will resonate with the priority audience, both rationally and emotionally, and include a call-to-action that motivates.

Priority Population Profiles

Insured, Procrastinators/Rationalizers

The Insured, Procrastinators/Rationalizers are the closest to our general market consumer. They represent men and women over the age of 50 that either have other health issues on their mind or fear the procedure. In addition, many self-identify as “healthy” at similar levels as those screened, but are less likely to actually conduct healthy behaviors.



Motivating the Insured, Procrastinators/Rationalizers

The insured, procrastinators/rationalizers are driven by control. While this audience cares a great deal about maintaining their health and exercise regularly, nearly half are doctor adverse and less than half speak with their doctor about colorectal cancer screening. They may not understand that colon cancer screening is something you do when you do not have symptoms. They do not consider it enough of a top priority to get screened.

This audience also reports not being screened because they’ve heard negative testimonials related to the test and its preparation. Fear of the unknown serves as a major barrier as well. Providing information on options that are more comfortable and private will help motivate them.

Channels and Messengers To Reach Insured, Procrastinators/Rationalizers

- **Physicians:** This audience prefers receiving health care information from their physician.
- **Family and Friends:** Utilizing testimonials will help to relieve fear of the test, while instilling the urgency to get tested.
- **Online Media and Website:** This audience often turns to online media for information about health concerns.
- **Celebrities:** Celebrities, particularly those who resonate with the priority audience, can help break through clutter and garner attention to the cause.
- **Community Organizations:** Provide a good avenue to reach this audience, particularly those that are not regularly seeing a physician.

PROFILE OF AWARE AND ABLE

Annual salary of \$50k - AND - insured

Baseline Screening Likelihood: 15.4%

MESSAGES & CHANNELS THAT RESONATE THE BEST

1 There are several screening options available, including simple take-home options. Talk to your doctor about getting screened. **“I think more people would feel comfortable doing it at home than doing an outpatient procedure.”**
 Emotional Driver: Control Adjusted Screening Likelihood: 20.2%

2 Colorectal cancer is the second-leading cause of cancer deaths in the U.S. when men and women are combined, yet it can often be prevented or detected at an early stage. **“Using the phrase ‘second-leading cause of cancer deaths’ scares me. It would make me look into screening more so than the other ads.”**
 Emotional Driver: Control Adjusted Screening Likelihood: 19.7%

NOTE: In all of the following charts, the term “over index” means the population is more inclined toward a trait or characteristic than average; and the term “under index” means the group is less inclined to have a trait or characteristic than average.

 Discussions with doctor or health care provider are the most preferred way of getting health info, followed by a website.

TOP BARRIERS TO SCREENING

-  Been procrastinating
-  No family history
-  No symptoms

DEMOGRAPHIC PROFILE

-  **Employment**
Over index* total for full-time employment
-  **Education**
Over index total for 4-year degree or higher
-  **Income**
Over index total for \$50k+ income
-  **Marital Status/Children**
Over index total for married/living with partner and for having children
-  **Insurance Status**
Over index total for insured

While this group is financially able to pay for CRC screening solutions, there is still an interest for alternative options that may be simpler compared to traditional screening tests, like the colonoscopy. Physicians may be a good source for getting the information out to this group, but testimonies from friends and family may be useful as well.

HEALTHY LIFESTYLE BEHAVIORS

-  **48%** are doctor adverse
-  **39%** talk to doctor about screening
-  **39%** talk to family/friends about screening
-  **52%** consider themselves healthy
-  **62%** care a great deal about maintaining health
-  **56%** exercise on a regular basis

PROFILE OF FEARFUL PROCRASTINATORS

Have not been screened because they heard test or prep was unpleasant or embarrassing, of fear/afraid, or have been procrastinating

Baseline Screening Likelihood: 11.7%

MESSAGES & CHANNELS THAT RESONATE THE BEST

- 1** *There are several screening options available, including simple take-home options. Talk to your doctor about getting screened.* **“Privacy, less embarrassment, and no need to pay for a taxi to and from the appointment.”**

Emotional Driver: Control Adjusted Screening Likelihood: 21.4%
- 2** *Colorectal cancer is the second-leading cause of cancer deaths in the U.S. when men and women are combined, yet it can often be prevented or detected at an early stage.* **“It is a scary statement, but it makes you really think; it’s a wakeup call.”**

Emotional Driver: Control Adjusted Screening Likelihood: 19.7%
- 3** *Preventing colon cancer, or finding it early, doesn’t have to be expensive. There are simple, affordable tests available. Get screened! Call your doctor today.* **“Cost is a high priority for me.”**

Emotional Driver: Expectations Adjusted Screening Likelihood: 19.1%



Discussions with doctor or health care provider are the most preferred way of getting health info, followed by a website.

HEALTHY LIFESTYLE BEHAVIORS

- 53%** are doctor adverse
- 44%** talk to doctor about screening
- 41%** talk to family/friends about screening
- 42%** consider themselves healthy
- 57%** care a great deal about maintaining health
- 45%** exercise on a regular basis

TOP BARRIERS TO SCREENING

- Been procrastinating
- Heard test was unpleasant
- Heard prep was unpleasant
- Fear/afraid

DEMOGRAPHIC PROFILE

- Insurance Status**
Over index total for insured
- Children**
Over index total for having children

Despite the fact that nearly one-quarter of this group has served as a caregiver to someone with cancer, they are pushing off being screened. Their procrastination seems to be driven by fear of the test or prep, so alternative solutions outside of colonoscopies will appeal to this group. Physicians, family and community organizations may be good channels to reach these individuals.

Financially Challenged

The Financially Challenged audience represents the low socioeconomic population that typically experiences a disproportionate share of health disparities. They are often restricted by high deductibles or do not have access to health insurance, or are underinsured.

While more consumers are accessing insurance, there are still approximately 32.3 million people who were uninsured, in part to states that have not expanded Medicaid eligibility, at the beginning of 2015.⁷

- The uninsured are less likely to have received cancer screenings and are even less likely to receive follow-up care after a diagnosis.
- Family/friends are not top sources of screening information.

Motivating the Financially Challenged

Like the insured procrastinators, the financially challenged are driven by control. This message about affordability tested high with this audience: **Preventing colon cancer, or finding it early, doesn't have to be expensive. There are simple, affordable tests available. Get Screened! Call your doctor today.** Because this audience is either not insured or has an income of under \$30,000, messages around affordability will drive action, as healthcare costs are a major concern for them. They respond to messages that promote alternative, less expensive options for screening.



Channels and Messengers To Reach Financially Challenged

- **Community Clinics/Nonprofit Organizations:** The majority of the financially challenged population receives health care from community clinics since they do not visit a primary care physician regularly.
- **Primary Care Physicians:** It is estimated that in 2012, 43% of America's working-age adults didn't go to the doctor or access other medical services because of the cost,⁸ but doctors are a very trusted source of information for this audience. Whenever possible systems should be in place to flag patients in need of screening when they do go to the doctor for sick visits, so doctors can use the opportunity to educate patients about colorectal cancer and testing options. The following resources can help with systematic change:
 - Primary Care Clinicians - <http://ncrt.org/about/provider-education/crc-clinician-guide/>
 - Community Health Centers - <http://ncrt.org/about/provider-education/manual-for-community-health-centers-2/>
- **Online Media and Website:** This audience often turns to online media for information about health concerns.
- **Community Health Centers (CHC):** CHCs are a major primary care provider for the underserved.

PROFILE OF THE FINANCIALLY CHALLENGED

Annual salary of <\$30k - OR - not insured

Baseline Screening Likelihood: 8.6%

MESSAGES & CHANNELS THAT RESONATE THE BEST

- 1** *There are several screening options available, including simple take-home options. Talk to your doctor about getting screened.* **▶ "Simple and I can do it in the privacy of my home."**

Emotional Driver: Control Adjusted Screening Likelihood: 18.6%
- 2** *Preventing colon cancer, or finding it early, doesn't have to be expensive. There are simple, affordable tests available. Get screened! Call your doctor today.* **▶ "Cost is a great concern as I have no insurance and little income."**

Emotional Driver: Control Adjusted Screening Likelihood: 17.5%
- 3** *Colorectal cancer is the second-leading cause of cancer deaths in the U.S. when men and women are combined, yet it can often be prevented or detected at an early stage.* **▶ "Brings to mind how important it is to get checked so that a person can prevent death from colon cancer."**

Emotional Driver: Expectations Adjusted Screening Likelihood: 16.7%



Discussions with doctor or health care provider are the most preferred way of getting health info, followed by a website.

TOP BARRIERS TO SCREENING

- Affordability
- No symptoms
- No family history

DEMOGRAPHIC PROFILE

- Employment**
Over index total for not employed and disabled
- Education**
Over index total for high school degree or less
- Income**
Over index total for less than \$30k income
- Marital Status/Children**
Over index total for married/living with partner and for having children
- Insurance Status**
Under index total for insured

HEALTHY LIFESTYLE BEHAVIORS

- 56%** are doctor adverse
- 27%** talk to doctor about screening
- 28%** talk to family/friends about screening
- 41%** consider themselves healthy
- 55%** care a great deal about maintaining health
- 42%** exercise on a regular basis

This group clearly needs alternative, less expensive solutions for screening. Community health organizations or other nonprofits may be good channels to get these individuals engaged given that over half are doctor adverse and only a small proportion are actually talking to family and friends about screening.

Newly Insured

The Insured, Newly Empowered audience now has access to insurance through the Affordable Care Act (ACA) Health Insurance Marketplace or expanded Medicaid eligibility, offering them cost-effective access to medical test procedures that they may not have had previously.

Approximately 81% of the Newly Insured feel optimistic about their health after receiving coverage and 60% have already used their insurance to receive medical care or get a prescription filled. At a time when they are feeling newly empowered and optimistic, now is the time to motivate them to get screened.

Motivating the Newly Insured

Many may be disenfranchised workers, non-working or self-employed. They may not have carried health coverage in the past but are benefiting from new access to coverage, or may be compelled by the ACA's tax penalties on uninsured persons.

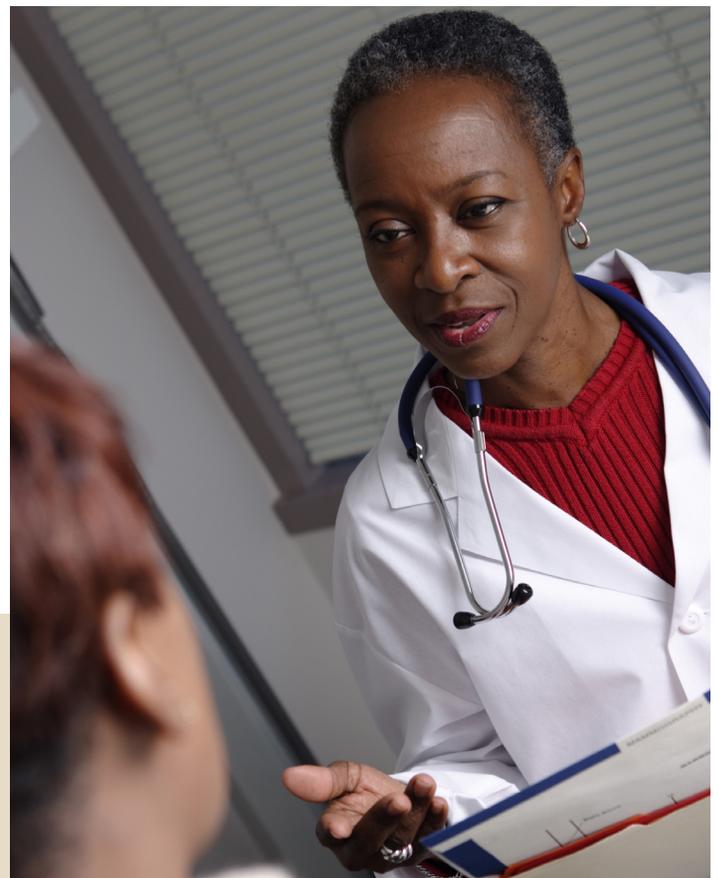
Motivating this audience should focus on educating them on screening options through the best channels, while encouraging them to take full advantage of new insurance plans to detect or prevent colorectal cancer. Because they may have not had insurance coverage in the past, they may require additional education on what insurance offers, and how prevention is covered.

While the "options" message was the highest message within this group, as with the other priority audiences, it is worth noting that the message below tested second highest.

Message #2 for newly insured: Most health insurance plans cover lifesaving preventive tests. Use the health benefits you are paying for to get screened for colon cancer. Call your doctor today.

Channels and Messengers To Reach Newly Insured

- **Primary Care Physicians, Pharmacies:** 60% have already used their insurance to receive medical care or get a prescription filled.
- **Medicaid Providers/Offices:** Studies have found that the biggest factor in reducing the uninsured rate was the expansion of Medicaid eligibility.
- **Insurance Providers:** Educate newly insured about their new coverage, and what is covered.
- **Community Health Centers:** As a portion of their patients move to either Medicaid coverage or coverage from the exchanges, health centers play a critical role in reaching the newly insured.
- **Community Organizations and Nonprofits:** Although a large number of newly insured are using their new benefits, many are still physician adverse so it's important to relay information through additional channels.



PROFILE OF THE NEWLY INSURED

Insured for less than 1 year

MESSAGES & CHANNELS THAT RESONATE THE BEST

- 1** *There are several screening options available, including simple take-home options. Talk to your doctor about getting screened.* **“It can be done at home and I don’t have to go to a hospital to get screened.”**

Emotional Driver: Control
- 2** *Most health insurance plans cover lifesaving preventive tests. Use the health benefits you are paying for to get screened for colon cancer. Call your doctor today.* **“If the insurance company is willing to pay for it, it must be a good idea.”**

Emotional Driver: Control
- 3** *Preventing colon cancer, or finding it early, doesn’t have to be expensive. There are simple, affordable tests available. Get screened! Call your doctor today.* **“Knowing that there are simple and affordable tests available.”**

Emotional Driver: Control
- 4** *Colorectal cancer is the second-leading cause of cancer deaths in the U.S. when men and women are combined, yet it can often be prevented or detected at an early stage.* **“It is informative, telling me something that I did not know. After hearing this message my likely course of action would be to ask my doctor at my next annual physical to include colon cancer screening as part of my exam if she is not already doing so.”**

Emotional Driver: Expectations



Discussions with doctor or health care provider are the most preferred way of getting health info, followed by a website.

TOP BARRIERS TO SCREENING

- No symptoms
- Heard the test was unpleasant
- No family history

DEMOGRAPHIC PROFILE

- Income**
Over index total for less than \$30k income
- Marital Status/Children**
Over index total for NOT having children
- Race/Ethnicity**
Over index total for Hispanic

HEALTHY LIFESTYLE BEHAVIORS

- 59%** are doctor adverse
- 29%** talk to doctor about screening
- 32%** talk to family/friends about screening
- 45%** consider themselves healthy
- 55%** care a great deal about maintaining health
- 48%** exercise on a regular basis

This group is clearly looking for alternative, less expensive options for screening. Very few newly insured individuals talk with their doctor about screening and a large proportion are doctor adverse. This makes it really important to rely on other sources of getting the word out about screening, such as community health organizations or nonprofits.

African Americans

African Americans are the second-most uninsured population in the U.S.⁹ and have one of the highest colorectal cancer incidence and mortality rates of all the racial groups in the U.S.¹⁰ The American Cancer Society estimated that approximately 18,000 African American men and women would be diagnosed with colorectal cancer during the year 2013 and in that same year approximately 6,850 would die.¹¹

Reaching African American Men and Women

Reaching African American men and women requires respect for cultural norms and barriers.

Male Priority Audience: Trust is an important prerequisite that needs to be at the core of health promotional efforts within the African American community.

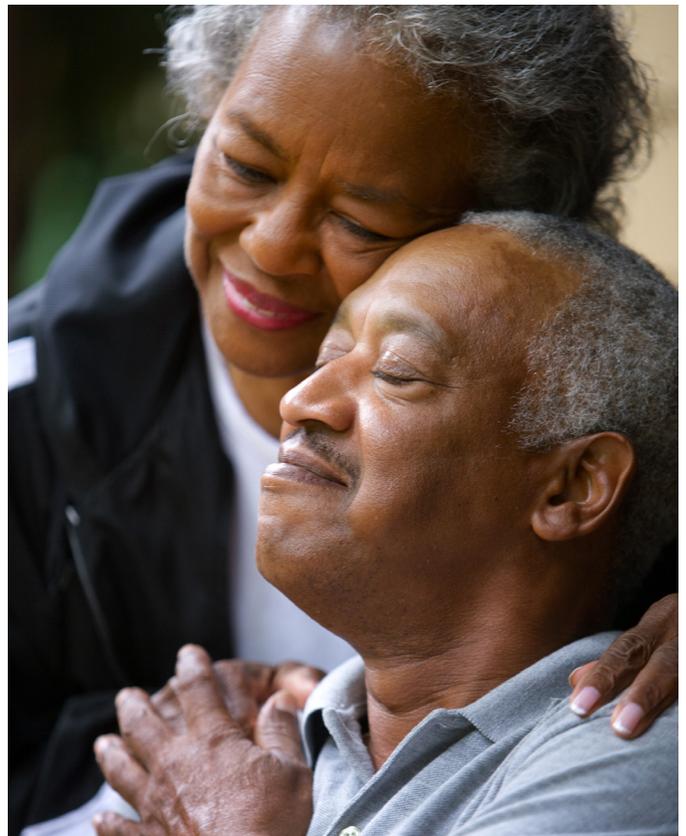
Female Priority Audience: Women are one of the main influencers of health behaviors in the African American community and are often the disseminator of health information to their families and communities.

Motivating the African American Population

Messages should focus on taking steps to have a positive impact on one's health, while stressing the fact that regardless of a lack of symptoms, screening is important now. The concept that screening is something that happens when you are well (no symptoms) seems not to be well appreciated by this audience. Additionally, messages for the males in this population should be sensitive to cultural perceptions regarding various screening methods. This can be achieved through education on screening options and utilizing testimonials from the African American community.

Channels and Messengers To Reach African Americans

- **Primary Care Physicians:** Unscreened African Americans cite no doctor recommendation as being their number one reason for not being screened. Whenever possible systems should be in place to flag patients in need of screening when they do go to the doctor for sick visits, so doctors can use the opportunity to educate patients about colorectal cancer and testing options. The following resources can help with systematic change:
 - Clinician's Guide - <http://nccrt.org/about/provider-education/crc-clinician-guide/>
 - Community Health Centers - <http://nccrt.org/about/provider-education/manual-for-community-health-centers-2/>
- **Television:** Serves as a top source for receiving health information and a preferred channel for receiving information specific to health.
- **Online Media and Website:** This audience often turns to online media for information about health concerns.
- **Faith and Community Organizations:** Faith centers and community organizations are trusted partners where important information is often passed along to constituents.



PROFILE OF UNSCREENED BLACK/AFRICAN AMERICANS

Baseline Screening Likelihood: 22.1%

MESSAGES & CHANNELS THAT RESONATE THE BEST

- 1** *There are several screening options available, including simple take-home options. Talk to your doctor about getting screened.* **“I have heard that this test is uncomfortable but if there are several options, I would be more likely to see which option would be good for me.”**

Emotional Driver: Control Adjusted Screening Likelihood: 28.2%
- 2** *Colorectal cancer is the second-leading cause of cancer deaths in the U.S. when men and women are combined, yet it can often be prevented or detected at an early stage.* **“I did not know that it was second in cancer deaths, and since colon cancer is in the family, screening becomes a priority.”**

Emotional Driver: Expectations Adjusted Screening Likelihood: 28.7%
- 3** *Preventing colon cancer, or finding it early, doesn't have to be expensive. There are simple, affordable tests available. Get screened! Call your doctor today.* **“It lets you know you can get a test at an affordable price to ensure your health.”**

Emotional Driver: Control Adjusted Screening Likelihood: 27.9%



Discussions with doctor or health care provider are the most preferred way of getting health info, followed by a website.

TOP BARRIERS TO SCREENING

- No symptoms
- Been procrastinating
- Affordability

DEMOGRAPHIC PROFILE

- Marital Status**
Over index total for single/never married
- Insurance Status**
Under index total for private insurance

HEALTHY LIFESTYLE BEHAVIORS

- 37%** are doctor adverse
- 37%** talk to doctor about screening
- 34%** talk to family/friends about screening
- 37%** consider themselves healthy
- 74%** care a great deal about maintaining health
- 43%** exercise on a regular basis

Similar to fearful procrastinators, despite the fact that one-quarter of this group has served as a caregiver to someone with cancer, they are delaying being screened or have not been screened because they have not experienced any symptoms. Physicians and community organizations would be useful channels to reach this group.

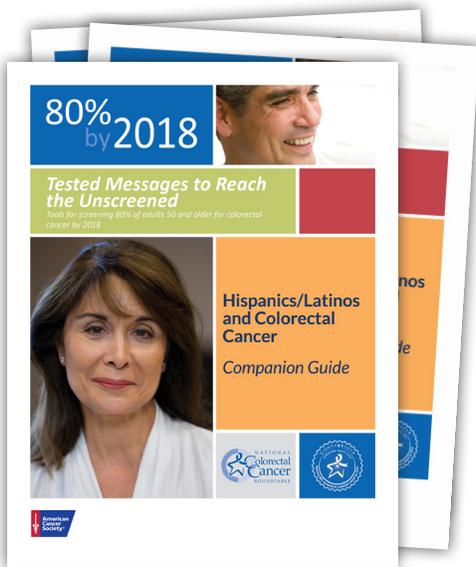
Hispanics/Latinos*

Hispanics/Latinos are the most uninsured population in the U.S.¹² and are more likely than others to not be screened.¹³ In fact, our 2014 research with English-speaking Hispanics shows that 70% do not talk to their doctor about screening. It is important that we focus on efforts to improve screening rates among this population to positively impact the national average.

Motivating the Hispanic/Latino Population

Successful messaging to Hispanic/Latino audiences should be intentionally bold and direct because the most effective campaigns convey risk and urgency clearly and directly. There are also cultural nuances in language that makes subtle messaging less effective.

While the following messages were tested only with English-speaking Hispanics, message testing for Spanish-speaking and bilingual Hispanics was completed in 2015. See the [Hispanics/Latinos and Colorectal Cancer Companion Guide](#) for an in-depth look at effective messages to reach Hispanics/Latinos, including audience-tested Spanish messages.



To motivate Hispanics/Latinos, it is important to understand how to effectively conduct education about screening options, particularly affordable options. Family relationships are strong; however, this research showed that friends and family may be reluctant to discuss sensitive health matters with each other. As such, it's important to engage this audience through alternative channels.

Channels and Messengers To Reach Hispanics/Latinos

- Physicians:** The Hispanic/Latino population has a high trust in their physicians and views them as a top source for information. Unscreened Hispanics/Latinos saying that “My doctor did not recommend it” is the number three reason they give for not being screened. Unfortunately, only a small percent visits their physicians regularly so additional messaging channels are needed. Whenever possible systems should be in place to flag patients in need of screening when they do go to the doctor for sick visits, so doctors can use the opportunity to educate patients about colorectal cancer and testing options. The following resources can help with systematic change:
 - Clinician’s Guide - <http://ncrt.org/about/provider-education/crc-clinician-guide/>
 - Community Health Centers - <http://ncrt.org/about/provider-education/manual-for-community-health-centers-2/>
- National Health Organizations, News Reports and Advertisements:** This audience is much more open to advertising messages than other populations and would like to receive information through these sources.
- Text Messages:** This audience is much more receptive to text message campaigns from avenues they are comfortable with, such as their mobile device.
- Television:** Top source for receiving health information, and a preferred channel for receiving information specific to health. Respectable television sources include *Telemundo* and *Univision*.

*The 2014 market research was conducted with an English-speaking audience. Please see our [2016 Companion Guide](#) with Spanish messages for a summary of recent market research conducted with bicultural, unacculturated Hispanics.

PROFILE OF UNSCREENED HISPANICS (English-Speaking Only)

Baseline Screening Likelihood: 21.2%

MESSAGES & CHANNELS THAT RESONATE THE BEST

1 There are several screening options available, including simple take-home options. Talk to your doctor about getting screened. **“I can test on my own, at home and at my leisure so I won’t be embarrassed.”**

Emotional Driver: Control

Adjusted Screening Likelihood: 28.5%

2 Colorectal cancer is the second-leading cause of cancer deaths in the U.S. when men and women are combined, yet it can often be prevented or detected at an early stage. **“The fact that it is the second-leading cause of deaths related to cancer would scare me enough to get tested. I did not realize that it was the second-leading cause of death. Knowing this would change my mind about cancer testing.”**

Emotional Driver: Expectations

Adjusted Screening Likelihood: 29.3%

3 Preventing colon cancer, or finding it early, doesn’t have to be expensive. There are simple, affordable tests available. Get screened! Call your doctor today. **“The affordable line is all.”**

Emotional Driver: Control

Adjusted Screening Likelihood: 27.9%



Discussions with doctor or health care provider are the most preferred way of getting health info, followed by a website.

TOP BARRIERS TO SCREENING



No family history



No symptoms



Affordability

DEMOGRAPHIC PROFILE



Age

Over index total for 50-64 years old



Insurance Tenure

Over index total for insured less than 1 year



Cancer Connection

Directionally under index total for survivors

HEALTHY LIFESTYLE BEHAVIORS



48% are doctor adverse



30% talk to doctor about screening



37% talk to family/friends about screening



48% consider themselves healthy



67% care a great deal about maintaining health



50% exercise on a regular basis

This group is looking for alternative, less expensive options for screening. Few talk with their doctor about screening. In addition, friends and family are not a top source of screening info either. This group needs to be engaged through other channels. Qualitatively, this group mentioned TV as a source for health info and a preferred channel for receiving info about screening.

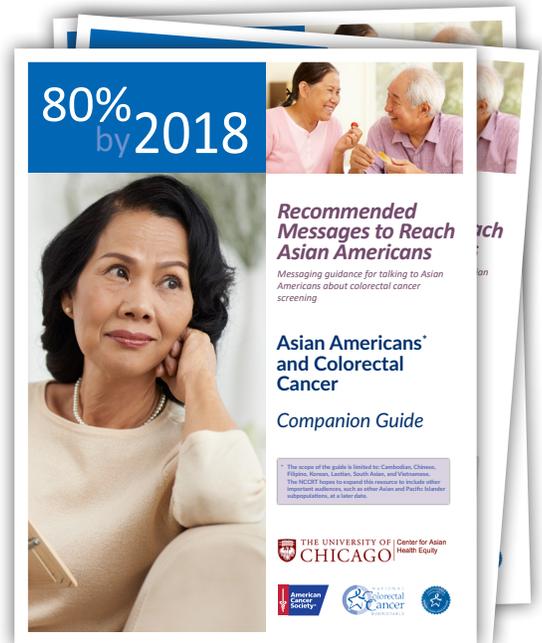
Asian Americans

Please see our new 2017 *Asian Americans Companion Guide* at <http://nccrt.org/tools/80-percent-by-2018/asian-american-companion-guide/> for a summary of consumer research conducted with seven Asian American subpopulations about screening, including recommended messages.

Tools To Reach the Priority Populations

Collateral Featuring Tested Messages

Your participation is critical to reaching an 80% colorectal cancer screening rate by 2018. Partners are encouraged to leverage the resources provided within this guidebook to support outreach efforts, using both the tools provided below and the research to develop more creative, emotional ways to convey key messages:



Banner Ads

<http://nccrt.org/tools/80-percent-by-2018/80-by-2018-communications-guidebook/80-by-2018-communications-guidebook-banner-ads/>

Social Media Toolkit (provided by George Washington Cancer Center)

<http://bit.ly/Colorectal2017Toolkit>

In-Office Screen Slides

<http://nccrt.org/tools/80-percent-by-2018/80-by-2018-communications-guidebook/80-by-2018-communications-guidebook-medical-office-screen-slides/>

Sample Radio/TV PSA Scripts

<http://nccrt.org/wp-content/uploads/Radio-and-TV-PSA-Scripts.pdf>

Infographics

<http://nccrt.org/wp-content/plugins/download-monitor/download.php?id=145>

Sample CEO Champion Letter

<http://nccrt.org/wp-content/plugins/download-monitor/download.php?id=164>

Sample Email from a CEO to Employees

<http://nccrt.org/wp-content/plugins/download-monitor/download.php?id=166>

Sample Email from a Hospital to Staff

<http://nccrt.org/wp-content/plugins/download-monitor/download.php?id=165>

MIYO

MIYO (Make it Your Own) is a free web-based platform for creating your own custom educational materials in English and Spanish. These include posters, flyers, inserts and more tools to promote colorectal cancer screening and other topics.

Getting screened doesn't have to be expensive.

Simple, affordable tests for colon cancer are available. Get screened!

Talk to your doctor about which colon cancer screening is right for you.

Call 1.888.555.5555 today to schedule your appointment.

MIYO
make it your own

Getting screened doesn't have to be expensive.

Simple, affordable tests for colon cancer are available. Get screened!

Talk to your doctor about which colon cancer screening is right for you.

Call 1.888.555.5555 today to schedule your appointment.

HCI

MIYO offers hundreds of messages to choose from, including the messages tested by the NCCRT and American Cancer Society. MIYO was created through the generous support of National Cancer Institute (NCI) and the CDC.

www.miyoworks.org

Templates

Talking Points for Media

Colorectal cancer is the second-leading cause of cancer deaths in the United States, yet it is highly *preventable, detectable and treatable*. Screening saves lives. Get screened.

IMPORTANCE OF SCREENING	PAYMENT & INSURANCE INFORMATION	TESTING OPTIONS
<ul style="list-style-type: none"> ▶ It is estimated that in 2017, over 135,000 cases of colorectal cancer will be diagnosed in the U.S. ▶ In 2017, over 50,000 people are expected to die from colorectal cancer. <ul style="list-style-type: none"> ▪ Most people with early stage colorectal cancer (commonly referred to as colon cancer) have it and don't know it. ▶ Colon cancer can often be prevented through screening. ▶ Screening tests can find pre-cancerous polyps; removing polyps prevents colon cancer. <ul style="list-style-type: none"> ▪ If the tests find cancer early, colon cancer is very treatable. ▶ Men and women 50 or older should get screened, regardless of family history because: <ul style="list-style-type: none"> ▪ in its earliest, most treatable stage, colon polyps and early colon cancers often do not cause symptoms; and ▪ most colon cancers occur in those without a family history. ▶ Those with a family history of colon cancer should let their doctor know; they may have to begin screening at an earlier age. ▶ People of all ages should talk to their doctor about colon cancer to rule out a family history of the disease or to discuss any symptoms, such as blood in the stool or a persistent change in bowel habits. ▶ It's important to take control and talk to your doctor. Get screened to prevent colon cancer. 	<p style="background-color: #e6f2ff; padding: 5px;">Medicare pays for colon cancer screening. To find out about Medicare coverage, call 1-800-MEDICARE (1-800-633-4227) or visit www.medicare.gov</p> <p style="background-color: #e6f2e6; padding: 5px;">Most private insurance plans are required to pay for colon cancer screening, often with limited, if any, out-of-pocket costs. Check your health plan for details on your specific coverage.</p> <p style="background-color: #e6f2e6; padding: 5px;">Those who signed up for insurance through the Affordable Care Act are covered for preventive services, such as colon cancer screening. They should check with their plan for details.</p> <ul style="list-style-type: none"> ▶ There may be resources available in local communities to help pay for colon cancer screenings for the uninsured. ▶ Community organizations and advocacy groups are great resources to learn more. 	<ul style="list-style-type: none"> ▶ Men and women aged 50 and older (at average risk) should be screened for colon cancer. ▶ Fortunately, there are multiple screening tests for colon cancer; a doctor can advise as to which test is best for individual needs. ▶ The most commonly used screening tests are: <ul style="list-style-type: none"> ▪ Fecal Occult Blood Testing (FOBT) or Fecal Immunochemical Test (FIT) every year. ▪ Colonoscopy every 10 years. ▶ Newer tests such as Stool DNA and CT Colonography are now among recommended options. ▶ Many people think colonoscopy is the only option—it's not! Consult a doctor about other options, such as take-home tests. ▶ Men and women 50 and over who haven't been screened should remind their doctor that they're overdue. ▶ Colon polyps and early colon cancers often cause no symptoms. Blood in stool; rectal bleeding; a change in bowel habits; narrowing of stool; unexplained weight loss; fatigue; anemia or constipation that lasts for more than a few days can be symptoms of colon cancer. It's critical to consult a doctor, regardless of age, if these symptoms are present.
FINANCIALLY CHALLENGED	INSURED HEALTH CONFIDENT	INSURED EMPOWERED

Include stories from survivors, caregivers, families, celebrities and doctors—particularly those who are known by or look like the priority audience to relay these messages:

- Personal experience with screening, early detection, and prevention -
- Decision pathways, and what obstacles they overcame to get screened -
- What they would tell others who are reluctant to get screened -

Sample Pledge Press Release

(Insert Organization) Commits to Life-Saving Role

(Insert Organization) Joins Forces with More Than a Thousand Local and National Organizations to Increase Colorectal Cancer Screening Rates Across the Country

“80% by 2018” is a shared goal to have 80% of adults aged 50 and older regularly screened for colorectal cancer by 2018.

Insert City (and date) – Colorectal cancer screening has been proven to save lives. **(Insert Organization)** today announced that it has made the pledge to help increase colorectal cancer screening rates by supporting the 80% by 2018 initiative, led by the American Cancer Society (ACS), the Centers for Disease Control and Prevention (CDC) and the National Colorectal Cancer Roundtable (a coalition co-founded by ACS and CDC).

Colorectal cancer is the nation’s second-leading cause of cancer-related deaths in the U.S. when men and women are combined; however, it is one of only a few cancers that can be prevented. Through colorectal cancer screening, doctors can find and remove hidden growths (called “polyps”) in the colon, before they become cancerous. Removing polyps can prevent cancer.

“80% by 2018” is a National Colorectal Cancer Roundtable (NCCRT) initiative in which more than a thousand organizations have committed to substantially reducing colorectal cancer as a major public health problem and are working toward the shared goal of 80% of adults aged 50 and older being regularly screened for colorectal cancer by 2018. Leading public health organizations, such as NCCRT, CDC and the ACS are rallying organizations to embrace this shared goal. If we can achieve 80% by 2018, 277,000 cases and 203,000 colorectal cancer deaths would be prevented by 2030.

“Colon cancer is a major public health problem, and adults age 50 and older should be regularly screened for it, but we have found that many people aren’t getting screened because they don’t believe they are at risk, don’t understand that there are test options or don’t think they can afford it,” said **(insert name)**. “The truth is that simply aging puts you at greater risk for colon cancer. Colorectal cancer in its early stages usually has no symptoms, so most everyone 50 and older should get screened. There are several screening options – even take-home options – available. Plus, many public and private insurance plans cover colorectal cancer screening and there may be local

resources available to help those that are uninsured.”
[personalize quote before use]

While colorectal cancer incidence rates have dropped in the U.S. among adults 50 and older, it is still is the 2nd leading cause of cancer death in the United States, despite being highly preventable, detectable and treatable. In fact, it is estimated that in 2017, over 135,000 cases of colorectal cancer will be diagnosed.

Part of the 80% by 2018 goal is to leverage the energy of multiple and diverse partners to empower communities, patients and providers to increase screening rates. The 80% by 2018 initiative consists of health care providers, health systems, communities, businesses, community health centers, government, non-profit organizations and patient advocacy groups, among others, who are committed to getting more people screened for colorectal cancer to prevent more cancers and save lives.

“We are thrilled to join the cause to improve colon cancer screening rates,” said **(insert name)**. “We are asking all members of our community to come together and help us by getting screened and talking to your friends and family who are over 50 years of age about getting screened. Together, we can help make colon cancer a major public health success story.” [personalize quote before use]

For more information or to learn about resources in your area, visit: **xxxxxxx**.

[Insert Organization’s Boiler Plate Language – include organization description, mission and contract information including website]

[INSERT APPROPRIATE LINK FOR MORE INFORMATION (e.g. For more information about colorectal cancer screening, visit www.cancer.org/colon or contact the American Cancer Society at 1-800-227-2345. For more information about the 80% by 2018 initiative, visit www.nccrt.org.)]

Sample New Initiative Press Release

(Insert Organization) Announces [insert new initiative] (e.g. Screening Program for the Uninsured)

(Insert Organization) Joins Major National Effort to Save Lives from Colorectal Cancer by 2018 Through Increased Screening

[Insert city, state] – [insert date] – (Insert organization) today announced [insert one or two sentences describing the new initiative (e.g. that they launched a new screening program for the uninsured, that they have a new patient or physician reminder system, that there is a targeted community outreach program, etc.)]

This promising program is a key part of [insert organization]'s commitment to the 80% by 2018 initiative, a shared goal led by the National Colorectal Cancer Roundtable (NCCRT) to have 80% of adults regularly screening for colorectal cancer by 2018. [insert organization] signed the 80% by 2018 pledge at an event on [insert date].

[Insert details about the new initiative.]

[Insert quote from org spokesperson about why they began this initiative, steps they've taken and/or how it is important to the community. Include recognition of key partners for supporting the initiative if applicable.]

[Insert quote from American Cancer Society health systems staff praising partner org efforts and commenting on its importance. Contact your local ACS health systems staff to request a quote.]

“80% by 2018” is an NCCRT initiative in which more than a thousand organizations have committed to substantially reducing colorectal cancer as a major public health problem and are working toward the shared goal of 80% of adults aged 50 and older being regularly screened for colorectal cancer by 2018. Colorectal cancer is the second-leading cause of cancer deaths in the U.S. when men and women are combined, and a cause of considerable suffering among more than 135,000 adults diagnosed with colorectal cancer each year in the U.S. When adults get screened for colorectal cancer, it can be detected early at a stage when treatment is most likely to be successful, and in some cases, it can be prevented through the detection and removal of precancerous polyps. According to a 2015 study, if we can achieve 80% by 2018, 277,000 cases and 203,000 colorectal cancer deaths would be prevented by 2030.

For more information or to learn about resources in your area, visit: xxxxxxxx.

[Insert Organization's Boiler Plate Language – include organization description, mission and contact information including website]

[INSERT APPROPRIATE LINK FOR MORE INFORMATION (e.g. For more information about colorectal cancer screening, visit www.cancer.org/colon or contact the American Cancer Society at 1-800-227-2345. For more information about the 80% by 2018 initiative, visit www.nccrt.org.)]

Sample Success Announcement

(Insert Organization) Announces [insert key success reported] (e.g. #% Colorectal Cancer Screening Increase since 20XX)

(Insert Organization) is Part of a Major National Effort to Save Lives from Colorectal Cancer by 2018 Through Increased Screening

[Insert city, state] – [insert date] – (Insert organization) today announced [insert one or two sentences describing the success (e.g. that they have increased colorectal cancer screening interventions by #% among their eligible patient population since 20XX. OR In 20XX, just #% of patients age 50 and over were being screened for colorectal cancer; today, over #% are being screened, etc.)]

This incredible success is a key part of [insert organization]'s commitment to the 80% by 2018 initiative, a shared goal led by the National Colorectal Cancer Roundtable (NCCRT) to have 80% of adults regularly screening for colorectal cancer by 2018. [insert organization] signed the 80% by 2018 pledge at an event on [insert date].

[Insert details about the effort/success and how it was achieved.]

[Insert quote from org spokesperson about why they are making this effort, steps they've taken and/or how this effort is important to the community. Include recognition of key partners for supporting this effort if applicable.]

[Insert quote from American Cancer Society health systems staff praising partner org efforts and citing the importance of screening. Contact your local ACS health systems staff to request a quote.]

“80% by 2018” is an NCCRT initiative in which more than a thousand organizations have committed to substantially reducing colorectal cancer as a major public health problem and are working toward the shared goal of 80% of adults aged 50 and older being regularly screened for colorectal cancer by 2018. Colorectal cancer is the second-leading cause of cancer deaths in the U.S. when men and women are combined, and a cause of considerable suffering among more than 135,000 adults diagnosed with colorectal cancer each year in the U.S. When adults get screened for colorectal cancer, it can be detected early at a stage when treatment is most likely to be successful, and in some cases, it can be prevented through the detection and removal of precancerous polyps. According to a 2015 study, if we can achieve 80% by 2018, 277,000 cases and 203,000 colorectal cancer deaths would be prevented by 2030.

For more information or to learn about resources in your area, visit: xxxxxxxx.

[Insert Organization's Boiler Plate Language – include organization description, mission and contact information including website]

[INSERT APPROPRIATE LINK FOR MORE INFORMATION (e.g. For more information about colorectal cancer screening, visit www.cancer.org/colon or contact the American Cancer Society at 1-800-227-2345. For more information about the 80% by 2018 initiative, visit www.nccrt.org.)]

Check out our new resource on Earning Earned Media at <http://ncrt.org/tools/80-percent-by-2018/80-by-2018-communications-guidebook/#new> for more advice about media engagement.

Sample Media Pitch

Dear (insert editor),

(Insert organization) is proud to announce that we have joined forces with more than a thousand local and national organizations to increase colorectal cancer screening rates throughout the country, as part of the 80% by 2018 initiative.

Colorectal cancer is a major public health problem as the second-leading cause of cancer death in the United States, despite being highly preventable, detectable and treatable. We ask you, in recognition of National Colorectal Cancer Awareness Month (insert other observances), to help us encourage more people to get screened for colorectal cancer to prevent more cancers and save lives. It's particularly important that your readers know that:

- The risk of colorectal cancer begins to rise significantly around age 50, so every man and woman should begin regular screening by age 50.
- There are several screening options – even take-home options – available.
- Most public and private insurance plans cover colorectal cancer screening.
- There may be local resources available to help those that are uninsured.

We would love to further discuss with you.

Sample Email from a CEO to Employees

Subject: Colorectal Cancer Awareness Month

March is National Colorectal Cancer Awareness Month, a great time to make sure you and your family take advantage of life-saving colon cancer screening. Colorectal cancer is the second-leading cause of cancer deaths in the U.S. when men and women are combined, yet it can often be prevented or detected at an early stage.

You are more likely to get colon cancer as you age. If you're over 50, you should get screened for colon cancer. Similarly, talk to your doctor about screening if you have a family history of the disease, even if you are under 50. If you have coverage through [enter name of employee plan], your health plan provides full coverage for recommended colon cancer screening tests. There are several screening options available, including simple take-home options. Talk to your doctor about getting screened.

Now is also a great time to remind your family and friends who are over 50 to get screened. Most health plans now provide coverage for colon cancer screening, and many people now qualify for health care coverage with [Name of State Health Exchange and/or Expanded Medicaid Plan if Available]. [Add information how to access charitable screening services for the uninsured if available].

Learn more about colon cancer and recommended screening tests at www.cancer.org/colon. If you or your family members have additional questions about colon cancer screening, contact the American Cancer Society at 1-800-227-2345 or [insert other partner if desired].

Don't Forget the Blue Star!

The Blue Star is a symbol that represents all individuals engaged in the fight against colorectal cancer.

For additional information on the Blue Star and how to utilize it, please refer to the Blue Star/March Marketing Kit located at: <http://ncrt.org/about/public-education/blue-star-marketing-kit/>

Download Blue Star graphics at: <http://ncrt.org/about/bluestar/>



Being a Part of the 80% by 2018 Effort

All About 80% by 2018

As we are all playing a role in the 80% by 2018 initiative, when speaking to media or potential partners about the campaign there are a number of assets available on the National Colorectal Cancer Roundtable website (<http://nccrt.org>), or you can link to materials below:

[80% by 2018 Talking Points](#)

[80% by 80% by 2018 Online Pledge](#)

[80% by 2018 Graphics](#)

[80% by 2018 Blog](#)

[80% by 2018 Organizations](#)

[80% by 2018 Press Backgrounder](#)

[80% by 2018 Promo Reel](#) (40 seconds)

[Watch](#) Katie Couric voice her support for 80% by 2018

[Watch](#) Dr. Richard Wender, NCCRT Chair, review the 10 steps it will take to get to 80% by 2018

[Watch](#) 80% by 2018 webinar archives and check nccrt.org for upcoming events



How to Work With Partners

80% by 2018 Briefs explain the roles various partners can play in 80% by 2018. Visit nccrt.org/tools/80by2018 to access the following materials:

- 80% by 2018 Welcome Packet
- What can primary care doctors do to advance 80% by 2018?
- What can hospitals do to advance 80% by 2018?
- What can insurers do to advance 80% by 2018?
- What can employers do to advance 80% by 2018?
- What can community organizations do to advance 80% by 2018?
- What can endoscopists do to advance 80% by 2018?
- What can women's health providers do to advance 80% by 2018?
- What can survivors and families do to advance 80% by 2018?
- What can Comprehensive Cancer Control coalitions do to advance 80% by 2018?
- What can radiologists do to advance 80% by 2018?

Our list of 80% by 2018 resources is growing. Bookmark nccrt.org and check our website often!

Interested in how your mayor, governor or state legislators can support colorectal cancer screening or 80% by 2018? Email Citseko.staples@cancer.org for a copy of ACS CAN's 80% by 2018 documents for state or local policy makers.

Making the Case: ACS Statistics Center

As you strive to communicate the toll that colorectal cancer takes on the people in your state, you can use the new American Cancer Society Statistics Center, which allows visitors to view and download maps, graphs and charts; create custom downloadable maps, graphs and charts; and more easily share statistics:

<http://cancerstatisticscenter.cancer.org/#/>

When you go to the link, use the bar at the top to choose either a state or a cancer site. You can then make that data more specific by clicking on “Tools” and then “open in analysis tool” to filter the data down to get graphics of the statistic you want by state and cancer site.

Estimated deaths, 2017

Colorectum

New York



Pennsylvania



Georgia



Estimated new cases, 2017

Colorectum

Male



Female



Data Source: American Cancer Society, 2017

© 2017 American Cancer Society

Estimated new cases, 2017

Colorectum

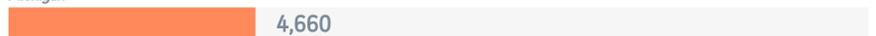
California



Florida



Michigan



Data Source: American Cancer Society, 2017

© 2017 American Cancer Society

CancerStatisticsCenter.cancer.org

Find additional local and regional data:

- Colorectal cancer screening rates in 500 major U.S. cities: <https://www.cdc.gov/500Cities/>
- Colorectal cancer death rates by U.S. congressional district: <http://onlinelibrary.wiley.com/doi/10.3322/caac.21292/full>

Engaging Celebrities

Identifying celebrity ambassadors with a personal connection to the cause and mission of the campaign can also help your message resonate. Visit our new resource on Engaging Celebrities for advice on how to successfully work with celebrities to promote CRC screening at <http://nc crt.org/tools/80-percent-by-2018/80-by-2018-communications-guidebook/#new>.

Working with Celebrity Ambassadors

Why use celebrity ambassadors?

We have heard again and again about the need for messaging to break through marketing "clutter" to reach the unscreened, particularly those who are not getting screened because of competing priorities or procrastination. In many instances, the unscreened generally know they need to be screened for colorectal cancer, but for whatever reason, the messages they have received about screening have not been enough to move them to action. In these instances, the challenge for the public health community is going beyond providing a rational message about the need for screening and to instead, engage the unscreened at a more emotional level. Finding someone who is well-known – a "celebrity" – to deliver the message is one way to do that.

What qualifications are needed from a celebrity ambassador?

Thinking broadly about who is a celebrity is an important first step. Beyond film and TV stars and professional athletes, more and more self-made "talent" is emerging from the digital space. There are influencers – whether they are fashion, food, fitness or animal bloggers – who have a huge captive audience they reach daily with tailored content. The growing number of digital influencers have very strong connections with their audiences, who tend to be very engaged.

Additionally, many approachable and recognizable local celebrities should not be overlooked: community officials, regional news anchors, weather people, radio hosts, members of local sports teams and coaches, university and even high school mascots; we've seen animal ambassadors with truly impressive social media followings!

The Greater Chattanooga Colon Cancer Foundation (GCCCF), for example, had success asking recognizable leaders from the community to appear on billboards about screening, such as the county sheriff, the monsignor from a Catholic church, a Baptist church pastor and various political leaders, such as the mayor, a state representative and a US Senator. These familiar local leaders grabbed the attention of those driving by, creating visibility for the campaign that was not present when a previous campaign used unknown individuals.

Earn Your Earned Media

Earn the right to be heard through respect, education, responsiveness.

Understand the Media

The media business is not glamorous. It is 99% hard-work, deadlines, pressure and low pay. The media is also highly competitive and made up of extremely talented professionals that deserve respect. The media is also a business that is trying to stay in business which ultimately means that they will work with you if you help them with stories that will grow their business.

Establish Relationships

In general, people do business with people they like and respect. Establish good working relationships with your media connections and maintain those relationships regularly. Also, remember journalists have a job to do and your stories may not be published or if they are published, they may be changed. In other words, at the end of the day – they want to get the story correct, but they also want to "sell papers."

A media committee can help coordinate messages and outreach efforts so the organization is speaking with one voice. They can keep everyone up to date on key messages, select and train spokespersons, and keep leaders up to date. The committee serves as a gatekeeper, monitoring contact with the media and supporting media events. They also make it easier to prevent erroneous or conflicting information from confusing the press and ultimately the public.

Earning Your Earned Media

While funding to purchase ad placement about CRC screening may be limited, you may be able to secure media coverage by building strong relationships with the media, tapping into social media and being ready to promote your key messages. Visit our new resource on Earning Your Earned Media at <http://nc crt.org/tools/80-percent-by-2018/80-by-2018-communications-guidebook/#new>

Colorectal Cancer Speakers Bureau

The Colorectal Cancer (CRC) Speakers Bureau is a joint project of the ACS, NCCRT and the National Association of Community Health Centers. The Bureau is composed of trained clinicians across the U.S. who are available to speak on colorectal cancer risk factors, and prevention and early detection to medical and lay audiences. To request a speaker from the CRC Speakers Bureau contact us at <http://nc crt.org/about/provider-education/crc-speakers-bureau/>.

Celebrating Success

We are encouraging NCCRT members to share stories of their successes around the 80% by 2018 efforts. We love to celebrate when organizations embrace 80% by 2018, set organizational goals, implement change or make progress. We invite you to post these stories and share success on:

- 80% by 2018 Hall of Fame (<http://nccrt.org/tools/80-percent-by-2018/hall-of-fame/>) to submit your screening success if your organization has hit 80%!
- NCCRT Facebook page (<https://www.facebook.com/coloncancerroundtable>).
- Blue Star Facebook page (<https://www.facebook.com/BlueStarColonCancer>).
- Follow [@NCCRTnews](https://twitter.com/NCCRTnews) (twitter.com/NCCRTnews) and tweet using #NCCRT and #80by18.
- Use the press release templates from pages 34 and 35 to share successes nationally or locally.
- Submit a nomination for a 80% by 2018 National Achievement Award (nominations accepted each fall) at <http://nccrt.org/tools/2017-80-by-2018-national-achievement-awards/>.

Showcase successes to your audiences. In 2017 a concerted effort is being made to build excitement about the 80% by 2018 initiative. Post about milestones in screening efforts, successful collaborations and your colon cancer screening champions.

EXAMPLE: *XXX Health Center is a proud participant in the 2017 Colon Cancer (INSERT STATE) Roundtable taking place on (INSERT DATE). We are at (XX) percent screened for colon cancer and hope to reach 80% by 2018.*

Please visit the previous Blue Star/March Marketing Kit located at <http://nccrt.org/about/public-education/blue-star-marketing-kit/> and our new resource on Earning Your Earned Media at <http://nccrt.org/tools/80-percent-by-2018/80-by-2018-communications-guidebook/#new> for additional information on working with social and traditional media.



Evaluating Your 80% by 2018 Messaging Efforts

While the resources and recommendations from this guide are based on market research, partners will still want to establish if they are using these recommendations in a way that is moving the unscreened to action. As such, we encourage all our partners to continue to evaluate their efforts and make continuous improvements, as needed. For more advice on evaluating 80% by 2018 messaging efforts, visit our new resource on Evaluating Colorectal Cancer Communications Campaigns, *Guidance for Evaluating the Effectiveness and Impact of 80% by 2018 Communications Efforts* at <http://nccrt.org/tools/80-percent-by-2018/80-by-2018-communications-guidebook/#new>.

Additionally, we encourage all partners in the 80% by 2018 effort to assess where they are, set clear and achievable goals, evaluate their efforts, and understand and share their successes! The NCCRT Evaluation 101 toolkit can help: <http://nccrt.org/about/public-education/evaluation-toolkit/>.

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Appendix A

Social Media Editorial Calendar

This year's calendar focuses on themes and messages for our Priority Consumers.

- “Theme titles” are used for internal copywriting and explanation only, and will not be published externally.
- Quotes are representative and serve as examples.
- Posts can be enhanced by using video vs. static images. Facebook, Instagram and Twitter all allow for video uploads, just remember that some have size and length limits.
- Don't miss the sample posts listed at the end to help celebrate successes (screening rate improvements, new collaborations, etc.)

JANUARY	
Theme*	<p>A Healthier You in the New Year</p> <p>The New Year is a time when many focus on getting healthier. Encourage everyone to take action now to become healthier, and include a preventative colon cancer screening as one of the ways to get there.</p>
Sample Facebook	<p>It's the New Year and that means an opportunity for a fresh start when it comes to your health. Wellness checks should be at the top of your list. If you're 50 or older, add getting screened for colon cancer to the list. There are several screening options available, including affordable, take home options. Talk to your doctor today. (link to website)</p> <p>- Attach shareable graphic</p> <p>Trying to be a healthier you this year? If you're 50 or older, be sure that includes a colon cancer screening. Ask your doctor about which option for screening is best for you. (link to website)</p>
Sample Twitter	<p>Happy #NewYear! Happy Healthier You! Be proactive and schedule a #coloncancer screening this month. (link to website)</p> <p>50 or older? Start the #NewYear right, talk to your doctor about #coloncancer. Getting screened could save your life. (attach shareable graphic)</p> <p>Setting #NewYearsResolutions? Add #coloncancer screenings—ask your doctor about your options, including simple take-home tests.</p>
Sample Instagram/Pinterest	<p>Instagram</p> <p>This is the year to get healthier. This includes calling your doctor and getting screened for #coloncancer #getscreened - Upload photo of to do list or resolution-related image</p> <p>Pinterest</p> <p>Board idea – New Year, New You: photos or graphics of health-focused resolutions, including exercise, eating healthy and preventative screenings such as colon cancer.</p>
Sample Internal Communications	<p>This year take your health into your own hands. We're committed to improving colon cancer screening rates! If you're 50 or older, talk to your doctor about getting screened – sooner if you have a family history of the disease. If you're younger, encourage your family and friends to get screened. Together, let's save lives and reduce colon cancer throughout the nation.</p>

FEBRUARY

Theme*	<p>Be Proactive in Cancer Prevention</p> <p>February is National Cancer Prevention Month. Many cancer deaths could be prevented by making healthier choices, including not smoking, eating healthy, getting enough exercise and getting recommended screening tests, including screening for colon cancer if you are 50 or over.</p>
Sample Facebook	<p>February is National Cancer Prevention Month! Help prevent cancer by not smoking, eating right and being physically active. Part of your prevention plan should include getting recommended screenings for cancer. Haven't been screened for colon cancer and you're 50 or older? Talk to your doctor about what screening option is best for you. (insert website link)</p> <p>Preventing colon cancer, or finding it early, doesn't have to be expensive. There are simple, affordable tests available. Talk to you doctor! (insert website link)</p>
Sample Twitter	<p>Turning 50 this year? Be sure to put #coloncancer on your list of #cancer screenings, even if you're healthy. (insert link to website)</p> <p>Eating healthy, being active, not smoking can help prevent #cancer. So can screenings, including for #coloncancer. (insert link to website)</p>
Sample Instagram/ Pinterest	<p>Instagram</p> <p>Many cancer deaths could be prevented through better choices, like not smoking, eating healthy, being more physically active and getting recommended cancer screenings. If you're 50 or older, add #coloncancer screening to your list and #getscreened today. - Upload image of an appointment card for doctor's appointment</p> <p>Pinterest</p> <p>Board idea – Photos or links to blogs of survivors or those who had a pre-cancerous polyp removed.</p>
Sample Internal Communications	<p>One in three adults over the age of 50 is still not getting screened for colon cancer as recommended. If you are 50 or older, start the conversation with your doctor about screening today. There are several screening options available, including simple take home tests.</p>

MARCH

Theme*	<p>National Colorectal Cancer Awareness Month Raising awareness of colon cancer screening and a call to action for those aged 50 or older to get screened.</p> <p><i>Note – this year we will be doing a Thunderclap during March.</i> For more information, contact nccrt@cancer.org</p>
Sample Facebook	<p>March is National Colorectal Cancer Awareness Month. Colorectal cancer is the 2nd leading cancer killer in the US among men and women combined, but colon cancer can often be prevented or found at an earlier stage with regular screening. We need your help in encouraging friends and family 50 and older to get screened. Get tips here: (insert website link)</p> <p>It's National Colorectal Cancer Awareness Month! Are you 50 or older? Then you need to be screened as your risk of developing this cancer increases with age. Even if you feel healthy, you should be regularly screened. Learn more about screening options available to you, including simple take home options: (insert website link)</p> <p>This month, show your support for colon cancer research and screenings by using #CRCAwareness on Twitter and Facebook and tagging those who need to get screened. Colon cancer is highly treatable if caught at an early stage and is one of the few cancers that can often be prevented through screening. - Attach shareable graphic of campaign</p>
Sample Twitter	<p>Show support for #colon cancer research & screenings by using #CRCAwareness this month and tag those who need to #getscreened. (insert link to website)</p> <p>In honor of National #CRCAwareness Month, ask friends 50 and older to #getscreened #coloncancer. (insert link to website)</p> <p>#Colon cancer is preventable, treatable and beatable. Call your doctor today about screening. #Getscreened #CRCAwareness. (insert link to website)</p> <p>Help us ensure all adults 50 & older #getscreened regularly for colon cancer. (insert link to website)</p>
Sample Instagram/ Pinterest	<p>Instagram Colorectal cancer is the 2nd leading cause of cancer deaths in the US when men and women are combined, but it can often be prevented through screening or found at an early stage. Remind those who are over 50 to #getscreened regularly.</p> <p>- Upload images of texts, phones, two people talking to emphasize the need to communicate about colon cancer with others</p> <p>It's National Colorectal Cancer Awareness Month. There are various options available for testing, including simple take home options. Talk to your doctor about getting screened for #coloncancer. - Upload shareable graphic about National Colorectal Cancer Awareness Month</p> <p>Pinterest Board idea – National Colorectal Cancer Awareness Month: images of how a polyp can be removed during a colonoscopy; listing of tests available.</p>
Sample Internal Communications	<p>It's National Colorectal Cancer Awareness Month. What steps are you taking this month to ensure that more people take advantage of potentially life-saving colon cancer screening? Encourage your friends and family ages 50 and older to talk to their doctor about getting screened.</p>

APRIL

Theme*	<p>Accelerating Health Equity for the Nation</p> <p>April is National Minority Health Month and this year's theme is "Accelerating Health Equity for the Nation." Let's work together to raise awareness about the need for health equity, including health equity around colon cancer screening.</p>
Sample Facebook	<p>Colorectal cancer is the 2nd leading cause of cancer death for Hispanics when men and women are combined. Spread the word that if you are over 50, you're at a higher risk for colon cancer—even if you are healthy. There are simple, take-home, affordable screening options. Talk to your doctor today. (insert website link)</p> <p>African-Americans have the highest colon cancer incidence and mortality rates in the US. Colon cancer screenings can prevent cancer or find it early when it is more treatable. If you are 50 or older, don't put off your colon cancer screening any longer. Call your doctor today. (insert link to website)</p>
Sample Twitter	<p>Afraid of #coloncancer screening? Talk to someone who's been through it & hear why it's worth it to #getscreened. (insert link to website)</p> <p>Stop making excuses. We recommend adults 50 & over #getscreened for #coloncancer on a regular basis. Here's why: (insert link to website)</p>
Sample Instagram/Pinterest	<p>Instagram</p> <p>National Minority Health Month is a time to raise awareness of the need for health equity among racial and ethnic minorities, including for #coloncancer screening. Tag us and share your story about what you are doing to raise awareness.</p> <p>- Upload shareable graphic about disparities in colon cancer screening</p> <p>Pinterest</p> <p>Board idea – Images showing how partners organizations, individuals or groups that are raising awareness in their communities either through in-person clinics, community boards, PSAs, etc.</p>
Sample Internal Communications	<p>This is National Minority Health Month, a time to double down on our commitment and efforts to ensure better health equity for all, including in the area of colon cancer screening. Together, our efforts can save lives and reduce colon cancer in all communities.</p>

MAY

Theme*	<p>National Women's Health Week and Mother's Day</p> <p>May is a time to pay special attention to the women in our lives and what they do for us. It's also important that they focus on themselves and make their health a priority, including getting screened for colon cancer.</p>
Sample Facebook	<p>An estimated 63,670 new cases of colon cancer will be diagnosed in women this year, but colon cancer can be prevented or caught early when it is more treatable. Take time for your own health, and talk to your doctor about getting screened. Learn more about the options available, including the simple take home tests. - Upload image of woman talking to her doctor</p> <p>Do you think your busy schedule means you don't have time for a colon cancer screening? If you're 50 or older, you need to get screened. Screening is something you do when you are healthy to stay healthy! Tell the women in your life to take time out for them, and get screened for colon cancer. (insert website link)</p>
Sample Twitter	<p>Moms, do something important for YOU. 50 or older? #getscreened for #coloncancer. (insert link to website)</p> <p>Make your #health the priority this month. Improve your health and #getscreened for #coloncancer. Here's why: (insert link to website)</p>
Sample Instagram/Pinterest	<p>Instagram</p> <p>Moms, this year we want you to have the gift of better health. If you're 50 or older, you need to #getscreened for #colon cancer. There are several screening options available including simple, take-home tests. Talk to your doctor today.</p> <p>- Upload image related to Mother's Day, presents</p> <p>Female Patient Story: "I thought I was healthy, and I don't have a family history of colon cancer. When my doctor suggested I get screened when I turned 50, I'm glad I followed her advice. They found a polyp and removed it." #getscreened #trustus.</p> <p>- Upload image of female who had a pre-cancerous polyp removed</p> <p>Pinterest</p> <p>Board idea – Infographics focusing on women and colon cancer or other shareable graphics asking the women in their lives to get screened for colon cancer.</p>
Sample Internal Communications	<p>Contrary to popular belief, the number of women who get colon cancer is nearly equal to men. Be sure to encourage everyone to be screened for colon cancer.</p>

JUNE

<p>Theme*</p>	<p>Men’s Health Week and Father’s Day Men’s Health Week is an annual occurrence leading up to Father’s Day. Use this week to create awareness for preventable health problems and promote healthy behaviors such as getting screened for colon cancer.</p>
<p>Sample Facebook</p>	<p>Colon cancer can be prevented or treated at an earlier stage, but an estimated 27,150 men will succumb to the disease in 2017. Don’t procrastinate any longer! Take your health into your own hands and talk to your doctor about colon cancer screening. - Upload shareable statistics graphic.</p> <p>Men, you take charge of other things in your life, and it’s just as important to take charge of your health. Get screened for colon cancer. There are several screening options available, including simple tests you can do at home. Talk to your doctor today! (insert website link)</p>
<p>Sample Twitter</p>	<p>Men, there are several ways to #getscreened for #coloncancer. Ask your doctor about your options. (insert link to website)</p> <p>Dads, are you daunted by a #coloncancer screening? Talk to someone who’s been through it and hear why you should #getscreened. (insert website link)</p>
<p>Sample Instagram/ Pinterest</p>	<p>Instagram Dads, there are a lot of people relying on you to take control of your health and that includes getting a #coloncancer screening. Think of all the reasons you have in your life to call your doctor and #getscreened.</p> <p>- Upload image of dad(s) celebrating a special moment in their child’s life (graduation, walking daughter down the aisle, etc.)</p> <p>Fear can be a factor keeping the man you care about from getting a #coloncancer screening. Here’s some information that can help put him in charge of his health. #getscreened</p> <p>- Upload image related to testing and myth busting, and/or include infographics such as 7 Things to Know About Colonoscopies</p> <p>Pinterest Board idea – Male Survivor Stories: images and quotes from colon cancer survivors on why they got screened and how their life has changed since beating the disease.</p>
<p>Sample Internal Communications</p>	<p>Colon cancer symptoms don’t always appear until the cancer has advanced to a later stage. Men and women aged 50 and older need to get screened for colon cancer – even if they feel healthy. Regular screening is the key to early detection!</p>

JULY

Theme*	<p>Family Reunion Time</p> <p>When families are gathered together, it's a great time to discuss family history, including their health history. Families can remind each other to stay healthy for each other by getting colon cancer screening, including if there is a family history of the disease for which they need to be screened early.</p>
Sample Facebook	<p>Colorectal cancer is the 2nd leading cause of cancer deaths in the US when men and women are combined, yet it can be prevented or found at an early stage. Remind the people you love who are 50 and older to get screened! (insert website link)</p> <p>Do you know if you have a family history of colon cancer? If not, it's time to get the conversation started. Regular screening is the best way to prevent colon cancer, starting at 50, but if you have a parent or sibling who had colon cancer, you may need to be screened earlier.</p> <p>- Attach image related to doctor-patient relationship</p>
Sample Twitter	<p>We want you to #getscreened for #coloncancer!</p> <p>- Attach image of family gathering</p> <p>Gain your freedom from fear of #coloncancer screenings. Talk to your doctor and #getscreened. (insert link to website)</p>
Sample Instagram/Pinterest	<p>Instagram</p> <p>Be there for your family. Colorectal cancer is the 2nd leading cause of death in the United States when men and women are combined, but it can be prevented or found at an early stage. Call your doctor and #getscreened.</p> <p>- Upload image of family reunion (large group shot of a family)</p> <p>Pinterest</p> <p>Board idea – shareable graphics of families with quotes saying to get screened for colon cancer.</p>
Sample Internal Communications	<p>We all want to be there for our families. Colorectal cancer is the 2nd leading cause of cancer death among men and women combined, but it almost always starts with a polyp. Screening can help save lives by finding polyps before they become cancer. If these polyps are removed, colon cancer can often be prevented.</p>

AUGUST

Theme*	<p>The Faces of Colon Cancer Sharing survivor stories and stories of those who prevented cancer through screening adds an emotional component to the logical arguments for colon cancer screening.</p>
Sample Facebook	<p>This month, we're drawing much needed attention to stories of those who have survived colon cancer. Hear from [insert name] about [his/her] colon cancer screening, how doctors detected the disease early: "I wasn't going to get screened but [clinic name] encouraged me to follow through with screening. My screening exam may have saved my life." (insert website link)</p> <p>Colon cancer can be prevented or detected early through screening. Doctors found and removed polyps from [Insert name]'s colon during a routine colonoscopy. (insert website link)</p>
Sample Twitter	<p>"I'm thankful that I've beaten #coloncancer & can be here to see my grandkids grow up." [Insert name] #getscreened. (insert website link)</p> <p>Thank you to all of the #coloncancer survivors who shared their stories & encouraged others to #getscreened. (insert website link)</p>
Sample Instagram/ Pinterest	<p>Instagram This month, we'd like to support colon cancer survivors who'd like to share their story. Tag us, share your stories and tell us why you want to share the message to #getscreened. We'll feature as many of your stories as possible!</p> <p>- Upload image of colon cancer survivor</p> <p>Survivor Story: "I had a family history of colon cancer, so when my doctor suggested I get screened earlier than 50, I took her advice. They found a polyp and were able to treat it and remove it completely." #getscreened #trustus.</p> <p>- Upload image of colon cancer survivor</p> <p>Pinterest Board idea – Survivor Stories: images and quotes from colon cancer survivors, how their life has changed since beating the disease and why they think screening is important.</p>
Sample Internal Communications	<p>There are currently more than one million colon cancer survivors in the United States. Share your story and encourage others to get regular screenings.</p>

SEPTEMBER

<p>Theme*</p>	<p>Take Responsibility for your Health during Healthy Aging Month National Healthy Aging Month allows us to showcase colon cancer screening as one of the ways the older population can take charge of their health so they can enjoy this time in their life.</p>
<p>Sample Facebook</p>	<p>As you get older your risk for colon cancer increases. If you are over 50, talk to your doctor about getting screened for colon cancer. There are several screening options available, including simple take home tests. Talk to your doctor about getting screened. (insert website link)</p> <p>It's National Health Aging Month, and it's time to take charge of your health! Colon cancer can often be prevented or detected at an early stage, but you need to get screened. Call your doctor today so you can enjoy all that life has to offer.</p> <p>- Attach image of shareable graphic on prevention</p>
<p>Sample Twitter</p>	<p>#Coloncancer risk increases as you age, but it can often be prevented through screening. #getscreened. (insert website link)</p> <p>Retirement calling you? So is your doctor. It's time to #getscreened for #coloncancer.</p> <p>- Attach image of older couple enjoying travel, a walk, etc.</p>
<p>Sample Instagram/Pinterest</p>	<p>Instagram Most colon cancer cases are found in people age 50 and older, but colon cancer can often be prevented through screening. Take charge of your health. Have a conversation with your doctor about what #coloncancer screening option is best for you.</p> <p>- Upload image related to doctor's office</p> <p>This month, we want you to stay smart about colon cancer. Did you know colon cancer is the second most common cancer in the US when men and women are combined? But if detected and treated early, the 5-year survival rate is about 90%. #staysmart #stayhealthy.</p> <p>Pinterest Board idea – Age Healthily - infographics or statistics about colon cancer rates rising as people age; tips for early detection.</p>
<p>Sample Internal Communications</p>	<p>The lifetime risk of developing colon cancer is about 1 in 20, and risk increases as we get older. Encourage your loved ones 50 and older to get regular screenings.</p>

OCTOBER

Theme*	<p>Make an Important Call this Fall Don't put colon cancer screening off for yet another season. Encourage people to stop making excuses, and just make that important call to their doctor this Fall.</p>
Sample Facebook	<p>Has time or money been your go-to excuse for not getting screened for colon cancer? There are simple, affordable take home options for screening available. View our list of nearby clinics and hospitals that provide us colon cancer screening options. Make the call this fall! Talk to your doctor about colon cancer screening. (insert website link)</p> <p>- Attach map of screening locations specific to your area</p> <p>Pumpkin patches, hay rides and leaf peeping are what autumn is all about. This year, it's also your Fall to Call. If you're 50 or older, call your doctor about colon cancer screening. Don't let another season go by without getting screened.</p> <p>- Attach shareable graphic</p>
Sample Twitter	<p>Don't put off #coloncancer screenings for yet another season. It's the Fall to Call! Call your doctor today. (insert website link)</p> <p>50 or older? #Getscreened for #coloncancer before another leaf falls. (insert website link)</p> <p>-Attach image of fall foliage</p>
Sample Instagram/Pinterest	<p>Instagram Everyone should enjoy what autumn has to offer, but don't put off your #coloncancer screening for another season. If you're 50 or older, call your doctor and #getscreened.</p> <p>- Upload an autumn image</p> <p>Pinterest Board idea – Images of clinics and hospitals in the area (autumn outside shots where possible) that offer colon cancer screenings as well as a map of locations in fall colors.</p>
Sample Internal Communications	<p>Colorectal cancer is the 2nd leading cause of cancer-related deaths in the country when men and women are combined, but it can be prevented through screening. Encourage those 50 and older not to wait another day before calling their doctor about getting screened.</p>

NOVEMBER

Theme*	<p>Taking Care of our Caregivers Family Caregivers often ignore their own health for the sake of another. We need to persuade them to put themselves first for once, and get screened for colon cancer.</p>
Sample Facebook	<p>We're thankful for you, the family caregiver. Remember to take time out for yourself, and don't forget about your health. If you're 50 or older, you need to call your doctor and get screened for colon cancer. Don't think you have the time? There are simple take home options available for screening. Thanks for all that you do!</p> <p>Attach thank you image</p> <p>Do you know a family caregiver over the age of 50? Remind them that it's time to get screened for colon cancer. Colorectal cancer is the 2nd leading cause of cancer-related deaths when men and women are combined, yet it can often be prevented or found at an early stage. Remind your loved one how important it is to take care of their own health, too. (insert website link)</p>
Sample Twitter	<p>Caregivers, take care of yourself, too. #Getscreened for #coloncancer. Call your doctor today. (insert website link)</p> <p>Thank you, family caregivers! Keep yourself healthy by calling your doctor about your #coloncancer screening today. (insert website link)</p>
Sample Instagram/ Pinterest	<p>Instagram It's National Family Caregiver Month. If you are a caregiver who has gotten screened for colon cancer, tag us and share your story. Tell us why you decided to #getscreened. We'll feature as many of your stories as possible!</p> <p>- Upload image of family caregiver who took time to get screened</p> <p>Pinterest Board idea – Images and quotes of family caregivers who got screened.</p>
Sample Internal Communications	<p>Caregivers have such an important role, and it can be hard for them to find the time to take care of their own health, too. Remind your family and friends who are caregivers 50 or older to get screened!</p>

DECEMBER

Theme*	<p>Give the gift of colon cancer screening to your family One of the best gifts we can give ourselves, family and friends this season is to raise awareness of the benefits of colon cancer screening.</p>
Sample Facebook	<p>Will you see your parents or grandparents this holiday season? If they are 50 or older, remind them to talk to their doctor about colon cancer screening. They need to know this is important you.</p> <p>- Attach image of holiday gathering</p> <p>Give yourself and your family the gift of a healthy you this year. If you are 50 or older, you need to be screened for colon cancer. Call your doctor today. (insert website link)</p>
Sample Twitter	<p>Seeing the family during the holidays? Remind those over 50 to #getscreened for #coloncancer.</p> <p>- Attach image of family holiday photo</p> <p>Don't forget your own health over the holidays! Talk to your doctor and make an appointment for #coloncancer screening. (insert website link)</p>
Sample Instagram/ Pinterest	<p>Instagram #Coloncancer screenings may not make it to someone's gift list, but the holidays are the perfect time to talk about screenings with your friends and loved ones. Remind them about the gift of a healthy life. #getscreened.</p> <p>- Upload image of gift list</p> <p>Pinterest Board idea – images of holiday scenes and winter landscapes with inspirational messages about taking health into your own hands.</p>
Sample Internal Communications	<p>Fighting colon cancer starts with a conversation. Remind your family and friends over the age of 50 to get screened!</p>

ACHIEVEMENT POSTS

<p>Theme*</p>	<p>Celebrate your 80% by 2018 Successes! Staying motivated is important to the 80% by 2018 effort. One way to do that is to share – and celebrate – your achievements throughout the year.</p>
<p>Sample Facebook</p>	<p>[INSERT ORGANIZATION NAME] hit a major milestone in our efforts to increase colon cancer screening rates. [INSERT ACHIEVEMENT]</p> <p>- Attach shareable graphic of 2015 highlights</p> <p>Join us in congratulating [INSERT ORGANIZATION] in achieving [XX]% colon cancer screening rate. This success takes us one step closer to achieving our goal of 80% of eligible adults screened by the year 2018. (insert website link)</p> <p>What an event! On [INSERT DATE], [INSERT ORGANIZATION] joined with [#] other organizations for the [NAME OF SUMMIT OR FORUM]. Working together we can get more people screened and save more lives from colon cancer.</p> <p>-Attach photo or video from event</p> <p>[INSERT NAME] had his/her first colon cancer screening thanks to our efforts to get more people screened. Hear his/her story. (insert website link)</p> <p>-Attach photo of survivor</p>
<p>Sample Twitter</p>	<p>Great work in [INSERT GEOGRAPHY] to stop #coloncancer. [INSERT SUCCESS] (insert link to story)</p> <p>Look at the success of [INSERT COLLABORATOR OR COLLEAGUE] who raised #coloncancer screening rates by XX%.</p> <p>- Attach image of screening rates chart</p> <p>What a great 2017! Look at our increase in #coloncancer screenings this year. #savinglives (insert website link)</p> <p>Kudos to the researchers at [INSERT ORGANIZATION] who have [INSERT SUCCESS] (insert website link)</p> <p>Thanks to our [ORGANIZATION'S] volunteers/collaborators supporting our goal of getting people screened for #coloncancer</p> <p>- Attach group photo of volunteers or collaborators</p>
<p>Sample Instagram/ Pinterest</p>	<p>Instagram We're highlighting our staff and the important role they play in helping people #getscreened for #coloncancer. [INSERT INFO ON SUCCES OF STAFF]</p> <p>- Upload photos of staff</p> <p>Pinterest Board idea – Infographic or shareable images of major milestones throughout the year (e.g. new research studies, survivor stories, community engagement, etc.)</p>
<p>Sample Internal Communications</p>	<p>Let's keep the momentum around 80% by 2018 high by putting the spotlight on leaders and successes in this effort. There is a role for all of us to play!</p>

Appendix B

Market Research Results

See how each message tested and in what way it resonated with the priority audience.

<p>★ There are several screening options available, including simple take-home options. Talk to your doctor about getting screened.</p>	27%	OPTIONS
<p>★ Colorectal cancer is the second-leading cause of cancer deaths in the U.S. when men and women are combined, yet it can often be prevented or detected at an early stage.</p>	13%	EARLY DETECTION
<p>★ Preventing colon cancer, or finding it early, doesn't have to be expensive. There are simple, affordable tests available. Get screened! Call your doctor today.</p>	12%	AFFORDABILITY
<p>★ Most health insurance plans cover lifesaving preventive tests. Use the health benefits you are paying for to get screened for colon cancer. Call your doctor today.</p>	10%	AFFORDABILITY
<p>Many people with colon cancer do not have any symptoms or family history, which is why screening is so important even when you feel healthy. Get screened! Call your doctor today.</p>	9%	NO SYMPTOMS
<p>Feel healthy? This is a great time to get screened for colon cancer. It often starts without symptoms. Call your doctor. Get screened!</p>	6%	NO SYMPTOMS
<p>If you are 50 or older, get screened for yourself and the ones you love. Don't take unnecessary risks and miss the moments in life that matter.</p>	6%	FAMILY
<p>Make sure you and your family are up-to-date on colon cancer screening. If you are 50 or older, get screened for yourself and the ones you love. This matters.</p>	4%	FAMILY
<p>Nearly two-thirds of adults 50 and older are getting tested for colon cancer. Join the national movement to increase colon cancer screening rates to 80% by 2018.</p>	4%	JOIN THE CROWD
<p>Nearly two-thirds of adults 50 and older are regularly screened for colon cancer. You should be one of them. Get screened! Call your doctor today.</p>	3%	JOIN THE CROWD
<p>Don't take chances with colon cancer; take charge! Ask your doctor about testing options available for you and your family.</p>	3%	OPTIONS
<p>Lead your family in the fight against colon cancer. Make sure you and your family are up to date on screening. Get screened for yourself and the ones you love.</p>	3%	FAMILY

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