

What Can Comprehensive Cancer Control Coalitions Do to Advance 80% in Every Community?

Colorectal cancer is the second-leading cause of cancer-related death in the United States among men and women combined, yet it is one of the most preventable.

Comprehensive cancer control (CCC) programs and coalitions play a critical role in promoting colorectal cancer screening messages and activities in community settings across the United States. From educating coalition members to raising public awareness about colorectal cancer screening options, CCC programs and coalitions can support the national 80% in Every Community campaign and help make increasing colorectal cancer screening rates a leading public health priority.

This brief contains useful information and resources that will accelerate efforts to improve screening rates in your state, tribal organization, or territory.



CCC coalitions can be the “engine of change” in achieving the goal of 80% screened for colorectal cancer in every community.

Visit nccrt.org to learn more about the 80% in Every Community initiative.

Why Focus on Colorectal Cancer?

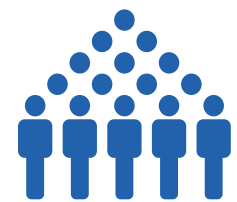
Colorectal cancer is the second leading cause of cancer-related death in the US when men and women are combined. In 2021, an estimated 149,500 new cases of colorectal cancer will be diagnosed, and an estimated 52,980 deaths will occur.

Colorectal cancer incidence and mortality rates have declined by about 30% in the US among adults 50 and older in the last 15 years, with a substantial fraction of these declines due to screening. Screening not only detects cancer early but also has the potential to prevent cancer through the detection and removal of precancerous polyps. There are several safe and effective tests to screen for colorectal cancer. Screening options make screening accessible, affordable, and convenient.

However, much more work is required to reach colorectal cancer screening rates of 80% and higher nationwide and in every community. Today, about 1 in 3 adults aged 50-75 (about 38 million people) are not being screened as recommended. Groups less likely to be screened include adults aged 50-64, people without health insurance, with less education, and with lower income levels.

Hispanics, Asian Americans, American Indians, Alaska Natives, and rural dwellers are also [less likely to be screened](#).

Screening disparities can occur for a variety of reasons. You can find more about barriers for different populations on page 8. The 80% in Every Community campaign seeks to increase attention and focus on the barriers to screening in these disparate populations. Every community counts!



149,500

Estimated number of new cancer cases diagnosed in 2021



1 in 3

1 in 3 adults ages 50-75 are not getting screened as recommended.



72 → 66

in 2001/02 in 2015/16

Patients are younger. The median age of diagnosis has dropped.

Watch [these two short videos](#) to learn more about our shared goals for the 80% in Every Community campaign!



80% in Every Community





The [80% in Every Community campaign](#) is an initiative launched by the National Colorectal Cancer Roundtable (NCCRT) that aims to substantially reduce colorectal cancer as a major public health problem.

Nearly 1,800 organizations have committed to working toward the shared goal of 80% of adults being regularly screened for colorectal cancer by at least age 50. Through dedication and collective action, health clinics, health plans, employers, counties, and many others are achieving their goals of 80% screening rates and higher.

But not everyone is benefiting equally. There are still too many communities with lower colorectal cancer screening rates, including some racial and ethnic communities, low-income communities, and rural communities. The NCCRT and its members will continue working to bring down screening barriers because everyone deserves to live a life free from colorectal cancer. This mission will not be achieved until every community reaches a screening rate of 80% and higher.

An Extraordinary Opportunity

Achieving an 80% screening rate requires collaboration from many leaders; it cannot be achieved by working in isolation. Health care providers, health systems, communities, businesses, community health centers, government, and everyday Americans all have a role to play. To this end, multiple national cancer control organizations have collaborated to prioritize colorectal cancer screening.

 Progress is Occurring	 A National Priority	 Barriers are Coming Down	 National Support and Resources are in Place
<ul style="list-style-type: none"> ■ 80% by 2018 campaign successes across the nation ■ NCCRT Data and Progress Page reports 9.3 million more individuals became up to date with screening between 2012 and 2018 ■ CDC CRCCP evaluation results 	<ul style="list-style-type: none"> ■ 1,800 pledged partners ■ NCCRT 80% Hall of Fame features more than 350 organizations that have reached 80% screening rates and higher ■ March Colorectal Cancer Awareness Month broadcasts 	<ul style="list-style-type: none"> ■ Expansion of insurance coverage ■ Screening test options are available, including quality at-home screening tests ■ Screening is more affordable as surprise billing is addressed 	<ul style="list-style-type: none"> ■ NCCRT Resource Center ■ ACS4CCC ■ CDC Colorectal Cancer Control Program ■ CDC National Comprehensive Cancer Control Program ■ NCI Screen to Save Initiative

5

Five Ways Your Organization Can Help

Comprehensive cancer control coalitions are well positioned to act as conveners in this effort. By mobilizing community resources, bringing widespread public attention to cancer issues, influencing media coverage, and successfully implementing collaborative efforts, your CCC coalition can make notable contributions to the 80% in Every Community campaign. Below are five ways your CCC program or coalition can support 80% in Every Community.

STEP 1

Prioritize Colorectal Cancer Screening

Take (or Retake!) the 80% in Every Community Pledge

- Embrace this [national campaign](#) today by signing the [80% in Every Community Pledge](#) (even if your health department has already signed).
- The pledge represents your program's or coalition's commitment to work toward a shared goal of increasing the number of people screened for colorectal cancer nationwide.
- Customize the [sample press release](#) and announce the signing.

Make a Plan to Attend the 80% in Every Community Conference

- Each year, the [NCCRT membership and pledged partners meet](#) to increase colorectal cancer screening awareness, utilization, and to reduce deaths from this preventable and curable disease.

Learn Your State or Community Colorectal Cancer Screening Rate and Set a Goal For Improvement

- By assessing your state colorectal cancer screening data, you can measure and track your community's progress and celebrate success! The [CDC's Behavioral Risk Factor Surveillance System \(BRFSS\)](#) is a nationwide system of health-related telephone surveys that collect state data about US residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services. The BRFSS site is your coalition's go-to site for colorectal cancer screening rates.
- The [NCCRT Data and Progress](#) page is another resource for finding other major measures to track.
- You can also use this information to understand which groups in your community are not getting screened. The data can help you focus your efforts to reach those who are most in need of hearing the message about getting screened. The CDC's BRFSS can stratify your state colorectal cancer screening rates by gender, age group, race/ethnicity, educational level, and household income.
- For more guidance on how to set colorectal cancer screening goals and objectives, read the [Colorectal Cancer Screening Cancer Plan Tipsheet](#). It walks coalitions through the process of updating the colorectal cancer screening section of their [state comprehensive cancer control plan](#).



Explore Evidence-Based Strategies for Improving Colorectal Cancer Screening Rates

Now that you have collected data and identified your population of focus, you can begin to explore evidenced-based strategies that your CCC coalition can implement. As part of colorectal cancer screening prioritization, consider the feasibility of implementing various interventions through your coalition. Find out more about what works to increase screening rates, and present a menu of options to your coalition. Don't forget to include your chosen strategies in your state/tribe/territory's cancer plan.

- [The Guide to Community Preventive Services \(The Community Guide\)](#) is a collection of evidence-based findings of the Community Preventive Services Task Force (CPSTF). The Community Guide uses a science-based approach to determine whether an intervention or approach works and is cost-effective. View 1-page summaries of evidenced-based [multi-component interventions](#) for colorectal cancer screening, or use their hallmark [“What Works” resource](#) to guide your coalition's selection of strategies.
- Take advantage of existing tools. You can search the [NCCRT Resource Center](#) by setting, audience, intervention type, or resource type.
- [Evidence-Based Cancer Control Programs \(EBCCP, formerly RTIPs\)](#) is a searchable database maintained by the National Cancer Institute that lists evidence-based cancer control interventions and program materials. It is designed to provide program planners and public health practitioners with easy and immediate access to research-tested materials.

Start and Maintain the Dialogue

Share important screening messages throughout the year and especially during the Colorectal Cancer Awareness Month in March. Programs and coalitions can do this through social media, Facebook, website postings, posters, factsheets, and videos. Share messages and materials in multiple languages.

The [Colorectal Cancer Awareness Month Social Media Toolkit](#) is a resource to utilize during Colorectal Cancer Awareness Month in March. The toolkit outlines best practices for using social media and provides sample posts that can be adapted for your organization.



STEP 2

Engage and Educate Partners

A key tenet of effective coalition collaboration occurs when coalition members understand your colorectal cancer screening goals and can clearly see how they, both as individuals and as an organization, can help achieve those goals. You can help them define their role in moving the 80% In Every Community campaign forward. For example, primary care, hospital, insurance, employer, and community organization partners can all contribute in different ways if presented with options for ways they could help. This section provides ideas for educating your partners about how they can participate.

Bring Together Key Stakeholders

- Be the lead convener and rally with other organizations to prioritize 80% in Every Community. Your CCC program or coalition could coordinate meeting space (virtual or in-person), create and manage a scheduling poll, facilitate meetings and disseminate meeting follow-up notes.
- Partner with community organizations, academic researchers, gastroenterologists, primary care providers, hospitals, local public health officials, policymakers, and advocates to make this campaign a statewide or communitywide goal. Make sure you have representation from the disparate communities identified during your data collection. Consider using the briefs listed on the next page to solicit interest, participation, and commitment. Start your meeting with one or more of [these short motivational videos](#).
- Share the 80% in Every Community pledge opportunity with members of your coalition and encourage them to ask their organizations to sign the pledge.

Share Educational Briefs with Partners

Everyone has a role to play in increasing community colorectal cancer screening rates. Below is a list of briefs that can help your partner to learn more about what they can do to increase colorectal cancer screening rates and advance the 80% in Every Community campaign. You can share the briefs with community partners or work with coalition members to develop an initiative for a particular audience.



These briefs are also all available from the [NCCRT website Resource Center](#):

- [What Can Primary Care Doctors Do ...](#)
- [What Can Hospitals Do ...](#)
- [What Can Gastroenterologists Do ...](#)
- [What Can Radiologists Do ...](#)
- [What Can Women's Health Providers Do ...](#)
- [What Can Insurers Do ...](#)
- [What Can Employers Do ...](#)
- [What Can Survivors and Families Do ...](#)
- [What Can Lesbian, Gay, Bisexual, Transgender \(LGBT\) Communities Do ...](#)
- [What Can Communities Do ...](#)

Note: Some of these resources are being updated to reflect the new campaign, but much of the content is still relevant.

Promote the Clinician's Reference

The [Clinician's Reference: Stool-Based Tests for Colorectal Cancer Screening](#) is a comprehensive resource about stool-based testing options for colorectal cancer. This fact sheet provides recommendations for stool-based screening programs and explains the differences between the various types of tests. Your CCC program or coalition could promote this resource by featuring it in your next CCC communication, hosting a webinar, writing a newsletter feature, or asking your partners to distribute it within their networks.

Bring in an Expert Speaker on Colorectal Cancer

Identify subject matter experts in your state who can speak about colorectal cancer and colorectal cancer screening. You may want to record webinars with the experts, and ask their permission to post the recordings on your website or share them with partners. Another option is to create a standard presentation slide deck with talking points that have been reviewed by an expert and can be used by partners.

Identify Community Leaders and Celebrities

Work with community leaders and celebrities to spread key messages about the importance of colorectal cancer screening. Reach out to your partners and find out who may have a relationship with a high-profile person or influencer. When working with leaders and celebrities, you may want to give some thought about how to feature them to make the best use of their appearance. For example, a mayor, news anchor, religious leader, or cancer survivor might be able to reach people in your community who are less likely to be screened or who have a higher risk of colorectal cancer. See the NCCRT's resource [Working With Celebrity Ambassadors](#) for more information.

STEP 3

Communicate Effectively to the Unscreened in Your Community

In many instances, those who are unscreened generally know they need to be screened for colorectal cancer, yet the messages they have previously received about screening have not been enough to move them to action. This section highlights what your CCC program or coalition can do to better understand what motivates these people and determine the best way to reach them with your colorectal cancer screening messaging.

For a comprehensive look at best practices for reaching those who are unscreened, refer to the [2019 Colorectal Cancer Screening Messaging Guidebook: Recommended Messages To Reach The Unscreened](#).

Priority Populations Among the Unscreened: Who Could Benefit From Your Coalition's Efforts?

Unscreened populations have unique barriers to screening. If you understand these barriers, you will have more success increasing screening rates by tailoring messages to address their concerns. You can use the information below to help train others about messaging for priority populations.

Look at the list of 11 priority populations below, and click on a group to read their colorectal cancer messaging “profile.” The profiles describe demographics, barriers, beliefs, behaviors, and sample messages and channels that increase the likelihood of screening.

Rural Dwellers	The Young 50s	Asian Americans	African Americans
Procrastinators and fearful of procedures; persuaded by tests at home	Too busy; persuaded by easier and quicker tests at home	No symptoms and fear the procedure; persuaded by testing options	Fear of costs and procedures; persuaded by home test options
The Marketplace Insured	Preoccupied Busy Bees	The Financially Challenged	
Fear high costs; persuaded by affordable screening options	Too busy to screen; persuaded by home testing options	Worried about finances; persuaded by lower costs	
Hispanics and Latinos	45–49 Year-Olds	Fearful Delayers	In Denial/Invincibles
Busy and fearful of procedures; persuaded by home test options	Think they are too young for screening; persuaded by doctor recommendations	Worried about the procedure; persuaded by home testing options	Not worried about it; not persuaded by messages they are at risk

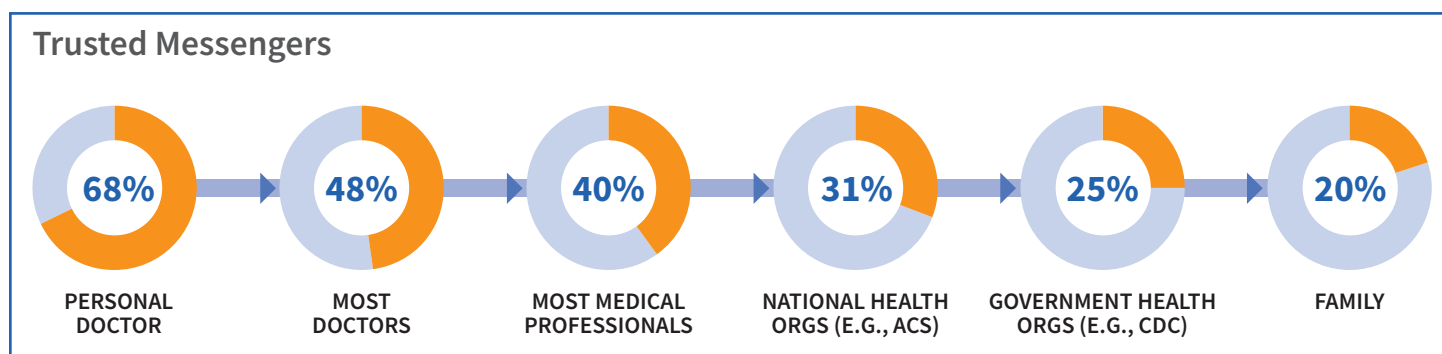
All groups — and the research behind their messaging preferences — are described at length in the new [2019 Colorectal Cancer Screening Messaging Guidebook: Recommended Messages To Reach The Unscreened](#).



Use the Right Channel for the Right Message

In addition to finding the right message for each priority population, it is important to deliver the message through trusted messengers and preferred channels.

This graphic shows the six most trusted messengers for colorectal cancer screening.



The top four ways people prefer to receive colorectal cancer screening information are through a doctor (60%), website (35%), email (26%), or patient portal (24%).

STEP 4

Implement Evidence-based Policy and Systems Change Approaches

Policy, systems, and environmental (PSE) approaches are proven ways to bring about positive health changes in communities. PSE approaches work by offering people healthier choices and by introducing new policies to remove barriers. The information below shows three ways that programs and coalitions can use PSE approaches to increase colorectal cancer screening rates and reduce screening costs. You can introduce these PSE approaches and resources by hosting a webinar and having several partners share their success stories. You can also work with experts to create a multi-session training on these methods.

Promote the FluFIT Program Approach

The main idea behind the FluFIT program is that eligible patients can conveniently receive a take-home colorectal cancer stool test kit when they receive their annual flu shot. Home tests are appropriate for average-risk patients with no family history of colorectal cancer, adenomas, genetic syndromes, or those without access to colonoscopies.

For more information, see [the FluFIT resource page on the NCCRT website](#).

Use Systematic Screening Practices

Clinics can use systematic approaches to set up their screening programs to increase colorectal cancer screening rates while reducing physician workload.

- Important topics, such as conducting baseline screening rates, assessing capacity, and preparing the clinic team can be addressed by evidence-based approaches.
- Procedures to follow up on abnormal stool test results with colonoscopies are essential. Outreach can be conducted via EHR healthcare reminder and recall systems.
- For more information, see the document [Steps for Increasing Colorectal Cancer Screening Rates: A Manual for Community Health Centers](#). Systems change implementation guides are also available for hospitals and health systems and health plans.

Use Policies to Address Barriers to Screening

Unexpected screening and follow-up costs as well as a lack of insurance can deter many people from screening. A start-at-age-50 screening policy (based on USPSTF guidelines), compared to a start-at-age-45 policy (as recommended by ACS), could delay appropriate screenings and delay diagnoses. PSE approaches that change the regulatory environment reduce screening barriers for people with lower income, people without health insurance, or those who want to be screened starting at age 45.

- The Affordable Care Act requires that most insurers cover the costs of recommended preventative care services, but this waiver of cost sharing is often not applied to colonoscopies that are conducted as follow-ups to positive stool tests.
- [Health insurance coverage](#) counts in the fight against cancer. To reduce the cancer burden, everyone should have access to affordable, adequate health insurance coverage.
- The [American Cancer Society's colorectal cancer screening guidelines](#) recommend that adults at average risk start colorectal cancer screening at age 45. Some states have changed their colorectal cancer screening policies to ensure that everyone can be screened starting at age 45.
- For more information on how to participate in these issues at the national or state level, see the public policy resources at the [American Cancer Society Cancer Action Network](#).



STEP 5

Lead the Celebration

Track and Report Your Progress

- Your program or coalition can track and share state-level colorectal cancer screening data with partners through a factsheet or on a website. For example, you could share [BFRSS screening data and screening rates for your state populations](#), broken down by gender, age group, race/ethnicity, education attained, and household income. The [ACS Cancer Statistics Center](#) also provides state colorectal cancer data.
- Share your success on social media using **#80inEveryCommunity** and tweeting to [@NCCRTnews](#).
- Follow up with your partners to learn about their progress and outcomes. Include their successes in a case study or a promotional story that can be shared with others.
- Develop an evaluation plan to help you answer key questions about your program, interpret your findings, and use the results to enhance your colorectal cancer screening promotional/awareness efforts.
- For information about evaluating your messaging campaign, see the NCCRT's brief on [Evaluating Your 80% Messaging](#).
- For information on evaluating your colorectal cancer screening program processes and outcomes, see the [NCCRT Evaluation Toolkit](#).

You have the power to make a big impact on screening rates in your community!

Visit nccrt.org to learn more about how to take action and be part of 80% in Every Community.

Celebrate Your Successes

- Get creative and bold when celebrating your successes and promoting your messages. Tell an engaging story about your work. What was the problem, and how did you solve it? What challenges were you facing, and what are the critical turning points when you overcame them? You can share your stories through [blog posts](#), [Facebook](#), [fact sheets](#), [infographics](#), and [digital stories](#).
- To promote your stories through traditional media channels, begin by establishing good working relationships with your media connections. Maintain those relationships regularly. You can learn more about working with the media in this resource: [Earning Your Earned Media](#).
- Celebrate committed programs or individuals who dedicate their time, talent, and expertise to advancing 80% in Every Community. Nominate them for a [National Achievement Award](#). Promote organizations that have reached 80% screening rates to be honored in the [NCCRT Hall of Fame](#). Submit their name for a Stellar Achievement Award.

Thank Your Partners

- Achieving 80% in Every Community requires a collective effort. It is important to acknowledge the many nonprofit organizations, public health agencies, health care providers, community health centers, businesses, and government leaders at the national, state, and local levels who participate in your initiatives.
- You can help to maintain momentum by thanking and encouraging your team and your partners and by recognizing key leaders. Being an active cheerleader will keep them engaged, and success will attract more stakeholders.

Acknowledgements

The [American Cancer Society's](#) (ACS) [Comprehensive Cancer Control Initiative](#) and the [National Colorectal Cancer Roundtable](#) (NCCRT) are member organizations within the [Comprehensive Cancer Control National Partnership](#) (CCCNP), a collaboration of [19 leading cancer organizations](#) that utilize their combined strengths and resources to reduce the US cancer burden. Increasing colorectal cancer screening rates is a long-standing priority of the CCCNP.

This brief is a collaborative effort of the ACS CCC team, the NCCRT, and the CCCNP Colorectal Cancer Workgroup – all of whom share the common goal of providing CCC programs and coalitions with the information and resources they need to help raise colorectal cancer screening rates in their communities.

