



## WHEN TO TALK ABOUT COLORECTAL CANCER IN THE MEDIA

While it's ideal to be proactive and try to place an earned media story about colorectal cancer or the 80% in Every Community initiative, we can also use reactive media requests on a variety of other topics as an opportunity to talk about this initiative and the importance of colorectal cancer screening. Here are some examples of when bridging to a discussion on colorectal cancer may be appropriate, and how to do just that.

A reporter who is requesting comment on:

- *Cancer research or treatment advancements. How far have we come and/or what's on the horizon?* "When discussing cancer research breakthroughs, it's important to not only focus on treatments but also prevention. Regular screening for diseases like colorectal cancer, for example, can stop cancer before it starts with the detection and removal of precancerous polyps."

- *A new study related to colorectal cancer.* "While this news is exciting, we want to emphasize that there are certain things that we know with certainty can help reduce incidence and death rates from colorectal cancer. This includes regular screening for age-eligible adults. While some organizations, such as the American Cancer Society, suggest screening begin at age 45, all major guidelines recommend screening for average risk individuals start no later than age 50 and continue through at least age 75."

- *The importance of diet and/or exercise.* "Maintaining a healthy diet/a commitment to physical fitness is an important part of healthy living. To be your healthiest self, you should pair these habits with regular check-ups and recommended cancer screenings. Colorectal cancer screening, for instance, should begin no later than 50 for all men and women at average risk of the disease, and some organizations (like the American Cancer Society) even recommend beginning screening at age 45."

- *A celebrity who was recently diagnosed with or passed away from colorectal cancer.* "While I don't know specifics about this person's diagnosis, I can offer advice/information on how to best prevent this awful disease." *Please note that there are extreme sensitivities when it comes to commenting on a celebrity cancer diagnosis. Be careful to refrain from comments that would invade the person's privacy or may be perceived as opportunistic, or that could be perceived as "blaming the victim."*



## **TIPS FOR LIVE INTERVIEWS**

### **Media Interview tips**

#### **Speaking**

Here are a few tips to consider when speaking to groups and/or being interviewed by reporters:

- Be aware of your posture and facial expressions.
- Maintain eye contact.
- For radio or television interviews, keep answers short. Broadcast reporters are looking for quick, informative sound bites.
- For television interviews and speaking engagements, speak directly to the reporter or audience. Do not look at the camera while the interview is taking place.
- Be confident with the content. Ensure your details are accurate.
- Answer the question that is asked and be careful not to go beyond that and end up posing a question you may not know the answer to.
- If you do not know the answer to a question, explain that you'll try to find that out and get back to them.
- Avoid jargon.
- There is no "off the record." Everything you say will be recorded.

#### **Attire:**

- Do not wear white, black or red. White glows on camera, black can drown out your complexion, and red bleeds.
- Avoid dangly earrings. They can be distracting.
- Avoid check patterns, herringbone, stripes or small designs.
- Solid colors are best. Pastels are OK.
- Avoid visible logos.
- Avoid products that make your hair shine.
- Make-up should be slightly heavier than you would normally apply.



## Media-related FAQs and Talking Points:

### What is the National Colorectal Cancer Roundtable anyway? Can't I just call it NCCRT?

The National Colorectal Cancer Roundtable (NCCRT) is a national coalition dedicated to reducing the incidence of and mortality from colorectal cancer in the U.S., through coordinated leadership, strategic planning, and advocacy. The NCCRT was co-founded by the American Cancer Society and the Centers for Disease Control and Prevention in 1997. (In communications you can use the acronym as long as you spell out the full name once.)

### How do I talk about 80% in Every Community?

- 80% in Every Community is an NCCRT campaign to substantially reduce colorectal cancer as a major public health problem.
- Over the past five years, more than 1,700 organizations have committed to the shared goal of increasing colorectal screening rates to 80% for adults aged 50 and older.
- With 80% in Every Community, we intend to continue this work until we see every community benefitting from increased colorectal screening rates.
- This initiative emphasizes evidence-based colorectal cancer screening activities that respond to individualized needs, barriers, and motivations within a community.
- The 80% in Every Community initiative is led by the American Cancer Society (ACS), the Centers for Disease Control and Prevention (CDC), and the NCCRT (an organization co-founded by the ACS and CDC).
- Find additional talking points and FAQs at: <http://nccrt.org/80-in-every-community/>

### Is there a difference between colon cancer and colorectal cancer?

Generally, colon cancer refers to cancers of the colon while colorectal cancer refers to cancers of the colon and rectum combined.

### I've heard that colon cancer is both the second and third leading cause of cancer death – which is correct?

*Colorectal cancer is the third leading cause of cancer-related deaths in the United States when men and women are considered separately, and the second leading cause when both sexes are combined.* When talking about colorectal cancer, you can refer to it as the second leading cause of cancer-related deaths but you must explain that this is for men and women combined at least once. Note that these statistics refer to cases of colon and rectal cancers, so the term "colorectal" cancer should be used.

### Is colonoscopy the "gold standard"?

While colonoscopy can detect and remove pre-cancerous polyps at the time of screening, colonoscopy also has some limitations. Many people prefer the ease and convenience of take-home stool tests. People should be made aware that there are a number of screening options and have the opportunity to choose the test that they prefer. The best test is the test that gets done.



### How do I talk about colorectal cancer and screening?

- Colorectal cancer is a major public health problem.
- An estimated 145,000 adults are diagnosed with colorectal cancer each year.
- Colorectal cancer screening can save lives, but only if people get tested.
- Screening can prevent colorectal cancer through the detection and removal of precancerous growths as well as detect cancer at an early stage, when treatment is usually less extensive and more successful.
- In the U.S., people less likely to get tested include those who are Hispanic, American Indian or Native Alaskan, Asian or Pacific Islander, men, or are 50-64 years of age. Those who live in rural areas, are lower income, or with less education also get screened at lower rates.
- Even if someone feels just fine, following screening recommendations is important.
  - Early stages of colorectal cancer don't usually cause symptoms, so proactive screening is one of the only ways to detect these types of cancers.
  - Most colorectal cancers occur in people with no family history.
  - Colorectal cancer risk is higher if someone has a close relative who has had the disease.
- While some organizations, such as the American Cancer Society, suggest screening begin at age 45, all major guidelines recommend screening for average risk individuals start no later than age 50 and continue through at least age 75.
- There are several tests to screen for colorectal cancer.
  - Approved tests include: colonoscopy, stool tests like guaiac fecal occult blood test [FOBT], fecal immunochemical test [FIT], stool DNA, CT colonoscopy (sometimes called a virtual colonoscopy), and sigmoidoscopy.
  - The best test is the test that gets done.
  - Most health insurance plans, including Medicare, cover most of these screening tests. Talk with your provider about which screening tests might be right for you.

For more talking points, please visit <http://nccrt.org/80-in-every-community/>.