Hmong Healthy Living Project

Community Health Workers
Colon Cancer Prevention Manual

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AANCART Healthy Community Research Project
# Table of Contents

1. Project Overview .................................................. 3
2. Lay Health Worker’s Responsibilities ......................... 4
3. Timeline of Lay Health Worker Activities .................... 5
4. Lay Health Worker Resources .................................. 6
5. Colon Cancer Prevention Teaching Materials ................. 7
6. Colon Cancer and Its Prevention .............................. 10
7. Practice 1: Using the Flip Chart ............................... 11
8. How to do a Stool Test for Colon Cancer Screening .......... 13
9. Common Beliefs and Barriers to Colon Cancer Screening .... 14
10. Practice 2: Using the Flip Chart .............................. 15
11. Homework ......................................................... 16
12. Conducting Small Group Health Education Session ........ 17
13. Practice 3: Using the Flip Chart .............................. 27
14. Questions and Answers ......................................... 28
15. Visiting the Doctor’s Office ................................... 29
16. Conducting Telephone Calls ................................... 30
17. Call Log .......................................................... 32
18. Telephone Call Demonstration ................................. 36
19. Practice 4: Making Telephone Calls ......................... 38
21. Appendices ....................................................... 40

Appendix A. Stool Test Instructions for Colon Screening: Guaiac Test 41
Appendix B. Stool Test Instructions for Colon Screening: FIT ........ 42
Appendix C. Four Different “Status” Categories for Colon Cancer Screening 43
Appendix D. Tips to Tailor Support According to Participant’s Status .... 44
Appendix E. Training Material for Telephone Calls: A Step-By-Step Guide 45
Appendix F. Training Material for Telephone Calls: Sample Scripts ........ 53
1. Project Overview

Colon cancer is the 2nd most common cancer among Hmong Americans. It can be found early if people get colon cancer screening from their doctor. The Hmong Health Living Project aims to encourage Hmong Americans aged 50 to 75 to get colon cancer screening.

The Hmong Healthy Living Project aims to inform Hmong Americans about colon cancer screening and encourage them to get screened. Community Health Worker outreach is an effective way to promote cancer screening. The Community Health Worker outreach training team has used this model in large projects with other Asian Americans. The Community Health Workers helped their friends, families, and other members of the community get cancer screening. Just as importantly, the Community Health Workers who participated reported that they learned more about health and how to teach others. Many Community Health Workers became more confident and interested in helping the community after participating in these projects.

The goal of the Hmong Healthy Living Project is to promote colon cancer screening among the fifteen (15) people that each of you have already recruited. We will train you to have the skills and knowledge needed to inform others about colon cancer and its prevention. We chose you to be a Community Health Worker because you have met the qualifications and are willing to help others. We ask you simply to be yourself when you are helping your participants.
2. Community Health Worker’s Responsibilities

As a Community Health Worker in the Colon Cancer Prevention Group, besides the current 2-day Training, you will have the following responsibilities:

1) Conduct 2 Small Group Sessions to inform each participant about colon cancer and the screening tests.

2) Conduct 2 Telephone Calls to each participant to provide encouragement and assistance with obtaining colon cancer screening.

3) Attend a Follow-up Training to prepare for the second Small Group Session and Telephone Call.

4) Attend an Appreciation Meeting at the end of the Project.

5) Keep a Log of your activity during the Project and turn it in monthly to the Project Coordinator.

This manual will help you to carry out your tasks as a Lay Health Worker and to teach other Hmong Americans to understand what colon cancer is and how to prevent it. The Project Coordinator will be available to help you throughout this process.
# 3. Timeline of Community Health Worker Activities

Below is a timeline that describes the types of activities you will be doing during various months of this project. You should write in the appropriate dates in the last column.

<table>
<thead>
<tr>
<th>Timeline</th>
<th>Activity</th>
<th>Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Month 1</td>
<td>Orientation Training</td>
<td>April</td>
</tr>
<tr>
<td></td>
<td>• Community Health Workers attend Orientation Training to learn about recruitment and research methods</td>
<td></td>
</tr>
<tr>
<td>Months 1-2</td>
<td>Recruit 15 Participants (Aged 50 to 75)</td>
<td>May</td>
</tr>
<tr>
<td>Month 3</td>
<td>Colon Cancer Prevention Training</td>
<td>May-June</td>
</tr>
<tr>
<td></td>
<td>• Community Health Workers attend 2-day Training to learn about colon cancer and how to conduct small group sessions</td>
<td></td>
</tr>
<tr>
<td>Months 4-5</td>
<td>Small Group Session #1</td>
<td>June</td>
</tr>
<tr>
<td></td>
<td>• Community Health Workers arrange Small Group Sessions #1 (with 5-8 participants per group)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Community Health Workers inform the Project Coordinator so she can attend all sessions</td>
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<tr>
<td></td>
<td>• Project Staff conducts pre-intervention questionnaire for participants after obtaining written consent</td>
<td></td>
</tr>
<tr>
<td>Months 5-6</td>
<td>Telephone Call #1</td>
<td>July</td>
</tr>
<tr>
<td></td>
<td>• Community Health Workers call participants to follow-up</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Note calls on Call Log</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Attend Follow-up Training</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Community Health Workers attend follow-up Training to prepare for Small Group Session #2</td>
<td>August</td>
</tr>
<tr>
<td>Months 6-7</td>
<td>Small Group Session #2</td>
<td>August-Sept</td>
</tr>
<tr>
<td></td>
<td>• Community Health Workers arrange Small Group Sessions #2 (5-8 participants per group)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Community Health Workers inform the Project Coordinator of meeting times and locations</td>
<td></td>
</tr>
<tr>
<td>Months 7-8</td>
<td>Telephone Call #2</td>
<td>October</td>
</tr>
<tr>
<td></td>
<td>• Community Health Workers call participants to follow-up</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Note calls on Call Log</td>
<td></td>
</tr>
<tr>
<td>Months 10-11</td>
<td>Session #3</td>
<td>Nov-Dec</td>
</tr>
<tr>
<td></td>
<td>• Post-surveys &amp; provide feedback to the Project.</td>
<td></td>
</tr>
</tbody>
</table>
4. Community Health Worker Resources

Remember that you have many resources all around you if you need help or more information. Some of these resources include:

- Project Coordinator
- Training staff and researchers
- Other Lay Health Workers in your group
- Colon Cancer Prevention Training Manual
- Colon Cancer Prevention Flip Chart
- Colon Cancer Prevention Brochure
- Community Resource Guide

If you are not sure about the best person to ask for help, you should contact the Project Coordinator at telephone number Penny Lo, Program Coordinator at 916-394-1405.
5. Colon Cancer Prevention Teaching Materials

In this Project, you will use the “How Can We Prevent Colon Cancer” flip chart to teach your participants about colon cancer at the 2 Small Group Sessions. The flip chart contains 2 major sections:

Pages 1-21 Colon Cancer and its Prevention
Pages 22-31 Common Beliefs about Colon Cancer Screening and Summary

By the end of this training, you will know how to use the flip chart to teach your participants about colon cancer and its prevention.
SAMPLE FLIP CHART PAGE

FRONT SIDE (FACING PARTICIPANTS)

Txoj Hnyuv Laus Thiab Hnyuv Nplos Qhov Quav Nyob Qhov Twg Thiab Nws Ua Hauj Lwm Li Cas?

BACK SIDE (FACING LAY HEALTH WORKER)

Txoj Hnyuv Laus Thiab Hnyuv Nplos Qhov Quav Nyob Qhov Twg Thiab Nws Ua Hauj Lwm Li Cas?

• Txoj hnyuv nyob ntawm qab piab mog.
• Txoj hnyuv mos txuas ntawm lub qab piab, txoj hnyuv laus txuas ntxiv ntawm taoj hnyuv mos, taoj hnyuv laus saam li txuas mus rau boj hnyuv nplos qhov quav mus rau lub ncauj qhov quav.
• 3 taoj hauj lwm ntawm taoj hnyuv laus:
  1. Pab nqub cov dej thiab as ham zoo los ntawm cov khoom peb noj
  2. Txais tos thiab khaws cia cov zaub mov zoo uas peb noj kom nyob rau haum peb lub cev
  3. Pab tshem tawm lwm yam zaub mov tsis zoo los tsis siv cia mus ua quav

Where Is The Colon Located And What Does It Do?

• The colon is the lower part of the digestive tract. It is located in the belly below the stomach.
• The top of the colon connects to the small intestine. The bottom of the colon connects to the anus.
• Three main sections of the colon are:
  1. To absorb water, vitamins, and minerals from digested food.
  2. To receive and store food waste.
  3. To remove food waste from the body.
Explanations of the BACK SIDE of the flip chart page:

BACK SIDE (FACING LAY HEALTH WORKER)

Notes to read aloud to participants

English translation of notes above

大腸在身體的哪個部位，它有甚麼功能？

・大腸就是消化系統的末端，它位於胃部的下方。
・大腸的上端連接小腸，下端則連接肛門。
・大腸有三個主要的功能：
  1. 吸收消化後食物中剩余的水分，維生素和礦物質；
  2. 接收並儲存不能消化的廢物；
  3. 將廢物排出體外。

WHERE IS THE COLON LOCATED AND WHAT DOES IT DO?
- Stomach
- Small Intestine
- Colon
- Rectum

Picture on front side

English translation of front

Picture of the next front side
6. Colon Cancer and Its Prevention

The trainer will now give you a lecture about colon cancer and its prevention. The content for this lecture is found in the flip chart from pages 1 to 21. If you have any questions as you are listening to this lecture, please write down your questions here. At the end of the lecture, you can ask the questions you have written down.
7. Practice 1: Using the Flip Chart

For this part of the training, we would like you to practice using the first section of the flip chart. Please work in pairs and take turns reading the flip chart to each other.

Start on Page 1 and stop when you reach Page 21. Each of you will have 30 minutes to practice this section. One of our staff members will come and observe while you practice to give you feedback and suggestions.

After this practice, you will:

1. Be familiar with using the flip chart.
2. Know about the 3 recommended colon cancer screening tests.
3. Know how often participants should get any one of the screening tests.
4. Be familiar with how the tests are done.

Next, we will tell you how to use the flipchart.
<table>
<thead>
<tr>
<th>HOW TO USE THE FLIP CHART</th>
<th>Tips and techniques</th>
</tr>
</thead>
</table>
| 1. Place the flip chart near you and have the front page pictures face your participants | • You may place the flip chart on your lap or have it on the table in front of you or next to you.  
• Ask people if they can see the pictures and words clearly. Make sure there is no glare on the flipchart and those who have vision problems are wearing glasses or sitting close enough. |
| 2. Start by introducing the purpose of the flip chart | • You may want to say:  
"I will be using this flip chart to tell you about colon cancer and how to prevent it. If you have any questions, please feel free to ask me anytime." |
| 3. Read aloud the notes on the backside of the flip chart. | • Speak slowly and loudly enough to be heard. Ask your participants if they can hear you.  
• Be aware of the participants' reactions while you are talking. Do they seem to understand? Do they seem interested? |
| 4. Pause after each page to see if people have any questions. | • During the pause, look at each participant to engage them.  
• Allow your participants to ask you questions. If you see that they may have a question, make eye contact and ask: "Does anyone have any question?"  
• If they do not seem to understand, try to restate the information in your own way. |
| 5. If you don't know an answer to a question, tell your participants that you will find out the information and get back to them. | • Write down any question(s) you do not know the answer to so that you can find out the information afterward and answer the question(s) at the next Small Group Session (or Telephone Call).  
• It is important that your participants receive accurate information for their health, so if the information is not in the flipchart, check with the Project Coordinator first. |
8. How to do a Stool Test for Colon Cancer Screening

First, you will watch a brief video that demonstrates how to do a stool test. Project Staff will then simulate how to do two different stool tests. If you have any questions while you are watching this video, please write down your questions here. At the end of the video, you can ask the questions you have written down.
9. Common Beliefs about Colon Cancer Screening and Summary

Our training staff member will now give you a lecture about common beliefs that may keep Hmong Americans from getting colon cancer screening. The content for this lecture is found in the flip chart from pages 22 to 31. If you have any questions as you are listening to this lecture, please write down your questions here. At the end of the lecture, you can ask the questions you have written down.
10. Practice 2: Using the Flip Chart

For this part of the training, we would like you to practice using the second section of the flip chart. Again, we would like you to work in pairs and take turns reading the flip chart to each other. Start on Page 22 and stop when you reach Page 31. Each of you will have 20 minutes to practice this section. One of our staff members will come and observe while you practice to give you feedback and suggestions.

After this practice, you will:

1. Be familiar with using the flip chart.
2. Know about common beliefs that Hmong Americans may have about colon cancer screening.
3. Know how to address these beliefs using the flip chart.
11. Homework

Congratulations! You have just successfully completed the first day of the colon cancer prevention training for this Project. We will meet again on ___________ (date) for the second day of the training.

To prepare for the next training, please do the following as your homework and check the box when you have done it:

☐ Practice reading the entire flip chart aloud until you are familiar with the contents. Write down any questions or concerns that come up as you practice here and bring them up at the next training:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

☐ Practice using the two different stool kits for colon cancer screening
12. Conducting Small Group Session

In your role as a Community Health Worker, you will be giving 2 Small Group Sessions about colon cancer and its screening to your participants.

The Small Group Session can be conducted at the home of one of your participants, at your home, or at another site arranged or suggested by the Project Coordinator. It is important to pick a place where:

- It is convenient for all participants, including those who do not have transportation
- It is comfortable for 5-8 participants to sit and talk for about 2 hours
- It is quiet enough for the participants to hear you speak
- It is possible for 5-8 participants to sit and be able to see the flip chart.

We encourage you to invite at most 5-8 people each time you conduct a session. Therefore, you will need to do several sessions for you to cover all 15 of your participants.

When you divide your group, consider the language of your participants. Clarify which language you will be speaking in. You will need to make sure that all participants who attend a small group session can understand the same language. You can say: “I’m going to be giving my presentation in LANGUAGE. Is everyone comfortable with LANGUAGE?” If someone is not comfortable, offer to have them come to another session where the appropriate language such as LANGUAGE or LANGUAGE is spoken.

Sacramento: Let your participants know that you will be speaking in Hmong. If you have participants who may speak only English and you can also speak English, you may need to conduct a separate session for them.
### A. SMALL GROUP SESSION ACTIVITIES

You will be leading a Small Group Session #1 and a Small Group Session #2 with your participants. This table shows the goals of each session and what you should cover.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Goals</th>
<th>Sample Agenda and Timing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Small Group Session #1</td>
<td>- Allow participants get to know one another</td>
<td>1. Project Team obtains consent from participants and conducts the pre-intervention survey (50 min)</td>
</tr>
<tr>
<td></td>
<td>- Present flip chart</td>
<td>2. Introduction (5 min)</td>
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<tr>
<td></td>
<td>- Have an open group discussion</td>
<td>3. Flip chart presentation (40 min) – colon cancer education and common beliefs (Slide # 1-31)</td>
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<tr>
<td></td>
<td></td>
<td>4. Discussion (10 min)</td>
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<td></td>
<td></td>
<td>5. Give participants Colon Cancer Prevention Brochure* and Community Resource Guide (5 min)</td>
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<td></td>
<td></td>
<td>6. Remind participants about Telephone Call #1 and Small Group Session #2 (5 min)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Bring your Project Bag that contains: flip chart, community resource guide, pens, contact information of participants, writing pads</td>
</tr>
<tr>
<td></td>
<td></td>
<td>* Project Coordinator will provide Brochure</td>
</tr>
<tr>
<td>Small Group Session #2</td>
<td>- Allow participants to get to know one another</td>
<td>1. Welcome (10 min)</td>
</tr>
<tr>
<td></td>
<td>- Review key knowledge using flip chart</td>
<td>2. Review basic knowledge of colon cancer and screening using selected flipchart pages on the following topics (10 min)</td>
</tr>
<tr>
<td></td>
<td>- Answer questions from participants</td>
<td>- Why colon cancer is important (Slide # 2)</td>
</tr>
<tr>
<td></td>
<td>- Have an open group discussion</td>
<td>- What is colon cancer (Slide # 6)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Who can get colon cancer (Slide # 3)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- How can we prevent colon cancer (Slide # 9)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- What are the colon cancer screening tests (Slide # 10)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- How often to get screened (Slide # 17)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3. Discuss concerns regarding colon cancer screening – (15 min)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4. Discuss and set individual goals (20 min)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5. Remind participants about Telephone Call #2 (5 min)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>6. Distribute Healthy Nutrition Handouts** to participants (2 min)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Bring your Project Bag that contains: flip chart, brochures, community resource guide, pens, contact information of participants, writing pads, Healthy Nutrition Handouts</td>
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<tr>
<td></td>
<td></td>
<td>** (Project Coordinator will provide handouts at Follow-</td>
</tr>
</tbody>
</table>
B. PREPARING TO CONDUCT SMALL GROUP SESSIONS

Here are the things you should do before you start your Small Group Session and some things you can do after the session to help you prepare for the next one.

BEFORE THE SMALL GROUP SESSION

Being prepared and understanding your materials will help the Small Group Session go well.

Things you need to do
• Coordinate with participants and the Project Coordinator about the meeting time, day, and location.
• Gather your Project Bag and make sure you have all the supplies that you need.
• Follow the Sample Agenda as suggested on Page 18.
• Re-read the flip chart and talking points before the presentation.

Other tips
• If you understand your materials, you will have confidence when you present. The flip chart will guide you through all the basic information you will need.
• Practice makes perfect, so practice with friends or family members.

AFTER THE SMALL GROUP SESSION

Reflect on how you can improve your presentation. Ask yourself:

• How did I do?
• Did I speak loudly enough and clearly enough?
• Did I pay attention to each participant and his/her reaction?
• Did I stick to my agenda?
• Did I give the participants time to absorb the information by speaking slowly enough and taking enough time with the flip chart?
• Did I answer the questions fully?
• Did the participants seem interested?
• Did the participants understand the main points?
• What should I do differently next time?
C. TIPS FOR CONDUCTING SMALL GROUP SESSIONS

Here are some things to keep in mind when doing your small group session presentation, with tips and examples on how to do them.

<table>
<thead>
<tr>
<th>ELEMENTS OF A PRESENTATION</th>
<th>TIPS AND EXPLANATIONS</th>
</tr>
</thead>
</table>
| 1. Introduce yourself and the topic | • Do not assume people know you or what you are going to talk about, even if you know everyone in the room.  
• You can say: “Hello. My name is ________, and I’m a community health worker for the Hmong Healthy Living Project. Today I’m here to talk with you about colon cancer, how it affects Hmong people, and what we can do about it. Just so you know, although I have been trained to talk about colon cancer, I am not a health professional.” |
| 2. Set the ground rules for the session | • Although everyone may be familiar with each other, it helps to tell them the guidelines for the discussion to encourage active and respectful participation from everyone.  
• You can say: “We are here to learn from each other. I want to make sure that everyone feels comfortable and gets a chance to participate. So here are some guidelines. Let’s have only one person speak at a time. Please listen to the speaker. If you are speaking, be considerate and give others a chance to speak or ask questions. It is fine to ask for clarifications or express your opinions, but let’s not criticize each other. Also, we have about 60 minutes, and I want everyone to have a chance to talk, so if someone speaks two or three times in a row, I will ask that person to give others a chance to talk. Do we all agree?” |
| 3. Have everyone introduce him/herself | • It is important to make people feel comfortable from the beginning. Introduction is also a good way to have people get used to participating. The participants will help each other learn and get screening, so it is important to have them get to know each other.  
• You can say: “Although a lot of us know each other, let’s go around and have each person say his or her name.”  
• You can add something else to the introductions such as having each person say where he or she came from or why he or she is here. Let your personality and what you know about the participants guide you. |
<table>
<thead>
<tr>
<th>ELEMENTS OF A PRESENTATION</th>
<th>TIPS AND EXPLANATIONS</th>
</tr>
</thead>
</table>
| 4. Let people know what you are going to talk about | - It is easier for people to follow your presentation if you give them some guideposts in advance.  
You can say:  
- “First, I’ll tell you a little about the Project. Then I’ll share with you basic information about colon cancer and why we should be concerned about this health issue.”  
- “Lastly, we’ll talk about what we can do about colon cancer for yourself, for our families and for our community. How does that sound?”  
- “I’ll make sure we have time at the end for questions. If I don’t have the answers, I’ll find out and get back to you.” |
| 5. Understand how much your participants know about colon cancer | - Find out how much your participants know.  
- You can ask: “So, what do you know about colon cancer already?” and “Who here has had colon cancer screening?”  
- During the session, depending on what they know, you might spend more time on what colon cancer is, what they can do to prevent it, or barriers to screening.  
- If there is someone in the group who has had screening, you can ask: “Since you had colon cancer screening, what do you think about this?” |
| 6. Encourage questions | - Many people will not interrupt you even if they do not understand what you are saying, so it is important to let them know that they can ask you questions.  
You can say: “When I was learning about this, I had many questions, so please feel free to ask any questions you have.”  
You can say: “I will stop at the end of each section so you will have time to ask questions that I did not answer.”  
You can say: “If you cannot wait until the end of the section for your questions, please let me know by raising your hand.” |
<table>
<thead>
<tr>
<th>ELEMENTS OF A PRESENTATION</th>
<th>TIPS AND EXPLANATIONS</th>
</tr>
</thead>
</table>
| 7. Use the flip chart     | • Follow the flip chart, point to important points or pictures. Speak loudly and clearly so people can follow your presentation.  
• For many people, the visual aids may be the most important part of the presentation.  
• Make sure people can see the flip chart from where they are sitting.  
  • You can ask: “Can everyone see the pictures on the front of this flip chart and read the words?” |
| 8. Summarize              | • Summarize your main points. Ask your participants to repeat back to you what you covered.  
  • You can say: “So we talked about why it’s so important for our community to get screened for colon cancer. Can you share one or two things that you learned today?”  
  • You can say: “We went over the different colon cancer screening tests. Can you tell me what they are?”  
  • Praise your participants when they answer your questions correctly.  
  • You can say: “That’s right. You really know what we have been talking about.”  
  • Repeat the relevant content if participants cannot provide a correct answer.  
  • You can say: “I may not have explained that part clearly. Let me tell you about that again.” |
<table>
<thead>
<tr>
<th><strong>ELEMENTS OF A PRESENTATION</strong></th>
<th><strong>TIPS AND EXPLANATIONS</strong></th>
</tr>
</thead>
</table>
| 9. Thank the participants for coming | - Thank them for taking the time to listen and for their questions. Remind them about the Telephone Call. Do not forget to ask the participants individually what is the most convenient time for you to call them.  
- You can say: “Thank you for coming. I know you’re all busy. I hope you learned some new information about colon cancer and how to prevent it.”  
- You can say: “I want to remind you about the phone call I’ll be making to all of you in a month. I just want to follow-up with you, answer any questions you may have, and see how I can help you with getting colon cancer screening.”  
- You can say: “If you have any questions before then, you can call me at telephone number __________.” |
| 10. The most important part to giving a good presentation is being yourself. | - Remember, we chose you because we believe you already have the skills to teach the people you know.  
- The more relaxed you are, the easier it will be for other people to hear what you have to say.  
- If you have a personal connection to colon cancer, you can share it if you want. |
D. SOME “DON’Ts” and “DOs” REGARDING SMALL GROUP SESSIONS

<table>
<thead>
<tr>
<th>DON’T</th>
<th>DO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disregard what participants say.</td>
<td>Listen, reinforce and clarify.</td>
</tr>
<tr>
<td>Show disinterest and other non-caring behavior.</td>
<td>Provide a warm, supportive and non-threatening environment.</td>
</tr>
<tr>
<td>Let the discussion go off track.</td>
<td>Keep discussion moving.</td>
</tr>
<tr>
<td>Challenge participants and their responses.</td>
<td>Respect each participant’s viewpoints.</td>
</tr>
<tr>
<td>Do not force or badger the participants to get screening</td>
<td>Involve participants and encourage them to take charge of their own health.</td>
</tr>
<tr>
<td>Preach or belabor a point or repeat unnecessarily.</td>
<td>Review and summarize, emphasize important points at the end.</td>
</tr>
</tbody>
</table>
## E. DEALING WITH DIFFICULT PARTICIPANTS

You may encounter participants who make it difficult for you to conduct your sessions. Here we discuss some common types of such participants and suggest ways to deal with them.

<table>
<thead>
<tr>
<th>TYPES OF DIFFICULT PARTICIPANTS</th>
<th>TIPS AND EXPLANATIONS</th>
</tr>
</thead>
</table>
| 1. The “Too-Talkative Person”  
This person talks all the time and tries to dominate the discussion. | • Thank the person and say that we want everyone to have a chance to talk.  
• Refocus by stating the relevant point, then move on.  
• Use body language. Don’t look at this person when you ask a question.  
• Outside of the session, spend time listening to the person, praise him/her for the contributions, and ask for help to get others more involved.  
  
  • You can say: “Let’s come back and all talk about this after the presentation if we have time, or I can talk to you privately later.” |
| 2. The “Silent” Person  
This person does not speak in discussions or become involved in activities. | • Watch for any signs (such as body language) that the person wants to participate, especially while brainstorming and problem solving. Call on this person if you observe any such signs.  
• When you ask for input, look at this person to encourage the person to talk.  
• Talk to the person at the break and find out how they feel about the session.  
• Respect a person who really doesn’t want to talk; this does not mean that they are not getting something from the session. |
<table>
<thead>
<tr>
<th>TYPES OF DIFFICULT PARTICIPANTS</th>
<th>TIPS AND EXPLANATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. The “Yes, but…” Person</td>
<td>• Acknowledge the person’s concerns or situation.</td>
</tr>
<tr>
<td>This person agrees with ideas in principle but goes on to point out, repeatedly, how it will not work for him/her.</td>
<td>• You can say: “I can see why you would say that.”</td>
</tr>
<tr>
<td></td>
<td>• Ask the group to help.</td>
</tr>
<tr>
<td></td>
<td>• You can say: “What do the rest of you think about what he/she said?”</td>
</tr>
<tr>
<td></td>
<td>• After three “Yes, but” from this person, state the need to move on and offer to talk to the person later. It may be that the person’s problem is too complicated to deal with in the group, or the real problem has not been identified.</td>
</tr>
<tr>
<td></td>
<td>• You can say: “Let’s come back and all talk about this after the presentation if we have time, or I can talk to you privately later.”</td>
</tr>
<tr>
<td></td>
<td>• You can say: “What you are saying is important, but I have to go on to the next topic. We can talk more at the end if we have time, or I can talk to you after the meeting.”</td>
</tr>
<tr>
<td>4. The “Know-It-All” Person</td>
<td>• Limit contributions by not calling on or looking at the person when asking questions.</td>
</tr>
<tr>
<td>This person constantly interrupts to add an answer, comment, or opinion.</td>
<td>• Thank the person for positive comments.</td>
</tr>
<tr>
<td></td>
<td>• Ask for help from others:</td>
</tr>
<tr>
<td></td>
<td>• You can say: “Thank you. What do the rest of you think?”</td>
</tr>
<tr>
<td></td>
<td>• If the problem persists, remind the person of the discussion guideline and time concerns.</td>
</tr>
<tr>
<td></td>
<td>• You can say: “Thank you for contributing. Since we agreed at the beginning that everyone should have a chance to talk, I will ask others to make a comment.”</td>
</tr>
<tr>
<td></td>
<td>• You can say: “Thank you for contributing. Since I have to finish the presentation, I am going to talk about the next item. If we have time, we can get back to this at the end.”</td>
</tr>
</tbody>
</table>
13. Practice 3: Using the Flip Chart

For this part of today’s training, we would like you to practice presenting the flip chart. We would like you to work in a small group of 3-5 and take turns presenting one selected section from the flip chart to your small group. Each of you will have 10 minutes to present your assigned section of the flip chart. A trainer will come and observe while you practice to give you feedback and suggestions.

By the end of this practice session, you will:

1. Be familiar with using the flip chart.
2. Be more comfortable with presenting to a small group.
14. Questions and Answers

The trainer will now address any questions or concerns you have so far about conducting Small Group Sessions. Please write down any question, concern, or idea you have below while you are listening to the discussion.
15. Visiting the Doctor’s Office

During this portion of the training, we will visit to a doctor’s office, where the doctor or a nurse will show you the equipment used for sigmoidoscopy and colonoscopy. You can use the space below to write down any notes or questions you have for the doctor to answer at the end of the visit.
16. Conducting Telephone Calls

A. Introduction

Part of your job is to keep in touch with your participants through 2 Telephone Calls. The 2 calls are similar. Each will last about 10 to 15 minutes.

When to make these calls? About a month after each Small Group Session.

What are the purposes of these calls?

- Check on participant’s status regarding obtaining colon cancer screening
- Identify benefits and barriers for completing
- Encourage participant to complete colon cancer screening and if possible, help to address barriers
- Remind participants about the next project activity

How to select a good time to call?

- Pick a time when you and the participant can talk without interruption for 10 to 15 minutes.
- You may want to be ready to call several participants in a row to save time, but you can do what you like.
### B. How to conduct telephone calls

The table below describes what you should do for the telephone calls. The Call Log (next page) will guide you during the call.

| **Before the call** | Gather | **Your Call Log, pen, and participant’s telephone number**  
For Telephone Call #1, have the date, time, and location for the Small Group Session #2 ready |
<table>
<thead>
<tr>
<th></th>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>During the call</strong></td>
<td>Record</td>
<td><strong>On the Call Log, record the participant’s name, date of the call, whether this is Telephone Call #1 or #2, and the time of the start of the call (please use the Call Log as shown on the next page)</strong></td>
</tr>
<tr>
<td></td>
<td>Greet</td>
<td><strong>Greet participant and mention purpose of the call (2 min): Call Log Step 1</strong></td>
</tr>
<tr>
<td></td>
<td>Ask</td>
<td><strong>Ask questions to find out participant’s status regarding colon cancer screening, provide support and encouragement based on participant’s status (10 min): Call Log Step 2</strong></td>
</tr>
</tbody>
</table>
|                     | Remind | **Remind participant about the next project activity (1 min): Call Log Step 3**  
--For Call #1, about date, time, and place for Small Group Session #2  
--For Call #2, about the Final Meeting for the Post-Intervention Survey where participant will receive the second part of the participation incentive. |
| **After the call**  | Record | The time of the end of the call |
|                     | Complete | The Call Log. The notes you make on the Call Log are very important data for the Project. You will also use the notes for Call #1 to prepare for Small Group Session #2. |

**Note:** Appendices C, D, and E contain additional description and step-by-step details for using the Call Log and conducting Telephone Calls.
17. Call Log

TELEPHONE CALL LOG

Call: #1 or #2 (CIRCLE ONE)

Participant Name: ____________________ Phone: ________ Date: ______ Start
Time: __:__ AM/PM

Please follow the yellow arrows and the corresponding instructions IN CAP BLUE FONTS to complete the 3-STEP call log.

• For Call #1: First to write down the date, time, and location for the Small Group Session #2 (inside the box of step 3 on back page).

• For Call #2: If you have already learned from Call #1 that your participant is up-to-date[DONE] with screening, then CONFIRM (or update if needed) the test and date information. If participant remains up-to-date [DONE], continue ENCOURAGE in STEP 2.

STEP 1. Greet and explain purpose

1. SAY: “Hello [participant’s name], this is [your name]. How are you?”

2. ASK: “I’m calling to see how you’ve been doing since our meeting on colon cancer prevention. Is it a good time to talk for about 10-15 minutes?” CHECK participant’s answer:
   □ Yes. CONTINUE STEP 2
   □ No. RESCHEDULE. ASK: “When might be a good time to call?” RECORD: date & time

STEP 2. Find out participant’s status and provide support & encouragement

1. SAY: “I am so glad that you came to the group meeting. Since we last met, I’d like to know what you have been thinking about colon cancer screening.”

2. ASK STATUS QUESTION A: “Have you had colon cancer screening?”

3. CHECK participant’s answer in box and continue:
No. □ Yes. □

(1) ASK: "Which test and when did you do it?"
CIRCLE test type: FOBT/Sigmoid/Colon; Date: ____________

(2) DETERMINE if test is Up-to-date or Overdue and CHECK one of the boxes below (FOBT within 1 year; sigmoidoscopy within 5 yrs; colonoscopy within 10 yrs)

□ Up-to-date [STATUS = DONE], then:
   a) IDENTIFY MOTIVE: "What made you decide to get the test?"

b) ENCOURAGE:
   - For Call #1: "You are a role model for the group. Please come to the next meeting to share your experience with us." GO TO STEP 3
   - For Call #2: "It is great that you are up-to-date in getting colon cancer screening. Continue to get screening regularly. You're a good role model for your family and friends." GO TO STEP 3

□ Overdue, then:
   a) SAY: "We have learned that [FOBT/Sigmoidoscopy/Colonoscopy test] should be done every [year/5 years/10 years] right?" CONTINUE TO ASK QUESTION B ON THE TOP OF BACK PAGE

CONTINUE ON BACK PAGE

1. ASK STATUS QUESTION B: "Are you planning to get colon cancer screening in the next few months?"
2. CHECK participant's answer in box and continue:
   □ Yes. □ No. □
   [STATUS = NO PLAN], then:
   a) IDENTIFY CONCERN: "I know you must have reasons why you are not thinking about getting colon cancer screening soon. Can you tell me the reasons?"

b) ENCOURAGE:
   - For Call #1: "I believe other people in the group may have similar concerns. It would be good to talk about these issues in the next group meeting." GO TO STEP 3
   - For Call #2: "I know you will make good decisions for your health. I hope you will keep the brochures/information that we shared with you at the meetings and refer to them." GO TO STEP 3
1. ASK STATUS QUESTION C: “Do you have an appointment with a doctor or a clinic for colon cancer screening?”

2. CHECK participant's answer in box and continue:
   □ No.  [STATUS = PLAN], then:
   a) IDENTIFY MOTIVE: “What made you think about getting colon cancer screening?”
   
   b) IDENTIFY CONCERN: “Are there any concerns that you still have about screening?”

   c) ENCOURAGE:
      • For Call #1: “I believe others in the group would like to hear your thoughts about getting screened.” GO TO STEP 3
      • For call #2: “Don’t delay your plan of getting screened! Give your doctor a call this week, and bring along the brochure ‘How to Prevent Colon Cancer’ that I gave you.” SKIP TO STEP 3

   □ Yes.  [STATUS = IN PROCESS], then:
   a) IDENTIFY STEP TAKEN: “Which test and when will you do it?”
      CIRCLE test type or appt: FOBT/Sigmoid/Colon / appt with M.D. on date:

   b) IDENTIFY MOTIVE: “What made you decide to get the test?”

   c) IDENTIFY CONCERN: “Are there any concerns that you still have about screening?”

   d) ENCOURAGE:
      • For Call #1: “I believe others in the group would like to hear about your progress at the next group meeting.” GO TO STEP 3
      • For call #2: “It’s so good to hear that you are on your way to getting screened. You’re setting a good example for your family and friends.” GO TO STEP 3

STEP 3. Remind and thank participant

• For Call #1: SAY: “Thanks for taking the time to talk to me. The next group meeting will be on _____(date) at _____AM/PM in ______________. I look forward to seeing you.”

• For Call #2: SAY: “Lastly, as a reminder, in about 2 months, a program Staff will call you to remind you about a final meeting for the study where you will fill out a survey and share your opinions. After the meeting, you will receive $30.”
Reminders for Making Telephone Calls

1. **Interact with the participant the way you usually do.** Remember that you are selected to do this work because you know how to relate to people. Treat him/her as you normally would.

2. **Listen attentively.** You do not have to convince your participant about getting screened. Do not feel you have to provide a solution. Remember, your goal is to LISTEN!

3. **Be supportive, respectful, and positive.**
   - **Respond to the motives** for screening that your participant shares with you:
     - "That's really important."
     - "I'm glad to hear your thoughts."
     - "I agree."
   - **Respond to concerns** about screening that your participant brings up:
     - "I understand."
     - "I know many people have this concern."
     - "We should talk about this in the next group meeting. Let's see how other people have dealt with this concern."
     - Answer any concerns that you feel comfortable answering based on your training and what you know from the flipchart.
     - You can also encourage the participant to make an appointment with his/her doctor to discuss remaining concerns; you may say: "I believe your doctor can also answer these questions for you."

4. **Record notes on the Call Log.** Write notes during or right after the calls while the conversation is still fresh in your mind. Use the Call Log to note any concerns you or your participants have, then notify and discuss with the Project Coordinator.

5. **Call the Project Coordinator to share your concerns or questions.** Remember, you can always call the Project Coordinator who will provide the needed information and assistance.
18. Telephone Call Demonstration

A. Telephone Call Demonstration

We will show you how to use the Call Log to make Telephone Calls. Refer to the role-play scripts in Appendix F. You can use the space below to write down any notes or questions you have.
B. Reminders for Making Telephone Calls

6. **Interact with the participant the way you usually do.** Remember that you are selected to do this work because you know how to relate to people. Treat him/her as you normally would.

7. **Listen attentively.** You do not have to convince the person to get screened. Do not feel you have to provide a solution. Remember, your goal is to LISTEN!

8. **Be supportive, respectful, and positive. You want to encourage the person to come to the next meeting and to stay in the program.** Here are some examples of what you can say:

   - Response to the reasons that motivate the person to get screened:
     “That’s really important.”
     “I’m glad to hear your thoughts.”
     “I agree.”

   - Respond to concerns that the person brings up:
     “I understand.”
     “I know many people have this concern.”
     “We should talk about this in the next meeting. Let’s see how others dealt with this.”

   - Answer any concerns that you feel comfortable answering based on your training and what you know from the flipchart.

   - You can also encourage the participant to make an appointment with his/her doctor to discuss remaining concerns. You can say: “I believe your doctor can also answer these questions for you.”

9. **Record notes on the Call Log.** Write notes during or right after the calls while the conversation is still fresh in your mind. Use the Call Log to note any concerns you or your participants have, then notify and discuss with the Project Coordinator.

10. **Call the Project Coordinator to share your concerns or questions.** Remember, you can always call the Project Coordinator who will provide the needed information and assistance.
19. Practice 4: Making Telephone Calls

For this exercise, we would like you to practice making Telephone Calls #1 and #2. We would like you to work in pairs and take turns reading through the sample script.

Each of you will have 15 minutes to practice this section. A project staff member will come and observe while you practice to help give you feedback and suggestions.

By the end of this practice, you will:

1. Be familiar with the goals and the procedure of making Telephone Calls.
2. Know how to use the Call Log to help you make the Telephone Calls.
20. Community Resource Guide

Community Resource Guide
Sacramento, California

Mercy Norwood Clinic (North)
3911 Norwood Ave
Sacramento, CA 95838
916-929-8575

Sacramento Community Clinic (South)
7275 E. Southgate Drive
Sacramento, CA 95823
916-428-3788

Sacramento Family Medical Clinic
2737 Woodberry Way
Rancho Cordova, CA 95670
916-363-2229
21. Appendices

A. Stool Test Instructions for Colon Screening: Guaiac Test

B. Stool Test Instructions for Colon Screening: FIT

C. Four Different “Status” Categories for Colon Cancer Screening

D. Tips to Tailor Support According To Participant’s Status

E. Training Material for Telephone Calls: A Step-By-Step Guide.

F. Training Material for Telephone Calls: Sample Scripts
Appendix A. Stool Test Instructions for Colon Screening: Guaiac Test

Before collecting your stool, please read the following:

- You will collect stool samples from 3 bowel movements.
- Do not collect your stool if you have a bleeding hemorrhoid.
- Women: Do not collect your stool during a menstrual period.

For a few days before the test, you may have to make some changes in your medicines or diet.

**Medicines**
Starting 7 days before you begin collecting your stool and until you are done collecting your stool samples, do not take ibuprofen (Advil, Motrin) or similar pain medicines. Do not take more than one aspirin per day. You do not have to stop taking acetaminophen (Tylenol), if that is a medicine that you usually take.

**Diet**
Starting 2 days before you begin collecting your stool and until you are done collecting your stool samples, do not eat meat unless it is well-done. Do not eat horseradish, cantaloupe, turnips, broccoli, cauliflower, radishes, or parsnips. Do not eat blood pudding or blood sausage.

**Instructions for Collecting 3 Stool Samples:**
1. Write the date you collected the stool on each card.
2. Before the test, take out all toilet bowl cleaners and flush the toilet two times so only plain water is there.
3. Collect the stool:
   a. Allow the stool to fall into the water as usual.
   b. Use a stick from the kit to collect a small sample of stool.
   c. On one stool card, put a very small amount of stool as a thin smear in the box labeled “A.”
   d. Take another very small amount from a different part of the stool and smear it in the box labeled “B.”
   e. Let the card dry and close the front flap.
   f. Do not get the card wet.
4. Do the same for your next 2 bowel movements using the
other 2 cards.

Appendix B. Stool Test Instructions for Colon Screening: FIT

Please read the instructions below carefully before sample collection. Test results may be invalid if test is not preformed properly.

Sample Deposit

1. Place supplied collection paper inside toilet bowl on top of water.
2. Deposit stool sample on top of collection paper.
3. Collect sample from stool before paper sinks and stool sample touches water.
4. Flush. Collection paper is biodegradable and will not harm septic systems.

Sample Collection

1. Fill in all required information on the sampling bottle

   Open green cap by twisting and lifting.

2. Scrape the surface of the fecal sample with the sampling probe.

   Cover the grooved portion of the sampling probe completely with stool sample.
3. Close sampling bottle by inserting the sampling probe and snapping the green cap on tightly. Do not reopen.

Return the sampling bottle to your doctor or laboratory in envelope provided.
Appendix C. Four Different “Status” Categories for Colon Cancer Screening

Each of your participants is likely going to have different opinions and experiences about getting colon cancer screening. By learning about your participant’s “status” for colon cancer screening, you will be able to think about how to help each participant more effectively. See below for the description for each status.

The 4 Status Categories

1. Done
   - Completed screening and is up-to-date*

2. No Plan
   - Has never been screened or screening is overdue (not up-to-date)
   - Has no plan to get screened in the next few months

3. Plan
   - Has never been screened or screening is overdue
   - Plans to get screened in the next few months

4. In Process
   - Has never been screened or screening is overdue
   - Plans to get screened AND has taken some steps toward getting screened, for example: has made an appointment with a doctor to discuss screening; has received a stool test kit; is in the process of scheduling or has scheduled a test

*Up-to-date is defined as having FOBT within the last 12 months, a sigmoidoscopy within the last 5 years, and a colonoscopy within the last 10 years.
Appendix D. *Tips to Tailor Support According To Participant’s Status*

Your goal is to help your participant “one step at a time.” Help those who are in **NO PLAN** get to **PLAN** or **IN PROCESS**, and those who are in **PLAN** or **IN PROCESS** get to **DONE**.

### Done (screening is up-to-date – FOBT within past 12 months, sigmoidoscopy within past 5 years, or colonoscopy within past 10 years)

- These participants can use **encouragement to keep screening up-to-date**. One way is to ask about their reason for getting screened to help remind them of the benefits.
- Encourage them to serve as **role models** and share their reasons for and experiences about getting screened with other group members.
- They will be **good partners**. They can help you motivate and encourage other participants to get screened.

### No Plan (has no plan to get screened in the next few months)

- These participants **might be resistant** to hearing your advice about colon cancer screening.
- The most important goal is **get them to come back to the next meeting** to hear about others’ experiences. This may help them to reconsider the importance of screening.
- **Hold your advice.** You do not have to change their mind or provide a solution.
- **Listen supportively** to their concerns and make them feel respected.
- **Show your appreciation** for his/her participation and for sharing his/her thoughts with you.

### Plan (plans to get screened in the next few months)

- These participants might be already be “convinced” of the importance of colon cancer screening, but **have some remaining concerns** that need to be addressed.
- Ask them to tell you their reasons for planning to get screened to help remind them of the **benefits** of screening.
- Ask them to **share with you openly any remaining concerns**, so that you will be able to address them or use the next small group session to provide the needed encouragement.

### In Process (has an appointment to discuss screening with a doctor, has received a stool test kit, is in the process of scheduling or has scheduled a test)

- These participants are **very close to completion (DONE)**. They can benefit from encouragement to complete the process. Be a cheerleader.
- Ask them when they plan to complete the test to help them to **make a commitment** by saying this plan to someone else.
• Ask about the main reason they want to get screened to increase the likelihood of completion.

Appendix E. Training Material for Telephone Calls: A Step-By-Step Guide

This step-by-step guide offers suggestions for making the calls. You can use your own style to get the needed information and show support for your participant.

As you go through the training in this Appendix, have the Call Log in front of you so that you can easily follow the instructions and refer to the Call Log at the same time. When you make the Call, you should need only the Call Log in front of you.

Please note that Call #1 and #2 have the same procedures. However, the suggested contents for encouragement and reminders are different for Call #1 and #2. Please refer to the suggested scripts marked by “For Call #1” or “For Call #2” provided below and in the Call Log.

There are 3 steps for conducting a follow-up telephone call (See the Call Log):

• STEP 1 – Greet and explain purpose (section colored in blue on the Call Log)
• STEP 2 – Ask questions to find out participant’s status and provide support and encouragement according to his/her status (section colored in green and continues from the front to the back page)
• STEP 3 – Remind and thank participant (section in orange located at the bottom of the back page)
### STEP 1. Greet and explain purpose

(Suggested length: 2 minutes)

<table>
<thead>
<tr>
<th>Step 1: Explanations and sample scripts</th>
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</thead>
<tbody>
<tr>
<td>Greet participant as you would when you call him/her outside of the project.</td>
<td><strong>Say:</strong> “Hello [participant’s name], this is [your name]. How are you?”</td>
</tr>
</tbody>
</table>
| Tell participant the purpose of the call, which is to follow up the previous Small Group Session about colon cancer screening. | **Say and Ask:** “I’m calling to see how you have been doing since our last group meeting on colon cancer prevention. *Is it a good time to talk for about 10-15 minutes?***”
  - If yes, go to Step 2 (ask questions about plans for screening).
  - If no, reschedule. Ask: “*When might be a good time for me to call you back?***” and record the time on the Call Log.
STEP 2. Find out participant’s status and provide support & encouragement

(Suggested length: 10 minutes)

- **On the Call Log**, you will notice that there are 4 sections under this step.
  - Each section is separated by a dotted line and is marked by an icon that indicates the corresponding status category.
  - See Appendix C for the description of the 4 different status categories and their corresponding icons.
  - Follow the Call Log carefully for the questions to ask to help you identify your participant’s status and use suggested scripts to provide support accordingly.

- **To find out participant’s status:**
  - You will ask one or more of the “status questions” to put participant in 1 of 4 status with respect to colon cancer screening.
  - The questions are labeled ‘STATUS QUESTION A, B, or C’ on the Call Log.
  - Follow the Call Log and check the box according to your participant responses, then follow the arrows to ask further status questions when appropriate.

- **To provide support & encouragement** according to participant’s status:
  - Refer to the corresponding section marked by the participant’s status icon on the Call Log for the suggested scripts.
  - In general, you will:
    - **Identify motives** the participant has to get colon cancer screening;
    - **Identify concerns** that may keep participant from getting screened; and
    - **Encourage** participant according to the participant’s status and the Call (#1 or #2).
  - To identity motives and concerns for colon cancer screening, you will ask a question and then provide a supportive response. Refer to Section 18 (Telephone Demonstration) for examples and tips in providing supportive responses.
**STEP 2: Explanations and Sample Scripts**

<table>
<thead>
<tr>
<th>Begin Step 2 by introducing the status questions briefly</th>
<th>Say: “I am so glad that you came to the group meeting. Since we last met, I'd like to know what you have been thinking about colon cancer screening.” And you may proceed to ask STATUS QUESTION A</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Ask STATUS QUESTION A:</strong></td>
<td><strong>Ask: “Have you had colon cancer screening?”</strong></td>
</tr>
<tr>
<td>➢ IF No (never had screening)</td>
<td><strong>Go to Page 2/Back Page and Ask Status Question B</strong></td>
</tr>
<tr>
<td>➢ IF Yes (had screening), determine if screening is Up-to-date:</td>
<td><strong>Ask: “Which test and when did you do it? On the Call Log, circle type of test and write down date</strong></td>
</tr>
</tbody>
</table>
| ❖ If screening is up-to-date, check ☑ Up-to-date, participant’s status is DONE. Identify motive and encourage. | |}

**a) IDENTIFY MOTIVE by asking the person to share reasons for getting screened. This will remind participant of the importance of getting screened at the next due date (i.e. regularly).**

| Ask: “What made you decide to get the test?” |
| ➢ If participant describes a bad experience with screening, listen carefully and write it down. To respond, focus on the fact that he/she had screening - the best thing they could do to prevent colon cancer. |
| ➢ Say: “I know that was inconvenient, but I’m glad that you did the screening. As you said, it’s important to take care of your health, and it’s worth it.” |

**b) ENCOURAGE (then go to Step 3)**

- **For Call #1:** Encourage to share at Session #2

| Say: “You are a role model for the group. Please come to the next meeting to share your experience with us.” |

- **For Call #2:** Give encouraging remark

| Say: “It is great that you are up-to-date for your colon cancer screening. Continue to get screening regularly. You’re a good role model for your family and friends.” |

❖ If screening is NOT up-to-date, check ☑ Overdue, remind participant about the recommended time interval for the test.

| Say: “We have learned that [Test: FOBT/Sigmoidoscopy/ Colonoscopy] should be done every [time-interval recommended: year/ 5 years/10 years] right?” |

| Go to Page 2/Back Page of the Call Log and Ask Status Question B |

**Note:** If you know from previous contacts that the participant has already DONE screening (i.e., screening is up-to-date), confirm or update the test and date information, and continue to **encourage**.
STEP 2 (continued): *When participant reports never had screening OR the most recent screening is overdue in response to STATUS QUESTION A*

<table>
<thead>
<tr>
<th>Ask STATUS QUESTION B:</th>
</tr>
</thead>
<tbody>
<tr>
<td>➢ IF Yes (planning to get screening in the next few months) with a response such as “yes” or “maybe” or “possibly”</td>
</tr>
<tr>
<td>➢ IF No (not planning) with a response such as “no,” “unsure,” “probably not,” “don’t want to tell you” or “maybe later,” <strong>Status is NO PLAN.</strong> Identify concern and provide encouragement</td>
</tr>
<tr>
<td><strong>a) IDENTIFY CONCERN</strong> by asking participant to share with you why he/she is not sure or does not want to get colon cancer screening.</td>
</tr>
</tbody>
</table>

b) **ENCOURAGE**
- For Call #1: encourage sharing opinions in Small Group Session #2. Then go to next step.
- For Call #2: give a final encouraging remark. Then go to next step.

| Ask: “Are you planning to get colon cancer screening in the next few months?” |
| Go to next box in the Call Log and ask Status Question C |

- **Ask:** “I know you must have reasons why you are not thinking about getting colon cancer screening soon. Can you tell me the reasons?”
  - Answer any concerns that you feel comfortable answering based on your training and what you know from the flipchart. DO NOT feel that you have to address all of the concerns or that you must convince your participant about screening. **Allow your participant to talk** and listen supportively.

- **Say:** “I believe other people in the group may have similar concerns. It would be good to talk about these issues in the next group meeting.”

  Go to Step 3

  - **Say:** “I know you will make good decisions for your health. I hope you will keep the brochures/information that we shared with you at the meetings and refer to them.”

  Go to Step 3
**STEP 2 (continued):**
When participant answers “YES” to STATUS QUESTION B and is planning to get screening in the next few months

<table>
<thead>
<tr>
<th>Ask STATUS QUESTION C:</th>
<th>Ask: “Do you have an appointment with a doctor or a clinic for colon cancer screening?”</th>
</tr>
</thead>
<tbody>
<tr>
<td>➢ IF No (no appointment) with a response such as “no,” “unsure,” “don’t know,” Status is PLAN. Identify motive, identify concern, and provide encouragement.</td>
<td></td>
</tr>
<tr>
<td>a) IDENTIFY MOTIVE. Knowing why the participant want to get screened may help you encourage the person to overcome or address the concerns about screening identified later.</td>
<td>Ask: “Please tell me what made you think about getting colon cancer screening?”</td>
</tr>
</tbody>
</table>
| b) IDENTIFY CONCERN | Ask: “Are there any concerns that you still have about screening?”
  - Answer any concerns that you feel comfortable answering based on your training and what you know from the flipchart.
  - You can also encourage the person to make an appointment with a doctor to discuss remaining concerns: “I’m sure your doctor can also answer these questions for you.” |
| c) ENCOURAGE (after this, GO TO STEP 3)
  - For Call #1: encourage sharing opinions in Small Group Session #2. Then go to next step. | Say: “I believe others in the group would like to hear your thoughts about getting screened.”
Go to Step 3 |
| - For Call #2: give encouraging remark. Then go to next step. | Say: “Don’t delay your plan of getting screened! Give your doctor a call this week, and bring along the brochure “How To Prevent Colon Cancer” that I gave you.”
Go to Step 3 |
### STEP 2 (continued): When participant “YES” to STATUS QUESTION C

<table>
<thead>
<tr>
<th>IF Yes (already had an appointment, or have called but waiting to get an appointment, or got a FOBT kit, or waiting for an appointment for colonoscopy or sigmoidoscopy) Status is IN PROCESS. Identify step taken, motive, and concern as well as provide encouragement.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>a) IDENTIFY STEP TAKEN.</strong> Ask for additional information about the action step.</td>
</tr>
<tr>
<td>Ask: “Which test will you do?” Ask: “When will you do it?” or “When will you send in the stool test kit?”</td>
</tr>
<tr>
<td>Circle the type of test and write down the date</td>
</tr>
<tr>
<td><strong>b) IDENTIFY MOTIVE.</strong> Asking participant to share with you the reasons for getting screened can help the person to recommit to carry out the steps needed to complete screening.</td>
</tr>
<tr>
<td>Ask: “What made you decide to get the test?”</td>
</tr>
<tr>
<td><strong>c) IDENTIFY CONCERN</strong></td>
</tr>
<tr>
<td>Ask: “Are there any concerns that you still have about screening?”</td>
</tr>
<tr>
<td>- Answer any concerns that you feel comfortable answering based on your training and what you know from the flipchart.</td>
</tr>
<tr>
<td>- You can also encourage the participant to ask his/her doctor. Say: “Your doctor can also answer these questions for you.”</td>
</tr>
</tbody>
</table>
| **d) ENCOURAGE (after this, GO TO STEP 3)**
For Call #1: encourage sharing opinions in Small Group Session #2. Then go to next step. |
| Say: “I believe others in the group would like to hear about your progress at the next group meeting.” |
| Go to Step 3 |
| For Call #2: give encouraging remark. Then go to next step. |
| Say: “It’s so good to hear that you are on your way to getting screened. You’re setting a good example for your family and friends.” |
| Go to Step 3 |
STEP 3. Remind and thank participant

(Suggested length: 1 minute)

- This is the Last Step for the calls. Note the differences between Call #1 and #2.
- After this step, you can say good-bye or have other social conversation if you like.

<table>
<thead>
<tr>
<th>Step 3: Explanations and sample scripts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Call #1: Remind and encourage participant to attend Small Group Session #2.</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Call #2: Remind participant about the final meeting in 2 months when they will get their final incentive payment.</td>
</tr>
</tbody>
</table>

END CALL BY SAYING GOOD-BYE
Appendix F.  Training Material for Telephone Calls: Sample Scripts

This appendix provides 4 examples of a Telephone Call #1 conversation. One example is provided for each status of colon cancer screening: “Done,” “No Plan,” “Plan,” and “In Process.”

These sample scripts may be helpful in practicing use of the Call Log to conduct telephone calls. When using these scripts to practice conducting Call #2, substitute the Community Health Worker’s scripts marked ** with the appropriate scripts for Call #2. Please refer to the Call Log for the suggested scripts for Call #2.
Telephone Call Sample Script #1: DONE

LHW: "Hello [name], this is [your name]. How are you?"

Participant: "I am doing well. Thank you."

LHW: "I'm calling to see how you have been doing since our last group meeting on colon cancer prevention. Is it a good time to talk for about 10-15 minutes?"

Participant: "Yes, this is a good time."

LHW: "I am so glad that you came to the group meeting. Since we last met, I'd like to know what you have been thinking about colon cancer screening. Have you already done colon cancer screening?"

Participant: "Yes."

LHW: "Which test did you do and when did you do it?"

Participant: "I had a colonoscopy. When I turned 50 last year, my doctor recommended the test to me."

LHW: "This was the reason why you had a colonoscopy last year."

Participant: "That's right. My doctor recommended it, so I did it."

**LHW: "You are a role model for the group. Please come to the next meeting to share your experience with us."

Participant: "Thank you. I will be happy to share my experience with others."

**LHW: "Thanks for taking the time to talk to me. The next group meeting will be on DATE at TIME in LOCATION. I look forward to seeing you."

Points of discussion:

1) What if the participant reports a negative experience with screening?

2) What if the participant does not want to share her experience at the group meeting?

3) What if the participant says she might not be coming to the next meeting?

4) How would Call #2 be different? (Refer to the Call Log and try substituting the Community Health Worker’s scripts marked ** with the appropriate script for call #2)
Telephone Call Sample Script #2: NO PLAN

LHW: "Hello [name], this is [your name]. How are you?"

Participant: "I am doing well. Thank you."

LHW: "I'm calling to see how you have been doing since our last group meeting on colon cancer prevention. Is it a good time to talk for about 10-15 minutes?"

Participant: "Yes, this is a good time."

LHW: "I am so glad that you came to the group meeting. Since we last met, I'd like to know what you have been thinking about colon cancer screening. Have you already done colon cancer screening?"

Participant: "No."

LHW: "Are you planning to get colon cancer screening in the next few months?"

Participant: "I'm not sure, probably not."

LHW: "I understand that you may have reasons for not thinking about getting colon cancer screening. Can you tell me what these are?"

Participant: "It is too inconvenient for me. I have no time to see the doctor."

LHW: "I understand. But you know, 'Health is wealth.' It is definitely worth your time to ask your doctor for these life-saving tests."

Participant: "I'm still not sure about that."

**LHW: "I'm sure other people in the group may have similar concerns. Let's talk at the next meeting and see how we can address these concerns together."

Participant: "Maybe."

**LHW: "Thanks for taking the time to talk to me. The next group meeting will be on DATE at TIME in LOCATION. I look forward to seeing you."

Points of discussion:
1) What if the participant says he/she does not want to talk about the concerns in a group?
2) What if the participant says he/she does not have health insurance or does not know where to find a doctor or a clinic?
3) What if the participant brings up other concerns for which you don't have an answer?
4) How would Call #2 be different? (Refer to the Call Log and try substituting the Community Health Worker's scripts marked ** with the appropriate script for Call #2)
Telephone Call Sample Script #3: PLAN

LHW:  "Hello [name], this is [your name]. How are you?"

Participant:  "I am doing well. Thank you."

LHW:  "I’m calling to see how you have been doing since our last group meeting on colon cancer prevention. Is it a good time to talk for about 10-15 minutes?"

Participant:  "Yes, this is a good time."

LHW:  "I am so glad that you came to the group meeting. Since we last met, I’d like to know what you have been thinking about colon cancer screening. Have you already done colon cancer screening?"

Participant:  "No, but I am thinking about it."

LHW:  "Are you planning to get colon cancer screening in the next few months?"

Participant:  "Yes, I probably should."

LHW:  "Do you have an appointment with a doctor or a clinic for colon cancer screening?"

Participant:  "No, not yet."

LHW:  "Please tell me what made you think about getting colon cancer screening?"

Participant:  "I saw a brochure at the doctor’s office. It sounds like a good thing to do at my age for my health."

LHW:  "Are there any concerns that you still have about screening?"

Participant:  "I am worried that the test will be messy."

LHW:  "I’ve used the stool kit before and it’s not too messy. The kit has what you need to keep from getting stool on your hand."

Participant:  "Okay, I may give it a try, but I’m worried it’ll take too much time to make an appointment to get the kit."

**LHW:  "You know, ‘Health is wealth.’ It is definitely worth your time to ask your doctor for this potentially life-saving test. I believe others in the group would like to hear your thoughts at the next meeting."

- 57 -
Participant: “OK, I'll try to be there.”

**LHW:** “Thanks for taking the time to talk to me. The next group meeting will be on DATE at TIME in LOCATION. I look forward to seeing you.”

Points of discussion:

1) What if the participant has other barriers?
2) What if the participant is not convinced?
3) What if the participant says he/she is not sure if she could make the next meeting?
4) How would Call #2 be different? (Refer to the Call Log and try substituting the Lay Health Worker's scripts marked ** with the appropriate script for Call #2)
**Telephone Call Sample Script #4: IN PROCESS**

**LHW:** "Hello [name], this is [your name]. How are you?"

Participant: "I am doing well. Thank you."

**LHW:** "I’m calling about the group meeting we had a month ago on colon cancer prevention. Is it a good time to talk for about 10-15 minutes?"

Participant: "OK."

**LHW:** "I am so glad that you came to the group meeting. Since we last met, I’d like to know what you have been thinking about colon cancer screening. Have you already done colon cancer screening?"

Participant: "Not yet, but I have an appointment with my doctor in 2 weeks to get the FOBT."

**LHW:** "Please tell me what made you think about getting colon cancer screening?"

Participant: "My friend just got diagnosed with colon cancer and that made me think I should get screened for it, too."

**LHW:** "Are there any concerns that you still have about screening?"

Participant: "I’m afraid that I’ll find out I have colon cancer. I don’t want to deal with it now."

**LHW:** "If you have cancer, you have to deal with it eventually. If you get tested now and find it early, colon cancer can easily be treated and cured. Tell your concern to your doctor."

Participant: "Okay, I will think about coming."

**LHW:** "I believe other group members would love to hear about your progress at the next group session."

Participant: "Okay, I will think about it."

**LHW:** "Thanks for taking the time to talk to me. The next group meeting will be on DATE at TIME in LOCATION. I look forward to seeing you."

*Points of discussion:*

1) What if the participant voices a concern you don’t feel comfortable answering?
2) What if the participant changes her mind about getting the test?
3) What if the participant does not want to come to the next meeting?
4) How would Call #2 be different? (Refer to the Call Log and try substituting the Lay Health Worker’s scripts marked ** with the appropriate script for Call #2)