

# CANCER IN AFRICAN AMERICAN MEN IN SOUTH CAROLINA

*Recommendations for provider-driven engagement of cancer screening and prevention*

## Cancer in African American Men Action Plan

An action plan was created in response to an event hosted by South Carolina Cancer Alliance to engage community stakeholders in finding ways to reduce cancer disparities observed in African American men across South Carolina. This action plan listed over 80 ideas to reduce cancer incidence and mortality of South Carolina African American Men, some of which focused on provider-based evidence-based interventions (EBIs).

Three major themes for provider education EBIs were outlined:

1. Reduce structural barriers to men accessing screening services
2. Utilize electronic health records to provide provider and patient reminders
3. Educate, assess, and provide feedback to providers on screening efforts

## THEME ONE: Reduce structural barriers to men accessing screening services

### CULTURAL RECOGNITION & OUTREACH



- Coordinating cancer screening at churches
- Coordinate with local employers to conduct cancer health screenings on-site
- Match patient with African American providers, nurses and ancillary staff
- Use patient navigation staff to monitor and assist with outreach, access and follow through with African American men
- Offer various options for screening modalities as appropriate based on patient cultural and religious preference.

### SCHEDULING



- Block days specifically for men. Schedule longer appointment time for African American men to allow additional one-on-one education
- Allow husband and wife appointments
- Provide African American men with proposed questions as discussion starters with physician at the time when appointment is made. Have common Q&A document for African American men in office

## THEME TWO: Utilize electronic health records to provide provider and patient reminders



- Use electronic health record data to determine number of African American men in the practice and provide outreach to those not seen in 12+ months
- Use best judgement for cancer screening recommendations for African American men based on family history, genetics, and other pertinent factors (example: colonoscopy standard screening age is 50 years of age, but patients with certain risk factors could benefit from being screened at 40 years of age)
- Create standing orders for cancer screening services for African American men (population- based approach)

## THEME THREE: Educate, assess, and provide feedback to providers on screening efforts



- Have providers complete a cultural competency course, focusing on the specific disparities and needs of African American men
- Use a combination of clinic records, electronic health records, and patient surveys to periodically (quarterly or biannually) obtain feedback on screening rates among African American men.
- Implement a welcoming clinical environment and discuss screening and medical options in a manner that will build trusting relationships between the patient and the provider

### SMALL MEDIA

Provide culturally diverse flyers, hang posters, and play short videos (if capable) in provider's office and send out newsletters to patient's homes providing information about screenings.

*Small media was not addressed in the work group but is an additional consideration for provider-driven engagement.*

For more detailed information into the recommendations for provider-driven engagement and re-engagement of cancer screening and prevention, please review the associated *Cancer in African American Men in South Carolina Provider-driven Recommendation Report*.

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