Patient Advocate Corner

Colorectal Cancer: The Cancer Research and Prevention Foundation's Dialogue for Action

By Emily Turk and Karen J. Peterson, PhD

Many spider webs can tie up a lion.

—Ethiopian proverb

The terrible irony of colorectal cancer is that this highly preventable disease kills thousands each year. Screening tools are greatly underutilized, and barriers (embarrassment, cost, lack of understanding about screening options, and inadequate capacity) stand in the way of prevention and early detection. But strong collaborations supporting a two-pronged approach of public awareness and professional education can help increase screening and reduce the incidence of colorectal cancer.

The Cancer Research and Prevention Foundation (CRPF; Alexandria, Virginia) began to develop those collaborations in 2000 with the founding of National Colorectal Cancer Awareness Month (NCCRCAM). Much of the first year was spent forging relationships with like-minded organizations with diverse constituencies. The now 57-member NCCRCAM Collaborating Partnership has helped increase momentum and leverage resources to improve screening rates in the United States—and is on its way to showing that many “spider webs” can tie up this very mighty lion.

Since launching NCCRCAM with a kick-off on Capitol Hill, CRPF and its partners have utilized the media, the Internet, and grassroots organizations to make people aware that “Colorectal cancer is preventable, treatable, and beatable,” and to encourage them to ask their health care providers about screening. Viral marketing and other promotional tools help: The Buddy Bracelet reminds people to get screened and to pass it along to friends or family as a nudge to get screened as well, and nationwide tours of the incredible, inflatable Super Colon bring the screening message to thousands of Americans.

As professional education, Dialogue for Action provides an innovative, interactive forum for diverse stakeholders in colorectal cancer screening to share perspectives and explore common ground. As William Isaacs wrote, “At the core of Dialogue is a *conversation with a center, not sides*. It is a way of taking the energy of differences and channeling it toward something new. It lifts us out of polarization and into a sense of common interest, and is a means for accessing the intelligence and power of groups of people.”¹

The incredible, inflatable, interactive Super Colon tours the United States in March, bringing Americans the message that “Colorectal cancer is preventable, treatable, and beatable!”

A simple forum for exchange, Dialogue for Action is active on both the national and state levels. Its gatherings grow collaborations between people and organizations involved in primary care, oncology, gastroenterology, nursing, health policy, education, research, administration, advocacy, and government.

On the national level, Dialogue for Action has offered innovative concepts like Tipping Point and Systems Thinking, and interactive formats such as the World Café to encourage “thinking outside the box.” Each Dialogue for Action has produced an outcome: a policy paper, a digest of innovative programs, or easy-to-use Web-based planning tools.

Since 2002, CRPF has worked with state planning groups to convene state-level Dialogues. This successful initiative has

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Since 1985, CRPF has provided more than \$74 million in support of its programs in research, education, and community outreach. For more information about NCCRCAM, Dialogue for Action, and other CRPF activities, go to www.preventcancer.org or contact Karen J. Peterson, PhD, Vice President for Programs, CRPF, 1600 Duke Street, Suite 500, Alexandria, VA 22314; phone, 703-837-3680; fax, 703-836-4413; e-mail, karen.peterson@preventcancer.org.

made a difference in Utah, West Virginia, Arizona (with New Mexico), Michigan, Colorado, Nebraska, Ohio, and Maryland. California, Massachusetts, New Jersey, New York, West Virginia, and Virginia will be convening Dialogues this year. A \$1.5 million, 5-year cooperative agreement with the Centers for Disease Control and Prevention (Atlanta, Georgia) contributes to this effort.

Dialogue for Action is driving progress:

- As a result of its ongoing conference series, West Virginia has community pharmacists who educate people about screening. In small towns, often the most accessible health care professional is the local pharmacist.
- In Colorado, the 2004 Dialogue for Action jumpstarted the development of screening objectives for the updated

state cancer plan. When legislation made tobacco restitution money available for health programs, colorectal cancer screening advocates were ready with a plan that received funding.

Inroads are being made nationwide, and Americans are talking about colorectal cancer, many for the first time—proof of the effectiveness of the “silo-busting” collaborative spirit of partnership.

Karen J. Peterson, PhD, is vice president for programs, and Emily Turk is a marketing and communications consultant for the Cancer Research and Prevention Foundation in Alexandria, Virginia. Visit Cancer Research and Prevention online at www.preventcancer.org.

Reference

1. Isaacs W: Dialogue and the Art of Thinking Together. New York, NY, Currency, 1999