Ro Jen Aelõñ
Ko Ilo Pacific
Im Nañinmij
In Cancer Ilo
Mõjñal

Paper in rar maroñ in je jen Grant Number U01CA114591
eo im ej jen National Cancer Institute’s Center to Reduce
Cancer to Reduce Health Disparities im jeje ak koppan paper
in ej itok jen ri jeje ro an paper in im ejab melelen bwe nan ko
ie rej an Natinal Cancer Institute’s Center to Reduce Health
Care Disparities.
Introduction

The “Pacific Islanders & Colorectal Cancer” flipchart was developed and designed by a group of health educators, professionals and leaders in the Pacific Islander community as a culturally appropriate outreach and education tool. Its purpose is to increase awareness of the impact of colorectal cancer (CRC) on the Pacific Islander community, the various risk factors associated with CRC, CRC prevention information, and CRC screening tests available. When used with the accompanying video and bookmark, two key health messages are highlighted: 1) There are ways that Pacific Islanders can prevent CRC, 2) Pacific Islanders need to ask their doctor about the recommended screening tests for CRC, and 3) to get screened for yourself and your family. Community health educators, outreach workers and community organizations can utilize these flipcharts with small groups of Pacific Islanders at workshops, information sessions, and other Pacific Islander health outreach activities to raise awareness about CRC in the Pacific Islander community. The flipchart is for adult Pacific Islander men and women 50 years of age or older.

This facilitation guide provides learning objectives and talking points for each flipchart page.

Thank you!

INTRODUCTION (page 2)

OBJECTIVE: To share and discuss participants’ beliefs about colorectal cancer.
Konañin ke kar roñ kin nañinmij in cancer ilo mõjñal?
OBJECTIVE: To convey how important CRC is for Pacific Islanders.

TALKING POINTS:

• Colorectal cancer is among the most common cancers among Guamanian/Chamorro and Tongan women, Marshallese and Samoan men.

• Native Hawaiian males have the highest colon cancer mortality rates compared to the different race/ethnicities in Hawaii.

• Most Samoans and other Pacific Islanders are diagnosed with colorectal cancer at later stages in California; Hawaiians have the highest rate of colorectal cancer in Stage I and II and Samoans have the highest rates for Stages III and IV.
Nañinmij in cancer ilo mõjñal emakijkij an walok iben armij ro jen aelõñ in Pacific.
UNDERSTANDING COLORECTAL CANCER (page 4)

OBJECTIVE: To provide a general overview and definitions associated with CRC.

TALKING POINTS:

• The colon and rectum are parts of the digestive system. They form a long, muscular tube called the large intestine (also called the large bowel). The colon is the first 4 to 5 feet of the large intestine, and the rectum is the last several inches.

• Cancer begins in cells. Normally, cells grow and divide to form new cells as the body needs them. When cells grow old, they die, and new cells take their place. Sometimes, this process goes wrong. New cells form when the body does not need them, and old cells do not die when they should. These extra cells can form a mass of tissue called a growth or tumor.

• Benign tumors are rarely life-threatening and can be removed. Since they do not invade the tissues around them and usually do not grow back, cells from benign tumors do not spread to other parts of the body.

• Malignant tumors are generally more serious than benign tumors and may be life-threatening. They often can be removed but sometimes grow back and invade nearby tissues and organs.

• Cancer cells can break away from a malignant tumor and spread to other parts of the body. Cancer cells spread by entering the bloodstream or the lymphatic system. The cancer cells form new tumors. The spread of cancer is called metastasis.
Kemlele Ko Kin Nañinmij
In Cancer Ilo Mőjňal

COLON
Ijo ilo mőjňal eo ekilep im ej 4-5 ne aitokan jen tu lal tata in mőjňal ne am.

RECTUM
Ijo ilo tul lal tata in mőjňal ne am im ebake jikin bwidej (bijök) ne am.

CANCER
Kiij (cell) eo ej eddöök ilo enbwinim im ejelok kein bōbrae an eddöök lok.

COLORECTAL CANCER
Nañinmij in cancer ilo mőjňal (Colorectal Cancer), ijo ej walok ie moktata ej ilo ijo im ej 4-5 ne aitokan jen lal tata (colon) in mőjňal ne am, ak ijo im ebake jikin bwidej (rectum) ne am.

Benign tumors
Põr (tumors) ko im rej na etair Benign tumors, rejab cancer.

Malignant tumors
Põr (tumors) ko im rej na etair Malingant tumors, rej cancer.
OBJECTIVE: To highlight the various risk factors associated with CRC.

TALKING POINTS:

• A risk factor is something that increases your change of getting the disease. These are some of the risk factors associated with colorectal cancer among all individuals.

• Colorectal cancer is more likely to occur as people get older.

• Colorectal Polyps are common in people over age 50.

• Close relatives (parents, brothers, sisters, or children) of a person with a history of colorectal cancer are somewhat more likely to develop this disease themselves, especially if the relative had the cancer at a young age. If many close relatives have a history of colorectal cancer, the risk is even greater.

• A person who has already had colorectal cancer may develop colorectal cancer a second time. Also, women with a history of cancer of the ovary, uterus (endometrium), or breast are at a somewhat higher risk of developing colorectal cancer.

• Changes in certain genes increase the risk of colorectal cancer.

• A person who has had Crohn’s disease or another condition that causes inflammation of the colon is at risk.

• Studies suggest that diets high in fat (especially animal fat) and low in calcium, folate, and fiber may increase the risk of colorectal cancer. Also, some studies suggest that people who eat a diet very low in fruits and vegetables may have a higher risk of colorectal cancer.

• A person who smokes cigarettes may be at increased risk of developing polyps and colorectal cancer.
Men Ko Rej Kõman  
Bwe En Bidodo Am Bõk  
Nañinmij In Cancer  
ilo Mõjñal

- Ritto lok jen 50 iiõ dettam
- Põr ak ebbõj ko rej eddõk ilo mõjñal ne am
- Elañe ear wór ilo nukun eo am im ear wór cancer in mõjñal ibeir
- Elañe ear bar wór cancer ilo enbwinim mokta lok
- Elañe elõñ oktak ak einjuôn ko ilo kiij (genes) ko im rej kõman bwe kwon bôdañe ro ilo nukin eo am
- Ebbõj ak kurere ilo ijo im ej kalbubuik mõjñal (colon or rectum) ne am
- Elañe elap am mõña kirij ko jen menin mour ko
- Elañe kwoj ri kõbatat
**SYMPTOMS** (page 6)

**OBJECTIVE:** To highlight the various symptoms associated with CRC.

**TALKING POINTS:**

- Most often, these symptoms are not due to cancer. Other health problems can cause the same symptoms.
- Anyone with these symptoms should see a doctor to be diagnosed and treated as early as possible.
- Usually, early cancer does not cause pain. It is important not to wait to feel pain before seeing a doctor.
- Sometimes CRC can be present even without noticeable symptoms, so please ask your doctor about the appropriate screening tests that you might need.
Kõkalle Ko Im Renaj Kõman
Bwe Kwon Jelã Ke Ewõr
Nañinmij In Cancer Ilo
Mõjñal Ne Am

• Ilok lojiõm im wõtõdtõd ak bin lojiõm
• Elõõ bõtõktõk (elukkun birõró ak ekilmir/kilmej)
ilo kibwe eo kibwem
• Jekjekin kibwe eo kibwem eaikdrik lok im ejab
einwõt kar mokta
• Eakeke ak emõtak lojiem, ak einwõt ñe eobrak
lojiõm kin mõña
• Kwoj mõ lok ak kwoj jab jelã ta unin am mõ lok
• Emõkmõk aolep ien
• Mõlañlõñ ak emmõj lok
• Komaroñ jab lo ak eñjake aolep kõkalle kein im rej
elajrak ijin
PREVENTION (page 7)

OBJECTIVE: To highlight the primary ways to help prevent CRC.

TALKING POINTS:

• Prevention is an action taken to lower the chance of getting cancer.

• Regular exercise and a healthy diet may be protective factors for some types of cancer. Avoiding risk factors and increasing prevention may lower your risk, but it does not mean that you will not get cancer.

• Colorectal cancer can be prevented 9 out of 10 times through early detection with proper screening.
Kilen Bõbrae Nañinmij In

Jet ro im rej ekatak kin nañinmij in rej ba bwe komaroñ bõbrae an cancer eddök ilo mójñal ne am elañe konaj kõmaní men kein:

• Kõlablok am exercise ak mõmakinene

• Mõña men ko leen wôjke ak vegetable ko (Ma, leraj, Cabbage, Mango, Keinabu)

• Kadik lok am drak dren in kadõk

• Jab kôbatat
OBJECTIVE: To define and describe the main CRC screening guidelines.

TALKING POINTS:

• Treatment for colorectal cancer is more likely to be effective when the disease is found early.

• Screening tests help your doctor find polyps or cancer before you have symptoms. Finding and removing polyps may prevent colorectal cancer.

• Fecal occult blood test, or FOBT- a test for hidden blood in a sample of stool (feces) you have already passed.

• The FOBT can detect tiny amounts of blood in your stool.

• If this test detects blood, other tests are needed to find the source of the blood. Benign conditions (such as hemorrhoid, where swollen blood vessels around the anus cause itching, pain, and sometimes bleeding) also can cause blood in your stool.
Wañen Kakilene Nañinmij In

Fecal occult blood test (FOBT)
Aolep iiō, jino ilo ien eo ŋe 50 iio dettam. Kakōlkōl in rej lale elañe elōŋ bōtōktōk ilo bwidej ak kibwe eo kibwem. Kwoj drod jidik mōttan kibwe eo ilo juôn test card eo im kōrole lok ŋōn iben doctor eo am bwe en etale ewôr ke jorrān ilo mōjnal ne am.
SCREENING TESTS (page 9)

TALKING POINTS:

• **Double contrast barium enema** - patient is given an enema (the injection of a fluid into the rectum to cause a bowel movement) with a barium solution, and air is pumped into your rectum.

• Several x-ray pictures are taken of your colon and rectum.

• The barium and air help your colon and rectum show up on the pictures.

• Polyps or tumors may show up.

• **Flexible sigmoidoscopy** - a doctor checks inside your rectum and the lower part of the colon with a lighted tube called a sigmoidoscope

• If polyps are found, your doctor removes them. The procedure to remove polyps is called a polypectomy.

• **Colonoscopy** - your doctor examines inside the rectum and entire colon using a long, lighted tube called a colonoscope.

• Your doctor removes polyps that may be found.
Double-contrast barium enema
Kakôlkôl in ej kôman aolep 5 iiô, ijino ilo ien eo 50 iiô drettam. Rej pijaiki (x-ray) môjñal ne am.

Sigmoidoscopy:
Kakôlkôl in ej kôman aolep 5 iiô, ijino ilo ien eo ej 50 iiô drettam. Rej kakilene jidrik in ijene im ej 4-5 ne aitokan jen lal tata in môjñal (colon) ne am.

Colonoscopy:
Kakôlkôl in ej kôman aolep 10 iiô, ijino ilo ien eo ej 50 iiô drettam. Rej kalilene aolepen ijene im ej 4-5 ne aitokan jen tu lal tata in môjñal (colon) ne am.
OBJECTIVE: To encourage individuals to ask their doctors about CRC screening.

TALKING POINTS:

• People should talk with their health care provider about when to begin screening for colorectal cancer, what tests to have, the benefits and risks of each test, and how often to schedule appointments.

• Insurance coverage varies and individuals should check with their health insurance provider to determine their colorectal cancer screening benefits.

• Additional information about colorectal cancer screening is available from the NCI’s Web site at http://www.cancer.gov/clinicaltrials/ on the Internet, or by calling the Cancer Information Service at 1–800–4–CANCER (1–800–422–6237).
Kajitõk Iben Doctor Eo Am!

Ewõr am maroñ in kajitõk iben doctor eo am kajitõk kein ikijen kakõlkõl in mõjñal:

• Kakõlkõl ta eo emõn ŋön ña? Etke?

• Jete wõnen kakõlkõl rot in? Insurance eo aõ enaj ke kõlläiki wõnen kakõlkõl rot in?

• Emtak ke kain kakõlkõl rot in?

• Ewi to in aõ naj jelã walok in tokjen kakõlkõl in aõ?
OTHER RESOURCES (page 11)

OBJECTIVE: To provide other important resources related to CRC.

TALKING POINTS:

If you do not have insurance, please refer to the lists of resources handout. This handout is a list of clinics that offer colorectal cancer screening for individuals without insurance. This list was gathered from the following:

- Coalition of Orange County Community Clinics Directory
- Health Centers- Orange County (www.findahealthcenter.hrsa.gov)
- Health Centers- Los Angeles County (www.findahealthcenter.hrsa.gov)
- Health Centers- San Diego County (www.findahealthcenter.hrsa.gov)

- Community health centers provide health care regardless of your ability to pay and even if you have no health insurance. Phone the nearest community health center for more information or to make an appointment.

- State medical assistance programs help people with incomes under certain limits pay for prescription medications, visits to the doctor, hospitalizations, and insurance premiums. Each program is different and not all States have medical assistance programs. Contact your local department of social services or a local hospital’s social worker to see if your State has a program and if you might be eligible to apply.
Ijoko Jet Im Komaroñ Bar
Bõk Jibañ Jeni

National Cancer Institute Helpline
www.cancer.gov/help
1-800-4-CANCER

More information on Colorectal Cancer (National Cancer Institute)
www.cancer.gov/cancertopics/types/colon-and-rectal

“Cancer Risk: Understanding the Puzzle” (National Cancer Institute)
http://understandingrisk.cancer.gov/

American Cancer Society
www.cancer.org
1-800-ACS-2345
Weaving an Islander Network for Cancer Awareness Research and Training
http://wincart.fullerton.edu

‘Ainahau O Kaleponi Civic Club
Ainahau O Kaleponi
12534 Valley View St. #343
Garden Grove, Ca 92845
www.aokhcc.org

Guam Communications Network (GCN)
4201 Long Beach Blvd, Suite 218
Long Beach, CA 90807
Telephone: (562) 989-5690
Fax: (562) 989-5694
www.guamcomnet.org

Orange County Asian and Pacific Islander Community Alliance (OCAPICA)
12900 Garden Grove Blvd., Suite 214A
Garden Grove, Ca 92843
Telephone: (714) 636-9095
www.ocapica.org

Pacific Islander Health Partnership (PIHP)
9351 Tidewater Circle
Huntington Beach, CA 92646
Telephone/Fax: (714) 968-1785
www.pihp.org

Samoan National Nurses Association (SNNA)
22010 S. Wilmington Ave. Suite 301
Carson, CA 90745
Telephone: (310) 952-1115
www.snna.org

Sons and Daughters of Guam Club
PO Box 740067
San Diego, CA 92174-0067
Telephone: 760-480-9732

Tongan Community Service Center/Special Service for Groups (TCSC/SSG)
14112 S. Kingsley Drive
Gardena, CA 90249
Telephone: (310) 327-9650
www.ssgmain.org/Tong_GIS.pdf

Union of Pan Asian Communities (UPAC)
1031 25th Street
San Diego, CA 92102
Telephone: (619) 232-6454
www.upacsd.com

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print e paper in.

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