



The goal of the **WINCART Community Network Program (CNP): Weaving an Islander Network for Cancer Awareness, Research and Training** at California State University¹, Fullerton is to reduce preventable cancer incidence and mortality among five Pacific Islander communities (Chamorros, Marshallese, Native Hawaiians, Samoans, and Tongans) in Southern California. WINCART aims to: (1) identify multilevel barriers to cancer control among Pacific Islanders; (2) improve access to and utilization of existing cancer prevention and control services for these communities; (3) conduct community-based participatory research; (4) increase the number of Pacific Islander researchers through training, mentorship, and research projects; (5) sustain community-based education, training, and research activity via enhanced government and organizational collaborations; and (6) disseminate research to aid in the reduction of health disparities among Pacific Islander communities. Research activities will focus on obesity, tobacco, cancer screening, survivorship, and recruitment of Pacific Islanders into clinical trials. The Network will work with the Cancer Information Service to develop culturally and linguistically appropriate educational materials.



Project Activity: A Community-Centered Approach to Developing and Pilot-Testing a Colorectal Cancer Education Campaign for Pacific Islanders in California

Project Purpose: A partnership of five Pacific Islander communities in Southern California: Chamorro, Marshallese, Native Hawaiian, Samoan, and Tongan, and members of the WINCART scientific advisory board collaborated in designing a colorectal cancer (CRC) awareness and prevention campaign. Weaving an Islander Network in Cancer Knowledge Attitudes, Beliefs and Behaviors (WINCKABB), was formed under the support and direction of WINCART (Weaving an Islander Network in Cancer Awareness, Research and Training, grant number CA114591-01), one of 25 Community Network Programs funded by the National Cancer Institute's Center to Reduce Cancer Health Disparities. Through a community participatory approach as well as various educational activities, WINCKABB aims to increase CRC knowledge and awareness in order to promote dialog among Pacific Islander community members, dispel myths and address taboos about cancer, increase patient-initiated conversations with health providers regarding CRC screenings, and ultimately encourage early participation in CRC screenings.



Rationale: Limited cancer epidemiology data for the Pacific Islander populations suggest that CRC is a prominent cancer for both sexes. A study of Samoans and Hawaiians living in California and Hawai'i, using data from the Los Angeles County/University of Southern California Cancer Surveillance Program (1972-1989) and the Hawai'i tumor registry (1981-1990), found that cancer of the rectum was among the top prevalent cancer sites for Hawaiian and Samoan men and women. Another study of residents of Guam using cancer mortality data collected by the Guam Cancer Registry, found that age-adjusted cancer mortality rates, including colorectal cancer, for Chamorros, the indigenous peoples of Guam, was more than 25% higher than the US rate. Although good informational materials on CRC exist, it is not as affective with many Pacific Islander communities. The images, messages and underlying values that provide incentives for cancer screening participation do not resonate with Pacific Islander populations. WINCKABB CRC campaign fills this gap in education and outreach by taking the appropriate steps to culturally tailor cancer information.



Implementation: The formation of WINCKABB could only be achieved through the promotion of community ownership and community capacity by integrating community input throughout the development of educational campaign. A WINCKABB work group - consisting of 5 community partners representing the Native Hawaiian, Samoan, Chamorro, and Tongan communities, and WINCART staff- was assembled and charged to: 1) recommend appropriate mechanisms to outreach and educate community members on CRC 2) advise in the development of cancer education materials, 3) advise in the development of the survey questionnaire and method of administration, and 4) update WINCART Community Advisory Board members on progress and request feedback.

Results: The educational materials developed (flipchart and bookmark) are being pre-tested in the five respective Pacific Islander communities and will be printed prior to campaign launch in the summer 2008.

Perhaps most notable and meaningful to the community members thus far was the development and creation of a public service announcement (PSA)/video. In addition to developing educational materials, WINCKABB also spearheaded the development of a PSA/video, in which indigenous Pacific Islander community advocates, health educators, health professionals, and cancer survivors gathered together to share stories and thoughts on cancer and health as it relates to the Pacific Islander culture, values, and beliefs. These individuals and a video production crew gathered at a park in Orange County on February 13, 2008 to shoot video interviews of indigenous community members answering questions such as: “what does it mean to you to be a Pacific Islander?”, “what comes to mind when you hear the word ‘cancer’?”, “Have you gotten screened for cancer in the past? If so, why or why not?”. Question prompts were more directed toward health practitioners (“What are the benefits of early cancer detection?”, “when and where should a person get screened for colorectal cancer?”) and cancer survivors (“what would you like to tell individuals in your community about getting screened for cancer?”).



This event was groundbreaking in our WINCKABB campaign as it was the first community based endeavor of its kind in the Pacific Islander community (i.e., creating a library of video footage representing diverse Pacific Islander individuals sharing their thoughts and feelings about cancer, culture, survivorship, etc). Furthermore, this event was the quintessential representation of key values and beliefs in the Pacific Islander community (intergenerational values, community cohesiveness, selflessness). Community members quickly cleared out their schedules and made the event a ‘family affair’, bringing friends and family members to share and support the experience. Pacific Islander health professionals did not hesitate to make themselves available for this event.

There was an overwhelmingly positive response to this event; community members were deeply impacted by this event. All participants, including the production crew, expressed a deep gratitude and contentment with the outcome of the event. A few members of the production crew expressed their own personal desire to get screened as a result of hearing stories and testimonies from our community members. Currently, WINCKABB is in the process of developing and editing the PSA/video. Once completed, this video will be reproduced and disseminated at many different venues—workshops, conferences, individuals, and community events.



Lessons Learned: The development of CRC educational materials highlighted the importance of using peripheral tailoring strategies, such as images of cultural icons (e.g., pandanus weaved mats, tapa cloths and palm trees), incorporating faces from targeted communities, and the use of vibrant colors and island landscapes in the educational materials. The video shoot day highlighted the importance of using different multimedia to communicate a key health message in a culturally appropriate way. “Talk story” is a unique attribute and deeply rooted in the oral tradition of Pacific Islander generations. Talk story is still used as a method to relay important

messages and stories within the Pacific Islander communities. Thus, this video is a vital supplement to the educational print materials as it includes indigenous Pacific Islanders sharing personal testimonies and important messages about cancer, health, and well being.

Partners: ‘Imi Hale, another one of the 25 Community Network Programs funded by the Center to Reduce Cancer Health Disparities was generous in sharing their insightful experiences, CRC campaign materials, and intervention assessment tools.

Funding: Complementing the support provided by the NCI’s Center to Reduce Cancer Health Disparities (CA114591-01), the California Department of Public Health provided funding to assist offset the costs of developing culturally and linguistically tailored CRC educational materials. These resources facilitated the translation and review of the materials into four different Pacific Island languages, support the in-language focus groups to test the educational materials, and defray the costs of printing the cancer educational flipcharts in 5 different languages.

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