MARCH 2025 WEEK: 4

# **COLORECTAL CANCER AWARENESS MONTH**

# **Weekly Topic Briefer**

#### **DESTIGMATIZING CRC**

While it is important for everyone of appropriate age to get screened for CRC it is also important to remember that not everyone is comfortable with talking about Colorectal Cancer and its related screenings. Social, cultural, religious, and other norms can sometimes make it difficult to talk about cancer or even follow through with recommended cancer screenings. Several common feelings related to CRC can include:

- · Embarrassment of screening
- Fear exam may be painful or prep may be overwhelming
- · Fear of a potential cancer diagnosis
- · Medical mistrust
- Unwillingness to talk about poop
- · Making it a joke and unable to take it seriously
- · Shame related to personal nature of screening

Destigmatizing CRC and conversations surrounding screening is critical in helping people understand the importance of regular and timely CRC screening.



### OVERCOMING FREAR AND EMBARASSMENT ABOUT CRC AND SCREENING

#### When Health is Interconnected with Family, Community, and Culture:

- Take charge of your own health in order to best show up for yourself, your community, and your family.
- **Keeping up with cancer screenings** can help you live a long healthy life with your family in order to pass on culture and values to next generation.
- Being active in taking care of your health helps "show" and not just "tell" how to empower future generations to take care of their own health.
- Know your family history and talk to your relatives about polyps.
  - Sharing information about your family's risk of cancer can be difficult. Practice having this discussion using CDC's virtual human simulation to learn how to talk about cancer risk that may run in your family.
  - Cancer Simulations | CDC

#### **Important Things to Remember:**

- Not everyone can talk to their families. In these situations, it is important to find a trusted confidant, friend, therapist, or religious leader to share your fears and anxieties.
- At home tests can be done privately without having to discuss procedures with family or needing a ride to a colonoscopy.
- · Screening does not equal a cancer diagnosis.
- CRC when identified at an earlier state is easier to treat and has lower mortality rate.
- The test is trusted and safe and there are options for less invasive testing.

MARCH 2025 WEEK: 4

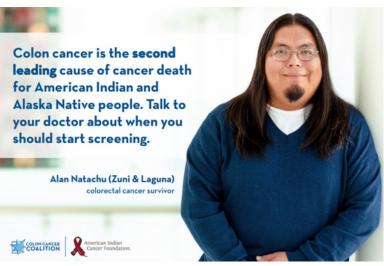
## **CULTURAL AND LINGUSTICALLY DIVERSE MATERIALS**

Certain communities experience disparities in CRC screening, incidence, mortality, and survival. Cancer health disparities are complex an affected by various factors, such as social determinants of health, behavior, biology, genetics, and more. Communication-related issues may play a role in cancer disparities. Health Care providers, community based organizations, local leaders, and others working on outreach should utilize cultural and linguistically diverse materials. Below is a list of some available resources:

- <u>Library Of Educational Materials</u> in many languages including Spanish, French, Arabic, Korean, Somali, Vietnamese and more. Including Brochures, Information Cards/Graphics, and Flyers by Colon Cancer Coalition
- <u>CRC Awareness Materials for LGBT+ Communities by National LGBT Cancer Network</u>
- <u>Cancer Information in many languages including Spanish, French, Chinese, Arabic, Russian, Korean, and more by American Cancer Society</u>
- Colorectal Cancer Communication Resources in Spanish by CDC
- Colorectal Cancer Communication Resources in English by CDC
- Colorectal Cancer Resources from American Indian Cancer Foundation
- Webinar: Colorectal Cancer Screening in American Indian and Alaska Native Communities
- <u>Toolkit for diverse messaging (in English), graphics, social media posts, and communication plans for diverse audiences by GWU Cancer Center</u>







# Other Resources from this Week's Campaign Blast

- The many faeces of colorectal cancer screening embarrassment: preliminary psychometric development and links to screening outcome PubMed
- <u>Unwillingness to participate in colorectal cancer screening: Examining fears,</u>
  attitudes, and medical mistrust in an ethnically diverse sample of adults 50 years
  and older PMC

