# Community Connections



KEEPING OUR COMMUNITIES CONNECTED AND ENGAGED

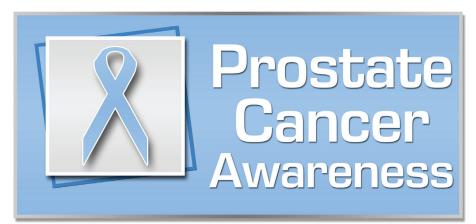
#### From The Director's Desk

Issue 17, September 2021

Fall is quickly approaching, bringing with it a cool breeze along with the wonderful browns and sepia-toned leaves of the changing season. While Autumn 2021 officially begins on Sept. 22, if you are like you me, you will have no objection to ushering in the season just a few weeks early.

September is a significant month for our office as Prostate Cancer Awareness Month. The Office of Community Outreach and Engagement and our partners remain on the front lines when it comes to fighting prostate cancer disparities, particularly among African American men. We are excited this month to share several articles related to prostate cancer awareness, screening and survival.

Sept. 15 through Oct. 15 is also Hispanic Heritage Month. It is during this time that we honor the cultures and contributions of both Hispanic and Latino Americans and



celebrate a heritage rooted in Spain, Mexico, the Caribbean and Central and South America.

Last, but certainly not least, we round out the month with National Women's Health and Fitness Day on Sept. 29. This day is designed to raise awareness of the importance of health and physical activity for women. Let's use this time to remind us to take time to take care of ourselves through exercise and seeking proper health screenings.

The future of our efforts in outreach and engagement is very bright in spite of the challenges, thanks to the contributions from each of you. I remain inspired by our diverse staff of CHAs, Coordinators and partners, not only because of your hard work and commitment, but also because each of you have taken immeasurable challenges head on with a positive can-do attitude.

- Claudia

# O'NEAL COMPREHENSIVE CANCER CENTER

LL43 THE UNIVERSITY OF ALABAMA AT BIRMINGHAM

C O MMU N IT Y
O UTREACH & ENGAGEMENT

- Claudia Hardy Director
- **Joseph D. Bryant** Newsletter Editor

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All men are at risk for prostate cancer, but African-American men have an increased risk for developing prostate cancer over white men and other men of color. Screening and early detection are key to treatment and recovery. (Centers for Disease Control)

### COMMUNITY PROFILE

## PROSTATE CANCER SURVIVORS URGE MEN TO SEEK SCREENING AND ERASE STIGMA SURROUNDING MEN'S HEALTH

Darrell Robinson serves his neighbors in Grenada County, Miss. on multiple levels as a member of the County Board of Supervisors, as a minister, and in his daily job as a grave digger.

From the cemetery he meets with families to pick out burial plots for loved ones. He hears the stories of his neighbors, details about their illnesses and ultimately the final moments.

"Most of the time the families that are affected by cancer have had a long period of suffering," Robinson said. "Grenada is a small community. A lot of times we find out when people are sick. Most of the time with black people it is related to cancer."

Now as a survivor of prostate cancer himself, Robinson is a vocal advocate for early detection and treatment. He was used to talking and listening to people in each of his roles, so adding a conversation about prostate cancer came easily for him.

Robinson, along with other survivors of prostate cancer this month, join with the Office of Community Outreach and Engagement in urging men to seek appropriate screening. Officials have warned that the pandemic may have prevented some patients from undergoing much needed screenings and hindered access to procedures. Health

leaders and advocates urge patients to continue to undergo age-appropriate cancer screenings and reach out to their health care providers regarding options.

"I buried a friend of mine last September, and he had prostate cancer," Robinson said. "He died from it. He caught it too late."

Black men are nearly 80 percent more likely to develop prostate cancer than white men, and are more than twice as likely to die from the disease.

"I tell every Black man that I run into, 'if your daddy had prostate cancer, if somebody in your family had prostate cancer, go ahead and get checked," he said. "The main thing is, as black men, we need to get checked for prostate cancer."

In his case, Robinson initially took a PSA blood test, which came back abnormal. A biopsy later showed stage 1 prostate cancer.

One of his early conversations was with Charles Latham, himself a survivor and a member of the Community Advisory Board at the O'Neal Comprehensive Cancer Center's Office of Community Outreach and Engagement.

Both Latham and Robinson are members of the 100 Black Men of Grenada, a social service group



**Darrell Robinson** 

dedicated to mentoring, education, economic development, and health and wellness.

"One Hundred Black Men did a prostate awareness event one night at one of the local churches, and everything he said in his talk were the same things that my doctor had already told me,"

Robinson recalled. "It was confirmation to me. I said, 'Doc. I'm a Black man with diabetes, high blood pressure and cholesterol problems, so let's go on and remove it."

### MOVING PAST FEAR AND EMBARRASSMENT

Experts advise that men 55 to 69 should speak with their doctor about their risk and symptoms to determine when to screen.

Prostate cancer screening tests include a PSA blood test, which measures the level of prostate specific antigen, and a digital rectal exam, where a doctor checks for swelling and inflammation.

"I probably know 25 men who have had prostate cancer," he said. "If you want to live you've got to go through some examinations. I don't want to have a colonoscopy either, but I have to have it done every few years. Do whatever you've got to do to live."

### TESTING THAT COULD SAVE YOUR LIFE

Terry Bush of Walker County, was diligent about maintaining his prostate cancer screenings. He knew his family history of prostate cancer, beginning

#### **Community Connections**

#### **COMMUNITY PROFILE**

#### **CONTINUED FROM PAGE 2**



Terry Bush

with his grandfather and extending to two older brothers. He recalls insisting on the test at one doctor's visit in 2017.

"There were no symptoms or anything," Bush said. "It was just that voice inside me that said 'go get checked.""

The test concluded that Bush had prostate cancer. "It went straight through me. I was like a zombie," he said. "I was in another world."

Bush chose surgery to remove his prostate.
Admittedly, the recovery was a hard one, he said. "I know for a fact that if a person doesn't believe in God or believe in prayer, they will after that," he said. "I wasn't strong, but I kept going."

Bush, 63, is now a Community Heath Advisor in Walker County where he helped form a support group for prostate cancer patients, survivors and their families.

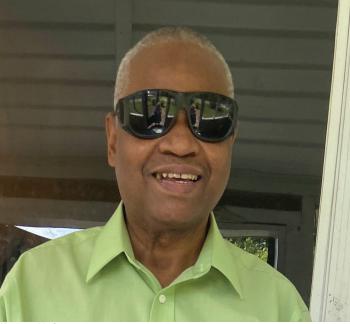
"I realized that I was put here to help people, and that really helped me knowing that I could make a difference in somebody's life," Bush said. "If I can be there to hold somebody's hand, to talk to somebody or give them some type of comfort, I will do it." Bush urges men to seek screening. Doing so saved his life.

"I look at my scars today and say that I am proud of those scars because I'm alive today," he said.

### FAITH AND ACTION IN WALKER COUNTY, ALABAMA

Jimmy Holston of Jasper, Ala. credits both his faith and regular screenings for saving his life.

Holston, 67, was diagnosed with prostate cancer about 16 years



Jimmy Holston

ago. Like Robinson, Holston's PSA test was the first step in detecting abnormal levels.

Catching it early allowed for greater treatment options, Holston said.

"Men need to get tested, just in case they are diagnosed," he advised. "If they can catch it at an early stage, then more can be done with it. It's not that I wanted to go, but I did want to take care of myself."

Holston has friends who were also diagnosed early and successfully treated. Men must take responsibility for their own health, and screenings are one important way, he said.

"They've got to love themselves and they've got to take care of themselves," Holston said. His advice is simple, follow the guidelines and get screened.

"I am thankful, so I don't mind sharing," Holston said. "I thank God each and every day. God was able to bless me in finding out about it early. The rest was up to me as far as having it seen about."

### LIVING AND ENJOYING LIFE AFTER CANCER

Robinson said men often fear the testing for prostate cancer, then fear the treatment, which could impact their intimate life.

He stressed that physical issues can be treated, but death is permanent.

"If you're alive, you can spend time with your wife, your girlfriend or your children, but when they take you to the cemetery, then somebody has to come visit you," he said. "There is treatment, and you can live after cancer. It's not the end of the world. Catch it in time. Go get checked."



### THE RESEARCH CORNER

# STRENGTHENING THE MESSAGE: O'NEAL CANCER CENTER FINALIZING YEAR-LONG STUDY TO INCREASE PROSTATE CANCER SCREENING AMONG BLACK MEN

The statistics regarding the disparity in prostate cancer rates among African American men are stark.

Black men are more likely to develop prostate cancer at younger ages and die of the disease at a rate 2.5 times higher than that of their white counterparts. Black males are also 44 percent to 75 percent more likely to present with advanced-stage prostate cancer.

Prostate cancer screening is key for early detection, early treatment and improved survival. However, prostate cancer screening rates among Black men are only about 37 percent.

In response to the clear need for intervention, the Office of Community Outreach and Engagement partnered with the Mike Slive Foundation for Prostate Cancer Research.

The study "Developing Culturally-Tailored Interventions to Increase Prostate Cancer Screening among African-American Men" is designed to better understand ways to increase screening rates that could save lives.

"While there are likely many factors that contribute to the high disparity, one of the issues that we want to ensure

is that African American men receive important information regarding age appropriate screening and checkups to reduce that devastating rate," said Monica Baskin, Ph.D., Associate Director for Community Outreach and Engagement at the O'Neal Comprehensive Cancer Center. "The Cancer Center has a longstanding commitment to research health disparities. The investment by the Mike Slive Foundation has enabled us to advance even further in our mission and ensure that all men in our state receive the best care possible."

Results will be used to increase knowledge and develop culturally appropriate ways to increase prostate cancer screening rates among African American men between the ages of 35 and 70.

OCOE conducted a series of surveys and interviews of 85 Black men in Jefferson, Butler, Macon and Dallas Counties.

The selection of counties gave researchers a mix of both rural and urban populations, with Jefferson County representing a large urban center.

"We do have a good representation. For this kind of preliminary pilot study, it was a good



Dr. Meghan Tipre

number," said scientist Meghan Tipre, DrPH, who coordinated the study.

Researchers were focused on understanding factors that encourage African American men to get screening for prostate cancer and the things that discouraged them. The study also included a Prostate Cancer Working Group, whose members served as advisors while researchers developed questions and formed strategies to best communicate with audiences.

"The approach that we used was a systematic

process of getting qualitative data from these participants," Tipre explained. "We used the group concept mapping approach to find out what is preventing black men from getting screened for prostate cancer."

A second phase of the study involved telephone interviews with a few selected men and a spouse, partner, friend or close family member to find out what role close family members can play in influencing men to undergo prostate cancer screening.



### THE RESEARCH CORNER

#### **CONTINUED FROM PAGE 4**



Dale Bell

### OVERCOMING PANDEMIC CHALLENGES

The ongoing pandemic brought a unique challenge to researchers and coordinators. The team was forced to transform the program that was initially set to be in-person into a virtual-only initiative.

"There were a lot of challenges with that," Tipre said. "While the majority of our participants had internet access, the coordinators had to consistently go back to them and encourage them to participate. That took some effort, it took some creativity and it took some persistence."

Dale Bell, a coordinator in Dallas County, also

recalled the challenges.

"Some of the guys are not really computer savvy, so it took a lot of corresponding back and forth and walking them through the process," he said. "There were a couple of times where I had to make home visits and just being persistent when it came to the guys."

Bell said establishing trust was essential.

"A topic such as prostate cancer a sensitive subject. Once they felt comfortable with you and saw that you had their best interest at hand, they chimed in really well," Bell said.

The efforts were successful in delivering strong participation and quality

data that was comparable to that of in-person data, Tipre said.

"We found that this virtual platform could work," she said.

Tipre said there were unintended benefits to the virtual model as well. For example, participants were able to log on when it was convenient for them. They also had the anonymity to answer questions outside the traditional focus-group setting.

#### **FINDING ANSWERS**

The project resulted in a cluster map consisting of 41 unique statements and eight themes that answered the question: "What are some of the issues, problems or concerns that African American men may have that prevent them from seeking prostate cancer screening?"

The themes are: Fear of the unknown, concern about showing weakness, dislike of the digital rectal exam, worry about the loss of masculinity, lack of knowledge about screening, low perceived risk about prostate cancer, denial/embarrassment, and worries about insurance/cost.

The men were also asked to suggest solutions.
Those include: Offering alternative methods to the digital rectal examination, early education, offering clear and direct messages,



open discussion to break the taboo around digital rectal exams, combining prostate cancer information with other health messaging, identifying relatable role models as messengers and involving family members in the discussion.

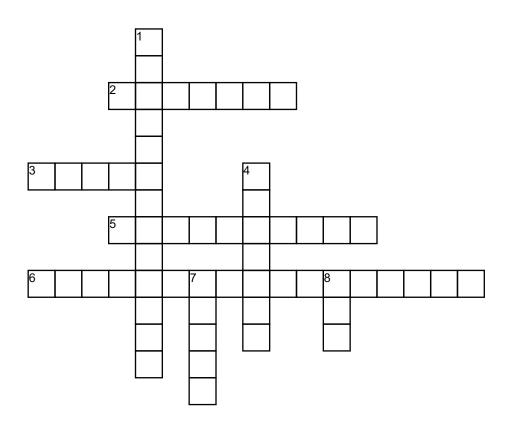
The feedback also resulted in the creation of a slogan: "Don't wait until it's too late. Check your prostate."

The team is further analyzing the data. Already, Tipre said the results indicate the need to make prostate cancer discussions part of an overall conversation for complete health.

Tipre said the O'Neal Comprehensive Cancer Center will also continue to work with the Mike Slive Foundation and other community partners to promote awareness and connect men to screening and care.

"This study is going to inform the next steps for intervention and what is going to be the approach to getting the messages out regarding prostate cancer," she said.

### **Prostate Cancer Awareness**



#### Across Down

- 2. Tobacco use and \_\_\_\_\_ can increase the risk factor for cancer 1. Having a brother, father or other relative with the same condition, or a and other chronic diseases.4. A blood test used for prostate cancer screening
- 3. Men of average risk should begin prostate screening at age
- 7. Early detection saves
- **5.** Any characteristic, substance, or behavior which can affect a person's **8.** The risk for prostate cancer increases with chances of getting a disease
- 6. DRE is a type of prostate exam which stands for



## **COE** and Partnerships

**Working Together to Address Cancer Disparities** 

Join the Office of Community Outreach & Engagement as we celebrate our 25th anniversary. We will demonstrate effective partnerships with local, state, and national organizations. Our panelists will showcase ways to provide effective education outreach and screening programs.

MONDAY **SEPT. 27, 2021** 5:30 PM

JOIN VIA CONFERENCE CALL OR ZOOM

**REGISTER**: GO.UAB.EDU/COE-PARTNERSHIPS





# NEW PARTNERSHIP SEEKS TO EXPAND PROSTATE CANCER SCREENINGS AND AWARENESS IN ALABAMA



Alabama Gov. Kay Ivey recently signed a proclamation recognizing September as Prostate Cancer Awareness Month. Left to Right: Emily Capilouto, Mike Slive Foundation Director of Education & Outreach; Dr. Thomas Moody, President of the Urology Health Foundation; Gov. Ivey; Dr. Michael Bivins, President of Urology Centers of Alabama; and Anna Slive Harwood, Executive Director of the Mike Slive Foundation.

More men in Alabama will gain greater access to prostate cancer screening and enhanced information through a new partnership between the Office of Community Outreach and Engagement, the Urology Health Foundation and the Mike Slive Foundation.

The three organizations are joining in a pilot program to enhance mobile prostate cancer screenings in 26 Alabama counties. The 18-monthlong initiative is expected

to begin this month. Each organization is already working to address cancer and cancer disparities, specifically prostate cancer.

"We are incredibly proud of the number of men and their families who have been positively impacted by the work that is already being done," said Claudia Hardy, OCOE Program Director. "This partnership brings together experts from various sectors to magnify

our shared mission of providing prostate cancer education and screening and eliminating barriers that cause disparities. This new team gives us strong traction in reaching our goals."

Under the collaboration, the Urology Health Foundation, which provides prostate cancer screenings to men free of charge, will work with OCOE in providing additional educational services. The Mike Slive

Foundation brought the two organizations together after they both approached the foundation separately for collaboration and support.

OCOE already has community health advisors located in most of the areas of the Black Belt, in addition to Madison County, where the Urology Health Foundation currently operates.

"We thought we would get together and see how

### **Partnership Spotlight**

#### **CONTINUED FROM PAGE 8**



Claudia Hardy

we could enhance each other's purpose and cross pollinate, sort of speak," said Thomas E. Moody, M.D., Urology Health Foundation President. "We would like to be supportive of the Mike Slive efforts to raise money and continue to raise awareness. Another one of the synergies where we can work together is education. UAB has a huge reach, and we can work together in education and awareness."

Emily Capilouto,
Director of Education &
Outreach at the Mike

Slive Foundation, echoed Moody, calling the new initiative an ideal partnership where each organization shares a commitment to addressing disparities by expanding prostate cancer screenings.

"In addition to raising money to fund pilot research grants and raising awareness about prostate cancer by messaging to men of all ages and their families, I believe one the Foundation's greatest strengths is our ability to utilize our relationships across a variety of

sectors in the community in order to bring together the strongest possible team we can in the fight against prostate cancer," Capilouto said. "We can work together to make a significant impact in the fight against prostate cancer for communities most disproportionally affected by this disease in our state."

Moody founded the Urology Health Foundation in 2003 as a non-profit organization dedicated to educating medical professionals about new techniques and procedures in the field of urology.

The mission was expanded to include patient education and screening for urological diseases including prostate cancer, free of charge.

Moody said the aim is to "bring the doctor to the patient" and offer free prostate cancer screenings. If an abnormality is found and the patient is unable to afford treatment, then the foundation assists in helping to find treatment at no cost to the patient.

The foundation since 2007 has provided more than 15,000 visits for prostate cancer screening in 22 different Alabama counties. The screenings take place at the local county health departments. The medical procedure is reimbursed by the Alabama Department of Health.

"We get reimbursed for screening efforts up to \$125,000, but the cost of running our organization is significantly more than that," Moody explained. "The state money is strictly for screening."

In 2007, when his foundation was in its infancy, Alabama had the third highest prostate cancer death rate in the county. Broken down by race, Alabama had the number one prostate cancer death rate for black men.

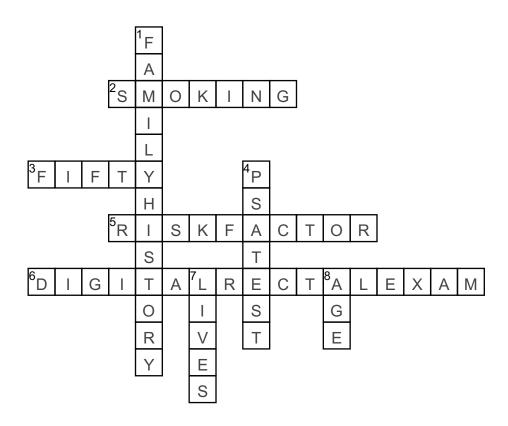
"Not enough African
American men were
getting checked," Moody
said. "It became obvious
that the main problems
were in the Black Belt
areas in our state. The
barriers to screening were
so many and
so complicated."

Moody said he is pleased that the foundation has played a role in improving those dire statistics and bringing more positive outcomes for men in the state.

Now he is excited to see the latest collaboration unfold and the increased public health benefits that could materialize.

"We all have the same goals," Moody said. "We want to help them and they want to help us. It's going to be a work in progress, but the main thing is we are dedicated to being cooperative."

### **Prostate Cancer Awareness**



Across Down

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# SUMMERTIME REMAINS BUSY FOR OUTREACH AND ENGAGEMENT TEAM MEMBERS

**BACK-TO-SCHOOL OUTDOOR BUSINESS EXPO** 





Barbour County Coordinator Jeanette Anglin participated in a back to school outdoor business expo in, Eufaula, Ala. where she presented a display table featuring cancer information and highlighting the services of OCOE.

### DALLAS COUNTY FREEDOM FEST





Dallas County Coordinator Chinwe Okeke was on site during the Dallas County Freedom Fest in Selma, Ala., on Aug. 7. She used the opportunity to present health and cancer awareness material.

**WE HAVE MOVED** 

The Office of Community Outreach and Engagement has moved to a new space. **Our new address is:**1824 6th Avenue South, WTI 240 Birmingham, AL 35294-3300. We are in the same building at the O'Neal Cancer Center, but one floor above the previous office.



Office of Community Outreach & Engagement 1824 6th Avenue South WTI Suite 102 Birmingham, AL 35233



WEDNESDAY **SEPTEMBER 1, 2021** 5:30 PM JEFFREY NIX M.D., FACS

Associate Professor of Urology Director of Robotic Surgery UAB School of Medicine

JOIN VIA ZOOM OR CONFERENCE CALL · REGISTER: GO.UAB.EDU/COE-PROSTATE21

Coming in October

Helpful information and stories of inspiration in efforts to screen, treat and survive breast cancer.