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African American men are disproportionately affected by prostate cancer. In order to positively impact this disease, early interventions that encourage early detection and treatment are essential. The primary purpose of this study is to test an investigator developed community-based intervention that explores the impact of peer-outreach workers on prostate cancer knowledge, perceived benefit and barriers, and overall screening behavior. The target sample for this study will be Black men over age 40 who have never participated in prostate cancer screening. Achievement of this objective will result in an increase in prostate cancer knowledge, an increase in perceived benefit prostate cancer screening and treatment; a decrease in perceived barrier to screening, and an increase in screening among men in the intervention group.

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Introduction

The primary purpose of this study is to test an investigator developed community-based intervention that explores the impact of peer-outreach workers on prostate cancer knowledge, perceived benefit and barriers, and overall screening behavior. The target sample for this study will be Black men over age 40 who have never participated in prostate cancer screening. This intervention will be tested in churches within the Baltimore City area with a large Black male membership. The study will build on prior knowledge of motivators of urban Black men, specifically cancer. These studies showed that faith leaders and community individuals, specifically those who have or have had the disease, are strong motivators of health seeking behaviors for urban Black men. Specific aims for this study are: 1) Establish an infrastructure for the development of faith-based prostate cancer outreach in West Baltimore; 2) identify and train a cadre of outreach workers that will assist with the development of prostate cancer prevention and control initiatives in their church; and 3) evaluate the effects of peer-led prostate cancer initiative on prostate cancer knowledge, perceived benefits and barriers to seeking screening, and participation in prostate cancer screening. This study will use a participatory action research approach. Churches will be randomly assigned to an intervention and control groups. In the intervention group, faith leaders and someone from the church will be recruited and trained in prostate cancer prevention outreach. This individual will be a prostate cancer survivor or someone who has participated in screening. They will then conduct prostate cancer prevention outreach for Black men 40 years and older who have never participated in prostate cancer screening. The control churches will receive outreach traditional outreach from a professional (the study team). Free screening will be offered to men in both groups. In order to accomplish the objective of this study, 200 men (100 per group) will be recruited to participate in the outreach. Using logistic regression, the team will evaluate the effects of this intervention on perceived benefits of and barriers to screening and overall screening behaviors of these men.

The long term benefits of this project is a better understanding of the role of faith communities and peers in motivating men to seek prostate cancer screening. The long term goal is to reduce prostate cancer mortality disparity among Baltimore City Black men through early detection and treatment. This project will also enhance the capacity of individuals and groups to address other diseases within their community and neighborhood. Using outreach workers who are community based is effective and cost efficient.

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The following hypotheses will be tested:

1. Men who are exposed to peer-led intervention will show an increase in prostate cancer knowledge, perceived benefits, and screening activity.
2. Men who are exposed to the peer-led intervention will show a decreased in perceived barriers to screening.

Objectives

Specific aims for this study are:

1. Establish an infrastructure for the development of church-based prostate cancer outreach in churches in Baltimore City.
2. Identify and train a cadre of outreach workers that will assist with the development of prostate cancer prevention and control initiatives in their church.
3. Evaluate the effects of peer-led prostate cancer initiative on prostate cancer knowledge, perceived benefits and barriers to seeking screening, and participation in prostate cancer screening.

Body:

Institutional Review Board approval was obtained on March 16, 2004. Request for human subjects approval was submitted to the Human Subjects Research Review Board (HSRRB) for review. Final approval to recruit human subjects was received on January 10, 2005.

The following tasks have been accomplish to objectives of this study:

Task I. Establish an infrastructure for the development of church-based prostate cancer outreach in churches in Baltimore City.

A communication specialist and educator have been hired to assist with the development of project infrastructure. A subcontract was developed with the Black Educational AIDS Project (BEAP) to assist with the development of community relationships. Faith communities have been randomized, and initial contact has been made with these faith communities. To date, no faith communities have been recruited for this project. The training curriculum has been developed. Training supplies have been ordered. Meeting with prostate cancer outreach specialists has been done. A meeting was held with Dr. Isaac Powell, Urologist, and Dr. Thomas Laviest at Johns Hopkins University. Dr. Plowden continues to collaborate with the prostate cancer demonstration project at Johns Hopkins School of Public Health.

Task II: Identify and train a cadre of outreach workers that will assist with the development of prostate cancer prevention and control initiatives in their church.

Human subjects have not been recruited for this study. Training material have been developed, and supplies needed for the training have been obtained.

Task III. Evaluate the effects of peer-led prostate cancer initiative on prostate cancer knowledge, perceived benefits and barriers to seeking screening, and participation in prostate cancer screening.

Human subjects have not been recruited for this study.

Key Research Accomplishments:

- Local IRB and Army Human Subjects Research Review Board (HSRRB) have been obtained
- Staff have been hired
- Curriculum develop for training of peer workers
- Local faith communities have been randomized and contacted.

Reportable Outcomes:

Approvals have been obtained. Faith communities have been contacted.

Conclusion:

To date, there are not findings to reports for this study. Findings from earlier studies, such as recruitment strategies, have been implemented. Faith communities have responded to the initial contact and have expressed an interested in participating in this study.