

SCREEN TO SAVE

NCI COLORECTAL CANCER OUTREACH & SCREENING INITIATIVE

SCREEN TO SAVE SOCIAL MEDIA TOOLKIT

INTRODUCTION

The National Cancer Institute's (NCI) Center to Reduce Cancer Health Disparities (CRCHD) launched the **Screen to Save (S2S): NCI Colorectal Cancer Outreach and Screening Initiative** on November 3, 2016. This promising initiative aims to increase colorectal cancer (CRC) screening rates among racially and ethnically diverse and rural communities across the nation. Increasing colorectal screening rates in the U.S. is part of the [10 recommendations](#) by the Blue Ribbon Panel for the Cancer MoonshotSM, announced in October 2016.

Through Screen to Save, community health educators (CHEs), funded by the NCI's National Outreach Network (NON) and Partnerships to Advance Cancer Health Equity (PACHE), will work with community, clinical, and academic partners nationwide to conduct education and outreach activities tailored to their communities. The Geographic Management of Cancer Health Disparities Program's (GMAP) Regional Coordinating Directors will also play a key role in assisting the CHEs in identifying and connecting communities with resources in their regions.

CRC is the second leading cause of cancer death in the U.S. Although the disease is primarily found among older adults, racial/ethnic minorities are disproportionately affected by CRC. However, most CRC deaths can be prevented through early screening. NON and PACHE CHEs will work with key community-based organizations and clinical centers at the state, local, and national levels to conduct culturally tailored CRC outreach activities and disseminate CRC information, education, and promote screening tools, such as FIT kits, among racially and ethnically diverse populations.

This toolkit is designed to guide Screen to Save supporters through the process of promoting the importance of CRC screening within your communities via social media. More specifically, the toolkit will provide guidance to help elevate Screen to Save's key messages. If you have questions about implementing this initiative through your social media channels, please contact screentosave@mail.nih.gov.

This digital-promotion toolkit includes:

1. [Key Messages](#)
2. [Screen to Save social media messages to share](#)
3. [Sample tweets](#)
4. [Sample Facebook posts](#)
5. [Sample LinkedIn post](#)
6. [Sample Instagram posts](#)
7. [Sample article](#)
8. [Additional resources](#)

KEY MESSAGES

The Screen to Save initiative will focus on delivering key messages related to CRC incidence, risk factors, prevention, and screening recommendations and options. The messages included below are general to most populations. We encourage you to create your own posts to tailor your messages for your audience to make the content more relatable or culturally appropriate, for example using a different word for stool (e.g., poop, feces, bowel movement).

BASIC INFORMATION & INCIDENCE

- Cancer that begins in the colon or rectum is called colorectal cancer (CRC).
- CRC is the 4th most common type of cancer in men and women in the United States.
- CRC is the 2nd leading cause of cancer death in the U.S. Approximately 135,000 people are diagnosed with CRC each year and about 50,000 die from it.
- In most cases, CRC begins as small growth in the lining of the colon or rectum called polyps. Over time, some of the polyps can develop into cancer.
- Many people with CRC do not experience symptoms in the early stages of the disease. If you have symptoms, they may include:
 - Stomach pain, aches, or cramps that do not go away
 - Blood in the stool (bowel movement)
 - A feeling that your bowel does not empty all the way
 - A change in bowel habits or a change in the consistency of your stools
 - Feeling very tired or weak
 - Unexplained weight loss
- Some racial and ethnic minorities experience a disproportionate burden of colorectal cancer mortality.
- Some racial and ethnic minorities experience a disproportionate burden of cancer health disparities.

RISK FACTORS

- The risk of developing CRC increases with age. CRC is most often found among adults who are over the age of 50.
- CRC risk is higher among people who have a personal or family history of CRC or polyps.
- People who have a history of inflammatory bowel disease, such as Crohn's disease or ulcerative colitis, are at a higher risk to develop CRC.
- Several lifestyle factors may also increase an individual's risk of CRC. These include lack of regular physical activity, being overweight or obese, heavy alcohol consumption, and tobacco use.

PREVENTION

- Screening for CRC helps decrease your chance of dying from the disease.
- CRC screening usually starts at age 50, but talk to your doctor to find out if you should get screened earlier.
- CRC screening can help find the disease at an early stage. When polyps are found early, your doctor can remove them before they turn into cancer.
- Talking about cancer will not cause cancer or bring it into our communities.

- There is more than one way to get screened for CRC:
 - Colonoscopy
 - FOBT/FIT
 - Sigmoidoscopy
- CRC screening is a proven prevention strategy that is currently being adopted by too few people, especially racial and ethnic minorities.

SCREEN TO SAVE SOCIAL MEDIA MESSAGES TO SHARE

Retweet or share messages about Screen to Save from NCI social media:

Twitter

- @NCICRCHD: <https://twitter.com/NCICRCHD>
- @TheNCI: <https://twitter.com/theNCI>
- @NCImcMedia: <https://twitter.com/NCImcMedia>

LinkedIn

- CRCHD: <https://www.linkedin.com/company/nci-center-to-reduce-cancer-health-disparities-crchd->
- NCI: <https://www.linkedin.com/company/national-cancer-institutes-nci>

Facebook: <https://www.facebook.com/cancer.gov>

Instagram: @ncivisualsonline, <https://www.instagram.com/ncivisualsonline/>

Sample hashtags for Twitter or Instagram: #ScreentoSave, #CancerCHE, #getscreened, #ColorectalCancer

SAMPLE TWEETS

The following are sample Twitter messages by audience and topic. Images can be added to enhance the content.

50+ years old:

- If you're 50–75 years old, you should get screened for #ColorectalCancer #ScreentoSave <http://bit.ly/2kxM7vH>
- #DYK, there's more than 1 way to #getscreened for #ColorectalCancer—including at home options? #ScreentoSave <http://bit.ly/2kxM7vH>
- Even if you don't have any symptoms, if you're 50–75 years old, you should #getscreened for #CRC #ScreentoSave <http://bit.ly/2kxM7vH>

Family and friends of those who should be screened:

- Have your parents been screened for #ColorectalCancer? If not, talk to them about screening today. #ScreentoSave <http://bit.ly/2kxM7vH>
- It's ok to talk about cancer. Encourage your loved ones to #getscreened for #ColorectalCancer. <http://bit.ly/2kxM7vH>

Colorectal Cancer Screening:

- #DYK You can get tested for #ColorectalCancer in the comfort of your own home? Find out more here: <http://bit.ly/2gl4I5d>
- Curious to learn more about the FOBT & FIT/iFOBT #ColorectalCancer screening tests? Read about them here: <http://bit.ly/2gl4I5d>
- Colonoscopies find polyps early, before they can develop into #ColorectalCancer. #Getscreened early! #ScreentoSave <http://bit.ly/2gl4I5d>
- Most people #getscreened between 50-75, but talk to your doctor about when you should #getscreened for #ColorectalCancer #ScreentoSave

Population Specific Messaging:

- #ColorectalCancer is the 2nd most commonly diagnosed cancer among Hispanics in the US #ScreentoSave www.cancer.gov/types/colorectal
- El #CancerColorrectal es el 2^{do} cáncer más diagnosticado en los hispanos en los EE.UU. www.cancer.gov/espanol/tipos/colorrectal
- Hispanics are less likely to #getscreened for #ColorectalCancer. #ScreentoSave <http://bit.ly/2kxM7vH>
- Los hispanos son menos probables de hacerse los exámenes para la detección del #CancerColorrectal <http://bit.ly/2ky8VLL>
- African American men & women are the group most likely to develop and die from #ColorectalCancer. #ScreentoSave www.cancer.gov/types/colorectal
- #ColorectalCancer 1 of 5 most common cancers in American Indians & Alaska Natives #ScreentoSave www.cancer.gov/types/colorectal
- New cases & deaths from #ColorectalCancer have decreased in most racial/ethnic groups, but not American Indians & Alaska Natives.
- #ColorectalCancer screening is a proven prevention strategy that is being adopted by too few people, especially racial & ethnic minorities

General, S2S initiative:

- #ScreentoSave CHEs across the US are educating their communities about #ColorectalCancer. #getscreened #cancerCHE <http://go.usa.gov/x9yff>
- #ScreentoSave aims to increase #ColorectalCancer screening rates in racially/ethnically diverse & rural communities <http://go.usa.gov/x9yff>

SAMPLE FACEBOOK POSTS

For 50+ years old:

- Colorectal Cancer is the 4th most common cancer and 2nd leading cause of cancer death in the U.S. Getting screened (getting tested even if you have no symptoms) for colorectal cancer is a proven way to reduce your risk of developing or dying from the disease. You have choices for how you are screened. Learn more at <http://bit.ly/2gl4I5d>.
- Getting screened for colorectal cancer is recommended if you're between the ages of 50-75. Always talk to your healthcare provider about the best age for you to start getting screened. Colorectal cancer screening (testing for cancer even if you have no symptoms) is a proven way to reduce your risk of

developing or dying from the disease. Learn about your screening options and get tested before you have any symptoms. Learn more at <http://bit.ly/2gl4l5d>.

For family and friends of those who should be screened:

- Did you know that colorectal cancer is the 2nd leading cause of death from cancer in the US? We aren't powerless though, getting screened can reduce the risk of death. There is even more than one way to get screened. Encourage your loved ones to learn more about getting screened at <http://bit.ly/2gl4l5d>.

SAMPLE LINKEDIN POST

The National Cancer Institute's (NCI) Center to Reduce Cancer Health Disparities (CRCHD) recently launched Screen to Save (S2S): NCI Colorectal Cancer Outreach and Screening Initiative to increase colorectal cancer screening rates among racially and ethnically diverse and rural communities. As part of this initiative, community health educators will provide culturally-tailored, evidence-based colorectal cancer information and education, and promote screening tools within their communities nationwide. Learn more at <http://go.usa.gov/x9yfU>.

SAMPLE INSTAGRAM POSTS

- Did you know that there is more than one way to get #screened (tested) for #colorectalcancer? Most people between the ages of 50 and 75 should get tested for colorectal cancer, even when you don't have any symptoms. Always talk to your healthcare provider about the right age for you to start getting screened. Learn more about screening and the options you have: <http://bit.ly/2kxM7vH>. #NCI #NIH #colorectalcancer #ScreentoSave #healthdisparities #screening #earlydetection
- NCI's Center to Reduce Cancer Health Disparities (CRCHD) recently launched the Screen to Save (S2S): NCI Colorectal Cancer Outreach and Screening Initiative. This initiative aims to increase #colorectal #cancer #screening rates among racially and ethnically #diverse and #rural communities. You can learn more by cutting and pasting this link: <http://go.usa.gov/x9y77>. #NCI #NIH #ScreentoSave #healthdisparities #earlydetection

SAMPLE ARTICLE

The National Cancer Institute (NCI) Center to Reduce Cancer Health Disparities (CRCHD) launched the **Screen to Save (S2S): NCI Colorectal Cancer Outreach and Screening** Initiative on November 3, 2016. This promising initiative aims to increase colorectal cancer (CRC) screening rates among racially and ethnically diverse and rural communities across the nation. Increasing colorectal screening rates in the U.S. is part of the 10 recommendations by the Blue Ribbon Panel for the Cancer MoonshotSM, announced in October 2016.

Colorectal cancer is the fourth most common type of cancer in men and women in the U.S., and it is the second leading cause of death from cancer. However, colorectal cancer screening is a proven prevention strategy that is currently being adopted by too few people, especially racial and ethnic minorities.

As a result, Screen to Save is focusing on men and women age 50 to 75 from racially and ethnically diverse communities and in rural areas. This includes American Indians and Alaskan Natives, Asians, Blacks/African Americans, Hispanics/Latinos, and Native Hawaiians and other Pacific Islanders — groups who historically have lower rates of colorectal cancer screening than the general population.

Community health educators will work alongside state, local, and national level collaborators in order to provide culturally-tailored, evidence-based colorectal cancer information, education, and screening options within communities nationwide. Learn more about Screen to Save at <http://go.usa.gov/x9y77>.

RESOURCES

- Screen to Save Website: <http://go.usa.gov/x9y77>
- Colorectal Cancer—Patient Version:
 - English: www.cancer.gov/types/colorectal
 - Spanish: www.cancer.gov/espanol/tipos/colorrectal
- Colorectal Cancer Screening (PDQ®)—Patient Version:
 - English: www.cancer.gov/types/colorectal/patient/colorectal-screening-pdq
 - Spanish: www.cancer.gov/espanol/tipos/colorrectal/paciente/deteccion-colorrectal-pdq
- GutCheck: gutcheck.cancer.gov
- Colorectal Cancer Statistics | Did You Know? (video): <https://www.youtube.com/watch?v=Vd7SvG131E4>
- Cancer Stat Facts: Colon and Rectum Cancer: <https://seer.cancer.gov/statfacts/html/colorect.html>
- Cancer Information Service: www.cancer.gov/contact and 1-800-4-cancer
- Cancer MoonshotSM Blue Ribbon Panel Report: www.cancer.gov/research/key-initiatives/moonshot-cancer-initiative/blue-ribbon-panel