Research Summary: Implementation of evidence-based primary cancer prevention interventions in Massachusetts community health centers

- Over half of cancers can be stopped by using prevention interventions targeting nutrition, physical activity, and tobacco.
- Federally qualified health centers care for over 30 million Americans, making them a great place to ensure evidence-based interventions that advances health equity.
- This study wanted to find out how health centers in Massachusetts are using cancer prevention EBIs on site and with community partners.



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WHO PARTICIPATED

- · Staff from Massachusetts health centers
- Leaders, nurses, doctors, medical assistants, quality improvement staff and community health workers

WHAT WE DID

- Gathered surveys from 34 staff at 16 health centers to understand how often evidence-based interventions were used.
- Conducted one-on-one interviews with 23 staff to learn how the interventions mentioned in the surveys were put into action.

WHAT WE FOUND

The good news:

• 100% of health centers provided screening, counseling with doctors or nurses, and prescriptions for medicine to help quit smoking. Most patients who smoke were offered these interventions.

Areas for improvement:

- Only 38% of health centers offered group counseling for quitting smoking.
- All health centers offered evidence-based diet and physical activity programs and referrals to smoking quitlines. BUT many staff reported these interventions were not often offered to patients.
- Many staff thought it was a good idea to work with community partners, but only one health center worked with community partners to deliver cancer prevention interventions.

Factors that impact implementation of evidence-based cancer prevention interventions:

- Complexity of training, referrals, and program recruitment
- Ability to change interventions to fit different cultures or languages
- Available visit time, staff, and funding
- Motivation of doctors and nurses
- Policies and incentives outside of the health center



