

## Implementing Lifeskills Training in Two Elementary Schools

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**Background:** Lifeskills training is an evidence-based program that provides children with skills for making healthy lifestyle behavior choices. However, the program is not utilized in many school systems. Although the content is vital, the messages delivered and modeled by parents/guardians in the home environment should be similar to the content taught in the Lifeskills training program. Parent Lifeskills training has not been utilized in conjunction with the child Lifeskills program in a concerted and measurable manner. Also, the parent Lifeskills has not been tested in diverse populations. Because the school and the home are the two most important and influencing social environments of the school-age child, approaches that include both of these settings with consistent messages are critical and may have an impact on children toward promoting healthy lifestyle behaviors.

**Method:** The project trained two teachers in two elementary schools to teach the Lifeskills program within the classroom. Parent sessions on how to implement the parent Lifeskills component in the home was offered to parents who consented. The purpose of the study was to: 1) determine whether the Lifeskills curriculum will prevent children from starting to smoke and provide a knowledge base for children to encourage the parents to stop smoking, and 2) encourage parents to stop smoking. Cotinine levels, which determines the present of nicotine in the blood, were done on all children and parents. The levels on the children determined they were non-smokers and the levels on the parents determined they were smokers. Control groups were used from another National Institute of Health (NIH) study.



**Results:** Statistically significant differences between pre-test and post-test were found for overall knowledge, drug knowledge, and Lifeskills knowledge with post-test scores being higher than pre-test scores for each of these three scores. The children and parents will be followed and tested with Cotinine levels at intervals to determine outcome.



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## Words To The Wise

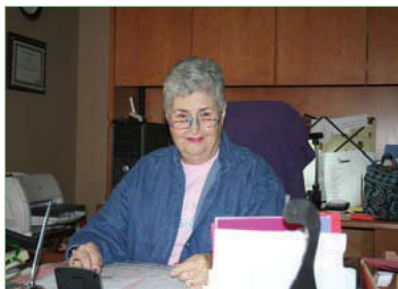
As you will read in this newsletter, we have had some interesting opportunities to educate women. It is always refreshing to know that you have taught something new to your audience. However, it can also show us that we may not have been fully effective in our previous efforts. For the 39 years that I have been a cancer nurse, I have tapped into all kinds of teaching tools, some work and some don't.

Communication among family members has to improve. We can no longer afford to be embarrassed when talking about sensitive subjects to our loved ones. Talking to your children or extended family members about sex is not easy, but watching them die from cervical cancer as a result of HPV, will cause a lifetime of sorrow.

In our workshops, we found many misconceptions about Pap Smears, Cervical Cancer and HPV. It was interesting that when we discussed Monthly Self Breast Examination, there was a lot giggling from the girls, but when we were showing anatomy pictures of invasive HPV into the cervix, things suddenly got much quieter. HPV is a sexually transmitted disease. The HPV vaccine given to girls and approved for boys is a preventive measure. This vaccine is approved for girls 9 to 26 yrs. old. It is most effective if given at least a year before the boys and girls become sexually active. It's a total of three shots given over a six month period. Discuss with your physician or go to the Health Department for help and additional information.

We answered many questions and cleared up many misconceptions for the mothers and daughters. A point of emphasis for all was to know your bodies. Your body will tell you when something is wrong, if you will only pay attention.

Until next time.....



Marilyn A. Hill, MS, RN  
Director of Operation & Programs,  
EGCC

*Help Us Fight Cancer in East Georgia!*

*By making a donation to the East Georgia Cancer Coalition, you will help us to spread the word about cancer. Our goal is to reduce the number of cancer deaths within our region by ensuring that all people receive cancer prevention education and information.*

*Donations are tax deductible and can be made in Honor or In Memory of someone important to you.*

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*East Georgia Cancer Coalition  
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Athens, GA 30602*

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*To support Cancer Research in Georgia*

## 2009 SUCCEED Legacy Grant

Marilyn Hill

We are so excited to share this good news: We received a \$20,000 grant from the Morehouse School of Medicine. The purpose of the 2009 SUCCEED Legacy Grant was to educate African American Mother/Daughters together about breast cancer, HPV and cervical cancer prevention and screening methods. We believe we were very successful as evidenced by the evaluations.

We identified four counties, from the Georgia Health Disparities Report, in the EGCC region which had the “Greatest Health Needs.” This is defined as the most years of potential life lost due to premature death in minority populations. Our intervention communities vary in levels of capacity and relevant resources, however they share commonality in poor health outcomes. These counties are Jackson, Lincoln, McDuffie and Richmond.

Each presentation lasted approximately one hour and light refreshments were



served. Upon entering the designated program location, adults and teenagers signed in and then received educational materials and an i-clicker remote control. In addition to paper surveys, the i-clicker remotes were used for electronic collection of pre and post-intervention

questions to evaluate knowledge, intention, and communication comfort levels. The presentations included 1) 45 minute PowerPoint presentation regarding breast cancer, HPV and cervical cancer prevention and screening methods, 2) educational materials related to above subjects, and 3) opportunity to receive the HPV vaccine. We promoted participants to become more engaged in the health of their family and friends, thereby utilizing common matriarchal social networks to support breast cancer, HPV and cervical cancer screening practices.

Currently four programs have been completed with 89 participants. The programs were held at Compass Baptist Church, Richmond County;



Agape Ministries, Lincoln County; McDuffie County FACS; and Boys & Girls Club of Jackson County.



We would like to thank Emma Smith, Rev. Tony Miller, Sr., and Michael Williams for all their hard work in making these events successful.

## East Georgia Cancer Coalition, Inc. Past, Present & Future

“Knowing trees, I understand the meaning of patience.  
Knowing grass, I can appreciate persistence”.

*Hal Borland*

### **Past**

In the late 90's then Gov. Roy Barnes directed Russ Toal to send out requests for proposals to secure a planning grant to develop regional cancer coalitions. The idea came from Hamilton Jordan, who as many will recall was the White House Chief of Staff in President Jimmy Carter's administration. The money was going to come from the Tobacco Settlement Agreement.

UGA and MCG established a planning committee, Dave Puett, PhD, Chairperson, along with many citizens from our Region, and we were on our way. Initially we had nine coalitions in the State, but when the money was not the amount we thought it would be, three coalitions dropped out. Our plans were submitted in March 2003 and this region was the first to be notified in May 2003 that we were to receive our designation in July of 2003. The other five coalitions received their designations and the Georgia Cancer Coalition was in business. There was a lot of organizational work to be done. We needed a CEO, a Board, a staff, and all the legalities of establishing a Not-for-Profit organization had to be accomplished. Needless to say, we were able to get these things in place so that we could begin to carry out a mission. There was then and there continues today national recognition for this unique state program.

### **Present**

We have 29 counties to serve anchored at either end of the region by two major universities, UGA and MCG. We have developed programs based on community needs, hired a program coordinator, Lemont Monroe, Sr., who is committed to our mission, has lot of community experience, and is located in Augusta. Frank Rumph, MD, CEO, is affiliate staff at MCG and has an office in the MCG Cancer Center in Augusta, which had its grand

opening on February 5, 2010. Marilyn Hill, Director of Operations and Karen Paxson, Executive Assistant, are both located in the Athens office.

Our number of people being reached since inception has increased, while our funding has decreased due to the current economic situation. We have many challenges in our region, and we are doing our best to educate our citizens about cancer prevention, how to recognize signs and symptoms, when to get screened and where to go for help.

### **Future**

The best news is we are coming into the digital generation. Our new website will be more informative, more current and colorful as we move forward. Watch for this event in late November.

Our continuing goal is to offer evidence-based, educational services to the citizens of our region. We have been rewarded by the interest and attention to our programs. One of new programs that we want to expand this year is known currently by two names—Community Health Advocate or Patient Navigator. We currently have this program in three counties and are looking to expand it further. Stay tuned. We continue, however, to be aware of the many myths surrounding cancer and generalized good health, as well as the role each of us play in being our brothers' keeper.

Continue to keep in your prayers the State of Georgia, as well as our national economy. When the country does well, the state does well, and that translates to all of us doing well.

That about sums up this journey from where we started, to where we are today, and as we all know from this past year, the future is too hard to predict. One thing is for sure, we are committed to the success of this statewide program.