# Exploring Rural Appalachian Community Perceptions and Practices on Health and Lung Cancer to Inform Screening Interventions

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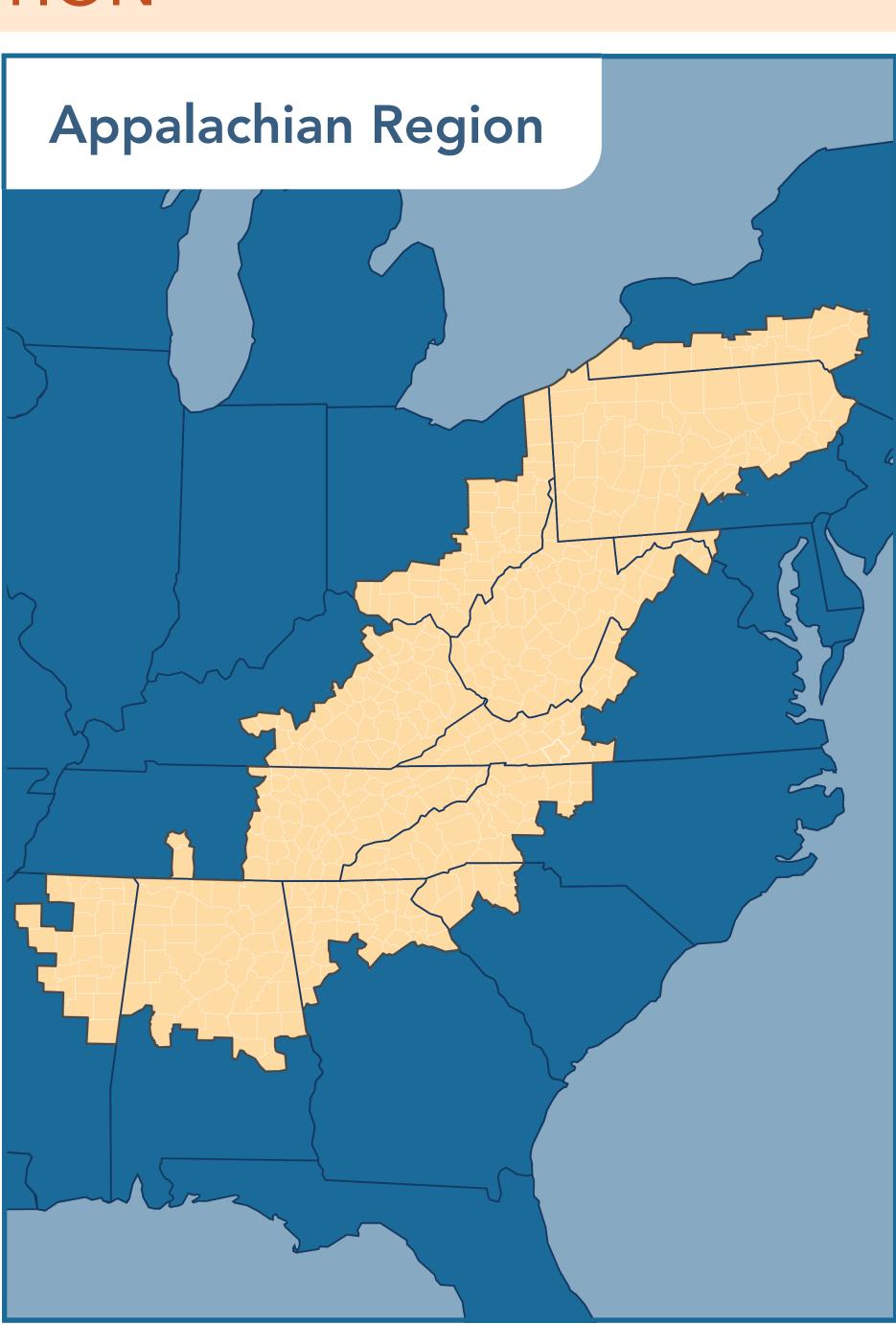
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## INTRODUCTION

The Rural Appalachian Lung Cancer Screening Initiative is led by the Association of Cancer Care Centers (ACCC), the Appalachian Community Cancer Alliance, and patient advocacy partners.

This multi-year initiative, recognized by the White House's Cancer Moonshot, seeks to improve lung cancer screening rates by supporting health systems in the rural Appalachian region of the United States to develop and implement interventions through partnerships and technical assistance.

Focusing on areas with significant barriers to screening, the initiative supports health systems in Pike County, Kentucky, and Buchanan County, Virginia.



# METHODS

To better inform interventions, ACCC conducted 7 virtual group interviews between September and October 2023 with individuals who live and work in the region. Interviews gathered insights into community needs, strengths, and attitudes toward health, lung cancer, and lung cancer screening (LCS). Participants were recruited through snowball sampling. Interviews were recorded, transcribed, and coded using thematic content analysis.

Interview participants	n
Multidisciplinary health care staff	9
Public health professionals	4
Community-based organization staff	2
Politician	1
N=	16



These findings highlight the importance of addressing structural barriers and enhancing awareness of lung cancer screening, particularly in higher risk communities. Notably, the influence of media, family, and trusted community members offers a strategic avenue for health systems and public health professionals to leverage when tailoring interventions to effectively reach and engage the community.

Access our lung cancer screening implementation change package and accompanying worksheets here:



Change Guide

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# CONCLUSIONS



**Change Worksheets** 

Conversations revealed close-knit, dynamic, communities with strong values and ongoing health promotion activities. Motivators for seeking health care included family planning or urgent health issues. Barriers for seeking healthcare included transportation, cost, and fear. Barriers, motivators, and perceived solutions to accessing LCS are summarized in Table 1.

#### Table 1. Perceived barriers, motivators, and solutions to lung cancer screening (LCS)

Barriers	
Motivators	
Solutions	





### RESULTS

- Actual/perceived cost
- Avoidance (eg, not wanting to receive bad news, other health needs or caregiving are higher priorities)
- Lack of knowledge, education, or awareness
- No referral pathway
- Primary care providers unaware or unaccepting of LCS
- Smoking stigma and guilt; self-blame
- Taking time off work
- Transportation; long drive times to screening facilities
- No cost to patient
- Getting screened is beneficial to the family/more time with family if caught early
- Ease and speed of scan
- Recommendation by a health care provider
- Seeing positive outcomes or experiences from others who have had screening or have lung cancer
- Conduct more community outreach/marketing efforts
- Provide free screening or increase awareness of screening coverage
- Increase accessibility and convenience; offer more convenient locations
- Combine with other screening activities/efforts
- Provide transportation assistance
- Leverage family members and social network to encourage screening
- Create testimonials from community members/trusted sources