Among colorectal cancer (CRC) survivors, higher levels of physical activity (PA) postdiagnosis are related to lower risk of cancer recurrence and cancer-specific and all-cause mortality (Meyerhardt et al., 2009; Meyerhardt, Giovannucci, et al., 2006; Meyerhardt, Heseltine, et al., 2006). For example, among 1,825 stage I–III CRC survivors who were followed longitudinally for five years postdiagnosis, those who engaged in some level of PA after diagnosis had 25%–28% lower all-cause mortality risk compared to sedentary survivors (Baade et al., 2011). In addition, a meta-analysis of seven studies indicated that the risk of overall mortality decreases by 28% with an increase to roughly 150 minutes of moderate-intensity activity per week (Schmid & Leitzmann, 2014). Because of these and other PA benefits (e.g., improved quality of life), the American Cancer Society advises 150 minutes of moderate-intensity or 75 minutes of vigorous-intensity aerobic activity weekly for cancer survivors (Doyle et al., 2006). Unfortunately, as many as 65% of CRC survivors fail to meet this recommendation (Blanchard, Courneya, & Stein, 2008).

Of the few interventions that have aimed to promote PA among CRC survivors, some have resulted in significant increases relative to baseline (Hawkes et al., 2015). This study tested the effects of gain-framed versus loss-framed mailed brochures on increasing PA among CRC survivors.