The incidence of prostate cancer, a common worldwide malignancy, has risen in recent decades and is mainly fueled by more widespread use of prostate-specific antigen testing (Merriel et al., 2018). Because of increased screening, many men may be diagnosed with a form of prostate cancer that they possibly would have never known about otherwise (American Cancer Society, 2019b). When addressing the impact of prostate cancer, there continues to be a healthcare disparity between African American men and men of other racial and ethnic groups. African American men are at a greater risk of dying from prostate cancer. According to research, they have a much higher rate of diagnosis, with 179.2 new cases per 100,000 men, and are twice as likely to die from the disease than White men (American Cancer Society, 2019a). In addition, compared to an approximate 10% chance of developing prostate cancer during their lifetime for White men, African American men have a 15% chance (Newton, 2018).

This research study, which was based on Stetler’s evidence-based practice model, explored the prevalence, culture, and health care of African American men in relation to prostate cancer. Using the Stetler model, individual practitioners apply research and evidence to their critical thinking, reflecting on their practice. Application of the model can also solidify changes within organizations (Stetler, 2001). The Stetler model can be applied to close the gap in health care related to African American men and prostate cancer.

Background
Prostate cancer, which is the second most common cancer in American men, is slow-growing and curable when detected early (Keavey & Thompson, 2018). Although overall incidence has declined during the past 20 years, because of the disproportionate incidence and mortality rates, prostate cancer continues to be a major concern among African American men (Keavey & Thompson, 2018). In addition, there are disparities in the prostate cancer knowledge gap for this population. Although there is no definitive answer to address why these disparities exist, research suggests that “educating Black patients about their options is critical to their prognosis” (Cancer Treatment Centers of America, 2017). Prior studies have also focused on factors such as disparities in treatment plans and cultural beliefs as possible contributors to