

**ANSWER
CANCER**



**Year Five
End of Year Report
(2023 / 24)**



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Executive Summary

Answer Cancer is a Voluntary, Community and Social Enterprise (VCSE) led programme to improve cancer awareness and increase breast, bowel, and cervical screening uptake across Greater Manchester.

This is done by mobilising the efforts of VCSE organisations, our community residents, workplaces, and service providers.

Four VCSE organisations partner to deliver Answer Cancer: BHA for Equality, Salford Community and Voluntary Services (SCVS), Unique Improvements, and Voluntary Sector North West (VSNW).



This report highlights the incredible benefits of the programme from April 2023 to March 2024 — Answer Cancer's fifth year.

Year Five Highlights (Achievements)

Awareness sessions and training courses have increased awareness and understanding of screening programmes.

More employers are offering paid time off for screening appointments.

Expanded reach of cancer screening messages through Cancer Champions.

Strengthened partnerships between Answer Cancer and community organisations.

Answer Cancer Champions

One way we deliver our message is by enlisting Answer Cancer Champions. These individuals are crucial to raising awareness.

- In Year Five, **173** new Champions signed up, bringing the total to over **4,600**.
- Champions held **1,272** events and had **13,911** conversations.
- **20%** of people committed to screening after talking to a Champion.

4600+

Answer Cancer Champions



Organisational Champions

An Organisational Champion is an organisation that has committed to supporting Answer Cancer by sharing information within their organisation and the broader community.

- In Year Five, **58** new organisations signed up, totalling **297**.
- Organisations reported **14,711** conversations regarding screening.
- **507** employees committed to attending screening appointments due to these conversations.

297

Organisational Champions



Answer Cancer Grants

The Answer Cancer grants programme provides funding and support for VCSE organisations based in Greater Manchester to raise cancer awareness and promote NHS cancer screening programmes.

£87,000

In Year Five, £87,000 funded
17 grants, leading to:

- 330 events.
- 262 other engagement activities.
- 2,983 individuals engaged.
- 1,172 individuals (39%) committed to screening appointments.
- 283 individuals supported to attend screening appointments.

Over five years, Answer Cancer has
awarded £325,000 in grants.

£325,000



Community Engagement

- **124** awareness sessions, reaching **8,654** people directly.
- Estimated reach of **30,000** through radio and informal conversations.
- **40%** with people from Black, Asian, or Minority Ethnic (BAME) backgrounds.
- **18%** of participants reported a disability.
- **28%** of participants reported caring responsibilities.

Training

- **62** training sessions with **613** participants.
- **30%** of participants were from BAME backgrounds.
- **31%** of participants had caring responsibilities.



Bee Seen Get Screened

This campaign encourages workplaces to offer paid time off or flexible working for screening appointments and to promote cancer awareness.

- **100** organisations have signed the pledge.
- Over **80,000** employees reached.

80,000

**Employees
can access
screening
appointments
more easily**



Introduction

The programme operates through seven primary streams.

1.

Community Engagement

Delivering cancer screening awareness sessions to underserved communities.

2.

Cancer Champion Network

Building and supporting a network of Cancer Champions.

3.

Training and Capacity Building

Providing training to individuals and organisations to communicate about cancer effectively.

4.

Innovation and Evaluation

Identify best practices, evaluate interventions, and conduct research.

5.

Stakeholder Engagement

Collaborating with key stakeholders to enhance programme impact.

6.

Workplace Engagement

Encouraging employers to offer paid or flexible time off for employee screenings (Bee Seen Get Screened).

7.

Grant Distribution

Providing financial support to community-based screening initiatives.

Year Five Objectives

- Researching screening barriers—creating a research report which outlines the barriers to screening that people may face.
- Delivering training sessions and developing a "Train the Trainer" course.
- Conducting **108** awareness sessions for target populations.
- Collaborating with Cancer Screening Improvement Leads (CSIL).
- Distributing **£100,000** in grants.
- Recruiting and supporting Cancer Champions.
- Engaging workplaces and promoting the Bee Seen Get Screened pledge.
- Collaborating with Primary Care Networks (PCNs) to increase cervical screening rates.

Reaching Underserved Communities

Answer Cancer focuses on diverse, economically disadvantaged, and often overlooked communities.

To effectively engage these groups, the programme adopts a flexible approach that meets people where they are. By attending community events and building trust, the Answer Cancer team creates opportunities for open conversations about cancer and the importance of screening.

The programme emphasises the benefits of early detection, addresses common concerns, and provides information in accessible formats, including translation services when needed. Answer Cancer aims to reduce stigma and encourage help-seeking behaviour through information stalls and community engagement.



What we Achieved in Year Five



Community Engagement

Our purpose is to increase awareness and eliminate barriers to screening within our control. We do this by identifying the perceptions around cancer in different communities, and then we act on this by delivering interventions that relate to that community.

These barriers and interventions have been identified from working in targeted communities. We work closely to engage people from backgrounds where they may be less likely to attend screening through smaller awareness sessions specific to their culture, identity, or sexual orientation. This provides a more inviting, safe space to enable the freedom to learn.

We also attend many events where we are not running the session, but other colleagues are also presenting. We value this as shared learning and a place where discussions occur, which may be important to future service improvement.

“Women don’t go to the appointments as they don’t know the importance of screening and that it’s a ‘very rude area’. She said this should be promoted in the community more, not just at the mosques where the men are.”

Community Engagement is delivered by a diverse staff team, enabling the delivery of awareness sessions in English, Urdu, Punjabi, and Swahili.

Additionally, with the recruitment of two male engagement leads during Year Five, Answer Cancer was able to attend more male-specific events, as follows:

- Men’s mental health event.
- Mosques.
- Men’s awareness sessions.
- Events targeted at gay men.
- Refugee and asylum seekers Men-only events.

During Year Five

The engagement team held **124** awareness raising sessions.

Staffed **149** information stalls.

Had **8,654** meaningful conversations around cancer with members of the public.

Spread messages to approximately **30,000** people through radio shows, online posts, and sharing leaflets at events.

31% of people engaged were male.

40% of people engaged were from a black or minority ethnic background.

18% of people identified as having a disability.

Collaboration with CSILS

Over Year Five Answer Cancer was involved in the Cancer Locality Groups in the following areas:

- Manchester.
- Salford.
- Oldham.
- Heywood, Middleton, Rochdale (HMR).

Through these Locality Groups, we develop joint plans to tackle low breast and bowel screening uptake.

We worked with GPs and offered awareness sessions to inform women that the breast screening van would be in their area and encourage them to attend appointments. Community engagement activities were delivered just before breast screening invitations were issued to women in the localities below:

- Manchester – Gorton and Central.
- Salford – Irlam and Little Hulton.
- Oldham – Chadderton and Royton.

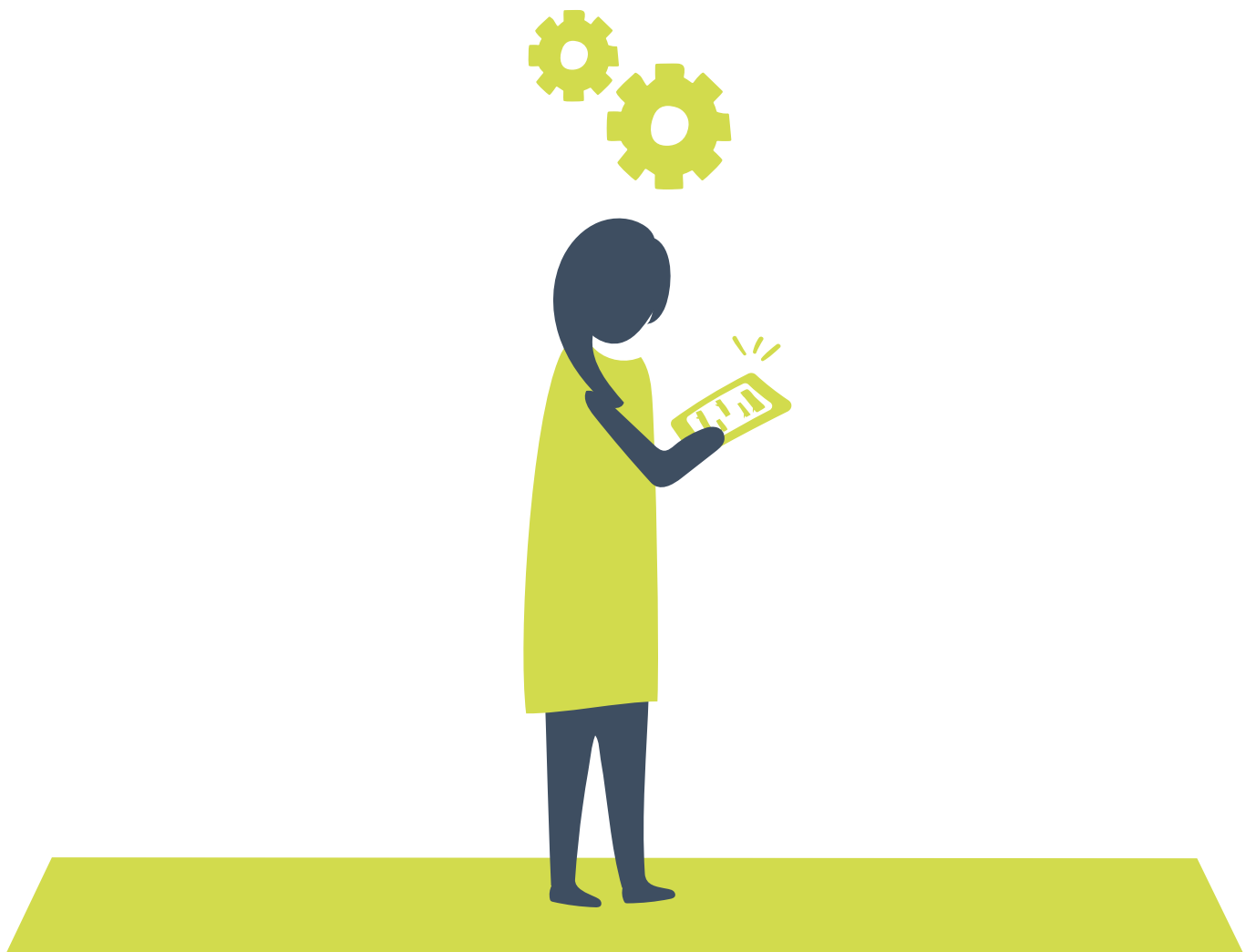
During the year, we also collaborated on delivering awareness sessions that cover specialist information from the CSILs, for example.

- Greater Manchester Cancer Alliance podcast on health inequalities in screening with a focus on bowel screening.
- Event targeting patients across Oldham North PCN.
- Engaging with refugees and asylum seekers at a voluntary support organisation called Manchester Settlement.
- Events during bowel screening awareness month and breast screening awareness month.

Grants and Spot Purchasing

During Year Five, **£87,000** was awarded in grants and spot purchasing services to raise awareness of cancer signs and symptoms and the importance of cancer screening to community members within Greater Manchester.

Eight organisations received a grant of **£2,000**, and nine organisations were given **£8,000** as spot purchases.



Examples of the work carried out by the funded projects included:

- Recruiting and training Champions.
- Producing an informational video in Cantonese and English to raise awareness of bowel cancer for men and their families.
- Holding in-person awareness and training sessions.
- Online awareness-raising.
- Health talks.
- Raising awareness of cancer and screening in communities.
- Engagement sessions based on gardening, exercise, etc.
- Women's empowerment sessions.
- Afro-Fit sessions.
- Producing a play about breast cancer for an Afro-Caribbean audience and a play about cervical cancer for a Pakistani and Bangladeshi audience.
- Running a Healthy Living Programme.
- Delivering education workshops.
- Developing a peer mentoring programme to encourage women affected by female genital mutilation (FGM) and domestic abuse to attend cervical screenings.
- Providing information about cervical screening for homeless women.
- Training Black African women ambassadors to promote screening in their communities.
- Holding cervical and breast cancer awareness sessions for women from Black Asian and other ethnic minority groups.
- Radio talk show.
- Breakfast Club.
- Black History Month community engagement event.



The eight organisations that received the grants were:

- Family Unit Trust.
- Support and Action for Women's Network (SAWN).
- Angels of Hope for Women.
- Deplish Community Centre.
- Wonderfully Made Women.
- Rochdale Connection Trust.
- Blackrod Sports & Community Centre.
- Anmol Cancer Support Group.

Between them, these eight organisations held **95** events.

104 other activities.

Engaged with **987** individuals.

With **264** individuals committing to their screening invite because of the engagement.

Supported **106** individuals in attending their screening appointments.

"I have always thought cancer is not for Black people. After listening to a Black woman who had cancer and survived, this brought it so close to home. I have always been scared to talk about cancer because I feel if I do, then I will get it. Having the one-to-one support, the group sessions empowered me to book an appointment to go and get screened. It was not easy, and I cancelled three times due to being very nervous. The women supported me, and finally, I went for the screen with the support of one of the Champions. It was not what I had imagined. It was quite good to ask professionals questions, and the lady doing the screening was very lovely and calmed all my nerves down. Had it not been for the session I attended, I would still be living in fear and not had done the screen."

Quote from an Angels of Hope for Women attendee.

"One of our volunteers was diagnosed with cancer whilst supporting this campaign. She is a lady in her 70s living with her husband."

"Rather than withdraw from the work she increased her involvement, recruited more volunteers, and continued to support us. She is still receiving treatment for breast cancer and has told us that being able to talk to others in the community has helped her and she is a role model for others. More people have joined us who are living with cancer, and most are upbeat about their prospects. What this work has shown us is that many people were struggling on their own and even those they socialise with weekly were not fully aware of what they were going through. Now we are working to provide a welcome and safe space to discuss their experiences and provide support."

Evidence of impact from Blackrod Sports and Community Centre.

“A woman who attended the Cervical Screening told the Diversity and Inclusion worker she passed on the information to her daughter-in-law as she may have some symptoms that worried her, and she expressed concerns about them.”

“There was a conversation between some men in a group about monitoring PSA levels and the difficulty of getting a GP appointment or scan. This is something that may put people off trying, but we encouraged people to keep going forward with their approaches.”

Evidence of impact from Being There.



The organisations who received funding through Spot Purchasing were:

- Can Survive UK.
- Callplus trading as Being There.
- Salford Primary Care Together.
- Voice of BME Trafford.
- New Step for African Community (NESTAC).
- Manchester Action on Street Health (MASH).
- Wai Yin Society.
- Fatima Women's Association.
- The Fed.

Between them, they held **235** events.

158 other campaign activities.

engaged with **1,996** individuals.

908 committed to taking up their screening invitations because of the engagement.

177 individuals were supported in attending their screening appointments.

"We have also developed lasting partnerships with others involved in the promotion of health & wellbeing as well as local communities/venues. We have learned that a tailored approach works best and putting a range of wellbeing activities alongside the Answer Cancer screening presentations works well, promoting positive discussion and action. This approach has helped to break down barriers, anxieties and fears in both individuals and communities. Our sessions have offered a 'safe space' for encouraging discussion, raising further questions, seeking further information. We have also noted that group members have taken information away to look at privately and to share with other family members and wider networks. Improved symptom awareness is another benefit of the sessions we have provided."

Quote from Being There.

"This project has been a great opportunity for our volunteers to learn new skills and doing something different to our normal volunteering activities. It has been a great experience for us all and we are eager to continue with this project."

Quote from The Fed.



"During health talks, we encouraged people to fill out questionnaires to assess their feelings before and after the sessions. This initiative aimed to raise awareness for themselves, their friends, and families. We motivated them to share what they learned with their network, emphasising the role of champions. We assure them that it's not a difficult task and instilled confidence in their ability to promote the information. As a token of appreciation, those who completed the questionnaires were eligible to receive a healthy prize."

Quote from Wai Yin Society.

"One of the patients contacted shared that she was living with FGM and wasn't confident to come for screening as it was going to be painful. Our staff provide all the emotional support and offered to be there on the day to support her in screening. This helped the individual to overcome her fears and she eventually came in for screening for the first time."

Quote from Voice of BME Trafford.



Training

During Year Five, Answer Cancer offered eight regular trainer led training courses which were repeated throughout the year.

These courses were a mixture of face-to-face and online training sessions and covered the following topics:

- NHS Cancer Screening Programmes Overview.
- Cervical Screening Awareness.
- Breast Cancer Screening Awareness.
- Prostate and Bowel Cancer Awareness.
- How to Run Brilliant Awareness Sessions.
- Work Place Wellbeing.
- How to Have Difficult Conversations.
- How to Plan and Measure Success.

Additionally, a CPD accredited Train the Trainer course was offered as part of the ongoing delivery of the Answer Cancer training programme. This was to enable trainees to continue to deliver Cancer Awareness training as part of the legacy plan.

Finally, five bespoke training sessions were delivered to various groups across Greater Manchester as requested by the groups themselves, each with a focus on the needs of the community. The five bespoke sessions were:

- Cancer Champions Community Training – Gorton Community Centre, Healthy Me, Healthy Communities.
- Cancer Awareness Training – Manchester People First, Learning Disability Group.
- Creative Approaches to Engagement – Trafford Local Care Organisations.
- MDC Prostate and Bowel Cancer Awareness Training – Manchester Deaf Centre.
- Making a Call Training – Cervical Cancer Non-Responders – Warrington Primary Care Network.

During Year Five

Answer Cancer delivered **62** training sessions.

Trained **613** participants.

Trained **50** participants in Train the Presenter.

In addition to the face-to-face and online trainer-led sessions, Answer Cancer also provides a series of online quizzes which participants can complete at their leisure. These provide further information and learning about specific topics, including Breast Screening, Bowel Screening, Cervical Screening, Cancer Champion Screening, Cancer Champion Workplace, and Cancer Champion Induction.

The quizzes were accessed 112 times during Year Five, with the most popular ones being the Breast Screening and Cervical Screening quizzes.

- **23%** of participants trained were male.
- **30%** were from a Black or minority ethnic background.
- **31%** of participants had a caring responsibility.
- **37%** reporting having a disability.

Feedback from Training

- During Year Five **345** evaluation forms were completed in full.
- This works out as **56%** of participants completing an evaluation form in full.
- Over **70%** of participants reported an increase in knowledge and confidence around raising awareness in their communities as a result of the training.

Evaluation

To evaluate the use, retention, and application of training we use a modified version of the Kirkpatrick's 4-tier evaluation process. Developed in the 1950s this model enables us to estimate whether the learner has engaged with the training process.

Acceptance	Did they like the training?
Learning	Did they learn anything?
Transfer	Have they used the training in their day-to-day practice?
Impact	What has been the impact of the training on 3rd parties such as the public, patients, colleagues, the system?

Each tier requires its own tools to perform the measurement which can be pre and post or a one-off measure.

As part of this approach, training participants are asked four questions at the start of the session.

- 1.** How do you rate your knowledge of the topic of today's training session?
- 2.** How do you rate your knowledge of the NHS Cancer Screening Programmes?
- 3.** How confident do you feel talking to others about the signs and symptoms of cancer?
- 4.** How confident do you feel talking to others about the importance of early detection of cancer?

The participants are asked to score their knowledge and confidence on a scale of 1-10, with 1 being the lowest and 10 the highest. These questions are then repeated at the end of the session to measure if there has been an improvement in people's knowledge and confidence following the training. Additionally, people are asked if they enjoyed the session. This approach covers tier 1 and tier 2 of the Kirkpatrick evaluation process.

Training Plans

As part of the Answer Cancer putting learning into practice approach, training attendees are encouraged to complete a plan at the end of the training session which describes how they will use their learning to achieve something in the weeks following. This is how we measure Tier 3 and 4 of the Kirkpatrick evaluation process.

- During Year five, **294** participants completed a plan.
- This equates to **48%** of participants.
- **70%** of participants committed to raising awareness following the training.
- **29%** of participants planned to engage with others about cancer screening.



Examples of the plans created include:

- To deliver a cervical screening awareness presentation for our cohort of eligible female patients.
- Create awareness events for my PCN and engagement with the practices.
- Contact workplaces/businesses around the PCN to display posters for screening awareness.
- Use the information in my awareness sessions.
- Circulate an email among work colleagues re what learned today/ ways for them to follow up on the issues.
- Use the information to pass onto patients needing advice.
- Spread the messages to family, friends, and colleagues.
- Raising awareness in the workplace.
- Receptionists to have more confidence to ring patients that are overdue smears.
- Start conversations. Don't try to always have the answers, concentrate on listening.
- Implement it in practice, invite patients in to screening.
- Pass information to my team. Host an event. Reach out to local organisations that we can work with.
- Host a community event.
- Contact local surgeries to see if they will allow the screening videos to be played in practice.
- Feedback to management on showing more information around for more to see.
- Run awareness sessions within the community.
- Organising events in minority community groups.
- I will be starting male health and wellbeing events early January and once a month thereafter, using info and advice gained from these sessions.
- Run separate sessions on all three screening programmes on my Saturday morning radio show at Crescent Radio. Also have cancer awareness sessions at a ladies group I am joining in the new year. This will be in Punjabi and Urdu, and I want to make it more fun and easier to understand.

- Encouraging ladies to take the tests, try to break down barriers in the community.
- Ask my wife and sister if they are up to date on their cancer screenings. Check my own risk for prostate cancer. Mention the importance of cancer screening to friends.
- Share the information from today with other members of the Deaf community.
- Not delay my screening.
- Visit the GP about some symptoms I'm having.
- To deliver awareness raising sessions in the community.
- Post information on my community social media to educate and encourage members.
- Raise awareness through GP pop up groups.
- Delivering the session to women's group and other community groups.
- Deliver training/workshops to adults with learning disabilities and their support staff.

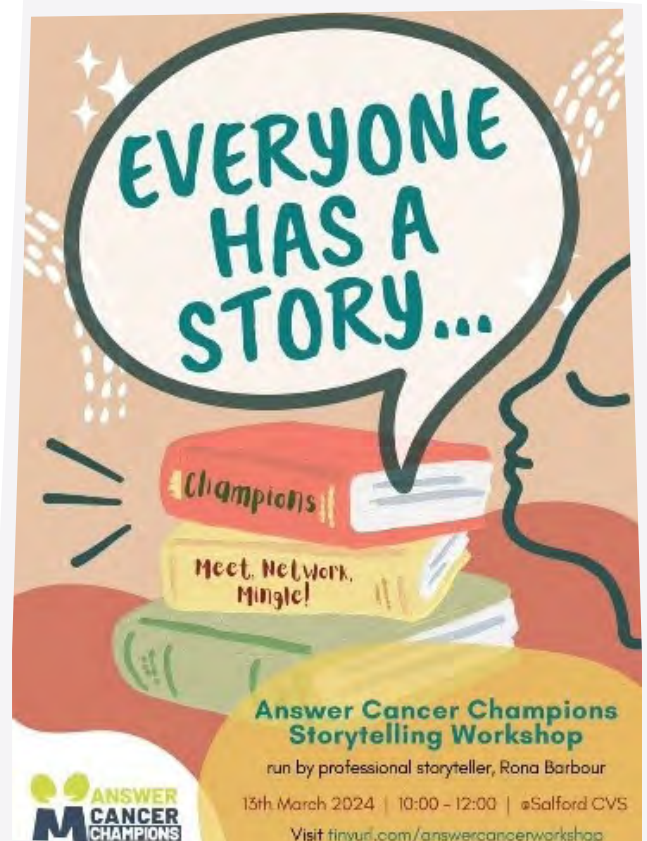


Answer Cancer Champions

Our Cancer Champions are at the heart of our work. They are drawn from the communities we work with and have the background, understanding, and social tools to start awareness-raising conversations and explain the benefits of early diagnosis. As such, we are continuing to recruit individuals from within groups, workplaces, and communities to offer peer support, promote awareness, and explain the importance of screening.

During Year Five, Answer Cancer held three Cancer Champion events.

The first was a celebration and appreciation of Champions event held on September 2023, followed by a very successful Winter Warmer Answer Cancer Champions Appreciation Event in January 2024 and a storytelling workshop where Champions could learn about the power of storytelling to help them develop storytelling and narrative skills so they can more effectively share their cancer experiences with others. It was also an excellent opportunity to network, learn from each other, support their work, and make social connections.



During Year Five

173 new Answer Cancer Champions were signed up which brings the total number of champions signed up to **4,621**. Not all these Champions are always active as lifestyle changes can impact a Champions ability to take part in any activities. However, they will still be spreading the messages and the information they have learnt to family and friends in a more informal way. The Active Cancer Champions carried out a total of **1,272** activities.

To monitor the activities carried out by the Cancer Champions, Answer Cancer sends out a quarterly survey for Champions to complete.

A total of **181** surveys were completed.

These responses reported that **13,911** conversations took place between Cancer Champions and community members with **2,738** people stating they would take up their screening invite following their conversation with the Cancer Champion.

In addition to the Cancer Champions, Answer Cancer signed up **58** new Organisational Champions which brings the total number of Organisational Champions to **297**.

Of these Organisational Champions, **46** surveys were completed which reported that **14,711** conversations took place within workplaces during Year Five, and as a result **507** employees reported that they would be taking up their screening invitation because of these conversations.

Cancer Champions Survey Responses

One respondent's Facebook video about male breast cancer achieved **2,500** views, achieved a further **77** shares and prompted many comments and discussions. The same champion put up a poster about male breast cancer in a local community centre. A woman took this home to show her husband. He later saw a doctor and was diagnosed with cancer in both breasts. He commented, "***So I've saved one life.***"

One respondent' reported that their Facebook video had achieved **4.5K** views

Bee Seen Get Screened

Insight shows that only one in five full-time workers were able to get a convenient cervical screening appointment the last time they tried to book.

Source: Jo's Trust 2021.

Bee Seen Get Screened is an Answer Cancer initiative which encourages employers to pledge to:

- Guarantee their staff paid time off or provide flexible working to attend NHS cancer screening appointments.
- Raise the profile of health and wellbeing in the workplace.
- Encourage their staff to talk about cancer and the importance of screening.

"Sorry if I'm oversharing, but..."

"I'm off to have my smear in 10 minutes. It's been completely different this time round, knowing I would be able to have some time off, and I could fit it into my working day instead of trying to wangle it for the first or last thing in the day."

"I love the pledge. I hope other people do, too."

Quote from an employee benefiting from the pledge.

Salford City College

Following the Bee Seen Get Screened Cancer Screening Awareness webinar, one male member of staff recognised a symptom of breast cancer and went to get screened. As a result, he received a cancer diagnosis and is now undergoing treatment.

By signing up for the pledge, employers are encouraging their employees to take up screening invites when they are offered and raising awareness of cancer amongst their workforces with the aim that any instances of cancer will be detected early, which will reduce the need for unpleasant and often traumatic treatment and lifestyle changes.

It is marketed to employers as not only beneficial to the health of their employees, but as also beneficial to the organisation because early detection can reduce the cost of sick leave, and the loss of trained and experienced staff from the workplace.

The pledge is aimed at all organisations and employers within Greater Manchester, regardless of size or sector.



At the end of Year Five, **100** organisations have signed up to the pledge, which means more than **80,000** Greater Manchester employees can now ask for time off for screening and are now encouraged to talk about cancer in their workplace.

Getting organisations to sign the Bee Seen Get Screened pledge is not a simple process as different organisations have their own unique challenges that need to be overcome (persuading HR, organisational/worker resource arrangements, etc.).

The Answer Cancer Bee Seen Project Manager has worked hard on helping workplaces to see the positive benefits of creating a healthier work force in the longer term by signing the pledge and enabling workers to actively participate.

Employee Influence

"My partner discovered she had breast cancer because she attended a cancer screening session. Thankfully, she recovered. Going to these appointments is one of the most important things you can do. When I saw the pledge, I spoke to my HR lead and asked them to help me bring this policy to my workplace."

Unexpected Benefits

Tameside PCNs are providing smear tests for staff at alternative GP practices, reducing the time required to attend and ensuring easy access for all.

MFT are providing on site screening for staff - **"Smears Here"**- to address the barriers of travel and tackling the reluctance to ask for time off due to work pressures.



Barriers to Screening



Barriers to Screening

National screening programmes have an important role to play in reducing health inequalities. Within the NHS it is acknowledged that variation in participation exists both within and between national screening programmes and, generally, people at higher risk of cancer are less likely to participate.

The following sets out details of barriers that have been identified over the past four years of delivery of the Answer Cancer Programme. Such information has been gathered through the delivery of awareness sessions and other interactions with members of the public and groups that are less likely to take up screening:

- People who are Black, Asian or from other minority ethnic groups.
- People with a disability.
- People with poor mental health.
- People who are Lesbian, Gay, Bi-sexual or Transgender.
- People who live in deprived areas.

Review

This review is split into the different NHS cancer screening programmes. It identifies the barriers cited by different groups, and describes and suggests the approaches that could remove such barriers.



NHS Cervical Screening

Booking Appointments

Anyone with a cervix

- Development of the Bee Seen Get Screened pledge in 2022 to get employers to allow paid time off work to attend screening appointments. The pledge now covers 80,000 employees across GM and is rising all the time.
- Answer Cancer trained volunteers to ring non-attendees, discuss their reasons and book them straight into appointments.
- Alternative option for booking screening on a Practice telephone system.
- Option to book screening online
- Introduction of weekend appointments
- When possible, GP practice to use enhanced access to provide more screening appointment slots.
- Introduced multiple appointments for female members of one family. This was successfully trialled with a PCN in Oldham and resolved childcare issues and screening anxiety.
- Cervical screening 'drop-in' sessions were trialled in Bolton resulting in increased uptake of screening.

Fear, Trauma, and Judgement

Anyone with a cervix

- Cancer screening awareness sessions to reinforce the message that screening is not a test for cancer but to identify changes in the cervix to provide earlier diagnosis.

Women who have experienced FGM

- Funded NESTAC to engage and raise awareness with women who have experienced FGM.
- Training community champions.
- Set up a buddy scheme to accompany women to screening.
- Identified and linked women to specialist support at MRI FGM service.

Religious/Cultural Beliefs

Some Muslim and Jewish women

- Time is allocated in cancer screening awareness session to discuss myths e.g. If not in a marriage they don't see the need as they are not having sex and fear of screening breaking the hymen.

Lack of Awareness by Health Professionals of Issues Impacting Transgender People

Trans/non binary/non gender conforming people

- Hosted events to discuss the importance of cancer screening for Trans and non-binary people.
- Developed YouTube videos about barriers to screening.
- Developed a project to raise awareness of the importance of screening.
- Raised awareness amongst trans people to discuss cervical screening with their GP.
- Contributed to a national guidance booklet for cancer risk and screening information for people who are transgender, non-binary, and gender-diverse.

Painful Experience

Anyone with a cervix

- During awareness sessions women are informed that the clinician's judgement is used to determine the size of speculum used.
- Speculums are now made from plastic and feel and look less clinical.
- Cervical screening tips are given to make the experience more comfortable.

Older Women Being Discouraged from Cervical Screening

Older women/anyone with a cervix

- Screening awareness sessions explain the low risk for over **65s** with a negative HPV test, and the higher risk for women who rarely attend for screening.
- Cervical screening tips are given to women and promoted during cervical screening week.

Circulation of Horror Stories from Friends and Family

Anyone with a cervix

- Positive experiences of screening are shared during cancer screening awareness sessions.
- Tips for a better cervical screening experience are shared during cervical screening awareness week and awareness sessions includes myth busting.

Some Younger People Feel Screening is not Relevant

Younger people with a cervix

- Funded Girl Gang Manchester to run a campaign targeted at younger women.
- Engagement with younger women in priority areas.
- Information provided about the risks of HPV, how it can be transmitted and the HPV vaccine.

Lack of Screening Offers for Lesbian Women

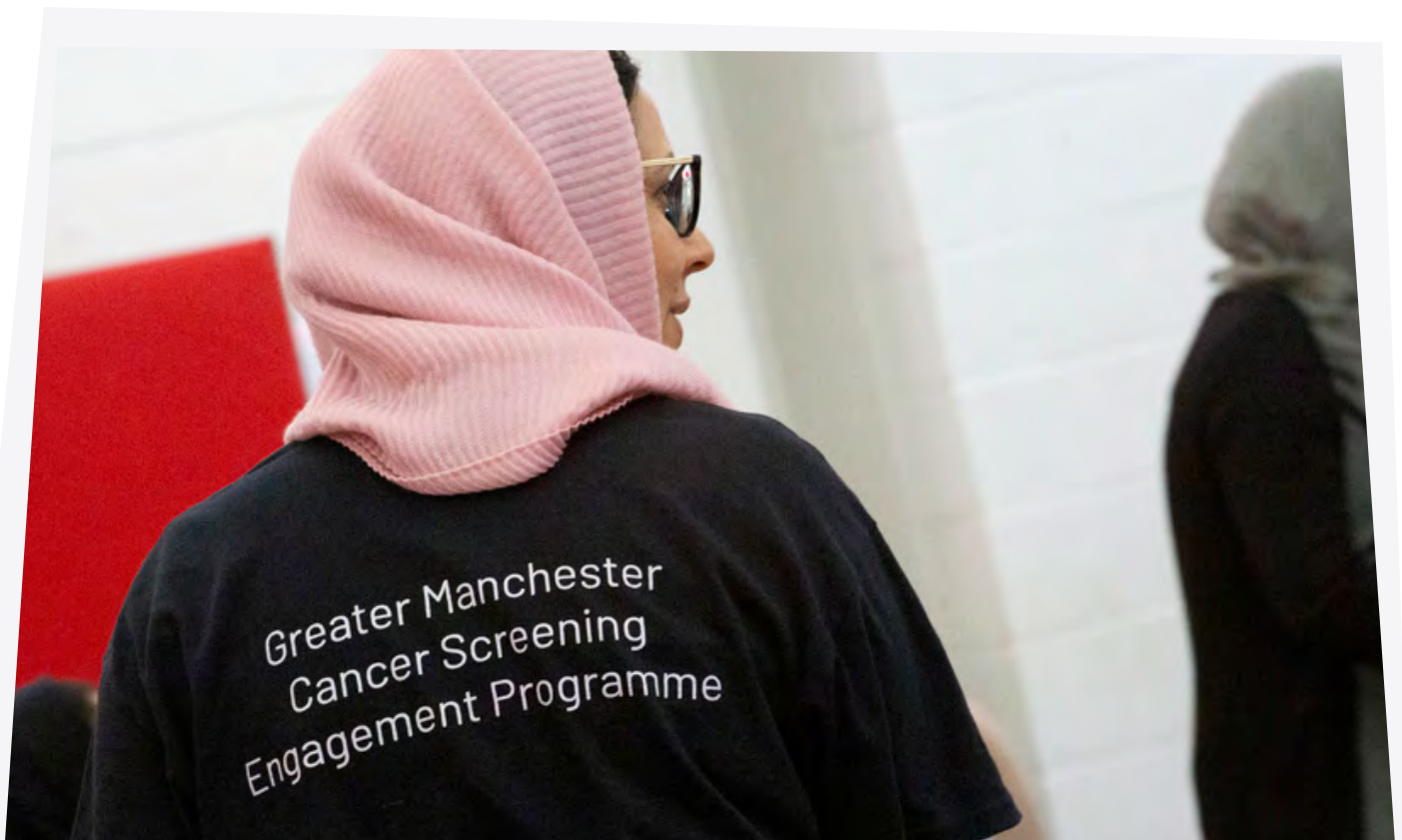
Lesbian women

- Answer Cancer YouTube videos aimed at lesbian women.
- Targeted events for lesbian women.
- Hints and tips to make cervical testing more comfortable.
- Information is provided about the risks of HPV and skin to skin transmission.

Poor Practice or Negative Attitudes from Health Care Professionals

Anyone with a cervix

- Cancer screening awareness sessions explain why screening is important,
- Service user suggestion - NHS to review training provided by staff who offer screening services.



NHS Breast Screening

Lack of Understanding Around Breast Screening Letters

People with learning disabilities or those unable to read English

- Service user suggestion - NHS to review screening letters to ensure content complies with Accessible Information standard and meets the needs of people whose first language is not English.

Lack of Understanding Around Breast Screening

People with learning disabilities

- Funded VCSE organisation called PossAbilities to produce 'easy read' cancer screening guide.
- PossAbilities also arranged for a visit by individuals with a learning disability to see the equipment used for breast screening.
- Use of visual props to explain screening.

Poor Practice or Negative Attitudes from Health Care Professionals

All women

- Service user suggestion - NHS to review training for staff including communication skills.
- Screening awareness sessions provide attendees with facts and information.



NHS Bowel Screening

Lack of Awareness Around FIT test

All groups

- Materials were produced alongside the national Bowel Cancer Awareness campaigns.
- The Bee Seen Get Screened pledge (BSGS) asks employers to sign up to raise awareness of the FIT test within their workplace.
- A series of videos were produced and put on the Answer Cancer YouTube channel raising awareness.

Support Required to Take Sample

Physically disabled

- Breakthrough UK report led to production of Accessibility Guide.

Testing Seen as Unhygienic

All groups

- Screening awareness sessions provide information on the NHS shift to FIT tests which helps in taking a sample and negates the need for home storage.

All NHS Screening Programmes

Fear of Talking About Cancer

Different ethnic and religious groups

- Grants programme enables VCSE reach into different groups/communities and the Engagement Team go into community spaces to start and normalise conversations.
- Recruitment of Cancer Champions from communities to talk about their lived experience to encourage conversations.

Mental Capacity

People with learning disabilities

- Created accessible awareness presentations with support from disability organisation (United Response).
- Funded community groups to develop resources and promotional videos for our use.
- Service user suggestion - NHS to consider 'reasonable adjustment' to accommodate people with learning disabilities accessing healthcare setting and acknowledge their communication needs/requirements on their hospital passport.

Language

Older minority groups: Chinese, South Asian, Eastern European. Refugees/Asylum Seekers

- Spot purchased community organisations to support Answer Cancer activity to engage with racial groups.
- The Answer Cancer YouTube channel has screening videos in community languages.

Lack of Appropriate Methods of Communication

Deaf people and people with hearing loss

- Delivered awareness sessions in British Sign language or Sign Supported English (Manchester Deaf Centre).
- Options explored for delivery of cervical screening sessions with signers present for deaf people.

Transport and Poor Access to Screening Services

Physically disabled

- Answer Cancer and Breakthrough UK produced a report in 2020 which highlighted some of the multiple barriers faced by disabled people.
- Partnered with disability charity Breakthrough UK to produce a short video about the barriers to cancer screening that disabled people face and how these could be tackled.
- Service user suggestion - NHS to consider transport needs of disabled people to enable access to screening and putting 'reasonable adjustments' in place.

Poor Mental Health

People with poor mental health

- Targeted work with people with poor mental health at engagement events and screening awareness training to encourage uptake.

Past Bad Experience

Anyone who has had a previous negative experience in an NHS setting

- The community engagement team talk to people about other options for accessing screening and health care through clinics etc and can encourage people to try to rebuild trust. Information and myth busting help with this.

Fear of a Cancer Diagnosis

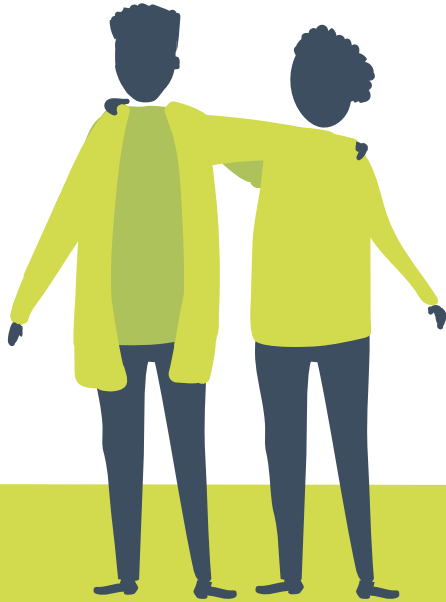
All groups

- Screening awareness sessions focus on information and facts to replace fear and encourage take up of screening.
- Emphasis is put on the progress made in cancer treatment and survival rates over recent years.
- Training and awareness raising includes myth busting to reduce the fear of diagnosis and treatment and put cancer incidence rates, age profiles etc into wider context.

There are many barriers to screening faced by people and these barriers can be the same across all the screening programmes. Working with communities to bust the myths and encourage screening goes a long way to increase the uptake of the NHS cancer screening programmes.



Case Studies



Case Studies

Answer Cancer collects personal experiences and quotes from individuals and groups as these are the best way to illustrate the stories of people who have experienced cancer first hand, either as an individual with cancer, a carer or a family member or friend.

Cancer has an enormous impact on the individual and their families, and by sharing their experiences and direct quotes helps to bring alive how our programme has worked for individuals and communities in a way that forges connections, promotes empathy, and gives us insight into the lives, culture and experiences of others.



Case Study 1

Ms 'H' is a 68-year-old woman who joined Health and Wellbeing sessions at Deeplish Community Centre. She has been living in the same neighbourhood for the past 30 years as a single parent. She had no immediate family around to provide her with any help or social connections. She struggled to support her children as a single mother with limited resources and support. She continued her efforts until her children were educated, independent and started working successfully, but they went on to live and work away in other towns and cities.

She was now leading an isolated and lonely life. This led to anxiety and low self-esteem. She was clearly battling with the chasm created after her children moved out. Therefore, she began struggling with carrying out everyday tasks and social connections. Moreover, her medical condition and constant struggle with diabetes and hypertension made things even harder resulting in a visible deterioration in her physical and mental wellbeing. She was reluctant to take initiative and any form of change towards staying well.

Intervention and Engagement:

Mrs. 'H's introduction to our wellbeing sessions was through a volunteer who interacted with her at another group. She joined our sessions, and we started working with her. We worked towards giving her motivation and help in uplifting her self-esteem. She was also offered a one-to-one session with our emotional support worker who helped her with recognition and understanding of her state of mind and guided her through pathways to improve her wellbeing. Our Cancer Awareness for Wellbeing sessions were of value to her.

She also benefitted from our weekly wellbeing and exercise sessions which have worked towards improving her physical and mental health.

She is visibly more active, happier, and confident. She contributes to all discussions along with making some good social connections with other participants of the group.

Feedback and comments:

She said, *"My relationship with my children improved after I started attending the sessions"*.

As an individual, she has transitioned from a lonely and anxious life towards becoming a healthier, confident, and engaged individual.

She is more aware of her needs and is in a better place to express them and enjoy life to its fullest.

She feels as if she has found a family in the group that she somehow had lost.

Case Study 2

Male, age 65+

"I've read a newspaper article earlier from Cancer Research UK, saying that with the technology and medical treatment is advancing, there are over one million cancer patients have been cured since 1980s."

"No one wants to be ill. No one wants to be in danger. I wish everyone could support the NHS cancer screening and follow their instructions. Help the NHS to help us. I am very grateful to have attended today's health talk. Through the talk, I learned more about bowel cancer and the importance of screening. The knowledge provided can help me and lot of other people. If cancer is caught early, proper treatment is received and 'on time' for it, it means there is a 'second life' for us. I encourage everyone to go for cancer screening."

Quotes from other participants:

"I am new in the UK. I do not know much about the NHS system and the bowel cancer screening. It is good to know about it. And the test is free. Thank you for the talks."

"My brother had bowel cancer when he was under 50. It's devastating news for the family. I joined the working group and hope to learn more about the disease and raise awareness in the community."

"Before the talk, I do not know how to collect the poo sample. I wonder how to take the poo out of the water. Now I know I can use a container or tissue to hold the poo."

"I learned about healthy eating. Having less fried food, less spicy food. Do more exercises."

"I did the test. I sent it back. I am happy to be the gutsy champion and will promote to more people."

Case Study 3

Marian (pseudonym), a trained bilingual peer mentor, explained how this project impacted her life. Marian's Journey and Voice: Empowering Voices through the 'Go Screening' Campaign.

I am Marian, and I'm happy to share my journey as part of NESTAC Go Screening Campaign, a project that has become a vital part of my life. This initiative has been more than just a programme for me, it was a powerful experience that changed my life, as I learnt how to empower women like me in my community. The most important thing is that I never thought that I can do the things I've done in the project. I discovered another me, my own strengths I was not aware of, and I could not believe I can lead a group of women, but I did, and I like it, I am continuing to practice my leadership skills.

When I joined the Go Screening Campaign, I had no idea how much it would shape me. I am also a survivor of Female Genital Mutilation (FGM) and I have been through sexual abuse when I was young, by a cousin I was later forced to marry. It was acceptable in my community back home, and I did not know it was incest. I received lots of support at NESTAC with the other project, the SOS.

When I joined the women's group I decided to volunteer, and they explain about the campaign. I decided to join the training to give back and try to help. The 3-day Peer Mentoring Training was intense but an eye opener. I learnt a lot, about FGM, cervical cancer, and leadership. Everything was new to me, and I got what I needed to go back to my community. It was scary at the beginning, but the lovely people at NESTAC were always there to support me. I was not alone, if I made a mistake they corrected them, and I was able to learn.

I loved doing the coffee mornings, I did not know I could bring change by talking like this, drinking tea and coffee and biscuits, and sharing stories. I was also doing it in English and in Arabic, my own language. I was able to answer questions when women asked about cervical cancer, they also liked to discuss sex and FGM and it was me talking and advising them. Seeing the change amongst my peers because of my sessions, when many of them did not know what 'cervical screening' was at the beginning, was so incredible, I felt very important and proud to share what I learnt and encourage them to take the screening tests.

This campaign helped increase my confidence, my capacity to speak in front of people, and to encourage women like me. Exchanging with other women and sharing experiences became my strength, this project is giving me a real purpose of living, an opportunity to feel safe, strong, and protected. My vulnerability disappears when I am working on the project with other women who cannot understand, and I am helping them to understand why this screening is important. I want us all to go through learning to stay healthy and understand some disease that can happen in parts of our bodies no one really talks about.

Now that I have started this, I can't help dreaming all the time, seeing me doing big things. Because of this project, I will now register to study to become a community health worker and support women like me when I complete my study. I cannot stop now because women in my community are seeing me as a role model, they now come to ask me questions about health even if I don't know the answer. I now have a responsibility, I need to break taboos, and make change, I have support here, and I am proud to be a Peer Mentor, and I can't wait to see what is next in my journey.

Case Study 4

Our Answer Cancer team member attended the Salford Pink Picnic to raise awareness of cancer and to promote the importance of attending cancer checks. During the event, they spoke to a non-binary individual in their late twenties who began a conversation about how they had not attended checks for cervical cancer because they were worried about whether their non-binary identity would be respected.

The team member was able to reassure them that they would be treated with respect by the NHS and that the individual could contact their GP surgery to talk further about this. They discussed how important it is for anyone with a cervix to attend a smear test and the non-binary individual said that they would follow up their invitation. They then asked about checking breasts and the team member was able to provide them with accessible information to take away about breast checks and spoke about the importance of being aware of any changes.

What have we learnt from this?

Fear of identity discrimination can prevent people from taking up invitations for screenings and that our conversations with people at events like the Pink Picnic can reassure them that they will be treated with respect as well as highlighting the importance to their health of attending screenings.

Case Study 5

The Answer Cancer Engagement Team had a stall at Salford's Pink Picnic where they provided information and had conversations with attendees to raise awareness of cancer and promote the importance of cancer screenings.

During the day, a member of the team had a conversation with a lesbian couple about the importance of checking their breasts, discussing how any changes are important to act on. Both women were very well informed about this subject, but during the conversation, the engagement worker also asked if they were both up to date with their cervical smear tests. One member of the couple sighed, and looked at her other half, saying, ***"I'm up to date, but my wife isn't. She won't go and I'm worried about her!"*** The engagement worker encouraged the other woman to talk about why she wasn't taking up her invitations for a cervical smear and found out that she was worried about discomfort. The engagement worker was able to offer her reassurance that she could talk to healthcare professionals about her fears and ask for help. Both women were really encouraged by this conversation with the Answer Cancer Engagement team and said that they would support each other to follow this up with their GP practice.

What have we learnt from this?

Many women and those with a cervix are worried about experiencing discomfort during a cervical smear test and this can be a barrier to them taking up a screening invitation. They don't know that they can talk to a healthcare professional about their worries and that there are tips and techniques for making the experience more comfortable.

As well as promoting the importance of attending cervical screenings, the Answer Cancer Team can help by letting everyone know that support is available.

Case Study 6

The Answer Cancer Engagement team regularly attend community events where we provide information to people and, more importantly, have conversations with them to raise awareness of cancer and promote the importance of cancer screening. At the Big Health Day! for people living with learning disabilities, one of our team had a conversation with a carer in her fifties who had never taken up her invitation for a breast screening because she was nervous about the procedure. She said, ***“I really don’t like the idea of a mammogram, so I haven’t attended my breast screening.”*** Our team member was able to talk to her about what was involved, dispel some of the myths that the woman had heard and provide tips about how to make the experience more comfortable. This conversation encouraged the woman, and our team member was able to provide her with the breast screening number so she could arrange her own appointment.

The great thing about these conversations is the fact that people can cover a range of subjects, and the conversation above led to another one about the woman’s brother-in-law who had recently finished successful treatment for cancer, but who was still suffering health problems that were affecting her sister and wider family. The Engagement team member was able to provide information about the helplines run by Macmillan and Cancer Research UK (CRUK) where they could talk to a cancer nurse and get the answers, they needed to relieve their worries.

What have we learnt from this?

Face-to-face conversations in the community are crucial for sharing vital information about the importance of being aware of cancer and attending screenings. Making space for people to talk about their worries and experiences allows for conversations that are personal and meaningful where our team can respond to a person’s needs, answer individual questions, and provide personalised information.

Case Study 7

Cancer can affect anyone, and our Answer Cancer Engagement Team are reaching out to all members of the Greater Manchester community to ensure that they have conversations with them to raise awareness of cancer and promote the importance of cancer screening. Our team travel across the area to meet a wide range of people and many of our conversations take place in informal community settings that people are familiar with meaning that they feel more comfortable and open to talking about their experiences and worries. We can start relaxed conversations and hear things that health professionals do not, meaning that we can provide people who face barriers with accurate information that helps them to make informed decisions.

As part of this, our team are ensuring that they talk to those who are living with substance misuse and homelessness and recently attended a health drop-in session at a men's hostel in Bolton set up by the local Health Improvement Team.

During this event, a team member chatted to a man in his thirties who shared his worries about the history of cancer amongst members of his family and how this was weighing on his mind. He was happy to be given information about the Cancer Research UK (CRUK) helpline where he could put his questions to a cancer nurse. As the conversation continued, the man revealed that he had testicular lumps which had been checked by a GP over a decade before, but which had since then, changed in size. He had not spoken to the hostel support staff or the nurse who attends regularly about this matter. Our team member encouraged him to visit his GP to get these examined again but the man said that making an appointment was very difficult for him. Our team member supported him to speak to a support worker at the hostel who said that they would help him to make an appointment.

What have we learnt from this?

If Answer Cancer is to continue to play a part in challenging health inequalities, travelling across Greater Manchester to meet people in places they are comfortable in and making time to talk is vital for reaching individuals who face barriers to accessing healthcare to ensure that they are aware of cancer, the importance of seeking help and attending screenings.

Case Study 8

As a VCSE partnership, Answer Cancer reaches out to other groups who represent communities that are seldom heard in order start conversations about cancer awareness and the importance of attending screenings. Conversations are two way and an essential part of this is seeking to understand the experiences of communities and the barriers that they face. As a partnership programme we want to ensure that their voices are heard and that their experiences are shared with service providers to improve access and challenge health inequalities.

Through our VCSE network, we were invited by the Ethnic Minority and Traveller Achievement Service (EMTAS) to visit the Duchy Estate to talk to the traveller community and present a session with a focus on breast screening. Our EMTAS colleague advised us before the session about cultural appropriateness and language usage, especially around reference to intimate body parts. Using this knowledge meant that the session ran smoothly and that the participants felt respected, ensuring a relaxed and open session where they felt safe to share their experiences.

Several months later, our Engagement Team member met our EMTAS colleague again and she shared how valuable the session had been as it had promoted discussion around the subject of cancer, something that would not have been talked about in the past. Participants were able to share with their neighbours, friends, and families the importance of being cancer aware and attending screenings.

What have we learnt from this?

Our unique position as a VCSE partnership programme allows us to span the gap between seldom heard communities and statutory service providers to provide information about the barriers that communities face sharing valuable information that will help them to improve access and reduce health inequalities. Being a VCSE partnership we can rely on the specialist knowledge that exists in our networks of other VCSE organisations to help us to understand the traditions and cultures of the communities that we have conversations with to ensure that communication is effective and that participants find the information accessible and engaging.

Case Study 9

Our 'Bee Seen Get Screened' trainer delivered a cervical cancer awareness session to the company N Brown who had recently signed up to the pledge. This Manchester based company is a top 10 UK clothing and footwear digital retailer. Their retail brands include JD Williams, Simply Be, and Jacamo and they employ over 1,800 staff.

The session included a quiz, smear-test-myth-busting, discussions around symptoms or body changes to look out for, tips and coping mechanisms for anyone who finds going for a smear stressful, and information on checking eligibility for a smear and most importantly - how to book an appointment.

The awareness raising session was part of a week of activity within N Brown. Members of their teams shared their personal stories of living with, and around cervical cancer and screening messages were linked to these.

This personal approach was very impactful and included the case study below shared by N Brown:

As it's Cervical Screening Awareness Week, I wanted to share my own story.

When I was just six years old my Mum, Jane, was diagnosed with cervical cancer.

Reminiscing on my Mum, she was by no means an 'unhealthy' person. Like the rest of us, she enjoyed a night out with her friends and the odd wine. I remember being around five years old and her coming down the stairs all dolled up, ready for a night out with her friends. I shouted 'Mum, you look like... a tart!', innocently thinking of the delicious raspberry tarts my dad would give me with my lunch. Thankfully she found it hilarious!

My Mum really cared about her health and fitness and went to the gym four times a week and enjoyed an active lifestyle. She loved a pamper and a good charity shop! We really were inseparable. Her mini-me.

I don't remember her being diagnosed, but I remember a shift. She was going to the hospital more, losing her appetite, and taking longer to get up in the morning. That turned into staying for weeks in the hospital. My Mum was known for her long, vibrant auburn hair, and one thing that I'm grateful for is that she never had to go through chemotherapy, losing her hair would have been like losing a part of her personality and selfishly, I'm glad I get to remember her looking the way she always did.

As a Caregiver in a hospital, she was very aware of the importance of getting her smear test. Over time she noticed certain symptoms that were often linked with cervical cancer, so she went for a check-up. The doctor initially brushed it off as early onset menopause, but she wasn't convinced and booked in for a smear test, where they found irregular cells. Ultimately, the cancer was terminal. Treatment meant we were able to spend a little more time with her, as she battled on for two years. On 1 January 2000, she passed away aged 36.

Thankfully, advances in treatment survival rates from cervical cancer have improved over the past 23 years. Every person with a cervix over the age of 25 is strongly encouraged to get a smear test every three to five years (depending on age). The HPV vaccine is available to those aged 12 and 13.

As I veer closer to the age my Mum was when she passed away, I don't take each day for granted and try to lead my life with kindness and laughter, as she did.

Case Study 10

The story below was shared with the Answer Cancer Team by one of our Champions who wanted other people to know about his experience. It is shared with you just as he emailed it in his own words.

Over the years I have subscribed to several Bowel Screening Tests, all were negative. My wife received a FIT test pack in January 2020 which she completed and had a negative result. I had not received one, which struck me as unusual as we normally received the packs at about the same time. As a Champion, I knew the importance of regular screening, so I applied for a test and the result was to arrange an appointment for a colonoscopy. I must mention that at this point I didn't have any symptoms like blood in the toilet or on tissue, so I was somewhat surprised.

The initial stage was a pre-procedure Interview outlining what was involved in a colonoscopy. After about an hour I was asked if I wanted to go ahead with a colonoscopy. My response was that with an offer like that how could I refuse!!! The Nurse went on to explain that some people decline the procedure. That really amazed me.

Covid delayed the colonoscopy which eventually happened late in June 2020. The result was that there was a cancerous tumour. Not the best news I have ever had.

This was followed by a CT scan, and I had surgery in early August 2020 for the removal of the tumour. All went well and during the next 12 months I has quarterly blood tests which were all in a satisfactory range.

12 months after surgery I had a follow up colonoscopy. Some things are just too tempting!!! That showed two polyps which were removed and didn't seem to cause too much concern to the surgeon. All very comforting. Since than I have had further blood tests which are all satisfactory.

I am due another colonoscopy sometime in the next month. As you can imagine, that's a major entry in my diary. I tell all my friends and acquaintances to take the tests and not to ignore the results. I was very lucky and to be sure, don't I just know it!

Case Study 11

I am a woman of Black African heritage, and being a Cancer Champion gives me confidence to speak to my community about cancer. There is a stigma in our community about cancer and people don't usually talk about it so being a Champion helps raise awareness in the community and hopefully encourages others to speak up and seek support when they need it.

Since completing the Cancer Champion training, I have spoken to all the women who attend our monthly and weekly events and have encouraged them to attend their screening appointments when offered and to look out for signs and symptoms. In total I've spoken to roughly 45 people.

Whilst raising awareness of the screening programmes I spoke to 3 women who were all anxious about attending their screening and didn't know how to book it. I discussed the fears with the women and supported them to book an appointment. They have all since reported back that they have attended their screening appointment and were happy everything was fine.

Case Study 12

As an organisation we already gave staff up to 5 days special leave and allowed staff to attend hospital appointments during the working day. However, we signed up to Be Seen Get Screened and launched the programme back in April 23.

We used the launch to raise awareness to say it is not frowned upon to take time off and go and get themselves checked during the working day – whenever you are called to get screened or just need to for anything. We also said this paid time off was in addition to the 5 days special leave they can have per year, so that it didn't eat into it.

One member of staff saw the launch and the webinar we did and went to get screened. As a result, she received a cancer diagnosis and is now having treatment. She specifically mentioned that the scheme was what raised her awareness and prompted her to attend her screening appointment to us, so it is clear to us that the awareness activity around the be seen get screened campaign led to her to getting the early intervention she needed which is brilliant.

Case Study 13

LGBTQ+ people face many barriers with accessing health care and the main barrier is invisibility – and lack of awareness. This is especially problematic if we are thinking in relation to gender rather than the body parts each individual person has. For example, we receive many requests from GP practices to help update screening letters to be inclusive for trans and non-binary patients – and to also promote the work they are doing to be inclusive of LGBTQ+ communities.

Over the last few years there has been a lot of work undertaken on this nationally (from LGBTQ+ charities such as OUTpatients and support from Macmillan for example) As a service working in Greater Manchester it is our role to ensure that primary care services specifically are aware of the needs to reach out to their LGBTQ+ patients – and in the most inclusive and appropriate way.

In primary care we have been able to refer practices on to resources such as The Gender Identity Toolkit for General Practice which includes guidance from the Institute of General Practice Managers on how to invite trans and non-binary patients to access screening services that in the past they may have not been called for.

Without seeing any visibility or inclusion in general practice many LGBTQ+ people have told us that they wouldn't have felt able to ask questions of their primary care provider, and in turn their health care professional would have been unaware of the fact that these patients had been missed from invitations to screening or even the opportunity to promote appropriate support services to them.

The work of Cancer Champions is important as personal experiences really do make a huge difference. Also, I think it is important for all Cancer Champions to try to be aware of the different experiences of all communities and be aware of where and how to signpost people for the most fitting support and services that they may be able to benefit from.

Case Study 14

In early 2010 I was diagnosed with Prostate Cancer, only by chance in answering a simple question at my annual medication review, "is anything concerning your health?" In my reply of increased visits to the bathroom overnight, I was sent for a simple PSA blood test and that's when my Cancer journey began.

However, the words spoken to me during my diagnosis and treatment were not stored and questioned during this time, due mainly to a state of being "shellshocked" i.e. the words spoken meant nothing to me and I was in a "fight or flight" state. In fact, it was a basic ignorance and its realisation of that made me endeavour to know why and what Prostate Cancer was.

So, after my early retirement I began volunteering for various charities, first the Stroke Association and then with PCUK, bucket rattling at Football Matches. I then made it my goal to discover and understand what and why Prostate Cancer occurs, I then was invited to proofread various PCUK publications. As a result, I was then encouraged to become a volunteer speaker which resulted in my increased desire to discover every aspect of the Cancer from awareness through diagnosis to subsequent treatments and ongoing research.

In addition, we had a vibrant and active PCUK volunteer hub, which unfortunately has been effectively dissolved, due probably to the fallout from the pandemic. However, during this time, I developed a strong friendship and working relationship with Tony Collier and with Phil Ormesher the latter being a leading speaker with Answer Cancer and that is how I have become a Prostate Cancer awareness speaker for Answer Cancer.

Tony, Phil, and I have become active lobbyists for positive changes in attitudes to testing and diagnostics, by encouraging active education, both in PCUK and GP practices.

Subsequently, I am now a Trustee of a small charity supporting Prostate Cancer Support Groups in and around the Northwest and I also run a group in the Stockport area.

Being an Answer Cancer Champion gives me great satisfaction as relaying my journey to others is very cathartic as it is a real-life example that being proactive with your health can make a difference to your cancer journey.

While volunteering as an Answer Cancer Champion I've made sure my friends and family are also aware of the signs and symptoms and the importance of cancer screening and as a result, 4 friends have been diagnosed early and are fortunately currently in recovery, plus many have come to me regarding non-prostate cancer issues and I can advise and guide on a nonclinical basis.

In my opinion and experience men and partners become more aware regarding testing, through the talks, however we have the extra issue, that this is not an official screening method just a blood test and that some GPs are reticent to agree to, so we at times need to emphasise and manage the sometimes situation of none positivity by some GPs, so Phil and I are now involved in providing PSA testing via a third party who are clinically recognised.

Case Study 15

As part of the community day for staff at the MRI, I spoke to two medical professionals one of whom said she had never been for breast screening and wasn't intending to go despite having just received her third invite. She said that she led a healthy lifestyle, ate well, didn't drink alcohol, had never smoked, and had breast fed her three children for a long time. She also said that she self-checked her breasts monthly. She believed that all these protective factors meant that she was at very low risk for breast cancer and therefore didn't need screening. I explained that low risk isn't no risk, showed her the size of lump that can be picked up in a mammogram compared to one that is first likely to be felt in a self-examination and asked her to try to find the lumps in our breast model, where she struggled to spot them all. I commented that she was doing such a great job in looking after her health that she should invest a further 30 mins every three years to have her mammogram.

Her friend and colleague, despite being in her mid-50's, said she had never attended a smear test as she was scared and believed it would be painful. We discussed what specifically she was afraid of, talked through the process, and I suggested that she might go to the MFT Smears Here service where she could get on site screening from a professor, who is probably the most experienced practitioner she could hope for. We discussed the conversation she could have when booking the appointment to make sure the sample taker was aware of her fears and discussed specific strategies for minimising her stress on the day.

Her friend offered to attend the appointment with her and between them they agreed to go away and book appointments that day and support one another through the process.



Working with Primary Care Networks



Working with Primary Care Networks

Answer Cancer is having a positive impact working with PCNs on cervical screening uptake rates.

We are continuing to work with PCNs in Manchester, Oldham, Rochdale, and Salford.

This work was recently showcased at a GM Primary Care Meeting, with over 200 health professionals present. The work was hugely appreciated, and this generated more requests from GPs and Primary Care Network Managers for Answer Cancer to support them in the same way. This has proven to be an extremely valuable piece of work that will be delivered to more PCNs, in our target areas.

One area with significant results was Oldham where we worked with five local GP practices, Greenbank, Hopwood House, Alexandra Medical Practice, Sun Valley and Jarvis, part of Oldham Central PCN.

The aim was to deliver on a Population Health Management objective to increase cervical screening within our local community by making calls to previous non-responders for cervical screening.

The target was to contact 1,500 patients with 500 conversations and 250 patients booked in for cervical screening. These targets were exceeded as shown in the results here.

2,423 calls made.

1,080 conversations had.

504 bookings made for screening appointments.

Additionally, Answer Cancer's Year Five spot purchase funding investment enabled Fatima Women's Association, Voice of BME Trafford and The Federation of Jewish Services to continue our work with the 7 PCNs in our priority areas.

Report from The Fed

The religious Jewish community has been one that traditional programmes have found hard to engage. The Fed were able to communicate with individuals using appropriate messaging (no naming sensitive body parts) and community languages. Their volunteers understood the traditions and culture of their community and were able to start the vital conversations that would encourage women to take up their cervical screening invitation. **108** individuals committed to attending cancer screenings, of which **103** had appointments booked by the project's volunteers.

The organisations carrying out this spot purchasing work with PCNs have reported that the work has slowed down recently within the practices. This was due to several reasons. NHS seasonal campaigns being one. With Flu vaccines being a priority, this left less time for nurses to do Cervical screening and admin not having as much time to prepare for our volunteers to go in to make the calls.

Conclusion

This report has highlighted the achievements of the Answer Cancer Programme in Year Five and the importance of working with communities to raise awareness of cancer screening.

Year Six will be the final year of Answer Cancer under the current contract, and as there are no guarantees that the programme will continue beyond Year Six the focus will shift to the legacy of the programme.

It is the intention that the programme will continue to deliver training and awareness sessions throughout Year Six and will also continue to sign up organisations to the Bee Seen Get Screened pledge. However, there will also be a lot of focus on ensuring that the communities we engage with are geared up towards continuing the work in some way without the oversight of Answer Cancer.

The case studies contained within the report highlight the need for communication and show how community members spreading messages can make a difference to the lives of their peers.

For Year Six, Answer Cancer will continue to work with these groups to ensure that the messages continue beyond the end of the Answer Cancer Programme.

Answer Cancer will continue to deliver the VCSE led cancer screening engagement programme in **2024/25** and will remain committed to ensuring that Greater Manchester's VCSE groups and organisations play a key role in ensuring better outcomes for all of the citizens of Greater Manchester.



Acknowledgements

We would like to thank everyone who has been involved with Answer Cancer. To everyone who has been involved in the programme since the beginning and to everyone who became involved as the programme progressed, your engagement and activities have positively impacted the lives of people living in Greater Manchester.

This report has demonstrated some of the impact you have contributed to and the programme's overall impact.

For more information about this report or Answer Cancer, please contact us:

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