



LEEDS
BECKETT
UNIVERSITY

Citation:

Seims, A and Woodward, J and White, J and Bunyan, A-M and O'Dwyer, L (2018) Wise Up To Cancer - can it make a difference? Project Report. Yorkshire Cancer Research.

Link to Leeds Beckett Repository record:

<https://eprints.leedsbeckett.ac.uk/id/eprint/5618/>

Document Version:

Monograph (Published Version)

The aim of the Leeds Beckett Repository is to provide open access to our research, as required by funder policies and permitted by publishers and copyright law.

The Leeds Beckett repository holds a wide range of publications, each of which has been checked for copyright and the relevant embargo period has been applied by the Research Services team.

We operate on a standard take-down policy. If you are the author or publisher of an output and you would like it removed from the repository, please [contact us](#) and we will investigate on a case-by-case basis.

Each thesis in the repository has been cleared where necessary by the author for third party copyright. If you would like a thesis to be removed from the repository or believe there is an issue with copyright, please contact us on openaccess@leedsbeckett.ac.uk and we will investigate on a case-by-case basis.

Appendices

Appendix 1: WUTC Baseline questionnaire

CANCER SCREENING

PROMPT Ask questions where applicable

21. **Women aged 25 to 64 years only** - Did you attend the most recent cervical screening appointment you were invited to? *(men - skip to question 23)*
- Yes No Not sure Not been invited
22. **Women aged 50 to 70 years** - Did you attend the most recent breast screening appointment you were invited to?
- Yes No Not sure Not been invited
23. **Men AND women aged 60 to 74 years only** - Did you complete and return the most recent bowel cancer screening test you were sent?
- Yes No Not sure Not received a test
24. **Men AND women all ages** - Are you aware that if you've had a cough for three weeks or more and you are aged over 50 years you can visit your GP to discuss having a chest x-ray?
- Yes Not aware

SCREENING: FUTURE CHANGES

PROMPT Discuss the importance of cancer screening, particularly if they have any associated symptoms with the cancers below.

25. As a result of this discussion, do you intend to do any of the following?
(where applicable to their age and sex)
- Take steps to complete cervical screening
- Take steps to complete bowel cancer screening
- Take steps to complete breast cancer screening
- Take steps to get a chest x-ray

5

YOUR FEEDBACK

PROMPT If this wasn't covered earlier, briefly explain the work of Yorkshire Cancer Research

26. Had you heard of Yorkshire Cancer Research before today?
- Yes No

27. Thinking about your experience here today, how much do you agree or disagree with the following statements:

	Strongly agree	Agree	No opinion	Disagree	Strongly disagree
I am considering changing my lifestyle as a result of 'Wise Up To Cancer'	<input type="checkbox"/>				
I have learnt something new about cancer signs and symptoms	<input type="checkbox"/>				
I am more likely to speak to my GP about cancer signs and symptoms in the future	<input type="checkbox"/>				
I am more likely to go to screening (if applicable)	<input type="checkbox"/>				
I would recommend 'Wise Up To Cancer' to friends and family	<input type="checkbox"/>				
I feel positive about Yorkshire Cancer Research funding 'Wise Up To Cancer'	<input type="checkbox"/>				

FOLLOW-UP RESEARCH

We would like you to complete a follow-up questionnaire in 6 to 8 weeks so we can see how taking part in 'Wise Up To Cancer' has helped you.

If you are happy to do this, please provide your name and either:

- an email address if you wish to complete the follow-up questionnaire online or
- a postal address if you would like to complete a paper copy of the follow-up questionnaire.

Everyone taking part in the follow-up questionnaire will be entered into a free prize draw to win Love to Shop vouchers (one prize of £100, two prizes of £50 and five prizes of £20).

Name:

Email address:

Postal address:

Prize draw rules

Entry to the prize draw is restricted to one entry per person. Multiple entries will be disqualified. Automated entries, bulk entries or third party entries will be disqualified. This prize draw is open to UK residents only. Prizes can only be sent to a valid UK address. Winners will be chosen at random from all valid entries on 30th November 2017.

Any surveys received after this date will not be entered into the prize draw. Winners will be contacted via email or postal address as provided. The Judge's decision is final and no correspondence will be entered into. Leeds Beckett University is compliant with the Data Protection Act. Our policy is such that we will not pass on your details to any third party without your prior consent.

6



Wise Up To Cancer Questionnaire

Location:

Staff member delivering questionnaire:

Date:

ABOUT YOU

1. Full Postcode
2. Are you Male Female Prefer not to say
3. Age (in years)
4. How would you describe your ethnic background?
- | | | | |
|--|------------------------------------|--------------------------------------|--|
| White | Black/Black British | Asian/Asian British | Mixed/Multiple |
| <input type="checkbox"/> British | <input type="checkbox"/> Caribbean | <input type="checkbox"/> Indian | <input type="checkbox"/> White & Black Caribbean |
| <input type="checkbox"/> Irish | <input type="checkbox"/> African | <input type="checkbox"/> Pakistani | <input type="checkbox"/> White & Black African |
| <input type="checkbox"/> Gypsy & Irish traveller | <input type="checkbox"/> Other | <input type="checkbox"/> Bangladeshi | <input type="checkbox"/> White & Asian |
| <input type="checkbox"/> Other | | <input type="checkbox"/> Chinese | <input type="checkbox"/> Other |
| | | <input type="checkbox"/> Other | |
- Other Ethnic Group**
- Arab
- Any other (please state)

1

LIFESTYLE

WEIGHT

5. Are you a healthy weight at the moment?
 Yes No Not sure

PROMPT Ask the individual if they are happy to provide their measurements and if they don't know them, ask if they would like to be measured

6. Do you know your height and weight?

Height (m): Weight (kg):

BMI CALCULATION: BMI = weight (kg)/height (m)²

CLASSIFICATION	BMI
Underweight	< 18.5
Normal or healthy weight	18.6 - 24.9
Overweight	25 - 29.9
Obese	> 30

Your calculated body mass index is

which is classed as

EATING HABITS

PROMPT Provide explanations and examples to assist understanding where necessary

7. In a typical week, how many times do you eat red meat (e.g. beef, lamb, pork) or processed meat (e.g. bacon, ham, salami, corned beef and sausage)?

8. In a typical week, how many times do you eat whole grain/wholemeal pasta, bread, or cereal?

9. On a typical day, how many portions of fruit or vegetables do you eat?

PHYSICAL ACTIVITY

PROMPT Provide explanations and examples to assist understanding where necessary

10. In a typical week, how many days do you do a total of at least 30 minutes of exercise or physical activity (e.g. brisk walking, jogging, swimming, cycling which gets you out of breath)?

ALCOHOL CONSUMPTION

11. How often do you have a drink containing alcohol?

- Never (skip to question 14) Monthly or less 2-4 times per month
 2-3 times per week 4 or more times per week

PROMPT Provide explanations and examples to assist understanding where necessary

12. How many units of alcohol do you drink on a typical day when you are drinking?

- 1-2 3-4 5-6 7-8 9 or more

13. How often do you have 5 or more units on a single occasion?

- Never Less than monthly Monthly Weekly Daily or almost daily

2

SMOKING

PROMPT Provide explanations and examples to assist understanding where necessary

14. Do you smoke tobacco (including shisha)?

- Yes, every day Yes, but not every day No, I've quit No, never have

15. Do you use smokeless tobacco?

- Yes, every day Yes, but not every day No, I've quit No, never have

LIFESTYLE: FUTURE CHANGES

PROMPT Review the above lifestyle responses and discuss making changes to these lifestyle behaviours. Suggest that they are better making one or two changes that are achievable rather than trying to set many goals.

16. Is there anything you would like to change about your lifestyle factors we have discussed?

Notes:

Weight and diet: Reduce my weight Eat a healthier diet

Did you signpost the client to their local weight management service? Yes No

Physical activity: Be more physically active

Did you signpost the client to their local physical activity support service? Yes No

Alcohol: Cut down on my alcohol consumption Give up alcohol

Did you signpost the client to their local alcohol support service? Yes No

Smoking: Cut down on smoking Stop smoking Cut down on smokeless tobacco

Stop using smokeless tobacco

Did you signpost the client to their local smoking cessation service? Yes No

Other lifestyle goals (up to three)

Other lifestyle signposting (up to three)

3

CANCER AWARENESS

PROMPT This is an open question - **DO NOT** read out the options below but use those as a guide to record their responses

17. Please name as many cancer early warning signs and symptoms as you can think of:

- | | | |
|---|---|---|
| <input type="checkbox"/> Lump/swelling | <input type="checkbox"/> Change in appearance of mole | <input type="checkbox"/> Blurred vision |
| <input type="checkbox"/> Pain | <input type="checkbox"/> Weight loss | <input type="checkbox"/> Feeling weak |
| <input type="checkbox"/> Bleeding | <input type="checkbox"/> Tiredness/fatigue | <input type="checkbox"/> Nothing |
| <input type="checkbox"/> Cough/hoarseness | <input type="checkbox"/> Nausea/sickness | <input type="checkbox"/> Refusal |
| <input type="checkbox"/> Change in bowel/bladder habits | <input type="checkbox"/> Generally unwell | <input type="checkbox"/> Don't know |
| <input type="checkbox"/> Difficulty swallowing | <input type="checkbox"/> Bruising | <input type="checkbox"/> Other |
| <input type="checkbox"/> Sore that does not heal | <input type="checkbox"/> Loss of appetite | |

If other please state:

PROMPT Use the 'Wise Up To Cancer' information leaflet to discuss cancer signs and symptoms then use this section to record any signs and symptoms they have experienced.

18. Have you recently experienced any of the following signs and/or symptoms?

In men and women

- A cough that has lasted for three weeks or more
 Repeated chest infections
 Breathlessness
 An ache or pain in the chest or shoulder that has lasted some time
 Blood in poo or looser poo for three weeks or more
 Weight loss for no obvious reason
 A pain or lump in your stomach
 Feeling more tired than usual for some time
 A change to a mole, freckle or normal patch of skin
 A mole or growth that bleeds, crusts or scabs
 Blood in your urine
 A lump or thickening in the breast or armpit
 Changes to the skin of the breast
 Changes in the shape or size of the breast
 Nipple changes or discharge

In men

- Having to rush to the toilet to pass urine
 Passing urine more often than usual, especially at night
 Feeling that you've not completely emptied your bladder

In women

- Bleeding from your vagina at times other than during their period
 Discomfort or pain during sex

19. If you have had any of these signs and symptoms, have you spoken to your GP?

- Yes No

20. After today, do you intend to contact your GP to discuss these?

- Yes No

4

Appendix 2: Template for the WUTC follow-up questionnaire



Wise Up To Cancer Questionnaire

Dear **participant's name inserted here**,

You recently took part in 'Wise Up To Cancer' at **location of initiative inserted here** on **date of initiative inserted here**.

The aim of 'Wise Up To Cancer' was to help people to:

- reduce the risk of getting cancer by promoting healthy lifestyles
- increase early diagnosis of cancer by improving awareness of cancer signs and symptoms
- increase early diagnosis of cancer by encouraging people to take part in cancer screening

We would like to know how 'Wise Up To Cancer' has helped you. Your feedback is valuable to us because it will help us improve 'Wise Up To Cancer' in the future

Everyone who completes the questionnaire can enter the free prize draw to win 'Love to Shop' high street vouchers - there is more information about this at the end of the questionnaire

If you have since changed your mind about taking part then please do not complete the questionnaire.

LIFESTYLE CHANGES

As part of 'Wise Up To Cancer' you mentioned that you would like to make the following changes to your lifestyle:

Previous goals chosen during the initiative are seeded here and the relevant sections below are included to ask about achievement of those goals

Since 'Wise Up To Cancer', have you made any of the following changes related to your weight and/or diet? Please select all that apply

- I have contacted a weight management service.....
- I have made an appointment with a weight management service
- I have attended one or more session(s) at a weight management service
- I have spoken to my GP about my weight and/or diet.....
- I have lost weight.....
- I am eating less red and/or processed meat
- I am eating more fruit and vegetables.....
- I am eating more wholegrain/wholemeal pasta, bread, or cereal
- I am eating a healthier diet.....
- I am trying to be more active in my everyday life (for example, walking or cycling more, sitting down less, using stairs instead of lifts)
- I have not yet made any changes related to my weight or diet, but I plan to in the next six months
- I have not made any changes related to my weight or diet
- Other

If 'other', please state: _____

Since 'Wise Up To Cancer', have you made any of the following changes related to your physical activity? Please select all that apply

- I have contacted a supervised physical activity service (for example, exercise referral programme, exercise or gym class)

- I have made an appointment with a supervised physical activity service
 - I have attended one or more session(s) with a supervised physical activity service (for example, exercise referral programme, exercise or gym class)
 - I have started my own personal physical activity programme (for example, using a phone app such as the Couch to 5k programme or a fitness DVD)
 - I am trying to be more active in my everyday life (for example, walking or cycling more, sitting down less, using stairs instead of lifts)
 - I have not yet made any changes related to physical activity, but I plan to in the next six months
 - I have not made any changes related to physical activity.....
 - Other.....
- If 'other', please state: _____
- _____

Since 'Wise Up To Cancer', have you made any of the following changes related to your alcohol consumption? Please select all that apply

- I have contacted an alcohol support service
 - I have made an appointment with an alcohol support service
 - I have attended one or more session(s) at an alcohol support service.....
 - I have spoken to my GP about my alcohol consumption.....
 - I have cut down on alcohol consumption.....
 - I have given up alcohol.....
 - I have not yet made any changes related to alcohol consumption yet, but I plan to in the next six months
 - I have not made any changes related to my alcohol consumption.....
 - Other.....
- If 'other', please state: _____
- _____

Since 'Wise Up To Cancer', have you made any of the following changes related to your smoking? Please select all that apply

- I have contacted a smoking support service
- I have made an appointment with a smoking support service
- I have attended one or more session(s) at a smoking support service.....
- I have spoken to my GP about my smoking and/or use of smokeless tobacco
- I have cut down on smoking tobacco.....
- I have stopped smoking tobacco.....
- I have cut down on smokeless tobacco
- I have stopped using smokeless tobacco.....
- I have not yet made any changes related to my smoking or use of smokeless tobacco, but I plan to in the next six months
- I have not made any changes related to my smoking or use of smokeless tobacco.....
- Other.....

If 'other', please state: _____

The following three questions are only shown if they chose 1 or more goals outside of the pre-determined lifestyle-related goals.

Please tell us about any other lifestyle changes you have made relating to (insert other goal set):

1. _____

Please tell us about any other lifestyle changes you have made relating to (insert other goal set):

2. _____

Please tell us about any other lifestyle changes you have made relating to (insert other goal set):

3. _____

Have your recent lifestyle changes affected the way you feel at all? If so, in what way?

If you haven't made any lifestyle changes since 'Wise Up To Cancer', what do you think has prevented you from doing so?

If they did not set any lifestyle goals then only the paragraph below is shown.

You did not set any lifestyle goals in the previous survey, however if you have since decided to make some lifestyle changes as a result of Wise Up To Cancer then please describe these below

CANCER AWARENESS

When you took part in 'Wise Up To Cancer', you mentioned you have been experiencing the following cancer signs and/or symptoms:

Signs and symptoms discussed during the initiative are listed here

Since 'Wise Up To Cancer', have you spoken to your GP (or other medical professional) about these?

Yes.....

No.....

If you have not spoken to your GP say what stopped you from doing so? Please select all that apply

I couldn't get a convenient appointment

I couldn't get an appointment with a particular doctor

I don't like having to discuss my symptoms with the receptionist at my local surgery ...

I felt too embarrassed/uncomfortable to discuss signs and/symptoms with GP

My signs and/symptoms have disappeared

Other.....

If 'other' please state: _____

SCREENING: FUTURE GOALS

When you took part in 'Wise Up To Cancer' you mentioned you would like to:

Screening goals set during the initiative are listed here and the relevant sections below are shown to ask about achievement of screening goals

Since then, what have you done to complete the cervical cancer screening test?
Please select all that apply

I have read information about cervical cancer screening

I have spoken to friends, family or my GP about cervical cancer screening

I have made an appointment to complete cervical cancer screening.....

I have completed cervical cancer screening

- I haven't done anything, but will take action next time I receive an invitation
- I haven't done anything.....

**Since then, what have you done to complete the bowel cancer screening test?
Please select all that apply**

- I have read information about bowel cancer screening
- I have spoken to friends, family or my GP about bowel cancer screening
- I have requested a bowel cancer screening test kit to be sent to me.....
- I have completed and returned my bowel cancer screening test kit.....
- I haven't done anything, but will take action next time I receive an invitation
- I haven't done anything.....

**Since then, what have you done to complete the breast cancer screening test?
Please select all that apply**

- I have read information about breast cancer screening.....
- I have spoken to friends, family or my GP about breast cancer screening.....
- I have made an appointment to complete breast cancer screening.....
- I have completed breast cancer screening.....
- I haven't done anything, but will take action next time I receive an invitation
- I haven't done anything.....

Since then, what have you done to get a chest x-ray? Please select all that apply

- I have read information about chest x-rays
- I have spoken to my GP about getting a chest x-ray
- I have had a chest x-ray
- I haven't done anything, but will take action in the next six months
- I haven't done anything.....

**If you haven't already taken any steps to complete your cancer screening, please
can you tell us what prevented you from doing so? Please select all that apply**

I haven't had the time.....

I can't afford the cost of transport.....

I couldn't get a convenient appointment.....

Personal/family illness.....

Other things in my life are more important at the moment.....

Other.....

If 'other', please state: _____

Do you have any other comments relating to cancer screening?

YOUR FEEDBACK

What have you learnt as a result of taking part in 'Wise Up To Cancer'?

Please rate the following parts of 'Wise Up To Cancer' and share any comments you may have around what you liked or how you could make it better

	Very good	Good	Fair	Poor	Very poor	Comments?
Topics covered	<input type="checkbox"/>	_____				

Advice and support given	<input type="checkbox"/>	<hr/> <hr/>				
Leaflets given	<input type="checkbox"/>	<hr/> <hr/>				
Length of the time taken	<input type="checkbox"/>	<hr/> <hr/>				
Venue	<input type="checkbox"/>	<hr/> <hr/>				

Do you have any other comments about 'Wise Up To Cancer'?

Since taking part in 'Wise Up To Cancer', have you done any of the following (tick all that apply):

- Told someone else about Yorkshire Cancer Research
.....
- Visited the Yorkshire Cancer Research website
.....
- Signed up to receive the Yorkshire Cancer Research communications
.....
- Made a donation to Yorkshire Cancer Research
.....
- Signed up to take part in a fundraising activity, for example a sponsored run
.....
- Organised your own fundraising activity, for example a coffee morning or cake sale.....

PRIZE DRAW

Everyone taking part in the follow-up questionnaire will be entered into a prize draw to win Love to Shop vouchers (one prize of £100, two prizes of £50 and five prizes of £20). Please confirm your details below if you wish to be entered into the prize draw.

Name:

Email address:

Postal address:

Prize Draw Rules

Entry to the prize draw is restricted to one entry per person. Multiple entries will be disqualified. Automated entries, bulk entries or third party entries will be disqualified. This prize draw is open to UK residents only. Prizes can only be sent to a valid UK address. Winners will be chosen at random from all valid entries on 30th November 2017. Any surveys received after this date will not be entered into the prize draw. Winners will be contacted via email or postal address as provided. The Judge's decision is final and no correspondence will be entered into. Leeds Beckett University is compliant with the Data Protection Act. Our policy is such that we will not pass on your details to any third party without your prior consent.

Telephone Interview

To find out about your experience of 'Wise Up To Cancer', we will be inviting a few people to take part in a short telephone interview (lasting 20-30 minutes). This will help us improve 'Wise Up To Cancer' in the future.

If you would like to take part in this interview, please provide your name and telephone number(s) below.

Anyone who takes part in a telephone interview will be given a £20 Love to Shop high street voucher as a thank-you. Please note that not everyone who volunteers to be interviewed will be contacted as we may have sufficient volunteers already.

The interview will be recorded to help with accuracy but we will check you are willing for us to do so and your name will not be used in any reports. The recordings will be written up and then destroyed after the evaluation.

Name:

Preferred telephone number: _____

Alternative telephone number: _____

Please state your preferred contact times (tick all suitable options):

Weekday morning.....

Weekday afternoon

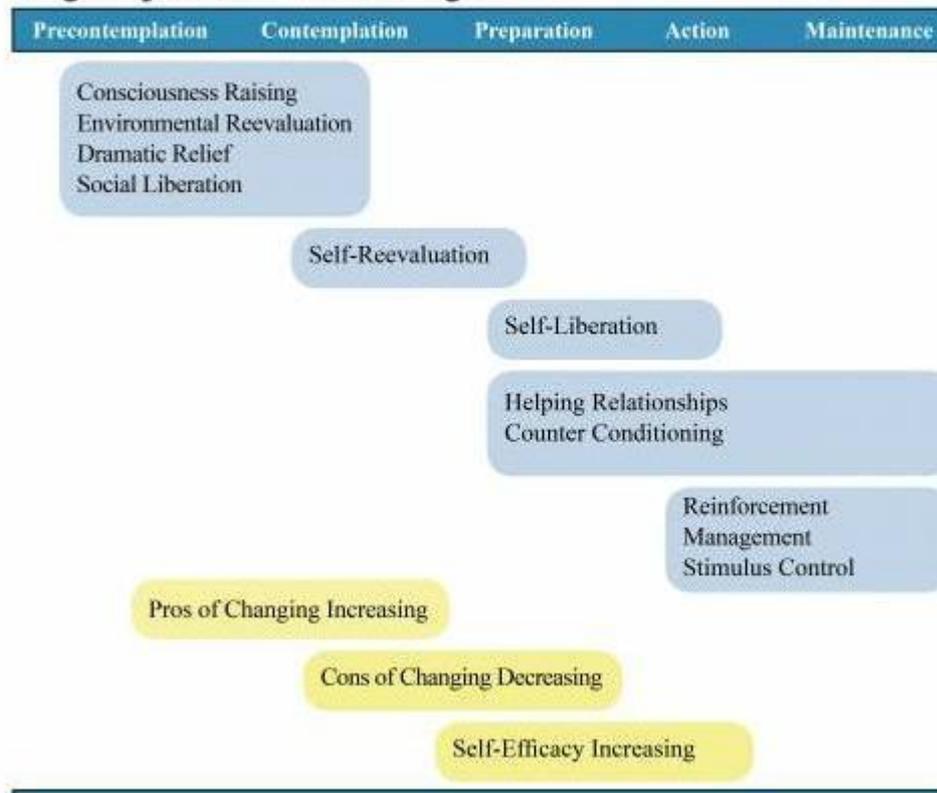
Weekday evening

Weekends.....

Thank-you for your time

Appendix 3: Stages of Change model (Prochaska and DiClemente 1983)

Stages by Processes of Change



This diagram shows the processes that an individual goes through as they progress through the Stages of Change and towards making and maintaining changes in Lifestyle. The model was originally developed by Prochaska, J.O., DiClemente, C.C. in 1983.

Appendix 4: List of Barca delivery locations

Location	Number of participants (as of 14th Nov)	Demographics and Set up	Notes
Armley Festival	34	General public –completed in gazebo, located on busy high street where other stall holders were. Participants recruited opportunistically as they walked past.	
Armley Helping Hands	15	Elderly –completed in a private room. Participants recruited from specific luncheon club groups.	It took a long time with some participants due to some of them having hearing problems.
Armley One Stop Centre	48	General public –completed either at a stall in the reception area or in quiet room. Participants recruited opportunistically as they visit the centre for help with job and benefits advice.	A lot of the people attending the centre are attending for advice/support around benefits or jobs and therefore health is not one of their priorities.
Armley Park	71	General public –carried out in a gazebo placed at a children’s event. Numerous health checks being carried out at the same time. Participants were often parents/ grandparents of children taking part in activities.	The majority of people attending these events had children so sometimes the health checks were too long to keep the children entertained despite having a balloon modeller to entertain the children.
Armley Park Court	5	Workplace –completed in a quiet private room. Participants were invited to take part in the health check via email.	
AVSED	35	Elderly –carried out in a large open room with background noise. The participants were recruited from the group that attends this group each month. The sessions are monthly themed health and wellbeing events.	To be cautious about people repeating the questionnaire at this event.
Bramley Library (One Stop)	6	Quiet venue so good for privacy. Stall in lobby to catch people in and out. Participants were there to use library facilities and visit the one stop for benefit advice.	To attend in the morning instead of afternoon as library staff said it was busier then. Launch for the new One Stop is 2/11/17 so to attend after this when potentially will be busier.
Bramley Lawns	35	Elderly –completed in a private room. Participants recruited from a specific group and during a specific community event.	

Bramley Park	22	General public –completed in the gazebo with numerous health checks being completed at any one time. Participants recruited opportunistically as they attended the community event.	
Bramley shopping centre	57	General public –completed on a mobile library bus. Up to three health checks being completed at a time. Participants were recruited around the shopping centre by the CHEs.	
Bramley, Manor House	7	Workplace –completed in a private room. Participants were invited to take part in a health check via email.	
Burley Lodge Centre	8	Support group for people with mental health needs. The health checks were carried out in the same room as the group session so was private enough due to background noise.	
Dosti	8	South Asian women with mental health needs – carried out in the same room their social session is ran each week. WUTC was carried as part of a 4 week cancer project where the group were learning about different aspects of cancer prevention and early diagnosis each week.	To build trust and rapport with this group prior to delivering WUTC, weekly interactive sessions were carried out with the women to get them talking about health, wellbeing and cancer. The group spoke limited English so only one member of staff who could speak the relevant languages could deliver WUTC.
Farnley	1	PEP client (social prescribing service) – WUTC was delivered at the client's home just as their normal PEP appointments do.	
Headingley Stadium	61	Families –completed in a gazebo with simultaneous deliver of WUTC by multiple CHEs. The event was a family event; therefore there were lots of other activities going on around.	As the event was aimed at families with children, a children's entertainer was booked to keep the children occupied whilst the adults completed the questionnaire. This meant that the checks were carried out a bit quicker.
Kirkstall	1	Staff member – carried out in a private office room.	This was carried out on a member of Barca staff after they had requested to complete WUTC due to personal concerns.

Kirkstall Festival	65	General public –carried out in gazebo. The event was very busy with high footfall and lots of activities going off around the stall.	Recruitment for participants at this event was very easy with lots of people approaching the stall and requesting to take part. Kirkstall festival is very well known so some people who completed WUTC had travelled and were not from west Leeds.
Leeds Museum	8	Forward Leeds clients (alcohol support service) – carried out in large room with numerous activities going off around. The background noise made the conversations private	A lot of the participants were previous or current Forward Leeds clients and were therefore on alcohol support programmes. A lot of the participants were not taking up their screening programmes so very worth attending this event.
Leeds University	25	General public –carried out in a busy room with lots of other activities taking place. Participants were recruited by the CHEs as members of the public looked round the exhibitions.	
Little London Community Centre	59	Predominantly BME community –carried out on mobile library bus or in gazebo as part of community festival. Participants were recruited from members of the public who attended the festival.	Having the option to deliver WUTC either on the bus or outside in the gazebo meant we could have participants completing WUTC at the same time and there was an option for a more private space on the bus if need be. Small group, need to be cautious that WUTC not repeated with the same people.
New Farnley Community Centre	24	(No detail provided)	
New Wortley Community Centre	35	General public –carried out in a large space as part of a launch event where there was quite a lot of background noise.	
PEP Men's group, Armley	5	Social prescribing group –carried out in seated waiting area at leisure centre (where this group was attending). The participants were recruited specifically from the group and were given an introduction to the project all together.	

Pudsey	1	PEP client (social prescribing) –was completed in the clients GP Practice in a private room where they normally have their PEP meetings.	This individual showed a specific concern about his physical health in one of their previous PEP meetings and therefore was signposted to WUTC.
Rossefield Manor	3	(No detail provided)	
Ryecroft Academy	19	Mothers group –carried out in a large meeting room following a group discussion around cancer. The group was specifically targeted as they have weekly themed health sessions.	
Stocks Hill Hub	28	Centre for individuals with mental health needs – carried out in the social café area. Participants were members of the centre who regularly attend groups there for support.	As the majority of participants had a mental health concerns, delivery of WUTC took slightly longer as they had lots of questions to ask.
Stocks Hill Young Persons Group	5	Support group for young adults with mental health needs –carried out in a private area of a local pub where this group meets on a weekly basis.	The majority of the participants were on medication for their mental health conditions.
Together Women	1	Support centre for women who need emotional support	
Wellington Place	26	Workplace –completed in a quiet room with 3 lots of health checks being completed at one time. Background music was used to stop conversations being as easy to overhear. Participants were invited to take part in WUTC via email and were booked a specific slot.	As this setting was workplace for a variety of organisations, participants were not always necessarily from West Leeds as they travel to work.
West Leeds Activity Centre	14	General public – family event – completed in gazebo. The weather was bad so footfall was low.	
West Leeds Festival	1	(No detail provided)	
Yeadon library	3	Mental health support group – carried out in a private room and participants were recruited specifically from	

the group and were given an overview of the project as
a group first.

TOTAL

736

Appendix 5: Map of participant postcodes

Appendix 6: List of CPWY delivery locations

Location	Number of participants (as of 14th Nov)
Pharmacy 1	67
Pharmacy 2	33
Pharmacy 3	38
Pharmacy 4	90
Pharmacy 5	50
Pharmacy 6	59
Pharmacy 7	84
Pharmacy 8	2
Pharmacy 9	65
Pharmacy 10	27
Pharmacy 11	49
Pharmacy 12	47
TOTAL	611

Appendix 7: Baseline reports

7a. All data

7b. Community Settings

7c. Pharmacies

Appendix 7a. Wise Up To Cancer Monthly Report (all data)

Overall 1347 respondents completed this questionnaire. 931 consented to receive the follow-up questionnaire.

The questionnaire was delivered across the following locations, with the number of questionnaires completed at each location shown below.

Location:

Counts Respondents		Counts Respondents	
	Base	1347	
Location:			Base
			1347
Armley Festival	34	LloydsPharmacy (Branch: 6068 - 5966 Wrangbrook Road)	90
Armley Helping Hands	15	LloydsPharmacy (Branch: 6208 - 5919 Tieve Tara)	50
Armley One Stop Centre	48	LloydsPharmacy (Branch: 6745 - 5967 Stockingate)	59
Armley Park	71	LloydsPharmacy (Branch: 7095 - 5917 Castleford)	84
Armley Park Court	5	New Farnley Community Centre	24
AVSED	35	New Wortley Community Centre	35
Bramley Lawns	35	PEP Mens group, Armley	5
Bramley Library	6	Pudsey	1
Bramley Park	22	Rossefield Manor	3
Bramley shopping centre	57	Rowlands Pharmacy (Branch: 1299 - 5969 South Elmsall (Branch 1299))	2
Bramley, Manor House	7	Rowlands Pharmacy (Branch: 1311 - 5926 Ferrybridge (Branch 1311))	65
Burley Lodge Centre	8	Ryecroft Academy	19
Cohen's Chemist (5954)	67	Sharlston Pharmacy (5937)	27
Dosti	8	Stocks Hill Hub	28
Farnley	1	Stocks Hill Young Persons Group	5
Headingley Stadium	61	Tesco Instore Pharmacy (Branch: 5740 - 5975 Hemsworth)	49
Kirkstall	1	Together Women	1
Kirkstall Festival	65	Wellington Place	26
Leeds Museum	8	West Leeds Activity Centre	14
Leeds University	25	West Leeds Festival	1
Little London Community Centre	59	Whitworth Chemists Ltd (5976 Kinsley)	47
LloydsPharmacy (Branch: 0035 - 5901 Trinity Medical Centre)	33	Yeadon library	3
LloydsPharmacy (Branch: 0313 - 5974 Hemsworth)	38		

Gender and age

447 were male (33.9% of those who responded to the question), 871 were female (66.1% of those who responded to the question) and 29 did not respond to the gender question.

A total of 1339 participants stated their age which ranged from 18 to 90 (mean of 51.44, standard deviation of 17.12). Within the female participants, age ranged from 18 to 90 (mean of 49.86, standard deviation of 16.61). Within the male participants, age ranged from 18 to 90 (mean of 54.70, standard deviation of 17.51).

Breakdown by age group for males and females are shown in figures 1 and 2.

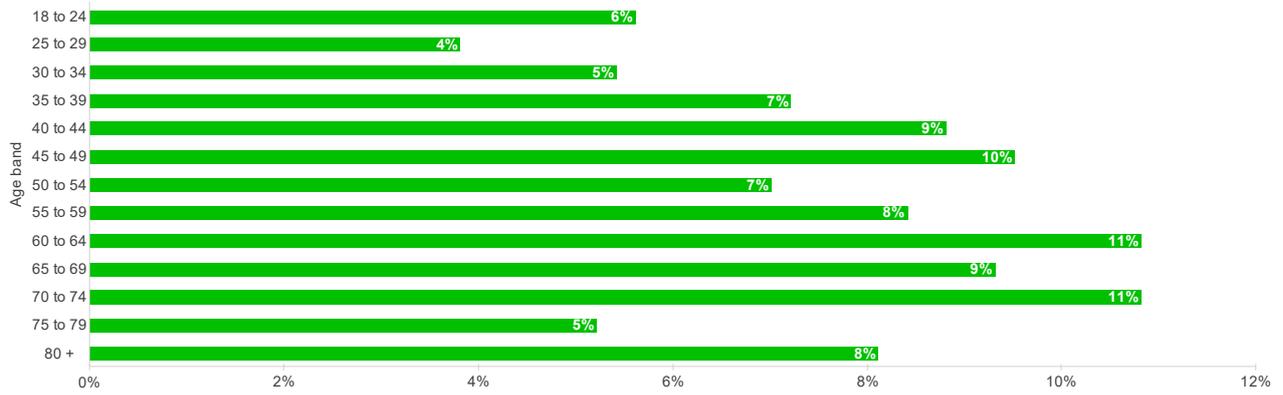


Figure 1. Percentage breakdown for males by age group

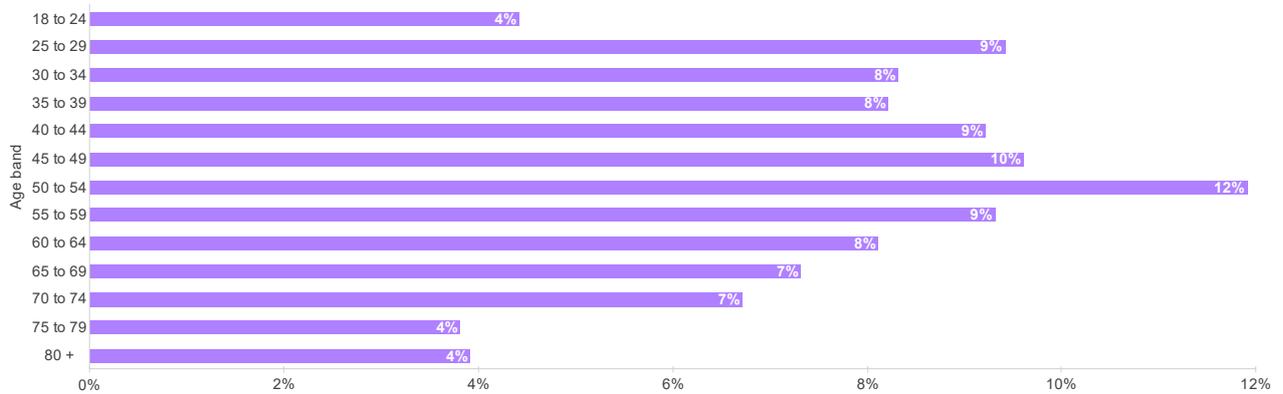


Figure 2. Percentage breakdown for females by age group

Ethnicity

Of the 1341 respondents to the ethnicity question, 1161 (86.6%) were of White British ethnicity (figure 3). 14 (1.0%) stated 'other ethnicity' (see list 1).

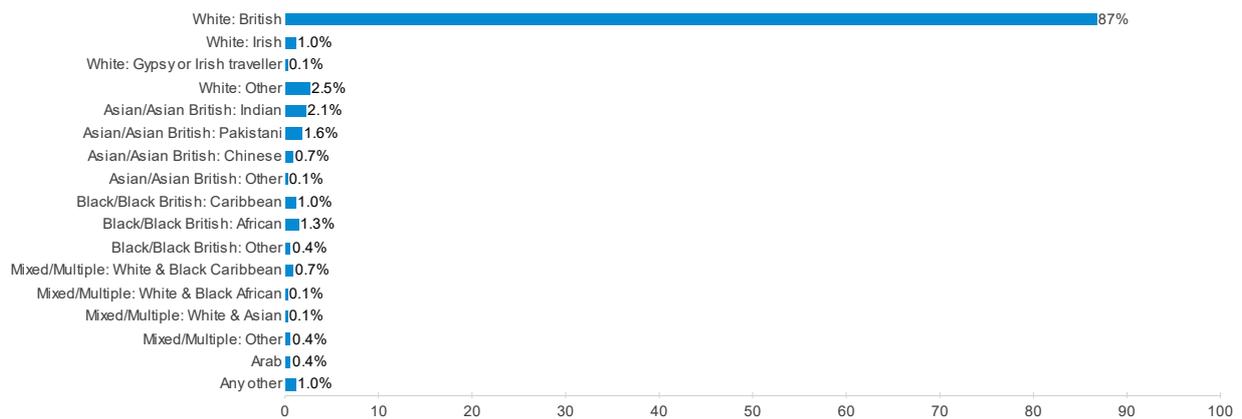


Figure 3: Percentage breakdown for ethnicity.

List 1: Other ethnicities

If other please state
African
Austrian
Indian and mongolian
Lithuanian
Chinese

Lifestyle

Weight

Out of the 1333 respondents to the question, 629 (47.2%) thought they were a healthy weight. With regards to gender, 371 females (42.8% of female respondents) felt they were a healthy weight compared to 241 males (54.9% of male respondents). Of those who thought they were a healthy weight, only 49.5% of males and 67.4% of females had a BMI within a normal weight (the remainder were predominantly overweight or obese). 55 males (12.5% of male respondents) were unsure as to whether or not they were a healthy weight compared to 90 females (10.4% of female respondents).

Of the 995 people who provided height and weight data, 338 (34.0%) were overweight and 288 (28.9%) were obese (figure 4). A gendered analysis shows that males were more likely than females to be overweight or obese (figure 5). It is important to note however that height and weight data were self-reported and may therefore have error.

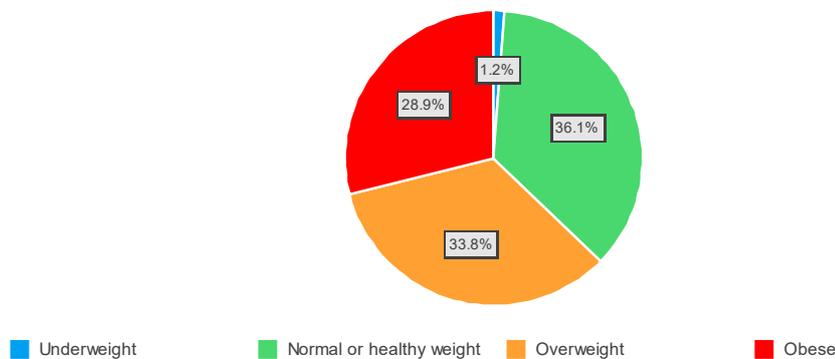


Figure 4: Percentage breakdown of BMI category

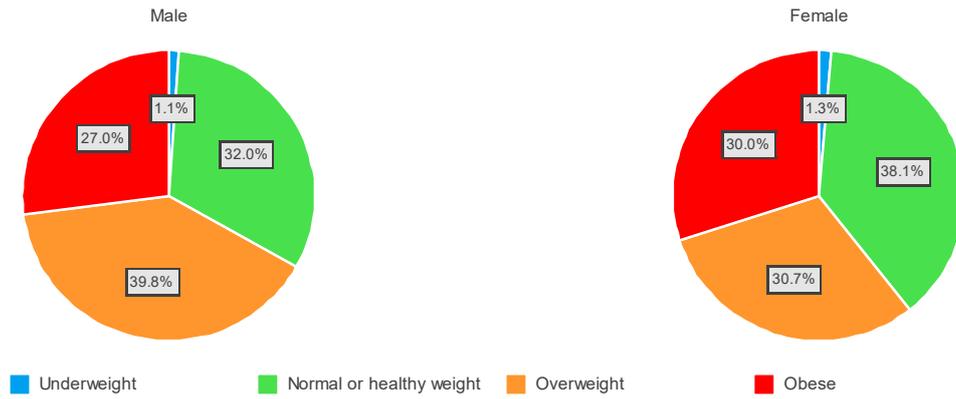


Figure 5: Percentage breakdown of BMI category by gender

Eating habits

Red meat

Among the 1336 respondents, weekly consumption of red and processed meat ranged from 0 to 17, with an average (+/- SD) consumption of 2.49 (+/-1.99) portions per week.

Among the 445 male respondents, weekly consumption of red and processed meat ranged from 0 to 14, with an average (+/- SD) consumption of 2.76 (+/-2.10) portions per week. Among the 862 female respondents, weekly consumption of red and processed meat ranged from 0 to 17, with an average (+/- SD) consumption of 2.35 (+/-1.93) portions per week. Figures 6 and 7 show the variation in frequency of consumption between men and women.

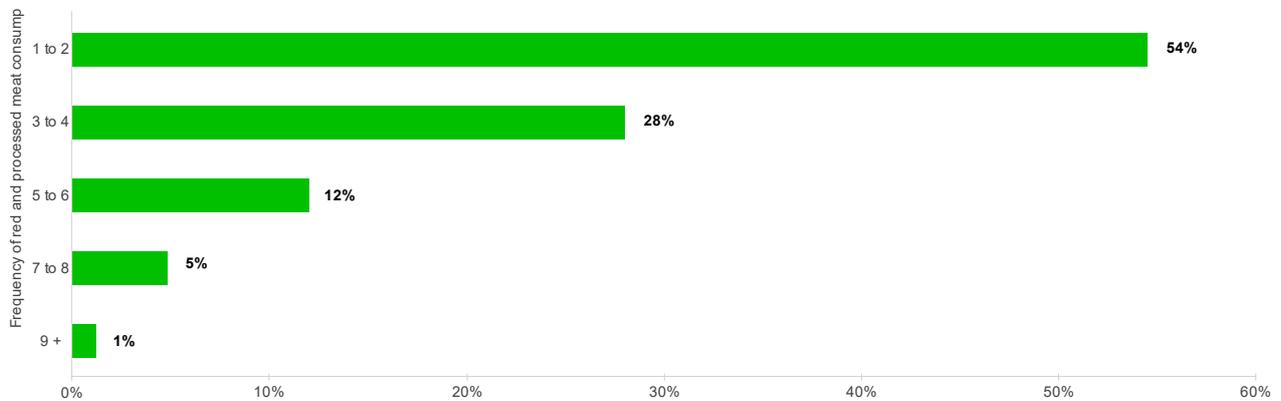


Figure 6. Percentage breakdown of men's red and processed meat consumption (portions per week)

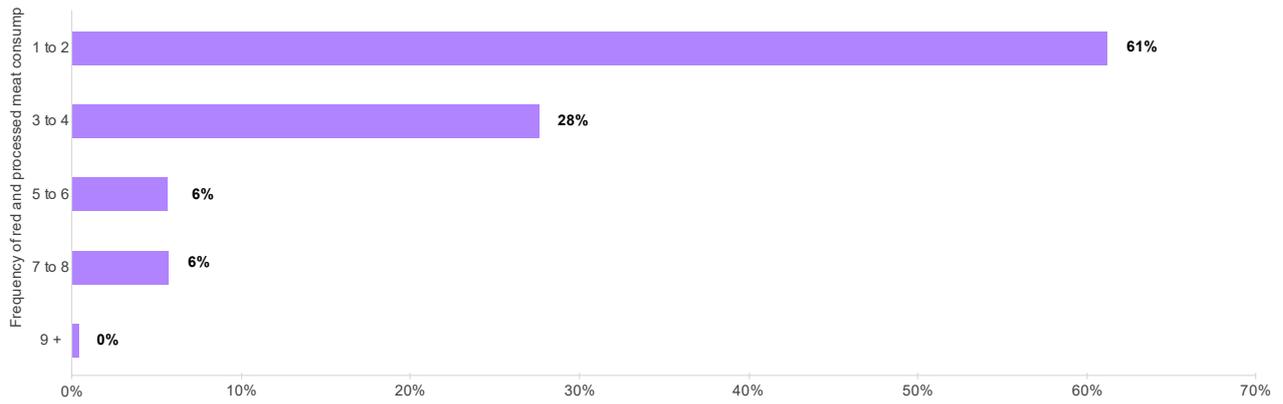


Figure 7. Percentage breakdown of women's red and processed meat consumption (portions per week)

Whole grains

Among the 1341 respondents, consumption of wholegrains ranged from 0 to 32, with an average (+/- SD) of 4.84 (+/-2.92) portions per week.

Among the 447 male respondents, consumption of wholegrains ranged from 0 to 15, with an average (+/- SD) of 5.02 (+/-2.86) portions per week. Among the 866 female respondents, consumption of wholegrains ranged from 0 to 32, with an average (+/- SD) of 4.73 (+/-2.94) portions per week. Figures 8 and 9 show the variation in frequency of consumption between men and women.

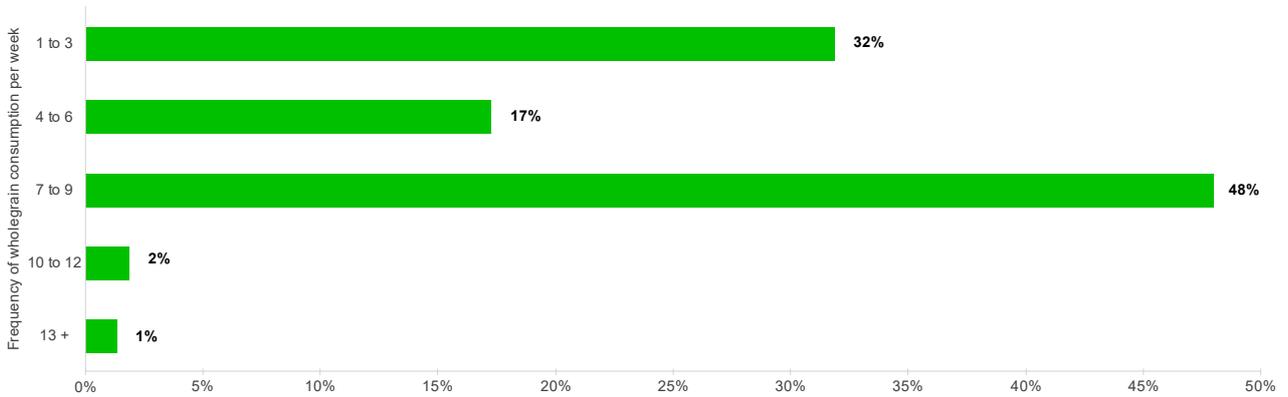


Figure 8. Percentage breakdown of men's wholegrain consumption (portions per week)

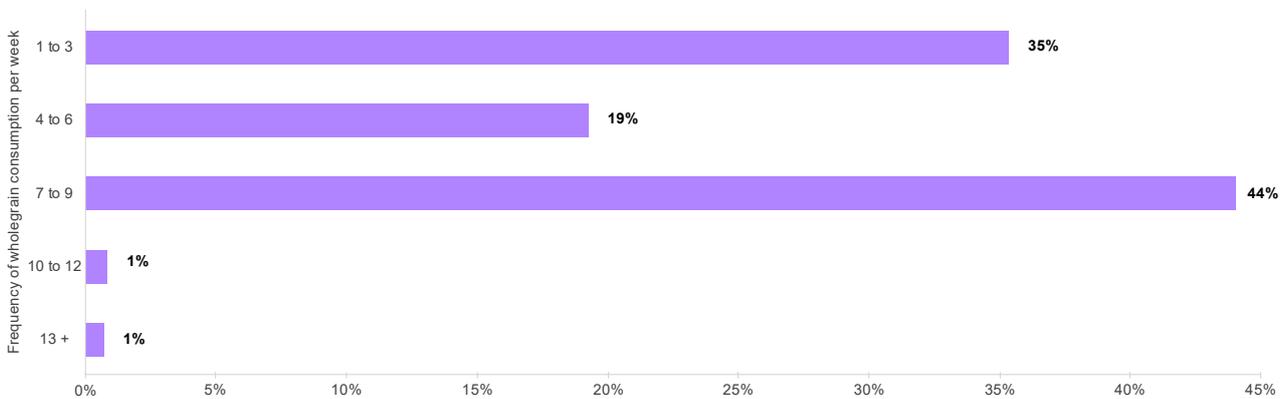


Figure 9. Percentage breakdown of women's wholegrain consumption (portions per week)

Fruit and vegetables

Among the 1335 respondents, consumption of fruit and vegetables ranged from 0 to 12, with an average (+/- SD) of 3.56 (+/-2.07) portions per day.

Among the 447 male respondents, weekly consumption of fruit and vegetables ranged from 0 to 10, with an average (+/- SD) of 3.32 (+/-2.02) portions per day. Among the 859 female respondents, consumption ranged from 0 to 12, with an average (+/- SD) of 3.71 (+/-2.09) portions per day. Figures 10 and 11 show the variation in frequency of consumption between men and women.

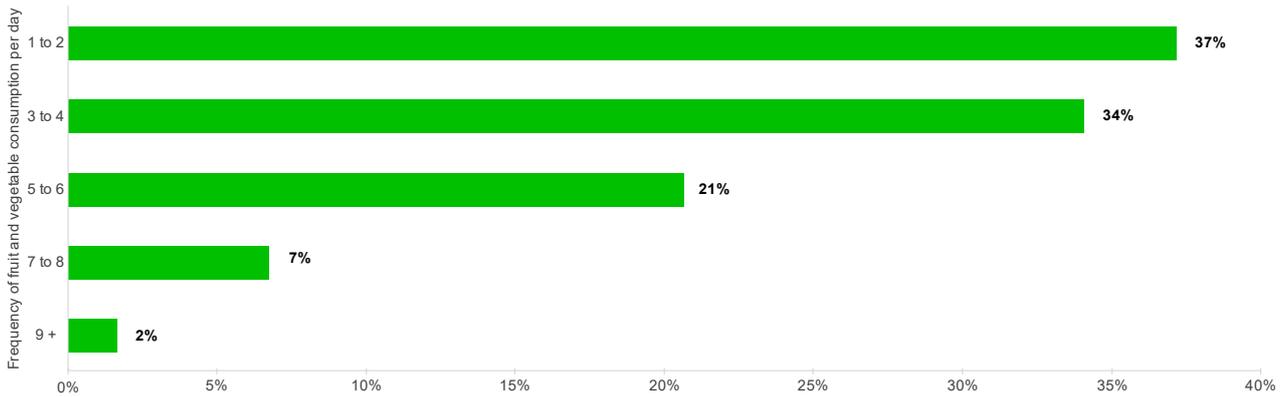


Figure 10. Percentage breakdown of men's fruit and vegetable consumption (portions per day)

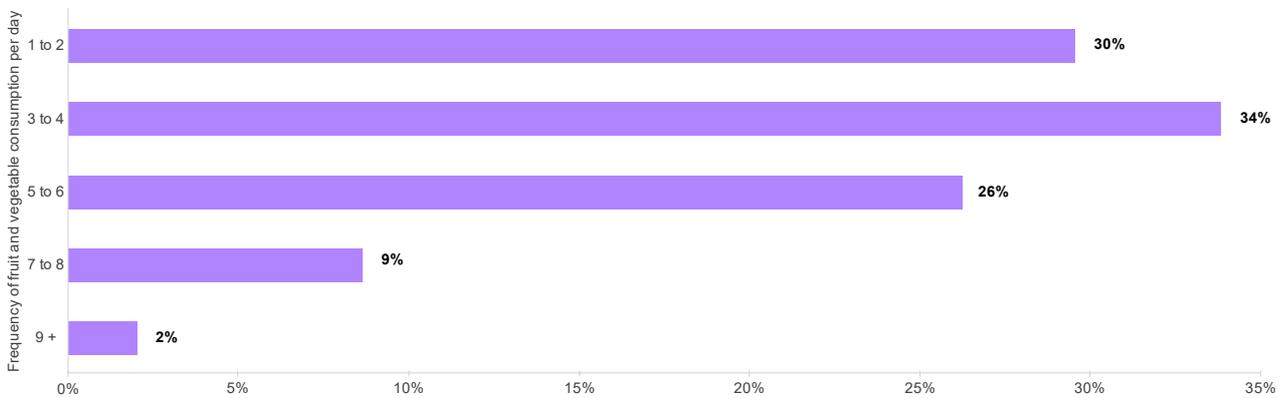


Figure 11. Percentage breakdown of women's fruit and vegetable consumption (portions per day)

Physical activity

Among the 1327 respondents, the number of days people were physically active for at least 30 minutes ranged from 0 to 7, with an average (+/- SD) of 4.26 (+/-2.55) days per week.

Among the 443 male respondents, the number of days men were physically active for at least 30 minutes ranged from 0 to 7, with an average (+/- SD) of 4.24 (+/-2.59) days per week. Among the 856 female respondents, the number of days women were physically active for at least 30 minutes ranged from 0 to 7, with an average (+/- SD) of 4.27 (+/-2.55) days per week. Figures 12 and 13 show the variation in frequency between men and women.

Inactive was classed as not completing at least five 30-minute session a week. A total of 658 (49.6% of all participants) were inactive which included 48.1% of all men and 50.4% of all women.

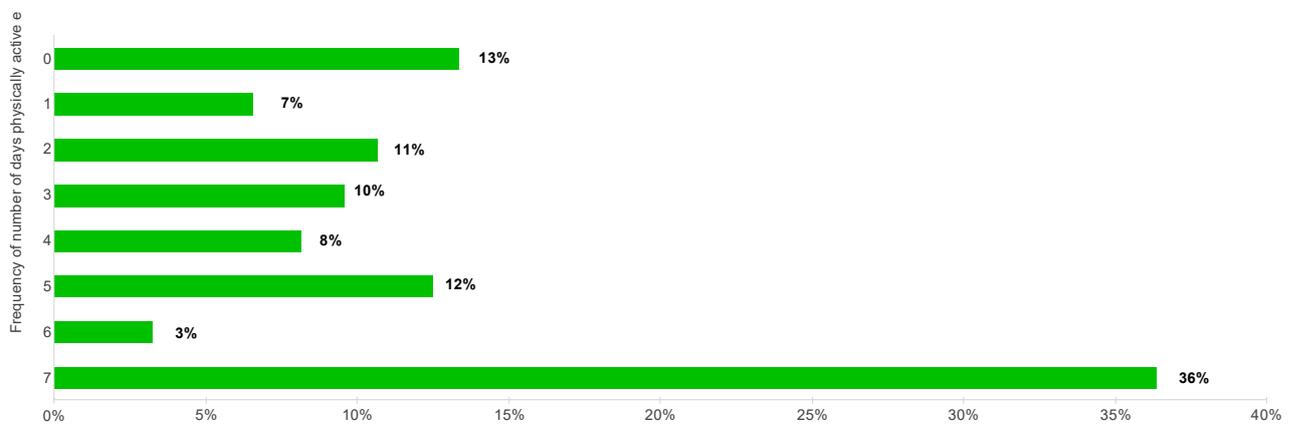


Figure 12. Men's weekly participation in exercise/physical activity (number of days they complete 30 minutes or more)

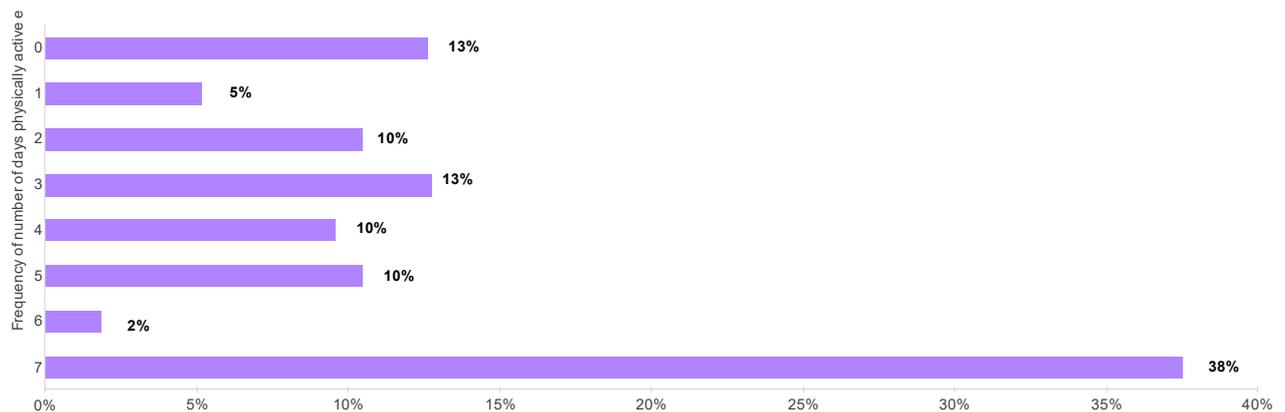


Figure 13. Women's weekly participation in exercise/physical activity (number of days they complete 30 minutes or more)

Alcohol consumption

Within the 1345 respondents, 912 (67.7%) consumed alcohol (75.2% of males and 64.1% of females).

Of those who consumed alcohol, 28 (13.7%) drank on four or more occasions each week (figure 14). Figure 15 shows a gendered analysis of frequency of alcohol consumption.

Of those who consumed alcohol, 141 people (15.5%) stated that they drank 9 or more units on a single occasion (figure 16). The typical number of units consumed on each occasion by male and female drinkers is shown in figure 17.

329 drinkers (36.3%) said they never consumed 6 or more units of alcohol on a single occasion which included 114 males (34.1%) and 209 females (37.5%). The frequency of binge drinking (6 or more units on one occasion) among male and female drinkers is shown in figure 18. Figure 19 shows a gendered analysis of frequency of binge drinking.

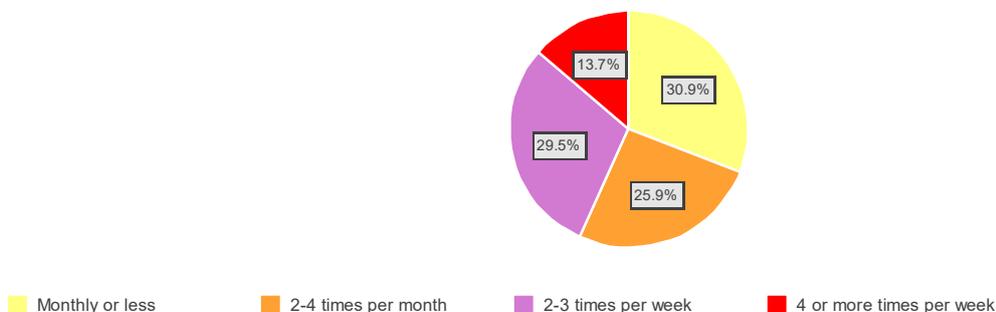


Figure 14: Percentage breakdown showing frequency of alcohol consumption among drinkers

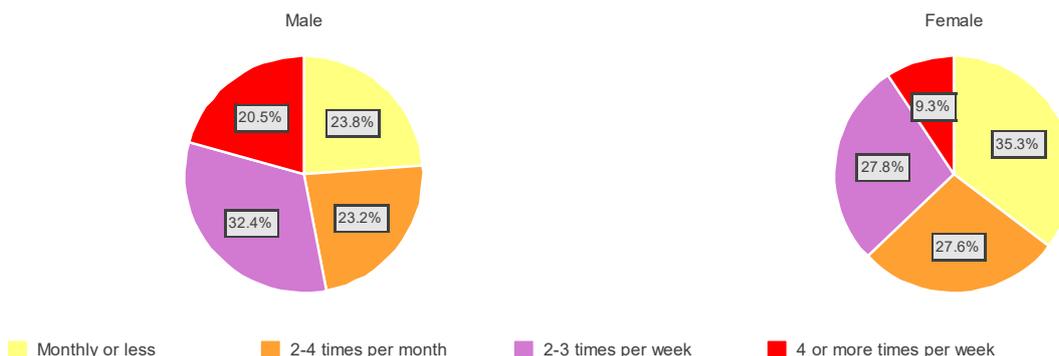


Figure 15: Percentage breakdown showing frequency of alcohol consumption by gender

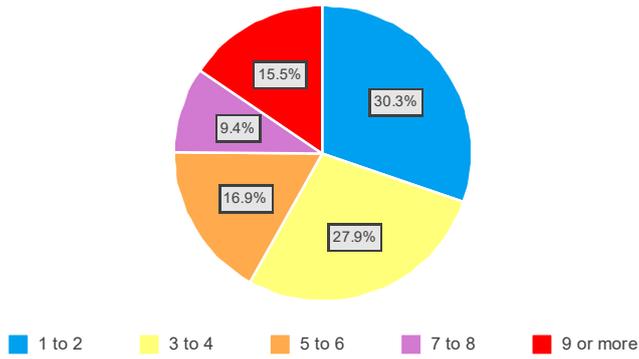


Figure 16: Estimated number of units consumed on each occasion

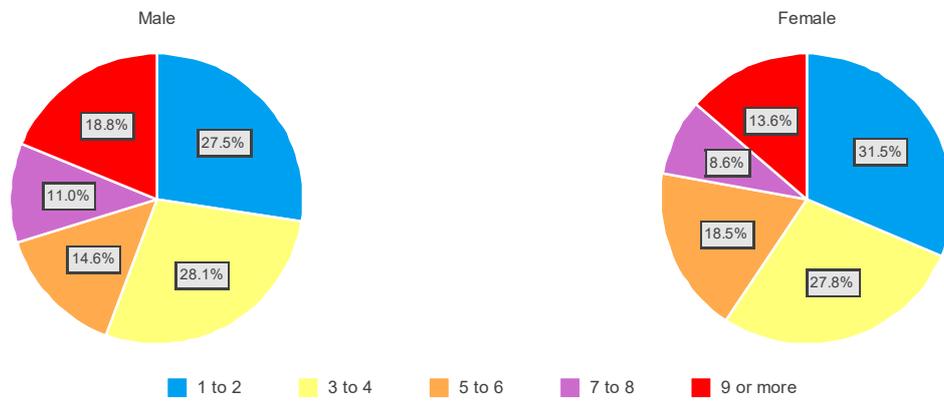


Figure 17: Estimated number of units consumed on each occasion by gender

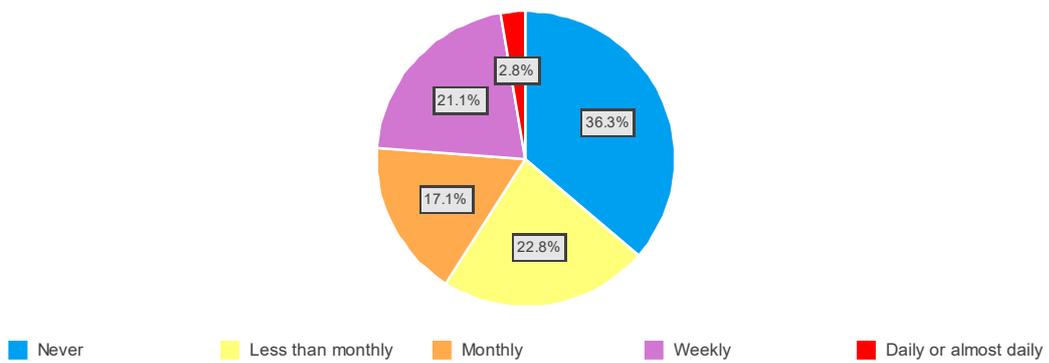


Figure 18: Frequency of binge drinking (6 or more units on one occasion)

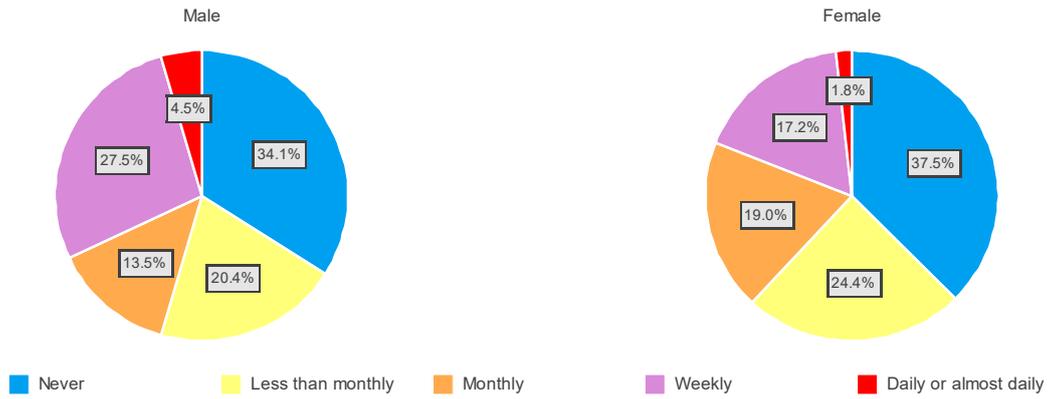


Figure 19: Frequency of binge drinking (6 or more units on one occasion) by gender

Smoking

322 people (23.9% of all respondents) currently smoked either on a daily basis or less often (equal to 26.8% of men and 22.5% of women). Frequency of smoking is shown by gender in figure 20.

45 people (3.3% of all respondents) currently used smokeless tobacco either on a daily basis or less often (equal to 2.9% of men and 3.7% of women). Frequency of smokeless tobacco consumption is shown by gender in figure 21.

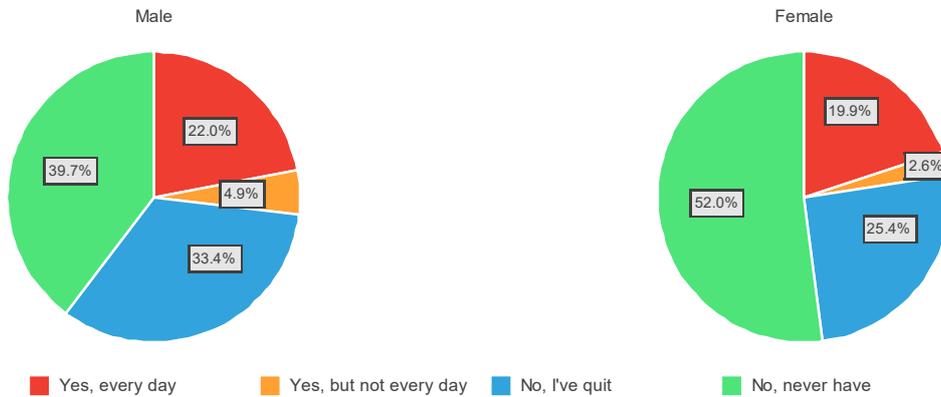


Figure 20: Smoking status by gender



Figure 21: Smokeless tobacco use by gender

Lifestyle - Future Changes

948 people (70.4%) set at least one lifestyle goal (66.4% of men and 72.3% of women).

Of those people setting lifestyle goals, 471 (49.7%) were signposted to a lifestyle support service (53.2% of men and 47.3% of women who set at least one lifestyle goal).

Weight and Diet Goals

704 people (205 males and 481 females) set a goal to either reduce their weight, eat a healthier diet or both (a total of 905 goals as shown in table 1). 7 males and 46 females set both goals.

Of the 642 people who had been classified as overweight or obese (BMI > 24.9), 424 (66.0%) had set one or both goals. This included 55.4% of overweight men and 72.3% of overweight women.

300 people were signposted to weight management services (42.6% of people setting a weight and/or diet goal) including 43.9% of men and 41.4% of women who had set this goal.

Of the 424 overweight people who set a goal, 209 (49.3%) were signposted to services. This included 45.9% of those men and 49.8% of those women.

Table 1: Weight and diet goal by responses

Counts Responses	Total	No reply	Respondent gender	
			Male	Female
Base	905	25	251	629
Goal				
Reduce my weight	484	13	122	349
Eat a healthier diet	421	12	129	280

Physical Activity Goal

418 people (31.0%) set a goal to be more physically active, which by gender equated to 119 men and 290 women (26.6% and 33.3% of all men and women).

Of the 658 people who were not completing at least five 30 minute sessions of physical activity a week (inactive), 273 (41.5%) set a goal to increase physical activity. This included 38.0% of those men and 43.2% of those women.

206 people who set an activity goal were signposted to physical activity services (49.3% of people who set a goal). This included 47.9% of those males and 48.3% of females.

135 inactive people who set a goal were signposted to services (49.5%). This included 46.9% of inactive men and 48.9% of inactive women.

Alcohol

93 people set a goal to either cut down on their alcohol consumption or give up alcohol (10.2% of all drinkers, table 2).

28 people were signposted to alcohol support services (30.1% of those drinkers setting a goal) including 34.1% of those males and 26.5% of those females.

Table 2: Alcohol goal by respondents

Break % Respondents	Total	Missing	Respondent gender	
		No reply	Male	Female
Base	93	3	41	49
Goal				
Cut down on my alcohol consumption	91.4%	100.0%	82.9%	98.0%
Give up alcohol	9.7%	-	17.1%	4.1%

Smoking

166 people (49.4% of tobacco users) set a goal relating to smoking or smokeless tobacco use (48.8% of male tobacco users and 49.8% of female tobacco users, table 3).

71.1% of these people setting a goal, including 73.3% of males and 68.9% of females were signposted to smoking cessation services.

Table 3: Smoking/smokeless tobacco goal by respondents

Break % Respondents	Total	Missing	Respondent gender	
		No reply	Male	Female
Base	166	3	60	103
Goal				
Cut down on smoking	57.8%	66.7%	61.7%	55.3%
Stop smoking	42.8%	33.3%	36.7%	46.6%
Cut down on smokeless tobacco	0.6%	-	-	1.0%
Stop using smokeless tobacco	1.2%	-	1.7%	1.0%

Other Goals

Other goals set and other signposting outside of the offered lifestyle goals (weight and diet, tobacco use, alcohol consumption and physical activity) are shown in tables 4 and 5.

Table 4: Other goals set (maximum of three)

1.	2.	3.
Staying sober		
To get motivated to get out of the house		
Would like to be able to sleep better		
Better sleep routine		
Reduce stress levels		
Quality sleep		
Drink more fluids		
Get more sleep		
Better sleep		
Be able to move more freely		
Register with the gp		
Eat less watch portion size		
Sleeping more, not watching tv before bedtime		
Better sleep habit		
Reduce amount of food intake		
Use more sun protection		

Table 4: Other goals set (maximum of three)

1.	2.	3.
	Sleep better	
	Try and have 7-8 hours of sleep a night	
	Eat meals at regular times (earlier)	
	Eat more regularly	
	Would like to socialise more	
	Reduce Stress	
	Less Meat	
	More chance to rest	
	Would like to socialise more	
	More sleep	
	would like to get in employment	
	More sleep	
	Attend mindfulness	

Table 5: Signposting for other goals set

1.	2.	3.
	GP	
	Details of doctor led CBT	
	job seekers centre	

Cancer Awareness

1226 people were able to list one or more signs and symptoms potentially related to cancer. This included 389 men (87.0%) and 818 women (93.9%). Differences between men in women in their ability to list signs and symptoms are shown in figure 22.

For both men and women, the most commonly listed response was 'lump/swelling' (figure 23), however only 21.1% of men were aware of this sign compared to 55.0% of women.

Other signs listed by males and females are shown underneath.

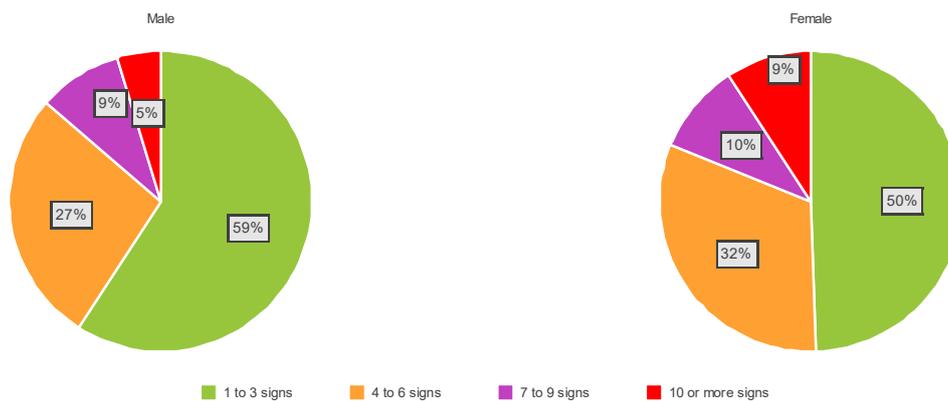


Figure 22: Awareness of common signs and symptoms of cancer by gender (% of all males and females)

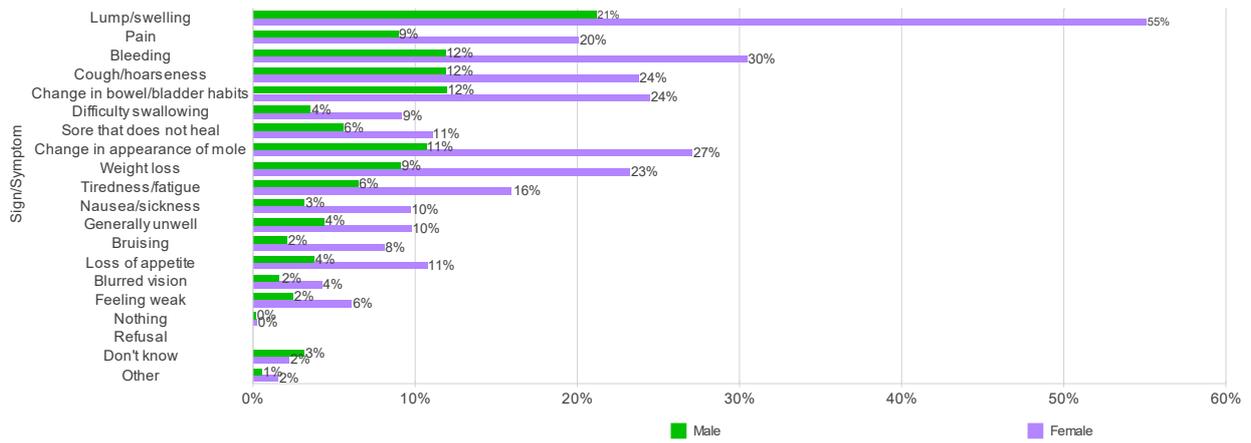


Figure 23: Percentage breakdown of cancer knowledge by gender (% of gender stating response)

(If other please state:)

- Stress
- Aches
- Inverted nipples
- Tenderness and discharge from the breast
- Breathlessness
- Blood in wee or poo
- Abnormality in a region of skin
- Hair loss
- Bloating
- change in shape to breast
- Recurring styel/scar on eye
- Breathlessness
- Bloating
- Dizziness, sweating
- unusual bodily changes
- SWELLING IN STOMACH
- Headache
- Pain in stomach
- Abnormal snoring
- BLOATING
- HEADACES, ANURISUM
- LOOKING YELLOW
- Growth brain personality changes
- Itching, discolouration of breast
- Breathlessness

Cancer Signs and Symptoms

640 people, including 211 men (47.2%) and 420 women (48.2%), had recently experienced one or more of the listed signs or symptoms of cancer (figure 24). Specific symptoms reported are shown in figures 25 to 27.

88 males (19.7%) had experienced signs of male-specific cancer.
 51 females (5.6%) had experienced signs of female-specific cancer.

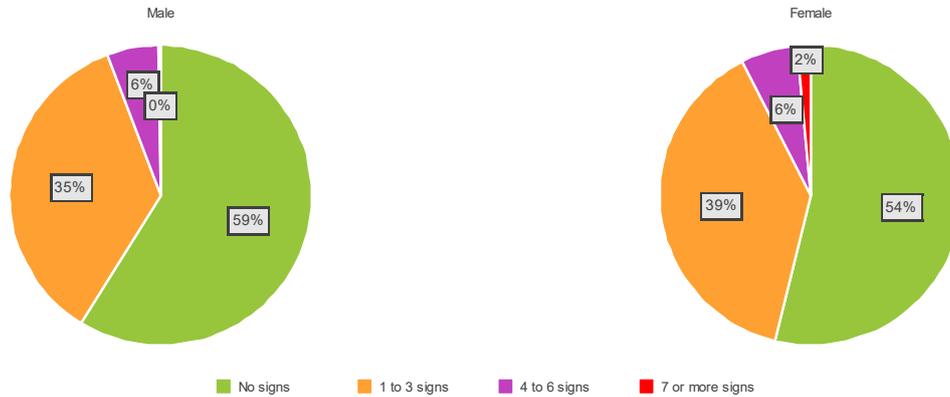


Figure 24: Reported signs and symptoms of cancer by gender (% of all males and females)

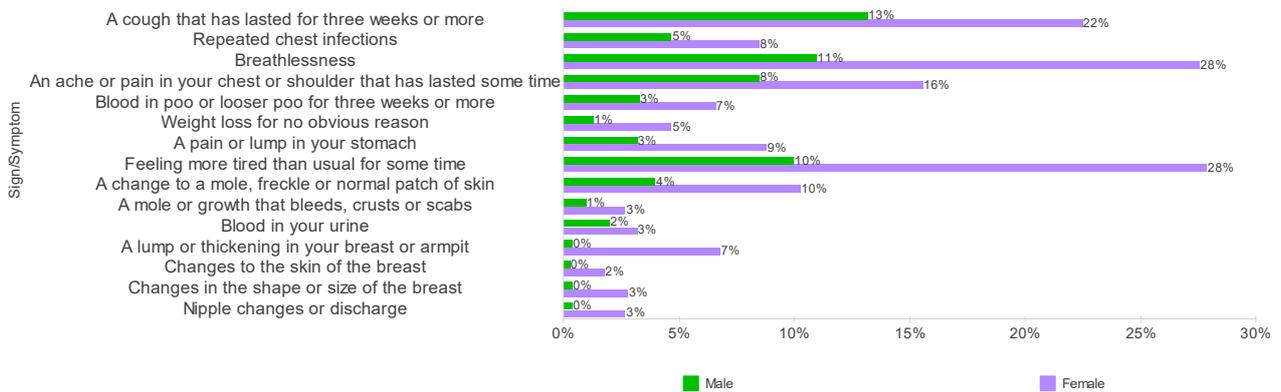


Figure 25: Percentage breakdown of cancer signs and symptoms experienced by gender (% of gender stating response)

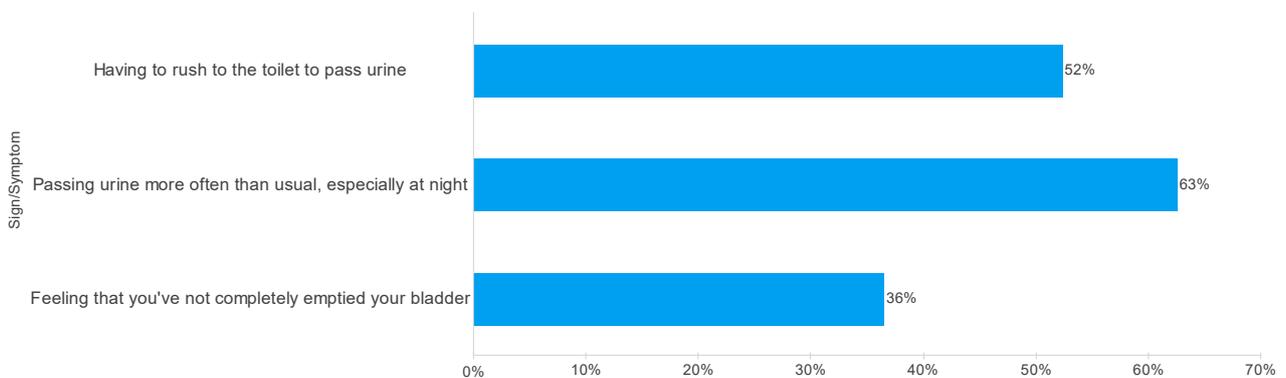


Figure 26: Percentage breakdown of male specific cancer signs (% of male respondents for this question)

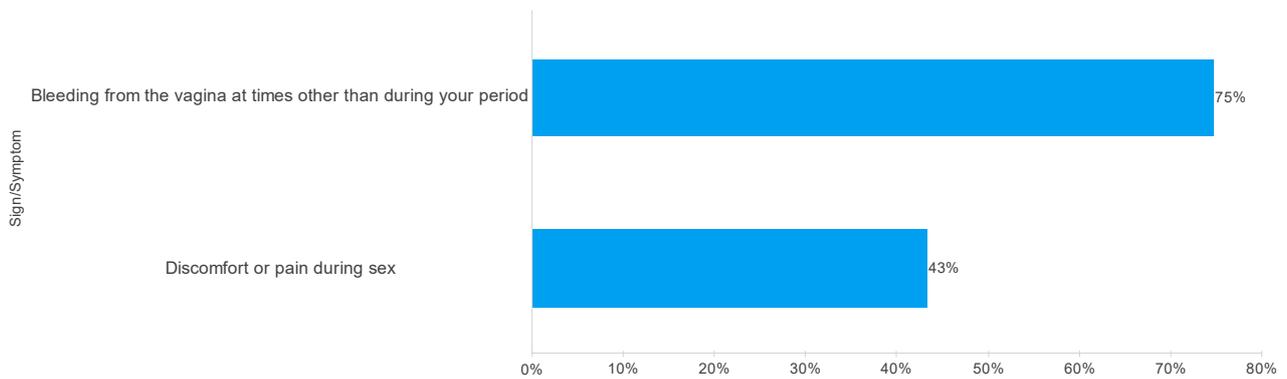


Figure 27: Percentage breakdown of female-specific cancer signs (% of female respondents to this question)

Of those people reporting experiencing any signs and symptoms potentially related to cancer, 172 (27.0%) had not spoken to their GP, but 106 (62.4%) of these said they planned to do so.

Of the 210 men reporting experiencing any signs and symptoms potentially related to cancer, 78 (37.1%) had not spoken to their GP, but 54 (70.1%) of these said they planned to do so.

Of the 418 women reporting experiencing any signs and symptoms potentially related to cancer, 92 (22.0%) had not spoken to their GP, but 51 (56.0%) of these said they planned to do so.

Cancer Screening

947 people (70.3% of all participants) were eligible for any of the four screening programmes discussed (cervical, breast, bowel and chest x-ray).

69 women (7.7%) were eligible for all three national screening programmes (cervical, breast and bowel).

650 women (72.2%) were eligible for the national cervical screening programme. Figure 28 shows completion of recent screening among these.

342 women (38.0%) were eligible for the national breast screening programme. Figure 29 shows completion of recent screening among these.

336 people (24.9%) were eligible for the national bowel screening programme. This included 137 males (30.6%) and 192 females (22.0%). Figure 30 shows completion of recent screening among these.

133 people (9.9%) met the eligibility criteria for chest screening (aged over 50 and reported a persistent cough for three weeks or more). By gender, this was 50 males (11.2%) and 83 females (9.5%).

1285 people were asked about awareness of chest screening. Figure 31 shows awareness among males and females.

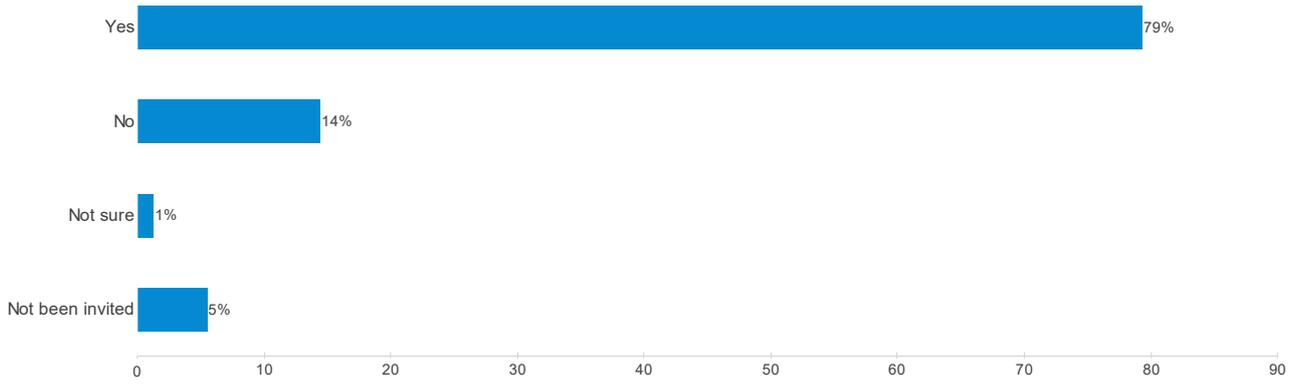


Figure 28: Percentage of eligible women completing their recent cervical screen

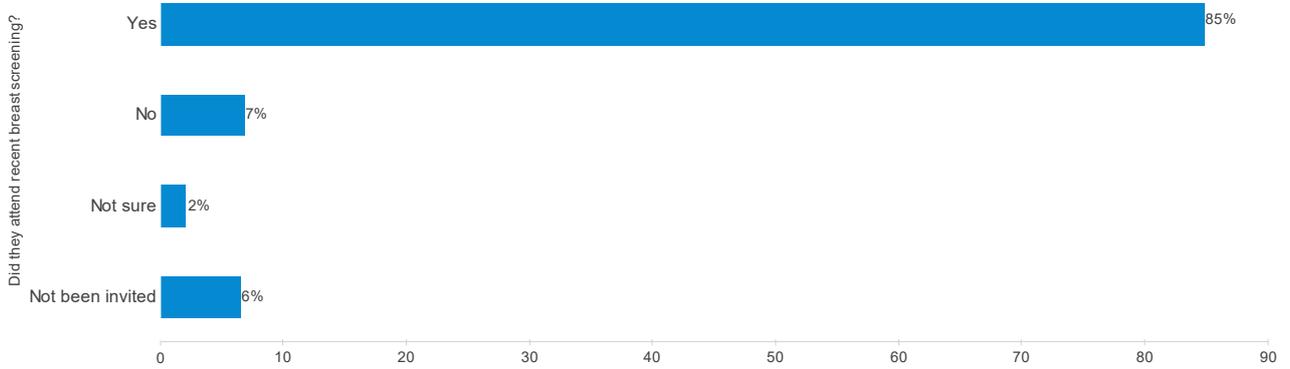


Figure 29: Female participation in recent breast screening (among those eligible)

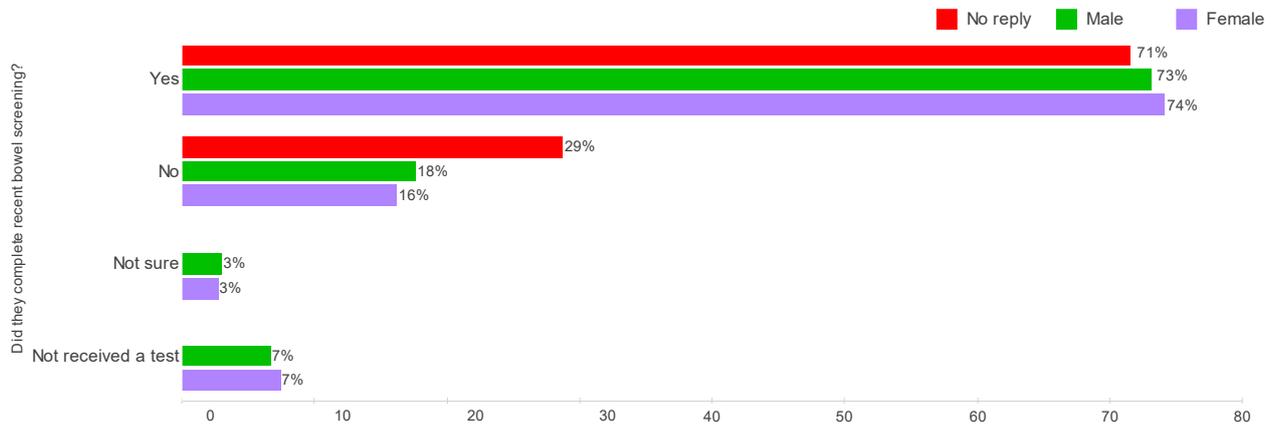


Figure 30: Participation in recent bowel screening (among those eligible)

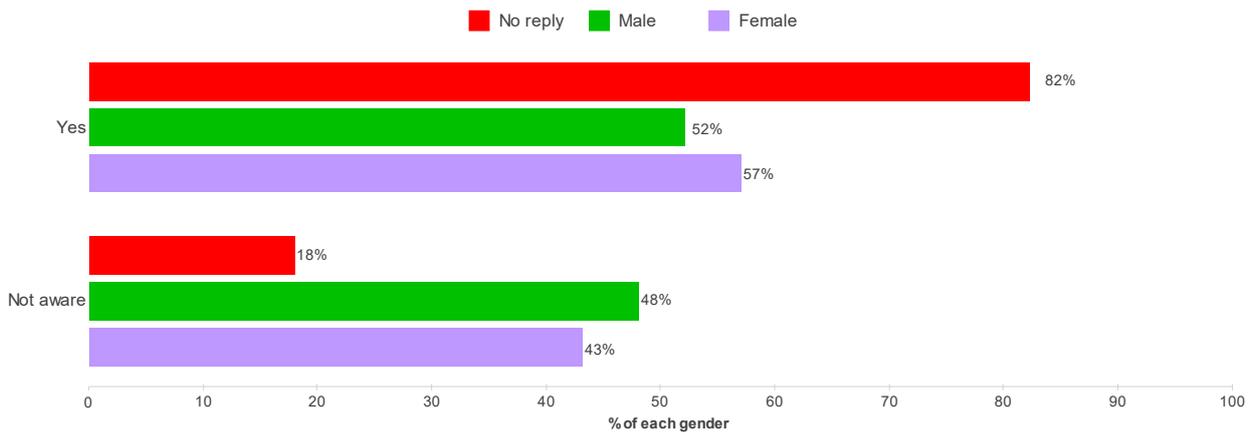


Figure 31: Awareness of chest screening programme (all ages asked)

Screening Goals

179 screening goals were set by 162 people (including 29 men and 131 women).

Of the 135 women who hadn't engaged in recent cervical screening, 70 (51.9%) set a goal relating to this. Of the 52 women who hadn't engaged in recent breast screening, 31 (59.6%) set a goal relating to this.

Of the 89 people who hadn't engaged in recent bowel screening (including 37 men and 50 women), 47 set a goal (52.8%) which included 19 men (51.4% of those who hadn't engaged) and 27 women (54.0% of those who hadn't engaged).

Of the 134 people aged 50 or over and with a persistent cough (including 50 men and 84 women), 31 (23.1% of those eligible) set a chest screening goal which included 12 men (24.0% of those eligible) and 19 women (22.6% of those eligible).

Figure 32 shows the breakdown in numbers across goals.

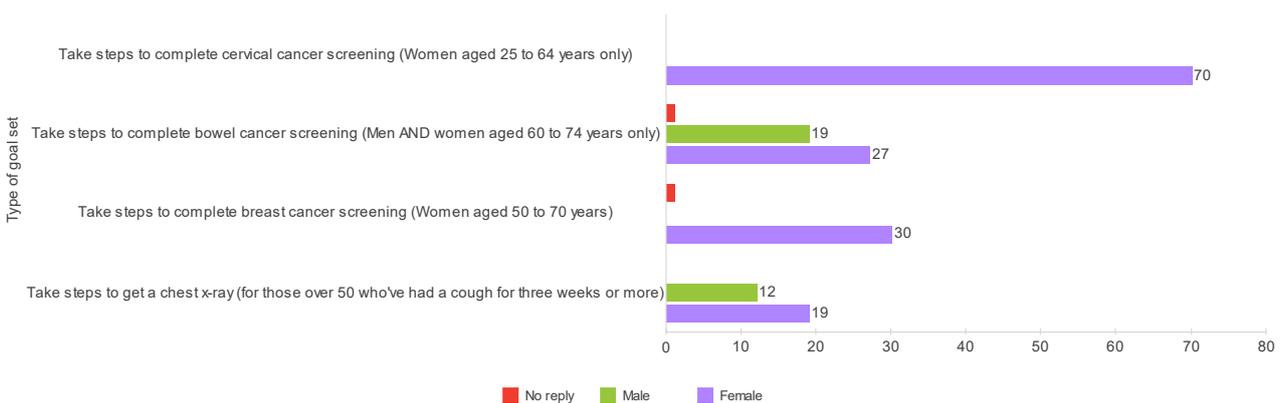


Figure 32: Number of screening goals set.

Feedback

520 people (39.5%) had not previously heard of Yorkshire Cancer Research. Figures 33 to 38 show the responses to the questions relating to programme feedback.

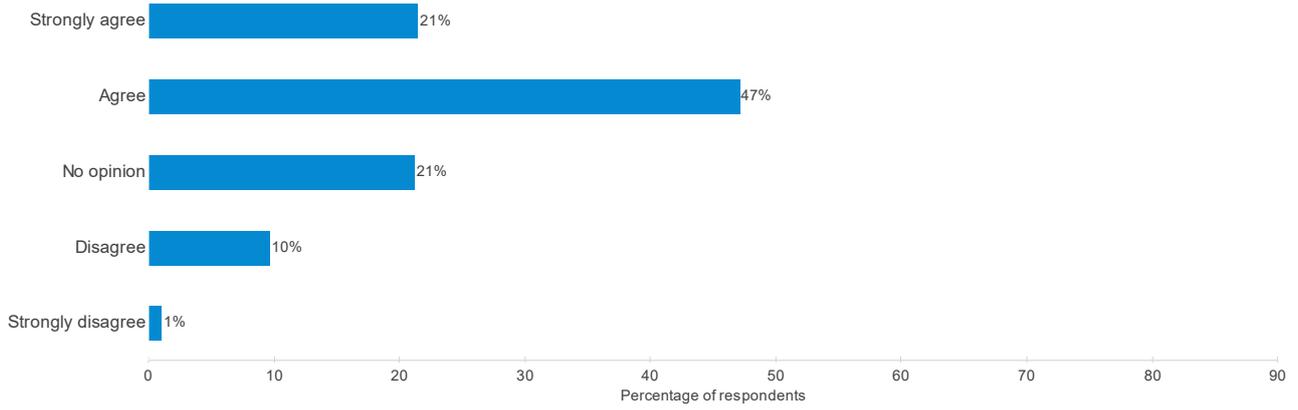


Figure 33: Response to question 'I am considering making changes to my lifestyle as a result of Wise Up To Cancer'

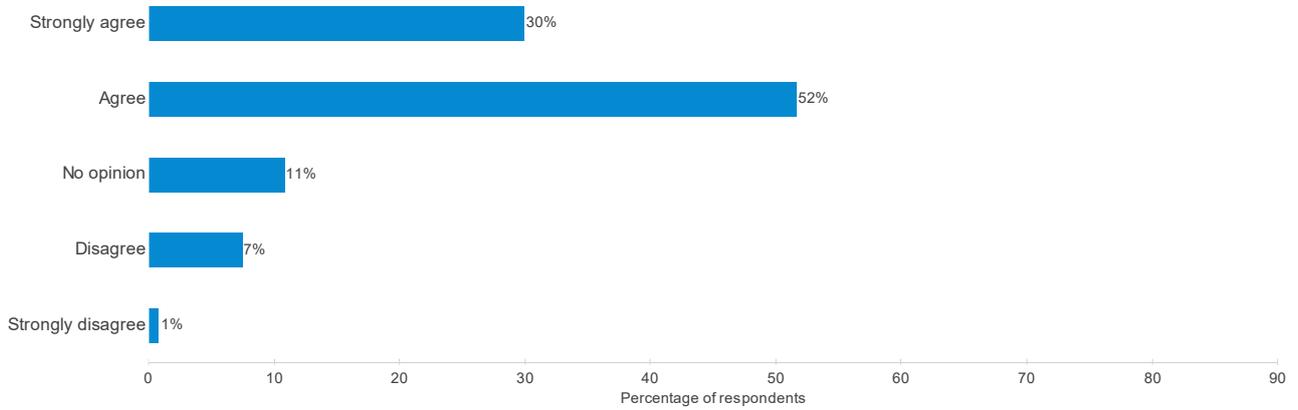


Figure 34: Response to question 'I have learnt something new about cancer signs and symptoms'

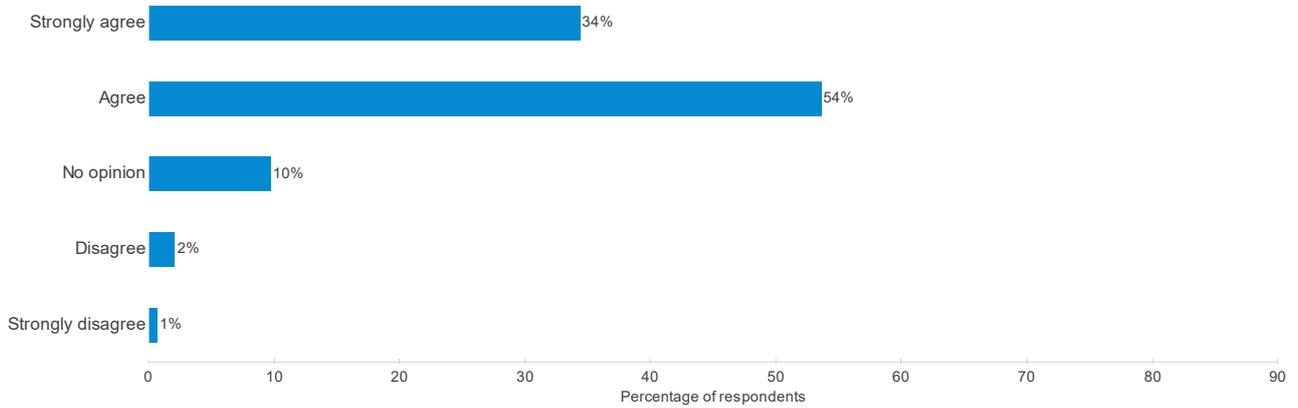


Figure 35: Response to question 'I am more likely to speak to my GP about cancer signs and symptoms in the future'

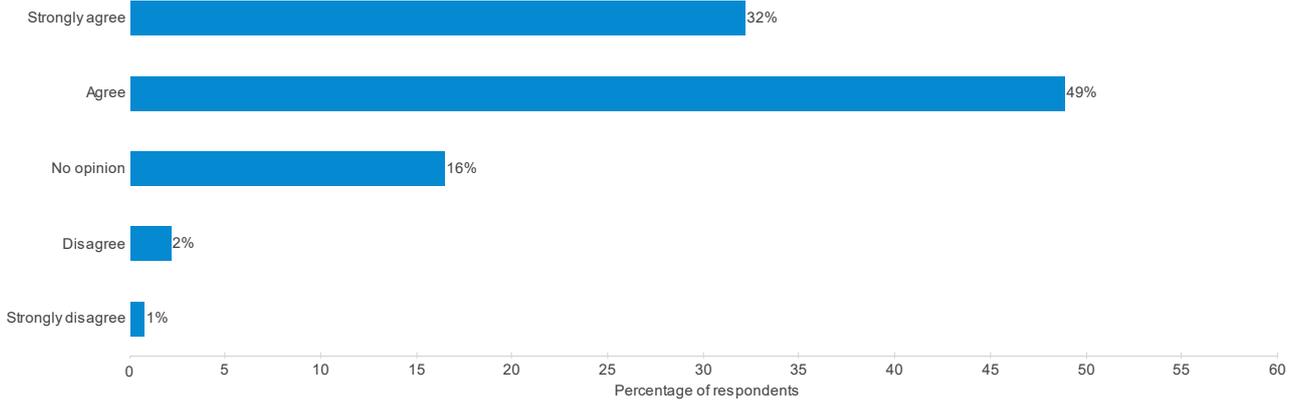


Figure 36: Response to question 'I am more likely to go to screening (if applicable)'

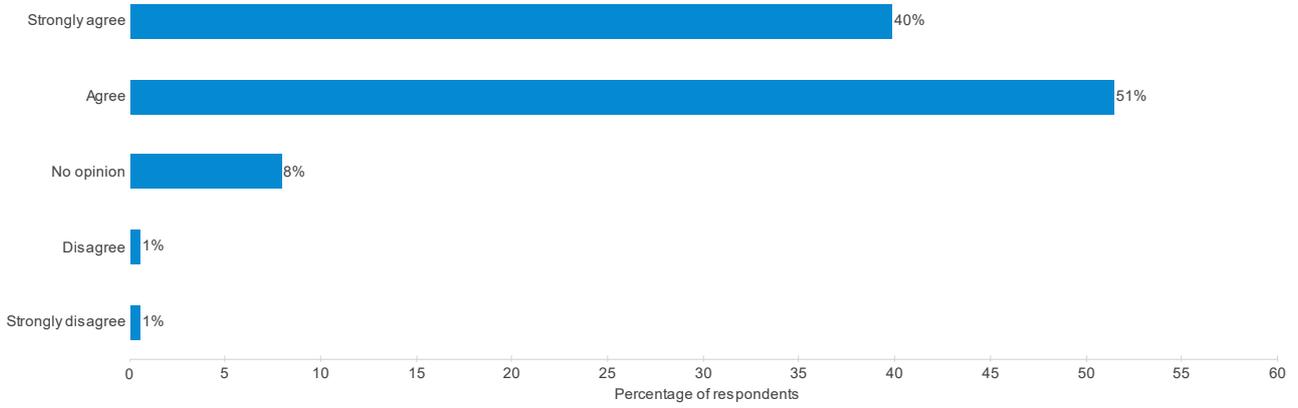


Figure 37: Response to question 'I would recommend 'Wise Up To Cancer' to friends and family'

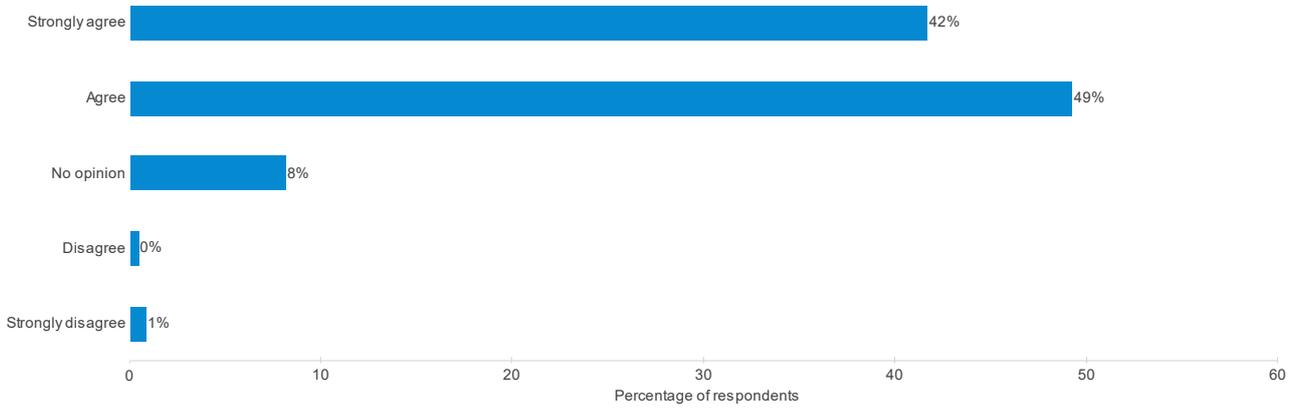


Figure 38: Response to question 'I feel positive about Yorkshire Cancer Research funding 'Wise Up To Cancer''

Appendix 7b. Wise Up To Cancer Monthly Report (Community Settings)

Overall 736 respondents completed this questionnaire. 637 consented to receive the follow-up questionnaire.

The questionnaire was delivered across the following locations, with the number of questionnaires completed at each location shown below.

Location:

Counts Respondents	
Base	736
Location:	
Armley Festival	34
Armley Helping Hands	15
Armley One Stop Centre	48
Armley Park	71
Armley Park Court	5
AVSED	35
Bramley Lawns	35
Bramley Library	6
Bramley Park	22
Bramley shopping centre	57
Bramley, Manor House	7
Burley Lodge Centre	8
Dosti	8
Farnley	1
Headingley Stadium	61
Kirkstall	1
Kirkstall Festival	65
Leeds Museum	8
Leeds University	25
Little London Community Centre	59
New Farnley Community Centre	24
New Wortley Community Centre	35
PEP Mens group, Armley	5
Pudsey	1
Rossefield Manor	3
Ryecroft Academy	19
Stocks Hill Hub	28
Stocks Hill Young Persons Group	5
Together Women	1
Wellington Place	26
West Leeds Activity Centre	14
West Leeds Festival	1
Yeadon library	3

Gender and age

266 were male (37.6% of those who responded to the question), 442 were female (62.4% of those who responded to the question) and 28 did not respond to the gender question.

A total of 728 participants stated their age which ranged from 18 to 90 (mean of 49.49, standard deviation of 17.39). Within the female participants, age ranged from 18 to 90 (mean of 48.04, standard deviation of 17.25). Within the male participants, age ranged from 18 to 89 (mean of 52.08, standard deviation of 17.13).

Breakdown by age group for males and females are shown in figures 1 and 2.

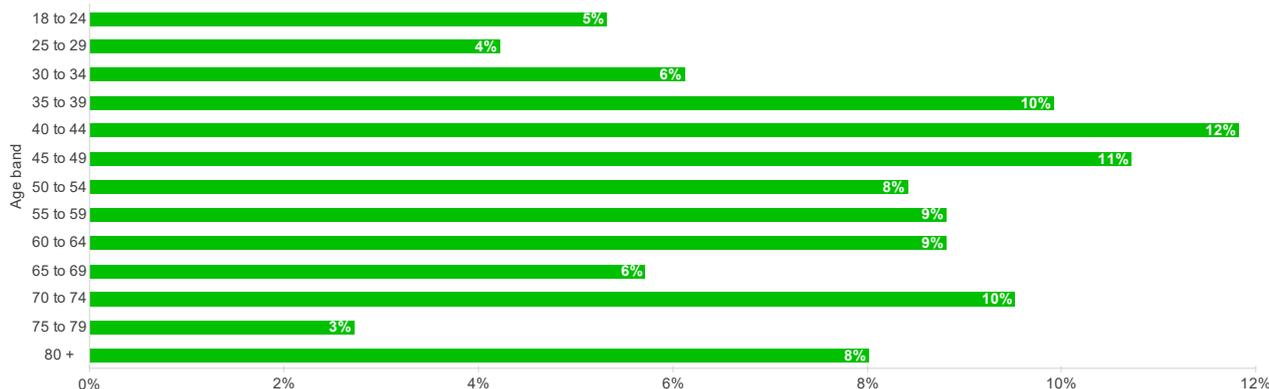


Figure 1. Percentage breakdown for males by age group

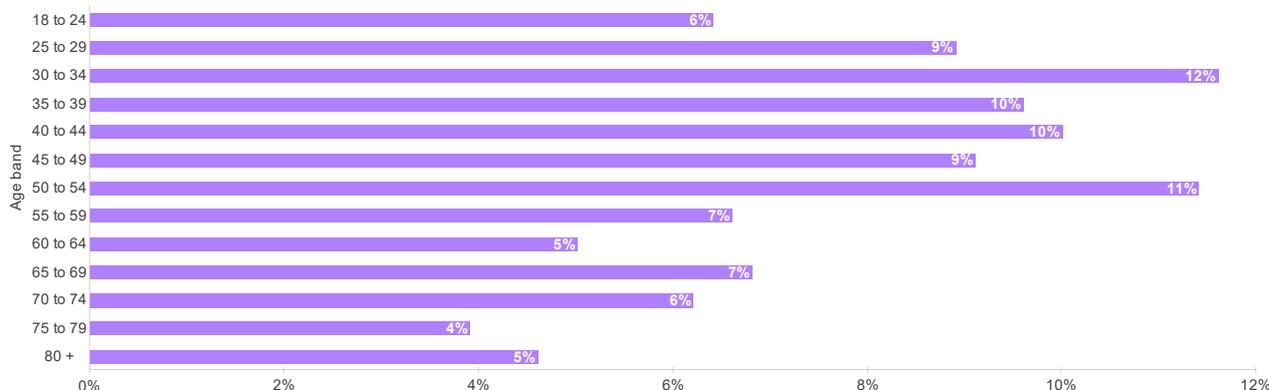


Figure 2. Percentage breakdown for females by age group

Ethnicity

Of the 732 respondents to the ethnicity question, 576 (78.7%) were of White British ethnicity (figure 3). 11 (1.5%) stated 'other ethnicity' (see list 1).

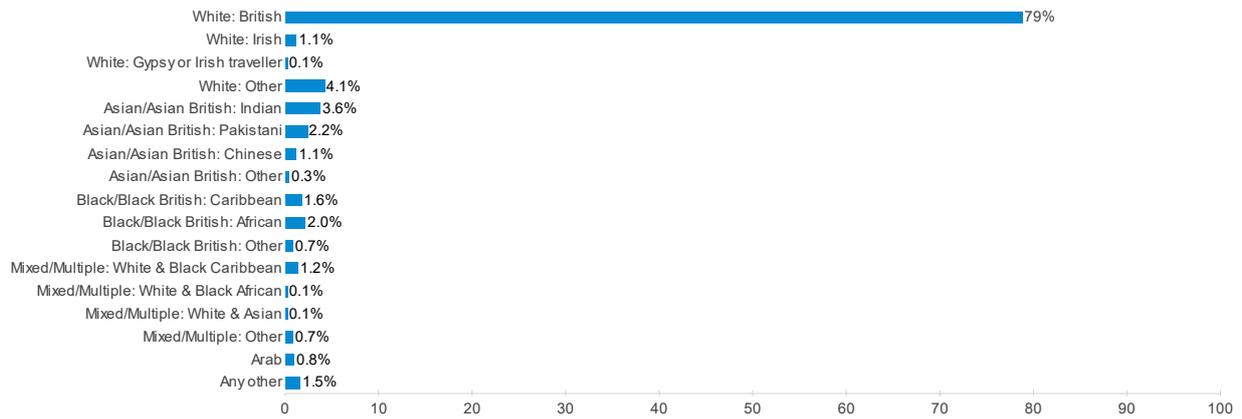


Figure 3: Percentage breakdown for ethnicity.

List 1: Other ethnicities

If other please state
African
Austrian
Indian and mongolian
Lithuanian
Chinese

Lifestyle

Weight

Out of the 722 respondents to the question, 357 (49.4%) thought they were a healthy weight. With regards to gender, 197 females (45.1% of female respondents) felt they were a healthy weight compared to 144 males (55.8% of male respondents). Of those who thought they were a healthy weight, only 50.7% of males and 67.9% of females had a BMI within a normal weight (the remainder were predominantly overweight or obese). 26 males (10.1% of male respondents) were unsure as to whether or not they were a healthy weight compared to 34 females (7.8% of female respondents).

Of the 649 people who provided height and weight data, 224 (34.5%) were overweight and 171 (26.3%) were obese (figure 4). A gendered analysis shows that males were more likely than females to be overweight or obese (figure 5). It is important to note however that height and weight data were self-reported and may therefore have error.

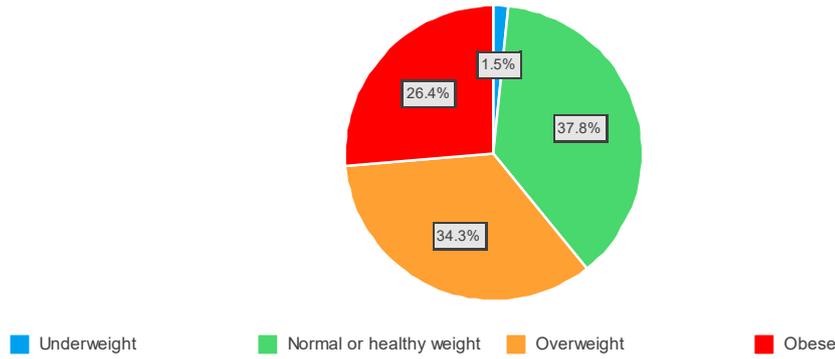


Figure 4: Percentage breakdown of BMI category



Figure 5: Percentage breakdown of BMI category by gender

Eating habits

Red meat

Among the 729 respondents, weekly consumption of red and processed meat ranged from 0 to 17, with an average (+/- SD) consumption of 2.26 (+/-2.03) portions per week.

Among the 264 male respondents, weekly consumption of red and processed meat ranged from 0 to 14, with an average (+/- SD) consumption of 2.55 (+/-2.17) portions per week. Among the 437 female respondents, weekly consumption of red and processed meat ranged from 0 to 17, with an average (+/- SD) consumption of 2.08 (+/-1.95) portions per week. Figures 3 and 4 show the variation in frequency of consumption between men and women.

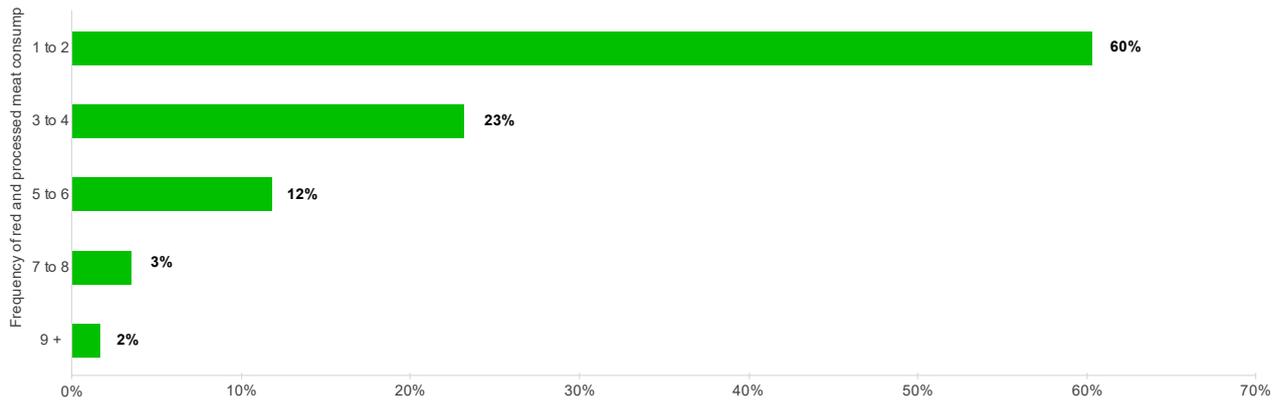


Figure 3. Percentage breakdown of men's red and processed meat consumption (portions per week)

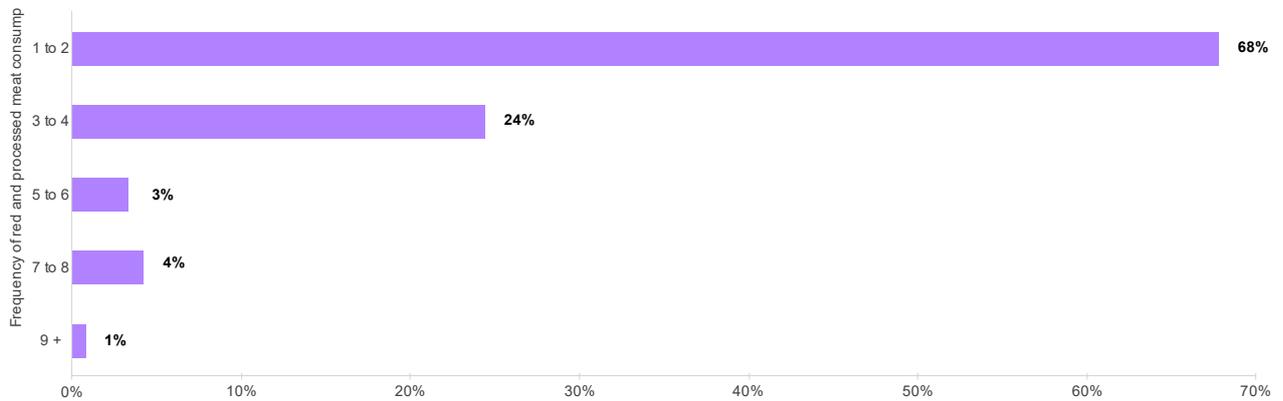


Figure 4. Percentage breakdown of women's red and processed meat consumption (portions per week)

Whole grains

Among the 732 respondents, consumption of wholegrains ranged from 0 to 15, with an average (+/- SD) of 4.96 (+/-2.74) portions per week.

Among the 266 male respondents, consumption of wholegrains ranged from 0 to 14, with an average (+/- SD) of 5.02 (+/-2.81) portions per week. Among the 439 female respondents, consumption of wholegrains ranged from 0 to 15, with an average (+/- SD) of 4.91 (+/-2.70) portions per week. Figures 5 and 6 show the variation in frequency of consumption between men and women.

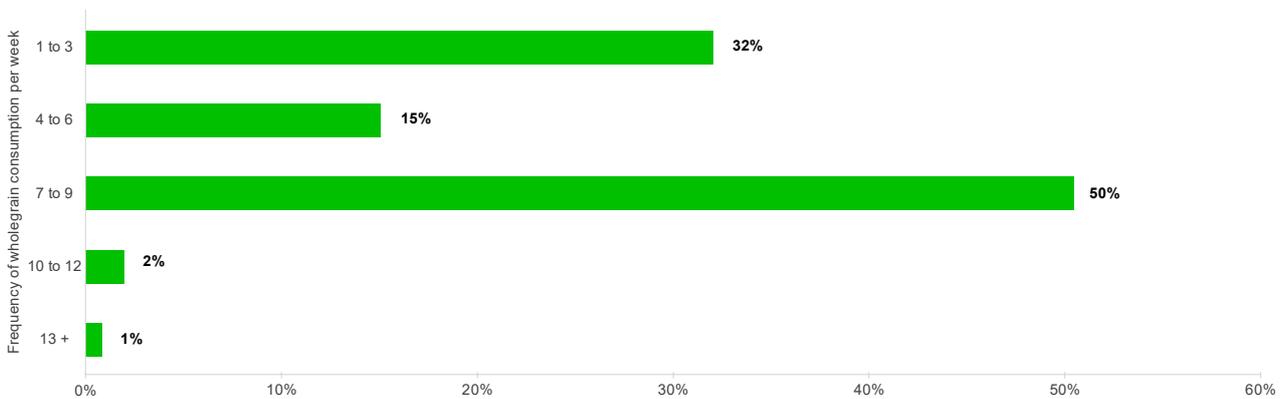


Figure 5. Percentage breakdown of men's wholegrain consumption (portions per week)

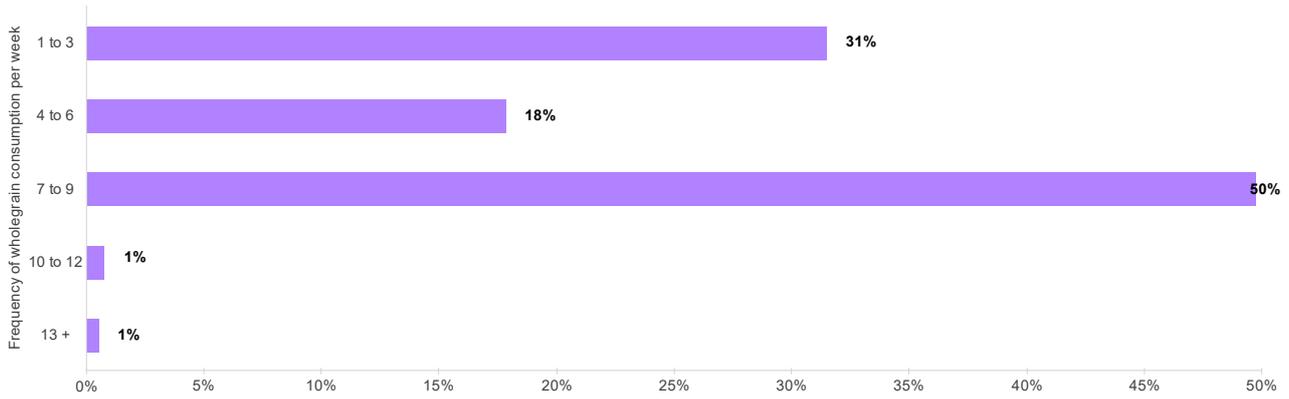


Figure 6. Percentage breakdown of women's wholegrain consumption (portions per week)

Fruit and vegetables

Among the 728 respondents, consumption of fruit and vegetables ranged from 0 to 12, with an average (+/- SD) of 3.70 (+/-2.04) portions per day.

Among the 266 male respondents, weekly consumption of fruit and vegetables ranged from 0 to 10, with an average (+/- SD) of 3.41 (+/-1.99) portions per day. Among the 434 female respondents, consumption ranged from 0 to 12, with an average (+/- SD) of 3.93 (+/-2.04) portions per day. Figures 7 and 8 show the variation in frequency of consumption between men and women.

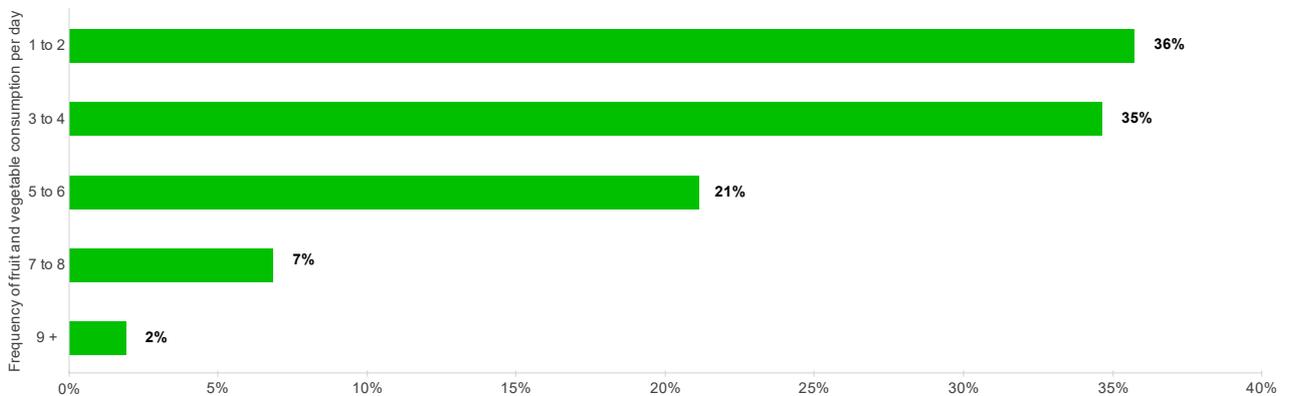


Figure 7. Percentage breakdown of men's fruit and vegetable consumption (portions per day)

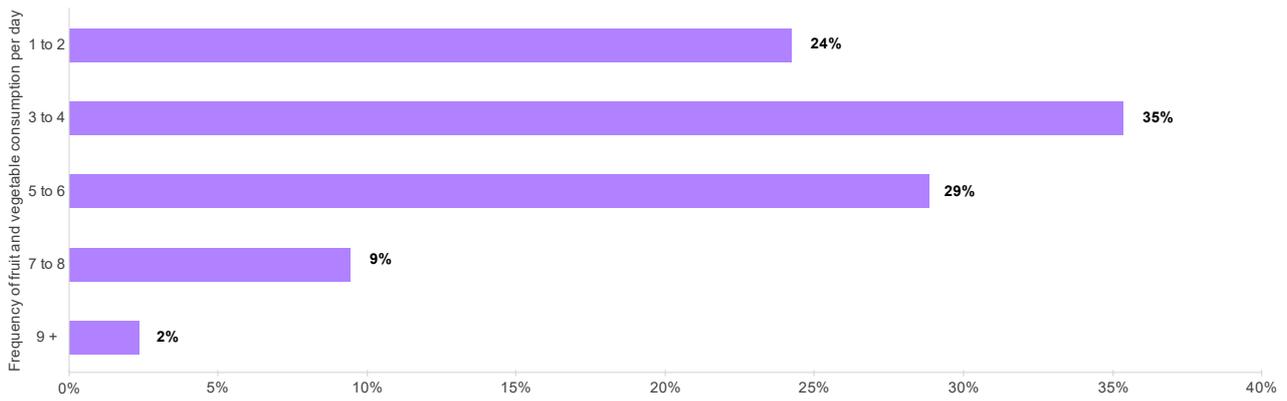


Figure 8. Percentage breakdown of women's fruit and vegetable consumption (portions per day)

Physical activity

Among the 723 respondents, the number of days people were physically active for at least 30 minutes ranged from 0 to 7, with an average (+/- SD) of 4.59 (+/-2.37) days per week.

Among the 264 male respondents, the number of days men were physically active for at least 30 minutes ranged from 0 to 7, with an average (+/- SD) of 4.51 (+/-2.39) days per week. Among the 432 female respondents, the number of days women were physically active for at least 30 minutes ranged from 0 to 7, with an average (+/- SD) of 4.65 (+/-2.37) days per week. Figures 9 and 10 show the variation in frequency between men and women.

Inactive was classed as not completing at least five 30-minute session a week. A total of 318 (44.0% of all participants) were inactive which included 44.3% of all men and 43.3% of all women.

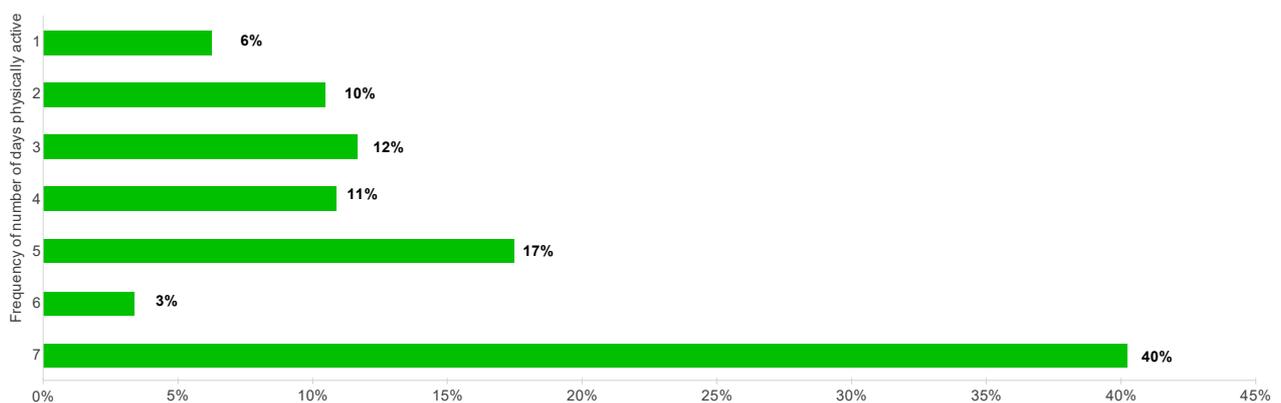


Figure 9. Men's weekly participation in exercise/physical activity (number of days they complete 30 minutes or more)

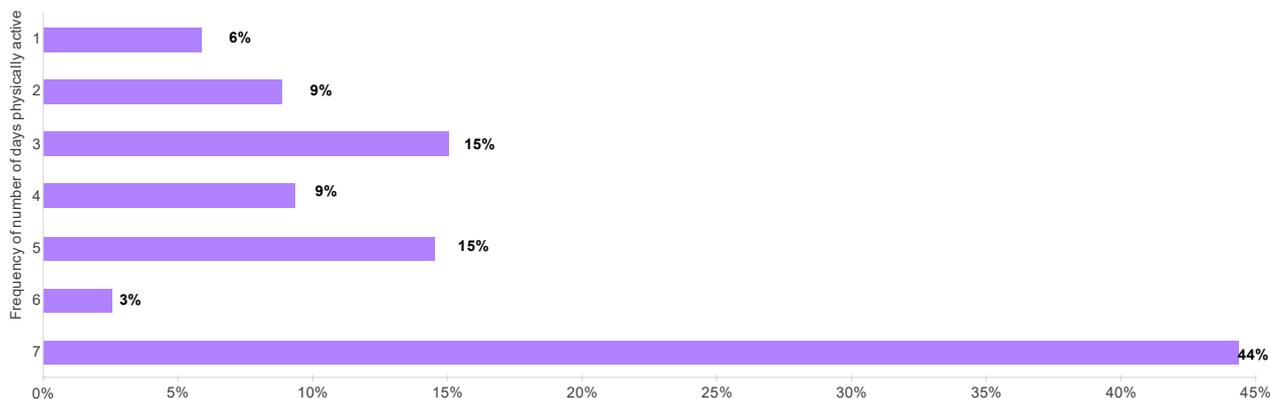


Figure 10. Women's weekly participation in exercise/physical activity (number of days they complete 30 minutes or more)

Alcohol consumption

Within the 734 respondents, 481 (65.4%) consumed alcohol (72.6% of males and 61.1% of females).

Of those who consumed alcohol, 26 (13.7%) drank on four or more occasions each week (figure 9). Figure 10 shows a gendered analysis of frequency of alcohol consumption.

Of those who consumed alcohol, 86 people (17.9%) stated that they drank 9 or more units on a single occasion (figure 11). The typical number of units consumed on each occasion by male and female drinkers is shown in figure 12.

192 drinkers (40.3%) said they never consumed 6 or more units of alcohol on a single occasion which included 73 males (38.2%) and 113 females (42.0%). The frequency of binge drinking (6 or more units on one occasion) among male and female drinkers is shown in figure 13. Figure 14 shows a gendered analysis of frequency of binge drinking.

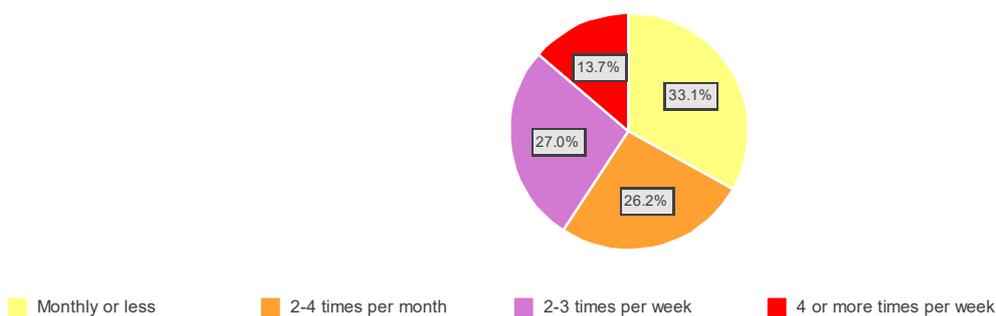


Figure 9: Percentage breakdown showing frequency of alcohol consumption among drinkers

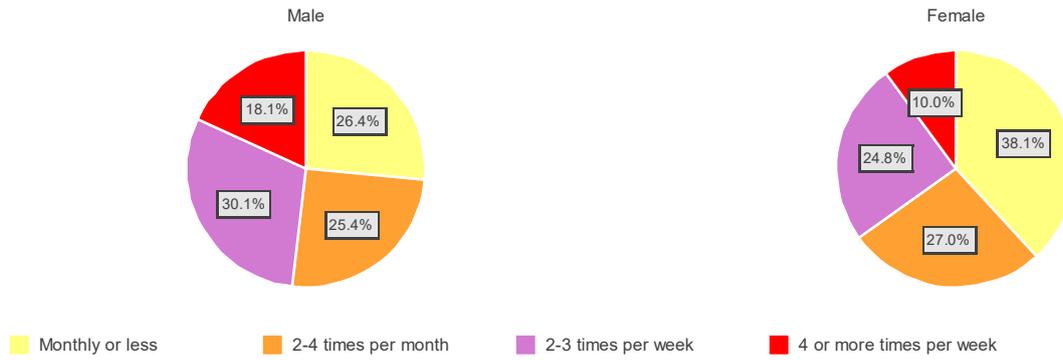


Figure 10: Percentage breakdown showing frequency of alcohol consumption by gender

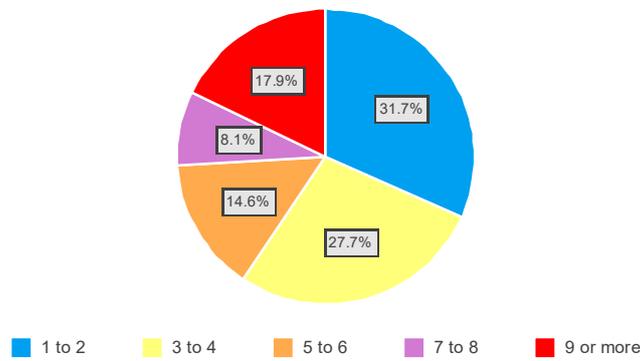


Figure 11: Estimated number of units consumed on each occasion

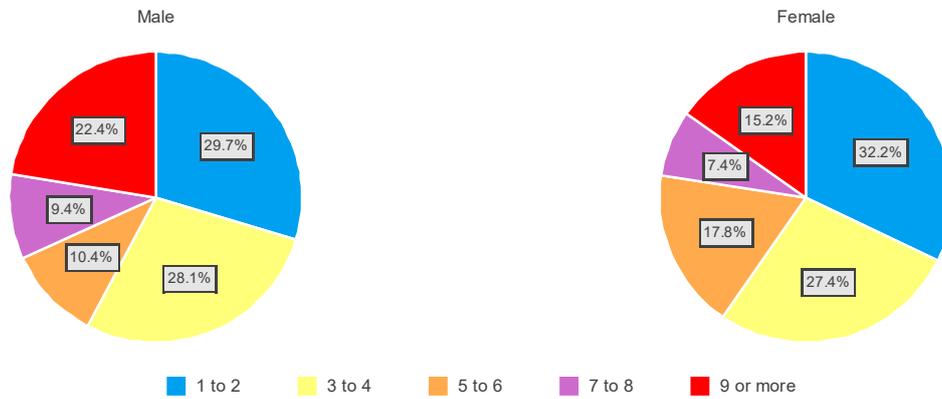


Figure 12: Estimated number of units consumed on each occasion by gender

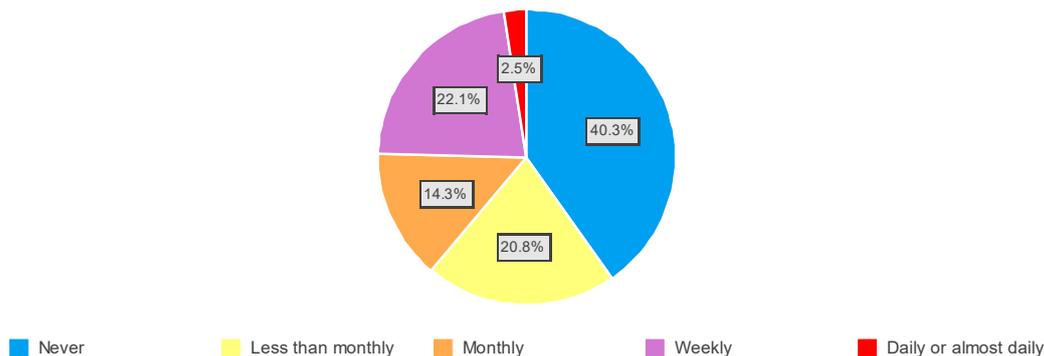


Figure 13: Frequency of binge drinking (6 or more units on one occasion)

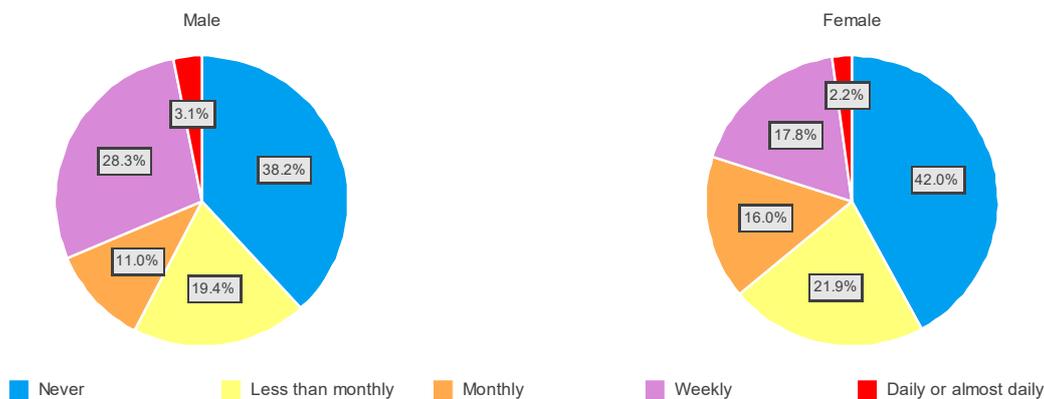


Figure 14: Frequency of binge drinking (6 or more units on one occasion) by gender

Smoking

141 people (19.2% of all respondents) currently smoked either on a daily basis or less often (equal to 22.2% of men and 17.2% of women). Frequency of smoking is shown by gender in figure 15.

17 people (2.3% of all respondents) currently used smokeless tobacco either on a daily basis or less often (equal to 2.6% of men and 2.3% of women). Frequency of smokeless tobacco consumption is shown by gender in figure 16.



Figure 15: Smoking status by gender



Figure 16: Smokeless tobacco use by gender

Lifestyle - Future Changes

553 people (75.1%) set at least one lifestyle goal (70.7% of men and 77.8% of women).

Of those people setting lifestyle goals, 307 (55.5%) were signposted to a lifestyle support service (51.6% of men and 56.7% of women who set at least one lifestyle goal).

Weight and Diet Goals

407 people (137 males and 252 females) set a goal to either reduce their weight, eat a healthier diet or both (a total of 515 goals as shown in table 1). 7 males and 34 females set both goals.

Of the 411 people who had been classified as overweight or obese (BMI > 24.9), 276 (67.2%) had set one or both goals. This included 60.0% of overweight men and 71.7% of overweight women.

201 people were signposted to weight management services (49.4% of people setting a weight and/or diet goal) including 43.1% of men and 52.0% of women who had set this goal.

Of the 276 overweight people who set a goal, 148 (53.6%) were signposted to services. This included 43.4% of those men and 58.2% of those women.

Table 1: Weight and diet goal by responses

Counts Responses	Total	No reply	Respondent gender	
			Male	Female
Base	515	25	171	319
Goal				
Reduce my weight	268	13	79	176
Eat a healthier diet	247	12	92	143

Physical Activity Goal

259 people (35.2%) set a goal to be more physically active, which by gender equated to 82 men and 168 women (30.8% and 38.0% of all men and women).

Of the 318 people who were not completing at least five 30 minute sessions of physical activity a week (inactive), 161 (50.6%) set a goal to increase physical activity. This included 47.9% of those men and 52.9% of those women.

155 people who set an activity goal were signposted to physical activity services (59.8% of people who set a goal). This included 52.4% of those males and 61.3% of females.

100 inactive people who set a goal were signposted to services (62.1%). This included 51.8% of inactive men and 65.7% of inactive women.

Alcohol

55 people set a goal to either cut down on their alcohol consumption or give up alcohol (11.4% of all drinkers, table 2).

20 people were signposted to alcohol support services (36.4% of those drinkers setting a goal) including 33.3% of those males and 39.3% of those females.

Table 2: Alcohol goal by respondents

Break % Respondents	Total	Missing No reply	Respondent gender	
			Male	Female
Base	55	3	24	28
Goal				
Cut down on my alcohol consumption	89.1%	100.0%	79.2%	96.4%
Give up alcohol	12.7%	-	20.8%	7.1%

Smoking

72 people (50.0% of tobacco users) set a goal relating to smoking or smokeless tobacco use (40.0% of male tobacco users and 57.7% of female tobacco users, table 3).

73.6% of these people setting a goal, including 70.8% of males and 73.3% of females were signposted to smoking cessation services.

Table 3: Smoking/smokeless tobacco goal by respondents

Break % Respondents	Total	Missing No reply	Respondent gender	
			Male	Female
Base	72	3	24	45
Goal				
Cut down on smoking	62.5%	66.7%	70.8%	57.8%
Stop smoking	37.5%	33.3%	29.2%	42.2%
Cut down on smokeless tobacco	1.4%	-	-	2.2%
Stop using smokeless tobacco	-	-	-	-

Other Goals

Other goals set and other signposting outside of the offered lifestyle goals (weight and diet, tobacco use, alcohol consumption and physical activity) are shown in tables 4 and 5.

Table 4: Other goals set (maximum of three)

1.	2.	3.
	Staying sober	
	To get motivated to get out of the house	
	Better sleep routine	
	Better sleep	
	Register with the gp	
	Eat less watch portion size	
	Sleeping more, not watching tv before bedtime	
	Better sleep habit	
	More sleep	
	More sleep	
	Attend mindfulness	

Table 5: Signposting for other goals set

1.	2.	3.
GP		

Cancer Awareness

642 people were able to list one or more signs and symptoms potentially related to cancer. This included 222 men (83.5%) and 402 women (91.0%). Differences between men in women in their ability to list signs and symptoms are shown in figure 17.

For both men and women, the most commonly listed response was 'lump/swelling' (figure 18) , however only 21.9% of men were aware of this sign compared to 51.0% of women.

Other signs listed by males and females are shown underneath.

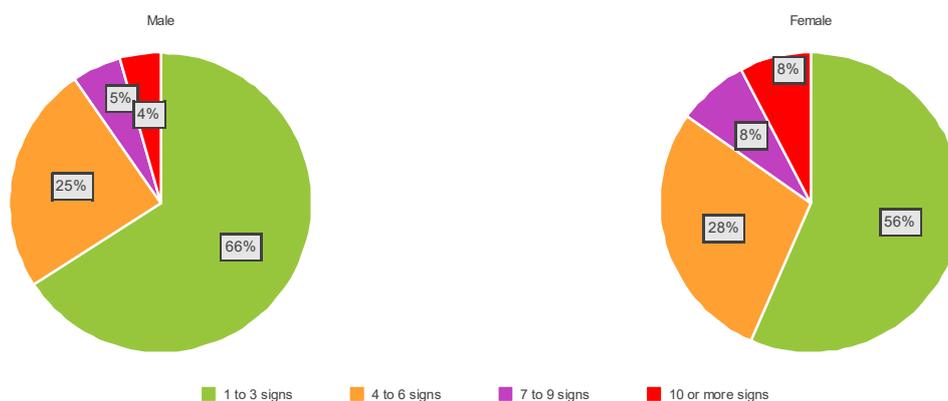


Figure 17: Awareness of common signs and symptoms of cancer by gender (% of all males and females)

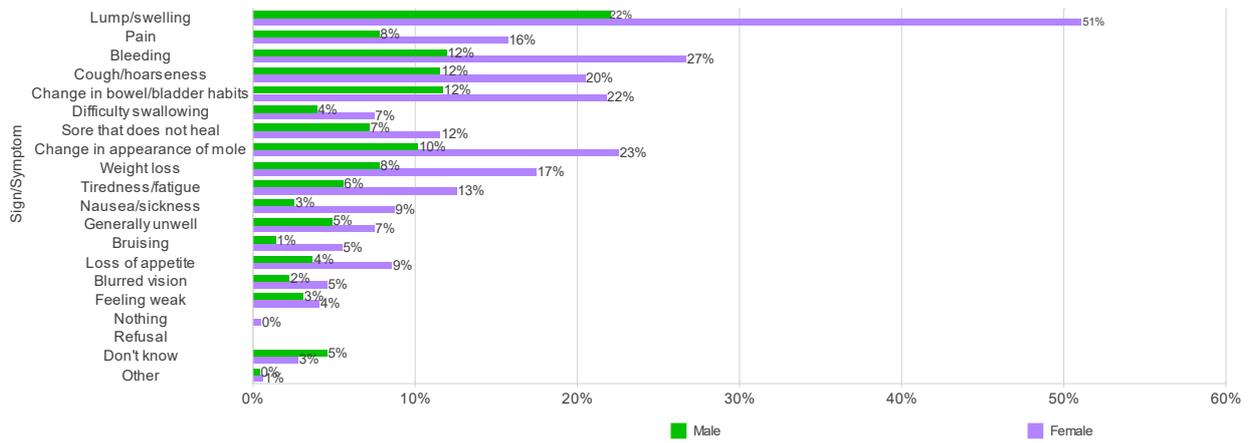


Figure 18: Percentage breakdown of cancer knowledge by gender (% of gender stating response)

(If other please state:)

- Stress
- Aches
- Bloating
- Breathlessness
- Bloating
- Dizziness, sweating

Cancer Signs and Symptoms

286 people, including 100 men (37.6%) and 177 women (40.0%), had recently experienced one or more of the listed signs or symptoms of cancer (figure 19). Specific symptoms reported are shown in figures 20 to 22.

42 males (15.8%) had experienced signs of male-specific cancer.
 23 females (4.8%) had experienced signs of female-specific cancer.

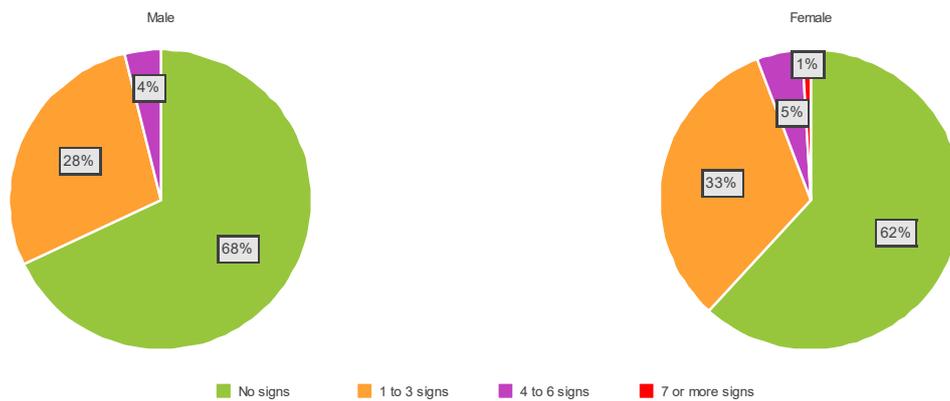


Figure 19: Reported signs and symptoms of cancer by gender (% of all males and females)

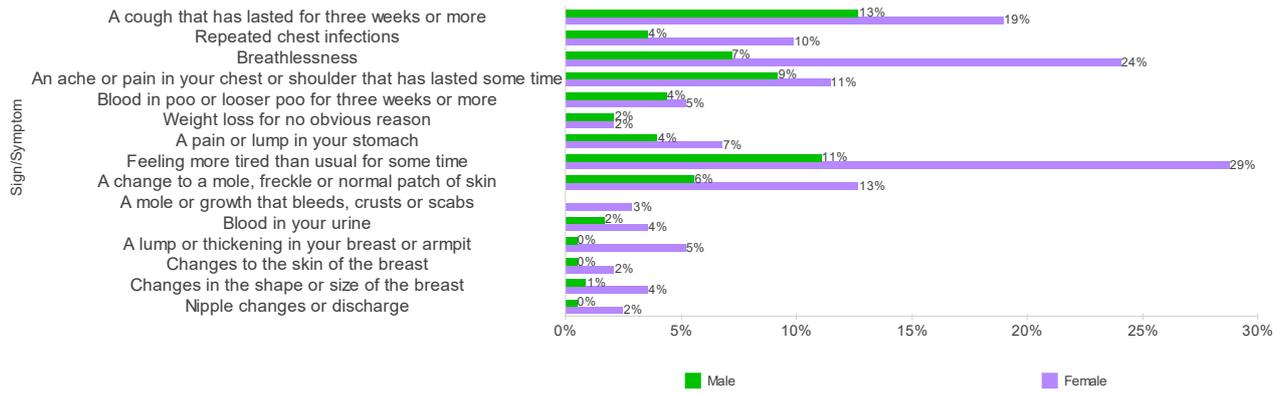


Figure 20: Percentage breakdown of cancer signs and symptoms experienced by gender (% of gender stating response)

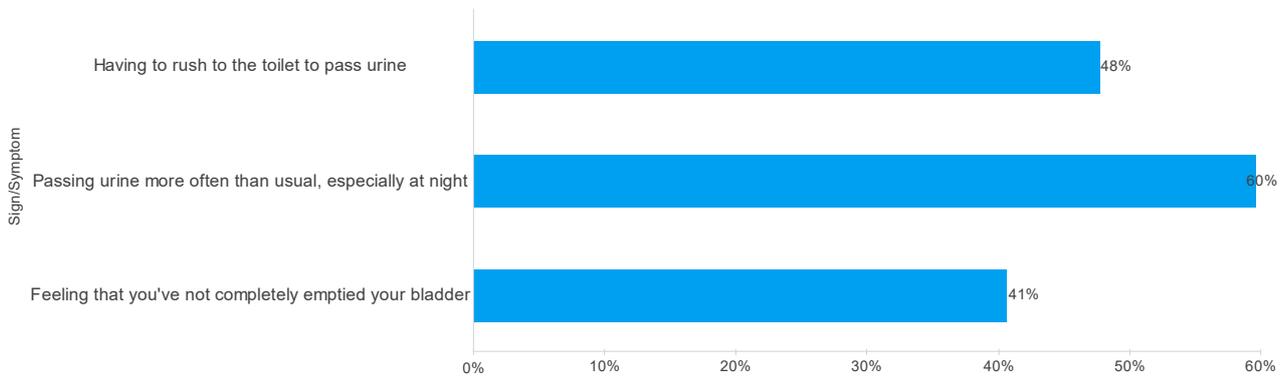


Figure 21: Percentage breakdown of male specific cancer signs (% of male respondents for this question)

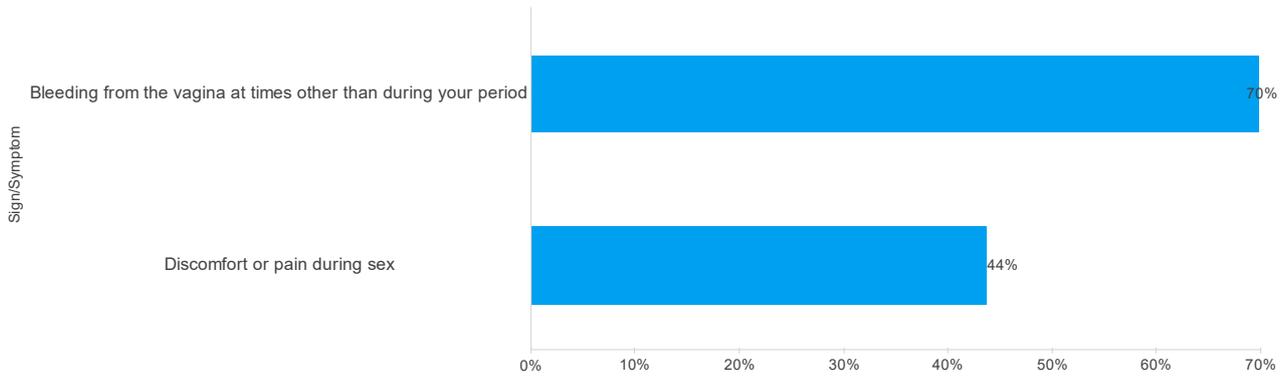


Figure 22: Percentage breakdown of female-specific cancer signs (% of female respondents to this question)

Of those people reporting experiencing any signs and symptoms potentially related to cancer, 82 (29.0%) had not spoken to their GP, but 61 (76.3%) of these said they planned to do so.

Of the 99 men reporting experiencing any signs and symptoms potentially related to cancer, 45 (45.5%) had not spoken to their GP, but 38 (86.4%) of these said they planned to do so.

Of the 175 women reporting experiencing any signs and symptoms potentially related to cancer, 35 (20.0%) had not spoken to their GP, but 22 (64.7%) of these said they planned to do so.

Cancer Screening

466 people (63.3% of all participants) were eligible for any of the four screening programmes discussed (cervical, breast, bowel and chest x-ray).

22 women (4.7%) were eligible for all three national screening programmes (cervical, breast and bowel).

325 women (69.1%) were eligible for the national cervical screening programme. Figure 23 shows completion of recent screening among these.

147 women (31.3%) were eligible for the national breast screening programme. Figure 24 shows completion of recent screening among these.

149 people (20.2%) were eligible for the national bowel screening programme. This included 63 males (23.7%) and 80 females (18.1%). Figure 25 shows completion of recent screening among these.

47 people (6.4%) met the eligibility criteria for chest screening (aged over 50 and reported a persistent cough for three weeks or more). By gender, this was 18 males (6.8%) and 29 females (6.6%).

674 people were asked about awareness of chest screening. Figure 26 shows awareness among males and females.

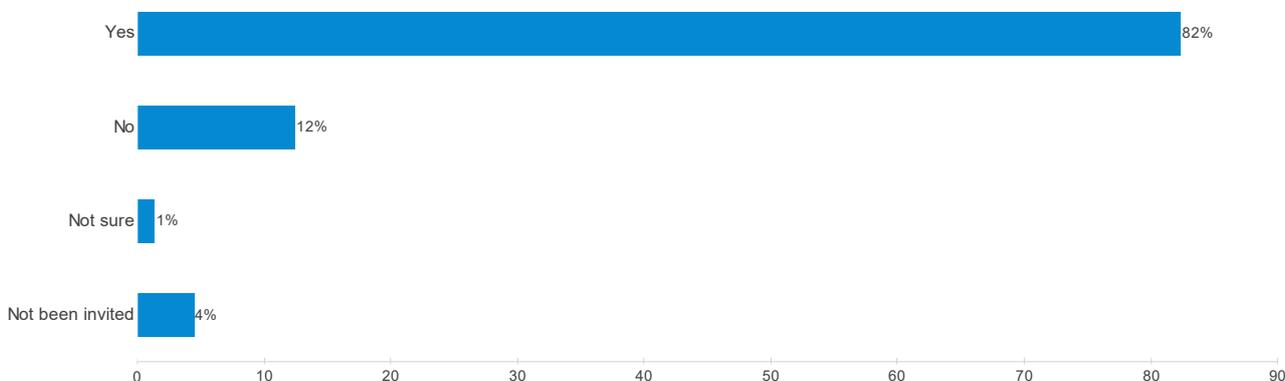


Figure 23: Percentage of eligible women completing their recent cervical screen

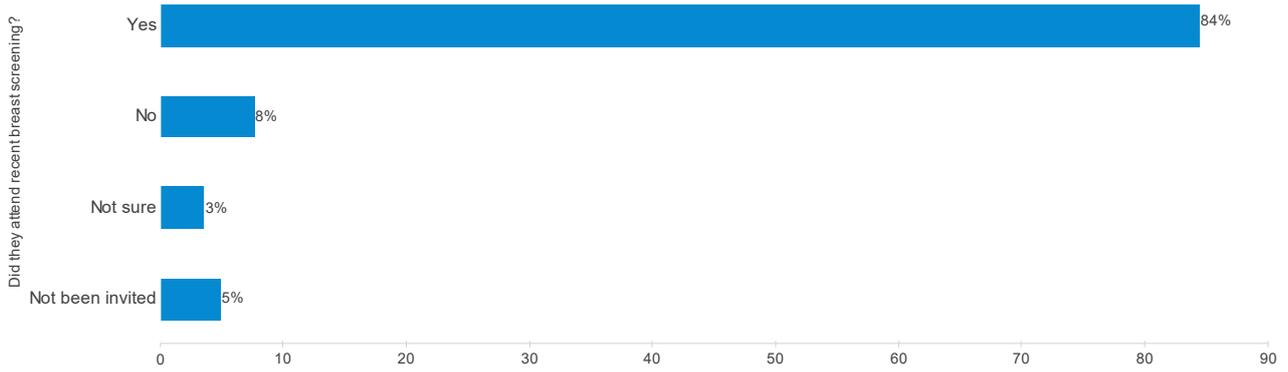


Figure 24: Female participation in recent breast screening (among those eligible)

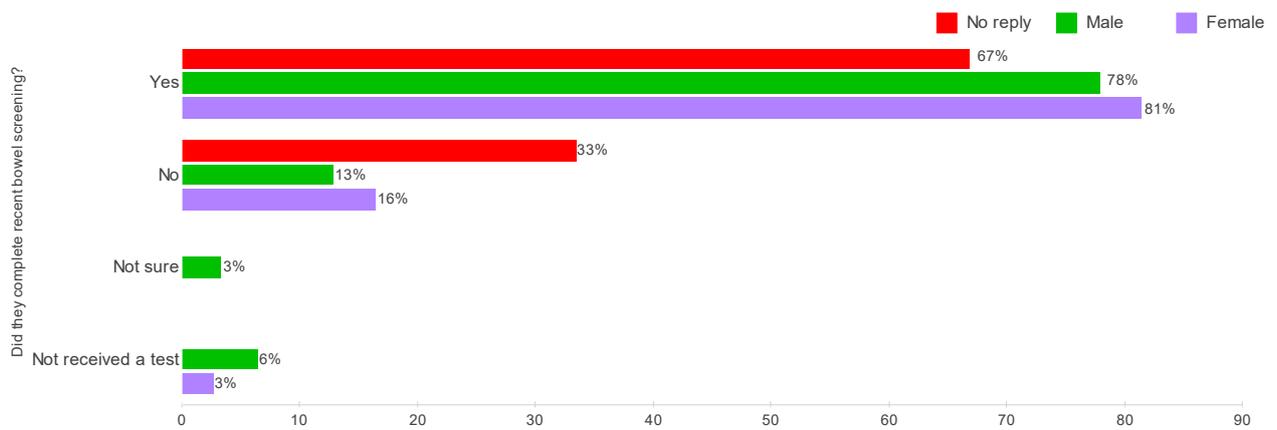


Figure 25: Participation in recent bowel screening (among those eligible)

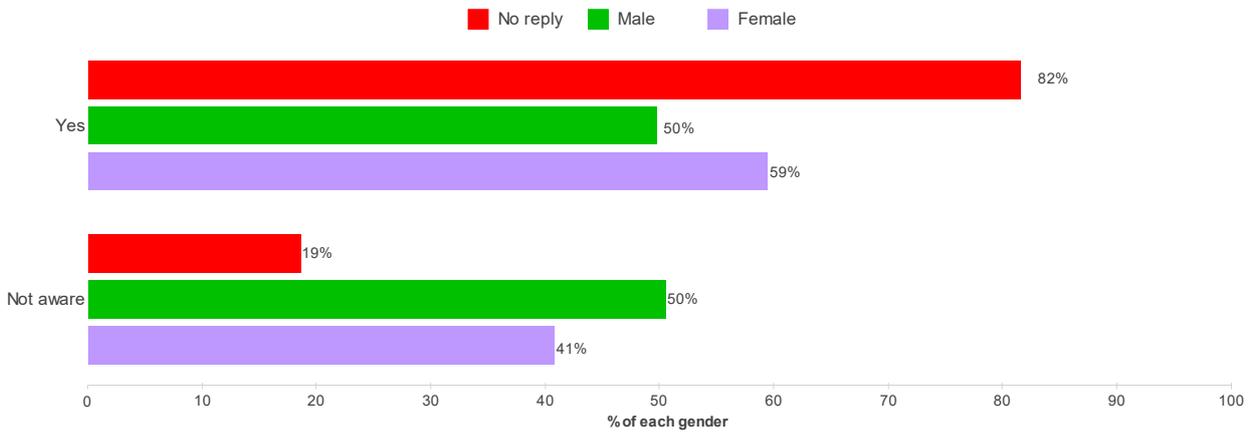


Figure 26: Awareness of chest screening programme (all ages asked)

Screening Goals

77 screening goals were set by 70 people (including 12 men and 56 women).

Of the 58 women who hadn't engaged in recent cervical screening, 27 (46.6%) set a goal relating to this. Of the 23 women who hadn't engaged in recent breast screening, 16 (69.6%) set a goal relating to this.

Of the 31 people who hadn't engaged in recent bowel screening (including 14 men and 15 women), 20 set a goal (64.5%) which included 8 men (57.1% of those who hadn't engaged) and 11 women (73.3% of those who hadn't engaged).

Of the 48 people aged 50 or over and with a persistent cough (including 18 men and 30 women), 14 (29.2% of those eligible) set a chest screening goal which included 4 men (22.2% of those eligible) and 10 women (33.3% of those eligible).

Figure 27 shows the breakdown in numbers across goals.

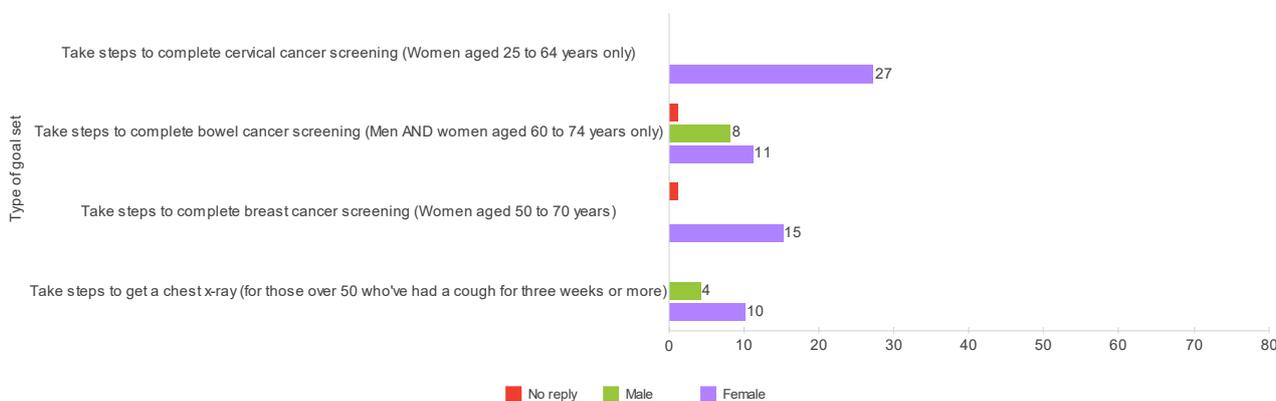


Figure 27: Number of screening goals set.

Feedback

221 people (31.3%) had not previously heard of Yorkshire Cancer Research. Figures 28 to 33 show the responses to the questions relating to programme feedback.

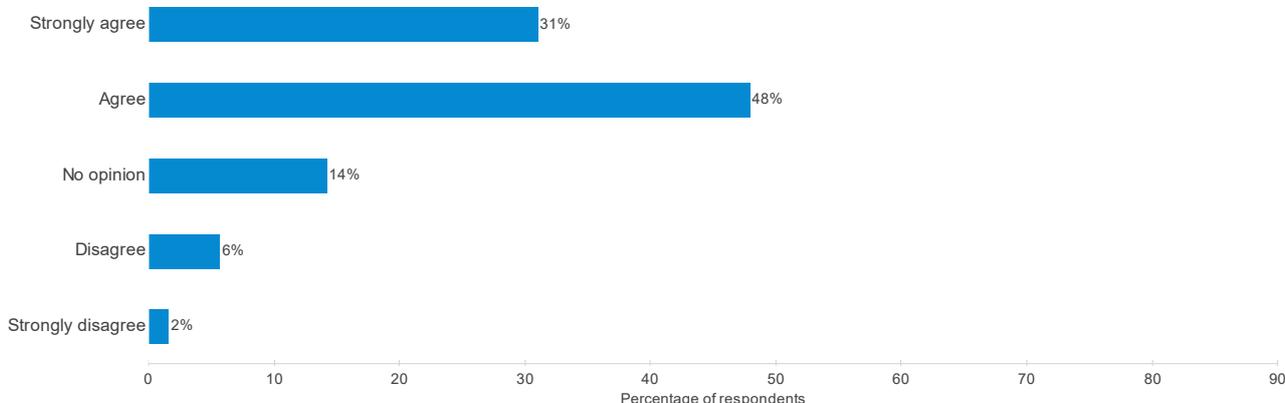


Figure 28: Response to question 'I am considering making changes to my lifestyle as a result of Wise Up To Cancer'

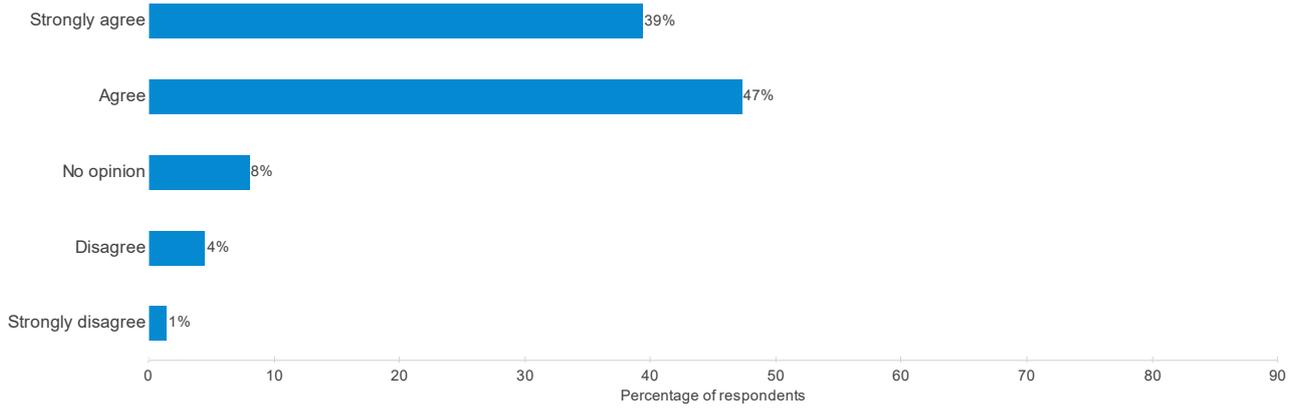


Figure 29: Response to question 'I have learnt something new about cancer signs and symptoms'

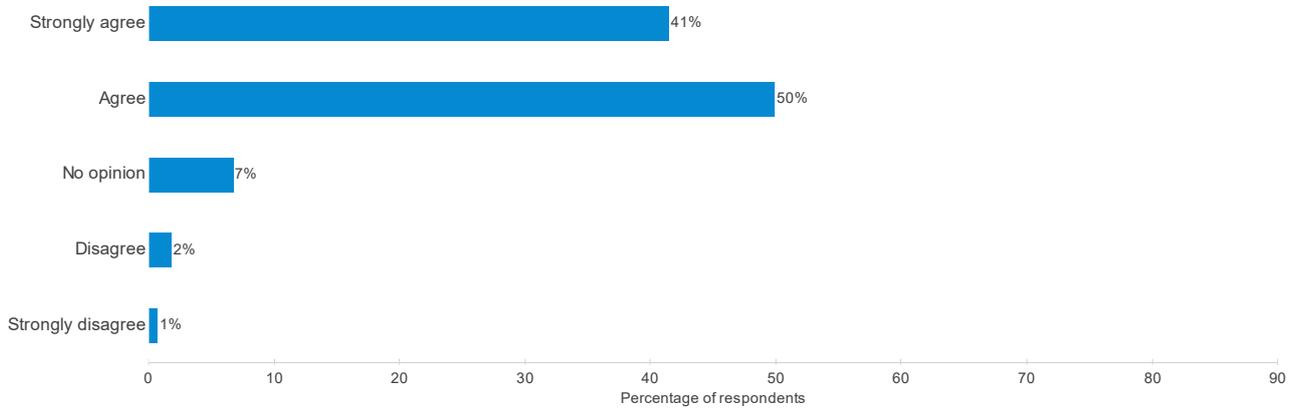


Figure 30: Response to question 'I am more likely to speak to my GP about cancer signs and symptoms in the future'

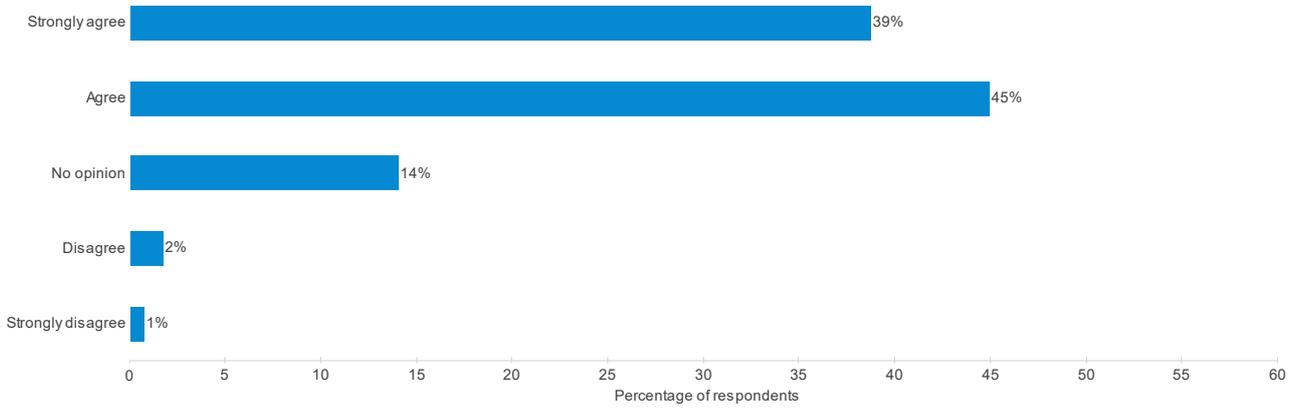


Figure 31: Response to question 'I am more likely to go to screening (if applicable)'

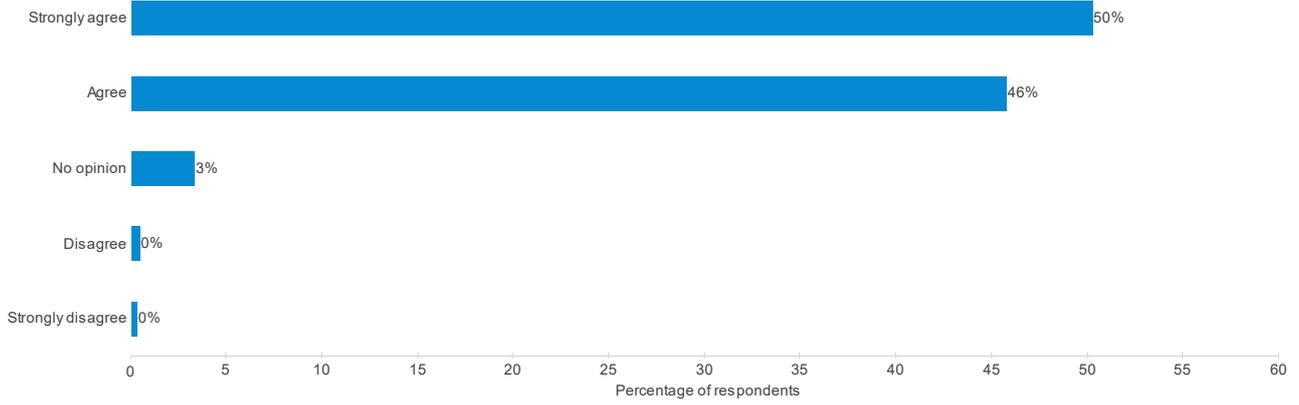


Figure 32: Response to question 'I would recommend 'Wise Up To Cancer' to friends and family'

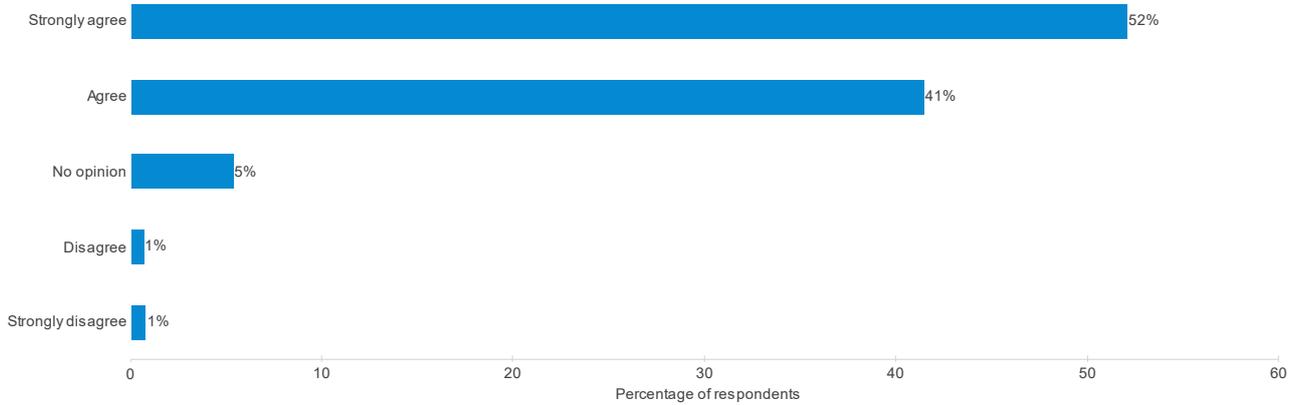


Figure 33: Response to question 'I feel positive about Yorkshire Cancer Research funding 'Wise Up To Cancer'

Appendix 7c. Wise Up To Cancer Monthly Report (Pharmacies)

Overall 611 respondents completed this questionnaire. 294 consented to receive the follow-up questionnaire.

The questionnaire was delivered across the following locations, with the number of questionnaires completed at each location shown below.

Location:

Counts Respondents	
Base	611
Location:	
Cohen's Chemist (5954)	67
LloydsPharmacy (Branch: 0035 - 5901 Trinity Medical Centre)	33
LloydsPharmacy (Branch: 0313 - 5974 Hemsworth)	38
LloydsPharmacy (Branch: 6068 - 5966 Wrangbrook Road)	90
LloydsPharmacy (Branch: 6208 - 5919 Tieve Tara)	50
LloydsPharmacy (Branch: 6745 - 5967 Stockingate)	59
LloydsPharmacy (Branch: 7095 - 5917 Castleford)	84
Rowlands Pharmacy (Branch: 1299 - 5969 South Elmsall (Branch 1299))	2
Rowlands Pharmacy (Branch: 1311 - 5926 Ferrybridge (Branch 1311))	65
Sharlston Pharmacy (5937)	27
Tesco Instore Pharmacy (Branch: 5740 - 5975 Hemsworth)	49
Whitworth Chemists Ltd (5976 Kinsley)	47

Gender and age

181 were male (29.7% of those who responded to the question), 429 were female (70.3% of those who responded to the question) and 1 did not respond to the gender question.

A total of 611 participants stated their age which ranged from 19 to 90 (mean of 53.76, standard deviation of 16.51). Within the female participants, age ranged from 19 to 88 (mean of 51.73, standard deviation of 15.71). Within the male participants, age ranged from 20 to 90 (mean of 58.49, standard deviation of 17.35).

Breakdown by age group for males and females are shown in figures 1 and 2.

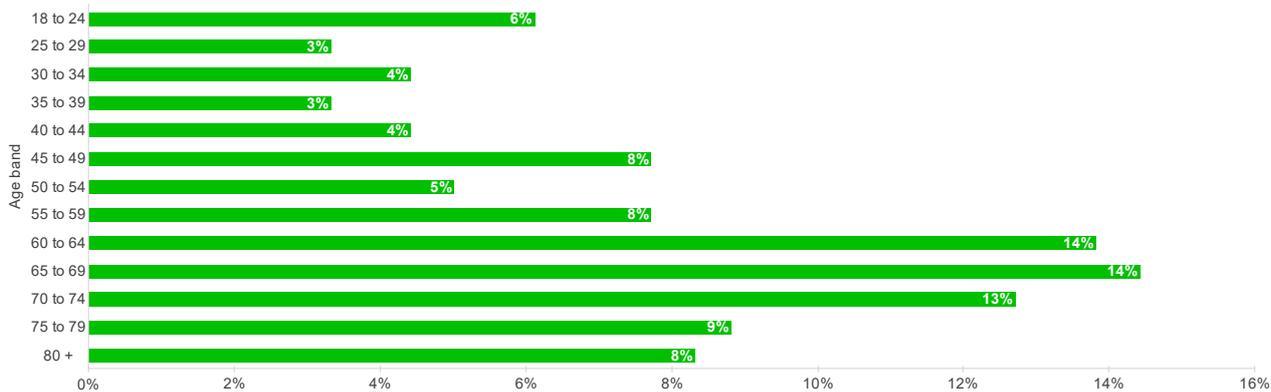


Figure 1. Percentage breakdown for males by age group

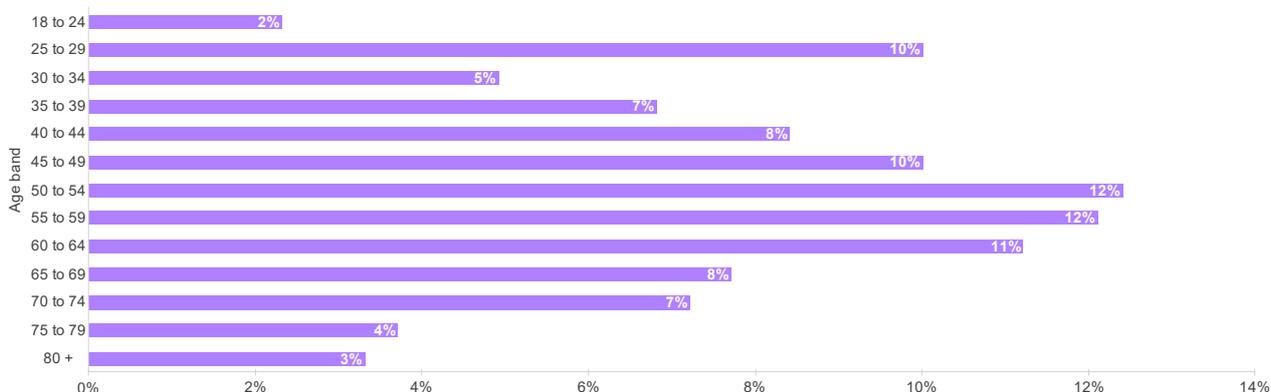


Figure 2. Percentage breakdown for females by age group

Ethnicity

Of the 609 respondents to the ethnicity question, 585 (96.1%) were of White British ethnicity (figure 3). 3 (0.5%) stated 'other ethnicity' (see list 1).

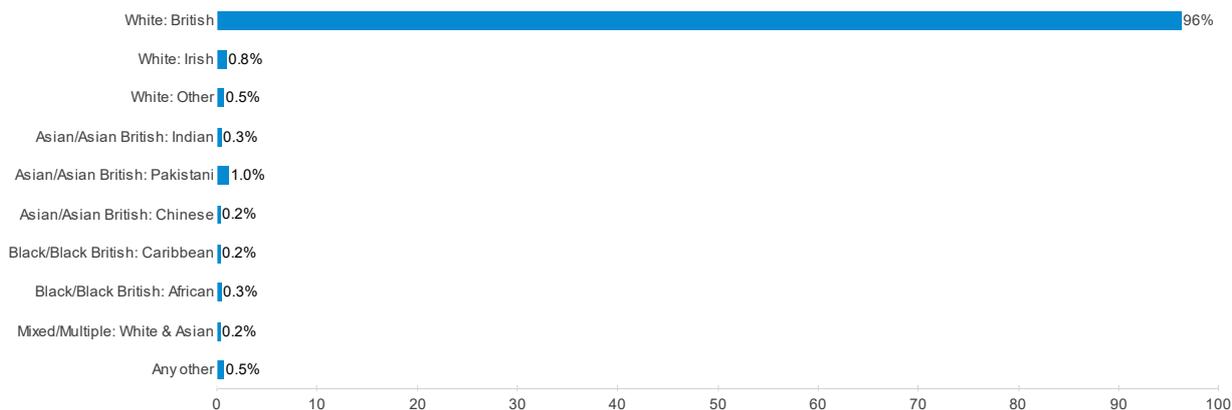


Figure 3: Percentage breakdown for ethnicity.

List 1: Other ethnicities

1

Lifestyle

Weight

Out of the 611 respondents to the question, 272 (44.5%) thought they were a healthy weight. With regards to gender, 174 females (40.6% of female respondents) felt they were a healthy weight compared to 97 males (53.6% of male respondents). Of those who thought they were a healthy weight, only 45.8% of males and 66.3% of females had a BMI within a normal weight (the remainder were predominantly overweight or obese). 29 males (16.0% of male respondents) were unsure as to whether or not they were a healthy weight compared to 56 females (13.1% of female respondents).

Of the 346 people who provided height and weight data, 114 (32.9%) were overweight and 117 (33.8%) were obese (figure 4). A gendered analysis shows that males were more likely than females to be overweight or obese (figure 5). It is important to note however that height and weight data were self-reported and may therefore have error.

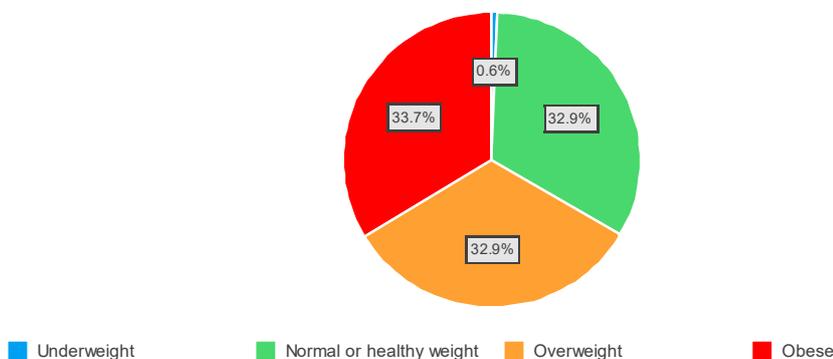


Figure 4: Percentage breakdown of BMI category

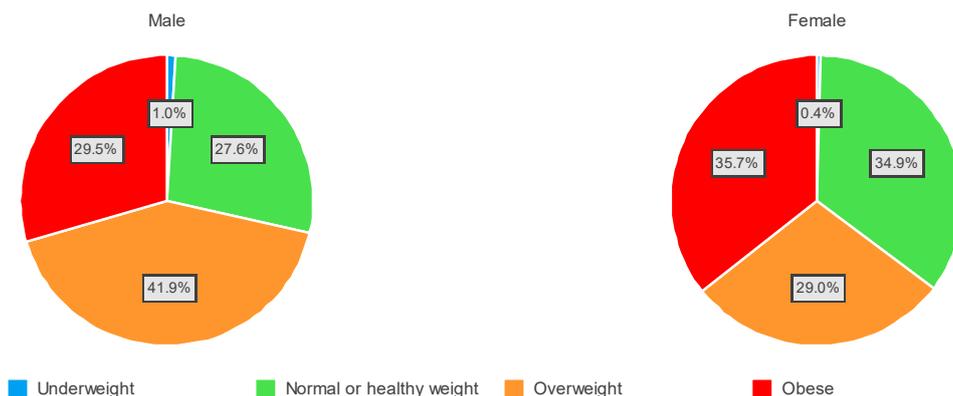


Figure 5: Percentage breakdown of BMI category by gender

Eating habits

Red meat

Among the 607 respondents, weekly consumption of red and processed meat ranged from 0 to 14, with an average (+/- SD) consumption of 2.76 (+/-1.90) portions per week.

Among the 181 male respondents, weekly consumption of red and processed meat ranged from 0 to 14, with an average (+/- SD) consumption of 3.06 (+/-1.94) portions per week. Among the 425 female respondents, weekly consumption of red and processed meat ranged from 0 to 7, with an average (+/- SD) consumption of 2.63 (+/-1.87) portions per week. Figures 3 and 4 show the variation in frequency of consumption between men and women.

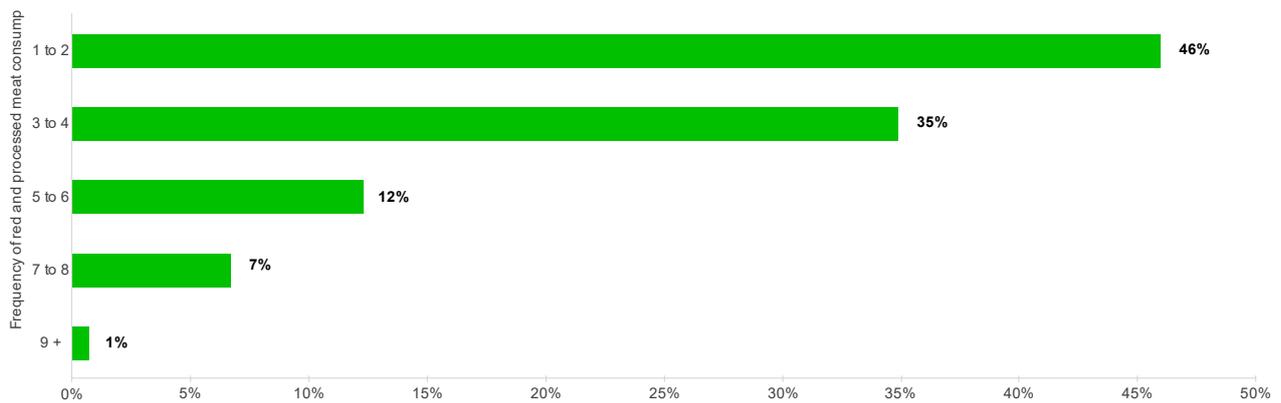


Figure 3. Percentage breakdown of men's red and processed meat consumption (portions per week)

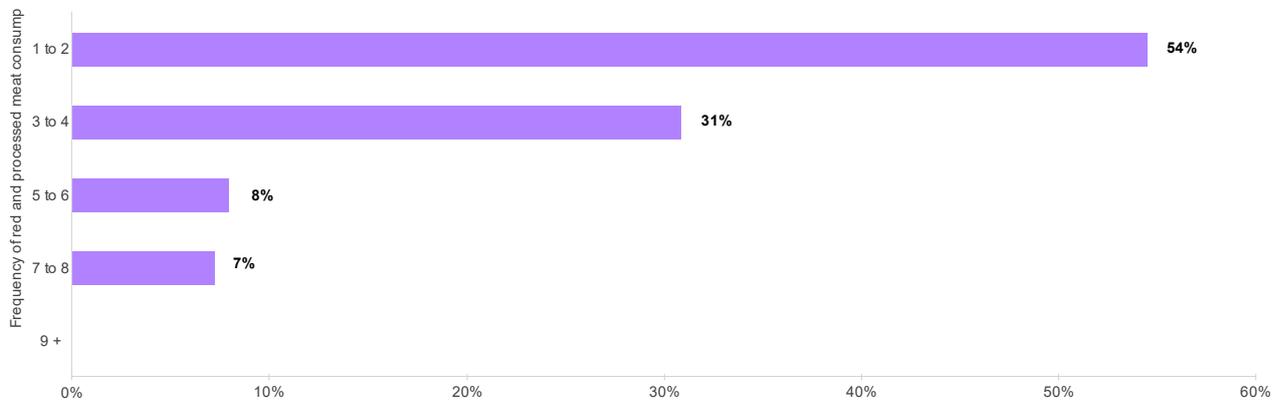


Figure 4. Percentage breakdown of women's red and processed meat consumption (portions per week)

Whole grains

Among the 609 respondents, consumption of wholegrains ranged from 0 to 32, with an average (+/- SD) of 4.70 (+/-3.10) portions per week.

Among the 181 male respondents, consumption of wholegrains ranged from 0 to 15, with an average (+/- SD) of 5.02 (+/-2.93) portions per week. Among the 427 female respondents, consumption of wholegrains ranged from 0 to 32, with an average (+/- SD) of 4.56 (+/-3.17) portions per week. Figures 5 and 6 show the variation in frequency of consumption between men and women.

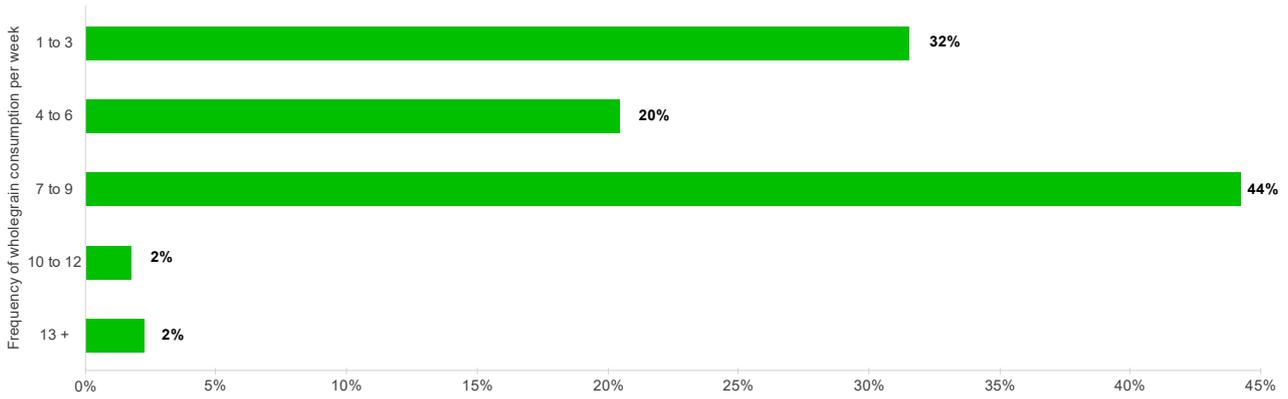


Figure 5. Percentage breakdown of men's wholegrain consumption (portions per week)

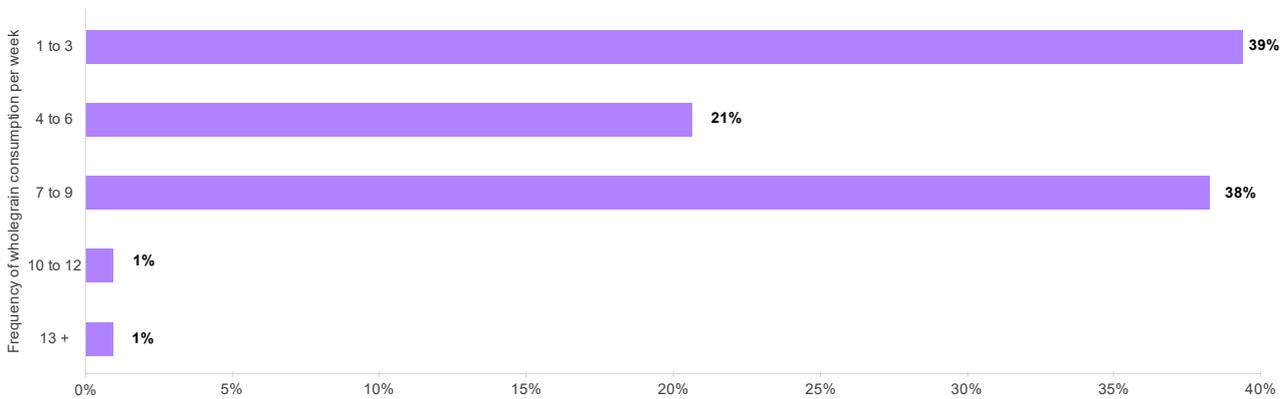


Figure 6. Percentage breakdown of women's wholegrain consumption (portions per week)

Fruit and vegetables

Among the 607 respondents, consumption of fruit and vegetables ranged from 0 to 10, with an average (+/- SD) of 3.40 (+/-2.09) portions per day.

Among the 181 male respondents, weekly consumption of fruit and vegetables ranged from 0 to 10, with an average (+/- SD) of 3.20 (+/-2.04) portions per day. Among the 425 female respondents, consumption ranged from 0 to 10, with an average (+/- SD) of 3.48 (+/-2.11) portions per day. Figures 7 and 8 show the variation in frequency of consumption between men and women.

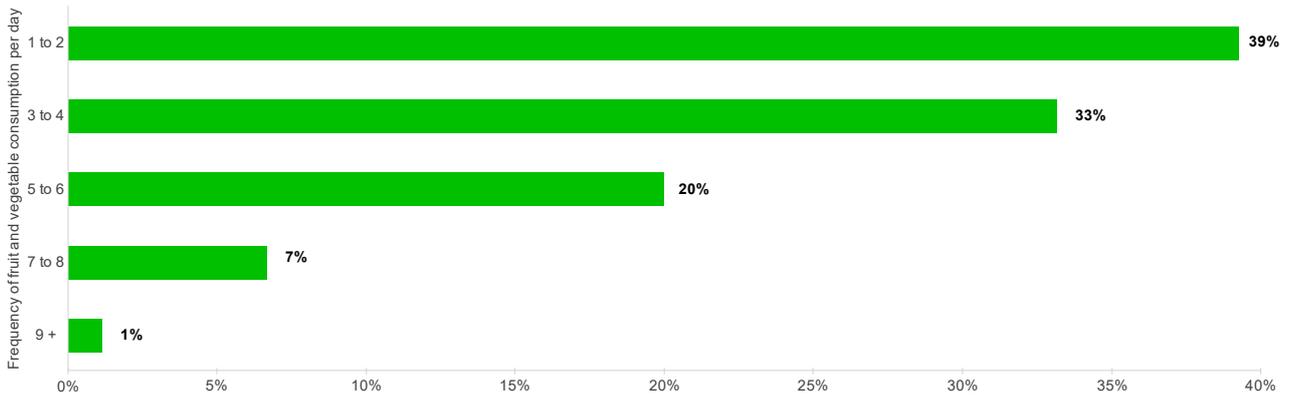


Figure 7. Percentage breakdown of men's fruit and vegetable consumption (portions per day)

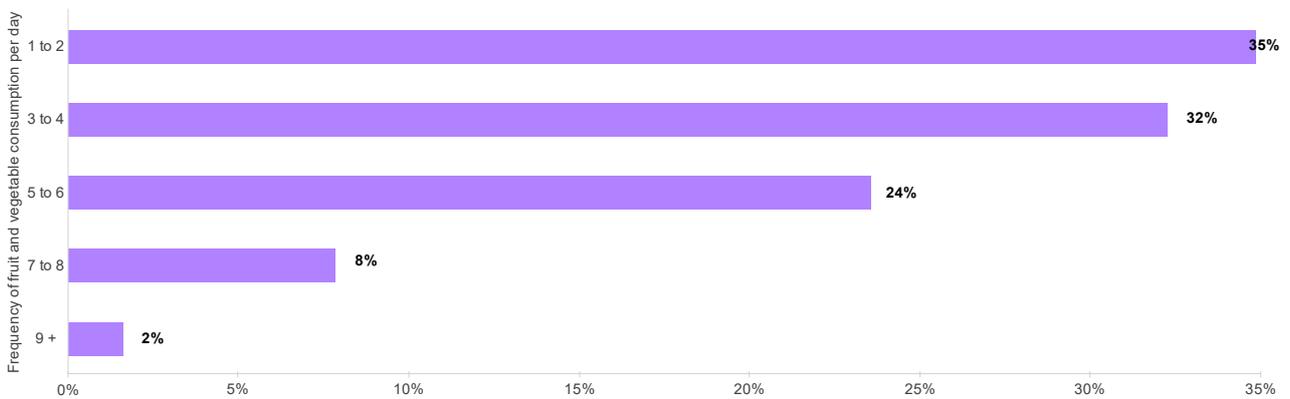


Figure 8. Percentage breakdown of women's fruit and vegetable consumption (portions per day)

Physical activity

Among the 604 respondents, the number of days people were physically active for at least 30 minutes ranged from 0 to 7, with an average (+/- SD) of 3.88 (+/-2.71) days per week.

Among the 179 male respondents, the number of days men were physically active for at least 30 minutes ranged from 0 to 7, with an average (+/- SD) of 3.85 (+/-2.81) days per week. Among the 424 female respondents, the number of days women were physically active for at least 30 minutes ranged from 0 to 7, with an average (+/- SD) of 3.88 (+/-2.66) days per week. Figures 9 and 10 show the variation in frequency between men and women.

Inactive was classed as not completing at least five 30-minute session a week. A total of 340 (56.3% of all participants) were inactive which included 53.6% of all men and 57.5% of all women.

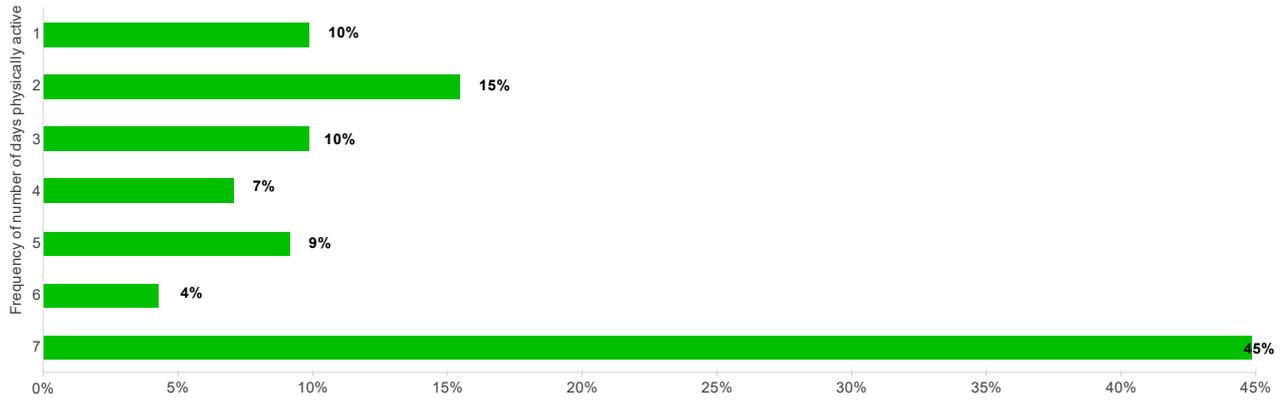


Figure 9. Men's weekly participation in exercise/physical activity (number of days they complete 30 minutes or more)

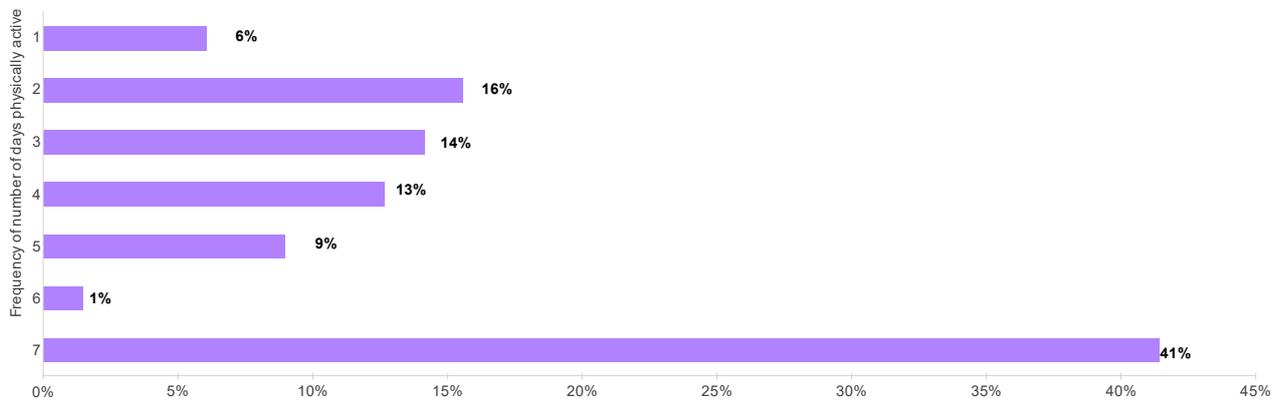


Figure 10. Women's weekly participation in exercise/physical activity (number of days they complete 30 minutes or more)

Alcohol consumption

Within the 611 respondents, 431 (70.5%) consumed alcohol (79.0% of males and 67.1% of females).

Of those who consumed alcohol, 2 (13.7%) drank on four or more occasions each week (figure 9). Figure 10 shows a gendered analysis of frequency of alcohol consumption.

Of those who consumed alcohol, 55 people (12.8%) stated that they drank 9 or more units on a single occasion (figure 11). The typical number of units consumed on each occasion by male and female drinkers is shown in figure 12.

137 drinkers (31.8%) said they never consumed 6 or more units of alcohol on a single occasion which included 41 males (28.7%) and 96 females (33.3%). The frequency of binge drinking (6 or more units on one occasion) among male and female drinkers is shown in figure 13. Figure 14 shows a gendered analysis of frequency of binge drinking.

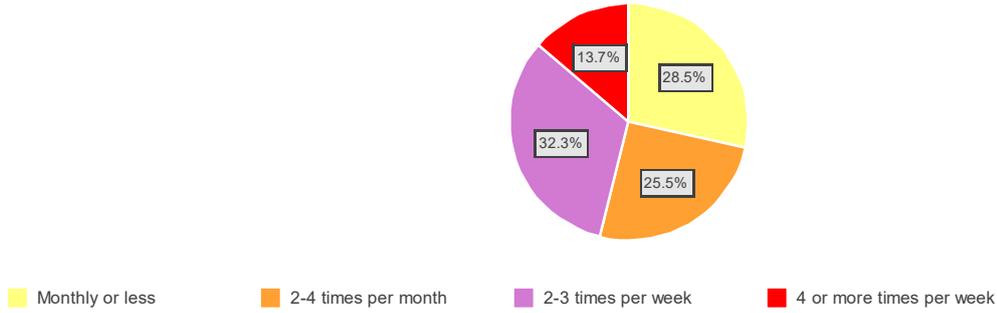


Figure 9: Percentage breakdown showing frequency of alcohol consumption among drinkers

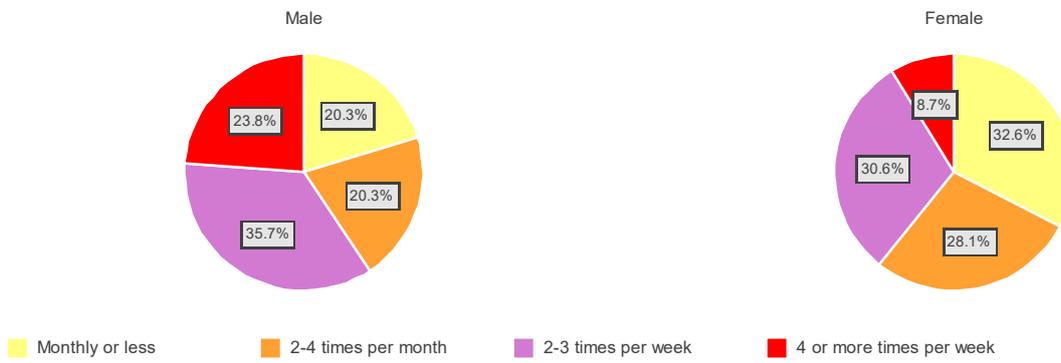


Figure 10: Percentage breakdown showing frequency of alcohol consumption by gender

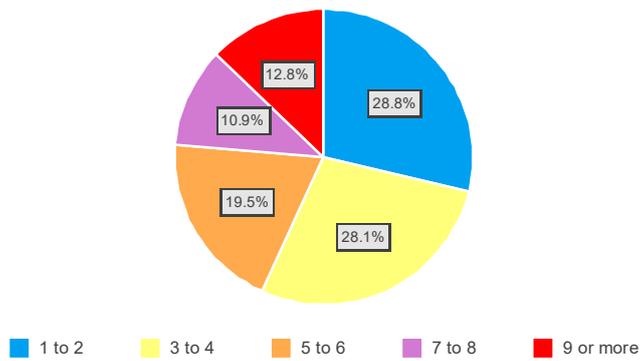


Figure 11: Estimated number of units consumed on each occasion

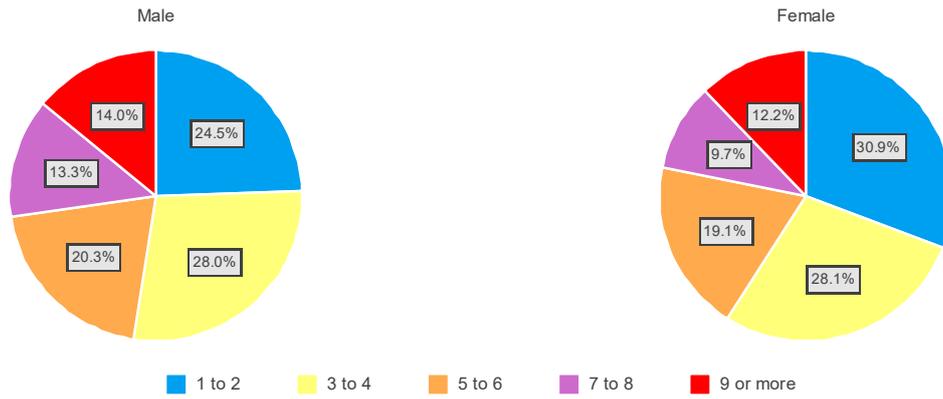


Figure 12: Estimated number of units consumed on each occasion by gender

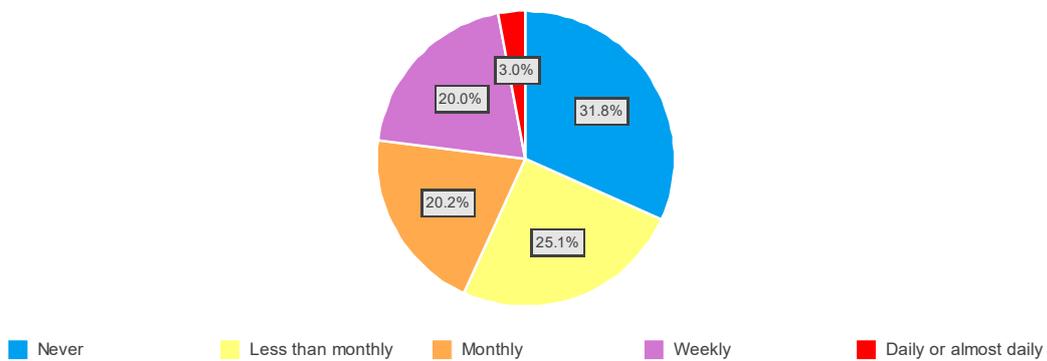


Figure 13: Frequency of binge drinking (6 or more units on one occasion)

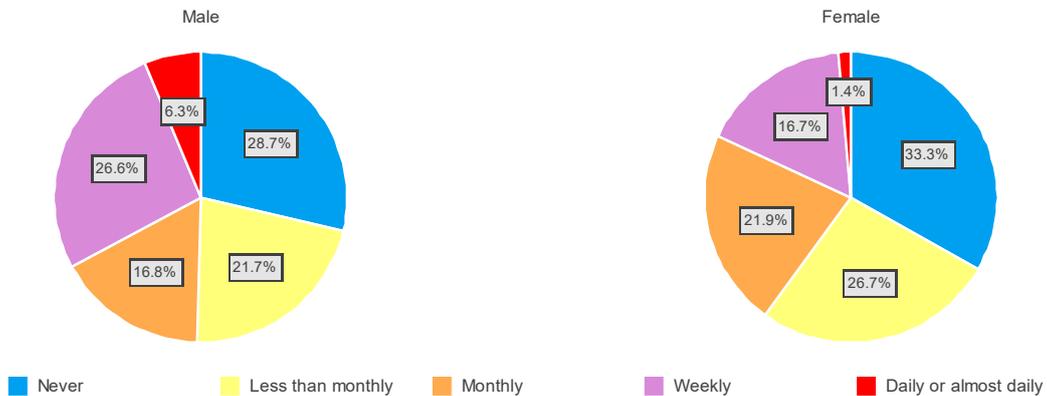


Figure 14: Frequency of binge drinking (6 or more units on one occasion) by gender

Smoking

181 people (29.6% of all respondents) currently smoked either on a daily basis or less often (equal to 33.7% of men and 28.0% of women). Frequency of smoking is shown by gender in figure 15.

28 people (4.6% of all respondents) currently used smokeless tobacco either on a daily basis or less often (equal to 3.3% of men and 5.1% of women). Frequency of smokeless tobacco consumption is shown by gender in figure 16.

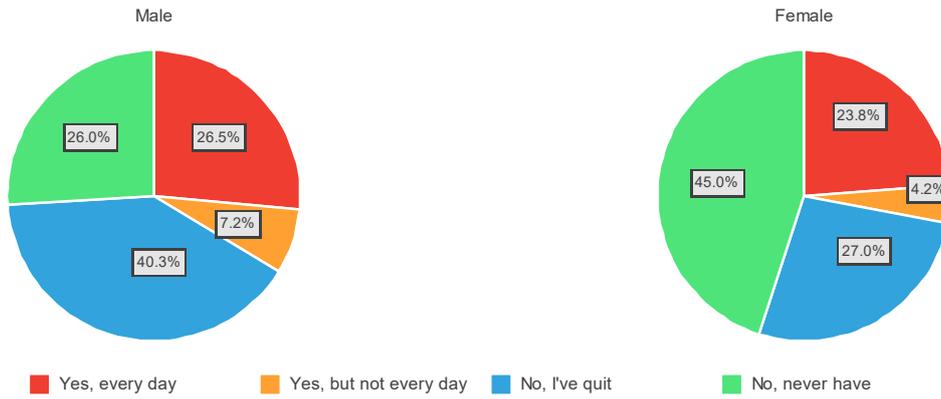


Figure 15: Smoking status by gender



Figure 16: Smokeless tobacco use by gender

Lifestyle - Future Changes

395 people (64.6%) set at least one lifestyle goal (60.2% of men and 66.7% of women).

Of those people setting lifestyle goals, 164 (41.5%) were signposted to a lifestyle support service (56.0% of men and 36.0% of women who set at least one lifestyle goal).

Weight and Diet Goals

297 people (68 males and 229 females) set a goal to either reduce their weight, eat a healthier diet or both (a total of 390 goals as shown in table 1). - males and 12 females set both goals.

Of the 231 people who had been classified as overweight or obese (BMI > 24.9), 148 (64.1%) had set one or both goals. This included 45.3% of overweight men and 73.1% of overweight women.

99 people were signposted to weight management services (33.3% of people setting a weight and/or diet goal) including 45.6% of men and 29.7% of women who had set this goal.

Of the 148 overweight people who set a goal, 61 (41.2%) were signposted to services. This included 52.9% of those men and 37.7% of those women.

Table 1: Weight and diet goal by responses

Counts Responses	Total	No reply	Respondent gender	
			Male	Female
Base	390	-	80	310
Goal				
Reduce my weight	216	-	43	173
Eat a healthier diet	174	-	37	137

Physical Activity Goal

159 people (26.0%) set a goal to be more physically active, which by gender equated to 37 men and 122 women (20.4% and 28.4% of all men and women).

Of the 340 people who were not completing at least five 30 minute sessions of physical activity a week (inactive), 112 (32.9%) set a goal to increase physical activity. This included 26.0% of those men and 35.7% of those women.

51 people who set an activity goal were signposted to physical activity services (32.1% of people who set a goal). This included 37.8% of those males and 30.3% of females.

35 inactive people who set a goal were signposted to services (31.3%). This included 36.0% of inactive men and 29.9% of inactive women.

Alcohol

38 people set a goal to either cut down on their alcohol consumption or give up alcohol (8.8% of all drinkers, table 2).

8 people were signposted to alcohol support services (21.1% of those drinkers setting a goal) including 35.3% of those males and 9.5% of those females.

Table 2: Alcohol goal by respondents

Break % Respondents	Total	Missing No reply	Respondent gender	
			Male	Female
Base	38	-	17	21
Goal				
Cut down on my alcohol consumption	94.7%	-	88.2%	100.0%
Give up alcohol	5.3%	-	11.8%	-

Smoking

94 people (49.0% of tobacco users) set a goal relating to smoking or smokeless tobacco use (57.1% of male tobacco users and 45.0% of female tobacco users, table 3).

69.1% of these people setting a goal, including 75.0% of males and 65.5% of females were signposted to smoking cessation services.

Table 3: Smoking/smokeless tobacco goal by respondents

Break % Respondents	Total	Missing No reply	Respondent gender	
			Male	Female
Base	94	-	36	58
Goal				
Cut down on smoking	54.3%	-	55.6%	53.4%
Stop smoking	46.8%	-	41.7%	50.0%
Cut down on smokeless tobacco	-	-	-	-
Stop using smokeless tobacco	2.1%	-	2.8%	1.7%

Other Goals

Other goals set and other signposting outside of the offered lifestyle goals (weight and diet, tobacco use, alcohol consumption and physical activity) are shown in tables 4 and 5.

Table 4: Other goals set (maximum of three)

1.	2.	3.
Would like to be able to sleep better Reduce stress levels Quality sleep Drink more fluids Get more sleep Be able to move more freely Reduce amount of food intake Use more sun protection Sleep better Try and have 7-8 hours of sleep a night Eat meals at regular times (earlier) Eat more regularly Would like to socialise more Reduce Stress Less Meat More chance to rest Would like to socialise more would like to get in employment		

Table 5: Signposting for other goals set

1.	2.	3.
Details of doctor led CBT job seekers centre		

Cancer Awareness

584 people were able to list one or more signs and symptoms potentially related to cancer. This included 167 men (92.3%) and 416 women (97.0%). Differences between men in women in their ability to list signs and symptoms are shown in figure 17.

For both men and women, the most commonly listed response was 'lump/swelling' (figure 18) , however only 20.2% of men were aware of this sign compared to 59.4% of women.

Other signs listed by males and females are shown underneath.



Figure 17: Awareness of common signs and symptoms of cancer by gender (% of all males and females)

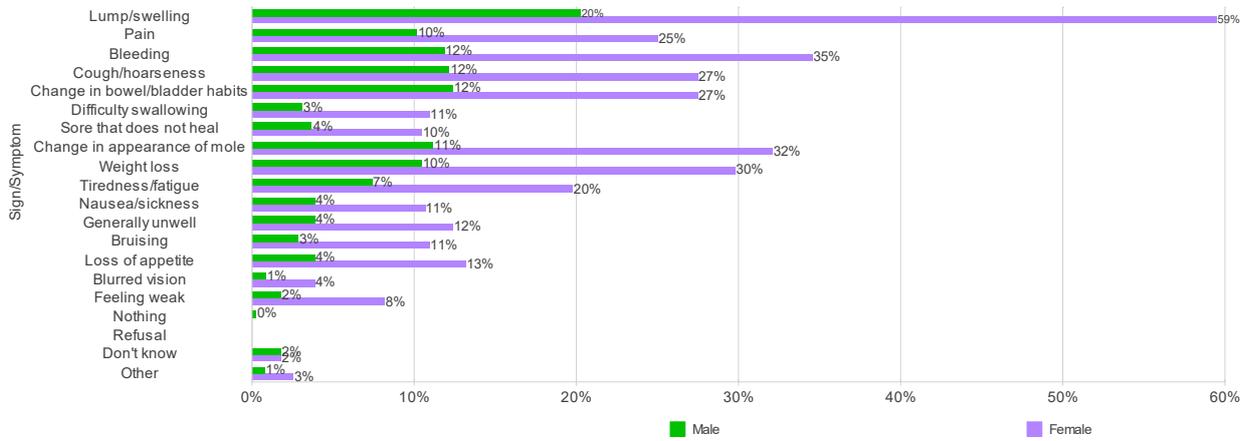


Figure18: Percentage breakdown of cancer knowledge by gender (% of gender stating response)

(If other please state:)

- _____ Inverted nipples
- _____ Tenderness and discharge from the breast
- _____ Breathlessness
- _____ Blood in wee or poo
- _____ Abnormality in a region of skin
- _____ Hair loss
- _____ change in shape to breast
- _____ Recurring styel/scar on eye
- _____ unusual bodily changes
- _____ SWELLING IN STOMACH
- _____ Headache
- _____ Pain in stomach
- _____ Abnormal snoring
- _____ BLOATING
- _____ HEADACES, ANURISUM
- _____ LOOKING YELLOW
- _____ Growth brain personality changes
- _____ Itching, discolouration of breast
- _____ Breathlessness

Cancer Signs and Symptoms

354 people, including 111 men (61.3%) and 243 women (56.6%), had recently experienced one or more of the listed signs or symptoms of cancer (figure 19). Specific symptoms reported are shown in figures 20 to 22.

46 males (25.4%) had experienced signs of male-specific cancer.
 28 females (6.5%) had experienced signs of female-specific cancer.

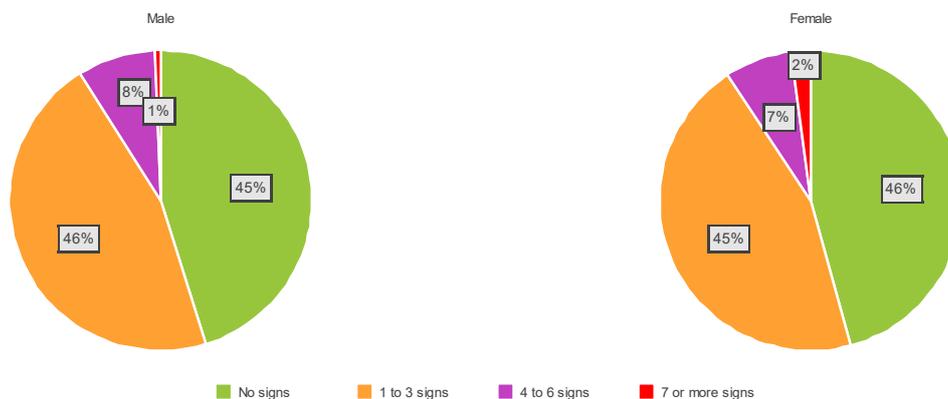


Figure 19: Reported signs and symptoms of cancer by gender (% of all males and females)

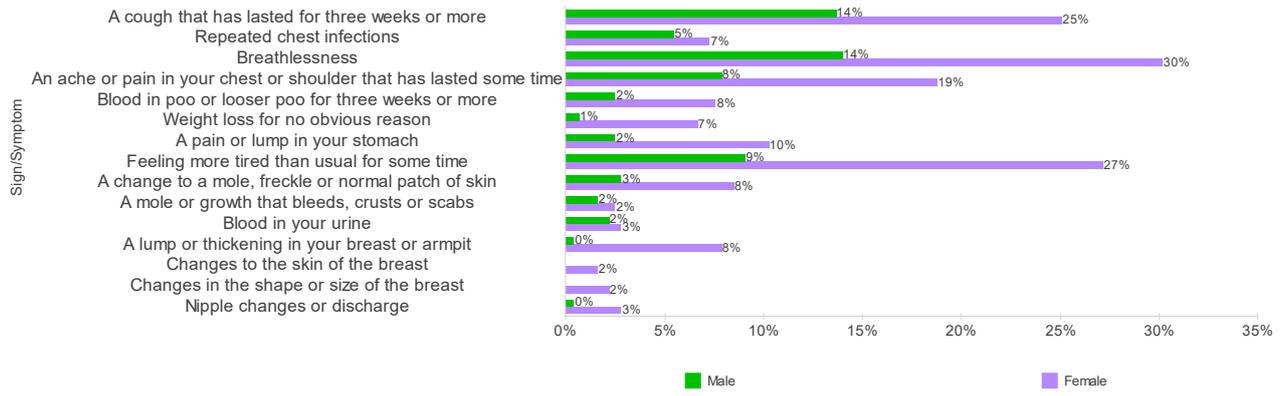


Figure 20: Percentage breakdown of cancer signs and symptoms experienced by gender (% of gender stating response)

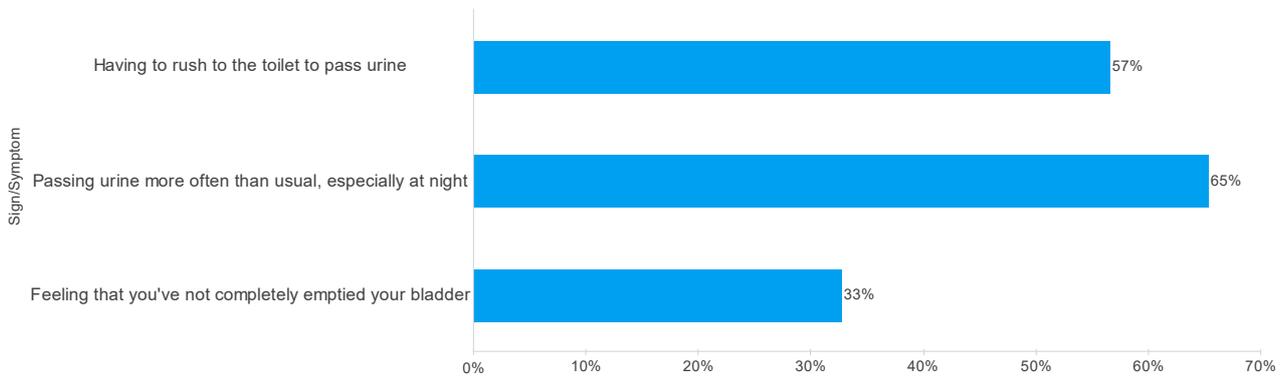


Figure 21: Percentage breakdown of male specific cancer signs (% of male respondents for this question)

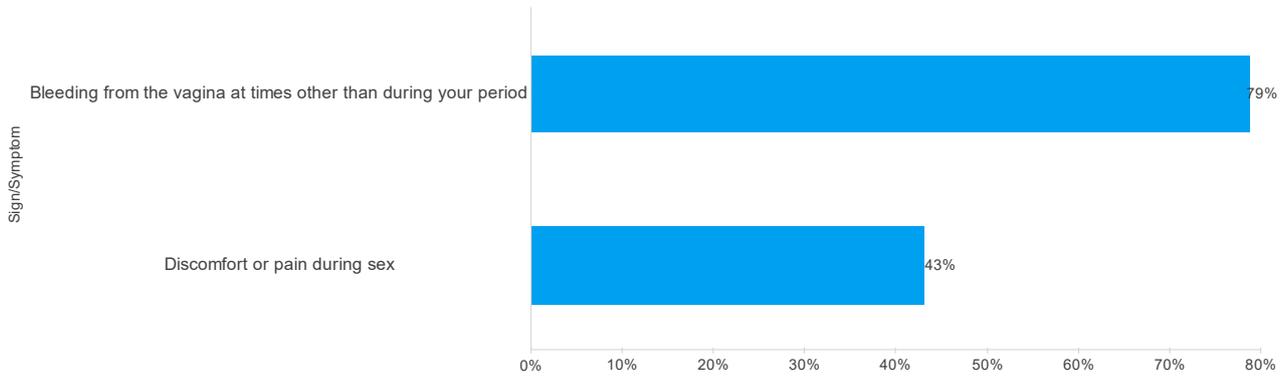


Figure 22: Percentage breakdown of female-specific cancer signs (% of female respondents to this question)

Of those people reporting experiencing any signs and symptoms potentially related to cancer, 90 (25.4%) had not spoken to their GP, but 45 (50.0%) of these said they planned to do so.

Of the 111 men reporting experiencing any signs and symptoms potentially related to cancer, 33 (29.7%) had not spoken to their GP, but 16 (48.5%) of these said they planned to do so.

Of the 243 women reporting experiencing any signs and symptoms potentially related to cancer, 57 (23.5%) had not spoken to their GP, but 29 (50.9%) of these said they planned to do so.

Cancer Screening

481 people (78.7% of all participants) were eligible for any of the four screening programmes discussed (cervical, breast, bowel and chest x-ray).

47 women (10.9%) were eligible for all three national screening programmes (cervical, breast and bowel).

325 women (75.6%) were eligible for the national cervical screening programme. Figure 23 shows completion of recent screening among these.

195 women (45.3%) were eligible for the national breast screening programme. Figure 24 shows completion of recent screening among these.

187 people (30.6%) were eligible for the national bowel screening programme. This included 74 males (40.9%) and 112 females (26.1%). Figure 25 shows completion of recent screening among these.

86 people (14.1%) met the eligibility criteria for chest screening (aged over 50 and reported a persistent cough for three weeks or more). By gender, this was 32 males (17.7%) and 54 females (12.6%).

611 people were asked about awareness of chest screening. Figure 26 shows awareness among males and females.

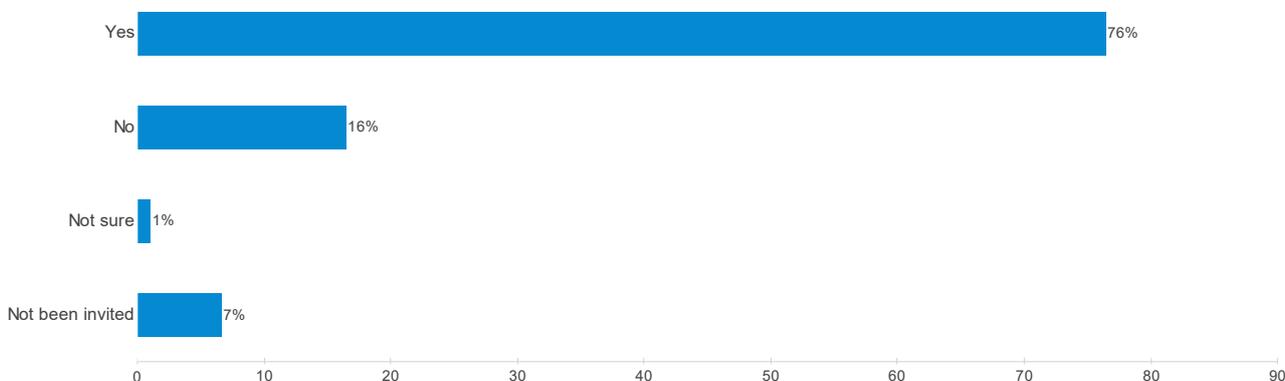


Figure 23: Percentage of eligible women completing their recent cervical screen

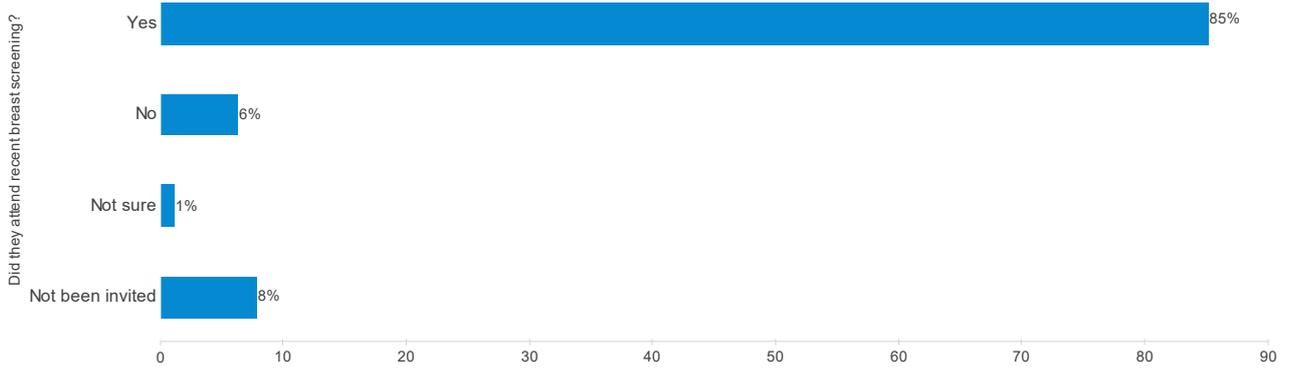


Figure 24: Female participation in recent breast screening (among those eligible)

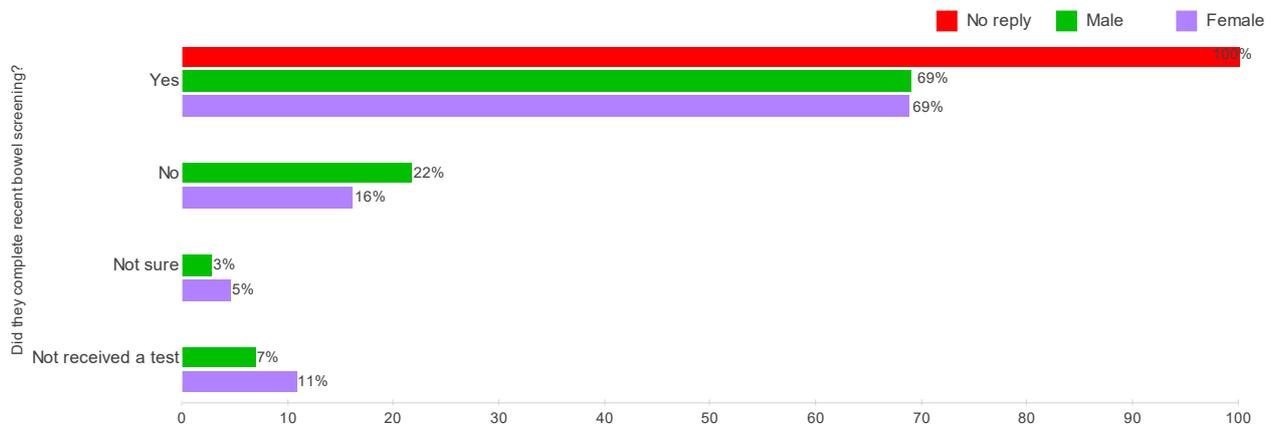


Figure 25: Participation in recent bowel screening (among those eligible)

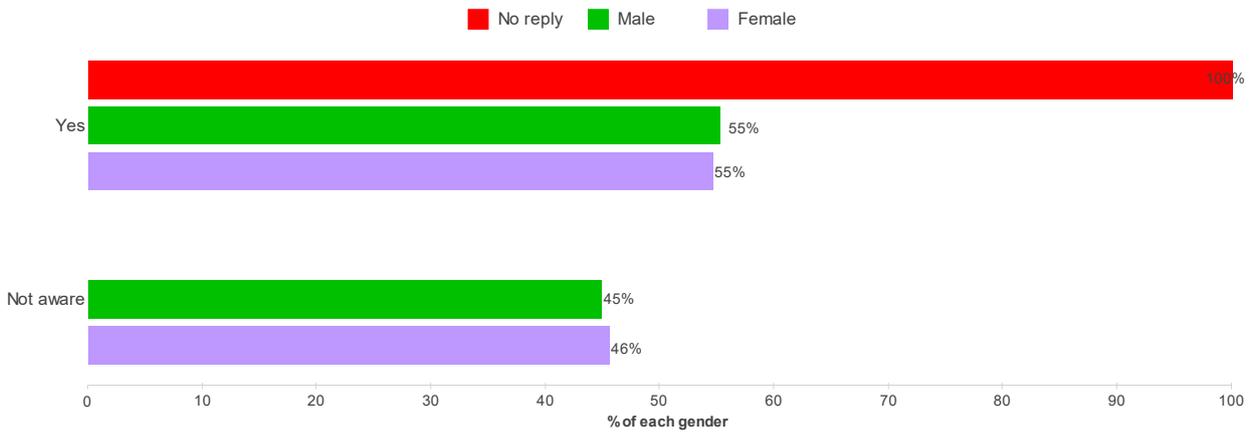


Figure 26: Awareness of chest screening programme (all ages asked)

Screening Goals

102 screening goals were set by 92 people (including 17 men and 75 women).

Of the 77 women who hadn't engaged in recent cervical screening, 43 (55.8%) set a goal relating to this. Of the 29 women who hadn't engaged in recent breast screening, 15 (51.7%) set a goal relating to this.

Of the 58 people who hadn't engaged in recent bowel screening (including 23 men and 35 women), 27 set a goal (46.6%) which included 11 men (47.8% of those who hadn't engaged) and 16 women (45.7% of those who hadn't engaged).

Of the 86 people aged 50 or over and with a persistent cough (including 32 men and 54 women), 17 (19.8% of those eligible) set a chest screening goal which included 8 men (25.0% of those eligible) and 9 women (16.7% of those eligible).

Figure 27 shows the breakdown in numbers across goals.

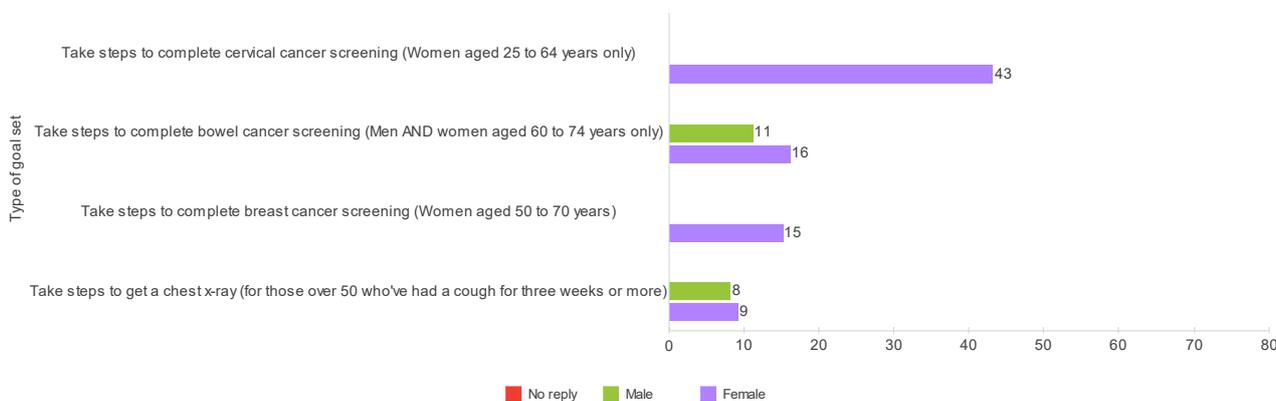


Figure 27: Number of screening goals set.

Feedback

299 people (48.9%) had not previously heard of Yorkshire Cancer Research. Figures 28 to 33 show the responses to the questions relating to programme feedback.

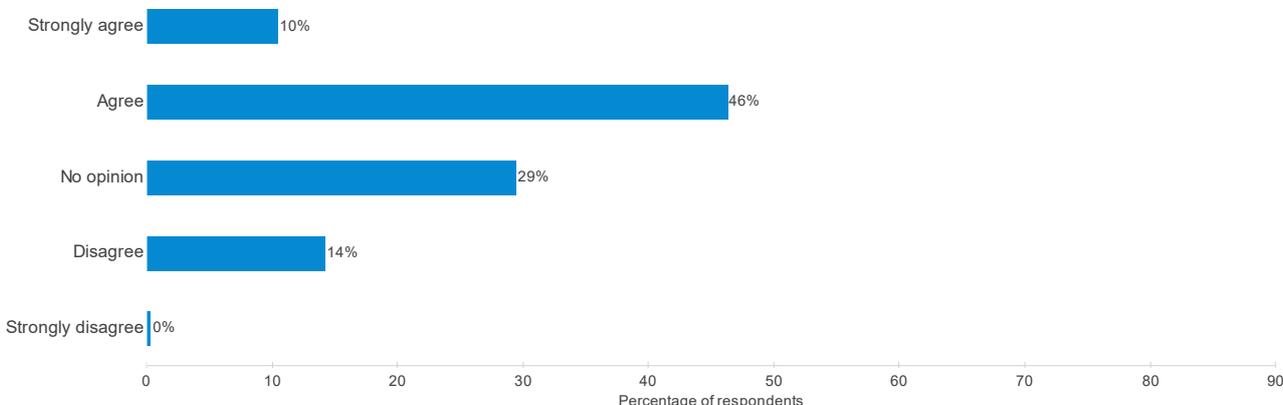


Figure 28: Response to question 'I am considering making changes to my lifestyle as a result of Wise Up To Cancer'

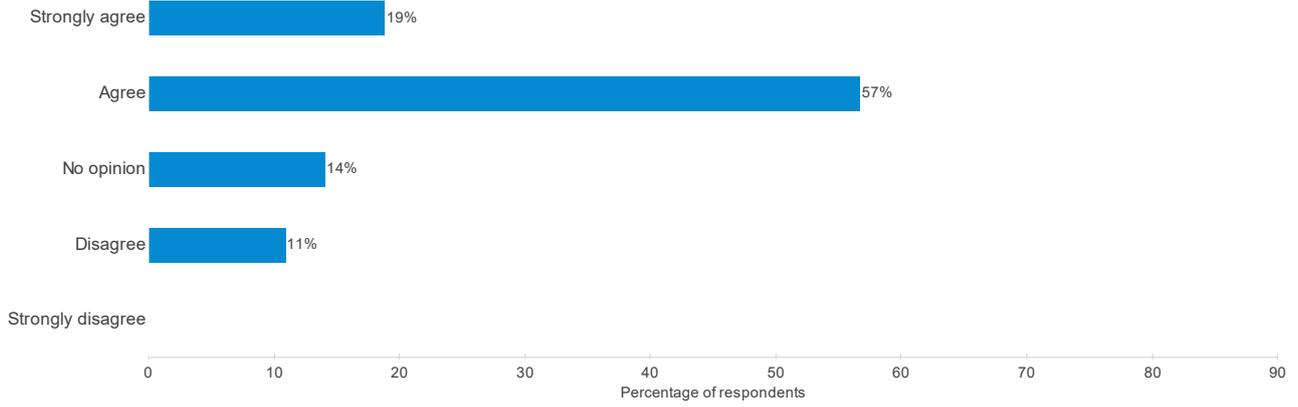


Figure 29: Response to question 'I have learnt something new about cancer signs and symptoms'

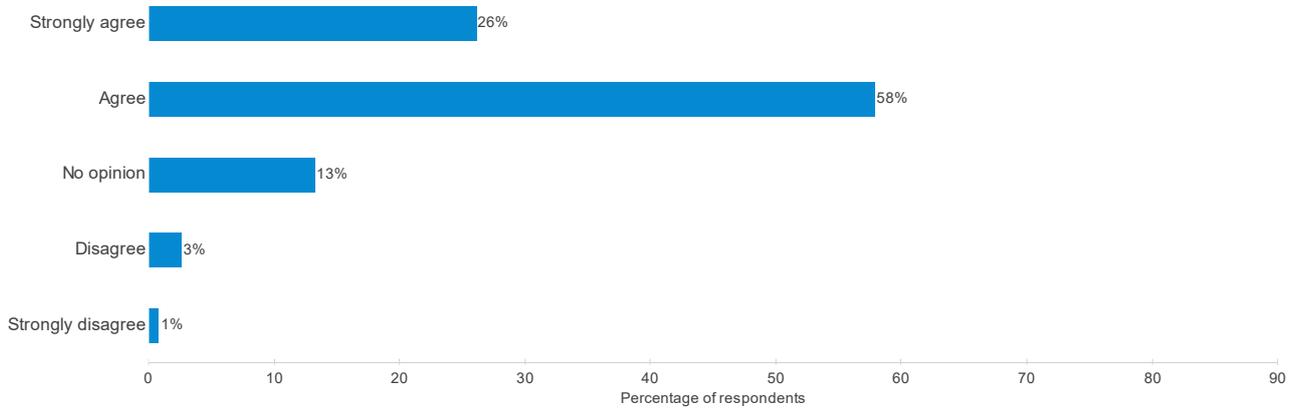


Figure 30: Response to question 'I am more likely to speak to my GP about cancer signs and symptoms in the future'

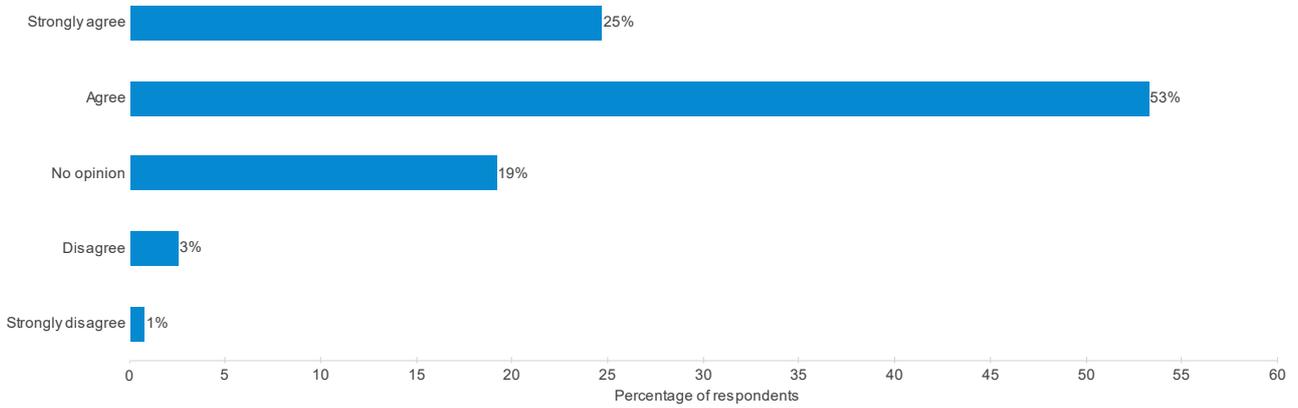


Figure 31: Response to question 'I am more likely to go to screening (if applicable)'

Wise Up to Cancer

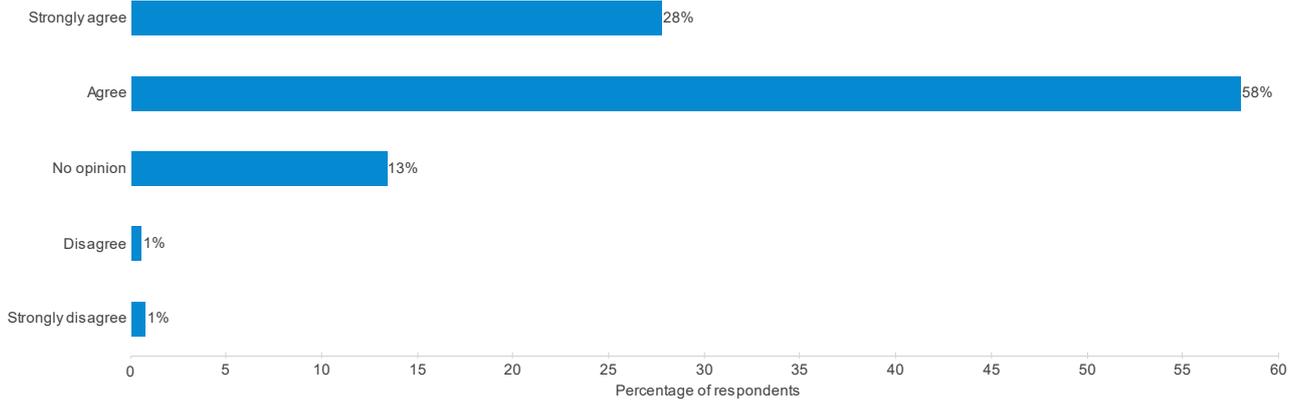


Figure 32: Response to question 'I would recommend 'Wise Up To Cancer' to friends and family'

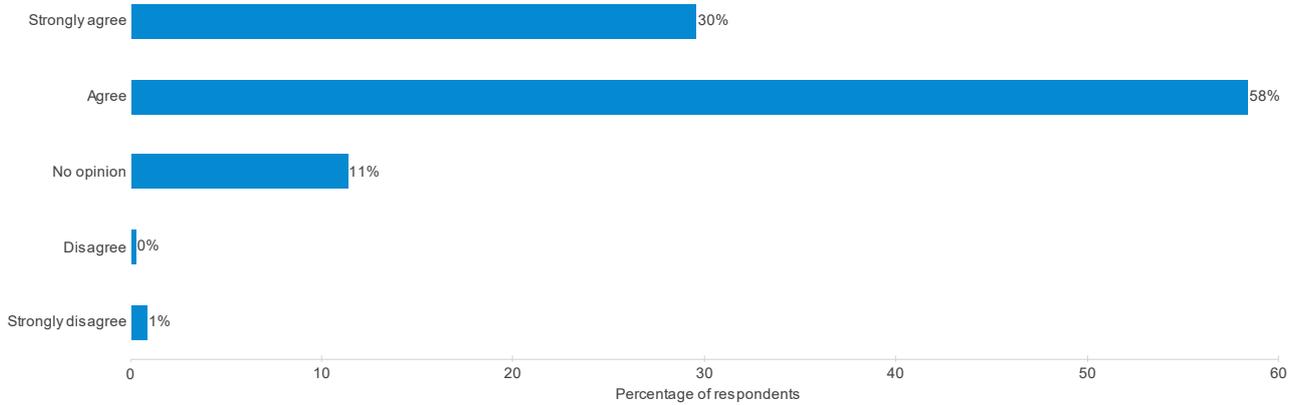


Figure 33: Response to question 'I feel positive about Yorkshire Cancer Research funding 'Wise Up To Cancer'.'

Appendix 8: Follow-up reports

8a. All data

8b. Community Settings

8c. Pharmacies

Appendix 8a. Wise Up To Cancer Follow-Up Report (All data)

Overall 168 respondents completed this questionnaire. Where gender was stated, 51 were male (30.4%) and 115 female (68.5%).

Weight and Diet Goals

104 follow-up respondents had initially set a goal relating to weight and diet. 97 stated a response for the follow-up question and 88 had taken action (figure 1).

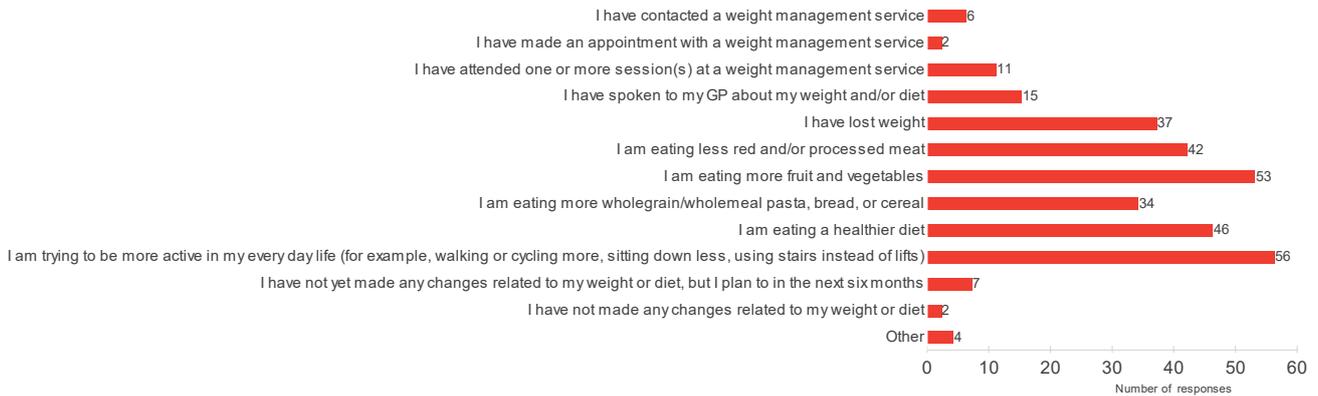


Figure 1: Changes made to weight and diet (number of responses)

Other changes related to weight and diet goal

If 'other', please state:

Doing it myself - smaller portions and no stodgy food - if I fail then I'll seek help
 I am trying to eat less. Instead of fizzy pop I am drinking flavored water.
 Join the gym
 I am now eating a gluten free diet

Physical Activity Goal

66 respondents had initially set a goal to increase their physical activity. 65 stated a response for the follow-up question and 56 had taken action (figure 2).

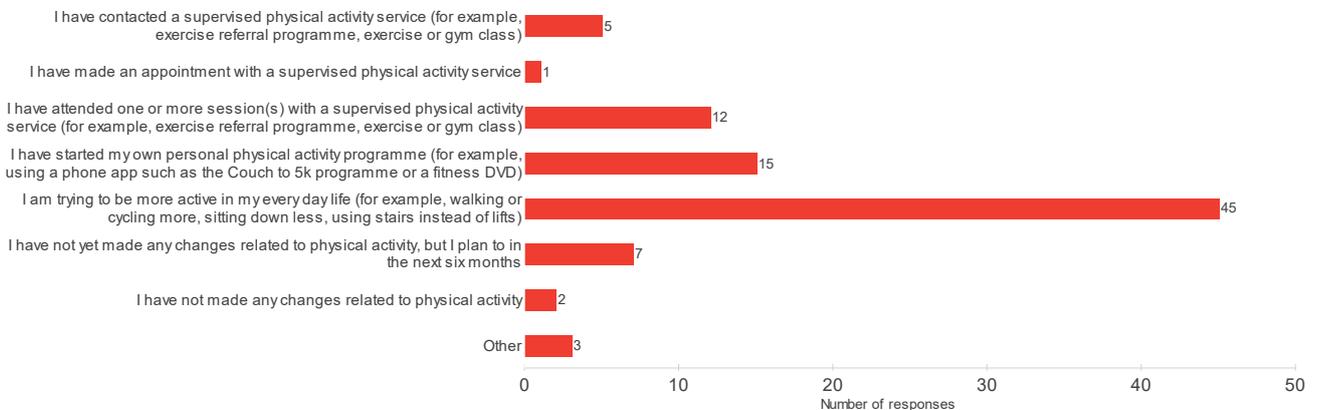


Figure 2: Changes made to physical activity (number of responses)

Other changes related to physical activity

If 'other', please state:
I have bought a work and ride bike
Undertaken an exercise challenge for charity

Alcohol Goals

17 respondents had initially set a goal to reduce their alcohol consumption. 16 stated a response for the follow-up question and 12 had taken action (figure 3).



Figure 3: Changes made to alcohol consumption (number of responses)

Other changes related to alcohol goal

Tobacco Goals

18 respondents had initially set a goal to reduce their tobacco use. 18 stated a response for the follow-up question and 13 had taken action (figure 4).

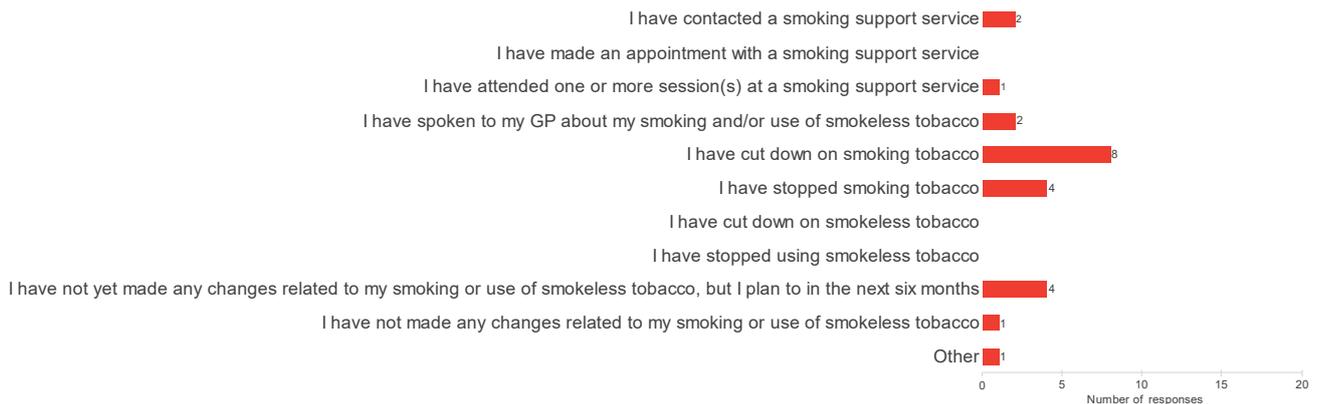


Figure 4: Changes made to tobacco use (number of responses)

Other changes related to tobacco goal

If 'other', please state:
Tend to only smoke when also drinking alcohol/socialising, but have not done this since the wise up to cancer chat

Other Goals

6 follow-up respondents had set goals outside of those provided (list 1). The changes made relating to these other goals are shown in list 2.

9 people had not initially set any lifestyle goals within the initiative but had since decided to set lifestyle goals on their own (list 3).

List 1: Other goals set at baseline.

1.	2.	3.
Staying sober Better sleep routine Reduce stress levels Quality sleep Eat less watch portion size Try and have 7-8 hours of sleep a night		

List 2: Other changes made in relation to other goals set.

1.	2.	3.
Totally abstinent I have tried to keep up a better sleep routine but I have also sought medical help for familial cancer as my father is suffering due to cancer at the moment for the third time. I'm eating healthy and doing regular exercise to try to reduce my stress levels. Going to bed earlier. Started intermittent fasting, and taking regular breaks when eating - finding that after some of these breaks I am actually full so do not overeat Having a aim to be in bed before 11pm, being more organised at home after work such as making lunch for the next day after having dinner therefore not making it at midnight Not going on my mobile l.e Internet, playing games at night. Keeping this to a minimum		

List 3: Goals set by themselves after completing the WUTC initiative

To eat more fruit and less sugar items such as chocolate bars Have used a higher factor suncream when going on holiday. Walk more Be more conscious about how much I drink Get myself check up regularly for breast cancer and get my intimate problem sorted by seeking second opinion Attending "Aquafit" class once a week. To lose a little weight Exercise more and lose body fat. I have started walking more i eat heather

Effect of lifestyle changes

74 people said their lifestyle changes had affected the way they felt (list 4). 32 people perceived barriers to making their lifestyle changes (list 5).

List 4: Perceived effects as a result of making lifestyle changes

Have your recent lifestyle changes affected the way you feel at all? If so, in what way?
I don't feel as tired and feel like I don't get as bloated as I used to.
I don't feel as tired and am more active.
Not tired as much. Skin is more radiant.
Have more energy and feel better in myself
They have affected my overall physical and mental well-being and enhanced my mood as I have become more physically active.
My clothes feel looser than usual
I am feeling more active.
Not sure as yet, but generally feel better in myself.
I have started to increase my gym activity to include more cardio and I feel that I have more energy
Feel a lot better in myself
I have made changes to my diet, but unfortunately the cold I have had for several months has returned... I have been short of breath and feel tired again ... I have not been able to do more exercise in the last few weeks. I am starting to feel better and I have started to jog again, but only small distances.
Yes, reduced refined sugar intake. Feel better for it
I feel better in myself when I have ran or been to the gym.
Yes improved mood.
More energy - I've lost some weight and this has helped lower my back pain so less painkillers needed. Better bowel movements because of new diet and less medication.
Yes. The way I feel making changes towards different ways of life. The way forward. Not thinking it doesn't matter.
Have tried to cut down on red and processed meat but it is too early to say how it has affected me.
Now I am eating breakfast I feel hungry at lunch time, I work part time so do not have a lunch break so take an apple/banana/raspberries to eat on train on way home at 2pm. I seem to have more energy so picking my boys up from school I don't mind staying at the park playing ball/tennis with them
My swimming stamina has increased.
My breathing has been a lot better. I'm feeling more energetic.
Walking with a small group makes me feel better. Feel as though I'm helping myself.
I have put on weight now I suffer breathlessness
Feel more confident in managing my weight/diet following appointment with dietician. Feel I have a bit more energy! Still room for improvement.....
I walk a lot. I am not out of breath so easily.
Feeling more positivity to continue and cut alcohol all together and thinking of starting exercise more, maybe join the gym or a sports team
Changes have begun to help my health and fitness by doing exercises.
I feel healthier, but it's hard to answer as I'm currently poorly.
Feel better in myself
I am less accepting of my condition so more likely to find ways of reducing my weight - exercise is out of the question due to disability but it does not mean I have to accept it and do nothing. Focussing on the problem is more likely to identify the most effective way of achieving my goal.
I feel more confident to check things out. We are incredibly lucky to have screening programmes which this project made me aware of - I have ensured that my father has completed his bowel screening because I mentioned how lucky we are to have this opportunity.
I feel a little fitter and self confident
Yes I feel better
When I eat wholegrain bread instead of white bread I feel less bloated.
I feel a bit better for losing some weight
Yes, don't feel as tired and lethargic and have noticed I am more mentally alert
I lost 2 kg. Just feel proud of my self.
Feel good that I am doing something about it.
Can breathe a lot better now I've stopped smoking and started exercising.
Feel lighter
Yes. I feel much better, less bloated and have more energy.
I am feeling better now. I don't eat any meat and fish or dairy products and - I am a vegan (I was a vegetarian for over 10 years).
Feeling fitter, healthier
Not as tired
The food and alcohol changes have been good and feel better in myself because of weight reduction.

List 4: Perceived effects as a result of making lifestyle changes

Have your recent lifestyle changes affected the way you feel at all? If so, in what way?
<p>Less tired, eating better food</p> <p>Eating meat now makes me feel groggy</p> <p>Feel a bit more aware of my body, health, diet etc. Try to eat less sugar, be more active in the way I live (i.e. walking to town sometimes instead of getting a bus</p> <p>Feel better for the change</p> <p>More energy</p> <p>Glad I am moving more and sitting less. Feel much happier and body feels less stiff and old</p> <p>Feel better in myself.</p> <p>Yes I feel better in myself, I have lost a few kg and feel better In myself as my clothes for me better. I feel a bit energetic and less lethargic so able to do things I wouldn't do before I haven't reached my target yet so still want to keep on going!!</p> <p>It's a good feeling walking nearly 70000 steps in a week, before I was lucky to get 5000 daily</p> <p>More energy</p> <p>Even though I can do less and my mobility has reduced which is stopping the weight from dropping I know I have made the little changes towards my personal goals but I have learnt that it is just going to take me longer than it would have done since becoming ill. But that this is ok, because I know that any changes mean my body internally is getting the right nutrients & what it needs, you have to put the best in, to get the best out. You look after your body & organs & your body will (eventually) be able to look after you.</p> <p>Feel better and more energetic.</p> <p>Although the changes I have made are small it has without a doubt helped me become more aware of what items I choose to cook with and buy from the supermarket. I feel slightly more confident in my ability to make bigger changes with time.</p> <p>Yes I feel healthier</p> <p>Feel healthier</p> <p>Yes I feel healthier and not as tired</p> <p>I feel lighter on my feet and just generally happier with my body and appearance. Eating healthier foods makes me feel good and I'm really enjoying being more active in my everyday life.</p> <p>I don't feel I've taken massive steps but it focused me on thinking how unhealthy I am. When I do carry out changes I feel less lethargic and better about myself.</p> <p>Yes I feel lighter, and more full of energy.</p> <p>I feel more energised</p> <p>Feel better eating more fruit and veg.</p> <p>I have lost several kilograms due to changing my diet to be high in fat and low carbohydrate (especially sugar), which has made me feel much better. It is a little easier to move around, I have more energy and have a slimmer waistline.</p> <p>I didn't really drink that excessively but have cut down having a few glasses of wine during the week. I do feel much better for it</p> <p>I feel hungrier from eating less but feel better that I am eating well</p> <p>I feel better mentally since beginning to exercise. I do feel as low in mood and it gives me an opportunity when exercising to be with my own thoughts.</p> <p>Pleased that I'm doing something but know I could do more</p> <p>much fitter</p> <p>I started to do most of my work on foot also I am now using a brown bread and rice instead of white one. I am eating fruit and veg more than before.</p> <p>More energetic and less tired, feel more positive</p> <p>Feeling less tired having more energy</p>

List 5: Perceived barriers to making intended lifestyle changes

Barriers to lifestyle changes
<p>Waiting for a knee replacement plus diabetes which I control by diet and tablets already.</p> <p>Having surgery</p> <p>Moving house has played a part as we don't have as much time but once we are settled this will be my main priority.</p> <p>I have a fractured spine so I can't do a lot of walking but I try</p> <p>Haven't rung about diet for weight loss as lost phone number but I am hoping someone will get it for me.</p> <p>Unfortunately I had an operation on my nose in May and could not do all the activities I normally do eg walking at least twice a week, aerobics once a week and aqua zumba twice a week. Consequently I put a little weight on but now I am starting to exercise again I'm sure I will lose the weight I have put on.</p> <p>I have some pain related issues that are preventing me from exercising as much as I would like, but I am taking ongoing action to resolve these.</p>

List 5: Perceived barriers to making intended lifestyle changes

Barriers to lifestyle changes
Medication and hyosin patches
Time!!
I got knocked off my bike commuting to work, the injuries have stopped me doing the exercise I'd like to be doing. I probably should make more effort dietary wise.
Lack of time to do more - but trying to re prioritise life/work balance!
I lack motivation at the moment
I intend to take up swimming again as it is something that I enjoy and I find it relaxing and beneficial regarding my arthritis. At 75 I find exercise very difficult.
Sciatica! Currently seeing a chiropractor I'm in too much pain to think about exercise
Motivation and work ie tiredness
Recovering from an operation
Healthy foods can often be very expensive. Medical problems (arthritic hip)
Timing isn't right at the moment
I already attend activity groups, cannot fit anything else in and I get too tired if I try to fit in more.
Have a sub chondrial fracture awaiting a partial knee replacement so physical activity is difficult, however have done a little more walking than previously albeit a bit difficult
Laziness & lack of motivation. Don't feel at risk, nor am I overweight, so I guess knowing that I'm 'safe' is not pushing me enough.
School holidays/grandparenting!
Hospital still investigating weight loss, pain not under control yet, possible Lupus.
My work is stopping me from doing so because of the long hours and shift patterns.
Been on holiday then was poorly
Day to day things that get in the way! But after my next holiday I'm determined to turn things around.
Habit - difficult to change established patterns of eating.
I have not made as many changes as I had hoped. This is due to low motivation and peer support. I tried to go swimming at a local Leeds city council pool but had to get out as there were too many people in the pool. This did not help my motivation. I have rode my bike a few times but again not as often as I'd like.
Too Busy with Work. Plan to Kickstart in January, as work quieter till April.
im being a bit lazy which is not good attitude i know
Time and effort. Its diet that needs changing not exercise which I do. I just don't have the time to work out a new eating plan.
Consulted a doctor and been told I have IBS so I can't make some healthy changes yet until his is stable.

Discussing cancer signs and symptoms with GP

24 respondents had previously not spoken to their GP about their signs and symptoms potentially related to cancer - 9 had since spoken to their GP following Wise Up To Cancer (1 did not answer the question). Figure 5 shows the barriers people identified with as reasons for not speaking to their GP.

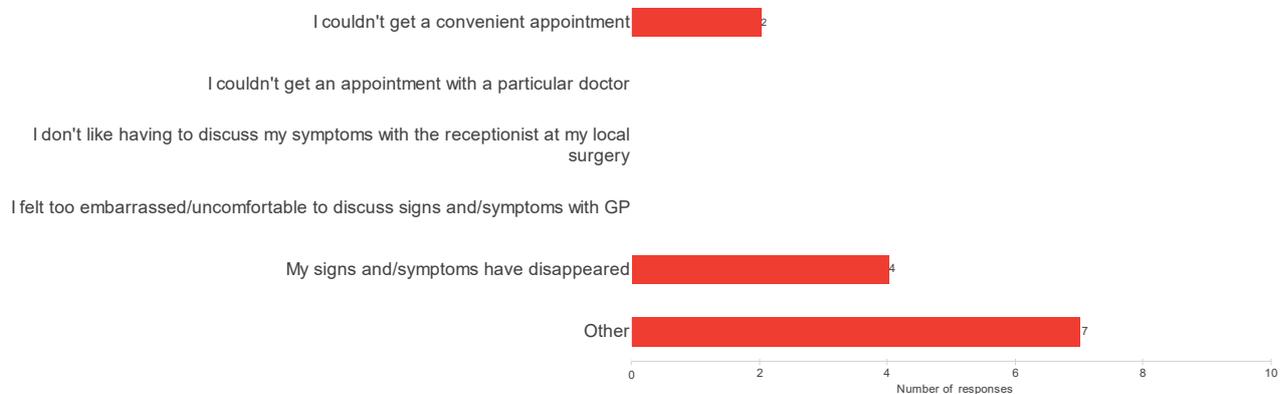


Figure 5: Barriers to speaking to GP about signs and symptoms of cancer (number of responses)

Other barriers to seeing a GP to discuss cancer signs and symptoms

If 'other' please state:
I haven't had the time to make an appointment yet but I do need to
I am thinking of making an appointment soon.
My signs & symptoms are not as severe or prominent as previously mentioned in the questionnaire so I'm seeing how I get on for now before contacting the GP
The cough has gone and the aches and pains are bearable and probably fair enough given my level of activity in DIY, gardening and decorating in a new house.
I have had a persistent cough for around 20 years and have spoken to my doctor about in on several occasions in the past.
too busy
I don't remember mentioning a mole or freckle in the questionnaire before. I would definitely consult a doctor if I feel my moles/freckles changed or started to look different.

Cancer screening goals

10 female respondents had initially set a goal to complete their cervical cancer screening. 10 responded to the follow-up question and 7 had since taken action (figure 6).

3 respondents had initially set a goal to complete their bowel screening. 3 responded to the follow-up question and 2 had since taken action (figure 7).

4 female respondents had initially set a goal to complete their breast screening. 4 responded to the follow-up question and 2 had since taken action (figure 8).

9 respondents had initially set a goal to get a chest x-ray. 9 responded to the follow-up question and 5 had since taken action (figure 9).

8 people had experienced barriers associated with completing their screening goals (figure 10 and list 6). 2 people provided general comments relating to cancer screening (list 7).

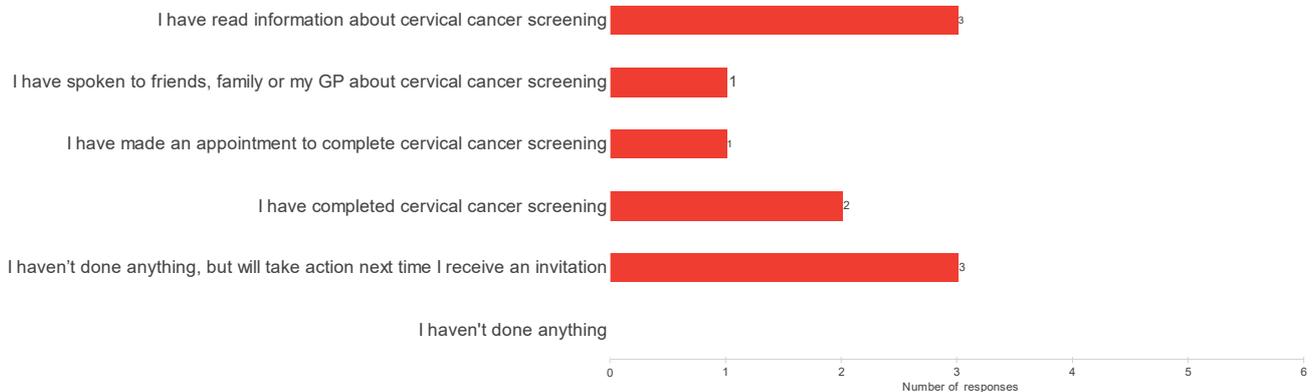


Figure 6: Actions taken for cervical screening (number of responses)

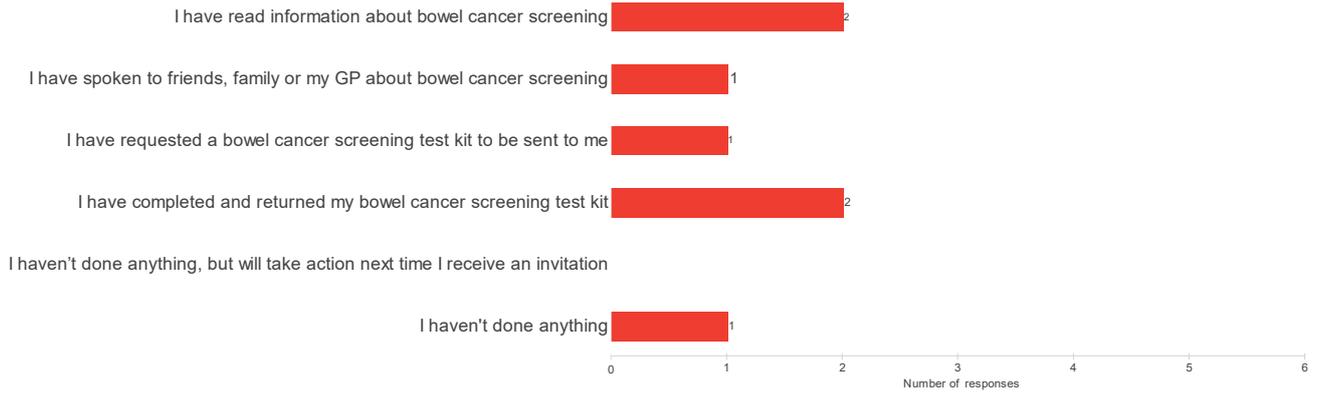


Figure 7: Actions taken for bowel screening (number of responses)

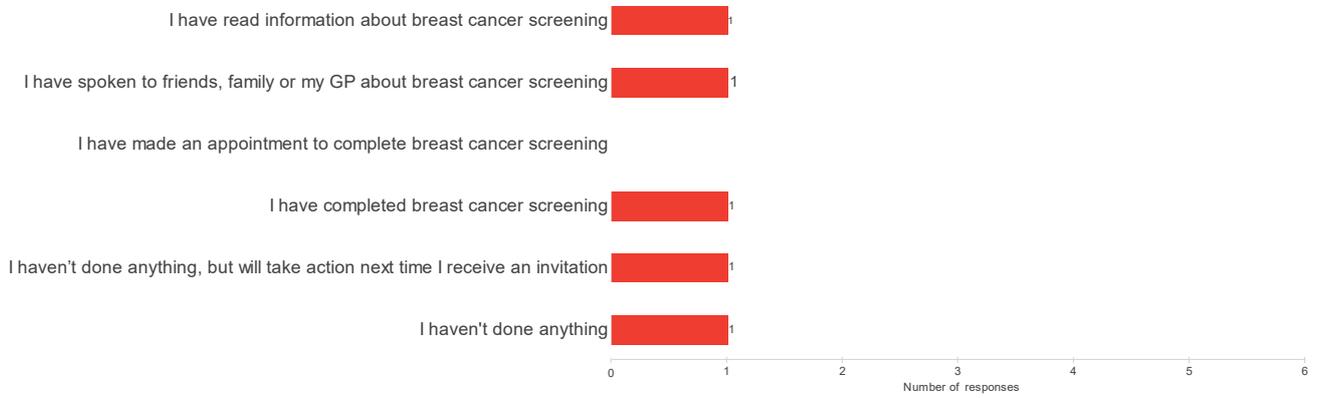


Figure 8: Actions taken for breast screening (number of responses)

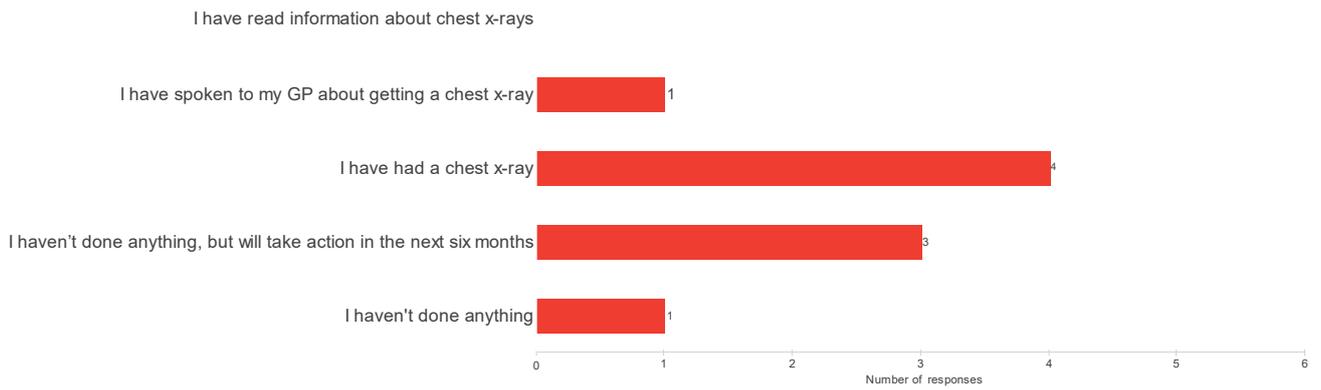


Figure 9: Actions taken to receive a chest x-ray (number of responses)

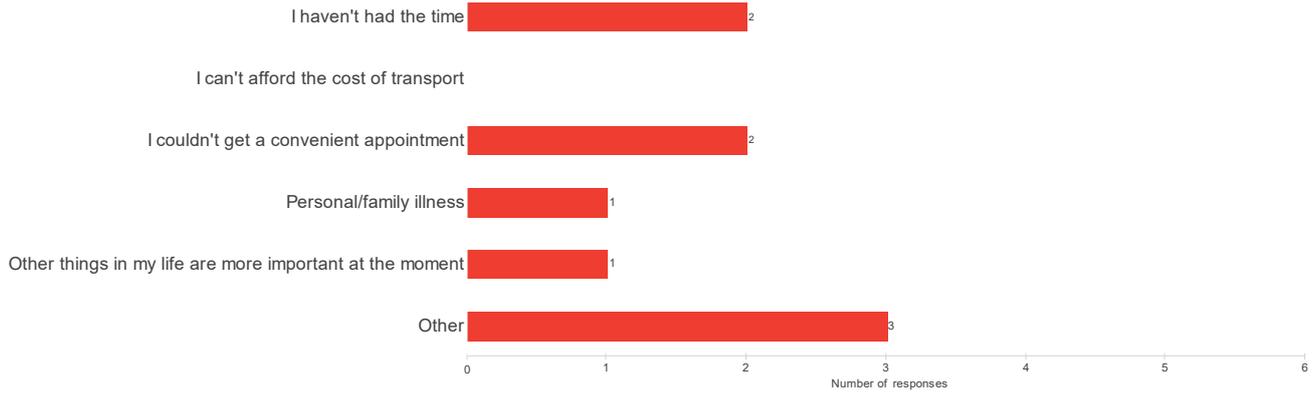


Figure 10: Perceived barriers to completing screening goals

List 6: Other perceived barriers to completing intended screening goals

If 'other', please state:
Because at the moment I feel fine
I would need assistance to get to an appointment - support and transport.
I am severely overweight and the thought of having an intimate examination is very embarrassing at the moment.

List 7: General comments around cancer screening

Other screening comments
I think all cancer screening is very important. I have had cameras down throat and for bowel but all was clear to my relief. It was an important reminder that I needed to do this.

Programme feedback

111 people felt they had learnt something as a result of taking part in the Wise Up To Cancer programme (list 8).

List 8: Learning achieved through taking part in the programme

Learning achieved through WUTC
Healthy diet and good lifestyle can help reduce cancer risk
To eat less red meat.
The session just reassured me that my knowledge was already adequate
My knowledge was already pretty good. I could do with a reminder of certain signs of cancer but there was no leaflet.
To see doctor about my symptoms
I think it is very important to know all you can about wise up to cancer. I lost my dad in 84 to lung cancer but I think that things have progressed a lot since then.
Small lifestyle changes can make a big difference
Trying to be healthier
To get my screenings done.
I have learned that when cancer is at its most aggressive state it is harder to diagnose.
To try and eat better and get regular checks.
I have always been aware of my weight which is mainly caused by lack of exercise this was due to physical health problems which are slowly getting better.
Importance of early detection and diagnosis.
To visit your GP with any cancer symptoms
Ways to check myself and as I'm currently being monitored with colposcopies it increased my knowledge on the whys and whats to do with this
That always check any unusual thing whether it be small or not

List 8: Learning achieved through taking part in the programme

Learning achieved through WUTC
To eat better
Look after your body to help the prevention of cancers
Early warning signs of cancer
It prompted me to attend my cervical screening which I have now done.
I have learnt 1 thing that I didn't know
Made me think of changes during life
Small changes make a big difference
I am 70 years old and quite greedy. I am also diabetic. Therefore I bought the bike to ride in private and hopefully help me walk better. I want to lead an active life as long as possible and realise this is my responsibility. Sometimes I fail then I think what do I want for my future.
I have learnt that everyone should talk to someone if there has been any changes in or with our bodies. Aware to discuss any changes small or big.
More signs to look out for re cancer. How changes in diet can reduce risks.
Less red and processed meat is better. It is the main change I have made
I need to eat more fruit and less processed meat. I feed my boys so we all need to eat healthier
Not a lot really as I have been doing a lot to help myself e.g. diet and exercise and research. As my husband has had a malignant melanoma removed from his neck I have learned how to protect myself from the sun.
About the risks of red and processed meat
To continue to be active and eat well. I already felt like I was living a relatively healthy lifestyle but this certainly helped me continue to be motivated to work out more and eat healthier.
Been made more aware of the things to look for in earlier detection of cancer.
Take more notice of what I eat
Alcohol and smoking is not good for me.
Didn't learn anything but was reminded of a few things
Good food (freshly made) using stairs, cycling to and from the library, taking a packed lunch with me, no tea or coffee or sugar, tomato juice, porridge with honey for breakfast, evening meal no later than 6pm.
Better awareness of checking for breast cancer and the procedures involved when having a mammogram - coincidentally my appointment came through a week later so I was much better informed when it did.
I do all the tests for cancer mammograms and bowel screening. It was nice to talk to the lady about things. You learn about all sorts of things.
To look after myself
Be more aware of red flag symptoms
That bacon is really bad for you!
A bit more information on lifestyle factors
It's given me a wake up call and made me more aware of the things I need to do and changes I need to make and a better understanding of why these changes can really benefit and help me.
Different symptoms to look out for and the good work carried out by Yorkshire Cancer
Attend screening
To take responsibility for my own health and monitor it so that I become aware when there is reason for concern
That I am making good choices health wise
There are more symptoms to look out for with cancer than I thought.
Maybe I could drink less but I am aware of the fact.
Increased my knowledge and awareness of potential signs to look for and consider.
I already knew about cancer and possible symptoms as my Mum has had cancers over the last 9 years and I am under surveillance for bowel cancer, but this e-mail has reminded me to persue my alternative lifestyle.
To look after myself. To do more exercises, eat healthy foods
To keep up with the healthy eating and lifestyle choices to help me through the stress.
To be more health aware and not take good health for granted.
Diet not only affects fitness but also general health
That if I feel that anything is wrong to contact my GP straight away.
Not a lot, as I had heard most of it before.
Learned about checking skin. Awareness of sugar in food and drinks. Extra salt and sugar on food.
You have to help yourself. No one can do it for you.
The frequency of checking breast and to do it after period and to make sure I always go for my cervical screening test in time and to look out for my skin brown marks and how they change

List 8: Learning achieved through taking part in the programme

Learning achieved through WUTC
To be more aware of any changes to my normal.
I can obtain a chest x ray at walk in clinics
Quite a few signs to look out for and help available for stopping smoking
Keep up the exercises.
More awareness of diet and exercise
Sometimes our genes and age can have a part in the risk we run of getting cancer, but trying to live a healthy lifestyle can lower some risks (I am just taking part in bowel cancer screening).
More aware of the signs and symptoms of cancer
My level of awareness was raised.
That I need to make an effort to be healthier
BMI
To take my health a little more seriously
Don't just leave it get checked out
Try to eat a balanced diet, increasing calories healthily. To be aware of changes such as unusual lumps.
I learned not to be afraid to contact my doctor if I feel it to be necessary.
The importance of a diet rich in grains, pulses and vegetables.
Live healthier to really enjoy life especially old age!
Cut down on red meat
Look after yourself
Healthier lifestyle means a better life
I found a lump in my breast, had it checked out ASAP, benine thankfully.
What the various symptoms of cancer are.
The need to de-stress at times
There are many overlapping symptoms of many conditions that are also symptoms of the various cancers and you are often sent away from appointments with pills/meds to treat other diagnosis's with cancer never crossing your mind but if our symptoms continue, we tend not to go back and accept the previous diagnosis but I will go back to gp/nurse prescriber if I ever have persistent symptoms that don't change after first diagnosis & treatment tried over a period of time, as any type of cancer is never tested for upon first presentation with symptoms, unless it's a cancer savy healthcare professional or symptoms are 'nailed on' cancer specific.
I need to lose weight and exercise
I try to lead a good lifestyle but it is always good to refresh why you need to. I teach exercise sessions and since taking part I have spoken to the class participants and asked them to look at why you have to "wise up to Cancer" and make lifestyle changes. To take a look at Cancer Research and what they do.
That it is A LOT easier to make changes than you think. Little smaller changes over time will mean I reach my goal of becoming healthier.
How to get help with losing weight
There are different signs and symptoms to look out for
I can help to prevent cancer by cutting down on certain kinds of food and being more vigilant to any changes in my body.
To be more aware of how poor my diet is and try bring in small changes. To try a.d increase my physical activity
To take care of myself better
to be more aware of what I do and eat
Signs and symptoms that I otherwise wasn't aware of
I learnt some signs and symptoms I did not know of.
The importance of diet as a factor in cancer risk
Keep trying to be healthy.
To be aware of changes in my health and the importance of looking after your body with healthy earing and regular exercise
I did not know that eating too much red meat can cause bowel cancer.
Haven't learnt anything very much
to check every month
I really need to get fitter lose more weight.
There is lots of good advice & services to guide & help you.
Be healthier Be aware of early warning signs and do something about
how important to be checked up
more aware of the cancer signs maybe
Nothing new - its all common sense - just needed to be reminded every now and then

List 8: Learning achieved through taking part in the programme

Learning achieved through WUTC
To take care of myself and look for any sambtens of cancer also I am more carful about my health and my weight .
To be more aware of my body and what is happening to it. It is because of unusual bowel activity that I consulted a doctor since this questionnaire. This appears to be IBS.
More aware of things I can do to reduce my risk
That looking after your self better helps
About yorkshire not getting asmuch help towards the trust than london who recieve more fundibg help from cancer research

Topics covered

Rating of topics covered is shown in figure 11 - 158 people responded to this question. Comments are shown in list 9.

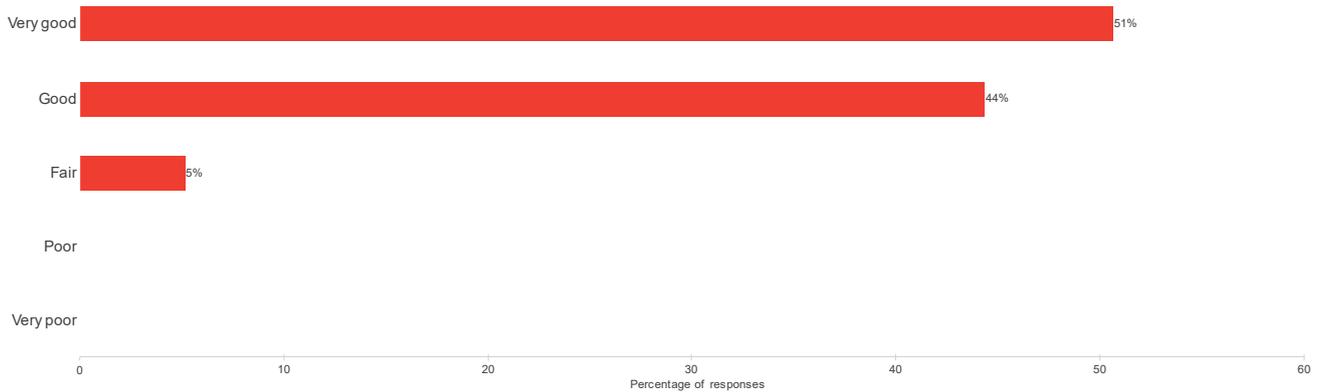


Figure 11: Rating of topics covered

List 9: Comments relating to topics covered

Topics covered
Nothing new but well explained
I feel the advice about increasing fruit in your diet is counterproductive for someone with diabetes. I find even a piece of fruit can cause my blood sugar to spike. I'm all for increasing vegetable intake
Varied
I found the topics that I was given very informative.
It is nice to see people about these sort of things - it clears your mind.
It was really helpful and I have made changes in my immediate family's lives.
I thought pork lion was white meat I was told it was classed as red meat. Therefore I now eat less red meat
Getting doctors appointments can be very difficult
Interesting
Not all people eat meat and /or dairy products.
It covered many areas and was informative
Very good wide range of topics covered & very helpful although I do feel some of the norm 'generic' areas covered on health questionnaires (alcohol consumption, weight, bmi etc) but understandably basic information is generally required to carry out surveys. Please look into adding some of the rarer cancers & signs/symptoms into your surveys/questionnaires to bring up awareness levels of these to the public.
Good that you can ask questions and see what's out there
It was varied and informative
Good topics for all ages

Advice and support given

Rating of advice and support given is shown in figure 12 - 160 people responded to this question. Comments are shown in list 10.

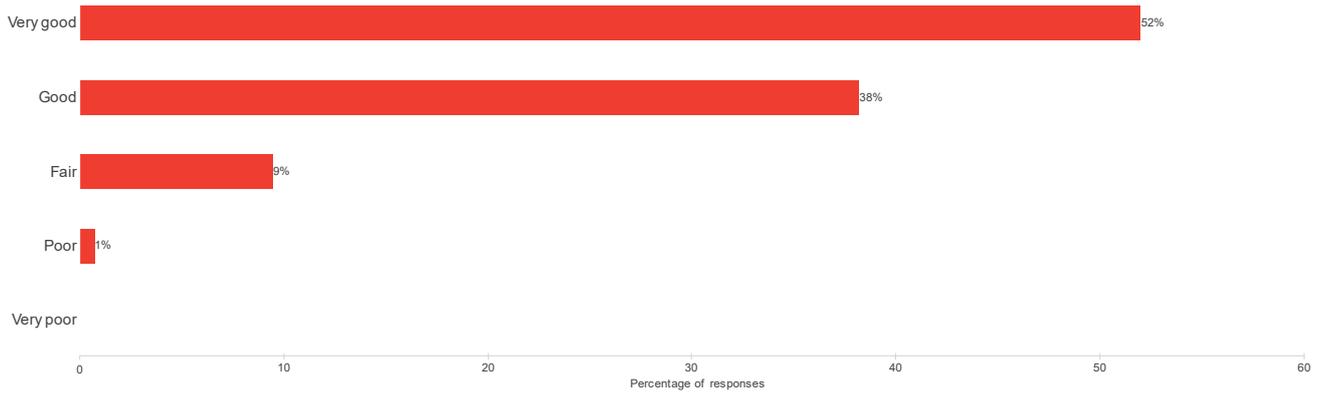


Figure 12: Rating of advice and support given

List 10: Comments relating to advice and support given

Advice and support given
Maybe expected some kind of more in depth questions about diet and health and exercise that could have included a report with recommendations.
Too many interruptions
Excellent
I found the support given was very useful and inspiring.
Good
Helpful advice about mammogram screening
Helpful
Very well presenetd for our 'health and wellbeing' session.
Helpful. Informative
Sue was very thorough and advised of groups of drugs that could be helpful
Lovely member of staff, not judgmental in any way. Lots of advice given & explained a lot as well as where I can get further advice & support if required.
Lovely people who you can ask a question and get information
I really engaged well with the worker she was pleasant and easy to communicate with
Good clear advice
Email prompts to visit the website would encourage me to visit it. I'll do it now and sign up

Leaflets provided

Rating of leaflets provided is shown in figure 13 - 155 people responded to the question. Comments on this are shown in list 11.

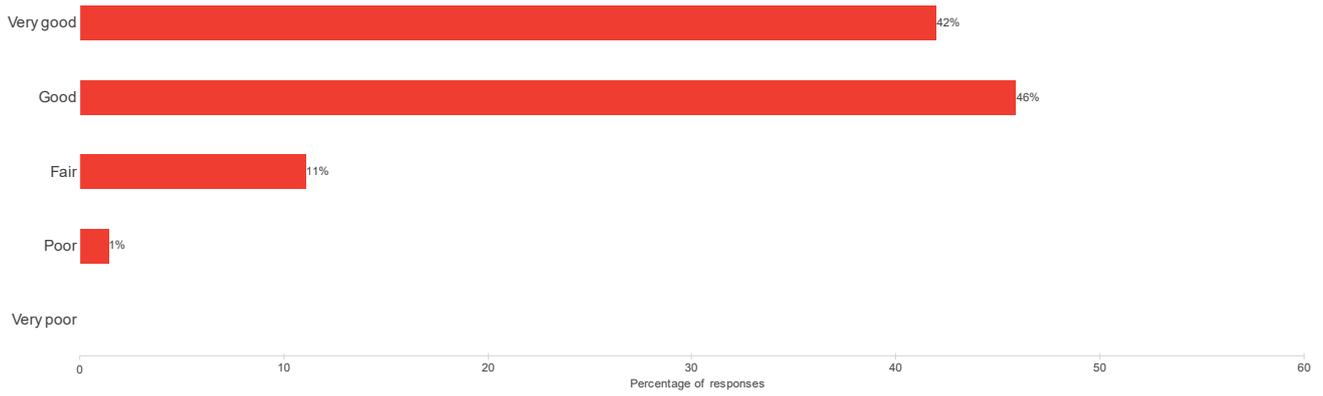


Figure 13: Rating of leaflets given

List 11: Comments relating to leaflets given

Leaflets given
Information given was fine. Practitioners in attendance could have talked us through them.
To many can be counterproductive
I don't remember being given a leaflet
Useful
The leaflets that were given were helpful as I was able to see things from a greater perspective.
Really useful leaflets about early signs and symptoms
I think I took the leaflets myself. They were readily available.
Good
Not all available but good range given & told where to get more information & where to get information on the leaflets unavailable at the time
Always good to receive leaflets to pass on if you don't need them and to show to others
I took leaflets necessary for me but there was plenty of choice
Good information
I have not received any further information since my initial meeting with the consultant at a Breeze festival.

Length of time taken

Rating of length of time taken is shown in figure 14 - 155 people responded to the question. Comments on this are shown in list 12.

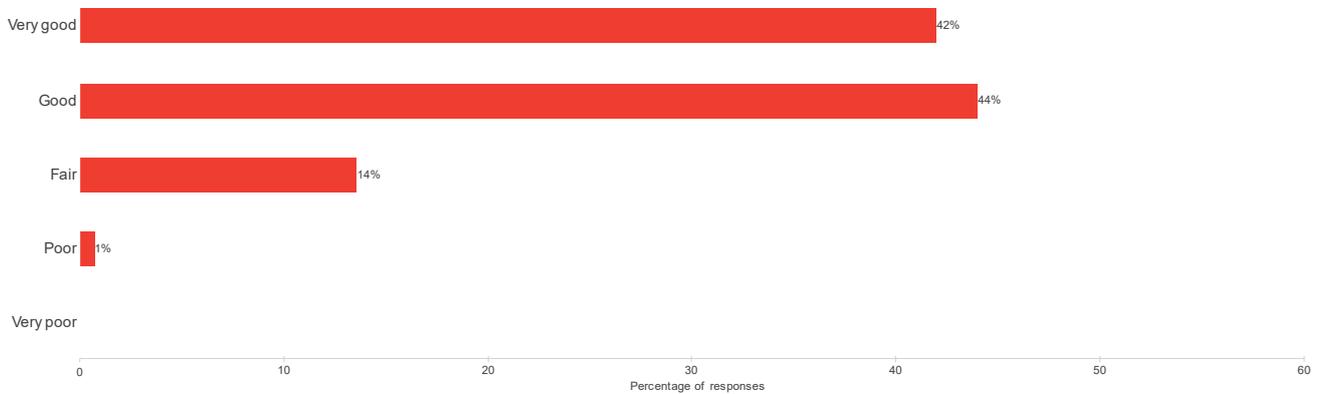


Figure 14: Rating of time taken

List 12: Comments relating to length of time taken

Length of time given
Was a bit quick, but then this wasn't a full health check so didn't expect too much
Should have been 15 mins but went on due to interruptions
Just right, didn't feel rushed
Allright
Plenty of time to ask any questions I needed to.
Pharmacy assistant Mary Wilson was very thorough and helpful. She was very understanding and gave good advice.
Enough to get to the point
About 20 minutes, but they will speak to you at any time
Nice & appropriate for pharmacy customers. They are at a pharmacy for a reason so don't want to be there a long time. Quick so doesn't affect poorly people but long enough to get a lot of information covered.
Seemed to take as long as I needed
I felt enough time was given , I didn't feel rushed
Good
Didnt take long to fill out the questionnaire instore at all

Venue

Rating of venue is shown in figure 15 - 153 people responded to the question. Comments on this are shown in list 13.

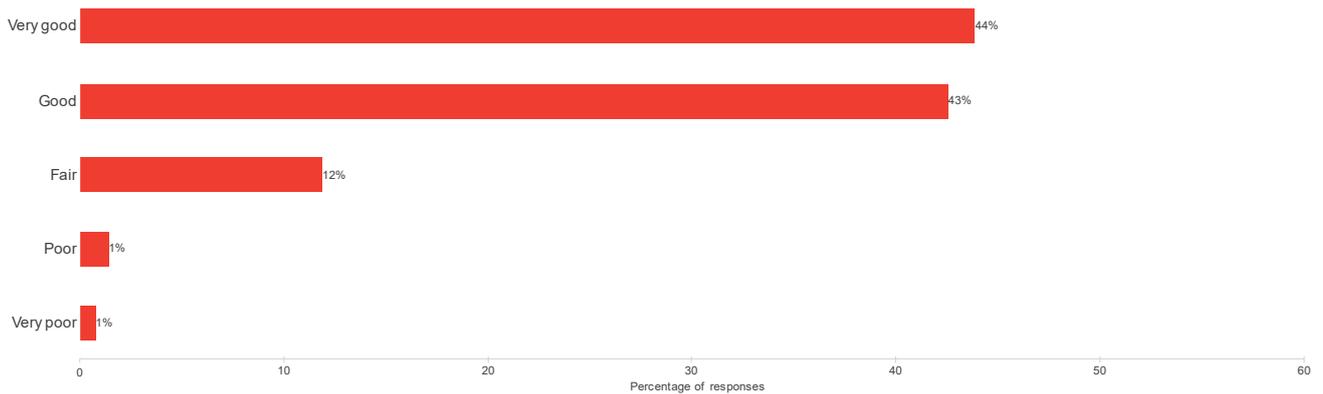


Figure 15: Rating of venue

List 13: Comments relating to venue

Venue
Would be good to have a venue for families
Good use of mobile library
A very relaxed atmosphere made a pleasant approach which would attract participation
Should have been a bit more private
Lovely
It was very noisy with a lot going on around.
Not that private as in tea-bar area!
The event was well attended which resulted in the room being a little cramped
Mobile van, so easy to get to.
Nice & private but not a hassle for anyone to get to (no long walk etc) with pain or illness when not feeling good
Perfect venue for me
A nice venue, accessible to all
Good. My daughter was playing dress up while I answered questions
It was raining, windy and cold in the park which made talking quite difficult.
Great venue place and have a stall at the front of the store advertising this with the stores pharmacy staff

Other feedback

List 14 shows general comments received about the programme.

109 people had completed an action relating to YCR following participation in the programme (figure 16)

List 14: General comments received about the programme

Any other comments on WUTC
Was a good way to give more info to participants on cancer, its causes and how to prevent it / reduce the risk, however I felt the questions weren't as in depth as I was expecting. The info given (leaflets etc) and could have been given more explanation.
Signs of cancer leaflet - something really simple that you can put on your fridge and maybe with a contact number or website if you have any concerns.
A great campaign that can have a positive impact
Please do more in Bramley
The women I dealt with were very friendly and put me at ease, which is extremely helpful when discussing such topics.
Very different feelings and understanding of the affliction if you are one of the fortunate unaffected
We don't always realise how lucky we are to be healthy. We don't think illness will affect us. However if we really think about life it is mainly our responsibility to 'Wise Up To Cancer' and other illnesses.
My changing wasn't directly to do with this but of things that were happening in my family
I was given the leaflet after the talk to take home that I later found out I should have read before the interview.
Get doctors involved
It is a good campaign to make people more aware of symptoms.
Very good
Think it's a good idea
Really friendly, helpful interview which gave me useful information for both myself and others in terms of early signs/symptoms how to improve lifestyle and agencies to contact for help and further advice. Would recommend it to others!
It is a good thing to talk about cancer. You find all sorts to hear.
I have made an appointment to see a doctor, to discuss my constant coughing and overall tiredness and feeling ill most of the time. I am not a worrier. I think its possibly a virus just cant seem to get over.
Good project - with men you have to keep chasing - can be hesitant to take and act on advice
I think this is a very good idea as lifestyle and commitment mean we don't always stop and listen to the advice given, or read the poster on the walls or the leaflet posted through the door. I think it's really good wise up to cancer coming along to these cpmmunity events because it give people the chance to speak and ask questions about the things you don't understand. Also the the Wise up to cancer people were really friendly and lovely and easy to speak to.
Very good project

List 14: General comments received about the programme

Any other comments on WUTC
As many of my family have lost their lives to cancer, I have decided to do a family run challenge for Yorkshire Cancer Research.
More people/GPs telling patients about the symptoms of cancer. More GPs need to be aware of the symptoms of cancer.
I find I get anxious about reading about cancer, but know early detection is positive.
The information is is very helpful and if we can get the message out there it will help more people to learn and understand that prevention is key!
Quite informative
That what I was doing was right so it gave me more confidence. Very helpful. Please keep up the good work.
I appear to be doing all the right things which good to have it confirmed
The young man I spoke to was lovely. Very kind and not judgemental. Thank-you.
All very well informed. Took our questions and answered it in depth, the lady was very friendly and had nice chat.
Good because it's an opportunity to talk to people of all ages and gender quite casually, rather than inviting people to take part in something officially. Some screening ends at 70+ so it is good to know that it can be requested at a later age if needed (I am 74 but still have breast cancer screening as my mum had cancer at 80). Good to have Yorkshire Cancer to help save Yorkshire lives (deaths in Yorkshire often higher than elsewhere).
Good information that did not take long and could save lives.
It is for a worthwhile cause, maybe one day there will be a cure.
Could not use weight management service as Leeds City Council in process of transferring to a private company from NHS, a wrong move in my opinion.
Excellent way of raising awareness.
Keep going with the research, questionnaires & surveys including wide range of cancers as a lot in aware of common symptoms as well as the 'nailed on cancer symptoms' spreading awareness that so many are in need of these days. It ends up being too late for a lot, purely due to lack of awareness of cancers & the symptoms...
It is always good to learn more about things and refresh the things you might know a little about. Good that people know what they are talking about and can pass on information in a good way so makes it seem like having a chat with someone you know.
Great initiative!
I have recommended my colleagues take part and am awaiting confirmation for someone to attend our team meeting
I think it's a great initiative and helps people to stop and think about their lifestyles and how small changes can help prevent cancer.
It's a good wake up call to what I'm doing wrong and how small changes ie cutting down on red meat and alcohol can make a big difference
Very good service
The volunteers are doing a good job.
I think Wise Up to Cancer should be advising people to drastically reduce carbohydrate in their diet, ideally eliminating sugar altogether.
very good
i thought the lady i spoke to was lovely she took time to explaine and there was no rush

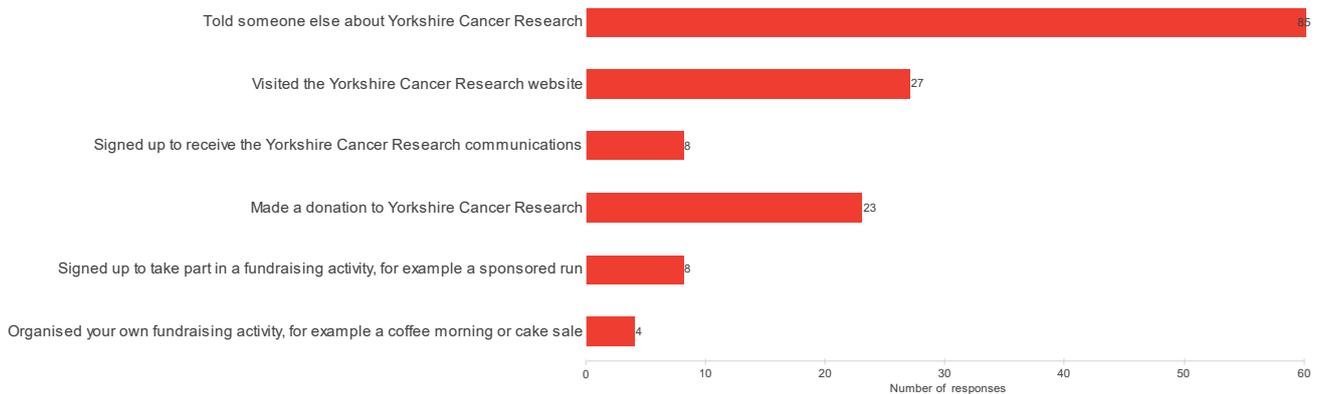


Figure 16: Actions taken relating to YCR since participating in WUTC

Appendix 8b. Wise Up To Cancer Follow-Up Report (Community Settings)

Overall 124 respondents completed this questionnaire. Where gender was stated, 42 were male (33.9%) and 80 female (64.5%).

Weight and Diet Goals

78 follow-up respondents had initially set a goal relating to weight and diet. 72 stated a response for the follow-up question and 65 had taken action (figure 1).

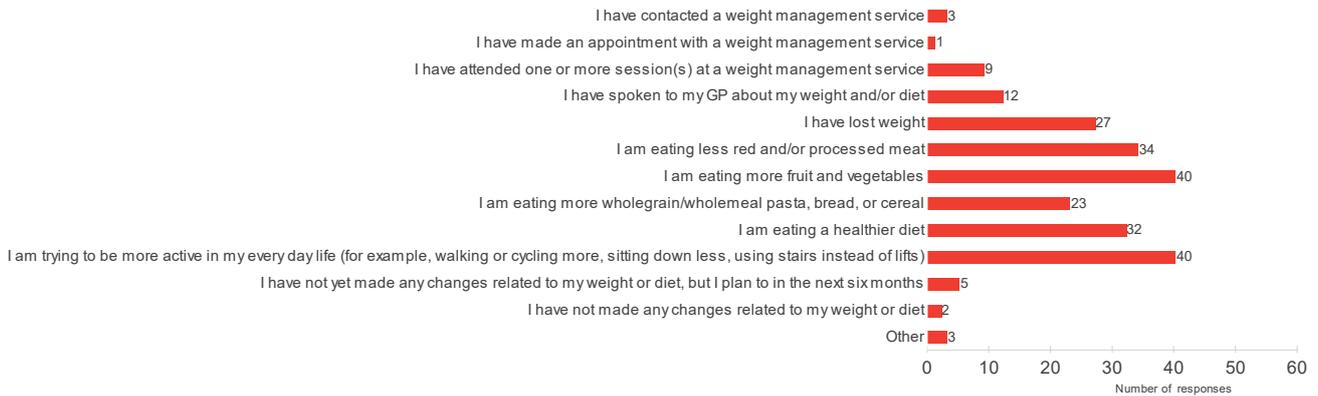


Figure 1: Changes made to weight and diet (number of responses)

Other changes related to weight and diet goal

If 'other', please state:
Doing it myself - smaller portions and no stodgy food - if I fail then I'll seek help
Join the gym
I am now eating a gluten free diet

Physical Activity Goal

45 respondents had initially set a goal to increase their physical activity. 44 stated a response for the follow-up question and 38 had taken action (figure 2).

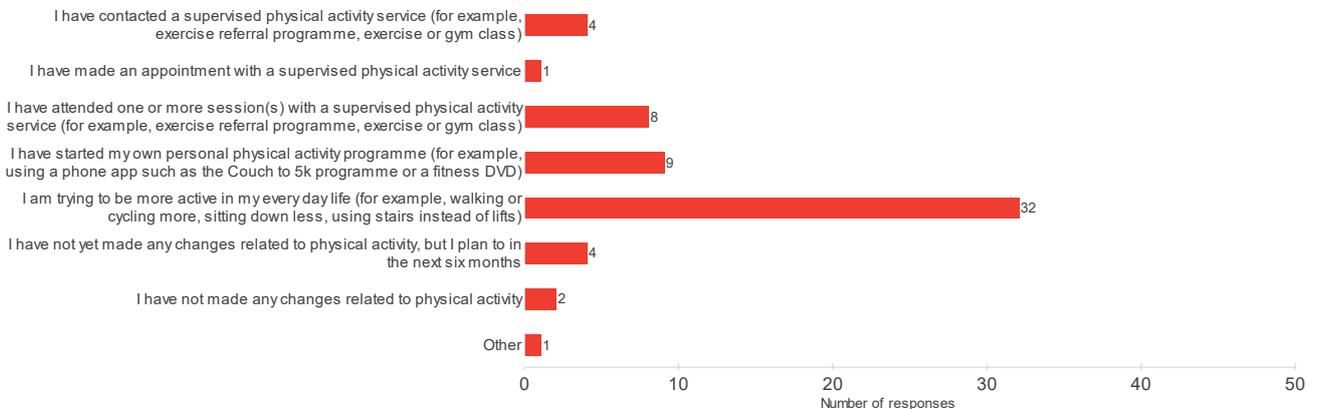


Figure 2: Changes made to physical activity (number of responses)

Other changes related to physical activity

If 'other', please state:
 Undertaken an exercise challenge for charity

Alcohol Goals

11 respondents had initially set a goal to reduce their alcohol consumption. 10 stated a response for the follow-up question and 8 had taken action (figure 3).

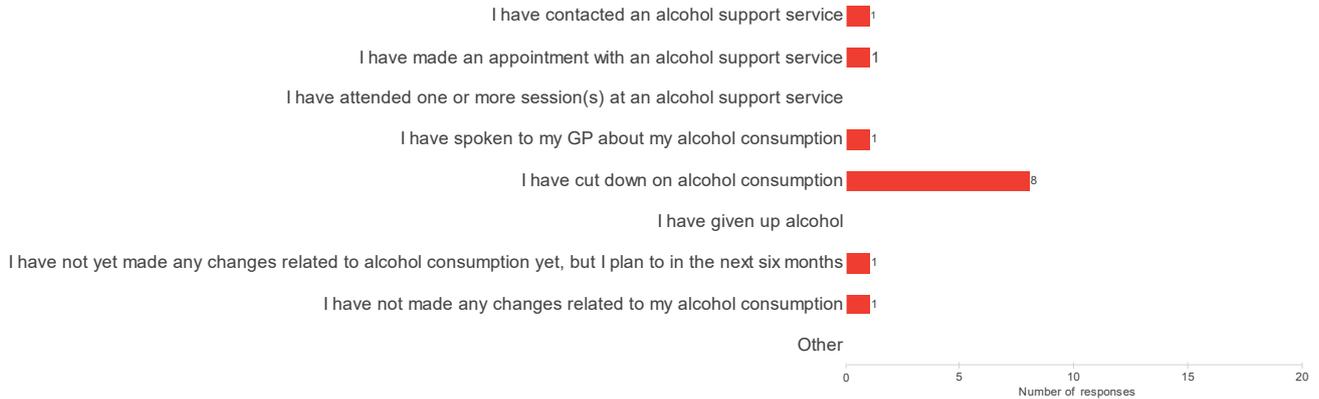


Figure 3: Changes made to alcohol consumption (number of responses)

Other changes related to alcohol goal

I

Tobacco Goals

7 respondents had initially set a goal to reduce their tobacco use. 7 stated a response for the follow-up question and 6 had taken action (figure 4).

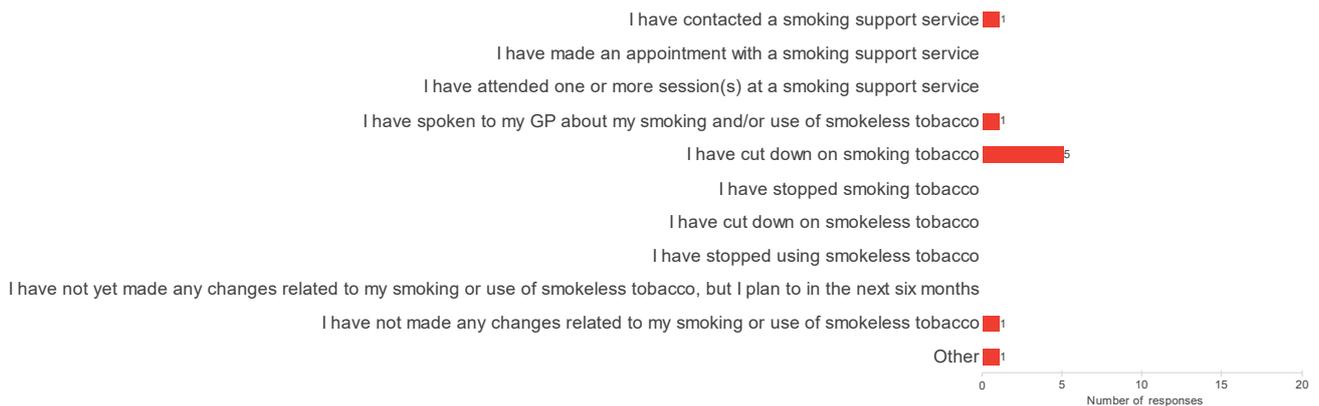


Figure 4: Changes made to tobacco use (number of responses)

Other changes related to tobacco goal

If 'other', please state:
 Tend to only smoke when also drinking alcohol/socialising, but have not done this since the wise up to cancer chat

Other Goals

3 follow-up respondents had set goals outside of those provided (list 1). The changes made relating to these other goals are shown in list 2.

6 people had not initially set any lifestyle goals within the initiative but had since decided to set lifestyle goals on their own (list 3).

List 1: Other goals set at baseline.

1.	2.	3.
Staying sober		
Better sleep routine		
Eat less watch portion size		

List 2: Other changes made in relation to other goals set.

1.	2.	3.
Totally abstinent		
I have tried to keep up a better sleep routine but I have also sought medical help for familial cancer as my father is suffering due to cancer at the moment for the third time.		
Started intermittent fasting, and taking regular breaks when eating - finding that after some of these breaks I am actually full so do not overeat		

List 3: Goals set by themselves after completing the WUTC initiative

To eat more fruit and less sugar items such as chocolate bars
Be more conscious about how much I drink
Get myself check up regularly for breast cancer and get my intimate problem sorted by seeking second opinion
Attending "Aquafit" class once a week.
To lose a little weight
Exercise more and lose body fat.

Effect of lifestyle changes

55 people said their lifestyle changes had affected the way they felt (list 4). 23 people perceived barriers to making their lifestyle changes (list 5).

List 4: Perceived effects as a result of making lifestyle changes

Have your recent lifestyle changes affected the way you feel at all? If so, in what way?
I don't feel as tired and feel like I dont get as bloated as I used to.
I don't feel as tired and am more active.
Have more energy and feel better in myself
They have affected my overal physical and mental well-being and enhanced my mood as I have become more physically active.
My clothes feel looser than usual
I am feeling more active.
Not sure as yet, but generally feel better in myself.
I have started to increase my gym activity to include more cardio and I feel that I have more energy
Feel a lot better in myself
I have made changes to my diet, but unfortunately the cold I have had for several months has returned... I have been short of breath and feel tired again ... I have not been able to do more exercise in the last few weeks. I am starting to feel better and I have started to jog again, but only small distances.

List 4: Perceived effects as a result of making lifestyle changes

Have your recent lifestyle changes affected the way you feel at all? If so, in what way?
<p>Yes, reduced refined sugar intake. Feel better for it</p> <p>I feel better in myself when I have ran or been to the gym.</p> <p>Yes improved mood.</p> <p>More energy - I've lost some weight and this has helped lower my back pain so less painkillers needed. Better bowel movements because of new diet and less medication.</p> <p>Have tried to cut down on red and processed meat but it is too early to say how it has affected me.</p> <p>Now I am eating breakfast I feel hungry at lunch time, I work part time so do not have a lunch break so take an apple/banana/raspberries to eat on train on way home at 2pm. I seem to have more energy so picking my boys up from school I don't mind staying at the park playing ball/tennis with them</p> <p>My swimming stamina has increased.</p> <p>My breathing has been a lot better. I'm feeling more energetic.</p> <p>Walking with a small group makes me feel better. Feel as though I'm helping myself.</p> <p>Feel more confident in managing my weight/diet following appointment with dietician. Feel I have a bit more energy! Still room for improvement.....</p> <p>I walk a lot. I am not out of breath so easily.</p> <p>Changes have begun to help my health and fitness by doing exercises.</p> <p>Feel better in myself</p> <p>I am less accepting of my condition so more likely to find ways of reducing my weight - exercise is out of the question due to disability but it does not mean I have to accept it and do nothing. Focussing on the problem is more likely to identify the most effective way of achieving my goal.</p> <p>I feel more confident to check things out. We are incredibly lucky to have screening programmes which this project made me aware of - I have ensured that my father has completed his bowel screening because I mentioned how lucky we are to have this opportunity.</p> <p>Yes I feel better</p> <p>I feel a bit better for loosing some weight</p> <p>Yes, don't feel as tired and lethargic and have noticed I am more mentally alert</p> <p>I lost 2 kg. Just feel proud of my self.</p> <p>Feel lighter</p> <p>Yes. I feel much better, less bloated and have more energy.</p> <p>I am feeling better now. I don't eat any meat and fish or dairy products and - I am a vegan (I was a vegetarian for over 10 years).</p> <p>Less tired, eating better food</p> <p>Eating meat now makes me feel groggy</p> <p>Feel a bit more aware of my body, health, diet etc. Try to eat less sugar, be more active in the way I live (i.e. walking to town sometimes instead of getting a bus</p> <p>Feel better for the change</p> <p>More energy</p> <p>Glad I am moving more and sitting less. Feel much happier and body feels less stiff and old</p> <p>It's a good feeling walking nearly 70000 steps in a week, before I was lucky to get 5000 daily</p> <p>More energy</p> <p>Feel better and more energetic.</p> <p>Although the changes I have made are small it has without a doubt helped me become more aware of what items I choose to cook with and buy from the supermarket. I feel slightly more confident in my ability to make bigger changes with time.</p> <p>Yes I feel healthier</p> <p>Feel healthier</p> <p>Yes I feel healthier and not as tired</p> <p>I feel lighter on my feet and just generally happier with my body and appearance. Eating healthier foods makes me feel good and I'm really enjoying being more active in my everyday life.</p> <p>I don't feel I've taken massive steps but it focused me on thinking how unhealthy I am. When I do carry out changes I feel less lethargic and better about myself.</p> <p>Yes I feel lighter, and more full of energy.</p> <p>Feel better eating more fruit and veg.</p> <p>I have lost several kilograms due to changing my diet to be high in fat and low carbohydrate (especially sugar), which has made me feel much better. It is a little easier to move around, I have more energy and have a slimmer waistline.</p> <p>I didn't really drink that excessively but have cut down having a few glasses of wine during the week. I do feel much better for it</p> <p>I feel better mentally since beginning to exercise. I do feel as low in mood and it gives me an opportunity when exercising to be with my own thoughts.</p>

List 4: Perceived effects as a result of making lifestyle changes

Have your recent lifestyle changes affected the way you feel at all? If so, in what way?
<p>Pleased that I'm doing something but know I could do more much fitter I started to do most of my work on foot also I am now using a brown bread and rice instead of white one. I am eating fruit and veg more than before.</p>

List 5: Perceived barriers to making intended lifestyle changes

Barriers to lifestyle changes
<p>Waiting for a knee replacement plus diabetes which I control by diet and tablets already. Having surgery Moving house has played a part as we don't have as much time but once we are settled this will be my main priority. I have a fractured spine so I can't do a lot of walking but I try Haven't rung about diet for weight loss as lost phone number but I am hoping someone will get it for me. I have some pain related issues that are preventing me from exercising as much as I would like, but I am taking ongoing action to resolve these. Medication and hyosin patches Time!! I got knocked off my bike commuting to work, the injuries have stopped me doing the exercise I'd like to be doing. I probably should make more effort dietary wise. Lack of time to do more - but trying to re prioritise life/work balance! I lack motivation at the moment I intend to take up swimming again as it is something that I enjoy and I find it relaxing and beneficial regarding my arthritis. At 75 I find exercise very difficult. Recovering from an operation Healthy foods can often be very expensive. Medical problems (arthritic hip) I already attend activity groups, cannot fit anything else in and I get too tired if I try to fit in more. School holidays/grandparenting! My work is stopping me from doing so because of the long hours and shift patterns. Been on holiday then was poorly Habit - difficult to change established patterns of eating. I have not made as many changes as I had hoped. This is due to low motivation and peer support. I tried to go swimming at a local Leeds city council pool but had to get out as there were too many people in the pool. This did not help my motivation. I have rode my bike a few times but again not as often as I'd like. Too Busy with Work. Plan to Kickstart in January, as work quieter till April. im being a bit lazy which is not good attitude i know Time and effort. Its diet that needs changing not exercise which I do. I just don't have the time to work out a new eating plan.</p>

Discussing cancer signs and symptoms with GP

14 respondents had previously not spoken to their GP about their signs and symptoms potentially related to cancer - 3 had since spoken to their GP following Wise Up To Cancer (0 did not answer the question). Figure 5 shows the barriers people identified with as reasons for not speaking to their GP.

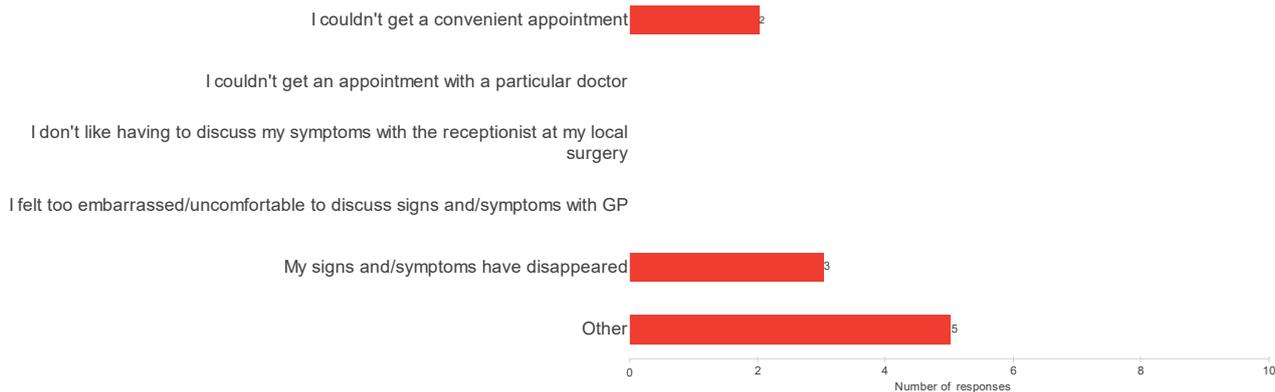


Figure 5: Barriers to speaking to GP about signs and symptoms of cancer (number of responses)

Other barriers to seeing a GP to discuss cancer signs and symptoms

If 'other' please state:
I haven't had the time to make an appointment yet but I do need to
I am thinking of making an appointment soon.
The cough has gone and the aches and pains are bearable and probably fair enough given my level of activity in DIY, gardening and decorating in a new house.
I have had a persistent cough for around 20 years and have spoken to my doctor about in on several occasions in the past.
too busy

Cancer screening goals

4 female respondents had initially set a goal to complete their cervical cancer screening. 4 responded to the follow-up question and 3 had since taken action (figure 6).

2 respondents had initially set a goal to complete their bowel screening. 2 responded to the follow-up question and 1 had since taken action (figure 7).

3 female respondents had initially set a goal to complete their breast screening. 3 responded to the follow-up question and 1 had since taken action (figure 8).

5 respondents had initially set a goal to get a chest x-ray. 5 responded to the follow-up question and 2 had since taken action (figure 9).

5 people had experienced barriers associated with completing their screening goals (figure 10 and list 6). 1 people provided general comments relating to cancer screening (list 7).

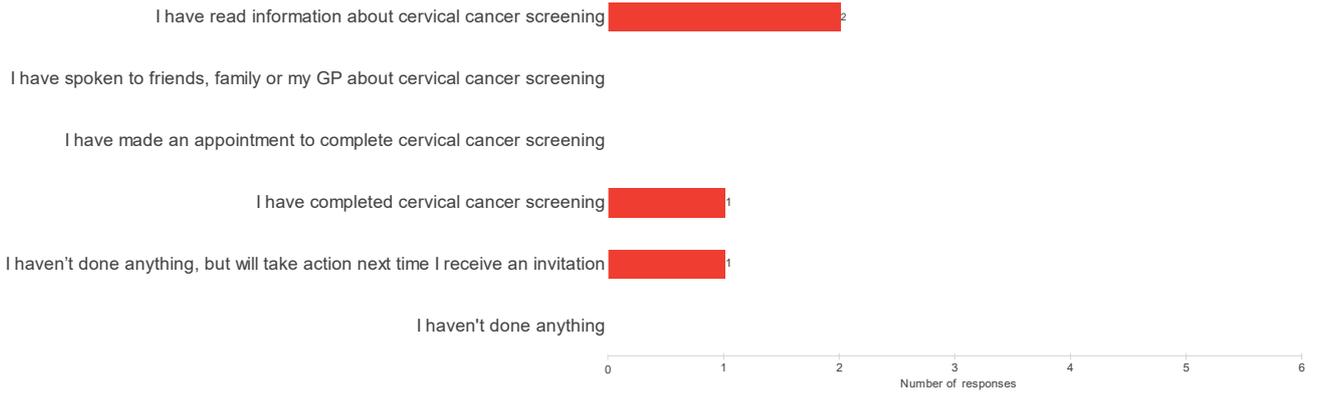


Figure 6: Actions taken for cervical screening (number of responses)

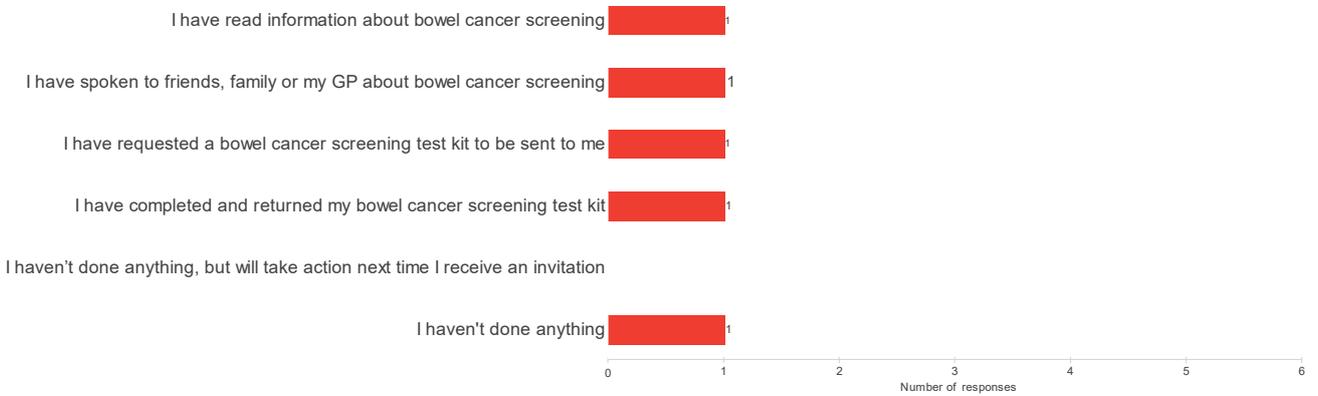


Figure 7: Actions taken for bowel screening (number of responses)

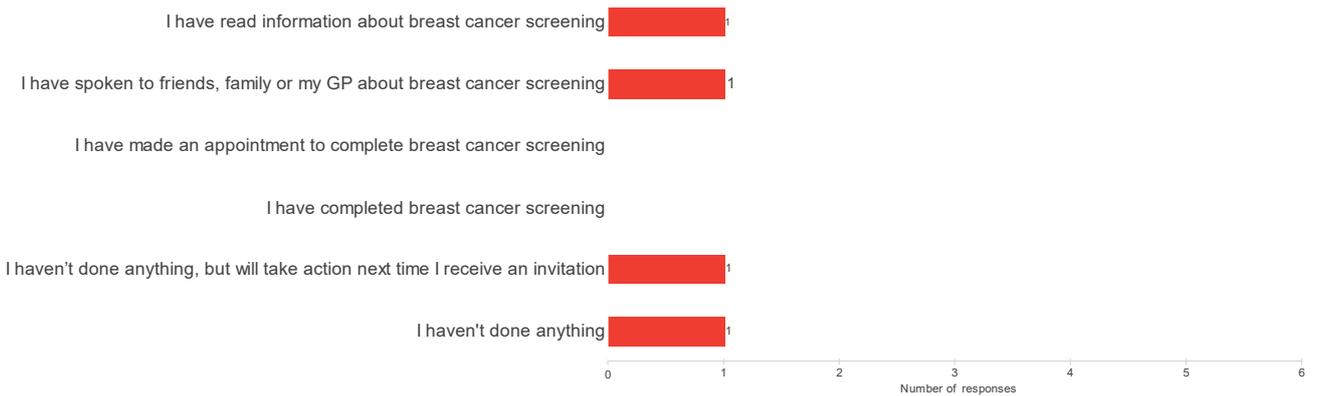


Figure 8: Actions taken for breast screening (number of responses)

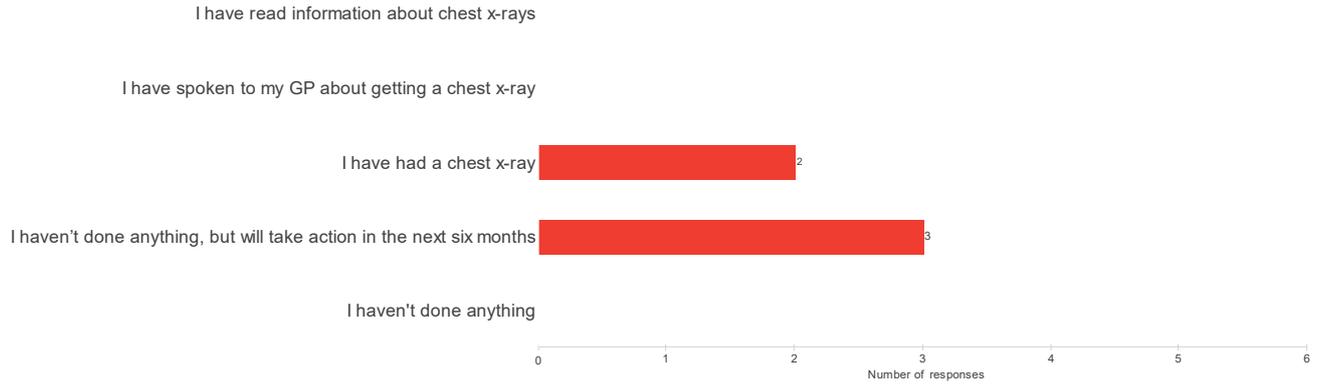


Figure 9: Actions taken to receive a chest x-ray (number of responses)

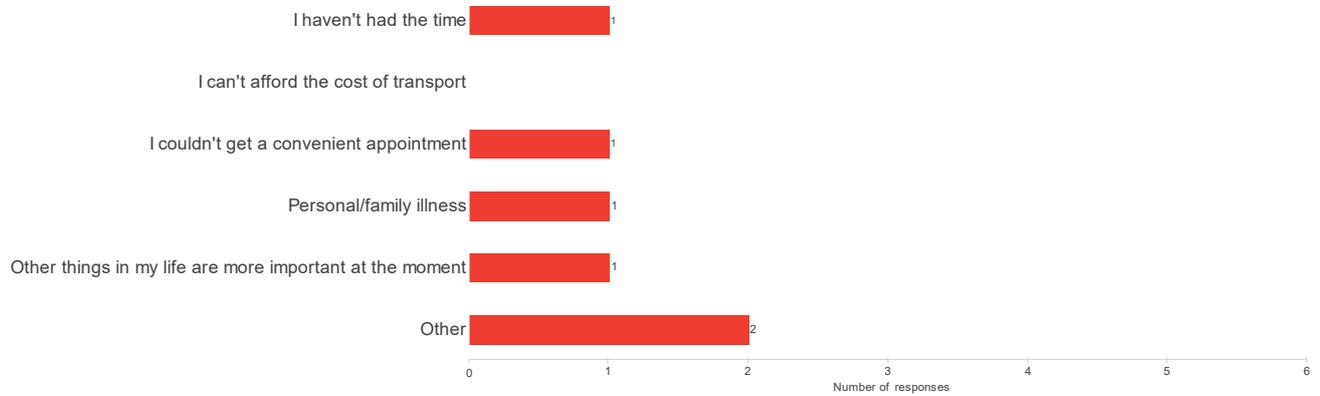


Figure 10: Perceived barriers to completing screening goals

List 6: Other perceived barriers to completing intended screening goals

If 'other', please state:
I would need assistance to get to an appointment - support and transport.
I am severely overweight and the thought of having an intimate examination is very embarrassing at the moment.

List 7: General comments around cancer screening

Other screening comments
It was an important reminder that I needed to do this.

Programme feedback

83 people felt they had learnt something as a result of taking part in the Wise Up To Cancer programme (list 8).

List 8: Learning achieved through taking part in the programme

Learning achieved through WUTC
Healthy diet and good lifestyle can help reduce cancer risk To eat less red meat. The session just reassured me that my knowledge was already adequate My knowledge was already pretty good. I could do with a reminder of certain signs of cancer but there was no leaflet. Small lifestyle changes can make a big difference

List 8: Learning achieved through taking part in the programme

Learning achieved through WUTC
Trying to be healthier
To get my screenings done.
I have learned that when cancer is at its most aggressive state it is harder to diagnose.
To try and eat better and get regular checks.
I have always been aware of my weight which is mainly caused by lack of exercise this was due to physical health problems which are slowly getting better.
Importance of early detection and diagnosis.
To visit your GP with any cancer symptoms
Ways to check myself and as I'm currently being monitored with colposcopies it increased my knowledge on the whys and whats to do with this
That always check any unusual thing whether it be small or not
To eat better
Look after your body to help the prevention of cancers
Early warning signs of cancer
It prompted me to attend my cervical screening which I have now done.
I have learnt 1 thing that I didn't know
Made me think of changes during life
Small changes make a big difference
More signs to look out for re cancer. How changes in diet can reduce risks.
Less red and processed meat is better. It is the main change I have made
I need to eat more fruit and less processed meat. I feed my boys so we all need to eat healthier
About the risks of red and processed meat
To continue to be active and eat well. I already felt like I was living a relatively healthy lifestyle but this certainly helped me continue to be motivated to work out more and eat healthier.
Alcohol and smoking is not good for me.
Didn't learn anything but was reminded of a few things
Good food (freshly made) using stairs, cycling to and from the library, taking a packed lunch with me, no tea or coffee or sugar, tomato juice, porridge with honey for breakfast, evening meal no later than 6pm.
Better awareness of checking for breast cancer and the procedures involved when having a mammogram - coincidentally my appointment came through a week later so I was much better informed when it did.
I do all the tests for cancer mammograms and bowel screening. It was nice to talk to the lady about things. You learn about all sorts of things.
To look after myself
That bacon is really bad for you!
A bit more information on lifestyle factors
It's given me a wake up call and made me more aware of the things I need to do and changes I need to make and a better understanding of why these changes can really benefit and help me.
Different symptoms to look out for and the good work carried out by Yorkshire Cancer
To take responsibility for my own health and monitor it so that I become aware when there is reason for concern
That I am making good choices health wise
Maybe I could drink less but I am aware of the fact.
Increased my knowledge and awareness of potential signs to look for and consider.
To look after myself. To do more exercises, eat healthy foods
Diet not only affects fitness but also general health
Not a lot, as I had heard most of it before.
Learned about checking skin. Awareness of sugar in food and drinks. Extra salt and sugar on food.
You have to help yourself. No one can do it for you.
The frequency of checking breast and to do it after period and to make sure I always go for my cervical screening test in time and to look out for my skin brown marks and how they change
To be more aware of any changes to my normal.
I can obtain a chest x ray at walk in clinics
Keep up the exercises.
Sometimes our genes and age can have a part in the risk we run of getting cancer, but trying to live a healthy lifestyle can lower some risks (I am just taking part in bowel cancer screening).

List 8: Learning achieved through taking part in the programme

Learning achieved through WUTC
<p>My level of awareness was raised.</p> <p>That I need to make an effort to be healthier</p> <p>BMI</p> <p>To take my health a little more seriously</p> <p>Don't just leave it get checked out</p> <p>I learned not to be afraid to contact my doctor if I feel it to be necessary.</p> <p>The importance of a diet rich in grains, pulses and vegetables.</p> <p>Live healthier to really enjoy life especially old age!</p> <p>Cut down on red meat</p> <p>I found a lump in my breast, had it checked out ASAP, benine thankfully.</p> <p>What the various symptoms of cancer are.</p> <p>The need to de-stress at times</p> <p>I need to lose weight and exercise</p> <p>I try to lead a good lifestyle but it is always good to refresh why you need to. I teach exercise sessions and since taking part I have spoken to the class participants and asked them to look at why you have to "wise up to Cancer" and make lifestyle changes. To take a look at Cancer Research and what they do.</p> <p>That it is A LOT easier to make changes than you think. Little smaller changes over time will mean I reach my goal of becoming healthier.</p> <p>How to get help with losing weight</p> <p>There are different signs and symptoms to look out for</p> <p>I can help to prevent cancer by cutting down on certain kinds of food and being more vigilant to any changes in my body.</p> <p>To be more aware of how poor my diet is and try bring in small changes. To try a.d increase my physical activity</p> <p>To take care of myself better</p> <p>to be more aware of what I do and eat</p> <p>The importance of diet as a factor in cancer risk</p> <p>Keep trying to be healthy.</p> <p>To be aware of changes in my health and the importance of looking after your body with healthy earing and regular exercise</p> <p>I did not know that eating too much red meat can cause bowel cancer.</p> <p>Haven't learnt anything very much</p> <p>I really need to get fitter lose more weight.</p> <p>There is lots of good advice & services to guide & help you.</p> <p>Be healthier Be aware of early warning signs and do something about</p> <p>how important to be checked up</p> <p>more aware of the cancer signs maybe</p> <p>Nothing new - its all common sense - just needed to be reminded every now and then</p> <p>To take care of myself and look for any sambtems of cancer also I am more carful about my health and my weight .</p>

Topics covered

Rating of topics covered is shown in figure 11 - 118 people responded to this question. Comments are shown in list 9.

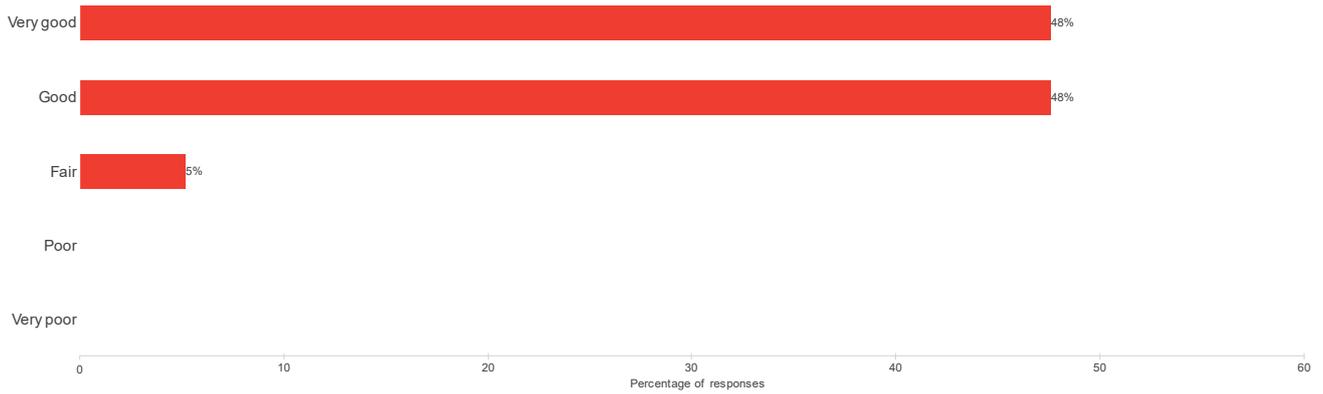


Figure 11: Rating of topics covered

List 9: Comments relating to topics covered

Topics covered
Nothing new but well explained
I feel the advice about increasing fruit in your diet is counterproductive for someone with diabetes. I find even a piece of fruit can cause my blood sugar to spike. I'm all for increasing vegetable intake
Varied
I found the topics that I was given very informative.
It is nice to see people about these sort of things - it clears your mind.
It was really helpful and I have made changes in my immediate family's lives.
I thought pork loin was white meat I was told it was classed as red meat. Therefore I now eat less red meat
Getting doctors appointments can be very difficult
Interesting
Not all people eat meat and /or dairy products.
Good that you can ask questions and see what's out there
It was varied and informative
Good topics for all ages

Advice and support given

Rating of advice and support given is shown in figure 12 - 120 people responded to this question. Comments are shown in list 10.

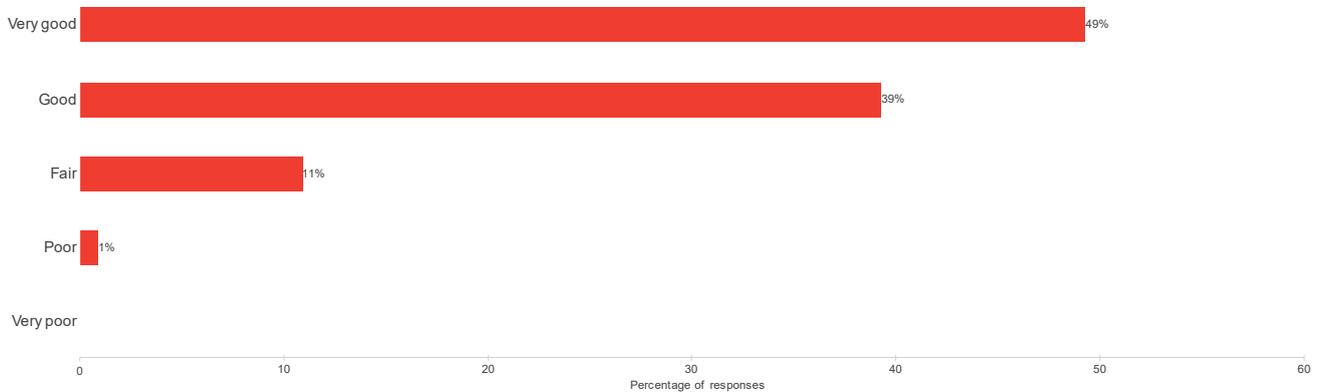


Figure 12: Rating of advice and support given

List 10: Comments relating to advice and support given

Advice and support given
Maybe expected some kind of more in depth questions about diet and health and exercise that could have included a report with recommendations.
Too many interruptions
Excellent
I found the support given was very useful and inspiring.
Helpful advice about mammogram screening
Helpful
Very well presenetd for our 'health and wellbeing' session.
Helpful. Informative
Lovely people who you can ask a question and get information
I really engaged well with the worker she was pleasant and easy to communicate with
Good clear advice
Email prompts to visit the website would encourage me to visit it. I'll do it now and sign up

Leaflets provided

Rating of leaflets provided is shown in figure 13 - 116 people responded to the question. Comments on this are shown in list 11.

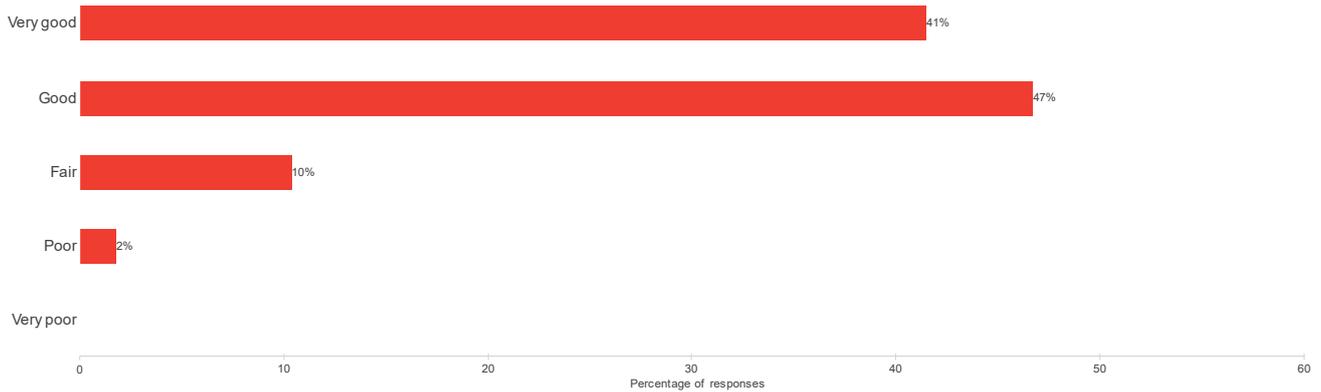


Figure 13: Rating of leaflets given

List 11: Comments relating to leaflets given

Leaflets given
Information given was fine. Practitioners in attendance could have talked us through them.
To many can be counterproductive
I don't remember being given a leaflet
Useful
The leaflets that were given were helpful as I was able to see things from a greater perspective.
Really useful leaflets about early signs and symptoms
Good
Always good to receive leaflets to pass on if you don't need them and to show to others
I took leaflets necessary for me but there was plenty of choice
Good information
I have not received any further information since my initial meeting with the consultant at a Breeze festival.

Length of time taken

Rating of length of time taken is shown in figure 14 - 116 people responded to the question. Comments on this are shown in list 12.

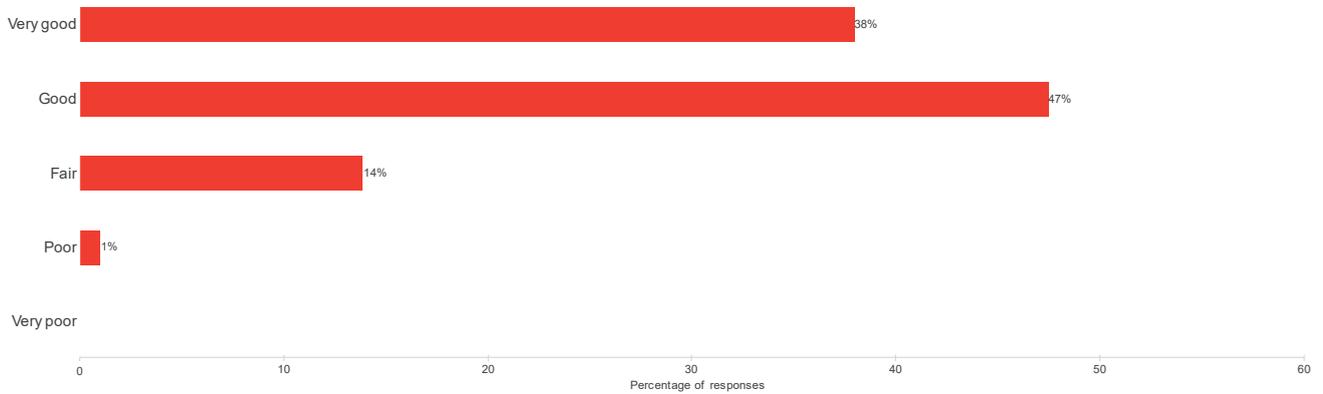


Figure 14: Rating of time taken

List 12: Comments relating to length of time taken

Length of time given
Was a bit quick, but then this wasn't a full health check so didn't expect too much
Should have been 15 mins but went on due to interruptions
Just right, didn't feel rushed
Plenty of time to ask any questions I needed to.
Enough to get to the point
Seemed to take as long as I needed
I felt enough time was given , I didn't feel rushed
Good

Venue

Rating of venue is shown in figure 15 - 116 people responded to the question. Comments on this are shown in list 13.

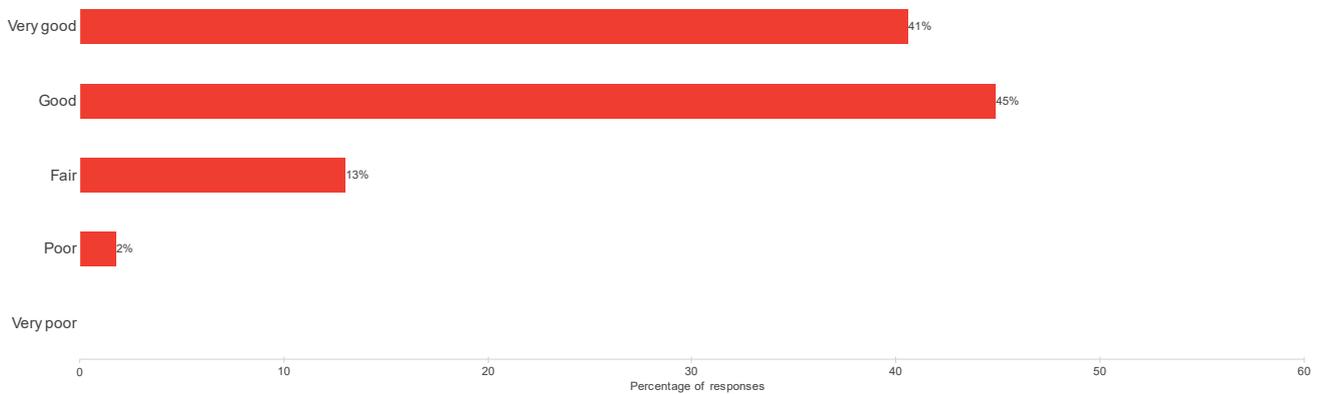


Figure 15: Rating of venue

List 13: Comments relating to venue

Venue
Good use of mobile library
A very relaxed atmosphere made a pleasant approach which would attract participation
Should have been a bit more private
It was very noisy with a lot going on around.
Not that private as in tea-bar area!
The event was well attended which resulted in the room being a little cramped
Mobile van, so easy to get to.
Perfect venue for me
A nice venue, accessible to all
Good. My daughter was playing dress up while I answered questions
It was raining, windy and cold in the park which made talking quite difficult.

Other feedback

List 14 shows general comments received about the programme.

82 people had completed an action relating to YCR following participation in the programme (figure 16)

List 14: General comments received about the programme

Any other comments on WUTC
Was a good way to give more info to participants on cancer, its causes and how to prevent it / reduce the risk, however I felt the questions weren't as in depth as I was expecting. The info given (leaflets etc) and could have been given more explanation.
Signs of cancer leaflet - something really simple that you can put on your fridge and maybe with a contact number or website if you have any concerns.
A great campaign that can have a positive impact
Please do more in Bramley
The women I dealt with were very friendly and put me at ease, which is extremely helpful when discussing such topics.
Very different feelings and understanding of the affliction if you are one of the fortunate unaffected
I was given the leaflet after the talk to take home that I later found out I should have read before the interview.
Think it's a good idea
Really friendly, helpful interview which gave me useful information for both myself and others in terms of early signs/symptoms how to improve lifestyle and agencies to contact for help and further advice. Would recommend it to others!
It is a good thing to talk about cancer. You find all sorts to hear.
I have made an appointment to see a doctor, to discuss my constant coughing and overall tiredness and feeling ill most of the time. I am not a worrier. I think its possibly a virus just cant seem to get over.
Good project - with men you have to keep chasing - can be hesitant to take and act on advice
I think this is a very good idea as lifestyle and commitment mean we don't always stop and listen to the advice given, or read the poster on the walls or the leaflet posted through the door. I think it's really good wise up to cancer coming along to these community events because it give people the chance to speak and ask questions about the things you don't understand. Also the the Wise up to cancer people were really friendly and lovely and easy to speak to.
Very good project
As many of my family have lost their lives to cancer, I have decided to do a family run challenge for Yorkshire Cancer Research.
Quite informative
That what I was doing was right so it gave me more confidence. Very helpful. Please keep up the good work.
I appear to be doing all the right things which good to have it confirmed
The young man I spoke to was lovely. Very kind and not judgemental. Thank-you.
All very well informed. Took our questions and answered it in depth, the lady was very friendly and had nice chat.
Good because it's an opportunity to talk to people of all ages and gender quite casually, rather than inviting people to take part in something officially. Some screening ends at 70+ so it is good to know that it can be requested at a later age if needed (I am 74 but still have breast cancer screening as my mum had cancer at 80). Good to have Yorkshire Cancer to help save Yorkshire lives (deaths in Yorkshire often higher than elsewhere).
Good information that did not take long and could save lives.

List 14: General comments received about the programme

Any other comments on WUTC
Could not use weight management service as Leeds City Council in process of transferring to a private company from NHS, a wrong move in my opinion.
Excellent way of raising awareness.
It is always good to learn more about things and refresh the things you might know a little about. Good that people know what they are talking about and can pass on information in a good way so makes it seem like having a chat with someone you know.
Great initiative!
I have recommended my colleagues take part and am awaiting confirmation for someone to attend our team meeting
I think it's a great initiative and helps people to stop and think about their lifestyles and how small changes can help prevent cancer.
It's a good wake up call to what I'm doing wrong and how small changes ie cutting down on red meat and alcohol can make a big difference
Very good service
The volunteers are doing a good job.
I think Wise Up to Cancer should be advising people to drastically reduce carbohydrate in their diet, ideally eliminating sugar altogether.
very good
i thought the lady i spoke to was lovely she took time to explaine and there was no rush

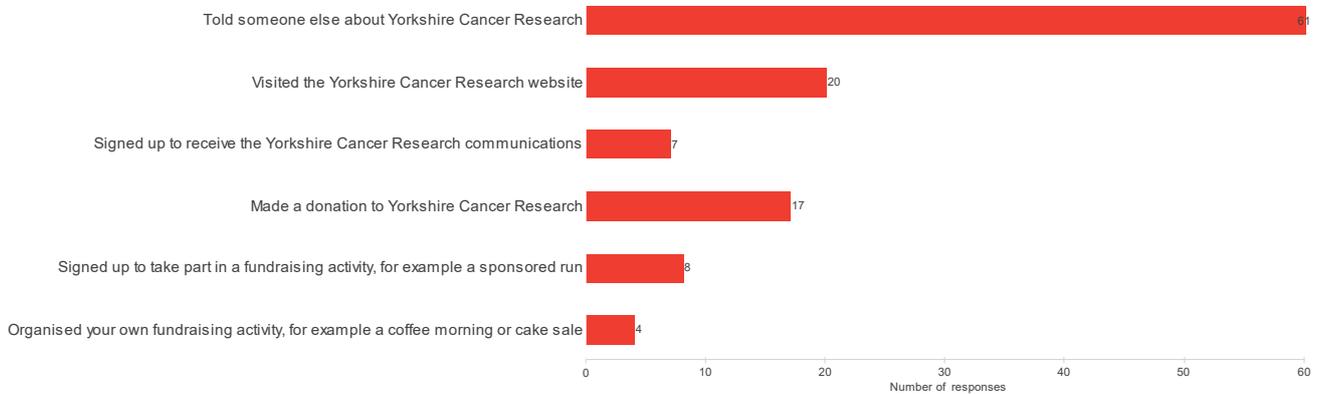


Figure 16: Actions taken relating to YCR since participating in WUTC

Appendix 8c. Wise Up To Cancer Follow-Up Report (Pharmacies)

Overall 42 respondents completed this questionnaire. Where gender was stated, 8 were male (19.0%) and 34 female (81.0%).

Weight and Diet Goals

25 follow-up respondents had initially set a goal relating to weight and diet. 24 stated a response for the follow-up question and 22 had taken action (figure 1).

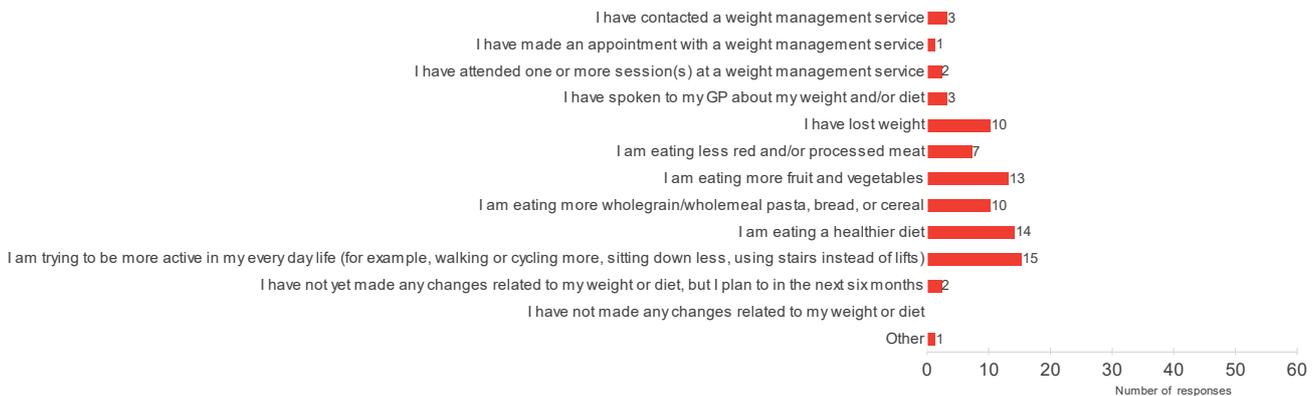


Figure 1: Changes made to weight and diet (number of responses)

Other changes related to weight and diet goal

If 'other', please state:

I am trying to eat less. Instead of fizzy pop I am drinking flavored water.

Physical Activity Goal

20 respondents had initially set a goal to increase their physical activity. 20 stated a response for the follow-up question and 17 had taken action (figure 2).

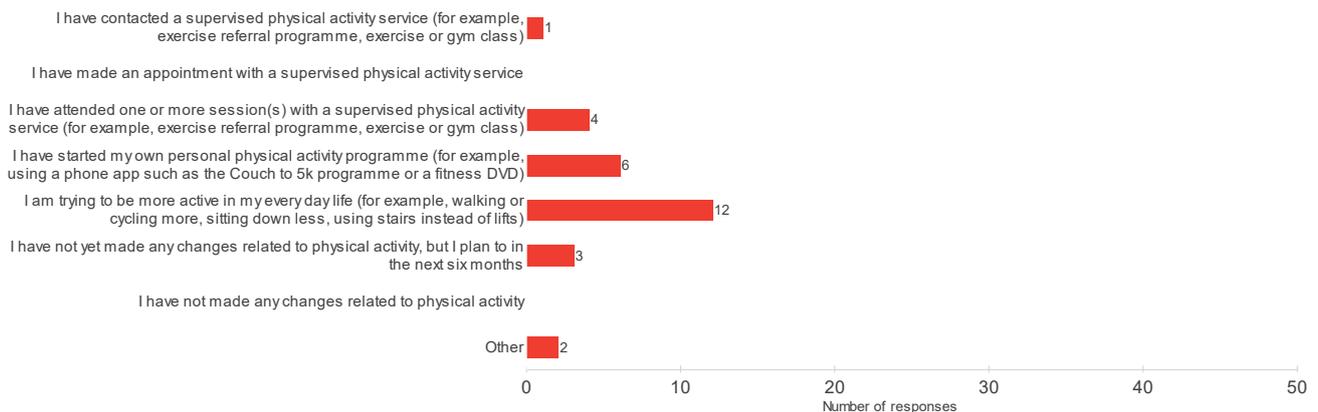


Figure 2: Changes made to physical activity (number of responses)

Other changes related to physical activity

If 'other', please state:

I have bought a work and ride bike

Alcohol Goals

6 respondents had initially set a goal to reduce their alcohol consumption. 6 stated a response for the follow-up question and 4 had taken action (figure 3).

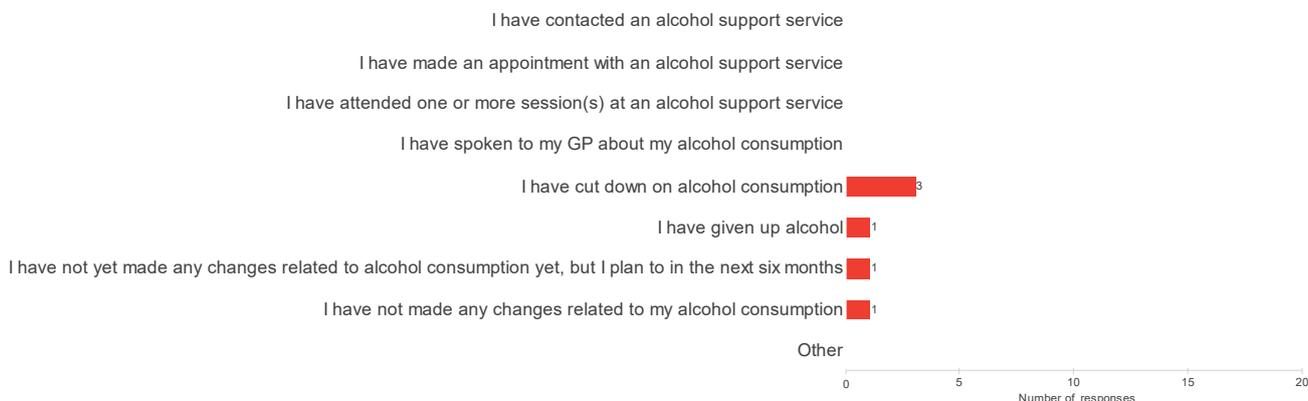


Figure 3: Changes made to alcohol consumption (number of responses)

Other changes related to alcohol goal

Tobacco Goals

11 respondents had initially set a goal to reduce their tobacco use. 11 stated a response for the follow-up question and 7 had taken action (figure 4).

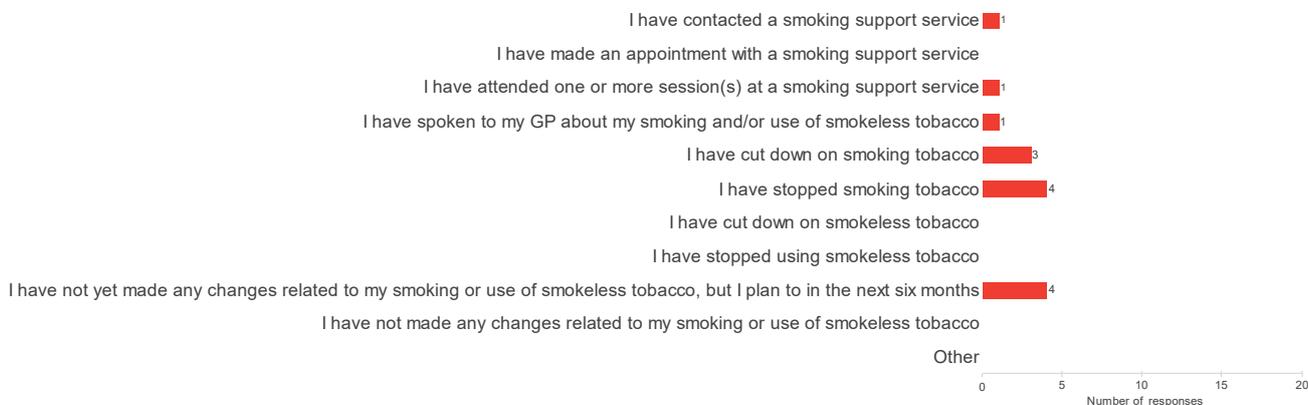


Figure 4: Changes made to tobacco use (number of responses)

Other changes related to tobacco goal

Other Goals

3 follow-up respondents had set goals outside of those provided (list 1). The changes made relating to these other goals are shown in list 2.

3 people had not initially set any lifestyle goals within the initiative but had since decided to set lifestyle goals on their own (list 3).

List 1: Other goals set at baseline.

1.	2.	3.
Reduce stress levels Quality sleep Try and have 7-8 hours of sleep a night		

List 2: Other changes made in relation to other goals set.

1.	2.	3.
I'm eating healthy and doing regular exercise to try to reduce my stress levels. Going to bed earlier. Having a aim to be in bed before 11pm, being more organised at home after work such as making lunch for the next day after having dinner therefore not making it at midnight Not going on my mobile i.e Internet, playing games at night. Keeping this to a minimum		

List 3: Goals set by themselves after completing the WUTC initiative

Have used a higher factor suncream when going on holiday. Walk more I have started walking more i eat heather

Effect of lifestyle changes

18 people said their lifestyle changes had affected the way they felt (list 4). 9 people perceived barriers to making their lifestyle changes (list 5).

List 4: Perceived effects as a result of making lifestyle changes

Have your recent lifestyle changes affected the way you feel at all? If so, in what way?
Not tired as much. Skin is more radiant. Yes. The way I feel making changes towards different ways of life. The way forward. Not thinking it doesn't matter. I have put on weight now I suffer breathlessness Feeling more positivity to continue and cut alcohol all together and thinking of starting exercise more, maybe join the gym or a sports team I feel healthier, but it's hard to answer as I'm currently poorly. I feel a little fitter and self confident When I eat wholegrain bread instead of white bread I feel less bloated. Feel good that I am doing something about it. Can breathe a lot better now I've stopped smoking and started exercising. Feeling fitter, healthier Not as tired The food and alcohol changes have been good and feel better in myself because of weight reduction. Feel better in myself. Yes I feel better in myself, I have lost a few kg and feel better In myself as my clothes for me better. I feel a bit energetic and less lethargic so able to do things I wouldn't do before I haven't reached my target yet so still want to keep on going!! Even though I can do less and my mobility has reduced which is stopping the weight from dropping I know I have made the little changes towards my personal goals but I have learnt that it is just going to take me longer than it would have done since becoming ill. But that this is ok, because I know that any changes mean my body internally is getting the right nutrients & what it needs, you have to put the best in, to get the best out. You look after your body & organs & your body will (eventually) be able to look after you. I feel more energised I feel hungrier from eating less but feel better that I am eating well More energetic and less tired, feel more positive

List 5: Perceived barriers to making intended lifestyle changes

Barriers to lifestyle changes
Unfortunately I had an operation on my nose in May and could not do all the activities I normally do eg walking at least twice a week, aerobics once a week and aqua zumba twice a week. Consequently I put a little weight on but now I am starting to exercise again I'm sure I will lose the weight I have put on.
Sciatica! Currently seeing a chiropractor I'm in too much pain to think about exercise
Motivation and work ie tiredness
Timing isn't right at the moment
Have a sub chondrial fracture awaiting a partial knee replacement so physical activity is difficult, however have done a little more walking than previously albeit a bit difficult
Laziness & lack of motivation. Don't feel at risk, nor am I overweight, so I guess knowing that I'm 'safe' is not pushing me enough.
Hospital still investigating weight loss, pain not under control yet, possible Lupus.
Day to day things that get in the way! But after my next holiday I'm determined to turn things around.
Consulted a doctor and been told I have IBS so I can't make some healthy changes yet until his is stable.

Discussing cancer signs and symptoms with GP

10 respondents had previously not spoken to their GP about their signs and symptoms potentially related to cancer - 6 had since spoken to their GP following Wise Up To Cancer (1 did not answer the question). Figure 5 shows the barriers people identified with as reasons for not speaking to their GP.

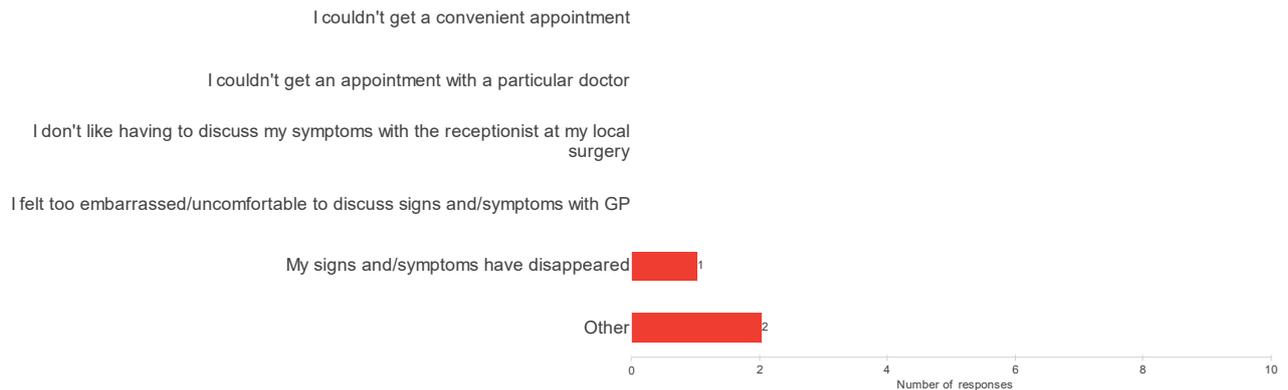


Figure 5: Barriers to speaking to GP about signs and symptoms of cancer (number of responses)

Other barriers to seeing a GP to discuss cancer signs and symptoms

If 'other' please state:
My signs & symptoms are not as severe or prominent as previously mentioned in the questionnaire so I'm seeing how I get on for now before contacting the GP
I don't remember mentioning a mole or freckle in the questionnaire before. I would definitely consult a doctor if I feel my moles/freckles changed or started to look different.

Cancer screening goals

6 female respondents had initially set a goal to complete their cervical cancer screening. 6 responded to the follow-up question and 4 had since taken action (figure 6).

1 respondents had initially set a goal to complete their bowel screening. 1 responded to the follow-up question and 1 had since taken action (figure 7).

1 female respondents had initially set a goal to complete their breast screening. 1 responded to the follow-up question and 1 had since taken action (figure 8).

4 respondents had initially set a goal to get a chest x-ray. 4 responded to the follow-up question and 3 had since taken action (figure 9).

3 people had experienced barriers associated with completing their screening goals (figure 10 and list 6). 1 people provided general comments relating to cancer screening (list 7).

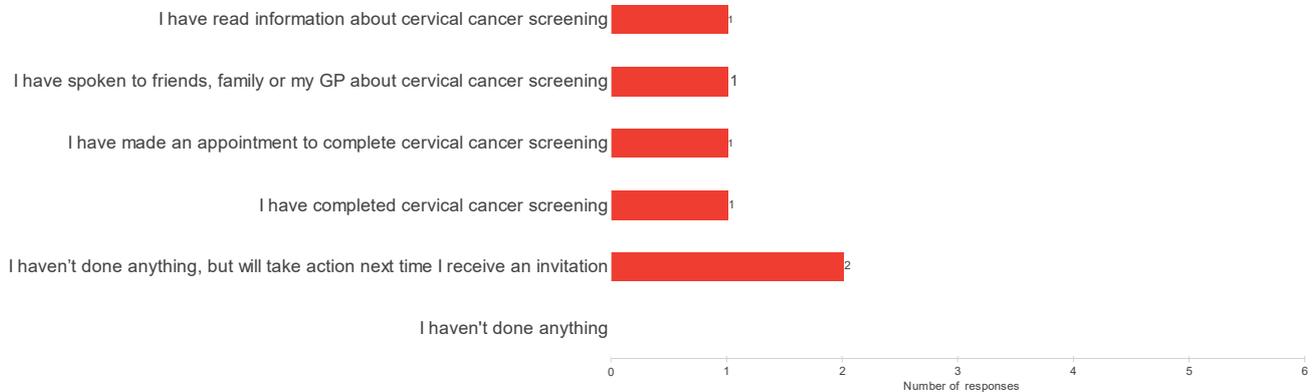


Figure 6: Actions taken for cervical screening (number of responses)

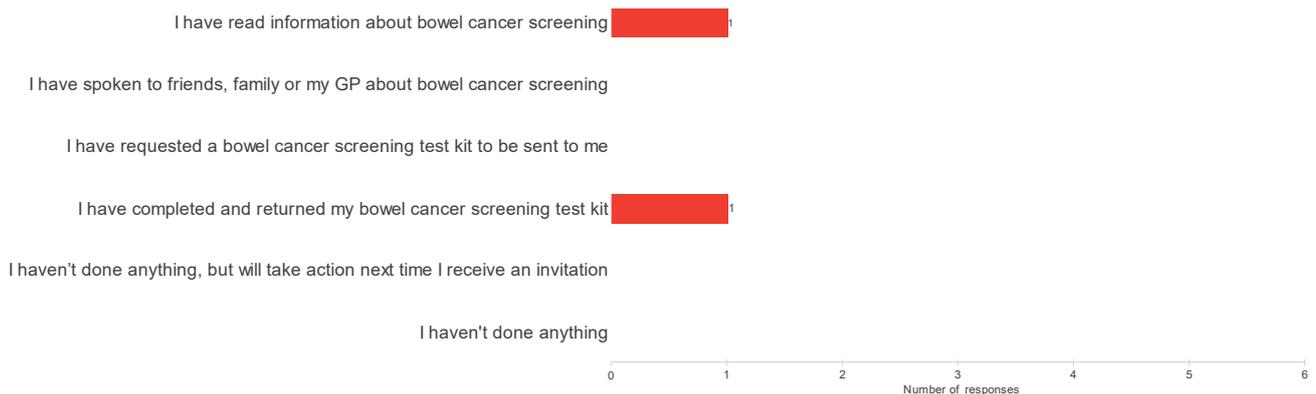


Figure 7: Actions taken for bowel screening (number of responses)

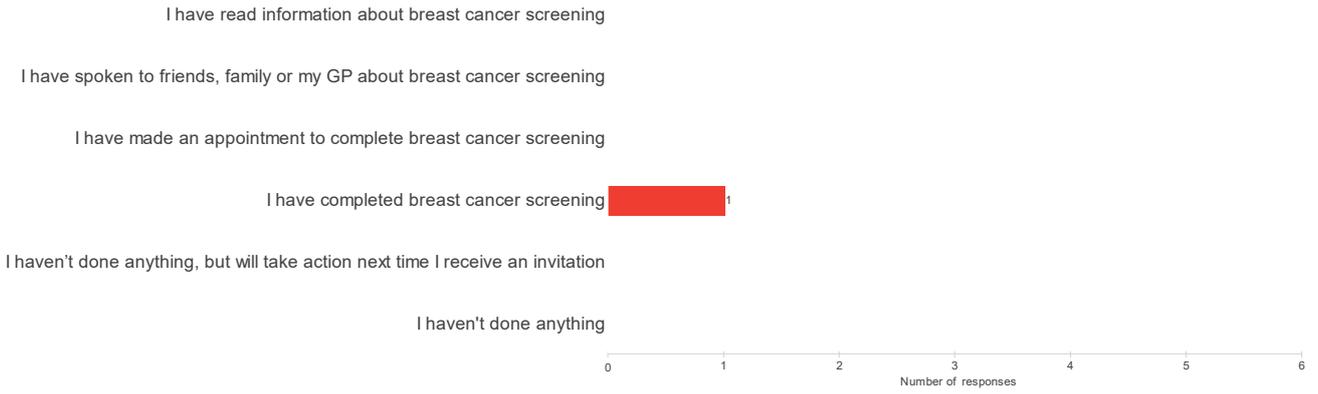


Figure 8: Actions taken for breast screening (number of responses)



Figure 9: Actions taken to receive a chest x-ray (number of responses)

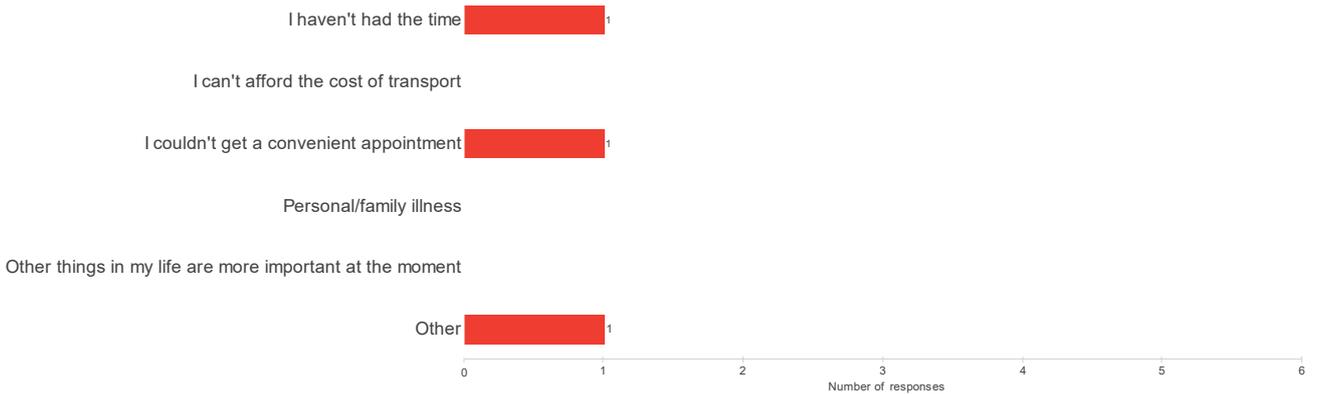


Figure 10: Perceived barriers to completing screening goals

List 6: Other perceived barriers to completing intended screening goals

If 'other', please state:
Because at the moment I feel fine

List 7: General comments around cancer screening

Other screening comments
I think all cancer screening is very important. I have had cameras down throat and for bowel but all was clear to my relief.

Programme feedback

27 people felt they had learnt something as a result of taking part in the Wise Up To Cancer programme (list 8).

List 8: Learning achieved through taking part in the programme

Learning achieved through WUTC
To see doctor about my symptoms
I think it is very important to know all you can about wise up to cancer. I lost my dad in 84 to lung cancer but I think that things have progressed a lot since then.
I am 70 years old and quite greedy. I am also diabetic. Therefore I bought the bike to ride in private and hopefully help me walk better. I want to lead an active life as long as possible and realise this is my responsibility. Sometimes I fail then I think what do I want for my future.
I have learnt that everyone should talk to someone if there has been any changes in or with our bodies. Aware to discuss any changes small or big.
Not a lot really as I have been doing a lot to help myself e.g. diet and exercise and research. As my husband has had a malignant melanoma removed from his neck I have learned how to protect myself from the sun.
Been made more aware of the things to look for in earlier detection of cancer.
Take more notice of what I eat
Be more aware of red flag symptoms
Attend screening
There are more symptoms to look out for with cancer than I thought.
I already knew about cancer and possible symptoms as my Mum has had cancers over the last 9 years and I am under surveillance for bowel cancer, but this e-mail has reminded me to persue my alternative lifestyle.
To keep up with the healthy eating and lifestyle choices to help me through the stress.
To be more health aware and not take good health for granted.
That if I feel that anything is wrong to contact my GP straight away.
Quite a few signs to look out for and help available for stopping smoking
More awareness of diet and exercise
More aware of the signs and symptoms of cancer
Try to eat a balanced diet, increasing calories healthily. To be aware of changes such as unususal lumps.
Look after yourself
Healthier lifestyle means a better life
There are many overlapping symptoms of many conditions that are also symptoms of the various cancers and you are often sent away from appointments with pills/meds to treat other diagnosis's with cancer never crossing your mind but if our symptoms continue, we tend not to go back and accept the previous diagnosis but I will go back to gp/nurse prescriber if I ever have persistent symptoms that don't change after first diagnosis & treatment tried over a period of time, as any type of cancer is never tested for upon first presentation with symptoms, unless it's a cancer savy healthcare professional or symptoms are 'nailed on' cancer specific.
Signs and symptoms that I otherwise wasn't aware of
I learnt some signs and symptoms I did not know of.
to check every month
To be more aware of my body and what is happening to it. It is because of unusual bowel activity that I consulted a doctor since this questionnaire. This appears to be IBS.
More aware of things I can do to reduce my risk
That looking after your self better helps

Topics covered

Rating of topics covered is shown in figure 11 - 38 people responded to this question. Comments are shown in list 9.

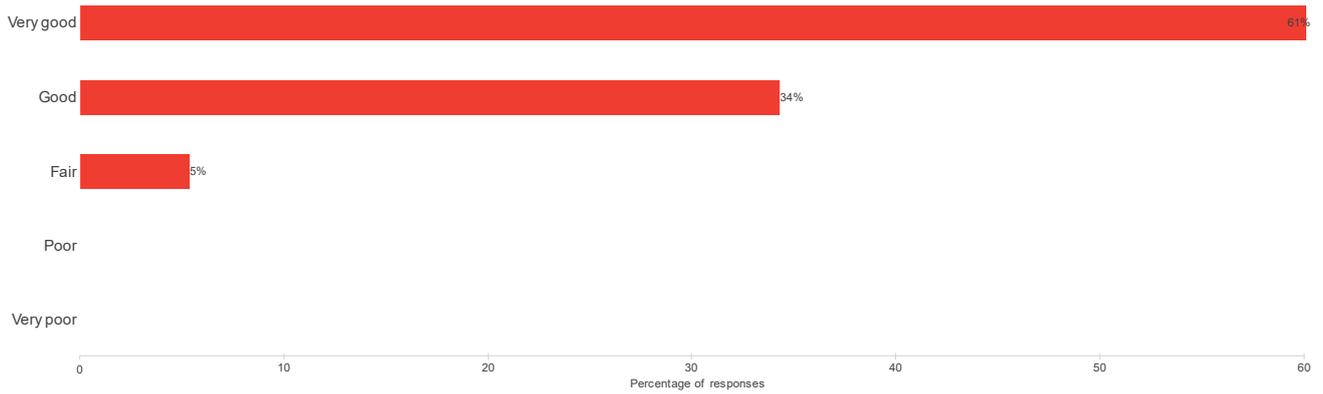


Figure 11: Rating of topics covered

List 9: Comments relating to topics covered

Topics covered
<p>It covered many areas and was informative</p> <p>Very good wide range of topics covered & very helpful although I do feel some of the norm 'generic' areas covered on health questionnaires (alcohol consumption, weight, bmi etc) but understandably basic information is generally required to carry out surveys. Please look into adding some of the rarer cancers & signs/symptoms into your surveys/questionnaires to bring up awareness levels of these to the public.</p>

Advice and support given

Rating of advice and support given is shown in figure 12 - 38 people responded to this question. Comments are shown in list 10.

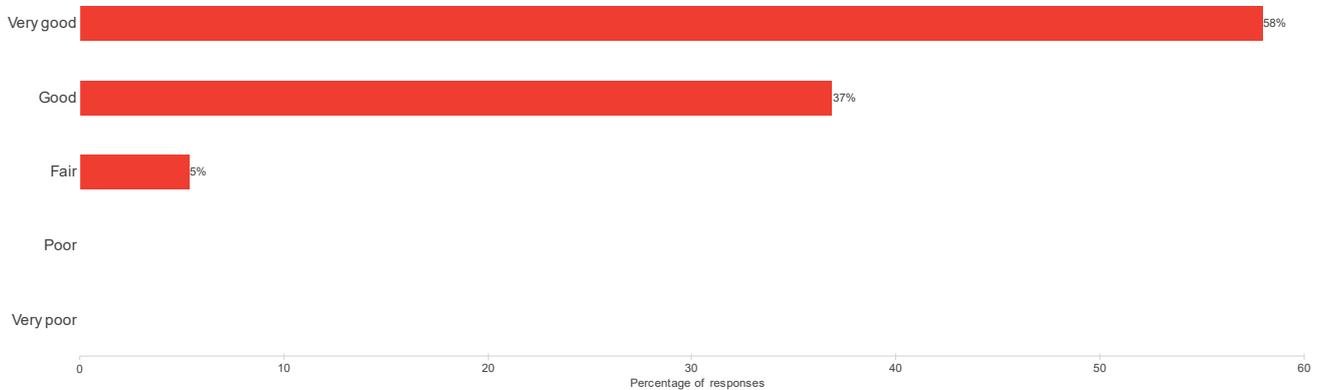


Figure 12: Rating of advice and support given

List 10: Comments relating to advice and support given

Advice and support given
<p>Good</p> <p>Sue was very thorough and advised of groups of drugs that could be helpful</p> <p>Lovely member of staff, not judgmental in any way. Lots of advice given & explained a lot as well as where I can get further advice & support if required.</p>

Leaflets provided

Rating of leaflets provided is shown in figure 13 - 37 people responded to the question. Comments on this are shown in list 11.

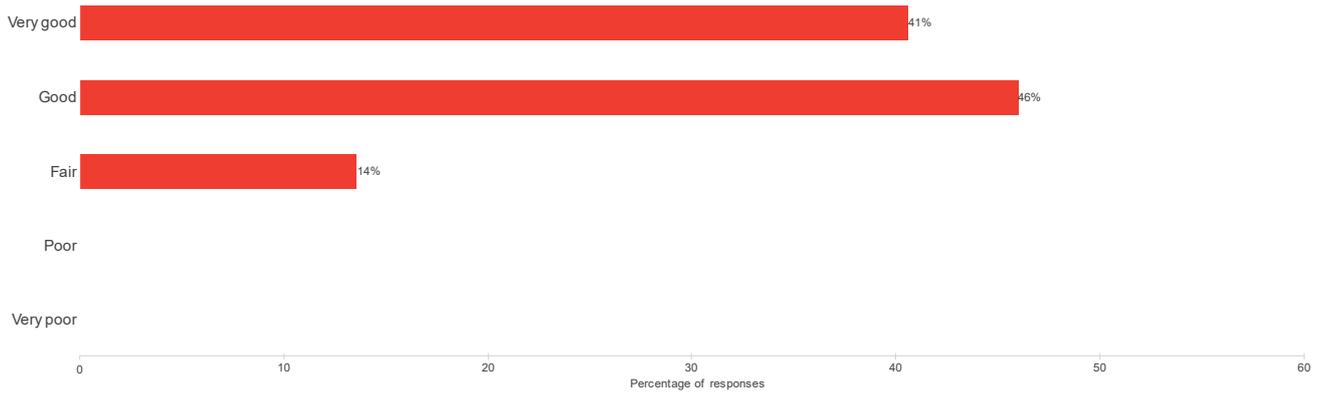


Figure 13: Rating of leaflets given

List 11: Comments relating to leaflets given

Leaflets given
I think I took the leaflets myself. They were readily available.
Not all available but good range given & told where to get more information & where to get information on the leaflets unavailable at the time

Length of time taken

Rating of length of time taken is shown in figure 14 - 37 people responded to the question. Comments on this are shown in list 12.

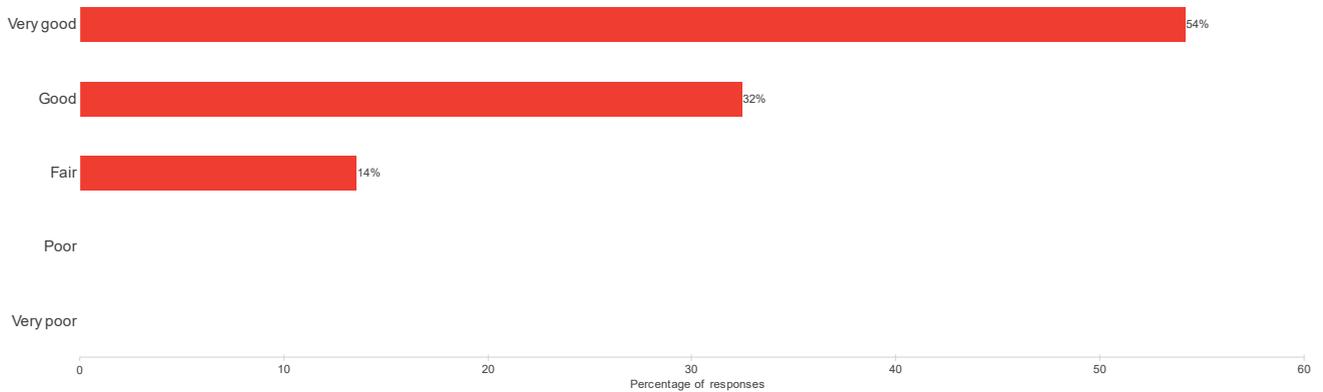


Figure 14: Rating of time taken

List 12: Comments relating to length of time taken

Length of time given
Allright
Pharmacy assistant Mary Wilson was very thorough and helpful. She was very understanding and gave good advice.
About 20 minutes, but they will speak to you at any time
Nice & appropriate for pharmacy customers. They are at a pharmacy for a reason so don't want to be there a long time. Quick so doesn't affect poorly people but long enough to get a lot of information covered.

Venue

Rating of venue is shown in figure 15 - 35 people responded to the question. Comments on this are shown in list 13.

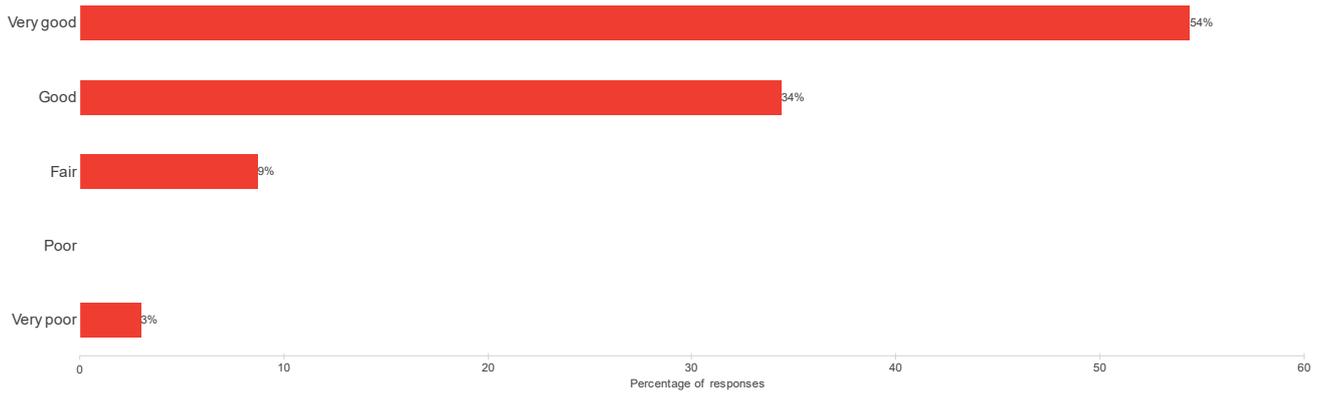


Figure 15: Rating of venue

List 13: Comments relating to venue

Venue
Would be good to have a venue for families
Lovely
Nice & private but not a hassle for anyone to get to (no long walk etc) with pain or illness when not feeling good

Other feedback

List 14 shows general comments received about the programme.

26 people had completed an action relating to YCR following participation in the programme (figure 16)

List 14: General comments received about the programme

Any other comments on WUTC
We don't always realise how lucky we are to be healthy. We don't think illness will affect us. However if we really think about life it is mainly our responsibility to 'Wise Up To Cancer' and other illnesses.
My changing wasn't directly to do with this but of things that were happening in my family
Get doctors involved
It is a good campaign to make people more aware of symptoms.
Very good
More people/GPs telling patients about the symptoms of cancer. More GPs need to be aware of the symptoms of cancer.
I find I get anxious about reading about cancer, but know early detection is positive.
The information is is very helpful and if we can get the message out there it will help more people to learn and understand that prevention is key!
It is for a worthwhile cause, maybe one day there will be a cure.
Keep going with the research, questionnaires & surveys including wide range of cancers as a lot in aware of common symptoms as well as the 'nailed on cancer symptoms' spreading awareness that so many are in need of these days. It ends up being too late for a lot, purely due to lack of awareness of cancers & the symptoms...

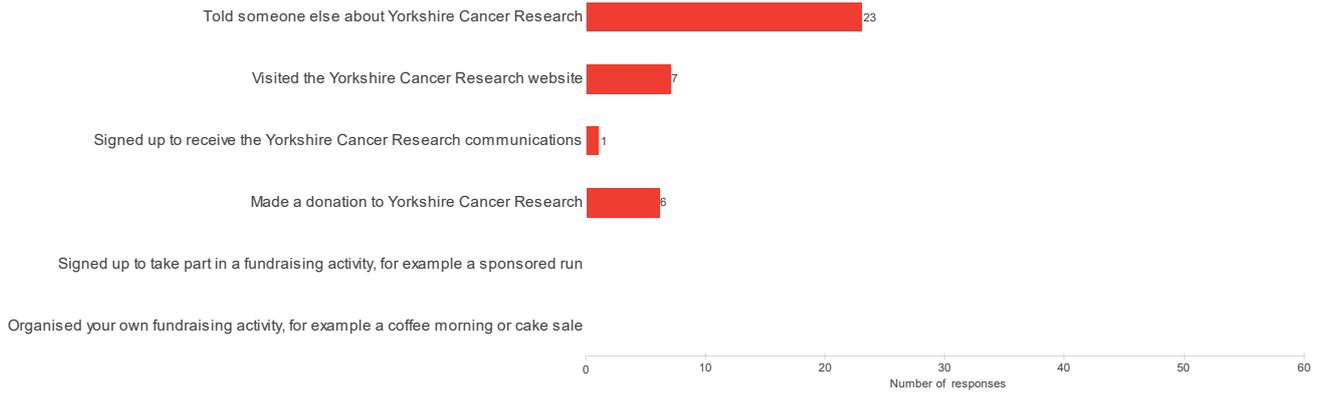


Figure 16: Actions taken relating to YCR since participating in WUTC

Appendix 9: General guidelines for working with men

From: *The State of Men's Health in Leeds: Main Report* (Alan White, Amanda Seims and Robert Newton, 2016).

There are a number of practical suggestions on working with men that have emerged from the study and from the literature. These should be seen in conjunction with the overall study recommendations as guidelines on how initiatives should be set up and run.

Hearing the voices of the men

Planning successful initiatives requires listening to the men and involving them in the planning process (Carroll *et al.*, 2014). Gaining access to the right target group can best be achieved through the local third sector and voluntary organisations already working with the men. The Joint Health and Wellbeing Strategy for Leeds has as one of its five outcomes that 'People will be involved in decisions about them'; this has to extend to men.

Similarly, the 2015 URBACT project report (Newton *et al.*, 2015) promotes the use of community involvement, where service users are active participants as opposed to passive consumers of health. The URBACT report suggests that individuals and professionals should work together to design public services and that engaging communities can directly address social exclusion and health inequalities. In order to improve the health and wellbeing of boys and men, they must be engaged in this process to ensure services are meeting their needs which may be different from women's.

Social focused events with a purpose

The suggestion from much of the work on men's health is that getting men of all ages engaged in organised events delivered in local settings such as the Sheds, Walking Football, Walking Groups, FFIT and Premier League Health can give far more benefit than single focused groups. One of the most important facilitators for change is that the men can enjoy the initiative and start to form new friends. A key factor in getting men into new settings is that it creates a new social network with men who are also trying to change their lifestyles. This breaks the cycle of poor health behaviour and allows the individual time to adjust to new health behaviours (Robertson *et al.*, 2013). With increases in social networks and greater social capital men see improvement in their self-esteem, self-worth, and a general improvement in physical and emotional health alongside a general reduction in smoking, alcohol intake, and improvements in weight, and levels of physical activity.

Non-clinical, without a heavy 'health' focus

A further feature of the mass appeal interventions such as Premier League Health, The Sheds movement etc., were that they were non-clinical and most of the important health messaging was done in an informal brief therapy manner. It is also important that the men don't feel they are being 'told-off' or stigmatised by the health profession. As in the Harland study, many young men already feel that they are seen as the problem and are reluctant to engage with initiatives where they feel they will be blamed or ridiculed (Harland, 2009b). The current focus on BMI as the measure of ideal weight is another area of contention for men, with the metric discredited by stories of sportsmen having high BMI levels and yet clearly not being fat (Monaghan 2007; Johnson *et al.*, 2014). The use of the tape measure around the abdomen is an acceptable tool for identifying overweight and for men who have a higher propensity for abdominal visceral fat, success can be more clearly seen (NICE, 2015). One of the key findings from the Robertson, *et al* (2015) review was that avoidance of the word 'health' is a great asset in getting men involved in [health] initiatives.

Running a campaign

Campaigns can be global, but are more effective when focused onto the target group and designed using social marketing techniques. Robinson & Robertson (2010) warn that marketing has to be thought through carefully so that it doesn't reinforce negative stereotypes of men. It is possible to get men's attention without resorting to imagery or text that panders to the male hegemonic stereotype. A study conducted at the Centre for Men's Health at Leeds Beckett for the Men's Health Forum (Robinson & Robertson, 2013) explored the appropriate approach for reaching out to young men (aged 16–21), new fathers (25–45), middle-aged men (40–55), and older men (60+). Each group were seen to want a different style of messaging.

Getting the message right is important, with the men appreciating an approach focused on informing them of the problem and the solution, rather than words indicating failure. Using terms such as 'help-lines' and 'support' are less likely to engage the male audience, and giving advice is also not likely to be successful. Giving men enough information from a trusted source with an engaging content to enable them to make their own decision is what they would prefer, with each group having a different perspective on what they needed:

- Young men - More likely to enquire than seek solutions. More embarrassed talking about health/less likely to seek support
- New dads - Own health often loses out to other more immediate family pressures. Asking about health and seeking solutions
- Middle-aged men - Health more of a priority – starting to impact on day-to-day life. Enquiring and also more solution-focused than younger males
- Older men - More often dealing with health in an ongoing way. Seeking solutions/advice, for example concerning self-care. More likely to seek information alongside personal support (Robinson & Robertson, 2013)

At the height of the AIDS epidemic the government funded The Terrence Higgins Trust to help get the message across to the gay community as they launched their hard hitting 'tombstone' campaign. Working in collaboration with the charity they got the right message, to the right people, in the right way¹.

Taking an asset based approach

There are many excellent examples of outreach work with men within the city that can be built on, with the opportunity for existing best practice to be developed and their success shared with others. Greater use of peer mentorship and engaging Community Champions can offer access into local communities others would find hard to achieve to offer localised personal guidance (South, 2015).

The 'power of the badge' was a major attraction in the Premier League Health initiative and a similar effect of having The Rhinos, Leeds United etc., working to support the local community is huge.

Working in partnership

Credibility is an important factor for men's engagement in campaigns, with trust in the provider of high importance. Charitable and voluntary sector organisations working in collaboration with statutory services can bring the benefits of local knowledge and willing support alongside more mainstream provision. Such relationships can also facilitate referral onto the appropriate services. The Leeds Patient Empowerment Project is a good example of where individuals can be directed onto community provision with the benefit of having a GP referral to give the service credence and credibility.

¹ <http://www.tht.org.uk/our-charity/Our-work/Our-history/1980s>

Settings based approaches

An emerging feature of the initiatives that have tried to target hard to reach men are the use of alternative settings. These settings have included workplace, sporting stadia, community facilities, places of worship and educational establishments. Qualitative interviewing of men (Carroll *et al.*, 2014; Robertson, Zwolinsky, Pringle *et al.*, 2013; White *et al.*, 2008; Pringle *et al.*, 2013) who have used these settings have tended to identify the following factors:

- Convenience
- Ease of access
- Creating a 'Comfort Zone'
- Safe and supportive
- Involve a shared experience
- Involve their peers and include a degree of homogeneity and group safety
- Usually are organised at times when working men can attend

Street clinics can also be an effective way of reaching men who are not likely to want to attend health centres.

The use of sporting settings in conducting public health initiatives has been the focus of a book due to be published in December 2015 (Conrad & White, 2015).

Use of eHealth and mHealth

The use of smartphone apps and internet health initiatives are gaining in popularity, with a myriad of services and applications now available that are targeting men's health. The Man MOT, being run by the Men's Health Forum has been adopted (and tailored) by Haringey council² for their male population. 'Man Therapy'³ is a successful Australian website for men's health, where two fictional characters (a doctor and a straight-talking tradesman) use humour and honest discussion to guide men through the interactive toolkit designed to provide men with strategies to improve wellbeing and mental health. The Irish Men's Health Forum have developed the 'Work Out' online app⁴, designed to promote mental health and encourage help seeking in men. In Leeds there is a big push to have a robust mHealth⁵ People Driven Digital Health and Wellbeing⁶ agenda across the city (Newton *et al.*, 2015) and efforts should be made to ensure that local at-risk men are considered within the design and implementation of this strategy.

Continuity of the service

It is often the case that men are enrolled onto a short term programme and they do not want to leave once it has completed. For the Fit Fans weight loss group in Hull this necessitated introducing a follow-on activity-based intervention for the men to continue to meet (nsmc, 2010). The Premier League Health initiative evaluation found that many of the groups that were formed on a short-term basis were ineffectual until they were made open-ended; this allowed lads who lead more chaotic lives to join in and still feel welcome (White *et al.*, 2012). Considering the longer term needs of the men at the start of the initiative will help ensure a smoother transition and also better recruitment.

² <https://www.menshealthforum.org.uk/haringey>

³ www.mantherapy.org.au

⁴ <http://www.workoutapp.ie/>

⁵ <http://mhealthhabitat.co.uk/>

⁶ http://mhealthhabitat.co.uk/wp-content/uploads/2015/06/M-Habit-P_AW.pdf

Word of mouth support has been identified in a number of studies as the main way of getting men engaged due to anxieties over what other people may think of participation (White *et al.*, 2008; Pringle & Hickey 2010; Kierans *et al.*, 2007). This can result in men's services taking a long time to get established. To help with this process, it is important to mainstream services as soon as possible to promote stability and longevity in a service.

Use of humour

Joking, ribald comments, and laughter are a common feature of most men's health initiatives (Williams 2009; Morgan *et al.*, 2011). It is an area that is getting more attention but is still under-researched. In interviews and through participant observation studies, having fun and being able to laugh about their situation emerges as a way of bringing men into initiatives and allows them the enjoyment to stay and become part of the group (Robertson, Zwolinsky, Pringle *et al.*, 2013; Oliffe *et al.*, 2009). It is also a way for men to manage the process of forming new relationships with other men; for some men there is a need to be competitive and to find a place for themselves within the new environment, and humour is a way of displaying who they are and that they want to become a member. There is also a therapeutic angle to humour, with men in difficult situations using humour as a way of displacing their anxieties (Branney *et al.*, 2014; Smith *et al.*, 2008; Oliffe *et al.*, 2009).

Interventions that are male-only tend to have more joking than in mixed-sex groups, and interviews with leaders of groups have found that they need to be able to manage the humour and to see past the behaviour of the lads to enable successful engagement. Men can use joking as a way of testing out those running the sessions to see if they can be trusted and a way of managing power differentials. It is also important to note that humour can be both positive and negative, with a dark side that can be homophobic, sexist and unpleasant (McCann *et al.*, 2010; Kehily & Nayak 1997; Williams 2009). Oliffe *et al.*, (2009) notes that humour has to be monitored as it can be damaging to some group members and a way of excluding some from the initiative.

Gender of the facilitator

The gender of the facilitator when working with men has been explored as a factor, with the consensus of opinion being that gender is rarely an issue as long as the individual is engaged and can create a safe and supportive space for the men, though this is not fully researched. Although Ashton *et al.*, (2014) found most interventions aimed at young men's sexual health were delivered by men, there are many examples of where women have initiated and successfully delivered what could be classed as very sensitive interventions, such as work with perpetrators (Dominey, 2005) and community outreach (Davis, 2007; Deville-Almond, 2009).

Getting the new initiatives evaluated

So many good ideas are lost by the lack of evidence base of their acceptability and effectiveness. To address this waste, it is important that robust audit and evaluation are factored into the planning process and funding set aside to ensure studies generate valid and reliable results.

Developing training programmes for staff

Few practitioners (including teachers, medical students, nursing students, social workers etc.) have had any consideration of male socialisation or discussions as to how to work effectively with men as part of their pre-registration education. Many service workers are similarly not aware of how best to engage with male participants, an example could include Housing Associations enhancing the training of their staff to recognise men at risk. Training programmes can assist in raising awareness of men's needs and how to manage initiatives to good effect (Giorgianni *et al.*, 2013).