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Wise Up To Cancer - can it make a difference? Executive Summary

Aims

Wise Up To Cancer (WUTC) is a Community Health Initiative funded by Yorkshire Cancer Research, with the intention to assess whether this type of initiative could contribute to the charity's regional strategy of improving cancer outcomes and its 10-year goal of achieving 2,000 fewer deaths from cancer every year by 2025. The initiative set out the following aims:

Primary aims

- A decrease in behaviours associated with cancer risk (e.g. smoking/obesity/inactivity).
- An increase in awareness of cancer signs and symptoms.
- An increase in the number of people taking part in the national screening programmes.
- An increase in signposting to other services (GP/smoking cessation/weight management programme/other services available).

Secondary aim

- Increase awareness of Yorkshire Cancer Research.

Reach and settings

WUTC set a target to reach 2,000 people. The principal audience was people eligible for the cervical, breast and bowel national screening programmes, plus those who smoked or were overweight. WUTC was delivered in West Leeds community settings (by Barca Leeds) and in Wakefield district pharmacies (recruited and coordinated by Community Pharmacy West Yorkshire) in areas with high levels of deprivation, low screening uptake and high levels of smoking/obesity.

At November 2017, when evaluation data collection ended, 1,347 people had completed WUTC (736 in community settings and 611 in pharmacies). WUTC was successful in reaching the target demographics.

The intervention

The WUTC assessment covered lifestyle risk factors, knowledge/experience of any cancer signs and symptoms and relevant cancer screening programmes. People were given relevant information, signposted to health promoting activities/services and encouraged to commit to personal health improving goals. WUTC was delivered by Community Health Educators in community settings and Champions in pharmacies.

The evaluation

A questionnaire was used to guide the WUTC conversation and collect baseline data. Consenting participants received a follow-up questionnaire six to eight weeks later to assess progress towards their goals. Interviews/focus groups with service users and stakeholders were held to ascertain opinions of WUTC.

At November 2017, 168 participants completed the follow-up (22% response rate from the 763 sent a follow-up).

Measuring success

See table on page two.

Opinions of WUTC

Qualitative feedback shows that members of the public, many from deprived communities or living 'unhealthy' lives, are very receptive to WUTC. Often motivated to take part by friends' or family's experience of cancer, they welcome the opportunity to learn more about how to prevent the condition, and are willing to make commitments to change key behaviours. The approach was almost universally praised, in particular the friendly, approachable manner of those delivering, the structured format and the useful personalised content. Both settings piloted yielded positive results – being in 'the community' and outside of primary healthcare was important.

Key success factors

Success factors identified are:

- The use of lay people to deliver - their approachable, friendly manner, empathy and knowledge.
- The settings - going to people in the community or in the pharmacies they visit.
- The delivery organisations being embedded in their communities.
- Enthusiastic, committed management.
- A comprehensive and on-going training package.
- Well-presented resources providing the right amount of information.
- The format of WUTC – being relatively concise, tailored and with efficient personalised follow-ups.

Table 1: Measuring success

Aim	Achieved?	Additional supporting information
Decrease in behaviours associated with cancer risk	Yes	<p>At baseline, most people set goals:</p> <ul style="list-style-type: none"> 70% set one or more lifestyle goals. 52% set a weight/diet goal and 31% an activity goal. 10% of alcohol consumers and 49% of smokers set a goal to cut down or quit. <p>Of those who completed follow-up, a majority reported progress:</p> <ul style="list-style-type: none"> 91% who set a weight/diet goal and 86% who set an activity goal made progress. 75% who set an alcohol goal and 72% who set a smoking goal made progress.
Increase in awareness of cancer signs and symptoms	Yes	<p>At baseline 80% said they had <i>“learnt something new about cancer signs and symptoms”</i>. Awareness was not measured at follow-up.</p>
Increase in people taking part in the national screening programmes	Partly	<p>At baseline, a good proportion of non-attenders set a screening goal, however, low overall numbers of non-attenders took part:</p> <ul style="list-style-type: none"> 307 non-attenders were identified and 190 goals were set. The percentage of non-attenders who set a screening goal was; 52% for cervical, 60% for breast, 53% for bowel. <p>Of those who completed follow-up:</p> <ul style="list-style-type: none"> The percentage of those who set a screening goal and had taken some positive action was; 70% for cervical, 50% for breast, 66% for bowel. The number of people who had taken up screening was 2 for cervical, 1 for breast, 2 for bowel.
Increase in signposting to other services	Yes	<ul style="list-style-type: none"> At baseline, over half of people who set a goal were signposted to other services; 43% of those who set a weight management goal, 49% of those who set an activity goal, 30% of those who set an alcohol goal and 71% of those who set a smoking goal. At baseline, 27% had a sign and symptom of cancer but had not seen a GP. Over half of these were signposted to their GP and at follow-up, a third of these had attended.
Increased awareness of Yorkshire Cancer Research	Yes	<p>40% of participants had not heard of Yorkshire Cancer Research before WUTC. 91% would recommend WUTC to friends/family and felt positive about Yorkshire Cancer Research funding the project.</p>

Note: progress was self-reported and subject to possible response bias. Long-term impact is uncertain.

Next steps for Yorkshire Cancer Research

The initiative was successful in three of the key aims identified but was less successful in targeting non-attenders of screening. Future similar initiatives could incorporate GP targeting of screening non-attenders and referral of these into WUTC. See full final report for recommendations from the evaluation.

Conducted by Health Together, Leeds Beckett University, February 2018

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A full report of the Wise Up To Cancer evaluation is available