

# Breast screening in Thurrock social marketing insight project

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# Objectives

- Understand attitudes to breast screening and related behaviours (drivers, barriers)
- Develop messages and information to influence each group
- Identify the most effective communications channels to reach them
- Pinpoint strengths and gaps in the health system

**Stoke-on-Trent social media campaign: screening +12.5% 2014-18**

**Lancashire & South Cumbria #bescreened campaign: screening + 3-27%**  
(posters, banners, wallet cards, postcards, video in GP surgeries, hairdressers, clothing store changing rooms; stands in supermarkets; garden display at flower show; abseil in the park; pink Christmas tree and meetings with WI, BME groups & larger employers)

# National context

- New advisory body and capital funding
- Increased use of IT
- New workforce models and AI
- Improved population and targeting analysis
- Increased screening uptake through:
  - Text reminders
  - Social media
  - Phoning non-attenders
  - More appointment choice (location, timing)

All-party parliamentary report (Feb 2018) called for targeted interventions at different population groups and excluded populations

# Local context

- Breast cancer one of most prevalent cancers in Thurrock
- Increasing population
- Mortality from preventable cancer worse than England & East England
- Thurrock breast screening uptake 64.3% vs England @ 70.5%

## Excluded populations?

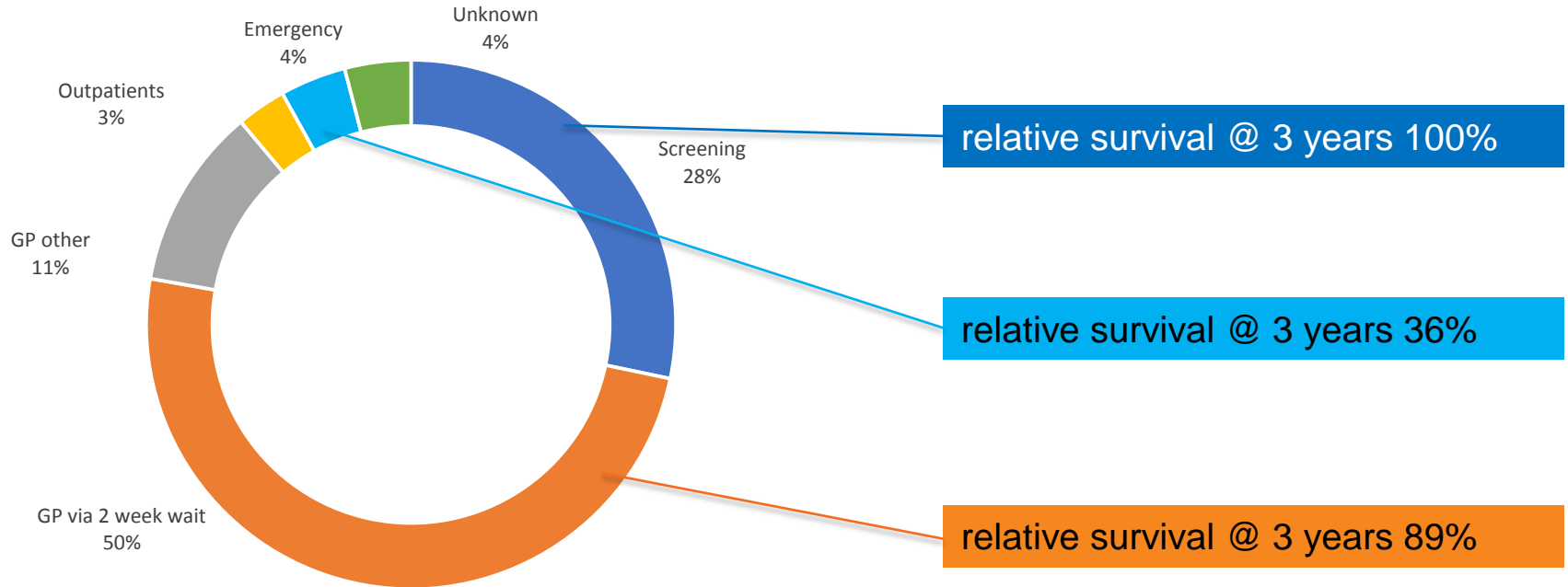
- Urban and deprived communities
- BAME esp South Asian and Black African (knowledge, language barriers, inaccurate screening registers, extended visits to Indian sub-continent; lack of referral/recommendation by health professionals)
- Women with a disability (self-care, vision)
- Women with a learning disability (understanding, embarrassment, fear)
- LGBT communities (not screening, but accessing GP)

*“It is all about excluded populations who do not use services, who do not utilise screening and that is the one that will make the quantum change to outcomes: you change access and you change outcomes.”*

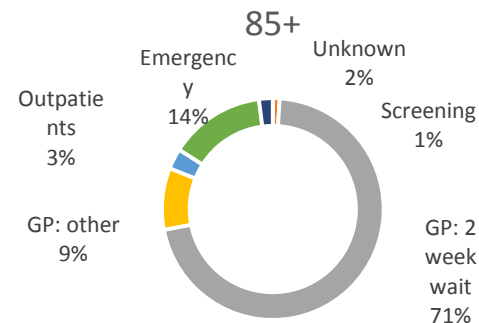
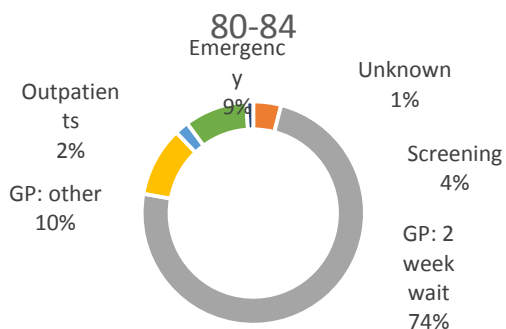
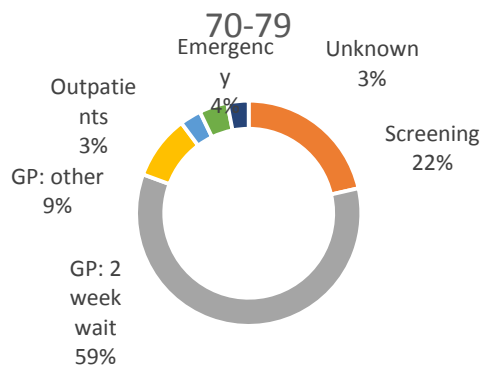
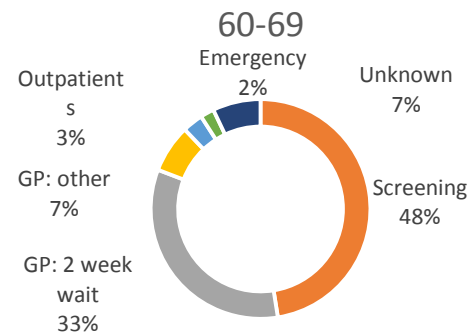
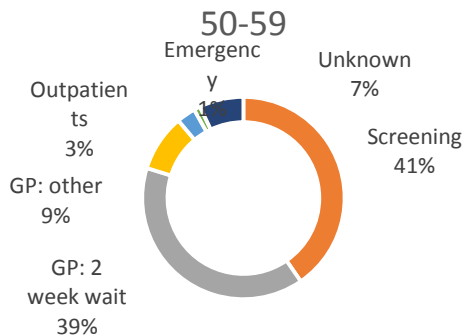
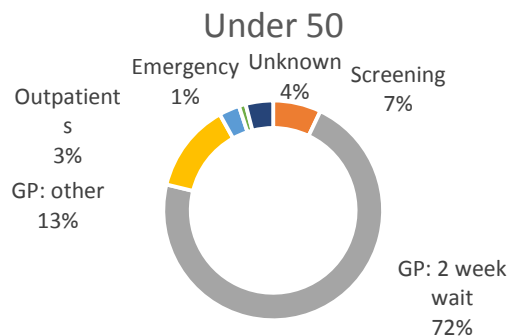
Dr Rory Harvey, Chair, East of England  
Cancer Alliance

# Why screening?

Diagnosis methods 2006-2016 (NCIN)



# Age is really important: diagnosis



# Methodology

SEGMENT	SOURCE OF PARTICIPANTS	RECRUITMENT METHOD	EST VOLUME	VOLUME FREQUENCY	TIMING
Women who don't respond to the first invitation	Breast Screening Programme	Postcard inserted in second invitation mailing (6 weeks) with incentive	227	Monthly	Jan 2020
Women diagnosed via GP (survived)	Thurrock GPs with lowest uptake (12)	Personalising mailing from GP surgery with incentive	40	Last 3 years	Dec 2019- Jan 2020
Women who don't respond to the second invitation	Thurrock target GPs (12)	Personalising mailing from GP surgery with incentive	1450	Annual	Ditto above.
Women who have missed breast screening from specific segments	Community groups including cancer charities	Digital promotion and incentive	Inc above		Dec 2019- Jan 2020



# Outputs

- 100 e-surveys completed
- 40 women go on to a telephone interview (opted in via survey or direct in response to GP mailing)
- Insight report delivered end Feb 2020
- Findings to be delivered by Thurrock Public Health to GPs in Time to Learn sessions and also to Essex and Southend counterparts

# Topics

- Attitude to health
- Health behaviours – alcohol consumption, weight, exercise
- Reasons for not attending screening so far
- Intention to screen this time
- Family history of cancer
- Perceived risk of breast cancer
- Awareness of symptoms
- Frequency of performing own breast checks
- Confidence in performing own breast checks
- Knowledge around breast screening
- Key messages to drive screening attendance
- Preferred media
- Demographics
- Locality (to compare with deprivation indices)
- Opt-in to a phone interview

# Spreading the word



- Thurrock Council, CCG, Breast Units (Southend and Basildon)
- Breast Cancer Now & Breast Cancer Support
- Macmillan and Cancer Research
- Healthwatch & Thurrock CVS
- Community groups

# Thoughts?