Cancer Awareness Measure (CAM)

**NHS Eastern and Coastal** 





Explain 48 Leazes Park Road Newcastle upon Tyne NET 4PG









## **Executive Summary**

#### **Background**

- Kent and Medway Cancer Network (KMCN) commissioned Explain to carry out on-street interviews
  within three PCT areas; NHS Medway, NHS West Kent and NHS Eastern and Coastal Kent in March
  2010, to better understand the level of public knowledge of cancer signs and symptoms and to help
  them plan interventions and campaigns to raise awareness of risk factors
- The following report details the findings from the 1,161 interviews carried out in Eastern and Coastal Kent

#### Awareness of cancer signs and symptoms

- UNPROMPTED, the key warning signs and symptoms of cancer were lump or swelling (63%), bleeding (20%), weight loss (20%) and pain (18%)
- When PROMPTED, the key warning signs and symptoms of cancer were unexplained lump or swelling (96%), change in the appearance of a mole (95%), persistent change in bowel or bladder habits (88%) and unexplained bleeding (85%)

#### Seeking help for cancer symptoms

- The majority of respondents would contact their doctor to make an appointment within one week if they developed 7 of the 9 symptoms listed. 82% of respondents stated that they would make an appointment within one week in they had unexplained bleeding, 81% if they had difficulty swallowing and 77% if they noticed an unexplained lump or swelling
- 74% of respondents stated that if they had a symptom that they thought might be cancer they would contact their doctor to make an appointment within 1 week to discuss it. Of these respondents, 38% stated that they would contact within 1-3 days

#### **Barriers to seeking help**

• The main barriers to going to visit a doctor were, difficult to make an appointment, worried about what the doctor might find, embarrassed and scared

#### **Awareness of risk factors**

- UNPROMPTED, respondents thought smoking (74%) was the main thing that affects a person's chance of getting cancer. Drinking alcohol (38%) and diet (28%) were noted by over a quarter of the sample. Getting sunburnt/exposure to the sun (16%), family history/close relative with cancer (14%) and genes/genetics (11%) were also mentioned a number of times
- When PROMPTED, smoking any cigarettes at all, exposure to another person's cigarette smoke, getting sunburnt more than once as a child and having a close relative with cancer achieved the highest agreement in terms of increasing the chance of getting cancer

#### **Awareness of cancer incidence**

• Between 30-36 people out of 100 will develop cancer at some point in their life, 28% of the sample were aware of this.

#### **Most common cancers**

- Respondents thought the most common cancer in women was breast followed by cervical and lung
- Respondents thought the most common cancer in men was prostate followed by lung and bowel



#### Awareness of cancer screening programme

- 82% of respondents were aware of an NHS breast cancer screening programme
  - Of these respondents, none were correct that women are first invited for screening at 47 years of age, although 54% stated between 41 and 50
- 82% of respondents were aware of an NHS cervical cancer screening programme
  - Of these respondents, 37% were correct that women are invited for screening at 25 years of age in England
- 25% of respondents were aware of an NHS bowel cancer screening programme
  - Of these respondents, 38% were correct that people are invited for screening at 60 years of age

#### **Contribution to cancer**

• Respondents stated that lifestyle contributes to cancer in the UK the most, followed by genetic inheritance, environment, aging and chance

The following report details the above findings in greater detail. All literal responses can be found in Appendix 1 and a copy of the questionnaire in Appendix 2.



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### Introduction

Explain was commissioned by Kent and Medway Cancer Network (KMCN) to carry out a cancer awareness survey within the area. In total, 3,412 on-street interviews were conducted across the three PCT areas; NHS Medway, NHS West Kent and NHS Eastern and Coastal Kent using the cancer awareness measurement (CAM) tool.

## **Objectives**

The main objectives of the research were to better understand the level of public knowledge of cancer signs and symptoms and to help KMCN plan interventions and campaigns to raise awareness of risk factors. The results will also provide KMCN with information to benchmark against in the future.

The topics assessed in the CAM included: awareness of warning signs, anticipated delay in seeking medical help, barriers to seeking medical help, awareness of risk factors, risk factor ranking, awareness of incidence, awareness of common cancers, and awareness of NHS screening programmes.

### Methodology

In total, 3,412 interviews were carried out across the three PCT areas; NHS Medway, NHS West Kent and NHS Eastern and Coastal Kent. The breakdown is shown below.

PCT Area	Number of interviews
NHS Medway	1,136
NHS Eastern and Costal Kent	1,161
NHS West Kent	1,115
Total	3,412

Interviews were carried out using MRS trained researchers, who were set quotas to ensure a representative mix of ages, socio-economic groupings (SEG's), genders and ethnic groups were achieved, in-line with PCT population statistics.

A copy of the questionnaire can be found in Appendix 2 and all returned questionnaires were entered into Mercator SNAP version 10.0 and verified.

### **Notes on Analysis**

'No replies' have not been included in the analysis; therefore the sample sizes fluctuate from question to question, as some respondents didn't feel that they could answer every question. If a chart shows 0%, this shows that at least one respondent selected this option although not enough to represent 1% or higher.



Respondents represent only samples of total populations, so we cannot be certain that the figures obtained are exactly those we would have if everybody had taken part (i.e. the "true values").

However, we can predict the variation between the sample results and the true values from knowledge of the size of the samples on which results are based and the number of times a particular answer is given. The confidence with which we make this prediction is 95% - that is, the chances are 95 in 100 that the true value will fall within a specified range (95% confidence interval).

A sample size of 1,161 would give an error rating of  $\pm$ -3%.



### Results

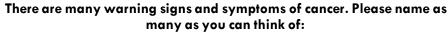
The following report details the findings from the interviews carried out in Eastern and Coastal Kent. In total 1,161 on-street interviews were carried out in the NHS Eastern and Coastal Kent PCT area.

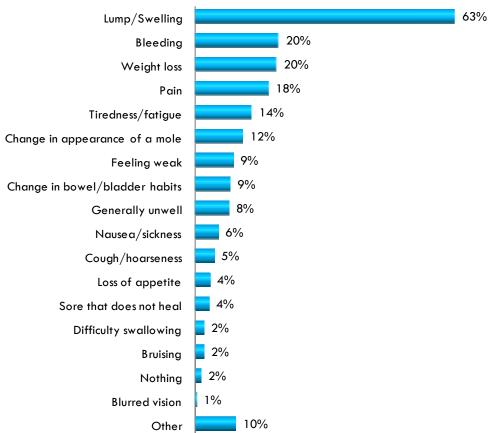
In order to complete the 1,161 interviews, 4,143 people were approached (28% conversion rate). All researchers carried out their interviews on-street, although three also carried out interviews door-to-door.

#### Awareness of cancer signs and symptoms

The first set of questions were about warning signs of cancer.

Respondents were asked if they could think of any warning signs or symptoms of cancer.



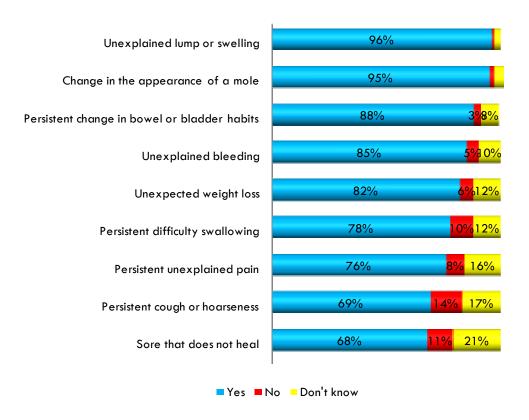


63% of respondents stated lump or swelling could be a warning sign of cancer. A further 20% stated bleeding and weight loss and 18% pain.



Respondents were informed that the following list may or may not be warning signs of cancer and were asked which ones they thought were.

#### Do you think the following could be a sign of cancer?



The majority of respondents (68% - 96%) stated that all of the above are warning signs of cancer.

96% of respondents stated that an unexplained lump or swelling could be a sign of cancer and 95% the change in appearance of a mole.

14% of respondents didn't think a persistent cough or hoarseness could be a sign of cancer and 11% a sore that doesn't heal, although approximately a fifth of respondents (21%) were unsure about a sore that doesn't heal.

As the chart below shows, a slightly higher percentage of female respondents thought eight of the nine symptoms could be signs of cancer compared to males.

	Male	Female
Unexplained lump or swelling	96%	96%
Change in the appearance of a mole	93%	96%
Unexplained bleeding	82%	88%
Persistent change in bowel or bladder habits	86%	90%
Unexpected weight loss	78%	86%
Persistent unexplained pain	75%	77%
Sore that does not heal	64%	72%
Persistent difficulty swallowing	75%	80%
Persistent cough or hoarseness	66%	71%



A higher percentage of respondents aged 35+ stated that the symptoms could be signs of cancer. Awareness was slightly lower amongst respondents aged 25-34 and slightly lower again amongst respondents 16-24 years old.

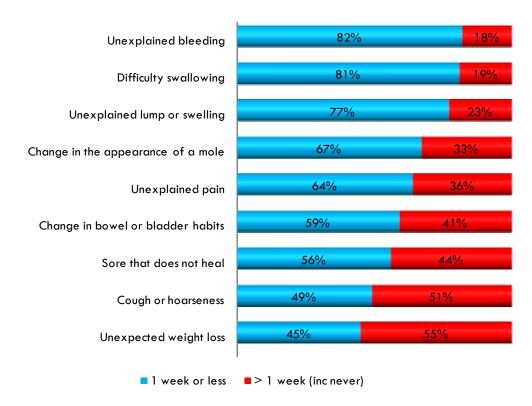


#### Seeking help for cancer symptoms

Respondents were asked if they noticed any of the following signs, how soon would they contact their doctor to make an appointment to discuss it.

Respondents were given eleven different time categories. The chart below shows results split into two time categories – 1 week or less and more than 1 week. Full data tables for this question can be seen in Appendix 3.

## If you noticed any of the following how soon would you contact your doctor to make an appointment to discuss it?



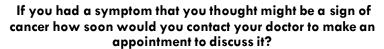
The majority of respondents stated that that they would make an appointment with their doctor within 1 week if they noticed all but two of the warning signs.

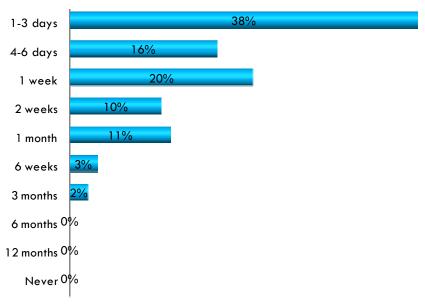
82% of respondents stated that they would make an appointment with their doctor within 1 week if they experienced unexplained bleeding. A further 81% would contact their doctor within 1 week if they experienced difficulty swallowing and 77% if they had an unexplained lump or swelling.

Just under half of the sample stated that they would make an appointment with their doctor within 1 week if they had a cough or hoarseness (49%) or unexpected weight loss (45%).



Respondents were then asked if they had a symptom that they thought might be cancer how soon would they contact their doctor to make an appointment to discuss it.





The majority of respondents (74%) stated that if they had a symptom that they thought might be cancer they would contact their doctor to make an appointment to discuss it within 1 week. Of these respondents, 38% stated that they would contact their doctor within 1-3 days and 16% between 4-6 days.

23 (2%) respondents stated that they would wait three months or longer before contacting their doctor.

79% of female respondents stated that they would contact their doctor within one week if they had a symptom that they thought might be a sign of cancer compared to 67% of males.

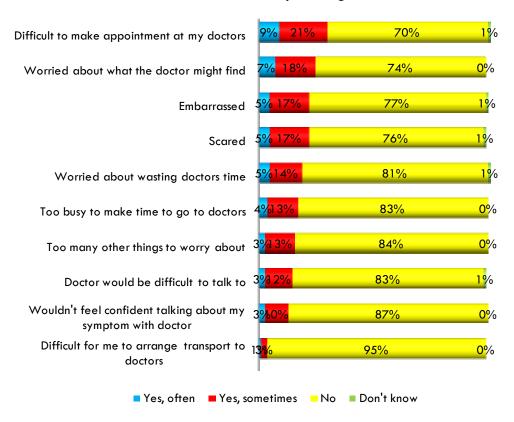


#### **Barriers to seeking help**

The next section relates to barriers that may stop people from seeking help.

Respondents were shown a list of potential reasons as to why people put off going to see their doctor and asked if any might put them off.

#### **Barriers to help-seeking**



30% of respondents stated that they put off going to see their doctor often or sometimes because it is difficult to make an appointment. A further 25% stated that they are worried about what the doctor might find. And 22% were too embarrassed and scared.

19% of respondents stated that they are often or sometimes worried they are wasting doctor's time.

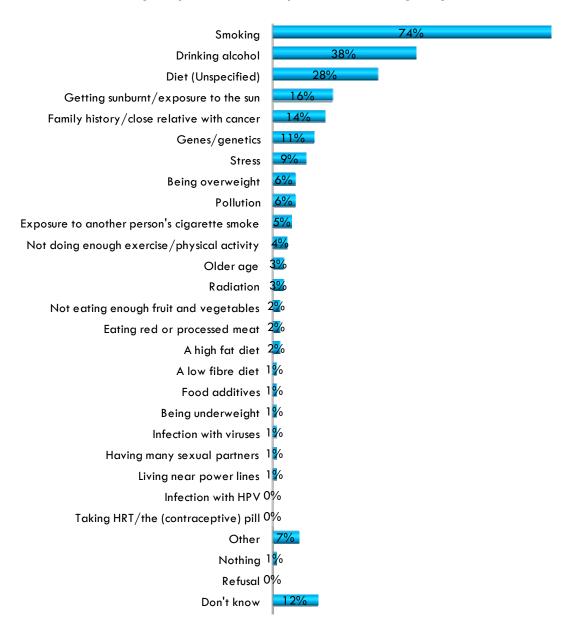
Of those 23 respondents that stated in the previous question that they would wait three months or longer before contacting their doctor if they thought they had a symptom of cancer, the key barriers preventing them from making an appointment were being worried about what the doctor might find (13/23), the doctor would be difficult to talk to (12/23), difficult to make an appointment (12/23) and too busy to make time to go to the doctors (12/23).



#### **Awareness of risk factors**

Respondents were asked unprompted what things may affect a person's chances of getting cancer.

#### What things do you think affect a person's chance of getting cancer?

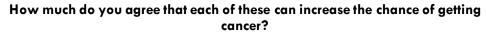


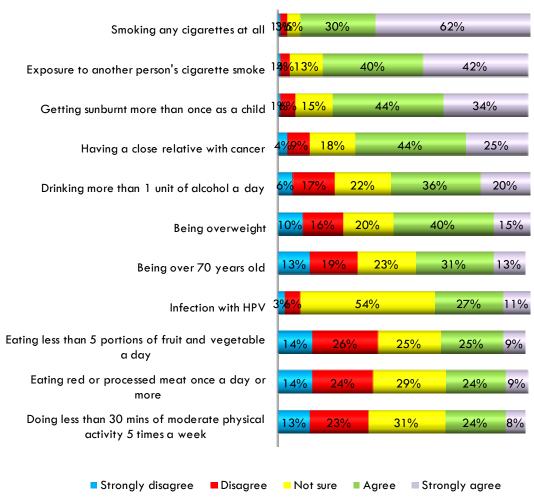
When asked what things affect a person's chance of getting cancer, the majority of respondents (74%) stated smoking.

Drinking alcohol (38%) and diet (28%) were noted by over a quarter of the sample. Getting sunburnt/exposure to the sun (16%), family history/close relative with cancer (14%) and genes/genetics (11%) were also mentioned a number of times.



Respondents were then asked on a scale of 1 to 5, where 1 was strongly disagree and 5 strongly agree, for their level of agreement that each of the following can increase the chance of getting cancer.



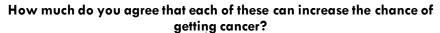


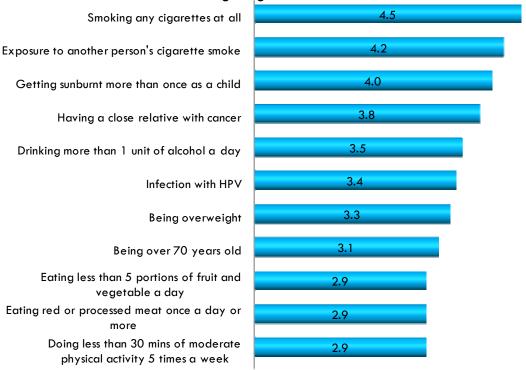
92% of respondents either agreed or strongly agreed that smoking cigarettes can increase the chance of getting cancer. Exposure to another person's smoke (82%) and getting sunburnt as a child (78%) also achieved high combined agreement.

In terms of disagreement, 40% of respondents disagreed or strongly disagreed that eating less than five portions of fruit and vegetables a day can increase the chance of getting cancer. Eating red or processed meat once a day or more (38%) and doing less than 30 minutes of moderate physical activity 5 times a week (36%) also achieved high combined disagreement.



The chart below shows the above results using a mean score, where 1 was strongly disagree and 5 strongly agree.





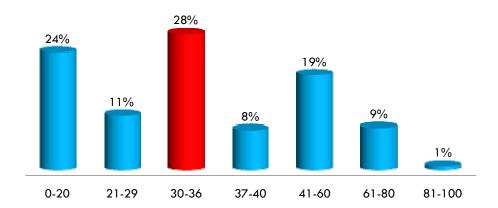
As the chart above shows, respondents strongly agreed that smoking any cigarettes can increase the chance of getting cancer (4.5). Exposure to another person's cigarette smoke (4.2) and getting sunburnt as a child (4.0) both achieved a mean score of 4.0 or higher.



#### **Awareness of cancer incidence**

Respondents were shown a picture of 100 people and asked how many of these they thought would develop cancer at some point in their life.

Out of 100 people, how many do you think will develop cancer?



As the chart above shows, just under half of the sample (47%) thought between 21 and 40 people out of 100 will develop cancer at some point in their life.

Approximately 30-36 people out of 100 will develop cancer at some point in their lives. 28% of respondents were correct with their response.



#### **Most common cancers**

Respondents were asked unprompted, what the three most common cancers were in women and men.

The table below shows the results for women.

		Women				
	Most common	Second most common	Third most common			
Breast	83%	11%	1%			
Cervical/cervix	10%	36%	8%			
Bowel/colorectal/rectal	1%	6%	11%			
Lung	1%	9%	17%			
Ovarian	1%	9%	6%			
Skin	1%	4%	8%			
Liver	-	-	1%			
Stomach	-	2%	2%			
Throat	-	1%	2%			
Uterus/endometrial/womb	-	2%	1%			
Other	-	-	1%			
Don't know	2%	17%	40%			

The most common cancer in women is breast cancer. 83% of respondents were correct in their response. Respondents thought cervical/cervix and lung cancer were the next most common cancers in women.



The table below shows the results for men.

	Men				
	Most common	Second most common	Third most common		
Prostate	54%	12%	4%		
Testicular	16%	10%	4%		
Lung	14%	25%	15%		
Bowel/colorectal/rectal	9%	20%	16%		
Breast	1%	2%	2%		
Stomach	1%	2%	3%		
Throat	1%	4%	4%		
Brain	-	-	1%		
Kidney	-	-	1%		
Liver	-	1%	3%		
Oral/mouth/oropharynx/lips/tongue	-	1%	1%		
Pancreatic	-	1%	-		
Skin	-	3%	5%		
Other	-		1%		
Don't know	3%	18%	39%		

The most common cancer in men is prostate cancer. Just over half of respondents (54%) were correct in their response. Respondents thought lung and bowel/colorectal/rectal were the next most common cancers in men.

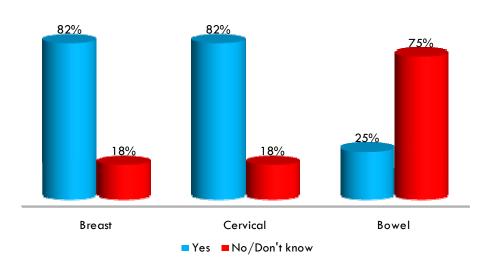


#### **Awareness of cancer screening programmes**

The following section is about NHS screening programmes.

Respondents were asked if there was a screening programme for breast cancer, cervical cancer and bowel cancer.

#### Awareness of NHS screening programmes



82% of respondents stated that there is a NHS cervical cancer and a breast cancer screening programme. However, fewer respondents were aware of a bowel cancer screening programme (25%).

As expected, a higher percentage of female respondents were aware of the NHS breast screening programme (90% vs 72%) and NHS cervical cancer screening programme (90% vs 73%) compared to males. However, there was very little difference in terms of awareness of the NHS bowel cancer screening programme by gender (25% vs 26%).

As the table below shows, awareness of the screening programmes was lower amongst respondents aged 16 to 24. Awareness of cervical screening was also low amongst respondents age 65 and over.

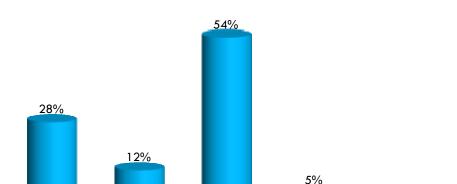
	Awareness of screening programme						
	16-24 25-34 35-44 45-54 55-64 65+						
Breast	66%	84%	83%	88%	89%	81%	
Cervical	75%	91%	86%	87%	83%	73%	
Bowel	16%	20%	18%	25%	37%	36%	



30 or younger

31-40

Those respondents that were aware of the screening programmes above were asked at which age people are first invited for screening.



#### At what age are women first invited for breast cancer screening?

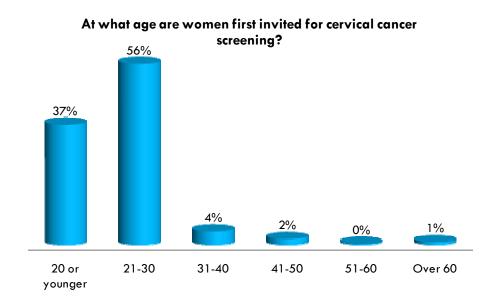
Of the 950 respondents that were aware of the breast screening programme, 720 provided an age when woman are first invited for breast cancer screening. Of these respondents, over half of the sample (54%) stated between 41 and 50 years old and just over a quarter (28%) stated 30 or younger.

41-50

51-60

Over 60

Women are first invited to breast cancer screening at 47 years of age. Of those respondents that stated an age, none stated 47.

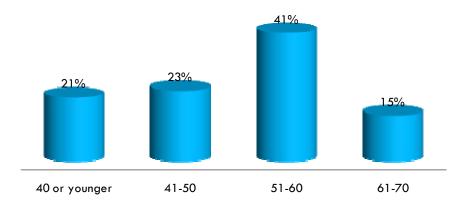


Of the 956 respondents that were aware of the cervical screening programme, 732 provided an age when woman are first invited for cervical cancer screening. Of these respondents, over half of the sample (56%) stated between 21 and 30 years old and over a third (37%) stated 20 or younger.

Women are first invited to cervical cancer screening at the age of 20 in Scotland, Wales and Northern Ireland and 25 in England. 13% of respondents stated 20 years old and 37% 25 years old.



#### At what age are people first invited for bowel cancer screening?



Of the 295 respondents that were aware of the bowel screening programme, 188 provided an age when people are first invited for bowel cancer screening. Of these respondents, 41% stated between 51 and 60 years old, 23% between 41 and 50 and 21% 40 or younger.

People are first invited to attend colorectal (bowel) cancer screening at 60 years of age. 38% of respondents were correct with their response.

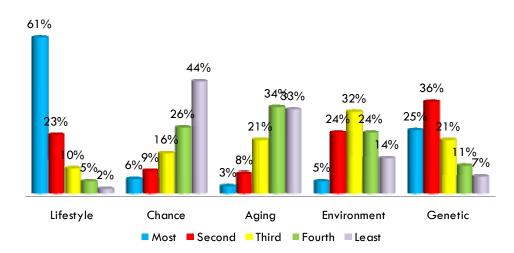


#### **Contribution to cancer**

Respondents were asked to put the following things in order of how much they thought they contribute to cancer in the UK.

- Lifestyle
- Chance
- Aging
- Environment
- Genetic inheritance

## Please put the following things in order of how much you think they contribute to cancer in the UK



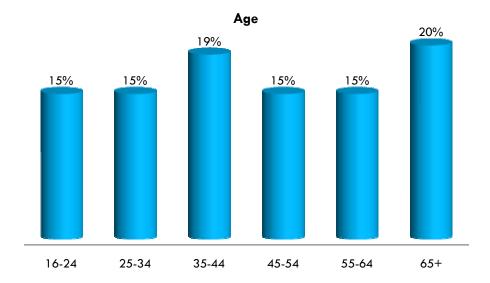
Whilst there is no correct answer for the above question, medical scientists believe that up to 50% of cancers can be prevented by changes in lifestyle, and also that the other four factors can play a role in cancer development. Results from the research have generated a similar result.

Lifestyle was believed to contribute the most towards cancer, followed by genetic, environment and aging. Out of the five factors, chance was said to contribute the least.

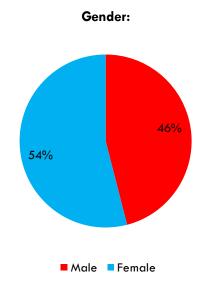


#### **Demographics**

The following charts show the profile of respondents.

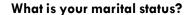


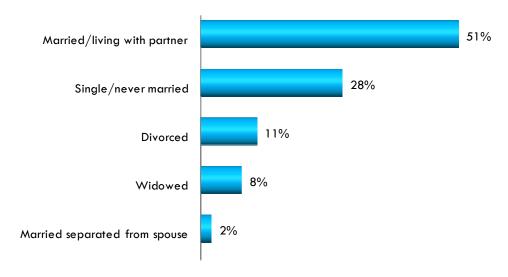
The chart above shows respondents broken down by age.



The chart above shows 54% of the sample were female and 46% male.

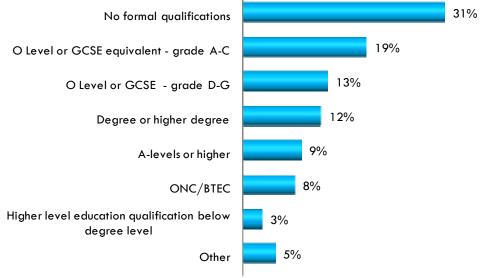






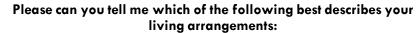
The chart above shows respondents by marital status. Over half of the sample (51%) were married/living with partner and 28% single/never married.

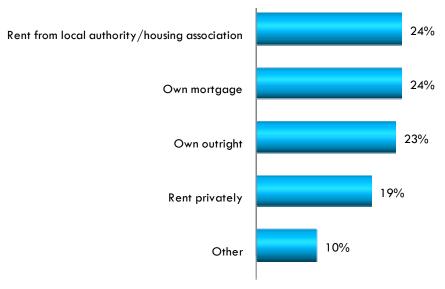




The chart above shows respondents split by the highest level of education qualification they have obtained.

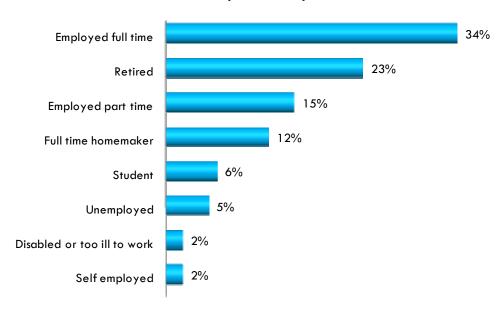






The chart above shows respondents split by their current living arrangements.

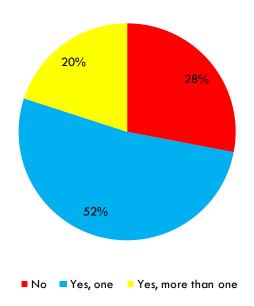
#### Are you currently:



The chart above shows respondents by current employment.

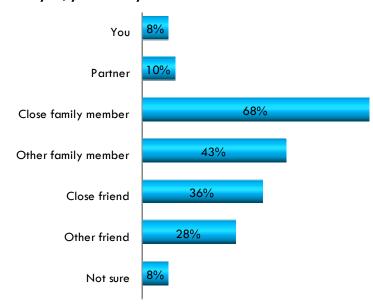


#### Does your household own a car or van?



The chart above shows that 80% of the sample owned at least one car.

#### Have you, your family or close friend had cancer?



Respondents were asked if they, a family member or a close friend had cancer. 8% of respondents stated that they had cancer and 10% their partner. The majority of respondents (68%) stated that a close family member had cancer.

97% of the sample stated that their ethnic group was White-British. English was the main language spoken at home by 99% of respondents.



# **Appendix 1 - Full Literal Responses**



## Q1 - There are many warning signs and symptoms of cancer. Please name as many as you can think of? OTHER

- 1 Loss in hearing, 3 Headaches
- 1 headaches
- 3 headaches
- 3 Skin Colour
- 4 ulcers
- **Abscess**
- Anaemia
- Behavioural patterns
- **Blemishes**
- Bloated feeling
- Bloating stomach (2)
- Bloating, low immunity
- Blood in urine
- **Blood Pressure**
- **Breathing**
- Breathing difficulty
- **Breathlessness**
- Change in blood sugar levels
- Change in moods
- Change in skin colour
- Chest infections
- Collapsing
- Colouring and disformation of nipples
- Complexion and greyness
- Constipation
- Coughing up blood (2)
- Dark marks on skin
- Diarrhoea
- Dimpling on the breast
- Discharge (6)
- Discolouration of gums
- Discoloured nipples
- Discoloured skin (6)
- Dogs sniffing at skin scabs
- Dough smell
- Dying
- Fits
- Flu like symptoms
- Freckle type scratch
- Genetics
- Greyness/yellowness of the skin
- Growth
- Hair loss (6)
- Headache (6)



High blood pressure (2)

Jaundice

Lack of energy

Leasions and stomach cramps

Listen to your body

Memory loss and speech

Movement

Nail discolouration

Nipple swelling and grow pain

Not looking well

**Numbness** 

Out of breath

Passing blood

Prostate

**Puckered Nipples** 

Puffy skin

Rashes (4)

Redness

Shortness in breath (3)

Skin

Skin changes

Skin spots

Smoking people

Sore Eyes, Headache

Sore throat

Spots

Stomach aches/bloatness

Stress and worry

Sun Burn

Sweating

**Sweats** 

Vaginal discharge

Warnings

Weakness

#### Q5 - Barriers to help-seeking - OTHER

Bad experience with doctor previously

Bed side manner was not good

Being told the truth

Being told off at work for having time off

Don't like my doctor

Don't like new doctor

Don't like own doctor

Family members

General dislike of doctors

I don't really like the GP



I have no confidence in the doctors due to previous experience

I have problems with the doctor not understanding

I would see if it clears up on its own

If I had a previous appointment

If I had other illnesses already

If it was a male doctor it would put me off

If my own doctor wasn't available

Language barrier

Prefer to ask pharmacist before going to the doctors

Rude nurse's

Seeing my own doctor who is a non-English speaking doctor

Some of them are difficult to understand due to the language barrier

Sometimes prefer to see if it heals itself first

Telling the kids

The doctor can be ineffective

The receptionist

The state of the NHS and what treatment I might get

They don't listened to me

You try to be your own doctor first

#### Q10 - What do you think is the second most common cancer in woman OTHER

Veins

Lumps

#### Q11 - What do you think is the third most common cancer in woman OTHER

Bone (5)

Spine

Thyroid

#### Q13 - What do you think is the second most common cancer in men OTHER

Lumps

Bone (2)

#### Q14 - What do you think is the third most common cancer in men OTHER

Bone (5)

Leg



# Appendix 2 - Questionnaire



#### Cancer Research UK - Cancer Awareness Measure (CAM)

Good morning/afternoon, my name is.... I am carrying out market research for Explain on behalf of The Kent and Medway Cancer Network to better understand the level of public knowledge of cancer signs and symptoms to help us plan interventions and campaigns to raise awareness of risk factors. Do you have a few minutes to answer some questions?

Q1	UNPROMPTED - There are many warning signs a	ınd symptoms of	cancer. Please name as many as	s you can think of.
	Pain Change appear  Bleeding Sore the heal  Change in Weight bowel/bladder habits	ance at does not t loss ss/fatigue	Nausea/sickness Generally unwell Bruising Loss of appetite Blurred vision	Feeling unwell Other (Please state below) Nothing Refusal Don't know
Q2	The following may or may not be warning signs following are warning signs for cancer?  Do you think an unexplained lump or swelling could be a sign of cancer	for cancer. We a	re interested in your opinion. Do	you think any of the  Don't know
	Do you think a persistent unexplained pain could be a sign of cancer			
	Do you think unexplained bleeding could be a sign of cancer			
	Do you think a persistent cough or hoarseness could be a sign of cancer			
	Do you think a persistent change in bowel or bladder habits could be a sign of cancer			
	Do you think persistent difficulty swallowing could be a sign of cancer			
	Do you think a change in the appearance of a mole could be a sign of cancer			
	Do you think that a sore that does not heal could be a sign of cancer			
	Do you think unexpected weight loss could be a sign of cancer			

23	RESEARCHER TO PROMPT WITH SHOWCA	ARD E	3 - The no	ext que	estion is	about	seeking	help.				
		Α	В	С	D	Ε	F	G	Н	1	J	DK
	If you noticed an <u>unexpected lump or</u> <u>swelling</u> how soon would you contact your doctor to make an appointment to discuss it?											
	If you had <u>unexplained pain</u> how soon would you contact your doctor to make an appointment to discuss it?											
	If you had <u>unexplained bleeding</u> how soon would you contact your doctor to make an appointment to discuss it?											
	If you had a cough or hoarseness how soon would you contact your doctor to make an appointment to discuss it?											
	If you noticed a <b>change in bowel or bladder habits</b> how soon would you contact your doctor to make an appointment to discuss it?											
	If you had difficulty swallowing how soon would you contact your doctor to make an appointment to discuss it?											
	If you noticed a <b>change in the appearance</b> of a mole how soon would you contact your doctor to make an appointment to discuss it?											
	If you had a sore that did not heal how soon would you contact your doctor to make an appointment to discuss it?											
	If you had <u>unexpected weight loss</u> how soon would you contact your doctor to make an appointment to discuss it?											
<b>Q</b> 4	RESEARCHER TO PROMPT WITH SHOWCA If you had a symptom that you thought mig appointment to discuss it:											
	A D D	Ε.		F [	G	. 🗌	н	<i>I</i>		J	DI	K. 🗌
<b>Q</b> 5	RESEARCHER TO PROMPT WITH SHOWCA seeking help. Sometimes people put off go serious. These are some of the reasons pe the doctor?	ing to ople (	see the give for d	docto	r, even w g. Could	hen th	ney have ay if any	a symp of thes	tom that e might	at they the put you	ink cou off goi	uld be ng to
		Y	es, often		Yes, so	metime	es	No	) ¬	1	Don't kn	ow
	I would be too embarrassed							L				
	I would be too scared											
	I would be worried about wasting the doctor's time											
	My doctor would be difficult to talk to											
	It would be difficult to make an appointment with my doctor											
	I would be too busy to make time to go to the doctor											
	I have too many other things to worry about											
	It would be difficult for me to arrange transport to the doctor's surgery											
	I would be worried about what the doctor might find											
	I wouldn't feel confident talking about my symptom with the doctor											
	Is there anything else that you can think of that might put you off going to the doctor? (Please state below)											



Smoking		Infection with HI		Having	many sexual par	rtners
Exposure to another person's			ah ayaraisa/ahyai	Takina	HRT/the (contract	ceptive) pil
cigarette smoke (passive smokin			gh exercise/physic	iai 🦳	near power lines.	
Drinking alcohol		•	d)		on	
Not eating enough fruit and vegetables				=	ion	
· ·	$\equiv$	•				
Eating red or processed meat	=					
Being overweight						
Getting sunburnt/exposure to the sun		Being underweig	ght	Nothin	g	
Older age	$\equiv$	U			ıl	
Family history/having a close			ruses (unspecified	· I DOILIK	now	
relative with cancer/hereditary		otner)				
RESEARCHER TO PROMPT Wincrease the chance of getting cancer?		w much do you Strongly	agree that each	of these can inci	ease the chance	e of getting Stroi
		disagree	Disagree	Not sure	Agree	agr
Smoking any cigarettes at all				-		
Exposure to another person's cig smoke	garette					L
Drinking more than 1 unit of alco unit of alcohol is one small mea: spirits, half a pint of lager (3-4% half a small glass (175ml) of wind strength)(	sure of strength) or					
Eating less than 5 portions of fru vegetable a day (a portion is equ apple, orange, banana or similar plums or nectarines or similar siz handful of grapes or berries, one of raisins, two serving spoons of vegetables, beans or pulses, or a bowl of salad)	iivalent to ar sized fruit, 2 zed fruit, a tablespoon cooked	2				
Eating red or processed meat on more (Processed meat includes salami, corned beef, sausages)		,				
Being overweight (BMI over 25)						
Getting sunburnt more than once	as a child					
Being over 70 years old						
Having a close relative with canor relative means parents, children, sisters)						
Infection with HPV (human papill	lomavirus)					
Doing less than 30 minutes of mphysical activity 5 times a week (physical activity includes anythin you warm and slightly out of bree brisk walking, gardening, dancing housework)	(moderate ng that leave ath such as	s				
					ncidence of cand	oor Horoi



	Most Commo	n Cancers		
Q9				
	UNPROMPTED - What do you think is the most common cancer in women?			
	UNPROMPTED - What do you think is the second most common cancer in women?			
	UNPROMPTED - What do you think is the third most common cancer in women?			
	UNPROMPTED - What do you think is the most common cancer in men?			
	UNPROMPTED - What do you think is the second most common cancer in men?			
	UNPROMPTED - What do you think is the third most common cancer in men?			
	NHS screening	programmes		
Q10	The next set of questions is about NHS screening programme:	S.		
	Yes	No	Don't know	Refused
	Is there an NHS breast cancer screening programme?			
	If yes, at what age are women first invited for breast cancer screening?			
	Is there an NHS cervical cancer screening programme (smear tests)?	No	Don't know	Refused
	If yes, at what age are women first invited for cervical cancer screening?			
	Is there an NHS bowel cancer screening programme?	No	Don't know	Refused
	If yes, at what age are people first invited for bowel cancer screening?			



<i>2</i>			
4			
5			
	Demoç	graphics	
We would now like to ask you a few	questions about yours	elf to ensure we speal	k with a cross section of the popu
What is your age?			
16 to 24 25 to 34	35 to 44	45 to 54	55 to 64 65+
RESEARCHER PLEASE RECORD EXA	ACT AGE BELOW:		
RESEARCHER TO PROMPT WITH SH	OWCARD G - Which of	those bost describes	vour othnia group?
WHITE - White British			BRITISH - Pakistani
WHITE - White Irish	=		BRITISH - Bangladeshi
WHITE - Any other White background	=		BRITISH - Any other Asian
MIXED - White and Black Caribbean			
	=	BLACK OR BLACK	K BRITISH - Black Caribbean
MIXED - White and Black African	=	BLACK OR BLACK	K BRITISH - Black African
MIXED - White and Asian	一		K BRITISH - Any other black
MIXED - Any other mixed background	$\equiv$	· ·	
ASIAN OR ASIAN BRITISH - Indian			
		Other (please state	e below)
What is your marital status?			
Single/never married	Married separated	from spouse	Widowed
Married/living with partner	Divorced		Civil partnership
What is the highest level of education	qualification you have	obtained?	
Degree or higher degree	ONC/BTEC		Other (Please state below)
Higher level education qualification below degree level	O Level or GSCE of Grade A-C)		No formal qualifications
A-levels or higher	O Level or GCSE	(Grade D-G)	
Please can you tell me which of the fo	llowing best describes	s your living arrangem	nent:
Own outright	Rent from Local	Association	Squatting Other (i.e. living with
Own mortgage	/ latificity/filoacifiq		



Q19	9 What is your telephone number, again for verification purposes?	
Q20	0 What is your postcode?	
Q21	Are you currently:	_
		Student
	Linployed part-line	Disabled or too ill to work
Q22	2 Please state the occupation of the main wage earner in the household? (IF RETIRED: Please state retiring)	e the occupation before
Q23		. $\Box$
	No	han one
Q24	4 Have you, your family or close friends had cancer?	
	Yes	No
	You	
	Partner	
	Close family member	
	Other family member	
	Close friend	
	Other friend	
	Not sure	
	Do not wish to answer	
Q25	How many years have you been living in the UK? (IF RESPONDENTS STATES 'ALL MY LIFE' PLE. NUMBER OF YEARS)	ASE PROBE FOR EXACT
		51 to 60 years
		61 years +
Q26		Oth (DI
		Other (Please state below)
	Urdu	
Q27	7 Do we have permission to pass on your details and responses direct to Kent and Medway Cancel prefer to remain anonymous?	r Network or would you
	Happy for responses to be passed on	
	searcher Note - Please thank the respondent and close the interview. Please give the respondent a le research pack. If the respondent has any queries about symptoms that they have experienced or ris concerned about, please advise them to speak to their GP.	
Q28	·	
	Male Female	
Q29	29 SEG (RESEARCHER TO CODE)	
	AB C1	E



<b>U</b> 30	Researcher name:
Q31	Location of interview:
Q32	Date of interview:



# Appendix 3 - Tables



Q3 - How soon would you contact your doctor to make an appointment to discuss it?	1-3 days	4-6 days	1 week	2 weeks	1 month	6 weeks	3 months	6 months	12 months	Never
Unexplained lump or swelling	46%	13%	18%	10%	9%	3%	1%	0%	0%	0%
Persistent unexplained pain	28%	13%	23%	14%	12%	5%	2%	1%	0%	1%
Unexplained bleeding	49%	14%	19%	7%	7%	2%	1%	0%	0%	0%
Persistent cough or hoarseness	18%	11%	19%	19%	19%	5%	4%	1%	1%	3%
Persistent change in bowel or bladder habits	26%	13%	20%	15%	14%	6%	3%	1%	1%	2%
Persistent difficulty swallowing	39%	19%	22%	9%	7%	1%	1%	0%	0%	1%
Change in the appearance of a mole	38%	12%	18%	13%	12%	4%	2%	0%	0%	0%
Sore that does not heal	24%	11%	20%	18%	17%	6%	2%	0%	0%	1%
Unexpected weight loss	20%	10%	15%	15%	20%	8%	5%	2%	1%	3%

(Table 1)

