Cancer Awareness Measure (CAM)

NHS West Kent





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 1,115 interviews carried out in West Kent

Awareness of cancer signs and symptoms

- UNPROMPTED, the key warning signs and symptoms of cancer were lump or swelling (70%), pain (25%), change in the appearance of a mole (20%) and bleeding (20%)
- When PROMPTED, the key warning signs and symptoms of cancer were unexplained lump or swelling (97%), change in the appearance of a mole (94%), unexplained bleeding (87%) and persistent change in bowel or bladder habits (87%)

Seeking help for cancer symptoms

- The majority of respondents would contact their doctor to make an appointment within one week if they developed 8 of the 9 symptoms listed. 80% of respondents stated that they would make an appointment within one week if they noticed an unexplained lump or swelling, 74% if they had unexplained bleeding and 70% an unexplained pain
- 70% 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, 21% stated that they would contact within 1-3 days

Barriers to seeking help

• The main barriers to going to visit a doctor were, worried about what the doctor might find, being too scared, difficult to make an appointment and worried about wasting doctor's time

Awareness of risk factors

- UNPROMPTED, respondents thought smoking (69%) was the main thing that affects a person's chance of getting cancer. Drinking alcohol (31%), getting sunburnt/exposure to the sun (21%), family history/close relative with cancer (16%) and diet (16%) 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, 26% 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

85% of respondents were aware of an NHS breast cancer screening programme



- Of these respondents, two were correct that women are first invited for screening at 47 years of age, although 58% stated between 41 and 50
- 87% of respondents were aware of an NHS cervical cancer screening programme
 - Of these respondents, 33% were correct that women are invited for screening at 25 years of age in England
- 29% of respondents were aware of an NHS bowel cancer screening programme
 - Of these respondents, 45% 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, chance, aging and environment factors

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.



Table of contents

Executive	e Summary	Page 1
Introduction	n	Page 4
Objectives		Page 4
Methodolog	Э У	Page 4
Notes on a	nalysis	Page 4
Results		Page 6
	Awareness of cancer	Page 6
	Seeking help for cancer symptoms	Page 8
	Barriers to seeking help	Page 10
	Awareness of risk factors	Page 11
	Awareness of cancer incidence	Page 14
	Most common cancers	Page 15
	Awareness of cancer screening programme	Page 17
	Contribution to cancer	Page 20
	Demographics	Page 21
Appendix 1	– Full Literal Responses	Page 25
Appendix 2	2 — Questionnaire	Page 29
Appendix 3	3 - Table	Page 37



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 1,115 would give an error rating of \pm -3%.



Results

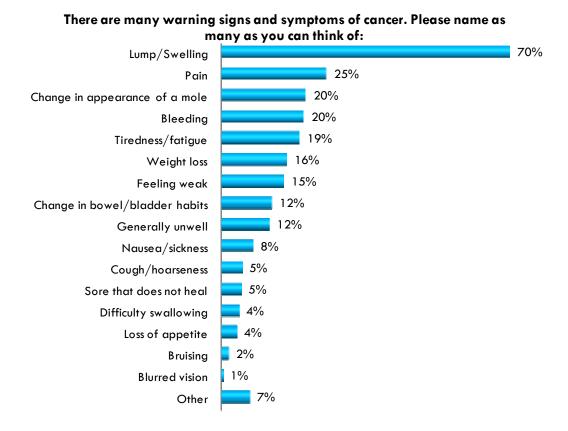
The following report details the findings from the interviews carried out in West Kent. In total 1,115 on-street interviews were carried out in the NHS West Kent PCT area.

In order to complete the 1,115 interviews, 3,757 people were approached (30% conversion rate). All researchers carried out their interviews on-street, although a few (13%) 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.

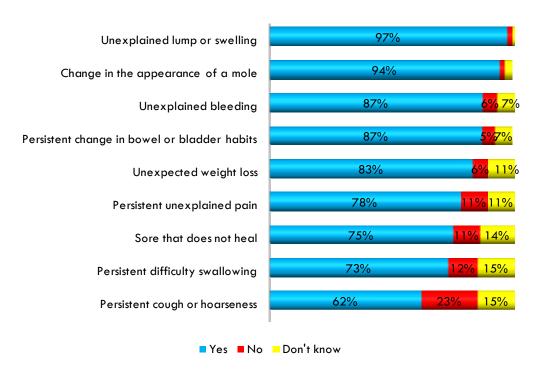


70% of respondents stated a lump or swelling could be a warning sign of cancer. A further 25% stated pain and 20% the change in the appearance of a mole and bleeding.



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 (62% - 97%) stated that all of the above are warning signs of cancer.

97% of respondents stated that an unexplained lump or swelling could be a sign of cancer and 94% the change in appearance of a mole.

Just under a quarter of the sample (23%) didn't think a persistent cough or hoarseness could be a sign of cancer.

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

	Male	Female
Unexplained lump or swelling	96%	97%
Change in the appearance of a mole	93%	95%
Unexplained bleeding	86%	88%
Persistent change in bowel or bladder habits	86%	88%
Unexpected weight loss	81%	85%
Persistent unexplained pain	75%	80%
Sore that does not heal	71%	79%
Persistent difficulty swallowing	70%	76%
Persistent cough or hoarseness	58%	65%

Results for the above question were very similar when split by age, although a lower percentage of respondents aged 16-24 thought the symptoms could be signs of cancer.

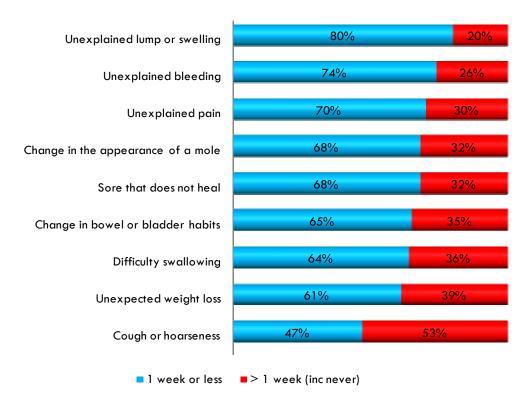


Seeking help for cancer symptoms

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?



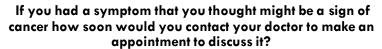
The majority of respondents stated that that they would make an appointment with their doctor within 1 week if they noticed all but one of the warning signs.

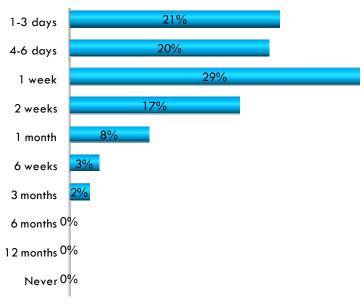
80% of respondents stated that they would make an appointment with their doctor within 1 week if they noticed an unexplained lump or swelling. A further 74% would contact their doctor within 1 week if they noticed unexplained bleeding and 70% if they had an unexplained pain.

Just under half of the sample (47%) stated that they would make an appointment with their doctor within 1 week if they had a cough or hoarseness.



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 (70%) 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, 21% stated that they would contact their doctor within 1-3 days and 20% between 4-6 days.

25 (2%) respondents stated that they would wait three months or longer before contacting their doctor.

74% 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 64% of males.

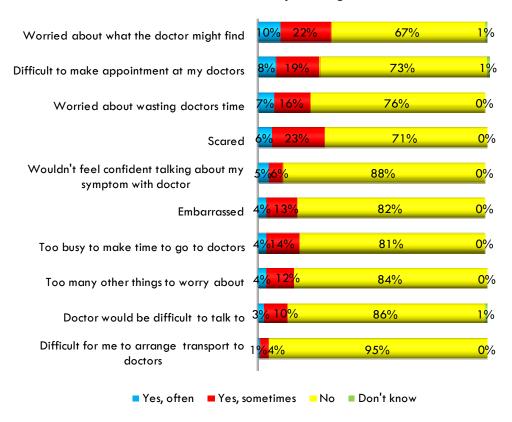


Barriers to seeking help

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



32% of respondents stated that they put off going to see their doctor often or sometimes because they are worried about what the doctor might find. A further 29% said that they were too scared and 27% find it difficult to make an appointment.

23% of respondents stated that they are often or sometimes worried they are wasting their doctor's time.

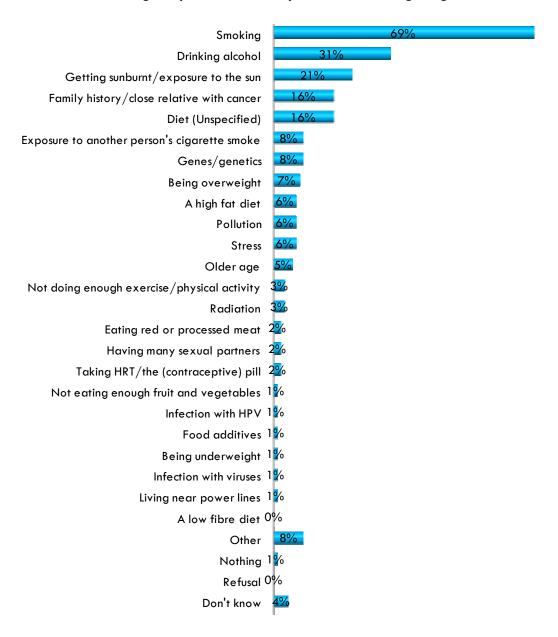
Of those 25 respondents that stated in the previous question that they would wait three months or longer before contacting their doctor if they thought they had a symptom of cancer, the key barriers preventing them from making an appointment were scared (16/25), worried about wasting doctors time (15/25) and too busy to make time to go to doctors (14/25).



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 (69%) stated smoking.

Drinking alcohol (31%), getting sunburnt/exposure to the sun (21%), family history/close relative with cancer (16%) and diet (16%) were also mentioned a number of times.

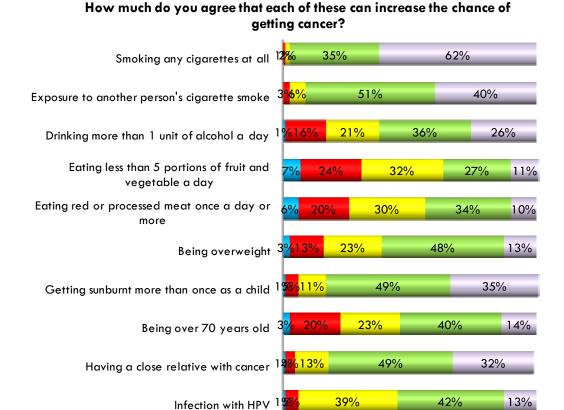


Doing less than 30 mins of moderate physical

activity 5 times a week

■ Strongly disagree ■ Disagree

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.



97% of respondents either agreed or strongly agreed that smoking cigarettes can increase the chance of getting cancer. Exposure to another person's smoke (91%) and getting sunburnt as a child (84%) also achieved high combined agreement.

Not sure

Agree

39%

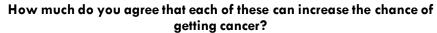
■ Strongly agree

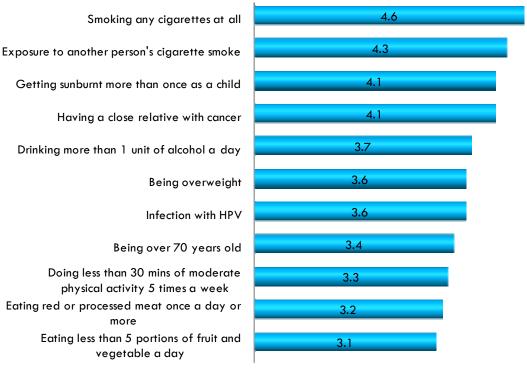
8%

In terms of disagreement, 31% 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 (26%) and doing less than 30 minutes of moderate physical activity 5 times a week (25%) 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.





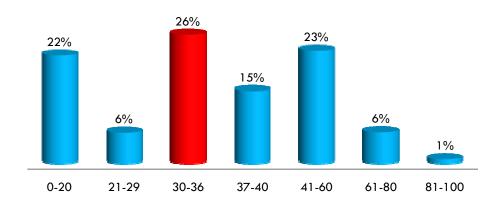
As the chart above shows, respondents strongly agreed that smoking any cigarettes can increase the chance of getting cancer (4.6). Exposure to another person's cigarette smoke (4.3), getting sunburnt as a child (4.1) and having a close relative with cancer (4.1) all achieved a mean score of over 4.0 out of 5.0.



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. 26% 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	75%	17%	3%		
Cervical/cervix	14%	33%	10%		
Ovarian	4%	11%	7%		
Lung	2%	15%	17%		
Skin	2%	6%	10%		
Bowel/colorectal/rectal	1%	5%	12%		
Brain	-	-	1%		
Leukaemia	-	-	1%		
Liver	-	1%	1%		
Non-Hodgkin's lymphoma	-	-	1%		
Oral/mouth/oropharynx/lips/tongue	-	-	1%		
Stomach	-	2%	4%		
Throat	-	1%	2%		
Uterus/endometrial/womb	-	2%	1%		
Other	-	-	1%		
Don't know	-	7%	29%		

The most common cancer in women is breast cancer. 75% 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	46%	15%	7%
Lung	19%	29%	19%
Bowel/colorectal/rectal	16%	16%	13%
Testicular	12%	9%	5%
Liver	1%	2%	2%
Skin	1%	3%	6%
Stomach	1%	3%	6%
Throat	1%	4%	4%
Breast	-	2%	2%
Kidney		1%	1%
Oral/mouth/oropharynx/lips/tongue	-	1%	1%
Other	-	1%	1%
Don't know	2%	13%	32%

The most common cancer in men is prostate cancer. Just under half of respondents (46%) were correct in their response. Respondents thought lung and bowel/colorectal/rectal were the next most common cancers in men.

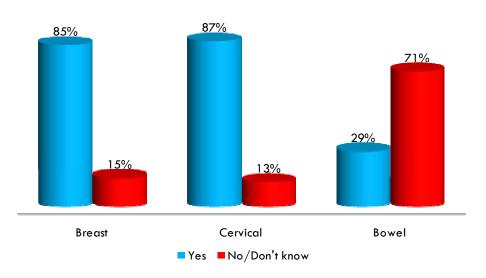


Awareness of cancer screening programmes

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.





87% of respondents stated that there is a NHS cervical cancer screening programme and 85% a breast cancer screening programme. However, fewer respondents were aware of a bowel cancer screening programme (29%).

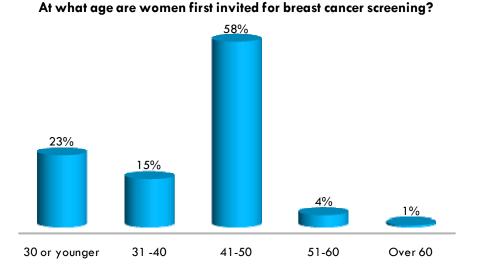
As expected, a higher percentage of female respondents were aware of the NHS breast screening programme (91% vs 79%) and NHS cervical cancer screening programme (94% vs 80%) compared to males. A slightly higher percentage of females were also aware of the NHS bowel cancer screening programme (32% vs 25%).

As the table below shows, awareness of the screening programmes was much lower amongst respondents aged 16 to 24. Awareness of the bowel screening programme increased with age.

		Aware	ness of scree	ning progra	mme	
	16-24	25-34	35-44	45-54	55-64	65+
Breast	68%	83%	89%	88%	91%	90%
Cervical	78%	87%	93%	90%	92%	83%
Bowel	16%	17%	25%	26%	35%	45%

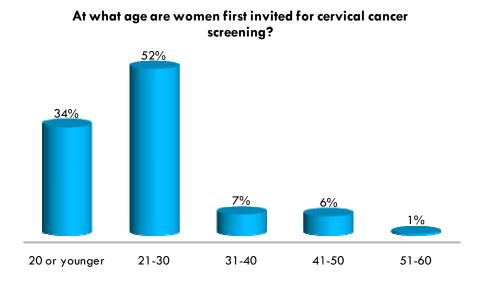


Those respondents that were aware of the screening programmes above were asked at which age people are first invited for screening.



Of the 953 respondents that were aware of the breast screening programme, 695 provided an age when woman are first invited for breast cancer screening. Of these respondents, over half of the sample (58%) stated between 41 and 50 years old and just under a quarter (23%) stated 30 or younger.

Women are first invited to breast cancer screening at 47 years of age. Of those respondents that stated an age, two stated 47.

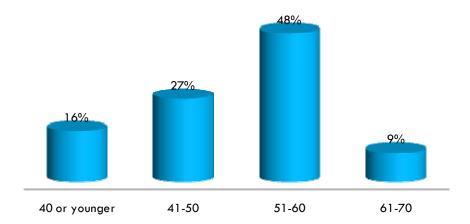


Of the 975 respondents that were aware of the cervical screening programme, 705 provided an age when woman are first invited for cervical cancer screening. Of these respondents, over half of the sample (52%) stated between 21 and 30 years old and just approximately a third (34%) stated 20 or younger.

Women are first invited to cervical cancer screening at the age of 20 in Scotland, Wales and Northern Ireland and 25 in England. 15% of respondents stated 20 years old and 33% 25 years old.



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



Of the 320 respondents that were aware of the bowel screening programme, 184 provided an age when people are first invited for bowel cancer screening. Of these respondents, just under half of the sample (48%) stated between 51 and 60 years old and just over a quarter (27%) stated between 41 and 50 years old. The others stated 'don't know'.

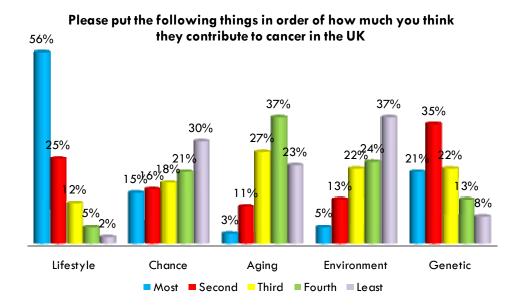
People are first invited to attend colorectal (bowel) cancer screening at 60 years of age. 45% of respondents were correct with their response.



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



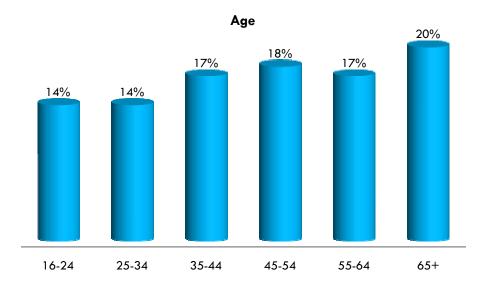
Whilst there is no correct answer for the above question, medical scientists believe that up to 50% of cancers can be prevented by changes in lifestyle, and also that the other four factors can play a role in cancer development. Results from the research have generated a similar result.

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

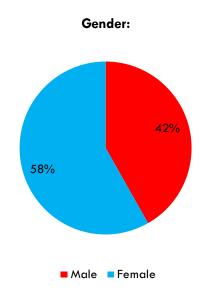


Demographics

The following charts show the profile of respondents.



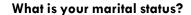
The chart above shows respondents broken down by age.

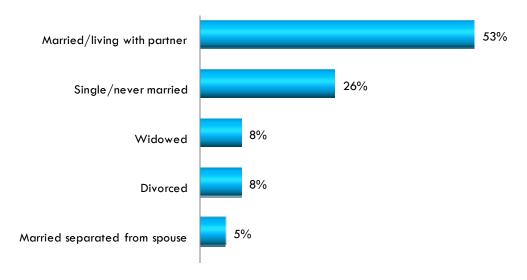


The chart above shows 58% of the sample were female and 42% male.

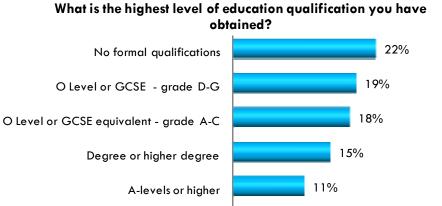


21





The chart above shows respondents by marital status. Over half of the sample (53%) were married/living with partner and 26% single/never married.



7%

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

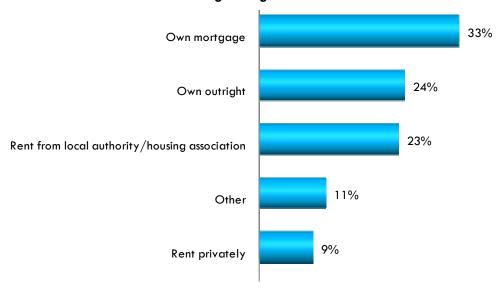
Other

ONC/BTEC

Higher level education qualification below degree level

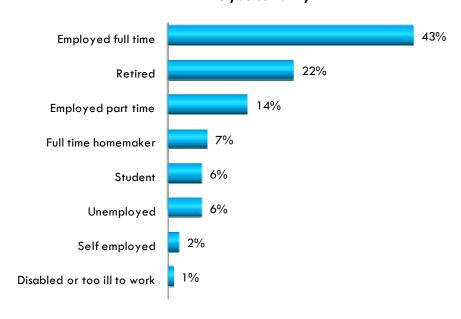


Please can you tell me which of the following best describes your living arrangements:



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

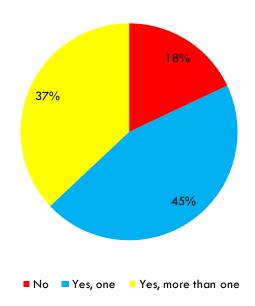
Are you currently:



The chart above shows respondents by current employment.

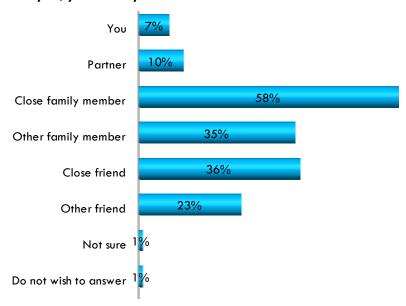






The chart above shows that 82% of the sample owned at least one car.

Have you, your family or close friend had cancer?



Respondents were asked if they, a family member or a close friend had cancer. 7% of respondents stated that they had cancer and 10% their partner. Over half of the sample (58%) stated that a close family member had cancer.

96% 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. Family history 4. Sexual importance 5. Headaches 6. Hot areas of the body

4 skin changes in colour

5 skin discolour

Aches

Any change in body appearance at all

Backache, Yellowing of skin

Blemishes

Bloated abdomen

Blood in urine and headaches

Breast changes, weeping nipple

Breast, testicular

Breathing (4)

Breathing Problems / Congestion / Swollen Tongue

Cervical smear results

Change in breast size

Changes in moods

Colouring in skin change

Depression

Discharge from breast

Drowsiness, dizziness

Exposure to radiation

Fainting and dizziness

Flu symptoms

Flu symptoms

Going yellow

Hair loss (6)

Headache (6)

High blood pressure

Jaundice (2)

Liquid from breast

Loss of memory/confusion

Mouth Ulcers

Obstruction/ Skin Colour

pale colour, bloodless

Shadows on the lungs

Shortness of breath

Shortness of breath and headaches

Skin colour (5)

Smear test

Sores and scabs

Stomach problem, yellow colour

Sweating

Tenderness

Thirst, abdominal bloating



Trouble breathing and discolour to the skin Tummy pain and chest pain Warts Water Infection

Q5 - Barriers to help-seeking - OTHER

I am just generally fed up of doctors visit as it takes over as you get older, with anything serious I would contact doctor in a few weeks

I look after Grandchildren and cannot get the appointment

I think that there may be too much scope in terms of the doctor and the receptionist may also put me off going to the doctor

If I cannot understand what he says

If I cannot understand what he says to me

Kids come first

Language barrier

Language barrier

Lots of symptoms aren't cancer for example a pain could easily be a strain which could take a few weeks to go My doctor has retired and I haven't signed up with a new doctor yet

My doctors change you never get to see the same one

My English is not always of great understanding

Need somebody to come with me and that's not always possible

Our surgery has multiple doctors and you never see the same one. Lots seem to leave or they seem a very young surgery so I don't have a lot of confidence in them

Prefer to see an English doctor

Prefers female doctors

Sometimes the doctor is from foreign origin and it is difficult to understand what he is saying

The British NHS survey

The doctors surgery is often engaged

The weather can put me off

There have been no appointments available at the doctors

There is no woman doctors at my surgery and also I have to see a different person every time and it is difficult to understand as I have not got a clue as to what they say as they are all foreign

They are not English doctors and it is difficult to comprehend the answers

We have a miserable receptionist at our doctors

Q9 - What do you think is the most common cancer in woman OTHER

Infection untreated

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

Bone



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

Bone (5)

Lumps

Squamous

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

Thyroid

Lump

Bone (4)

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

Bone (8)

Hodgkinson

Spinal

Ulcer that turns bad



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			

Q3	RESEARCHER TO PROMPT WITH SHOWCA			-			_	-				544
	If you noticed an <u>unexpected lump or</u> <u>swelling</u> how soon would you contact your	<i>A</i>	В		D	<i>E</i>	F	G	Н			
	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 change in bowel or bladder habits how soon would you contact your doctor to make an appointment to discuss it?											
	If you had <u>difficulty swallowing</u> how soon would you contact your doctor to make an appointment to discuss it?											
	If you noticed a change in the appearance 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?											
Q4	RESEARCHER TO PROMPT WITH SHOWCA If you had a symptom that you thought mig appointment to discuss it:											
	A B C D	E		F [G		н [] /		J [DF	<
Q5	RESEARCHER TO PROMPT WITH SHOWC/ seeking help. Sometimes people put off go serious. These are some of the reasons per the doctor?	ing to ople g	see the	docto	r, even w	hen th you sa	ey have ay if any	a symp	tom tha e might	at they the put you	ink cou	ıld be ng to
	I would be too embarrassed				ĺ]			
	I would be too scared		Ħ.]		一一	
	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 HF		Having	many sexual par	tners
Exposure to another person's		nh exercise/physical		HRT/the (contrac	ceptive) pill .
cigarette smoke (passive smoking)	activity			ear power lines	
Drinking alcohol	Diet (unspecified	d)	Pollution	n	
Not eating enough fruit and vegetables	A high fat diet			on	
Eating red or processed meat	A low fibre diet		Stress		
Being overweight	Food additives				
Getting sunburnt/exposure to the	Being underweid	ght			
sun					
Older age Family history/having a close relative with cancer/hereditary	Infection with vir	uses (unspecified/	□ Don't kr	10W	
RESEARCHER TO PROMPT WITH SHO increase the chance of getting cancer. cancer?					
Smoking any cigarettes at all					
Exposure to another person's cigarette smoke					
Drinking more than 1 unit of alcohol a day unit of alcohol is one small measure of spirits, half a pint of lager (3-4% strength, half a small glass (175ml) of wine (12% strength)(• •				
Eating less than 5 portions of fruit and vegetable a day (a portion is equivalent t apple, orange, banana or similar sized fruit, handful of grapes or berries, one tablesp of raisins, two serving spoons of cooked vegetables, beans or pulses, or a desser bowl of salad)	uit, 2 a oon				
Eating red or processed meat once a day more (Processed meat includes bacon, h salami, corned beef, sausages)					
Being overweight (BMI over 25)					
Getting sunburnt more than once as a ch	nild				
Being over 70 years old					
Having a close relative with cancer (a clorelative means parents, children, brothersisters)					
Infection with HPV (human papillomaviru	rs)				
Doing less than 30 minutes of moderate physical activity 5 times a week (moderate physical activity includes anything that le	te eaves				
you warm and slightly out of breath such brisk walking, gardening, dancing or housework)					



	Most Common	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 p	orogrammes		
		_		
Q10	The next set of questions is about NHS screening programmes		5	5.4.4
	Is there an NHS breast cancer screening programme?	No	Don't know	Refused
	If yes, at what age are women first invited for breast cancer screening?			
	Is there an NHS cervical cancer screening programme (smear tests)? If yes, at what age are women first invited for cervical cancer screening?	No	Don't know	Refused
	Is there an NHS bowel cancer screening programme? If yes, at what age are people first invited for bowel cancer screening?	No 🗀	Don't know	Refused



1			
<i>23</i>			
4			
5			
	Demo	graphics	
We would now like to ask you a few	questions about yours	elf to ensure we spea	k with a cross section of the popul
What is your age?			
16 to 24 25 to 34	35 to 44	45 to 54	55 to 64 65+
70 10 24	33 10 44	43 10 34	35 10 04
RESEARCHER PLEASE RECORD EXA	ACT AGE BELOW:		
RESEARCHER TO PROMPT WITH SH	OWCARD G - Which of	those best describes	vour othnia group?
WHITE - White British			BRITISH - Pakistani
WHITE - White Irish	=		
	=		BRITISH - Bangladeshi BRITISH - Any other Asian
WHITE - Any other White background			
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			K BRITISH - Any other black
MIXED - Any other mixed background		background	
ASIAN OR ASIAN BRITISH - Indian		Chinese	
		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			
Degree or higher degree	ONC/BTEC		Other (Please state below)
Higher level education qualification below degree level	O Level or GSCE 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	ollowing best describe	s vour living arrangem	nent:
Own outright	Rent from Local		Squatting
	Authority/Housing	Association	Other (i.e. living with
Own mortgage	Pont privately		family/friends)



Q19	What is your telephone number, again for verification purposes?
Q20	What is your pastands?
Q20	What is your postcode?
Q21	Are you currently: Employed full-time
Q22	Please state the occupation of the main wage earner in the household? (IF RETIRED: Please state the occupation before retiring)
Q23	Does your household own a car or van? No
Q24	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' PLEASE PROBE FOR EXACT NUMBER OF YEARS)
	Less than 5 years 11 to 20 years 31 to 40 years 51 to 60 years 5 to 10 years 21 to 30 years 41 to 50 years 61 years +
Q26	What is the main language spoken at home? English
Q27	Do we have permission to pass on your details and responses direct to Kent and Medway Cancer Network or would you prefer to remain anonymous?
	Happy for responses to be passed on
	archer Note - Please thank the respondent and close the interview. Please give the respondent a leaflet as provided in your search pack. If the respondent has any queries about symptoms that they have experienced or risk factors that they are concerned about, please advise them to speak to their GP.
Q28	· · · · · · · · · · · · · · · · · · ·
Q29	SEG (RESEARCHER TO CODE) AB



Q30	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	27%	22%	32%	12%	5%	2%	1%	0%	0%	0%
Persistent unexplained pain	17%	22%	32%	17%	8%	3%	1%	1%	0%	0%
Unexplained bleeding	28%	22%	24%	16%	7%	2%	1%	0%	0%	0%
Persistent cough or hoarseness	9%	12%	26%	27%	13%	7%	3%	1%	1%	1%
Persistent change in bowel or bladder habits	14%	22%	29%	17%	11%	4%	2%	1%	0%	0%
Persistent difficulty swallowing	16%	21%	27%	18%	10%	4%	2%	1%	0%	1%
Change in the appearance of a mole	23%	20%	25%	15%	10%	4%	2%	1%	0%	0%
Sore that does not heal	13%	19%	29%	19%	12%	4%	2%	0%	0%	0%
Unexpected weight loss	12%	18%	27%	17%	15%	5%	4%	1%	0%	0%

(Table 1)

