

# ANSWER CANCER

MID-YEAR 3  
SUMMARY



## Introduction

**Answer Cancer (AC)** is the working name of the Greater Manchester Cancer Screening Engagement Programme.

We provide a coordinated cancer screening awareness and engagement programme across Greater Manchester, focussing on priority areas and communities, using a diverse range of approaches.

AC is funded through NHS England on behalf of the Greater Manchester Health and Social Care Partnership. Initially this was for 3 years (2019 to 2022).

An additional year has now been commissioned.

## Priority Areas

In Year 3, AC focussed delivery on areas which have seen the lowest proportional rates for uptake of breast, bowel cancer and cervical screening in Greater Manchester.

**The priority localities are:**

- Manchester
- Salford
- Bolton
- Oldham
- Heywood, Middleton, and Rochdale

## Target Populations

To prioritise resources, engagement is focussed towards those communities and groups who experience the greatest barriers and inequalities.

### **Target populations included:**

- BAME groups
- Carers
- Disabled people
- People with mental health conditions
- Lesbian, gay, bisexual, and transgender communities

## AC Champions

AC Champions are a growing movement of people working together to raise awareness of cancer and cancer screening.

In total, 66 new AC Champions have signed up in Year 3 (April – September 2021).

### Breakdown of new recruits at mid-point Year 3

Quarter 1	Quarter 2
34	32

## AC Champions

Following sign-up, all new AC Champion recruits are redirected on to an equal opportunities monitoring page.

A profile of new recruits can be established based on the data completed by this sample.

- More **women (71%)** than **men (28%)** signed up
- **Aged between 18 - 74 years**
- **29% Asian or Asian British** and **7% were Black or Black British, 60% White, 5% Arab (North African / Middle Eastern)**
- **28%** advised they had **caring responsibilities**
- **90%** described themselves as **heterosexual, 2% bisexual, 2% lesbian/gay woman, and 2%** self-described as **Pansexual**
- **21% reported that they had a form of disability**
- The following religions were represented (in alphabetical order): **Buddhism, Christianity, Hinduism, Judaism, Islam, and Sikhism**
- Sign-ups occurred from 6 Greater Manchester based localities (Bolton, Bury, Manchester, Oldham, Stockport, and Wigan)

## AC Champions

### Activities include:

- Raised awareness of cancer and cancer screenings, promoted AC Champions at multiple Pride events in Greater Manchester
- One AC Champion initiated cancer awareness work with women through the Bolton Council of Mosques. The campaign aimed to reach 33,000 Muslims from 'seldom heard' communities in Bolton
- An essay was co-produced by 4 young AC Champions, with trans ambassador Eva Echo, into the barriers of cancer screening for trans and non-binary people
- AC Champions from Rochdale Gateway Leisure ran a successful awareness session around bowel cancer and co-designed a leaflet about the signs and symptoms of cancer and purpose of cancer screening
- AC Champions contributed towards an awareness raising session at the Manchester Deaf Centre

## Lead AC Champions

Lead AC Champions play a more active role. Thirty three diverse individuals registered.

In total, 33 new Lead AC champions have signed up in Year 3 (April – September 2021).

### Breakdown of new recruits at mid-point Year 3

Quarter 1	Quarter 2
15	18



## Lead AC Champions

A profile of the Lead AC Champions can be established based on equal opportunities data that was obtained from a sample of the new Lead AC Champions.

- More **women (68%)** than **man (30%)** signed up
- A total of **73% were White, 9% Black or Black British, 14% Asian or Asian British, and 5% mixed ethnicities**
- Lead AC Champions were aged 18-74 years. **The most common age groups were 55–64-year-olds and the 65-74-years-olds (both 28%)**
- **55%** of people advised they had **caring responsibilities**  
**86%** described themselves as **heterosexual, 5% gay men, 5% lesbian/gay woman**
- **28% reported a disability**
- The most popular religion was **Christianity (50%)**
- **5% Hindu, 5% Jewish, 14% Muslim**
- **23%** of people advised they **did not have a religion**
- Sign-ups occurred from 5 of the 6 priority locations (Oldham was the exception)
- Sign-ups were evident from areas associated with levels of inequalities

These statistics suggest that there is a wide group of different Lead AC Champions, and the programme is inclusive.

## Lead AC Champions

Activities include:

- Involvement with the AC Stakeholder Collaborative events in Year 3, including presenting their personal stories
- South Asian Greater Manchester Cancer Champions group organised community events for bowel and ovarian cancer awareness
- Involved in content creation for social media
- Developed and broadcast radio programmes which promoted positive cancer screening messages

## Organisational AC Champions

We have continued to establish relationships and commitments with Greater Manchester based organisations.

There are 163 Organisational AC Champions, with 16 new organisations signing up in Year 3.

This number is expected to increase following the launch of the grants round. Evaluation activities are planned to take place with a sample of the Organisational AC Champions in Year 3, to explore what activities they have been involved in.

### Locality breakdown up to the end of Quarter 2

<b>Bolton</b>	<b>18</b>	<b>Stockport</b>	<b>12</b>
<b>Bury</b>	<b>5</b>	<b>Tameside</b>	<b>6</b>
<b>Manchester</b>	<b>64</b>	<b>Trafford</b>	<b>12</b>
<b>Oldham</b>	<b>7</b>	<b>Wigan</b>	<b>6</b>
<b>Rochdale</b>	<b>17</b>	<b>Outside GM</b>	<b>4</b>
<b>Salford</b>	<b>16</b>		

## **Primary Care Networks**

AC is partnering with 5 to 7 Primary Care Networks (PCNs) to deliver collaborative projects.

These will aim to increase screening uptake in areas, and communities of identity where the need is greatest. This follows the successful pilot with the Robert Darbishire PCN to increase uptake of cervical screening, which concludes in Quarter 4 of Year 3.

We will work with PCNs to co-design interventions, projects and initiatives that make the most of resources and opportunities. AC therefore anticipates a healthy variety of approaches with different PCN partnerships.

## AC Grants

The grants programme aims to support Greater Manchester based organisations to increase cancer screening rates amongst under-represented groups in their communities.

Round 3 of the redesigned grants programme was launched in Quarter 2.

- Forty-eight expressions of interest were received from voluntary and community sector enterprise (VCSE) organisations
- Twenty-six organisations were short-listed to complete full applications
- Twenty organisations were awarded grants. Research and evaluation activities will take place with the grant recipients across the span of their project

## AC Grants

Changes to previous grants rounds included:

- An offer of grants worth up to £5000 to focus on awareness raising
- Stronger engagement with target communities regarding key screening and early diagnosis messages
- A named AC worker for each organisation to offer support across the grant activity, and to link organisations into other aspects of the wider programme

## **Spot Purchasing Grants**

Spot purchasing grants are a distinct form of funding that is offered to VCSE organisation.

The funding aims to address specific needs within communities, such as gaps in current engagement. Approaches and activity are developed to respond to these identified through collaboration. Organisations with expertise to meet these needs are eligible for funding up to £10,000.

For the initial funding that took place between years 2 and 3, AC identified a need to engage with specialist community organisations via the BME Cancer Partnership.

## Spot Purchasing Grants

The following organisations were funded:

- Faith Network for Manchester (FN4M)
- Europia
- Voice of BME Trafford (VBMET)
- Wai Yin Society
- NESTAC
- Friends of Dorothy
- Gaydio
- Girl Gang Manchester
- Rochdale Gateway Leisure
- Rochdale Welfare Women's Association

Evaluation activity around the spot purchased funding commenced in Year 3, aiming to explore the impact the funding has had for the organisations and whether the community needs were addressed. Findings from the evaluation will be reported in the end of year AC report.



## AC Training

The training offer was delivered remotely to individuals and groups.

New training sessions were developed and delivered in Year 3, alongside original core training e.g:

- Cancer Signs and Symptoms
- NHS Cancer Screening Programmes
- Cancer Facts and Myths
- The Whole Works
- Community Researcher Training
- How to Run Brilliant Awareness Sessions
- Fun approaches to community engagement
- LGBT Health Awareness and Best Practice

## AC Training

In total, 339 people attended training and 22 different training sessions were held up to the mid-point in Year 3.

Training participants came from across Greater Manchester, with most participants from Manchester (see below).

**Training participants came from across Greater Manchester, with most participants from Manchester**

<b>Bolton</b>	<b>16</b>	<b>Stockport</b>	<b>28</b>
<b>Bury</b>	<b>9</b>	<b>Tameside</b>	<b>18</b>
<b>Manchester</b>	<b>121</b>	<b>Trafford</b>	<b>5</b>
<b>Oldham</b>	<b>25</b>	<b>Wigan</b>	<b>12</b>
<b>Rochdale</b>	<b>21</b>	<b>Outside GM</b>	<b>65</b>
<b>Salford</b>	<b>19</b>		

## AC Training

A profile of the those attending training can be established based on equal opportunities data that was obtained from a sample of training participants.

- More **women (73%)** than **men (25%)** attended training
- **65% of attendees were White, 12% Asian or Asian British, 7% were of Mixed ethnicities, 5% Black or Black British and 4% Arab – North African/Middle Eastern, other ethnicities (6%) were recorded as Chinese, Japanese, and Kurdish**
- **The attendees were aged 18-84 years, the most common age group was the 35–44-year-olds and the 45-54-years-olds (both 24%)**
- **29% of people advised they had caring responsibilities**
- **21% reported a disability**
- **The following religions were represented (in alphabetical order): Christianity, Hinduism, Judaism, Islam, Sikhism and other, described as “Kabbalist”**

# AC Training

Evaluative polls were used to assess changes in knowledge levels, understanding and confidence, pre to post training sessions.

**Average percentage increase from pre to post training**

	Knowledge	Confidence	Understanding
Facts and Myths	30%	32%	19%
NHS Cancer Screening	34%	53%	60%
Signs and Symptoms	28%	38%	24%
The Whole Works	64%	125%	58%

## AC Training

All training attendees are asked to complete a plan which they carry out in their community or workplace using the knowledge and resources gained from training.

At the end of each quarter, 100% of people who completed a plan and provided consent to be contacted, were followed up by members of the AC team. **Analysis of the follow up plans revealed that 52% completed their plans and 28% of respondents advised that they exceeded their plans.**

### Plan Completion Rates

Exceeded	28%
Completed	52%
Mostly	12%
Partially	16%
No	4%

## AC Training

The short summary of themes and quotes demonstrates some of the outcomes of training. Overall, the follow-up plans demonstrate evidence of 'learning into practice.':

### Confidence

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"Training has given me the skills to confidently talk about cancer... I've seen my confidence improve generally as well."

### Encouraged screening uptake

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"Clients who were eligible for accessing screening programmes, opted to contact their GP about the screening programmes as they had not previously engaged. This was after we had discussed the benefits of screening programmes."

## AC Training

### Self-care

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"I've improved my diet and logging my exercises."

### Awareness raising

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"I have completed a training session to Practice Nurses within the local district raising awareness of the National breast screening programme."

### Screening uptake

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"I finally did by breast screening."

## AC Communications

Key achievements in Year 3 so far include:

- AC has gained considerable exposure via social media, with its content being viewed nearly 100,000 times in total across all channels
- Signposting audiences to reliable health information on AC's platforms or to trusted partner websites
- Original and new content has been produced and added to the AC websites and other platforms throughout the year
- Key messages are being shared via the AC websites [answercancergm.org.uk](https://answercancergm.org.uk) and [cancerchampionsgm.org.uk](https://cancerchampionsgm.org.uk) , Twitter, Facebook, Instagram, and YouTube
- Awareness raising toolkits were released in Year 3. The downloadable toolkits are designed help people and groups raise awareness of cancer screening. They have been designed to be informative, fun, and easy to use. The resources have been grouped into the different screening types, plus a general section. Each resource includes suggestions about ways you can adapt it, and ways to evaluate



## AC Communications

Overall, we are steadily increasing our online and social media presence in Year 3.

A library of content has been created throughout Year 3 and uploaded on to the dedicated AC YouTube Channel. Examples include:

- April Stakeholder Collaborative event which focused on bowel cancer
- July Stakeholder Collaborative event which focused on LGBTQ+ health awareness
- A series of short videos for Bowel Cancer Awareness Month
- The Cancer Squad, which focused on introducing the programme
- MMU and AC LGBTQ+ Cancer Awareness session, hosted by students from MMU.

## Community Engagement and Awareness

A combination of face-to-face and remote engagement activities took place throughout Year 3. Key achievements up to end of Quarter 2 include:

- Outreach work has taken place with 10 mosques from across Greater Manchester. Over 500 information packs were distributed to mosques during Ramadan 2021 (April to May). These contained dates and information leaflets on cancer screening in English and other languages
- 7 x information stalls were held at community hubs and outdoor markets and 5 x face-to-face engagement sessions. In total, these reached 418 people
- 15 x virtual awareness sessions were held. These reached 411 people
- Communities were engaged via radio
- The newsletter EngageGM has been widely circulated to community groups across Greater Manchester each month. The newsletter contains cancer service updates, general health and wellbeing messages, funding opportunities, AC training and event information, and case studies
- Over 3000 AC multi-language leaflets detailing cancer screening information has been distributed via food distribution channels

## Community Engagement and Awareness

A profile of the people who attended the community engagement and awareness sessions can be established based on the sample who provided equal opportunities data.

- **88%** of attendees were **women** and **9%** were **men**
- **2%** advised that their **gender identity was different from the gender they were assigned at birth**
- **55%** of were **White**, **17%** **Asian or Asian British**, **12%** **Black or Black British**, **2%** **Arab (North African or Middle Eastern)** and **5%** **Mixed ethnicity**
- Engagement took place with **people aged 18-85+ years**, **36%** of people were aged **45-54 years**, which represents the most engaged age group
- **43%** advised they **had caring responsibilities**
- **88%** were **heterosexual** and **7%** **bisexual**. Others preferred not to provide an answer
- **43%** of respondents advised they **had a disability**
- **38%** of respondents were **Christian**, **19%** **Muslim**, and **36%** **had no religion**

# Community Engagement and Awareness

Zoom polls were used to evaluate the online Engagement and Awareness Sessions, assessing level of knowledge of the 3 NHS screening programmes, willingness to attend a cancer screening appointment, and confidence at spotting bodily changes that might need urgent GP attention.

## Community Engagement and Awareness Poll Results

Poll results from Year 3's online engagement and awareness sessions		Statement Agreement level: A = Agree		
		Increased knowledge of the 3 NHS screening programmes	Increased willingness to attend a cancer screening appointment	Increased confidence at spotting bodily changes that might need urgent GP attention
Attendees				
Female	132	<b>A = 138</b> <b>% = 89</b>	<b>A = 131</b> <b>% = 84</b>	<b>A = 139</b> <b>% = 90</b>
Male	16			
Unknown	163			
<b>Total</b>	<b>411</b>			

## Community Engagement and Awareness

Knowledge around cancer, willingness to attend cancer screening, and confidence around recognising bodily signs regarding cancer symptoms improved after the session.

From field work, the engagement team were able to collect case studies. The case studies identified barriers to screening uptake and were based on peoples' lived experiences.

### **Examples of the barriers reported included:**

- Insufficient knowledge about screening
- Accessibility issues
- Fear of cancer diagnosis
- Language limitations
- Confusion

## **Community Engagement and Awareness**

Some quotes attributed to these barriers are provided below:

### **Insufficient Knowledge about Screening**

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“I check myself regularly so don’t need to go.”

“I have received this in the post but didn't understand what it was or what to do with it. Unfortunately, I don’t know where it is now.”

### **Fear of Cancer Diagnosis**

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“The fear of knowing you have a terminal disease is what puts people off. Most people feel better not knowing.”

# Community Engagement and Awareness

## Language Limitations

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“If this is explained clearly in the letters, I am sure more people will go.”

## Confusion

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“I am 51 and have never received an invitation but my younger sister living outside Manchester has already had her first appointment. Not sure what they are doing here...”

The data collected via the case studies highlight the barriers that people are facing in accessing cancer services and cancer screening services. Future evaluation will focus on collecting data on peoples' experiences of the NHS Screening System (when they are invited for a cancer screen).

The aim will be to identify what is working and what could be done better. The results and themes from the case studies (analysed via thematic analysis) will then be reported back into the service planning and commissioning systems.

## **Final Comments**

AC would also like to thank all of the people that have engaged with AC in Year 3.

We are grateful for the time given generously. This has led to many learning opportunities for us as we move into Quarter 3 and Quarter 4.



# Thank you

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