

ShowCase

Breast Aware

Topic: Cancer

Organisation: NHS Tameside and Glossop;
Tameside Metropolitan Borough Council

Location: Tameside (North West)

Dates: January 2008 to April 2010

Website: www.breastaware.net

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Overview

This project, which was jointly funded by NHS Tameside and Glossop and Tameside Metropolitan Borough Council (MBC), aimed to increase early cancer detection and reduce late presentations and death rates of breast cancer by encouraging women aged 35 to 50 to be breast aware.

Following an extensive scoping stage, a strategy was developed that incorporated communication, community-based and service-led initiatives. Interventions were piloted between February and April 2010 in Ashton Hurst, which is one of the most deprived communities in Tameside and has particularly low breast cancer survival rates.

Key results

- Increased awareness of the range of breast cancer symptoms to look out for and confidence in how to self-examine
- Disappointingly, the campaign did not achieve an increase in women examining their breasts at least once a month (as recommended by the NHS)
- 40 per cent awareness of the campaign, which made women clearer about what is normal for them and changes to look for
- The well-women event was the most well attended community event the Primary Care Trust/Council had ever held in the area

1. BEHAVIOUR

- Increase the number of women aged 35 to 50 in Ashton Hurst who are aware of their breasts and who examine them regularly

2. CUSTOMER ORIENTATION

- Desk-based research
- Focus groups and paired interviews with women
- Interviews with key stakeholders
- Concept-testing and pretesting

3. THEORY

- **Health Belief Model:** Individuals carry out health-related behaviours based on perceived susceptibility and severity, perceived benefits and barriers, perceived efficacy and cues to action

4. INSIGHT

- Nearly half of women surveyed do not examine their breasts at least once a month
- Most women check for lumps, but unaware of other changes to look out for
- Most women had not been offered breast awareness advice in their GP surgeries
- GPs and practice nurses understand what it means to be breast aware, but are not aware of breast awareness five-point code
- Practice nurses seen as most appropriate professional to give breast awareness advice

5. EXCHANGE

Barriers:

- Lack of knowledge of symptoms
- Lack of confidence in ability to self-examine
- Fear of finding breast cancer
- Do not believe they can make a difference to the outcome
- Do not want to bother their GP

Solutions:

- Promote clear and consistent advice on breast awareness
- Emphasise flexibility and ease of becoming breast aware
- Promote message that breast awareness can save your life
- Training and engagement with health and community workers around breast awareness

6. COMPETITION

- Busy lives
- Other more pressing health issues
- Other breast cancer messages in the media

7. SEGMENTATION

- 35- to 50-year-old women
- Living in Ashton Hurst
- From DE socioeconomic groups
- Do not or might not check their breasts
- Least likely to present to a health professional if detect an abnormality, or only present if a lump is detected

8. METHODS MIX

- Communication – Poster advertising; leaflets; direct mail; PR; website
- Community-based – Community 'champions'; local breast aware event
- Service-based – Breast awareness training for health and community workers