



OLLSCOIL NA GAILLIMHE
UNIVERSITY OF GALWAY



Title: How to improve participation in colorectal cancer screening? Insights from a literature review and workshops with key stakeholders

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Executive summary: Colorectal cancer screening aims to detect abnormalities or early stage disease before any symptoms have developed, so that timely diagnosis and early treatment can be offered. However, screening participation remains low in Ireland. As part of the CReation of an Innovative inTervention for Improving ColorectAL cancer Screening (CRITICALS) project, two studies were performed to find ways of improving participation in the screening programme:

(1) A systematic review of the qualitative literature to explore reasons for non-participation in colorectal cancer screening;

(2) Workshops with key stakeholders to select strategies to address the most important reasons for non-participation.

Targeted strategies to address each of three categories of barriers to screening were identified:

- 1) Raising awareness and using prompts to action (e.g. awareness campaigns, tips to remind people to use the screening kit) to target ambivalence towards screening (i.e. not participating despite positive attitudes or intentions).
- 2) Providing reassurance on the process of screening to acknowledge and overcome the negative emotions and cultural taboos associated with screening procedures.
- 3) Using recommendations, including those from healthcare professionals, to highlight the benefits of screening and target practical barriers.

These strategies are included in a newly designed invitation letter and information leaflet that is currently being pilot tested.

Why is this research important?

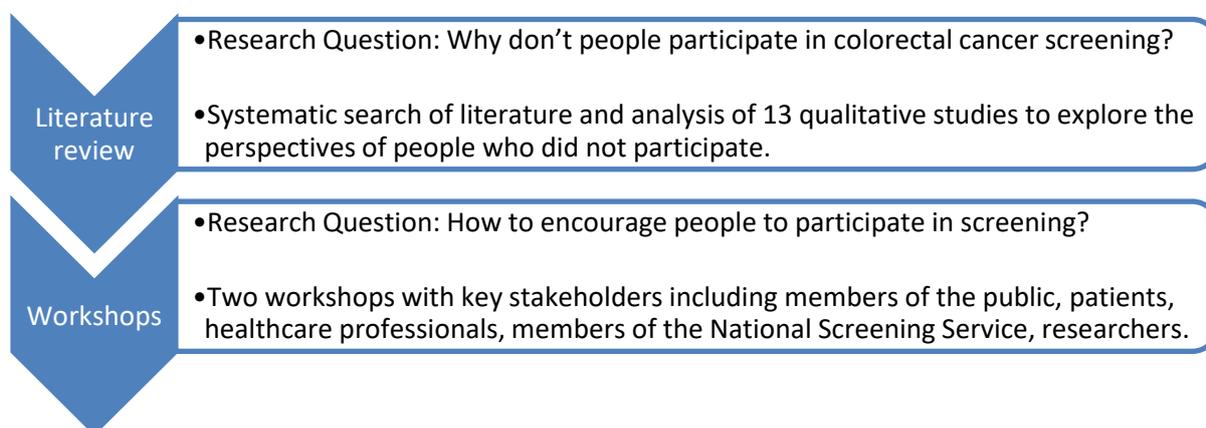
Colorectal cancer is one of the most commonly occurring type of cancer worldwide. If colorectal cancer is diagnosed early, people can be treated more successfully and have better outcomes. Screening can be an effective way of reducing the risk of bowel cancer by detecting abnormalities or early stage disease before any symptoms have developed, so that timely diagnosis and early

treatment can be offered. The screening test involves collecting a small sample of stool and sending it by Freepost for analysis in a laboratory. In Ireland, men and women aged 60 to 69 are invited to participate in the bowel screening programme every two years. However, of those who are invited to take part in screening in Ireland, only 41.9% take part.

What is the project?

The CReation of an Innovative inTervention for Improving Colorectal cancer Screening (CRITICALS) project aims to improve colorectal cancer screening uptake to improve patient outcomes. This project is led by Dr Alice le Bonniec and researchers from the University of Galway, in collaboration with the National Screening Service, and is funded by the Irish Cancer Society. Each step of the project is informed by the input of members of the public, screening participants, and healthcare professionals, who are key project contributors.

What methods were used?



What are the main findings?

Results from the literature review and recommendations developed during the workshops are summarised in the table below. The results have been used in a redesigned invitation letter and information leaflet that is currently being pilot tested among people newly invited to participate in screening.

Results of the literature review: Why don't people participate in colorectal cancer screening?	Recommendations from the workshops with key stakeholders: How to encourage people to participate in screening?
<p>Ambivalence towards screening:</p> <ul style="list-style-type: none"> ● A lack of awareness and knowledge about colorectal cancer and screening in general is often expressed by non-participants. ● People generally think colorectal cancer screening is a good thing but they may feel that they don't need to get screened because they are not at risk of getting cancer (i.e. they have no symptoms). ● Non-participants might have the intention to take part in the screening programme but tend to postpone and finally forget. 	<ul style="list-style-type: none"> ● "People don't realize how serious it is": Raising awareness of colorectal cancer, outlining that this is a serious disease and that this cancer is frequent – the second most common cancer in Ireland. Literacy needs to be considered when developing materials. ● "What's in it for me?": highlighting the benefits of screening for people who don't have symptoms. ● "From considering to doing": Help people to move from intention to action: grab attention, use prompts (e.g. tips to encourage the registration for and the completion of the test).
<p>Negative emotions:</p> <ul style="list-style-type: none"> ● Thoughts of screening can provoke understandable negative emotions such as fear (of the results of the test, of the consequences of a positive results), embarrassment, and disgust (due to the procedure required to take a sample of stool). ● People might prefer not to know their health status and to avoid cancer diagnosis. 	<ul style="list-style-type: none"> ● "Make it normal": showing that this is not embarrassing or disgusting, using experience of people "like me". ● "Don't let fear hold you back": Improving knowledge around survival of cancer (cancer not being a death sentence).
<p>Practical constraints and healthcare influence:</p> <ul style="list-style-type: none"> ● People can face practical barriers such as lack of time or having other priorities. ● A lack of recommendation from a physician, or poor relationship with healthcare professionals in general can discourage people from getting screened. 	<ul style="list-style-type: none"> ● "In your own time, when suits you": Highlighting that the screening test is easy to perform, free, quick, convenient (at home), simple, and hygienic. ● "Key role of healthcare professionals": Engaging general practitioners to recommend bowel screening to their patients in the 60-69 age bracket to enhance credibility and integrity.

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