

LCHS7000 · SOCIAL EPIDEMIOLOGY AND PUBLIC HEALTH DEVELOPMENT

Screen Smart, **Live Longer**

"Don't Wait. Screen Today. Live Tomorrow."

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WHO

Adults Aged 50-74



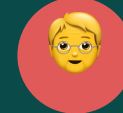
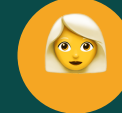
WHAT

Bowel Cancer Screening



WHERE

Community Settings



OUR POPULATION

Adults aged 50-74 in the UK
eligible for NHS bowel screening

~14 million

people eligible across England



TARGET ACTIVITY

**NHS FIT Kit
Home Screening**

Non-invasive · Free · 10 minutes



Early detection
increases survival to

9 in 10

THE ACTIVITY

8-Week Community Screening Programme - Aims, Content & Sessions

CAMPAIGN AIMS

✓ Raise awareness of bowel cancer risk among adults 50-74

✓ Build confidence in completing the home FIT kit

✓ Increase screening uptake and reduce health inequalities

WEEKLY SESSIONS



Week 1 Bowel Cancer Awareness

What is bowel cancer? Who is at risk?
Why screening saves lives.



Week 2 FIT Kit Demonstration

Hands-on workshop showing exactly
how to use and return the kit.



Week 3 Myth vs Fact Session

Busting common misconceptions. Real
questions answered by nurses.



Week 4 Healthy Lifestyle Workshop

Diet, exercise and lifestyle factors that
reduce bowel cancer risk.



Week 5 GP & Nurse Q&A

Open Q&A with local GP and specialist
bowel cancer nurse.



Week 6 Community Health Fair

Interactive fair with stalls, resources,
demonstrations and support.



Week 7 Reminder & Follow-Up

SMS reminders sent. Social media
posts. Kit return support offered.



Week 8 Feedback & Celebration

Review outcomes, collect feedback,
celebrate participation and impact.

Source: NHS England, 2024 [1]; Cancer Research UK, 2025 [6]

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National Guidelines & Current Situation



NHS Recommends

Adults aged 50-74 should complete bowel cancer screening when invited.

WHY?

- ✓ Detects bowel cancer early
- ✓ Identifies precancerous changes
- ✓ Improves survival rates
- ✓ Reduces need for intensive treatment



Why Is Action Needed?

Unequal Participation

Screening rates remain lower in some communities, particularly those facing socioeconomic challenges.

Social Inequalities

Uptake is shaped by deprivation, ethnicity, and health literacy - factors we can directly address.

Widening Health Gap

These disparities contribute to growing health inequalities across the UK, making targeted action essential.

Sources: NHS England, 2024 [1]; UK National Screening Committee, 2023 [2]

Why Does Screening Matter?



Short-Term Consequences

- Delayed diagnosis means cancer advances unnoticed
- Increased anxiety and uncertainty about symptoms
- Missed opportunity for simple, effective early treatment
- Disease progresses silently without causing symptoms



Long-Term Consequences

- Advanced bowel cancer requiring complex intervention
- Significantly lower survival rates when caught late
- More intensive, costly and difficult treatment needed
- Increased NHS costs and reduced quality of life

Sources: NICE, 2023 [3]; Bowel Cancer UK, 2024 [4]

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OUR OBJECTIVES

Campaign Aims

01 Raise Awareness

Increase awareness of bowel cancer screening among adults aged 50-74 through an engaging 8-week community education campaign.

02 Build Confidence

Improve participants' confidence in completing the home screening kit through hands-on demonstrations and personalised support.

03 Drive Action

Encourage more eligible adults to return their completed kits - converting awareness into action and measurably increasing participation.

EXPECTED BENEFITS



Increased Knowledge



Greater Confidence



Improved Uptake



Earlier Diagnosis



Reduced Inequalities

CAMPAIGN POSTER

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"Don't Wait. Screen Today. Live Tomorrow."



Venue

Local Community Centre



Duration

8 Weeks

FREE

Cost

Free Community Workshops



Support

GP & Nurse Support



Learn

How to Use the NHS FIT Kit



Info

QR Code → NHS Screening Info

FREE · CONFIDENTIAL · EASY HOME TEST

COLLABORATION

Working Together to Improve Uptake



Local Partners

- Local Council Public Health Team
- GP Practices
- Community Pharmacies
- Community Centres
- Faith & Cultural Organisations



National Partners

- ✓ NHS England
- ✓ Bowel Cancer UK
- ✓ Cancer Research UK

RESOURCES & TOOLS

▶ FIT kit demonstration

▶ Information leaflets

▶ Educational videos

▶ QR code links

▶ SMS reminders

▶ Multilingual materials

Source: St George's NHS Foundation Trust, 2024 [5]

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How Will We Evaluate Success?



Process Evaluation

Did the campaign happen as planned?

✓ Workshops delivered on schedule

✓ Attendance records maintained

✓ Leaflets and materials distributed



Impact Evaluation

Did knowledge and confidence improve?

✓ Pre/post questionnaires completed

✓ Confidence scores recorded

✓ Participant feedback collected



Outcome Evaluation

Did screening behaviour change?

✓ FIT kits returned and tracked

✓ Screening participation measured

✓ 8-week follow-up survey conducted

Resources Adapted from Successful Campaigns

Organisation	Resource Used	How We Adapted It
NHS England	FIT kit guidance	Live demonstration workshop for community participants
Bowel Cancer UK	Patient stories	Community awareness sessions - real voices, real impact
Cancer Research UK	"Be Clear on Cancer" messages	Social media campaign using clear, trusted messaging
Local Council	Community health events	Weekly educational workshops in accessible local venues

Source: Cancer Research UK, 2025 [6]

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UK Bowel Cancer: The Facts

4th

Most common cancer in the UK - ~49,000 new cases every year

2nd

Biggest cause of cancer death in England

66-71%

Current UK screening uptake - our campaign aims to raise this further

40%

Of all UK cancer cases are considered preventable

Source: Cancer Research UK, 2026 [7]

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Health Belief Model: What Influences the Decision to Screen?

Perceived Susceptibility

Personal belief about risk of getting bowel cancer

Self-Efficacy

Confidence in ability to complete the FIT kit

Perceived Severity

Belief about how serious bowel cancer is if untreated

Cues to Action

Triggers that prompt screening - NHS letter, GP advice

Perceived Benefits

Belief that screening will lead to a positive health outcome

Perceived Barriers

Factors that prevent screening - embarrassment, fear, forgetting

Sources: Lau et al., 2020 [11]; Khormi, 2025 [12]

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Three Frameworks That Explain Screening Barriers

Health Belief Model (HBM)

HOW IT EXPLAINS BARRIERS

- ▶ Low perceived risk of bowel cancer
- ▶ Fear of a positive diagnosis
- ▶ Embarrassment during stool test
- ▶ Poor knowledge of screening benefits
- ▶ Lack of confidence completing FIT kits

Theory of Planned Behaviour (TPB)

HOW IT EXPLAINS BARRIERS

- ▶ Negative attitudes towards screening
- ▶ Family or cultural beliefs discourage testing
- ▶ Low confidence in completing the test
- ▶ Belief screening is unnecessary without symptoms

Social Cognitive Theory (SCT)

HOW IT EXPLAINS BARRIERS

- ▶ Limited self-efficacy
- ▶ Lack of role models who have screened
- ▶ Poor social support networks
- ▶ Low health literacy in the community

Sources: Aguiar-Ibáñez et al., 2025 [9]; Gunwamba et al., 2023 [10]; Sadeghi et al., 2024 [14]

Individual Solutions Based on the Health Belief Model

Individual Challenge	Campaign Solution
Low Awareness	Public education using simple, clear messages about bowel cancer risk
Low Perceived Risk	Personalised invitations explaining individual risk by age group
Fear of Diagnosis	Survivor stories and reassurance about early treatment success rates
Embarrassment	Demonstration videos showing how simple and private home FIT testing is
Forgetting to Complete	SMS reminders and GP follow-ups to keep participants on track
Low Confidence	Step-by-step instructions with pictorial guides for easy understanding
Lack of Motivation	GP recommendations and family encouragement to inspire action

Source: Pons-Vigués et al., 2021 [13]

Applying the Health Belief Model to Our Campaign

01 Increase Perceived Susceptibility

Help people understand that bowel cancer can affect anyone aged 50-74, regardless of symptoms or family history.

02 Increase Perceived Benefits

Clearly communicate how early detection leads to simpler treatment, higher survival rates, and better quality of life.

03 Reduce Perceived Barriers

Address embarrassment, fear and forgetting through demonstrations, reminders and supportive community messaging.

04 Improve Self-Efficacy

Build confidence with step-by-step FIT kit guides, videos, and peer support so participants feel fully capable.

05 Provide Cues to Action

Use NHS invitation letters, GP conversations, SMS reminders, and community health fairs as timely, trusted prompts.

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Thank You

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8-Week Campaign



Community-Led



NHS Aligned