

Abdul Mageed Education Trust – Health Information Session on Bowel Cancer Screening and Risks

On the 3 June 2024, we were invited to undertake a health awareness session hosted by the [Abdul Mageed Education Trust](#) at the Church St Library in Westminster, on bowel cancer screening and risks as part of a Cancer Awareness Communications and Engagement Project.

Background and development of the session

We were introduced to the Abdul Mageed Education Trust by one of the members of Imperial Patient Experience Research Centre (PERC) Community Partner steering group. PERC identified Ahmed Abdo, Health Promotion Specialist, West London Bowel Cancer Screening Centre, Charing Cross Hospital and Dr Rhea Harewood, a Postdoctoral researcher at Imperial as speakers.

Slides used in a previous community health literacy sessions on bowel cancer screening on risks were utilised by both Ahmed and Rhea.

Format for the session:

The session started at 12pm with the community providing light refreshments.

- NHS Bowel Cancer Screening Programme - Ahmed Abdo
- Q&A
- Bowel Cancer – Causes and Prevention - Dr Rhea Harewood
- Q&A
- Completion of feedback forms
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Aims of the session:

- Sharing health literacy information about bowel cancer screening
- Increasing awareness about risks of bowel cancer and current research into these risks

Attendees

The session was disseminated through Abdul Mageed Education Trust's communication channels and across their community networks (see more in **Appendix A**). There were 9 attendees.

NHS Bowel Cancer Screening Programme - Ahmed Abdo

During the session, the following topics were covered by Ahmed:

- What is cancer screening?
- The importance of early detection and why cancer screening is so important
- What is a polyp?
- The Bristol stool chart
- Signs and symptoms of bowel cancer

Who is screened? The tests are sent to those who are 52 years old up to 74 years every 2 years however the lower age is decreasing to 50 from 2025

- Bowel cancer statistics
- Invitation for bowel cancer screening – Faecal Immunochemical Test (FIT). It was noted that a FIT test costs £1500 to have privately and a colonoscopy costs £6000. Those having a colonoscopy can ask for a male or female doctor and a male or female interpreter.
- How to complete a FIT kit for bowel screening
- How the screening programme works
- Barriers to bowel screening
- How to complete a FIT Kit video - <https://youtu.be/Hb7euOEXEsc?si=321stxfZhutE0fsS>
- Resources and Support for patients
- Message is to highlight:
 - do not delay in taking up your screening
 - it is a free service provided by the NHS to those registered with a UK GP
 - bowel screening helps bowel cancer

Questions asked during the session to Ahmed:

- What are the side effects of colonoscopy?
 - Bleeding
- Do you have to fast before a colonoscopy?
 - Yes, from 11am the day
- Can you please explain polyps in Arabic?
- What is the difference between a colonoscopy and a camera that goes through your mouth?
 - A colonoscopy is looking at the bowel and a camera through the mouth is looking at the stomach
- What do you do if you're under 52 years and think you need a test?
 - A GP can give you a different test if you have symptoms and if the test is positive there is a two week wait for the next step
- Can a urine infection lead to bowel cancer?
- Why does the UK have so many more issues than other countries?
 - This is related to diet and sedentary lifestyle

Comments made during the session:

- I am a bowel cancer survivor, I had it in 1995. I received radiotherapy, chemotherapy and I have no rectum. I live on my own now and I'm very careful about what I eat. This test is very important

Bowel Cancer – Causes and Prevention - Dr Rhea Harewood

During the session, the following topics were covered by Rhea:

- Who is at risk?
- How can we improve screening?
- Impact
- Barriers to screening/surveillance
- What we know on causes of bowel cancer

- What causes bowel cancer?
- How common are these factors in the UK?
- What reduces chances of bowel cancer?
- How to prevent bowel cancer?
- What we know about chewing tobacco (paan, betel quid)?
- What's missing?
- We need your help!

Questions asked during the session to Rhea:

- Is white meat OK to eat?
 - For bowel cancer red and processed meat is particularly an issue
- Which ethnicity is more affected by bowel cancer?
 - White people tend to have a higher number of cases but cases are caught earlier in this group so it is easier to treat. Ethnic minorities tend to get treated at a later stage. There are more barriers to screening in black African and South Asian populations
- Are these issues related to health inequalities, screening uptake or behaviour?
 - It is health inequalities, a lack of trust, health materials, doctor's visits or exams not culturally appropriate. There is a need to advocate about this topic and there is a plan to work with underrepresented and underserved communities through PERC.

Feedback

At the end of the session, the community shared a printed feedback form with all the attendees to explore the experience of the attendees. Four responses were received. Please see the results of the feedback forms below:

Q1. Do you have a greater awareness of the importance of early detection of cancer as a result of attending the workshop?

- Yes
- Yes, being a patient in 1995
- Yes
- Yes

Q2. Do you have a greater awareness of the symptoms that could be cancer (usually aren't) that you should get checked out as a result of the workshop?

- Yes
- Yes, scan last week
- Yes
- Yes

Q.3 Do you have a greater understanding of the cancer screening process/pathway/experience as a result of attending the workshop?

- Yes
- Yes, thank you
- Yes
- Yes

Q.4 Do you think you will attend cancer screening when you receive an invitation in the future as a result of attending the workshop?

- Yes
- Yes
- Yes, I will
- Yes

Q.5 Do you think you will encourage your family members, relatives of the neighbours to attend cancer screening when you receive invitations in the future as a result of attending the workshop?

- Yes
- Yes
- Yes
- Yes

Q.6 How can we improve our workshop/event in the future?

- No
- Maybe having a microphone
- It was amazing
- Work more with different communities

Q.7 Any other comments?

- No
- No thanks
- Thank you so much for your time and efforts
- I have learnt a lot and I/m more than available to take part in any research