# Breast cancer awareness in a diverse population of women in North East London

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# **Background**

- Two large, national surveys have reported differences in levels of cancer awareness between ethnic and socioeconomic groups (Robb K et al, British Journal of Cancer, 2009; Waller J et al, British Journal of Cancer, 2009)
- Women in North East London have worse breast cancer survival than women in other parts of England (National Cancer Intelligence Network, 2009) and present at a later stage of disease (North East London Cancer Network Breast Cancer Inequalities Project/Thames Cancer Registry)
- Inner North East London (City of London, Hackney, Tower Hamlets and Newham) includes some of the highest levels of deprivation in the country and a proportion of people belonging to minority ethnic groups (~47%)
- Late stage at diagnosis and poor survival in women with breast cancer in North East London may be due
  to low breast cancer awareness leading to delay in presentation with symptoms and poor uptake of breast
  carenging.
- Some evidence that interventions can increase breast cancer awareness (Linsell L et al, British Journal of Cancer, 2009) and reduce stage at presentation (Austoker J et al, British Journal of Cancer 2009)

#### **Aims**

North East London Cancer Network surveyed breast cancer awareness in women living in City and Hackney, Tower Hamlets and Newham aiming to:

- Provide a baseline against which to monitor trends in breast cancer awareness and the effect of interventions to promote breast cancer awareness
- Identify where interventions to promote breast cancer awareness might be most appropriately focused.

#### **Methods**

- North East London Cancer Network commissioned a survey of breast cancer awareness in women aged 30+ in City and Hackney, Tower Hamlets and Newham in December 2009 (fieldwork carried out by STRC Research)
- · Data collected using a face-to-face, computer-assisted interview
- Addresses randomly selected from the Postal Address File after stratifying for deprivation, plus boosting for women from non-white ethnic group and women over 55
- . One respondent selected from all women aged over 30 living at each address using a Kish grid
- Breast cancer awareness measured using the validated Breast Module of the Cancer Research UK Cancer Awareness Measure developed by Cancer Research UK, King's College London and University College London (Linsell L et al, European Journal of Cancer, 2010)
- The Breast Module measures:
  - Knowledge of symptoms of breast cancer ("Please would you name as many early warning signs of breast cancer as you can think of")
  - Knowledge of age-related and lifetime risk of breast cancer ("Who is most likely to get breast cancer in the next year: a 30 year old woman, a 50 year old woman, a 70 year old woman, or a woman of any age?"; "How many women will develop breast cancer in their lifetime: 1 in 3; 1 in 9; 1 in 100; or 1 in 100?")
  - Confidence to detect a breast change ("Are you confident you would notice a change in your breasts?"; "How often
    do you check your breasts?")
  - Anticipated delay in contacting the doctor on discovering a symptom ("If you found a change in your breast, how soon would you contact your doctor?")"
  - Barriers to seeking medical help ("Could you say if any of the following would put you off going to the doctor with a symptom that might be serious?")
  - Knowledge of the NHS Breast Screening Programme ("Is there an NHS Breast Screening Programme?"; "At what age are women first invited to the NHS Breast Screening programme?"; "At what age do women receive their last invitation to the NHS Breast Screening Programme?")
- We report here the findings for knowledge of symptoms and risk, confidence, and knowledge of the NHS Breast Screening Programme

#### Results

# Description of sample and response

- 1,515 women responded from 1,730 eligible households (88%)
- 53% were white, 22% Asian, and 18% black
- 48% were aged 30-44, 40% 45-64 and 11% 65+
- 61% lived in households where the main income came from wages or salary rather than benefits or pension
- 43% had been educated to at least the age of 17

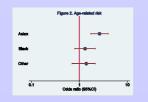
#### Breast cancer awareness (figures 1-5)

- 14% correctly identified a 70 year old woman as at higher risk of breast cancer than a 30 year old or a 50
  year old woman or a woman of any age; this proportion was significantly greater in Asian than white
  women
- 48% were confident they would notice a change in their breasts; this proportion was significantly lower in non-white ethnic groups
- 23% checked their breasts at least monthly; this proportion was very much lower in Asian and black women than white women
- 18% recognised five or more non-lump symptoms of breast cancer; this proportion was much lower in Asian women and somewhat lower in black women than white women

Figure 1. Proportions giving answers indicating bread cancer awareness by ethnic group

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Odds ratios for differences in breast cancer awareness by ethnic grou



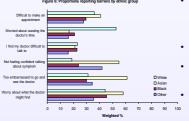
All odds ratios adjusted for age and index of multiple deprivation; baseline=white; OR less than 1 indicates lower odds of giving answer indicating breast cance awareness than white women; greater than 1, greater odds of giving answer indicating breast cancer awareness

### Results

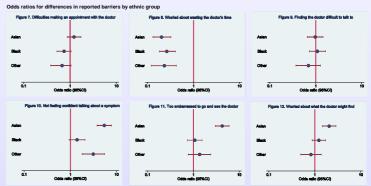
l odds ratios adjusted for age and index of multiple deprivation; baseline=white; OR less than 1 indicates lower odds of giving answer indicating breast cancer waterness than white women; greater than 1 greater odds of giving answer indicating breast cancer awareness.

#### Barriers to seeking medical help (figures 6-12)

 Most frequently reported barriers: worry about what the doctor might find (47%), too embarrassed to see the doctor (38%), worry about wasting the doctor's time (37%), difficulty making an appointment (35%)

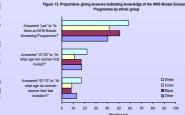


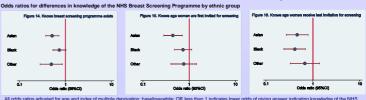
- Asian women significantly more likely than white women to lack confidence talking about symptoms (55% vs 19%), to be embarrassed to go and see the doctor (61% vs 31%) and to be worried about what the doctor might find (58% vs 44%)
- Black women reported barriers with similar frequency to white women
- No significant ethnic differences in reported difficulty in making an appointment or finding the doctor difficult to talk to
- White women much more likely to report worry about wasting the doctor's time than Asian or black women (53% vs 17% vs 21%)



# Knowledge of the NHS Breast Screening Programme (figures 13-16)

- 52% knew there was an NHS Breast Screening Programme; this proportion was much lower in Asian than white women (59% vs 42%)
- 19% knew the age at which women are first invited to the screening programme; this proportion was much lower in Asian than white women (22% vs 11%)
- 13% knew the age at which women receive their last invitation to the screening programme; this proportion was much lower in black and Asian women (18% vs 9%)





dds ratios adjusted for age and index of multiple deprivation; baseline=white; OR less than 1 indicates lower odds of giving answer indicating knowledge of the NHS st Screening Programme than white women; greater than 1, greater odds of giving answer indicating knowledge of breast screening programme

# Conclusions

- Significant differences exist in breast cancer awareness, reported barriers to seeking help and knowledge of the NHS Breast Screening Programme between ethnic groups
- Asian women are more likely to know that breast cancer is more common in older women, but less likely to be confident to notice a breast change, report checking their breasts or recognise five or more non-lump symptoms of breast cancer
- Asian women are much more likely to report embarrassment, lack of confidence talking about symptoms or worry about what the doctor might find as barriers to seeking medical help than white women, but not difficulty in making an appointment or finding the doctor difficult to talk to
- Asian women, and to a lesser extent black women, have less knowledge of the NHS Breast Screening Programme
- These findings will inform the development of interventions to promote breast cancer awareness, particularly in women from non-white ethnic groups.

