Lessons learnt from 5 years of prioritising bowel screening, 2017-2021

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Main theme: Theme 1 – Prevention, screening & early diagnosis
Subtopic: Screening and early detection: recruitment and communication
Title: Lessons learnt from 5 years of prioritising bowel screening, 2017-2021

Abstract text: Background and context:
Bowel cancer is the third most commonly diagnosed cancer and the second biggest cause of cancer deaths in Australia. In 2021, an estimated 15,540 new cases of bowel cancer will be diagnosed in Australia and cause 5,295 deaths[1]. However, if detected early over 90% of bowel cancer cases can be successfully treated[2]. In response to this and a low Victorian 2015-16 screening rate of 41.9%[3], in 2017-2021 Cancer Council Victoria prioritised increasing bowel screening participation among those eligible for the National Bowel Cancer Screening Program (NBCSP).

[1] Australian Institute of Health and Welfare 2021. Cancer in Australia 2021. Cancer series no. 133. Cat. no. CAN 144. Canberra: AIHW.
[2] Department of Health. About bowel screening. Canberra, Australia: Australian Government Department of Health, 2014.
[3] Australian Institute of Health and Welfare 2018. National Bowel Cancer Screening Program: monitoring report 2018. Cat. no. CAN 112. Canberra: AIHW.

Aim:
Increase participation in the NBCSP to 60% for Victorians aged 50-74.

Strategy / Tactics:
Cancer Council Victoria delivered four media campaigns targeting the eligible population, with additional emphasis on population groups less likely to screen (those who hadn't screened previously, males aged 50-59, those from a low socio-economic background). Tailored initiatives were developed and delivered for people from culturally and linguistically diverse backgrounds, including in-language advertising and community-led grant activities.

Outcomes:
Cancer Council Victoria's media campaigns led to significant increases in bowel screening participation among Victorians aged 50-74. Campaigns were equally effective in reaching under-screened target groups. This evidence informed advocacy efforts that investment in mass media campaigns saves lives and health care costs, which led to federal government funding of two national campaigns (AUD$10m each). Tailored initiatives for multicultural groups were also effective, with in-language print, radio and social media advertising reaching 138,000 Arabic and 250,000 Mandarin speaking community members, with notable increases in bowel screening (6-26%) coinciding with campaign activity in 2019. Community-led grant activities demonstrated increased knowledge, confidence and intention to screen.

What was learnt:
Significant investment in a multi-year strategy by cancer control organisations can lead to successful outcomes in increasing bowel screening participation overall and make important inroads to addressing inequities and delivering value for money. Repeated media campaigns are needed throughout the year to reach those who are recently invited to screen. Tailored interventions for multicultural groups, while resource intensive, are effective in educating eligible people about bowel cancer risks and benefits of screening.

Have you got a Conflict of Interest?: No
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