Development of a lung cancer awareness intervention targeted at deprived communities in Wales

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**Background**

Lung cancer incidence is highest and survival poorest in deprived communities.

Interventions targeted at deprived communities to raise awareness of lung cancer and prompt symptom presentation can be used to promote earlier diagnosis of lung cancer to improve outcomes.

**Intervention development**

Findings from studies to explore the barriers to cancer symptom presentation in deprived groups:

1. A systematic review (n=56)
2. Qualitative interviews (n=30)
3. Focus groups (n=6)

Were mapped to the Behaviour Change Wheel of intervention development.

**Group based educational session developed**

Targeted at over 40s, living in deprived communities who are current smokers, former smokers or family members of smokers

- Framed as a community responsibility intervention and information provided in third person to facilitate dissemination of information through social networks
- Delivered using PowerPoint and a script (delivered by a trained, trusted member of the community) with activities and discussion. Designed to (examples of PowerPoint slides):
  - Modify negative beliefs about lung cancer e.g. ‘If you catch lung cancer in the early stages it can be cured’ True or false?
  - Provide information about eight lung cancer symptoms e.g. A cough
  - Overcome reported barriers to symptom presentation e.g. What stops people going to the doctor?
  - Help to prepare for an appointment with the GP

Tested for acceptability with two groups of users (Site 1, n=7; site 2, n=7)

Questionnaire data

- Pre to post intervention:
  - Improved symptom knowledge
  - Shift to more positive beliefs
  - More appropriate symptom presentation
  - Higher confidence to detect symptoms

Observation and focus group data

- Information pitched at the right level
- Participants were engaged and participated throughout the session
- Questions mainly around lung cancer risk
- Community responsibility aspect acceptable

"It was just straight to the point, telling us about different symptoms. Like some of them I didn’t even know was the symptoms. So it was a big eye-opener for me on understanding the symptoms. Yes, so it was good"

**Conclusion**

Group-based education was an acceptable mode of intervention delivery for engaging people in deprived communities in lung cancer early detection, and warrants further feasibility and pilot testing.

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**References**


