

## **Beating Cancer in The Community**

Working in Newham on early action to save lives

















### **Community Links** 105 Barking Road Canning Town London

E16 4HQ

### © Community Links 2013.

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system or transmitted in any form, or by any means (electronic, mechanical or otherwise) without the advance consent, in writing, of both the copyright owner and the publisher. However, brief passages may be reproduced for non-commercial or training purposes provided the source is acknowledged and the publisher is informed

This document is available to download from the publications section of Community Links website:

www.community-links.org

### **CONTENTS**

Foreword	3
By a Volunteer Leader	
A Community Worker's contribution	
The Context	
'Small c' campaign	
Target Groups	
What are we trying to achieve with each cancer?	
We promote the TLC approach to breast awareness	
1. Increase Control - Everyone can be a life saver	
Making knowledge accessible	
3. Involve Local People	
4. Share personal experiences	
5. Bring the topic to life	
6. Be interactive; be funny; be unexpected.	
7. Achieve many things at once	
8. Be active communicators	
10. Maximise effort - spread the word	
10. Respond to diversity	
At Community Events	
In Community Centres	9
In Faith Centres	9
In GP Practices and Hospitals	11
In Schools	11
With Partners	12
UEL Undergraduates	. 12
UEL Masters Students	13
Conclusion	14
Appendix: outreach data	15
Information and Resources	28

### **Foreword**

### By a Volunteer Leader

The 'small c' campaign has been taking place in Newham and neighbouring boroughs for over two years. It is a joint effort to reduce cancer deaths by improving early detection. The campaign was funded by the National Awareness and Early Detection Initiative (NAEDI) and was launched in GP practices, pharmacies and the community.

I am pleased to introduce this report as I have been an active volunteer with the 'small c' project since it began. I have experienced cancer myself and am firmly committed to reducing the number of unnecessary deaths.

Our team of sessional workers and volunteers have spoken to over 11,000 people this year, in individual conversations and group meetings. We work to make the discussion of cancer normal and to tackle barriers that prevent people from going to their GP.

The response to our work is very positive with many people expressing their gratitude for helping them to see that cancer can be successfully treated and that they have an active role to play in identifying signs and symptoms in themselves and in those around them.

We are sharing information about our approach here because we believe it will be helpful to those running projects in other communities and that more lives can be saved.

Nazma Sheikh

### A Community Worker's contribution

After experiencing breast cancer myself I was determined to do all possible to reduce the number of unnecessary cancer deaths. People die because they don't carry out regular self-examination, because they don't recognise possible signs and symptoms quickly enough and because they don't want to waste the doctor's time. I believe it isn't difficult to acquire the knowledge and the confidence to look after ourselves more effectively. We have found that local people readily absorb this information and move forward feeling empowered and more confident about their health.

In this report we have attempted to distil our approach by sharing our ten important principles (TIPS). We hope you find them useful.

**Frances Clarke** 

Frances Clarke

### The Context

### 'Small c' campaign

The 'small c' campaign began in 2011. The aim was to encourage early detection of cancer in east London, an area in which survival rates are poor.

The campaign seeks to tackle the lack of awareness of signs and symptoms and the negative beliefs about cancer that can lead people to present very late to GPs. It aims to spread the message that most people survive cancer – if they get treatment early enough.

Initially the project focussed on lung and breast cancer and during 2012/13 bowel cancer was included.

The NHS in Newham chose Community Links to lead this community outreach campaign.

### **Target Groups**

- ▶ The priority groups for breast cancer are black and white women over 40.
- ▶ The priority groups for lung cancer are white men and women and Bengali men, over 50.
- ▶ The priority groups for bowel cancer are all ethnicities over 50.

### What are we trying to achieve with each cancer?

We are seeking to raise awareness of these three cancers and to encourage behaviour change in order to promote early detection.

With all of the cancers we want people to be familiar with the possible signs and symptoms and to be confident that they can recognise them. We also seek to encourage everyone to be confident and motivated to go to their GP quickly should they find a possible sign or symptom.

Nine out of 10 women who are diagnosed with breast cancer at an early stage survive

In relation to breast cancer we also want women to regularly self-examine their breasts as this increases the chances of finding any changes early. If the changes turn out to be cancer, spotting them early increases the likelihood, not only of surviving, but also of needing less severe treatments that don't cause hair loss or result in the removal of the breast.

In relation to breast and bowel cancer, we also want people to be knowledgeable about the national screening programmes. We encourage women over 50 to realise the importance of attending their breast screening appointments when they are invited. And we want them to be confident to attend. With bowel cancer we urge people between the ages of 60 and 69 to complete the bowel screening kit when they receive it.

### The 'small c' campaign

The 'small c' campaign encourages people to catch cancer while it is small and less difficult to treat. The idea of the campaign is to bring cancer down to size, to help people to overcome the huge fear that they feel when they think of it. This fear can immobilise people and prevent them from seeking the help that can save their lives.



www.smallc.org.uk

### **Our Ten Important Principles (TIPS)**

### 1. Increase Control - Everyone can be a life saver

At Community Links, we believe that all our work involves enabling people to take more control over their own lives. We seek to build the knowledge, skills and confidence which lead individuals to be able to exercise more responsibility for their lives, including their own health and the health of those around them. We have found that people will take seriously their responsibility to share health messages with their families, friends and neighbours.

### 2. Making knowledge accessible

People in many different settings have eagerly accepted cancer symptom checker cards. On some occasions people identify that they have these symptoms themselves. On other occasions they keep the cards to refer back to later. These simple tools embody the knowledge that could one day save their life or the lives of people they care about. These cards, if taken with them, can also help people, who speak little English or who lack confidence, to communicate about symptoms with their GP. GPs have reported that patients do bring the symptom checker cards with them to appointments.



### 3. Involve Local People

Communication is much more effective if the people who share the health messages are recognisable as having come from the audience themselves. Involving people with appropriate socio-cultural knowledge and language skills has proved vital.

#### 4. Share personal experiences

Involving people with personal experience of cancer is very powerful: people who have detected cancer early help to reinforce the message that cancer is not an automatic killer, many people do survive. Sharing stories from members of your own project helps to engage the audience emotionally and this in turn leads people to take more notice and be more likely to remember.

### 5. Bring the topic to life

We used a variety of resources in presentations such as Youtube songs, podcasts, models, games, and websites. It is vital not to be boring; people learn and remember in different ways.

### 6. Be interactive; be funny; be unexpected.

For the Mayor's Show young members of our team devised 'Booby Man', a wearable breast cancer lump detector which proved to be a sensation. People of all ages and backgrounds engaged in discussion of signs and symptoms while feeling for lumps. The fact that this was demonstrated by a man seemed to reduce embarrassment and helped to promoted light hearted interaction A variety of resources enabled us to provide extra information while helping to normalise the discussion of breast cancer, have fun and reduce embarrassment and awkwardness.



### 7. Achieve many things at once

We have found that the most successful projects offer many experiences at once. For the volunteer they offer valuable work experience, exposure to local leaders, content for job applications and personal statements. For the ESOL student they offer English practise and life saving information. For the university they offer real practical experience to complement theoretical learning of their students. For the school they offer pupils confidence-building activities and exposure to possible careers. It is important to be aware of all the project is offering and make it explicit, in this way people are attracted to participate and to stay involved over a long period.

#### 8. Be active communicators

We have found that the most effective way to communicate information is to talk to people and the quality of those conversations will determine the impact of the project. Sitting behind tables full of resources hoping people will come to you, will be less effective than getting up to approach people. We put our symptom checker cards and leaflets in a shoulder bag and walk about talking to people. This can be scary at first but is much more effective and enjoyable in the long run.



### 9. Train and practise

Acquiring knowledge about the signs and symptoms of cancer is not hard but sharing it effectively requires practise. We run sessions with our volunteers and workers to practise approaching people with this information, practise opening lines. We follow this up with on the job training and pairing new volunteers with experienced staff at events. We found that new people really benefit from this chance to practise with support.

#### 10. Maximise effort - spread the word

We provided training to local community activists and professionals, such as Family Support Workers, who went on to share the messages with the groups they support. We worked in partnership with the local papers including ethnic minority press and council magazines in order to share these health messages more widely.

### 10. Respond to diversity

Universal health messages do not reach all communities equally. We have not considered groups as hard to reach, but instead have focussed on where the target groups go and how to reach out to them in as many ways as possible. We have become community detectives actively seeking out appropriate locations to meet members of our target groups. We have tried places of worship, schools, community centres, supermarkets, chemists, community events, corner shops, newsagents, workplaces, GP practices, hospitals and social settings.

The following section of this report provides more detail about the places we went to and the numbers of people that we reached in our target groups in Newham:

### **At Community Events**

We shared awareness and early detection messages covering breast, lung and bowel cancer, in a wide range of locations and formats. We took part in community events, distributing materials and talking to people.

We engaged people in meaningful conversations rather than simply handing out leaflets. We found that local people were very amenable to discussing the signs and symptoms of cancer and the importance of detecting these cancers early.

Sometimes we joined with others to offer complementary advice, as in the case of Newham Council's series of planting events for the over 50s (our target group). Our health messages complementing efforts to encourage this group to take care of their health and be physically active.



**Bowel cancer** is a very common type of cancer and over half of all cases are caused by lifestyle risks that you can control.

These include eating too much red and processed meat, not being physically active, having a large waist size, not eating enough fibre, and drinking too much alcohol.

We have found that in-depth conversations were able to take place at events, even those in the busiest of settings. Amid the bustle of the Mayor's Show, attended by over 50,000 people, our staff were able to offer effective guidance about intimate issues such as breast self examination.

"I felt we were successful in individualising the information with each conversation stretching further, we were providing detailed information which enabled each person to relate to the subject",

#### Thamannah Miah.

We believe it is vital to be pro-active in sharing our early detection information and so we provided our staff at events with shoulder bags of the 'small c' resources so that they can walk around talking to people and mingling with the crowds. This approach proved very effective and led to many useful conversations.



#### Innovative use of resources

In addition to the 'small c' resources – leaflets, oyster card holders, nail files, symptom checkers and mirror stickers - we used resources such as 'breastology bags' which enabled us to demonstrate self examination and facilitate discussion; large jars of tar demonstrated the amount of tar in the lungs of an average, long-term smoker and baby bottles of tar illustrated the impact on babies and children of passive smoking. These aids promoted and facilitated relaxed discussion and laughter and encouraged many people to speak to us.

The innovative 'Booby Man', (Pictured page 6) a wearable breast cancer lump detector, proved to be surprisingly successful in attracting attention and drawing people into discussions about the signs and symptoms of breast cancer. People of all ages and backgrounds felt for the lumps.

The involvement of a man in this role was inspired as it seemed to reduce embarrassment and really helped people to ask questions while trying to find the lumps.

The use of these irreverent resources helps to stop cancer from being the 'big c' which frightens and paralyses people. It helps to normalise the discussion of cancer, bring it down to size and enable people to seek help if they have concerns.





Our workers spoke with 3,681 people at 31 community events during 2012/13.

### We promote the TLC approach to breast awareness:

Touch feel for a lump or other changes

Look for changes in shape and texture

Check with your GP if you find any changes



### **In Community Centres**

We visited a range of community centres catering for people are all ages. We ran sessions for young people at Arc in the Park and the Chandos Centre, where we talked about lung cancer and the dangers of smoking cigarettes, marijuana and shisha and we held sessions at Subco focussing on the issues for older people.

We sought to provide information in a range of formats, for instance, we provided early detection information in Braille for the Deaf and Blind UK group and we spoke in Hindi and Urdu at sessions for EKTA Asian elders and carers group.

Sometimes our information was the focus of an event and sometimes we were part of a larger programme. For instance, when we contributed our information to pamper days for carers. This was a useful opportunity to point out to people that being aware of the possible signs and symptoms of cancer and of carrying out breast self examination is a very important aspect of pampering yourself.

It was sometimes possible to achieve several outcomes at once. In English language classes for women we enabled the participants to practise their language skills while at the same time finding out about cancer. For women who don't speak or read English we found that it is unlikely that they will have received information before about the signs and symptoms of cancer or about the need for regular self-examination. They may also be unfamiliar with the national screening programmes and the reasons why it is vital to attend.

We made a variety of types of presentation in these centres and we sought to develop supportive ongoing relationships with centre managers, encouraging them to share the information with their users and we left posters and symptom checkers for their continued use.

We spoke with 480 people at groups within 23 community centres in 2012/13.



### In Faith Centres

We made presentations to whole congregations during services within churches and convents. We ran information stalls in church foyers and spoke to individuals and small groups at the end of services. Church congregations appeared to expect to take some responsibility for their fellow parishioners and therefore they were open to a health advocacy role. For instance, we met an elderly woman at a mass who was very anxious about having the symptoms of bowel cancer. She explained that she felt frightened, ashamed and embarrassed.



After we had talked to her alone for some time she agreed that she would seek advice from her GP. Her friends in the group were very pleased at this outcome and they pledged to provide ongoing support.

Mosques are an ideal place to reach Bengali men over 50, one of our lung cancer target groups. We recruited a sessional worker whose role focussed on delivering lung and bowel cancer awareness information in mosques. He visited all the mosques in Newham. Fliers and posters were distributed; people were talked to as they arrived at and left services. Specific sessions were run to provide in depth information.

Mosques were also an excellent location to address the health risks of smoking shisha. We found that many people were unaware of the dangers involved and were keen to receive this information.

One of our volunteers, who is a young doctor, took part in the sessions at Mosques and was able to answer more detailed questions about the health worries associated with lung and bowel cancer.

"The predominantly elderly Bengali men were actually very interested in health matters and dietary issues. These were not disinterested people. There were lots of questions around the relative merits of different types of meat, as I had mentioned red meat in reference to bowel cancer, which set off a whole discussion about chicken versus fish.

I think the participants in the mosque were empowered by the idea that sensible advice regarding healthy diet and lifestyle was very consistent with Islamic ideals. Advice such as not eating red meat too regularly and instead constructing a diet around fruit, vegetables and unrefined starch was recognised as being part of the Prophetic tradition and this point was made by the participants. The point was made about the Islamic tradition which advises that one should not overeat but fill themselves with a third food, a third water and a third air (i.e. do not eat to fullness). Other salient traditions regarding the right of the body over the owner of the body to good health and treatment were volunteered by the participants. I think this really helped as it located the message of a healthy diet and lifestyle as something deeply aligned with the Islamic tradition" **Dr Nawaz Ahmad**.

We visited 45 mosques and 4 churches.
913 people were spoken to in mosques and 1888 in churches in 2012/13

### In GP Practices and Hospitals

We visited GP practices and Newham University Hospital Trust (NUHT). We worked collaboratively within NUHT with MacMillan Cancer who run a cancer information centre within the hospital.

We talked to people as they waited to be seen at the GPs and at hospital. We found that people waiting in these settings are amenable to having a conversation about cancer as well as being very willing to share their experiences. We contributed to cancer related events, such as, a Macmillan fundraising coffee morning at Lord Lister Medical Centre.

The 'small c' campaign has sought to involve doctors and nurses in the campaign and several GPs have sent the signs and symptoms materials out to their patients. We also took part in training Practice Nurses in bowel cancer and the role of the 'small c' campaign.

We spoke to 269 people at events within six GP practices and Newham Univ. Hospital Trust.

### In Schools

We have worked intensively with children and young people in a number of schools and these are the subject of separate reports available to download from the Community Links website:

www.community-links.org.

- ▶ Beating Cancer at School and College: working with St. Angela's & St. Bonaventure's and Newham Sixth Form College on early action to save lives.
- Beating Cancer at School: working with Plashet School on early action to save lives

We have found that children and young people can be very effective in sharing health information with their parents and other family members. The secondary school pupils and sixth formers who we trained during these projects went onto become part of our wider volunteer team and have continued to take part in a range of cancer awareness raising activities. We attended parents' evenings in a range of schools to raise awareness amongst the parents and carers. We found that parents' evenings are an ideal setting for communicating.



The parents have time to listen and to talk while they are waiting to see their child's teachers, they feel they are in a safe setting, they know that the school has given its permission for this information to be shared.

We provided training in cancer awareness for staff groups at lunch time, these teachers were inspired to take part by the example of a colleague at Plashet School who had detected breast cancer early as a result of our work. We took part in community activities in schools including community fetes and coffee mornings. We were welcomed in to share our information at school support groups for parents of specific ethnicities. These groups provided interpreters in a wide range of languages including Lithuanian, Bulgarian, Russian and Portugese.

We believe that cancer awareness is vital learning for life and a school is an ideal location from which to disseminate this knowledge. Schools reach everyone, children expect to learn at school and adults also respect the learning environment. A school is an ideal institution in which to enhance the existing sense of community with a responsibility for health.

In all we spoke with 1535 parents and children within schools in 2012/13

### With Partners

We have formed a range of partnerships with local media, local MPs, councillors, students, universities, community groups, supermarkets, shops, employers and local champions. This had enabled us to widen and deepen our impact.

We ran sessions for a range of employers including Crossrail; three sessions were provided at Job Centres, training the staff so that they could go onto share this information with their users and their own family and friends.



We provided early detection information in the evenings at Picture House in Stratford and at Gala Bingo, in East Ham. And we provided information throughout the day and the evening in Newham's leisure centres. We supported the Cancer Research UK Roadshow in shopping centres and markets across the Borough and spoke to many shoppers.

Once again this year we worked with the University of East London undergraduate and public health masters students. We provided training in lung cancer awareness, early detection and communication skills for both groups of students.

We assessed the impact of our training on their levels of knowledge using the Lung Cancer Awareness Measure (L-CAM) to ensure that they were properly prepared to take part in our outreach programme. The L-CAM was completed by 67 undergraduates and 25 masters programme students.

### **UEL Undergraduates**

### Identification of possible signs and symptoms

At the end of the training the percentage of students who could recognise three or more signs or symptoms of lung cancer rose from 62.5% to 100%.

### Speed with which help the students would contact a doctor with concerns

At the end of the training the percentage of students who would seek help within 3 days had risen from 39.1% to 43.1%

### Confidence to detect signs and symptoms

At the end of the training those students who were fairly or very confident to detect signs and symptoms rose from 43.4% to 92.5%.

### Identification of passive smoking as a cause of cancer

At the end of the training those students who agreed or strongly agreed that passive smoking is a cause of cancer rose from 64% to 85%.

### Identification of smoking as a cause of cancer

At the end of the training those students who agreed or strongly agreed that smoking is a cause of cancer rose from 69% to 85%.

### **UEL Masters Students**

### Identification of possible signs and symptoms by UEL Masters Students

At the end of the training the percentage of students who could recognise three or more signs or symptoms rose from 72% to 96%.

### Speed with which the students would contact a doctor with concerns

At the end of the training the percentage of students who would seek help within three days had risen from 36% to 56%.

### Confidence to detect signs and symptoms

At the end of the training those students who were fairly or very confident to detect signs and symptoms rose from 54.2% to 86.5%

### Identification of passive smoking as a cause of cancer

At the end of the training those students who agreed or strongly agreed that passive smoking is a cause of cancer rose from 84% to 88%.

### Identification of smoking as a cause of cancer

At the end of the training those students who agreed or strongly agreed that smoking is a cause of cancer rose from 84% to 88%.

These results showed that the students were ready to share information about the early detection of lung cancer. We then provided training in how to communicate these messages and in how to approach people.

Once the students were fully prepared they joined us to deliver outreach awareness events in Stratford shopping centre. Stratford is a very busy location and this large group of trained health advocates enabled us to talk to 955 people in one day.



3,735 people were spoken to at events, such as these, during 2012/13.

**Bowel cancer** is a disease caused when cells of the bowel multiply out of control to form a lump called a tumour. Most bowel cancers that remain in the bowel don't kill if they're treated at an early stage. But if cells are given time to spread to other parts of the body the chance of survival reduces significantly.

Screening tests help to detect bowel - and breast cancer - early, even before you could notice symptoms

### Conclusion

Newham is the most diverse borough in the country and universal health messages do not reach all our communities equally.

We responded to this challenge by speaking to 11,401 people during the year, of whom 6,686 were in our target groups and at the highest risk. We have sought to empower these people with knowledge and to encourage behaviour change.

People responded positively to our message that we must all be active in taking responsibility for our own health and for the health of those we love. We found that the signs and symptoms of cancer can be remembered and the symptom checker cards help with this. This knowledge can lead to early detection and early detection saves lives.

We encouraged behaviour change, from embedding the life-saving routine of breast selfexamination to the development of confidence to approach the GP with concerns and to approach him/her again if necessary.

We are convinced that our approach can be successfully applied in other areas and to other health conditions, such as diabetes. We feel excited by the response we have received and we are confident that this approach is effective.



### Appendix.

The statistics in the following tables are broken down into the groups of those who are particularly at risk. The target groups are:

Lung cancer: white men and women and Bengali men over 50

▶ Breast Cancer: black and white women over 40

► Bowel Cancer: all ethnicities over 50

Comm Eve	-								P	eopl	e oı	utrea	ache	ed				_
		Wh Woi	nite men		nite en		Jladeshi Jlen	As Otl M	ner	As Wor			ack men	Bla Me	ack en	Otl Ethni		
	Date of Event	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	TOTAL
Beckton Spring Festival	24/03 2012	18	9	6	6	3	2	7	0	30	0	28	0	6	0	10	0	125
Forest Gate Spring Festival	21/04 2012	11	11	5	3	0	1	0	3	1	16	7	6	11	2	3	4	84
Manor Park Spring Festival	28/04 2012	4	3	2	0	1	0	3	1	5	24	10	9	1	3	0	1	67
Canning Town and Custom House	12/05 2012	5	6	6	0	0	0	0	0	0	0	0	3	0	0	4	0	24
New City Primary School	13/05 2012	6	1	0	0	0	0	1	0	3	2	0	1	0	0	0	0	14
Green Street Spring Festival	26/05 2012	3	3	3	0	3	3	3	0	9	7	5	2	0	0	0	0	41
Disability Event	26/05 2012	5	4	0	2	0	0	1	1	0	0	2	7	0	7	0	1	30
Royal Docks Spring Festival	01/06 2012	4	4	1	0	0	0	0	0	2	2	2	12	0	4	0	5	36
Forest Gate Spring Festival	14/07 2012	25	18	17	9	2	8	10	13	19	43	52	35	7	8	3	0	269
Newham Mayor's Show	21&22/07 2012	241	220	161	162	134	104	120	145	180	207	142	191	105	116	80	109	2417
Central Park Olympics Event	31/07 & 01/08 2012	6	4	1	2	0	0	0	4	0	2	1	5	3	1	0	0	29
Hisbiscus Community Centre (planting event)	25/09 2012	0	0	0	0	0	0	0	0	0	0	8	1	1	0	0	0	10

Cyana	15/09			•	•				_	•					•		•	00
Health Event	2012	6	1	2	0	0	0	1	0	3	1	1	1	1	3	0	0	20
Play, sow and grow (planting event)	28/09 2012	4	4	0	0	0	0	0	0	1	1	2	2	0	0	1	0	15
Jeyes Community Centre (planting event)	29/09 2012	0	0	0	0	0	0	1	0	1	0	9	1	3	0	0	0	15
Hisbiscus Community Centre	02/10 2012	0	0	0	0	0	0	0	0	0	0	10	0	0	0	2	0	12
African Caribbean Centre	09/10 2012	0	0	0	0	0	0	0	0	0	1	43	3	5	1	2	0	55
Vicarage Lane Community Centre (planting event)	06/10 2012	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
The Well Community Centre (planting event)	09/10 2012	43	2	0	0	0	0	0	0	0	1	4	2	6	0	2	1	61
Royal Docks Learning and Act. Centre (planting event)	10/10 2012	5	2	0	0	0	0	0	0	1	1	2	1	0	0	0	0	12
Upton Community Centre (planting event)	12/10 2012	0	0	0	0	0	2	25	0	15	0	0	0	0	0	0	0	42
Woodman Community Centre (planting event)	13/10 2012	0	3	1	0	0	0	0	0	0	0	0	7	0	4	0	0	15
Henniker Point (planting event)	14/10 2012	0	2	0	0	0	0	0	1	0	2	0	0	0	0	0	0	5
Deaf and Blind UK	16/10 2012	4	1	1	2	0	0	1	1	2	0	3	2	1	0	0	0	18
Beckton Community Centre (planting event)	20/10 2012	3	0	0	0	0	0	0	0	2	1	15	0	4	1	0	0	26

Napier Lodge (Ranelagh School) - Planting event	24/10 2012	2	6	0	0	0	0	0	0	3	4	2	2	0	0	0	1	20
Hathaway Community Centre (planting event)	25/10 2012	7	1	0	0	0	0	0	0	1	1	1	0	0	0	0	0	11
Rokeby Black History Event	27/10 2012	4	2	0	1	0	0	0	0	0	0	7	2	0	3	0	0	19
Field Community Centre (planting event)	30/10 2012	0	0	0	0	0	0	0	0	0	0	6	3	11	0	0	0	20
Vicarage Lane School - EastHam Forum Spring Festival	09/03 2013	14	13	1	2	0	2	2	4	11	18	9	10	2	0	0	0	88
Beckton Spring Festival- Kingsford School	23/03 2013	8	19	1	4	2	3	1	4	6	13	5	7	2	2	1	3	81
Community Totals by et		428	339	208	193	145	125	176	177	295	347	376	315	169	155	108	125	3681
Community total by ethr		767		401		270		353		642		691		324		233		3681

Commu									Р	eopl	e oı	ıtrea	nche	ed				
Centre	es	Wh Wor		Wh	nite	Bangla	adeshi en		ian r Men	As	ian	Bla	ıck		ick		her icities	TOTAL
	Date of Event				<50	>50	<50		<50								<50	
Gurdwara Centre	27/02 2012	0	0	0	0	0	0	0	0	20	4	0	0	0	0	0	0	24
Upton Centre	07/03 2012	0	0	0	0	0	0	6	0	20	1	0	0	0	0	0	0	27
Hartley Centre-Health Awareness Event	21/03 2012	1	1	0	0	0	0	6	0	7	5	7	8	6	3	0	0	44
Ithaca House - Diabetes Support Group	11/04 2012	2	1	0	1	0	0	0	0	0	0	4	3	0	0	3	3	17
Froud Centre- Assian Women's Group	12/04 2012	0	0	0	0	0	0	0	0	12	0	0	0	0	0	0	0	12
Upton Centre - Yoga Session	18/04 2012	0	0	0	0	0	0	6	19	0	0	0	0	0	0	0	0	25
African Carribean Centre (Barking Road)	19/04 2012	3	0	1	0	0	0	0	0	1	0	13	0	1	0	6	2	27
SUBCO - Thursday Group	03/05 2012	0	0	0	0	0	3	0	4	0	16	4	0	0	0	0	0	27
SUBCO - Tuesday Group	08/05 2012	0	0	0	0	0	3	0	4	0	16	4	0	0	0	0	0	27
Chandos East - Health Curriculum breast/lung	15/05 2012	0	3	0	0	0	0	0	1	0	0	0	2	0	0	0	2	8
Arc in the Park - Health Curriculum breast/lung	24/05 2012	0	2	0	11	0	0	0	0	0	0	0	0	0	2	0	0	15
Rokeby - Health Curriculum lung	25/05 2012	0	2	0	1	0	0	0	0	0	2	0	2	0	2	0	0	9
Carers Well Being	23/05 2012	1	0	2	0	0	0	0	0	0	2	3	2	1	0	0	1	12
Communities Health Event	07/06 2012	4	7	2	8	0	0	0	0	2	1	2	5	2	4	2	9	48

Royal Docks Learning and Activity Centre	12/06 2012	2	1	1	0	0	0	0	1	1	1	0	2	0	0	1	1	11
Carers Well Being	18/06 2012			1						2		1						4
Play, Sow and Grow	30/06 2012	0	6	0	1	0	0	0	2	0	6	6	9	0	0	0	0	30
Katherine Road Community Centre	04/07 2012	0	0	0	0	0	0	3	1	4	2	1	0	1	0	1	2	15
Upton Community Centre	27/08 2012	0	0	0	0	0	0	0	1	0	4	0	2	1	0	0	0	8
Royal Docks Learning and Activity Centre	14/11 2012	2	0	0	0	0	0	0	0	2	1	4	0	0	0	2	0	11
Sree Naryana Guru Mission	19/11 2012	0	0	0	0	2	0	0	0	22	0	0	0	0	0	0	0	24
Asta Community Centre - The Great Big Push	05/12 2012	1	3	0	0	0	0	0	0	0	2	1	6	0	0	0	0	13
West Ham Men Club	22/11 2012	38	0	3	0	0	0	0	0	0	0	1	0	0	0	0	0	42
Community Ce Totals by ethni		54	26	10	22	2	6	21	33	93	63	51	41	12	11	15	20	480
Community Ce total by ethnic		8	0	3	2	8		į	54	15	56	9	2	2	3		35	480

Mosqu	es								Р	eopl	e <b>o</b> ı	ıtrea	ache	d				
		Wh wor		Wh Me	nite en	Bangla Me			ian ner en	As Wor		Bla Wor		Bla Me			her icities	TOTAL
	Date of Event	>50	<50	>50	<50	>50	<50			>50	<50	>50	<50	>50	<50	>50	<50	
Masjid Bilal & Islamic Centre	17/03 2012	0	0	0	0	2	0	0	3	0	0	0	0	0	0	0	0	5
Plaistow Jamia Islamia Institute Uk	24/03 2012	0	0	0	0	5	0	2	6	0	0	0	0	0	0	0	0	13
Hefazothe Islam UK	26/03 2012	0	0	0	2	3	6	4	1	0	0	0	0	0	0	0	0	16
Salaam Centre	03/04 2012	0	0	0	0	4	5	0	0	0	0	0	0	0	0	0	0	9
Masjid Ilyas Markaz, Riverine	16/04 2012	0	0	0	0	2	4	0	3	0	0	0	0	0	0	0	0	9
Al-Karam Mosque, 411-413 Katherine Rd	20/04 2012	0	0	0	0	0	3	0	2	0	0	0	0	0	0	0	0	5
Al-Karam Mosque, 411-413 Katherine Rd	27/04 2012	0	0	0	0	2	4	0	1	0	0	0	0	0	0	0	0	7
Darus Salaam, 121 Church Rd	01/05 2012	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	2
slamic Centre	09/05 2012	0	0	0	0	0	4	0	2	0	0	0	0	0	0	0	0	6
Ashar Mosque, 235 Romford Rd, E7 9HR	17/09 2012	0	0	0	0	5	0	11	0	0	0	0	0	0	0	0	0	16
Church Road Mosque, E12 6AQ	19/09 2012	0	0	0	0	7	0	0	0	0	0	0	0	0	0	0	0	7
Forest Gate Mosque, E7 BAB	28/09 2012	0	0	0	0	19	0	0	0	0	0	0	0	0	0	0	0	19
79 Market Street, E6 2RD	01/10 2012	0	0	0	0	14	0	0	0	0	0	0	0	0	0	0	0	14
79 Market Street, E6 2RD	02/10 2012	0	0	0	0	17	0	0	0	0	0	0	0	0	0	0	0	17
Forest Gate Mosque, E7 BAB	05/10 2012	0	0	0	0	30	0	0	0	0	0	0	0	0	0	0	0	30
Church Road Mosque, E12 SAQ	08/10 2012	0	0	0	0	15	0	10	0	0	0	0	0	0	0	0	0	25

Azhar Mosque, E7 9HL	10/10 2012	0	0	0	0	26	0	7	0	0	0	0	0	0	0	0	0	33
Al-Karam Mosque, 411- 413 Katherine Rd	11/10 2012	0	0	0	0	20	2	15	0	0	0	0	0	0	0	0	0	37
Masjid Ibrahim, Barking Rd E13 9EN	16/10 2012	0	0	0	0	9	0	2	0	0	0	0	0	0	0	0	0	11
98 Woodgrange Rd E7 0EN	18/10 2012	0	0	0	0	15	0	4	0	0	0	0	0	0	0	0	0	19
Masjid Ibrahim, Barking Rd E13 9EN	22/10 2012	0	0	0	0	17	0	4	0	0	0	0	0	0	0	0	0	21
88 Green Street, E7 8JG	23/10 2012	0	0	0	0	23	7	0	0	0	0	0	0	0	0	0	0	30
Shah Jalal Mosque, E12 6BT	25/10 2012	0	0	0	0	31	0	0	0	0	0	0	0	0	0	0	0	31
3-5 Brydges Road,E15 1NA	80/10 2012	0	0	0	0	7	0	6	0	0	0	0	0	0	0	0	0	13
Shah Jalal Mosque, E12 6BT	01/11 2012	0	0	0	0	27	0	0	0	0	0	0	0	0	0	0	0	27
Upton Lane Mosque, E7 9LN	03/11   2012	0	0	0	0	34	0	6	0	0	0	0	0	0	0	0	0	40
Upton Lane Mosque, E7 9LN		0	0	0	0	16	0	7	0	0	0	0	0	0	0	0	0	23
High Street North, E12 6SB	08/11 2012	0	0	0	0	9	0	4	0	0	0	0	0	0	0	0	0	13
Masjid Ibrahim, Barking Rd E13 9EN	13/11 2012	0	0	0	0	11	0	0	0	0	0	0	0	0	0	0	0	11
236 High Street North E12 6SB		0	0	0	0	9	3	0	2	0	0	0	0	0	0	0	0	14
236 High Street North E12 6SB		0	0	0	0	19	0	0	4	0	0	0	0	0	0	0	0	23
Daral-Ullum 11 St George Road E7 8HT	27/12 2012	0	0	0	0	15	3	0	0	0	0	0	0	0	0	0	2	20
98 Plaistow Road E13 0QR	07/01 2013	0	0	0	0	85	0	10	0	0	0	0	0	0	0	0	0	95

Daral-Ullum 11 St George Road E7 8HT	10/01 2013	0	0	0	0	7	0	0	2	0	0	0	0	0	0	0	0	9
98 Plaistow Road E13 0QR	14/01 2013	0	0	0	0	10	2	0	0	0	0	0	0	0	0	0	0	12
Shah Jalal Mosque, E12 6BT	16/01 2013	0	0	0	0	15	0	0	0	0	0	0	0	0	0	0	0	15
79 Market Street, E6 2RD	25/01 2013	0	0	0	0	15	7	7	1	0	0	0	0	0	0	0	0	30
Church Road Mosque, E12 6AQ	28/01 2013	0	0	0	0	12	2	7	0	0	0	0	0	2	0	0	0	23
411-413 Katherine Rd E7 8LT	01/02 2013	0	0	0	1	17	4	2	0	0	0	0	0	0	0	0	0	24
411-413 Katherine Rd E7 8LT	02/02 2013	0	0	0	0	18	2	5	0	0	0	0	0	0	0	0	0	25
241 Plashet Rd E13 0QU	04/02 2013	0	0	0	0	9	2	4	0	0	0	0	0	0	0	0	0	15
Markaz Riverine Centre E15 3ND		0	0	0	0	22	3	10	0	0	0	0	0	0	0	0	0	35
Markaz Riverine Centre E15 3ND		0	0	0	0	17	1	0	0	0	0	0	0	0	0	0	0	18
Al-Hira Masjid, 241 Plashet Rd E13 0QU	18/03 2013	0	0	0	0	0	15	5	0	0	0	0	0	0	0	0	0	20
	20/03 2013	0	0	0	0	4	7	15	0	0	0	0	0	0	0	0	0	26
Mosques To ethnicity/		0	0	0	3	644	86	147	29	0	0	0	0	2	0	0	2	913
Mosques total I		(	)	- 3	3	73	0	17	6	(	)	C	)	2	2		2	913

Church	es							Peo	ple c	utre	each	ed						
		Wh Wor		Wh M∈		des	ngla shi en	Asi Oth Me	er	As Wo		Bla Wor	ack men	Black	Men	Oth	ner	TOTAL
	Date of Event	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	
St Anthony's Church	29/04 2012																	1100
Emmanuel Church Forest Gate	14/07 2012	13	10	11	4	0	0	3	1	2	2	23	15	17	8	0	0	109
St Barnabas Church	15/07 2012	3	0	3	2	0	0	2	3	3	4	15	5	7	2	0	0	49
St Margaret's Church &Convent	28/10 2012	100	30	40	20	0	0	0	0	0	0	160	70	100	50	50	10	630
Churches Tota ethnicity/age	ils by	116	40	54	26	0	0	5	4	5	6	198	90	124	60	50	10	788
Churches total ethnic groups	l by	1!	56	8	0	(	)	9		1	1	28	38	18	34	6	0	788

GP/Hosp	oital								P	eople	outre	ache	b					
		Wh Wor		Wh Me		Bangla Me	adeshi en		Other en	As Wor		Bla Wom		Black	Men		ther nicities	TOTAL
	Date of Event	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	
Newham General Hospita	05/06 I 2012	4	0	2	0	0	0	0	1	0	3	0	2	0	0	1	2	15
Lord Lister Medical Centre	28/08 2012	7	4	4	1	3	0	0	1	4	2	6	2	5	3	0	5	47
Star Lane Medical Centre	04/09 /2012	9	1	5	1	1	0	1	3	2	4	4	5	3	1	2	1	43
Shewsbury Health Centre	18/09 2012	3	1	4	0	1	0	1	1	4	2	4	4	2	2	0	1	30
E12 Medical Centre	09/10 2012	9	5	4	1	2	2	6	9	8	10	4	6	5	2	0	2	75
E12 Medical Centre	16/10 2012	8	3	3	1	2	3	5	2	11	10	2	2	2	2	2	1	59
GP/Hospitals To ethnicity/age	otals by	40	14	22	4	9	5	13	17	29	31	20	21	17	10	5	12	269
GP/Hospitals to ethnic groups	tal by	5	4	20	6	1	4	3	0	6	0	41		27	7		17	269

Schoo	ls								Peo	ple o	utreac	hed						
		Wh Wor			nite en	Bangla Me	adeshi en		Other en		ian men	Bla Wor	ack men	Black	Men	Ot	her	TOTAL
	Date	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	
Newham College of Further Education teachers training	16/05 2012	1	0	0	0	0	0	0	0	5	3	9	2	2	0	0	0	22
Newham College East Ham	21/06 2012	2	11	3	4	2	0	0	5	8	8	0	1	2	0	3	9	58
Rokeby School	28/06 2012	9	5	0	1	7	2	6	6	1	2	13	4	5	1	1	2	65
Rokeby School	30/06 2012	0	0	0	0	0	0	0	0	3	0	6	0	0	0	1	0	10
Little Ilford School Summer Fete	30/06 2012	5	12	6	2	0	1	8	9	10	20	6	10	1	2	2	2	96
Rokeby School	04/07 2012	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	4
Rokeby School	04/07 2012	17	5	1	4	0	0	0	0	0	0	16	3	1	1	0	0	48
St Angela's parents evening	05/07 2012	4	11	3	1	0	0	1	2	4	4	27	20	7	8	8	7	107
Little Ilford School Black History Evening	23/10 2012	22	3	10	0	6	0	5	0	23	0	25	0	15	0	0	0	109
Plashet School year 9's parent's evening	24/10 2012	8	3	3	0	2	1	2	2	19	19	4	7	0	1	0	1	72
St Angela's parents evening	25/10 2012	6	12	4	0	0	0	1	0	2	6	33	52	17	6	3	2	144
EID Souk community Event (Langdon School)	04/11 2011	1	0	0	0	2	2	1	12	2	23	0	1	0	1	0	4	49
Maryland Primary School - Coffee morning	27/11 2012	0	7	0	0	0	0	0	0	0	4	1	7	0	0	1	0	20
Ranelagh School (Winter Fair)	30/11 2012	9	9	1	1	2	0	1	1	2	4	6	11	2	1	2	1	53

10th Annual Tea Dance Little Ilford School	04/12 2012	16	6	11	4	2	1	0	0	12	0	7	2	3	4	6	2	76
Ranelagh School (parent's evening)	05/12 2012	2	7	0	1	1	2	0	0	2	11	5	10	1	6	0	0	48
St Bons Parent's Evening Year 9	10/12 2012	8	19	6	9	0	1	12	7	11	12	23	23	18	17	10	13	189
St.Luke's CEVA Primary School - Annual Roadshow	25/01 2013	6	1	0	1	0	0	0	0	0	1	4	9	0	8	0	4	34
Maryland Primary School - Coffee morning	21/03 2013	3	0	0	0	0	0	0	0	2	0	3	0	0	0	4	0	12
St Angelas Evening Year 12	21/03 2013	12	2	8	0	5	0	7	1	31	5	54	5	27	1	13	1	172
St Bons Parent's Evening Year 10	25/03 2013	4	14	7	2	7	0	9	8	13	16	11	15	15	16	2	8	147
Schools To ethnicity		135	127	63	30	36	10	53	53	150	138	253	182	116	73	56	60	1535
Schools to ethnic gro		26	2	9	3	4	6	10	)6	28	38	43	35	18	9	11	16	1535

Other	rs								Р	eople	outre	ached	ł					
		Whi Wom		Wh Me			adeshi en	As Oth Me	ner	As Wor		Blac Wom		Blac	k Men		ther iicities	TOTAL
	Date of Event	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	
Newham Leisure Centre	10/03 2012	8	1	0	0	0	0	0	0	23	4	20	10	0	0	0	0	66
Westfield Shopping Centre	20/03 2012	236	108	164	45	28	26	33	59	30	63	70	62	56	36	22	31	1069
Job Centre Plus Stratford	28/03 2012	8	5	1	0	0	0	0	2	4	0	8	5	1	1	5	5	45
Old Stratford Shopping Centre	06/04 2012	13	6	9	1	0	3	3	1	1	8	16	9	6	2	3	3	84
Atmore Children's Centre-Staff Training	24/04 2012	3	2	0	0	0	0	0	0	0	1	0	1	0	0	0	1	8
Gala Bingo	26/04 2012	30	4	5	1	0	0	0	0	0	0	7	8	2	0	1	0	58
Spring Food Growing Network	30/04 2012	4	3	2	2	0	0	0	0	0	0	3	1	1	1	1	0	18
Atmore Children's Centre	08/05 2012	1	0	0	0	0	0	0	0	3	11	0	0	0	0	0	0	15
Atmore Children's Centre	29/05 2012	0	2	0	0	0	0	0	0	1	11	0	1	0	0	0	0	15
Age UK Falls Awareness Week	22/06/ 012	4	3	8	3	2	3	13	2	9	17	12	6	3	2	0	3	90
Plaistow Job Centre Plus	27/06 2012	9	0	5	0	1	1	0	1	3	6	4	3	2	3	1	0	39
Freemasons Job Centre Plus	10/07 2012	0	8	2	2	1	1	2	2	1	3	2	7	3	3	0	0	37
Morrison's supermarket Stratford	05/09 2012	93	13	40	4	13	2	11	4	39	21	56	7	21	2	18	0	344
Picture House (Black History Month)	11/10 2012	15	5	0	0	0	0	0	0	3	2	12	15	0	0	1	0	53
Picture House (Black History Month)	18/10 2012	2	2	3	0	1	0	0	0	2	0	8	0	1	0	0	0	19
Picture House (Black History Month)	25/10 2012	2	1	0	0	0	0	0	0	0	0	4	8	1	3	0	0	19
Boots Westfield with Pharmacy Students	22/11 2012	28	3	4	0	0	0	0	0	0	1	4	1	3	3	2	1	50
Stratford Old Shopping Centre with CRUK	27/11 2012	8	3	3	0	0	0	2	1	1	1	5	3	7	3	3	1	41

Crossrail Staff	25/01 2013	2	6	25	4	0	0	2	0	0	0	0	0	0	0	0	0	39
East Ham Leisure Centre	19/02 2013	7	1	3	0	0	0	18	20	12	19	15	7	1	2	4	5	114
Newham Leisure Centre	21/02 2013	17	9	4	2	0	0	33	12	12	19	29	18	12	9	11	13	200
East Ham Leisure Centre	21/02 2013	4	0	0	1	0	0	22	17	19	16	4	7	4	4	5	10	113
Newham Leisure Centre	22/02 2013	22	10	6	6	0	0	13	8	18	6	20	29	16	8	17	27	206
Crossrail Staff	06/03 2013	14	9	0	4	0	0	2	3	0	0	0	0	3	2	0	1	38
Stratford Old Shopping Centre	12/03 2013	71	112	66	127	7	4	13	28	50	60	111	97	107	82	5	15	955
Other Places Totals by ethnicity/age		601	316	350	202	53	40	167	160	231	269	410	305	250	166	99	116	3735
Other Places total by ethnic groups		917	7	58	52	9	3	32	27	50	00	71!	5	4	116	2	215	3735

							-	Total F	People	out	treach	ed					
Totals	White Women		White Men		Bangladeshi Men		Asian Other Men		Asian Women		Black Women		Black Men		Other Ethnicities		TOTAL
	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	>50	<50	
Final Totals by ethnicity / age	1374	862	707	480	889	272	582	473	803	854	1308	954	690	475	333	345	11401
Final total by ethnic groups	2236 1187		11	61	1055		1657		2262		1165		67	78	11401		

Total Targeted Groups	6686
Total Others	4715
Total People Outreached	11401

### Information and Resources

For more information:

### **Community Links**

105 Barking Road London, E16 4HQ

Contacts:

Frances Clarke frances.clarke@community-links.org
Zoraida Colorado zoraida.colorado@community-links.org

Website www.community-links.org

#### **Newham Public Health Team**

Fourth Floor West Wing Newham Dockside 1000 Dockside Road London E16 2QU

Contact:

Janet Tucker, Assistant Director janet.tucker@newham.gov.uk

Newham Stop Smoking Service: stopsmoking@newham.gov.uk

Small c campaign www.smallc.org

Detect Cancer Early www.detectcancerearly.org
Macmillan Cancer www.macmillan.org.uk

Shishaware www.shishaware.org

GASP www,gasp.org.uk

(health education and tobacco resources.

### **Newham Recorder**

Recorder House 539 High Road Ilford

1G1 1UD www.newhamrecorder.co.uk

# **Beating Cancer** in The Commnity

Working in Newham on early action to save lives.

In this report we explain how we have taken the early action messages of the 'small c' campaign out into the community of Newham in east London. We describe our work to overcome the barriers to early presentation which lead to unnecessary deaths. Our message is simple – cancer is more likely to be survived if it is caught early, while still small and more easily treated. The project built a diverse team of volunteers and supporters from amongst the local population to share information about possible signs and symptoms and to build confidence to seek help if concerns arise.

Our approach has been warmly received wherever it has been shared – in churches and mosques, schools and sixth forms, shopping centres and workplaces, leisure centres and English language classes – early action saves lives.

This report is part of a series reporting on the work of Community Links in promoting early action on cancer; see also Breast Screening Take-Up Project, Beating Cancer at School: Working with Plashet School; Beating Cancer at School and College; Working with St Angela's & St Bonaventure's and Newham Sixth Form College (Newvic).

Community Links 105 Barking Road London E16 4HQ



www.community-links.org

Community Links Trust Ltd. is a charity registered in England no. 1018517 and a registered company no. 2661182