

People with low numeracy feel negative about taking part in bowel cancer screening

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People who have problems with numbers may be more likely to feel negative about bowel cancer screening, including fearing an abnormal result, while some think the test is disgusting or embarrassing, according to a Cancer Research UK "More research is needed but changes to the test supported study published today in the Journal of Health Psychology.

The researchers sent information about bowel cancer screening to patients aged from 45 to 59 along with a questionnaire which assessed their numerical skills and attitudes to the screening test, which looks for blood in stool samples.

Almost 965 people - registered with four GP practices in the North of England - returned the questionnaire which asked: 'Which of the following numbers represents the biggest risk of getting a disease: 1 in 100, 1 in 1000, 1 in 10'. Nearly half (46 per cent) got this question wrong.

These people, considered to have low <u>numeracy</u> skills, were also more negative about the bowel cancer screening test, and these attitudes made them less inclined to take part in screening than those who got the question right.

They were more likely to think taking the test was disgusting, embarrassing or 'tempting fate', and to be more afraid of an abnormal result. They also tended to know less about bowel cancer and were more likely to avoid or ignore cancer information, even when other factors such as education and ethnicity were taken into account.

Lead study author Dr Samuel Smith, based at Queen Mary University of London, said: "People's comprehension of numbers may have links with how well they understand and use information about bowel cancer screening. Our findings could help to improve how we discuss screening with the public. That might be through targeted campaigns in deprived areas where low numeracy and literacy skills are more common, or through health workers

discussing screening with people who might be inclined to ignore written information or think they don't need to take a screening test.

itself, that make it guicker and easier to use, might also help to increase the number of people with low numeracy skills who take part in screening, by reducing barriers such as disgust or embarrassment."

Those with low numeracy skills were more likely to have a defensive attitude to cancer information, such as saying they did not need screening because their bowel movements were regular, they ate healthily, or their GP had not told them that the test was important.

The study was part of a project which aims to find ways of getting more people, whoever and wherever they are, to consider using the bowel cancer screening test when it's offered to them. Researchers say that using results from the study to specifically target those with low numeracy skills could help to achieve this.

Around 41,600 people in the UK are diagnosed with bowel cancer each year and around 16,200 die from the disease. It is estimated that bowel screening could save more than 2,000 lives per year in the UK by 2025. The national screening programme, called faecal occult blood testing (FOBT), allows the disease to be detected before symptoms become apparent. It is offered to people aged 60 - 74 in England, Wales and Northern Ireland, and 50 - 74 in Scotland, all of whom are sent a stool testing kit every two years.

Sara Hiom, director of early diagnosis at Cancer Research UK, said: "It really is worth using this little kit when you're sent it, even if you do feel a bit uncomfortable about it. The test can pick up early stage disease in people who are otherwise fit and healthy, even before you develop symptoms.



Detecting <u>bowel cancer</u> at an early stage means treatment is more likely to be straightforward and successful, so it's well worth a bit of extra effort to take the test when you're sent it in the post.

"This study adds to our knowledge of why some people don't take part in screening, and could help us to come up with new ways of helping people overcome these barriers and protect their health."

More information: Samuel G.Smith, Lindsay C.Kobayashi, Michael S.Wolf, Rosalind Raine, Jane Wardle, Christian von Wagner - 'The associations between objective numeracy and colorectal cancer screening knowledge, attitudes and defensive processing in a deprived community sample'.

Provided by Cancer Research UK

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