

ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLE AND BOWEL SCREENING

Social and cultural concerns

Bowel cancer is common among Aboriginal and Torres Strait Islander people. If found early, up to 90% of cases can be successfully treated.

Participation by eligible Aboriginal and Torres Strait Islander people in the National Bowel Cancer Screening Program is estimated at less than a third of non-Indigenous Australian's (27.3% compared to 42.6%).¹

For Indigenous people, lower participation rates contribute to lower five-year survival rates — as they are more likely to have latestage cancer by the time of diagnosis.²

Removing barriers to screening

Research and consultations found many of the barriers to participation could be addressed if eligible Aboriginal and Torres Strait Islander people got the screening kit directly from a trusted health professional at their local primary health care service.³

Snapshot: The National Bowel Cancer Screening Program

The National Bowel Cancer Screening Program is free for people aged 45 to 74.

- People aged 45 to 49 can order their first kit from **www.ncsr.gov.au/boweltest**.
- People aged 50 to 74 receive a bowel screening kit in the mail every 2 years.
- Their next test kit will automatically be mailed 2 years after their last screening test is completed.
- Clinical guidelines recommend people aged 45 to 74 do the test every two years. The test is an immunochemical faecal occult blood test (iFOBT), which detects small traces of blood in poo that can be a sign of bowel cancer.⁴
- People who screen through the program have much better survival prospects and are 40% less likely to die from bowel cancer than people diagnosed another way.⁵
- If participation increased to 60% of those invited to screen, more than 83,000 lives and at least \$21 billion could be saved 6

The importance of a recommendation

Recommendation by a health professional can positively influence participation in bowel screening.

Some health professionals may feel concern about causing offence by bringing up sensitive subjects. Yet, consultations have found that many Aboriginal and Torres Strait Islander people would like their doctor or Aboriginal and Torres Strait Islander health worker to raise the issue — and are more likely to complete the test if you recommend it.³

To increase testing rates, healthcare providers can bulk order and store kits to hand out to patients as part of a check-up — this is in addition to the existing mail out model.











Bulk order kits to hand out to patients as part of a check-up



- **Get training** on bowel screening, using the Portal and how to have conversations with patients.
- 3 Order the free test kits in bulk.
- 4 Hand out kits to eligible patients and record it in the Portal.
- 5 Access resources with culturally tailored options, including an expanded range for Indigenous people to promote participation in the program.





Social and cultural concerns

Like many other Australians, some Aboriginal and Torres Strait Islander people can be embarrassed talking about taking a poo sample.

Some patients may prefer to talk about it with a non-Indigenous doctor or nurse.

Others may want to talk with an Aboriginal or Torres Strait Islander health professional. As with other sensitive matters, men may wish to talk to a male and women may prefer to talk to a female health professional.

In some parts of Australia, Aboriginal and Torres Strait Islander patients may be worried that a sample could be used against them for harm. They may need reassurance that arrangements have been made for safe collection, storage and transport of the samples.³

Talk with your co-workers and health centre management about the best way to organise and talk about bowel screening with your Aboriginal and Torres Strait Islander patients.

Finding the right words

Some messages that have tested well with Aboriginal and Torres Strait Islander patients include:

- Bowel cancer can develop without any symptoms. But if found early, it can usually be treated successfully.
- There is a simple test to help find bowel changes early.
- The test can find tiny amounts of blood in your poo, long before you would notice any changes.
- I've done the test myself (if this is true).
- If blood is found, it doesn't always mean you have cancer. There can be other reasons why you might have blood in your poo and we need to find out why.
- Some people think doing a bowel screening test is shameful or embarrassing It's not shame, it's a part of life.
- Stay healthy and strong for your family and do the free bowel screening test.

References

- Australian Institute of Health and Welfare 2021. National Bowel Cancer Screening Program: monitoring report 2021. Cancer series no.132. Cat. no. CAN 139. Canberra: AIHW.
- 2. Australian Institute of Health and Welfare (AIHW) 2018a. Cancer in Aboriginal & Torres Strait Islander people of Australia. Web report. www.aihw.gov.au
- Menzies School of Health Research, 2020.
 National Indigenous Bowel Screening Pilot Final Report. www.health.gov.au/nbcsp.
- Cancer Council Australia Colorectal Cancer Guidelines Working Party 2017. Clinical practice guidelines for the prevention, early detection and management of colorectal cancer. Sydney: Cancer Council Australia.
- 5. AIHW 2018c. Analysis of bowel cancer outcomes for the National Bowel Cancer Screening Program: 2018. Cat. no. CAN 113. Canberra: AIHW
- 6. Lew, Jie-Bin et al. 2017. Long-term evaluation of benefits, harms, and cost-effectiveness of the National Bowel Cancer Screening Program in Australia: a modelling study. The Lancet Public Health, Volume 2, Issue 7, e331-e340.







More Information

Test Kit Helpline 1800 930 998
National Cancer Screening Register
www.ncsr.gov.au or 1800 627 701
www.health.gov.au/nbcsp

