

ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLE AND BOWEL SCREENING

Why bowel screening is important

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

Often bowel cancer has no symptoms. Bowel screening can find changes to the bowel long before a person notices any problems.

Aboriginal and Torres Strait Islander people have low participation rates in bowel screening and are more likely to have latestage cancer by the time they are diagnosed — when the cancer is much more difficult to treat successfully.¹

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 request their first bowel screening kit at 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 between the ages of 45 to 74 do the test every two years.² 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.

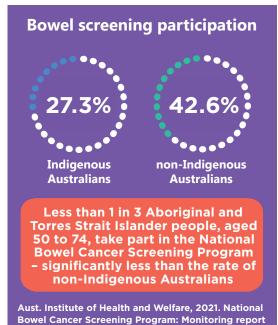
To increase testing rates, healthcare providers can bulk order and store kits to hand out to patients as part of a check-up—this is in addition to the existing mail out model.

This test can save lives and you can help

Patients are more likely to complete a bowel screening test if it is recommended by a trusted health professional.

Menzies School of Health Research carried out extensive consultations about bowel screening with Aboriginal and Torres Strait Islander people and found many would like their doctor or health worker to raise the issue with them.³

By giving the screening kits directly to your patients, you can explain why the test is important, and demonstrate how to collect the samples. You can also help break down the stigma around talking about topics like 'poo' and 'cancer'.





Social and cultural concerns

Some patients may be embarrassed talking about taking a sample of poo. Some may prefer to talk about bowel screening with a non-Indigenous doctor or nurse, because of the sensitivity of the subject. 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 health professional and women may prefer to talk to a female health professional.

What are the social and cultural issues around bowel screening in your community? 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.

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



- 2 **Get training** on bowel screening, using the Portal and how to have conversations with patients.
- 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.



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

- 1. 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. 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.
- 3. Menzies School of Health Research, 2016. Report to the Australian Government Department of Health, unpublished.









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

