

Healthwatch Peterborough Prisoner Engagement Project

Bowel Cancer UK Presentation for Over 50s/Male Unit/ HMP Peterborough

Total number of attendees: 18

1. How many are aware of the Bowel Cancer Screening programme? 4

2. What is the Bowel Cancer screening programme?

Comments:

- Two stated “they send it through the post”
- One stated “heard of it, not sure what it is”

3. How many have had been screened for Bowel Cancer? 1

4. How many are aware of the key symptoms of bowel cancer? 3

Comments:

- Three stated “blood in stools/poo”
- One stated “pain”
- One stated “going to toilet more often”

5. How many are aware of treatment? 4

Comments:

- Two stated “they take a piece out of the bowel”
- One stated “surgery”
- Two stated “nothing you can do”

POST Presentation :

6. How likely are you to take part in the screening programme (if offered)?

Extremely likely	Likely	Don't know	Not likely	Extremely unlikely
14		1		3

6.1 WHY would you NOT take up screening if offered?

Comments:

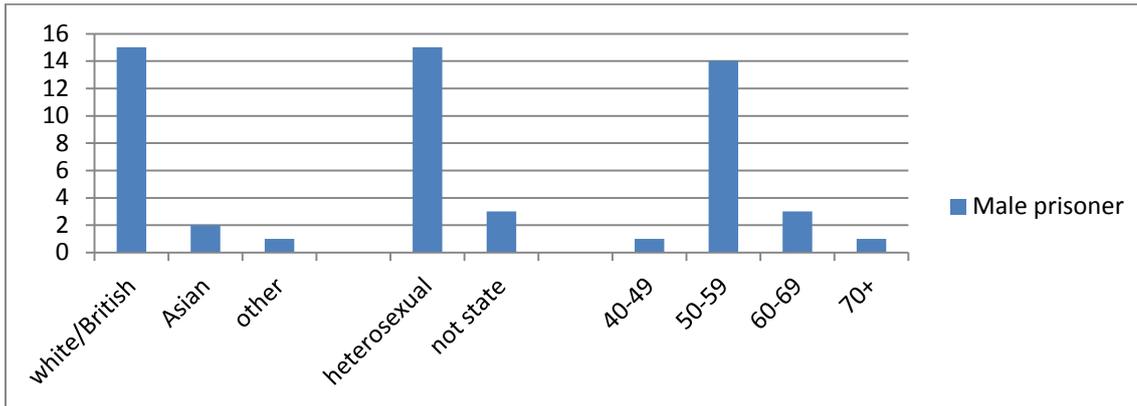
- “Once you know, everything changes, worry and fear of dying
- “when it's your time, it's your time”
- “do not want to know”

7. Would you attend another information session/health awareness session like this?

Extremely likely	Likely	Don't know	Not likely	Extremely unlikely
17		1		

8. How many have heard of the complaint advocacy service (operated by POhWER) 0

Demographics: Bowel Cancer Presentation HMP Peterborough



Additional comments during/after session:

- Prisoner had immediate family member die from bowel cancer. Did not know it could be genetically linked. Also thought there was no treatment to prevent fatality once diagnosed.
- Prisoner has family member in hospital. Does not understand and/or know anything about condition. Wants to know more, does not know who to ask for information. Advised: will review comment and options for access to conditions/treatment info (i.e access to NHS Choices information).
- Prisoners wanted to know what ‘immediate family’ meant. Advised: parent, sibling child aunt, uncle, grandparents.
- Once risks highlighted, wanted to know, if high risk, should you have regular colonoscopy? Advised: if GP agrees risk, should be every two-five years.
- How quickly can bowel cancer progress? Advised: difficult to say, but facts around early diagnosis show good results in treatment.
- Why can’t they travel round like blood banks doing the screening? Advised: there are some limited trials in London targeting homeless at day centres. Will take recommendation and highlight. This may be an excellent option for prisoners.
- Asked why have to wait until you are 60? Advised: all screening programmes have age ranges following studies and identifying most at risk. Agree that perhaps for prisoners could be lower given higher likelihood of key factors (stress, smoking, diet).
- Attendees assumed we had been to other prisoners or this was happening in other prisons. Advised: not as far as we are aware, or in this format. This is the first for Bowel Cancer UK, and first in male unit (had carried out talk on ovarian cancer in female unit).
- Comment that all prisoners were treated like second class citizens and not told about anything. Stated that they were very grateful for the work we were trying to do to raise awareness of condition. Also, that they wanted to have the knowledge to challenge when not taken seriously.
- Comments about difficulty getting a GP appointment although some stated they could get an appointment easily.
- One stated he had tooth ache for six weeks, and ended up pulling out own tooth. Were told he may have DNA apts. - issue with internal communications - HWP to escalate.
- **Comment from nearly all attendees - very positive and appreciative of presentation and the information given.**