

# CERVICAL POSTER ENGAGEMENT FEEDBACK

February 2018



# CERVICAL SCREENING POSTER ENGAGEMENT FEEDBACK

## Project Background



Cervical cancer is the second most common cancer among women worldwide. Cervical screening can reduce cervical cancer deaths by:

- Finding and treating precancerous cell changes to prevent cancer
- Identifying very early signs of cervical cancer, allowing for a greater chance of survival and less aggressive treatment.

Uptake of cervical screening varies widely between and within Clinical Commissioning Groups in Wessex, with low uptake in more deprived urban communities. In line with the rest of the country, uptake has been decreasing over many years.

In November 2017, NHS England South East and South West proposed a cervical screening campaign for the Wessex area (Hampshire, Isle of Wight and Dorset). Four potential campaign posters were developed by NHS Creatives. To gather feedback on the effectiveness of the posters, women in Wessex were asked to give their views on the images and wording and their likelihood to attend screening after seeing the posters.

Women were also asked about the effectiveness of radio and/or social media campaign advertising.



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## Engagement Activity Summary



Between December 2017 and February 2018, 77 women in Winchester, Southampton and Boscombe gave their feedback. The women were primarily those with young children who were engaged through Children's Centres and Library story times as well as staff from a Tesco store in Southampton.

70% were White British; other ethnicities included Asian, Black British, Chinese, White European and White Other.

Women were shown four potential posters and were invited to complete a short questionnaire to capture their views and preferred methods of cervical screening advertising e.g. social media and/or radio.

Most of the women who took part  
in the survey were aged 29-49.

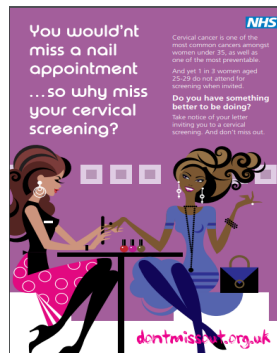


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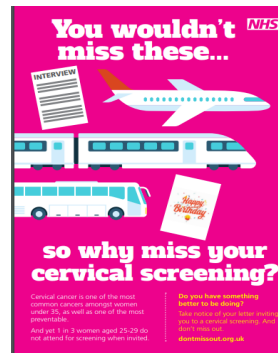
## Main Findings—posters



Poster 1



Poster 2



Poster 3



Poster 4

Poster 1 was the most favoured; many women commented that it was the clearest:

‘no.1 has clearest font’, ‘Poster 1 stands out more - perhaps due to the font used & not so busy’, ‘eye-catching and ‘easy to read’  
‘Poster 1 is most effective as you don't have to read into it much to know what it is’

Poster 1 is the only poster using black block capitals on a light background.

Poster 4 was the least favoured; feedback indicated a lack of clear messages around clarity:

‘Poster 4 looks like a dating website; not immediately obvious’ ‘Poster 4: red background, font not very easy to read’

Many women found the posters ‘stereotypical’, ‘too pink’, ‘girlie’ and ‘mildly offensive’





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## Poster Suggested Improvements

I suggest..

### Suggested improvements on the posters included:

- Incorporating real life images and stories
- Reducing the amount of text
- Using a clear font and short strapline
- Using a harder hitting message about the repercussions of not attending
- Including statistics - e.g. higher rate of success/survival if cancer picked up early
- Fewer stereotypical images and words
- Include a comment about how long screening takes -reassure that it's straightforward
- Include cost to the NHS of each missed appointment
- Celebrity involvement to aid encouragement.

'Use more positive language around how screening is something women can do to take care of themselves'



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## Communication Channels



83% of the women used Facebook, while 15% used Twitter.

53% of women said they were likely to or definitely would make an appointment as a result of seeing a campaign on social media.

34% said they listened to local radio. Preferred stations included Capital, Heart, Radio 1, Fire, Wave 105, SAM FM, BBC Radio 1-4 & 6, Magic, Solent.

Wave 105 was the most listened to radio station.



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Wessex Voices

local healthwatch  
working together

NHS  
England

## Lessons Learnt



Accessing groups such as Mother & Toddler groups and library Wriggle & Rhyme time was very successful, especially if the survey was presented at the end of the session before the parents had started to pack up.

Employers were generally reluctant to allow staff into the workplace to survey staff, resulting in most of feedback coming from women who have recently accessed the healthcare system.

LGBT, women with learning difficulties or support groups for rape victims were not approached. Future engagement should include views from wider community groups to ensure all voices are reported, including seldom heard.



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## NHS Feedback





## Acknowledgements



### About Wessex Voices:

The five local Healthwatch organisations in Wessex (Dorset, Hampshire, Isle of Wight, Southampton and Portsmouth) came together with NHS England Wessex in 2015 to form "Wessex Voices", an initiative that aims to make sure local people are involved in designing and commissioning health services.

We would like to thank everyone who contributed to this report and gave their valuable feedback.

The contents of this report are fully informed by our community engagement and other relevant stakeholders.

If there is any aspect of this report which you feel is inaccurate or if you would like to be kept informed of any future engagement activities, please contact us by -

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