

Measuring the importance of attributes that influence consumer attitudes to colorectal cancer screening.

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BACKGROUND: The aim of the present study was to rate the importance of attributes of screening for bowel cancer. **METHOD:** Randomly selected households in central Sydney were contacted to identify men and women aged 50-70 years who were then asked to complete a self-administered questionnaire about bowel cancer screening and related issues. Seven hundred and ninety-one residents (362 men and 429 women) returned questionnaires. Respondents were asked to rate the extent to which each of 34 attributes would encourage them to participate in bowel cancer screening. **RESULTS:** The three most highly rated attributes were: if the test was recommended by their general practitioner (GP; 94% either 'strongly agreed' or 'agreed'); if the test identified early cancers (92%); and if the test would avert a premature death due to bowel cancer (90%). Having a friend or relative with bowel cancer (61%), advertising (41%) or famous people promoting the program (62%) were less influential. Respondents who were unemployed or on a pension were less likely to participate in screening than those who were employed if there was an 'out of pocket' charge of \$15.00 ($\chi^2 = 7.56$, 2df, $P = 0.006$). Respondents with higher levels of education were significantly more concerned than respondents with lower levels of education about test accuracy ($\chi^2 = 15.76$, 2df, $P < 0.001$), its availability from their local chemist ($\chi^2 = 16.96$, 2df, $P < 0.001$), being able to return the test kit by post ($\chi^2 = 21.9$, 2df, $P < 0.001$) or deposit it with their local chemist ($\chi^2 = 10.0$, 2df, $P < 0.01$). They were also less likely to be influenced by a famous person promoting bowel cancer screening ($\chi^2 = 18.87$, 2df, $P < 0.001$). **CONCLUSIONS:** Our results endorse the role of the GP in bowel cancer screening. However, the study also has demonstrated that test accuracy, the convenience of the screening service and notification of test results are valued differently by subgroups in the community, according to their level of education.

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