



A Cancer Screening Toolkit for Our South Western Sydney Mob

Everything you need to know about testing yourself for cervical, breast & bowel cancer

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Gandangara Local Aboriginal Land Council (GLALC) and its entity Gandangara Health Services acknowledges the families within the Cabrogal Clan of the Darug Nation as the Traditional Custodians of the land we span. We pay our respects to all Elders, past, present, and emerging and to all First Peoples within our communities.

The objectives of the Gandangara Local Aboriginal Land Council are to improve, foster and protect the best interests of all Aboriginal persons within the Council's area and all other persons who are Members of the Council (s 51 *ALRA 1983*) (NSW).

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An important message to men reading this information

This brochure contains information about Women's Business (found in the PINK PAGES) that some may find sensitive. The decision to include this information was made for the benefit of both men and women for the following important reasons:

- Through the many health workshops and yarning sessions that we have conducted, we received a lot of feedback from the community that men want to increase their understanding of women's health issues
- This can be done through increasing knowledge and education about women's health
- This should help men develop empathy for their women
- This booklet provides men with the tools to help them encourage and empower the women in their lives to screen themselves for cancer
- For those in LBGTQI+ Community, it is important to ensure you are being screened appropriately. Anyone with a cervix or breasts should be screened regardless of sexuality or gender.



The BLUE PAGES that follow the PINK PAGES include practical ways that men can encourage and support women to screen themselves.

Supported by



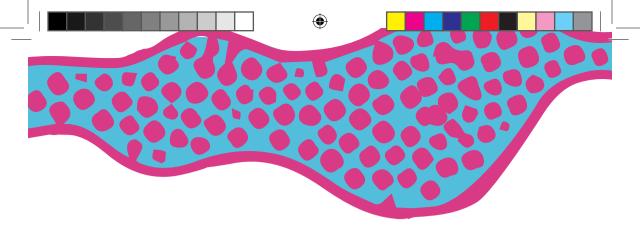
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WARNING: THIS PUBLICATION MAY CONTAIN NAMES & IMAGES OF FIRST PEOPLES WHO ARE NOW DECEASED.

Contents

Section 1: Inf	ormation guide		
Ca	ncer Screening	05	
What is cancer?	05		
What is cancer s	06		
Why is regular se	07		
How many people	08		
Why don't people	e screen?	09	
What if I have sy	10		
Cervical Screen	13		
How does cervice	How does cervical screening work?		
Cervical cancer	17		
What do I have t	18		
When am I due?	19		
Explaining the pr	21		
Self-Collection		23	
Results	26		
Other things to c	28		
Breast Screening	31		
How does breas	t screening work?	33	
Breast cancer in	34		
What do I have t	35		
Explaining the pr	35		



Results	37
Other things to consider	38
Bowel Screening	41
How does bowel screening work?	43
Bowel cancer in our mob	44
What do I have to do?	45
Explaining the kit	46
Steps for completing your bowel kit	47
Results	51
Other things to consider	52
Overcoming Barriers To Screening	53
What Else Can I Do To Prevent Getting Cancer?	55
What If I Have Cancer?	56
Section 2: Local Services And Contacts	57
Section 3: References	65

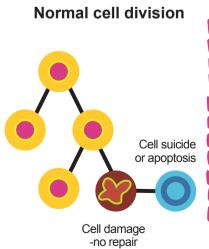
Section 1: Information guide: Cancer Screening

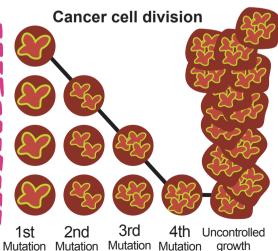
What is cancer?

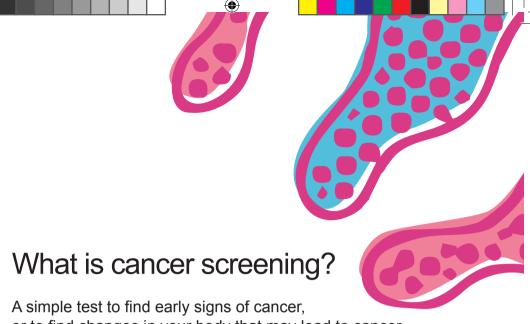
Your body is made up of cells.

A normal cell splits in half (divides) until it becomes damaged when it will die. On average, an adult will lose and replace 50-70 billion cells every day.

Cancer cells are normal cells that have not died as they should, and instead, the damaged cells keep splitting and spreading and make your body sick.

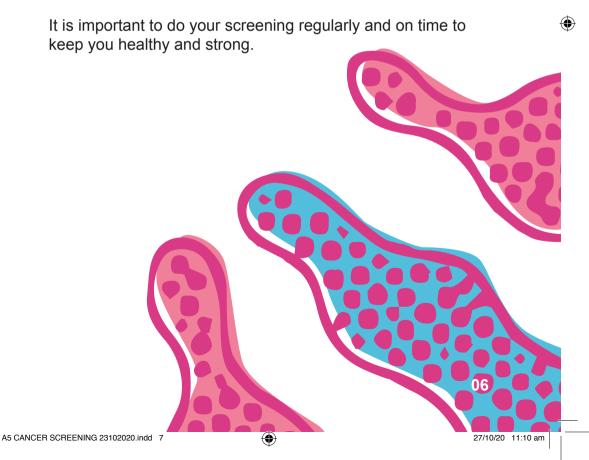






or to find changes in your body that may lead to cancer.

Cancer screening is for people without symptoms, as symptoms usually don't appear until later stages of cancer.



There are 3 National Cancer Screening Programs that are offered for free in Australia when you turn a certain age;

Program	Eligible Age	How Often?
National Cervical Screening Program	When you turn 25, and up to 75	Every 5 years
BreastScreen Australia	Offered from 40 years, and up to 75	Every 2 years
National Bowel Cancer Screening Program	When you turn 50, and up to 75	Every 2 years

Why is regular screening important?

Regular screening helps to prevent cancer.

Regular screening detects cancer early on, which means that you have more time and more options for treating it and increases your chances of getting rid of it.

Regular screening can help you live a longer and healthier life.

Living longer is good for both you and your mob because they get to have you around for much longer, and you're able to share more of your knowledge and culture with them.

The National Cervical Screening Program has HALVED the rates of cervical cancer and death caused by cervical cancer in the total population since starting in 1991 (Cancer Council 2019).

BreastScreen Australia has reduced the deaths from Breast cancer by a THIRD since starting in 1991 (Australian Government Department of Health 2015).

The National Bowel Cancer Screening Program is expected to save at least 59,000 lives and prevent 92,000 cases of bowel cancer in Australia over the next two decades (Menzies 2020).

How many people participate in screening?

Not enough.

People of all ages and races are still dying of cancer because it is being found too late.

Aboriginal and/or Torres Strait Islander people screen less than Non-Aboriginal people.



Breast screening participation
Aboriginal 37%
Non-Aboriginal 53%



Bowel screening participation
Aboriginal 20%
Non-Aboriginal 43%



Cervical screening participation
Estimated gap of 20%-30%
Between Non-Aboriginal & Aboriginal women

(Infographic re-created from source: Australian Indigenous HealthInfoNet (2020))

Why don't people screen?

There are many reasons why a person would not screen.



It is important to know that whatever the problem or barrier, there are things in place to overcome them and to allow everyone to access screening.

Please see "Overcoming Barriers" section on page 53

What if I have symptoms?

If you have any worrying signs or symptoms described on the next page, you should go to your doctor to look into them.

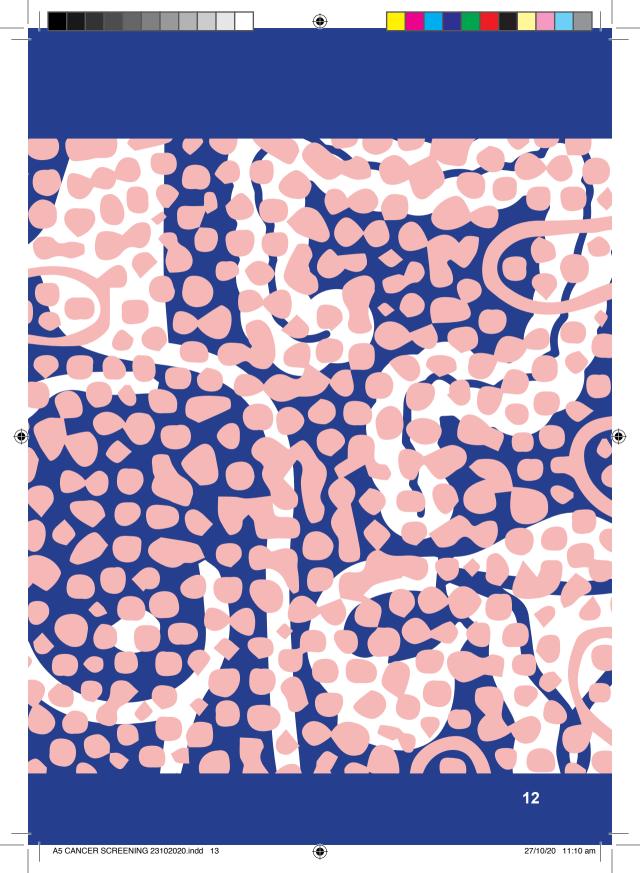
Having signs or symptoms might make you nervous, but doing nothing can only make things worse, so go to your doctor as soon as you notice them.

Please note, most people who have any of these signs and symptoms do NOT have cancer, but it is smarter and safer to **go straight to your doctor** or **health professional** and find out what is causing them.

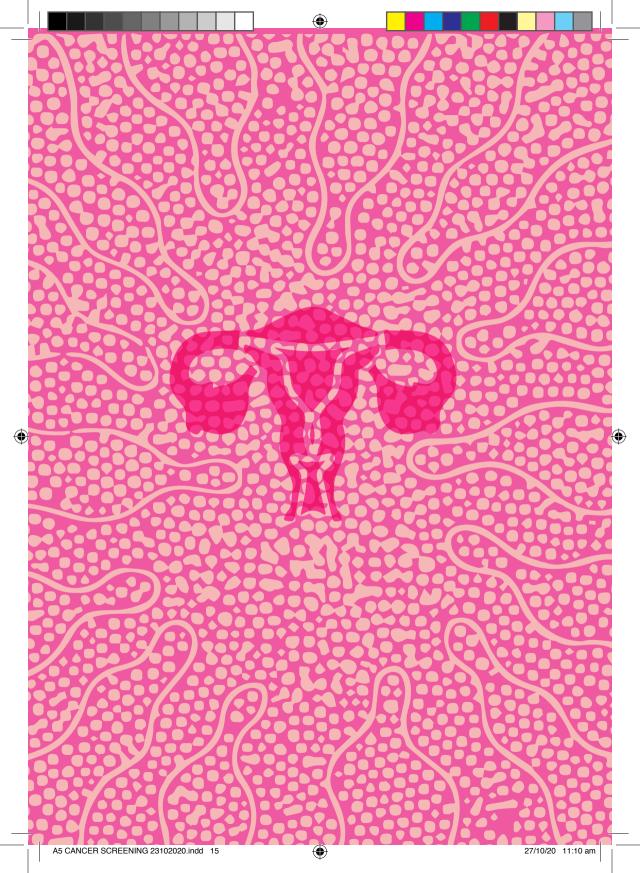


Symptoms include:

Cervical	Breast	Bowel	
Vaginal bleeding between periods	New lump in the breast or armpit	Blood in the poo	8
Bleeding after sex	Thickening or swelling of part of the breast	Change in the bowel habit (diarrhoea, constipation or the feeling of incomplete emptying)	
Pain during intercourse	Dimpling of the skin on the breast (looking like orange peel)	Abdominal pain, bloating or cramping	3
Unusual vaginal discharge	Pulling in of the nipple	Unexplained weight loss	
	Pain in the nipple area		
Vaginal bleeding after menopause	Discharge from the nipple	Unexplained tiredness, weakness or fatigue	
тепорацье	Pain in any area of the breast		



Cervical Screening



How does cervical screening work?

In December 2017, the old Pap Smear test was replaced by the Cervical Screening Test. It is the same procedure for you, but it is a much more accurate test. The Pap smear would find abnormal cells that might be cancer, but the Cervical Screen finds a virus called HPV.

Human Papillomavirus (or HPV) is a very common virus found on the cervix (in the vagina), about as common as the common cold. 80-90% of women will have HPV at some point in their life.



There is no treatment for HPV. It usually runs its course and is cleared from the body naturally in 1-2 years. This is a normal cycle.

Sometimes your body won't clear it by itself, and it will hang around for a long time. If it hangs around for more than 10-15 years, this can cause cervical cancer.

With new technology, we know that over 99% of cervical cancers are caused by long infections with HPV (Cancer Institute NSW 2020).

A Cervical Screening test lets us know if you have HPV. It is important to know that if you have HPV, this doesn't mean you have cancer.

FACT: HPV does not mean cancer

It just means you should have more regular Cervical Screening tests to see if it clears itself, or follow up with a specialist.

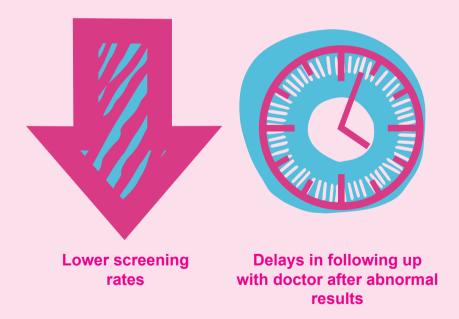
And if it doesn't clear itself and creates changes in the normal cells, we can begin treatment early on and it is much easier and more successful.

Cervical cancer in our mob

The National Cervical Screening Program has halved the rates of cervical cancer and death caused by cervical cancer in the total population since starting in 1991 (Cancer Council 2019).

Cervical cancer is more than **2 TIMES** more common in Aboriginal and/or Torres Strait Islander women than it is in Non-Aboriginal women (Australian Institute of Health and Welfare 2019). The death rate is more than **3 TIMES** the non-aboriginal rate.

These statistics are directly linked to:



YOU CAN STOP THIS HAPPENING TO YOU!

Women who do not have regular cervical screening may only see their doctor after they see symptoms appearing, which may mean that cancer has already developed.

Women who do not get screened regularly can miss changes happening that would have been found sooner.

Cervical screening helps us find the problem that causes cancer early on, and gives us the opportunity to act quickly to keep you healthy!

What do I have to do?

To make big reductions in the rates and deaths from cervical cancer in our mob, there are some simple things we can all do:

- 1. Book in the test
- 2. Show up and get it done
- 3. Keep up to date with your screenings
- 4. Encourage other women in your life to get the test done too
- 5. If you have an abnormal result, keep following up as advised by your health professional
- 6. Be proactive and ask your doctor or health professional to put a reminder in their system when you are due next so that you don't forget. Keep your file updated at your regular Doctor (tell them if you have your screening somewhere else)



When am I due?

A Pap Smear would find abnormal cells or cancer on the cervix. It was recommended every 2 years.

The new Cervical Screening test, which started in December 2017, looks for HPV before changes occur. It is recommended every 5 years for anyone with a cervix between the ages of 25 and 74 (inclusive).

If you are	Then you are due
Under 25 years old and have never had a cervical screen	When you turn 25
Under 25 years old and your last pap smear was normal	When you turn 25
Under 25 years old and your last pap smear was abnormal	As recommended by your health professional
25-74 years old and last pap smear was before December 2017	Now
25-74 years old and never had a cervical screen or pap smear	Now
25-74 years old and had your last screening after December 2017	5 years after a normal test Or As recommended by your health professional after an abnormal test

You can call your regular health professional, or a Women's Health clinic, or your Gynaecologist. Please see **Section 2: Local Services and Contacts** on page 57 if you don't know who to call or where to go.

If you cannot remember exactly when you had your last test, and you are unsure if you are due or not, you can:

- Contact the place where you had your last Cervical Screen or Pap Smear; or
- Call the National Cancer Screening Register on 1800 627 701, and they can tell you when your last screen was and when you are next due. Your health professional can do this on your behalf also.



Explaining the process

When you arrive for your appointment, you will speak to a doctor or nurse about the test and have a chance to ask any questions.

A female doctor or nurse will usually do the test, though some males are trained to do it. Make sure to request a female if you are not comfortable with a male. Speak up for what you need. Nobody will be offended.

Make sure you are open and honest with the doctor or nurse about any worries or questions that you have. Let the doctor or nurse know if you have had problems with screening in the past. Talking through the problems often helps you to have a better experience. Ask if you need to empty your bladder.

They will insert the speculum into your vagina and gently open it so that they can see the cervix.



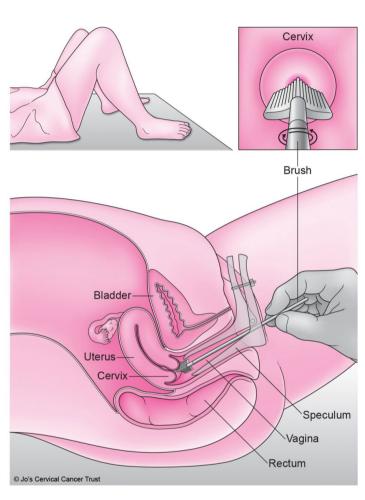
Speculum (open)

They will then use a soft brush on the cervix to collect a sample (this should not be painful at all).

They will then remove the speculum, and you can sit up and get dressed again.

The whole collection takes only a couple of minutes, usually.





Cervical screen procedure from Jo's Cervical Cancer Trust (2020)

Self-Collection

Some women are eligible to complete a self-collection. Your doctor will speak to you about this if they think it is right for you. You do the test by yourself, in a private room or in the bathroom in the clinic. You do not take it home. They are only offered to women who:

- Are 30 years and over, and
- Decline a cervical screen by a clinician, and
- Are overdue for cervical screening by at least 2 years or have never screened

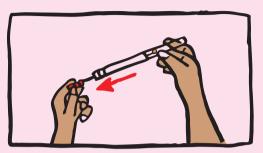
They are not offered to women who:

- Are pregnant, or
- Are under 30 years of age, or
- Have any worrying symptoms, including abnormal vaginal bleeding, or
- Have had treatment for certain types of cervical cancers in the past (HSIL or adenocarcinoma in situ (AIS))
- Have been exposed to DES in utero (speak to your health professional if you were born between 1938-1972 and are unsure)

The woman will be told to insert a swab about 7cm into the vagina and gently twist it for 10-30 seconds, and then put it in a tube.



HOW TO TAKE YOUR OWN HPV TEST



Step One

- Lower your underwear
- Twist the red cap & pull out the swab
- Look at the swab & note the red mark closest to the soft tip



Step Two

- Get in a comfortable position
- Insert the swab into your vagina, aiming to insert up to the red mark



Step Three

- Rotate the swab gently 1-3 times
- Then remove the swab
- It should not hurt



- Remove the swab & place it back in the tube
- Return the tube to your doctor or nurse
- If you have any questions, ask your doctor or nurse



Self-collected Cervical screen, re-created from source Royal Australian College of General Practitioners (2018)

So why can't all women do a self-collect?

Self-collected swabs only allow for one test to be done.

A regular cervical screen by a doctor or nurse allows for a few tests from the one sample.

If HPV is found on a self-collected swab, the woman needs to come back and have a cervical screening test done by a doctor or nurse to get more information.

There can be a time delay here, which can put the woman at risk.

Letting the health professional do the test from the start makes the process quicker, easier and safer for the woman.





Results

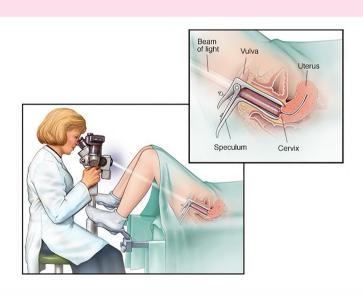
You will get your results of the Cervical screening test in the mail, and a copy will be sent to the doctor or nurse who conducted the test, as well as any other doctor that you nominate (if you don't get the test done with your regular doctor you should nominate them to receive a copy also to keep your file up to date).

Possible Results	
Return to screen in 5 years	Everything is normalNo HPV or abnormalityRe-screen in 5 years
Unsatisfactory result	 Something went wrong at the lab & your sample couldn't be tested Re-screen in 6-12 weeks HPV found, which will usually be cleared within 12 months (infection) Re-screen in 12 months
Refer to Specialist	 Higher risk HPV found, or changes in the cells found (does not always mean cancer) You need to see a specialist for more testing or treatment

You should **follow up with your doctor without waiting if you have an abnormal result** so they can see whether you need to have more tests done now, or have more regular cervical screenings to watch for changes.

Remember, if you have HPV this does not mean you have cancer. It is very common and usually clears itself in 1-2 years with no treatment needed

For some abnormal results, women may have another test called a **Colposcopy**. This is a similar experience to the Cervical Screen for the woman, with a speculum being placed inside the vagina to view the cervix. In this test, the doctor has a close look at the cervix with a magnifying instrument, called a Colposcope. As can be seen in the below picture, the instrument does not go in the vagina. The doctor can see any changes in the cervix, how much change, and might also take a biopsy of the cells for testing.



Mayo Clinic Colposcopy Examination sourced from Mayo Clinic (2020)

Other things to consider

It is important for everyone with a cervix to complete regular cervical screening. This includes;

- Women from all ethnicities
- Women who do not have sex with men
- Women who are not currently sexually active
- Women with disabilities
- People who do not identify as female, but who have a cervix (transgender)
- Women who have had a partial hysterectomy, but still have a cervix (also called a 'subtotal hysterectomy')
- Older women
- Women who have had the HPV vaccine (because the vaccine doesn't protect against all types of HPV)
- Women who are pregnant (it is safe during pregnancy)

As long as you have a cervix, you can get cervical cancer, so it is important to include regular cervical screening in your health routine.

Health professionals are aware that the thought of cervical screening is not easy for some. This is especially the case of people who have a history of trauma.

Do not hesitate to yarn about your experiences to the doctor or nurse. You can also seek counselling support to help you to recover from your experiences.

A doctor or nurse should never pressure you into cervical screening if you are not comfortable. For people with a trauma history, it can be a journey to achieve a cervical screening, and you should have a health professional that walks with you and supports you through that journey.



Practical tips for men to support cervical screening

- Understand that Cervical screening is quite invasive
- Ask her how she is feeling
- If she is nervous, remind her how important screening is, and that it will only take a few minutes
- Offer to go with her to her appointment if she would want that
- Offer to watch the kids to give her the opportunity to make an appointment and get there
- Be proud of her for getting it done! Tell her how proud you are of her and consider doing something special for her
- Understand if she wants to go straight home for a shower afterwards
- Put a reminder in your phone, or hers, for the next cervical screen

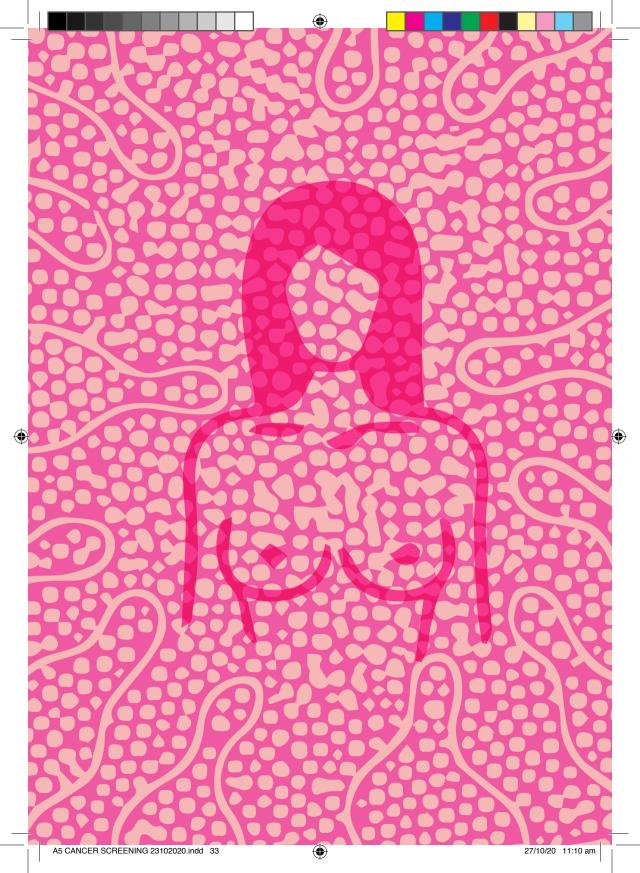








Breast Screening



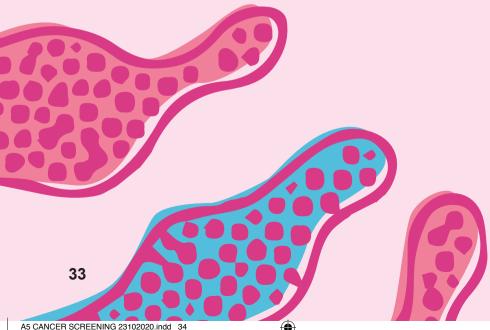
How does breast screening work?

Breast screening is an x-ray of the breast tissue (also called a mammogram).

The x-ray looks for signs of cancer (lumps) and can see cancer before it is big enough to feel through your skin.

Most lumps are normal hormonal changes to the breast, but if any lump is found more tests need to be done to find out whether it is normal or not.

Treatment of breast cancers are most effective when they are small, so it is important to have regular screening. If found early, up to 9 out of 10 women will survive (Australian Government Department of Health 2015).

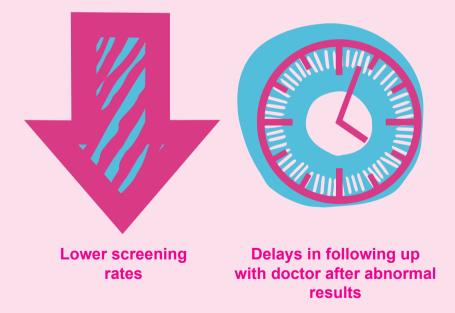


Breast cancer in our mob

Breast cancer is the most commonly diagnosed cancer in Aboriginal and/or Torres Strait Islander women, accounting for 25% of all female cancers in this group, and it is estimated that 1 in 11 will develop it (Tapia et al. 2017).

Aboriginal and/or Torres Strait Islander women experience significantly poorer outcomes than other Australian women, including a death rate of 48 per 100,000 women aged 50-69, when compared to 44 in Non-Aboriginal women (Tapia et al. 2017).

This is attributed to a combination of factors, including:



WHICH MEANS WE CAN CHANGE THIS!

What do I have to do?

Call **BreastScreen NSW** on **13 20 50** and book an appointment at your closest screening site. **It's as easy as that!** (Go to page 58 for local BreastScreen locations)

You don't need to see a doctor first or get a referral. You can do it all by yourself.

Write your most regular doctors details on the registration forms so the result will go to so the results will go to them too. If everything is in the one place, the doctor can organise further testing if necessary, and remind you when you are due next.

Be **proactive** and tell your HEALTH PROFESSIONAL when your last screening was completed. Ask your health professional to put a reminder in their system when you are due next so that you don't forget.

Tip: On the day of your appointment, make sure to wear a 2-piece outfit, so you can take your top off but keep covered from the waist down.

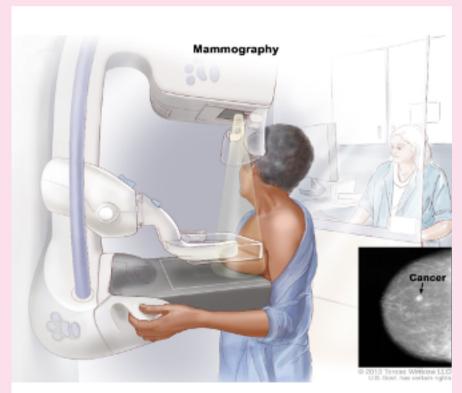
Explaining the process

All BreastScreen staff are female.

You will be taken to a private room and get the chance to speak about your worries. Take the time to explain your feelings to the staff and they will try to help as much as possible. You can choose to have a support person with you, but if you would like an Aboriginal Health Worker from your regular Aboriginal Medical Service, this will need to be pre-organised.

The staff will talk you through the process as it happens. The machine will have 2 plates that can be moved together. Your breast will be between those 2 plates to take the x-ray pictures.

When you are comfortable, you will be asked to take your shirt and bra off. One of the staff will assist you in positioning one breast on a flat plate of the machine. The plates will then be moved together. This should not be painful for you, but it does need to flatten the breast tissue so it will feel a bit tight.



Mammography infographic sourced from National Cancer Institute 2019

Once one breast is done, you will repeat this with the other breast. In total the mammogram takes less than 20 minutes.

Once both breasts have been done, you can put your bra and shirt back on, and the breast screen is done.

Results

It usually takes 2-4 weeks for a BreastScreen result to come back.

Possible F	Possible Results				
Normal	All breast tissue looked normal	Return to routine screening, next screen in 2 years.			
Abnormal	Something unusual was seen and needs more investigation. Most women who are called back do NOT have cancer (can be hormonal lumps, cysts etc.).	You will need to return to Breast-Screen for more tests. This could be more x-rays, an ultrasound, a breast examination, or a biopsy (a needle takes a sample of the area).			

Do not panic or worry if you get called to come in to see your doctor. In some clinics, it is routine to make an appointment to follow up any results, normal or not. In general, practices are not allowed to give results over the phone.

Reach out if you need more support with a result. Gandangara Health Services offers culturally appropriate support for all Aboriginal and/or Torres Strait Islander people.

In the past, Aboriginal and/or Torres Strait women have been less likely to come back for further testing if a lump is found.

This is a problem because, without more tests, we don't know whether the lump is cancer or not.

Remember, if treated early 90% of women will survive breast cancer, so don't delay!

Other things to consider

If you have breast implants, a mobility issue, or any other condition that you think might impact your ability to have a breast screen safely. Please call **BreastScreen** on **13 20 50** to discuss.

Most of the time, you will still be able to get your breast screening done at a BreastScreen site, but there are other options for women who cannot have a mammogram, including breast ultrasound. You will need to discuss this with your doctor.

A family history of breast or ovarian cancer may mean that it is recommended you be screened every year, instead of every 2 years. Let your health professional and BreastScreen know if you have a family history of breast cancer.

It is also important to get to know your breasts. Breasts and nipples come in all shapes and sizes, so you need to know what is normal for you so you can notice any changes.



Breast self examination







It is also important to get to know your breasts

Examine breast and armpit with a raised arm

Use fingerpads with massage oil or shower gel







Up and down

Wedges

Circles







Examine breasts in the mirror for lumps or skin dimpling...

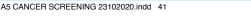
... Change in skin colour or texture...

...Nipple deformation, colour change or leaks of any fluid

Breast Self-Examination infographic re-created from source Clary Collection (2018)

Practical tips for men to support breast screening

- Ask her how she is feeling
- If she is nervous, remind her how important screening is, and that it will only take a few minutes
- Remind her to wear a 2-piece outfit, not a dress
- Suggest going with a female friend or relative so that they can keep each other company, or getting involved with a group booking (ask at Gandangara Health Services)
- Offer to go with her to her appointment if she would want that
- Offer to watch the kids to give her the opportunity to make an appointment and get there
- Be proud of her for getting it done! Tell her how proud you are of her and consider doing something special for her
- Put a reminder in your phone, or hers, for the next breast screen.





Bowel Screening



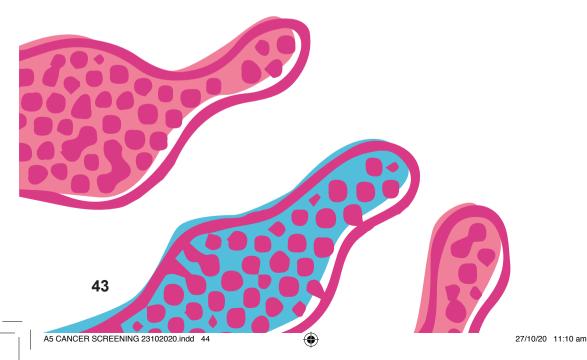
How does bowel screening work?

A Bowel Screening test takes a very small sample of your poo (smaller than a grain of rice) and looks for traces of blood that can't be seen. Blood in the poo can mean a lot of different things, but it can be an early sign of bowel cancer.

It can also be a sign of polyps, or inflammatory bowel disease, which if left untreated, can cause bowel cancer. This means that bowel screening can help to prevent bowel cancer also!

Bowel Screening is not a shame; it is a part of life. It is a lot easier and more hygienic then what most people think. It only takes a few minutes out of your day, and it could save your life!





Bowel cancer in our mob

An average of 31 Aboriginal and/or Torres Strait Islander people die of bowel cancer each year across Australia (Australia Institute of Health and Welfare 2018). Aboriginal and/or Torres Strait Islander people have a 58% chance of surviving for five years after being diagnosed with bowel cancer, but Non-Aboriginal Australians have a 67% chance (Australian Institute of Health and Welfare 2018).

If found early, bowel cancer can be successfully treated in more than 90% of cases, and screening usually finds pre-cancerous and very early signs (Cancer Institute 2020a).

Therefore, a key reason for high death rates with bowel cancer is:



WHICH MEANS WE CAN CHANGE THIS!

What do I have to do?

If you are over 50, you will receive a Bowel Screening Kit in the mail that looks like this:



If you have not received a kit, or if you need another one, you can contact the program register on **1800 118 868** to get a kit sent to you.

Or, if you are Aboriginal and/or Torres Strait Islander and eligible for screening, call **Gandangara Health Services** on **(02) 9601 0700** to have a yarn with a nurse about our free Bowel Screening Kits!

Or come by and have a yarn in person at Gandangara Health Services: 64 Macquarie Street, Liverpool.

Once you have your Kit, you simply need to follow the instructions inside to collect a sample, and send it off in the mail (postage is already paid).

IT'S THAT EASY!

Explaining the kit

The below image shows what is in your Bowel screening kit.



- 1 Home Test Kit Instructions
- 2 2x Toilet Liners
- 3 2x Collection Tubes
- 4 1x Ziplock bag
- 5 1x Reply paid envelope

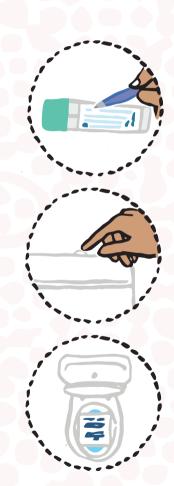




Steps for completing your bowel kit

Step 1 - Prepare

- 1. On one of the tube labels, write your
- full name
- date of birth
- date you take the sample
- 2. Before collecting your sample, empty your bladder (do a wee) and flush the toilet
- **3.** Put the toilet liner over the water in the toilet bowl. The writing should be facing up
- **4.** If the toilet liner sinks, it's still ok to take the sample, or you can request a new kit.



Step 2 - Collect

- 1. Do your poo onto the toilet liner
- 2. Open the collection tube by **twisting** the green cap
- 3. Scrape the tip of the stick over different areas of the surface of the poo. The sample only needs to be tiny smaller than a grain of rice
- 4. Put the stick back into the collection tube and click the lid shut. Shake the tube up and down several times. Do not remove the stick again.



5. Flush the toilet liner and poo down the toilet. Wash your hands.



Step 3 - Store & repeat

- 1. Place the tube into the ziplock bag
- 2. Put the sample in the fridge.(Do not freeze)
- 3. Repeat Steps 1-3 with the second tube when you do another poo (On the same day, the next day, or as soon as you can).



Step 4 - Send

- 1. Complete the Participant Details form
- 2. Write your name and address on the back of the reply Paid envelope and sign the front
- 3. Put the Participant
 Details form and the
 two collection tubes
 (in the sealed ziplock
 bag) into the reply paid
 envelope and seal it
- 4. Take the envelope to a post office within 24 hours, or mail in the late afternoon (before 6 pm) using an Australia Post mailbox. The samples must remain cool, so do not leave them in a hot place such as a car.



Results

Results take up to 2 weeks.

Possible Results			
Negative	No traces of blood were found	Return to routine screening, and the next Kit will be sent to you in 2 years.	
Positive	Traces of blood were found. About 1 in 14 people will have a positive result (Cancer Council 2019b)	You will need to go to your health professional who will do some more tests to find what is causing the blood. This could be another bowel screening kit, a physical examination, or a colonoscopy.	

Don't panic or worry if you get called to come in and speak to the Doctor about your results. Most clinics will routinely make an appointment with your doctor to give you the results of your test, normal or not. In general, practices are not allowed to give results over the phone.

Other things to consider

If you have a family history of Bowel Cancer, your doctor might recommend that you do Bowel Screening more regularly, or that you have regular colonoscopies instead.

If you have had a colonoscopy in the last 2 years, or if you have had Bowel Cancer in the past, you should follow the advice of your specialist doctor. They will tell you when you need to go for another colonoscopy, or when you need to return to regular Bowel Screening with a Kit.







Overcoming Barriers To Screening

Barrier How it can be overcome		
Lack of transport – can't get there	 BreastScreen Mobile Van comes to your area throughout the year Gandangara Transport Services provides transport to and from medical appointments (as well as social/cultural commitments) (Phone: (02) 9608 0968) Aboriginal Chronic Care Program (ACCP) at Budyari in Miller can organise transport for all Aboriginal people with Chronic medical conditions 	
Perceived cost	Screening is FREE!	
Time	 Breast Screening – takes less than 20 minutes – only once every 2 years Bowel Screening – takes a few extra minutes during 2 poo's to collect the sample – only once every 2 years Cervical Screening – takes a few minutes for the actual procedure, and a short conversation with the doctor or nurse beforehand – only once every 5 years All the things that are taking up your time now are the things you might miss out on if you do not do your screening 	
Trauma passed down through families	 Negative experiences of family members with the medical system might mean it is hard to trust the system now Find a health professional and/or nurse that you trust and go through them Access an Aboriginal Medical Service 	

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Barrier	How it can be overcome		
Fear	 It is normal to feel scared about finding something, but early detection is key Better outcomes if you get screened regularly Survival rates increase drastically with regular screening A nurse or health care worker can attend your appointments with you for support If cancer is found, there are many health workers & organisations that will support you through your cancer journey. You will not be alone Group booking available for Breast screening 		
Lack of under- standing/ knowledge of the 3 National Screening programs	 Resources like this toolkit to emphasise the importance of screening in saving lives Many health promotion initiatives aimed at spreading the news about the availability and benefits of cancer screening You can bring someone along with you to your appointments for support/help understanding medical words A nurse or health care worker can attend your appointments with you to help explain things later Don't be afraid to ask questions 		
Shame	 Cancer is not a punishment for past mistakes or choices Some screening feels invasive and embarrassing, but the benefits of screening far outweigh a few minutes of nerves Screening is conducted by professionals Screening is not shamed, it is a part of life and saves lives that don't need to be lost Group bookings available for Breast screening 		





What Else Can I Do To Prevent Getting Cancer?

There are many things you can do to live your healthiest life and to help prevent many types of cancer.

Many of these preventative measures also reduce your chance of developing diabetes and other chronic medical conditions that affect the mob more than other Australians.

- 1. Participate in National Cancer Screening Programs
- 2. Avoid and/or quit smoking
- Avoid alcohol
- 4. **Exercise regularly** at least 30 minutes per day on 5 or more days of the week. Avoid obesity.
- Nutrition eat fruits and vegetables every day and make them the largest part of your diet. Limit processed meats. Drink lots of water
- Practice sun safety if in direct sunlight use sunscreen, wear a wide-brimmed hat and clothing that covers your skin
- 7. **Get vaccinated** HPV vaccine helps to prevent HPV which causes cervical cancer, and the Hepatitis B vaccine helps to prevent Hepatitis B which can increase the risk of liver cancer
- 8. **Avoid risky behaviours** practice safe sex to protect against HPV. Don't share needles to avoid transmitting blood borne infections such as Hepatitis
- Get regular medical care self-exams and screenings by your doctor can find issues that can lead to cancer. Some health professionals routinely test for Hepatitis which can go unnoticed otherwise. Finding this and treating it can prevent liver cancer



10. Book in for your 715 Annual Aboriginal Health

Assessment and do it every year. You will work together with your health professional to set goals and reminders for your health and wellbeing, including prevention, screening & early intervention.

What If I Have Cancer?

The following services can provide practical support for you if you have found cancer.

If Cancer is found		
Aboriginal Chronic Care Program (ACCP) at Budyari (Miller) Community Health Centre	 Aboriginal specific organisation Aboriginal health workers & practitioners Assistance through your entire health journey Holistic care 	(02) 8781 8020 18 Woodward Crescent, Miller NSW 2168
Cancer Institute NSW	 What you need to know after a diagnosis Navigating the health system 	(02) 8374 5600 For any person who has cancer: https://patients.cancer.nsw.gov.au/ For Aboriginal Specific information: https://patients.cancer. nsw.gov.au/communities/ aboriginal-and-torres-strait-islander-people
Cancer Council NSW	 Information and support 	13 11 20 https://www.cancercouncil. com.au/

Organisation	What they do
Bowel Cancer A U S T R A L I A	 Information on Bowel screening Information, resources & support for Bowel cancer
BreastScreen NSW BreastScreen NSW	 Check when your last breast screen was Check when you are due for your next breast screen Book in for a screening (no referral needed)

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	Screening	Available	Contact Details
	Yes	No	
			1800 555 494
			https://www.bowelcanceraustralia.org/screening
	Breast Scr	eening	13 20 50
			https://www.breastscreen.nsw.gov.au/
			Fixed sites in South Western Sydney
•			BANKSTOWN - Ground Flr, Civic Tower Building, Cnr Rickard Rd & Jacobs St, Bankstown 2200
			LIVERPOOL (Screening) - 157-161 George St, (Unit 5) Opposite Liverpool Court House, Liverpool 2170
			LIVERPOOL (Screening & Assessment) -102 Bigge St, Liverpool 2170
			CAMPBELLTOWN-Mawson Centre, 4 Browne St (Ground Floor, Unit 3-5), Campbelltown 2560
			BOWRAL - Bowral Street Specialist Centre, Suite 4/70 Bowral St, Bowral 2576
			BreastScreen Van Sites Locations for the year are listed on the BreastScreen website at the beginning of every year. Van site schedules change yearly.



Organisation	What they do
Cancer Institute NSW cancer institute NSW	 Information on Cervical screening, Bowel screening and Breast screening Eligibility for screening The process of screening Where you can go to have Cervical Screening
Family Planning NSW family planning nsw Reproductive & Sexual Health	 Information on Cervical screening Book in for Cervical screening at one of their clinics (usually not bulk-billed, a paid service)

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	Screening .	Available	Contact Details	
	Yes	No		
			(02) 8374 5600	
			Email: information@cancer.nsw.gov.au	
			Cervical: https://www.cancer.nsw.gov.au/cervical- screening-nsw Breast: https://www.cancer.nsw.gov.au/how-we-help/ screening-and-early-detection/breast-cancer-	
_			screening Bowel: https://www.cancer.nsw.gov.au/bowel-screening	
<u> </u>	Cervical S	creening	(02) 975 41322	
			24-26 Nelson Street Fairfield, NSW, 2165	
			Outreach Clinics in South Western Sydney	
			(02) 8752 4322	
			CampbelltownMillerTahmoorVillawood	
			https://www.fpnsw.org.au/	

Organisation	What they do	
Gandangara Health Services GANDANGARA Local Aboriginal Land Council	 Aboriginal health service 2 dedicated Cancer Screening Nurse on site Information about screening, cancer & general health & wellbeing Supply FREE Bowel Kits in clinic to eligible Aboriginal and/or Torres Strait Islander people Provide Cervical Screening in clinic with female doctors & nurses Assist in booking breast screening, arranging transport & support 	
Liverpool Women's Health Centre LIVERPOOL WOMEN'S HEALTH CENTRE	 Holistic Women's Health Aboriginal Health Workers Book in for Cervical Screening Assistance with Breast Screening booking & appointments Counselling services All-female safe place 	
Marumali limited GANDANGARA Local Aboriginal Land Council	 SINGLE POINT OF CONTACT with an Aboriginal Health Worker or Practitioner Access to Culturally trained health providers Receive support & assistance to attend health visits & to make informed decisions 	

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	Screening Available		Contact Details	
	Yes	No		
	Cervical Screening		(02) 9601 0700	
	Bowel Screening		Ground Floor, 64 Macquarie Street, Liverpool NSW 2170	
	Kits	331111g	P.O. Box 1038 Liverpool Business Centre, 1871	
			8:30 am to 6.30 pm Monday to Friday	
)				
	Cervical S	creening	(02) 9601 3555	
			26 Bathurst Street, Liverpool NSW 2170 (corner Campbell & Bathurst Streets)	
			https://liverpoolwomenshealth.org.au/	
			(02) 9602 9677	
			Level 1, 64 Macquarie Street, Liverpool NSW 2170 P.O. Box 1038 Liverpool Business Centre, 1871	
			8:00 am to 5.00 pm Monday to Friday	

Organisation	What they do
National Bowel Cancer Screening Program NATIONAL BOWELCANCER SCREENING PROGRAM	 Information about the Bowel Cancer Screening Program Order a replacement Kit (you need your Medicare number)
National Cancer Screening Register NATIONAL CANCER SCREENING REGISTER	 Check when your last bowel or cervical screen was Check when you are next due for bowel or cervical screening Update your details for the register (contact details, name, Medicare card etc.)
National Cervical Screening Program NATIONAL CERVICAL SCREENING PROGRAM	 Information about the Cervical Screening Program Eligibility
National Indigenous Bowel Screening Program BOWEL SCREENING PON'T DELAY do a bowel test today	 Information about the Bowel Cancer Screening Program Order a replacement Kit (you need your Medicare number)
Tharawal Corporation – Aboriginal Medical Service (AMS)	 Aboriginal Medical Service Information about screening, cancer & your health

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	Screening Available		Contact Details
	Yes	No	
	Bowel Scr Kits	eening	1800 118 868 http://www.cancerscreening.gov.au/internet/screening/publishing.nsf/Content/bowelscreening-1
			1800 627 701 https://www.ncsr.gov.au/
)			13 15 56 http://www.cancerscreening.gov.au/internet/screening/publishing.nsf/Content/cervical-screening-1
	Bowel Scr Kits (Via Ganda Health Ser see above)	angara vices	1800 118 868 https://www.indigenousbowelscreen.com.au/
	Cervical s	creening	(02) 4628 4837 187 Riverside Drive, Airds, NSW 2560 https://www.tacams.com.au/medical.html

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Gandangara Local Aboriginal Land Council

Head Quarters: 103 Moore Street, Liverpool NSW 2170

Current Office: Level 1, 64 Macquarie Street, Liverpool

NSW 2170

Business address: P.O. Box 1038

Liverpool Business Centre, 1871

Phone number: (02) 9602 5280

Business hours: 9.00 am to 5.00pm Monday to Friday

Gandangara Health Services Limited

Office: Ground Floor, 64 Macquarie Street,

Liverpool NSW 2170

Business address: P.O. Box 1038

Liverpool Business Centre, 1871

Phone number: (02) 9601 0700

Business hours: 8:30 am to 6.30 pm Monday to Friday

Gandangara Transport Services Limited

Office: 14 Weld Street, Prestons NSW 2170

P.O. Box 1038

Business address: Liverpool Business Centre, 1871

Phone number: (02) 9608 0968 Facsimile number F: (02) 8783 5053

Business hours: 8:30 am to 4.30 pm Monday to Friday

Marumali Limited

Office: Level 1, 64 Macquarie Street,

Liverpool NSW 2170

Business address: P.O. Box 1038

Liverpool Business Centre, 1871

Phone number: (02) 9602 9677

Business hours: 8:00 am to 5.00 pm Monday to Friday

This resource proudly created for South Western Sydney Mob, by Gandangara Health Services & GLALC.