

# #RETHINKCANCER SECONDARY SCHOOL PILOT

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## THANK YOU 20

# ABOUT THE CAMPAIGN

**The #RETHINKCANCER campaign has been instigated by the breast cancer awareness charity CoppaFeel! who have been educating young people about breast cancer in schools since 2012.**

Building on the success they had with delivering breast awareness sessions, CoppaFeel! recognised that more could be done to bring cancer education into schools. With 1 in 2 of us facing a cancer diagnosis in the UK at some point in our lives, it is vital that we start equipping our nation with the tools to prevent and detect cancer early. The sooner it is diagnosed the better the chances of survival. Half of the cancers diagnosed today could be prevented with a change in lifestyle, so isn't it time we taught good habits?

There is currently a severe lack of cancer awareness in schools. Lack of awareness leads to late presentation at your GP and ultimately to a late diagnosis of the disease. We want to start our young people on the right road with education and awareness to help lower their risk of cancer and increase their chances of survival.

## **#RETHINKCANCER campaigns for:**

- All student teachers to be trained how to teach young people how to look after and manage their health.
- That all secondary school students have protected time in the school curriculum to learn how to look after and manage their health.
- That there is a creative approach taken to teaching cancer awareness and healthy behaviours that has impact and tangible benefit.

## APPROACH

In 2015 we recruited 16 secondary teaching establishments to be involved in the #RETHINKCANCER regional pilot. Our previous experience working with a secondary school in South London had seen us develop an effective approach to teaching cancer, which we were keen to roll out and explore whether it would have a similar impact in other school environments with a mix of pupils.

Schools applied to be part of the project and were selected so that the pilot had representation from:

- Mixed gender and single sex schools
- Religious and secular schools
- Mix of age groups within the secondary school sector
- Education attainment
- Education establishment including Academies and Pupil Referral Unit
- Geographical representation across England

Over 450 pupils were involved in the programme, supported by 20 teaching and support staff.

## WHAT WE DID

The intention from the outset of the pilot was to provide as little starter information as possible. By providing only the necessary support and stimulus, we aimed to replicate the kind of input that a school might expect to receive, if all schools were to provide cancer education.

This approach was taken as practically, we needed to understand the absolute minimum support and resource schools would require to provide cancer education. This was to ensure that any suggested programme proved to be both scalable and sustainable. Our project manager worked with schools to determine the level of support and input required to enable them to be able to be involved in the programme. We kept the level of supplied information to a minimum so all schools involved had the same starting point. The pilot schools were also provided with the TCAM – Teenage Cancer Measure – this is an online measurement survey created to capture the baseline level of knowledge and understanding of all students. It also allows us to measure the impact of all interventions carried out.

We then left the schools to create an approach that was best suited to their students and school environment. Encouraging them to record and note their experience and also to ensure they completed the pre and post measurement survey with students. Finally analysis was undertaken of the results from all the schools, both on an individual school basis and from a programme perspective.

We wanted to understand if teaching about cancer in schools worked – i.e did students retain the information, did teaching increase knowledge or understanding and start to develop habits; Or from a teaching perspective did certain styles and approaches of teaching work better for certain types of pupils.

Lastly there is a third element of understanding gained but not planned for which was the realisation that the pilot could prove to be a litmus test of the youth of England to determine their base levels of knowledge and understanding of cancer.

*"This project will be useful for later in life; it has made me more aware of symptoms, some of the causes and myths/rumours about Cancer which I can ignore. It's taught me how to find it early and have a better chance of survival as well as statistics and real life stories. I think that other schools should teach people what to avoid and that could even raise the number of survivors as people would be more aware."*

Student at St Mary's School.

## WHAT WORKED AT PROGRAMME LEVEL

**As a project the following statistics demonstrate that teaching the subject of cancer within the school day engaged pupils and staff alike, they responded positively to the subject matter and this in turn improved their knowledge of risks that increase chances of cancer and their knowledge of benefits and ability of checking behaviours.**

- On average recognition of all symptoms of cancer appear to have increased post 64.16 compared to pre 52.25% teaching
- Pupils recognise significantly more risk factors of cancer post 64.16% compared to pre 49.57% teaching sessions
- Of the pupils that provided an answer to the question 30.48% pupils report checking themselves for cancer before teaching and 47.03% after teaching
- More pupils reported having a checking routine, if there was no student involvement in the lesson design compared to if there was. This is an interesting observation and counters some previous thoughts on peer/student involvement in lesson design.
- Teaching styles involving a personal approach (both personal and personal/factual) showed the highest increase in self-reported routine
- Cancer related anxiety was reduced, with a large and significant effect for boys.

## HOW DID IT WORK IN PRACTICE?

The lessons were taught to students ranging from year 8 up to year 13, covering most of the secondary school ages from 12 years old to 18 years old. Although schools were left to their own devices to devise a suitable approach for their students, there were some commonalities that appeared. Many teachers felt it was appropriate to give their students the option to opt out of the lesson if they felt uncomfortable. The majority were surprised that very few students took this option. One school reported that two students who had previously chosen to sit out of the first lesson, decided to join the subsequent lessons. It was interesting to hear how teachers felt overly cautious in the beginning about the topic; however it was the positive reactions of the students that both surprised and relaxed them.

A variety of teaching styles were taken, from more factual quizzes and presentations in science lessons to videos, posters and graffiti artwork in art lessons. On the whole, the lessons included a mixture of student activities, whether this be a debate, research topic or group work and videos, slides or worksheets. Teachers were keen to pick activities that appealed to their specific classes and matched their abilities. The common element which was fed back after the sessions was the openness and interest of the students to share, spread and learn about cancer experiences. Many teachers were surprised by their willingness to engage positively and the extent of their previous knowledge that they brought to the lesson. This is a positive indicator, suggesting cancer education as subject or theme in a lesson would be welcome by students.

Many teachers reported that students were happy and willing to not only personally taken on board the information but also actively share their new knowledge with their wider social network, family units and wider school environment. All teachers stated that they wished to carry on including cancer education in their school in some form and many already preceded the teaching by arranging extra assemblies, health campaigns for staff and parents, dedicated charity days alongside fundraising activities with many of these being student led.

The indicators at school level show that overall it was beneficial experience for students, staff, parents and the wider school community. The pilot showed that a variety of interventions did have a positive impact on students' awareness and behaviours, teachers reported feeling more confident about teaching cancer after the pilot and the wider school network benefitted from the additional activities sparked by the cancer intervention.

*"Cancer education is now going to be an important part of the PSD curriculum in our centre. As I'm part of practitioner groups, I have/will continue to promote teaching the topic."*

Teacher at Springboard Centre

## WHAT DID WE LEARN?

Firstly the pilot showed us that there are clear, positive tangible results of including cancer as a subject in the secondary curriculum.

Secondly it was evident that with limited input, enthused and experienced teachers find creative methods of including cancer as a topic within current teaching approaches. As a subject, cancer education is flexible and can form part of conversations in a number of other timetabled subjects.

Thirdly, all students benefitted from a measureable increase in cancer knowledge no matter what method or the amount of time that was given over to teaching cancer.

So there are positive outcomes of including cancer in the curriculum but we must also acknowledge the shortcomings of the programme of work.

This was a project with 16 volunteer schools and although that is a good number of secondary establishments, which enabled us to include diverse teaching environments and students, it is ultimately still a small percentage of the secondary educational environments across England.

Due to the fact that the pilot recruited volunteer schools, teachers already had an appetite for the topic and were enthused enough to tackle the subject of cancer within the school environment. We know from previous work with Winchester University that student teachers can often feel uncomfortable and unprepared to tackle the topic of cancer as they have limited knowledge and are concerned by the impact it could have in the classroom.

We still need to know that should cancer be discussed in the classroom environment, teachers will not be left abandoned to cope without the necessary skills, knowledge and support to make the teaching of cancer a positive experience. This means that the teaching of the necessary PSHE skills and equipping teachers with the basic knowledge is essential. It also means that signposting to quality materials, and other teachers who have experience of talking about cancer in the educational environment will be key to successfully delivering quality lessons.

So we have learnt that there is benefit of teaching cancer to young people for both teacher and student. We know that there are different levels of success depending on the audience and the time/approach used to teach.

In terms of style of teaching and effectiveness with different students - teachers involved managed their own students abilities by designing the style of the lesson required to suit the classroom and students involved.

Measurement through the TCAM - Teenage Cancer Awareness Measure; again demonstrated success in both enabling a pre and post measure to be taken and for young people to be able to contribute without needing teachers to take on a significant amount of post classroom activity.

*"I think it has made it easier for them to talk about, a few students told me a family member had died of cancer, but they were happy to talk about it. I'm hoping to use some of their presentations possibly in assemblies, displays of future lessons."*

Teacher at The Axeholme Academy.

## SO WHAT NEXT?

In order to ensure all young people have access cancer education, we need to start with the teachers. Student teachers are not currently being taught skills to deliver cancer education or PSHE. PSHE much like other subjects requires a set of skills to ensure that the subject is taught with confidence and ensures teachers feel able to manage questions and debate that might arise from the session.

Teacher training colleges now need to look at how they teach, train and equip teachers of the future to be able to teach and discuss a subject that will impact on the lives of 1 in 2 of us in the future. We need to consider how teachers are taught, how we assess teacher's skills and knowledge and how we ensure that all new teachers have access to knowledge to ensure all young people have the benefit of cancer education.

There is also a need for a mechanic to ensure that teachers have access to quality information and guidance on teaching cancer, the ability to talk to other teachers that have

experience of teaching cancer in the classroom.

We now call upon the education community to enable the teacher training to take place and consider the need for a mechanic to be created, which will enable the sharing of quality information and teaching experiences to build confidence in taking cancer education into the classroom.

## EXECUTIVE SUMMARY

*Overall, the pilot further demonstrates the overwhelming benefits to bringing cancer education into the classroom. Increasing knowledge and understanding is certainly great to start encouraging our young people to adopt healthy habits and learn more about their bodies. But the pilot also demonstrates how teaching cancer can have an important role in opening up a space to talk about health issues within classrooms, peer groups and families.*

*Reducing the fear, stigma and discomfort of talking about cancer can prove beneficial to empowering people to have conversations sooner about health concerns. The success of scaling up our original pilot indicates that a flexible, creative and measurable approach is achievable for a range of secondary school establishments. However, the pilot has also demonstrated that there are still gaps in knowledge and support, which need further exploration and thought.*

*We would like to thank all of the students, teachers and support staff involved, as the pilot would not have been possible without their enthusiasm and dedication. They should be proud that through their involvement they are helping to shape the future of cancer education in this country.*

**Kristin Hallenga, CEO of CoppaFeel!**

# BOROUGHBRIDGE HIGH SCHOOL

## YORKSHIRE, NORTH EAST

**Type of school:** Mixed gender, state school

**Year group:** 9

**Number of pupils:** 25

**Hours spent:** 1

**Teaching approach:** Scientific – teacher led

**School Size:** 700

**PSHE:** Yes

The lesson focused around using information from Cancer Research UK concerning risk factors, early diagnosis and misconceptions of cancer. The students carried out a true or false activity, deciding whether a series of statements about cancer were correct or myths. The statements focused on potential risk factors, cancer treatment and the spread of cancer. At the beginning of the session, the pupils were given the opportunity to discuss what they already knew about cancer and throughout the lesson information was discussed in detail, with some students bringing in their personal experiences of cancer. The teacher reported that the pupils were more interested in the topic than they anticipated and as a result they would have benefitted from more time on the subject, with more interactive activities.

Overall the pilot has shown that 2.5 hours in total was the optimum time to conduct the lessons for, in this instance the teachers feeling seems correct as only one hour was given to this lesson.

### Results:

	Pre teaching	Post teaching
Recognition of warning signs	36.1%	68.7%
Knowledge of factors that increase the risk of cancer	45.4%	69.7%
Knowledge of factors that contribute to successful treatment of cancer	63.3%	58.2%
Cancer anxiety	43.9%	42.3%
Estimates of people who get cancer out of 10	3.8	3.5
Estimates of people who are successfully treated out of 10	2.3	3.5
Self-reported checking behaviour	8.3%	0%
Self-reported routine for checking	0%	0%

# CALDAY GRANGE GRAMMAR SCHOOL

## WIRRAL, NORTH WEST

**Type of school:** Boys grammar school/ Mixed sixth form

**Year Group:** 12 (lower sixth form)

**Number of pupils:** 25

**Hours spent:** 3

**Teaching approach:** Factual

**School Size:** 1500

**PSHE:** Yes - tutor time

The lessons were taught in single sex groups as it was felt that students and teachers of the same gender would feel more comfortable speaking about breast and testicular cancers. One lead teacher designed the lesson plan and passed this to all sixth form tutors who delivered to their forms, ensuring all pupils were given the lesson. The school was very supportive of the pilot and the teacher mindful that 2 students had recently lost a parent to cancer and discussed if they wished to opt out. The lessons focused on informing students of the possible risk factors surrounding different types of cancers and the most likely forms of cancer to affect young people. The teacher also thought it important to give personal experience of what it was like to live with cancer to the students and to inform them about cancer prevention and likely risks/causes of certain forms of cancer.

Though this school split the gender groups, the evidence shows that the knowledge of warning signs is not affected by gender, the schools reasoning in this instance is based more on teacher and pupil comfort. As this hasn't had a positive or negative affect, it continues to be left to teacher discretion.

### Results:

	Pre teaching	Post teaching
Risk of warning signs	56.9%	70.6%
Knowledge of factors that increase the risk of cancer	62.1%	75.4%
Knowledge of factors that contribute to successful treatment of cancer	63.5%	77.1%
Cancer anxiety	40.7%	45.2%
Estimates of people who get cancer out of 10	4.3	5
Estimates of people who are successfully treated out of 10	4.3	4.5
Self-reported checking behaviour	48.5%	50%
Self-reported routine for checking	18.8%	15.2%



# DINNINGTON HIGH SCHOOL

## YORKSHIRE, NORTH EAST

**Type of school:** Mixed Academy

**Year Group:** Year 11

**Number of pupils:** 101

**Hours spent:** 5

**Teaching approach:** Factual

**School Size:** 1,225

**PSHE:** Yes

Due to the amount of teaching time there was a vast amount of material covered within the 5 lessons. Chosen resources were found on the Cancer Research UK and Teenage Cancer Trust websites. Content included information on #RETHINKCANCER and the pilot scheme, the charity Coppafeel!, 'How Cancer Develops' Cancer Research video, cancer facts, the signs and symptoms of different cancers, checking behaviours and the importance of self checking and risk factors. The lessons included student led presentation and group work with videos that highlighted lifestyle choices. The students each produced a poster/information leaflet aimed at other teenagers to help them understand and learn about the topic of cancer. At the end of the final lesson, learning was cemented with a comprehensive quiz. Although the lessons were pitched at Year 11, the teacher was keen to rethink these to include other younger year groups.

The results show that on average younger children report more sources they would contact if they suspected they had cancer, when compared to older pupils. This further demonstrates that if younger children are engaged, it is more likely checking and reporting routines will be established.

### Results:

	Pre teaching	Post teaching
Risk of warning signs	48.9%	69.7%
Knowledge of factors that increase the risk of cancer	49.1%	73.9%
Knowledge of factors that contribute to successful treatment of cancer	47.4%	62.8%
Cancer anxiety	41.4%	43.8%
Estimates of people who get cancer out of 10	5.4	4.7
Estimates of people who are successfully treated out of 10	4.4	4.1
Self-reported checking behaviour	20.6%	30%
Self-reported routine for checking	0%	13.3%

# FERNHILL SCHOOL AND LANGUAGE COLLEGE

## HAMPSHIRE, SOUTH EAST

**Type of school:** State/Mixed gender

**Year Group:** 11

**Number of pupils:** 212

**Hours spent:** 1

**Teaching approach:** Scientific, teacher led

**School Size:** 700

**PSHE:** Yes

Although the lesson was conducted as part of the PSHE timetable, the teacher who designed the lesson plan was a biology teacher, which led to a scientific approach. This teacher rolled out the topic and lesson plans to the other staff who taught within their form groups. Teachers' subject knowledge was varied, so ensuring all staff had confidence to deliver the session and respond to questions from students appropriately was important. As a cancer survivor herself, the teacher had confidence in delivering the session. The lesson content was science based and included facts about cancer, both general and an overview of causes of different cancers and the latest statistics. A pre designed Cancer Research UK slideshow was used for the lesson, which included a quiz to cement learning and a true or false exercise. Each student made a pledge at the end of the lesson with the aim of promising one or more of the following: behavioural change through self checking, taking more exercise and trying to eat more healthily. Most lessons went off on tangents, and were discussion based, this was the time that students engaged best as they were leading the learning journey, e.g. how often should you check for lumps was of interest.

Across the various factors considered when comparing the effects of teaching there was no significant effect of the teaching approach, so this lesson could be rolled out by any and all teaching staff.

### Results:

	Pre teaching	Post teaching
Risk of warning signs	47.9%	50%
Knowledge of factors that increase the risk of cancer	47.6%	54.8%
Knowledge of factors that contribute to successful treatment of cancer	53.1%	55%
Cancer anxiety	41.8%	40.3%
Estimates of people who get cancer out of 10	4.6	4.8
Estimates of people who are successfully treated out of 10	3.9	4.2
Self-reported checking behaviour	24.5	40.4
Self-reported routine for checking	6.5%	8.6%

# HANHAM WOODS ACADEMY

## SOMERSET, SOUTH WEST

**Type of school:** Academy, mixed gender

**Year Group:** 10

**Number of pupils:** 37

**Hours spent:** 1

**Teaching approach:** Scientific, teacher led

**School Size:** 945

**PSHE:** PSHCE

The content of the lesson was based on information on key facts concerning cancer, the different types of cancers of the body, the main risk factors of developing cancer, general statistics about cancer and what #RETHINKCANCER is trying to achieve. A section at the end of the lesson with information on resources helped steer the students to where to look for further resources. Learning outcomes were set at the beginning of the lesson but the teacher felt that she had not included enough content and another task was needed to fill the lesson time. Students were asked to design a poster in groups, aimed at young people to include: information on what cancer is, the signs and symptoms of cancers and the importance of self checking. The students were allowed to take part in open discussions around cancer and the teacher felt these discussions were mostly positive as students became engaged and empowered to explore their thoughts. The poster activity allowed students to be engaged and gave teachers in the room the chance to go round and discuss topics and questions with the students more interpersonally. The teacher felt that she would have benefitted further if she had been able to refer to more lesson plan examples.

Results show that pupils recognise more risk factors post teaching, with smoking being the most known and diet being the least known.

### Results:

	Pre teaching	Post teaching
Risk of warning signs	59.1%	62.6%
Knowledge of factors that increase the risk of cancer	57.1%	61.6%
Knowledge of factors that contribute to successful treatment of cancer	62.7%	58.2%
Cancer anxiety	40.2%	42.8%
Estimates of people who get cancer out of 10	4.1	4.9
Estimates of people who are successfully treated out of 10	4.1	5.6
Self-reported checking behaviour	18.2%	90.9%
Self-reported routine for checking	0%	0%

# HEATON MANOR SCHOOL

## TYNE AND WEAR, NORTH EAST

**Type of school:** State, mixed gender

**Year Group:** 9

**Number of pupils:** 53

**Hours spent:** 1

**Teaching approach:** Personal/Factual, teacher led

**Size:** 1,891

**PSHE:** Health and Social Care GCSE

The lesson began with a Question and Answer exercise where sheets were given to each student. The activity was to "Find Someone Who" which linked facts and questions concerning the topic which students had to link together. There was also a slide presentation including a video clip from "check em lads" which showed boys how to check their testicles for lumps. The lesson plan centred around discussion which meant it was interactive and activity based and students were able to ask their own questions. However, the limitation was that this made the next section of the lesson shorter. The presentation contained information on facts surrounding cancer, the 5 most common forms of cancer, the charity CoppaFeel!, Kris Hallenga's documentary and a case study video of Phil Morris for Testicular Cancer. The teacher believed that a double lesson of 2 x 50 minutes would have allowed more time to cover the topic as she felt it was rushed at times and she had to stop discussions in order to move on to the next stage of the lesson.

It's especially important to engage boys in the classroom as our results show that the males estimate the incidence of cancer lower than females, showing the importance engaging both genders.

### Results:

	Pre teaching	Post teaching
Risk of warning signs	44.0%	51.6%
Knowledge of factors that increase the risk of cancer	52.3%	57.8%
Knowledge of factors that contribute to successful treatment of cancer	61.5%	56.8%
Cancer anxiety	41.4%	37.4%
Estimates of people who get cancer out of 10	2.6	4.1
Estimates of people who are successfully treated out of 10	3.9	5.1
Self-reported checking behaviour	3.8%	24%
Self-reported routine for checking	4%	3.8%

# HORNSEY SCHOOL FOR GIRLS

## LONDON, GREATER LONDON

**Type of school:** State, Girls only

**Year Group:** Years 12 + 13 (6th form)

**Number of pupils:** 97

**Hours spent:** 1

**Teaching approach:** Creative, teacher planned

**School Size:** 1,200

**PSHE:** Yes

One lead teacher managed the pilot scheme and lesson plan content and relayed this to several form group teachers. The lesson was creatively designed around 5 interactive activities at stations where students moved around in smaller groups. This allowed creativity and challenged the students to think about what they already knew and then further information was handed out to fill in knowledge gaps. This allowed the lesson to be student driven during the individual activities. The lesson content was broad and included general information around cancers, the signs and symptoms of cancers, risk factors and where/who can get cancer. The lesson began with a "WARNING" sign slide and used the slogan "All of us V Cancer". Although there was no student input with the lesson planning, after the lesson the students were given a choice about how they could take their knowledge and understanding forward. Self-checking played a big part and they all pledged to tell 3 people something they had learned and then to either do some more research, raise awareness of the charity or raise money. The teacher felt this had a ripple effect throughout the school.

Girls are more likely to experience anxiety about cancer therefore it's key to engage them to ensure that anxiety is not only addressed but that they are engaged in behaviour changes like regular checking. There was a 5% rise in female students reporting checking for lumps post teaching.

### Results:

	Pre teaching	Post teaching
Risk of warning signs	43.6%	52%
Knowledge of factors that increase the risk of cancer	42.2%	59.9%
Knowledge of factors that contribute to successful treatment of cancer	45.6%	47.1%
Cancer anxiety	47.8%	42%
Estimates of people who get cancer out of 10	4.7	4.4
Estimates of people who are successfully treated out of 10	3.4	3.4
Self-reported checking behaviour	7.7%	14.3%
Self-reported routine for checking	3.8%	10.7%

# PRENDERGAST VALE COLLEGE

## LONDON, GREATER LONDON

**Type of school:** State, Mixed gender

**Year Group:** 9

**Number of pupils:** 52

**Hours spent:** 1

**Teaching approach:** Scientific, teacher and student led

**School Size:** 740

**PSHE:** No - biology lesson

The lead teacher designed the lesson plan and rolled this out to other teachers. Lesson content included the signs and symptoms of cancer, facts and statistics about cancer, the risk factors surrounding cancer and the common forms of cancer in the body. A Cancer Research UK video was played and the 'Blood in Pee' campaign was shown. The lesson centred around a market place exercise where the students had to design a poster and talk for one minute about it to their group around the causes of cancer. There was also a team quiz to cement learning. The student led input on the market place activity created active participation in the research task and promoted independent learning. The teacher felt she would have liked 2 lessons on the topic as there was not enough time for clarification and evidence of progress.

Key to this pilot result is the time spent teaching, with the optimum time being 2.5 hours giving the greatest results in student engagement and behaviour change.

### Results:

	Pre teaching	Post teaching
Risk of warning signs	43.2%	50.7%
Knowledge of factors that increase the risk of cancer	57.2%	65.3%
Knowledge of factors that contribute to successful treatment of cancer	48.9%	44%
Cancer anxiety	38.1%	39.3%
Estimates of people who get cancer out of 10	4.6	5.3
Estimates of people who are successfully treated out of 10	3.1	3.1
Self-reported checking behaviour	11.1%	14.3%
Self-reported routine for checking	0%	4%

# QE ACADEMY TRUST

## DEVON, SOUTH WEST

**Type of school:** State, boarders and day students, mixed gender.

**Year Group:** 10

**Number of pupils:** 56

**Hours spent:** 1

**Teaching approach:** Personal/Creative, teacher led and student research

**School Size:** 1,400

**PSHE:** Yes

The lesson began by the teacher showing a short video to the class about her friend finding a lump in her breast and what happened after that with treatment. The CoppaFeel! boob check video was shown, and risk factors, the signs and symptoms of cancer and prevention were explored. There was a focus on breast cancer within the lesson. The teacher felt there was ample time allowed for reflection and discussion with students. The main body of the lesson was student self directed/self taught learning where students were given an orienteering task with a map of questions. This led them around the school in groups of 3, each with a different route to find the answers. This allowed the students to discover the answers for themselves and promote further self study. The teacher felt she had a different relationship with her students after the lesson and the students now support cancer charities and understand what #RETHINKCANCER is trying to achieve.

The teaching type showing the highest increase in self reporting was the involvement of a personal approach, showing videos of first person experience gives the facts in the lesson more impact, and results in the biggest behaviour change.

### Results:

	Pre teaching	Post teaching
Risk of warning signs	43.6%	52%
Knowledge of factors that increase the risk of cancer	42.2%	59.9%
Knowledge of factors that contribute to successful treatment of cancer	45.6%	47.1%
Cancer anxiety	47.8%	42%
Estimates of people who get cancer out of 10	4.7	4.4
Estimates of people who are successfully treated out of 10	3.4	3.4
Self-reported checking behaviour	7.7%	14.3%
Self-reported routine for checking	3.8%	10.7%

# SANDHILL VIEW ACADEMY

## SUNDERLAND, NORTH EAST

**Type of school:** Academy, mixed gender

**Year Group:** 9

**Number of pupils:** 31

**Hours spent:** 6

**Teaching approach:** Artistic, student led

**School Size:** 830

**PSHE:** No, Art lessons

The pilot was taught in art lessons as part of G.C.S.E coursework, the topic being graffiti and graffiti artists. The teacher wanted to explore if cancer education could be incorporated into art. Including a research of the topic, the students analysed artists' works and developed their own responses. They were asked to find a wall somewhere in the area to imagine putting their artwork on. The content of the lesson included a Q&A about how to change the school/area with graffiti and the artist Banksy was primarily used. There was a very brief introduction on CoppaFeel!, facts about cancer, common cancers, prevalence rates and signs and symptoms. The graffiti project got students enthused and excited to work and there was a high level of engagement. The artwork was shown in an exhibition to the rest of the school. The teacher felt that the pilot promoted group work, compassion and discussion.

Prompting discussion amongst students is another result of the lessons, with an increase of 9% of students talking about cancer outside of the classroom post teaching.

Caution over the creative approach to lessons as they showed minimal impact on checking behaviour with only a 2% rise reported.

### Results:

	Pre teaching	Post teaching
Risk of warning signs	48.6%	44.4%
Knowledge of factors that increase the risk of cancer	43.1%	51.6%
Knowledge of factors that contribute to successful treatment of cancer	38.8%	44.3%
Cancer anxiety	43.6%	39.9%
Estimates of people who get cancer out of 10	5.9	5.4
Estimates of people who are successfully treated out of 10	4.1	5.4
Self-reported checking behaviour	13.3%	8.3%
Self-reported routine for checking	0%	0%



# SPRINGBOARD SUNDERLAND TRUST

## SUNDERLAND, NORTH EAST

**Type of school:** Post 16 work based learning provider, mixed gender

**Year Group:** Aged 16-19

**Number of pupils:** 62 - all female.

**Hours spent:** 2.5

**Teaching approach:** Personal, teacher led and discussion

**School Size:** 2,000 students per year

**PSHE:** Yes

Before delivering the main session, students self-assessed their existing skills/knowledge/confidence on “checking behaviour” and identified individual aims. Learners performed a group research task centred around different elements of cancer and created a presentation to share their learning with the whole group. Finally, learners were supported to write a “pledge” to themselves and someone at home (to increase likelihood of checking behaviour) which was posted home. This allowed the lesson aims to be met and ensured learners themselves took ownership of actions needed. In the final sessions learners devised as a group, ways to take cancer education even further as part of a project (sharing their learning) and Kris’s story created huge empathy/appeal/engagement. Time was allowed for informal discussions and for any concerns surrounding the topic. Learning was shared on balloon boobs, or boob mind maps. Statistics, types of cancer, lifestyle preventative measures were approached. The teacher also delivered a male awareness session.

The mix of factual information and personal accounts in lessons showed the most improvement in checking behaviour, 25% increase in reported checking. This a point that should be included in future lesson plans for teachers.

### Results:

	Pre teaching	Post teaching
Risk of warning signs	36.4%	68.6%
Knowledge of factors that increase the risk of cancer	46.9%	68.6%
Knowledge of factors that contribute to successful treatment of cancer	38.3%	40.9%
Cancer anxiety	40.3%	40.2%
Estimates of people who get cancer out of 10	5.3	4.2
Estimates of people who are successfully treated out of 10	4.2	3.7
Self-reported checking behaviour	22.2%	82.6%
Self-reported routine for checking	2.8%	34.8%

# ST BEDE'S INTER-CHURCH SCHOOL

## CAMBRIDGESHIRE, EAST ENGLAND

**Type of school:** Christian State School, mixed gender

**Year Group:** 9

**Number of pupils:** 173

**Hours spent:** 3

**Teaching approach:** Teacher and student led

**School Size:** 750

**PSHE:** PSHE

Lesson content covered general facts, the risk factors of cancers, signs and symptoms and what the current tests/treatments are. The lesson approach was varied in terms of activity - with mind-mapping, a silent debate and true or false exercises. Student driven activity was used, where one pupil became the teacher and created a learning resource to teach to groups based on what they had learnt during the lesson. Several case studies were used that were relatable to the students. The teacher chose to touch upon the emotional and mental affects of cancer and what support there is for those around a person who is diagnosed. The focus on a student driven approach meant that students could teach themselves and have the space to talk about their experiences. The teacher felt that the lesson brought the group together.

Religion had only a small impact in the study, showing only a slight increase in cancer anxiety both before and after teaching. As such it is not a key factor but did show a smaller increase in pupils reporting self checking. This type of teaching also increased the accuracy of pupils estimates on successful cancer treatments.

### Results:

	Pre teaching	Post teaching
Risk of warning signs	52%	71.7%
Knowledge of factors that increase the risk of cancer	54.4%	71.9%
Knowledge of factors that contribute to successful treatment of cancer	60.2%	72.6%
Cancer anxiety	43.7%	41.5%
Estimates of people who get cancer out of 10	4.6	4.8
Estimates of people who are successfully treated out of 10	3.9	4.4
Self-reported checking behaviour	12.5%	29.2%
Self-reported routine for checking	1%	1.5%

# ST MARY'S SCHOOL

## BUCKINGHAMSHIRE, SOUTH EAST

**Type of school:** Independent, Girls only

**Year Group:** 9 and 11

**Number of pupils:** 95

**Hours spent:** 3

**Teaching approach:** Personal/Factual, teacher led

**School Size:** 300

**PSHE:** Yes

There was a high level of subject content included in the lessons, which were very youth focused containing relevant, well researched video content and relatable celebrity/young women case studies. Resources were used from CoppFeel!, Breast Cancer Care, Cancer Research UK and Teenage Cancer Trust websites. Specific slide content was factual and contained: self checking and checking behaviours, the signs and symptoms of different types of cancers and had a focus on breast cancer as a separate lesson. Kris's documentary was shown and had a huge impact on students. The lessons included lots of discussion and evaluation through quizzes and creating a cross word. Student led participation was felt to embed learning. After the lessons Year 11 students ran a breast health campaign in school for staff, parents and students and several charity activities were arranged.

Students involving the wider audience of staff and parents relates to the increase in pupils reporting talking to parents about cancer, a 9% increase was reported from the pilot post teaching.

### Results:

	Pre teaching	Post teaching
Risk of warning signs	61.6%	83.3%
Knowledge of factors that increase the risk of cancer	56.4%	67.2%
Knowledge of factors that contribute to successful treatment of cancer	52.4%	64.1%
Cancer anxiety	43.1%	38.6%
Estimates of people who get cancer out of 10	4.9	4.7
Estimates of people who are successfully treated out of 10	4.2	3.7
Self-reported checking behaviour	29.2%	77.8%
Self-reported routine for checking	4.1%	37.8%

# THE AXHOLME ACADEMY

## LINCOLNSHIRE, EAST MIDLANDS

**Type of school:** Academy, mixed gender

**Year Group:** 9

**Number of pupils:** 56

**Hours spent:** 4

**Teaching approach:** Factual, teacher led and student presentations

**School Size:** 900

**PSHE:** Yes

The lessons were interactive in nature with students undertaking a variety of tasks. Slides were focused around: celebrities and what types of cancers they have had, where can you get cancer on the body, different types of cancer, the signs and symptoms of cancer and cancer prevention. The majority of lesson time was taken up with an activity, which was focused around an awareness campaign where students had to produce either a poster, PowerPoint presentation or speech/assembly to show to the class. This allowed the students to choose what they wanted to do based on their own individual strengths.

Gender has shown not to affect the knowledge of warning signs pre or post lessons, as such mixed gender classes like this will not impact on the success of the lesson. The teaching time given to lessons falls into the optimum for best improving knowledge of factors contributing to cures of cancer (between 2.5 and 5 hours).

### Results:

	Pre teaching	Post teaching
Risk of warning signs	36.8%	60.9%
Knowledge of factors that increase the risk of cancer	41.8%	53.1%
Knowledge of factors that contribute to successful treatment of cancer	48.7%	56.2%
Cancer anxiety	41.3%	37.2%
Estimates of people who get cancer out of 10	4.4	5
Estimates of people who are successfully treated out of 10	3.1	4
Self-reported checking behaviour	10.3%	19.2%
Self-reported routine for checking	3.4%	3.7%

# THE PRIORY CHURCH OF ENGLAND

## SURREY, SOUTH EAST

**Type of school:** Faith, mixed gender

**Year Group:** 8

**Number of pupils:** 111

**Hours spent:** 3

**Teaching approach:** Personal/factual, teacher led and student research

**School Size:** 907

**PSHE:** PSHCE

The lesson began with firm ground rules regarding respect and confidentiality within the class.

Lesson approach explored the topics of illness and discrimination as part of the curriculum. The content being: how cancer patients are affected after treatment, their future employability, employee law, prejudice, all of which were all linked to young people specifically. There were group discussions, case study examples as well as presentations and group work. The homework task was to design a fact sheet for an employer detailing how to help and support an employee who had cancer. The teacher would have liked to spend more time talking about students' experiences and was cautious, stopping discussions before they got too in depth. The students seemed to really enjoy teaching in groups and working with each other which gave them the opportunity to speak about their thoughts and experiences.

There was no impact of teaching methods when taking religion into account but cancer anxiety was reported as higher in religious schools both pre and post teaching. There was also a reduced level of reported checking when compared to non-religious schools both elements need to be taken into account when asking teachers in religious schools to prepare their plans.

### Results:

	Pre teaching	Post teaching
Risk of warning signs	44.3%	55.3%
Knowledge of factors that increase the risk of cancer	50.7%	55.6%
Knowledge of factors that contribute to successful treatment of cancer	53.2%	57.4%
Cancer anxiety	43.9%	43.8%
Estimates of people who get cancer out of 10	4.8	4.6
Estimates of people who are successfully treated out of 10	4	4.4
Self-reported checking behaviour	8.8%	6.5%
Self-reported routine for checking	1.6%	0%

# **WE WISH TO THANK...**

**All the staff and students involved at the secondary education establishments:**

**The Axholme Academy  
Dinnington High School  
St Mary's School  
Fernhill School and Language College  
Prendergast Vale  
Hornsey School for Girls  
St Bede's Inter church School  
The Deepings School  
Springboard Trust  
Sandhill View  
Calday Grange  
Hanham Woods Academy  
Queen Elizabeth's Academy Trust  
The Priory Cof E School  
Boroughbridge High School  
Heaton Manor**

**Roche Ltd for providing the funding for the pilot, which wouldn't have been possible without their support.**

## MORE INFO

For more information about the campaign visit  
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**#RETHINKCANCER** campaign was established by CoppaFeel!, a registered charity in England and Wales (1132366) and Scotland (SC045970) / [coppafeel.org](http://coppafeel.org)

