

Understanding Aotearoa's response to the
Bowel Cancer Screening campaign in 2023

TRA X Te Whatu Ora
December 2023

Te Whatu Ora
Health New Zealand

**Te Kāwanatanga
o Aotearoa**
New Zealand Government



National
Bowel
Screening
Programme

TRA

This study is designed to measure the effectiveness of the National Bowel Cancer Screening campaign that aims to:

1

Raise awareness of bowel screening and its benefits across priority audiences

2

Understand message salience – was the message delivered in a way that resonated with the audience and encouraged action?

3

Drive increased intention to take part in bowel screening across priority audiences

What we did - methodology

10-minute survey interviewed a sample of New Zealanders.

Pre-campaign sample:

Total sample = **344** New Zealanders

Key samples:

n = 141 people of NZ European descent, aged 50+

n = 135 people of Māori descent, aged 50+

n = 68 people of pacific peoples descent, aged 50+

n = 141 people with disabilities

Eligibility samples:

Pre-eligible, 50-59 years n=136

Eligible, 60-74 years n=129

Post eligible, 75 years+ n=38

Post-campaign sample (Nov 2022):

Total sample = **414** New Zealanders

Key samples:

n = 198 people of NZ European descent, aged 50+

n = 179 people of Māori descent, aged 50+

n = 70 people of pacific peoples descent,
aged 50+

n = 181 people with disabilities

Eligibility samples:

Pre-eligible, 50-59 years n=202

Eligible, 60-74 years n=167

Post eligible, 75 years+ n=45

Post-campaign sample (Nov 2023):

Total sample = **308** New Zealanders

Key samples:

n = 149 people of NZ European descent, aged 50+

n = 158 people of Māori descent, aged 45+

n = 72 people of pacific peoples descent,
aged 45+

n = 122 people with disabilities

For most of the report, we look at the response among the total sample. But when looking at the proportion who have taken a bowel cancer screening test, we have only reported the eligible group (60-74 years).

In a nutshell

The National Bowel Cancer Screening campaign has achieved an even higher reach and key messages continue to translate strongly in line with objectives.

People have continued to go on to use a bowel cancer screening kit as a result of seeing the campaign, or have a strong intention to do so.

TV continues to drive widespread campaign reach, with the addition of the GP primary care channel helping to reach Māori and Pacific peoples.

We have also seen a great success story among Pacific peoples, who previously had the lowest campaign awareness, and are now the most likely to have seen the campaign, and are taking more action as a result of seeing it.

There are still key barriers to using a bowel screening kit that center around emotions such as fear and gaps in knowledge. There is an opportunity for the campaign to further address these going forward.



Agenda

1

Overall campaign performance

2

Campaign impact on behaviour

3

Detailed campaign response

4

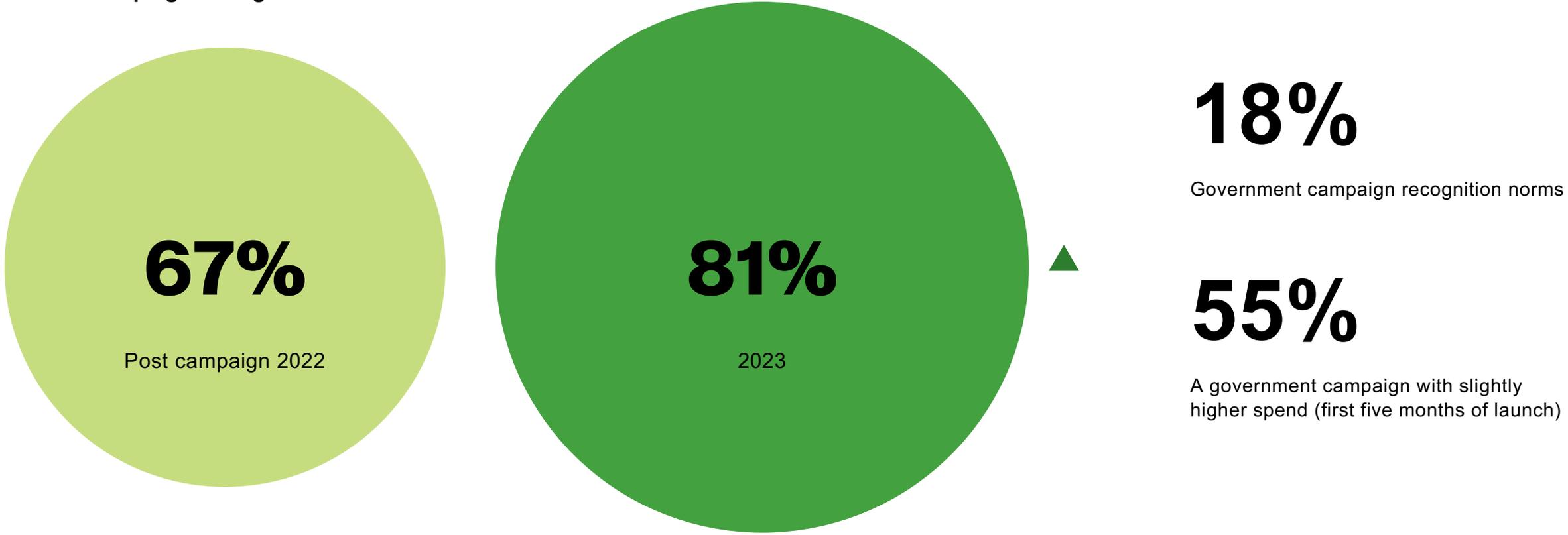
Bringing it all together

1

Overall campaign performance

Awareness of the National Bowel Cancer Screening campaign has built over time to achieve a very widespread reach

Overall Campaign Recognition



▲ ▼ Significantly higher/lower than post campaign 2022

Question: Have you heard this advertising for bowel cancer screening via Radio/TV/Digital recently?
Base: Post campaign Nov 2022 (414) Post campaign Nov 2023 (308)

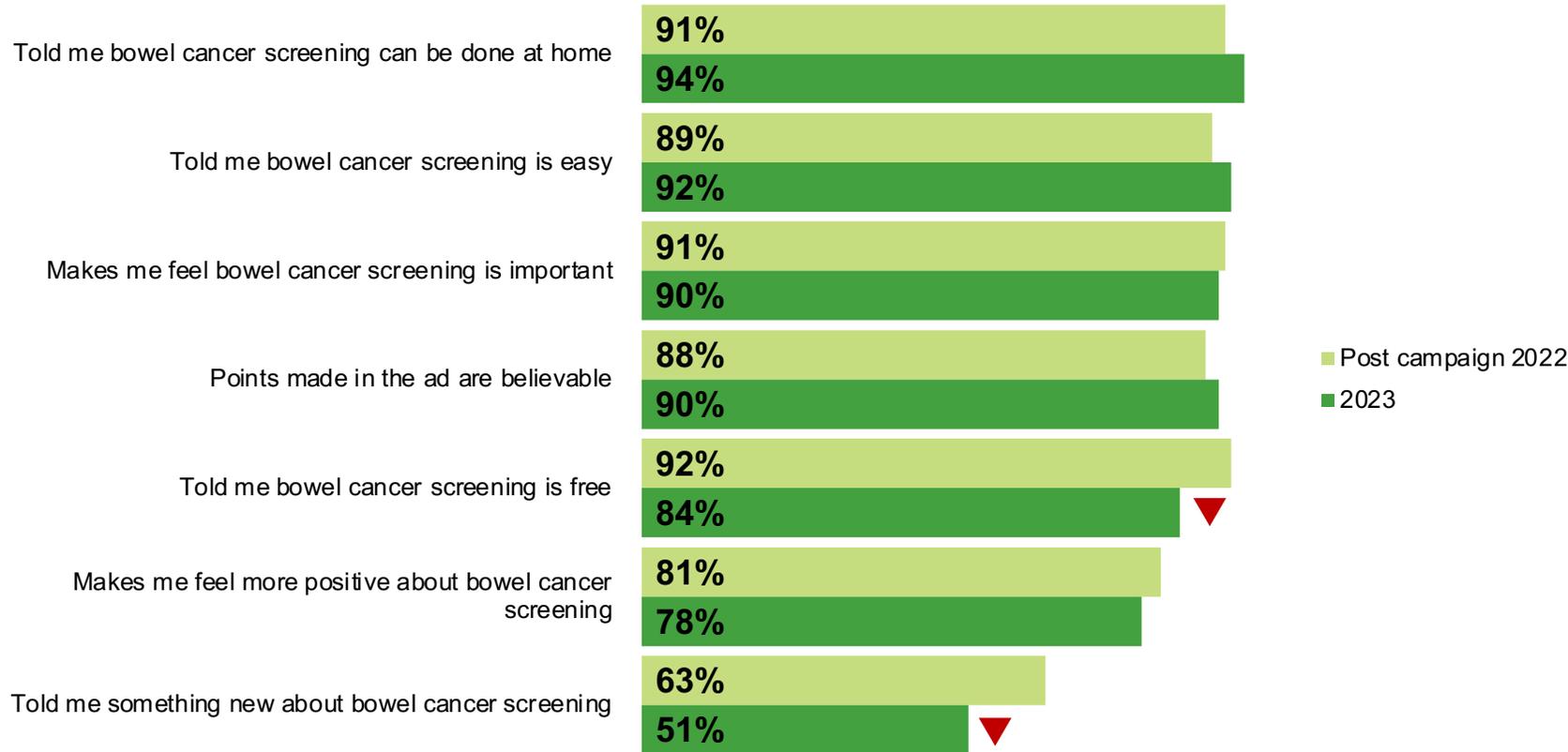


National Bowel Screening Programme



The right messages continue to cut through strongly

Campaign message uptake



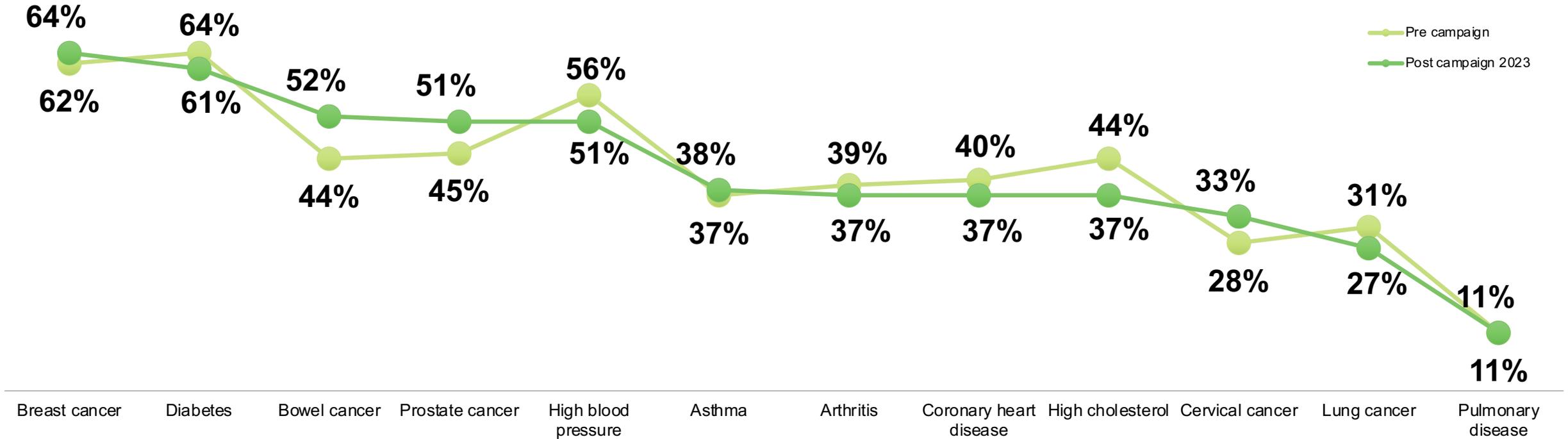
The novelty factor of the campaign is starting to taper off after sustained activity - there less of a sense that it brings 'new news'.

▲ ▼ Significantly higher/lower than post campaign 2022

Question: Please look at the following statements and indicate how strongly you agree or disagree with these statements as descriptions of the advertising material?
 Base: Post campaign Nov 2022 (414) Post campaign Nov 2023 (308)

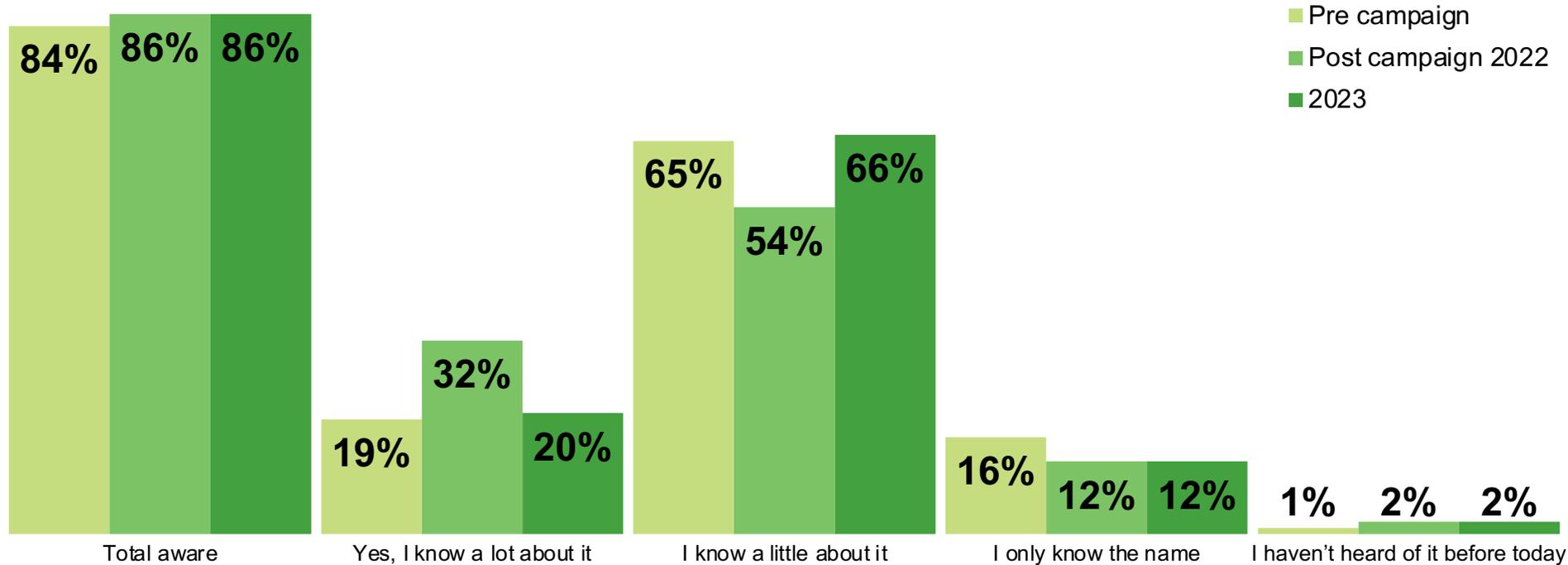
Over a year into the campaign, bowel cancer is now one of the most talked about illnesses

Which of the following do you hear about the most?



While overall awareness of bowel cancer has maintained a high level, deeper knowledge has started to soften as the campaign wears in

Awareness of bowel cancer



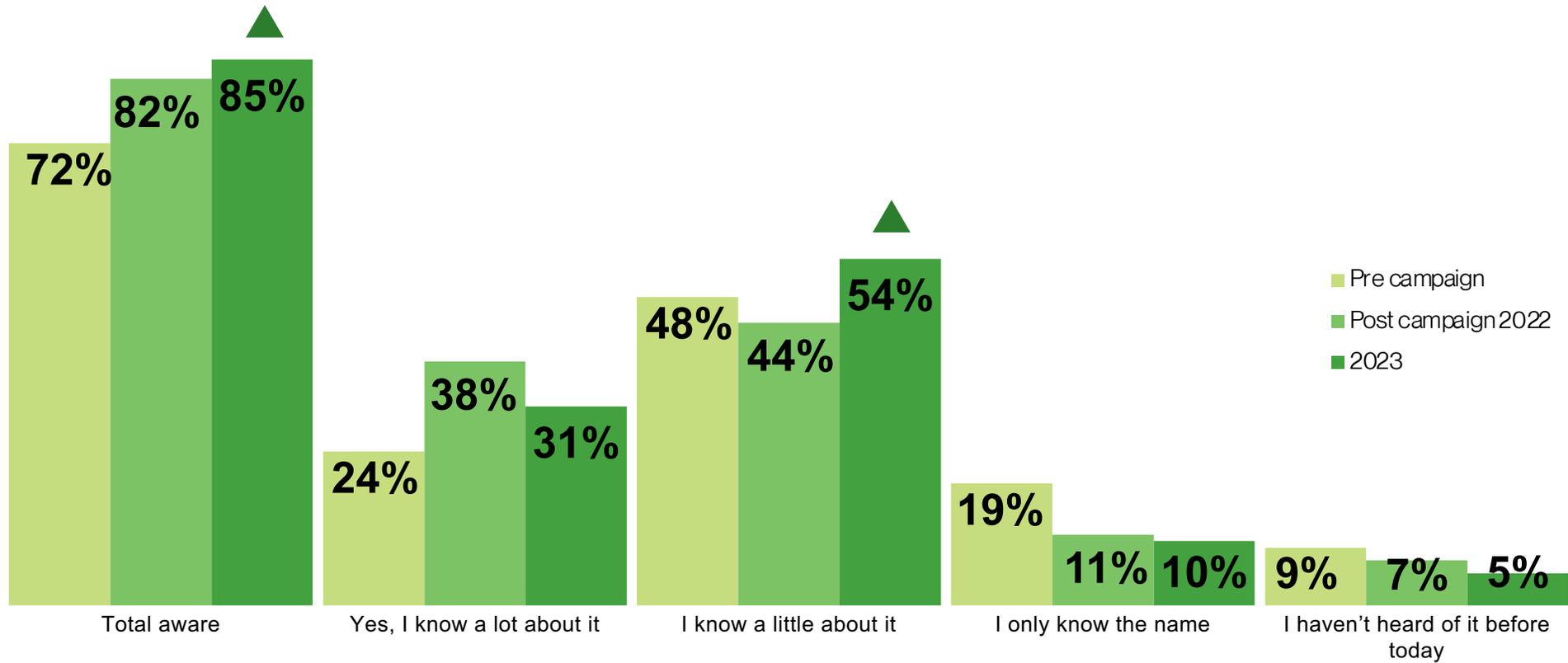
Decline to those who know a lot about bowel cancer is driven by NZ European and Maori people.

▲ ▼ Significantly higher/lower than pre campaign

Question: Have you heard about bowel cancer before? Sometimes it is also called colon cancer or colorectal cancer
 Base: Pre campaign 2022 (303) Post campaign Nov 2022 (414) Post campaign Nov 2023 (308)

However, awareness of bowel cancer screening has sustained high levels

Awareness of bowel cancer screening



▲ ▼ Significantly higher/lower than pre campaign

Question: Have you heard about bowel cancer screening before?
Base: Pre campaign 2022 (303) Post campaign Nov 2022 (414) Post campaign Nov 2023 (308)



National Bowel Screening Programme



From before the campaign to now, awareness of bowel cancer screening has improved across all groups

Awareness of bowel cancer screening

	NZ European		Māori		Pacific peoples		Disability	
	Pre campaign	Nov 2023	Pre campaign	Nov 2023	Pre campaign	Nov 2023	Pre campaign	Nov 2023
Total awareness	83%	90%	69%	81% ▲	61%	84% ▲	68%	85% ▲
Yes, I know a lot about it	35%	38%	25%	21%	10%	28% ▲	18%	23%
I know a little about it	48%	52%	44%	60% ▲	51%	56%	50%	62% ▲
I only know the name	11%	9%	19%	13%	28%	12% ▼	23%	10% ▼
I haven't heard of it before today	7%	1%	13%	6%	10%	5%	10%	5%

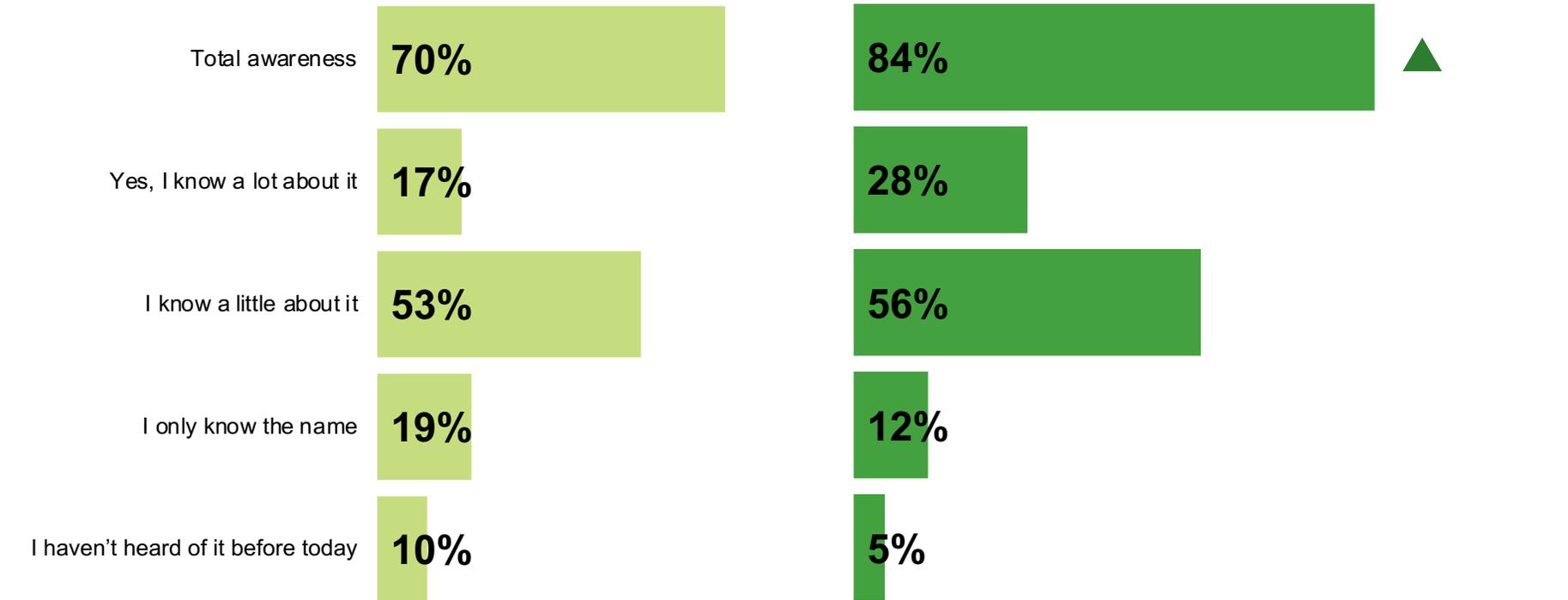
▲▼ Significantly higher/lower than TRA norms

Among Pacific peoples, knowledge of bowel cancer screening has increased significantly since the initial launch of the campaign

Awareness of bowel cancer screening – Pacific peoples

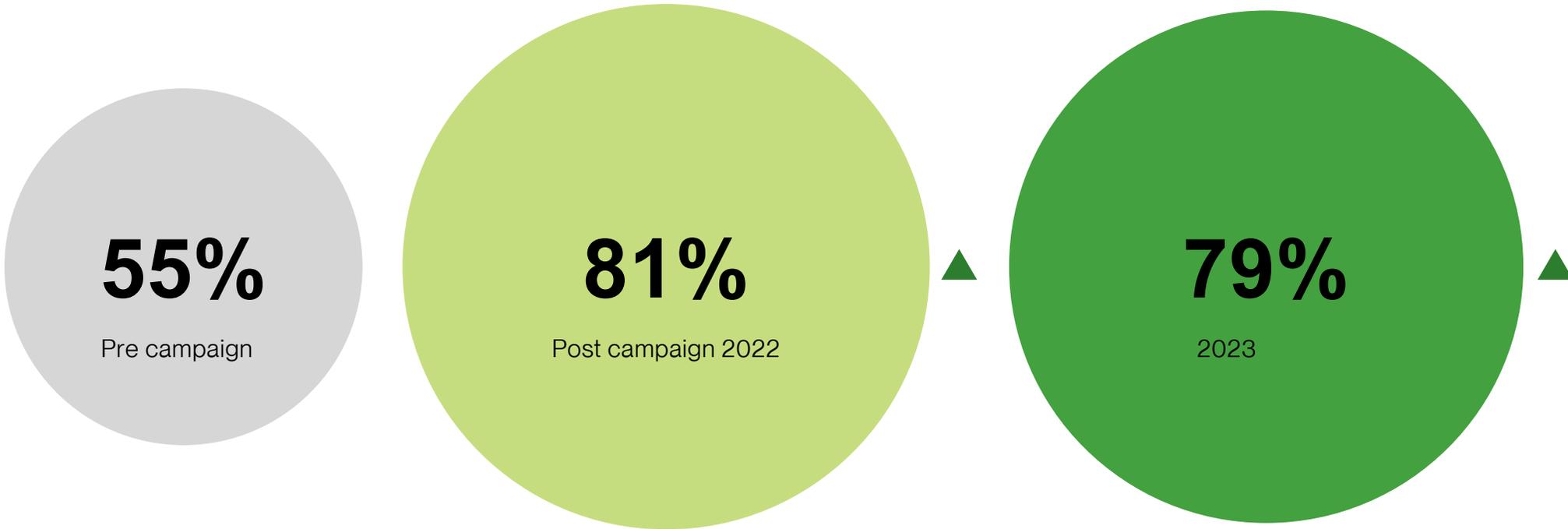
Post campaign 2022

2023



Strong awareness of the screening process has been maintained since the initial launch of the campaign

Awareness of the bowel cancer screening process

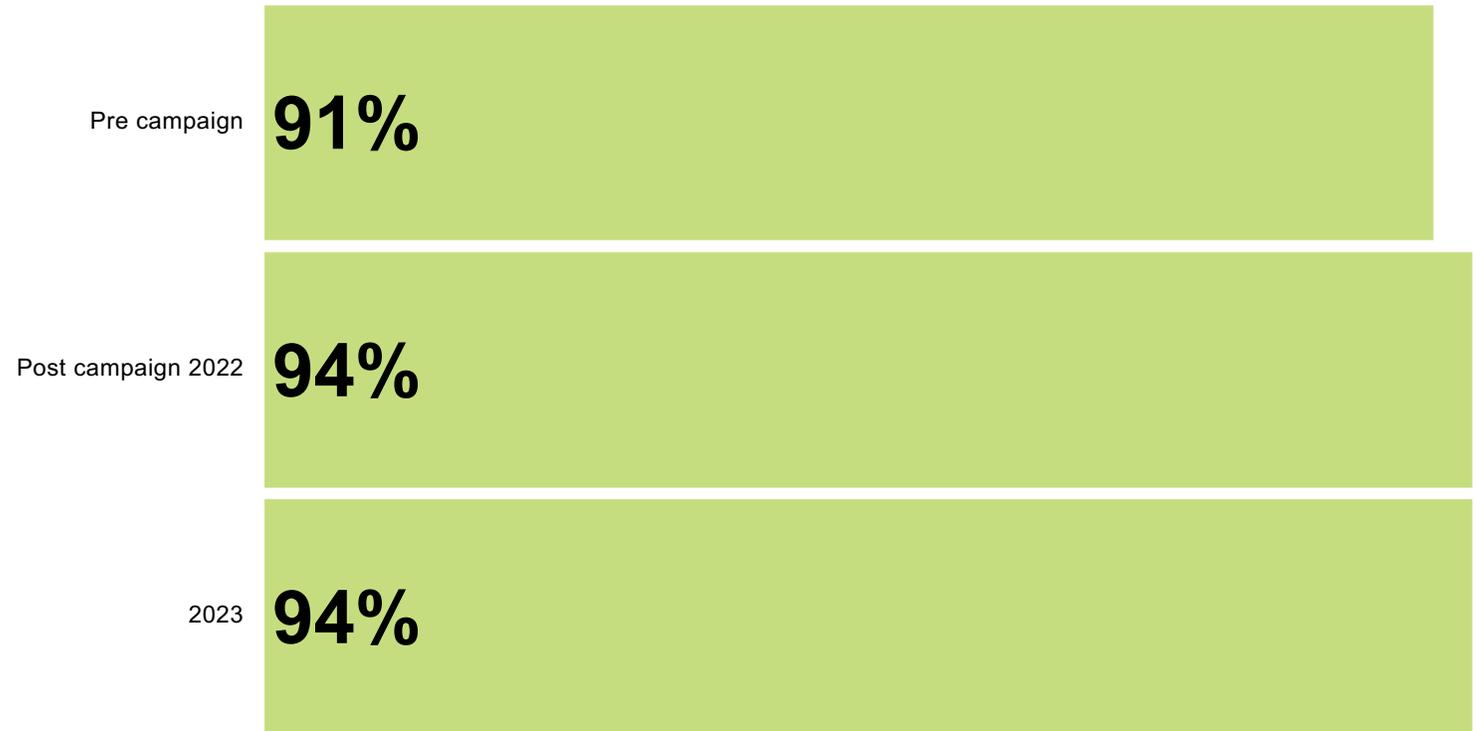


▲ ▼ Significantly higher/lower than pre campaign

Question: Eligible people will be sent a bowel screening kit in the mail so they can collect a sample at home. Is this something you have heard about before?
Base: Pre campaign 2022 (303) Post campaign Nov 2022 (414) Post campaign Nov 2023 (308)

Bowel cancer screening continues to be considered important by almost the entire target audience

Perceived importance of bowel cancer screening



▲ ▼ Significantly higher/lower than pre campaign

Question: How important do you think bowel cancer screening is?
Base: Pre campaign 2022 (303) Post campaign Nov 2022 (414) Post campaign Nov 2023 (308)

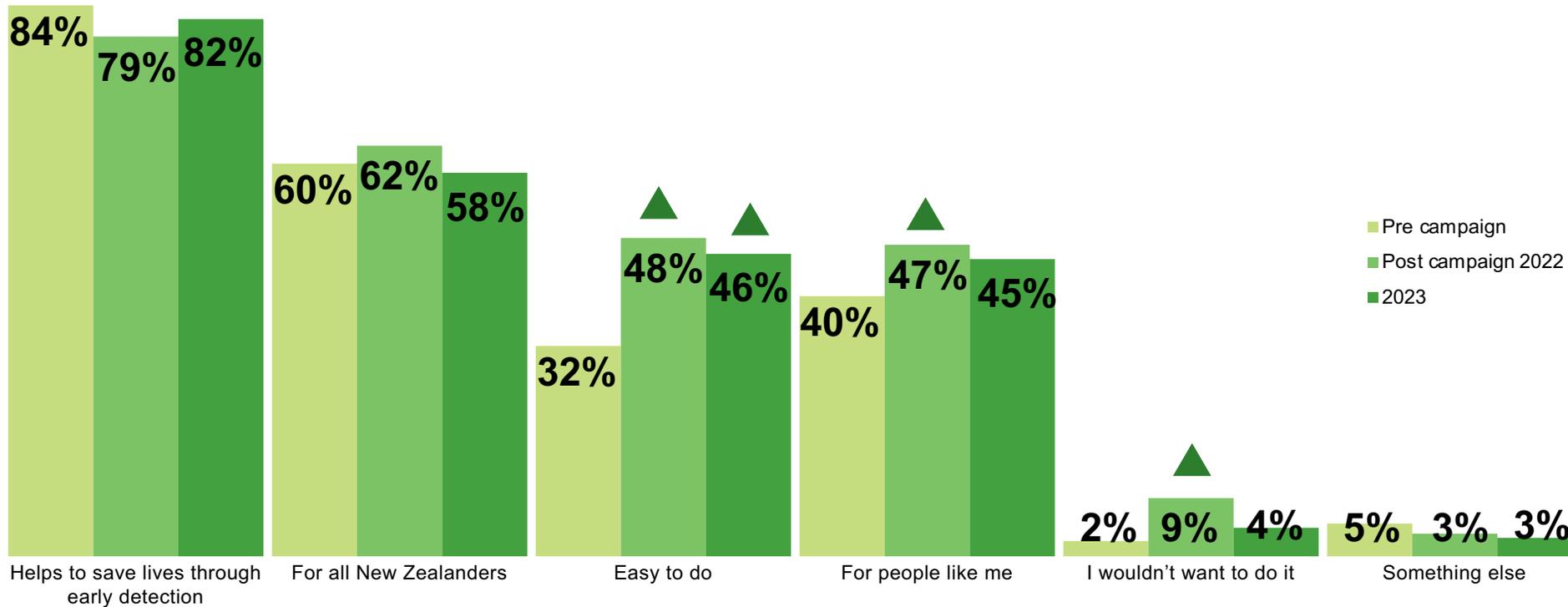


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We continue to see improved perceptions of ease of the bowel screening process since the campaign launch

Attitudes towards bowel cancer screening



▲ ▼ Significantly higher/lower than pre campaign

Question: What do you think about bowel cancer screening?
 Base: Pre campaign 2022 (303) Post campaign Nov 2022 (414) Post campaign Nov 2023 (308)

The campaign continues to deliver strong results

Most of our target audience have now seen the campaign.

They are also taking out the key messages that bowel cancer screening can be done at home, is easy, free and important.

But deeper knowledge has started to wane, alongside the messages in the campaign feeling less 'new'.

People clearly see the benefits of screening - there is an opportunity now to refocus content on the educational layer.



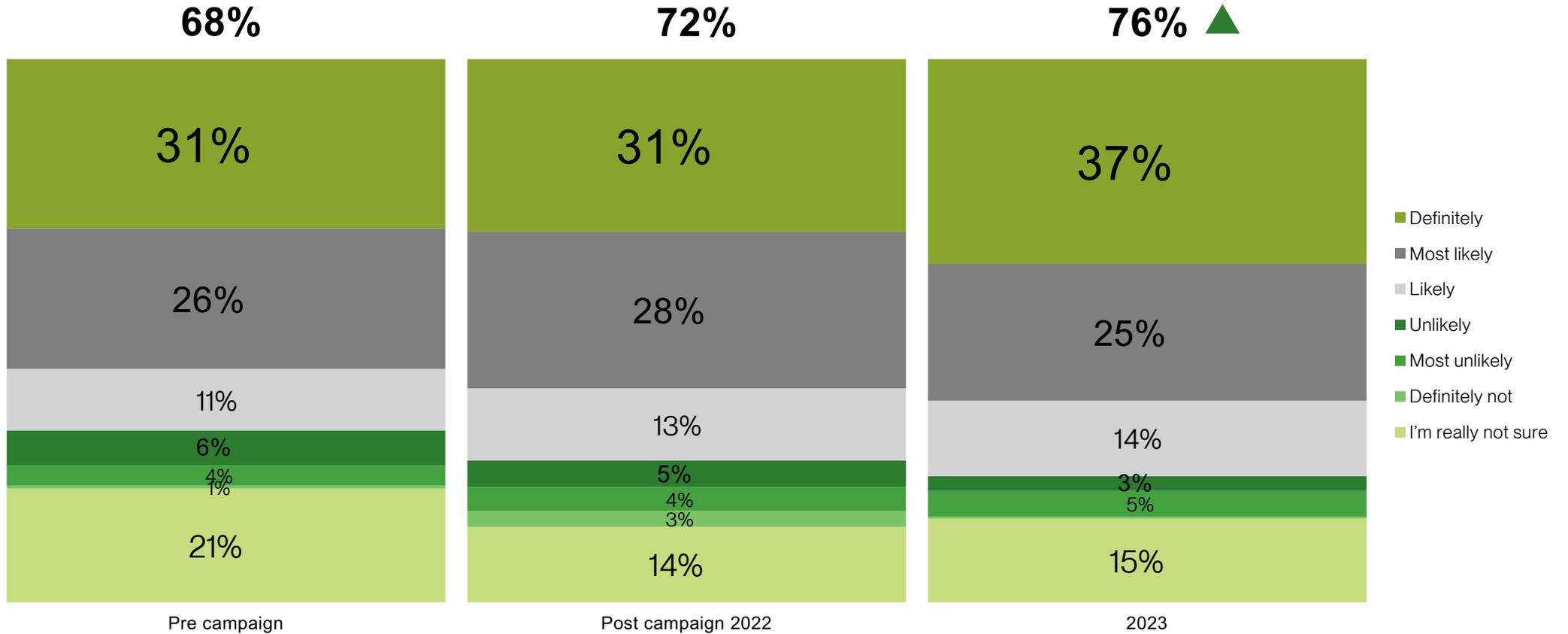
2

Campaign impact on behaviour

Future intention to take part in bowel screening continues to improve

Intention to take part in bowel screening in future

Total Likely

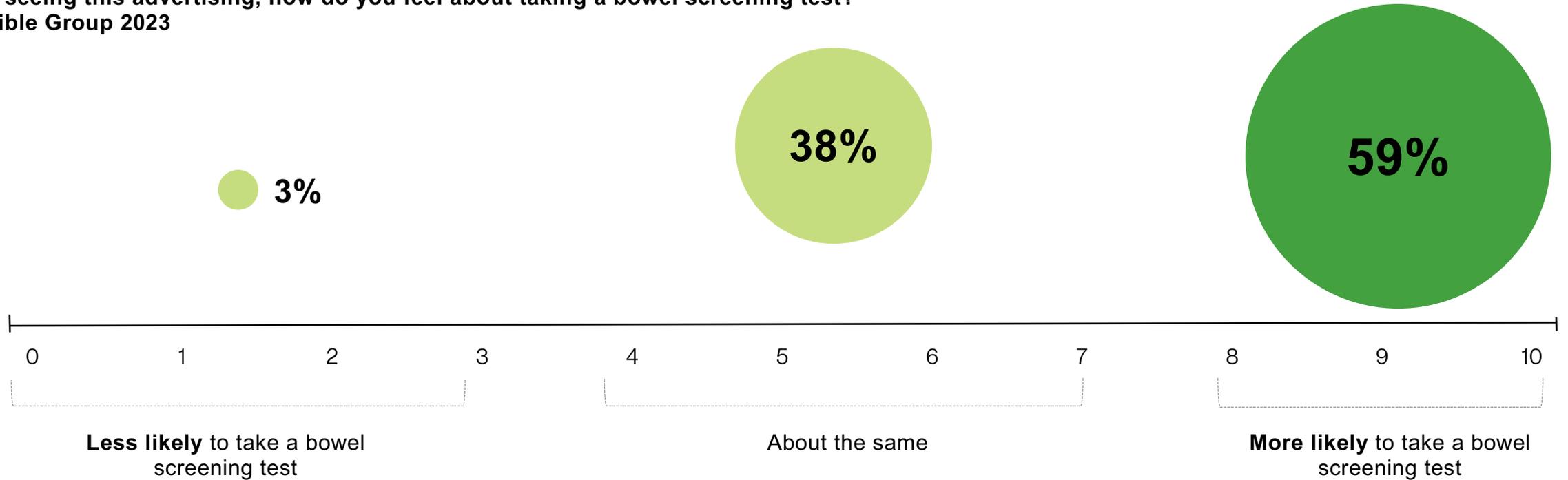


▲ ▼ Significantly higher/lower than pre campaign

Question: Do you intend to take part in bowel cancer screening in the future?
Base: Pre campaign 2022 (303) Post campaign Nov 2022 (414) Post campaign Nov 2023 (308)

Over half are more likely to take a bowel cancer screening test as a result of seeing the campaign

When seeing this advertising, how do you feel about taking a bowel screening test?
– Eligible Group 2023



Post campaign
2022

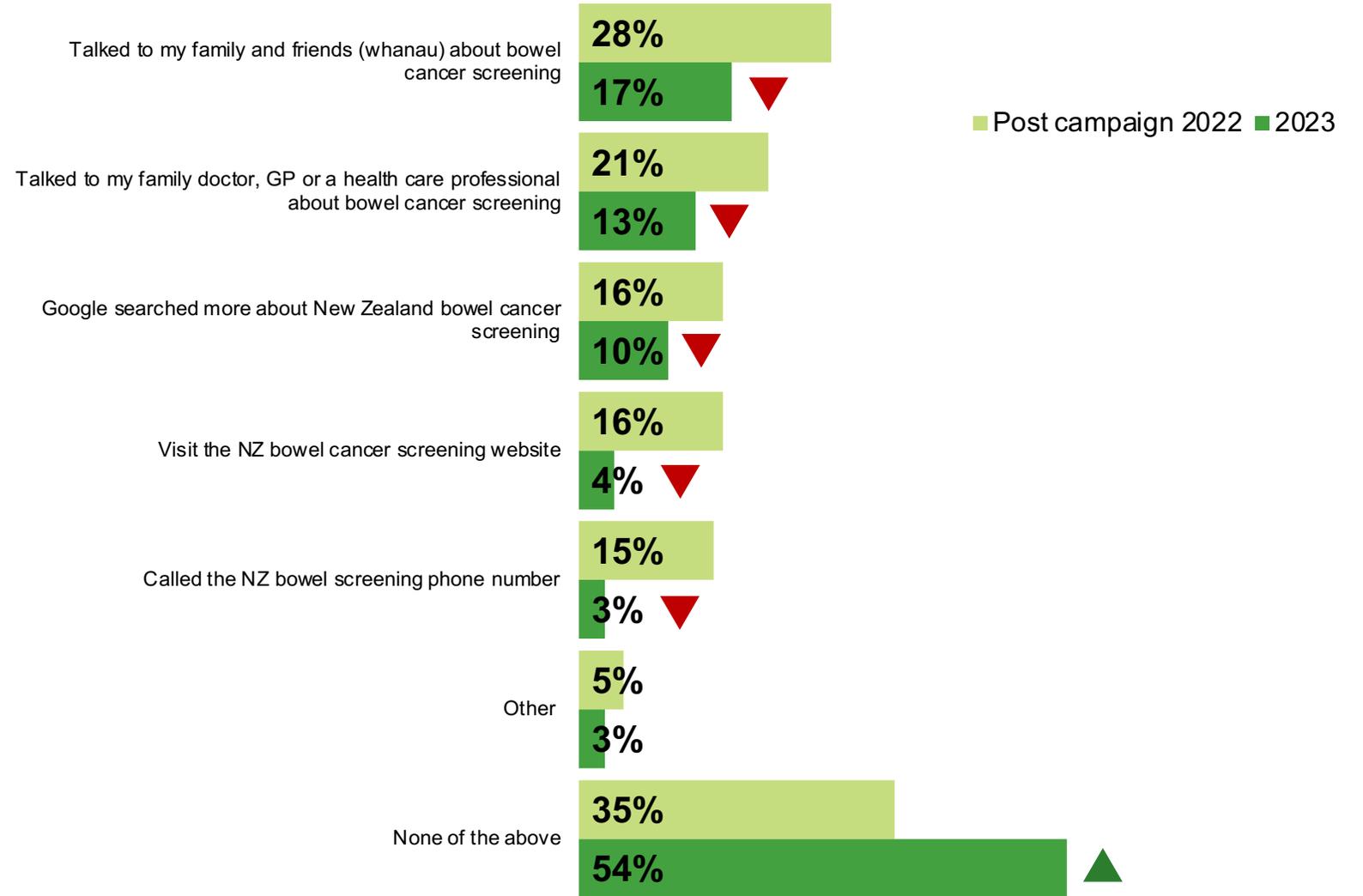
4%

26%

68%

As the campaign wears in, fewer people have taken other 'information seeking' actions

As a result of seeing this advertising, have you done any of the following?



▲ ▼ Significantly higher/lower than pre campaign

Question: As a result of seeing this campaign, have you done any of the following?
Base: Post campaign Nov 2022 (414) Post campaign Nov 2023 (308)



National Bowel Screening Programme



An existing medical condition or already testing before the campaign are examples of reasons why people may have not taken a test or other action this time

Existing medical condition:

“None of the above because I have regular colonoscopies”

“Had a colonoscopy as part of treatment.”

“Due to history I have colonoscopies every 5 years.”

Already testing before campaign:

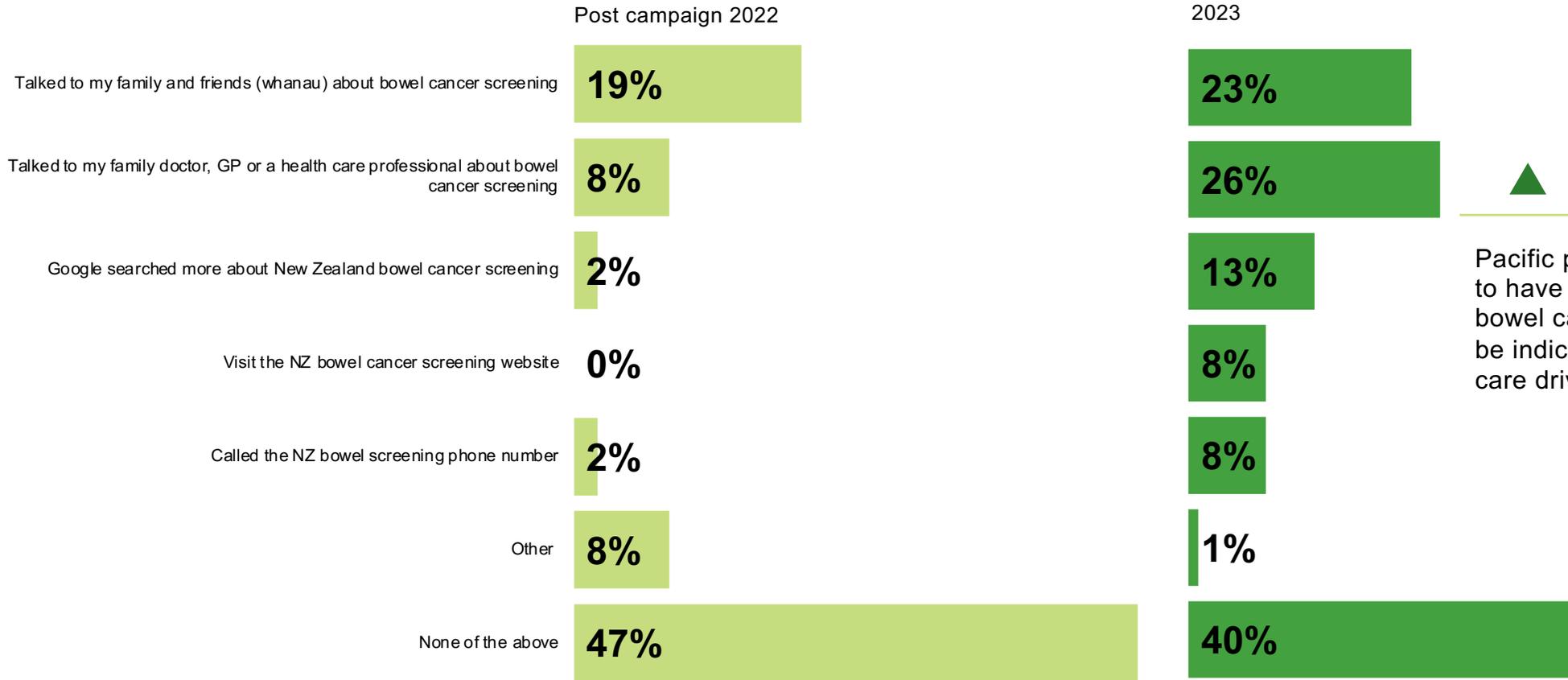
“Had already done my tests before ad came out. But like the campaign.”

“Already do regular tests.”

“Have already done it before I saw the ad.”

More Pacific peoples have now taken action after seeing the campaign

As a result of seeing this advertising, have you done any of the following? - Pacific peoples



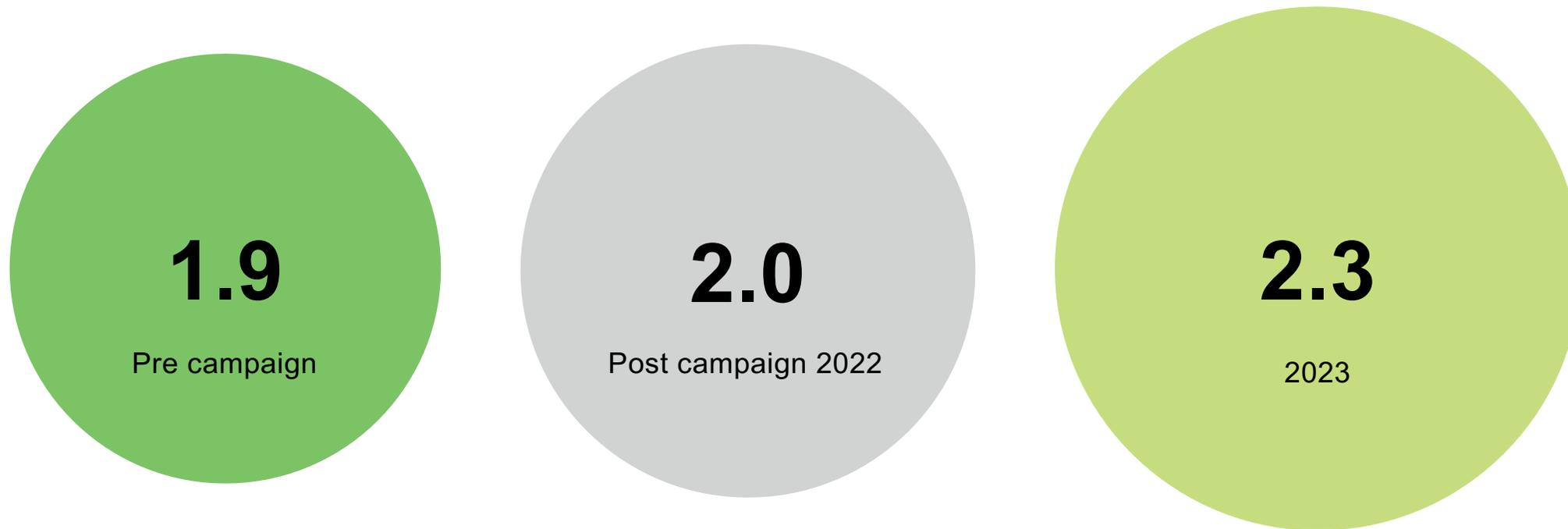
Pacific peoples are now more likely to have talked to their GP about bowel cancer screening – this could be indicative that the GP primary care drive has been effective.

▲ ▼ Significantly higher/lower than post campaign 2022

Question: As a result of seeing this campaign, have you done any of the following?
 Base: Post campaign Nov 2022 pacific peoples (39)
 Post campaign Nov 2023 pacific peoples (60)

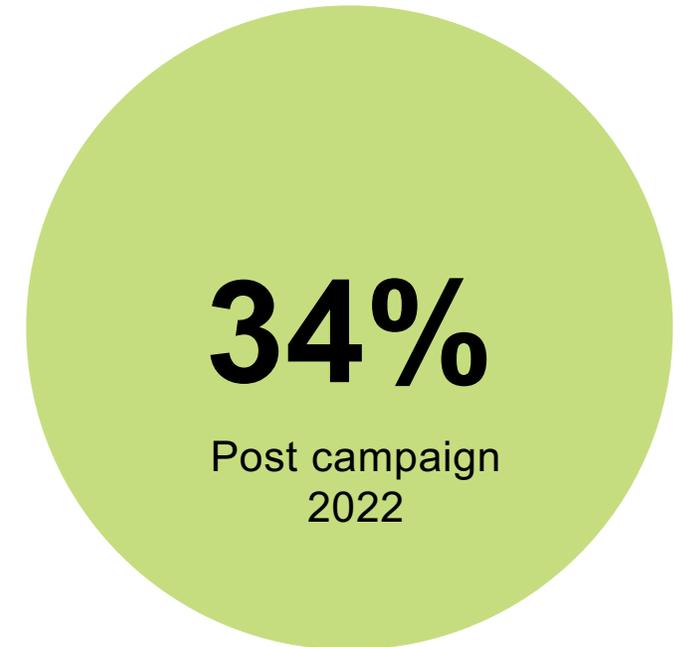
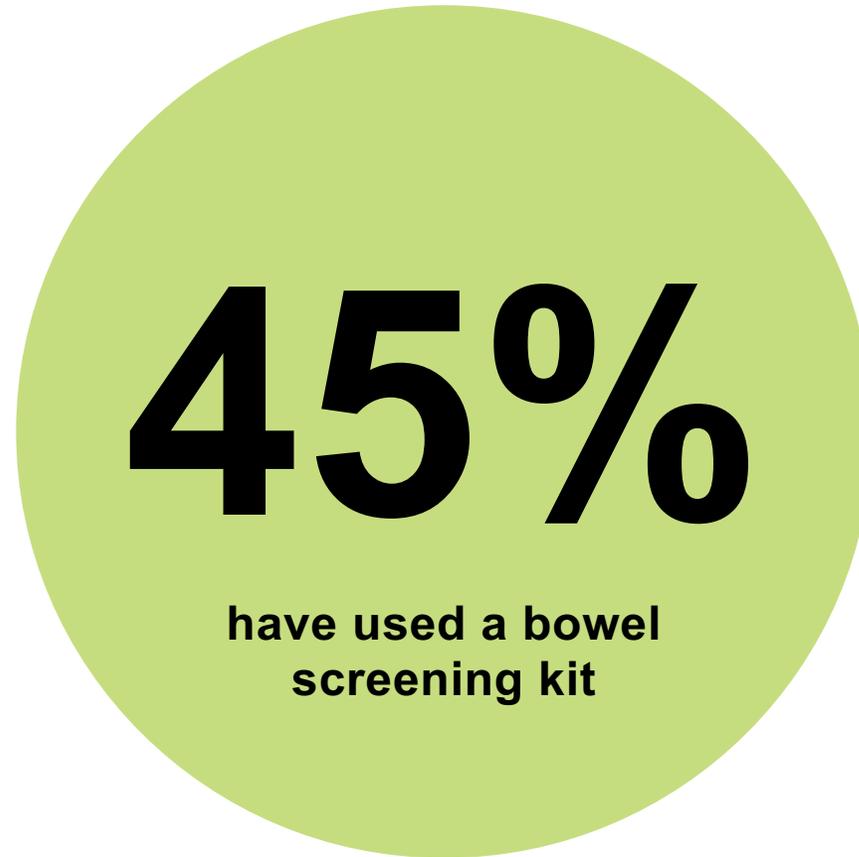
Among those who are eligible, the average number of bowel screenings has increased over the life of the campaign

Average number of bowel screenings had – Eligible group



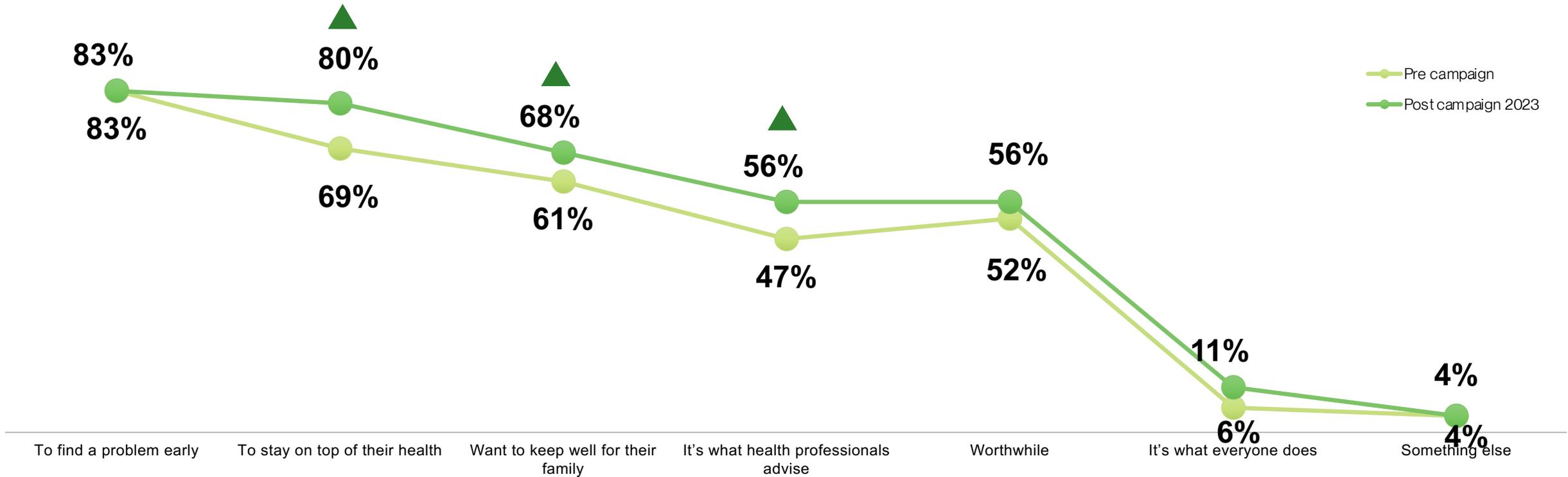
Just under half of those eligible have also gone on to use a screening kit as a result of seeing the campaign

As a result of seeing this advertising, have you done any of the following?
– Eligible Group 2023



Staying on top of health and keeping well for family are now bigger motivations for getting screened

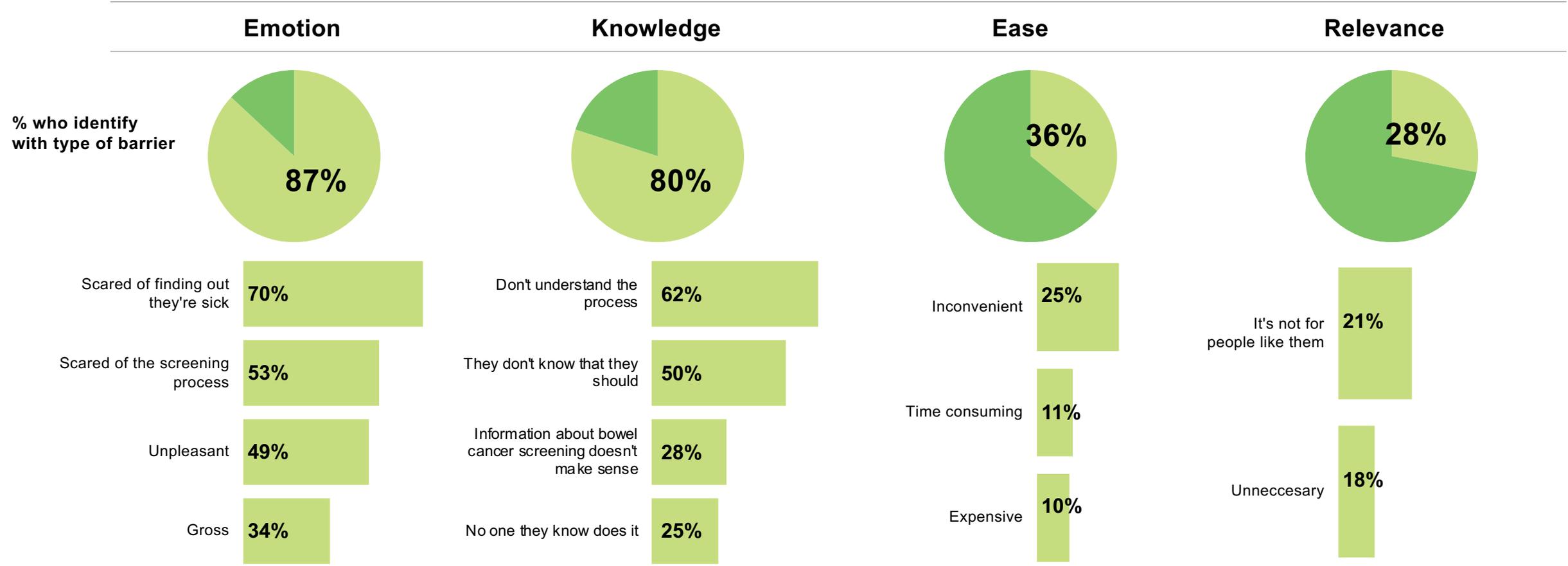
Motivations for bowel cancer screening



▲ ▼ Significantly higher/lower than pre campaign

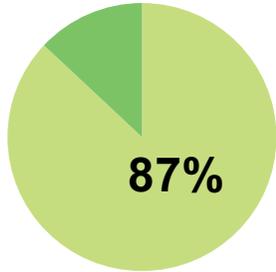
Question: Why do you think other people might take part in bowel cancer screening?
Base: Pre campaign 2022 (303) Post campaign Nov 2022 (414) Post campaign Nov 2023 (308)

The majority identify emotional and knowledge barriers to taking part in bowel cancer screening



There is an opportunity for the campaign to continue to address these key barriers

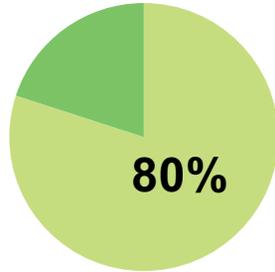
Emotion



% who identify with type of barrier

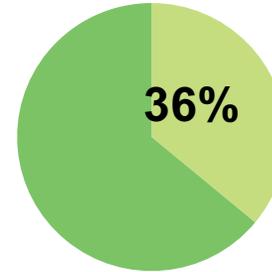
- ✓ Focus on reassurance through tone of messaging
- ✓ Leveraging advocates/trusted advisors

Knowledge



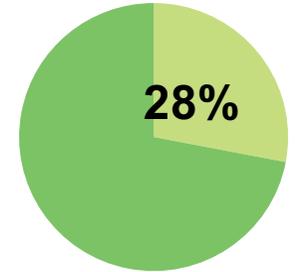
- ✓ Continued focus on clear delivery of key messages through the right channels, and at the time
- ✓ Focus on the simplicity of the process
- ✓ Social norming

Ease



- ✓ Continued focus on communicating the simplicity of the screening process – overlaps with knowledge
- ✓ Honing in on free, quick and effortless messaging

Relevance



- A harder to convince group – may have valid reasons why bowel cancer screening is not for them, or may be ‘tuned out’ to messaging. Consider de-prioritising

Overall, the positive impact on behaviour after the initial campaign launch has been maintained

The campaign is motivating more people to use a bowel cancer screening kit over time and future intention to do so remains high.

This year, we see a particularly strong impact on Pacific peoples who are now significantly more likely to have taken action as a result of the campaign.

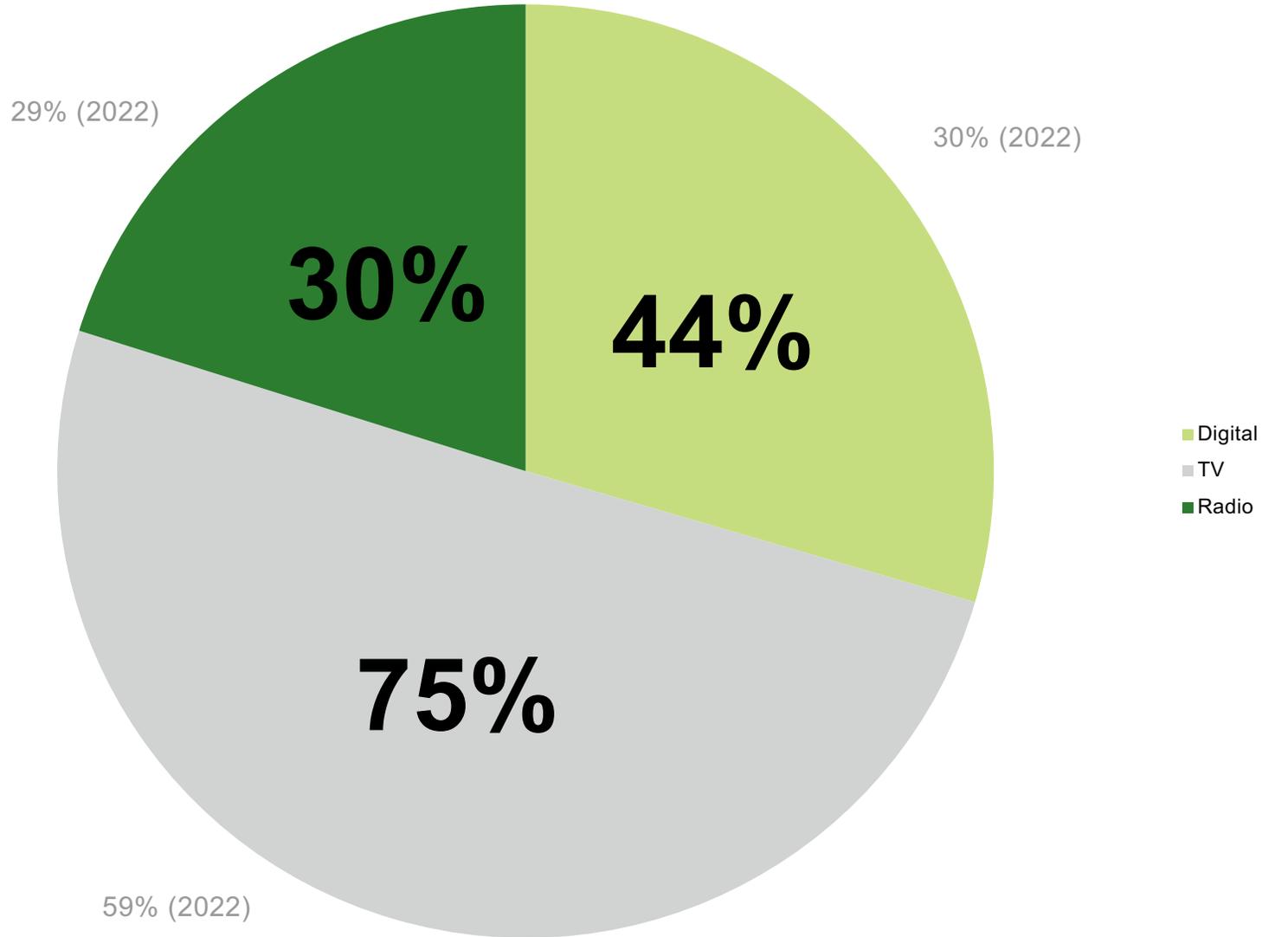
The majority of people still identify with some emotional and knowledge barriers to bowel cancer screening. There is an opportunity for the campaign to further address these going forward through refined messaging and the right channels.



3

Detailed campaign response

TV continues to drive the strongest share of reach



Reach across channels has improved most strongly among Pacific peoples

	NZ European		Māori		Pacific peoples		Disability	
	Post campaign Nov 2022	Nov 2023						
Digital	27%	34%	39%	49%	16%	62% ▲	36%	50% ▲
TV	64%	73%	64%	78% ▲	48%	79% ▲	62%	74% ▲
Radio	28%	33%	35%	30%	17%	40% ▲	33%	30%
Total recognition	67%	78% ▲	74%	84% ▲	56%	85% ▲	67%	80% ▲

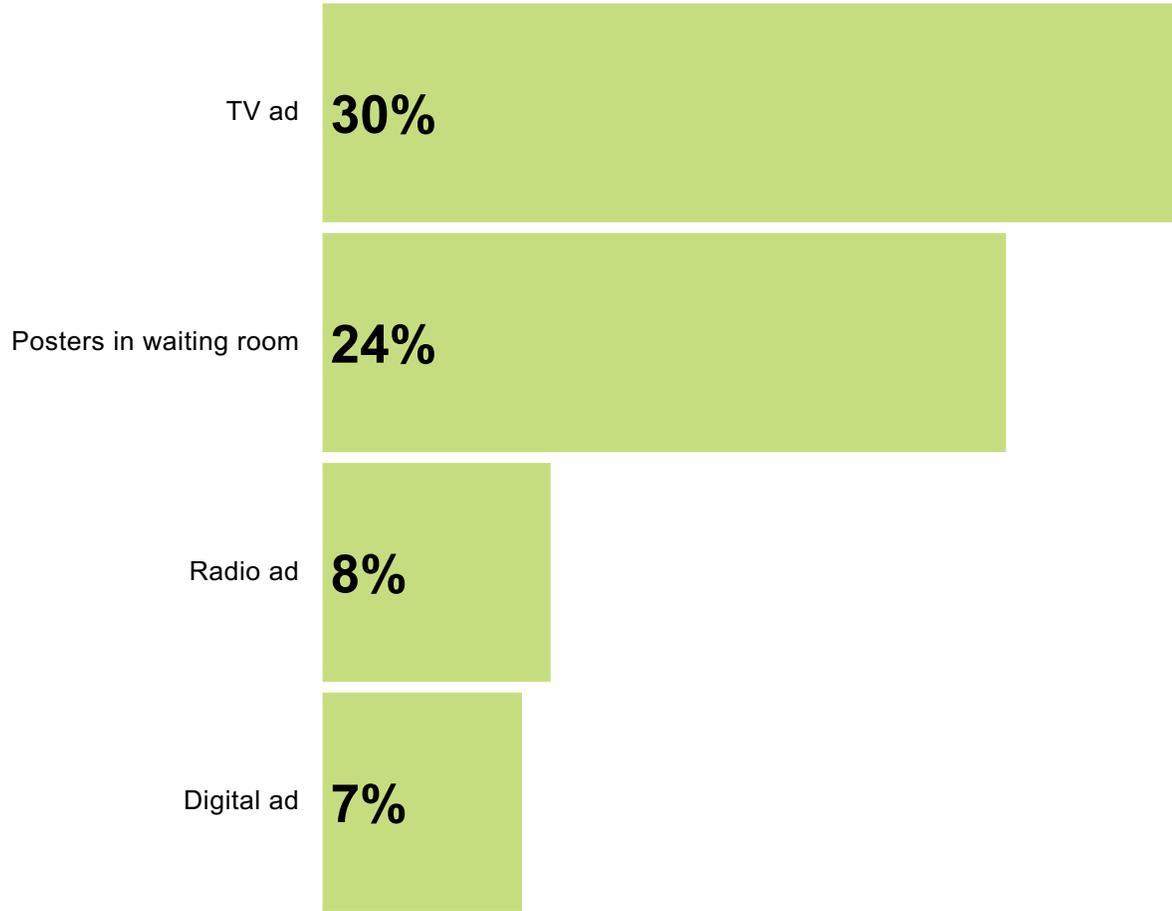
▲▼ Significantly higher/lower than Post campaign Nov 2022

Nearly half saw the campaign at their family doctor/GP

Campaign recognition at family doctor/GP

48%

Total recognition at family doctor/GP



The GP primary care drive did particularly well to reach Māori and Pacific peoples

Campaign recognition at family doctor/GP by ethnicity/disability

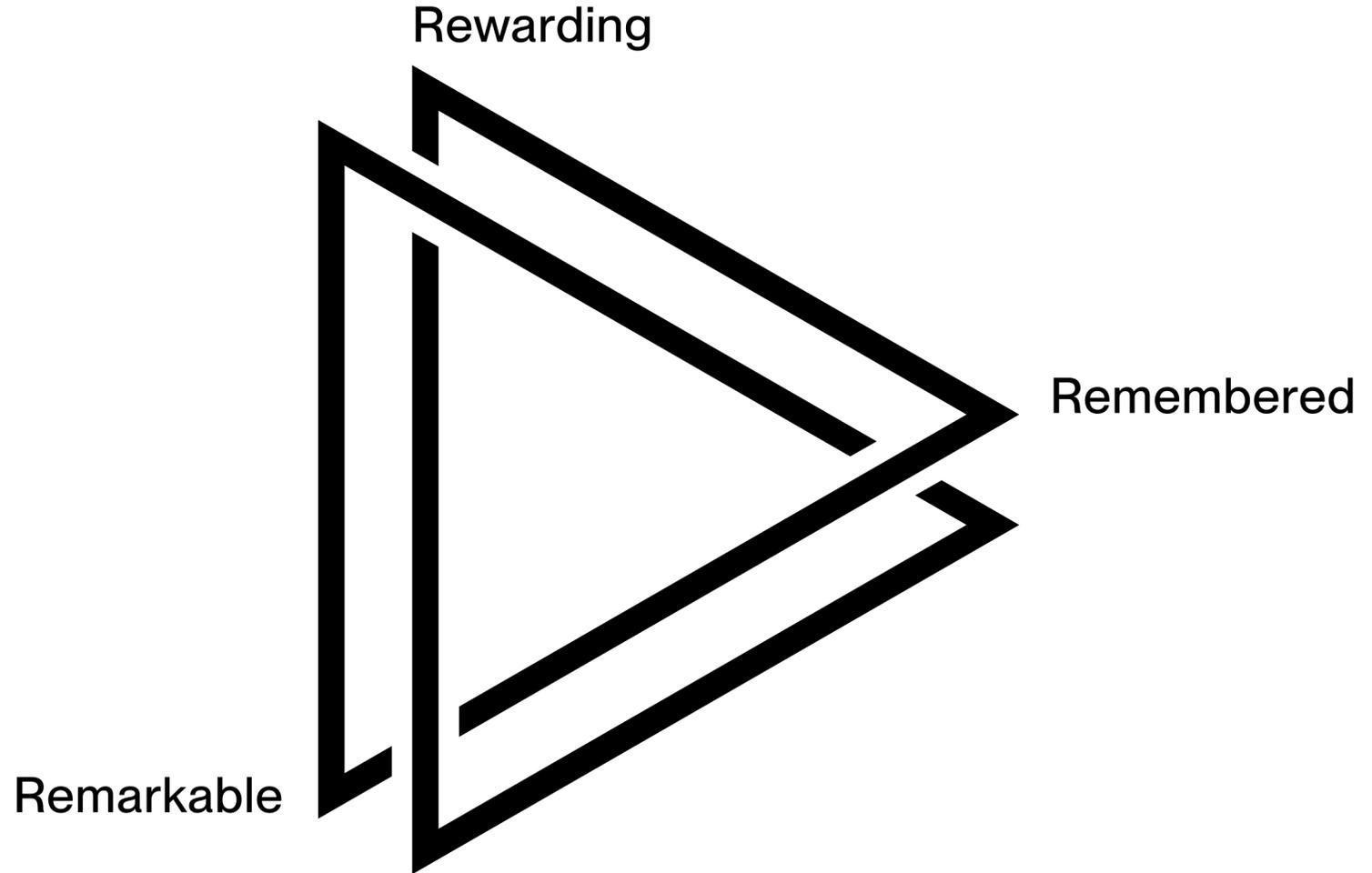
	NZ European	Māori	Pacific peoples	Disability
TV ad	19%	30%	40%	29%
Posters in waiting room	17%	32%	27%	23%
Radio ad	7%	7%	16%	8%
Digital ad	3%	9%	8%	11%
I did not see or hear any of these ads when visiting my family doctor/GP	53%	35%	32%	40%
I have not been to my family doctor/GP in the last 12 months	14%	12%	9%	10%

  Significantly higher/lower than TRA norms

TRA Creative Edge Model

Creative Edge is about ensuring any creative work has the potential to move beyond an influential idea to an enduring icon, where the greatest return on investment is received.

Remarkable	Uniqueness Stands out	Virality Gets people talking
Rewarding	Repeatability Worth seeing again	Entertainment value Get something from the ad
Remembered	Brand fit Fits with expectations / strategy	Fluency Ease of brand recall



The campaign exceeds norms on all Creative Edge pillars

The remembered pillar in particular performs exceedingly well relative to norms.

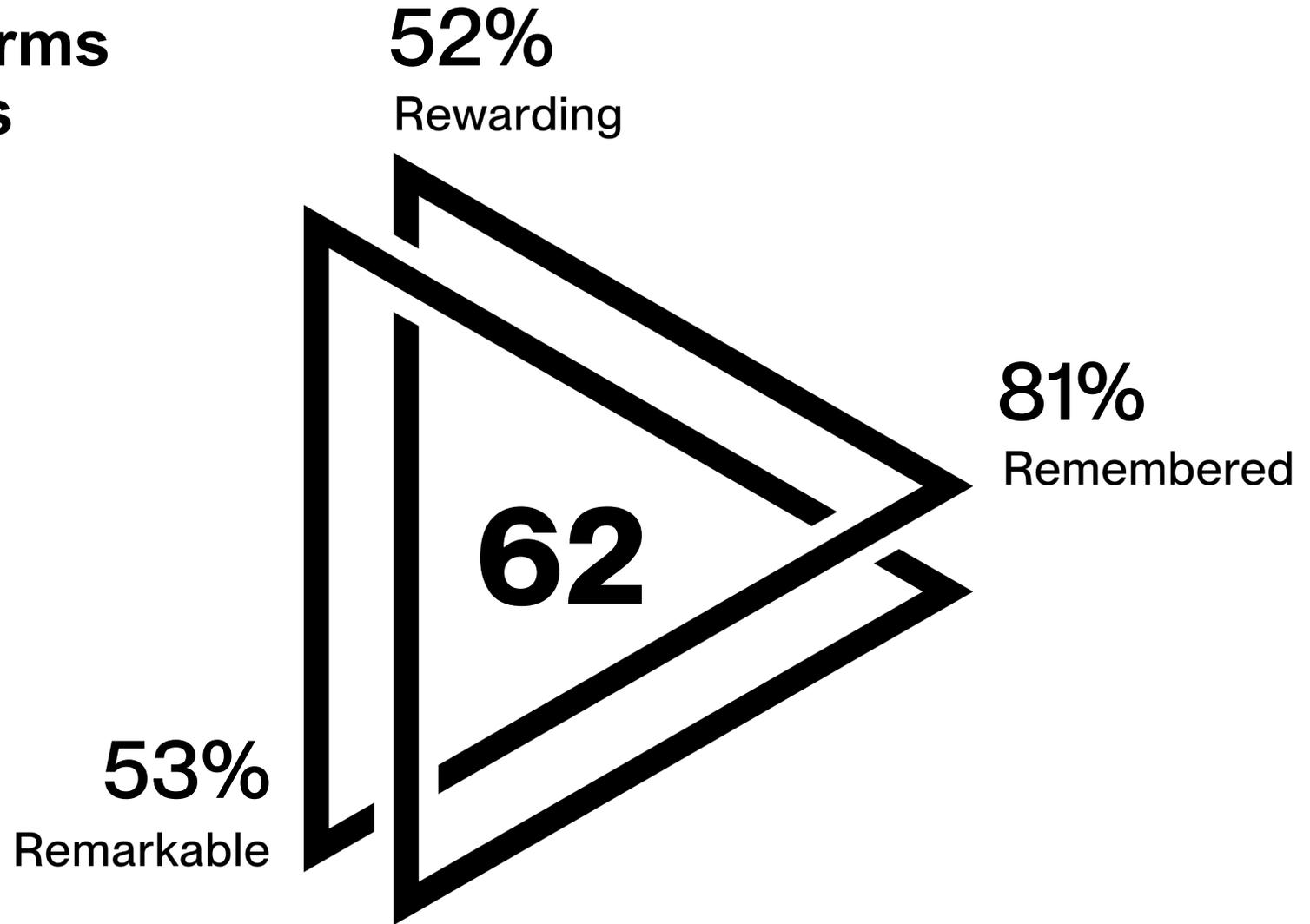
TRA Norms (private and public sector)

Creative Edge 41

Remarkable 37

Rewarding 34

Remembered 55



We are now reaching Pacific peoples as effectively as other groups

TV remains our strongest channel – driving the greatest reach.

The GP primary care drive is also working effectively to raise awareness, particularly among Māori and Pacific peoples.

Refining our channels and targeting has resulted in Pacific peoples now being the most likely to see the campaign, alongside Māori.



4

Bringing it all together

Bringing it altogether

The campaign continues to be highly effective

More of our target audience have now seen the campaign, and continue to take away the right messages.

Over half who saw the campaign are more likely to use a bowel screening kit as a result, and just under half have already done so.

While overall a success, always-on messaging will be important to remind people when they are due to screen.

As to be expected, the campaign messages are starting to feel less novel.

As most have now seen the campaign and many have already had a test or taken action, always-on reminder messaging becomes very important to capture people in the moment when they are due for a screen.

Most of our target audience still identify with barriers to taking a bowel screening test

- particularly around emotions (such as fear) and gaps in knowledge.

There is an opportunity for the campaign to further address these going forward through refined messaging and the right channels relevant to each key type of barrier.

Success with Pacific peoples

Identified last time as the group with potential for further reach, they are now the most likely to have seen the campaign along with Maori.

And improved exposure is having a positive impact – Pacific peoples now have greater awareness of bowel cancer screening and are also more likely to take action as a result of seeing the campaign.

TV continues to serve as our hardest working channel

TV provides the greatest reach of our channels.

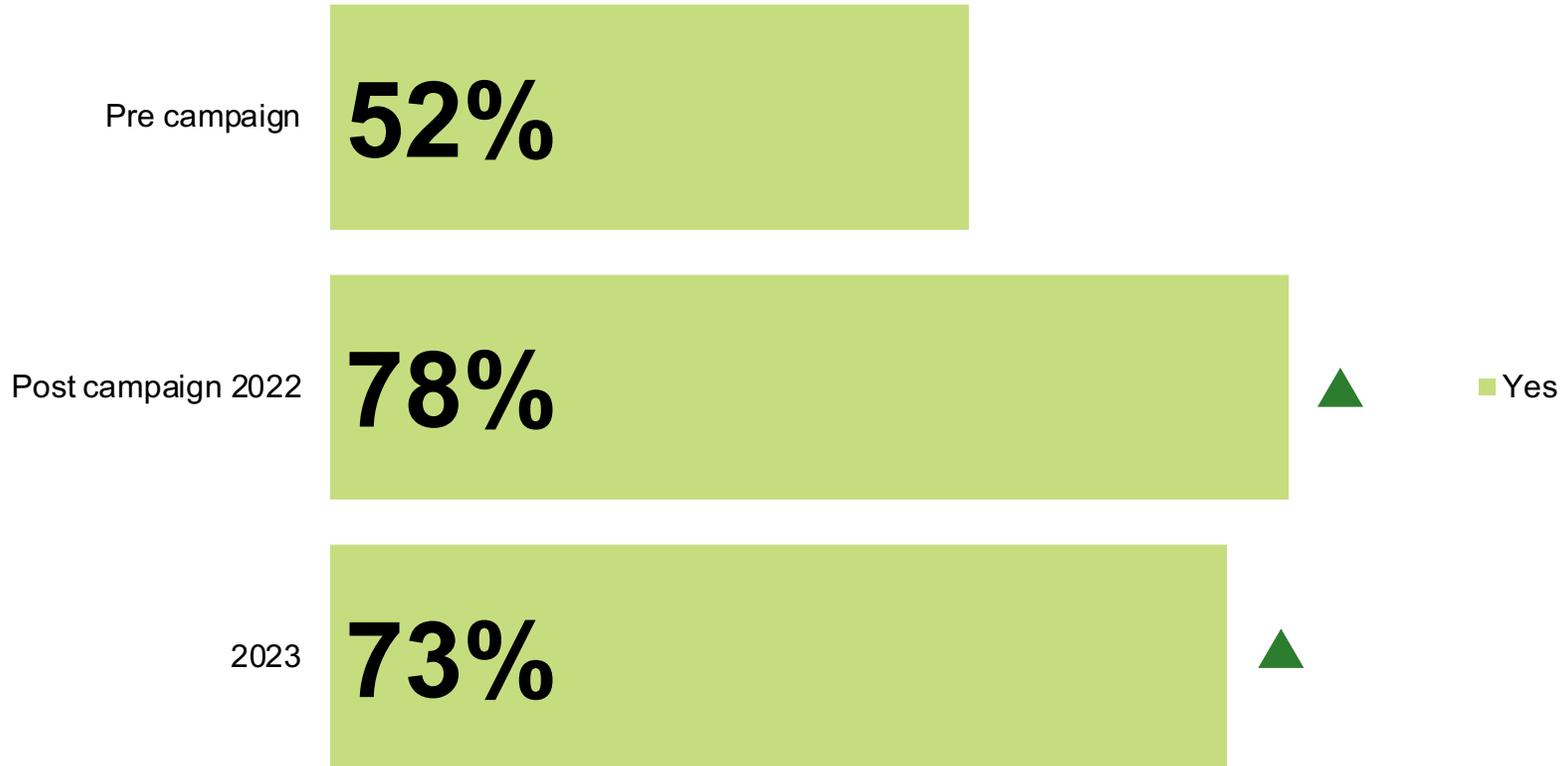
The addition of the GP primary care channel has also supported stronger reach, and likely contributed to growth among Pacific peoples.

Campaign performs strongly on Creative Edge

Relative to TRA norms, the campaign performs highly as being remarkable, rewarding and in particular, remembered.

Appendix

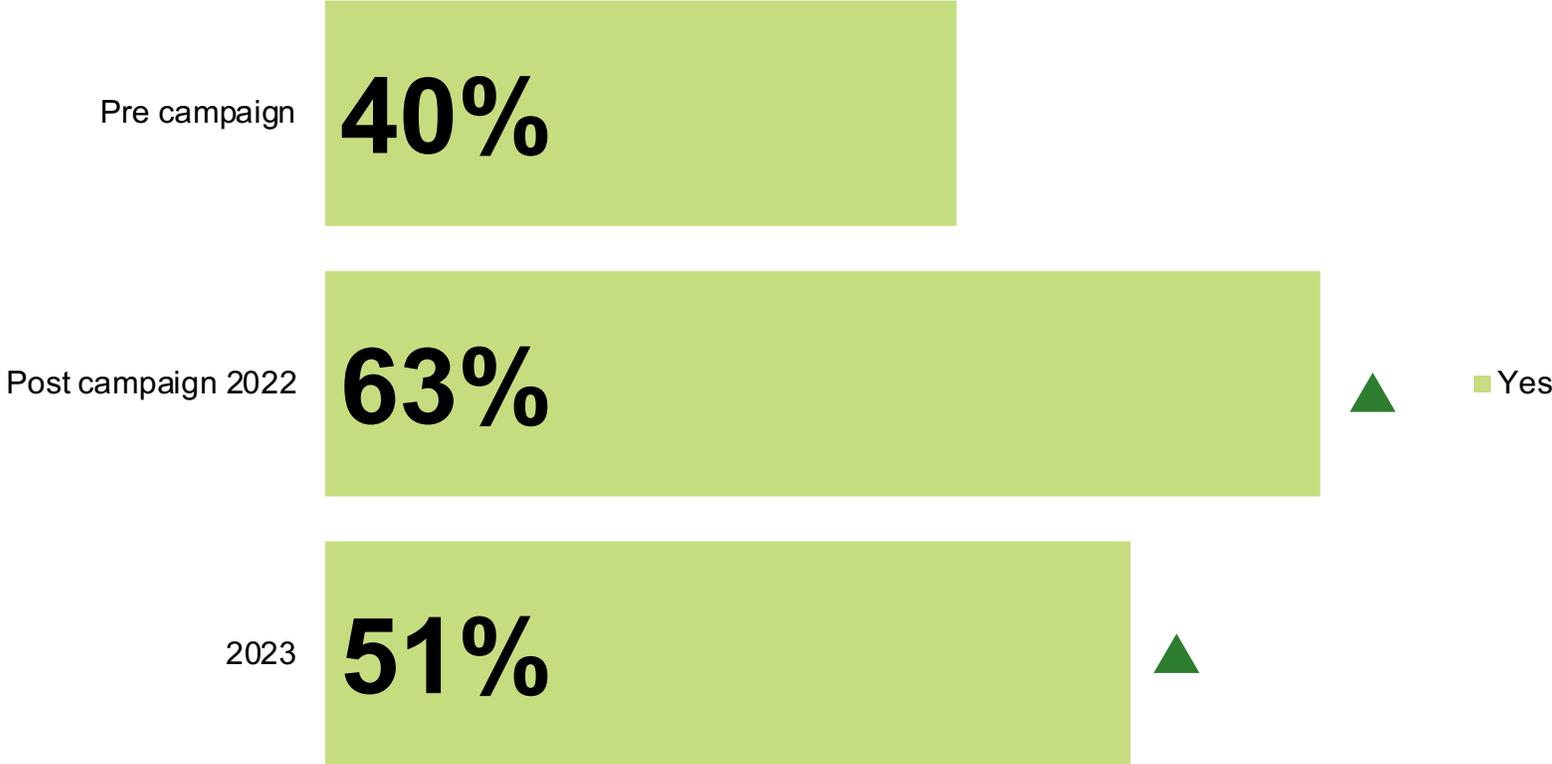
Have you heard about free bowel cancer screening for people aged 60-74 or 50-74 for Māori and Pacific peoples in some areas?



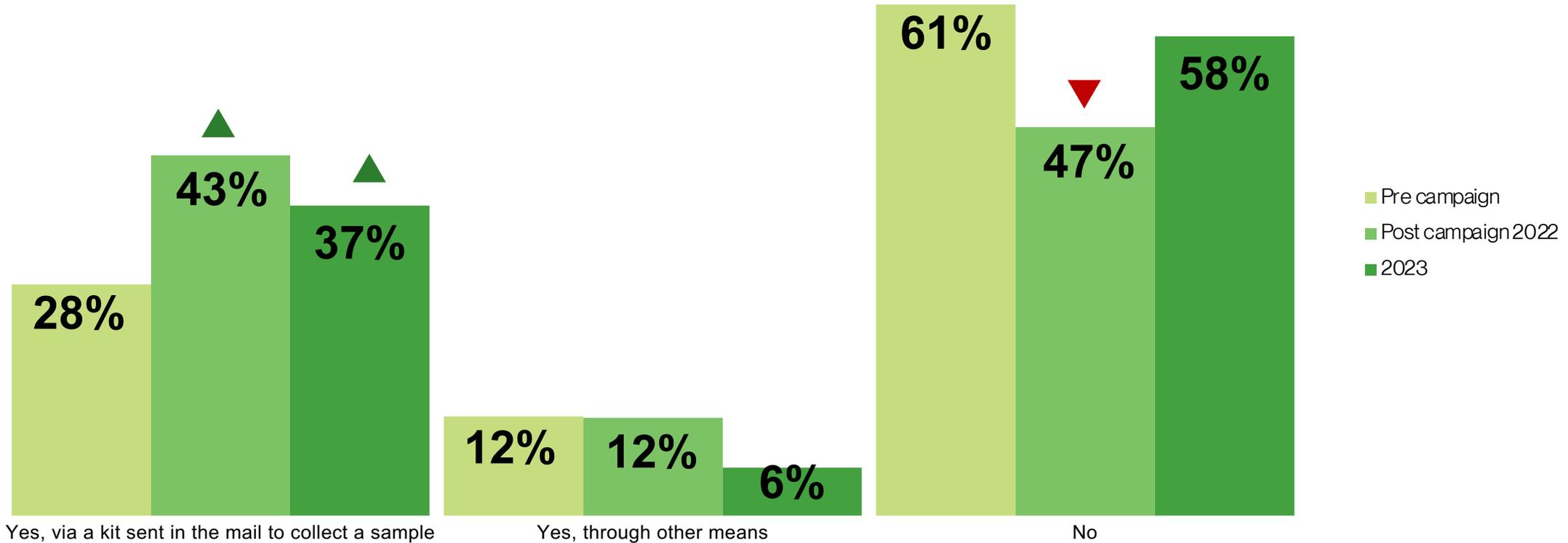
▲ ▼ Significantly higher/lower than pre campaign

Question: Have you heard about free bowel cancer screening for people aged 60-74 or 50-74 for Māori and Pacific peoples in some areas?
Base: Pre campaign 2022 (303) Post campaign Nov 2022 (414) Post campaign Nov 2023 (308)

Is bowel cancer screening offered in your area?



Have you ever taken part in bowel cancer screening?



▲ ▼ Significantly higher/lower than pre campaign

Question: Have you ever taken part in bowel cancer screening?
Base: Pre campaign 2022 (303) Post campaign Nov 2022 (414) Post campaign Nov 2023 (308)

Have you heard about bowel cancer before?

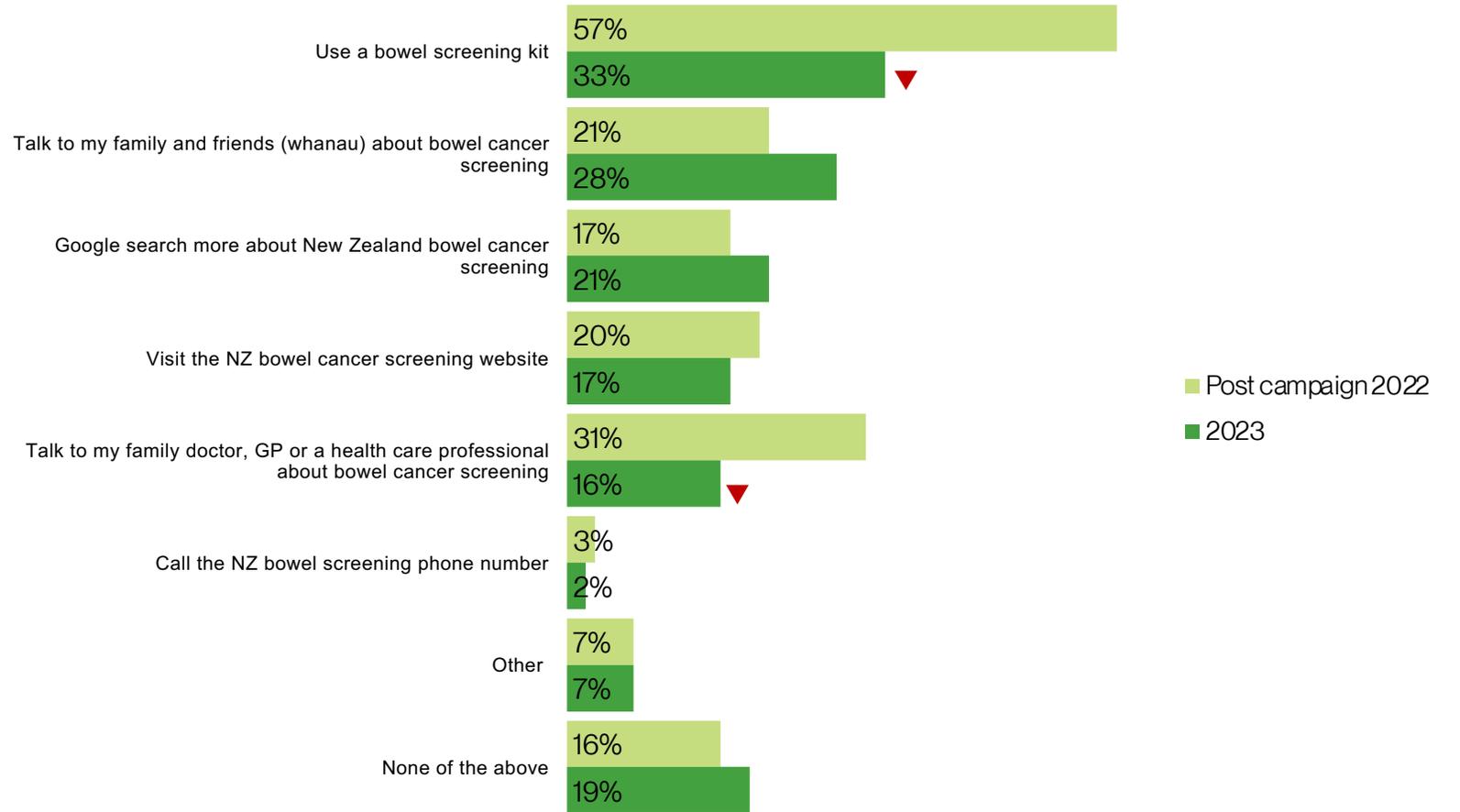
	NZ European		Māori		Pacific peoples		Disability	
	Post campaign Nov 2022	Nov 2023						
Total awareness	88%	88%	83%	88%	85%	81%	84%	86%
Yes, I know a lot about it	40%	20% ▼	35%	16% ▼	14%	19%	32%	16% ▼
I know a little about it	48%	68% ▲	48%	72% ▲	71%	62%	52%	70% ▲
I only know the name	10%	10%	12%	10%	15%	16%	15%	13%
I haven't heard of it before today	2%	1%	5%	2%	0%	3%	1%	0%

▲▼ Significantly higher/lower than TRA norms

Among the small group who had not seen the campaign before, a third intend to go on to use a screening kit

As a result of now seeing this advertising, have you done any of the following?

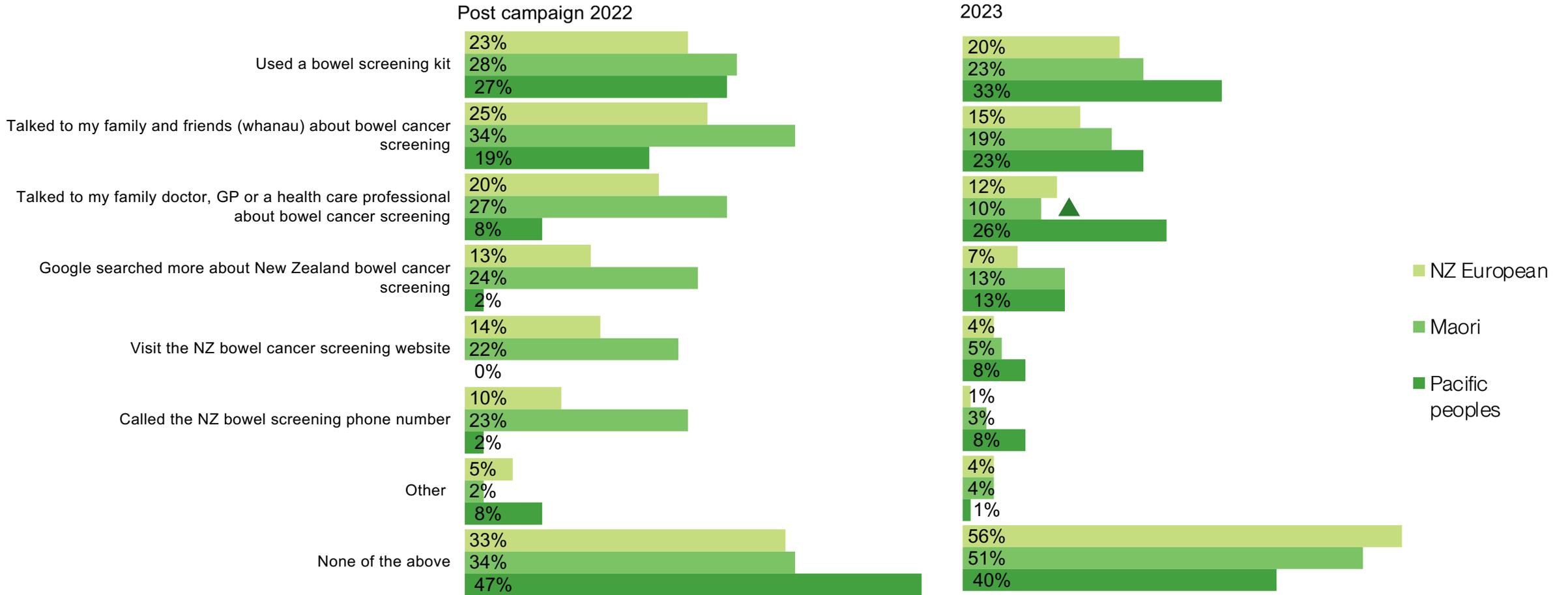
Due to the strong reach of the campaign, this group has become smaller and is potentially narrowing down to those who are 'tuned out' and could be harder to reach or convert.



▲ ▼ Significantly higher/lower than post campaign 2022

Question: As a result of now seeing this advertising, have you done any of the following?
 Base: Post campaign Nov 2022 (414) Post campaign Nov 2023 (308)

As a result of seeing this advertising, have you done any of the following?



▲ ▼ Significantly higher/lower than post campaign 2022

Question: As a result of seeing this campaign, have you done any of the following?
 Base: Post campaign Nov 2022 NZ European (138) Maori (137) pacific peoples (39)
 Post campaign Nov 2023 NZ European (117) Maori (131) pacific peoples (60)

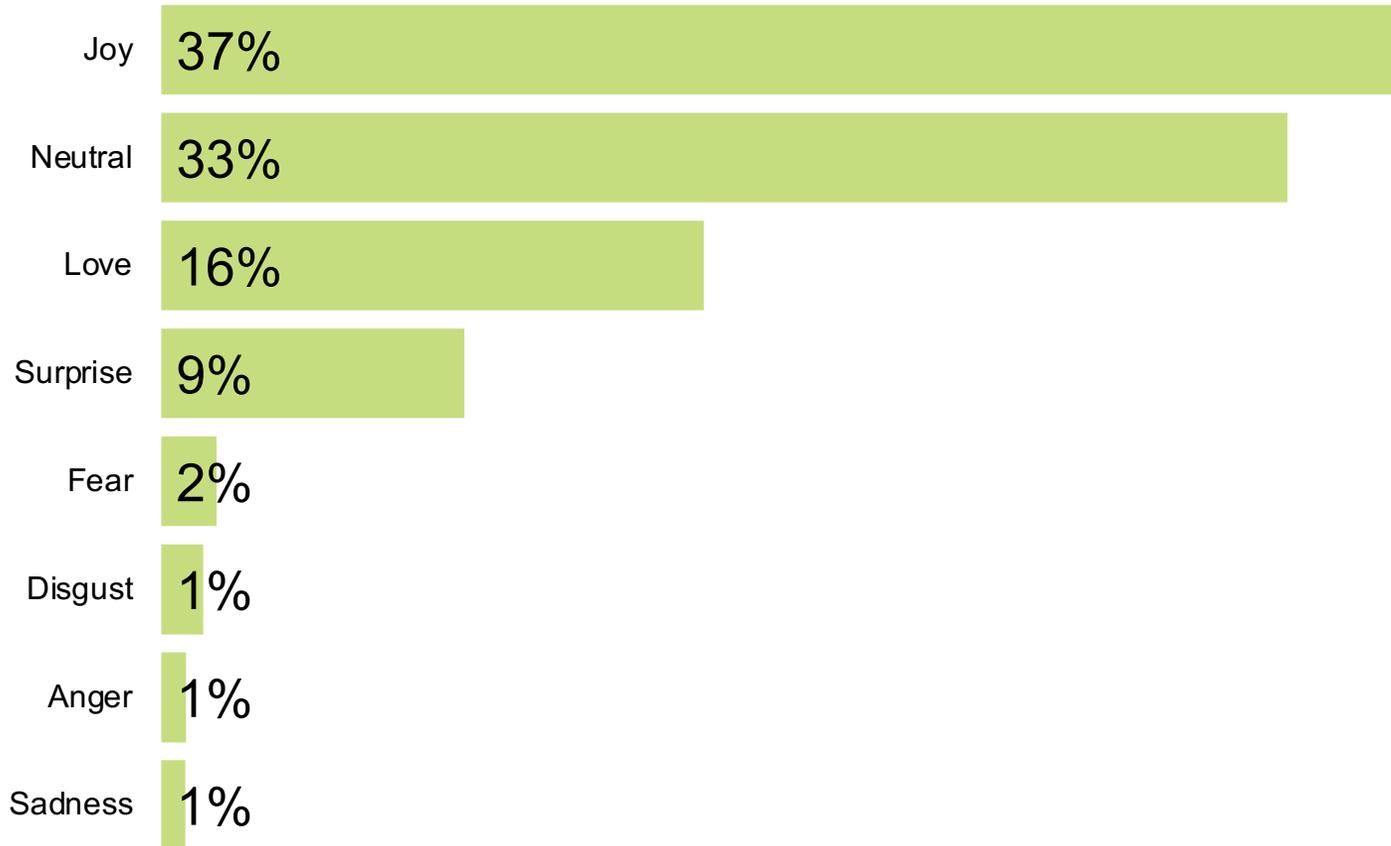
When seeing this advertising, how do you feel about taking a bowel screening test?

	NZ European		Māori		Pacific peoples		Disability	
	Post campaign Nov 2022	Nov 2023						
Less likely to get a bowel cancer screening	1%	4%	4%	4%	6%	3%	3%	3%
About the same	28%	43% ▲	23%	34%	25%	30%	28%	40% ▲
More likely to get a bowel cancer screening	70%	53% ▼	70%	61%	62%	67%	65%	57%

▲▼ Significantly higher/lower than TRA norms

Question: When seeing this advertising, how do you feel about taking a bowel screening test?
 Base: Post campaign Nov 2022 NZ European (198) Maori (179) pacific peoples (70) Disability (181)
 Post campaign Nov 2023 NZ European (149) Maori (158) pacific peoples (72) Disability (122)

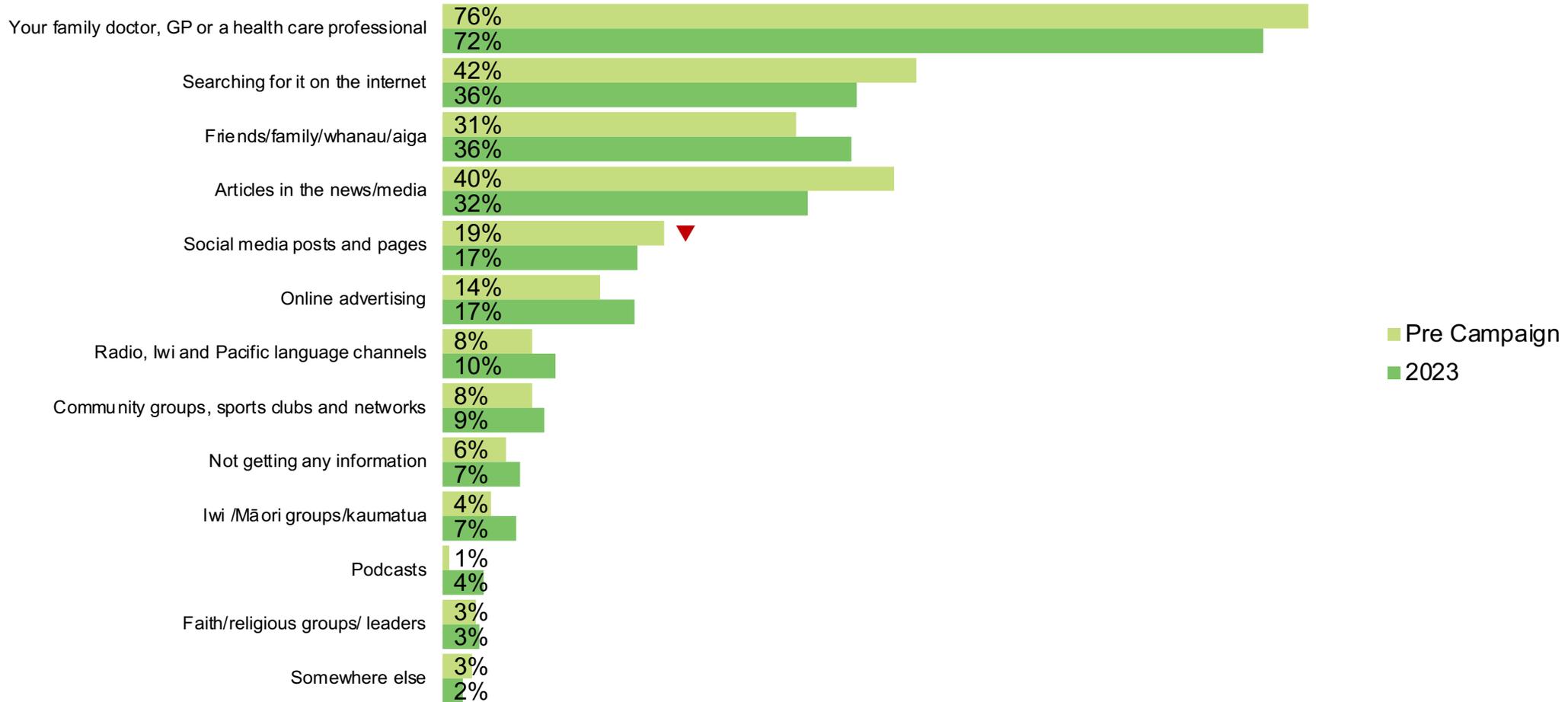
Which of these best shows how you feel about this ad?



▲ ▼ Significantly higher/lower than pre campaign

Question: Which of these best shows how you feel about this ad?
Base: Post campaign Nov 2023 (308)

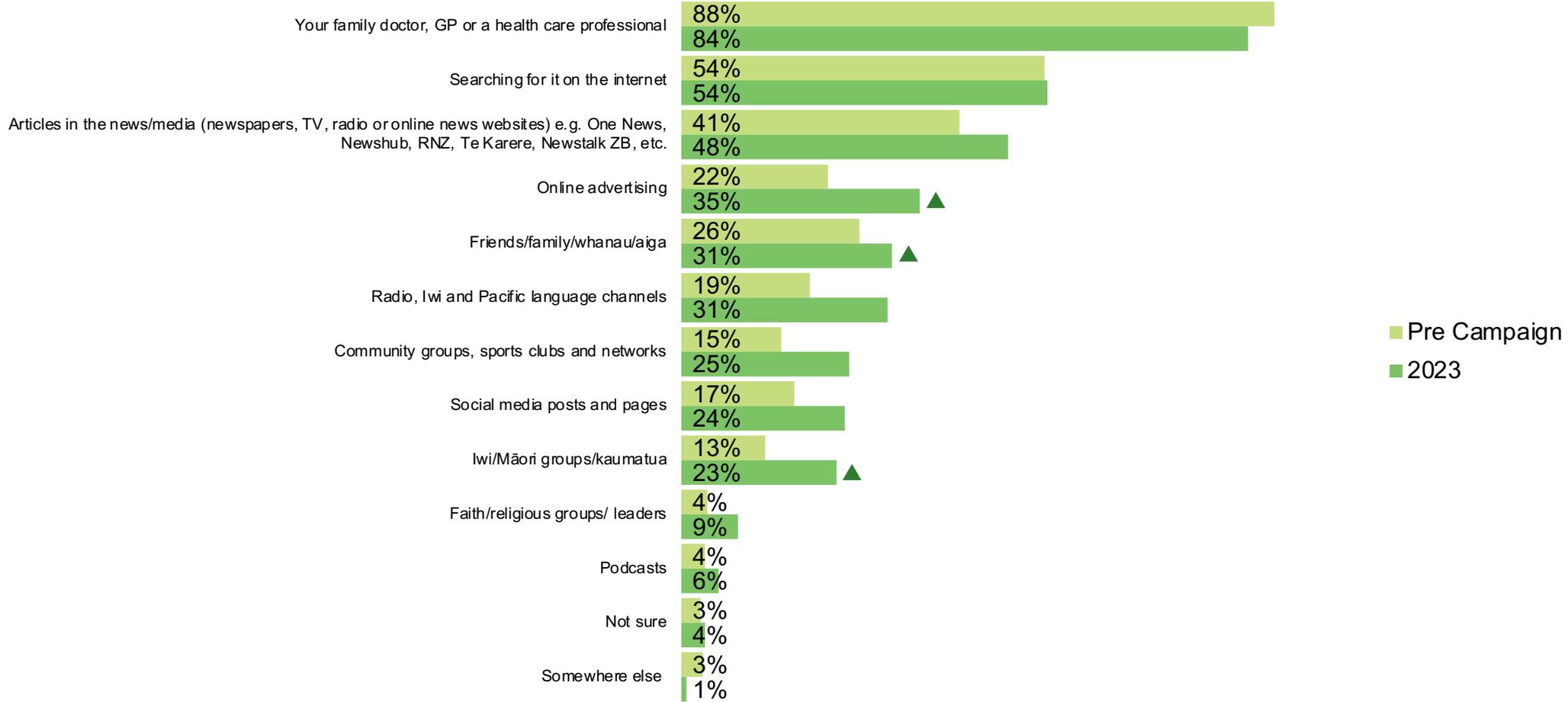
Where do you normally get health information from on a day-to-day basis?



▲ ▼ Significantly higher/lower than pre campaign

Question: Where do you normally get health information from on a day-to-day basis?
 Base: Pre campaign 2022 (303) Post campaign Nov 2023 (308)

Where would you expect to find information about bowel cancer screening?



▲ ▼ Significantly higher/lower than pre campaign

Question: Where would you expect to find information about bowel cancer screening?
 Base: Pre campaign 2022 (303) Post campaign Nov 2023 (308)

A minor barrier is cultural beliefs not accepting/accommodating the screening process which was mentioned among a small minority

“Cultural beliefs - playing around with your own poo is hard for some races to accept/understand...”
– NZ European

“Culture can play a big part in their decision”
– NZ European

“Cultural barriers” –
NZ European