

# Evaluation Report



Lancashire & South Cumbria Cancer  
Alliance, in partnership with Ovacome

Public awareness raising campaign to break down  
barriers preventing earlier diagnosis of ovarian  
cancer

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## Introduction

Each year 7,400 women are diagnosed with ovarian cancer in the UK. Two thirds of these women are diagnosed late, when the cancer is harder to treat which ultimately affects their treatment options. Sadly, more women die because of ovarian cancer each year in the UK than all other gynaecological cancers combined. Like all cancers, the earlier ovarian cancer is diagnosed, the easier it is to treat, and the greater the chances of survival.

Lancashire & South Cumbria Cancer Alliance partnered with ovarian cancer charity, Ovacome, to launch an awareness raising campaign designed to educate the public on the signs and symptoms of ovarian Cancer. As part of this campaign, a mobile van travelled around Lancashire & South Cumbria visiting town centres and supermarkets providing information to our citizens in the community. Trained health ambassadors were on board the van providing information resources from Ovacome and signposting visitors to their GP, where appropriate.

The aim of this project was to heighten the public knowledge of ovarian cancer and how it presents, encourage women with symptoms to reach out to their GP and reduce the number of late-stage presentations across Lancashire & South Cumbria longer term.

## Materials & Method

The van was co-designed with Ovacome charity members who have either personally been diagnosed with ovarian cancer or have experience of the disease through friends or family members. Ovacome members were asked to complete a survey on what would attract them to visit the van in the community, which guided the design of the van. It was felt that images of real women who have experienced an ovarian cancer diagnosis was key to this campaign. An expression of interest was put out to all active Ovacome members to give their consent to feature on the print of the vehicle. Photography was facilitated by the charity.

A total number of 11 locations were identified which provided the geographic and demographic variability needed to evaluate how well educated the public were on the signs and symptoms of ovarian cancer. This selection was also guided by the number of late stage presentations identified via a heat map of previous diagnosed ovarian cancers.

The campaign included the use of social media, local press, a dedicated website and accessibility of the 24hr Ovacome support line. The key messages during the preparation of the campaign were gradually refined into a core slogan of “**Know your ovaries**” using a common phrase to bring to life the benefits of education and early recognition to support earlier access to treatment. All literature was provided by Ovacome and branded with the Lancashire & South Cumbria cancer alliance logo for distribution.

Evaluation was conducted via a survey of public awareness prior to interaction and post interaction with the health ambassadors on board.

## Locations

Location	Footfall	Suitability
<b>1. Lancaster</b> ASDA supermarket	1003 interactions over 2 days	Location very central in terms of footfall, demographic and visibility. Located in between Lancaster & Morecambe. Store accommodating with table in foyer.
<b>2. Kendal</b> Morrisons Supermarket	701 interactions over 2 days	Location very central in terms of footfall, demographic and visibility. Store accommodating with table in foyer.
<b>3. Blackpool</b> Town Centre, Council	699 interactions over 2 days	Location very suitable in terms of demographic and visibility. Local Sainsburys nearby agreed to distribute leaflets on staff notice boards & in female toilets.
<b>4. Chorley</b> Chorley Market, Council	696 interactions over 2 days	Chorley market was only active on one of the days, so an alternative location for the second day would have been more suitable as quieter on non-market day.
<b>5. Lytham St Annes</b> Booths Supermarket	319 interactions over 1 day	Venue suitable in terms of footfall, demographic & visibility. Public less interested in engaging compared to other areas.
<b>6. Burnley</b> Town Centre, Council.	260 interactions over 2 days	Location very suitable in terms of demographic and visibility. Footfall was lower than average on these days possibly due to a serious public safety incident in Manchester. Storm "Amy" also hit the UK on these days causing torrential rain and strong winds.
<b>7. Garstang</b> Booths Supermarket	382 interactions over 1 day	Location suitable in terms of footfall and visibility of mobile unit. Literature distributed to local pharmacy and Booths staff room. Weather from the storm may have impacted footfall.
<b>8. Preston</b> Deepdale Retail Park	483 interactions over 2 days	Retail Park was suitable in terms of demographic. However, footfall mid-week

		was low, and ambassadors needed to walk around the units to maximise interactions.
<b>9. Blackburn</b> Town Hall & Market, Council	344 interactions over 2 days	Very suitable in terms of visibility of the mobile unit. Poor footfall. Town hall staff advised that the town centre had been notably quiet in recent weeks.
<b>10. Ormskirk</b> Morrisons Supermarket	654 interactions over 2 days	Suitable in terms of footfall, demographic and visibility. Mobile unit asked to park on car park away from main entrance which impacted immediate footfall. Leaflets were distributed to outlets/traders on the high street.
<b>11. Leyland</b> Tesco Supermarket	541 interactions over 2 days	Location very suitable in terms of footfall, demographic and visibility. Great support from staff onsite, good engagement from the public when approached.

## Significant findings and data headlines

### Patient surveys

There was a total of 6082 interactions with the public across the 5-week awareness campaign, with 1067 surveys completed. Interactions were ranked on a scale of 1-5 depending on the length of time of the interaction and whether literature was taken and/or survey completed. Those who were classed as a level 5 interaction had a lengthier discussion privately within the van.

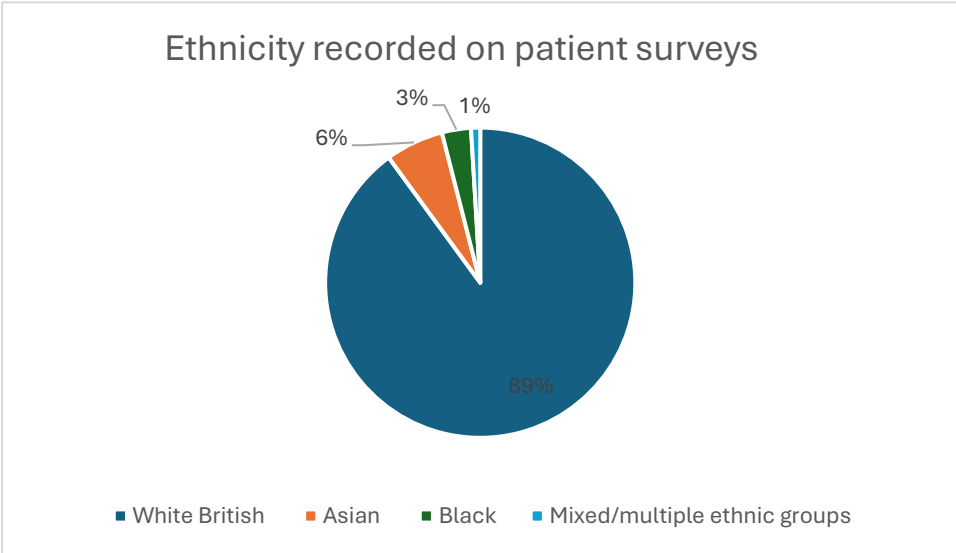
NG12 suspected cancer recognition and referral criteria ([Recommendations organised by site of cancer | Suspected cancer: recognition and referral | Guidance | NICE](#)) explicitly references investigating women aged 50+ if presenting with IBS symptoms for the first time or other signs such as weight loss and fatigue. Tests are recommended in primary care for women aged 50+ if presenting with persistent bloating, increased urinary frequency/urgency, persistent pelvic or abdominal pain and loss of appetite. The table below shows that a significant proportion of the public who engaged with the mobile van were of this target audience of 55 years or over (39.5%).

### Age and Ethnicity

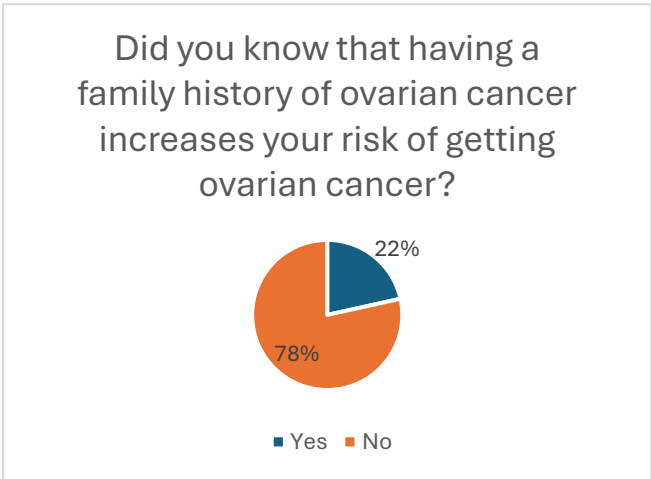
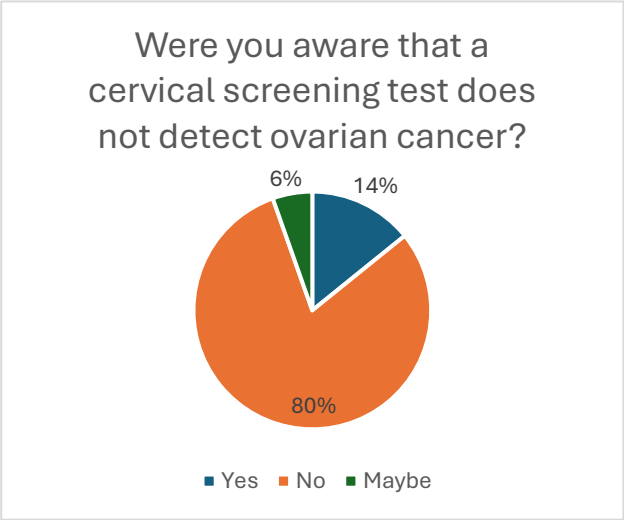
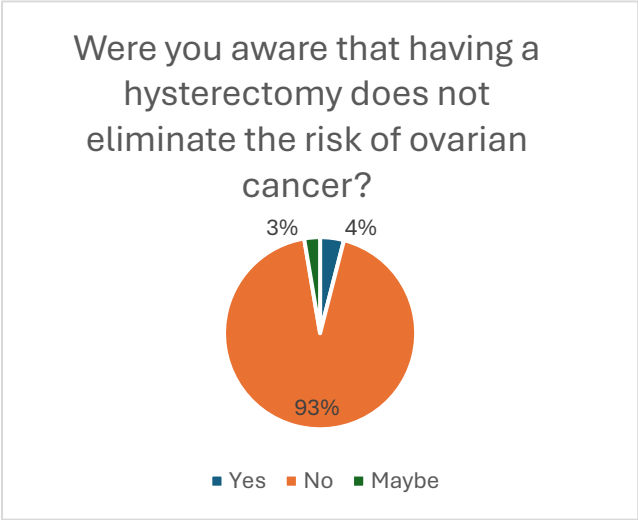
Age	Number of people	% of people
Under 18	1	0.09%
18-24 years	77	7.2%
25-34 years	166	15.6%
35-44 years	201	18.8%

45-54 years	195	18.3%
55+ years	421	39.5%
Did not disclose	6	0.6%

Of the 1067 surveys completed, 89% of people who interacted with the van described themselves as White British, with 6% identifying as Asian and 2% Black.



**Common misconceptions of ovarian cancer**



Within the survey were questions relating to common misconceptions of ovarian cancer. It was found that members of the public lacked knowledge on these misconceptions. Women reported not knowing whether they had undergone a partial or full hysterectomy or if their ovaries were removed during the procedure. Health ambassadors reported some challenging conversations with women who were adamant a hysterectomy meant they were no longer at risk.

Similarly, many women were unaware that a cervical screening test only tests for cervical cancer and does not assess ovarian health. There is still some confusion amongst the public on gynaecology cancer types, including screening & symptoms.

There was a lack of understanding of the role of genetics and how around 20-25% of those diagnosed with ovarian cancer have a hereditary tendency to develop the disease. Health ambassadors advised individuals with a family history of ovarian and breast cancers to speak with their GP to discuss testing.

#### **Key quotes from women about hysterectomies:**

“Wow I had no idea that this was a silent killer. Thank you for bringing this information into communities, awareness is key in this kind of thing and most definitely needed. I think most women that I know would be unaware that it’s not picked up in their cervical smear or that there is a rare type of this cancer that you can still get even if you’ve had a hysterectomy”

“I have learnt something today that I didn’t know about ovarian cancer and hysterectomies I’m going to tell my friends and follow the Ovacome social sites”

“Not enough people are aware of risks after hysterectomy; really thought I was in the clear with it. Will share the information with other women I know especially those who have had hysterectomies”

“I’ve had a hysterectomy and didn’t know I could get peritoneal? That really surprises me”.

#### **Key quotes from women about cervical screening:**

“I knew that this cancer carried a heightened risk if you had a family diagnosis but didn’t know it wasn’t screened for in your cervical smear test”

“I hate it that we don’t know about this cancer. Most people I know think that their smear tests for this. I wouldn’t have known the symptoms had I not stopped to chat”

“Brilliant way to get the message out there, thanks for being in the community. My grandma had this and I wasn’t aware that I was at more risk I thought it was checked at your smear test”.

#### **Key quotes from woman about genetics & ovarian cancer:**

“I have a sister who had this cancer and wasn’t aware that I could get a genetic check. I have two daughters who I worry about as we have breast cancer in the family. Thank you for bringing this to the community what a great place to have this catching people who are going to do their shopping, it’s great!!”

“My auntie and cousin both had ovarian cancer I didn’t know that makes me more susceptible. I have daughters too. I don’t understand why we don’t advertise this more. Along with raising awareness about your smear test not covering your ovaries”.

### Symptomatic women

78 of 1067 survey responses indicated that women felt that they had ovarian symptoms that day (7.3%). These symptoms ranged from abdominal distention, pelvic pain, loose stools, lower rib pain and extreme tiredness. All women with symptoms were given a leaflet to present to their GP with, which advised that the women had been seen by the health ambassadors as part of the campaign and were symptomatic. The women were encouraged to seek further testing from their GP.

Of the symptomatic women, 76% felt encouraged to see their GP following discussions onboard the mobile unit. Some explanations for not following up with a GP were the difficulty obtaining an appointment, or the fact they were already under GP care for their current symptoms.

### Social media statistics

Social media statistics throughout the 5-week campaign	
Total number of social media posts	29
Number of post clicks	1804
Number of people reached	100,307
Number of impressions	122,474
Number of video views	2,758

The table above is a summary of the social media results from the 5-week campaign. Regular updates were posted by the ICB media team onto the Lancashire & South Cumbria ICB Facebook page to update on the vans next locations and share photography each day of the location of the van on arrival. Media content was also shared with secondary care trusts, Healthwatch, local football clubs and via the Ovacome website. The campaign website was included in each post alongside the slogan #knowyourovaries.

## Lessons Learned

1. Partnership with a charity was key to this campaign. The insights and information received from Ovacome and their members was invaluable to the design of the van, printing of the resources and merchandise to support engagement with the public.
2. If this project was to be repeated or replicated for another tumour site, further thought is required on how best to capture feedback from the public. Surveys were filled in retrospectively by health ambassadors following conversations which could have contributed to some bias in responses. However, if presented with a survey to manually complete, this may have hindered the number of responses completed.
3. The use of social media was fundamental to raising awareness of the van’s locations. Several GP practices, community centres & charity partners re-shared posts. A local press release with a member of the public diagnosed with Ovarian cancer in our region was shared 280+ times on Facebook and attracted interest from radio stations, which promoted the remaining locations of the campaign.

## Recommendations for LSCCA

1. Further education on ovarian health to be provided to women at cervical screening appointments, so they are fully aware about what they are being screened for.
2. Further public awareness raising on misconceptions during Ovarian Cancer Awareness month in March 2026 & Gynaecological cancer awareness month in September 2026.
3. Resharing of campaign website with updated information & key messaging.
4. Engage with wider communities actively involving diverse groups such as minority ethnic communities and LGBTQ+ populations across LSCCA. Literature is available from Ovacome in easy read or several languages to support this.
5. Explore with secondary care how women can be better educated on their hysterectomy procedure and whether this includes the removal of their ovaries.

## Next steps for LSCCA

1. Training for practice nurses (provided by Ovacome) on the signs and symptoms of ovarian cancer so staff can have these conversations with women at their screening appointment.
2. Distribution of remaining leaflets from the campaign across health centres & GP surgeries.
3. Linking in with Macmillan information and support centres at each hospital site to distribute remaining literature during Ovarian cancer month.
4. Linking in with voluntary organisations supporting the needs of the BME community and providing ovarian symptom leaflets in Urdu, Gujarati and Punjabi.

## References

1. [LSC Integrated Care Board :: Know your ovaries](#)
2. [Ovarian cancer - Symptoms - NHS](#)
3. [Ovacome : information booklets](#)
4. [Ovarian Cancer Free Helpline | Ovacome UK](#)
5. [Ovacome | Know your ovaries](#)