Cancer Research UK
Cancer Awareness Measure (CAM)

Toolkit

(Version 4)

A toolkit to support the design and implementation of a Cancer Awareness Measure survey.

ACKNOWLEDGEMENTS

We would like to acknowledge the valuable contributions made to this guidance document for the Cancer Awareness Measure (CAM) by all those involved in developing the CAM+.

Toolkit Contents

This toolkit provides everything required to run your own version of CAM+, including guidance on adapting modules, and the coding frame. Users intending to run the survey should read Sections 1, 2 and 3 first.

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1.Terms of use for Cancer Research UK'S: Cancer Awareness Measure 'Plus'

Please find enclosed Cancer Research UK's Cancer Awareness Measure 'Plus' (CAM+), a validated survey instrument enabling you to gather information about awareness, attitudes and behaviours across key cancer prevention, screening and early diagnosis topics. Included is guidance for its use.

- Please ensure that your use of the CAM+ complies with our guidance notes.
- Please do not alter the CAM+ or any of the guidance supplied.
- Please ensure that the following notice is included on any copies or partial copies that you make of the CAM+ or any of the guidance supplied, and in any publication based wholly or partly on its use:

This survey instrument (CAM+) was revised by Cancer Research UK based on the original CAM developed and validated by Cancer Research UK, University College London, Kings College London, and University of Oxford in 2007-2008. The reassessment of psychometric properties was carried out by Cancer Research UK in partnership with the Centre for Health Services Studies at the University of Kent in 2023-2026.

- You may use the data collected for your own non-commercial purposes.
- We would like to see all CAM+ data lodged in one place, the UK Data Archive, via the UK data service, for ease of reference to researchers in the future. However, this is not mandatory.

If you have any queries, please contact cam@cancer.org.uk

2. Background information and instructions

2.1 Introduction and purpose of the Cancer Awareness Measure (CAM+)

The Cancer Awareness Measure (CAM) was developed in 2008 to address the lack of validated measures addressing general public cancer awareness. It was originally designed to be administered as an interview either face-to-face or over the telephone. Since 2014 the measure has been updated, modified and expanded in response to external changes and evidence gaps. Subsequent versions of the measure are referred to as CAM 'Plus' (CAM+), to recognise the additional questions and significant changes to the original survey instrument.

In 2019 the measure was re-designed to enable data to be collected online. In addition, the CAM+ underwent a revalidation process between 2023-2025 (see Revalidation: Evaluation and psychometric status section). The measure now collects information on a wider range of topics (see detailed list below), including help-seeking and re-presentation for potential cancer symptoms, and screening attitudes and behaviours.

In summary, CAM+:

- provides a revalidated set of questions on cancer awareness, attitudes and behaviours
- can be used in the UK nationally regionally and locally
- can be used to monitor or track how cancer awareness, attitudes and behaviours change over time
- allows comparisons between different groups in the population
- can be used to inform the development of behavioural interventions
- can be used to monitor the impact of interventions as part of an evaluation

2.2 Overview of CAM+

The CAM comprises 45 questions with a total of 274 items covering the following topics:

- **Awareness of Risk Factors**: 17 items over 2 questions (**QA1** open-ended questions about recall of risk factors and **QA2_1 to QA2_16** closed questions about recognition of risk factors)
- **Awareness of signs and symptoms**: 22 items over 2 questions (**QB1_1 to B1_18** closed questions about recognition of signs and symptoms and

QB2_1 to QB2_4 follow up to QB1_2 closed questions about recognition of persistent types of pain as symptom of cancer)

- **Health behaviours:** 10 items over 3 questions (**QC1** closed questions about smoking behaviour, **QC2** closed questions about drinking behaviour, **QC3_1 to QC3_8** closed questions about health behaviour change attempts)
- **Barriers and prompts to Help-Seeking:** 33 items over 5 questions (**D1** closed questions about help-seeking initiation, **D2_1 to D2_9** closed questions about prompts to help-seeking, **D3** open-ended questions prompts to help-seeking, **D4_1 to D4_21** closed questions about barriers to help-seeking, **D5** open-ended questions about barriers to help-seeking)
- **Health Services Attitudes**: 2 items over 2 questions (**E1_1** and **E1_2** closed questions about perceptions of NHS capacity)
- **Experience accessing healthcare from GP Surgery/Practice**: 6 items over 6 questions (**F1** closed questions about attempted contact, **F2** closed questions about making appointments, **F3** closed questions about number of attempts to make appointment, **F4** type of healthcare professional discussed with, **F5** closed questions about reasons for no appointment, **F6** closed questions about follow up actions after not getting an appointment)
- **Attitudes towards remote consultations**: 7 items from 2 questions (**G1** closed questions about remote care, **G2_1 to G2_5** closed questions about remote consultation qualities)
- **Help-Seeking for potential cancer symptoms**: 91 items from 6 questions (**H1** closed questions on symptoms experienced, **H2_1 to H2_18** closed questions about concern for symptoms experienced, **H3_1 to H3_18** closed questions about opinion of cause of symptoms, **H4_1 to H4_18** closed questions about follow-up actions, **H5_1 to H5_18** closed questions about time interval before help-seeking, **H6_1 to H6_18** closed questions about time interval before discussion)
- **Re-presentation for Potential Cancer Symptoms**: 2 items from 2 questions (**I1** closed questions about continued experience of symptoms, **I2** interval before re-contacting health care)
- **Enablers for Hospital Tests**: 19 items from 2 questions (**J1_1 to J1_18** closed questions about enablers for hospital tests, **J2** open-ended questions about enablers for hospital tests)
- **Cervical screening**: 22 items from 4 questions (**K1** closed questions about time of last screen, **K2** closed questions about intention to attend next screen, **K3_1 to K3_19** closed questions about barriers to cervical screening[a], **K4** open-ended questions about barriers to cervical screening).
- **Bowel screening**: 17 items from 4 questions (**L1** closed questions about time of last test, **L2** closed questions about intention to complete next test, **L3_1 to**

[a] See coding frame cervical screening section for K3 November 2026 update.

L3_14 closed questions about barriers to bowel screening, **L4** open-ended question barriers to bowel screening)

- **Breast screening**: 25 items from 5 questions (**M1** closed questions about eligibility for breast screening, **M2** closed questions about time of last screen, **M3** intention to attend next breast screening, **M4_1 to M4_21** closed questions about barriers to breast screening[b], **M5** open-ended questions about barriers to breast screening)
- **Closeness to cancer:** 1 item from 1 question (**N1** closed questions about who experienced cancer)

2.3 CAM+ 2024 Revalidation: Evaluation and psychometric status

The CAM+ builds on the existing CAM measure, which already possessed good psychometric properties[c]. However, due to over 15 years of applications, adaptations and modifications, the measure underwent an extensive programme of revalidation in 2023-25. The revalidation work was carried out in partnership with the Centre for Health Services Studies at the University of Kent and involved four phases of work to determine: Face Validity; Content Validity; Construct Validity; Internal Consistency, Reliability and Responsiveness. The work indicates that the measure is showing good psychometric properties in several of the above-mentioned areas. The protocol and results of all phases of this validation programme of work will be published in due course and references will be added here as soon as available. No changes will be made to the CAM+ within the next 5 years.

2.4 CAM + 2024: Administration

All the resources included in this toolkit assume that the measure will be administered online.

The CAM+ is now recommended for use as an online survey. This is due to its length and the complexity of filters and skip logics, which are more easily implemented in digital formats. Although an interview, either face-to-face or over the telephone, is still a very good way of collecting CAM+ data, the recommendation is that the researcher or the participant has access to a digital platform for viewing questions and entering responses. Online methods will yield the best quality data but this needs to be balanced against costs and

[b] See coding frame breast screening section for M4 November 2026 update,

[c] Stubbings S, Robb K, Waller J, Ramirez A, Austoker J, Macleod U, Hiom S, Wardle J. Development of a measurement tool to assess public awareness of cancer. Br J Cancer. 2009 Dec 3;101 Suppl 2(Suppl 2):S13-7. doi: 10.1038/sj.bjc.6605385. PMID: 19956157; PMCID: PMC2790699.

accessibility issues. Potential bias caused by the presence of a researcher whilst completing the survey should also be considered. A pen and paper version of the CAM+ has not been validated (including whether participants are able to follow the lengthy and complex skip logic without digital support) and is therefore not recommended. In addition, the survey would also be very long to print and distribute via post or any other means.

There are several limitations to running an online survey that you should be aware of. Firstly, Ofcom's 2024 Technology Tracker found that 5% of the UK population aged 16+ does not have access to the internet at home. Access rates were lower in older groups and those from lower social grade groups. An online CAM+ survey is therefore unlikely to fully represent these groups, or others with low digital literacy, even if they do have access to the internet. Conducting the survey online is also a 'less controlled' environment, for example, it is possible that participants could look up the correct answers while completing the survey or consult with others to help them answer the questions. Given the topic of the survey and that it is only available in English, those with low health literacy and non-proficient English may also struggle to complete it. In addition, when using the CAM+ in an online survey you should ensure that participants cannot return to previous questions. Consideration may also be given to monitoring completion time, as unusually rapid or prolonged responses may indicate reduced data reliability.

2.5 Ethical approvals

Before you start recruiting your sample, please consider whether you need to obtain ethical approval, this is usually stipulated by the organisation that is organising/funding the research. Further guidance is available from the NHS Health Research Authority: *What approvals and decisions do I need?* https://www.hra.nhs.uk/approvals-amendments/what-approvals-do-i-need/. Regardless of the type of research you are carrying out, it is always appropriate to consider the ethical implications, this includes informed consent and data protection.

2.6 Informed consent

It is important that you gain consent from the people that you ask to complete the CAM+. Please see the UK Data Archive website for more information on consent procedures: Informed consent for data sharing and reuse. It is important that you ensure participants are provided with sufficient information to decide whether to take part in your research. As such, you will need to provide participants with Participant Information Sheets and Informed Consent Forms.

The Health Research Authority provides guidance on the development of these documents https://www.hra-decisiontools.org.uk/consent/examples.html. This includes ensuring that participants are given clear information about how their data will be processed and managed, in line with relevant data protection requirements.

2.7 Data protection

Please make sure that your consent and data management procedures are in line with the UK GDPR Data protection Act 2018. For more information see: UK GDPR guidance and resources | ICO

2.8 Coding data and uploading data to the UK Data Service

Instructions are provided about how to code CAM survey data (see CAM+ Coding Frame' in Appendix 1). As mentioned in 'Terms of Use', all CAM data will ideally need to be deposited with the UK Data Service, which is operated by the UK Data Archive, using the coding frame that has been provided. For instructions about how to access or upload data see the UK Data Service information and instructions here: https://ukdataservice.ac.uk/deposit-data/. However this is not mandatory.

2.9 Ensuring quality

Whether you plan to carry out the survey using volunteers or by commissioning an external agency you should ensure that the research is good quality. The Social Research Association (SRA) and the MRS provide professional standards and guidelines about best practice across all aspects of carrying out research;

SRA: Good Practice MRS Professional Standards | Market Research Society

3. Flexibility in using the CAM+

The CAM+ includes 45 questions (excluding demographic questions) and takes on average 20 minutes to complete. Some researchers will need to shorten the CAM, prioritising some of the questions over others and may want to ask additional questions of their own. This section outlines how this can be possible while retaining the validity and reliability of the CAM+ questions.

3.1 CAM+ modules

It is possible to remove individual questions from the survey. However, some questions should be kept depending on what other questions are asked. Specifically, all open ended 'other' questions should be kept if their

accompanying closed questions are kept. For example, question D3 should be kept if D2 is asked. This applies to questions D3, D5, J2, K2, L4, and M5. Removing these open-ended questions could reduce the reliability and validity of the measure. Further, many questions are only asked depending on responses to previous questions. Therefore, if you choose to keep some questions it may necessitate that other questions are kept or removed depending on the routing for that, and preceding and subsequent, questions. It is extremely important not to remove items from individual questions, as this could result in reduced reliability or validity of the measure.

Some examples to illustrate this:

- Do not remove any barrier items from question D4 or similar
- Removal of I1 would necessitate the removal of I2
- H6 could be removed without necessitating the removal of any other questions as it is the last follow-up question in this section

3.2 Ordering of CAM questions

It is possible to change the order of the CAM modules, for example, you can ask about knowledge of NHS screening programmes first and attitudes towards remote consultations last.

There is one exception to this; closed or prompted questions such as A2: *'Which of the following, if any, do you think could increase a person's chance of developing cancer? You may have already mentioned some of these in the last question'*, should always be asked after open or unprompted questions such as A1: '*What things do you think could increase a person's chance of developing cancer? Please list as many things you can think of in the boxes below'*.

This is because the closed/prompted questions essentially provide the answers to the open/unprompted questions. Taking this into account, it is possible to ask the CAM modules in any order you like. It is also possible to change the ordering of items within modules. You may wish to counterbalance or rotate the order to see if this has any effect on people's responses. You can also ask additional questions alongside the CAM questions. For example, if you're using the CAM to assess the impact of an intervention you will want to ask some more specific questions about the intervention itself. In doing so, you should consider how these questions could affect the respondent's response to the CAM. For example, you should avoid asking questions that could increase the participant's knowledge about cancer.

3.3 Demographic questions

Demographic information (e.g. age, ethnicity) is not currently included on the CAM+ survey. However, this information is required to enable comparisons between different population groups (for example, by age). We have outlined the essential demographic items below, which must be included in the survey. Additional demographic questions are optional and can be added as required.

Essential demographic items:

- Age
- Sex
- Gender
- Ethnicity
- Experience of cancer
- At least one indicator of deprivation[d], e.g. education, employment, living arrangement, car/van ownership, postcode

Please note that essential questions on sex and gender are included in the CAM+ Coding Frame in Appendix 1 (S1 and S2), prior to the screening questions.

[d] We advise using an individual level of deprivation such as education or employment AND an area-level indicator of deprivation such as postcode.

Appendices

Appendix 1: Cancer Research UKs Cancer Awareness measure (CAM+) Coding Frame

CAM+ Coding frame

The following section contains the full CAM+ Coding frame[e] question set with routing logic. This is the version to use when scripting your survey. This coding frame is for use with SPSS or Excel. All CAM+ data uploaded into the UK Data service should use this coding.

Cancer Awareness Measure 'Plus' (CAM+) 2024: Coding frame

Awareness of Risk Factors

SHOW: ALL

First, we would like to ask a few questions about your awareness of cancer. Please note: this is not a test. We just want to understand your current awareness or beliefs about this disease.

ASK: ALL

[A1] What things do you think could increase a person's chance of developing cancer? Please list as many things you can think of in the boxes below. There is no minimum or maximum number of answers you should give.

Please type one answer in each box. Answers should be short and only use a few words.

1	Open text box
2	Open text box
3	Open text box
4	Open text box

[e] Please note: This toolkit coding frame uses consecutive question numbering for clarity, which differs from CAM+ 2024. Question content otherwise matches CAM+ 2024, even where numbering differs - you should use this coding frame when delivering your own CAM.

5	Open text box
6	Open text box
7	Open text box
8	Open text box
9	Open text box
10	Open text box
11	Open text box
12	Open text box
13	Don't know/not sure
14	Prefer not to say

ASK: ALL

[A2] Which of the following, if any, do you think could increase a person's chance of developing cancer?

You may have already mentioned some of these in the last question.

Please select one answer for each option.

Show in randomised order

1	Feeling stressed
2	Smoking
3	Being overweight
4	Being obese
5	Having a close relative with cancer
6	Drinking alcohol
7	Not doing enough physical activity
8	Too much exposure to the sun
9	Eating processed meat (e.g. bacon, ham, hot dogs)
10	Exposure to another person's smoking
11	Being older
12	Infection with HPV (HPV - a type of virus that infects the skin and cells lining the inside of the body e.g. mouth, throat or genitals)
13	Not eating enough fibre from wholegrain foods (e.g. brown rice, whole wheat pasta, oats and wholegrain bread)
14	Using e-cigarettes/vaping

15	Eating ultra-processed foods (foods that are produced using ingredients you wouldn't find in your kitchen, such as artificial flavours, colouring, and preservatives e.g. ready meals, frozen pizza, confectionary, pre-packaged cakes and biscuits)
16	Air pollution

Response options:

1	Yes, I think this could increase a person's chance of developing cancer
2	No, I don't think this could increase a person's chance of developing cancer
3	Don't know / not sure
4	Prefer not to say

SHOW: ALL

Please note: stress and eating ultra-processed foods do not cause cancer, but eating lots of ultra-processed foods can make it harder to maintain a healthy weight. Overweight and obesity is the second most common cause of cancer in the UK.

For some people, being stressed can make it harder to be healthy, and they may drink more alcohol or exercise less. While these unhealthy habits increase the risk of cancer, the stress itself does not.

E-cigarettes are far less harmful than smoking and can help people who smoke to stop. There is currently no good evidence that e-cigarettes cause cancer, but e-cigarettes are not risk-free. We don't yet know their long-term effects. Children and people who have never smoked shouldn't use them.

Every other risk factor listed in the previous question could increase a person's chance of developing cancer.

The list does not include all risk factors of developing cancer.

Awareness of signs and symptoms

ASK: ALL

[B1] Which of the following, if any, do you think could be potential signs or symptoms of cancer?

Note: a "persistent" symptom is a symptom that doesn't go away or keeps coming back

Please select one answer for each symptom.

Show in randomised order

1	An unexplained lump or swelling
2	A persistent unexplained pain
3	Unexplained bleeding between periods, after sex or after the menopause
4	A persistent cough
5	A change in bowel habits (e.g. needing to poo more often or constipation, looser or firmer poos)
6	A change in bladder habits (e.g. needing to wee more often)
7	A persistent difficulty swallowing
8	A change in the appearance of a mole (e.g. change in size, shape or colour, becoming crusty, itchy, painful, bleeding or oozing)
9	A sore that does not heal
10	Losing weight without trying to
11	Persistent hoarseness (e.g. voice sounding raspy, strained, or breathy)
12	Coughing up blood
13	Breathlessness
14	Feeling tired all the time for no clear reason
15	An ulcer in the mouth that doesn't heal
16	Red or white patches in your mouth
17	Not feeling as hungry as usual
18	Blood in poo or pee

Response options:

1	Yes, I think this could be a sign of cancer
2	No, I don't think this could be a sign of cancer
3	Don't know/ not sure
4	Prefer not to say

ASK: THOSE WHO SELECT CODE 1 FOR 'PERSISTENT UNEXPLAINED PAIN' IN B1 (B1_2=1)

[B2] Which of the following, if any, do you think could be potential signs or symptoms of cancer?

Note: a "persistent" symptom is a symptom that doesn't go away or keeps coming back

Please select one answer for each symptom.

Show in randomised order

1	Persistent tummy pain
2	Persistent chest pain
3	Persistent back pain
4	Persistent bone pain

Response options:

1	Yes, I think this could be a sign of cancer
2	No, I don't think this could be a sign of cancer
3	Don't know/ not sure
4	Prefer not to say

Health Behaviours

SHOW: ALL
Next, we would like to ask a few questions about your day-to-day life.

ASK: ALL
[C1] Which of the following best applies to you?

Please note we are referring to cigarettes (including hand-rolled) and other kinds of tobacco that you inhale and NOT electronic/e-cigarettes.

Please select one answer.

1	I smoke cigarettes every day
2	I smoke cigarettes, but not every day
3	I do not smoke cigarettes at all, but I do smoke tobacco of some kind (e.g. Pipe, cigar or shisha)
4	I used to smoke cigarettes, but I stopped smoking completely in the last year
5	I used to smoke cigarettes, but I stopped smoking completely more than a year ago
6	I have never been a smoker (i.e. smoked less than 100 cigarettes in your lifetime)
7	Don't know/not sure
8	Prefer not to say

ASK: ALL

[C2] Thinking about last week, how many units of alcohol did you drink in total?
The picture below shows you how many units are in different drinks.



Please select one answer.

Drop down box (Select one… 1. 0, 2. 1, 3. 2, 4. 3, 5. 4, 6. 5 etc up to 100, 102. Prefer not to say, 103. Don't know/not sure)

ASK: ALL

[C3] Are you currently trying to do any of the following?

Please select one answer for each statement.

Randomise statement order

	[1] Yes	[2] No	[3] Maybe	[4] Prefer not to say	[5] This is not applicable to me
1. Reduce how much you smoke [ONLY SHOW TO THOSE WHO CODED 1-3 AT C1]					
2. Stop smoking completely [ONLY SHOW TO THOSE WHO CODED 1-3 AT C1]					
3. Lose weight					
4. Reduce your exposure to the sun (e.g. using shade, clothing, or sunscreen)					

5. Drink less alcohol					
6. Eat more wholegrain foods (e.g. brown rice, whole wheat pasta, oats and wholegrain bread)					
7. Eat less processed meat (e.g. bacon, ham, corned beef, chorizo, hot dogs)					
8. Increase how much physical activity you do					

Barriers and Prompts to Help-Seeking

SHOW: ALL

We would now like to ask a few questions about the last time you discussed a symptom or health concern with a healthcare professional.

ASK: ALL

[D1] Have you discussed a symptom or health concern with a healthcare professional in the last 12 months?

This may have been with ***any*** healthcare professional (e.g. a doctor, nurse or pharmacist). This may have taken place in person or remotely (e.g. online, over the phone).

1	Yes
2	No
3	I don't remember
4	Prefer not to say

ASK: ALL WHO HAVE DISCUSSED A SYMPTOM/HEALTH CONCERN WITH HCP (D1 = 1)

[D2] Think back to the last time you discussed a symptom or health concern you had with a healthcare professional. This may have been with ***any*** healthcare professional (e.g. a doctor, nurse or pharmacist). This may have taken place in person or remotely (e.g. online, over the phone).

We want to understand what played a role in your decision to discuss your symptom or health concern with a healthcare professional.

How much, if at all, did the following play a role in your decision?

Please select one answer for each statement.

Randomise statement order

1	I had a symptom that I thought might be a sign of cancer
2	I had a symptom that was unusual for me, or I had a feeling that something wasn't right
3	I had a symptom that was painful or "bothersome"
4	I had a symptom that didn't go away or was getting worse
5	My friends, family or my carer encouraged me to go
6	I had a symptom, but I didn't know what was causing it
7	I looked up my symptom online and it said it might be serious
8	I tried treating or managing the symptom myself but it didn't help
9	I was attending an appointment for an existing problem/condition, so I asked about this symptom whilst I was there

Response options:

1	A lot
2	A little
3	Not much
4	Not at all
5	Don't know/not sure
6	Prefer not to say

ASK: ALL WHO HAVE DISCUSSED A SYMPTOM/HEALTH CONCERN WITH HCP (D1 = 1)

[D3] Did anything else not listed in the previous question play a role in your decision to discuss a symptom or health concern you had with a healthcare professional?

Please type your answer below.

1	Open text box
2	Open text box
3	Open text box
4	Open text box
5	Open text box
6	Nothing
7	Prefer not to say

ASK: ALL

[D4] Think back to the last time you thought about discussing a symptom or health concern you had with a healthcare professional. We want to understand what made you delay or put you off going.

How much, if at all, did the following make you delay or put you off going?

Please select one answer for each statement.

Randomise statement order

1	I found it embarrassing talking about my symptoms
2	I worried about wasting the healthcare professional's time
3	I found it difficult to get an appointment with a particular healthcare professional
4	I thought it would be difficult to get an appointment
5	I was too busy to make time to seek medical attention
6	I had too many other things to worry about
7	I worried about what they might find wrong with me
8	I didn't feel confident talking about my symptom(s)
9	I worried they wouldn't take my symptom(s) seriously
10	I didn't want to be seen as someone who makes a fuss
11	I didn't want to talk to a receptionist/administrative person about my symptom(s)
12	I worried about putting extra strain on the NHS / health services
13	I didn't want to be given a remote appointment. For example, a phone call or video call.
14	I could not afford the costs related to having an appointment. For example, transport, childcare, reduced pay/earnings.
15	I found it difficult to get an appointment
16	I thought the symptom was related to an existing illness, condition or life change. For example, getting older or menopause.
17	I thought my symptom was unlikely to be anything serious
18	I worried that I would find being at the appointment physically uncomfortable or difficult. For example, because of mobility problems, bowel issues, or other issues.
19	It would have been too difficult to go to the appointment. For example, because of mobility problems, bowel issues, or other issues.
20	I decided I could manage the symptom(s) myself
21	I worried about speaking to the healthcare professional. For example, because English is not my first language, or I have a disability or condition that makes it hard to talk.

Response options:

1	A lot
2	A little
3	Not much
4	Not at all
5	Don't know/not sure
6	Prefer not to say

ASK: ALL

[D5] Did anything else not listed in the previous question make you delay or put you off discussing a symptom or health concern you had with a healthcare professional?

Please type your answer below.

1	Open text box
2	Open text box
3	Open text box
4	Open text box
5	Open text box
6	Nothing
7	Prefer not to say

Health Services Attitudes

ASK: ALL

[E1] How much do you agree or disagree with the following statements?

Please select one answer for each statement.

Randomise order shown

1	I don't think the health service (NHS) has enough staff or equipment to ***see*** all the people with cancer that need to be ***diagnosed***
2	I don't think the health service (NHS) has enough staff or equipment to ***treat*** all the people with cancer that need to be ***treated***

Response options:

1	Strongly agree

2	Tend to agree
3	Tend to disagree
4	Strongly disagree
5	Don't know/not sure
6	Prefer not to say

Experience Accessing Healthcare from GP Surgery/Practice

ASK: ALL

[F1] In the last 12 months, have you tried to contact your GP surgery/practice about any symptoms or health concerns that you had?

Please select one answer.

1	Yes
2	No
3	I don't remember
4	Prefer not to say

ASK: IF SELECTED 1 AT F1 (F1=1)

[F2] Were you able to make an appointment?

Please select one answer.

1	Yes
2	No
3	I don't remember
4	Prefer not to say

ASK: IF SELECTED 1, 2 AT F2 (F2 = 1 or 2)

[F3] How many times did you contact the GP surgery/practice to make an appointment?

Please select one answer.

1	Once
2	2-3 times
3	4-5 times

4	More than five times
5	I don't remember
6	Prefer not to say

ASK: IF SELECTED 1 AT F2 (F2=1)

[F4] Which healthcare professional did you discuss your symptom or health concern with at your GP surgery/practice?

Please select one answer.

Randomise order

1	GP or doctor
2	Physician associate
3	Nurse or advanced nurse practitioner
4	General practice pharmacist
5	General practice paramedic
6	General practice physiotherapist
7	Healthcare assistant
8	General practice dietician
9	Someone else (please specify) (fixed)
10	Don't know/not sure (fixed)
11	Prefer not to say (fixed)

ASK: IF SELECTED 2 at F2 (F2=2)

[F5] You said that you tried to contact your GP surgery/practice in the last 12 months but were unable to make an appointment. Which of the following BEST describes why you were unable to make an appointment?

Please select only one answer

Randomise order

1	I could not get through to my GP surgery/practice on the phone (for example, the line was busy, queue was too long, I was disconnected/cut-off, etc)
2	I requested a call back when I reached the front of the telephone queue but wasn't called back
3	I didn't get a response from the GP surgery/practice after completing the online request form
4	There were no appointments available

5	I could not get an appointment at a convenient day or time
6	Other (please specify) (fixed)
7	I don't remember (fixed)
8	Prefer not to say (fixed)

ASK: IF SELECTED 2 AT F2 (F2=2)

[F6] You said that you tried to contact your GP surgery/practice in the last 12 months but were unable to make an appointment. Which of the following, if any, did you do next?

Please select all that apply.

Randomise statement order

1	I went to a community pharmacy (e.g. pharmacy on local high streets and in supermarkets)
2	I called NHS 111 (NHS24 in Scotland – use pipe text to show this to people in Scotland)
3	I went to A&E
4	I spoke to a family member or friend about my health concern
5	I looked for information about my health concern online
6	I went to a walk-in service (e.g. medical services available in GP practices, hospitals, walk-in centres without an appointment)
7	I looked for information using a phone app (e.g. NHS app)
8	I visited a mobile unit (i.e., a small medical van or trailer which can be moved to provide medical care or testing in different areas)
9	I went for private healthcare
10	I called 999
11	Nothing – I took no further action (fixed)
12	Other (please specify) (fixed)
13	I don't remember (fixed)
14	Prefer not to say (fixed)

Attitudes towards remote consultations

SHOW: ALL

The following questions are about remote consultations with a healthcare professional. Remote consultations include consultations that happened over the phone, by video call or online messaging.

ASK: ALL

[G1] In the last 12 months, did you receive care from a healthcare professional remotely?

Please select all that apply.

Randomise order

1	Yes, by phone call (you could hear each other only)
2	Yes, by video call (you could hear and see each other)
3	Yes, using online messaging. (e.g. by online form, email, smartphone App, text/WhatsApp)
4	Yes, in another way (please specify) (fixed)
5	No (fixed)
6	I don't remember (fixed)
7	Prefer not to say (fixed)

ASK: IF SELECTED ANY OF 1-4 AT G1 (G1= 1 or 2 or 3 or 4)

[G2] You said that you have received care from a healthcare professional remotely in the last 12 months. How much do you agree or disagree with the following statements? If you have been to multiple remote appointments in the last 12 months, please think about the most recent one.

Please select one answer for each statement.

Randomise statement order

1	I felt comfortable discussing my health concern through a remote consultation
2	The remote consultation allowed my concerns to be adequately addressed
3	The remote consultation was not helpful because I needed to see the doctor in person anyway
4	The remote consultation made discussing my health concern with a healthcare professional **easier**
5	The remote consultation made discussing my health concern with a healthcare professional **quicker**

Response options:

1	Strongly agree

2	Tend to agree
3	Tend to disagree
4	Strongly disagree
5	Don't know/not sure
6	Prefer not to say

Help-Seeking for Potential Cancer Symptoms

SHOW: ALL

The following questions are about your experience of health symptoms in the last 12 months.

ASK: ALL

[H1] Which of the following health symptoms, if any, have you experienced in the last 12 months?

Note: a "persistent" symptom is a symptom that doesn't go away or keeps coming back

Please select all that apply.

Randomise order

1	Losing weight without trying to
2	An unexplained lump or swelling
3	A change in the appearance of a mole (e.g. change in size, shape or colour, becoming crusty, itchy, painful, bleeding or oozing)
4	A change in bowel habits (e.g. needing to poo more often or constipation, looser or firmer poos)
5	A change in bladder habits (e.g. needing to wee more often)
6	A **persistent** unexplained pain
7	A **persistent** difficulty swallowing
8	A **persistent** cough
9	Unexplained bleeding between periods, after sex or after the menopause
10	A sore that does not heal
11	**Persistent** hoarseness (e.g. voice sounding raspy, strained or breathy)
12	Coughing up blood
13	Feeling tired all the time for no clear reason
14	Breathlessness

15	An ulcer in the mouth that doesn't heal
16	Red or white patches in your mouth
17	Not feeling as hungry as usual
18	Blood in poo or pee
19	None of the above (fixed)
20	Prefer not to say (fixed)

Please Note: attention needs to be given to the routing instructions for the following questions. For each of the 18 symptoms that a respondent might have chosen in H1, they get asked follow-up questions through H2 (concern), H3 (cause), H4 (what did next), H5 (length of wait before contacting GP) and possibly H6 (length of wait before able to talk to GP if H5 other than 1). Section H therefore generates 541 columns in the output file. Instructions below require repeating the scripting of questions H2 to H6 for each of the 18 symptoms replacing the wording **INSERT SYMPTOM** with a different symptom every time.

SHOW/ASK: ALL WHO EXPERIENCED EACH SYMPTOM IN H1 – I.E. SELECTED 1/YES FOR 1-18 IN H1

You said that you have experienced ****INSERT SYMPTOM**** in the last 12 months. We would now like to ask you a few more questions about this.

[H2] How concerned have you been that this symptom might be serious?

Please select one answer.

1	Not at all
2	A little bit
3	Moderately
4	Quite a bit
5	Extremely
6	Don't know/not sure
7	Prefer not to say

ASK: ALL WHO EXPERIENCED EACH SYMPTOM IN H1 – I.E. SELECTED 1/YES FOR 1-18 IN H1

[H3] What do you think caused this symptom?

Please note, we want to know what ***you*** think caused the symptom, not what a healthcare professional said caused the symptom.

Please select all that apply.

Randomise statement order

1	A NEW physical health problem (for example, a new condition such as a new infection, heart problem or allergic reaction)
2	An EXISTING physical health problem that you already know you have (for example, a symptom of having diabetes or high blood pressure)
3	Medication or vaccination side effects (for example, a side effect of medication for high blood pressure or diabetes, or a side effect of vaccination)
4	Mental health problem (for example, depression, stress or anxiety)
5	External and lifestyle factors (for example, weather changes, lack of sleep, getting older, changes in diet and exercise)
6	Cancer (for example, possible symptom of cancer or cancer diagnosis)
7	Other (please specify)
8	Don't know/not sure
9	Prefer not to say

You said that you have experienced ****INSERT SYMPTOM**** in the last 12 months. We would now like to ask you a few more questions about this.

ASK: ALL WHO EXPERIENCED EACH SYMPTOM IN H1 – I.E. SELECTED 1/YES FOR 1-18 IN H1.
[H4] Which of the following, if any, did you do after noticing the symptom?

Please select all that apply.

1 and 2 should be shown together, but randomised alongside the rest of the list

1	I successfully contacted my GP surgery/practice to discuss the symptom
2	I tried to contact my GP surgery/practice, but was not able to discuss the symptom with anyone
3	I spoke to my community pharmacist about the symptom (e.g. pharmacy on a local high street or in a supermarket)
4	I called NHS 111 (NHS24 in Scotland – use pipe text to show this to people in Scotland) for advice about the symptom
5	I went to A&E about the symptom
6	I called 999
7	I went to a walk-in service about the symptom (e.g. medical services available in GP practices, hospitals, walk-in centres without an appointment)

8	I visited a mobile unit about the symptom (e.g. a small medical van or trailer which can be moved to provide medical care or testing in different areas)
9	I went for private healthcare about the symptom
10	I did not contact a healthcare professional about the symptom (fixed)
11	Other (please specify) (fixed)
12	I don't remember (fixed)
13	Prefer not to say (fixed)

ASK: ALL WHO EXPERIENCED EACH SYMPTOM IN H1 – I.E. SELECTED 1/YES FOR 1-18 IN H1.
[H5] How long after you first noticed the symptom did you contact your GP surgery/practice?

This includes if you called or tried to call the surgery/practice, or if you completed an online/e-consultation form to request an appointment.

Please select one answer.

1	Did not contact my GP surgery/practice
2	Up to 1 week
3	More than 1 week, but up to 2 weeks
4	More than 2 weeks, but up to 1 month
5	More than 1 month, but up to 6 months
6	More than 6 months, but up to 1 year
7	I don't remember
8	Prefer not to say

ASK: IF SELECTED 2-6 AT H5
[H6] How long after first contacting your GP surgery/practice did you then discuss the symptom with a healthcare professional?

This includes if a healthcare professional called to speak to you, even if you didn't make an official appointment. If you had an appointment, this includes whether this took place in person or remotely. A remote appointment may have been over the phone, by video call or online messaging.

Please select one answer.

1	On the same day
2	On the next day

3	Between 2 days, and up to 2 weeks later
4	More than 2 weeks, but up to 1 month later
5	More than 1 month later
6	I don't remember
7	Prefer not to say

****Please note:** Attention needs to be given to the routing instructions for the following questions. For each of the 18 symptoms that a respondent might have chosen in H1, if they have proceeded to answer 1 to 5 to question H6 (length of wait before able to talk to GP if H5 other than 1) they then get asked 2 follow up questions I1 (symptom continuation) and possibly I2 (wait before re-presentation). Section I therefore generates 54 columns in the output file. Instructions below require repeating the scripting of questions I1 and I2 for each of the 18 symptoms of H1, replacing the wording **INSERT SYMPTOM** with a different symptom every time.

Re-presentation for Potential Cancer Symptoms

SHOW: IF SELECTED 1-5 AT H6

You said that you have experienced ****INSERT SYMPTOM**** in the last 12 months. You also said that you have discussed this symptom with a healthcare professional at your GP surgery/practice. We would now like to ask you a few more questions about this.

ASK: IF SELECTED 1-5 AT H6

[I1] Did you continue to experience the symptom after you discussed it with a healthcare professional from your GP surgery/practice?

Please select one answer.

Randomise order within 'no' and 'yes' groups and randomise the order in which the 'yes' and 'no' groups are shown.

1	Yes, I continued to experience the symptom and it was the same as before
2	Yes, I continued to experience the symptom, but it got better
3	Yes, I continued to experience the symptom and it got worse
4	No, the symptom went away by itself
5	No, the symptom went away after taking medication (this could be medication given to you by a healthcare professional or medication you bought over-the-counter)
6	Other (Please specify) (fixed)
7	Prefer not to say (fixed)

ASK: IF SELECTED 1-3 AT I1

[I2] After how long did you contact your GP surgery/practice again about the symptom?

Please select one answer.

1	Did not contact my GP surgery/practice again
2	Up to 1 week later
3	More than 1 week, but up to 2 weeks later
4	More than 2 weeks, but up to 1 month later
5	More than 1 month, but up to 6 months later
6	More than 6 months, but up to 1 year later
7	I don't remember
8	Prefer not to say

Enablers for Hospital Tests

SHOW: ALL

The following questions are about going to hospital for tests.

ASK: ALL

[J1] Imagine that a healthcare professional asked you to go for a test at a hospital. We want to understand what would make you more likely to go for the test.

How much, if at all, would the following make you more likely to go for a test at a hospital?

Please select one answer for each statement.

Randomise statement order

1	If I could choose or change the day/time of the test
2	If I was given a specific day/time to go for the test
3	If I was given more notice of the appointment so I could make sure I was available to go
4	If it was easier to take time off work to go for the test
5	If it was easier to get to and from the hospital (e.g. accessible by public transport or free parking)
6	If I could choose for the test to be done by someone of a specific gender
7	If I could take someone with me
8	If I could get cover for my childcare or caring responsibilities
9	If I was given information about what the test involved
10	If I received reminders about my appointment so I don't forget (e.g. by text or email)
11	If I thought the test was important

12	If I could ask questions about the test and discuss my options with someone
13	If there were processes in place to reduce the spread of infections or illnesses
14	If I could ask for an interpreter to be there
15	If my family, friends, or community/faith leaders encouraged me to go
16	If I knew that my access needs would be accommodated (e.g. having accessible toilets)
17	If I could afford the costs related to having an appointment (e.g. transport, childcare, or reduced earnings)
18	If I knew how much privacy I would have and if I could cover up

Response options:

1	A lot
2	A little
3	Not much
4	Not at all
5	Don't know/not sure
6	Prefer not to say

ASK: ALL

[J2] Would anything else not listed in the previous question make you more likely to go for a test at a hospital?

Please type your answer below.

1	Open text box
2	Open text box
3	Open text box
4	Open text box
5	Open text box
6	Nothing
7	Prefer not to say

ASK: All

[S1] What is your sex?

A later question gives the option to tell us if your gender is different from your sex registered at birth, and, if different, to record your gender. We are asking this question because certain cancers, and some other health matters covered in this survey, are affected by your sex.

<1> Male
<2> Female
<3> Prefer not to say

ASK: All
[S2] Is your gender the same as the sex you were registered at birth?
<1> Yes
<2> No [S2_other] {open prompt="please write in gender"}
<3> Prefer not to say

****Note: age filters applied in the following questions are aligned with UK screening programmes. In other countries, you might need to align age filters to match local screening eligibility criteria.**

Cervical Screening

SHOW: FEMALE (AT BIRTH) 25+ YEARS OLD
The next questions are about cervical screening. Cervical screening is offered to all women and people with a cervix. It is also available to transgender men and non-binary people who have not had their womb and cervix removed. Cervical screening is offered to people aged 25 to 64 in the UK every 3-5 years.

During the appointment, a nurse uses a plastic instrument called a speculum to open the vagina to allow them to see the cervix. Using a soft brush, some samples of cells are taken from the surface of the cervix and are put into a pot of liquid and sent for testing.

ASK: FEMALE (AT BIRTH) 25+ YEARS OLD
[K1] When was the last time you had a cervical screening test?

Please select one answer.

1	Within the last 3 years
2	Within the last 3-5 years
3	More than 5 years ago
4	I have never been invited to have a test
5	I have been invited but have never had a test
6	I don't remember
7	Prefer not to say

ASK: FEMALE (AT BIRTH) 25+ YEARS OLD
[K2] Will you go for cervical screening next time you are invited?

Please select one answer.

1	Yes, definitely
2	Yes, probably
3	No, probably not
4	No, definitely not
5	I'm not eligible to be invited in the future
6	Don't know/Not sure
7	Prefer not to say

ASK: IF SELECTED 1-3 or 5 or 6 AT QUESTION K1
NOTE: DO NOT SHOW ITEM K3_10 (*'I have found cervical screening painful when I have been before') TO* RESPONDENTS SELECTING K1 = 5 *("I have been invited but have never had a test"), AS THIS ITEM REQUIRES PREVIOUS EXPERIENCE OF CERVICAL SCREENING. SEE FOOTNOTE[f] FOR FURTHER EXPLANATION.

[K3] Think back to the last time you were invited for cervical screening. We want to understand what may have put you off going, whether you went or not in the end.

How much, if at all, did the following put you off going?

Please select one answer for each statement.

Randomise statement order

1	I was worried that cervical screening might be painful
2	I didn't have any symptoms of cervical cancer
3	I had other more important things to worry about than cervical screening
4	I was too busy to go for cervical screening

[f] Note: In the 2026 CAM+ survey, participants who answer K1_5 (*'I have been invited but have never had a test'*) are not shown K3_10 (*'I have found cervical screening painful when I have been before'*), as this item relates to previous cervical screening experience and is therefore unlikely to be relevant to those who report never having attended cervical screening. In addition, few respondents who had never attended cervical screening selected this barrier in the CAM+ 2024 survey. This change was implemented in November 2026. All remaining cervical screening barrier items should still be asked of those who selected K1_5.

If your survey scripting platform does not allow K3_10 to be hidden from respondents who select K1_5, the barrier questions can be asked as currently presented in K3. However, not showing K3_10 to respondents who select K1_5 remains the preferred approach. Where this is not technically possible, responses to K3_10 from respondents who have never attended cervical screening can be disregarded from analysis, as these responses are not directly interpretable.

5	I don't think that I am at risk of cervical cancer
6	I was too embarrassed to go for cervical screening. For example, because I would have to take my clothes off or too much skin would be showing
7	I was too frightened of what the test might find
8	I didn't want a man to carry out the screening test
9	I found it difficult to get an appointment
10	I have found cervical screening painful when I have been before
11	I could not afford the costs related to having an appointment. For example, transport, childcare, reduced pay/earnings
12	I worried that I would find being at the appointment physically uncomfortable or difficult. For example, because of mobility problems, bowel issues, or other issues
13	It was too difficult to go to the appointment. For example, because of mobility problems, bowel issues, or other issues
14	I worried about speaking to the healthcare professional. For example, because English is not my first language, or I have a disability or condition that makes it hard to talk
15	I was worried about what others would think of me if I had cervical screening
16	I would have had to take a family member, friend or carer with me
17	I didn't have enough information about the screening programme. For example, what the test would involve
18	I didn't trust the test or the results
19	I forgot to book an appointment, or forgot to go to an appointment that was booked

Response options

1	A lot
2	A little
3	Not much
4	Not at all
5	Don't know/not sure
6	Prefer not to say

ASK: IF SELECTED 1-3 or 5 or 6 AT QUESTION K1

[K4] Did anything else not listed in the previous question put you off going to cervical screening the last time you were invited?

Please type your answer below.

1	Open text box
2	Open text box
3	Open text box
4	Open text box
5	Open text box
6	Nothing
7	Prefer not to say

****Note: age filters applied in the following questions are aligned with UK screening programmes. In other countries, you might need to align age filters to match local screening eligibility criteria.**

Bowel Screening

SHOW: 50+ YEARS OLD IN ENGLAND, SCOTLAND AND WALES, 60+ IN NORTHERN IRELAND
The next questions are about bowel cancer screening. A bowel cancer testing kit is sent to people who can take part every 2 years. The bowel cancer screening test is called the faecal immunochemical test (FIT). You do the test at home and send it to the hospital for testing. The FIT looks for tiny traces of blood in the sample of poo which can be a sign of bowel cancer.

ASK: 50+ YEARS OLD IN ENGLAND, SCOTLAND AND WALES, 60+ IN NORTHERN IRELAND
[L1] When was the last time you completed a bowel cancer screening poo test kit?

Please select one answer.

1	Within the last 2 years
2	More than 2 years ago
3	I have never been sent a kit
4	I have been sent a kit but have never completed the kit
5	I don't remember
6	Prefer not to say

ASK: 50+ YEARS OLD IN ENGLAND, SCOTLAND AND WALES, 60+ YEARS OLD IN NORTHERN IRELAND

[L2] Will you complete the bowel cancer screening poo test kit next time you are sent one?

Please select one answer.

1	Yes, definitely
2	Yes, probably
3	No, probably not
4	No, definitely not
5	I'm not eligible to be invited in the future
6	Don't know/Not sure
7	Prefer not to say

ASK: IF SELECTED 1-2 or 4 or 5 AT QUESTION L1

[L3] Think back to the last time you received a bowel cancer screening poo test kit. We want to understand what may have put you off doing the test, whether you did it or not in the end.

How much, if at all, did the following put you off doing the test?

Please select one answer for each statement.

Randomise statement order

1	I had other more important things to worry about than bowel cancer screening
2	I didn't have any symptoms of bowel cancer
3	I was too busy to complete the poo test kit
4	I found it too difficult to complete the poo test kit
5	I was unsure how to do it or I worried I would do it wrong
6	I don't think that I am at risk of developing bowel cancer
7	I found it too messy to complete the poo test kit
8	I found it too embarrassing to complete the poo test kit
9	I was too frightened of what the poo test might find
10	I recently completed a poo test kit for potential bowel cancer symptoms, so I didn't think I would need to do one again so soon
11	I was worried about what others would think of me if I did the poo test kit
12	I didn't have enough information about the screening programme
13	I didn't trust the test or the results

14	I forgot to do the test kit

Response options:

1	A lot
2	A little
3	Not much
4	Not at all
5	Don't know/not sure
6	Prefer not to say

ASK: IF SELECTED 1-2 or 4 or 5 AT QUESTION L1

[L4] Did anything else not listed in the previous question put you off completing the bowel cancer screening poo test kit the last time you were sent one?

Please type your answer below.

1	Open text box
2	Open text box
3	Open text box
4	Open text box
5	Open text box
6	Nothing
7	Prefer not to say

***Note: age filters applied in the following questions are aligned with UK screening programmes. In other countries, you might need to align age filters to match local screening eligibility criteria.**

Breast screening

ASK: MALE (AT BIRTH) 50+ YEARS OLD WHO IDENTIFY AS TRANS OR NON-BINARY

Some trans women and non-binary people assigned male at birth are eligible for breast cancer screening if they've taken feminising hormones.

[M1] Do you think you could be eligible for breast cancer screening?

Please select one answer.

1	Yes
2	No
3	Don't know/not sure
4	Prefer not to say

SHOW: FEMALE (AT BIRTH) 50+ YEARS OLD OR IF SELECTED 1/YES AT M1

The next questions are about breast cancer screening. Breast screening is offered to women, and some trans and non-binary people. It is offered to people aged between 50 and 70 in the UK every 3 years. Breast screening involves taking an x-ray of your breast called a mammogram.

ASK: FEMALE (AT BIRTH) 50+ YEARS OLD OR IF SELECTED 1/YES AT M1

[M2] When was the last time you had a breast cancer screening test?

Please select one answer.

1	Within the last 3 years
2	More than 3 years ago
3	I have never been invited to have a test
4	I have been invited but have never had a test
5	I don't remember
6	Prefer not to say

ASK: FEMALE (AT BIRTH) 50+ YEARS OLD OR IF SELECTED 1/YES AT M1

[M3] Will you go for breast cancer screening next time you are invited?

Please select one answer.

1	Yes, definitely
2	Yes, probably
3	No, probably not
4	No, definitely not
5	I'm not eligible to be invited in the future
6	Don't know/Not sure
7	Prefer not to say

ASK: IF SELECTED 1-2, or 4 or 5 AT QUESTION M2
NOTE: DO NOT SHOW ITEM M4_11 (*'I have found breast cancer screening painful when I have been before ')* TO RESPONDENTS SELECTING M2_4 (*"I have been invited but have never had a test "),* AS THIS ITEM REQUIRES PREVIOUS EXPERIENCE OF BREAST SCREENING. SEE FOOTNOTE[g] FOR FURTHER EXPLANATION.

[M4] Think back to the last time you were invited for breast screening. We want to understand what may have put you off going, whether you went or not in the end.

How much, if at all, did the following put you off going?

Please select one answer for each statement.

Randomise statement order

1	I was worried that breast screening might be painful
2	I didn't have any symptoms of breast cancer
3	I had other more important things to worry about than breast screening
4	I don't think that I am at risk of breast cancer
5	I was too embarrassed to go for breast screening. For example, because I would have to take my clothes off or too much skin would be showing
6	I was too frightened of what the test might find
7	I decided that the harms of taking part outweigh the benefits
8	The appointment was too far away from my home
9	I found it difficult to get an appointment at a convenient time
10	I had to phone up and arrange the appointment myself
11	I have found breast cancer screening painful when I have been before
12	I didn't want a man to carry out the screening test
13	I could not afford the costs related to having an appointment. For example, transport, childcare, reduced pay/earnings

[g] **Note:** In the 2026 CAM+ survey, participants who answer M2_4 (*"I have been invited but have never had a test"*) are not shown M4_11 (*"I have found breast cancer screening painful when I have been before"*), as this item relates to previous breast screening experience and is therefore unlikely to be relevant to respondents who report never having attended breast screening. In addition, few respondents who had never attended breast screening selected this barrier in the CAM+ 2024 survey. This change was implemented in November 2026. All remaining breast screening barrier items should still be asked of participants who select M2_4.

If your survey scripting platform does not allow M4_11 to be hidden from respondents who select M2_4, the barrier questions may be asked as currently presented in M4. However, not showing M4_11 to respondents who select M2_4 remains the preferred approach. Where this is not technically possible, responses to M4_11 from respondents who have never attended breast screening can be excluded from analysis, as these responses are not directly interpretable.

14	I worried that I would find being at the appointment physically uncomfortable or difficult. For example, because of mobility problems, bowel issues, or other issues
15	It was too difficult to go to the appointment. For example, because of mobility problems, bowel issues, or other issues
16	I worried about speaking to the healthcare professional. For example, because English is not my first language, or I have a disability or condition that makes it hard to talk
17	I would have had to take a family member, friend or carer with me
18	I was worried about what others would think of me if I had breast screening
19	I didn't have enough information about the screening programme. For example, what the test would involve
20	I didn't trust the test or the results
21	I forgot to book an appointment, or forgot to attend an appointment that was booked

Response options

1	A lot
2	A little
3	Not much
4	Not at all
5	Don't know/not sure
6	Prefer not to say

ASK: IF SELECTED 1-2 or 4 or 5 AT QUESTION M2

[M5] Did anything else not listed in the previous question put you off going to breast cancer screening the last time you were invited?

Please type your answer below.

1	Open text box
2	Open text box
3	Open text box
4	Open text box
5	Open text box
6	Nothing

7	Prefer not to say

SHOW: IF SHOWN ANY QUESTIONS IN SECTION K, L OR M

Please note: Screening is for people who don't have symptoms. If you have symptoms, please speak to your GP.

Closeness to Cancer

ASK: ALL

[N1] Have you, anyone in your family or any of your friends had cancer?

Please select all that apply.

1	Me
2	My partner
3	Someone in my immediate family (e.g. parents, grandparents, siblings)
4	Someone in my wider family (e.g. cousin, aunt, uncle)
5	A close friend
6	An acquaintance
7	A colleague
8	Someone else (please specify)
9	None of those
10	Prefer not to say

SHOW: ALL

Thank you for taking part in this survey that was conducted by xxxx

If you would like more information about cancer, you can visit:

- Cancer Research UK's website. If you would like to speak to a nurse, you can call the freephone Cancer Research UK nurse helpline on 0808 800 4040.
- Macmillan's website
- NHS website

Appendix 2: Glossary

- **Barrier for seeking help** – Any reason given for not seeking help for a suspected warning sign or symptom.
- **Cancer screening –** Testing large groups of apparently healthy people for early signs of certain types of cancer. Screening for a specific cancer can only be carried out when there are good enough tests available and studies have shown that screening will do more good than harm.
- **Cancer screening programme –** Invites certain sections of the population to screening at regular intervals over a period of years.
- **Closed question** – A query that requires the respondent to answer using given options.
- **Interviewer** – The person giving the questionnaire to respondents.
- **Open question –** A query that allows the respondent to answer freely.
- **Risk factor for cancer –** Something about us or our lives that increases our chances of developing cancer.
- **Respondents** – The people giving the answers to the CAM.
- **Seeking help –** Visiting a doctor or other health care professional in regards to a suspected sign or symptom.
- **Symptom of cancer –** A feeling of illness, or physical or mental change, caused by cancer.