

Ethnicity-Based Health Inequalities in Breast Cancer:

A United Vision for Change

Ethnicity-based health inequalities have a profound impact on the diagnosis, treatment, experience, and outcomes of patients diagnosed with breast cancer. We know that people from ethnic minority backgrounds are less likely to be screened early and more likely to be diagnosed later.ⁱⁱⁱ Health inequalities also have an impact on how patients experience care and how much they feel represented in their cancer journey.

Gilead Sciences hosted an advisory board with health charities and representatives from the clinical community to understand how these inequalities can be addressed through targeted policy action and to co-create policy recommendations. Following this advisory board, Gilead Sciences and Black Women Rising created this **Vision for Change** drawing on insights from participants. The Vision aims to reduce ethnicity-based health inequalities in breast cancer and to support the patient community and healthcare system to prioritise the change needed to:

Ensure the needs of all women are considered across the breast cancer pathway.

How this can be achieved

Data:

Data infrastructure is not set up to capture patient characteristics like ethnicity, quality of life indicators and patient experience. This makes it difficult to tailor support and information for patients.



- Government and NHS England should mandate the collection of data on ethnicity, patient experience, and quality of life across the cancer pathway to ensure care is reasonably adjusted for patients from all communities. These insights should be used to inform regular pathway reviews and change practice.

Availability and accessibility of wigs and prosthetics:

A Black Women Rising survey found that **74%** of women who have used a softie, prosthetic breast or nipple post-surgery were not offered one to match their skin tone.ⁱⁱⁱ This can leave women feeling excluded, invisible, and sectioned out in society.^{iv}



- The Department for Health and Social Care and NHS England should review national and local NHS procurement policy to ensure that prosthetics, wigs and lymphoedema sleeves in a range of skin tones and hair types are made available in NHS Trusts with breast cancer services.
- NHS Supply Chain should review the External Breast Prostheses, Bras and Associated Consumables framework to clearly outline that prosthetics and wigs in a range of skin tones and hair types are supplied and made available on the NHS.

Information and communication:

A 'one size fits all' approach is not effective when raising awareness and sharing information on cancer. A lack of inclusive and accessible information can leave patients unable to navigate the care pathway, as not all people feel empowered, well-informed, or comfortable to discuss their care.



- NHS England should work collaboratively with grassroots patient organisations to develop targeted and culturally aware campaigns for the screening, diagnosis, and treatment of breast cancer. Campaigns should use appropriate language, imagery, and examples to resonate with diverse communities.
- NHS England should audit the channels used to share invitations to the Breast Screening Programme. To drive uptake in geographical areas with low screening rates, consideration should be given to how diverse communities are informed about the programme.

Leadership:

Limited diversity on regional and local NHS Boards can impact how empowered the workforce feels to influence and act on changes to reduce inequalities for patients.



- Integrated Care Boards should ensure health inequalities and local community perspectives are considered as part of local strategic planning, particularly in geographical areas representing diverse patient populations.

What you can do to help

As a Parliamentarian:



- Call on the Government and NHS England to mandate the collection of data on ethnicity, patient experience, and quality of life across the whole cancer pathway.
- Call on the Department of Health & Social Care to review national and local procurement policy to ensure prosthetics, wigs and lymphoedema sleeves are available in a range of skin tones and hair types.
- Arrange a meeting with your local Integrated Care System to raise awareness of these recommendations at a local level.

As a healthcare professional:



- Write to your local NHS Trust and NHS England to call for the review of local and national procurement policy to ensure prosthetics, wigs and lymphoedema sleeves are available in a range of skin tones and hair types in NHS Trusts with breast cancer services.
- Write to your local MP to raise awareness of these issues in your local constituency.

As an Integrated Care System lead:



- Arrange a meeting with your local NHS Trust to call for the review of local procurement policy to ensure prosthetics, wigs and lymphoedema sleeves are available in a range of skin tones and hair types in NHS Trusts with breast cancer services.
- On your Board, ensure health inequalities and local community perspectives are considered as part of local strategic planning, particularly in geographical areas representing diverse patient populations.

As a patient group representative:



- Call on NHS England to audit the channels used to share invitations to the Breast Screening Programme, and work in collaboration with NHS England to develop targeted and culturally aware campaigns for the screening, diagnosis, and treatment of breast cancer.
- Write to your local MP to raise awareness of these issues in your local constituency.

References

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- NHS England (2020) "The experiences of cancer patients from ethnic minority background in England: A qualitative study". Available at: <https://northerncanceralliance.nhs.uk/wp-content/uploads/2021/09/NHSE-Qualitative-report-Experiences-of-ethnic-minority-patients-in-England-2020-1.pdf> [Accessed November 2023].