



## 10 years of the SCPN

The collage displays 12 covers of the Scottish Cancer Prevention Network (SCPN) Newsletter, arranged in a 3x4 grid. Each cover features a different background image and highlights a specific issue. The covers include:

- Cover 1 (Top Left):** NHS Health Scotland and cancer prevention. Vol 5, Issue 3. Main image: A beach with a white umbrella.
- Cover 2 (Top Second):** Oral cancer in young adults too important to ignore. Vol 5, Issue 4. Main image: A path through a wooded area.
- Cover 3 (Top Third):** The Scottish Diet – the challenge of change. Vol 5, Issue 5. Main image: A person's back in a white tank top.
- Cover 4 (Top Right):** Latest cancer prevention research. Vol 6, Issue 1. Main image: Sunflowers.
- Cover 5 (Second Row Left):** Sugar, Sugar Everywhere. Vol 7, Issue 2. Main image: A field of white flowers.
- Cover 6 (Second Row Second):** Scotland's new cancer strategy. Vol 7, Issue 3. Main image: A close-up of a white flower.
- Cover 7 (Second Row Third):** Physical activity devices and applications. Vol 7, Issue 4. Main image: A sunset over water.
- Cover 8 (Second Row Right):** Public Awareness of Obesity as a Risk for Cancer. Vol 7, Issue 5. Main image: A person's back with a patterned top.
- Cover 9 (Bottom Left):** (Partial view of Cover 1).
- Cover 10 (Bottom Second):** (Partial view of Cover 2).
- Cover 11 (Bottom Third):** (Partial view of Cover 3).
- Cover 12 (Bottom Right):** (Partial view of Cover 4).

Each cover also lists 'Also Inside' topics and the Scottish Cancer Prevention Network logo.



## Editorial

Time flies....ten years on

We launched the SCPN ten years ago in January 2010 with an 8 page black and white newsletter and a passion for change. Ten years later with a lot of fun and hard work from colleagues, friends, family (and pets!) we have produced a portfolio of novel activities that have engaged with thousands of people in Scotland and beyond. We have worked to raise awareness about reducing cancer risk, the importance of detecting cancer early and supported action for policy changes and stacking the odds against cancer occurrence and recurrence. As 2019 draws to an end, this last issue of the newsletter celebrates, recalls and shows off some of the best.

The newsletters changed to colour format in 2012, increased to 12 pages, then to 16 pages in 2017 and earlier this year

to 20 pages. In 2020 we will change to an e-digest which will fly through your electronic mailboxes at regular intervals. We have covered many information and misinformation issues, we have asked the experts, we have interviewed cancer champions, we have included favourite recipes, we have given you quizzes, competitions and kettlecise. We have promoted good practice and research and we have moved into public communications with the launch of our magazine for use in breast clinics and our Men's Health publication currently being trialled in NHS abdominal aortic aneurysm screening clinics. Between newsletters there has been the annual conference, social media (@thescpn), blogs, development of SCPN resources, the art and design prize, the student bursary and more. We have responded to government consultations

and given evidence to the Health and Sport committee and we have been to Ireland to help support the development of the Irish Government's Irish Cancer Prevention Network.

Our activities are supported by our parent charity The Scottish Cancer Foundation but in kind by hundreds of others from all sectors as well as individuals who have brought their creative energy to produce our vibrant and lively network. Special thanks to our designers Eoin McCann and Connor Finlayson, Laura Patton from CharityWorks, the home team (including Jill, Maureen, Lauryn, Sarah, and Karen) and the many staff and students who were passing through Dundee and joined our efforts to promote a healthier Scotland over the last 10 years.

**Annie S. Anderson and Bob Steele**

## Thank you

So many people have helped advise, guide and direct the SCPN newsletter over the years and special thanks are due to all our advisory group members past and present including: Elspeth Banks, Nicola Barnstaple, Christine Campbell, Bryan Christie, Alison Douglas, Andrew Fraser, Elizabeth McLennan, Gregor McNie, Susan Moug, Gozde Ozakinci, Neil Hamlet, Debbie Proven, Mary Allison, Vicky Crichton, Eluned Hughes, Eddie Coyle, James Jopling, David Linden, Paul Ballard and Gill Hubbard.

We would also like to thank our regular contributors to the newsletter including: Heather Pearce, Tery Slevin, Ann Gates, Lorraine Tulloch, Alison Douglas, Kellie Anderson, Shelia Duffy, Giota Mitrou, and Amy Hickman.

Without the support of all of these groups the SCPN newsletter would not have been possible.



# Cancer incidence in the past 10 years

Gavin Clark, Information Services Division, NHS National Service Scotland

Cancer prevention in Scotland has faced many challenges but had several successes during the last decade. Figure 1 summarises the change in incidence over this timeframe for some of the common cancers. Further information is available in the latest ISD report on *incidence and prevalence*.

Within the data, there are a number of positive cancer prevention stories, including:

- The single largest risk factor for lung cancer is cigarette smoking and the large decrease (by 18%) in lung cancer in men reflects decreases in smoking prevalence over several decades. Previous smoking patterns in women mean that the drop in lung cancer incidence has not yet been seen – but is expected to follow the observed decrease in men in the next decade or two. Occupational and domestic exposures to asbestos and ionising radiation are also risk factors for lung cancer but exposure to these factors is falling and this is also contributing to the reduction seen for men.
- Over half of bowel cancers are preventable in the UK, with eating processed meat, being overweight or obese, alcohol and smoking being among the commonest risk factors. However, the decreases in men and

women of 21% and 15%, respectively, in the past decade are likely to reflect reductions in smoking as well as the removal of pre-malignant polyps at colonoscopies resulting from the Scottish Bowel Screening Programme, and a further reduction would be possible if people were to address their diet and lifestyle.

In contrast, there are emerging areas of concern where modification of behaviour could make a significant difference:

- Malignant melanoma of the skin is the fifth most common cancer in both women and men. Incidence rates increased over the last decade by 18% in males and while they did not change significantly in females over the past decade, substantial increases have occurred previously. The primary recognised risk factor for melanoma of the skin is exposure to natural and artificial sunlight, especially but not exclusively at a young age. Being safe in the sun, using sunscreen and avoiding sunbeds would help to reduce the risk of developing this disease further. Males are more likely to be diagnosed with melanoma on their trunk, while women are more likely to be diagnosed on their arms and legs, partly linked to

occupation and which parts of the body are exposed to the sun more generally.

- About half of liver cancers are preventable in the UK, with being overweight or obese, smoking, having infections and drinking alcohol being among the commonest causes. Total units of alcohol consumed per week fell in Scotland between 2003 and 2013, and units consumed on heaviest drinking day also fell in this time, although both have changed little in more recent years. In contrast, the prevalence of overweight and obesity has persisted and there is evidence that obesity makes alcohol more damaging to the liver.

In summary, cancer incidence is dynamic, and there have been both some large increases and decreases over the past decade. This highlights the need for vigilance, routine monitoring and surveillance of cancer incidence trends, with corresponding introduction of new initiatives to continue to tackle cancer. Various preventive interventions have had a positive impact and should be celebrated. However there are emerging cancers of concern where further intervention should have an impact and it is important that these areas get the focus that they need.

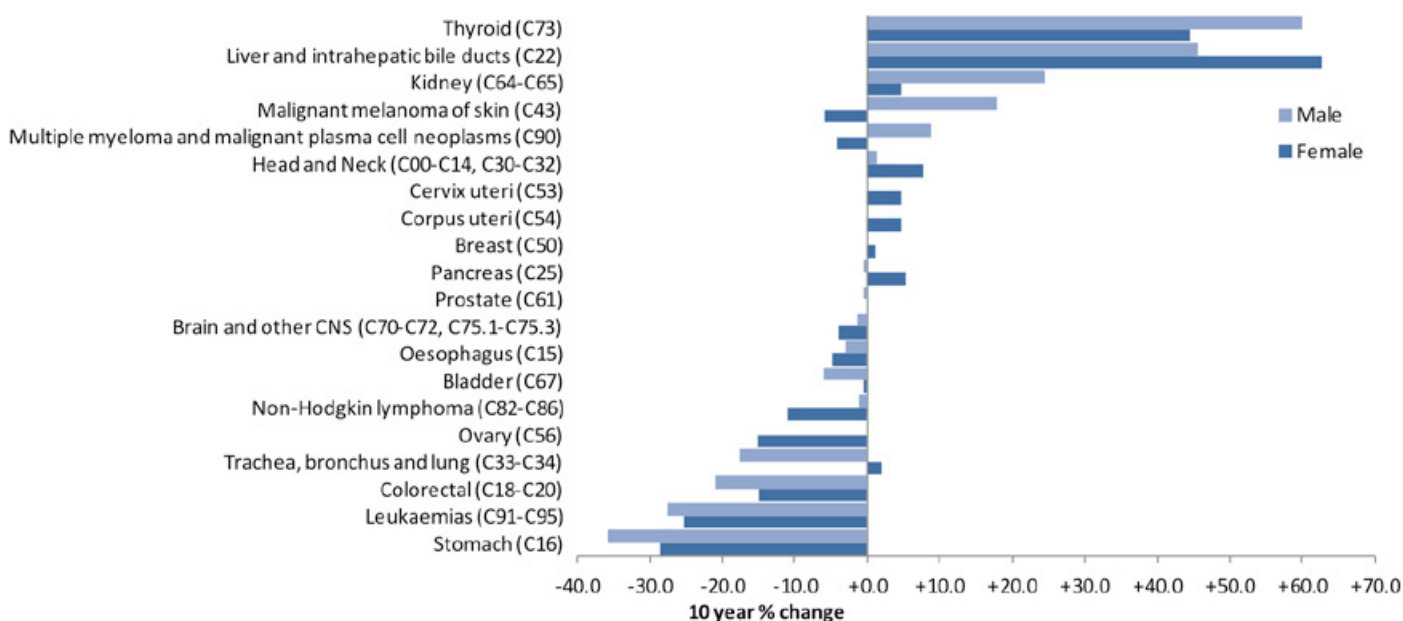


Figure 1 - 10 year percentage change in age-adjusted incidence rate for 20 most common cancers in Scotland, 2007 to 2017. Source: Scottish Cancer Registry

# 10 years of bowel screening in Scotland

Prof Bob Steele, Clinical Director, Scottish Bowel Screening Programme



In December 2009 Scotland became the first country in the world to have a fully rolled out Bowel Screening Programme; in other words, that the whole population aged between 50 and 74 were given the opportunity to participate in a programme that had been proven to reduce the risk of dying from bowel cancer.

At that time the programme was based on a test called a guaiac Faecal Occult Blood Test (gFOBT) – a card based test that was able to detect traces of blood in faeces. Although proven to be effective, this test had three main disadvantages. Firstly, it required the participant to provide three samples from separate bowel motions. Secondly, the process of collecting the samples was less than ideal and, thirdly, the test was not specific for human haemoglobin so that false positive tests could result from a diet rich in animal meat and certain other food stuffs.

Because of these disadvantages a great deal of research has gone into alternative tests and, as a result, in November 2017 the programme changed to using a Faecal Immunochemical Test (FIT). This test has several advantages. Only one sample is required and the collection device is considerably easier to use and more hygienic than the previous test. Because it is immunological it is specific for human haemoglobin and false positive tests are therefore less likely. Most excitingly, however, the test result is not “all or none” as was the previous test but rather it is quantitative i.e. it gives an estimate of the concentration of blood in faeces. This affords the opportunity to make the test more sensitive for blood and indeed the threshold that has been used in the Scottish programme produces a positive result in about 3% of the tested population as opposed to 2% with gFOBT.

This has resulted in a 35% increase in the numbers of cancers detected by the screening process and this is likely to

translate to improved survival. However, the screening programme not only picks up cancers it also picks up adenomas. These are the precursors of bowel cancer, and removing them at the time of colonoscopy for a positive test result prevents bowel cancer from developing. Already we are seeing a reduction in the incidence of bowel cancer in Scotland associated with gFOBT screening, and with the new FIT test, which has resulted in a 100% increase in the number of adenomas detected, we should see an even greater drop in the number of people developing bowel cancer.

Another major impact of the introduction of FIT has been an increase in uptake of the invitation to be screened. This has increased from 56% to 64% of the population offered the test, which means that the impact both on survival and incidence is likely to be even greater.

This does come at a cost, however. The increased positivity and the increased uptake have resulted in a big rise in the demand for colonoscopy and most of the Scottish NHS Boards have found this particularly challenging. However, there is a will both from Scottish Government and from the clinical community to optimise our Bowel Screening Programme, and in coming years we shall see every effort being made to deliver the programme so that the maximum number of people in Scotland can benefit.

As the Clinical Director of the Scottish Bowel Screening Programme I should like to pay tribute to the team that has developed, modified and implemented the Programme over the years. It is one of the most significant Public Health interventions we have seen in recent times, and without all the dedicated hard work from NHS National Services Scotland, NHS Health Scotland, Public Health, the Bowel Screening Laboratory, Endoscopy Units across the country, and, of course, Scottish Government, it could not have happened.



## 10 years on alcohol in action

Alison Douglas, Chief Executive Alcohol Focus Scotland

On the 25th of November 2009, then Cabinet Secretary for Health, Nicola Sturgeon MSP, introduced the Alcohol etc (Scotland) Bill to the Scottish Parliament on behalf of the Scottish Government. In light of the success of the preceding Labour/Liberal Democrat administration's ban on smoking in public places, Sturgeon was emboldened to take radical steps to turn the tide of alcohol harm. The Bill contained measures designed to reduce consumption across the whole population as well as targeted groups. It was informed by the World Health Organization (WHO) "Best Buys" for alcohol policy: increase price, control availability and restrict marketing.

The Bill included a ban on multi-buys (eg. three bottles of wine for the price

of two), which was credited in cutting consumption by 1%. Provisions to introduce a minimum unit price (MUP) for alcohol were voted down by opposition parties. MUP legislation did gain Parliamentary approval at the second time of asking, in 2012, although it took a further six years to implement due to litigation fronted by the Scotch Whisky Association. The early signs are encouraging with sales of alcohol down and heaviest drinkers most affected, as was expected.

Attention is now turning to regulating alcohol marketing with the Scottish Government committing to consult on restrictions in spring 2021. We can anticipate further robust efforts from the alcohol industry to block any such

legislation. The third WHO "Best Buy" – controlling availability – is the missing link in Scottish alcohol policy. With over 16,000 places to buy alcohol in Scotland and 97% of licences approved each year, it is clear our current licensing system is failing to deliver for people and communities, and is contributing to health inequalities. It's time this was addressed.



## ASH Scotland- update on the past 10 years

Sheila Duffy, Chief Executive ASH Scotland

Scotland has achieved significant milestones in tobacco reduction over the last ten years. During this period the country has mainly seen a steady overall decline in smoking rates.

In 2011, following the passing of The Tobacco and Primary Medical Services (Scotland) Act, the Register of Tobacco Retailers came into force. This required all those selling tobacco to register, and was later extended to include e-cigarettes. It was followed in 2013 by a ban on tobacco vending machines in large shops, with tobacco being put out of sight. The measure came into force for smaller shops in 2015.

The Scottish Government's "Take it Right Outside" Campaign in 2014 highlighted the dangers of second hand smoke

in homes, and dovetailed with the Government's 2013 commitment to see a generation of young Scots grow up free from the harms of tobacco.

In 2015 the age of sale for tobacco was raised to 18 and in 2016 a ban on smoking in cars with children in vehicles was implemented.

A hotly contested debate in 2016 led to the advent of plain packaging in Scotland, fully implemented in 2017, along with new rules prohibiting the sale of tobacco and nicotine vapour products to under 18s. Most recently, Scotland's prisons became smoke-free in 2018.

Together, these measures have contributed to the decline in smoking rates in Scotland, and have gone hand-in-hand with efforts to support Scottish

people to "Quit Your Way". That said, our adult smoking rates have flatlined in recent years and alcohol, obesity, physical exercise and drugs have grabbed the headlines. Tobacco remains Scotland's largest preventable cause of early death, ending between 9 and 10 thousand lives prematurely each year. This is too dangerous a substance to leave to chance, and we are looking for decisive action from the Government and leadership from Public Health Scotland to build on previous measures.



## How far we've come in 10 years; what is left to learn?

Giota Mitrou, Director of Research at World Cancer Research Fund

Ten years ago, when the Scottish Cancer Prevention Network (SCPN) was formed, World Cancer Research Fund (WCRF) had just published our Second Expert Report along with our 2007 Cancer Prevention Recommendations. These Recommendations turned our strong evidence into practical and straightforward advice for anyone to reduce their risk of developing cancer through diet, nutrition and physical activity. SCPN was instrumental in helping WCRF engage the public and policy makers in the cancer prevention conversation and raising awareness of the lifestyle changes that can be made to reduce cancer risk.

We continued to collate and analyse the evidence on diet, nutrition, physical activity and cancer through our Continuous Update Project (CUP). In March 2018 we launched our Third Expert Report with updated

Recommendations. These were largely consistent with the Second Expert Report, reflecting the stability of the global research findings in this field, and emphasised the importance of an overall lifestyle of healthy behaviours for cancer prevention.

So, after being the first to provide strong evidence for the link between obesity, alcohol, red and processed meat and cancer risk, and having strengthened that evidence over three decades, what next for WCRF and cancer prevention? With improvements in diagnosis and treatment and better understanding of prevention, the number of people living with cancer and beyond is increasing globally. However, we still know very little about the role of diet, nutrition and physical activity in relation to outcomes after a diagnosis of cancer, and in managing symptoms or in childhood cancer

survivors. Other areas of interest we hope to expand include a better understanding of how different risk factors affect different cancer subtypes, and how dietary and lifestyle patterns affect cancer risk over the life course. These new areas will be driven forward by our new CUP Transition Panel; a group of global independent experts who will provide guidance so we can turn these priorities into practical, strategic, research goals.

While it is more widely accepted that diet, nutrition and physical activity affect our risk of cancer, we still have a long way to go before preventable cancers become a thing of the past, and before we develop a better understanding of what advice to provide to people living with cancer. We hope that this new phase of the CUP will go some way to improving our understanding.

## Food Standards Scotland's dietary recommendations in relation to cancer prevention

Heather Peace, Head of Nutrition, Science and Policy, Food Standards Scotland

In Scotland, many organisations are working together to reduce cancer risk. Over the years Food Standards Scotland (FSS) has contributed to SCPN conferences, newsletters and social media and worked hard to promote dietary change.

The FSS was established as the national food body for Scotland in April 2015. Amongst other things, it has a statutory duty to improve the extent to which consumers have diets conducive to good health.

The *FSS Situation Report*, highlights the relationship between poor diet and the risk of developing common diseases, including cancer in Scotland. With 13 cancers linked directly to obesity, FSS recommendations for improving diet and

reducing overweight and obesity are relevant to cancer prevention.

In 2015, FSS recommended that the *Scottish Dietary Goals (SDG)* be updated to reflect the advice of the *Scientific Advisory Committee on Nutrition on carbohydrates and health*. The updated goals include a goal for increasing dietary fibre and another to limit the consumption of red and red processed meat, both of which address the need to reduce risk of colorectal cancer. The SDG formed the basis of the *report of a technical working group* (including FSS) on school food regulations. This report included advice to limit the amount of red and red processed meat served in schools.

FSS worked closely with Public Health

England to produce the *Eatwell Guide* which draws together evidence based healthy eating advice.

Recently, FSS published *recommendations to Ministers on an Out of Home Strategy for Scotland* to make it easier to eat healthily outside the home. With the sector set to grow, taking forward an out of home strategy is a clear imperative for Scottish public health.



## Cancer Research UK-10 years in Scotland

Ben Chiu- CRUK Cancer Prevention Department

Cancer Research UK is a leader in cancer prevention in Scotland and the rest of the UK. From funding research to supporting campaigns, we have been committed to a healthier Scotland.

We have helped contribute to sector-wide efforts to influence the Scottish Government, Scottish Parliament and the media. Liaising with officials on tobacco, obesity and alcohol policy, we have helped shape strategies, set policy priorities, and build consensus and awareness among parliamentarians. From MUP to restricting price promotions, we have worked to ensure that prevention is on the national agenda.

Over the last ten years, we have helped support Scottish academics

and campaigners who have worked tirelessly to prevent cancer. Our Tobacco Advisory Group (TAG) has contributed in part to the work of Scottish academics to help inform action to achieve a tobacco-free Scotland by 2034. We have also assisted dynamic and influential bodies such as ASH Scotland, and newer bodies such as the Scottish Obesity Alliance.

Furthermore, in this period we have also boosted Cancer Research UK's own prevention research outputs. Our Cancer Policy Research Centre (CPRC) was established in 2014 to produce policy reports, while our Cancer Intelligence team published research that, for the first time in Scotland, quantified the

attributable modifiable risk factors for cancer cases.

Since 2017, our Facilitator Programme has prioritised increasing health professional awareness of the links between cancer prevention and lifestyle. The Facilitator Programme has supported a wide range of prevention projects on areas such as brief intervention, smoking cessation training needs in pharmacies, and GP raising the issue training.

Looking forward, CRUK will continue to work with others to prioritise cancer prevention in Scotland over the next decade. We want to accelerate progress and see 3-in-4 patients survive cancer by 2034, and the first step to achieving this is prevention.

## Supporting Cancer Prevention in Scotland



## SCPN Conference, through the years



Since 2014, the SCPN has celebrated World Cancer Day (February 4th) by holding our annual, national conference. We do this, not only to show our support for the initiative, but also on the basis that our conference shares the same aspirations to encourage prevention activities, early detection and treatments. The SCPN conference has helped us to share the latest in prevention and lifestyle research, discuss public health issues with health professionals, researchers, charities and government.

Over the years we have had many great speakers from MSPs to world leading

researchers, and inspiring talks from cancer survivors. All of our speakers provide insight into some of the latest evidence on risk factors associated with cancer and provide information on what is happening in Scotland to tackle the lifestyle factors which impact on cancer e.g. smoking, obesity, alcohol consumption, physical inactivity and sedentary lifestyles. Wider public health issues (the cause of the causes) have also featured, such as – health inequalities, food poverty, income and employment as well as government actions (and inaction).

Each year at the conference we have provided a SCPN conference bag – no free bars or pharma-material but prompts for healthy and fun activities. Pedometer, Kettlecise cards, Frisbees, Umbrella (get walking in any weather), strengthening band and our SCPN art prize winner from 2017 Dougal the Dog hand made brooches (if you can't

take a dog for a walk take Dougal)

We have had lots of great speakers, chairs and faculty. Our thanks to our regulars including Professor Martin Wiseman of the World Cancer Research Fund, Dr Aileen Keel (Scottish Government), Dr Hilary Dobson (Scottish Government), Professor Nanette Mutrie (University of Edinburgh), Dr Susan Moug (Greater Glasgow and Clyde), Professor Fiona McQueen (CNO) and Dr Andrew Fraser (NHS Scotland).

All our conference presentation are on our website [here](#).



Food, Nutrition, Physical Activity, and Colorectal Cancer (WCRF, 2011)		
	Decreases risk	Increases risk
Convincing	Physical activity Foods containing dietary fibre	Red meat Processed meat Alcoholic drinks (men) Body fatness Abdominal fatness Adult attained height
Probable	Garlic Milk Calcium	Alcoholic drinks (women)



### INFLUENCING LIFESTYLE CHOICES IN BREAST SCREENING SETTING

- Why?**
  - aligns with concept of 'feeling well'
  - attempt to 'normalise' activities
- When?**
  - 'teachable' moments *ie* results
  - time of invitation\*\*\*\*
- How?**
  - written information







## #healthymeetings- time to stand up and be counted

Sometimes we need to sow the seeds of change....Our healthy meetings score card aims to help people share good practice, create demand for healthier catering and more active meetings, and praise venues that facilitate healthier working days. We have used the score card to help design super SCPN conference days but it does not stop there. We have feedback from over a 100 meetings UK wide from people who care about their working days. Join us by downloading our score cards (and slides) [here](#).

Read more in our BMJ article <https://www.bmj.com/content/351/bmj.h3141>

N.B. We also have a **#healthymeetings** scorecard for short meetings which are under 4 hours.

Scottish Cancer Prevention Network

Have you noticed how difficult it can be to attain your daily health eating plans, activity goals and smart thinking on days when you have meetings greater than 4 hours that span lunchtime?

The SCPN has developed a scorecard which focuses on ten highlights that regular meeting attendees agree represent important examples of good practice for healthy meetings. They do not include every aspect of a healthy diet, or active living, but provide a brief checklist to help support meeting organisers.

We are focusing on some specific aspects of meetings that can be relatively easily assessed, although there are other issues like portion sizes, avoiding sponsorship by food and drink companies, and sustainability considerations (e.g. plastic crockery/ local food/minimal waste), that are also important. Good taste and adequate quantities mustn't be forgotten, and we also recognise the need to try and promote meetings that are held in places that are well served by public transport.

You can help support healthier meetings by:

- discussing the checklist with meetings' chairs
- providing feedback (your scorecard) to the organiser of meetings
- sharing your experiences of good practice with the SCPN
- helping us to promote, disseminate and reward examples of good practice

Please tell us about your experience of any meetings lasting over 4 hours and encompassing lunch:

Name of meeting:

Venue:  Date:

Healthy Meetings - were the following observed?	Yes	No
1 Fresh drinking water available at all times		
2 Fruit available for all (in easy to eat servings)		
3 Vegetables available for all (in easy to eat servings)		
4 Bread, grains, rice, pasta etc. (mostly in wholegrain form)		
5 No pastries, deep-fried items, creamy sauces or dips		
6 Low calorie desserts (<150 calories e.g. VERY SMALL portions of traditional desserts or yoghurts and/or fruits)		
7 No sweets or savoury snacks (e.g. crisps)		
8 Directions to the meeting promoting ACTIVE travel (e.g. walking, cycling)		
9 Opportunities for hourly brief "comfort breaks" (for stretching, standing etc.)		
10 Chair encouragement to move, stand and/or stretch during the meeting (where feasible, not too disruptive and in keeping with participants' abilities and disabilities)		
Score		

Comments:

Your name:

Your email address:

Please return this form to:  
SCPN, Mailbox 7, Level 7,  
Ninewells Hospital & Medical School,  
Dundee, DD1 9SY  
Email: [healthymeetings@cancerpreventionscotland.org.uk](mailto:healthymeetings@cancerpreventionscotland.org.uk)

Please be upstanding!



This meeting is standing friendly. Please feel free to take standing and stretch breaks at the back of the room and break up that sedentary time!

#HealthyMeetings

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What makes #HealthyMeetings?

Healthy Salad Selection



Read the full showcase from @WCRF\_UK's meeting on our website!

[thescpn](#) #HealthyMeetings

SCPN  Scottish Cancer Prevention Network



## SCPN's Consultation Responses

Consultations give the general population a chance to get involved in the work of government. It is an important part of the government's policy-making process. The SCPN is focused on moving evidence on cancer risk reduction into everyday life, practice and policy. As an advocacy group we raise the profile of cancer prevention and screening research and action through a range of communication channels and support ongoing work in reducing the prevalence of cancer risk factors. Here at The SCPN we feel it is important that we regularly respond to government consultations that could directly influence cancer prevention measures. We feel that is important to be transparent with our response to these so they are all available to view on our [website](#).

Consultations are important to respond to and our responses do get noticed.... our recent response to the Scottish's Government's "Reducing health harms of foods high in fat, sugar or salt" was picked up by the "The Ferret" and "The Sunday National" newspaper. SCPN were also invited to provide a written evidence statement and verbal evidence to the Health and Sport Committee on the Preventative Spend agenda to contribute to the [Preventative Action and Public Health 10th Report](#) focusing on the Detect Cancer Early programme, where we asked the Scottish Government for their proposals "to refocus targeted campaigning and screening programmes to address or rebalance this position more towards primary prevention".

Here is a list of all the recent response to consultations the SCPN have made:

[Further Advertising Restrictions on TV and online for HFSS products June 2019](#)

[Good Food Nation Proposals for](#)

[Legislation March 2019](#)

[Proposals to Improve the Out of Home Environment in Scotland Feb 2019](#)

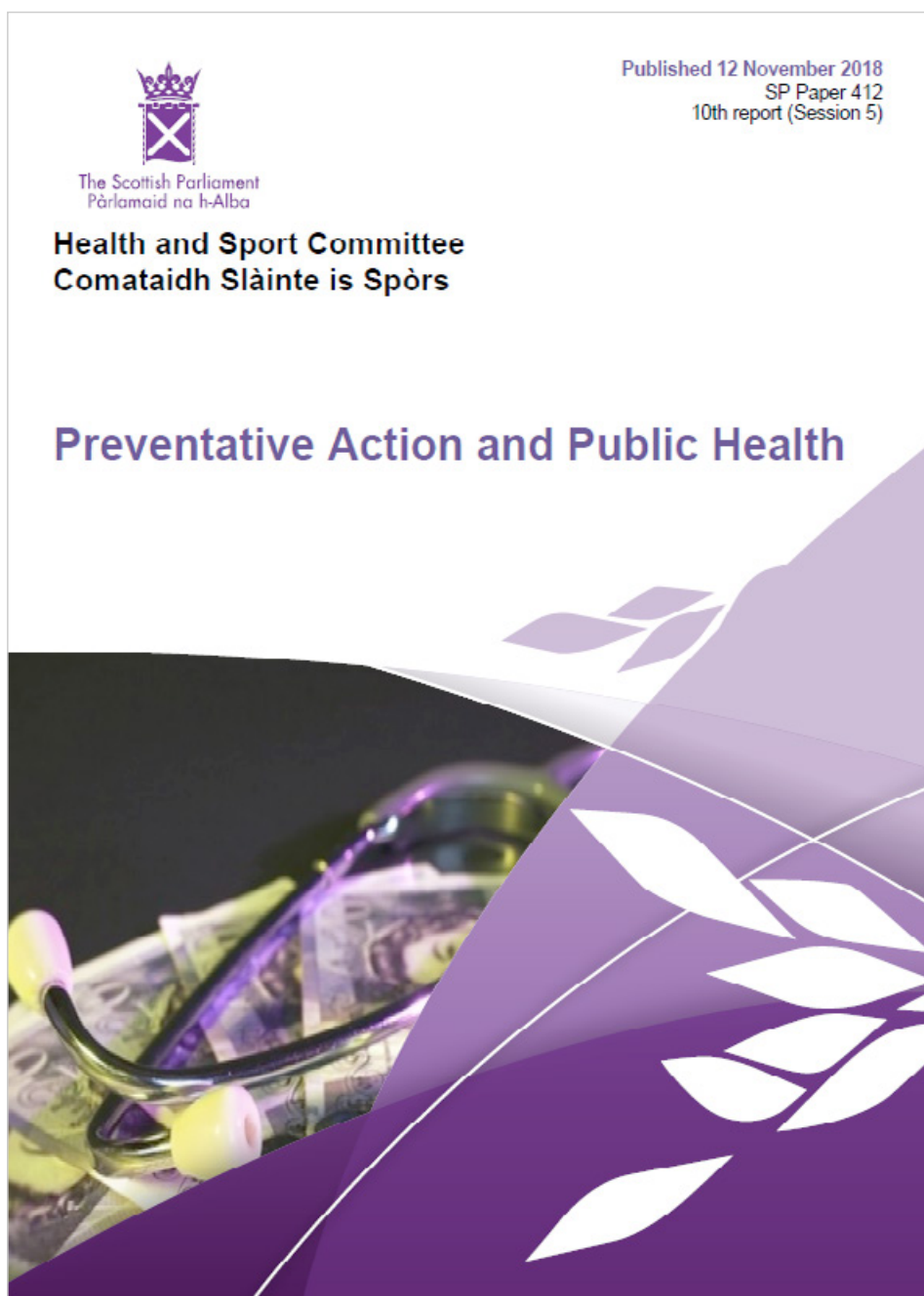
[Reducing health harms of foods high in fat, sugar or salt consultation Jan 2019](#)

[The Scottish Cancer Coalition Kitchen Table Talk March 2018](#)

[Obesity Strategy Consultation Jan 2018](#)

[Alcohol Minimum Unit Pricing Consultation Jan 2018](#)

[Welfare Foods – a consultation on meeting the needs of children and families in Scotland](#)





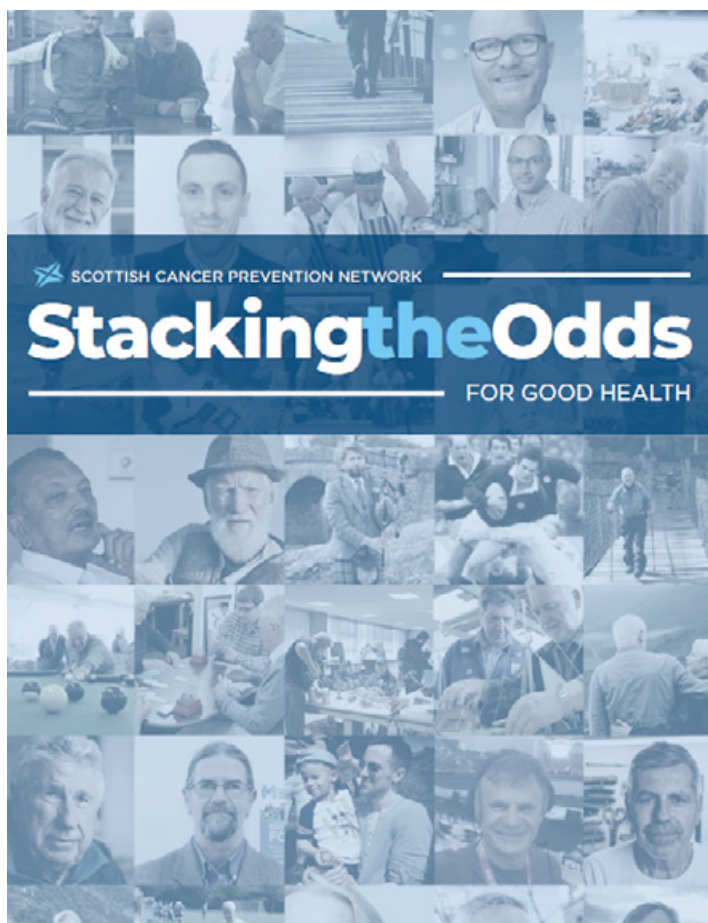
## Public Engagement



The initial focus for SCPN communication was health professionals, third sector agencies and government colleagues. However, we have also engaged widely with the general public through many media channels including national and local radio and over 20 different community, local and national newspapers. Café science, women's groups, patients groups, men's shed, worksites... we have reached far and wide. Meeting people, hearing how people want to support prevention activities and trying to answer questions makes for an interesting work day with lots to learn.

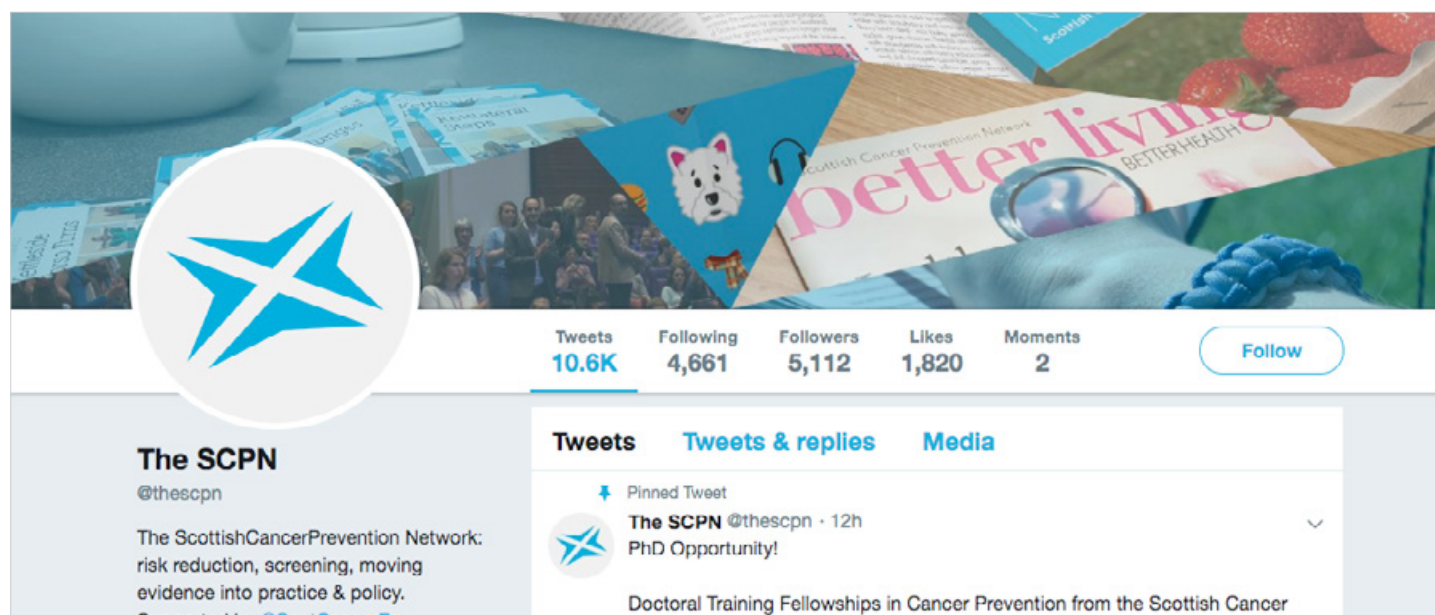
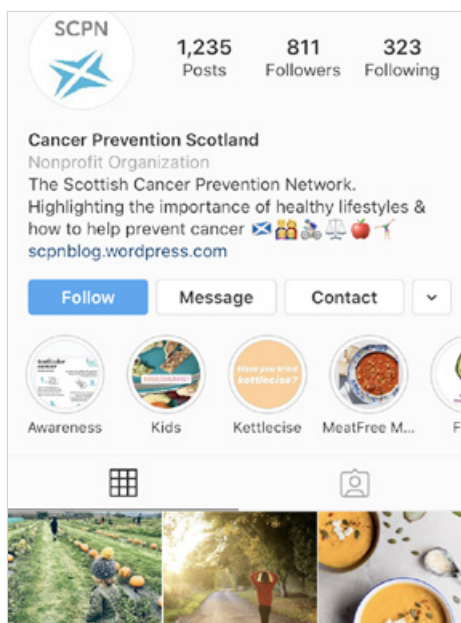
In this day of digital technology we were also delighted to see a fabulous uptake of our Women's Magazine "*Better Living, Better Health*" and our recently launched Men's Health publication "*Stacking the Odds*".

In recognition of our efforts we were awarded the Ian Stevenson Award for Excellence in Public Engagement with Research in 2013 and the 2019 Stephen Fry Award for Excellence in Public Engagement with Research in 2019.



## SCPN Social Media

Do you follow our Instagram, Facebook and Pinterest pages? Although the majority of our social media presence can be found on Twitter, a special mention must be given to Lauryn Monahan who keeps our social media a happy and colourful place, with great images of cancer prevention messages.



**Join us on Twitter**

[www.twitter.com/thescpn](http://www.twitter.com/thescpn)



**Join us on Facebook**

[www.facebook.com/theSCPn/](http://www.facebook.com/theSCPn/)



**Join us on Instagram**

[www.instagram.com/thescpn/](http://www.instagram.com/thescpn/)



**Find us Online**

[www.cancerpreventionscotland.org.uk/](http://www.cancerpreventionscotland.org.uk/)



# Social Media Campaigns for Cancer Prevention

**#HealthyShelfie** January 2015 saw the creation of the #HealthyShelfie, a social media campaign designed to help raise awareness about great food choices for cancer risk reduction. After the festive excesses we focused on the content of fridge shelves, and asked/nominated our twitter followers to share their fridge contents with us and help illustrate all the healthy goodies that make up a healthy diet. Over the years many national and international charities joined in... and we still see those images coming in



**#AboutABike** Our social media campaign #AboutABike promoted cycling to encourage physical activity, as recommended in the European Code Against Cancer. The #AboutABike campaign was designed to encourage those who don't fancy Lycra but might just enjoy biking and increasing activity

levels, improving balance and seeing a bit more of the world in low gear.



**#Kettlecise** How much exercise can we fit in the time it takes for the kettle to boil? The SCPN developed a set of 13 simple "kettlecises" to keep you healthy and active throughout the day - and have a bit of fun while you're at it! As part of this social media campaign we have developed SCPN #Kettlecise posters free of charge for people to have up in their place of work and encourage more movement for cancer prevention. FREE POSTERS STILL AVAILABLE...email us at [scpn@cancerpreventionscotland.org.uk](mailto:scpn@cancerpreventionscotland.org.uk) to receive yours!

**#SackTheSnack** invited our followers to take the challenge of swapping one daily snack for alternative behaviours (such 200 stepping instead of chewing!), doing a little #kettlecise stretching

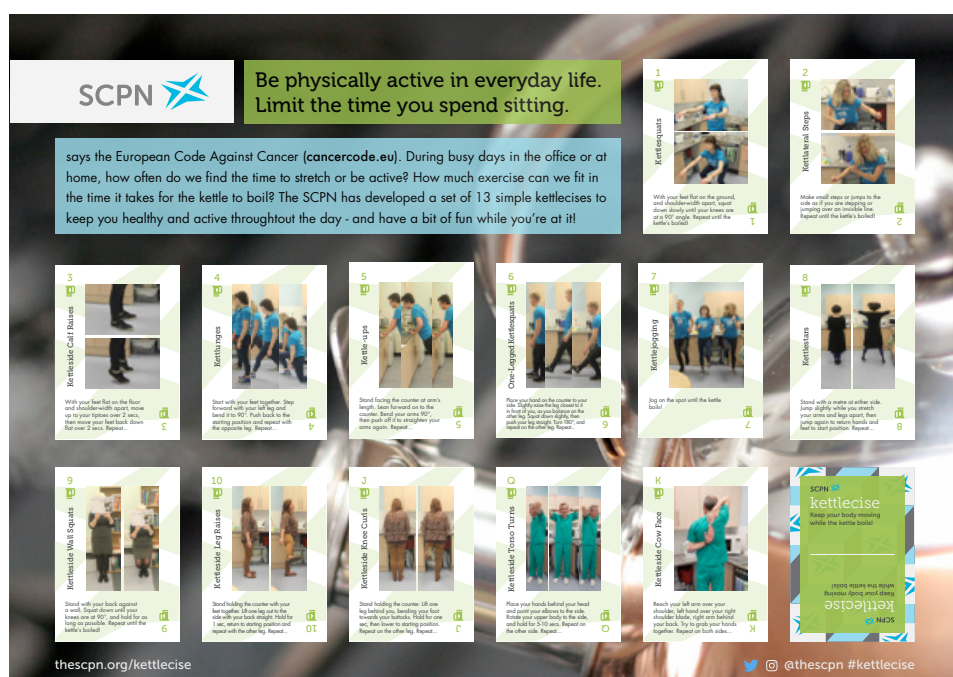
or maybe even standing and moving to take a short phone call.



**#SoupOnSaturday** February 2015 saw the launch of our #SoupOnSaturday campaign. This was followed by our #SouperFreshStart campaign in January 2018. Soup is quick and easy to make/store/transport when needed and all our #SouperFreshStart recipes are packed full of veggies. You can find all our recipes on our website [here](http://here).



**#WorksiteWander** As a network which aims to promote a healthy lifestyle to lower the risk of cancer, we ran a social media campaign throughout May 2019 to promote health in the workplace. Through our twitter page we encouraged our followers to join in with our #WorksiteWander to get more people taking part in physical activity during their lunch breaks.



## SCPN Blog

Since 2015 the SCPN blog (<https://scpnblog.wordpress.com/>) has gone from strength to strength and we now have over 5000 people signed up to receive our blogs straight to their inbox. Our blogs are varied and exciting and written by our own SCPN team or experts in the field of cancer and cancer prevention. The blogs cover a wide variety of topics relating to cancer prevention including obesity, physical activity, alcohol consumption and stopping smoking, and many often align with our social media campaigns.

Have you signed up to our blogs? Easy Peasy, quick reads to keep you up to date with news and views... [click here](#) to sign up today!

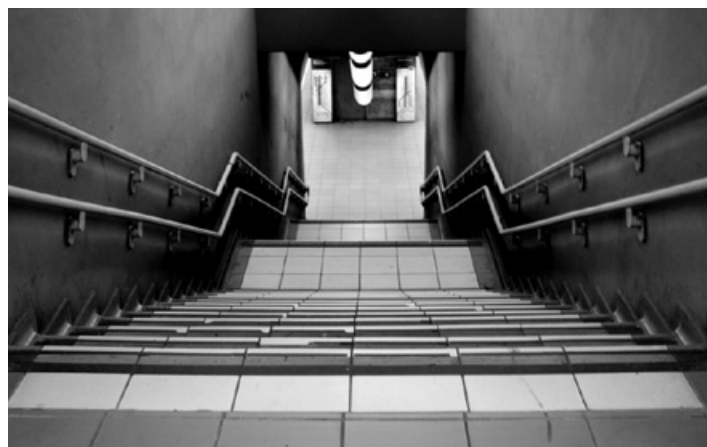
Here are our TOP blogs since 2015;



**The Japanese Diet Aka: “the healthy diet”**



**What If?**



**Just Go Left and Climb the Stairs!**



**CRUK: ‘Obesity is a cause of cancer’ – Obesity shaming vs public health communications**



**Alcohol – Finding the off switch #SoberOctober**



## The SCPN Art and Design Prize

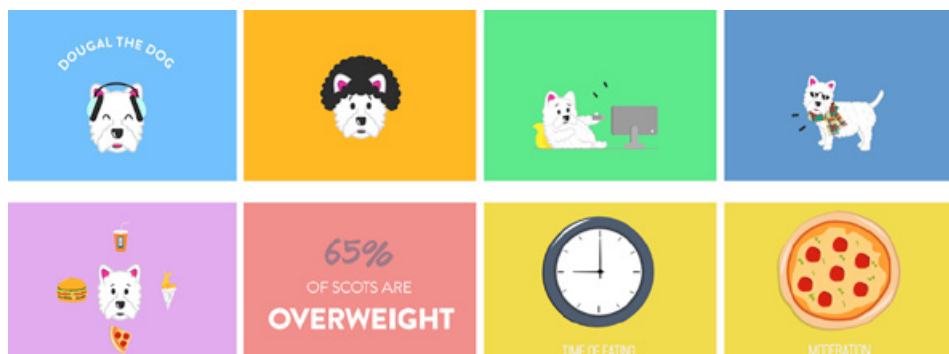
Despite the increasing body of evidence for cancer risk reduction, and the fact that incidence in Scotland is rising, public awareness of the links between lifestyle and cancer risk is relatively low. So creative messaging offers a nice opportunity to provide important information in a novel way

Supporting the most vulnerable communities to make lifestyle changes and empowering health professionals to facilitate positive health behaviours are key aspects of the SCPN's mission. There is much work to be done and strong leadership is needed in Scotland to turn

around the projected increase in cancer incidence.

For this reason, The SCPN looked to Scotland's young artists and designers to think about new ways to communicate the links between lifestyle and cancer risk, encourage cancer screening uptake and support others to make positive health choices. From 2011 we have run an annual £250 SCPN Art and Design prize which sought entries in any medium, and involved behaviours which are identified as impacting on our risk of developing cancer.

The winners of this annual prize have been varied including our most recent winner Kinga Elliot producing a painting titled 'Cartwheel' which encapsulated the joy physical activity can bring, our 2015 winner Stuart Clark designing a UV sensitive paracord bracelet that was aimed at 12-18 years olds to highlight UV exposure and our 2014 winner Alicia Storie who proposed a design for an innovative community supermarket dedicated to encouraging health living. All our SCPN Art and Design prize winners can be found on our [website](#) and we wish them all the luck in the future.



2011 - MARION LEAN, 2012 - FIONA MCKAY, 2013 - CALLUM REID, 2016 - DAVID BROOKS, 2017 - ERIN DOCHERTY IBRAHIM KARIM, 2018 - AMY STEINDL

## Seasonal healthy recipes

Each edition of the SCPN Newsletter has seen a variety of tasty recipes to help us lead a healthy lifestyle. Special thanks to Kellie Anderson (<https://kelliesfoodtoglow.com/>) who has provided us with many mouth-watering dishes. Here are some highlights of our recipes throughout the seasons:

### Spring

#### Watermelon and Tomato Breakfast Salad



<https://www.cancerpreventionscotland.org.uk/cook/watermelon-tomato-bfast-salad/>

### Summer

#### Summer Sunshine Ice Lollies – Pineapple & Strawberry



<https://www.cancerpreventionscotland.org.uk/cook/summer-sunshine-lollies/>

### Autumn

#### Kale, Sweet Potato and Popped Chickpeas with Hummus Sauce



<https://www.cancerpreventionscotland.org.uk/cook/kale-sweet-potato-and-popped-chickpeas-with-hummus-sauce/>

### Winter

#### Beetroot and Clementine Soup



<https://www.cancerpreventionscotland.org.uk/cook/beetroot-and-clementine-soup/>