

Abstract Form

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Title of abstract: Implementation of interventions addressing socioeconomic inequalities in cancer: A systematic review

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Background: Population-wide programs, based on 'equity to all' have improved cancer outcomes overall. However, disparities in cancer outcomes have continued for disadvantaged population groups. The efficacy of interventions in reducing socioeconomic inequalities in cancer-related outcomes is gaining interest therefore, considering the potential for these to be successfully implemented into practice is important.

Aims: (1) To identify the proportion of efficacious interventions in improving a cancer-related outcome for people in low socioeconomic areas and reducing the socioeconomic inequality; and (2) to explore the implementation potential of efficacious interventions.

Method: A systematic review was conducted using Cochrane (The Cochrane Central Register of Controlled Trials), EMBASE and PubMed in October 2018. Interventions evaluating socioeconomic inequalities within high-income countries and a cancer-related outcome, including behavioural change were eligible. Area-based measures of socioeconomic status were of interest.

Proctor et al.'s (2011) implementation science framework was used to assess the success of an intervention and its potential implementation into practice. The framework assesses acceptability, adoption, appropriateness, (implementation) costs, feasibility, fidelity, penetration and sustainability. Acceptability, appropriateness and costs were considered most relevant in terms of intervention sustainability in the long-term.

Odds ratios, with respective 95% confidence intervals (CIs) were presented to show an interventions effect on socioeconomic inequalities. Descriptive statistics were also used to analyse data.

Results: Of the 10,138 studies identified, sixteen reporting on 19 interventions were included. Seven interventions (37%) were evaluated as efficacious in improving attendance at cancer screening, visit (appointment) adherence or cancer survival. After applying Proctor et al.'s (2011) framework, only 4 (57%) interventions were assessed to have the potential to be successfully implemented into practice. These included enhanced reminder letters and GP-endorsed screening invitations. It is not possible to be certain of the implementation success when all were early-stage interventions.

Implications that impact on your project: Interventions may be efficacious in a study environment, but this is irrelevant if they have not been designed or reported in a way that supports successful implementation. Considering the specific needs of the population being targeted, and the environment the intervention is planned to be delivered in are important indicators for application in the 'real-world'.