

Race & Health

Seminar Four: Women's Cancer Awareness

20 November 2025, 6-7pm



The purpose



WHY are we doing this?

- People's **health and wellbeing** are affected by many things – like their **background, culture, and life experiences**.
- In a diverse place like **Newham**, it's important to understand how **ethnicity connects to health**, so we can make things fairer for everyone.



HOW are we doing this?

The events will be hosted **online every 2 month** on different topic to develop more **knowledge** and **awareness** of:

- The **data** and **academic evidence** of the relationships between ethnicity, health and wellbeing
- The **real live experiences** of people from different ethnicities around their health and wellbeing, and their family and friends
- The **support, services** and **resources available** for people.



WHO is leading this?

- The topics will be chosen by the **Newham Race Equality Forum** and the **Public Health team**.
- They'll focus on issues where some ethnic groups face **unfair differences in health**.

Guest speakers and their slides



NEWHAM CENTRE FOR HEALTH
AND CARE EQUITY



- **Cervical cancer and HPV, womb (uterine) cancer, ovarian cancer, vaginal and vulval cancers.** Caroline Cook, NEL Cancer Alliance (*slides 4-17*)
- **Prevent breast cancer.** Martha Thomas-Hancock, Prevent Cancer UK (*slides 18-43*)
- **Breast Screening.** Tara Mansi, North London and Central and East London Breast Screening Service, Royal Free London NHS Foundation Trust (*slides 44-58*)
- **Touch-Feely: Breast Cancer Charity.** Nellie Gbadebo, cancer advocate (*slides 59-66*)

Women's Cancers

20th November 2025

Health and Diversity – Women's Cancer Awareness

Caroline Cook

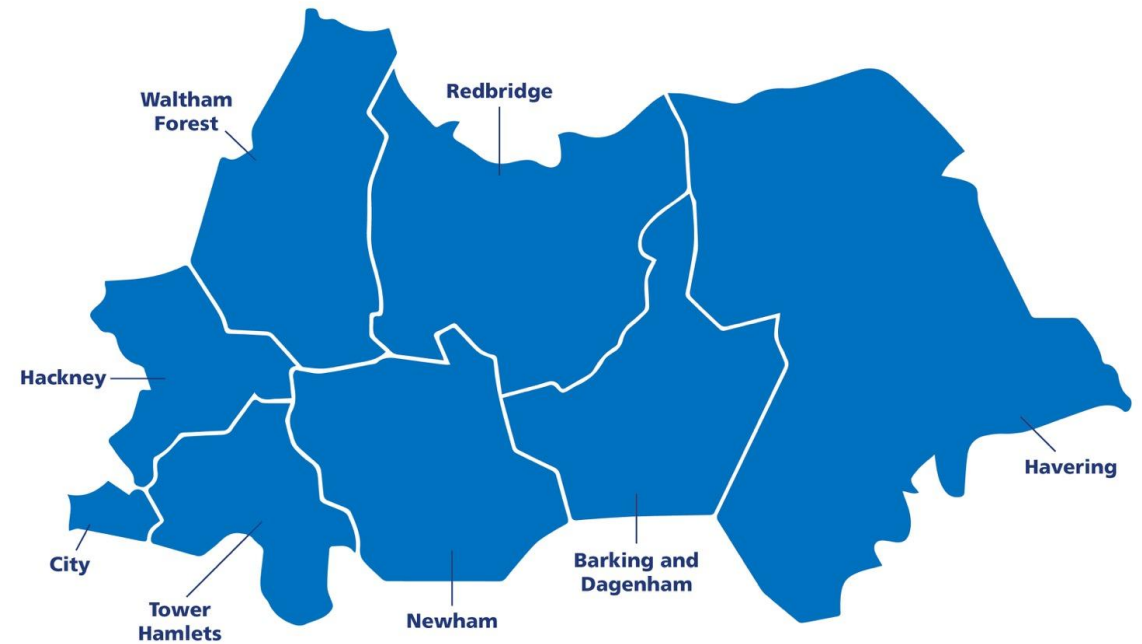
Early Diagnosis Programme Lead
North East London Cancer Alliance



- Context
 - What is a Cancer Alliance?
 - Early diagnosis
- Cervical cancer and Human Papilloma Virus (HPV)
- Womb (uterine) cancer
- Ovarian cancer
- Rarer women's cancers
 - Vaginal and vulval

What is the North East London Cancer Alliance?

- We are part of the NHS and 1 of 20 Cancer Alliances in England
- We are a team working across all 7 boroughs of North-East London, to improve cancer care and outcomes.
- We work collaboratively with local people, doctors, hospitals and community groups and many other groups and organisations.
- We want **everyone** to have **fair and equal access** to cancer care. To make this happen, we work to:
 - Prevent cancer
 - Spot cancer sooner
 - Provide the right treatment at the right time
 - Support people and families affected by cancer



- **Why raise awareness?**

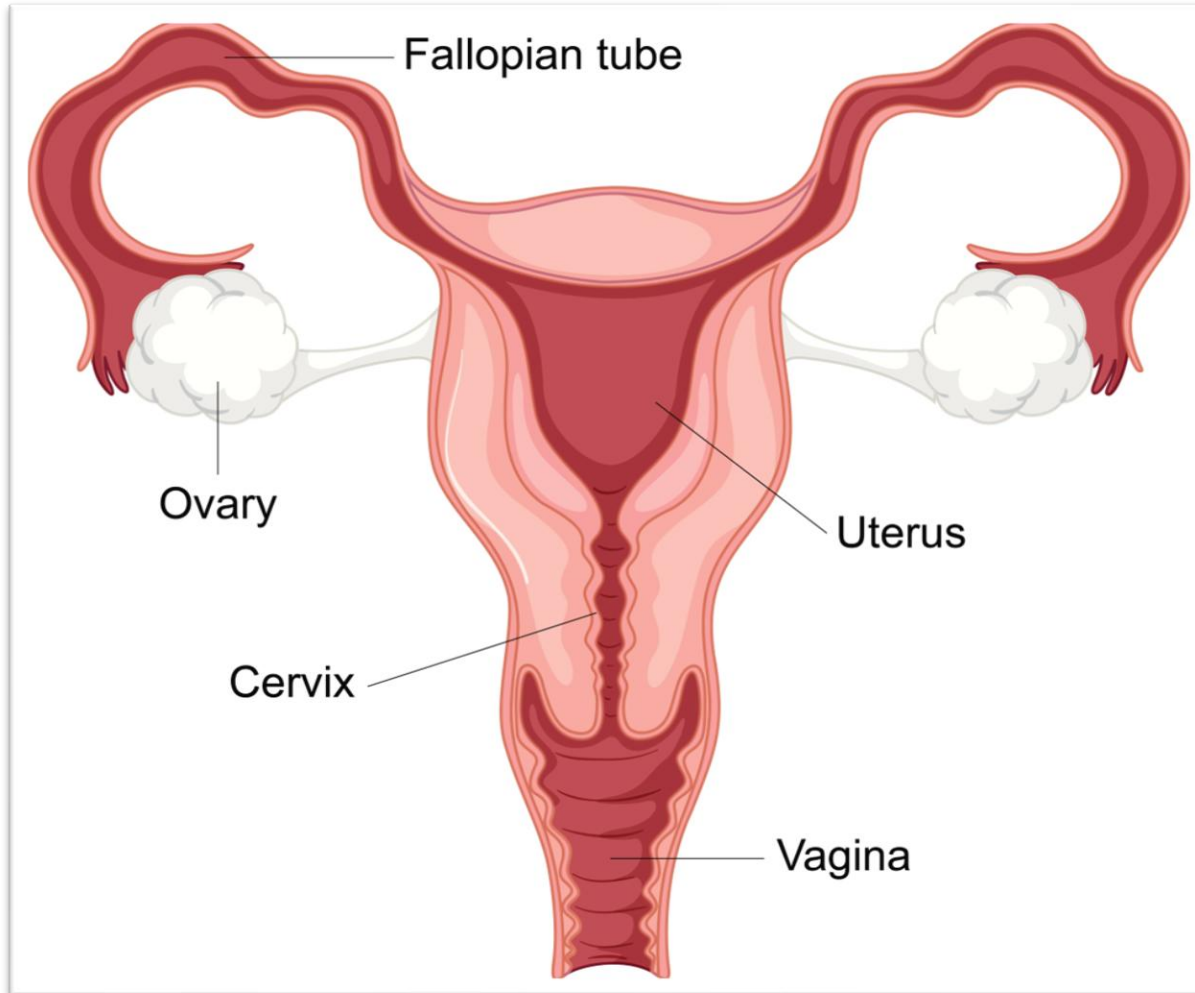
- Not all cancers can be prevented.
- Remove barriers, fear and address myths.
- Empower people to seek medical advice early.
- Early diagnosis =
 - Less need for invasive procedures
 - Less likely to need more toxic treatments
 - Better outcomes

- **Women's cancer/women's health**

- Affect anyone who has a womb, ovaries, cervix, vagina or vulva, including:
 - CIS gendered women
 - Trans men, who have not had gender affirming surgery
 - Non-binary people assigned female at birth

Before we start

Female reproductive organs



What is the menopause?

- Menopause is when your periods stop due to lower hormone levels.
- It usually affects women between the ages of 45 and 55, but it can happen earlier or later.
- Perimenopause is when you have symptoms of menopause, but your periods have not stopped.
- Perimenopause ends and you **reach menopause when you have not had a period for 12 months**

Cervical cancer

Facts

- 14th most common cancer in females in the UK.
- Affects about 3,300 women in the UK each year.
- Most common in women in their early 30's.
- Trans men and non-binary people assigned female at birth can develop cervical cancer if they still have a womb and cervix.
- Most cervical cancers are caused by human papillomavirus (HPV).
- About 70% of cervical cancers are caused by two HPV variants.

Risks

- Age – more common in younger women (30s)
- HPV – most cervical cancers are caused by HPV
- Sexually Transmitted Infections
- HIV
- Smoking
- Contraceptive pill
- Family history - increased risk of squamous cell carcinoma (SCC) if your mother, sister or daughter has had cervical cancer.

What you need to know about HPV

- The human papillomavirus (HPV) is a common virus that infects the skin and cells lining the inside of the body, including the mouth, throat, and genitals.
 - About 8 out of 10 people will be infected with HPV at some point in their lives.
- Hundreds of different types of HPV - 14 'high-risk' types increase the risk of some types of cancer.
- Usually has no symptoms – most people most people will never know they have had it.
- Commonly spreads through close skin-to-skin contact - during sexual activity, including vaginal, anal, or oral sex.

The HPV vaccine

- Helps to prevent cancer by protecting against 9 high risk types of HPV.
- All children aged 11-13 in the UK can get the vaccine.
 - Anyone up to the age of 25 who missed their vaccine can get it for free.
 - Men who have sex with men (up to the age of 45), and some transgender people (up to the age of 45) are also eligible for a free vaccine.
- A 2021 study found that cervical cancer rates were reduced by almost 90% in women in their 20s in England, who were offered the vaccine aged 12-13
- The HPV vaccine has been proven to be **safe** and **effective** at protecting against HPV and reducing HPV infections.

Cervical cancer screening

- Cervical screening looks for changes in the cells that **may** lead to cancer – it is not a cancer test.
- Who can be screened:
 - Women and people with a cervix (trans and non-binary people) aged between 25 and 64.
- Eligible people will be invited for an appointment.
- The test is usually done in a GP practice by a practice nurse, but sometimes it may be a GP.
 - The nurse/GP will take a sample of cells from the cervix using a soft brush.
 - The lab will look for Human Papilloma Virus (HPV), which causes most cervical cancers.
 - If HPV is found, they will look more closely at the cells to see if there are changes.
 - If changes are seen, you will be offered a colposcopy, which involves looking at the cervix with a camera.

From 2026, the cervical screening service will offer self-screening to women who have not booked an appointment within 6 months of being invited.

Myth busting and overcoming fears

I'm afraid it will hurt

Will people think I'm promiscuous?

Will I lose my virginity?

I'm afraid the doctor or nurse will be a man

Will screening test for all women's cancers?

I don't need cervical screening as I'm not in a sexual relationship.

I don't have any symptoms

Eliminating Cervical Cancer

- 2023 - World Health Organization's (WHO) plan to eliminate cervical cancer by 2040.
- NHSE in London – eliminate cervical cancer by 2030.
- How can we do this?



90% of girls receive HPV vaccine by age 15.



70% of women screened using a high-performance test by the age of 35 and, again, by the age of 45



90% of women identified with cervical disease receive treatment (i.e. precancer treated and invasive cancer managed)



Womb (Uterine) Cancer



**YOU
NEED
TO
KNOW**

**Bleeding after the
menopause is *not* normal**
Tell your doctor. Get it checked.

www.nelcanceralliance.nhs.uk/youneedtoknow



- Most commonly affects the womb lining.
- 4th most common cancer in women in the UK - 9,800 women per year.
- More common in Black and South Asian women – also diagnosed later.
- Mostly affects people over 40.
- Common symptoms:
 - **Bleeding after menopause**
 - Bleeding between periods
 - Abnormal discharge - may be pink
- Risks include:
 - Age
 - Being overweight
 - Hormones (oestrogen), oestrogen only HRT and Tamoxifen
 - Family history
 - Polycystic ovary syndrome
 - Diabetes

Ovarian cancer

- About 7,600 women diagnosed each year - 6th most common cancer in women.
- More common in White ethnic groups, than Black or Asian.
- Common symptoms
 - Bloating
 - Pain – particularly the tummy or pelvis
 - Feeling full quickly
 - Needing to pee more often
- Risks
 - Age (most diagnoses in those aged between 75 and 79)
 - Family history/genes
 - Being overweight
 - Smoking
 - HRT



The advertisement features a woman with curly hair against a purple background. In the top right corner is the NHS North East London Cancer Alliance logo. In the top left corner is the logo for 'the eve appeal the gynaecological cancers charity'. Overlaid on the woman's chest is a square graphic with an orange and brown abstract pattern and the text 'YOU NEED TO KNOW' in white. Below the woman, the text reads: 'Persistently bloated? Change in bowel or eating habits? It could be ovarian cancer. Tell your doctor. Get it checked.'

NHS
North East London
Cancer Alliance

the eve appeal
the gynaecological cancers charity

NHS
North East London
Cancer Alliance

**YOU
NEED
TO
KNOW**

Persistently bloated?
Change in bowel or eating habits?
It could be ovarian cancer.
Tell your doctor. Get it checked.

Vaginal and vulval

- Both rare cancers
- HPV present in more than 9 out of 10 vaginal cancers and 7 out of 10 vulval cancers.

Vaginal	Vulval
What to look out for	
• Bleeding between periods, after the menopause or after sex. • Smelly or blood stained vaginal discharge • Pain during sexual intercourse • A lump or growth in the vagina that you can feel • Constipation or feeling unable to completely empty your bowels. • Swelling in your legs (oedema) • Pain in the pelvic area that won't go away • Pain when going for a wee, blood in your wee, or going more often than usual.	• An open sore or growth visible on the skin • A persistent itch • Bleeding • Pain or soreness • Thickened, raised, red, white or dark patches on the skin • A mole that changes shape or colour • A lump or swelling in the groin • Burning pain when you pass urine
Risks	
• Age • Cancer of the cervix or pre-cancerous cell changes • HIV infection • Weakened immune system	• Age • Weakened immune system • Lichen sclerosus • Vulval intraepithelial neoplasia (VIN)

Useful resources

- Charities
 - [We are the leading gynaecological cancers charity - The Eve Appeal](#)
 - [Cervical cancer | Cancer Research UK](#)
 - [Endometrial cancer | Uterine cancer | Womb cancer](#)
 - [Ovarian cancer | Cancer Research UK](#)
 - [Cervical Screening | Smear Test | Cancer Research UK](#)
- HPV
 - [Human papillomavirus \(HPV\) – NHS](#)
 - [Infections \(e.g. HPV\) and cancer | Cancer Research UK](#)
- Cancer Alliance resources
 - [You Need to Know | North East London Cancer Alliance](#)
 - [Stop HPV. Protect Yourself. Get Vaccinated | North East London Cancer Alliance](#)
 - [Episode 8: Spotting symptoms of womb, cervical and ovarian cancers](#)

Martha Thomas-Hancock

The logo for 'prevent breast cancer' features a stylized 'p' composed of three overlapping circles in blue, light blue, and pink. To the right of the 'p', the words 'prevent', 'breast', and 'cancer' are stacked vertically in a white, lowercase, sans-serif font.

Using Science To Save Lives

The logo for 'Newham London' features a large, thin, pink arc that starts above the 'N', curves over the word 'Newham', and ends below the word 'London'. The words 'Newham' and 'London' are written in a dark grey, sans-serif font.

A smaller version of the 'prevent breast cancer' logo, featuring the stylized 'p' and the stacked text 'prevent breast cancer' in pink.

A circular logo with a pink border. Inside the circle, the words 'Your health matters' are written in a pink, sans-serif font, arranged in three lines.

Health Inequalities- What Are They?

These are unfair and avoidable differences in health care between different groups of people due to their social situation - such as their ethnicity, financial background, age or where they live.

Breast cancer survival rates have improved across the UK, but some communities still face poor outcomes.



Health Inequalities- What Are They?

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How do Health Inequalities affect breast cancer?

- Black and South Asian women are less likely to attend their breast screening appointments
- Black African and Caribbean women are more likely to be diagnosed with late-stage breast cancer
- Black women are more likely to develop triple-negative breast cancer – which is an aggressive type that is harder to treat
- Survival rates for Black and South Asian women are lower compared to white women



What is Cancer?

Our bodies are made up of lots of tiny cells

Normally new cells are made when they are needed

In cancer these cells grow out of control - this is called a tumour

The cancer cells cannot be removed by the body's normal defence systems

Cancer can happen in any part of the body

Breast cancer is the most common cancer for women in the UK

Anyone can get breast cancer

You **cannot** catch breast cancer from another person

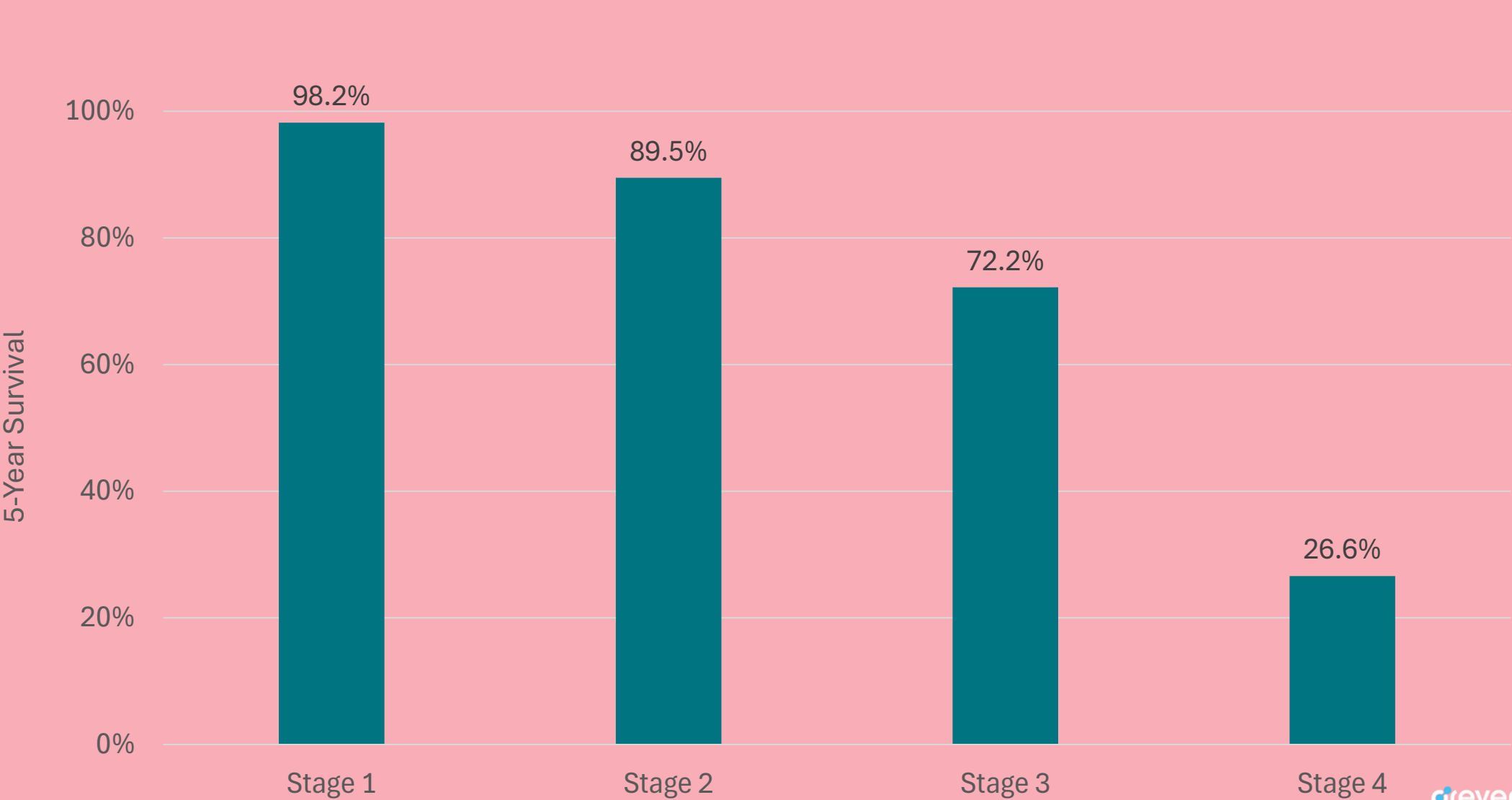
Breast cancer has **nothing** to do with being clean or dirty

Nearly 57,000 people get breast cancer every year in the UK

Sadly around 11,500 people still die from breast cancer every year in the UK

**Twice as many people survive
breast cancer now than 50 years
ago.**

Survival of Breast Cancer by Stage of Diagnosis (CRUK 2018)



Finding Cancer Early Could Save Your Life



Check Your Breasts

Get to know how your breasts usually look and feel, so you can spot any changes

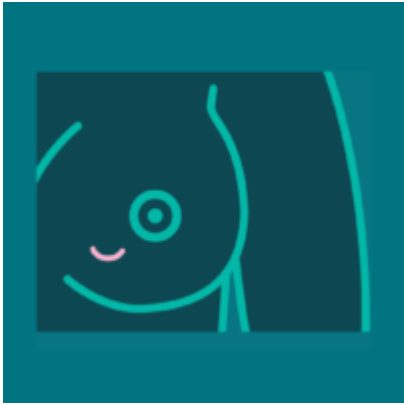


prevent
breast
cancer

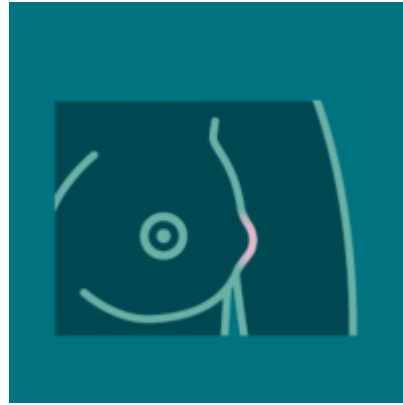
Your
health
matters

prevent breast cancer

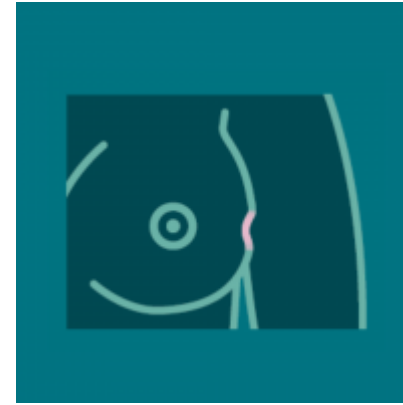
What to look out for



A lump in
the breast



Swelling of
all or
part of
breast

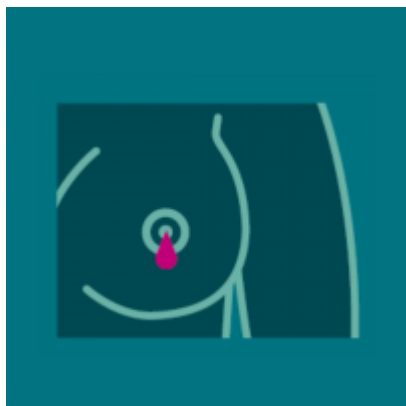


A dimple on
the skin / the
skin pulls
inwards



The nipple
pulls into the
breast instead
of sticking out

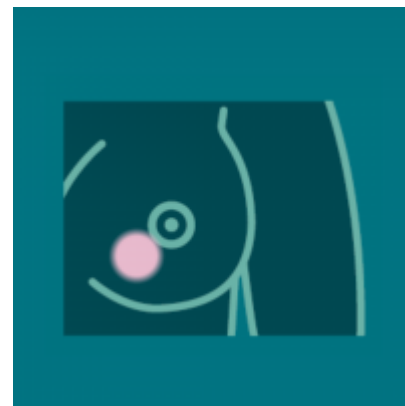
What to look out for



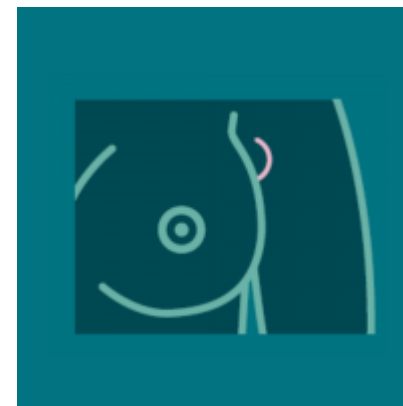
Blood or liquid
leaks from the
nipple



There is a
rash or skin
feels rough



Skin is red
and hot



A lump
under your
arm (armpit)

prevent
breast
cancer

Your
health
matters

**What should you DO if you spot a
change in your breasts?**

Lower your risk of getting Breast Cancer

23%-30% of breast
cancer cases could be
prevented by making
healthy lifestyle choices

prevent
breast
cancer



Try to be a healthy weight

- Eat more fruit, vegetables & wholegrains
- Eat less sugar and fat



Exercise

- 35 to 45 minutes five times a week
- Anything that makes you breathe harder and makes your heartbeat faster
- It does not need to be hard—even a fast walk will do



Breastfeeding

Breastfeed your baby for at least six months if you can



prevent
breast
cancer

Your
health
matters

Alcohol

Women who do not drink alcohol have a lower risk of breast cancer than those who do drink



Stop smoking

Smoking can
cause 16
different types
of cancer –
including
breast cancer



How Can We Look After Our Breasts?

Check our breasts once a month

See a doctor if we find something unusual

Make healthy lifestyle choices

Go for Breast Screening when invited

Can You Help to Spread the Word?

prevent
breast
cancer

Your
health
matters



QR Codes for Videos on How to Check Yourself!



Greater Manchester Cancer Alliance Intervention Videos



The videos are targeted at **Black African, Black Caribbean and South Asian women**, and were co-developed with local community groups

“Don’t be scared to get checked” – new campaign dispels fears around breast cancer - Greater Manchester Cancer

Thank you!

martha@preventbreastcancer.org.uk



prevent
breast
cancer

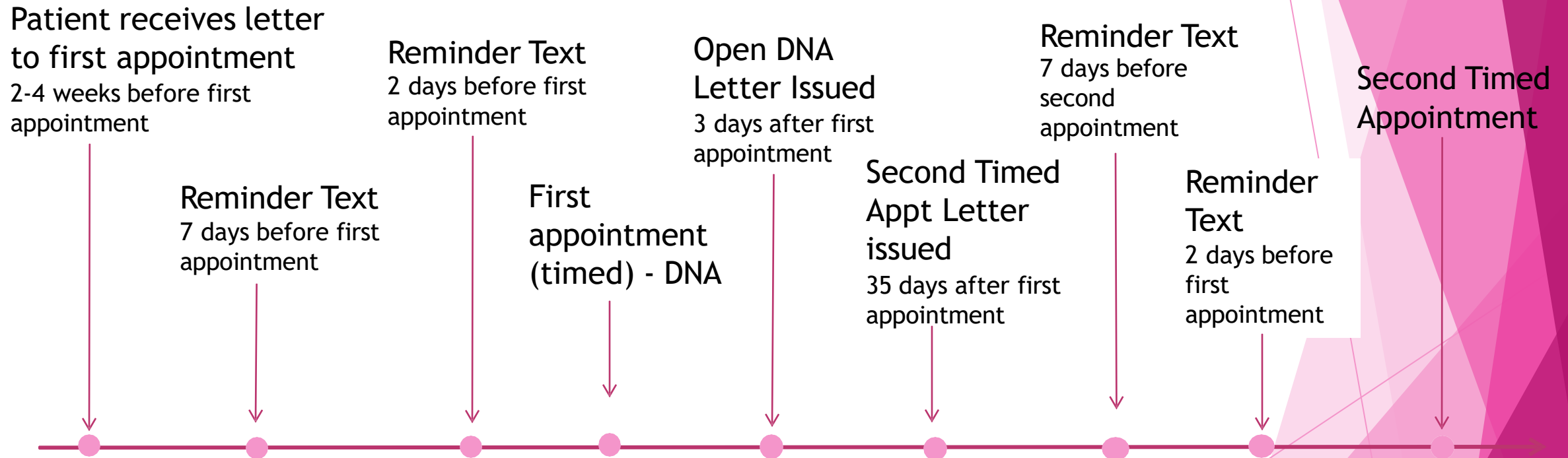
Your
health
matters

North London and Central and East London Breast Screening Services

Breast screening

- ▶ Breast screening helps to find changes in your breasts when they are too small to see or feel. This means cancers can be found earlier when they are more treatable.
- ▶ Women who are healthy and who are not known to have breast cancer are invited to breast screening.
- ▶ Everyone registered with their GP as female and aged between 50 and 71 will be invited every three years, with the first invite arriving before your 53rd birthday.
- ▶ Women over 71 can self-refer by calling the Hub.

Screening timeline



Breast screening



- ▶ At breast screening, you will always be seen by a **female** mammographer.
- ▶ She will check your details and ask you to undress to the waist and stand in front of the machine.
- ▶ Translators or iPads with Google Translate are available at all sites.

Breast screening

- ▶ The mammographer will position the breast, then lower the plastic plate to flatten the breast.
- ▶ She will go behind the screen when the x-rays are taken.
- ▶ Two pictures will be taken of each breast; one from above and one from the side.
- ▶ It might feel uncomfortable but will not last long.



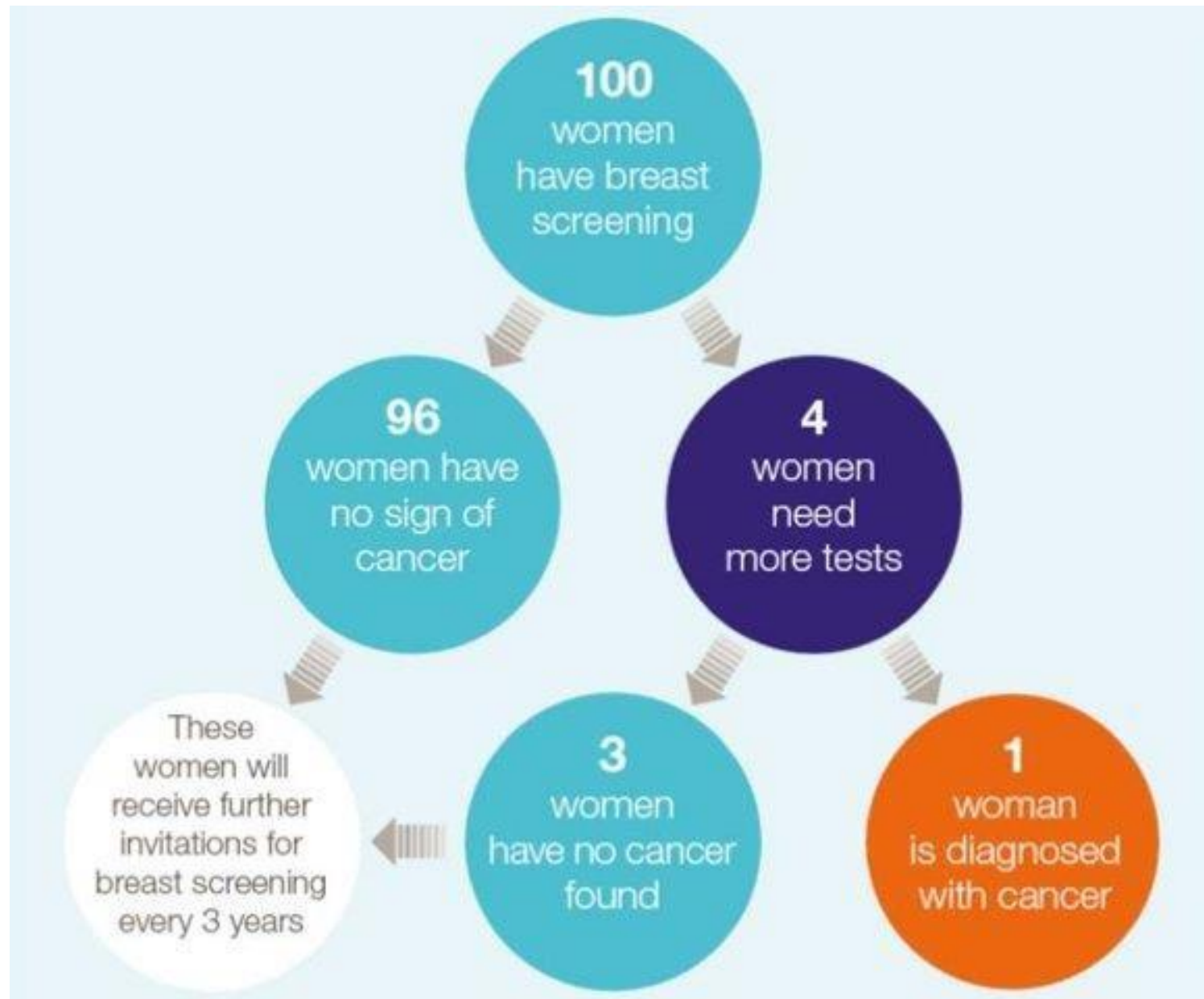
Each circle below represents
the average-sized lump found by:



© Canadian Cancer Society. The registered trademark owner of the 'Thingymaboob' diagram.

Further tests

- ▶ If something new or unusual is seen on your mammogram, you will be asked to attend an assessment clinic for further tests.
- ▶ This does not mean you have cancer, but it is still important to attend.
- ▶ Further tests include more mammograms, an ultrasound and a biopsy.
- ▶ If you would like a female doctor, you can call before your appointment and ask to see one.



NHS High risk screening programme

NHS High risk screening pathway

- ▶ The high-risk screening pathway is for women with an increased risk of breast cancer, such as those with a family history.
- ▶ The high-risk screening programme can involve more frequent screening, including before the age of 50. Women at high risk may be offered MRI scans as well as mammography.
- ▶ GPs should refer patients to an oncology or genomic specialist who will assess the patient's risk and decide whether to refer them into this pathway.

Newham focus

Areas **All in your area list** All in England

[Show 95% CI values](#)

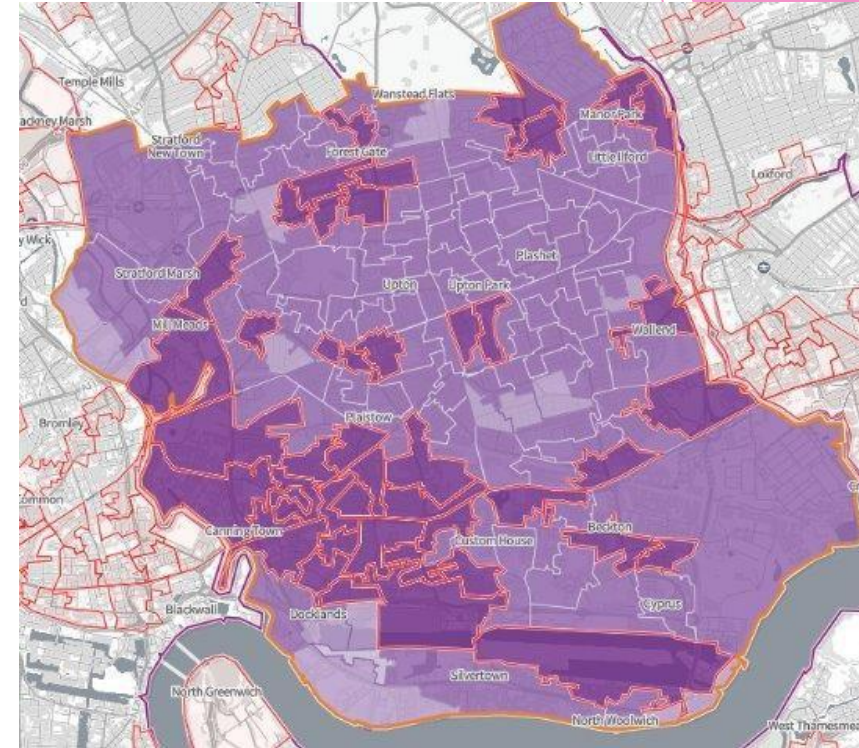
Area ▲▼	Recent Trend	Count ▲▼	Value ▲▼	
England	→	1,745,390	70.4	
Newham PCNs	—	6,835	55.2*	
Newham Central PCN	→	1,070	57.1*	
South One Newham PCN	↑	1,435	57.1*	
Newham North West 2 PCN	↓	520	55.6*	
Docklands PCN	↑	1,445	55.2*	
Stratford PCN	→	945	54.9*	
Newham Central 1 PCN	→	975	54.6*	
Newham North East 2 PCN	→	170	53.1*	
Newham North East 1 PCN	→	135	45.0*	
North Newham PCN	→	140	43.8*	

Source: NHS England, Breast Screening Programme

[Indicator Definitions and Supporting Information](#)

Newham Index of Multiple Deprivation (IMD)

- ▶ Newham's Index of Multiple Deprivation average score is **29.58**. The England-wide Index of Multiple Deprivation distribution is 0.54 to 92.73 with a mean value of 21.67.
- ▶ Canning town, Plaistow, Mill Meads, Forest Gate, Manor Park - among highest IMD
- ▶ Red outlines: CORE20 populations

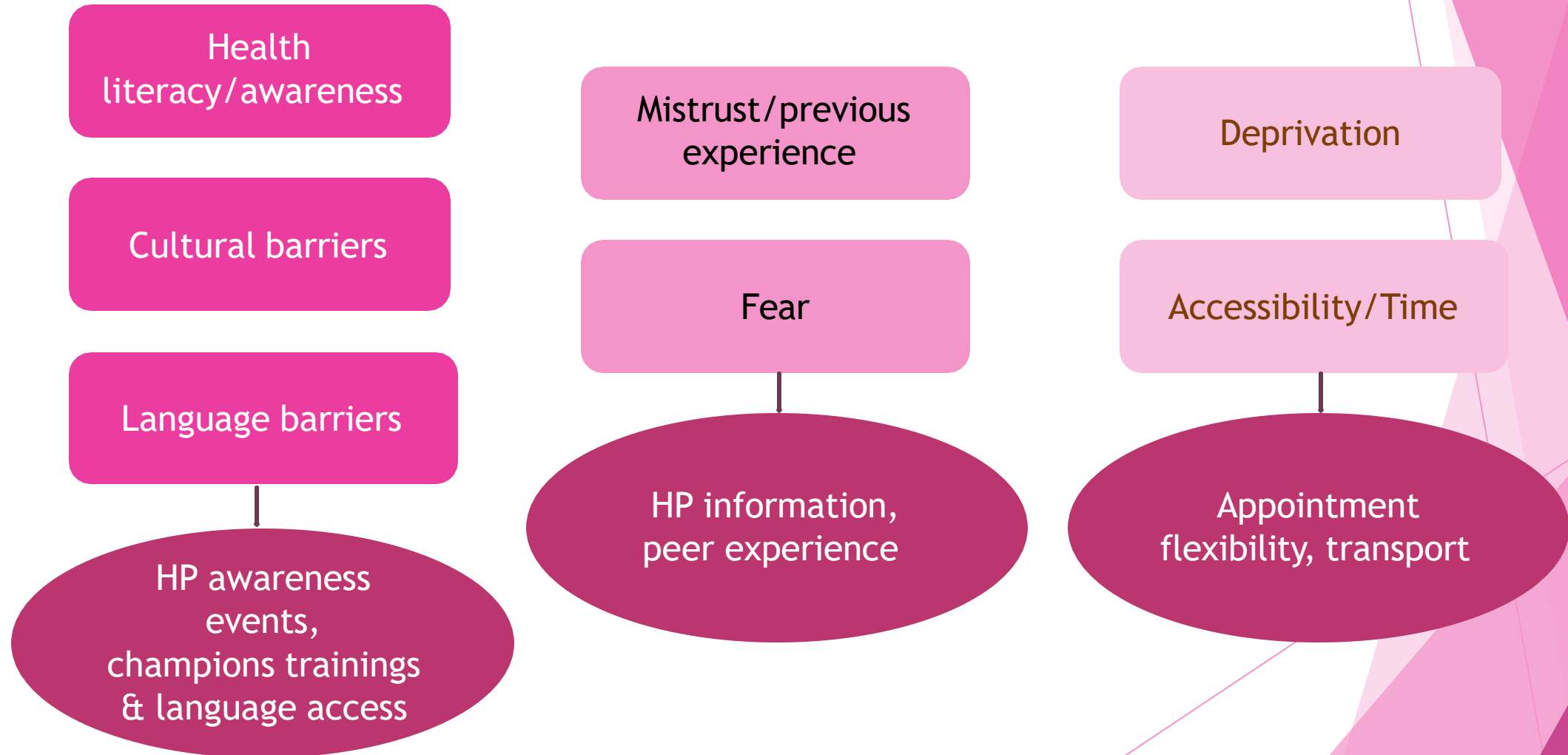


Newham Ethnicity

Newham's population in the 'Asian/Asian British: all' ethnic group is **42.21%** within a range of 13.37% to 80.54% across 185 LSOAs.

The England-wide LSOA distribution is 0% to 96.27% with a mean value of 8.61%.

Barriers to screening



Newham Focus

HP team supported events for:

People with
Learning
Disabilities/Autism

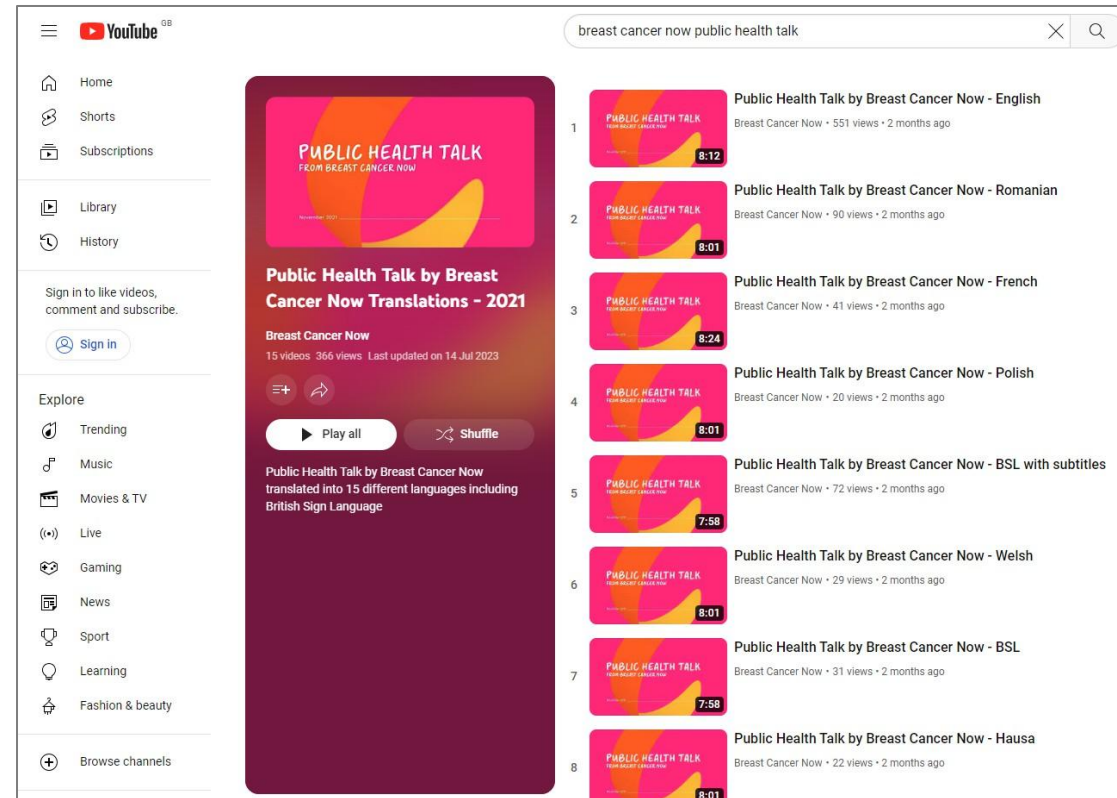
People Experiencing
Homelessness

People from Ethnic
Minorities

In partnership with
PCNs

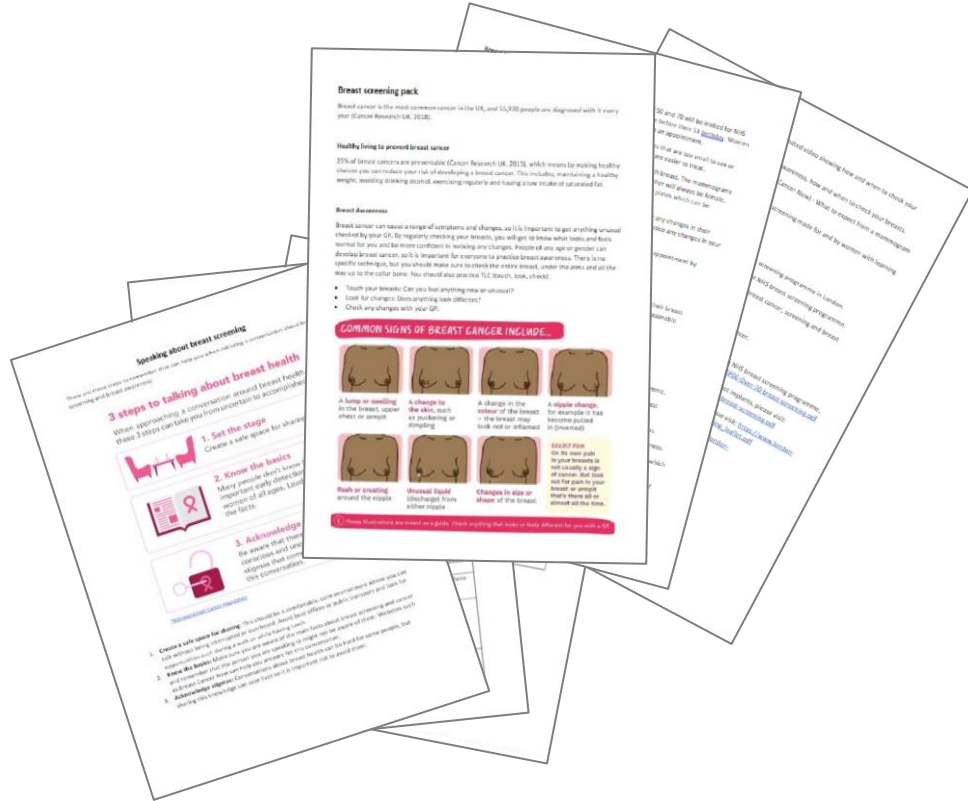
Community
awareness/Podcast

Public Health Talk (Breast Cancer Now)



<https://www.youtube.com/playlist?list=PL0EcG3ori88w6RJRMplQmfWqHSry-04EH>

Resources - links in notes



Links to resources:

Breast Cancer Now Resources: <https://breastcancernow.org/download-and-order-publications>

Easy read guide to breast screening:

https://assets.publishing.service.gov.uk/media/67acc2e937726e9056af60b6/An_easy_guide_to_breast_screening_Feb25.pdf

Guide to NHS breast screening:

<https://www.gov.uk/government/publications/breast-screening-helping-women-decide/nhs-breast-screening-helping-you-decide>

Information for women over 71:

<https://www.gov.uk/government/publications/breast-screening-for-women-aged-71-or-over>



THE #1 CREATIVE AND CULTURAL VOICE
FOR THOSE AFFECTED BY CANCER.





Scan for our Instagram



Scan for our Website

Who We Are

Touchy-Feely exists to ensure that people from ethnic minority backgrounds receive the **culturally competent** cancer care they **deserve**. We are the UK's leading creative and cultural voice for those affected by cancer, **a safe haven to over 1,000 black cancer patients & survivors**.

Our mission is to improve patient care and health equity by **redefining** how cancer is seen, spoken about, and addressed within under-represented communities. Through campaigns, films and patient programmes, we **humanise data**, challenge bias, and help healthcare professionals provide better care to patients.





Founder of Touchy-Feely: Nellie Gbadebo

Touchy-Feely was founded by Nellie, whose own journey through breast cancer revealed a stark **gap** in representation and **support** groups for Black women diagnosed with cancer. Diagnosed just three months after giving birth, she searched for images, stories, and voices she could relate to - but found very few. There was little **visibility** of pregnancy and cancer & no narratives that reflected her lived reality.

Her diagnosis came after discovering a lump during her second pregnancy, a concern initially **dismissed** by her midwife. By the time it was taken seriously, the cancer had spread from her breast to her lymph nodes. Out of this personal and painful experience, Nellie created Touchy- Feely: an organisation dedicated to sharing the stories often marginalised, ensuring that no woman feels **neglected** in her fight, during and post cancer.



Our Mission

Our mission is to make cancer care culturally competent, emotionally intelligent, and rooted in real representation.

We work at the intersection of community and healthcare, partnering with organisations and leaders such as the **NHS**, Wes Streeting MP, and other health bodies to **reshape the systems** that have historically failed marginalised communities.

Through our **campaigns, creative advocacy**, and **community programmes**, we spotlight the lived experiences of the patients excluded from mainstream narratives, not for awareness alone, but to **drive tangible change** in how patients are **treated**, supported and **understood**.



What We Do

Our storytelling is not decorative. It is a form of data, lived experience that reveals the realities statistics alone cannot show.

Every story shared becomes a catalyst for change:

- It saves lives by **encouraging** earlier **self-examination** and **self-advocacy**.
- It dismantles stigma by making **conversations** about cancer, recovery, and body image possible in our **communities**.
- It breaks taboos by creating culturally safe spaces where **Black women** can speak freely, without **judgement**.
- It **educates** healthcare professionals by showing what **clinical inequity** looks like in real life.

When healthcare systems reflect the people they serve, trust is rebuilt, treatment improves, and outcomes change.

Representation is not symbolic, it is clinical.
It shapes diagnosis, treatment, and **survival**.

It gives patients the confidence to seek care, and clinicians the awareness to provide it.

Touchy-Feely's work ensures that visibility becomes protection and that every Black woman's story is recognised as both evidence and power.

Why Our Work Matters

Cancer doesn't **discriminate**. But care **does**. Representation and policy changes aren't optional. **They're life-saving.**

Across the UK, cancer outcomes remain unequal. While overall survival rates are improving, **BAME women continue to experience the lowest rates of early diagnosis, the poorest access to screening, and the longest delays in treatment.**

- Black and Brown women are up to **twice as likely** to be diagnosed at Stage 3 or 4 **compared** to white women.
- Only **49 percent of Black African women** invited to NHS breast screening attend, compared with around **67 percent of white women.**
- When diagnosis is delayed, and when tumours are more aggressive, survival chances diminish.

These are not isolated figures. They are evidence of systemic neglect, the product of a healthcare system not built with the Black woman in mind.



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Our Impact

Touchy-Feely bridges the gap between **community experience** and healthcare **systems**; using culture, advocacy, and storytelling to drive measurable **change**.

- **Community Reach**
 - Over 1,000 women engaged through events, workshops and campaigns.
 - Trusted community partnerships across **Newham, Lambeth** and **Southwark**.
 - Consistent access to culturally competent wellbeing spaces.
- **Representation in Public Health**
 - Campaigns like '**Forgotten Faces of Breast Cancer**' have **reshaped national awareness** imagery and language.
 - Collaborations with the **NHS, Wes Streetering MP, Councils**, and **Charities** amplified authentic representation.
- **Behavioural Change & Awareness**
 - Participants report increased confidence in **self-examination** and **advocacy**.
 - Campaigns have reached over **1 million** digital impressions, proving community appetite for culturally relevant health education.
- **Health Equity & Systemic Change**
 - Active collaboration with NHS Equality and Inclusion teams to embed **patient voice in strategy**.
 - Contributing to early frameworks for **culturally competent oncology care and training**.
- **Emotional & Cultural Impact**
 - Created a safe community that restores agency, **dignity** and joy to Black women navigating cancer.
 - Reframing survivorship as emotional, cultural and **collective healing**.





Support Us

Touchy-Feely exists because of people and partners who believe that receiving equitable cancer care shouldn't be based on the colour of your skin.

Every contribution, financial, creative, or collaborative, helps us reach **more** women, implement **more** change, and change **more** outcomes.

Ways to Support

- **Fund Our Work** - Provide unrestricted or project-specific funding that fuels our community programmes, campaigns and research.
- **Partner With Us** - Co-create awareness events, policy roundtables or health-equity campaigns alongside our team.
- **Offer Space or Services** - Venues, wellness practitioners, services and facilitators help us keep community events accessible and impactful.
- **Corporate & Brand Sponsorships** - Align your brand with a purpose led organisation shaping real health and social change.

**Your support allows us to keep doing what the system does not;
to see, hear and care for the women most at risk of being overlooked.**

CEO & Founder:

Nellie – nellie@touchy-feely.org

<https://touchy-feely.org>



Your voice matters

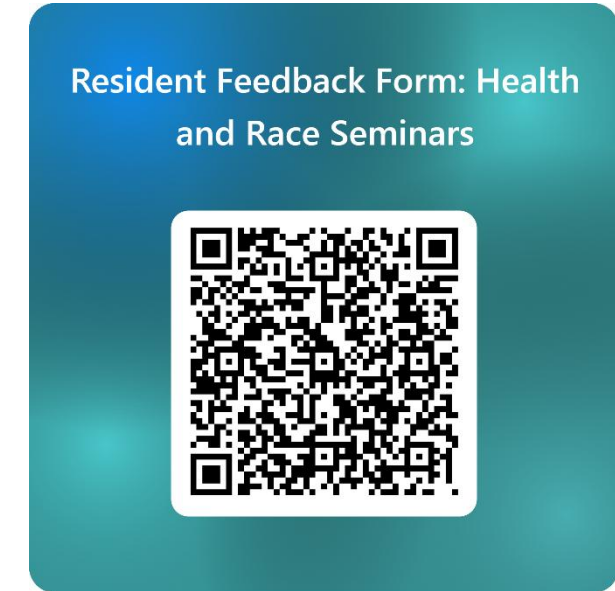
Feedback



To bring you more sessions like this, we'd love to hear your feedback on:

- How would you rate overall today's session?
- What did you enjoy the most?
- What could be improved in the future sessions?
- What would you like next?
- What other health topics would you like us to cover in the future sessions?

Share with us your feedback by completing short form <https://forms.office.com/e/924yvXNWaM> or email to communityhealthchampions@newham.gov.uk



Next session : 15 January 6-7pm on Zoom

Theme: Men's Cancer Awareness

Where: Online (Zoom). Reminder e-mail with log in details will be sent to those who have registered.

Register here or scan QR code:
<https://forms.office.com/e/1RzJgNR6aG>

For any questions, contact
communityhealthchampions@newham.gov.uk

Thank you!

newham.gov.uk



WE ARE NEWHAM.