



Cervical Cancer Screening Knowledge & Attendance Amongst Black Women

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Background

- Cervical cancer remains the commonest cancer in women under the age of 35 and yet cervical cancer screening can prevent up to 80% of cases of the disease
- Up to 3000 women are diagnosed per year
- Up to 1000 women die per year despite screening
- Biggest risk: non-attendance of screening programme

Background

What's at stake?

Cervical Cancer is the most common cancer in women under **35**



women will be diagnosed with it today



women will die from it today



women will be told they might have an abnormality

What is her risk of cervical cancer?



8.2 – 8.7 per 100,000

What is her risk of cervical cancer?



6.3 – 11.2 per 100,000

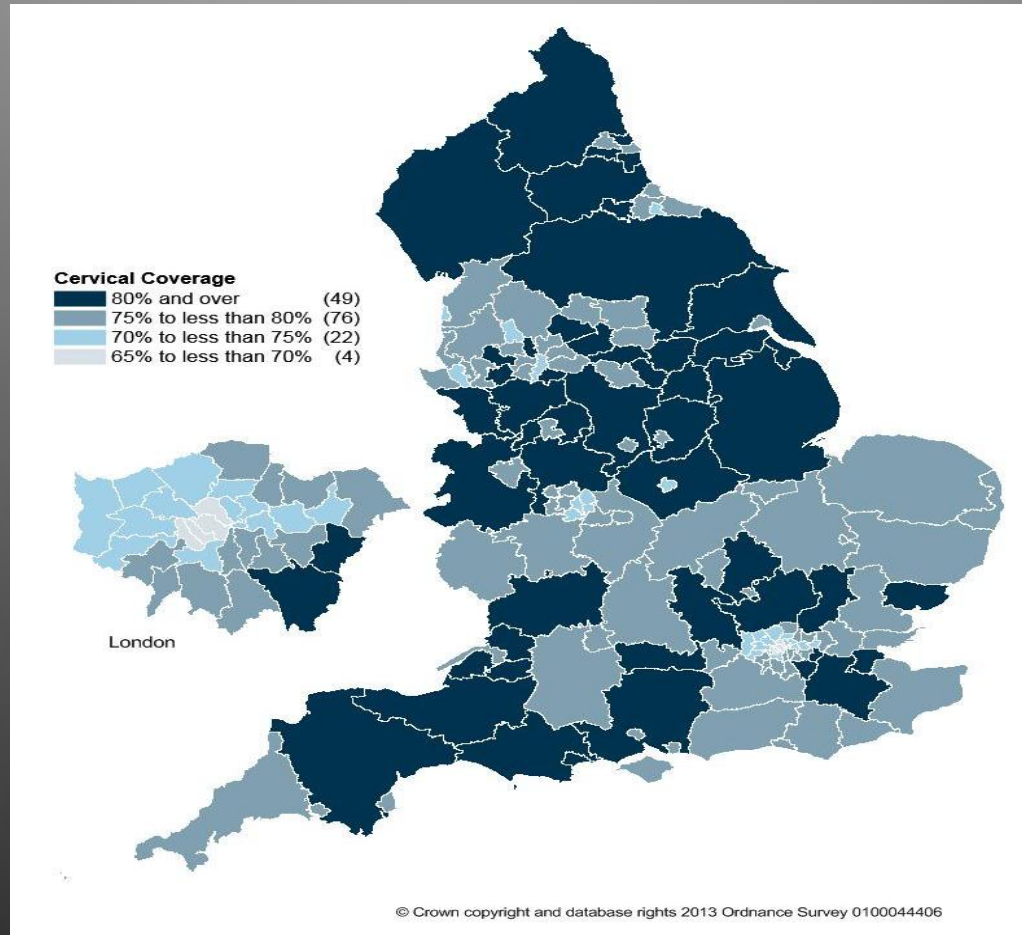
What is her risk of cervical cancer?



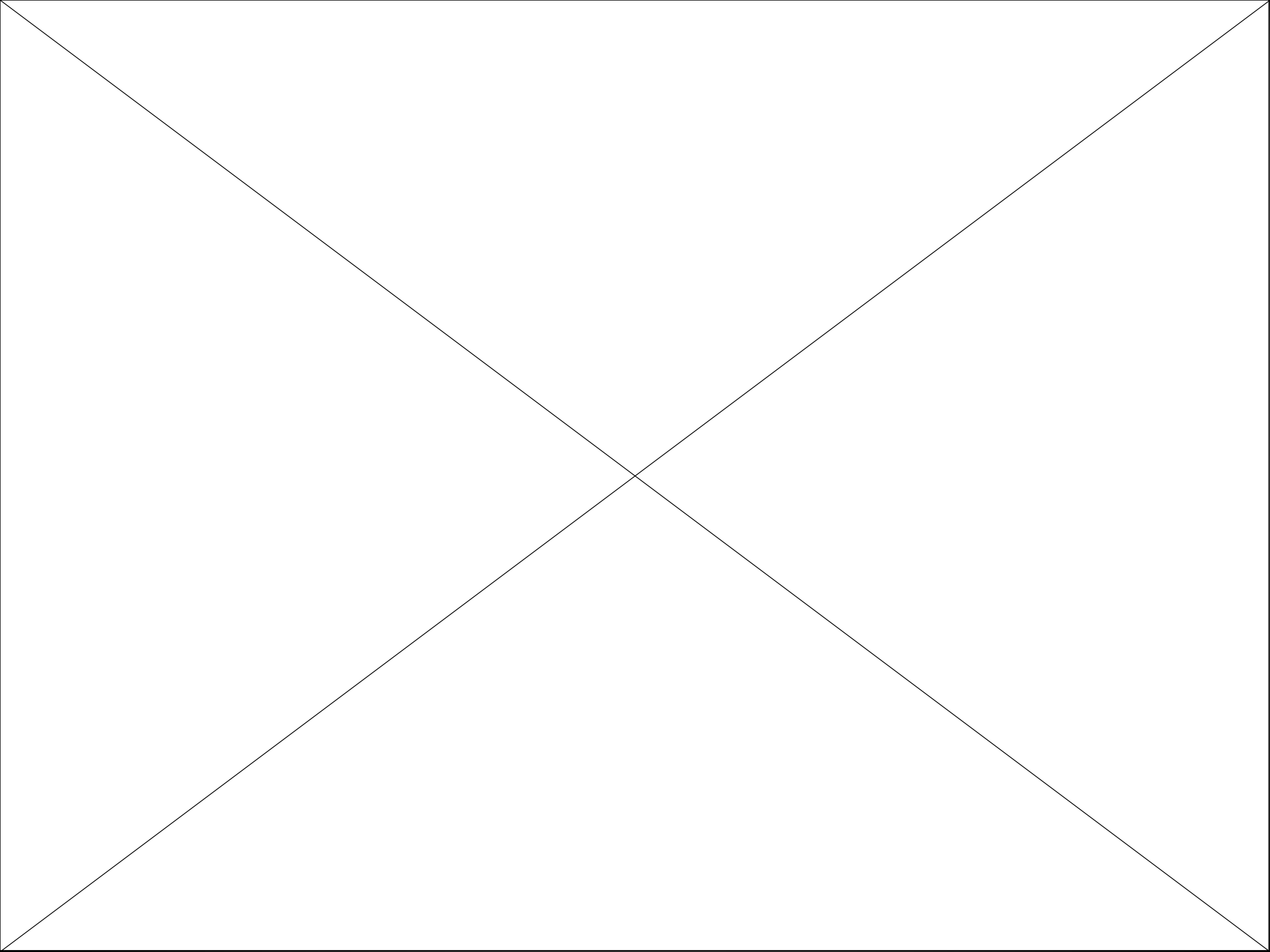
3.6 – 6.5 per 100,000

Cervical screening – Five year coverage of the target age group (25-64)

Primary Care Organisation, England, 31st March 2013







What Do We Know?

- Findings in the study by health think-tank Demos revealed 23 per cent of black, minority ethnic women admitted they had never attended a screening appointment – compared to 14 per cent of white British women
- The report supported by Jo's Cervical Cancer Trust said the number was even higher among first generation immigrant women
- In a study of South Asian women, a third of those who had been born overseas had never been screened

What Do We Know?

- Black and ethnic minorities have:
 - Lower awareness
 - Lower uptake
- 2009 NCIN report suggests that there are higher rates of cervical cancer in black women over 65 in the UK
- Available studies on attitudes to cervical cancer:
 - Inadequately represent ethnic minorities
 - Recruited through health-care settings only

Our Study

- Community-based survey of black women in London
- Surveyed 876 Black women who presented to ethnic hair salons in London
- Explored cervical cancer knowledge and reasons for non attendance
- Hairdressers act as social hubs for black communities providing an informal interchange for discussions
- We felt that targeting women through a non-health care setting would help us recruit those who do not always engage with health care services

Study Objectives

- Our objectives were
 - i) to explore socio-demographic and ethnicity-related factors associated with cervical cancer knowledge and non-attendance at cervical screening
 - ii) consider self-reported reasons for non-attendance at screening.

Results

Risk Awareness



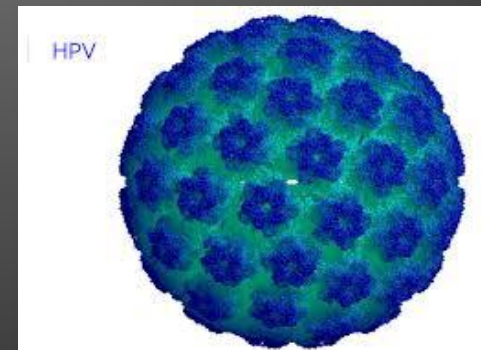
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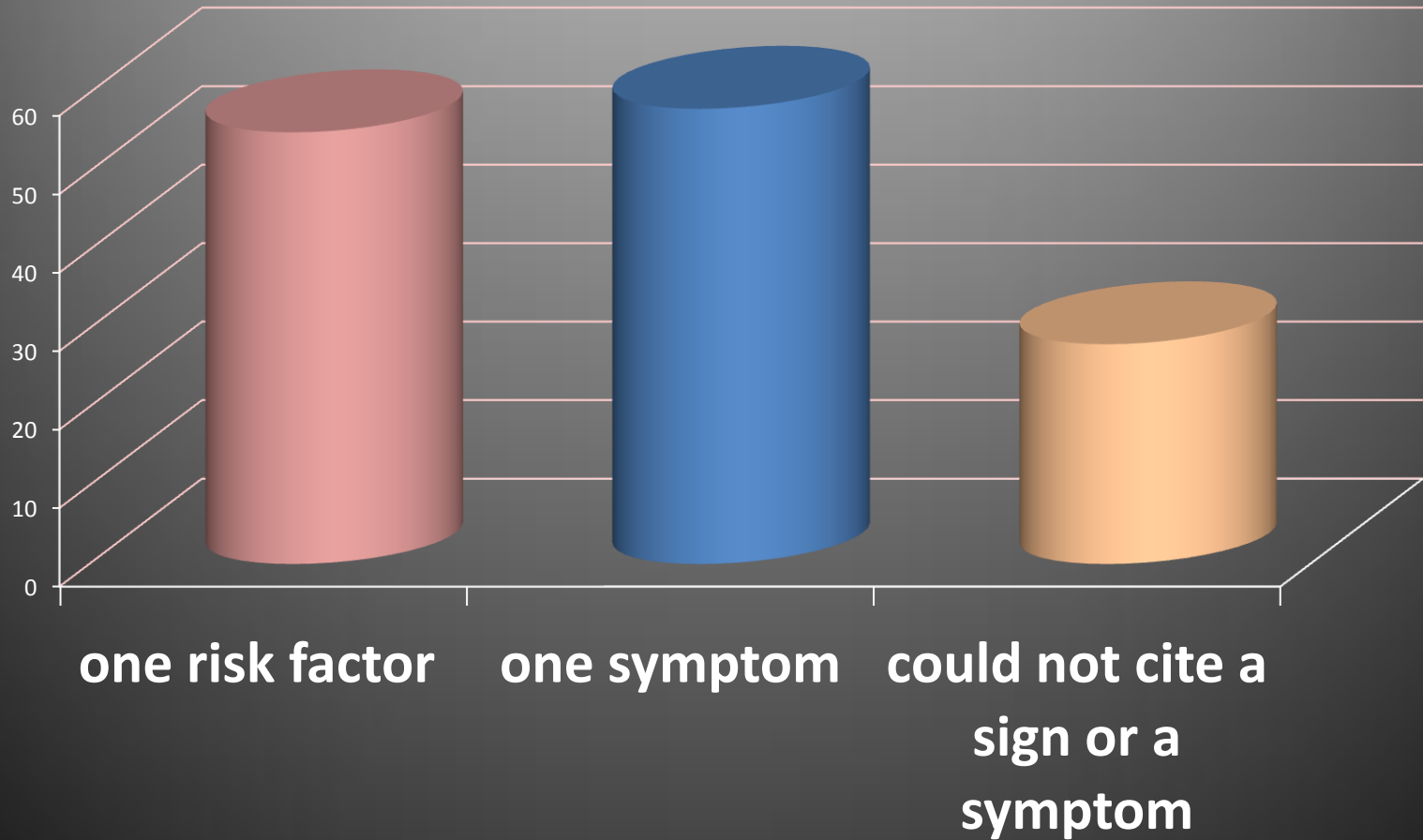


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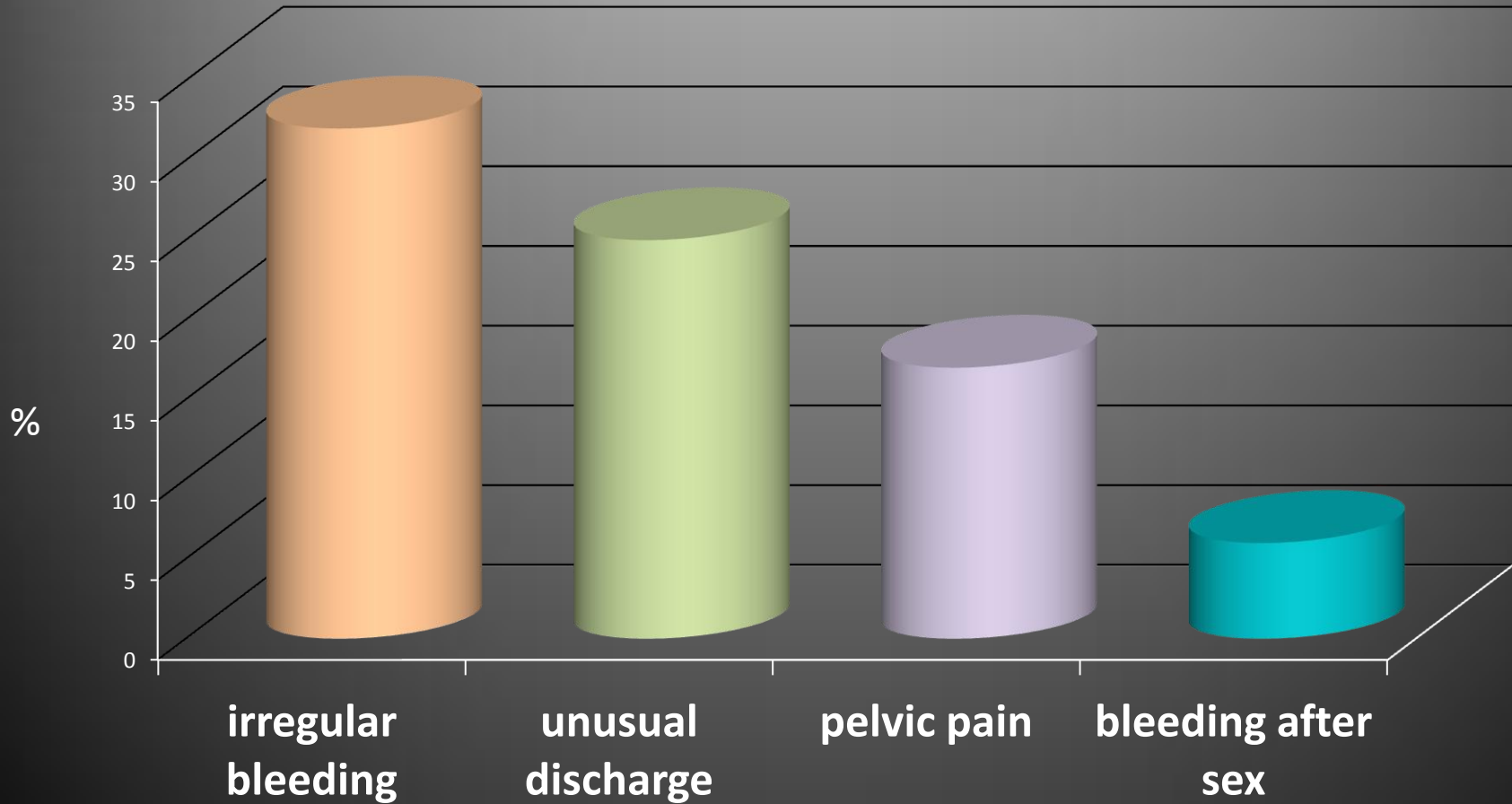


4%

Cervical Cancer Knowledge



Symptom Recall



Screening Attendance

- 91% self reported screening attendance
- Most women were last screened at their GP surgery (75%) & health centres (10%)
- 20.4% of women were overdue for screening

Screening Attendance

- Women were more likely to be overdue screening if they were:
 - **Younger**
 - **Single**
 - **African** (26% compared with 18% of Caribbean women)

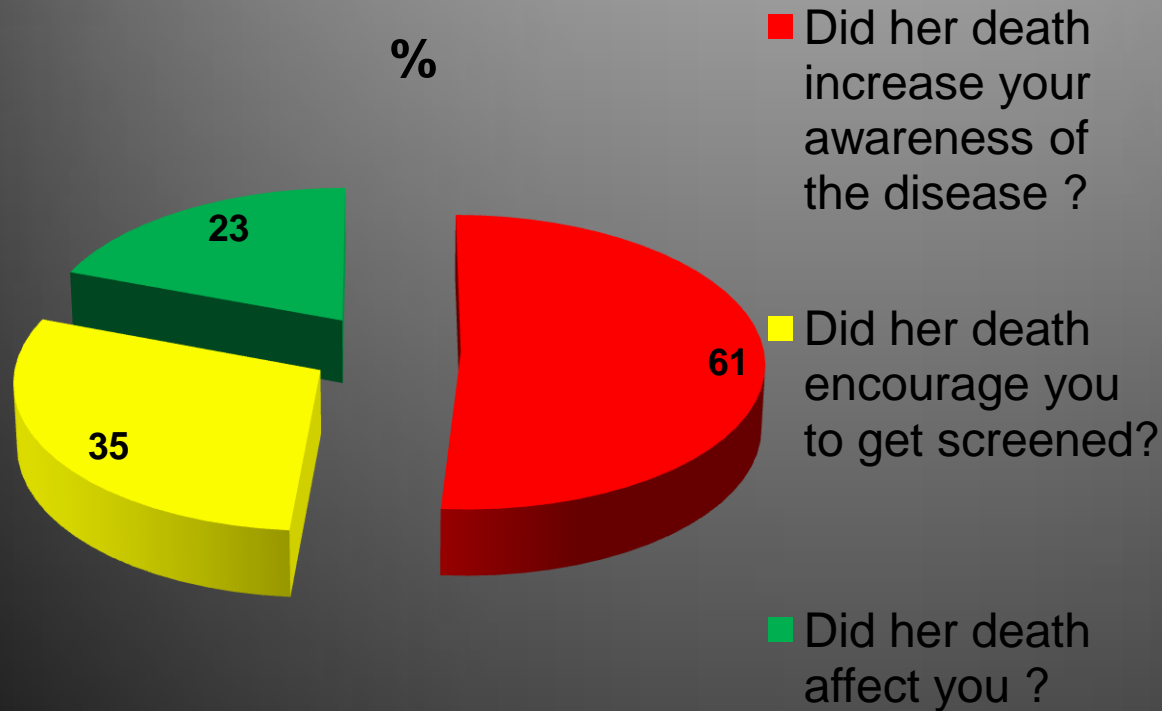
Screening Attendance

- Women who had migrated to the UK more than 10 years ago were less likely to be overdue for screening than women born in the UK
- Women who attended religious services at least once a week were more likely to be overdue than those who rarely or never attended
- Education level and religion were not significantly associated with screening status.

Reasons for Non Attendance

Practical barriers	
I meant to go but didn't get around to it	19
It was difficult to make an appointment	11
Too busy/inconvenient	9
Emotional Barriers	
Fear of the test procedure	12
Fear of a 'bad' result	10
Bad experience of cervical screening in the past	6
Embarrassment	6
Beliefs about screening	
I do not believe I am at risk	12
I do not believe the test is needed	4
Other	
I have never been invited for screening	9
I didn't understand the screening invitation letter	1

The Jade Goody Effect



What Can We Learn From This Study?

- To our knowledge this is the first study to explore cervical cancer knowledge and screening behaviour with a focus on black women living in England
- We took a novel approach to recruitment, targeting a specific ethnic group by approaching women in the community

What Can We Learn From This Study?

- There were differences between subgroups of the Black population, with African women more likely to be overdue for screening than Caribbean women
- This is interesting when considered in the context of other cervical cancer risk factors (smoking and having multiple sexual partners) which suggest that African women may be at lower risk of cervical cancer than Caribbean women

African Women & Cervical Cancer *Risk*

In this study, African women who were overdue screening were more likely to endorse emotional barriers relating to the test procedure (e.g. fear of the test and embarrassment) and to believe they were not at risk of cervical cancer

Knowledge & Screening Attendance

- Similar to other studies with black women we found an association between knowledge and screening behaviour which could suggest interventions designed to increase awareness might consequently have a positive influence on behaviour
- Alternatively, cervical screening could be acting as an opportunity for women to learn about cervical cancer risk factors and symptoms

Factors Associated with Knowledge

- Our finding that a higher level of education is associated with greater knowledge of cervical cancer risk factors is important
- We also found that older age was associated with symptom knowledge
- Persistent pain was more commonly cited in our study of black women
- This could be a cause for concern if it means symptoms in the absence of pain are not taken seriously by women from black backgrounds
- Previous work in the context of breast cancer suggests some African American women feel confused over whether pain is a symptom of cancer and this warrants further investigation

Factors Associated with Low Screening Attendance

- This study suggests that ethnicity, migration and religiosity play a role in predicting cervical screening attendance among black women in London
- It is the first study to suggest that among black women those from African backgrounds and those who attend religious service on a frequent basis could be the most likely to delay attending cervical screening
- More research is needed to explore the attitudes, experiences and beliefs that might explain why these groups might differ

Target Groups

Younger

Single

African

Conclusions

Our study shows that it is important to dispel the myths and fear surrounding screening to encourage more women to attend

It is also vital that women are able to access services at times that are convenient for them – this may mean the provision of cervical screening at clinics with extended opening hours at evening and weekends.

Moving Forward

We advocate the targeting of cervical cancer screening campaigns at young professional women to encourage them to make cervical cancer screening a priority in their busy routines

As health professionals we also need to do more to reduce the embarrassment and fear of the process

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Thank you



KEEP
CALM
AND
FIGHT
CERVICAL CANCER