

Breast and cervical cancer screening facilitators and barriers in the state of São Paulo, Brazil

Poster number

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- This survey identified elements for a state-level implementation research that aims to achieve the transition from opportunistic to organized and population-based breast and cervical cancer screening programmes in a middle-income region.

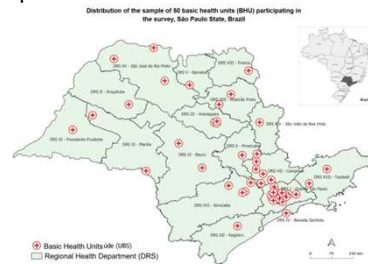
- São Paulo, Brazil's most populous state with 44 million inhabitants, follows the national recommendations for breast and cervical cancer screening, but there are noticeable gaps in the programmes organization and limited impact in controlling these diseases.

BACKGROUND

- Among Brazilian women, breast cancer ranks as the most incident cancer and the leading cause of cancer death. Cervical cancer is ranked in the fourth position either incidence or the mortality. São Paulo is located the Southeast macro-region and has higher incidence rates for breast and lower rates for cervical cancer compared to the national rates
- Despite two decades of opportunistic breast and cervical cancer screening programmes, progress in the diseases control is limited. To evaluate factors related to the low impact of current São Paulo programmes, this study investigated knowledge related to both cancers, facilitators and barriers perceived by eligible women and primary health care workers to adherence to screening practices.

METHODS

- Population survey conducted in 2023: **Women** aged 25-69 years and primary health care **workers** were interviewed in-person
- Three stage sampling: sample size of 400 women and 400 workers selected at random from 50 Basic Health Units (BHU)
- Chi-square and Fisher exact tests were used to examine differences among socio-demographic and knowledge variables with perceived barriers.

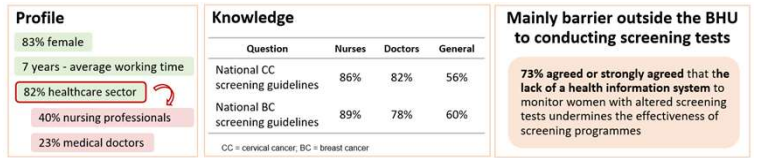
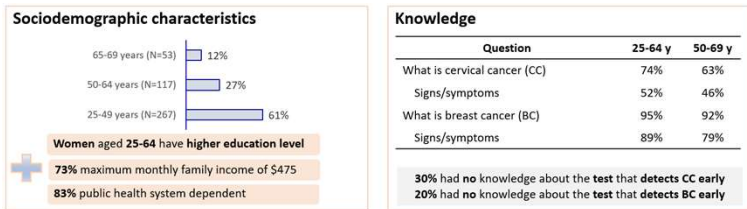


RESULTS

- 437 eligible women for cervical (25-64 years) and breast cancer screening (50-69 years) interviewed

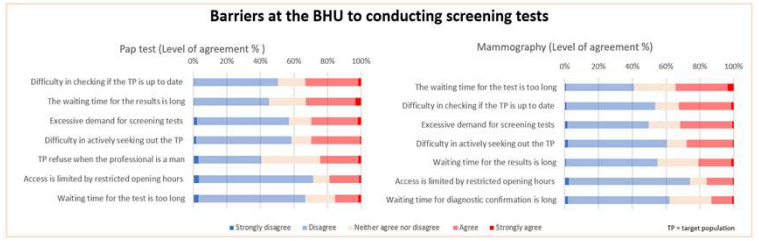
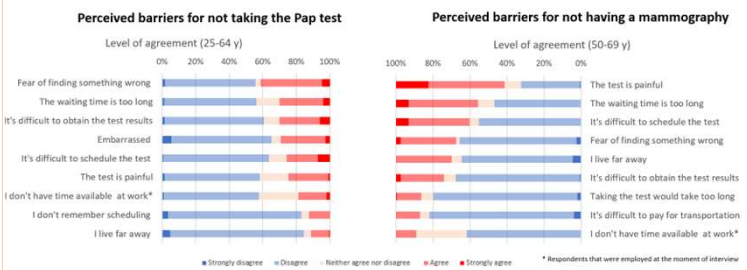
RESULTS

- 400 BHU workers interviewed



Mainly barrier outside the BHU to conducting screening tests

73% agreed or strongly agreed that the lack of a health information system to monitor women with altered screening tests undermines the effectiveness of screening programmes



- Associations between sociodemographic variables and barriers
- Cervical cancer: 'afraid of discovering something wrong' (41%) was associated with education (p=0.030), 'difficult to obtain the test result' (30%) with ethnicity (p=0.003), income (p=0.017), education (p=0.003) and exclusive/ non-exclusive users of public health system (p<0.001)
- Breast cancer: 'the exam is painful' (59%) and 'long waiting time for the exam' (44%), were associated with ethnicity (p=0.005), education (p=0.013) and currently working (p=0.037)
- BHU Workers: 'lack of an information system' (74%) was associated with the knowledge of cancer screening guidelines for breast (p=0.045) and cervix (p=0.016).

CONCLUSIONS & IMPLEMENTATION STRATEGIES

- Limited knowledge, specially regarding cervical cancer, could deter women from adopting appropriate health-seeking behaviors
- Workers perceived the lack of a health information system as a barrier
- Development of an information system, which will help to minimize some of the barriers and to allow the M&E next screening steps.
- Limitation: Data were collected exclusively from public health system users visiting the BHU
- Strategies to overcome barriers and to reach the population segment that does not attend health services for screening tests should be part of the multi-collaborative implementation.
- State-level communication plan to reach target population with multi-level strategies to improve cancer literacy
- Regional meetings with key stakeholders to clarify the barriers identified and to supplement survey results.

ADDITIONAL INFORMATION

This study is part of the research project *Cancer Control in the State of São Paulo (ConeCta-SP): Bridging Knowledge to Action* - <http://fosp.saude.sp.gov.br>, author contact: carolinaterra@usp.br

Funding and support: São Paulo Research Foundation (FAPESP process n.: 2021/11794-4, 2022/15539-1, 2023/07997-2) and São Paulo Health Secretariat, Brazil

Acknowledgements: International Agency for Research on Cancer