

## **WI research on the barriers to cervical screening and increasing uptake**

### **Overview**

Between August and October 2020, the National Federation of Women's Institutes (NFWI) carried out a survey to understand attitudes towards cervical screening and sampling methods in England and Wales. All women and people with a cervix aged 25 and over were invited to take part. There was no upper age limit.

This briefing focusses on the findings of one strand of this research, the barriers to cervical screening. You can find out more about the other themes identified in our research [here](#).

This research was part of an ongoing WI project on cervical screening – our 5 Minutes that Matter campaign which seeks to raise awareness of the importance of attending routine cervical screenings, and support more women to make an informed decision about whether or not to take up their invitations.

### **Key messages from the WI's findings on barriers to cervical screening:**

- Finding the time to attend routine cervical screening was a key barrier among respondents aged 25 to 49.
- However, as many other studies have shown, there are a wide range of reasons why people find it difficult, or choose not, to attend. These include bad past experiences of cervical screening, inconvenient appointment times, worries that it will be painful, personal and systemic barriers because of gender identity, and the impact of the Covid-19 pandemic.
- Increased uptake of cervical screening amongst people over the age of 50 could be improved by, for example: greater awareness of the risk of cervical cancer and the benefits of cervical screening to this demographic, the option of HPV self-sampling, and greater awareness of how cervical screening can be made easier after the menopause.

### **What is the WI calling for on this issue?**

- **Further research and pilot studies to help build a strong evidence base for the introduction of HPV self-sampling in the most effective and accessible way. We would like to see the option of self-sampling available as early as possible once this evidence base is in place.**
- **Evidence-based targeted messaging about cervical screening and the risk of cervical cancer for women over the age of 50.**
- **We recognise the impact of the pandemic on the cervical screening programme and the considerable pressure the health service is under, as well as the effects on patients. Therefore if capacity allows and these are already available, we would like to see the availability of evening and weekend appointments for cervical screening promoted.**
- **Where capacity and the challenges of Covid-19 allow, we would encourage GP surgeries to consider offering cervical screening appointments at different times of the day if this is not currently an option. We recognise that this may not be feasible in the short-term as surgeries prioritise responding to the Coronavirus pandemic and resuming cervical screening appointments that may have been cancelled as a result.**

- **Cervical screening providers to consider implementing text reminders to those due cervical screening.**
- **Increased awareness of cervical screening, what to expect from the test and the options that are available to make it easier.**

### **Demographics of the WI's survey respondents:**

In total we received 2,849 complete responses.

- 87% were based in England and 12% in Wales. Less than 1% were based in each of the following areas: Jersey, Guernsey and the Isle of Man
- 39% were aged 25 to 49
- 38% were aged 50 to 64
- 20% were aged 65 to 74
- 3% were aged 75 or older

### **Barriers to cervical screening attendance**

Respondents were asked to think back to when they last booked their cervical screening appointment and any reasons they delayed doing this or were delayed by an external factor. The following reasons were provided:

#### **Aged 25 to 49:**

This question was not applicable to 53% who told us they booked their most recent cervical screening appointment as soon as they were invited.

- 14% of those who did delay booking or were delayed because of an external factor said they find it difficult to find the time to attend cervical screening because of **work commitments**.
- 6% said they find it difficult to find the time because of **family responsibilities**
- 6% were concerned it would be **painful**
- 6% said the appointment times they were offered were **inconvenient**
- 5% said they had a bad **past experience**
- 5% said they had not been able to book an appointment because they had been postponed due to the **coronavirus pandemic**
- 3% said they were concerned cervical screening would be **embarrassing**
- 2% were worried what the **test result** would be
- 2% were not comfortable with the idea of a **healthcare professional** carrying out the test
- 2% said attending cervical screening was **not a top priority**

12% of respondents explained that they have been delayed because of several other reasons including:

#### **Difficulties booking with their GP surgery:**

*"I can't book as I can't get through to the GPs office"*

*"GP not answering phone on 4 attempts to book"*

*“GP surgery only takes appointments for next two weeks and they were all full so they told me I had to call back in 2 weeks to check again. I explained I’d still need a smear test in a months’ time but it was “computer says no”*

**Personal and systematic barriers to accessing routine cervical screening because of gender identity:**

*“I am transgender. Getting a screening makes my dysphoria skyrocket, increases my depression and renders me unable to work for at least a day. It’s also the most painful thing I have ever experienced...I do not think I will be taken seriously with my concerns if I go to a GP over them”.*

*“I am transgender and the entire process is viscerally horrifying to me”*

**Difficulties making the appointment over the phone or finding time to do this:**

*“Have to make appointment for a smear by phone, would much prefer through the app like normal appointments”*

*“Booking required talking to someone on the telephone, which I find awkward enough that I put it off a lot”*

*“I couldn’t book the appointment online and I have a fear of calling people”*

*“If I was able to book it online I would have done so sooner but finding the time to make a call was challenging!”*

*“I hate making phone call”*

*“I was going through a depressive phase which means I find making phone calls and appointments extremely difficult and stressful”*

**General anxiety and anxiety about going to the GP:**

*“I tend to put off things that cause anxiety and don’t seem urgent”*

*“I was anxious about it but NOT because of coronavirus. Because I am genuinely anxious about going to THE GP”*

**Difficulties fitting it in around their menstrual cycle:**

*“Needed to wait for the best time in my menstrual cycle”*

*“I had to book around my erratic periods”*

*“Period started on day of test”*

**Attending cervical screening past the age of 50**

- 12% of respondents aged 50 and over had not attended cervical screening since the age of 50.
- The main reasons were: not receiving an invitation to attend since 50 (33%), total hysterectomy (30%), a bad experience of cervical screening which put them off (14%), cervical screening becoming more uncomfortable or painful since the menopause (7%), not currently sexually active so feel there is no need to attend

cervical screening (5%), cervical screening is more embarrassing now (4%), low perception of risk of cervical cancer (4%), found it difficult to find the time to attend cervical screening because of work commitments (4%).

- When asked what would encourage more people aged 50 and over to attend cervical screening, suggestions were provided such as:

### **HPV self-sampling:**

*“Home test kit to do the test yourself”*

*“I think more women would take the test if a DIY kit was issued to do at home. I for 1 would prefer that option, which can be done at your own convenience”*

*“If there was a self-test option available more people would likely engage with the programme”*

### **Increased awareness of the risk of cervical cancer and the benefits of cervical screening to this demographic:**

*“Knowing of someone it helped”*

*“Understanding the risk is still current”*

*“Information on the risks of cervical cancer over the age of 50, and the effectiveness of screening in detecting early signs”*

*“Being shown the numbers who have cervical cancers post 50yrs age”*

*“Statistics showing likelihood of cervical cancer in different age groups”*

*“Use older women in promotion materials; tell stories of women post menopause who did/didn't attend and the positive/negative effects”*

*“Reminders that you are still at risk even if you have had only one long term sexual partner”*

*“There is a perception that once you hit 50, cervical cancer isn't an issue any more, that needs to change”*

*“More information on how many lives have been saved by screening”*

*“More information regarding the effects if not screened”*

*“More information for that age group specifically”*

*“More adverts in TV and social media”*

*“I only ever hear about it in a negative way- it hurts, it's uncomfortable, it's invasive, I'm too embarrassed. We need a more positive spin on it”*

### **Increased awareness of how cervical screening can be made easier after the menopause:**

*“Open conversations especially about menopausal and postmenopausal symptoms and developing ways to work around physical limitations due to lack of mobility (e.g. arthritis) etc”*

*“Advising perimenopausal and menopausal women beforehand that they can request treatments to reduce discomfort”*

**Flexible appointments:**

*“Choice of where to attend”*

*“Evening appointments”*

*“Quicker appointments, quicker results”*

*“To be able to attend when it’s convenient”*

*“Getting an appointment at a time and place to suit”*

**Local units for cervical screening**

*Local small units carrying out only cervical screening as in breast screening*

*Designated clinics just for screening. All women together, in the same situation*

*To attend a centre where the staff are used to post menopause issues and have the knowledge/equipment to deal with them*

**Further information**

Please contact the NFWI’s Public Affairs Department at [pa@nfwi.org.uk](mailto:pa@nfwi.org.uk) for more information about this research.

To find out more about the WI’s 5 Minutes that Matter campaign, visit [www.thewi.org.uk/campaigns/key-and-current-campaigns/5-minutes-that-matter](http://www.thewi.org.uk/campaigns/key-and-current-campaigns/5-minutes-that-matter)