

OP45.3

Differences in cervical cancer screening between immigrants and non-immigrants in Norway – a primary health care register-based study

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Objective: Low rates of cervical cancer screening among immigrants have been reported from several Western countries. Despite the growing number of migrants to Norway, no study on cervical cancer screening attendance among immigrants has been conducted in Norway to date. The aim of our study was to compare the proportion of different groups of immigrant women with non-immigrants attending primary health care for cervical cancer screening in Norway.

Methods: Register based study using merged data from four national registries. All Norwegian born women (1,168,832) and immigrant women (152,800) in screening age for cervical cancer (25-69 years) registered in Norway in 2008 were included. Immigrants were grouped by world's geographic region. Descriptive analyses and several logistic regression models were conducted. Our main outcome variable was whether the woman had been registered with a Pap smear in 2008 or not.

Results: Immigrant women had lower rates of participation compared to Norwegian-born women; Western Europe (Adjusted Odds Ratio (AOR), 95% confidence interval (CI): 0.84, 0.81-0.88), Eastern Europe (AOR 0.64, 95% CI: 0.60-0.67), Asia (AOR 0.74, 95% CI: 0.71-0.77), Africa (AOR 0.61, 95% CI: 0.56-0.67) and South America (AOR 0.87, 95% CI: 0.79-0.96). Younger age, higher income, living in rural areas and having a female General Practitioner were positively associated with Pap-smear. Longer residential time in Norway and having a non-immigrant doctor were positively associated with screening for some immigrant groups.

Conclusion: Our next research step will be developing and evaluating intervention methods to close the disparity in cervical cancer screening between immigrants and non-immigrants.

Main message: There is lower participation rate in cervical cancer screening among immigrants in Norway. Younger age, higher income, living in rural areas and having a female provider are the main factors positively associated with screening.