Cervical cancer testing in the WHO European Region

Cervical cancer is a leading cause of death among women of reproductive age. Screening programmes can be one part of a comprehensive strategy to help save lives. This factsheet describes the lifetime prevalence of cervical cancer testing among women aged 30–49 years from across the WHO European region.

Data were collected through WHO STEPwise approach to Surveillance (STEPS) surveys (2013-2017) and the European Health Interview Survey (2013-2015). The details of this analysis are described in a peer-reviewed paper by Williams et al.

**KEY FINDINGS**

- The proportion of women aged 30–49 who reported ever having had a cervical cancer test ranged widely across the European region, from 11.7% in Azerbaijan to 98.4% in Finland.
- Testing rates tended to increase with the income of a country.
- Testing rates were higher in women with higher education and lower in women with lower education.

**PREVALENCE OF CERVICAL CANCER TESTING AMONG WOMEN AGED 30–49 YEARS in the WHO European Region, according to STEPS and EHIS surveys**

*Country data is obtained from the WHO STEPS survey; for all other countries are from the EHIS survey.*

Prevalence of cervical cancer testing varied by educational level. In every country except Belarus, Czechia, Latvia, Turkmenistan and Uzbekistan, women with a lower educational level reported lower levels of testing than women with a higher level of education.

Policy implications

Set up effective, equitable screening and treatment programmes

- Coordinated implementation of population-based, quality-assured HPV vaccination programmes and screening programmes with appropriate follow-up.
- Quality management of invasive cervical cancer, including palliative care.
- Nearly all participating countries need to improve their reach among women of lower socioeconomic status. Structural health care barriers that influence women’s poor presentation for screening need to be removed, such as inadequate health literacy or the lack of patient-centered health services.

Measure key indicators

- We need effective indicators to set and reach strategic targets. Key programme indicators must include primary, secondary and tertiary prevention efforts, such as HPV vaccination, screening with a reliable test and proper treatment of precancers, treatment of cancers and palliative care.
- Indicators should measure screening programmes’ quality and effectiveness.
- A national cancer registry helps a country to monitor long-term trends in incidence and mortality rates and to inform policy decisions and investments.