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**The determinants of cervical cancer screening uptake in women with obesity: application of the Andersen's behavioral model to the CONSTANCES survey**

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**ABSTRACT**

**PURPOSE** - Despite their higher risk for and mortality from cervical cancer, evidence indicates low rates of cervical cancer screening (CCS) among women with obesity. The literature on the specific factors related to CCS nonadherence in this population is limited. **METHODS** - We examined the data on 2,934 women with obesity included in the CONSTANCES survey from 2012 to 2015. Using the Andersen's behavioral model, we studied the relationships between the socioeconomic, sociodemographic, health, health personal behaviors, and healthcare use-related factors with CCS nonadherence. The analysis was performed using structural equation models. **RESULTS** - Regular follow-up by a gynecologist, good quality of primary care follow-up, and comorbidities were negatively associated with CCS nonadherence. Limited literacy, older age, being single, living without children, and financial strain were positively associated with CCS nonadherence. Our results do not point to competitive care, since women with comorbidities had better CCS behaviors, which were explained by a good quality of primary care follow-up. **CONCLUSION** - Our study identified the factors that explain CCS nonadherence among women with obesity and clarified the effects of health status and healthcare use on screening. Further efforts should be undertaken to reduce the obstacles to CCS by improving care among women with obesity.

**KEYWORDS:** Andersen's model; Cervical cancer screening; Competitive care; Health status; Healthcare use; Obesity

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