# The Experience of Attendance for the National Cancer Screening Program in Korea: Insights from Focus Group Interviews

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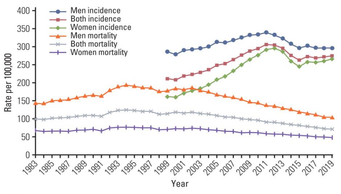
## INTRODUCTION

The National Cancer Screening Program (NCSP) was established in 1999 with the aim of providing free screening services for low-income Medical Aid recipients. Over the years, the NCSP has expanded its target population, and it currently focuses on the five most common sites of cancer in Korea: stomach, liver, colo-rectum, breast, and cervix uteri.

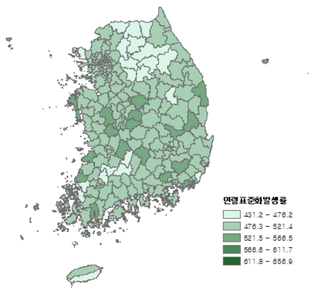
Cancer remains the leading cause of death in the Republic of Korea, despite the NCSP's efforts being credited with reducing cancer incidence and mortality rates in the country over the past few decades. However, it is important to note that the positive impact of the program is not evenly distributed across all population groups and regions. Specifically, Busan is showing a higher cancer incidence compared to other regions.

Figure 1. Annual age-standardized cancer incidence and mortality rates by sex for all sites from 1983 to 2019 in Korea.[1]




*Note*. The figure 1 revealed in Cancer Res Treat. 2022;54(2):330-344

Figure 2. Map of cancer incidence rates by regions from 2014 to 2018 in Korea.[2]




*Note*. Sourced from annual report of cancer statistics in Korea in 2020, https://ncc.re.kr/cancerStatsView.ncc?bbsnum=618&searchKey=total&searchValue=&pageNum=1

Table1. National Cancer Screening Program[3]

| | Target Population (y/o) | Frequency (every) | Test or Procedure |
|---|---|---|---|
| Stomach | 40 & over | 2 years | Upper Gastro-Intestinography (UGI) or Gastrointestinal Endoscopy (biopsy) |
| Liver | 40 & over with high risk group* | 6 months | Abdominal Ultrasonography + Serum Alpha-Fetoprotein test (Combined) |
| Colo-rectum | 50 & over | 1 year | (1st test) Fecal occult blood test(FOBT)<br>(2nd test) Colonoscopy (biopsy) or<br>Double Contrast Barium Enema |
| Breast | 40 & over | 2 years | Mammography |
| Cervix Uteri | 20 & over | 2 years | Pap smear |

* 40 & over years old with HBsAg positive or anti-HCV positive or liver cirrhosis

## OBJECTIVE

This study aimed to explore experience of attendance for the national cancer screening program in Busan which is showing higher disparities regarding to regions, and to identify the influencing factors related to attendance this cancer screening program from their perspectives so that intervention strategies to overcome the barriers.

## METHODS

From October 14 to November 10, 2021, three focus group interviews were carried out, with 20 subjects who participated in the national cancer screening program, and live in Busan. The interview guide included questions on barriers and facilitators of participating the cancer screening program, strategies for attendance adherence. The data were analyzed using qualitative content analysis.

## RESULTS

Twenty subjects with aged from thirties to seventies were participated in the interviews. Four themes were generated, which provide a comprehensive understanding of what people experienced from the cancer screening program.

1) Facilitators to seek screening include regularized schedule as the year of their own birth for cancer screening, family history of cancer, perceived benefits of screening, financial support
2) Barriers to screening include the belief that cancer is only risk for older adults and symptomatic people, the anxieties about test procedures, the lack of time and accessibility
3) Positive experience includes reassurance and satisfaction through the screening, the roles as priming water for promoting health
4) Negative experience include commercialization permeated into public healthcare, ambiguous notification of the results, lack of health professional's responsibility.

## CONCLUSIONS

In conclusion, the findings from this study provide valuable insights into the experiences of individuals with the national cancer screening program. By understanding these factors, more effective and efficient intervention strategies can be developed to increase screening attendance rates. Addressing barriers, promoting the benefits of early detection, and ensuring clear and responsible communication of results are essential steps to improve the overall effectiveness and impact of the program. Ultimately, such enhancements can lead to better cancer prevention and management outcomes for the population.

## References

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