

## Introduction

- Prior studies have shown lower compliance rates for breast and cervical cancer screens among South Asian women compared to non-immigrant, white, or African American women (Shoemaker, 2016).

## Aims and Objectives

Given the consequences of delayed diagnoses of breast and cervical cancers, this study aims to:

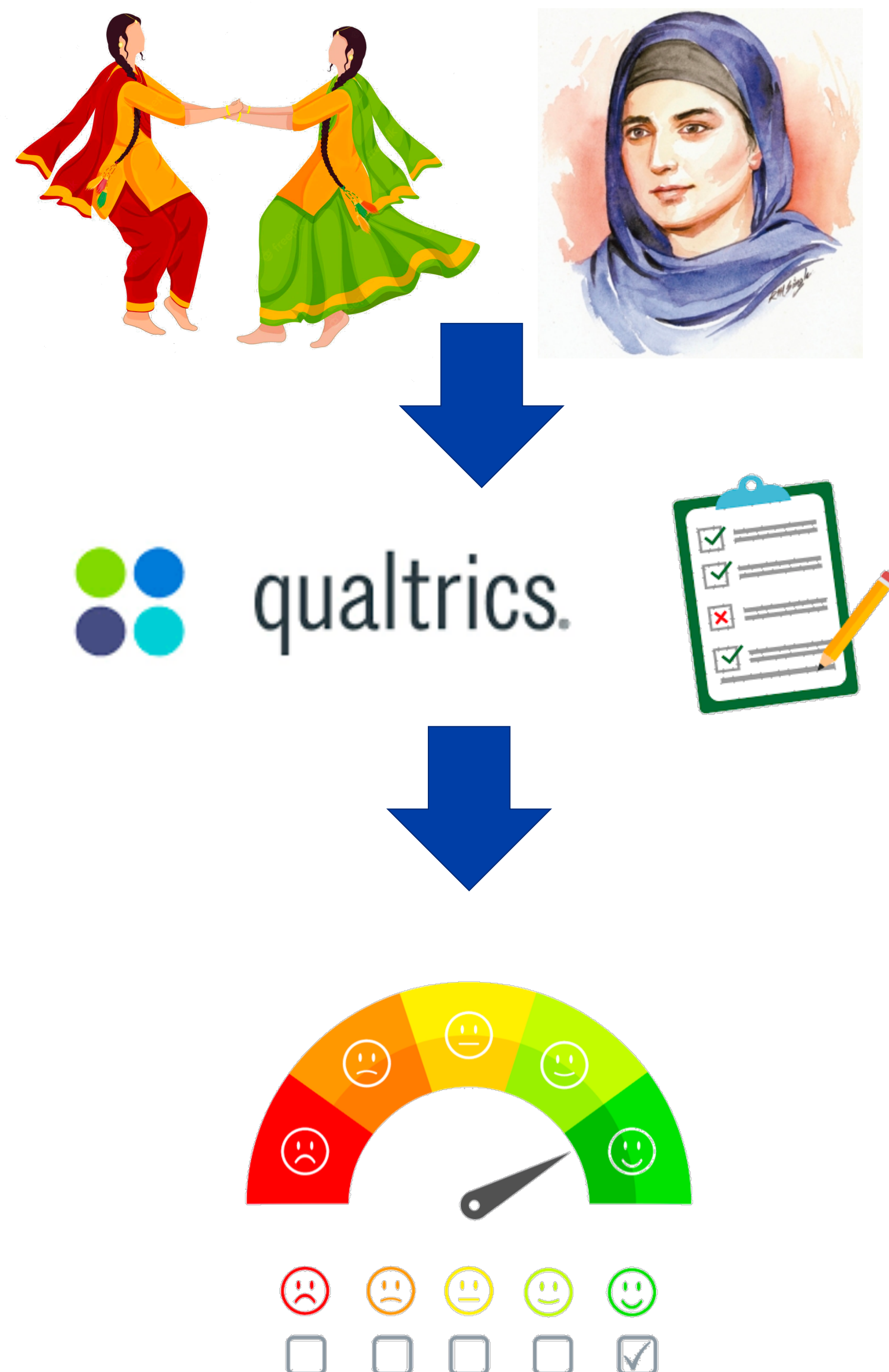
Identify compliance rates for breast and cervical cancer screenings in Sikh populations in southeast Michigan

Identify possible descriptive causes for lower rates of breast and cervical screenings in Sikh populations of differing demographic backgrounds

Identify possible solutions based approaches to addressing underlying causes of deficits in compliancy

## Methods

- Surveys were distributed securely and anonymously to females 21-65 years of age via Qualtrics to Sikh Gurdwaras in the metro-Detroit area.
- Data collected from Qualtrics was used to:
  - identify themes within descriptive causes for noncompliance
  - Rates of compliance
  - Possible interventions which could better serve this population
- Attitudes were quantified using a Likert 1-5 scale.



## Results

Figure 1: Age Appropriate Compliance Rates 1

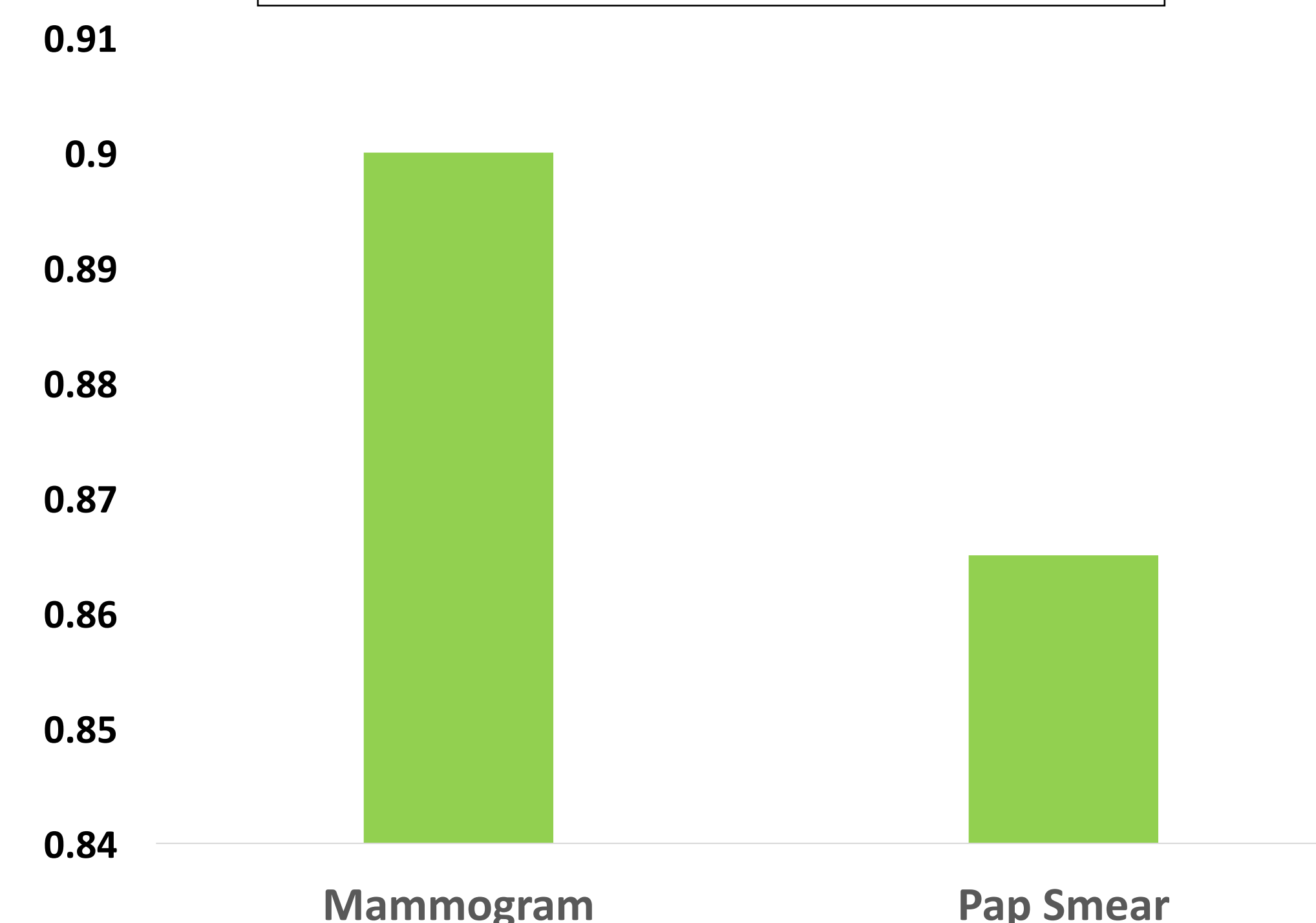


Figure 2: Descriptive Causes for Lower Rates

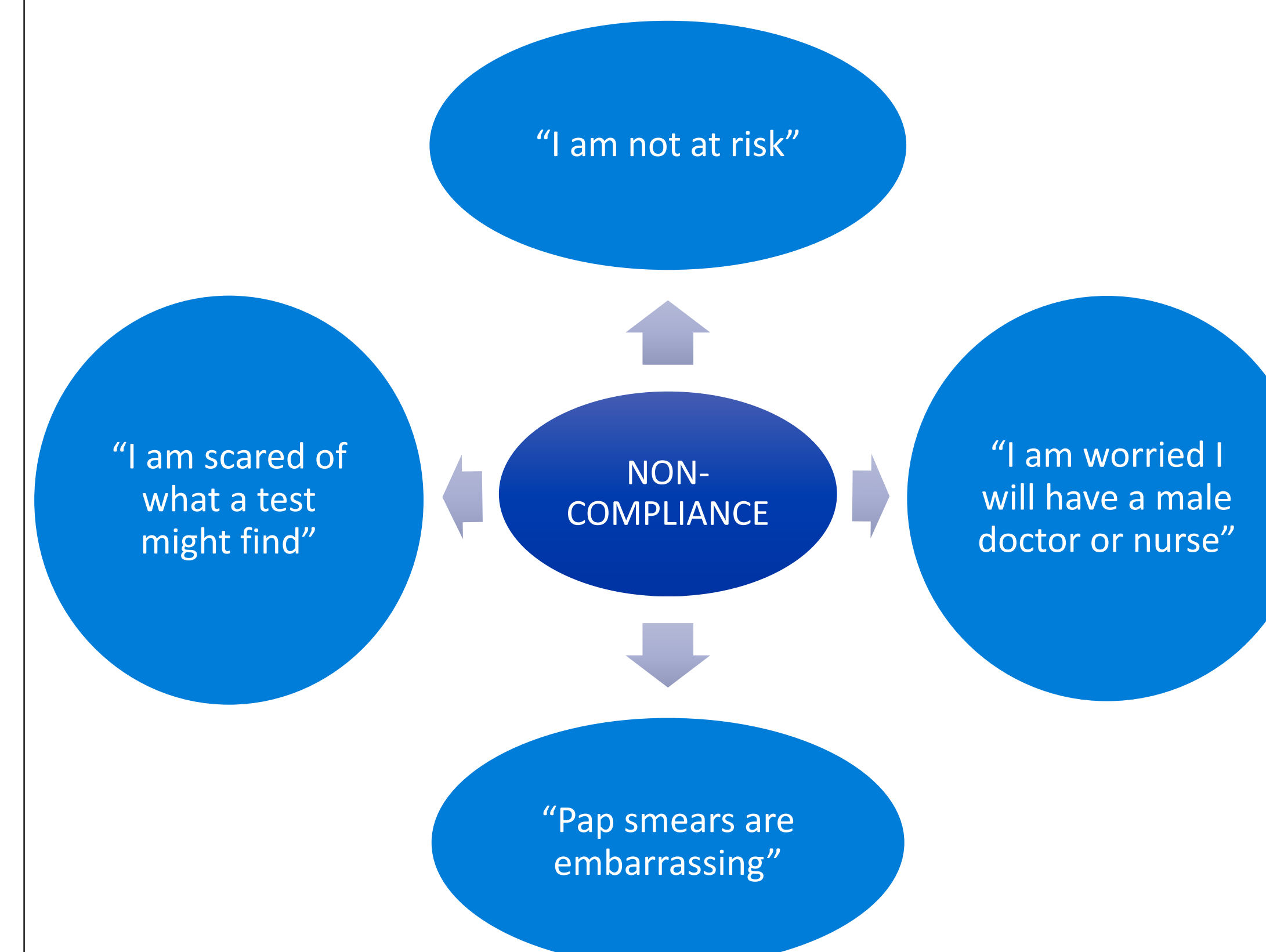
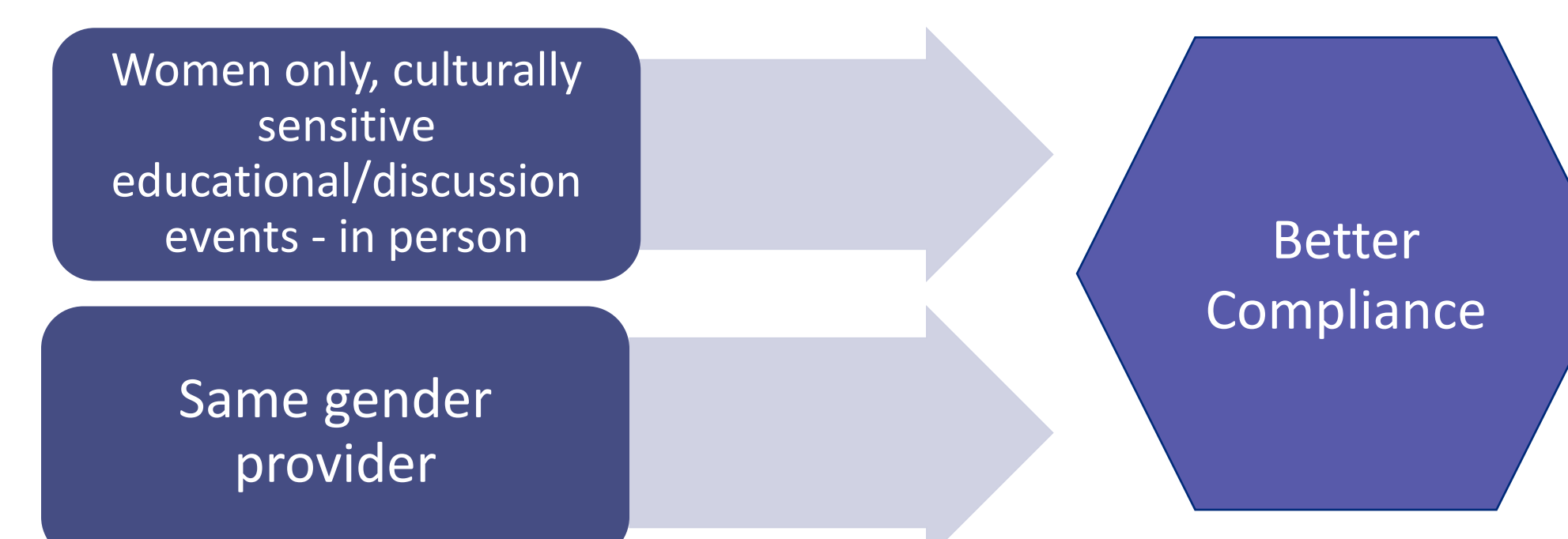


Figure 3: Community Solutions



## Conclusions

Sikh women in southeastern Michigan had a high rate of compliance, which may be attributed to:

- Higher education:** 98% of respondents had a bachelors, masters, or doctorate degree
- Immigration:** 82% of respondents were either born in America, or >10 years of residency.

Negative attitudes towards screenings revolved around fear of results, general embarrassment and embarrassment of having a male provider, as well as a belief that they were not at risk. Respondents proposed combatting these issues with education and the use of same gender providers. In the future, providers could note these preferences in caring for their Sikh patients or promoting better compliance within the community.

## References

Shoemaker, M. and White, M., 2016. Breast and cervical cancer screening among Asian subgroups in the USA: estimates from the National Health Interview Survey, 2008, 2010, and 2013. *Cancer Causes & Control*, 27(6), pp.825-829.

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