81 % (n = 1063) of respondents participated in cervical cancer screening. The odds of screening attendance were higher among women aged 30-39 (aOR = 3.6, $p < 0.001$), 40-49 (aOR = 2.8, $p = 0.005$), 50-59 (aOR = 12.3, $p = 0.001$) in comparison to women aged 25-29 years. Secondary (aOR = 5.9, $p < 0.001$) and university (OR = 13.1, $p < 0.001$) education in comparison to primary education and being married (OR = 3.7, $p < 0.001$) to being single, as well as being employed (OR = 2.0, $p = 0.085$) and economically inactive (OR = 3.1, $p < 0.05$) in comparison to unemployment was associated with cervical cancer screening attendance. Knowledge about screening was associated with higher odds of participation (OR = 4.1, $p = 0.001$). Knowledge about screening is positively related to attendance. Differences were observed across various sociodemographic groups emphasizing the importance of providing targeted information for vulnerable social groups such as the elderly, single and unemployed women, and women with lower education to promote cervical cancer screening.

Key messages:

- Cervical cancer screening is important, but target group responsiveness to it is still not optimal. Targeted public health activities are needed to improve cervical cancer screening attendance.
- Equity in cervical cancer screening attendance could be ensured by targeting vulnerable social groups, specifically, the elderly, single and unemployed women, and women with lower education.

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Cervical cancer screening attendance related factors among women in Latvia

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Cervical cancer is the second leading cause of death in Latvia among women aged 15-44. Since 2009 organized cancer screening has been available, but responsiveness from the target population was still not optimal - only half of the invited persons participated in screening in 2022. Our study aimed to analyse sociodemographic factors and knowledge about screening concerning participation in the screening procedure. Data from a cross-sectional population survey conducted in 2021-2022 were analysed (n = 1313). The survey was part of the project ''Towards elimination of cervical cancer: intelligent and personalized solutions for cancer screening'' (EMP416). A multivariate model was adjusted for independent variables found to be statistically significantly associated with the outcome in univariate analysis. The dependent variable was participation in cervical cancer screening. Independent variables - knowledge about screening, age, education, marital status, and employment