

Determinants of colorectal screening uptake in France: regular or occasional participation? An analysis based on a representative sample of the eligible population in France

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Abstract

Colorectal cancer is the third most common cancer in France and continues to be characterised by a participation rate in organised screening (34%) that is well below the target of 45%.

This study examines the determinants of screening uptake and adherence using data from a cross-sectional survey conducted in 2024 combining a national approach ($n = 897$) with a regional approach in the Hauts-de-France region ($n = 273$). We use logistic models and beta regressions to analyse regular and occasional participation in screening, paying particular attention to couple dynamics. The results show that, at the national level, the probability of regular screening increases with frequent doctor visits and positive attitude towards health. Couple dynamics and family structure remain important determinants, with an increase in screening favoured when the partner is also screened and when the couple discusses health. Having no children increases the likelihood of strong adherence whereas having an untested partner almost triples the probability of low adherence. In Hauts de France, the lack of access to the test reduces the probability of being screened. These results highlight the need for differentiated policies that combine national strategies to universalise access with local interventions that target territorial contexts and family dynamics.