

Exploring Attitudes and Experiences of the Cervical Screening Programme in Brighton, United Kingdom

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Abstract : Background: The UK cervical screening programme significantly reduces cancer mortality through the early detection of abnormal cells. Despite this, over a quarter of eligible women choose not to attend their appointment. Objective: To qualitatively explore patients' barriers to attending cervical smear appointments and identify key trends of cervical screening behaviour, knowledge, and attitudes in primary and secondary care. Methods: A cross-sectional study was conducted to evaluate smear services in Brighton and Hove using questionnaires in general practice and colposcopy. 226 patients participated in the voluntary questionnaire between 10/11/2017 and 02/02/2018. 118 patients were recruited from general practice surgeries and 108 from the colposcopy department. Women were asked about their smear knowledge, self-perceived risks factors, prior experiences and reasons for non-attendance. Demographic data was also collected. Results: Approximately a third of women did not engage in smear testing services. This was consistent across primary and secondary care groups. Over 90% were aware of the role of the screening process in relation to cervical cancer; however, over two thirds believed the smear was also a tool to screen for other pathologies. The most commonly cited reasons for non-attendance were negative emotions or previous experiences. Inconvenient appointment times were also commonly described. In a comparison of attenders versus non-attenders previous negative experiences ($p < 0.01$) and number of identified risk factors ($p = 0.02$) were statistically significant with non-attenders describing more prior negative smears and identifying more risk factors. Smear knowledge, risk perception and perceived importance of screening were not significant. Negative previous experiences were described in relation to poor bedside manner, pain, embarrassment and staff competency. Conclusions: In contrary to the literature, our white Caucasian cohort experienced significant barriers to accessing smear services. Women's prior negative experiences are overriding their perceived importance to attend the screening programme; therefore, efforts need to focus on improving clinical experiences through auditing tools, training and providing a supportive appointment setting. Positive changes can also be expected by improving appointment availabilities with extended hours and self-booking systems.

Keywords : barriers, cervical, Papanicolaou, screening, smear

Conference Title : ICRM 2018 : International Conference on Reproductive Medicine

Conference Location : London, United Kingdom

Conference Dates : May 14-15, 2018