

Cervical Screening: individual women within a population-based programme

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Introduction

In England and Wales cervical cancer screening is organised through a national programme and delivered locally through primary care. When women are invited to participate within the screening programme they are sent a nationally produced leaflet to give them information and answer any questions. Clearly this leaflet is designed to address a large number of women, and is therefore very general in nature. As it is produced at the state level, it can be thought of as presenting the 'official view' of screening. The national programme is very successful and consistently achieves coverage of over 80% of eligible women. This sustained high coverage rate indicates that large numbers of women attend for screening, but not that they necessarily accept the official view with which they are presented. Indeed, this may be why some women do not attend for screening. It is necessary to explore how individual women think about and experience cervical cancer screening, their engagement with the official view, and how they locate themselves as individuals within a population-based programme.

Methods

- Qualitative interviews were conducted with a sample of 35 women
- Women from age range of 20-64 years
- Women from White British, South Asian and African Caribbean ethnic groups
- Recruitment mainly through local community groups, although snowball sampling and personal contacts were also used to a limited degree
- All women were currently being invited to attend for cervical screening, although only 26 were doing so regularly.

Results

Although the majority of women who took part in the research were regularly attending for screening (26/35), it was clear that this did not mean they accepted the official view on screening completely. It was common for women to offer alternative perspectives or ways of understanding and making sense of screening, in contrast to its presentation as a simple, painless and routine procedure. Three key themes were drawn upon:

Emotional Experiences

"it's just something that I just hate. I think it's...I don't know what it is...and I know to the nurse it's nothing but I think it's just, perhaps because I'm such a private person"

Physical Experiences

"Every time uncomfortable and painful, they're just...apparently I've got a funny shape so when the instrument goes in to open your cervix up it doesn't always go properly because of the shape"

Bodily Changes

"I feel more wary and in fact I feel more frightened than I have before because my body has changed completely, and I'm told it's normal for my age but I'll be glad when I've had the test and...there is nothing untoward happening"

Conclusions

Although the cervical screening programme currently achieves high coverage rates, it is clear that many women do not accept the official view, and develop alternatives. Whilst this may not impact upon attendance currently, it is important to understand how women think about screening, and what influences their views, as this will have an impact on whether and how they engage with health promotion strategies. This may be particularly pertinent given the recent focus on a vaccine for cervical cancer, and the potential changes to screening this may bring.

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