Assessment of Pap-Smear Testing and Women's Health within Taiwan

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Importance of Pap-smear screen

- Between 2002-2006 (five years), female cancers standardized incidence rates increased by 4.7 %, the highest increased in uterine cancer (31%) and breast cancer (22%).
  (Bureau of Health Promotion, Department of Health, Taiwan, 2010)

- 35 to 64 year-old women who have a regular Pap-smear every five years can reduce incidence by 84% , every three years can reduce 91% , every one year can reduce 93% of the cervical cancer risk.  (Bureau of Health Promotion, Department of Health, Taiwan, 2007).

- Invasive cervical cancer women: 70% had never done the Pap-smear and 20% had no screening within the last three years  (2007 Annual Report, 2008)

- Only 58% women do a Pap smear screening in last three years among age over 30 years, but there are still about 900,000 women over the age of 40 (20%) never had a smear.  (2010 Annual Report, 2010)
Importance of Motivational Interviewing (MI)

- MI was originally described by Miller in 1983 to address problem drinkers (Miller & Rollnick, 2002; Miller & Rose, 2009).

- MI is a patient-centered approach to helping patients resolve their ambivalence about health behavior change and build their motivation for change (Miller & Rollnick, 2002; Arkowitz & Miller, 2008; Sim et al., 2009).

- Collaboration, personal empowerment, individual privacy, and engagement in a discussion between present behavior and valued goals (Gorin, Wang, Raich, Bowen & Hay, 2006).

Express empathy
Develop discrepancies
Roll with resistance
Support self-efficacy
Aim

- To investigate the effectiveness of Motivational Interviewing strategies on women who did not participate in a Pap smear examination within the last three years.

- Note: One must have had a sexual encounter, even if only once, to enable pap-smears testing.
Methodology 1/2

- The research consisted of 2 phases involving both quantitative and qualitative methods.

- 90 women who had not received a pap-smear screen within the past three years were involved.
  - *Phase One* - A quasi-experimental design
  - *Phase Two* - An in-depth analysis to understand why some women did not have pap-smear testing
Methodology 2/2

- One control group (30 women) and the two intervention groups (30 women for each group), who received motivational interviewing (MI) were; the face to face (FI) group and the telephone interview (TI) group.

- Semi-structured interview methods and content analysis were used to understand in-depth, the pre and post intervention groups changed perspectives on pap-smear testing issues.

 Hasan paper is specifically for the qualitative data analysis.
<table>
<thead>
<tr>
<th>Construct</th>
<th>Relevant topics</th>
<th>Sample open-ended question</th>
<th>Educational message &amp; problem solving</th>
<th>MI skill</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affects</td>
<td>Fear of pain</td>
<td>How did you hear about a Pap-smear?</td>
<td>Share your feelings with consultant</td>
<td>Open-ended questions, express empathy</td>
</tr>
<tr>
<td>Beliefs</td>
<td>Painful</td>
<td>What have you heard about Pap-smear?</td>
<td>Share some personal feelings</td>
<td>Open-ended questions, express empathy</td>
</tr>
<tr>
<td>Values</td>
<td>Absence of symptoms</td>
<td>Can you tell me why you feel it not necessary?</td>
<td>The risk of developing cervical cancer increases with...</td>
<td>Open-ended questions roll with resistance</td>
</tr>
<tr>
<td>Convenience</td>
<td>Lack of time</td>
<td>How hard is it for you to get to the screening place?</td>
<td>Some information</td>
<td>Open-ended questions, information</td>
</tr>
<tr>
<td>Social normative influence</td>
<td>Other family member’s</td>
<td>Has your health care provider talked to you about this screen test?</td>
<td>Health concern</td>
<td>Open-ended questions, develop discrepancies, information</td>
</tr>
<tr>
<td>Perceived risk</td>
<td>Women’s risk</td>
<td>What have you heard about cervical cancer that leads you to believe you are not at risk?</td>
<td>Not having a family history of cervical cancer may be reassuring</td>
<td>Open-ended questions, information, knowledge</td>
</tr>
</tbody>
</table>
## Benefit or Loss in Pap-smear Screening

<table>
<thead>
<tr>
<th>Pap-smear screen acceptance</th>
<th>Benefit</th>
<th>Loss</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>Less stress (short term)</td>
<td>More stress (long term)+ Future health problems</td>
</tr>
<tr>
<td>Yes</td>
<td>Better health outcomes</td>
<td>Less psychological stress for future health problems</td>
</tr>
</tbody>
</table>
Results/ Demographics

- **Average age:** 48 years old
- **Education:** Junior high school
- **Condom use:** Yes
Demographic Characteristics

<table>
<thead>
<tr>
<th></th>
<th>FI(n=30)</th>
<th>n(%)</th>
<th>TI(n=30)</th>
<th>n(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (M±SD)</td>
<td>48.77±9.09</td>
<td></td>
<td>47.97±6.67</td>
<td></td>
</tr>
<tr>
<td>Junior high school</td>
<td>12(40.0)</td>
<td></td>
<td>15(50.0)</td>
<td></td>
</tr>
<tr>
<td>Full-time job</td>
<td>15(50.0)</td>
<td></td>
<td>21(70.0)</td>
<td></td>
</tr>
<tr>
<td>Religion</td>
<td>21(70.0)</td>
<td></td>
<td>17(56.7)</td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>26(86.7)</td>
<td></td>
<td>29(96.7)</td>
<td></td>
</tr>
<tr>
<td>Birth</td>
<td>27(90.0)</td>
<td></td>
<td>28(93.3)</td>
<td></td>
</tr>
<tr>
<td>One sexual partner</td>
<td>29(96.7)</td>
<td></td>
<td>30(100)</td>
<td></td>
</tr>
<tr>
<td>Condom use</td>
<td>25(83.3)</td>
<td></td>
<td>28(93.4)</td>
<td></td>
</tr>
<tr>
<td>2nd hand smoke</td>
<td>23(76.7)</td>
<td></td>
<td>19(63.4)</td>
<td></td>
</tr>
<tr>
<td>Effects of cancer</td>
<td>17(56.7)</td>
<td></td>
<td>6(20.0)</td>
<td></td>
</tr>
</tbody>
</table>
Results & Discussion (1/5)

- Women reported their general source of information was from TV and community leaders, there was no other health information available that they were aware of.

- Many commented that as time passed so quickly they were not able to follow up with regular timed checkups.
Results & Discussion (2/5)

- Limited sexual activity also influenced their decisions and they felt no need to have a check up.

- Many women felt they needed to participate in a pap-smear screen only if they were reminded by their health professionals or their spouse.
Results & Discussion (3/5)

Women's Top Five Reasons for not Participating in a Pap-smear

<table>
<thead>
<tr>
<th>Reason</th>
<th>FI</th>
<th>TI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of health knowledge</td>
<td>★</td>
<td>★</td>
</tr>
<tr>
<td>Forgot check up time</td>
<td>★</td>
<td>★</td>
</tr>
<tr>
<td>No more sexual life</td>
<td>★</td>
<td></td>
</tr>
<tr>
<td>Needed reminding</td>
<td>★</td>
<td></td>
</tr>
<tr>
<td>Lack of time</td>
<td></td>
<td>★</td>
</tr>
</tbody>
</table>
Results & Discussion (4/5)

**Dialogue example after MI:**

"Oh! I understand now. I have to have a regular pap-smear check up.”

"I do understand very well now, I have to find time to have a check up ASAP.”

"The result tells me that I have had a slight infection, the doctor said that if I follow it up regularly, it should be ok. I will always remember to participate in a pap-smear test at least every three years.”

(Taiwan advocacy)

4. “Whenever I am busy, I must still find time to go for a check up, Health is more Vital than anything.”
Results & Discussion (5/5)

- By using motivational interviewing techniques, we can help to simplify conflicts of change, enhance knowledge, bring about clearer thinking, and make use of the screening behaviors to enhance any relative advantages and disadvantages.

- This can clarify and detect any major health needs, strengthen self-efficacy and lower obstinate barriers. In this way, it facilitates the incentive to conduct and enhance the cognitive stage for behavior change.
Conclusion (1/3)

Barriers

MI

Motivation

Pap-Smear Testing

Stage of Change
Conclusion (2/3)

Barriers

Motivation

Stage of Change

MI

Pap-Smear Testing
Conclusion (3/3)

- There were multiple factors in determining if women had a pap-smear test. Although women knew of government encouragement to participate in screening they did not understand the symptoms, by utilizing motivational interviewing techniques, there was help to self-explore their health options and create self awareness by promoting self advocacy and active behavior patterns.

- The relationship between community nurses and client’s created an understanding which encouraged many women to alter their awareness and improve their self advocacy and enhance positive health outcomes.
Thank you for your attention.