

Letters

## Pap smear participation rates, primary healthcare and Indigenous women

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TO THE EDITOR: As practitioners in a community-controlled Aboriginal and Torres Strait Islander primary healthcare centre, striving to better meet the healthcare needs of our community, we would like to offer some thoughts on a recent article by Coory et al.<sup>1</sup>

In reporting on cervical cancer screening participation rates in Indigenous communities in Queensland, Coory et al identified the communities but did not inform them that the study was being conducted. We feel that such an approach is unhelpful and reflects a paternalistic attitude. The accompanying editorial<sup>2</sup> rightly drew attention to the lack of direct consultation with the communities involved and the consequences of this in terms of future interventions. Without a true partnership with the women and their communities, the authors were unable to do more than imply that participation rates were better in centres with a primary-healthcare approach to screening.

Information about the types of services and choice of Pap smear providers available in each community, in addition to the Pap smear screening participation rate, would be of great interest. It would, in part, answer the question the authors themselves posed about the role of primary healthcare in improving Pap smear participation rates. Already scarce funds could then be committed to improving access to quality primary healthcare rather than to conducting further trials.

A further factor, which was not explored in either the study or the editorial, was health promotion. The cornerstone of health promotion in the Indigenous community remains the "kit-video" model, comprising posters, leaflets and a video. In contrast, mainstream health promotion often involves expensive multimedia campaigns promoted by national celebrities. Such campaigns have been shown to increase Pap smear screening in the wider community.<sup>3,4</sup> To date, these campaigns have rarely had an Indigenous focus, and it might be argued that a consequence of this is the low Pap smear participation rate documented by Coory et al.

In our experience,<sup>5</sup> the Indigenous community does respond to culturally appropriate holistic primary healthcare. The study by Coory et al demonstrates a lack of commitment, collaboration and innovation — essential features for the delivery of quality primary healthcare — that is all too common in the current approach to Indigenous health.

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1. Coory MD, Fagan PS, Muller JM, Dunn NAM. Participation in cervical cancer screening by women in rural and remote Aboriginal and Torres Strait Islander communities in Queensland. *Med J Aust* 2002; 177: 544-547. <MJA full text> ([/journal/2002/177/10/participation-cervical-cancer-screening-women-rural-and-remote-aboriginal-and](http://journal/2002/177/10/participation-cervical-cancer-screening-women-rural-and-remote-aboriginal-and)) <PubMed> ([http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list\\_uids=12429002&dopt=Abstract](http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12429002&dopt=Abstract))

2. Hunt JM, Geia LK. Can we better meet the healthcare needs of Aboriginal and Torres Strait Islander women [editorial]? *Med J Aust* 2002; 177: 533-534. <MJA full text> ([/journal/2002/177/10/can-we-better-meet-healthcare-needs-aboriginal-and-torres-strait-islander-women](http://journal/2002/177/10/can-we-better-meet-healthcare-needs-aboriginal-and-torres-strait-islander-women)) <PubMed> ([http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list\\_uids=12428998&dopt=Abstract](http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12428998&dopt=Abstract))

3. Shelly JM, Irwig LM, Simpson JM, Macaskill P. Evaluation of a mass-media-led campaign to increase Pap smear

screening. *Health Educ Res* 1991; 6: 267-277. [PubMed](http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=10148692&dopt=Abstract) ([http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list\\_uids=10148692&dopt=Abstract](http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=10148692&dopt=Abstract))

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4. Mitchell H, Hirst S, Mitchell JA, et al. Effect of ethnic media on cervical cancer screening rates. *Aust N Z J Public Health* 1997; 21: 265-267. [PubMed](http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=9270151&dopt=Abstract) ([http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list\\_uids=9270151&dopt=Abstract](http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=9270151&dopt=Abstract))

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5. Office for Aboriginal and Torres Strait Islander Health. Better health care: studies in the successful delivery of primary health care services for Aboriginal and Torres Strait Islander Australians. Canberra: Commonwealth Department of Health and Ageing, 2001.

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1. Coory MD, Fagan PS, Muller JM, Dunn NAM. Participation in cervical cancer screening by women in rural and remote Aboriginal and Torres Strait Islander communities in Queensland. *Med J Aust* 2002; 177: 544-547. [MJA full text](#) [PubMed](#)