

Predictors of successful treatment acquisition among HPV positive women in Western Kenya



Migori, Kenya

CARISSA NOVAK | MScGH Candidate
DUKE GLOBAL HEALTH INSTITUTE

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Project summary: Cervical cancer remains the leading cause of cancer among women in Africa, resulting from lack of effective prevention strategies. The WHO recommends screening with HPV, followed by treatment with cryotherapy for HPV positive women. Because a two-visit strategy led to substantial loss-to-follow up, we sought to identify the barriers and facilitators of successful treatment acquisition among HPV positive women in Western Kenya.

PROJECT OBJECTIVES

AIM 1: To identify psychosocial, health belief and logistical factors related to treatment acquisition following a positive HPV diagnosis.

- Factors identified through use of a quantitative survey with 100 women.

AIM 2: To explore the relative contribution of various barriers and facilitators to treatment seeking behavior.

- Barriers and facilitators identified through use of qualitative in-depth interviews with 20 women.

METHODOLOGY

This study is part of a cluster-randomized clinical trial of strategies to offer HPV testing using self-collection. After collection, women had the option of receiving their results by going to the health facility, by phone call or by text. Women who were HPV positive were referred to the County Hospital for a visual exam and treatment with cryotherapy.

We conducted a mixed-methods study among HPV positive women who underwent cryotherapy and who did not seek treatment within 3 months of receiving their results.

- 100 Quantitative surveys were conducted over the phone or in person.
- 20 Participants for in-depth interviews were selected based on a preliminary analysis of survey results
- Themes explored include mental health, alcohol and drug use, peer network beliefs, partner support, relationship with healthcare system, cost, travel time and transportation.

SURVEY QUESTIONNAIRE

DEMOGRAPHICS

ALCOHOL AND DRUG USE

1. How often do you have a drink containing alcohol?
2. Has drinking alcohol ever impacted your ability to make decisions?

MENTAL HEALTH

1. Over the past two weeks, how often have you felt down, depressed or hopeless?

ABUSE HISTORY

1. Has a partner (husband, boyfriend) ever physically harmed you?
2. Have you sought treatment for any physical, sexual or emotional abuse?

PEER NETWORK BELIEFS

1. Do your peers know you have HPV?
2. Were you embarrassed (or ashamed, or upset/angry) your peers knew of your HPV status?

TREATMENT

1. Why did you seek treatment?
2. Has your partner asked how he can support you in terms of seeking HPV treatment?
3. What has been the main reason you delayed seeking treatment?

IN-DEPTH INTERVIEW

TREATMENT SEEKING THOUGHTS AND EXPERIENCES

1. What is your personal experience in seeking treatment for other illness/disease in the past?
2. What thoughts did you have when you found out you had a positive HPV test and that you needed treatment?
3. Do you have close relatives/friends who were diagnosed with HPV? Did they seek treatment and talk to you about it?

TREATMENT SEEKING CHALLENGES

1. What factors do you think would prevent you from getting treatment?
2. What role do men play in seeking treatment?
3. Who is the primary decision maker in your household?

IMPROVING TREATMENT ACQUISITION

1. What can be done to improve treatment access?
2. What do you think is the best way to mobilize women to get treatment?
3. How do you think we can improve messaging and outreach for those who are HPV positive and need to seek treatment?

Example questions from survey and in-depth interview

CONCLUSIONS

Data collection is ongoing, but preliminary observations include:

- Cost and transportation appear to be major barriers to successful treatment acquisition.
- Many women who accessed treatment said they did so because a health worker told them to or to prevent cervical cancer.

In conclusion, trust in the health care system is important, logistical barriers can be addressed and understanding health beliefs is essential to improving linkage to treatment.



Research team in Migori, Kenya

Participant sampling plan

This project would not have been possible without the support of DGHI, Dr. Megan Huchko, Sandra Yvonne and the entire Kenya-based study team.