Participation

The major objective of the National Cervical Screening Program is to reduce morbidity and deaths from cervical cancer by detecting treatable pre-cancerous lesions before their progression to cancer. Through increased participation, more women with pre-cancerous abnormalities can be detected and treated before progression to cervical cancer, thus reducing morbidity to women. In addition, increased participation will lead to the detection of more women with early stages of cancer where treatment can reduce mortality.

The program, through a variety of recruitment initiatives, actively targets women in the age group 20–69 years. The recommended screening interval for women in the target age group 20–69 years who have ever been sexually active at any stage in their lives is 2 years. Pap smears may cease at the age of 70 years for women who have had two normal Pap smears within the last 5 years. Women over 70 years who have never had a Pap smear, or who request a Pap smear, are screened.

Some women in the target population are unlikely to require screening. They include:

- those who have had a total hysterectomy with their cervix removed;
- those who have never been sexually active; and
- women with a previously diagnosed gynaecological cancer (this last group is monitored under a clinical arrangement) (Snider & Beauvais 1998).

Participation rate calculations should in principle exclude all three groups from the data. In practice, the data are adjusted to remove women who have had a hysterectomy but the latter two groups cannot be excluded due to methodological difficulties.

State and territory Programs have strategic plans in place to increase participation of women in cervical screening. Such strategies include targeting priority population-groups including Indigenous women, rural and remote women, and women from culturally and linguistically diverse backgrounds.

The objective, measurement and usefulness of participation as an indicator is outlined below:

- The participation indicator measures the proportion of the target population covered by the cervical screening program and the current screening policy of a 2-yearly interval.
- This indicator is important in assessing the contribution of the cervical screening program to changes in incidence and mortality.
- The indicator can be used as a means of evaluating recruitment practices, particularly if participation rates are analysed by demographic characteristics.
- When this indicator is used in conjunction with others, it can be used to support analysis relating to target groups and screening intervals.
- The data presented for this indicator refer to the 2-year period 1999–2000. Data for the period 1998–1999 are also included for comparison.

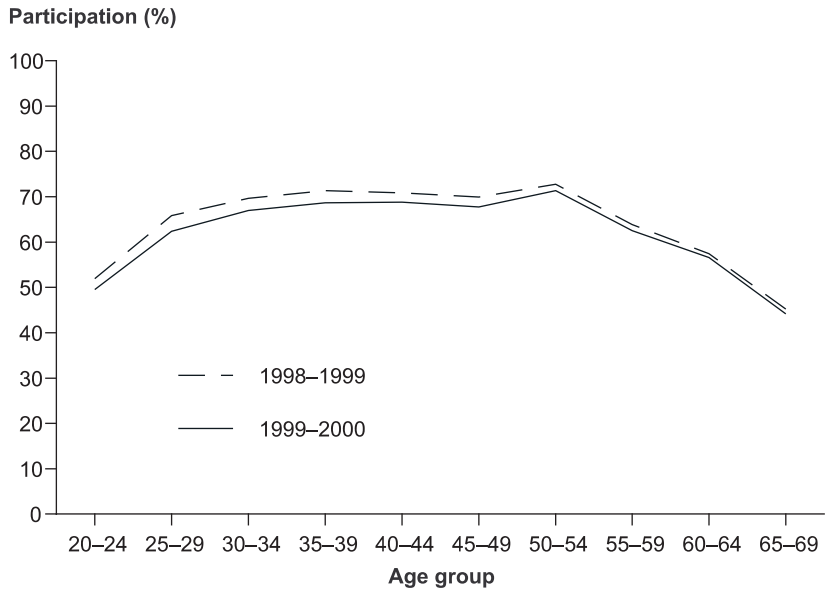
State- and territory-specific issues

- Except for Western Australia and the Australian Capital Territory, the participation rates are based on all women who were screened in that state or territory. This may lead to an over-estimation of numbers of women screened because of double counting of some women between states. This may be the result of difficulty in identifying state of residence for women in border areas and inclusion of women resident overseas.
- The reference period for this indicator is from 1 January 1999 to 31 December 2000. Queensland data, however, refer to the 2-year period from March 1999 to February 2001. This is because the Queensland Pap Smear Register began in February 1999 and therefore no data are available for the earlier period.

Indicator 1: Participation rate for cervical screening

Percentage of women screened in a 24-month period, by 5-year age groups (20–24, 25–29, 30–34, 35–39, 40–44, 45–49, 50–54, 55–59, 60–64, 65–69, 70–74, 75–79, 80–84, 85+) and for the target age group (20–69 years).

The graphs and tables below refer to the data for the target age group only. For detailed data refer to Tables 1b and 2b (pages 40 and 42).



Notes

1. Participation rates have been adjusted for the estimated proportion of women who have had a hysterectomy.
2. These data exclude women who have opted not to be on the register.

Source: AIHW analysis of state and territory Cervical Cytology Registry data.

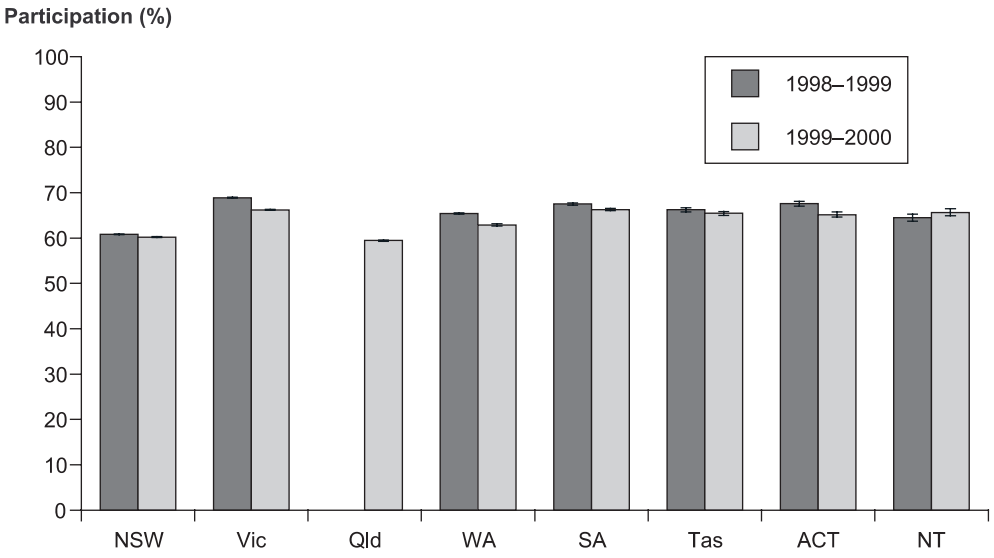
Figure 1: Participation rates in the National Cervical Screening Program, by age group, Australia, 1998–1999 and 1999–2000

	Age group										
2-year period	**20–24**	**25–29**	**30–34**	**35–39**	**40–44**	**45–49**	**50–54**	**55–59**	**60–64**	**65–69**	**20–69**
						(Per cent)					
1998–1999	52.0	66.0	69.7	71.4	70.9	69.9	72.8	63.9	57.4	45.2	**64.8**
1999–2000	49.5	62.4	67.0	68.7	68.8	67.8	71.3	62.5	56.5	44.2	**62.6**

Notes

1. The Queensland register began in February 1999; therefore no data were available for the 1998–1999 period.
2. Queensland data for the 1999–2000 period refer to the 2-year period from March 1999 to February 2001.

- In 1999–2000, 62.6% of women in the target age group 20–69 years participated in cervical screening. The proportion of women participating in screening has declined significantly between the two periods 1998–1999 and 1999–2000. Excluding Queensland data which were not included in 1998–1999 the proportion of women who participated in screening was 63.3% in 1999–2000, a statistically significant decline from 64.8% in 1998–1999.
- The total number of women screened in Australia in 1999–2000 was 3,314,787, of whom 3,244,329 (98%) were in the target age range of 20–69 years (Table 2a, page 41).
- Participation in screening is highest at the age groups 35–39 to 50–54 but declines sharply from the age group 55–59.
- Between the two reporting periods, the age-specific participation rates declined in all age groups. This decline was greatest at younger ages. Screening rates for women aged 25–29 years decreased from 66.0% to 62.4% and for women aged 20–24 years from 52.0% to 49.5%.



Notes

1. Rates are expressed as the percentage of the eligible female population and age-standardised to the Australian 1991 population.
2. No data were available for Queensland for the period 1998–1999 as the Queensland register began in February 1999.
3. Queensland data for the 1999–2000 period refer to the 2-year period from March 1999 to February 2001.
4. Bars on graphs represent 95% confidence intervals.

Source: AIHW analysis of state and territory Cervical Cytology Registry data.

Figure 2: Participation (age-standardised) in the National Cervical Screening Program by women aged 20–69 years, states and territories, 1998–1999 and 1999–2000

2-year period/ rate	NSW	Vic	Qld[a]	WA[b]	SA	Tas	ACT[b]	NT	Australia
1998–1999									
AS rate	60.8	68.9	n.a.	65.4	67.6	66.3	67.6	64.5	64.8
95% CI	60.7–60.9	68.8–69.0	n.a.	65.1–65.6	67.3–67.8	65.8–66.7	67.0–68.1	63.7–65.3	64.8–64.9
1999–2000									
AS rate	60.2	66.2	59.5	62.8	66.2	65.5	65.1	65.6	62.6
95% CI	60.1–60.3	66.1–66.3	59.3–59.6	62.6–63.1	66.0–66.5	65.0–65.9	64.6–65.7	64.9–66.4	62.5–62.6

(a) Queensland data for the 1999–2000 period refer to the 2-year period from March 1999 to February 2001.

(b) The WA and ACT Registries only register women with a valid WA or ACT address respectively.

- In 1999–2000, the proportion of women screened in the target age group of 20–69 years in states and territories varied from a high of 66.2% in Victoria and South Australia to a low of 59.5% in Queensland.
- Compared to 1998–1999, all jurisdictions except the Northern Territory experienced a decreased rate of participation in 1999–2000. The rate of decline was statistically significant in New South Wales, Victoria, Western Australia, South Australia and the Australian Capital Territory. Queensland had no data for the period 1998–1999.
- The Northern Territory registered an increased participation rate in the target age group, but the increase is not statistically significant.
- All registers except those in Western Australia and the Australian Capital Territory keep records of Pap smears for women screened in their jurisdiction but who live outside that jurisdiction. The largest proportion of interstate women recorded for 1999–2000 was in New South Wales (0.9% of all women screened in the state).