

A PROTOCOL FOR AN INNOVATIVE DISABILITY-INCLUSIVE STUDY TO ADDRESS INEQUITIES IN CERVICAL SCREENING PARTICIPATION FOR PEOPLE WITH INTELLECTUAL DISABILITY

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Background:

People with intellectual disability experience additional barriers to cervical screening compared with the general population due to stigma and shame. ScreenEQUAL is a 3-year Australian Government National Health and Medical Research Committee pilot which aims to work with people with intellectual disability to gather and translate new knowledge into immediate action to improve cervical screening participation among this under-screened group.

Methods:

This abstract describes the ScreenEQUAL study protocol which uses a multi-method integrated-Knowledge-To-Action approach. The unique co-design protocol is grounded in a team of academic researchers and researcher with intellectual disability and guided by an expert Advisory Group including people with intellectual disability, grassroots disability, service-delivery, and peak body organisations.

Results:

In Stage one, qualitative interviews will explore barriers and facilitators to cervical screening among people with intellectual disability, families/support people, General Practitioner and nurses, and disability sector stakeholders (n=20 per group). People with intellectual disability will be offered additional participatory body mapping and photovoice methodologies to further explore their lived experiences. Informed consent will be obtained using accessible study materials including Easy Read information, videos, and conversational language, before, during and after participants' interviews. Data from qualitative interviews and disability-inclusive workshops will inform the co-design of accessible health information resources for people with intellectual disability, their families/support people and health professional training materials. In Stage two, a randomised controlled trial will compare the impact of the co-designed resources, with no intervention, on cervical screening participation using linked cervical screening registry data (n≈200) and health literacy using qualitative interviews and body mapping (n≈20).

Conclusion:

ScreenEQUAL provides innovative resources and materials which can be rapidly integrated into the community to increase participation in cervical screening among

people with intellectual disability and transform clinical practice to improve their experience of the test, with implications for other cancer screening programs.

Disclosure of Interest Statement:

The Daffodil Centre, The University of Sydney, a joint venture with Cancer Council NSW, New South Wales, Australia, Translational Health Research Institute, Western Sydney University, New South Wales, Australia, The University of New South Wales, Sydney, Australia, Self Advocacy Sydney, Disability Innovation Institute, The University of New South Wales, Sydney, Australia, Family Planning Australia, Kirby Institute and The University of New South Wales, Sydney, Australia are funded by the National Health and Medical Research Council.