ABSTRACT

An Economic Approach Towards the Development of a Screening Programme for Cancer of the Cervix in Trinidad
- An Evaluation of Cost Recovery Approaches
- in the Public Sector.

by
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This thesis addresses the issue of cervical cancer in Trinidad, with specific reference to the feasibility of implementing a structured screening programme within a cost recovery framework. The Central region, as classified under the new health sector reform initiative is the base from which the study is done.

The research methodology drew heavily on both quantitative as well as qualitative techniques, with a key element being the conduct of a Knowledge, Attitudes, Behaviour and Practices (KABP) survey among client in health centres throughout the country. This approach was utilised in conjunction with key informant interviews with various personnel from the Ministry of Health, (MOH) the Caribbean Epidemiology Centre (CAREC), the Pan-American Health Organisation (PAHO), private medical practitioners, as well as a cross-section of pharmaceutical distributors.

It was clear from the study, that there is a need for the sensitisation of women in general and particularly those most at risk of contracting cervical cancer, as to the use and importance of the pap smear, as just one in four of the women interviewed at clinics presently ever had the test done. The bulk of this base had the test either at the request of their doctor, or as a prerequisite to proceeding on the contraceptive pill.

There was however a clear willingness in participating in a screening programme, once the issues were brought forward. One of the central questions dealt with the adequacy of ‘willingness’ measures as a proxy for demand, given possible divergence between willingness and ability particularly as it relates to paying for the service. The data, however, provided evidence that the gap between these areas were negligible in light of the weak impact of income on the decision making process relating to the test.

There is a generally strong case for a cost recovery approach to cervical cancer screening, particularly when compared with the status quo, the system that
presently exist at the government run clinics. This is manifested in terms of higher cases averted and lower cost per case prevented, a saving of over TT$65,000 per case. It is important, however, that the appropriate framework be in place to insure that the revenue generated by these cost recovery system are re-injected into the system. This will facilitate improvements in areas where deficiencies may exist at the primary health care clinics such as drugs and other supplies.

The cornerstone of this, or any similar approach is in the educational component, which may involve not only educating the young mothers, who presently attend clinics, but it should also include training the women as educators. The objective being that by sensitising them, they can in turn inform other women in high risk situations, who may not again be a regular client of the clinic.

Key words: Roger Mc Lean, cervical cancer, pap smear, screening, cost recovery.