

Feasibility and acceptability of telehealth and contactless HPV self-testing for Māori and Pacific women during a COVID-19 outbreak in New Zealand

METHOD

The eligibility criteria included those enrolled in a Local Doctors Tāmaki Health Clinic, aged 30-69, and due for cervical cancer screening. A total of 197 women were invited by text for an HPV self-test, and non-responders were followed up with a single phone call attempt. Self-test kits were delivered without contact, and samples were tested for oncogenic HPV types using the BD Onclarity HPV Test. Invalid results were recorded, and a repeat test was offered to the participant; negative test results were texted to women with advice to return for a routine cervical screen in five years, while HPV-positive results were communicated via a telehealth contact. Post-test questionnaires were sent via text link, and descriptive analyses were used to describe the proportion of participating women by age, ethnicity, screening status, and HPV results.

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CONCLUSION

- ✓ The offer of HPV self-testing during the COVID-19 lockdown was feasible and highly acceptable for Māori and Pacific women.
- ✓ Importantly, HPV self-testing via telehealth and mail-out, alongside other options, offers a potential pro-equity approach for addressing the impact of deferred screens due to COVID-19 and other longstanding coverage issues.

RESULTS

"Being comfortable in myself doing the self-screening and not feeling embarrassed. Thank you for the opportunity of self-respect"
Māori participant, 40-45 years

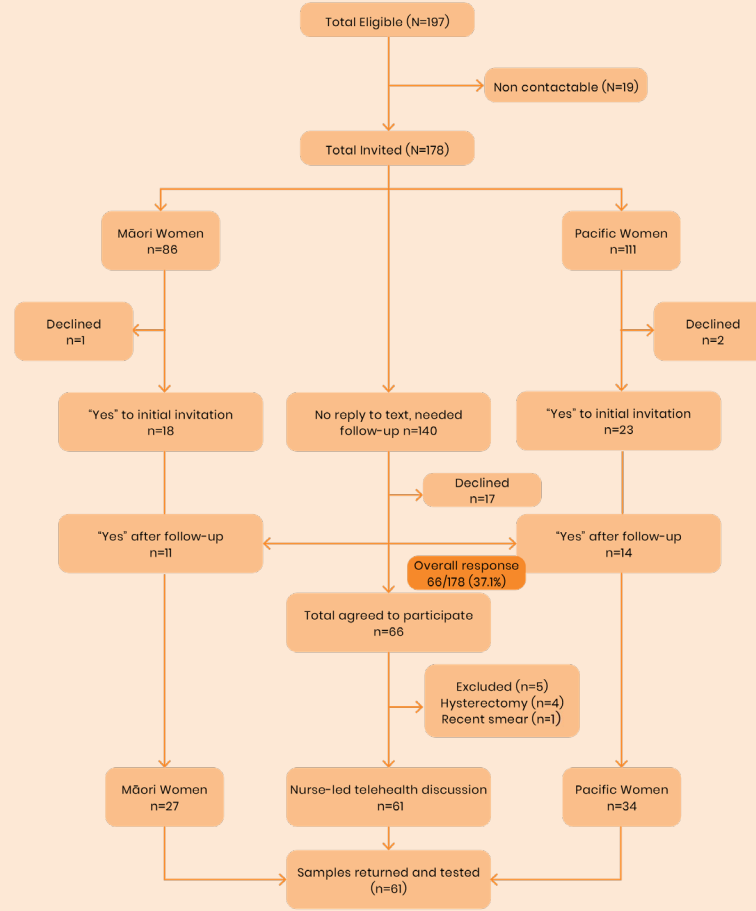
Table 1. Participant demographics

Characteristic	Overall	Māori	Pacific
Total eligible (%)	197	86 (43.7)	111 (56.3)
Median age (years)	43 (35-51)	42 (34-50)	43 (34-52)
Age group (%)			
30-39 years	86 (43.7)	38 (46.0)	48 (43.2)
40-49 years	51 (25.9)	21 (26.0)	30 (27.0)
50-59 years	38 (19.3)	11 (19.0)	27 (24.3)
60-69 years	22 (11.2)	16 (9.0)	6 (5.4)
Previous screening history (%)			
Due	71 (36.0)	21 (24.4)	50 (45.0)
Overdue	114 (57.9)	60 (69.8)	54 (48.6)
Never screened	12 (6.1)	5 (5.8)	7 (6.4)

"I was relaxed when I did the test at home"
Pacific participant, 40-45 years

"This was a great experience, my wish is that that is available to all women, this will save lots of lives. It was easy, most women will do it"
Māori participant, 50-55 years

Fig 1. Flow diagram showing eligibility and uptake of self-test offer



- A cohort of 197 eligible Māori and Pacific women were invited.
- Sixty-six women agreed to take part. Five were subsequently found to be ineligible. After one round of follow up 92 women (65.7%) were not able to be reached.
- Overall uptake was 61 samples returned (31.8%), and uptake of all contactable women was 70.9%.
- Six of the 61 HPV self-tests (9.8%) were positive and were followed up.



THE RESEARCH TEAM

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BACKGROUND

- Approximately 160 cases of cervical cancer are reported annually in Aotearoa New Zealand, with higher rates in Māori and Pacific women.¹⁻²
- Only 12% of affected women from 2012-2017 had been adequately screened,³ with substantially lower coverage for Māori, Pacific and Asian women.⁴ COVID-19 has impacted the delivery of primary care and preventative healthcare.
- Self-testing is an acceptable solution that improves equity, and telehealth could facilitate continued screening.⁵⁻⁶ However, any technology may have equity impacts.

AIM

Conduct a small proof-of-concept study to determine the feasibility and acceptability for Māori and Pacific women of a telehealth offer and contactless delivery of human papillomavirus (HPV) cervical screening self-test during the 2021 COVID-19 Level 4 lockdown in Auckland, New Zealand.