DEVELOPMENT OF AN INTERVENTION TO ALLEVIATE PSYCHOLOGICAL DISTRESS OF FOLLOW-UP PROCEDURES FOR CERVICAL ABNORMALITIES

M O’Connor, J Waller, P Gallagher, L Sharp
on behalf of the Irish Cervical Screening Research Consortium (CERVIVA)
Triangulation of study findings

Main findings

- **Survey**
  - Long term worries
  - Distress associated with physical after-effects

- **Qualitative study**
  - Short-term distress
  - Long-term distress
  - Lack of preparatory sensory information

Intervention development
Behavioural analysis

**Selected and specified target behaviour(s)**

- ‘Mobilising’ social support
- Engaging with colposcopy-specific information

**Intervention functions**

- Education, persuasion, training

**BCTs (active ingredients?)**

- 12 BCTs inc: Information about emotional consequences
Intervention development

**Mode of delivery**

- ‘Prototype’ website:
  - engaging, easy to use, navigate
  - Health literacy
  - Older women?

- One of the aims of the pretesting study is to explore (and compare) three possible modes of recruitment/delivery of the online prototype intervention:
  1. Business card
  2. Intervention colposcopy appointment Letter
  3. Text message

Combinations of all three
**Stage 1**
Pre-test ‘prototype’ intervention

- Pretest ‘prototype’ intervention with key stakeholders
- Face-to-face interviews with users (women) at each of the three clinics (n=15 women X 3 clinics) for feedback on interv.
- Generate hypotheses about the mechanisms of change (BCTs, Com-B)
- Refine intervention (website)

**Stage 2**
Pilot intervention

- Pilot study & process evaluation
- Estimate the impact of the intervention on post-colposcopy psychological wellbeing;
- Assess success of recruitment methods
- Assess compliance with post-colposcopy outcome assessment
- Process evaluation & economic evaluation

**Stage 3**
Optimise intervention

- Refine intervention again (after pilot study)
- Optimise intervention to be ready for evaluation in a large RCT
- separate funding for full RCT will be sought