Reviewer's report

Title: Determinants of acceptance of cervical cancer screening in Dar es Salaam, Tanzania

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Reviewer: Sarah Kobrin

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Determinants of Acceptance of Cervical Cancer Screening in Dar Es Salaam, Tanzania

Review by Sarah Kobrin

This manuscript describes a report on attempts to enroll women in cervical cancer screening in a very low resource area in Tanzania. This environment presents many challenges and the need is great, making substantial the potential impact of research in this area. A number of additions and edits would greatly strengthen this manuscript.

Major Compulsory Revisions

1. More information is needed to understand the study sample and to which population inferences can be drawn.
   a. First, is it true that all participants had never before been screened for cervical cancer?
   b. Second, apparently the sample was drawn in several ways. Some women (83%) were recruited via home visits as part of the screening program; others came from two different communities, using different recruitment methods (number not clear); still others, essentially volunteers, were the neighbors of those who were randomly selected at the second recruitment (number not clear). The differences among these groups should be discussed and described analytically. The recruitment approach could certainly affect who was reached and who decided to participate. Please clarify these different components of the sample and the effects of these differences on your findings.
   c. The volunteers should certainly have been removed from the sample, even if they were offered screening services. They did not have an equal probability of being selected; their presence in the sample renders it non-random and reduces the inferences that should be drawn.

2. Clarification is also needed about the process of completing surveys. Were all women asked to complete the surveys, both those who accepted the invitation and those who did not? How were the surveys administered and what percentage of each group completed them?

3. The actual text of the survey items is important to include, particularly in light of the authors' statement that some responses may have been “politically correct” rather than true responses. In the absence of reading the survey items, it
is difficult to understand how self-reported knowledge items could be subject to such a bias.

4. The Discussion could be reduced by 50%; the current presentation is somewhat overstated and not well supported. For example, the assertion that some of the responses may have been “politically correct” is not supported by reference to the available response options. Similarly, the statement “Apparently the group of women most at risk of cervical cancer is those who are also least likely to attend screening” is not supported and is too general, as it is response to the differences in parity only; the statement is also in contradiction to the age-related finding in the previous paragraph, showing, in fact, that the older women, who are at higher risk, were more likely than the younger women to accept the invitation.

Minor Essential Revisions

1. The text should be edited for English language usage.
2. Clarify if all participants have never been screened for cervical cancer, if true. The manuscript says none have participated in the program but is not clear if that statement is equivalent to having never been screened.
3. The Introduction should better clarify whether the research described is intended as an evaluation of an existing program or as research to inform future screening programs. Particularly, to what extent were the study methods limited by the existing program elements?
4. The general statement, in the Introduction, that reduction in cervical cancer mortality “…requires well implemented and organized screening programs …” is belied by the health care system in the US. We do not have organized screening, and we do not have perfect uptake of cervical cancer screening, but we have experienced a substantial reduction in incidence and mortality even with our opportunistic delivery of screening services. The authors should make their case differently.
5. In the Results section, the presentation of the participants’ knowledge regarding cervical cancer would be more informative if contrasted to general population knowledge in other countries that higher rates of cervical cancer screening. That is, can the authors substantiate the implied expectation that women who know the risk factors for cervical cancer, for example, are more likely to be screened?
6. No mention is made of HPV vaccination and testing. Unfortunately, the single Pap test promoted by the intervention described in this manuscript is not sufficient to have a substantial effect on cervical cancer mortality. Repeated screening, effective follow-up of abnormal tests, and available treatment are all needed for Pap testing to have beneficial health outcomes. However, the HPV vaccine provides durable protection, and evidence suggests even a single appropriately timed HPV test can help identify women who need treatment. The authors should discuss the implications of HPV-related options for the women of Dar Es Salaam.

Discretionary Revisions
1. Table 1 would be easier to read if it included a column showing the total sample. The discussion of these findings would be enriched by a comparison to the local, sampled population. How well do the study participants represent the population sampled? The presence of the “volunteers” in the analyzed sample increased the importance of this report on the success of the randomization.

2. Why the authors discuss programs for men and based on religious faith is not clear, as no mention of these approaches was made earlier in the paper. If they are suggestions for future research they could be discussed as such briefly and in the context of other successful interventions, if available.

**Level of interest:** An article of limited interest

**Quality of written English:** Needs some language corrections before being published

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests.