RTI CONTROL PROGRAMME BY PAP SMEAR SCREENING AMONG TRIBAL
WOMEN IN PALAKKAD DISTRICT

INTRODUCTION:-

The tribes contribute to 1% of the population of Palakkad District. They are
distributed in different regions. Nelliyampathy, Malampuzha, Attappady, Chittoor, Nenmara,
Kollengode and Valayar. Their total population comes to around 35000 of which 17538 are
females. Reproductive Tract Infections are diseases which are internally placed and nobody from
outside can see them. The most important aspect here is majority of these are symptom free or
with minor symptoms only. Many times the symptoms like itching, dysparunia, white discharge
etc are ignored as to normal situations by many women. The situation of tribal women in
Palakkad is very pathetic. They are totally unaware of their own health problems and least
bothered about Reproductive Tract infections. The prevalence of RTIs are very high among these
population. The role of menstrual hygiene is very important in development of RTIs. The sexual
hygiene like washing after intercourse etc is also very important factor. No study has been done
in these perspectives among any population and especially among the tribal population.

In a pilot study done among the tribes, as part of the routine work of Early
Cancer Detection Centre, Palakkad, it was seen that the prevalence of all the reproductive tract
infections together comes to around 60% of total pap smears taken. In this context, one has to
remember the fact that cancer of uterine cervix is the terminal event of changes occurring in the
epithelial lining of cervix. One of the determinants in the development of cancer of the uterine
cervix, namely Human Papilloma Virus infection is a form of RTI and studies show that the
factors contributing to the development of cancer of uterine cervix include prolonged untreated
RTIs, sexual promiscuity, viral infections with HPV virus etc Even the development of cancer
takes 10 to 15 years. The pre cancerous changes of cancer of uterine cervix if diagnosed ten or
fifteen years prior to the development of cancer, can be arrested at that stage.
Pap smear collection is a method of detecting cancers and precancers of uterine cervix. It is a painless procedure requiring only two minutes for the testing. The test can be performed even by a trained Lab technician. Even though this is the accepted method of screening for cancer of the uterine cervix, this test is useful in detecting reproductive tract infections also. The utility of papsmear in detecting RTIs has been recognized by the UNFPA and has recommended that papsmear programmes should integrate with the RTI detection clinics.

The Early Cancer Detection Centre (ECDC), Palakkad, is a peripheral satellite centre of Regional Cancer Centre, Thiruvananthapuram. The ECDC was established in 1986 with a mission of spreading the message of cancer control and prevention among the people of backward district of Palakkad and Malappuram. The centre is doing a significant service among the women of Palakkad in collecting papsmear and spreading the message of breast cancer early detection and prevention. The role of the centre in preventing the RTIs also is very significant. But due to the financial and other managerial problems, the centre is finding it difficult to work among the needy population like the tribal women.

Even though the Health Dept has launched an RCH Subproject in the district, the main thrust of these programmes were in the hardware improvement like buildings etc. The Giriswasthya project, which was operating among the tribal groups was also concentrating mainly on the hardware development. So an organised operations research looking into the aspect of RTIs, prevalence, determining factors, and preventive measures is lacking.

LITERATURE REVIEW: Studies show that the rate of infections as by papsmear programme in general population is as high as 20% (cherian et al 2001). The rate among hospital attending population is as high as 40% in some pockets (cherian et al, 1999). The rates from a tribal area of Wynad (general population including tribes also) shows a prevalence of about 10% (ongoing study). A pilot survey in the proposed study area shows a prevalence of about 5% for fungal infection, 8.3% for Trichomonas vaginalis infection, and a precancer prevalence of about 2.2% (data from ECDC, Palakkad, Kalavathy et al, under preparation). The cervical precancer rates in a general population comes to about 6% (cherian varghese, 2001). So the rates of RTIs as detected by papsmear programmes differ among different areas and data from a tribal
community is really lacking. There is an ongoing study in the district of Wynad, but there also the data is of a mixed nature from tribes and other communities. Regarding the risk factors for RTIs and cervical precancers, already there are some existing information (Murthy, 2000). In a study done among the hospital attending population, in North India, the prevalence of 72.3% of inflammation, 1.6% of dysplasia of various grades and .2% malignancies (N.S.Murthy, 1996).

OBJECTIVE:

- To study the pattern of menstrual and sexual hygiene among the tribal population of Palakkad
- To estimate the prevalence of RTIs among the tribal women of Palakkad
- To estimate the prevalence of Pre-cancer and Cancer of Uterine Cervix among this population
- To study the social and behavioural factors which contribute to the development of RTIs
- To create awareness among this population for the control and prevention of RTIs

GOALS:

- To provide assistance in the fields which are lacking in providing the tribal women better lifestyle.
- To empower the tribal women to protect them from developing RTIs.
- To provide them steady and sustainable development.

POLICY AND PROGRAMMATIC IMPLICATIONS:

- To develop innovative measures for maintaining menstrual hygiene like low cost sanitary napkins etc.
- The results of the study will be disseminated to various agencies both Governmental and Non Governmental and pressure will be put on Government for ratifying the problems

An RTI prevention strategy will be developed based on the findings from the study.
A baseline data regarding the tribal population of Palakkad was collected from the Census Office, District Collectorate etc. Secondary data collection was done from Early Cancer Detection Centre (ECDC), Palakkad a peripheral satellite unit of Regional Cancer Centre, Trivandrum, GuriSwasthya Project workers in Attapady, Lion’s FSH project office, Pudussery, Tribal health workers in Nelliaympathy & Kozhinjampara etc. Focus group discussions (FGDs) were done among many groups both tribal men and women, FGDs were conducted among the tribal health workers also. Mainly tribal health workers were utilized for collecting all kinds of secondary information and also for conducting FGDs. The investigator visited Palakkad two times for this purpose. Most of the data collection were done during these visits. But some data collection were done during the absence of the investigator also.

The difference in social and cultural habits of different tribal regions were felt significantly. Regions like Walayar, which was mainly depending on Malabar cements factory, the social demographic environment seems to be much more developed, compared to the interior of Malampuzha tribal settlement colony, Attapady, Sholayoor etc. The more agricultural development areas like Nelliaympathy, Kozhinjampara etc stand in between.

DATA ENTRY AND ANALYSIS
Data entry was done in Dbase and analysis done in SPSS. FDG data was entered in MS word. For internet search and data entry outside assistance had to be sought, since the computer in the ECDC, Palakkad was not so equipped.

TIME FRAME OF THE STUDY
The study was initiated in June 2003 and data collection was over by October 2003. The final result preparation was done in November 2003.
FINDINGS FROM THE STUDY

The ECDC at Kanjikode, is offering free pap smear examination for those who attend the center and also in the form of free cancer detection campaigns. As part of this programmes, three cancer detection campaigns were conducted at Agali, Sholayoor and Pudur. These were conducted in the year 2002 and was hosted by Giriswasthya project at Attapady. The details of the camp were collected both from ECDC, Palakkad and Giriswathya project. Around 160 women participated in the camps. Their pap smear findings show a higher percentage of TV infection. But other infections are more or less comparable to that of other population (Table 1, Table 2).

<table>
<thead>
<tr>
<th></th>
<th>Tribal Population</th>
<th>Control Population</th>
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<tbody>
<tr>
<td>Normal smear</td>
<td>23.75</td>
<td>37.0</td>
</tr>
<tr>
<td>Inflammation</td>
<td>46.25</td>
<td>41.15</td>
</tr>
<tr>
<td>Fungal infection</td>
<td>2.5</td>
<td>6.5</td>
</tr>
<tr>
<td>TV infection</td>
<td>13.2</td>
<td>6.2</td>
</tr>
<tr>
<td>Mild dysplasia</td>
<td>8.12</td>
<td>1.15</td>
</tr>
<tr>
<td>Moderate dysplasia</td>
<td>1.25</td>
<td>0.4</td>
</tr>
<tr>
<td>Severe dysplasia</td>
<td>1.25</td>
<td>-</td>
</tr>
<tr>
<td>Sq. cell ca.</td>
<td>1.25</td>
<td>-</td>
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There is a non-government organization (NGO) Lions- FSH project, which works among the tribal women. The data from Lions - FSH project, also gives the both pap smear findings and also the symptomatic complaints of tribal women. This project, is working for the health of tribal women and commercial sex workers (CSWS). According to the authorities of this project, there are a significant number of CSWs or women with sexual promiscuity among the tribal women. In their opinion, nearly 80% of the tribal women in the reproductive age group complains of persistent white discharge and itching. Through the NGO, these women are brought to ECDC, Kanjikode, Palakkad for pap smear. In ECDC, since these women are being examined and subjected for pap smear freely, they are very much making use of this service.
These women are given treatment according to the results of pap smear. Drugs are distributed from District Hospital, Palakkad. According to the workers of Lions FSH project pap smear plays an important role in identifying and treating of RTIs in tribal women. Of all the five districts where FSH projects are operating it is only in Ernakulam and Palakkad, there are performa in a satisfactory manner, because of the existence of two ECDCs.

Focus group discussions were conducted among the tribal women of Walayar near Malabar cements. In this FGD, about 8 tribal women participated. According to them, white discharge and itching were a main problem in women of the area, but after going to ECDC, taking pap smear and undergoing treatment, many of them are cured now. Many of them have reasonable knowledge about Reproductive Tract Infections (RTIs) cervical cancer etc. Many of them are using clothes during menstruation but with multiple use. Since water scarcity is very much, washing these cloths is a problem. As a result, in fact some tribal women in this area, especially educated, have started using sanitary napkins. But access to this is very limited. The knowledge about sexual hygiene is very poor. But they say that, sexual promiscuity is not frequent in that part of the community.

The views of another group is little bit different. They were from another side of Walayar, near Malabar Cements. But the socioeconomic development in this area is much less. Toddy consumption is very high in this area, both men and women consume alcohol. The menstrual hygiene is reasonable, with using good cloths etc. The knowledge about sexual hygiene is poor but sexual promiscuity is present in some families.

But of these villagers tribal women were well aware of the importance of “Ulluparisodhana” (pap smear examination) done at the ECDC, Palakkad and the treatment given according to the result which is highly effective in controlling RTIs. Such a situation is not seen even in Metropolitan cities like Thiruvananthapuram etc. This shows the importance of establishing these kinds of facilities in these remote areas.

Discussions were conducted at Nelliyampathy tribal area also. About 10 people, 6 women and 4 men participated in this. About 8 of the respondents were drunken. Toddy business was prevalent in the area. The tribal women in the area have not even heard about pap
smear. They know that while discharge is a common problem, but many think that it is normal. They complain that poverty is a very significant problem for them and they haven’t heard of sanitary napkins (these were asked to women only). They mainly use clothes (clothes like damaged sarees etc) and there are women who even use the leaf of arecanut tree (paala). Areca nut tree is commonly grown in the area. So the people of this area are completely ignorant about the very idea of papsmear. One man also reported that one women died two years back, due to SEEK in the uterus (SEEK – cancer).

The FGD was done among the health care providers in the Agaly, Attapady area. This group included male and female health workers etc. They were of opinions that pap smear campaigning done in the area in 2000-2001 helped many tribal women, but only a small percentage of them made use of the facility at that time. No follow-up campaign was also done. One uterine cervix cancer case detected at that time was taken to Coimbatore Medical College, and is still under treatment. Health workers were of opinion that white discharge with itching is a common complaint in the out patient clinic. They say that only a very small percentage of women have the facilities for menstrual and sexual hygiene.

Discussions were conducted with the natives of Agali, Pudur and Sholayoor. In all these three FGDs, both tribal and other residents participated. In Agali, the non-tribal populations had a very strong hold over the tribal population. In the FGD in Agali, the views of both of these population were different. The tribal men and women were totally ignorant about the idea of pap smear test and many women were confused it with per vaginal examination done by Gynaecologists or dilatation and curettage done by Gynaecologists. But many non-tribal men and women were aware of the uses and implications of pap smear. One tribal women in the group attended the cancer detection camp in 2001 and had a pap smear. She was of opinion that, women from health department, took away something from her uterus in that test. After the test, she is suffering from pain in the uterus and she never bothered to collect the result of that test. This is another aspect which araised in the interviews. Government (health dept.) conducts many camps and the results are not distributed to the concerned persons properly. The health workers were sure that they distributed all the results. The lack of awareness regarding reproductive tract infections, menstrual and sexual hygiene, was common among the tribes. Sexual promiscuity is
prevalent among both males and females and it is an accepted norms to a certain extent. But according to them, even though commercial sex work is not socially accepted, many girls are being attached to this field.

In the discussions with the tribes in the Kozhinjampara area, nearly 10 women participated. The women here were more arrogant because of the problem of scarcity of drinking water. When prompted about menstrual and sexual hygiene, they were bursting and breaking down into tears. According to them taking bath itself is a big problem because of the scarcity of water. But the awareness of these women regarding prevention of RTIs etc. were slightly high compared to those in the Agali area. Some women have heard of women going to ECDC, Kanjikode for the pap smear examinations.

But they didn’t know exactly what is meant by pap smear. Many raised the question of money as but fare, for going to Kanjikode, just for a test. The panchayat member who were present in the area, pointed to the importance of conducting pap smear campaigns in the area. Another team from Regional Cancer Centre, Trivandrum as a part of tribal welfare, has planned to conduct pap smear campaign in the area.

The discussions in the Malampuzha area was done by the Kudumbasre workers in Palakkad. Here, the idea that came out was that, poverty is the main problem. Drought has brought this much poverty in the area. Three women died of cancer in the last 5 years, but they could not afford any sort of treatment. The details of sexual hygiene and sexual promiscuity could not be asked to this group. Some people here have heard about the existence of ECDC, but they do not know anything about pap smear.

DISCUSSION

The pap smear reports show that the women with normal smears are less in tribal group. The TV infection is higher in the tribal group. The incidence of Squamous cell carcinoma and all grades of dysplasia are found to be high in the tribal group. The statistical analysis were not done, because the two sets of data are not collected as part of the programme and the data sets
are in the phase of publications for another work. The tribal group does not constitute only tribal women as a small percentage of non-tribal women also participated.

The comparative group was a sub-urban population. This shows that (the limitation of not having done a statistical analysis is admitted) the infections and neoplasm of uterine cervix are fairly high in the tribal area women. This may be attributed to so many factors like socio-economic, educational, cultural etc. This points to the need of a high awareness for the genital, sexual hygiene etc to these groups.

The focus group discussions reflected that regional differences in perceptions were marked. The tribal population living in the Walayar area near malabar cements were having very good awareness about the genital hygiene, sexual hygiene etc. They were served by the Lions-FSH project. This shows a good example of integration of reproductive tract infection/sexually transmitted disease control programmes with pap smear screening programmes. This is being effectively implemented in the two districts of Ernakulam and Palakkad were two early cancer detection centers of Regional Cancer Centre, Trivandrum were functioning.

The most important issue which came out in all discussions were the lack of basic needs like enough water supply, food etc. Many tribes were complaining of lack of enough water, even for washing their cloths. The natural resources of water have dried to great extent and Government water supply scheme has not been successfully implemented even if there are pipes, there is no water coming out of it.

CONCLUSION:

The study altogether shows the importance of social, cultural and educational developments which play an important role in the development of reproductive health of tribal women especially in the area of controlling reproductive tract infection. These programmes should be integrated with pap smear screening programme which help in identifying not only precancer and cancer but also a variety of infections like TV infection, fungal infection and viral infections.


Reports from the ongoing UNFPA aided cancer control programme in the districts of Kannur, Kasargod and Wynad, 2002.

Kalavathy, Veena, Binu, Nirmala. Findings from a screening programme for cancer in the tribal area of Puthur, Sholayur and Agaly of Palakkad District (under preparation).


N.S. Murthy, in ‘Natural history of Precancerous lesions of the Uterine cervix’, Acta Universitatis Tamperensis, ser A vol 527, 1996, pp 50