

PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form (<http://bmjopen.bmj.com/site/about/resources/checklist.pdf>) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below.

ARTICLE DETAILS

TITLE (PROVISIONAL)	Barriers and facilitators to cervical cancer screening for women from culturally and linguistically diverse backgrounds; a qualitative study of GPs
AUTHORS	Chandrakumar, Abira; Hoon, Elizabeth; Benson, Jill; Stocks, Nigel

VERSION 1 – REVIEW

REVIEWER	Moss, Esther University of Leicester College of Medicine Biological Sciences and Psychology, Leicester Cancer Research Centre
REVIEW RETURNED	11-May-2022

GENERAL COMMENTS	<p>Thank you for asking me to review this very interesting paper. Although only a small number of GPs were interviewed the data that has emerged is very interesting and clinically relevant for healthcare service planning.</p> <p>I only have two points I wanted to raise and would suggest that discussion is added to cover these points:</p> <ol style="list-style-type: none">1) Do the authors think that GPs taking the sample, rather than nurses as is the case in the UK, has resulted in less mistrust of CS and the healthcare service as compared to in the UK? eg [1]2) Written information in different languages was mentioned several times but did the GPs raise any issues about the literacy levels of patients with their primary language? Were non-written information resources eg videos considered? <p>1. Patel H, Sherman SM, Tincello D, Moss EL: Awareness of and attitudes towards cervical cancer prevention among migrant Eastern European women in England. J Med Screen 2020, 27(1):40-47.</p>
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REVIEWER	Williams, M George Mason University
REVIEW RETURNED	28-May-2022

GENERAL COMMENTS	<p>Reviewer Comments</p> <p>Overall Comment Cervical cancer is a significant public health issue. Viewing barriers and facilitators to cervical cancer screening from the GPs perspective is a new approach to studying factors that contribute to low screening rates. Overall, the article is well written</p> <p>Areas for Improvement</p>
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	<p>Theoretical Framework The Theoretical Domains Framework is design for use in implementation science. Therefore, it does not appear to be appropriate for this study. There was a lack of information regarding how the framework was used in the development of the interview guide or the analysis of the data.</p> <p>Citations The in-text citations are not properly formatted.</p> <p>Results Sentences should not start with numerals</p> <p>Limitations There are significant limitations of the study, that limit the use of the findings</p>
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VERSION 1 – AUTHOR RESPONSE

REVIEWER 1:

1. Do the authors think that GPs taking the sample, rather than nurses as is the case in the UK, has resulted in less mistrust of CS and the healthcare service as compared to in the UK? eg [1]

Patel H, Sherman SM, Tincello D, Moss EL: Awareness of and attitudes towards cervical cancer prevention among migrant Eastern European women in England. J Med Screen 2020, 27(1):40-47.

Thank you for your comment and providing this reference. Within the Australian health care system, cervical cancer screening is largely provided by general practitioners in the community as part of primary screening and preventative health care. Although there are some exceptions where nurses are able to provide cervical cancer screening in certain GP clinics and sexual health clinics, this is much less common, as compared to other healthcare systems such as in the UK. Therefore, it was not within the scope of our study to include nurses in our sample. However, we acknowledge that the transferability of our findings is therefore only limited to GPs and have included this as a limitation (page 266; lines 527-529).

2. Written information in different languages was mentioned several times but did the GPs raise any issues about the literacy levels of patients with their primary language? Were non-written information resources eg videos considered?

We thank you for this comment. We have gone back through the data collected and whilst the GPs did not raise any issues about the literacy levels of patients with their primary language, they did suggest non-written information resources such as videos and use of radio services to improve patients' overall health literacy. We agree that this would add to the paper and have included further information in our results and discussion (page 18; lines 342-347, and page 25; lines 500-502).

REVIEWER 2:

1. Theoretical Framework

The Theoretical Domains Framework is design for use in implementation science. Therefore, it does not appear to be appropriate for this study. There was a lack of information regarding how the framework was used in the development of the interview guide or the analysis of the data.

Thank you for this feedback. On reflection, we recognise that there is a need to provide a clearer rationale for using the Theoretical Domains Framework (TDF), and we have done this in the Introduction and Methods section of the manuscript (page 5; lines 97-106, and page 6; lines 126 and 130-131). The TDF has been used in healthcare-related research, and specifically in primary care, to theoretically understand professional behaviours in order to target change. Therefore, in line with these studies, we used it to identify domains where change could occur.

2. Citations

The in-text citations are not properly formatted.

Thank you for this feedback. We have correctly formatted the in-text citations as per the journal specifications.

3. Results

Sentences should not start with numerals

Thank you for bringing this to our attention. This has now been changed (page 9; line 168, and page 20; line 393).

4. Limitations

There are significant limitations of the study, that limit the use of the findings.

We agree that there are limitations to the study. As a qualitative study, our findings are not intended to be generalisable to the whole GP population, but rather add detailed insights into the barriers and facilitators faced by some GPs in every-day clinical practice when providing cervical cancer screening to this population group. We also recognise that the experiences of the GPs in our study may not be reflective of all GPs in Australia, as they had a keen interest in improving cervical cancer screening participation for CALD women. Accordingly, we have added further to the limitations section in our manuscript (page 26; lines 527-535).

VERSION 2 – REVIEW

REVIEWER	Williams, M George Mason University
REVIEW RETURNED	02-Sep-2022
GENERAL COMMENTS	Dear Authors, Thank you for considering the reviewers's comments. You have adequately addressed the concerns that I raised for the first review.

VERSION 2 – AUTHOR RESPONSE

Response Letter #2

Manuscript: Barriers and facilitators to cervical cancer screening for women from culturally and linguistically diverse backgrounds; a qualitative study of GPs

Date: 12th October 2022

Thank you for considering our manuscript for publication. We have included and addressed the editorial comments below.

1. Please ensure that all competing interests for authors are declared, including paid employment with companies. It appears that no competing interests are disclosed at present even though one of the authors' affiliation is from a private company

All authors have confirmed that they have no competing interests. Two of the authors are affiliated with GPEX, which is South Australia's Regional Training Organisation for general practice (GP) Registrars. GPEX is funded by The Australian Government (Department of Health) to deliver the Australian General Practice Training (AGPT) Program. GPEX employs staff, including general practitioners, to deliver training for doctors who wish to specialise in general practice. This research project was completed as part of an Academic Training Post for the main author, whilst still a GP Registrar under GPEX, and A/Prof Jill Benson (from GPEX) was appointed the role of medical educator to the main author. A/Prof Jill Benson is also a general practitioner.

2. Please include a copy of the interview guide questions in the Methods or as a Supplemental Information file, or include a citation if they have been published before.

We have uploaded the interview guide as a Supplemental Information File.