

Original Research Paper

Nursing

ASSESSMENT OF KNOWLEDGE ABOUT SCREENING FOR CERVICAL CANCER AMONG WOMEN

Ms. Priya Pethiya

Basic bsc IV Year, SRMMCON, Sawangi Meghe, Wardha

M.SC. Nursing, clinical Instructor, Department of Community Health Nursing, Smt. Radhikabai Meghe Memorial College Of Nursing, Sawangi(Meghe), Wardha. *Corresponding Author

ABSTRACT Background:. cervical cancer is a public health problem in developing countries like India, so that India alone accounts for one-quarter of the worldwide burden of cervical cancers. It is the one of the leading cause of cancer mortality, accounting for 17% of all cancer deaths among women aged between 30 and 69 years Objective of the study:- To assess the knowledge about Screening for Cervical Cancer among Women 2.To associate the knowledge about Screening for Cervical Cancer among Women 2.To associate the knowledge about Screening for Cervical Cancer among Women 2.To associate the knowledge about Screening for Cervical Cancer among Women 2.To associate the knowledge about Screening for Cervical Cancer among Women 2.To associate the knowledge about Screening for Cervical Cancer among Women 2.To associate the knowledge about Screening for Cervical Cancer among Women with selected demographic variables. Material and Method: A cross-sectional research design, Research conducted in community Sample: woman 20year and above purposive sampling Technique, Sample Size: 83 woman Structured questionnaire used for data collection Result. Majority of the women had poor knowledge about screening 79.5% (66) and only 1.3 (01) have excellent knowledge of screening for cervical cancer. Conclusion: Present study is carried out to find out Knowledge about Screening for Cervical Cancer. As mass media was the common source of information, they could be used to raise the awareness of the women and educating the women about cervical cancer and its screening.

KEYWORDS : Knowledge, Screening , Cervical Cancer

INTRODUCTION

Cancer is one of the leading causes of adult deaths worldwide. Every year about 14 million new cancer cases are detected and 8 million people die of cancer. However, there is a marked difference in the distribution of cancer sites across different regions of the world. In contrast to developed countries, cervical cancer is a public health problem in developing countries like India, so much so that India alone accounts for one-quarter of the worldwide burden of cervical cancers. It is the one of the leading cause of cancer mortality, accounting for 17% of all cancer deaths among women aged between 30 and 69 years. It is estimated that cervical cancer will occur in approximately 1 in 53 Indian women during their lifetime compared with 1 in 100 women in more developed regions of the world.¹

Screening for cancer is known to reduce mortality by early detection and treatment. However, there are two prerequisites for screening to reduce the rate of death from cancer. First, screening must advance the time of diagnosis of cancers that are destined to cause death. Second, early treatment of these cancers must confer some advantage over treatment at clinical presentation. Unlike other cancer sites, cervix can be subjected to screening for early diagnosis and treatment. However, despite availability of various cervical cancer screening methods, as well as large burden of disease in India, there is no countrywide government-sponsored public health policy on prevention of cervical cancer by either screening or vaccination or both. Therefore, this study was carried out to understand and present burden of cervical cancer in India, as well as to appraise the various cervical cancer screening methods and studies conducted for evaluating screening test for the detection of cervical carcinoma. However, since India is culturally, economically, and socio demographically dissimilar from other Western countries, we limited the scope of our study to screening trials conducted in Indian population, so as to provide locally relevant evidence-based recommendations for cervical cancer screening in Indian population.²

MATERIALS AND METHODS:

This study was based on cross-sectional research design, Research conducted in community population was woman 20year and above purposive sampling Technique, Sample Size 83 woman Structured questionnaire used for data collection inclusion criteria: .Woman who are 25 and above age 2.woman those who are willing to participate in the study. Exclusion criteria Women who are

mentally and critically ill and diagnosed with cervical cancer woman those who are not willing to participate in the study.

RESULT:- MAJOR FINDING OF THE STUDY AND DISCUSSION Table 1: Percentage wise distribution of UG students according to demographic characteristics.

| | | | | N =83 |
|--------|-----------------|----------------------------|-----------|------------|
| Sr No. | Variable | Categories of the variable | Frequency | Percentage |
| | Age | 20-30year | 6 | 7.2 |
| | | 31-40 | 34 | 41 |
| | | 41-50 | 17 | 20.5 |
| | | 51-60 | 15 | 18.1 |
| | | >60 | 11 | 13.2 |
| 2. | Married | Yes | 77 | 92.8 |
| | | No | 6 | 7.2 |
| 3. | Age at marriage | < 16 | 10 | 12.0 |
| | | 17-18 | 23 | 27.7 |
| | | 19-20 | 10 | 12.0 |
| | | 21-24 | 13 | 15.6 |
| | | 25-26 | 9 | 10.8 |
| | | >27 | 18 | 21.7 |
| 4. | Have children | Yes | 77 | 92.8 |
| | | No | 6 | 7.2 |
| 5. | Number of | 0 | 6 | 7.2 |
| | children | 1 | 11 | 13.3 |
| | | 2 | 39 | 47.0 |
| | | 3 | 21 | 25.3 |
| | | 4 | 6 | 7.2 |
| 6. | Family Income | <10000 | 22 | 26.5 |
| | | 10001-15000 | 12 | 14.5 |
| | | 15001-20000 | 10 | 12.0 |
| | | 20001-25000 | 2 | 2.4 |
| | | >25000 | 37 | 44.6 |

• Distribution of the women according demographic characteristics

 Distribution of their age reveals that 6(7.2%) are of 20-30years, 34(41%) are of 31-40 years, 17(20.5%) are of 41-50 years and 15(18.1%) are 51-60years and 11(13.2%) are <60year.Distribution of woman according to their marriage

VOLUME-8, ISSUE-5, MAY-2019 • PRINT ISSN No. 2277 - 8160

reveals that 77(92.8%) are yes and 6(7.2%) are no. Distribution of women according to their marriage age reveals that 10(12.0%) had marriage at age of <16 year, and 23(27.5%) women marriage at 17-18year10(12.0%)women marriage at 19-20year 13(15.6%)women marriage at 21-24year 9(10.8%)women marriage at 25-26year and 18(21.7%)women marriage at >27year. Distribution of women according to their children 77(92.8%) having children and 6(7.2%) no children. Distribution of women according to their number of children 6(7.2%) had zero children and 11(13.3%) had 01 children and 39(47.9%)had 02children and 21(25.3%)had 03 children and 6(7.2%)had 04 children. Distribution of women according to their Family Income reveals that 22(26.5%) had family income <10000 and 12(14.5%)have income 10001-15000 and 10(12.0%)have income 15001-20000 and 2(2.4%) have 20001-25000 and 37(44.6%) have income > 25000

Distribution of women according to the knowledge of screening about cervical cancer

| | | | | (n=83) |
|-----------------|-------|------------|-----------|------------|
| Level of | Score | Percentage | | |
| knowledge score | range | score | Frequency | Percentage |
| Poor | 1-5 | 0-25% | 66 | 79.5 |
| Average | 6-10 | 26-50% | 10 | 12.0 |
| Good | 11-15 | 51-75% | 6 | 7.2 |
| Excellent | 16-20 | 76-100% | 1 | 1.3 |

Majority of the women had poor knowledge of screening 79.5% (66) and only 1.3 (01) have excellent knowledge of screening about cervical cancer.

DISCUSSION

Majority of the women had poor knowledge about cervical cancer (81.9%) and it's screening (85.5%). Poor knowledge (84%) about cervical cancer and its screening has been reported from a study conducted on women who attended the hospitals. However, good knowledge has been reported from three studies conducted on nurses. Obviously, nurses being health care providers would have better knowledge.

Majority of the study population belong to upper income class (44.6%). Employed women had higher education. Educated women had higher knowledge than house wives Community based studies from India have found that educated women had better knowledge Only 7.2% of the women had ever undergone Pap smear testing. Community based studies have reported that 2%-6.9% of women got tested .Surprisingly, there was not much difference in proportions (7%-8%) among "nurses" working in tertiary care centers. There is gap between awareness and practice. The reason for not getting screened was absence of disease symptoms (18.1%) i.e., women were asymptomatic and hence perceived themselves as healthy. This reason is common for most of the other studies from India

RECOMMENDATIONS:

- As part of community health program Nursing students can be teach rural woman regarding the cervical cancer and it's screening
- The membership of undergraduate students in voluntary organizations should be strengthened.
- A similar study can be conducted among Post graduate students.
- The study can be repeated with a large sample.

CONCLUSION

Majority of women had poor knowledge. Mass media could be used to educate the women. There is a need to conduct community based study to know the practices of doctors and assess if they are educating and offering suggestions for screening.

3. Swan J

REFERENCES

asp#WOMEN

1.

2.

 Swan J, Breen N, Coates RJ, Rimer BK, Lee NC. Progress in cancer screening practices in the United States. Results from the 2000 national health interview survey. Cancer. 2003;97:1528–40. [PubMed]
Hearty K, Edita M, Margar S, A and A and a survey in the state state state state state state state state.

LinkFiles/Cancer_resource_Guidelines_for_CCSP.pdf.

World Health Organization; [Last accessed on 2012 Jan 23]. Globocan Fact Sheets.

International Cancer Research. Available fro http://www.globocan.iarc.fr/ factsheet.

Guidelines for cervical cancer screening. Government of India and WHO Collaborative

Program. [Last accessed on 2012 Jan 23]. Available from:http:// www.whoindia.org/

- Harry TK, Felicia MS, Ngugen S. A needs assessment of barriers to cervical cancer screening in Vietnamese American health care providers. Californian J Health Promotion. 2006;4:146–56.
- Gakidou E, Nordhagen S, Obermeyer Z. Coverage of cervical cancer screening in 57 countries: Low average levels and large inequalities. PloS Med. 2008;5:132. [PMC free article] [PubMed]
- Aswathy S, Quereshi MA, Kurian B, Leelamoni K. Cervical cancer screening: Current knowledge and practice among women in a rural population of Kerala, India. Indian J Med Res. 2012 Aug;136:205–10.[PMC free article] [PubMed]
- Shekhar S, Sharma C, Thakur S, Raina N. Cervical cancer screening: Knowledge, attitude and practices among nursing staff in a tertiary level teaching institution of rural India. Asian Pac J Cancer Prev. 2013;14:3641–5. [PubMed]
- Shah V, Vyas S, Singh A, Shrivastava M. Awareness and knowledge of cervical cancer and its prevention among the nursing staff of a tertiary health institute in Ahmedabad, Gujarat, India. ecancer. 2012;6:270. [PMC free article] [PubMed]
- Goyal A, Vaishnav G, Shrivastava A, Verma R, Modi A. Knowledge, Attitude and practices about cervical cancer and screening among nursing staff in a teaching hospital. Int J Med Sci Public Health. 2013;2:249–53.
- Asthana S, Labani S. Factors Associated with Attitudes of Rural Women Toward Cervical Cancer Screening. Indian Journal of Community Medicine. 2013;38:246–8. [PMC free article]