

Original Research Article

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Knowledge, Attitude Related to Cervical Cancer Screening among Women

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ABSTRACT

Keywords

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Cervical cancer mainly caused by human papilloma virus infection, is the leading cancer in Indian women and the second most common cancer in women worldwide. Almost 80% of cases occurred in developing countries. The objectives of the study were to assess the knowledge, attitude regarding cervical cancer screening test and to associate among the level of knowledge, attitude with their selected demographic variables. It is a Descriptive research with pre experimental design and 95 samples were selected through convenient sampling method. The structured questionnaire was distributed to the participants to assess the knowledge and attitude. The result showed that the participants had inadequate and moderate level of knowledge and attitude. No women had adequate knowledge and positive attitude. There was a significant association found between knowledge and education, contraception, abortion. The study concluded that the women need to be educated about the cervical cancer screening. The investigator distributed the pamphlets regarding cervical cancer to the participants.

Introduction

Cervical cancer is the second most common cancer in women worldwide and with an estimated 5, 28,000 new cases and approximately 2, 66,000 deaths, accounting for 7.5% of all female cancer deaths. Global incidence rate 2012, 16 per 1, 00,000 prevalence rate 1.41 million, there are 2, 68,000 deaths in the year of 2010 worldwide.

Almost 80% of the cases occurred in the developing countries, one of the leading causes of gynecological cancer related mortality and morbidity in developing country. Cervical cancer is preventable and treatable disease, early detection has reduced

mortality in world wide. The Papa Nicola smear is an efficient and effective method of detecting cytological changes in the uterine cervix.

Screening test helps to detect the early cytological changes like dysplasia.

Pap test should start on women aged 30 years or more. The incidence rises in 30-34 years of aged and peaks at 55-65 years.

Western Europe and Australia more than 20 per 100,000. In Melanesia 20.6 per 100,000, Middle East 22.2 per 100,000 and Eastern 27.6 per 100,000. In Indian women, HPV infection is common at 26-35 years of age.

HPV is associated with 50,000/- new case of cervical cancer and 250,000 associated cervical cancer death worldwide each year.

All sexually active women are infected with at least once during their life. The recent (NCRP 2009 and 2011) aged adjusted rate 24.3 followed by Barshi expanded at 19.5 and Bangalore at 18.9 in Chennai, from 41 to 16.7 in 2009, In Thiruvananthapuram from 9.2 in 2006. The purpose of this study was to assess the knowledge and attitude related to cervical cancer screening among women residing in kattupakkam at Chennai women

Statement of the problem

A study to assess the knowledge, attitude regarding cervical cancer screening test among women residing in kattupakkam, at chennai.

Objectives

To assess the knowledge and attitude regarding cervical cancer screening test among women.

To associate the level of knowledge and attitude with their selected Demographic variables.

Assumptions

Women have inadequate knowledge regarding cervical cancer screening.

Knowledge of women is influenced by different variables such as Age, Religion, Marital status, Age at marriage, Type of family, Education, Occupation, Income, source of information.

Pamphlet regarding cervical cancer screening will improve the awareness among women regarding cervical cancer screening.

Materials and Methods

Design

The design used in the study was non experimental descriptive research design which helps to provide factual information about the variables.

Setting

The research study was conducted at kattupakkam village, Kanchipuram district, Tamilnadu. It covers about 2,000 women with the age group 18 to 55 years.

Majority of the women are home makers, rest of them work under daily wages.

Inclusion criteria

All women with age group 18 to 55 years.

The women who lives in kattupakkam villege and can talk Tamil.

Exclusion criteria

The women who are not willing to participate in this study

Population

All women with age between 18 to more than 55 years, total 95 women were selected for this study at women residing at Kattupakkam.

Sample and sampling technique

95 women were selected by convenient sampling method.

Tools

The semi structured Questionnaire was used for data collection.

Table.1 Socio –demographics characteristics of the study participants

N=95

Characteristics	Women (n=95)	
	n	%
AGE		
18 -30 years	23	24.2
31-40 years	30	31.6
41-50 years	24	25.3
> 50 years	18	18.9
Religion		
Hindu	72	75.8
Christian	15	15.8
Muslim	8	8.4
Education		
No education	13	13.7
Primary Education	25	26.3
Secondary Education	39	41.1
Graduate	18	18.9
Occupation		
Government Employee	6	6.3
Private Employee	8	8.4
Self Employment	25	26.3
Home Maker	56	58.9
Income		
Rs < 5000	15	15.8
Rs 5001 – 10000	33	34.7
Rs 10001 – 15000	23	24.2
Rs > 15000	24	25.3
Marital Status		
Married	87	91.6
Un Married	4	4.2
Divorced / Widowed	4	4.2
Age at Marriage		
< 20 years	17	17.9
20 -25 years	66	69.5
> 25 years	12	12.6
No of Pregnancy		
Zero	12	12.6
1	17	17.9

2	50	52.6
3	16	16.8
Family Type		
Nuclear	86	90.5
Joint	9	9.5
Contraception Used		
Yes	73	76.8
No	22	23.2
No of Abortion		
0	14	14.7
1	16	16.8
2	62	65.3
3	3	3.2
No of Pregnancy		
0	13	13.7
1	63	66.3
2	13	13.7
3	6	6.3
Heard about Pap Test		
Yes	65	68.4
No	30	31.6
Source of Knowledge through		
Friends / Relatives	10	10.5
Media	54	56.8
Health Workers	31	32.6
Every women must be take pap smear test		
Yes	54	56.8
No	41	43.2

Table.2 Frequency and percentage distribution of level of knowledge and attitude on cervical cancer screening

Level of Knowledge	Frequency	Percentage	Level of Attitude	Frequency	Percentage
Inadequate	77.9	82%	poor	89.9	94.6%
Moderate	17.2	18.10%	better	5	5.26%
Adequate	0	0%	Positive	0	0%

Table.3 Association of the adequacy knowledge and attitude regarding cervical cancer screening test with social demographic characteristics

N=95

Characteristics	Knowledge				Attitude			
	Inadequate	Moderate	Chi square	P value	Inadequate	Moderate	Chi square	P value
Age								
18-30	22(23.2%)	1(1.1%)			22(23.2%)	1(1.1%)	2.725	0.436
31-40	22(23.2%)	8(8.4%)			27(28.4%)	3(3.2%)		
41-50	19(20.0%)	5(5.3%)	4.604	0.203	24(25.3%)	0(0%)		
>50	15(15.8%)	3(3.2%)			17(17.9%)	1(1.1%)		
Religion								
Hindu	55(57.9%)	17(17.9%)			68(71.6%)	4(4.2%)	1.686	0.430
Christian	15(15.8%)	0(0%)	6.614	0.037	15(15.8%)	0(0%)		
Muslim	8(8.4%)	0(0%)			7(7.4%)	1(1.1%)		
Education								
No education	6(6.3%)	7(7.4%)			10(10.5%)	3(3.2%)	10.235	0.017
Primary Education	24(25.3%)	1(1.1%)	19.357	0.000	25(26.3%)	0(0%)		
Secondary education	30(31.6%)	9(9.5%)			38(40.0%)	1(1.1%)		
Graduation	18(18.9%)	0(0%)			17(17.9%)	1(1.1%)		
Occupation								
Government Employee	6(6.3%)	0(0%)			6(6.3%)	0(0%)	1.154%	0.764
Private Employee	8(8.4%)	0(0%)			8(8.4%)	0(0%)		
Self Employment	17(17.9%)	8(8.4%)	6.563	0.087	23(24.2%)	2(2.1%)		
Home maker	47(49.5%)	9(9.5%)			53(55.8%)	3(3.2%)		
Income								
Rs < 5000	12(12.6%)	3(3.2%)			14 (14.7%)	1(1.1%)	4.188	.242
Rs 5001 – 10000	25(26.3%)	8(8.4%)	6.788	0.079	32 (33.7%)	1(1.1%)		
Rs 10001 – 15000	23(24.2%)	0(0%)			23(24.2%)	0(0%)		
Rs > 15000	18(18.9%)	6(6.3%)			21(22.1%)	3(3.2%)		
Marital Status								
Marrried	70(73.7%)	17(17.9%)	1.904	0.386	82(86.3%)	5(5.3%)	.485	0.785
Un Married	4(4.2%)	0(0%)			4(4.2%)	0(0%)		
Divorced/ Widowed	4(4.2%)	0(0%)			4(4.2%)	0(0%)		
Age at Marriage								
< 20	17(17.9%)	0(0%)			16(16.8%)	1(1.1%)	.308	0.857
20 – 25	53(55.8%)	13(13.7%)	5.798	0.055	63(66.3%)	3(3.2%)		
> 25	8(8.4%)	4(4.2%)			11(11.6%)	1(1.1%)		
No of Pregnancy								
0	12(12.6%)	0(0%)			12(12.6%)	0(0%)	4.750	0.191
1	16(16.8%)	1(1.1%)	14.543	0.002	17(17.9%)	0(0.0%)		
2	34(35.8%)	16(16.8%)			45(47.4%)	5(5.3%)		
3	16(16.8%)	0(0%)			16(16.8%)	0(0%)		
Contraception								
Used	64(67.4%)	9(9.5%)			72(75.8%)	1(1.1%)	9.583	0.002
Not used	14(14.7%)	8(8.4%)	6.647	0.010	18(18.9%)	4(4.2%)		
Type of Family								

Nuclear	72(75.8%)	14(14.7%)			82(86.3%)	4(4.2%)		
Joint	6(6.3%)	3(3.2%)	1.613	0.204	8(8.4%)	1(1.1%)	0.682	0.409
No of Abortion								
0	14(14.7%)	0(0%)			14(14.7%)	0(0%)		
1	12(12.6%)	4(4.2%)	17.497	0.001	13(13.7%)	3(3.2%)	7.297	0.063
2	52(54%)	10(10.5%)			60(63.2%)	2(2.1%)		
3 above	0(0%)	3(3.2%)			3(3.2%)	0(0%)		
No of Pregnancy								
1	10(10.5%)	3(3.2%)			12(12.6%)	1(1.1%)		
2	53(55.8%)	10(10.5%)	3.187	.364	61(64.2%)	2(2.1%)	3.709	.295
3	9(9.5%)	4(4.2%)			11(11.6%)	2(2.1%)		
4	6(6.3%)	0(0%)			6(6.3%)	0(0%)		
Heard about Pap Test								
Yes	48(50.5%)	17(17.9%)	9.556	.001	61(64.2%)	4(4.2%)	.327	.567
No	30(31.6%)	0(0%)			29(30.5%)	1(1.1%)		
Source of Knowledge								
Friends / Relatives	6(6.3%)	4(4.2%)			8(8.4%)	2(2.1%)	4.877	.087
Media	50(52.6%)	4(4.2%)	9.985	.007	52(54.7%)	2(2.1%)		
Health Workers	22(23.2%)	9(9.5%)			30(31.6%)	1(1.1%)		
Every women must take pap test						.021	.884	
Yes	47(49.5%)	7(7.4%)	2.071	.150	51(53.7%)	3(3.2%)		
No	31(32.6%)	10(10.5%)			39(41.1%)	2(2.1%)		
Like to know more about pap test								
Yes	25(26.3%)	4(4.2%)	.478	.489	29(30.5%)	0(0%)		
No	53(55.8%)	13(13.7%)			61(64.2%)	5(5.3%)	2.319	

A semi structured questionnaire with questions on social demographic data (age, religion, education, occupation, income, marital status, age at marriage, No of pregnancy, family type, Contraception used, No of abortion, heard about pap test, source of knowledge, every women must be take pap test).

The reliability of the questionnaire was tested in a sample, same of 10 samples demonstrating a high level of reliability.

Researcher adapted following definition in the women knows about Pap test for detect cancer consider adequate knowledge, not known about Pap test considered inadequate

knowledge. All statistical analysis was used test was set at $P < 0.05$. The test was to assess the association between two qualitative variables. The chi square test used for analysis to estimate the risk of different factors for inadequate knowledge of Pap test smear test "0" for inadequate, "1" for adequate knowledge. For attitude, rating scale was used, for direct questions positive scoring and indirect questions negative scoring was given.

Results and Discussion

The frequency percentage distribution of demographic variables of women shows with respect out of 95 women majority of them 30

(31.6%) to the age group of 31 to 40 years. Related to majority of the women belongs Hindu 72(75.8%).

In accordance to education majority of the women belongs to secondary education 39(41.1%), In regarding occupation most of the women belongs to home maker 56(58.9%) (Table 1).

Related to income majority of the women Rs.5001-10000/-, below income of 33(34.7%), Related to marital status majority of the women 87(91.6%) are married.

In related to age at marriage majority of the women 66 (69.5%) with the age of 20 to 25, regarding no of pregnancy 63(66.3%) of them says 1 pregnancy, regarding to type of family 86(90.5%) of women from nuclear family, In relation to contraceptive use 73(76.8%) women says yes, with respect to heard about cervical cancer screening test 65(68.4%), were already heard. In related to source of knowledge majority of them got information through media 54(56.8%) With regard question every women must be taken cervical cancer screening test 54(56.8%) say yes.

In Table 2, regarding knowledge majority, 77.9(82%) of the women had inadequate knowledge; 17.2(18.10%) of the women had moderate knowledge and none of them had adequate knowledge

Regarding the level of attitude 89.9 (94.6%) of the women had inadequate attitude 5 (5.26%) of the women had moderate attitude and No women had positive attitude on cervical cancer screening.

Table 3 shows the association of the level of knowledge and attitude with their selected demographic variables. There is significant association between the level of attitude and religion, education, No of pregnancy,

contraceptive used, No abortion, heard about pap test, source of knowledge.

The study concluded that women are with inadequate knowledge and no positive attitude towards cervical cancer screening. So, the researcher felt the need of women and distributed the pamphlets which contain information about the cervical cancer and its management including screening. Apart from that, the study was very interesting, the participants were very co-operative and eagerly asked many questions. The researcher clarified their doubts. The researcher encouraged the participants to spread the knowledge about the cervical cancer screening to their friends and relatives, which may create awareness among the people to prevent the cervical cancer in future. Researcher felt proud about the contribution to some extent in reducing the occurrence of cervical cancer.

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