



AMERICAN JOURNAL OF ADVANCES IN NURSING RESEARCH

Journal homepage: www.mcmed.us/journal/ajanr



ATTITUDE OF WOMEN REGARDING PREVENTION OF CERVICAL CANCER IN A SELECTED COMMUNITY OF KERALA

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Article Info

Received 15/10/2018

Revised 05/12/2018

Accepted 05/01/2019

Key word: Attitude;
Cervical Cancer;
Prevention; Rural.

ABSTRACT

Cervical cancer is the leading cause of mortality and morbidity among women in developing countries like India. Early detection by appropriate screening strategies is an important tool for the prevention of cervical cancer. Various studies reported that lack of knowledge and negative attitude as barriers to cervical cancer screening. Present study conducted with an aim to identify beliefs and attitude of women on prevention of cervical cancer in a selected rural community of Kerala, India. A descriptive cross sectional survey has been conducted in a selected rural community of Kerala by recruiting 419 women in the age group of 30-60 years of age. Non probability purposive sampling technique was adopted for the study. Sociodemographic data sheet and attitude assessment likert scale were used to collect data. Collected data was analyzed by Statistical Package for social sciences (SPSS) version 20 using appropriate descriptive and inferential statistics. Most of the subjects 307(73.3%) had unfavourable attitude, 110 (26.3%) had moderately favourable attitude and only 0.5% had favourable attitude towards prevention of cervical cancer. Significant association was found between attitude of women on prevention cervical cancer with education ($p<0.001$), age ($p=0.036$), age at the time of marriage ($p<0.001$), number of pregnancies ($p<0.001$) and number of children ($p=0.048$). Study identified many undesirable beliefs and views related to prevention of cervical cancer. So more need based health education programmes targeting the eligible women should be developed to improve cervical cancer screening behavior.

INTRODUCTION

Cervical cancer continues to be the leading cancer killer among women and is a major public health problem especially in developing countries like India, where women don't have routine cervical cancer screening[1]. Burden of the disease is enormous in developing countries, where mortality rate is 10-30 per 10,000 women as compared with 2-4 deaths per 10,000

women in developed countries [2-3]. Cervical cancer is the second most common cause of female cancer deaths in India and it is estimated that 11.1% of cancer related deaths are occurring due to cervical cancer every year [4]. Premature death and disability is more for cervical cancer as compared to other cancers as most of the women are diagnosed at an advanced stage rather than precancerous lesions or early stage cancers. It is very fatal if not detected and treated early and has a major impact on women's lives. Cervical cancer is one of the most preventable cancers by regular screening programme and engaging in healthy life style practice [2]. Various barriers

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Research Article



influencing the uptake of cervical cancer screening are embarrassment, fear of pain, high cost, lack of time, multiple visits and nonavailability of health care facilities for doing cytological screening [6-7]. Many studies revealed that negative attitude towards cervical cancer screening contributed to low uptake of cervical cancer screening. So present study was conducted with an aim to assess attitude of women regarding prevention of cervical cancer in a selected rural community of Idukki district, Kerala.

MATERIALS AND METHODS

A descriptive cross sectional survey has been conducted among 419 women in the age group of 30- 60 years in a selected rural community of Kerala. Subjects were selected from 4 tribal settlements of Idukki district, Kerala using non probability purposive sampling. Study was conducted during the time period from November 2015 to February 2016. Adult women in the age group 30 – 60 years who can understand Malayalam and willing to participate were included in the study. Women who are critically ill and already diagnosed with cervical cancer were excluded from the study.

Sociodemographic data sheet and attitude assessment likert scale were used to collect data. Sociodemographic proforma consisted of 17 questions related to the demographic characteristics of the study subjects. Five point likert scale was used to assess attitude of women regarding prevention of cervical cancer. It consisted of 20 items regarding cervical cancer and its preventive strategies. Positive items were scored as strongly agree -5, Agree -4 ,Uncertain -3, disagree -2, strongly disagree -1 and reverse scoring was given for negative items. Validity and reliability of the tool was established prior to data collection. Ethical clearance for conducting the study was obtained from institutional ethics committee and permission to conduct the study was obtained from Directorate of Health Services (DHS),

Trivandrum and District Medical Officer (DMO), Idukki district. Written informed consent was taken from each subject prior to data collection. Confidentiality and privacy of the information was assured. The researcher personally contacted the samples who were interested to participate in the study by visiting homes and collected data from subjects who are fulfilling the inclusion and exclusion criteria by structured interview method. Written informed consent was taken from each subject before data collection. Analysis was done using Statistical Package for social sciences (SPSS) version 20. Tests of significance were performed using 95% confidence interval, and the level of significance was set at 0.05 level. Descriptive statistics mean, frequency, percentage, standard deviation and mean percentage were used in the study. Associations between attitude on prevention cervical cancer with demographic variables were analyzed using Chi – Square test.

RESULTS

A total of 419 women participated in the survey. Majority of the women participated in the study belonged to nuclear family (74.4%) and Hindu religion (88.8%). Majority of the women were either housewives (44.4%) or labourers (42.7%). 21.5% of women participated in the study had no formal education. More than two third of the subjects were between the age group of 16- 20 years at the time of marriage. Most of the subjects 307(73.3%) had unfavourable attitude, 110(26.3%) had moderately favourable attitude and only 0.5% had favourable attitude towards prevention of cervical cancer. Details regarding demographic characteristics of study subjects are shown in table 1 and 2.

Table 3 shows that significant association exists between attitude regarding cervical cancer with education ($p<0.001$), age ($p=0.036$) age at the time of marriage ($p<0.001$), number of pregnancies (0.001) and number of children ($p=0.048$).

Table 1. Frequency distribution of subjects according to age, religion, type of family, dietary habit, educational status and occupation. N=419

Variable	Category	Frequency	Percentage
Age	30-40	239	57
	41-50	120	28.7
	51-60	60	14.3
Religion	Christian	47	11.2
	Hindu	372	88.8
Type of family	Nuclear	312	74.4
	Joint	107	25.6
Dietary habit	Vegetarian	59	14.1
	Nonvegetarian	360	85.9
Educational status	No formal education	90	21.5
	Primary or upper primary	179	42.7



Occupation	High school or higher secondary	141	33.7
	Degree and above	9	2.1
	House wife	186	44.4
	Own business	26	6.2
	Private job	21	5
	Government job	7	1.7
	Others (labourer)	179	42.7

Table 2. Frequency distribution of subjects according to age at the time of marriage, age at the time of first pregnancy, number of pregnancies, and number of children. N=419

Variable	Category	Frequency	Percentage
Age at the time of marriage	≤ 15	69	16.5
	16-20	272	64.9
	21-25	56	13.4
	26 and above	22	5.2
Age at the time of first pregnancy	Nulliparous	12	2.9
	13-17	88	21
	18-21	226	53.9
	22-25	60	14.3
	26 and above	33	7.9
Number of pregnancies	Nil	12	2.9
	1-2	188	44.9
	3-4	153	36.5
	5 and above	66	15.7
Number of children	No children	17	4
	1-2	235	56.1
	3-4	139	33.1
	5 and above	28	6.8

Table 3. Association between attitude regarding prevention of cervical cancer with selected sociodemographic variables. N=419

S.No	Variable	Test value	p-value
	Type of family	0.678	0.712 ns
	Religion	9.630	0.105 ns
	Education	214.827	0.000***
	Occupation	13.941	0.069ns
	Income	5.991	0.101ns
	Age	6.616	0.036*
	Age at the time of marriage	34.133	0.000***
	Age at the time of childbirth	32.712	0.000***
	Number of pregnancies	19.375	0.000***
	Number of children	7.469	0.048 *

Chi square test/Fishers exact test *significant at 0.05 level **significant at 0.01 level *** significant at 0.001 level
^{ns} Not significant

DISCUSSION

In the present study 21.5% of study subjects had no formal education, 2.1% were graduates and 33.7% had high school or higher secondary education. These findings were consistent with findings of studies conducted in India [8-9]. While contradictory findings were reported in

another study conducted among rural Indian women, where 54.5% were educated up to school education and 21.5% were graduates [10]. Contradictory findings were also reported in a study conducted in Kerala and North Bengal [12]. Most of the subjects 318 (74.4%) belonged to nuclear family. Study done by Aswathy S, Quereshi



MA, Kurian B and Leelamoni K in Kerala to assess knowledge and practice of women regarding prevention of cervical cancer also reported that over half of the subjects lived in nuclear family [11].

Highly unfavourable attitude regarding prevention of cervical cancer screening was reported in the present study. Study results shown that 73.3% subjects had unfavourable attitude. Similar findings were reported by B Das, K Gupta, R Ranjan, and M Singh in a study conducted in India [11]. Similar findings were also reported in a study conducted in Kuwait. Adequate attitude towards cervical cancer screening was reported only by 30.6% of Kuwaiti women [14].

However contradictory findings were reported in studies conducted in India. A study conducted in Tamil Nadu, India identified that majority 83.78% of women had positive attitude towards cervical cancer prevention and more than one tenth (12.6%) had negative attitude towards cervical cancer screening [15]. Another conducted in Bhopal, India also reported that majority of subjects (80.5%) expressed favourable attitude towards cervical cancer screening regardless of poor knowledge [15].

Significant association was found between attitude regarding prevention of cervical cancer with

income. A cross sectional conducted in a tertiary care hospital of New Delhi by B Das, K Gupta, R Ranjan, M Singh identified consistent findings, where higher level of attitude regarding cervical cancer screening among women with higher income [13]. Contradictory finding of higher participation in screening programmes among women belonging to low income group was found in a study conducted in South India [17].

CONCLUSION

Study explored beliefs and attitude of women on prevention of cervical cancer. Study findings revealed that most of the women had unfavorable attitude towards prevention of cervical cancer. This emphasizes on the importance of formulating effective strategies and communication methods for developing positive attitude towards cervical cancer screening in order to improve participation in various screening programmes.

ACKNOWLEDGEMENT

Nil

CONFLICT OF INTREST

No interest

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