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Attitude and Practice towards Cervical Cancer and its screening

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ABSTRACT

A study was conducted to assess the attitude, and practice towards cervical cancer and its screening among the women attending the Out Patient Department of a selected hospital at Patna, Bihar. The purpose of the study was to find the attitude and practice towards cervical cancer and its screening, also to check if there is any association present among them.

A non-experimental cross-sectional design was adopted for this study. Sampling was done by randomized sampling technique. Validity and reliability of the tool were done.

The main study was done at Danapur Sub-divisional Hospital, Patna, Bihar.

The results show that, most of the subjects showed a positive attitude towards the screening process, although practicing the screening was negligible.

51.4 % people have heard about Pap smear test, 57% of people do not know that it is recommended after the age of 30 years. Interval of Pap smear test are not known by majority people 77.1% and it is available in Govt Health Wellness center (57.1%).

When asked regarding the practice of screening of cervical cancer only ten people has undergone the screening among 350 participants.

The study shows there is a significant association between education and practice towards cervical cancer and its screening.

So, ultimately it can be concluded that although people are having a positive attitude towards cervical cancer and its screening, but much more rigorous motivation is needed to make it a regular practice.

The study has implications in different nursing fields.

INTRODUCTION

Cervical Cancer is a known name in the field of cancer for women. Once the diagnosis is confirmed to check the invasion of the disease into other parts of body several tests can be performed. Visual Inspection by Acetic acid, Cystoscopy or Protoscopy, Computed Tomography Scan (CTI), Magnetic Resonance Imaging (MRI), Positron Emission Tomography Scan (PETS) are the common types of tests performed to determine the invasion and this process is known as Staging of cervical cancer.

The general manifestations of cervical cancer are decreased appetite leading to generalized weakness, feeling of tiredness, weight loss at the beginning. But in advance stages, there can also complain of pelvic pain, heavy bleeding from the vagina, incontinence of urine or feces even bone fractures. Cervical cancer may be totally asymptomatic also, particularly, early-stage cervical cancers, like precancerous changes. Symptoms may develop when the cervical cancer cells start to invade surrounding tissues.

Easily available screening methods like Visual Inspection by Acetic Acid (VIA) for the low socio-economic group has already been launched by Govt of India in the year 2017 in every primary health care center. If detected and treated at an early stage cervical cancer can be prevented as well as cure. Thus, this study is planned to verify the KAP among the women of Bihar in a selected hospital.

In this study 18-45 years, women are targeted to be assessed regarding the attitude and practice towards cervical cancer and its screening, visiting the selected hospital outpatient department in Patna, Bihar.

Statement of the problem

“A cross-sectional study to assess Attitude and Practice towards Cervical cancer and its screening among women, age group 18-45 years attending Gynecological Outpatient Department in a selected hospital of district Patna, Bihar”.

Objectives of the study:

1. To assess the attitude towards cervical cancer and its screening.
2. To assess the practice towards cervical cancer and its screening.
3. To check the association between certain socio-demographic profile and the Attitude and Practice towards cervical cancer and its screening.

Hypothesis: It is a tentative prediction or relation between two variables. All hypothesis will be tested at 0.05 level of significance.

1. **H₁:** There will be a correlation among Attitude and Practice towards cervical cancer and its screening.
2. **H₂:** There will be some association between certain socio-demographic profile and the Attitude and, Practice towards cervical cancer and its screening.

Assumptions:

- Individual attitude and, practice regarding cervical cancer differ from person to person.
- There is a lack of attitude and, practice towards cervical cancer among the illiterate or low socio-economic group.

Delimitation:

The study is delimited in the subdivisional hospital Danapur, Patna, Bihar

RESEARCH METHODOLOGY

For this study, a non-experimental cross-sectional approach has been adopted.

The research design adopted for this study is a non-experimental cross-sectional design.

The study mentioned here has been conducted in the Out Patient Department (OPD), Danapur Sub-Divisional Hospital, Patna, Bihar. Permission from the HOD of the Hospital has been taken.

In the present study women aged 18-45 years attending the OPD and willing to participate will be included in the study.

The sample size should be good enough to identify the relationship among variables or determine differences between groups.

In this study for sample size determination, Yamane provided formula has been used.

A 95% confidence level and $P = 0.5$ are assumed for the Equation:

$$n = \frac{N}{1 + N(e)^2}$$

Where n = sample size, N = population size, e = the level of precision., so in the study the sample size was 333 and the non-response rate was considered 5%. So, the final sample size was 350.

In the study, randomized sampling technique is planned to choose the sample. All the people attending the OPD of the selected hospital and fulfilling the inclusion criteria were randomly selected for the study. After obtaining written consent from each participant data collection procedure is explained to them

Description of Tool

Tool I – Socio-demographic and clinical profile: Assessment of socio-demographic variables along with the clinical history is done through the tool. Demographic data include age, education, occupation, monthly income, marital status, number of children, the contraceptive method used, religion.

Tool II – Structured Likert scale regarding risk factors of cervical cancer to check the attitude towards cervical cancer. It includes total 10 statements. It is a 5 point Likert scale consisting of strongly agree, agree, neutral, Disagree, strongly disagree. 5 of the statements are positive whereas 5 of them are negative. So reverse marking has been done for half of the statements.

Tool III – One question is asked to all the participants to assess the practice towards cervical cancer.

Ethical consideration:

With the view of ethical consideration, the researcher discussed the purpose of the study with the university and the HOD of Danapur Sub-Divisional hospital where the research was about to be done. Former permission has been obtained from the HOD. Subjects were explained about the purpose of the study. Verbal consent was taken from the samples. They were assured that the information given by them will be kept confidential and will be used purely for research purposes.

Data Collection procedure:

Data collection is the gathering of information needed to address the research problem.

Prior to data collection, former permission was obtained from the Hospital HOD. The self-structured tools were edited by the experts. Prior to handing the questionnaire to the women, the investigator gave a self-introduction to the women and explain the purpose of gathering the information. A good rapport was established with the subjects. They were assured that their response will be kept confidential and will be used only for research purposes. Verbal consent was taken from the women. The time taken by each respondent for answering the tool was an average 20 - 30 mint.

RESULTS

Section I: Frequency and Percentage distribution of sample characteristics.

Table I: DEMOGRAPHIC CHARACTERISTICS AND THEIR DISTRIBUTION

N = 350

Sl no	Demographic characteristics	N	Percentage
1	Age		
	18-27 years	180	51.4
	28-37 years	130	37.1
	38-45 years	40	11.4
2	Education		
	Illiterate	30	8.6
	Primary	200	54.1
	Secondary	120	34.3
3	Occupation		
	Home-maker	120	34.3
	Govt/private in-service	60	17.1
	Business	100	28.6
	Maidservant	70	20.0
4	Monthly income		
	Less than Rs 10000	70	20.0
	Rs 10001-Rs 15000	100	28.6
	Rs 15001-Rs 20000	80	22.9
	Rs. 20001 and above	100	28.6
5	Marital Status:		
	Married	290	82.9
	Never married	40	11.4
	Widow	20	5.7
6	Number of children		
	No children	60	17.1
	One	170	48.6
	Two	100	28.6
	More than two	20	5.7
7	Contraceptive method used		
	No method used	210	60.0
	Temporary method used	110	31.4
	Permanent method	30	8.6

Table number 1 depicts that the majority of the study participants were belonging to the age group 18-27 years (51.4%) followed closely by acquiring 37.1 % in the age group of 28-37 years. Few people (11.4 %) are in the age group of 38-45 years.

According to the educational status maximum number of the subjects, that is 54.1% are having primary education, about 34.3 % of people are going for secondary education whereas 8.6% of people are illiterate.

The distribution of occupation shows that the major portion of the study sample is homemaker, 34.3%, followed by women who are in business i.e. 28.6 %. 20 % and 17.1 % of women are working as maidservant and holding private/ Govt service consecutively.

As per the monthly income, equal number of people are belonging to the monthly income group of Rs 10001-Rs 15000 and Rs 20001 and above simultaneously. 22.9 % are in the income group of Rs 15001- Rs 20001. 20 % of people are having an income of less than Rs 10000 per month.

Married women 82.9 % are occupying a big part of the sample. 11.4 % are never married and only 5.7 % are widow.

Table II: Frequency and percentage distribution of Attitude and Practice:

N = 350

SI no	Statement	Response	Frequency
1	Cervical cancer is most common type of cancer in women.		
	Strongly agree.		
	Agree	270	77.14
	Neutral	60	17.14
	Disagree	0	
	Strongly disagree	20	5.71
		0	
2	One need not to be aware of cervical cancer as I cannot have it at any exposure.		
	Strongly agree.	40	11.42
	Agree	40	11.42
	Neutral	20	5.71
	Disagree	140	40
	Strongly disagree	110	31.42
3	Any woman, as well as yourself, can acquire cervical cancer		
	Strongly agree.		
	Agree	110	31.42
	Neutral	140	40
	Disagree	0	
	Strongly disagree	60	17.14
		40	11.42
4	Bleeding between two periods is not a matter of concern.		
	Strongly agree.	200	57.14
	Agree	90	25.71
	Neutral	0	
	Disagree	40	11.42
	Strongly disagree	20	5.71
5	Screening helps in prevention of cervical cancer		
	Strongly agree.	70	20
	Agree	210	60
	Neutral	10	2.85
	Disagree	40	11.42
	Strongly disagree	20	5.71
6	Cervical Cancer is a contagious disease		
	Strongly agree.	70	20
	Agree	60	17.12
	Neutral	10	2.85
	Disagree	170	48.57
	Strongly disagree	40	11.42
7	Screening never cause harm to anyone.		
	Strongly agree.	30	8.57
	Agree	120	34.28
	Neutral	30	8.57

	Disagree	140	40
	Strongly disagree	30	8.57
8	Cervical cancer cannot lead one to be infertile if left untreated		
	Strongly agree.		
	Agree	70	20
	Neutral	50	14.28
	Disagree	30	8.57
	Strongly disagree	180	51.42
		20	5.71
9	HPV vaccine can prevent cervical cancer.		
	Strongly agree.	90	25.71
	Agree	160	45.71
	Neutral	0	
	Disagree	100	28.57
	Strongly disagree	0	
10	Screening of cervical cancer is expensive.		
	Strongly agree.	30	8.57
	Agree	140	40
	Neutral	20	5.71
	Disagree	160	45.71
	Strongly disagree	0	
11	Have you ever been screened for cervical cancer?		
	Yes	10	2.85
	No	340	97.14

The table shows that when assessing the attitude towards cervical cancer and this screening majority of the people (77.14%) have strongly agreed with the statement that it is the most common type of cancer in women. About 40 % of people agreed that they can acquire cervical cancer. 57.14% of people strongly agreed that bleeding between two periods is a matter of concern whereas screening for cancer can prevent the disease. The majority of people disagreed that cervical cancer is a contagious disease(48.57%) or it can not lead to infertility (51.42). although the majority of people agreed that the HPV vaccine can prevent cervical cancer(45.71%) but, whether screening is expensive or not people have less idea (as shown table no V).

When asked regarding the practice of screening cervical cancer only ten persons has undergone the screening among 350 participants.

Table III: Comparing Mean and Standard Deviation

Variable	N	Attitude	
		Mean	Std. deviation
Age			
18-27 yrs	180	.6667	.48507
28-37 yrs	120	.4167	.51493
38-45 yrs	50	1.0000	.00000
Education			
Illiterate	30	.6667	.57735
Primary	200	.7000	.47016
Secondary	120	.5000	.52223
Occupation			
home-maker	130	.6154	.50637
service holder	70	.5714	.53452
business woman	80	.6250	.51755
maid-servant or caretaker	70	.7143	.48795
Monthly income per capita			
less than 10000	80	.8750	.35355
10000-15000	110	.6364	.50452
15000-20000	80	.5000	.53452
20000 - and above	80	.5000	.53452
Marital Status			
Married	290	.6897	.47082
never married	40	.2500	.50000
Widow	20	.5000	.70711
Number of children			
no children	50	.6000	.54772
One	190	.6316	.49559
Two	90	.5556	.52705
more than two	20	1.0000	.00000
Contraception method used			
no method used	200	.6500	.48936
temporary method used	110	.5455	.52223
permanent method	40	.7500	.50000

Considering comparison of mean score value, the age group of 28-37 years has shown to have a higher mean value of $1.00 \pm$ with the highest positive attitude has been shown in the age group of 38-45 years, with the mean value of $1.00 \pm$. In the case of education, respondents with a primary level of education have been found to have the most positive attitude (mean $0.700 \pm$, standard deviation $0.470 \pm$) towards cervical cancer screening. Regarding occupation maidservants or caretakers are having most positive attitude, mean $0.7143 \pm$ and standard deviation $0.487 \pm$. when comparing mean among different monthly income, the most positive attitude has been shown by the lowest income group that is respondents who are earning less than Rs 10,000 per month with the mean value of $0.875 \pm$, standard deviation $0.353 \pm$. Most positive attitudes were among the married participants with the mean of $0.6897 \pm$, a standard deviation of $0.470 \pm$. Most positive attitudes observed among the people having more than two children with a mean of $1.00 \pm$. respondents with most positive attitude have shown by the people who adopted permanent contraceptive method with the mean value of $0.750 \pm$ and standard deviation $0.500 \pm$.

SECTION III: To check the association between Knowledge, attitude and, practice with selected demographic variables:

Table No IV: Association with the selected demographic variables and knowledge, attitude and, practice.

VARIABLE	CHI-SQUARE	df	P	Significance
ATTITUDE				
Age	5.374	2	0.068	Not significant
Education	1.305	2	0.521	Not significant
Occupation	0.328	3	0.955	Not significant
Monthly income	3.217	3	0.359	Not significant
Marital status	3.060	2	0.216	Not significant
Number of children	1.406	3	0.704	Not significant
Contraceptive method used	0.617	2	0.734	Not significant
PRACTICE				
Age	1.973	2	0.373	Not significant
Education	10.98	2	0.004	Significant
Occupation	3.474	3	0.324	Not significant
Monthly income	3.474	3	0.324	Not significant
Marital status	0.213	2	0.899	Not significant
Number of children	0.867	3	0.833	Not significant
Contraceptive method used	0.772	2	0.680	Not significant

It is noted from Table no IV that the 'p' value is less than 0.05 only for the demographic variable education related to practice. Hence the result is significant at 95% level.

The 'p' value for all other demographic variables like occupation, number of children, the contraceptive method used with attitude and, practice are greater than 0.05 and hence the result is not significant at 95 % level. From the analysis, it is concluded that there is a significant association between education and practice towards cervical cancer and its screening.

DISCUSSION

Research is the word used to explore ideas and scientifically establish them as an evidence-based practice. Research always helps human society to move forward and to have a better life and to increase the comfort level. Research in nursing is enriching the profession by discovering new things and to the extent of the knowledge and practice level.¹

The conducted study was to explore the attitude and, practice towards cervical cancer and its screening targeting the women attending the OPD of a selected hospital in Patna, Bihar. Bihar is unfortunately still having a lack of education and awareness related to healthy practices. Poverty along with access to a health care facility is another contributor to it. Although the accessibility to health care facilities is not particularly explored in this study other components have been assessed. The majority of the women who participated in the study were in the age group of 28-37 years, with primary education, monthly income of Rs 10001 -Rs 15000, married and, are homemakers. A similar kind of socioeconomic back group and have been found in another study conducted by Niresh Thappa in Nepal. The majority of the participants were married and primary education and having children. It is also supported partially by another study done in New Delhi among the urban slum area reproductive age group women to find morbidity related to cervical cancer where it is reported that the majority of the care receivers are having an income of more than Rs. 10,000 per month and are having at least one child.

The study revealed that the majority of people have heard about cervical cancer. This study has shown that people are becoming more and more aware of the disease and its screening process. A similar type of study done in South India has shown less than 505 people are knowing cervical cancer. Hence, it can be concluded that awareness is increasing among the population.

The study has shown a positive attitude towards cervical cancer and its screening. The majority has agreed that it can happen to anyone women including themselves, as well as bleeding in between periods is a matter of concern. The majority has shown affirmative answers when asked regarding whether screening can prevent the disease. The majority has also reported that they are aware of the vaccination and they do believe that vaccination can prevent the disease. But surprisingly contradictory results have been found when the practice of the screening program is assessed as only 2.85% of people report they have ever undergone cervical cancer screening in their lifetime. This is similar to most of the studies conducted in India. This is yet to confirm to whatsoever can be the causative factors related to inhibition of screening practice for the majority of the population but multiple factors may be associated. Further studies should be planned to explore the reasons for less practice towards screening cervical cancer. Recently as a part of the Ayushman Bharat program, the Government of India has launched a screening program for cervical cancer, available at the Health and Wellness Center, which will be established at the nearest Primary Health Care center free of cost for all women above the age of 30 years. Hence, it is hoped that the practice of screening programs may be increased with this initiative from the Govt of India.

Data collected during the study showed there is almost no association with the demographic variables with attitude and, practice except education level. All other variables like marital status, economic status, occupation, number of children, etc were not significant. This contradicts the similar type of study done by Narayan et al in 2017. That study found an association with marital status, parity, occupation and, monthly income. Although it can be mentioned here education was also significant along with other variables. Hence, it can be concluded that depending on the area of the study significance of the data can vary.

Strengths and limitations:

This study has reflected some insight related to cervical cancer and its screening among a large group of reproductive age group women. The collected data can be utilized to design a planned teaching program or even to arrange a camp for screening at a larger scale in the community to spread awareness.

However, as the data collection was done only in the hospital arrangement, the findings can not be generalized for the community. Further studies are needed in this field.

SCOPE OF THE STUDY:

This study has got a lot of scope in nursing education, practice, administration and, nursing research. The present study is very much relevant in the field of nursing education. The findings of the study may serve as a source of encouragement for the nursing students and staff to impart knowledge regarding cervical cancer. It can also motivate the nursing staff to motivate the general population to do some regular screening to prevent the deuteriation of the disease condition as well as early detection.

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