

# Understanding Cervical Cancer Screening: An Overview

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## Abstract

*This study aimed to evaluate women's knowledge of cervical cancer screening in relation to specific demographic factors and to create an informational pamphlet on the topic. A total of 190 women aged 20 to 50 participated, selected using convenience sampling. A descriptive quantitative research design was employed, with data gathered through a structured questionnaire assessing socio-demographic factors and knowledge levels. Analysis was conducted using descriptive statistics and SPSS software. Results revealed that 22.6% of participants had good knowledge, 48.9% had average knowledge, and 28.4% had poor knowledge of cervical cancer screening. Knowledge levels were significantly associated with demographic factors such as occupation ( $\chi^2 = 31.86, p < 0.05$ ), education ( $\chi^2 = 30.069, p < 0.05$ ), and prior information about cervical cancer ( $\chi^2 = 12.554, p < 0.05$ ). The study concluded that most women possessed average knowledge about cervical cancer screening, and that demographic variables significantly influenced this knowledge.*

**Keywords:** Cervical cancer screening, pamphlet, demographic variables, socio-demographic factors, knowledge levels

## INTRODUCTION

Women are the pioneer of the nation. They assume many roles to ensure sustainable development and quality of life in family. So when the health of a woman is affected, the total structure of the family is affected [1–4]. Common health issues affecting women usually involve their reproductive system. There are many disorders that affect the reproductive system. Cervical cancer is the most prevalent type of cancer affecting the reproductive system. As reported by the WHO Global Cervical Cancer Elimination Initiative, there were approximately 604,127 new cases and 341,831 deaths from cervical cancer in 2020 [1, 5–8]. The study targeted on the women to assess their knowledge on cervical cancer screening because the solution to reduce cervical cancer mortality and morbidity is early detection and

treatment of precancerous lesions of cervix, as it is one of the most preventable cancers. So detection and treatment of women during this period using appropriate screening tools helps to decrease incidence of cervical cancer [9].

## METHODOLOGY

A quantitative research approach was used to study the knowledge regarding cervical cancer screening among women in a selected hospital kottayam. The design selected for the study was descriptive design. The research was carried out at various outpatient departments (OPDs) of Caritas Hospital in Thellokom. The sample included 190 women selected through convenience sampling. Participants were women aged 20 to 65 who visited the OPDs during the data collection period, could

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read and write in Malayalam, and agreed to participate. Women under 20, over 65, those unwilling to take part, and those experiencing emotional instability were excluded. Two instruments were utilized in the study: Tool 1, which collected socio-demographic information, and Tool 2, consisting of 15 multiple-choice questions designed to evaluate knowledge about cervical cancer screening. The validity of the content was confirmed by two experts in obstetrics and gynecological nursing [10–13]. Data analysis was performed using both descriptive and inferential statistics.

## RESULT

Among the samples 54 (28.4) belong to age group of 51-65. 141(74.2) belongs to nuclear family. 163(85.8) are married. 95(50) are under graduates, majority of them 83(43.7) are housewife. 102 (53.7) are Christians. 127(66.8) are below poverty line. 126(66.3) live in rural area. 77(40.5) had their first conception in 26-30 year, majority of them 77(40.5) have 2 living children. 142 (74.7) has no history of abortion. 151(79.5) have zero number of abortion. 157(82.6) hasn't used any contraceptives. 165(86.8) was aware about cervical cancer screening. 101(53.2) get knowledge from media (Table 1).

**Table 1.** Frequency and percentage distribution of subjects according to socio demographic variable.

Variable		Frequency (%)
Age	20-30	48(25.3)
	31-40	49 (25.8)
	41-50	39 (20.5)
	51-65	54 (28.4)
family	Nuclear	141(74.2)
	Joint	37(19.5)
	three generation	10(5.3)
	extended	2(1.1)
Marital status	Single	17(8.9)
	Married	163(85.8)
	Divorced	3(1.6)
	widow	7(3.7)
Educational status	Primary	8(4.2)
	High school	14(7.4)
	Higher secondary	41(21.6)
	Under graduate	95(50)
	postgraduate	32(16.8)
Occupational status	Housewife	83(43.7)
	Daily wage	6(3.2)
	Agriculture	2(1.1)
	Government	37(19.5)
	private	62(32.6)
Religion	Christian	102( 53.7)
	Hindu	73 (38.4)
	Muslim	12 (6.3)
	Other specify	3 (1.6)
Monthly income	APL	127(66.8)
	BPL	63(33.2)
Area of living	Urban	62(32.6)
	rural	126(66.3)
Age of first conception	No	14(7.4)

	<20	14(7.4)
	21-25	70(36.8)
	26-30	77(40.5)
	>30	15(7.9)
Number of living children	No	23(12.1)
	One	55(28.9)
	Two	77(40.5)
	Three	32(16.8)
	four	3(1.6)
History of abortion	Yes	34 (17.9)
	No	142 (74.7)
Number of abortion	No	151(79.5)
	One	24(12.6)
	Two	12(6.3)
	>2	3(1.6)
Contraceptives used	YES	33(17.4)
	NO	157(82.6)
Information about cervical cancer	Yes	165(86.8)
	no	23(12.1)
Source of information	Media	101(53.2)
	Friends	5(2.6)
	Relatives	11(5.8)
	Health professionals	57(30)

**Table 2.** Frequency and percentage distribution of subjects based on level of knowledge towards cervical cancer screening

	Range of score	Frequency (%)
Poor	0-4	54 (28.4)
average	5-9	93 (48.9)
good	10-15	43 (22.6)

Table 2 show that most of sampes (48.9%) have average knowledge regarding cervical cancer screening and only 22.6% have good knowledge regarding cervical cancer screening.

#### **Association between knowledge and selected socio demographic variable**

A notable relationship exists between knowledge levels and certain socio-demographic factors, including education, occupation, and prior information regarding cervical cancer. There is no significant association between knowledge and selected demographic variable such as age, type of family, religion, marital status, area of living, monthly income, age of first conception, number of living children, history of abortion, number of abortion, contraceptives used, source of information [14–19].

#### **DISCUSSION**

The current study found that among 190 participants, the majority of women (48.9%) had average knowledge about cervical cancer screening, while only 22.6% demonstrated good knowledge. This indicates that most women lack awareness regarding cervical cancer screening. These results were compared with a study conducted in New Delhi, which showed that only 23.3% of women had good knowledge in this area. Additionally, the study identified a significant association between knowledge levels and certain socio-demographic factors, including educational background and prior information about cervical cancer. However, no significant associations were found between knowledge scores and

other demographic variables such as age, family type, marital status, religion, income, living area, age at first conception, number of living children, history of abortions, number of abortions, contraceptive use, and sources of information. The findings of the present study were compared to the study conducted in Kanchipuram district which revealed that there is significant association between demographic variables like educational status, religion and source of information with knowledge score of women regarding cervical cancer screening. In present study revealed that among 190 samples majority of women (48.9%) have average knowledge regarding cervical cancer screening and only 22.6% have good knowledge regarding cervical cancer screening [20-21].

## CONCLUSION

The study was conducted in a small group of 190 samples, which reduce the generalizability of study samples. The study was also limited to a single setting and there was no follow up to assess the retention of knowledge. Keeping the findings of the present study, the recommendations made to conduct a similar study in various collages, includes inclusion of larger samples, conducting related studies in different settings, undertaking large scale study in community settings and conducting a study to assess effectiveness of educational programme on cervical cancer.

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