

ATTITUDE AND UTILIZATION OF CERVICAL CANCER SCREENING SERVICES AMONG UNIFORMED WOMEN IN BENIN METROPOLIS

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ABSTRACT

The purpose of this study was to find out the attitude and utilization of cervical cancer screening services among uniformed women in Benin metropolis. One research question were raised and one hypotheses formulated. Correlational research design was adopted for the study. The population of this study consisted of 2440 uniformed women in Benin metropolis. The sample size for this study consisted of 439 uniformed women and they were selected through multistage sampling procedure. The instrument that was used to collect data for this study was questionnaire. Data collected were analysed using range of scores to the research question while Pearson Product Moment Correlation Coefficient was used to test the hypothesis at .05 level of significance. The results of the study revealed. shows that 342(78.6%) of the uniformed women in Benin Metropolis with the scores ranging from 0 and 17 have positive attitude towards cervical cancer, while 93(21.4%) others who scored between 18 and 24 have negative attitude towards cervical cancer. This implies that uniformed women in benin metropolis have positive towards cervical cancer. It was therefore concluded that Positive attitude towards cervical cancer lead to utilization of cervical cancer screening services among uniformed women in benin metropolis. It was therefore recommended that Government should mobilize health educators in various ministries, agencies and departments to engage the public through visitation of market places, churches, schools and mosques by organising health talk, talk shows and seminars that centered on cervical cancer.

Keywords: cervical cancer, screening services, Benin metropolis, seminar

INTRODUCTION

Cancer is a dreaded disease that is no respecter of anyone irrespective of your status in the society. Cancer subject people to physical, emotional and finical pains. Even family members of cancer patient are not spared from the sufferings. Cancer is a term used to describe a group of diseases that is characterized by abnormal and uncontrolled growth of cells and tissues that result in the formation of tumours which invade the normal cells and tissues of the human body. Qalawa, Mohamed, Abdelfatah and Eltay (2013) asserted that cancer is now the second leading cause of death, after cardiovascular diseases worldwide. Approximately 10 million people are diagnosed with cancer annually and more than 6 million die of the disease every year.

Cervical cancer is a type of cancer that affects the cervix which is the lower part of the uterus that opens into the vagina .Cervical cancer is a non-communicable disease and it is a major public health burden that affects women worldwide. WHO, (2018) stated that 570,000 women were diagnosed with cervical cancer worldwide and 311,000 women die from the disease in 2018. Almost 99% cases of the cervical cancer are associated to infection with human papillomaviruses (HPV). It is a common virus which is transmitted through sexual

contact. (WHO 2014) stated that 85.0% of cervical cancer deaths occur in developing countries with most occurring in the poorest region? There are modifiable factors that may be responsible for the cause of cervical cancer. According to WHO (2010), tobacco, age, unhealthy diet such as excessive consumption of red meat, consumption of processed food, infectious agents like Human Papilloma Virus (HPV), Hepatitis B virus, helicobacter bacterium, ultra violet radiation, physical inactivity, occupational exposures, food contaminants such as aflatoxin, ionizing radiation, and early sexual intercourse. While the Non-modifiable risk factors include ageing, ethnicity, heredity, sex, immune suppression and reproduction. This simply means that modifiable risk factors can be prevented (Nnodu, Erisoho, Jamda, Olaniyi, Adelaiye & Lawson 2010). Cervical cancer screening is used to find changes in the cells of the cervix that could lead to cancer. Screening includes cervical cytology (also called the Pap test or Pap smear) and testing for human papilloma virus (HPV) women should have cervical cancer screening on a regular basis. Cancer occurs when there are changes in the cell and cervical cells become abnormal and, over time, grow out of control. The cancer cells invade deeper into the cervical tissue. In advanced cases, cancer cells can spread to other organs of the body and usually take 3 to 7 years for high-grade changes in cervical cells to become cancer. Cervical cancer screening helps to detect these changes before they become cancer. Women with low-grade changes can be tested more frequently to see if their cells go back to normal. Women with high-grade changes can get treatment to have the cells removed.

Cervical cancer screening saves lives. It helps to reduce the number of cases of cervical cancer and deaths of women from cervical cancer. Cervical cancer screening includes the Pap test, an HPV test, or both. Both tests use cells taken from the cervix to test for cervical cancer. Cervical cancer screening is an important part of women's health and women should be encouraged to go for screening on a regular basis WHO(2017). Attitude is an individual expression of a favorable and unfavorable events, person, place, and things. Attitudes are fundamental determinant of our perceptions of and action towards our environment. Women's attitude towards cervical cancer is very important because it will determine how important and unimportant women regard cervical cancer. Such attitude could be positive, negative and neutral. Agurto, (2001); Jepson (2000); Lewis (2004) revealed that cervical cancer being a condition that affects women's sexual and reproductive health was likely to be shrouded in silence since these are issues that are socially and culturally perceived to be private and cannot be openly discussed in public.

According to Mufepi, Carolyum, Sampsel And Timothy (2011) stated that most women who are likely to have positive attitude towards cervical cancer tend to utilize cervical cancer screening services irrespective of their age the same authorities further stated that women with negative attitude towards cervical cancer because most of them feel that they are not susceptible to cervical cancer especially when they do not have symptoms of the disease tend not to utilize cervical cancer screening services. Sauvegeay,, Duvel, Gilca, Lavoie, and Ovakki (2007) noted that despite the knowledge and awareness of cervical cancer most women of all ages have negative attitude towards cervical and utilization of cervical cancer screening services, they believed that cervical cancer is a disease of older women who are done giving birth, while others feel that they are not susceptible to cervical cancer. Therefore there was no need for cervical cancer screening. American cancer society of (2011) stated that most women who are afraid of cervical cancer do not have enough information regarding cervical cancer. It was revealed that most non educated women who have negative attitude towards cervical cancer had no proper information regarding cervical cancer causes, risk factors and cervical cancer screening services. Byrd, and Tarwalte (2012) stated that women with negative attitude have fear of cervical cancer because the women

believed that cervical cancer cannot be cured and sometimes their fear is associated with fatalism and utilization of cervical cancer screening services will be poor among those women.

Byrd and Tarwalte (2012), Hyacinth, Adekeye, Iba and Osoba, (2012), Arulogin and Maxwl (2012) stated that women with negative attitude towards cervical cancer and utilization of cervical cancer screening services lack adequate knowledge and awareness of cervical cancer. In the same vein Ivtekin, (2013), William, and Amoateny (2012) also posited that lack of knowledge of cervical cancer among women contributes to negative attitude towards cervical cancer and utilization of cervical cancer screening. Naquif, Zeha, Ahmed.Yazdain, Usman and Youns, (2018) women with higher knowledge on cervical cancer tend to have positive attitude towards cervical cancer and utilization of cervical cancer screening services than women with low knowledge also women with higher knowledge have information about health issues including cervical cancer,. The same authority also revealed that older women have negative attitude towards cervical cancer this may be due to the facts that older women do not perceived themselves to be at risk of developing cervical cancer. Asobayire and Barley (2014) noted that people with low knowledge often have negative attitude towards cervical cancer because they find it difficult to access health information and social stigma could also be the cause of negative attitude, most women consider cervical cancer as a punishment from evil deed. Most women with negative attitude towards cervical cancer believed that women who suffer from cervical cancer could be perceived as witches Asobayire And Barley (2014) .According to Narayara,, Jyothi, Sunanda,. Kumar, and Veerabhadrap (2017) most women who showed positive attitude toward cervical cancer tend to be aware of symptoms, and risk factors, tend to have positive attitude toward cervical cancer screening services. The same authority further stated that early screening and HPV vaccination will helpful in prevention of cervical cancer. Providing screening opportunities to women may not be utilized well due to some barriers such as fear of positive cervical cancer diagnosis, fear of cervical screening, and vaginal examination. Lim, and Ojo, (2017) stated that Continuous campaign of cervical cancer and awareness program will bring about change in the attitude of women towards cervical cancer and utilization of cervical cancer screening services. Aweke, Ayanto and Ersado (2017) stated that women with positive attitude toward cervical cancer believed that cervical cancer is a deadly disease if women are not screened at the earliest possible time and treated that cervical cancer could result to death. The same authority further women with positive attitude perceived that cervical cancer can be treated with the utilization of cervical cancer screening services.

A study carried out by Mengesha , Messele, and Beletew (2020) to assess the women's attitude, and of those (501) who had heard about cervical cancer, 370 (73.9%) and 366 (73.1%) believed that having multiple sexual partners and early marriage are risk factors for cervical cancer respectively. The same authorities further revealed that this may be attributed to the mere belief that any unsafe sexual behavior is a risk for cervical cancer. Because most of the respondent believes that people having multiple sexual partners always get punishment for their sins from God. Similarly, 442 (88.2%) believed that cervical cancer is a major health problem for reproductive age group women. This may a mere belief that any cancer is a serious health problem. The study also shows that more than half, 448 (58.2%) of the study participants had a favorable attitude towards cervical cancer. And this may in-turn leads to utilization of cervical cancer screening services. Al-Meer, Aseel , Al-Khalaf , Al-Kuwari and Ismail, (2011) revealed that women who have unfavorable attitude towards cervical cancer tends not to utilize cervical screening services. Shrestha, Saha, and Tripathi, 2013; Abedian, and Dormohamadi 2013; Saadoon, Amin, and Jadoo (2014) stated that despite the low level

of women's knowledge regarding cervical cancer and its utilization of cervical cancer screening services, their attitude towards cervical cancer and utilization of cervical cancer screening services is encouraging, this means that positive attitude toward cervical cancer may lead to utilization of cervical cancer screening services. Hinsermu, Yibrah., Amlaku, and Amare (2015) Study conducted among nurses in Mekelle, it was revealed that the odds of getting screened for cervical cancer have a positive attitude 3.4 times as compared to nurses who have negative attitudes. Gebreegziabher, Gebremedhin, and Semarya (2014) Respondents who had negative attitude had 63% lesser odds of being screened compared to those who had positive attitudes towards screening.

Statement of the Problem

Cervical cancer is the major gynecological health problem that has been on the increase and remains a leading cause of death. Cancer is a dreaded disease of which cervical cancer is not exempted. Over the years, cervical cancer has been on the increase, particularly in developing nations. The available pathways in which cervical cancer can be screened and managed, includes but not limited to liquid based cytology, conventional cytology, human papilloma virus,(HPV) deoxyribonucleic acid (DNA) testing and the visual inspection that is naked eyes inspection with or without acetate. Despite these available pathways for cervical cancer screening test, this disease still remain the fourth leading causes of death among women globally of which uniformed women in Benin metropolis is not exempted. The astronomical rise in the disease could be attributed to the non-utilization of all the above mentioned screening pathway

However, the non-utilization of the screening services may be due to poor attitude, fear, anxiety, and non-availability of screening centers in rural areas and very few in urban centers despite the initiative put in places by government and international organization to create knowledge, positive attitude on cervical cancer and encourages utilization of cervical cancer screening services among women globally. little is known as weather uniformed women in Benin metropolis are well informed in terms of knowledge of the disease, its awareness and more so, if they show positive attitude towards the disease and moreover if the cervical cancer screening services are well or adequately utilized.

Research Question

What is the mean scores of attitude of cervical cancer among uniformed women in Benin metropolis?

Hypothesis

There is no significant relationship between attitude and utilization of cervical cancer screening services among uniformed women in Benin metropolis.

Method and Materials

Correlational research design was adopted for this study. The population comprised of 2441 uniformed women in Benin metropolis. 439 uniformed women constituted the sample size for this study. The multistage sampling method was used to select the uniformed women. First it involves stratifying the security agencies into seven. Secondly, Simple random sampling technique of fish bow method was used to select three security agencies out of the seven security agencies. Thirdly, Systematic sampling technique was used to select the uniformed women. This involves picking every second number on the list. This procedure was used to pick 439 uniformed women. Both face and content validity of the instrument was ascertained by three (5) experts. The reliability of the instrument was ascertained by Cronbach Alpha statistics and a coefficient, 0.8 was obtained. The instrument was administered with the help

of two trained research assistants. Data collected was sort, collated and coded. Inferential statistics. Pearson Product Moment Correlation Coefficient was used to test hypotheses at 0.05 alpha level of significance what are the attitude scores of uniformed women in Benin metropolis towards cervical cancer?

RESULTS

Table 1. Aggregate scores on the attitude of uniformed women in Benin metropolis towards cervical cancer

Attitude scores	N	%	Remarks
0 – 17	342	78.6	Positive Attitude
18 – 24	93	21.4	Negative Attitude

Table 1 shows that 342(78.6%) of the uniformed women in Benin Metropolis with the scores ranging from 0 and 17 have positive attitude towards cervical cancer, while 93(21.4%) others who scored between 18 and 24 have negative attitude towards cervical cancer. This implies that uniformed women in benin metropolis have positive towards cervical cancer.

Table 2. t value on the relationship between attitude of uniformed women in Benin metropolis on cervical cancer and their utilization of cervical cancer screening services

N	cal. r	df	t.value	Pvalue	Remark
435	0.265	433	4.177	0.000	S

S = Significant

Table 2 reveals that at 0.05 level of significance and 433df, the calculated t 4.177 has Pvalue 0.000 which is less than critical Pvalue 0.05. Therefore the null hypothesis is rejected. The nature of relationship existing between the attitude of uniformed women in Benin metropolis towards cervical cancer and their utilization of cervical cancer screening services is significant.

Benin metropolis on cervical cancer jointly significantly relate to their utilization of cervical cancer screening services.

DISCUSSION

The result of the research question revealed that there is a relationship of 0.26 existing between attitude and utilization of cervical cancer screening services among uniformed women in Benin metropolis was very low. When the very low or no positive relationship was subjected to hypothesis testing, the result was not significant. This very low or no positive relationship could be attributed to inadequate knowledge and awareness, the effects will lead to poor attitude towards the disease, hence poor utilization of the screening services .The findings of this study agrees with Sauvegeay, Duvel, Gilca,Lavoie, and Ovakki (2007) noted that despite the knowledge and awareness of cervical cancer most women of all ages have negative attitude towards cervical cancer and utilization of cervical cancer screening services, they believed that cervical cancer is a disease of older women who are done giving birth, while others feel that they are not susceptible to cervical cancer. Therefore there was no need for cervical cancer screening. In like manner, America cancer society of (2011) stated that most women who are afraid of cervical cancer do not have enough information regarding cervical cancer. It was revealed that most non educated women who have negative attitude towards cervical cancer had no proper information regarding cervical cancer causes, risk

factors and cervical cancer screening services. In same vain, Byrd, and Tarwalte (2012) stated that women with negative attitude have fear of cervical cancer because they believed that cervical cancer cannot be cured and sometimes their fear is associated with fatalism.

Similarly, Byrd and Tarwalte (2012), Hyacinth, Adekeye Iba and Osoba, (2012).Arulogin and Maxwl (2012) agreed that educated women with negative attitude towards cervical cancer and utilization of cervical cancer screening services could be due to lack of knowledge and awareness of cervical cancer. .In the same vain Ivtekin,(2013), William, and Amoateny (2012) also posited that lack of knowledge of cervical cancer among educated contributes to negative attitude towards cervical cancer and utilization of cervical cancer screening. Asobayire and Barley (2014) noted that people with low knowledge often have negative attitude towards cervical cancer because they find it difficult to access health information and social stigma could also be the cause of negative attitude, most women consider cervical cancer as a punishment from evil deed. Most women with negative attitude towards cervical cancer believed women who suffer from cervical cancer could be perceived as witches Asobayire and Barley (2014). Lim, and Ojo, (2017) cervical cancer awareness program will bring change in the attitude of women toward cervical cancer utilization of cervical cancer screening services. Also, Al-Meer, Aseel, Al-Khalaf , Al-Kuwari and Ismail . (2011) revealed that those who have unfavorable attitude towards cervical cancer tend not to utilize cervical screening services.

RECOMMENDATION

Government should mobilize health educators in various ministries, agencies and departments to engage the public through visitation of market places, churches, schools and mosques by organising health talk, talk shows and seminars that centered on cervical cancer.

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