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Among Women of Reproductive Age in Kaga Local Government

Area, Borno State, Nigeria





# Assessment of Knowledge and Awareness of Cervical Cancer Among Women

# of Reproductive Age in Kaga Local Government Area, Borno State, Nigeria

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#### Abstract

**Purpose:** Incidences of cervical cancer have assumed alarming proportions among women of reproductive age in developing countries. It is a grave concern because it is an easily detectable and preventable disease. More concerning also is the high mortality rate associated with this condition. This study sought to investigate the level of knowledge and awareness of cervical cancer among women of reproductive age in Kaga Local government area of Borno state, Nigeria. The study also investigated the knowledge of signs and symptoms, and knowledge of preventive methods.

**Methodology:** It is a descriptive survey research type which investigated into the nature of trends and influences of variables upon one another as they interact. A well-structured questionnaire titled "Knowledge of Cervical Cancer Questionnaire" (KCCQ), consisting of 34 items was used as instrument for collecting data. It was adapted from the instruments of Abiodun, Fatungase, Olu-Abiodun, Idowu-Ajiboye, and Awosile (2013) and from the studies by Ziba, Baffoe, Dapare, Shittu, and Antuamwine (2015). The questionnaire consists of 5 sections, identified as A, B, C, D, and E. The items in Section B were used to elicit information on the knowledge and awareness about cervical cancer, screening, prevention, etc. The continuum used was a simple yes and no response. From an estimated population of 158,184, a sample of 400 respondents was chosen through a combination of purposive sampling and random sampling techniques. Four research questions and three hypotheses formulated and tested at 0.05 level of significance guided the study. Simple percentage and chi-square were used as tools for data analyses.

**Findings:** Findings of the study revealed that the general level of awareness of cervical cancer is low among the study group. Also, the study revealed that the level of knowledge of preventive



measures and of risk factors was low.

Unique Contribution to Theory, Policy and Practice: It was recommended amongst others that, thorough health counseling and screening should be made compulsories for all women of reproductive age, and that, quality cancer screening center should be established in Kaga to foster early diagnosis and treatment to prevent complications that arises from cervical cancer.

Keywords: Knowledge, awareness, cervical cancer.

## **INTRODUCTION**

#### **Background of the Study**

A Woman's Reproductive health needs are very important to the health of the family as women have important roles to play in their families. They need to be healthy to function optimally. Thus, women's health must be seen as a holistic concept that includes all biopsychosocial aspects of the women's being (Pinn, 2008). A woman is healthy when she is free from organic disorders, diseases and deficiencies that interfere with sexual and reproductive functions (Baileff, 2000). Cervical cancer is a disease that is peculiar to women and has adverse effect on their sexual and reproductive health as well as their general condition and family life.

World Health Organization [WHO] (2014) stated that cancer is increasingly growing as a major public health problem in both developed and developing countries amongst the chronic diseases. Cancer can impose health, heavy economic and social burden. It is a global pandemic affecting both developed and developing countries, but it is rapidly increasing in low and middle-income countries, where resources for prevention, diagnosis and treatment are limited or non-existent (Ferlayet al., 2013). Cervical Cancer is a type of cancer that occurs in the cells of the cervix — the lower part of the uterus that connects to the vagina. Various strains of the human papillomavirus (HPV), a sexually transmitted infection, play a role in causing most cervical cancer (Frumovitz, 2016). When exposed to HPV, a woman's immune system typically prevents the virus from doing harm. In a small group of women, however, the virus survives for years, contributing to the process that causes some cells on the surface of the cervix to become cancer cells. Cancer of the cervix tops the list of cancers among women worldwide with an estimated new case of 530,000 and a mortality of 275,000 deaths annually with an overall mortality ratio of 52%. The incidence is much higher in the developing world than it is in the developed world where widespread cervical smear screening has markedly lowered the incidence (Walboomers*et al.*, 1999).

Cervical cancer is one of the most easily preventable forms of female cancers. Yet, lack of knowledge about the disease and risk factors, beliefs about the disease, poor access to preventive services, affordability of the service and current health service system can affect decision to be screened for cervical cancer (WHO, 2013).Despite availability of cervical cancer control



guidelines, lack of communication strategy on cancer, lack of awareness of risk factors, lack of coordinated prevention activities and ownership, lack of Information Education and Communication /Behavior Change Communication (IEC/BCC) materials on cancer in general, cervical cancer in particular, and lack of immunization against HPV are some of the challenges faced in Nigeria (Yu Foo Qing *et al.*, 2015).

Knowledge, attitude and practice level of the community is very essential about the signs and symptoms of cervical cancer, risk factors, benefits of early diagnosis and treatment, availability of health services and prevention methods (HPV vaccination) (Kivistic*et al.*, 2011). The women's knowledge and attitude about the disease is influenced by socio demographic factors and the availability and accessibility of health services. In turn, screening behavior is a complex outcome of many factors operating at individual, family, and community levels (Brown *et al.*, 2011).

#### **Statement of the Problem**

Despite a good number of health campaigns, warning labels, doctor's advice and pleadings, some women still seem to dismiss the empirical evidence of dangers of cervical cancer. Cervical and Breast cancers are the leading cancers among women in developing countries, with estimated annual new cases of 882,900 and 444,500 respectively. More than 324,300 and 230,400 women die from these cancers every year, respectively. Globally, the number of new cases and deaths from cervical cancer is projected to continue to rise 720,415 and 394,905 respectively in 2025. A marked increase has been predicted specifically in Global Alliance for Vaccines and Immunization (GAVI) eligible countries, with a 58% expected increase in the number of new cases and a 63% expected increase in the number of related deaths (De sanjose*et al.*, 2012).

In sub-Saharan Africa, 34.8 new cases of cervical cancer are diagnosed per 100,000 women annually, and 22.5 per 100,000 women die from the disease. This figure is higher when compared with 6.6 and 2.5 per 100 000 women, respectively, in North America. According to Federal Ministry of Health (FMOH, 2014), the marked differences can be explained by low preventive health behavior, lack of access to effective screening services that facilitate early detection and treatment. In 2017, the World Health Organization (WHO) reported that the number of Nigerian women suffering from cervical cancer annually totaled 14,089 making it the second leading cause of cancer deaths. Sadly, this statistic is not only high in Nigeria. Up to 530, 000 cases and 275,000 deaths are recorded in developing nations every year. Put together, this is 80% of the cervical cases in the world. This is quite unfortunate knowing that this type of cancer can be avoided before it becomes full blown.

## Aim and objectives of the Study.



The main aim of this study is to assess the knowledge and awareness of cervical cancer among women of reproductive age in Kaga Local Government Area, Borno state Nigeria.

The specific objectives are:

i. To assess the knowledge of reproductive women on cervical cancer in Kaga LGA, Borno State Nigeria.

ii. To assess the knowledge of reproductive women on risk groups, risk factors, sign and symptoms methods of prevention of cervical cancer in Kaga LGA, Borno State Nigeria.

iii. To determine level of knowledge, attitude, practice and factors affecting these behavioral elements for prevention and control of cervical cancer in Kaga LGA, Borno State Nigeria.

iv. To evaluate the knowledge, attitudes and screening practice for cervical cancer among reproductive women in Kaga LGA, Borno State Nigeria.

## Significance of the Study

A study on the knowledge and awareness of cervical cancer among women of reproductive age in Kaga Local Government Area, Borno State Nigeria as a research study will generate information which will be useful for awareness creation and knowledge increase/improvement of the cervical cancer disease. Also, it will give the State Ministry of Health and the Federal Ministry of Health useful information on the public knowledge on cervical cancer among the reproductive age group in Kaga Local Government. It will also serve as a tool to look for more funders/partners to support the awareness creation program for the betterment of child bearing age group. However, it will increase awareness screening uptake of Kaga and Nigerian women at large. The findings from the study will also create awareness to women about the need to get vaccinated themselves and their female children early enough. The study will determine various factors that influence cervical cancer screening. Awareness of the factors will help in removing barriers to screening services. It will also provide information on the areas of difficulties encountered by women. It will help to enhance ways of providing antenatal information to women.

## Methodology

Descriptive research of the survey type was used for this study. This is because the study is a sample survey and covers a wider population of sample in Kaga local government area. It is also because the study enquires into the status of things, the nature, trends and influences of the variables as they interact. It also primarily employs the use of questionnaires to gather data, although other methods like the interviews, observations, Likert-scale, etc. can be used. Survey design was considered appropriate and adopted because it describes knowledge and awareness of



cervical cancer and screening among reproductive age women in Kaga Local Government Area, Borno State, Nigeria. It was considered appropriate to discover the source of information, the level of cervical cancer knowledge and the trend of cervical cancer screening among women. Ajai and Amuche, (2015) define a sample survey as a study in which a random sample is taken from a welldefined population and the data is collected from the sample, a statistic is calculated from the data and the statistic is used to estimate the true parameter in the population. Thus, the design is suitable for the study.

#### RESULT

From the analysis of the respondents and test of hypotheses, this study reveals that the knowledge and awareness of cervical cancer among women of reproductive age in Kaga LGA of Borno state is very low. In answering research question one, this study established that there was a high number of respondents who had no knowledge of cervical cancer (251) while only 149 (37.3%) knew about the variable under study. Equally, the hypothesis test (Ho1) proved that this difference was significant at 95% confidence level. This finding contradicts that of a similar study in West Bengal by Roy et al. (2017) where 86% of the people had heard about cervical cancer. The contradiction may have arisen because Roy's study was conducted in the Calcutta University campus at Ballygunge Science College where respondents were more educated while this present study had only 61.1% of respondents who had higher education. Among the 149 respondent that had knowledge of cervical cancer, the highest source of information came from health workers which had 79 respondents followed by media with 38 respondents while the least source was from social media which had 8 respondents followed by respondent that chooses book as their source. In answering research question two, the researcher examined the responses of respondents and found out that 253 of the respondents, representing 63.3% have no knowledge of the risk factors associated with cervical cancer, while 147 of them representing 36.8 have knowledge of the risk factors associated with cervical cancer. Of this number, 7 (4.8%) had FSLC, 30 (20.4%) of them had SSCE educational qualification, 89 (60.5%) were tertiary educated, and 21 (14.3%) had postgraduate education. 74.8% of those who knew of the risk factor of cervical cancer were those with high level of education. Majority of the respondents (256) have no knowledge of multiple sex partner as a risk factors, 267 have no knowledge that oral contraceptive is a risk factor, 268 have no knowledge of HPV as a risk factor which agrees with the study carried out by Abiodun, Fatungase, Olu-Abiodun, Idowu-Ajiboye, and Awosile (2013) that revealed that 97.7% had no or poor knowledge of risk factors. Based on this, the present study concludes that knowledge of risk factors associated with cervical cancer among women of reproductive age in Kaga LGA is very low (less than 40 percent). In answering question three, All the respondents who knew about cervical cancer (149 representing 37.3%) also knew that vaginal bleeding was a symptom, while the remaining 251 (62.7%) did not know. 143 of the respondents, representing 35.8% knew that post-coital bleeding was a symptom, while 257 (64.2%) did not know; weight loss was known as a symptom of cervical cancer by only 123 (30.8%) of the respondents, while the majority (277,



representing 69.2%) did not know that weight loss was a symptom. Only 149 of the respondents, representing 37.3% knew that smelling vaginal discharge was a symptom while the rest (62.7%) did not know; 149 respondents (37.3%) agreed that abdominal pain was known as a symptom of cervical cancer, while 251 (62.7%) did not know. Among those who knew about signs and symptoms, 37% strongly agreed that they have knowledge of vaginal bleeding and smelling vaginal discharge as signs and symptom of cervical cancer. The data shows that less than 60% of the respondents had no or low knowledge about the symptoms of cervical cancer thereby, agreeing with the study by Abiodun et al which showed that 97.7% had no or poor knowledge of sign and symptoms. The least knowledge identify by respondents was weight loss which had 30.8% respondent. Majority of those who knew most of the signs and symptoms of cervical cancer is low among women of reproductive age in KagaLocal Government Area of Borno state, Nigeria.

In answering question four, statistics on the significant relationship between respondents with high educational qualification and those with low educational qualification on their knowledge and awareness of methods of prevention of cervical cancer. The Chi-square statistic shows values of 17.934at a degree of freedom 1 (P <0.005). Based on the decision rule, we fail to accept null hypothesis (we reject it) and therefore we accept alternate hypothesis which states that there is a significant difference between the responses of the two groups on their knowledge of methods of prevention of cervical cancer. On respondents' knowledge of method of preventing cervical cancer, 129 of the respondents, representing 32.3% agreed that they were aware of the methods of preventing cervical cancer, while majority of the respondents (271, representing 67.7%) had no knowledge of the method of prevention. Further analysis shows that among the 129 (32.25%)who knew of the methods of prevention agreeing with Abiodun et al who state that the knowledge about cervical and screening was very poor and Obalase, Akindutire, Adelusi, and Adegboro (2017) whose study revealed that the respondents had low knowledge about cervical cancer screening due to the fact that all the health facilities in the areas do not carry out cervical screening. The risk factors for cervical cancer include age, religious factors, age factors, family type, parity among others. . This study revealed that all 129 knew that regular screening was a method of prevention of cervical cancer; 117, representing 90.7% knew that vaccination was a method of prevention; 62 (48.1%) knew that delayed sexual intercourse was a method of prevention; unfortunately, only 34 of them, representing 26.4% were aware that having fewer number of children was a method of prevention; and 111 (86.1%)

While the number of those who had ever been screened was low (49), during this survey which may be due to the facts that health facilities around do not screen their clients for cervical cancer as stated by Obalase et al, 386 of the respondents (96.5%) were willing to be screened, and 14 (3.5%) were not willing to be screened. Among the factors influencing of the respondents knew



that not having multiple sexual partners was a method of preventing cervical cancer.

women in subjecting themselves to cervical cancer screening, only one respondent agreed that family history was a factor; only 3 chose religion as a factor; none of the respondents agreed that economic status or age were factors influencing them in subjecting themselves to cervical cancer screening; 34 of them thought educational level was a factor, while only 11 of the respondents agreed that parity was a factor influencing women in subjecting themselves to cervical cancer screening. 34 out of 400 respondent that identify educational level as a factor, and this agrees with the study by Obalase et al where 24 out of 220 respondents also indicated educational level as a factor.

In the light of the fore going, we therefore conclude that there is a low level of knowledge about the methods of preventing cervical cancer among women of reproductive age in Kaga LGA of Borno state, Nigeria This could be seen from the answer given to the question on various methods of screening which shows that pap smear had 32.3% respondent, VILI 25.5%, HPV 29.8% and VIA 24.3%.

## CONCLUSION

At the end of this study, the researcher concluded that the knowledge and awareness of cervical cancer among women of reproductive age in Kaga local government area of Borno state is very low. It is less than 40%. The study also shows that-

1- The level of knowledge and awareness toward risk factors associated with cervical cancer among women of reproductive age in Kaga is low

2- The level of knowledge and awareness on signs and symptoms of cervical cancer among women of reproductive age in Kaga local government area of Borno state is low.

3- The knowledge of prevention and control of cervical cancer among women of reproductive age in Kaga is low.

4- The study also found out that the women under study are willing to be screen if screening gadgets are made available at a subsidized rate.

#### RECOMMENDATION

Based on the findings above, the researcher recommends that

1- The media should be regularly engaged in educating, sensitizing and educating the population on cervical cancer



2- Thorough health counseling and screening should be made compulsories for all women of reproductive age.

3- Quality cancer screening centre should be established in Kaga to foster early diagnosis and treatment to prevent complications that arises due to cervical cancer.

4- Health workers to develop good sense of index of suspicion.

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