Effectiveness of Structured Teaching Programme on Knowledge and Attitude Regarding Cervical Cancer Screening among Women attending OPD

Ramakanti[1], Rashmi P John[2], Anjoo Agarwal[3], Suman Lata[4]

Abstract

Context: Cervical cancer screening is helpful in finding abnormal proliferation of cells in cervix which leads to cervical cancer. Screening of cervical cancer includes cervical cancer which also known as Pap test and some women go through human papilloma virus (HPV) for cervical screening. Cervical cancer usually takes 3-7 years in proliferation of high grade abnormal cells to become a cancer. Cervical cancer screening is helpful in detecting these abnormal changes in the cells of the cervix before they give rise to cancer.

Aim: This study was aimed to determine the effectiveness of structured teaching program on knowledge and attitude regarding cervical cancer screening among women attending OPD.

Methodology: In this study quasi experimental one group pretest post test design was applied. Convenient sampling technique was used to select the 82 women attending OPD who met the inclusion criteria.

Statistical Analysis used: Mean, mean difference, standard deviation, t-test and chi-square.

Result: The result revealed that after the intervention the mean and standard deviation of the post test knowledge was 13.08+1.71 being compared to the mean and standard deviation of pre test knowledge 7.33+2.63. It indicates that there was a significant improvement in the level of knowledge of women. The calculated't' value (4.83) on analysis of the data was found to be significant at 'p' value 0.05.

Conclusion: The study concluded that a structured teaching program was effective in improving the level of knowledge and attitude of women regarding cervical cancer screening.

Keywords: Structured teaching program; Cervical cancer screening; Women; Knowledge; and Attitude.

Introduction

Cancer is a broad group of diseases that, when abnormal cells develop uncontrollably, may start in

Author's Affiliation: [1]Student, [2]Principal, [3]Associate Professor, [4]Clinical Instructor, Department of Nursing, KGMU College of Nursing, Lucknow 226003 Uttar Pradesh, India.

Corresponding Author: Suman Lata, Clinical Instructor, Department of Nursing, KGMU College of Nursing, Lucknow 226003 Uttar Pradesh, India.

E-mail: sumanlata@kgmcindia.edu

almost any organ or tissue of the body, go beyond their natural limits to invade adjoining parts of the body and/or spread to other organs. The latter approach is called metastasizing and is a significant cause of cancer mortality. Some common names for cancer include neoplasm and malignant tumor. Cancer is the world's second leading cause of death, responsible for an estimated 9.6 million fatalities in 2018, or one in six deaths. The most common among women are breast, colorectal, lung, cervical and thyroid cancer.[1]

Cancer is defined as excessive proliferation of abnormal cells which can invade or spread to other cells, tissues or organs. This is called as malignant tumors, but benign tumors do not invade.[2]

Cervical cancer is a cancer of cervix. It is due to excessive proliferation of abnormal cells which have ability to spread or invade in other structures of pelvis as well as in body too.[3]

Cervical cancer is a disease that is largely preventable, but it is one of the leading causes of death from cancer in women globally. In low and middle income countries, most deaths occur. Persistent or chronic infection with one or more of the 'high risk' (or oncogenic) human papillomavirus (HPV) forms is the primary cause of cervical pre-cancer and cancer. HPV is the most common infection acquired through sexual intercourse, typically early in sexual life. For the majority of women and men who are infected with HPV. Cervical cancer is the fourth most common cancer in women worldwide, accounting for 7.5 percent of all female cancer deaths, with an estimated 570,000 new cases in 2018. Of the reported more than 311 000 cervical cancer deaths per year, more than 85% occur in low and middle income countries. Compared to women without HIV, women living with HIV are six times more likely to get cervical cancer, and an estimated 5 percent of all cases of cervical cancer are due to HIV.[4]

Programs that enable girls to be vaccinated against HPV and women to be screened regularly are in place in high-income countries. Screening facilitates the detection of pre-cancerous lesions at stages where they can effectively be treated.[5]

There is little access to these preventive steps in low and middle income countries, and cervical cancer is often not diagnosed until it progresses further and symptoms emerge. Furthermore, access to care with such a late-stage disease. (For ex-Cancer surgery, radiotherapy and chemotherapy) may be very limited, leading to a higher rate of cervical cancer deaths in these countries. Efficient treatments could reduce the high mortality rate from cervical cancer globally (Age Standardized Rate: 6.9/100,000 in 2018).[6]

Objectives of the study were:

- To assess the knowledge and attitude regarding cervical cancer screening among women in department of obstetrics and gynecology, KGMU, Lucknow.
- To assess the effectiveness of structured teaching programme on knowledge and attitude regarding cervical cancer among women in department of obstetrics and gynecology, KGMU, Lucknow.
- To find out the association between mean pretest score of knowledge and attitude

regarding cervical cancer screening among women with selected demographic variables.

Subjects and Methods

In the study quasi experimental one group pre test post test design was applied on 60 women attending OPD to assess the effectiveness of structured teaching programme on knowledge and attitude regarding cervical cancer screening. Written consent was obtained from the participants fulfilling the inclusion criteria. The data collection period was started from 16-03-2021 to 30-04-2021. formal ethical clearance was obtained from Institutional Ethical Committee of King George Medical University, Lucknow, U.P. (ECR/262 inst/ UP/2013/RR-19) assuring maximum anonymity and confidentiality. Pre test was conducted on the day one and on the same day intervention was provided and a post test was conducted after the 7th day of intervention.

Karl Pearson test method was used for analysis of reliability of questionnaire was 0.764 and reliability of Likert scale was 0.92. The tool was found to be reliable. The level of significance was measured by t- test.

Result: The result revealed that after the intervention the mean and standard deviation of the post test knowledge was 13.08+1.71 being compared to the mean and standard deviation of pre test knowledge 7.33+2.63. It indicates that there was a significant improvement in the level of knowledge of women. The calculated' value (4.83) on analysis of the data was found to be significant at 'p' value 0.05.

Table 1: Effectiveness of structured teaching programme on knowledge regarding cervical cancer screening.

Structured teaching programme on cervical cancer screening	N	Mean	Standard deviation	Df p<0.05	Paired t- value
Pre-test	60	7.33	2.63	2.0	4.83
Post test		13.08	1.71	Df= 59	

- Table shows that there is significant improvement in mean 13.08 and standard deviation 1.71 of post test in the level of knowledge than the mean 7.33 and standard deviation 2.63 of pre test level of knowledge

- The paired't' test value of overall score of level of knowledge is highly significant at p<0.05 level.

Ramakanti, Rashmi P John, Anjoo Agarwal, et. al./Effectiveness of Structured Teaching Programme on
Knowledge and Attitude Regarding Cervical Cancer Screening among Women attending OPD

11

Table 2: Effectiveness of structured teaching programme on attitude regarding cervical cancer screening.

Attitude	N	Mean	Standard deviation	Df p<0.05	Paired t- value
Pre-test	60	37.08	7.43	2.0	5.80
Post test		46.08	3.12	Df= 59	

- Table 2 shows that there is significant improvement in mean 46.08 and standard deviation 3.12 of post test in the level of attitude than the mean 37.08 and standard deviation 7.43 of pre-test level of knowledge.

- The paired 't' test value of overall score of level of attitude is highly significant at p<0.05 level.

Discussion

The category wise comparison of pre-test and post-test knowledge score of the study subjects shows that after intervention 6 [10%] were in very good category, 46 [76.66%] were in very good category, 8[13.33%] were in average category whereas 0 [0%] were left in poor category and t-test value 9.47 [<0.05] which shows significant improvement of post test knowledge score. On comparison of overall pre test and post test knowledge scores there was significant improvement seen in mean knowledge score of post test 13.08 +1.71 as compared to the pretest 7.33+ 2.33. The increase in the mean score was highly significant (p<0.05).

The above findings were similar to the findings of the study by Dagar N.A Study to Assess the Effectiveness of Planned Teaching Programme Regarding Prevention of Cervical Cancer in Terms of Knowledge and Attitude among Women of Reproductive Age Group in which in pre- test none of the study subject was having moderate and adequate knowledge, all the 60 study subjects were having poor level of knowledge which was improved in post test after giving intervention, i.e majority 63.34% of study subjects were having

adequate level of knowledge.[7]

References

1. World health organizationhttps://www.who.int/health-topics/cancer#tab=tab_3

2. Cervical cancer [Internet]. En.wikipedia.org. 2020 [cited 7 December 2020]. Available from: https://en.wikipedia.org/wiki/Cervical_cancer

3. Cervical cancer [Internet]. Who.int. 2020 [cited 7 December 2020]. Available from: https://www.who.int/health-topics/cervical-cancer#tab=tab_1

4. Vaccines and immunization: What is vaccination? [Internet]. Who.int. 2020 [cited 7 December 2020]. Available from: https://www.who.int/news-room/q-a-detail/vaccines-and-immunization-what-is vaccination?adgroup survey={adgroupsurvey}&gclid=CjwKCAiAw rf-BRA9EiwAUWwKXpf-nN1HaQVg1AFJpq-jqF8umAtJ02jRFTtC_4T9TOzjZLGHfLv54hoC VLAQAvD_BwE

5. Human papillomavirus (HPV) and cervical cancer [Internet]. Who.int. 2020 [cited 7 December 2020]. Available from: https://www.who.int/news-room/fact-sheets/detail/human-papillomavirus-(hpv)-and-cervical-cancer

6. Dagar N. A study to assess the effectiveness of Planned Teaching Programme regarding prevention of cervical cancer in terms of knowledge and attitude among women of reproductive age group in selected rural community of Delhi. Int J Health Sci Res. 2018; 8(8):196-204.