KNOWLEDGE, ATTITUDES AND PRACTICES REGARDING CERVICAL CANCER AND ITS SCREENING AMONG WOMEN FROM LOW-SOCIO-ECONOMIC AREAS OF MANILA, THE PHILIPPINES

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Abstract. Cervical cancer is common in the Philippines. In this study, we aimed to determine the knowledge, attitudes and practices regarding cervical cancer and its screening among women from low-socio-economic areas of Manila, the Philippines to guide cervical cancer control programs in the study population. Inclusion criteria for study subjects were women aged 20-50 years with children aged <5 years who were registered at one of four public health centers in lowsocio-economic areas of Manila. Exclusion criteria were having had a hysterectomy, those who had a history of cervical cancer and declined to participate in the study. Study subjects were selected by convenience sampling. The study was conducted during April 2018. Each subject was asked to complete a standardized questionnaire. Results were quantified using scores for subject knowledge, attitudes and practices. Arbitrary cutoff levels were used to categorize subjects by knowledge and attitude levels. Two hundred-fifty subjects were included in the study. The mean (±standard deviation (SD)) subject age (range) was 31.3 (±7.4) (20-49) years. Forty-five percent of subjects were married, 84.0% had a secondary education. The average parity was 2.98; 64.4% of subjects used contraception. Ninety-seven point nine percent had heard of cervical cancer screening. Fifty-four point eight percent had a low, 40.4% a moderate and 4.8% a high knowledge level about cervical cancer. Thirty-five point six percent of subjects perceived they had a low, 35.2% a moderate and 29.2% a high risk for getting cervical cancer. Twentythree point two percent of subjects perceived the severity of cervical cancer was low, 48.8% moderate and 28.0% high. Only 27.6% of subjects stated they had ever received cervical cancer screening. The common reasons given by subjects for not being screened for cervical cancer were fear of the screening procedure and lack of screening promotion. The most common reason given by subjects for having cervical cancer screening was being recommended by the health care provider. Factors significantly associated with cervical cancer screening were being aged ≥40 years (p = 0.001), being married (p = 0.011) and using contraceptives (p = 0.027). Our study subjects had a low knowledge level, a moderate attitude level and a low practices level regarding cervical cancer and its screening. Health care providers influenced subject decisions to have screening, but there was fear and lack of knowledge about cervical cancer and its screening. Cervical cancer screening promotion programs need to take this into consideration when developing

methods to overcome these problems. Further studies are needed to test these new methods to determine if they can improve screening rates. Providers also need to be educated to encourage their patients to be screened. Further studies among providers are needed to determine their knowledge, attitudes and practices regarding cervical cancer screening.

Keywords: cervical cancer, screening, knowledge, attitude, practice, urban, the Philippines

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