

DETERMINANTS TO UTILIZATION OF CERVICAL CANCER SCREENING AMONG WOMEN AGED 30-45 YEARS IN BLANTYRE DISTRICT MALAWI: A COMPARISON OF URBAN AND RURAL AREAS.

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ABSTRACT

Cervical cancer is a treatable disease and primary intervention like screening is the single most important public health strategy to reduce cervical cancer incidence and subsequent mortality. However, in Malawi under-utilization of these services contribute to women presenting to hospitals when the disease is at an inoperable stage. This cross-sectional, community based study aimed at identifying determinants to utilization of cervical cancer screening services among women aged 30-45 years in urban and rural areas in Blantyre district, Malawi. A total of 257 randomly selected women (134 urban and 123 rural) participated in the study and face to face interviews were conducted using structured administered questionnaire to gather information on socio-demographic, knowledge, perception, health locus control, social support, attitude and intention from 30<sup>th</sup> April 2015 to 16<sup>th</sup> May 2015. Data were analyzed using descriptive statistics, Chi-square test and logistic regression. Only 13.2% of the respondents had been screened for cervical cancer and the main reasons for not being screened among the respondents not screened yet included lack of interest (39.7%), lack of knowledge (33.5%) and no reason given (19.8%). The respondents being screened were older and were only 32.4% of the study population and the majority were from rural areas. The most significant factors to utilization were age (aOR 7.05, 95% CI 2.31, 21.6), number of sex partners (aOR 3.24, 95% CI 1.31, 8.0), use of oral contraceptive (aOR 2.60, 95% CI 1.02, 6.61), having heard of cervical cancer screening (aOR 17.7, 95% CI 2.18, 144), knowledge (aOR 7.37, 95% CI 2.44, 22.2) and perceived severity (aOR 9.68, 95% CI 1.19, 79.0). The result of the predictors according to place of residence indicated that age, number of sex partners and high level of knowledge were predictors for utilization of cervical cancer screening in the urban areas while high level of perceived severity was the only predictor in the rural areas. In conclusion, there is low utilization of cervical cancer screening therefore need for effective interventions according to place of residence in order to increase utilization of cervical cancer screening in Blantyre District among the rural and urban women.

KEY WORDS: CERVICAL CANCER / CERVICAL CANCER UTILIZATION / KNOWLEDGE / URBAN / RURAL

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