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Knowledge and Awareness of Cervical Cancer Screening among Iraqi Immigrant Women Living in Malaysia

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Abstract: Cervical cancer is one of the commonest cancers in women worldwide. It ranks as the 7th most frequent cancer among Iraqi women and it is the 2nd most common cancer in Malaysia. This study aimed to explore the knowledge and awareness about cervical cancer among Iraqi women living in Malaysia. A self- administrated Arabic version questionnaire distributed among 142 Iraqi women in Malaysia. One hundred and eight participants ranging in age from 18 to 61 years (Mean = 36.1) returned the completed questionnaire. A lack of knowledge on cervical cancer and the Pap smear test was found among the respondents. Many women did not have a clear understanding of the meaning of an abnormal cervical smear and the need for the early detection of cervical cancer. These findings emphasize the need to educate and promote awareness among immigrant Iraqi women in Malaysia to risk factors for cervical cancer and to the need and the purpose of Pap smear screening.

Key words: Cervical Cancer % Screening % Awareness % Iraq % Malaysia % Immigrant

INTRODUCTION

Cervical cancer is the third most common cancer among women worldwide and a leading form of cancer in low resource countries, where more than 85% of new cases occur [1]. Traditional risk factors for developing cervical cancer are: early sexual activity, multiple sexual partnerships, parity, young age at first pregnancy, oral contraceptive use, smoking, low socioeconomic status, immunosuppressive disease and sexually transmitted diseases [2]. However after the discovery of Human Papilloma Virus (HPV) as the main risk factor of cervical cancer, the role of other risk factors was defined in conjunction with HPV [2].

A critical way to prevent cervical cancer is to have high-quality screening with cytology Papanicolaou (Pap) smear tests to detect cervical cell changes. Pap smears has markedly reduced mortality from squamous cell cervical cancer, which comprises 80% to 90% of cervical cancers [3]. Most invasive cervical cancers are found in women who have not had regular Pap smears. Half of women diagnosed with cervical cancer are between the ages of 35-55 [4]. It has been stated that between 20-60% of all cervical cancer deaths could be avoided by improving screening programs [5].

Iraq has a population of 8.21 million women ages 15 years and older who are at risk of developing cervical cancer [6]. Although the incidence rates of this cancer in Iraq are relatively low, as in most other Arabic countries, the majority of the cases usually present in advanced stages with poor prospects of cure [7]. An old report from Iraqi Cancer Registry reported that cervical cancer ranks 9th among the 10 most common female cancers in Iraq (forming 3.6% of total female malignancies) [8]. However, current estimates indicate that every year 311 women are diagnosed with cervical cancer and 212 die

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from the disease. Cervical cancer ranks as the 10th most frequent cancer among women in Iraq and the 7th most frequent cancer among women between 15 and 44 years of age [6]. Meanwhile, cervical cancer is the 2nd most common cancer in Malaysia; furthermore, it is the 4th most common cause of death in women in Malaysia [9]. In Southeast Asia, cervical cancer incidence is 15.7 per 100,000 [10], however in Malaysia, the age standardized incidence rate (ASR) for cervical cancer is 19.7 per 100,000 women [10]. The Ministry of Health Malaysia reported that there is an average of 2000 to 3000 hospital admissions of cervical cancer cases per year in the country, most of them presenting late into the disease [11]. Moreover, in Malaysia the annual cervical cancer death rate is 5.6 per 100,000 [12]. The mortality rate due to cervical cancer in Malaysia is more than two folds higher in comparison to countries like Netherlands, United Kingdom and Finland [11, 13].

Human migration has been described as 'one of the defining issues of the 21st century'. It refers to the movement of a person or group of people from one geographical region to another, across an administrative or a political border, to settle definitively or temporarily [14]. Among the 42 million forcibly displaced people worldwide at the end of 2008, Iragis form the second largest refugee group, with 1.9 million having sought refuge mainly in neighboring countries and in few other countries [15]. Therefore, there are few thousands of Migrant Iraqis including women are settled in Malaysia, yet little is known about their health related issues including preventive care such as cervical cancer screening. This study was carried out to explore the knowledge and awareness of cervical cancer and its screening among Iraqi women living in Malaysia in order to suggest possible directions for cervical cancer prevention efforts.

MATERIALS AND METHODS

A cross-sectional study was conducted among 142 Iraqi women living in Malaysia. The study was conducted from June to September 2012. The participants were selected by obtaining a name list of Iraqi student's parents living in Malaysia from the Iraqi school in Kuala Lumpur. Then a new list was prepared which contained only women with their telephone numbers and email addresses. All participants were given a full explanation of the purpose of the study and an assurance of confidentiality by emails or telephones and consent were obtained from all participants. Participants were also

assured that their participation in the study was voluntary and that they could refuse to participate. The inclusion criteria were volunteer female 18 years old or more, Iraqi citizen and able to read and write Arabic. Those who did not consent or were unable to communicate effectively were excluded.

The majority of questionnaires were delivered in person; meanwhile few of them were delivered by emails or telephone call for those living in distant places. A self-administrated questionnaire in Arabic was designed based on the previous studies. The questionnaire consists of five sections. The first part contained socio-economic characteristics such as (age, marital status, years living in Malaysia, religion, educational status and working status). The second part consisted of questions assessing the risk factors of cervical cancer such as (smoking, family history of cervical cancer, other STD, early age of first childbirth, early age of first intercourse, multiple full-term pregnancy, being sexually active and multiple sexual partners). The third part consisted of questions assessing the knowledge about cervical cancer, while, the fourth part consisted of questions assess the eligibility for screening and screening techniques and finally the last section about the Pap smear test with other practices regarding screening in addition to knowledge about HPV and its vaccine. Data analysis was performed using SPSS version 16. A descriptive frequency analysis was done for all variables.

RESULTS

One hundred and eight participants ranging in age from 18 to 61 years (Mean = 36.1) returned the completed questionnaire. The majority of them were married (53.7%) and Muslims (98.1%) Table 1. Around (59.2%) of the respondents reported have bachelor degree and about (17.6%) reported studying postgraduate studies levels and 6.4% had either a master or a PhD degree while the remaining were secondary school education. About 82% of women had never had a pap smear and 38.9% reported that Pap smear is important; 37.3% of women did not know the significance of a positive cervical smear; 71% of women were not aware of causes of cervical cancer. The majority of the participants (76%) did not know that Human papilloma virus (HPV) is the risk factor of cervical cancer, Fig 1. In this study, only 24% of the participants had Pap smear before. Lower percentage of participants (13%) heard about HPV vaccine. About 57.4% heard about cervical cancer.

Table 1: Socio-Demographic characteristics of the study population (n=108)

	Variables	N	%
Age:	18-30	26	24.07
	30-39	56	51.85
	40–49	21	19.5
	9 50	5	4.62
Marital status	Married	58	53.7
	Separated	13	12
	Divorced	9	8.3
	Widowed	7	6.5
	Unmarried	21	19.4
English proficiency	None	8	7.4
	Low	25	23.1
	Intermediate	47	43.5
	Fluent	28	25.9
Years lived in Malaysia:	<1 year	15	13.88
	\$1 year	93	86,11
Religion:	Muslim	106	98.14
	Christian	2	1.95
Education:	None	0	0
	Primary school	1	0.9
	Secondary school	17	15.7
	Bachelor Degree	64	59.2
	Postgraduate		
	students	19	17.6
	Master	5	4.6
	PhD	2	1.8
Working status:	Employed	18	16.6
	Student	43	39,8
	Housewife	47	43.5

Table 2: Knowledge and awareness about cervical cancer and pap smear

Variable	Categories	Number	Percentage%
I Heard about cervical cancer	Yes 62		(57.4%)
	No	46	(42.6%)
I heard about Pap smear test	Yes	87	(80.5%)
	No	21	(19.5%)
I don't know what is the purpose of Pap smear test	Yes	58	(53.7%)
	No	50	(46.3%)
think that the Pap test is painful:	Yes	76	(70.4%)
	No	32	(29.6%)
I heard about HPV vaccine	Yes	14	(13%)
	No	94	(87%)
5.I had pap smear before	Yes	26	(24%)
	No	82	(76%)
I think I don't need to do Pap smear if I have no complaint	Yes	23	(21.3%)
	No	85	(78.7%)
Being examined by a male provider would discourage me from getting a Pap test	Yes	43	(39.8%)
	No	65	(60.2%)
A Pap test is not important for a woman	Yes	42	(38.9%)
	No	66	(61.1%)
Worry that if have a Pap test, I will need further investigations and may be an operation.	Yes	56	(51.8%)
	No	52	(48.2%)
Getting a Pap test would only make me worry	Yes	74	(68.5%)
	No	34	(31.5%)
think it is costly to get Pap test	Yes	63	(58.3%)
	No	45	(41.7%)

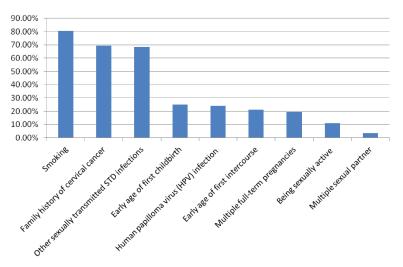


Fig. 1: Knowledge about risk factors in the study population (n=108)

DISCUSSION

To the best of our knowledge, this is the first study assessing the knowledge and awareness of cervical cancer among Iraqi women residing outside Iraq. The major objective of this study was to determine the perception of the Iraqi immigrant women living in Malaysia about pap screening and awareness of cervical cancer in order to suggest possible directions for cervical cancer prevention efforts in immigrant Iraqis women in Malaysia.

This study showed a very poor knowledge among immigrant Iraqis women in Malaysia. About 57.4% heard about cervical cancer and only 13% of participants heard about HPV vaccine. Similar Malaysian studies reported lack of knowledge of HPV among female university students (21.7%) and patients (26%) [16-18]. Study from Thailand showed that 27.4% knew that HPV infection can be transmitted via sexual contact [19]. Studies from South Africa, Norway, Brazil and China reported that the knowledge of HPV were 20%, 29%, 37% and 30.2% respectively [20-23]. Higher knowledge about HPV was reported in the United States where 84.3% of women heard of HPV and 78% of them heard of HPV vaccination [24]. In this study, only 24% of the participants had Pap smear before. Lower percentage was reported among Malaysian university students that only 6% had a Pap test [25]. The differences are due to the age and marital status of the university students. In a study on Vietnamese women born in Australia, 87% of the women heard about Pap smear and 75% had a Pap smear [26]. Similar finding was reported among female health professionals working in hospitals where facilities for the test are available showed similar negative attitude towards having a Pap test [27, 28]. Similar finding reported that the practice of cervical screening was low (5.2%) [29]. Similar finding was reported by Udigwe [30] reported low levels of practicing Pap smear test 5.7% amongst female health workers. Similar finding was reported by Hoque and Hoque [31], that 9.8% of the participants had the Pap smear test done which is higher than in this study. The reasons for poor screening uptake include uneven distribution of medical facilities in the country [32], lack of knowledge about the availability of screening and culturally-influenced reluctance to undergo cervical smear tests [33]. This urges extensive health education among young women.

This study showed that lowest knowledge about risk factors of cervical cancer was HPV. This is consistent with findings of the National Cancer Institute's 2005 Health Information National Trends Survey in the United States which showed that 20% of American women were aware that HPV can cause cervical cancer [34]. Therefore there is a need to educate young women on the role of HPV in the etiology of cervical cancer and its prevention. The mass media plays an important role in this context and its function should be optimized. Participants in this study reported that getting a Pap test would only make them worry (68.5%). Similar research that reported anxiety and fear in association with participate in screening [35]. The reason for anxiety in some patients has been suggested to result from the sensitive situation concerning intimacy associated with the examination. Similar findings were reported by other studies [36-38] that the fear of discovery of cancer is one of the barriers among study participants. In this study 58.3% reported that Pap smear is costly. Cost is one of the important barriers reported by almost half of the study participants. Similar finding was reported by Ayinde *et al.* [28] that 5.9% of the participants mentioned that the cost is one of the barriers of cervical cancer screening. Similar finding was reported by Abotchie and Shokar [39].

In this study, about 70.4% think that the Pap test is painful; regarding pain and discomfort associated with Pap smear test was reported as a barrier in this study. Similar studies reported that included misconception about the test being painful were the barriers among the participants [36-38]. This may be a difficult barrier to overcome among asymptomatic women. Those who expressed this concern may have had painful and unpleasant experiences with prior Pap tests, or have heard about such experiences from others. To help women cope with concerns about pain and discomfort associated with Pap tests, interventions could focus on detailing the nature of the sample and teaching women some relaxation skills. In addition, the possibility of pain needs to be acknowledged rather than ignored so that women can feel a sense of trust. Embarrassing and painfulness of Pap smear procedure were reported as common main reasons for not doing a Pap smear in study in United Arab Emirates [40].

We couldn't compare our results this type of awareness among Iraqi women living inside Iraq or other Arab immigrants worldwide because to the best of our knowledge this was the first study carried among these groups of women, but some few reports from other groups of immigrants were recorded. HPV awareness among Latina immigrants in USA are relatively at low levels (47%) [41]. However, this awareness was high (65%) among Spanish-speaking females contacting the American National Cancer Institute [42].

Since several groups of immigrant women are living in Malaysia so future research should determine strategies to enhance immigrant-provider communication, access and utilization of Malaysian health systems. Iraqi women immigrants face multiple challenges in preventing cervical cancer and our findings reinforce the need to advance HPV awareness and prevention measures.

CONCLUSIONS

The study findings emphasize the need to educate and promote awareness among immigrant Iraqi women in Malaysia to risk factors for cervical cancer and to the need and the purpose of Pap smear screening. Moreover, the findings emphasize the need to educate these women to follow the instructions that have been implanted by Malaysian Ministry of Health and include themselves in Malaysian health programme regarding cervical cancer prevention. Further studies are needed to explore determinants the awareness of immigrant women everywhere.

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