

## A Comparative Study on Awareness of Pap Smear Test among Rural and Urban Women's In Selected Areas of Anantapur District

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**Abstract:** Cervical cancer is fourth most common cancer in world. It is also common cause of deaths in developing countries like India. Screening programs are the effective ways to reduce the incidence and mortality significantly for which awareness and sensitisation of women are required through community based approach. The Papanicolaou (Pap) smear test plays a vital role in the detection of cervical cancer even in its premalignant condition. The aim of this study was to compare the knowledge levels on PAP smear test among rural and urban area women's of Anantapur district, Andhra Pradesh. The study was conducted on 30 women's; in this 15 samples are from urban and 15 samples from rural area, selected by simple random sampling technique. The findings of the study was 12 (80%) of rural women's knowledge was below average and 10 (66.67%) urban women's knowledge was above average knowledge. The study concludes that urban women's had more knowledge when compared to the rural women's on awareness of pap smear test. Because illiteracy, and low socio economic status leads to less awareness on pap smear test. Health education on cervical cancer and pap smear test among rural women's will benefit in the further improvement of knowledge among rural women's.

**Key Words:** Pap smear, cervical cancer

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### I. Introduction

Cervical cancer is fourth most common cancer in world. It is also common cause of deaths in developing countries like India. Developing countries account for 83 percent of cervical cancer and include 15 percent female cancers. According to the report published by the WHO 80 percent of deaths from cervical cancer were from developing countries because of poor screening facility in the society as well as poor awareness among women. Many studies shown that in India 126000 new cases of cervical cancer occur every year. Unlike most other malignancies cervix cancer is easily detected and readily preventable disease. Cervical cancers in the early stage of development is completely and easily treatable as the cancer cells are localised and confined to the surface of the cervix and have not spread in to the adjacent tissues.

Screening programs are the effective ways to reduce the incidence and mortality significantly for which awareness and sensitisation of women are required through community based approach

The Papanicolaou (Pap) smear test plays a vital role in the detection of cervical cancer even in its premalignant condition. The Papanicolaou (Pap) smear was introduced in 1941, became the standard screening test for cervical cancer and premalignant lesions, and is being used globally. Many studies in the literature showed that there is a reduction in the incidence and mortality due to invasive cervical cancer worldwide because of early detection and screening; this is possible because the Pap test detects early cervical epithelial cell abnormalities and mild-to-severe dysplasia to invasive cancer and facilitates early diagnosis. This test not only plays a crucial role in the detection of cervical cancer and its precursor lesions but also aids in the diagnosis of other conditions as well such as infective and inflammatory conditions. Greater awareness among medical fraternity regarding this screening is required to carry out screening for cancer of the cervix among women in both rural and urban areas in India. Being simple, effective, and versatile, the Pap smear becomes an integral part of routine clinical examination and large population at risk can be screened. Pap smear screening has sensitivity of 50%–75% and specificity of 98%–99%. A Pap test is performed using a brush or spatula to gently scrape the cellular material from the squamocolumnar junction of the cervix and this is smeared onto a glass slide of about 25 mm × 50 mm. The cells are fixed in methanol, stained, and visually examined under a microscope. (Omna Shaki, Barun Kumar Chakrabarty 2018).

## II. Material & Methods

Comparative study was conducted on rural and urban area women's among the awareness on pap smear test. Sample size was 30 and random sampling technique was used for this study.

Study duration was one month (June 2018). This study was conducted in urban area (Neeruganti Street) and rural area (Garladinne village) Anantapuramu district and the time of 30 minutes was spent on each woman to conduct interview.

Prior to data collection, informed consent was taken from randomly selected urban and rural women's giving information about the nature of the study. It was distributed and collected by the researcher herself so as to prevent contamination of the data and gain feasibility. A three section questionnaire was employed to obtain data from the subjects. Part I of the questionnaire included questions related to the demographic variables. The second part of the questionnaire was related to cervical cancer and PAP smear test. A total of 30 questions was administered to the sample.

### *Development of the tool*

The total the total questionnaire was prepared and the study consists of two section a and b consist of items on demographic data and section B consists of 30 questions related to pap smear test each questions has three to four options one is the right answer remaining are the wrong answers and each right answer score is one and wrong answer score is zero. Total score the total score was 30 subjects who score above 75% were considered on high awareness pap smear test and this object this object who score between 50 to 70% were considered as knowledge on Pap smear test. Structured demographic variables and structured knowledge questioning where in English and Telugu for data collection.

Descriptive statistics were used for analyzing the data on the objective of the study frequency were used to summarize the demographic variables. Mean, mean percentage, standard deviation used to assess the knowledge level of sample. Association between knowledge and variables. Chi square test used to assess the association between the knowledge and selected demographic variables.

## III. Results

### *Variable wise frequency, percentage of awareness on pap smear test among urban and rural women's in selected areas of Anantapur district.*

**Table-1**

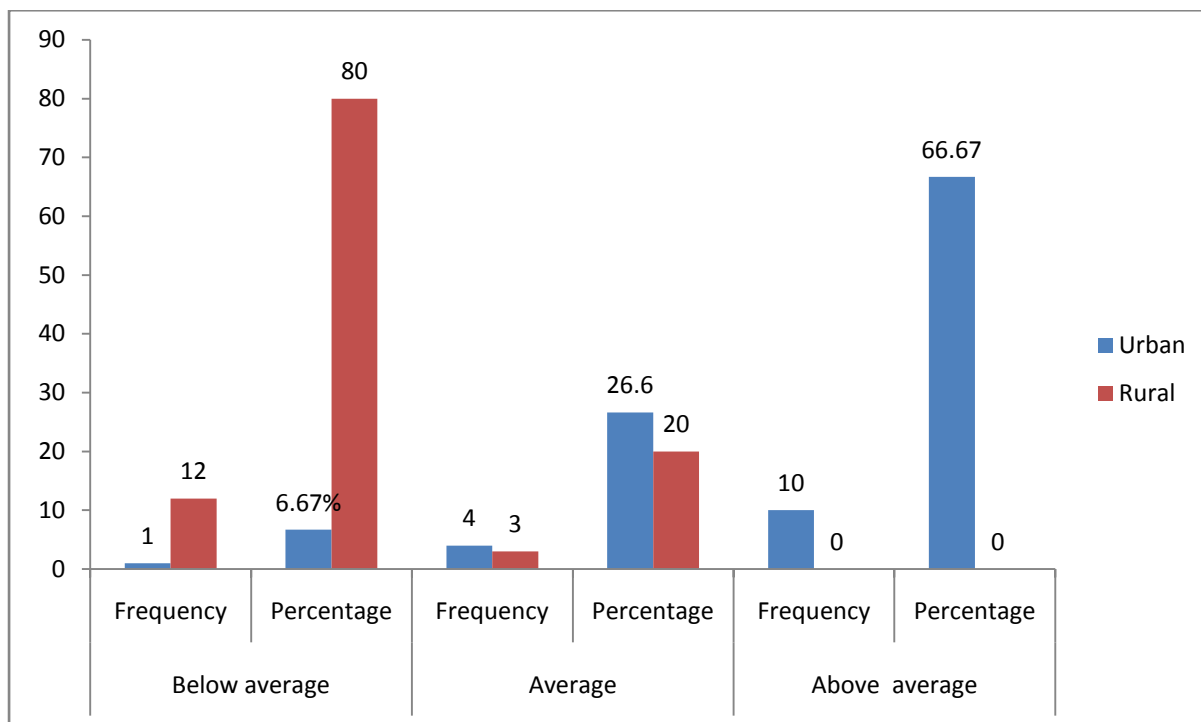
		Demographic Variables.	Urban		Rural	
			Frequency	Frequency (%)	Frequency	Frequency (%)
1	Age	Below 25 years	9	30	8	26.67
		26-40 years	4	13.33	6	20.00
		Above 40 years	2	6.67	1	3.33
2	Religion	Hindu	12	40.00	11	36.67
		Christian	2	6.67	2	6.67
		Muslim	1	3.33	2	6.67
3	Educational qualification	Illiterate	2	6.67	3	10.00
		Primary education	5	16.67	6	20.00
		secondary education and above	8	26.67	6	20.00
5	Occupation	House wife	3	10.00	5	16.67
		Cooly	4	13.33	7	23.33
		Employee	8	26.67	3	10.00
6	Income	Rs. Below 5,000.	5	16.67	11	36.67
		Rs.5,001-10,000	7	23.33	4	13.33
		Rs. Above 10,000.	3	10.00	0	0.00
7	Source of information	Health magazines	2	6.67	2	6.67
		TV, Newspapers	9	30.00	9	30.00
		Health Professionals	4	13.33	4	13.33

### *Comparison of rural and urban knowledge level of score.*

**TABLE-2**

Knowledge	Below average		Average		Above average	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
Urban	01	6.67	4	26.6	10	66.67
Rural	12	80	03	20	0	0

12 (80%) of rural samples have below average knowledge and 10 (66.67%) urban women's have above average knowledge.



*Comparison of rural and urban area women's awareness level of score*

*Comparative Analysis of awareness on pap smear test among urban and rural women's*

**TABLE-3**

S.no	Knowledge Variable(comparative study)	Maximum Score	Mean	Mean %	SD	Un-Paired T Test
1	Urban	30	24	80	4.60	6.87
2	Rural	30	13	43.3	4.16	

**IV. Discussion**

The significant findings of the study revealed that there is only 6.67 percent urban women's were below average and 4(26.6%) have the average knowledge 10(66.67%) have the above average.

The significant findings of the study revealed that 12(80%) rural women's knowledge was below average 3(20%) women have the average level and none rural women have above average level of knowledge.

Data presented in the table indicates that the urban knowledge mean score 24,SD 4.60.The rural knowledge mean score was 13 and the SD was 43.3.Table shows that there was significant difference in knowledge levels among urban and rural women's.

The statistical unpaired T test showed a significant difference 6.87 existing between the urban and rural women's overall mean knowledge level score. It was found that there was a significant difference of knowledge level in urban and rural women's, so the knowledge level of urban women is higher than the rural women on awareness of pap smear test.

**V. Conclusion**

The study concludes that urban women's had more knowledge when compared to the rural women's on awareness of pap smear test. Because illiteracy, and low socio economic status leads to less awareness on pap smear test. Health education on cervical cancer and pap smear test among rural women's will benefit in the further improvement of knowledge among rural women's.

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