

CERVICAL CANCER: THE ROLE OF HEALTH EDUCATORS IN THE PREVENTION OF CONTROL CERVICAL CANCER

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Abstract

The purpose of paper is to find out the roles of health educators in the prevention of cervical cancer. Cervical cancer is a type of cancer that affects the cervix which is the lower part of the uterus that opens into the vagina. Cervical cancer still remains the leading cause of cancer deaths among women in Africa in which Nigeria is not exempted. It was remarked that multiple sexual partners, smoking, viral infection and unhealthy eating habits among others increases the risk of developing cervical cancer. It was observed that vaginal bleeding after sex, vaginal discharge that is watery and has a string smell or that contains blood, Pelvic pain during sex, difficulty or painful bowel movement or bleeding from the rectum when having a bowel movement, difficulty or painful urination, swelling in the legs and Pains in the abdomen are signs and symptoms of cervical cancer. It was concluded that with appropriate health education enlightenment through knowledge, awareness and the right attitude exhibited by women, cervical cancer can easily be prevented. It was therefore recommended that health educators should carry out massive public enlightenment campaign through the use of electronic and print media as well as the social media, this will help increase cervical cancer knowledge as well create the necessary awareness that will sensitize women for cervical cancer screening.

Keywords: Cervical Cancer, Health Educator, prevention

Introduction

Cancer is a term used to describe a group of diseases that is characterized by abnormal and uncontrolled growth of cells and tissues that result in the formation of tumors which invade the normal cells and tissues of the human body. World Cancer Research Fund International (2020) asserted that cancer is the second leading cause of death, after cardiovascular diseases worldwide. Approximately 18.1 million people are diagnosed with cancer annually, of these 9.3 million cases were in men and 8.8 million in women. Cancer is dread disease that subject people to physical, emotional and financial problem even children are not exempted against the diseases. Cervical cancer is a type of cancer that affects the cervix which is the lower part of the uterus that opens into the vagina. Cervical cancer is cancer that developed in the cervix, the narrow opening into the uterus from the vagina. The normal "ectocervix" (the portion of the uterus extending into the vagina) is a healthy pink colour and is covered with flat, thin cells called squamous cells. The "endocervix" or cervical canal is made up of another kind of cell called columnar cells. The area where these cells meet is called the "transformation zone (T-zone) and is the most likely location for abnormal or precancerous cells develop (Liu, Semenciw &, Mao 2001).

Cervical cancer is a non-communicable disease and it is a major public health burden that affects women worldwide. Cervical cancer is one of the most common types of cancers among women. In 2020, an estimated 604,000 women were diagnosed with cervical cancer globally. Of the estimated annual deaths of >341,000 from cervical cancer in 2020, >85% occurred in low-and middle-income countries (Makadzenga,., Peeeters, . Joore., & Kimman., 2022). In the same vein World Health Organization, (2018) stated that 570,000 women were diagnosed with cervical cancer worldwide and 311,000 women die from the disease in 2018. Almost 99% cases of the cervical cancer are associated to infection with human papillomaviruses (HPV). It is a common virus which is transmitted through sexual contact. According to WHO(2014) stated that 85.0% of cervical cancer deaths occur in developing countries with most occurring in the poorest region.

Cervical cancer is one of the most preventable cancer among women worldwide, Cervical cancer: besides being prevented through HPV vaccination, pre-cancerous lesions can easily be detected through screening before they become cancer. When screening detects pre-cancerous lesions, these can be treated and cancer avoided. Screening can also detect cervical cancer at an early stage when treatment has a high potential for cure. WHO (2020) Despite the advances of screening and vaccinations cervical cancer still remains the leading causes of cancer deaths among women in African of which is not exempted (Ferlay., Bray, Pisani, & Ostergren. O. P 2019). High cervical cancer deaths are recorded each year in Africa of which Nigeria is not exempted. In 2020 110,000 cervical cancer cases and 72,000 deaths were recorded in Africa (Makadzenga, et al, 2022), stated that Lack of health information, Poor access to prevention, screening, and treatment results in late presentation, which in turn leads to poor treatment outcomes, low survival rates and even death. In Africa cervical cancer still remains the third most common cancer among women under 44 years of age. Most cervical cancers (80 to 90 percent) are squamous cell cancers. While Adenocarcinoma is the second most common type of cervical cancer, accounting for the remaining 10 to 20 percent of the cases. Adenocarcinoma develops from the glands that produce mucus in the endocervix. Which is less common than squamous cell carcinoma, the squamous cell carcinoma develops in the part of the cervix, which is lined with skin, called squamous epithelium. The incidence of adenocarcinoma is on the rise, particularly among younger women (Liu,et al,2001).

Eight percent (80%) of invasive cervical cancer detected are squamous cell carcinomas while adenocarcinomas are diagnosed more rarely (20%) (WHO, 2000) Cervical cancer is preceded by abnormalities in the cells of the cervical epithelium, the lining of the cervix (Chomet&Chomet, 2001). These abnormalities are not malignant and they extend over a period of time (WHO,2018). Cervical cancer is the 2nd leading cause of death among women in Nigeria with up to 80 percent of women dying from the disease (Ferlay, Ruikm, Colombet, Mery, Ineros, Znaor, Soerjomateran, & Bray, 2018) therefore cervical cancer a serious matter that should be not be handle with kid gloves, consequently everything humanly possible should be done to prevent, detect, and control this disease that is a threat to the health and wellbeing of women.

There are modifiable factors that may be responsible for the cause of cervical cancer. According to WHO (2010), tobacco, age, unhealthy diet such as excessive

consumption of red meat, consumption of processed food, infectious agents like Human Papilloma Virus (HPV), Hepatitis B virus, helicobacter bacterium, ultra violet radiation, physical inactivity, occupational exposures, food contaminants such as aflatoxin, ionizing radiation, and early sexual intercourse. While the Non-modifiable risk factors include ageing, ethnicity, heredity, sex, immune suppression and reproduction. This simply means that modifiable risk factors can be prevented Nnode, Erinoho , Janda , Olanyi , Adelaiye , Lawson , Odedina , Shuaibu , Odumuh, Isu , Imam, Owolabi , &Zamani , (2010)

The causes of cervical cancer are largely speculative, as for many other forms of cancer. Behavioural causes are probably the most important determining factors in the causation of this disease as it is evident from the different patterns of cervical cancer mortality across the world. It is important, however, to note that a cause and effect relationship cannot, as yet, be determined due to confounding variables. The following are suspected causes of the diseases: They are:

Sexual behaviours: The number of a woman's sexual partners plays a significant role in the aetiology of cervical cancer (WHO,2000).The risk for cervical cancer is three times higher in women who have 10 or more partners than those with fewer partners (WHO, 2018). Increased susceptibility to cervical cancer has also been observed among women who begin sexual activity before the age of 15. They have about twice the risk compared to women who become sexually active after 15 years (World Health Organisation,2010). There is suspicion that this relationship reflects a vulnerable period in which a woman's cervix is susceptible to carcinogenic influences in the same vein (WHO,2000) stated cervical cancer is more frequent among women who have had long sexual relationships than shorter term ones. This may suggest that long-term relationships allow carcinogenic agents to transmit to the woman and thus increase her risk in cervical cancer (WHO, 2000)

Sexual and behavioral preferences of husbands of women diagnosed with cervical cancer showed that men had more sexual partners, and had more sexually transmitted diseases such as genital warts, and genital herpes (WHO, 2000). According to WHO (2012) it was revealed that in Denmark the most significant risk factors responsible for cervical cancer were a history of genital warts in women who do not use condom during sexual activities (WHO, 2012). Lower rates of cervical cancer are reported among women whose husbands used condoms (WHO, 2000) stated that frequent visits to prostitutes by husbands is an elevated risk of cervical cancer in spouses (WHO,2000). Women who used oral contraceptive methods for more than four years have been found to have an elevated risk of developing cervical cancer as opposed to women who used barrier methods of contraception (World Health Organization, 2000). These differences are attributed to different exposures of the cervix to seminal fluids, sperm and viruses such as the genital warts virus, and genital herpes.

Cigarette smoking; Cigarette smoking is suspected as a cause of cervical cancer. According to WHO (2000), long-term or frequent users of tobacco have been reported to have a two-fold risk of cervical cancer among women. Meanwhile, America Cancer Society (2014)

posited that nicotine and cotinine are found in cervical mucus which suggests a biological effect of smoking, while it is also possible that smoking suppresses the immune system and as a result the body is weaker in fighting infectious agents like the Human Papilloma virus. There is no agreement on the exact extent to which smoking affects the initiation of the disease and most researchers support the proposed notion that smoking has a synergistic effect on the development of the malignancy too (America Cancer Society, 2015).

Dietary factors; Dietary practices may contribute to cervical cancer development; Risk factors identified are consumption of fat, protein and alcohol. Diets poor in vegetables and fiber seem also connected to an elevated risk of developing cervical cancer (WHO,2000). According to America cancer society (2011) reduced risk for cervical cancer was associated with high intake of vitamins A, C and E, as well as beta-carotene.

Viral infection; The most probable cause for cervical cancer according to epidemiological studies is some sexually transmitted agent that can be passed on from male to female or vice versa (American Cancer Society, 2014). The suspected agents include Chlamydia, spermatozoa, herpes simplex virus, bacterial vaginosis, syphilis, and gonorrhoea. The role of viral infections in the development of cervical cancer has been suspected since the Papanicolaou test was first developed.

General symptoms of cancer

The following are the symptoms of cervical cancer. Vaginal bleeding during sex, vaginal bleeding after sex, periods that are heavy and longer than normal, vaginal discharge that is watery and has a strange smell or that contains blood, pelvic pain during sex, difficulty or painful bowel movement or bleeding from the rectum during bowel movement, difficulty or painful urination, swelling in the legs, pain in the abdomen and Feeling tired. (National Cancer Institute, 2023).

The role of health educators in the prevention of cervical cancer

Health educators developed tools that can help to improve the health of the people in developing nations. It does not only teach prevention and basic knowledge but also an important ideas that will shape the individuals everyday habits of unhealthy lifestyles and behaviours that could predispose women to cervical cancer.

This kind of information will not only have positive effect on the immediate respondent or participant but also future generation from improved cultivated ideas about health. Health education can also provide more aid and help for people who deals with stress, anxiety, depression, fear and other emotional disturbances that may arises as a result of diagnosis to lessen the burden. Health education plays a very crucial role in the prevention of cervical cancer among female youths and women in our nations and this can only be achieved through Health Educators.

The role of health educators on cervical cancer prevention

In the area of knowledge of cervical cancer the health educators can adopt a variety of skills and methods to address the issues of knowledge of cervical cancer by helping young female adolescent and women to become better informed about cervical cancer, providing counselling, identifying cervical cancer symptom for early intervention and promptly referring to health care professional for assessment and intervention since the key to survival of cervical cancer is early detection of cervical cancer. Health educators can also organize seminars, workshop and conferences to educate and sensitize the general public particularly women on the need to adopt safe sexual practices and the dangers of late diagnosis of cervical cancer. They can engage the public through the use of electronic and print media as well as social media platform as a means of disseminating information on the causes, signs and prevention of cervical cancer through their write up and also inviting professionals in the health care industry that will also educate female adolescent and women on the consequences of late diagnosis and screening services for those who are willing to be screened

Health educators can work with town criers to communicate to young female adolescent and women on the need for screening and to also encourages mother to give their female children who are up to nine years human papilloma virus vaccine in order to prevent cervical cancer. They can also collaborate with community leaders, religious, government and non-governmental organization to set up an equipped cervical cancer screening center across the nations, particularly in the rural areas.

Health educators can organize, develop and distribute educational information and materials about cervical cancer wellness to the state, local and community agencies on the concept of cervical cancer, signs and symptoms and prevention. This can be carried out through spoken words, audio visual aids, pamphlets, posters, handbill and bulletin. Also they can also developed prevention programmes that focus on young female children before their belief and expectations about sexual activities are established. Other effective programmes that can be developed by the health educator to help improve students' self-esteem to deal with peer pressure using assertiveness skills and reduce stress and anxiety. This skill can be taught by the health educators with different combination of methods including demonstration, discussion, practice, feedback among others.

Conclusion

Appropriate health education enlightenment through knowledge, awareness and the right attitude exhibited by women, cervical cancer can easily be prevented.

Based on the conclusion of this paper, the following recommendations were made that health educators should carry out massive public enlightenment campaign through the use of electronic and print media as well as the social media, this will help increase cervical cancer knowledge as well create the necessary awareness that will sensitize women for cervical cancer screening and prevention. There should be health education units headed by health educators in all primary, secondary and tertiary health institution across the nation.

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