# Factors Related to Screen Cervical Cancer Behaviors on Thai Muslimah in Ta-kae, Yaring, Pattani, Thailand

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**Abstract**—This research aimed to investigate the factors correlated to the cervical cancer screening test of Thai muslimah in Ta-kae district, Yaring, Pattani. It was a descriptive research using the questionnaires to collect the data from the 235 Thai Muslimah samples. Then data were analyzed with computer program, Descriptive statistics and Chi-square test

It was found that majority of the women were seen in the age group of 35-40 years. 46.4% were entrepreneur and self-employed. 38.3% of the sampling group got the average household income less than 5,000 Baht pro month. 33.2% had marital status of being married. 80% finished their secondary school. 47.7% had been informed of the cervical cancer. 80% were convenient to get the service. 83.3% agreed that the placement of the hospital was appropriate. 88.9% agreed that they spent very long time for the screening service. 54.0% of the surveyed group concluded that the staff was courteous. 83.8% of this women group had the moderate knowledge. 47.7% set their beliefs in cervical cancer screening on a high score. 54.0% used to have a cervical cancer screening. 54.5% went to be screened once a year. 37.2% went to be screened at the Yaring Hospital. 48.8% were screened more than one time a year. 42.6% accepted that they went to be screen according to the advice of the health staff. For the women who did not go to be screened because 42.6% of the group thought that it was unnecessary and 48.1% of the group thought that they were healthy. Factors Related, it was found that the level of knowledge, ease of travel and health care provider had statistical significantly correlated at the 0.05

Keywords— Cervical Cancer, Thai Muslimah Behavior

### I. INTRODUCTION

Cervical cancer causes major public health burden in developing countries, which is a major cause of mortality and morbidity among women worldwide. [1] In Thailand, there are 8,184 and 4,513 new cases of cervical cancer and deaths in 2012. [2]. Therefore, the Ministry of Public Health has launched a cervical cancer screening program for women aged 35-60 years by Papanicolaou (Pap) test every 5 years to cover most target population. [3] Many countries have set guideline in the screening program including important issues e.g. ages of women, methods, frequency, and etc [4]-[6].

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The coverage of cervical cancer screening in southern Thailand is lower than in other regions<sup>5</sup>.Pattani Province is located in southern border Provinces of Thailand where most of the population is Muslim. The coverage of cervical cancer screening test in 2012 among women target population (35-60 years) was only 45.5%, lower than the goal of WHO target. In Ta-kae Subdistrict, Yaring District also had been screened for cervical cancer was only 40 %.

Focusing on the reasons why women did not have cervical cancer screening, reports from many countries had different findings [7]- [10]. In general, Several factors have been found to affect the behavior of having cervical cancer screening by women, such as socio-demographic and socioeconomic factors, reproductive history, lifestyle and risk behaviors, attitudes, beliefs, socio-cultural, information, knowledge, psychological factors, and provided services. Studies from South America, Africa and Asia reported that absence of symptoms, no knowledge, lack of time, embarrassment, fear of pain, anxiety on privacy violation and fear of infection were obvious reasons for the non-screening. [1] In Thailand, studies from suburb areas of the country reported several reasons for suboptimal cervical cancer screening embarrassment, fear, time constraints, knowledge deficits, fatalism, thinking that they had no risks, inaccessibility of screening and cost.[10], [12]- [14] In addition to the cultural barrier, screening behaviors have been reported as barriers among Muslim in many countries. These women resist cervical cancer screening as it threatens their cultural and religious values. For the Muslim, Islam is not just a religion; it is a complete way of living that affects every aspect of a Muslim's life. [1], [10][15], [16] Therefore, Muslim women are an atrisk group for lacking cervical cancer screening. There are various dimensions of the factors which affect cervical cancer screening, but little is known about factors associated with cervical cancer screening among Thai muslimah, especially in in Ta-kae district, Yaring, Pattani. This study was conducted to investigate the factors correlated to the cervical cancer screening test of Thai muslimah in Ta-kae district, Yaring, Pattani.

## II. MATERIALS AND METHODS

A self-administered questionnaire was consisted of five sections: background information, Factors contributing for cervical screening, knowledge about cervical cancer, Health beliefs to prevent cervical cancer and get screened for cervical cancer. Questionnaire was contemplated, discussed, tried out in 30 women that similar sample together, then adjusted and discussed again until consensus. The final questionnaire was validated by 3 experts (not involved in the study) in the Obstetrics and Gynecology of the institution. The protocol was approved by the Human Research Ethics Committee of both institutions. The study was conducted at both institutions from January until the end of May 2016. It was a descriptive research using the questionnaires to collect the data from the 235 Thai Muslimah samples. Thai women muslim aged 35-60 years and had lived in in Ta-kae district, Yaring, Pattani. The questionnaire was divided into 5 parts:(I) Demographic data including obstetric and gynecologic histories,(II) Factors contributing to the cervical cancer screening service. (III) knowledge about cervical cancer screening (IV) Health Beliefs and behavior of cervical cancer screening (V)Practice on cervical cancer screening.

**Data Analysis:** Frequency distribution, namelypercentage, mean and standard deviation were used to describe information about the subjects. Chi-square test was used to determine the relationship between the independent variables the dependent variable statistics. The p - values were considered statistically significant at p < 0.05.

#### III. RESULTS

Characteristics of thai Muslimah who participated in the study. There were 235 Thai Muslim women in Ta-kae district, Yaring, Pattani, Thailand. There were 235 Thai Muslim women in Ta-kae district, Yaring, Pattani in this study at the age of 35-40 years old (46.4%). The most common occupations were employees (38.3%)followed unemployed/housewives (25.5%) and Government officer (21.7%). Approximately 33.2 % had family monthly income less than 5000 Baht (1 USD approximates to 32 Baht). The majority of subjects were married (80.0 %). Almost all women were education high school/diplomas (47.7%) that have ever been informed about cervical cancer (80.0%) are show in Table I.

Factors contributing to screen the cervical cancer service. Table II showed that 83.0 % of the samples had easy access to services. There were significant differences (P < 0.05) in the distribution of women.

88.9 % agreed that the placement of the hospital was appropriate. Slightly greater than one-half (54%) of the women cervical cancer screening were agreed that they spent very long time for the screening service. Health care provider concluded that the staff was courteous (83.8%). There was an also significant difference in the distributions of parity (P < 0.05). Knowledge about cervical cancer screening was moderate at 44.7% of this women group (P < 0.05). and attitudes towards the cervical cancer screening or reasons the women did not have screening at 54.0% was a good attitude level.

Table III shows practice about cervical cancer screening. About 54.9% of the women who had ever received a Pap smear had visited a healthcare provider more than once per year (37.2%) compared with 45.1% of women who had never had a Pap smear.

48.8% went to be screened at the Yaring Hospital (District Hospital). 42.6% accepted that they went to be screen according to the advice of the health staff. For the women who did not go to be screened because of the group thought that it was unnecessary (48.1%) of the group thought that they were healthy. The three most common reasons reported by the women of cervical cancer screening were unnecessity, , embarrassment, No knowledge.

TABLE I Characteristics of thai Muslimah who participated in the study

Demographic characteristics	Total (n=235)	(%)	p-value
Age(years)			0.522
35-40	109	46.4	
41-45	66	28.0	
46-50	34	14.5	
51-55	20	8.5	
56-60	6	2.6	
Occupation			0.199
Unemployed / Housewife	60	25.5	
Employee	90	38.3	
Agriculture/farmer	22	9.4	
Government officer	51	21.7	
Contractors/iOthers	12	5.1	
Family monthly income (Bath)			0.055
≤ 5000	78	33.2	
50011-18000	66	28.0	
8001:-:10000	69	29.4	
> 10000	22	9.4	
Marital status			0.355
Single	20	8.5	
Widow/ divorce	27	11.5	
Married	188	80.0	
Education level			0.761
Primary education	89	37.9	
High school/ Diploma	112	47.7	
Above Bachelor degree	34	14.4	
To receive news about cervical			0.057
cancer			
Never	47	20.0	
Ever	188	80.0	

TABLE II
FACTORS CONTRIBUTING TO SCREEN THE CERVICAL CANCER SERVICE

FACTORS CONTRIBUTING TO SCREEN THE CERVICAL CANCER SERVICE.						
Factors	Total (n=235)	(%)	p-value			
Ease of travel			0.015*			
Convenient	195	83.0				
inconvenient	40	17.0				
service station						
Appropriate	209	88.9	0.342			
improper	26	11.1				
The time it takes to get the			0.112			
service.						
long time	127	54.0				
Short time	108	46.0				
Health care provider			0.037*			
Yes	197	83.8				
No	38	16.2				
Knowledge about cervical			0.000*			
cancer screening.						
High	74	31.5				
Moderate	105	44.7				
Low	56	23.8				
Attitude			0.098			
Poor attitude	108	46.0				
Good attitude	127	54.0				

\*Significant at alpha 0.05

TABLE III
PRACTICE ABOUT CERVICAL CANCER SCREENING

Practice about cervical cancer screening	Total	(0/)
Fractice about cervical cancer screening	(n=235)	(%)
Ever had a pap smear?		
Yes	129	54.9
No	106	45.1
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Number of visits to health provider	48	37.2
Once a year	46	34.1
More than once a year	37	28.7
Less than once a year	37	26.7
Where to get cervical cancer screening		
District Hospital	63	48.8
Provincial hospital	36	27.9
Private clinic / private hospital	6	4.7
District Health Promotion Hospital	24	18.6
If the cervical cancer screening results are		
negative, Have you checked again?		
Yes	83	64.3
No	46	35.7
Why do you go for cervical cancer screening?		
Annual Checkup	45	35.0
Recommendation by health care personnel	55	42.6
Postpartum examination	28	21.7
Relatives / friends	1	0.7
A reason for not go to be screened for cervical		
cancer.		
No knowledge	14	13.2
Too far to travel	2	1.9
unnecessary	51	48.1
Fears of religion	2	1.9
Embarrassment	28	26.4
Bad impression with health services	5	4.7
Husband not allowed checking.	4	3.8

### IV. CONCLUSION

This study is one of report that has attempted to determine factors correlated with the cervical cancer behaviors among Thai muslimah. Health care providers should prepare a well-designed health education and health promotion program on cervical cancer that addresses the Islamic cultural and religious beliefs of Muslim women about cervical cancer screening with an emphasis on reducing barriers and encouraging Thai Muslim women to receive cervical cancer screening.

#### ACKNOWLEDGMENT

The authors are thankful to Health care provider had lived in Ta-kae district, Yaring, Pattani for facilitation of the data collection. This work was supported by Sirindhon College of Public Health, Yala Praboromajachanok Institute, Ministry of Public Health, Thailand. Fiscal year 2016. The authors also would like to thank the Thai Muslim women subjects for their strong participation.

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