

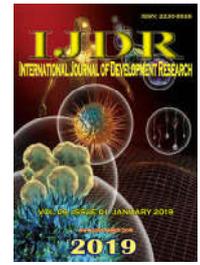


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## KNOWLEDGE, ATTITUDE AND PRACTICE OF CERVICAL CANCER SCREENING AMONG FEMALE STUDENTS IN TERTIARY INSTITUTION IN CALABAR, NIGERIA

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### ABSTRACT

Cervical cancer is one of the commonest cancers in Nigeria. Fortunately, it is preventable by detecting precancerous lesions early through the use of various screening tools. This screening can be possible if students are aware of the problem and also if they have positive attitude. Therefore, this study was conducted to find out the knowledge, attitude and practice of cervical cancer screening services amongst female students in University of Calabar, Cross River State. Three specific objectives and two hypotheses were formulated to guide the study. The study design was a descriptive survey design. Stratified and simple random sampling technique was adopted to get the 171 sample size that was used for the study. The instrument for data collection was a four sectioned questionnaire, and a reliability coefficient of 0.68 was used. Simple percentage and frequency table was used to analyze the data, while chi-square was used to test the hypotheses. The findings in this study revealed that, 83.6% of female students had good knowledge of cervical cancer screening, 67.8% had favourable attitude, while only 14.6% practiced cervical cancer screening. Hypotheses tested, revealed that no significant relationship existed between the level of knowledge and attitude towards cervical cancer screening and also, no significant relationship existed between the year of study and practice of cervical cancer screening, where  $\chi^2$ -calculated of 0.67 and 0.058 were lesser than  $\chi^2$ -critical of 5.991 and 5.991 respectively at 0.05 level of significance. Based on the above, it was recommended that female students should be encouraged on the need to practice cervical cancer screening and also that government and non-governmental organizations, private investors should invest more into the health sectors by providing equipments and materials necessary for the provision of these services in all health facilities and at an affordable price.

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## INTRODUCTION

Cervical cancer poses a major public health threat to women in many low and medium resourced countries in South and Central America, Sub-Saharan Africa, South and South-East Asia, where it is still the leading type of cancer among women (Ferlay, Bray, Pisani and Parkin, 2010). With about 500,000 new cases and 250,000 deaths each year worldwide, it is the second most common cancer among women (World Health Organization, WHO, 2010) cervical cancer is largely a preventable disease. It is preceded by a detectable and preventable pre-invasive phase of about a period of 10-15 years.

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The long transition time from a premalignant lesion to frank cancer of the cervix affords ample time for early detection and almost complete cure even in secondary health care centres (Ojong, Esienmoh and Uka 2016). In the developed countries, large scale screening programmes coupled with effective treatment of pre-invasive lesions have resulted in a decline in the incidence of invasive cervical cancer. The reverse is the case in Nigeria where cervical cancer screening is mainly opportunistic. Such opportunistic screening tends to reach groups at low risk and miss those at high risk of developing the disease (Adefuye 2012). The value of cervical cancer screening in reducing the risk of cervical cancer and mortality has been established and the risk of developing cervical cancer can be reduced by 80% through regular screening (Ojong, Mgbekem and Uka 2016).

Furthermore, it has been reported that 50 -90% of women who develop or die from cervical cancer have never been screened (Isa et al, 2013). There are many screening techniques available and each technique has its own advantages and disadvantages. Currently, the Pap smear screening is the only cost effective and well established technique available and used worldwide (Donta, Begum, Nasir, Naik, Mali, and Anil, 2012). But it may be a challenge to implement in low resource setting, other methods include Visual inspection with Acetic Acid (VIA) and Human Papilloma Virus Deoxyribonucleic acid (HPV DNA test). Uptake of Pap smear test in Nigeria is very low even when compared with other developing countries. The screening procedure is simple and straightforward, but can be perceived by women as invasive, as it requires a pelvic examination. A well organized programme for processing smear is required, with skilled personnels for the correct interpretation of results and ensuring appropriate intervention. Such a programme must be a part of a comprehensive public health environment where the target population is educated and informed about the availability of the procedure and its benefits (Alliance for Cervical cancer Prevention, 2004).

Cervical cancer screening is underutilized in the developing countries due to a number of factors like poor educational background, lack of knowledge regarding the availability and benefits of screening, lack of information from part of health care workers, affordability of screening tools by the individual, cultural barriers, unavailability of facilities at all health centres and the like of these, lack of awareness and attitude, wrong beliefs about the disease and screening have led to the poor uptake and practice of cervical cancer screening. The success and benefits of screening at a national level as a public health programme to control and prevent cervical cancer depends to a great extent on the level of awareness of the potential beneficiaries. Therefore, this study is conducted with the aim to gather information regarding the knowledge, attitude and practice of cervical cancer screening among students of the University of Calabar.

**Purpose of the Study:** The purpose of this study is to investigate the knowledge, attitude and practice of cervical cancer screening among female students in University of Calabar (UNICAL), Calabar, Cross River State, Nigeria.

**Specific Objectives:** The specific objectives of the study were to:

- Ascertain the level of knowledge of cervical cancer screening services among female students in University of Calabar (UNICAL), Calabar.
- Identify the attitude of students towards cervical cancer screening services in University of Calabar (UNICAL), Calabar.
- Assess the practices of screening services among female students in University of Calabar (UNICAL), Calabar.

**Research Hypotheses:** There is no significant relationship between level of knowledge and attitude of female students towards cervical cancer screening services in University of Calabar, Calabar. There is no significant relationship between the year of study and practice of cervical cancer screening among female students in University of Calabar, Calabar.

## EMPIRICAL REVIEW

**Knowledge Level of Cervical Cancer/Screening Services:** It has been noted that some women lack knowledge about Pap smear tests and its indications. Many women do not have a clear understanding of the meaning of an abnormal smear or the concept of pre-cancerous changes and many believe that the purpose of the Pap smear test is to detect cancer (Ojong, Etim and Samson-Akpan 2013). An assessment of women's knowledge of cervical screening was considered important as up to 92% of those dying from this form of cancer have never been tested (Adefuye, 2012). Duncan (2010) in his study to examine the level of knowledge about cervical cancer, its risk factors and preventive service available among German women, only 3.2% knew Human Papilloma Virus (HPV) as a risk factor and 69.9% of the women considered themselves insufficiently informed on the issue. This view was also documented in various other studies carried out worldwide. It was also discovered by Campbell, Adu, and Danwatta (2014) that majority of respondent in the study conducted by them (68%) did not know what a cervical smear was. Some who had awareness did not know what it was for and were not interested in undergoing a cervical smear because of some seemingly more pressing issue.

Hakama, Joutsenlahti and Virtaren (2011) revealed in their research work that limited knowledge among women of low socio-economic status and the reasons for the limited knowledge included-cultural norms, secrecy, provider not informing the public and policy maker's limited attention of cervical cancer. Likewise, Mandelblatt, Fans and Garibalo (2010) discovered in a study by that just 15% of women between 20 and 65 years of age who attended outpatient clinics at UCTH, Ibadan in 2003 heard of cervical screening while 85% never heard of it. According to a study by Hakulinen, Hanshuwka and Lopez (2012) carried out at Regina Mundy Health Centre, Lagos, results showed that 15.82% of the 196 respondents were aware of cervical screening, 26.02% were aware of cervical cancer and 6.63% had never heard of cervical cancer screening. Ofori, Ebu, John and Siakwa (2013) from their study conducted in Ghana, results, showed that 83.0% participants had good knowledge of cervical cancer only 77% had knowledge of cervical cancer screening services, although 89% respondents correctly identified human papilloma virus as being associated with cervical cancer.

**Attitude towards Cervical Cancer Screening Services:** In a study carried out by Matin and Le Baron (2014) on the attitudes toward cervical cancer screening among Muslim immigrant women in the San Francisco Bay area through focus groups. Participants were from Middle Eastern backgrounds. Women mentioned that their religion and culture such, as the value of virginity for unmarried women, made them concerned about how the Pap smear might affect this. The participants pointed out that doctor were not sensitive to cultural differences on this topic. Ferley et al (2010) in their study on knowledge, attitude and practice of cervical cancer screening revealed that despite the good knowledge possessed by respondents, only 35.5% of respondents had positive attitude towards cervical cancer screening. Bakheit and Bu Haroon (2011) studied the knowledge, attitudes and practice of Pap smears using a detailed questionnaire, among local school teachers in United Arab Emirates. Participants were 350 married female teachers from 18 schools in Sharjah city in United Arab Emirates, ranging from 20-59 years. Eighty-four percent had a good knowledge about cervical cancer screening, but the

majority of them had never had a Pap smear test done. The reasons for not having the test were fear, embarrassment and shyness due to cultural influences. Similarly, Maaita and Barakat (2012) studied attitudes towards cervical cancer screening among Jordanian women. They had 600 participants who were all women aged between 20 and 40 years old. Forty-three percent of those women had a college degree. Researchers found that 75% had never had a Pap smear although a majority agreed it was important. Seventy-seven percent did not know about cervical cancer risk factors. As for the reasons for not having the test done, the women mentioned fear, embarrassment and belief that it was unnecessary.

**Practice of Cervical Cancer:** In a study carried out on knowledge, attitude and practice towards cervical cancer among reproductive health clients at the University of Science and Technology Hospital-Sana'a in Yemen, it was discovered that 7% of participants had performed a Pap smear test which coincides with the study conducted in South Africa (9.8%) and less than a similar study (40%) in United Arab Emirates (Urasa and Darj, 2011). Ezeriogbo and Uche (2012) in their work on knowledge, attitude and practice of cervical cancer screening among secondary school teachers in Enugu state showed that, despite their year of study, only 13.4% practiced cervical cancer screening.

The major findings in a study in Nigeria by Gharoro and Ikeanyi (2012) among female health workers showed that their practice of cervical cancer screening was very low and there was a wide gap between their personal knowledge and uptake of cervical cancer screening. This was unexpected as this population of women is required to be better informed about the high risk factors of developing cervical cancer. The behavior of these female health workers appears to be predicted by complex socio-cultural beliefs where women hardly reveal their personal medical details especially in a polygamous setting and superstition and inappropriate belief were the commonest excuse for not practicing cervical cancer screening. Similar picture as above have been observed also in Uganda where only 19% of their female health workers have ever had a cervical cancer screening and reasons for this included not feeling at risk, lack of symptoms, carelessness, fear of vaginal examinations, lack of interest and test being unpleasant. It is unlikely that these medical workers would feel motivated to screen others or advise them accordingly (Mutumba, Mmiro, and Weiderpass, 2013). In America, the question they are trying to answer is how to reach those women who do not get pap smear tests. The answer is most likely a complicated mixture of many factors, including limited or sporadic access to health care and cultural attitudes that are fatalistic toward diseases such as cancer (Cracchiolo and Leitao, 2014). The Australian Institute of health report entitled "Cervical cancer screening in Australia – Options for change" found that 15% of Australian women have never had a pap smear test; around 50% have had a pap smear test within past 2 years and 60% within the past 3 years but many groups of women who should be tested have not been taking advantage of the screening program.

## MATERIALS AND METHODS

**Research Design:** The research design adopted for this study was the descriptive survey design used to determine the knowledge, attitude and practice of cervical cancer screening among female students of University of Calabar (UNICAL), Calabar.

**Research Setting:** The setting for this study is University of Calabar. It was founded in the year 1975. It is located in Calabar, the Capital of Cross River State. The site for the study is the Department of Nursing Science. The Department of Nursing Science is under the Faculty of Allied Medical Science and was established on the 12<sup>th</sup> of March, 1994. The Department of Nursing as at 2017/2018 academic session has five hundred and forty eight (548) number of students.

**Target Population:** The target population of the study are the female students in year 3 class, year 4 class and year 5 class in the Department of Nursing Science with a population of 95 students, 100 students and 105 students respectively making it a total of 310 student.

**Sample and Sampling Technique:** The researcher adopted stratified and simple random sampling technique. The stratified random sampling enabled the researcher to stratify the students of UNICAL into three (3) strata: Year 3 (95 students), Year 4 (100 students) and Year 5 (105 students). The researcher went through a register of each of the above mentioned year of study, and from each of the registers, every second (2<sup>nd</sup>) name was picked and served with a copy of the questionnaire. The sample size of 171 using Taro Yamane's sample size estimation.

**Instrument for Data Collection:** A self-developed and structured questionnaire was used to elicit information from the respondents.

**Scoring of Items:** A knowledge score for each of the respondents was obtained by adding up the scores for correct answers over to questions under section B on the questionnaire. A score less than 50 indicates poor knowledge, while a score above 50 indicates good knowledge. For scoring of attitude, a mean score for any responses greater than 2.97 being the total weighted mean score for all questions in section C of the questionnaire indicates favourable attitude

**Reliability of the Instrumentation:** The reliability was done using test-retest method. The tests were correlated using Pearson's Product Moment Coefficient and a reliability coefficient of 0.68 was obtained

**Data Analysis Procedures:** The data collected was analyzed using percentages and frequencies, while the hypothesis was tested using the chi-square distribution.

**Ethical Consideration:** Permission to carry out the study was obtained from the department and the research committee from the institution. Written and verbal permission was obtain from the students who were willing to participate in the study. Confidentiality and anonymity was assured

## DATA ANALYSIS AND RESULT PRESENTATIONS

**Results for Research Questions:** This sections deals with answering of the research questions directing the study. The data are presented in tables using simple percentages.

**Research question one:** What is the level of knowledge of cervical cancer screening services among female students of University of Calabar?

Table 1. Socio-demographic data of the respondents (n=171)

Variables	Frequency	Age Range	Percentage (%)
	89		
	58		
	16		9.36
	8		4.68
Total	171		
Christian	168		98.25
Muslim	-		-
Traditional	3		1.75
	171		100
Single	147		85.96
Married	24		14.04
Divorced	-		-
Total	171		100
Year 3	45		26.32
Year 4	54		31.58
Year 5	72		42.11
Total	171		100

Table 1A. Results of knowledge of cervical cancer screening among female students

Variables	Frequency	
	Yes	No
I have heard of cervical cancer screening	166 (97.08%)	5 (2.92%)
Cervical cancer screening is necessary for early detection and prevention of cervical cancer	159 (92.98%)	12 (7.02%)
Pap's smear cytology and visual inspection of the cervix are forms of cervical screening services	145 (84.80%)	26 (15.20%)
Cervical screening should be done every 3 years	152 (88.89%)	19 (11.11%)
Human papillomavirus and other sexually transmitted diseases accelerates the progression of cervical cancer	124 (72.57%)	47 (27.49%)
Primary prevention of cervical cancer is by life style changes and human papillomavirus vaccination	112 (65.50%)	59 (34.50%)

Table 1A. Summary of respondents knowledge of cervical cancer screening among female students in University of Calabar n-171

Statements	Frequency	Percentage (%)
Good knowledge	143	83.6
Poor knowledge	28	16.3
Total	171	100%

Table 2A. Attitude of students towards cervical cancer screening in UNICAL n-171

ITEMS	SA	A	D	SD	Weighted mean score ( $w\bar{x}$ )	Total weighted mean score $w\bar{x}$
I feel cervical cancer screening is necessary for all female students	100 (58.5)	47 (27.5)	16 (9.4)	8 (4.6)	3.39	
I hate cervical cancer screening because it is unpleasant and embarrassing	26 (15.2)	20 (11.7)	60 (35.1)	65 (38.0)	2.04	2.97
I feel the girl child should be timely vaccinated against human papillomavirus infection before onset of sexual activity.	110 (64.37)	30 (17.5)	20 (11.7)	11 (6.5)	3.39	
I prefer cervical cancer screening because it prevents cancer and provide cure if detected early	70 (40.9)	61 (35.7)	20 (11.7)	20 (11.7)	3.06	

Table 3. Practice of cervical cancer screening among female students in University of Calabar

Statement	Frequency	
	Yes	No
I have had a cervical cancer screening test done on me	25 (14.6%)	146 (85.4%)
I have been vaccinated against human papillomavirus infection	5 (2.9%)	166 (97.1%)
The technique I used for cervical cancer screening test was visual inspection of the cervix with acetic acid.	20 (11.7%)	151 (88.3%)

Table 4. Contingency chi-square analysis showing the association between female students knowledge and attitude towards cervical cancer screening services

Knowledge of cervical cancer screening services	Attitude towards cervical cancer screening services		Total	df	X <sup>2</sup> calculated	X <sup>2</sup> critical
	Favourable	Non-favourable				
Good knowledge	96	47	143	2	0.67	5.991
Poor knowledge	20	8	28			
	19	9	171			
	116	55				

**Table 5. Contingency chi-square analysis showing relationship between year of study and practice of cervical cancer screening**

Year of study	Practice of cervical cancer screening services		Total	df	X <sup>2</sup> calculated	X <sup>2</sup> critical
	Practiced cervical cancer	Not practiced cervical cancer				
3	7(6.6%)	38(38.5%)	45	2	0.058	5.991
4	8(7.9%)	46(46.1%)	54			
5	10(10.5%)	62(61.5%)	72			
Total	25	146	171			

The result in table 2 shows that 166 students (97.08%) said they have heard of cervical cancer screening while 5 students (2.92%) have never heard of cervical cancer screening. 159 students (92.98%) said cervical cancer screening is necessary for early detection and prevention of cervical cancer, while 12 students (7.02%) do not know that cervical cancer early detection and prevention of cervical cancer. Also, 145 students (84.80%) said that pap's smear cytology and visual inspection of the cervix are forms of cervical screening services while 26 students (15.25%) were not aware. Consequently, 152 students (88.89%) said cervical screening should be done every 3 years while 19 student (11.11%) did not attest to it. 124 students (72.51%) said that human papillomavirus diseases accelerates the progression of cervical cancer while 47 students (27.49%) did not. Finally, 112 students (65.50%) said that primary prevention of cervical cancer is by life style changes and human papillomavirus vaccination while 59 students (34.50%) had a negative view. Table 2B shows that 143(83.6%) of female students in Department of Nursing Science, University of Calabar had good knowledge of cervical cancer screening services, while 28(6.4%) of students had poor knowledge of cervical cancer screening services. This calls for intensive awareness campaign services on cervical cancer screening services for female nursing students in University of Calabar.

**Research question two:** What is the attitude of students towards cervical cancer screening in University of Calabar. To answer this questions, items 11-14 on the section c of the questionnaire was used. Table 2A shows respondents options on attitude of female students in University of Calabar towards cervical cancer screening. 100 (58.5%) and 47 (27.8%) respondents strongly agreed and agreed that they feel that cervical cancer screening is necessary in University of Calabar, while 16(9.4%) and 8(4.6%) respondents disagreed and strongly disagreed to that option. Similarly, 26(15.2%) and 20(11.7%) respondents strongly agreed and agreed that they hate cervical cancer screening services because it is unpleasant and embarrassing while 60(35.1%) and 65 (38.0%) disagreed and strongly disagreed to that option. 110 (64.3%) and 30(17.5%) respondents strongly agreed and agreed that they feel that the child should timely be vaccinated against human papillomavirus infections before onset of sexual activities while 20(11.7%) and 11(6.5%) disagreed and strongly disagreed. On preference to cervical cancer screening services for preventing and treatment of cancers if detected early, 70(40.9%) and 61(35.7%) respondents strongly agreed and agreed while 20 (11.7%) disagreed and 20(11.7%) respondents strongly disagreed to the option.

**Summary of female students attitude towards cervical screening services in University of Calabar:** From the result in Table 3, it revealed that the respondents exhibited positive attitude towards cervical cancer screening services, such that; 3 out of 4 items on the questionnaire had weighted mean scores of 3.40, 3.40 and 3.06 which was greater than the overall mean score of (2.97).

**Research question three:** What are the practices of screening services among female students in the University of Calabar?

Table 3 shows that out of the 171 students used for the study , only 25(14.6%) respondents have had cervical cancer screening services done on them while 146(85.4%) have not done. Out of the 25 students that have had cervical cancer screening test, 5(2.9%) were vaccinated against human papillomavirus cervical cancer screening test done with visual inspection of the cervix with acetic acid.

The percentage of female students that have not practiced cancer screening test in University of Calabar is poor. This calls for awareness creation and health education to be carried out by health care providers on cervical cancer screening services for female students in University of Calabar, Calabar

#### HYPOTHESIS TESTING

**H<sub>0</sub>1:** There is no significant relationship between level of knowledge and attitude towards cervical cancer screening services among female students in University of Calabar

Not significant at 0.05 level of significance,  $\chi^2$  calculated 0.67,  $\chi^2$  critical 5.991, df = 2

Decision rule

If  $\chi^2_{cal} > \chi^2_{tab}$ , reject  $H_0$ ; otherwise accept

The result from Table 4 above showed a non-statistical influence of knowledge on attitude towards cervical cancer screening services among female students in University of Calabar, Calabar. When the chi-square calculated of 0.67 was lesser than then  $\chi^2$  tabulated of 5.991 with 2 degree of freedom needed at 0.05 level of significance. With this result, the null hypothesis was upheld meaning, there is no significant influence of knowledge of cervical cancer screening and attitude towards cervical cancer screening among female students in University of Calabar.

#### HYPOTHESIS TWO

There is no significant relationship between the year of study and the students practice of cervical cancer screening in University of Calabar Thus, from the results obtained in table 5 it showed that the  $\chi^2$ -calculated value is approximately 0.058, not significant at 0.05 level of significance with 2 degree of freedom,  $\chi^2$  critical is 5.991.

The result in table 5 revealed that the  $\chi^2$  critical of 5.991 with 2 degree of freedom was greater than the chi-square  $\chi^2$  calculated of 0.058 at 0.05 level of significance. With this result, the null hypothesis was upheld, meaning, there is no significant association between the year of study and practice of cervical cancer screening services among female students in University of Calabar, Calabar

## RESULTS AND DISCUSSION

**Research question one:** The study revealed that majority of the respondents had good knowledge of cervical cancer screening. This result is in line with the view of Adefuna (2012) which revealed, large number of their respondents knew that cervical cancer could be detected early by a screening test. The result is also in line with the view of Ofori et al (2013) who stated that knowledge of cervical cancer screening is high, but the respondents knowledge of cervical cancer screening may not translate into the utilization of screening services for a variety of reasons. The findings in this study is in contrast with that of Ojong, Mgbekem and Uka (2016) which showed that only few persons knew of the risk factor, while majority of respondents considered themselves as insufficiently informed about cervical cancer screening.

**Research question two:** The findings from the study revealed that most students had positive attitude towards cervical cancer screening. The high rate of positive attitude is attributed to educational background of the respondents. The result of this study is in contrast to other works sited in this study. According to Maaita and Barakat (2012) it revealed that most participants said that the reasons for not participating in cervical cancer screening were fear, embarrassment and belief that it was unnecessary

**Research question three:** This study revealed that only few respondents have ever practiced cervical cancer screening. This showed that only few students have had a cervical cancer screening test done. This result is in line with view of Urasa and Dary (2011) which revealed that only a few participants have had a cervical cancer screening. The finding is also in conformity with the view of Gharoro and Ikeanyi(2012), whose study was carried out in Nigeria among female health workers. It revealed that their practice of cervical cancer screening was very low and that there was a wide variation between their personal knowledge and uptake of cervical cancer screening. The study is in contrast to that of the findings of the Australian Institute of health report, which revealed that majority of the respondents have had a PAP smear test done on them.

## HYPOTHESIS TESTING

The findings in this study showed  $\chi^2$  calculated to be lesser than  $\chi^2$  critical. Thus, the null hypothesis of no significant relationship between knowledge and attitude towards cervical cancer is thereby accepted. This means that the knowledge of students does not necessarily have influence on their attitude. This result is in line with the view of Hakana, (2011) where they said knowledge does not translate into positive attitude because some factors like cultural traditions and beliefs must be supplemented positively by new knowledge. The findings in this study showed  $\chi^2$ -calculated to be lesser than  $\chi^2$  critical. Thus, the null hypothesis of no significant relationship between the year of study and practice of cervical cancer screening was thereby accepted. This can be attributed to the fact that there is insufficient facility for the provision of these services, and also the cost of these services are often high. This is in line with the view of Ezeriogbo *et al.*, (2012) whose work on knowledge, attitude and practice of cervical cancer screening among secondary school teacher in Enugu state showed a non-significant relationship between the teacher's year of study and their practice of cervical cancer screening.

## Conclusion

Based on researcher findings, it can be concluded that; female students in the University have adequate knowledge about cervical cancer, its screening and the risk factors associated with the development of cervical cancer. It revealed a favourable attitude towards screening services but a low level of practice among the students. These findings suggest a need for continuous cancer awareness campaigns on screening for cervical cancer and also the national health insurance scheme should be strengthened to increase access of the entire women folk to screening, services women folk to screening, services in health centres as this will help to reduce the burden of cervical cancer in the country.

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